
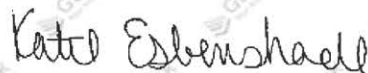


FORM SERIAL NUMBER
EIA-20876541



GVL - EQUINE INFECTIOUS ANEMIA LABORATORY TEST					
1. LAB/ACCESSION NUMBER B2323343		2. DATE BLOOD DRAWN 2023-09-28		3. TEST REQUESTED BY VET ELISA	
4. REASON FOR TESTING Change of ownership / sale		5. CURRENT HOME PREMISES OF EQUINE: RANCH / FARM / STABLE / MARKET OSU Equine Center 3658 Kays Ave Dublin, OH 43017 Phone: 740-504-4164 PIN/LID: /		7. NAME & ADDRESS OF OWNER OSU Equine Center 3658 Kays Ave Dublin, OH 43017 Phone: 740-504-4164 PIN/LID: /	
6. COUNTY OF CURRENT HOME PREMISES OF EQUINE Franklin		8. NAME & ADDRESS OF VETERINARIAN Justin Kieffer DVM Justin Kieffer 2027 Coffey Rd Columbus, OH 43210 Phone:		VETERINARIAN NATIONAL ACCREDITATION NUMBER 002420	
CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN I certify I am a category II federally accredited veterinarian, authorized, in the state where the sample was obtained, by me, from the animal described below.					
SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN  Justin Kieffer 2023-10-02 07:35:52 EDT					
HORSE					
9. TUBE NUMBER 106415059-0		10. TAG/TATTOO/BRAND NUMBER None		11. REGISTERED NAME Reese	
12. COLOR / COAT OR HAIR COLOR(S) Brown		13. BREED OR SPECIES Quarter Horse		14. AGE OR DOB 2021-10-02	
15. GENDER Mare		16. MICROCHIP, BREED, OR REGISTRATION NUMBER None		17. HEAD: Star	
18. NECK AND BODY: No marking		19. LEFT FORELIMB: Coronet		20. RIGHT FORELIMB: No marking	
21. LEFT HINDLIMB: No marking		22. RIGHT HINDLIMB: Coronet		23. LABORATORY Ohio Dept. of Ag.-Animal Disease Diagnostic Laboratory 8995 E. Main Street, Building 6 Reynoldsburg, OH 43068 Phone: 614-728-6220	
24. DATE SAMPLE RECEIVED 2023-10-03		25. DATE RESULTS REPORTED 2023-10-04		26. OFFICIAL RESULT Negative	
27. TEST TYPE USED ELISA					
28. LABORATORY REMARKS					
29. SIGNATURE OF NVSL APPROVED EIA TECHNICIAN  Katie Esbenshade 2023-10-04 07:52:33 EDT				30. INTERIM RESULT REFERRED FOR CONFIRMATION No	

2023 Equine Health Record

Horse's Name _____ Barn Name Reese

DOB 3/30/21 Breed QH Registration # _____

Color / Markings Seal / star

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Coggins									9/28			
Rabies				4/28 R								
Tetanus				L								
West Nile												
EEE / WEE												
Flu												
Rhino			/	2								
Strangles												
Fecal Egg Count					5/31 381				0/26 456			
Deworming						6/5 I					11/8 I	
Dental Care									9/28			
Farrier	1/26 T		3/23 T		5/18 7		7/24 T		9/25 F		11/0 T	
Weight	916	918	934	950	996	1025	1055	952	1040	1045		
BCS	5	5	5	5	5	5	5	5	5	5		

Deworming Codes: I: Ivermectin P: Pyrantel B: Benzimidazole Farrier Codes: T: Trim FS: Front Shoes Only S: Shoes

Date	Diagnosis	Treatment	DVM
9/28/23		Wolf tooth extraction	Walker

Bart Horses
Weanlings