



Equine Veterinarians Australia

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



CERTIFICATE OF EXAMINATION FOR MORTALITY INSURANCE PURPOSES

Animal presented as: Tamhauser

(If unnamed) Sire: _____ Dam: _____

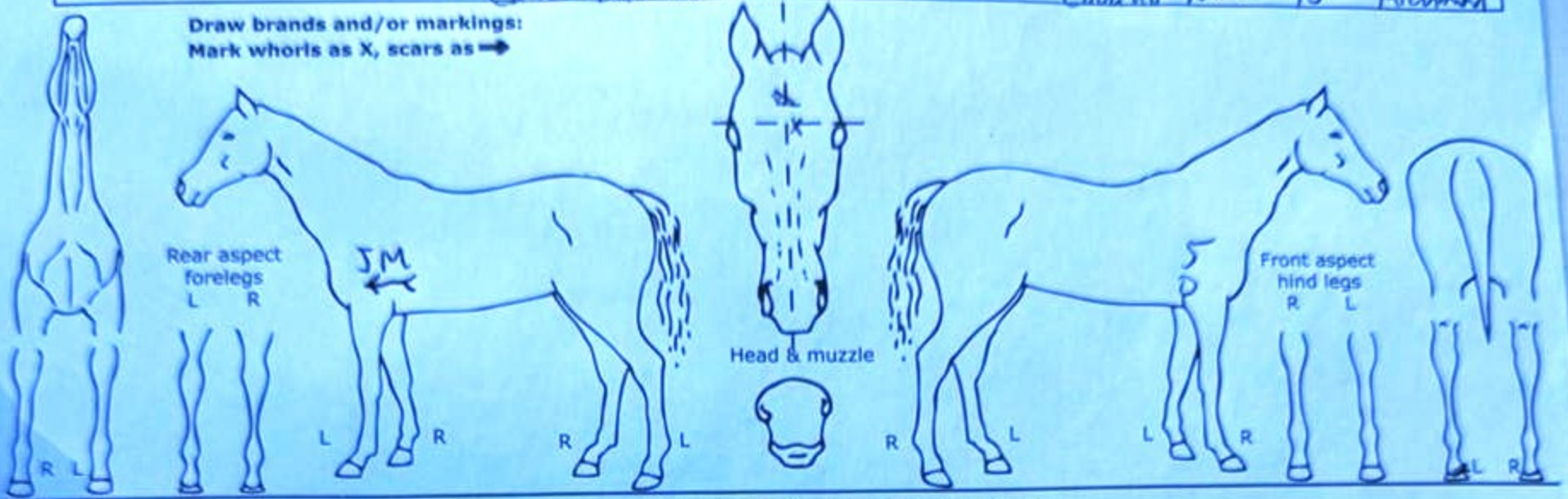
Colour: Bay Breed: TB Sex: gelding

Microchip No: 9851000 | 2192821 Age/DOB: 4yo

Owner (if known): Blueblood TBs Address (if known): _____

Person requesting examination: Cate Lavender Place of examination: Cravalla Park Nth Richmond

Draw brands and/or markings:
Mark whorls as X, scars as →



THE EXAMINATION

Does your practice normally attend this property?

Has your practice previously attended this horse?

Never Occasionally Regularly

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Yes No

<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pulse Normal?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Respiration normal?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Temperature normal?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Eyes clinically normal?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Heart auscultated and found normal?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any indication of infection or disease?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any physical evidence of laminitis?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is the horse lame at the walk or trot?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there evidence of ataxia?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there any obvious evidence of previous abdominal surgery?

Broodmares

<input type="checkbox"/>	<input type="checkbox"/>	Is she reported in foal?
<input type="checkbox"/>	<input type="checkbox"/>	Is there any external condition detrimental to satisfactory breeding?
<input type="checkbox"/>	<input type="checkbox"/>	Has an internal examination of the reproductive organs been conducted? (If so attach a separate report of examinations conducted, dates & findings)

Stallions

<input type="checkbox"/>	<input type="checkbox"/>	Are the external genitalia palpably and visibly normal?
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Please give your opinion below as to the significance of any abnormalities mentioned above (add additional sheets if needed):

I have today performed a clinical examination on this horse in accordance with EVA Insurance guidelines and declare that to the best of my professional knowledge the horse is clinically normal and in a satisfactory condition, except where noted.

Date: 17/2/25

Name (please print): Cristian Clark

Contact Number: 0295 779611

AVA No: _____ VPB No: N5861

Signed: [Signature]

Place stamp/write address here: **19832**

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