

CERTIFICATION FOR MAIDEN, BARREN AND REPEAT BREEDING MARES

Must accompany mare with passport, and be sent to the stallion farm before covering. A copy to be sent to heather@tba.co.za

Updated September 2024



THE THOROUGHBRED BREEDERS'
ASSOCIATION OF SOUTH AFRICA

PART A: MARE IDENTIFICATION (to be completed by mare owner/agent)

Name of mare: _____

Microchip number: _____

Stud of origin: _____

Name of owner: _____

Contact No: _____ Email: _____

Mare classification (tick appropriate box below)

Maiden ☐ Barren ☐

If mare was barren in previous or current season (tick appropriate box below)

Not bred ☐ Did not conceive ☐ Aborted ☐ Foal stillborn ☐

Name (please print) _____

Name of mare owner/agent

Signature _____

PART B: DOURINE TEST RESULTS FOR MAIDEN AND BARREN MARES

To be completed by the registered veterinarian upon receipt of test result reports.

Annual negative dourine serology report number: _____

Name (please print) _____

Signature _____

PRACTICE STAMP

PART C: COMPULSORY

UTERINE CYTOLOGY & BACTERIOLOGICAL EXAMINATION FOR BARREN AND REPEAT BREEDING MARES (RETURNING FOR THE 3RD TIME)

To be completed by the examining registered veterinarian

Date of examination ____/____/20__

Place of examination: _____

The identity of the horse in Part A was confirmed: Yes ☐

Mare reproductive status at examination (tick appropriate box below)

Oestrus ☐ Dioestrus ☐ Anoestrus ☐

Ultrasound examination of reproductive tract: Yes ☐ No ☐

If yes, intra-luminal uterine fluid visible: Yes ☐ No ☐

Uterine swab from the lumen: Guarded ☐ Unguarded ☐

Uterine Cytology: **COMPULSORY** Yes ☐

If yes, neutrophils: Present ☐ Absent ☐

Microbiological cultures - OPTIONAL as per requirement of stallion owner (tick appropriate box below):

LABORATORY: _____

Not done/negative cytology ☐ Contaminants only ☐

No growth ☐ Non-venereal pathogens ☐

Name of vet: _____

Signature _____

PRACTICE STAMP