



# HORSE HEALTH RECORD

Name of Horse \_\_\_\_\_ Reg. # \_\_\_\_\_

Breed: \_\_\_\_\_ Sex: \_\_\_\_\_ Height: \_\_\_\_\_

Foaling Date: \_\_\_\_\_ Weight: \_\_\_\_\_

Color and Markings: \_\_\_\_\_

Sire: \_\_\_\_\_ Dam: \_\_\_\_\_

Owner \_\_\_\_\_

## FEEDING PROGRAM

Address: \_\_\_\_\_ Telephone \_\_\_\_\_

PRODUCT	DAILY AMOUNT	FREQUENCY	TIMES

## IMMUNIZATION RECORD

	<u>DATE</u>	<u>VET</u>	<u>VACCINE</u>
Tetanus Toxioid 2 doses 6 weeks apart Booster yearly	_____	_____	_____
Rabies Initial dose and yearly Booster	_____	_____	_____
Equine Influenza 2 doses 6 weeks apart Booster every 6 months	_____	_____	_____
Equine Viral Rhinopneumonitis 2 doses 2 to 4 weeks apart Booster yearly	_____	_____	_____
Encephalomyelitis (E & W strains) 2 New shots yearly	_____	_____	_____
Encephalomyelitis (VEE) Veterinarians advice	_____	_____	_____
Coggins Test (EIA)	_____	_____	_____

RESULT \_\_\_\_\_ STATE LAB # \_\_\_\_\_



**WORM CONTROL:** For a preventative program, horses should be wormed – at least – every three months.

PRODUCT USED

DATE

BY WHOM

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**DENTAL CARE:** Yearly examination.

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**LABORATORY WORK:**

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**PHYSICAL EXAM AND MEDICAL RECORD:**

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**BLACKSMITH LOG:** (Usually every 6-8 weeks)

DATE

TYPE OF WORK DONE

BLACKSMITH

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