



Important Information for Broodmares

SUNRISE EQUINE VETERINARY SERVICES



Important Dates to Schedule Pregnancy Ultrasounds (Post Breeding)

- 14 - 16 days: Confirm Pregnancy & Twin Check
- 30 - 35 days: Heartbeat Check
- 45 - 60 days: Confirm ongoing pregnancy
- After 60 days: Ultrasounds can be performed, however the fetus may not be easily visualized depending on it's size and where it is sitting within the mares abdomen. The caudal uterus containing placental fluid and membranes can be visualized to confirm pregnancy

Vaccination Recommendations

Vaccine	Timing	Reason
EHV (Pneumobort)	5,7,9 months of gestation	May protect against viral abortion
Core Vaccinations (Tetanus, West Nile Virus, EEE/WEE, Rabies)	Annual revaccination and administered 4 - 6 weeks prior to foaling	Enhances passive immunity for the foal
Risk Based Vaccinations <i>Pregnancy Risk</i> (Potomac Horse Fever, Leptospirosis)	Annual revaccination and administered 4 - 6 weeks prior to foaling, <i>If previously unvaccinated for Lepto, 2 doses needed</i>	May protect against placentitis and abortion
Risk Based Vaccinations <i>Respiratory Risk</i> (Equine Influenza, Equine Herpes Virus [EHV-1/4])	Annual revaccination and administered 4 - 6 weeks prior to foaling, <i>Broodmares with ongoing risk of exposure should be bolstered every 6 months</i>	Enhances passive immunity for the foal
Modified Live Vaccinations (Intranasal Strangles or Intranasal Flu)	Should NOT be given during pregnancy	Risk of placental/fetal infection or abortion

Deworming Recommendations

- Deworm as normal for mature horses (typically 1-2 treatments per year for low shedders)
- Use fecal egg counts to guide parasite burden and treatment frequency, high shedders may need extra treatments

Vitamin E Supplementation

- Vitamin E supplementation during pregnancy improves passive transfer of immunity from mare to foal and helps to prevent neuroaxonal dystrophy (NAD)
- 2000-3000 IU/ day is recommended daily (natural form, water soluble)

Medications and Plants to Avoid

- Avoid mustard plants in final trimester to prevent congenital hypothyroidism
- Avoid endophyte containing fescue to prevent placental issues and poor lactation in the last 60 days
- Avoid administration of steroids and misoprostol to prevent abortions
- In older mares with PPID (Cushing's Disease), stop Prascend 30 days prior to foaling to prevent poor milk development and prolonged gestation
- Reinitiate Prascend treatment 30 days post foaling, or for a mare that is poorly controlled without medication reinitiate sooner and investigate alternative sources of nutrition for the foal

Nutrition and Exercise Considerations

- Supplement mares forage with a ration balancer. Read product label for Broodmare feeding recommendations
- Increasing caloric intake is usually unnecessary until the 3rd trimester and during lactation. There are feeds made for mare and foal growth that can be used at that time instead of the ration balancer
- Light exercise throughout pregnancy is encouraged, but strenuous riding should cease by the 3rd trimester



Important Information for Foaling

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Normal Vital Signs - Mare

Temperature: 99 - 101.5 F

Heart Rate: 28 - 44 beats per minute

Respiratory Rate: 8 - 16 breaths per minute

Normal Vital Signs - Foal

Temperature: 99 - 102 F

Heart Rate: 70 - 120 beats per minute

Respiratory Rate: 20 - 40 breaths per minute

Stages of Labor

Stage 1 (Preparation) 1 - 4 hours

Symptoms may mimic colic symptoms: Restlessness, pacing, lying down/ getting up, sweating, tail swishing

Stage 2 (Delivery) 10 - 30 minutes

White/clear amniotic sac should be noted, followed by 2 front feet (hooves facing down) and nose. The foal is usually birthed within 30 minutes of the mare's water breaking

Stage 3 (Passage of Placenta) within 3 hours

When to Call for Emergency

Call if mare is in distress for over 1 - 2 hours with no progression

Call if a thick, red membrane is seen at the vulva, if the process has not progressed within 10 minutes of the mares water breaking, or if hooves are facing up or other body parts are presented first

Call if placenta has not passed within 3 hours or is passed incomplete

The 1 - 2 - 3 Rule After Foaling

- 1 hour after birth, foal should stand
- 2 hours after birth, foal should nurse
- 3 hours after birth, mare passes placenta

When to Call for Emergency

Call if foal is weak, dull, or unable to rise on own

Call if foal is unable to nurse, mare doesn't allow nursing, or concerns arise with udder or milk production

Call if placenta has not passed within 3 hours or is passed incomplete

After Foaling Checklist

- Observe nursing behavior and swallowing from foal
- Dip navel with povidone iodine (2%) or dilute chlorhexadine (2%) 2-3 times in the first 24 hours. Dilution should be 1:4
- Monitor mare for bleeding or discomfort
- Save placenta for vet exam (should be intact)
- Watch for foal to pass meconium, monitor for any tail swishing or straining
- Watch for foal to urinate, monitor for urine coming from umbilicus

Mare and Foal Exams

- Mare, foal, and placenta should be examined within 48 hours of foaling
- Foals are born without immunity and depend on colostrum (the first milk) for antibodies
- Immunoglobulin (IgG) testing is performed 12 - 24 hours AFTER the foal begins to nurse. If low, this can be life threatening

Emergency Contact Information

Office Hours: 8am - 4:30pm (Monday - Friday)

In the event of an emergency or to schedule your mare and foal exams, CALL 651-583-2162.

After hours your calls will be directed to the Emergency Doctor. Please leave a voicemail if the call is not picked up immediately.