

Equine Veterinarians Australia A Special Interest Group of the Australian Veterinary Association Pty Ltd. ABN 63 008 522 852

CERTIFICATE OF EXAMINATION FOR PREGNANCY

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EQUINE			
VETERINARIANS			
AUSTRALIA			

Animal presented as:	5/01-	Q.	ncen			AUSTRALIA		
(If unnamed) Sire:	nslan		Dam:					
Breed:								
Microchip No: 985102002728 6202			Colour: Bar	1	Age/DOB:	ζ		
A 2001								
Owner (if known):		Addre	ess (ii knowit):			1		
Person requesting examination:		Place	of examination:	Bell	Vien	Park.		
Rear aspect forelegs L R			muzzle R	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	L R			
THE EXAMINATION Date Rectal Examination Ultrasonographic Examination Positive Negative Was there evidence of twins?								
Date Rectal Examination	Oltrasollographic Exam	mation	T OSIGNE	Neguci		es No		
7/6/24								
					Y	res No		
					Y	es No		
Э.	of the second		n n 1		,	res No		
Comments:			-					
	181		-111					
					1			
	P.J							
3								
	Q.							
Notes: 1) It is not possible to detect multip 2) To obtain insurance for the pregr	nancy, these tests mus	st be c			om the last date	of service.		
This is to certify that I performed	eu the described tes	LS UN	Signed:	1				
7/6/24		I IV						
Name (please print):			Place stamp/write	41749				

N8261

44486487 VPB NO:

Contact Number:

AVA No:

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