



HORSE								
Name:				Birth Date:				
Color:			Picture Attached	Sex:				
OWNER:								
Cell:		Work:	Home:					
Address:								
City:			State:	Zip:				
Alternate Contact:								
VETERINARIAN								
Name:			After Hours:					
Phone:			Phone:					
OTHER IMPORTANT	FOLKS							
Farrier:			Phone:					
				Phone:				
VITAL SIGNS: TEMP	PERATURE, PULSE & RESPIR	ATION (TPR)						
	Observe and collect	vital signs over time to know	your horse's 'normal' range	9.				
Date Observed								
Temperature								
Pulse (heart rate)								
Respiration (TPR)								
The temperature range for most healthy adult horses is 99-101°F. The pulse of a healthy adult horse at rest should be 28-44 beats/minute, and the respiration rate should be 10-24 breaths/minute.								
BODY CONDITION	lealthy adult horse at rest shol	uid be 28-44 beats/minute, an	id the respiration rate shoul	a de 10-24 dreatns/minute.				
Date Observed								
Height								
Weight								
Note			Ó					
IMPORTANT NOTES	(ALLERGIES, BEHAVIOR ISS	UES, SPECIAL NOTES, ETC.)						

CORE VACCINATIONS									
Core vaccines protect from diseases that are endemic to a region, those with potential public health significance, required by law, virulent/highly infectious, and/or those posing a risk of severe disease. ¹									
Rabies		E	EE/WEE*						
Tetanus		W	/est Nile Viru	IS					
* (EEE) Eastern Equine Encephalomyelitis: (WEE) Western Equine Encephalomyelities									
RISK-BASED VACCINATIONS									
These are vaccinations included in a vaccination program after the performance of a risk-benefit analysis. The use of risk-based vaccinations may vary regionally, from population to population within an area, or between individual horses within a given population. Disease risk may not be readily identified by laypersons; it is important to consult a veterinarian when developing a vaccination program. ¹									
Anthrax	Potomac Hors		rse Fever						
Botulism	Rotaviral Diarrhea		arrhea						
Equine Influenza			Strangles						
Equine Viral Arteritis			Equine Herp (Rhinopneumoni	es Virus tis)					
TREATMENTS • TESTS • PROCEDURES • MEDICATIONS									
ITEM	Date/Notes								
Coggins Test									
DEWORMING RECORD									
Date									
Product Used									
Notes									
Date									
Product Used									
Notes									
FECAL EXAM:	Date	Results		Date		Results			
DENTAL CARE									
Date/Notes									
Date/Notes									
FEEDING/NUTRITION NOTES									

¹ For more information on Vaccinations Guidelines visit AAEP.org *(American Association of Equine Practitioners)*