

# EMERGENCY FIRST AID FOR HORSES



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in your community today.*



## BE PREPARED TO DEAL WITH AN EQUINE EMERGENCY

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**Emergency  
Response  
Team**





# EQUINE FIRST AID



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**As a horse owner, you must know how to recognize problems, respond promptly and take appropriate action while waiting for the veterinarian to arrive.**



# TYPES OF EMERGENCIES



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- Colic
- Choke
- Lacerations
- Acute Lameness
- Eye Injuries
- Allergic Reactions
- Foaling Complications





# RECOGNIZE SIGNS OF DISTRESS



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- Decreased appetite
- Lethargy
- Getting up and down or laying down longer than normal
- Single animal off by itself
- Sudden lameness
- Purple or red gum color
- Squinting, tearing or holding the eye closed
- Fever (greater than 102° F)





# PLAN AHEAD



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## Keep phone numbers handy

- Your veterinarian and their after hours information
- Your equine insurance company
- A friend/neighbor who can help you





# STAY SAFE!



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Horses can be very dangerous when they are injured or panicked!





# TRANSPORT



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- If you don't own a trailer, make arrangements ahead of time to borrow one
- Know where the nearest veterinary clinic is located and how to get there
- Teach your horse how to load *before* the emergency occurs





# FIRST AID KIT



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- Gauze pads
- Roll cotton
- Brown gauze
- Adhesive wraps
  - Leg wraps
  - Scissors
  - White tape
  - Duct tape
- Stethoscope
- Thermometer
  - Hoof pick
  - Eye wash
- Antiseptic solution
  - Latex gloves
- Flashlight and extra batteries



# KNOW WHAT'S NORMAL



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- Vital signs
- Attitude
- Appetite
- Manure production



**This will make it easier to recognize a problem and relay the information to your veterinarian.**



# BASIC EXAM



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Take the time to gather vital information to relay to your veterinarian such as:



- Temperature
  - Heart rate
- Respiratory rate
- Mucous membrane color
  - Capillary refill time
  - Gut sounds
  - Skin tent
- Attitude and appetite



# RECTAL TEMPERATURE



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Normal temperature for a horse is **99.5 to 101.5°** Fahrenheit (33.3 to 38.3° Clesius)





# HEART RATE



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Normal resting heart rate is  
28-44 bpm (beats per minute)



Transverse facial artery



Left side of the chest



# RESPIRATORY RATE



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Nostril flare

Stethoscope



Normal respiratory rate is 12-16 bpm  
(breaths per minute)



# MUCOUS MEMBRANE COLOR & CAPILLARY REFILL TIME



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**CRT is < 2 seconds**

The color of the gums should be light pink and they should be moist to the touch





# GUT SOUNDS



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- Four quadrants – should hear sounds in all four
- Increased or decreased may indicate a problem
- Know your horse's normal sounds!



# HYDRATION



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Estimate hydration status with the skin pinch test





# APPETITE AND ATTITUDE



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**Colic**



# SIGNS OF COLIC



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# WHAT IS COLIC?



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- Any cause of abdominal pain
- Gastrointestinal
  - Most common
- Other body system
  - Respiratory
  - Urinary
  - Reproductive
  - Musculoskeletal
  - Nervous
  - Cardiovascular





# WHAT TO DO?



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- Call the vet as soon as you suspect colic
  - Can progress quickly
- Perform a brief exam — IF it's safe
  - Heart rate
  - Gut sounds
  - Gum color



# WHAT TO DO???



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- **Things to tell the vet:**
  - Changes in feed or routine
  - Quantity and consistency of recent manure
  - Medical info – deworming, vaccines, pregnancy
- **Walk your horse**
  - Try to keep from going down, rolling
  - Until the vet arrives
- **Do not give any medication unless your vet specifically instructs you to – can mask signs**





# TRIVIA QUESTION



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Can horses regurgitate???  
(ie. vomit)

No! Horses *cannot* regurgitate  
With certain conditions the  
stomach may become  
distended and can rupture  
if not treated.





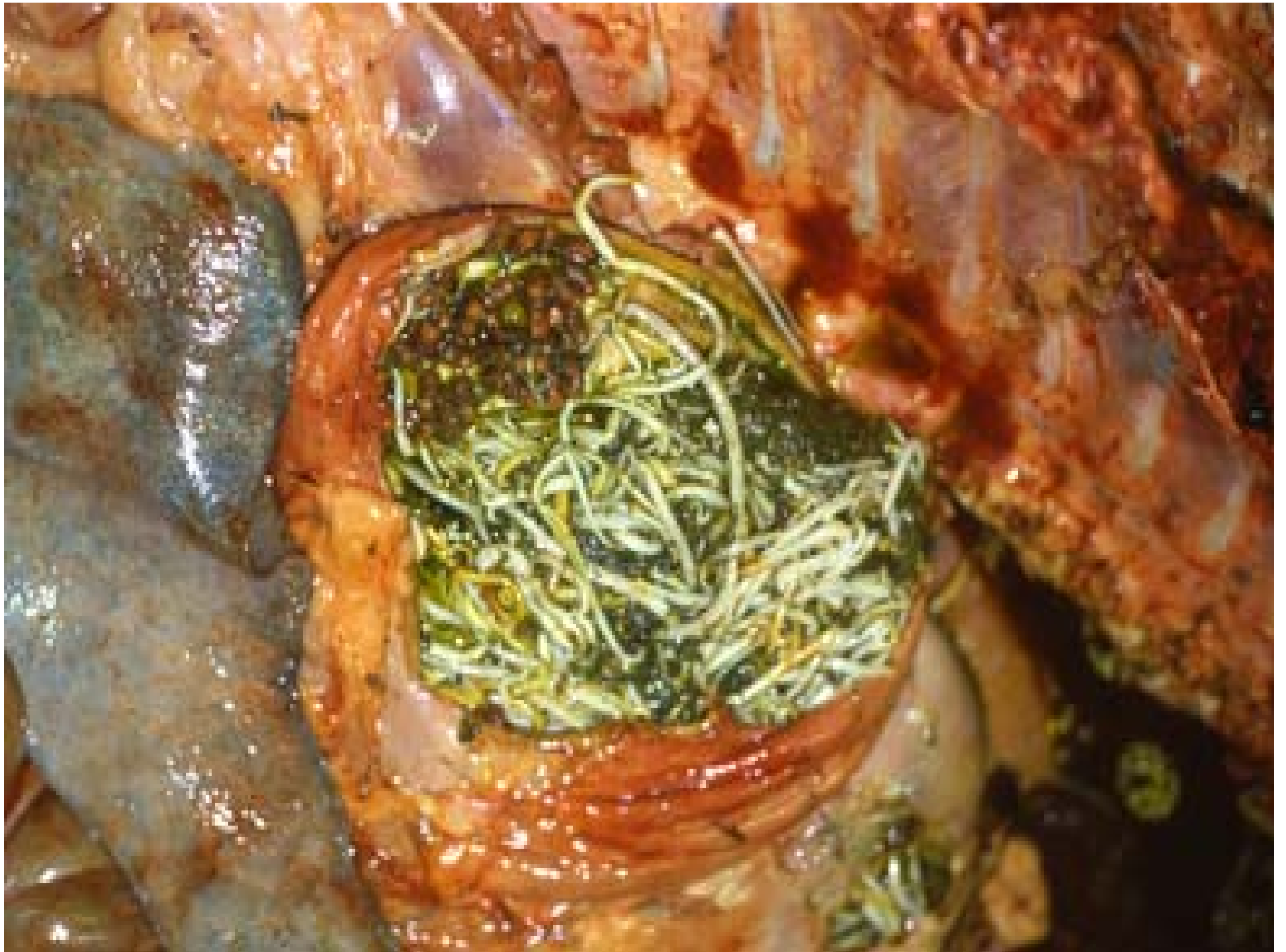
# COLIC TREATMENT

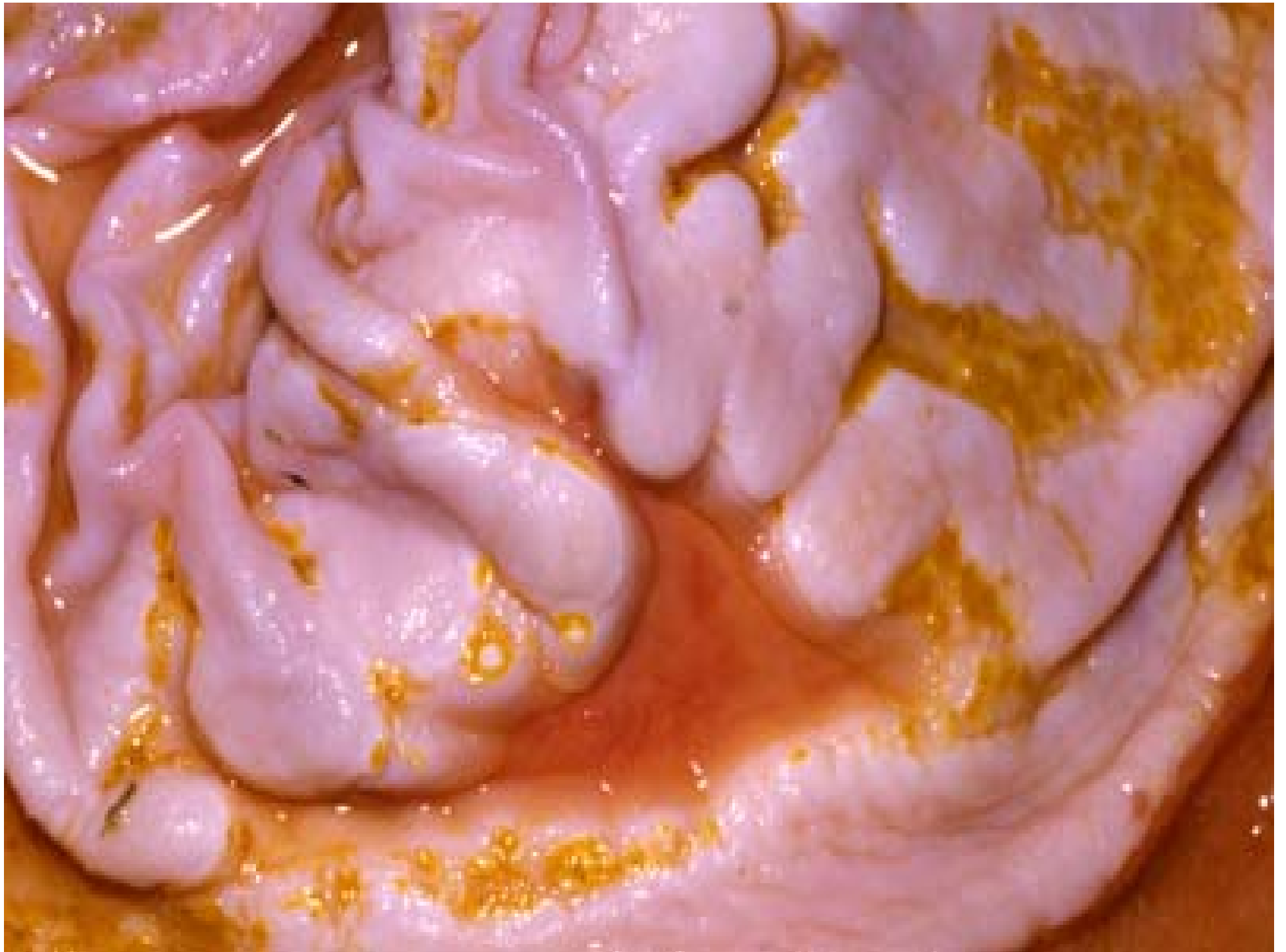


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- Physical exam
- Pass a nasogastric tube
  - Relieve fluid and gas distention to prevent rupture
  - Give fluids, laxatives, electrolytes
- Rectal exam
  - Distention, displacement, impactions
- Abdominocentesis
- Bloodwork















# ESOPHAGEAL OBSTRUCTION aka "CHOKE"





# SIGNS OF CHOKE



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- Coughing and retching
- Extending the neck
- Large amounts of nasal discharge containing food and saliva
- May be able to feel the obstruction





## FUN FACT



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[horses-photos.org](http://horses-photos.org)

Horses are obligate nasal breathers – they have to breathe through their nose, so even when they are choking they can breathe.

(Choke is still an emergency though!)



# WHAT SHOULD I DO?



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- Call your veterinarian immediately!
- If left untreated can lead to
  - Aspiration pneumonia
  - Rupture of the esophagus



# UNTIL THE VET ARRIVES...



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- Remove all food and water
- Keep the horse calm
- Try to keep his head lowered
- Sometimes obstruction will pass on its own





# Wounds & Bleeding



## Wounds that need immediate veterinary attention



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- Excessive bleeding
- Puncture wounds
- Deep lacerations
- Wounds at or near joints or tendons
- Foreign body penetrations
- Severely contaminated wounds





# BLEEDING



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- Blood squirting or flowing in a steady stream from a wound needs to be controlled.
- Hold a sterile pad or clean towel to the wound and apply steady, firm pressure.
- Apply a pressure bandage.





# FOREIGN BODY PENETRATIONS



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- If possible, **LEAVE** impaled objects in place!
- Try to stabilize the penetrating object
- Removing the object may cause further damage or bleeding





# “STREET NAIL”



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A close-up photograph of a horse's eye, showing the dark iris and the surrounding skin. The horse's coat is a mix of grey and white, and its mane is visible on the right side. The text "EYE INJURIES" is overlaid in the bottom left corner.

**EYE  
INJURIES**



# SIGN OF AN EYE PROBLEM



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An eye injury may be indicated by any of the following:



- Excess tear production
- Eye looks cloudy
- Mucous discharge
- Holding the eye closed
- Light sensitivity
- Swelling around the eye  
or eyelids
- Laceration of the eyelid





COURTESY UC DAVIS CEH THE HORSE REPORT/THEHORSE.com



# WHAT TO DO???



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- Call your vet!
- Do NOT attempt to treat an eye injury or instill any medication
- Wait for your veterinarian
- Try to prevent the horse from rubbing the eye



# SUDDEN LAMENESS





# CAUSES OF LAMENESS



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- Hoof Abscess

*Most common cause!*



- Fractures





# CAUSES OF LAMENESS



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- Laminitis (founder)



- Tendon Injuries





# TRIVIA QUESTION



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What is this tool called and what is it used for?



A hoof tester, to see where the foot is sore.



08/15/20

COURTESY AAEP PROCEEDINGS



COURTESY DR. STEPHEN O'GRADY/THEHORSE.com



# ALLERGIC REACTIONS

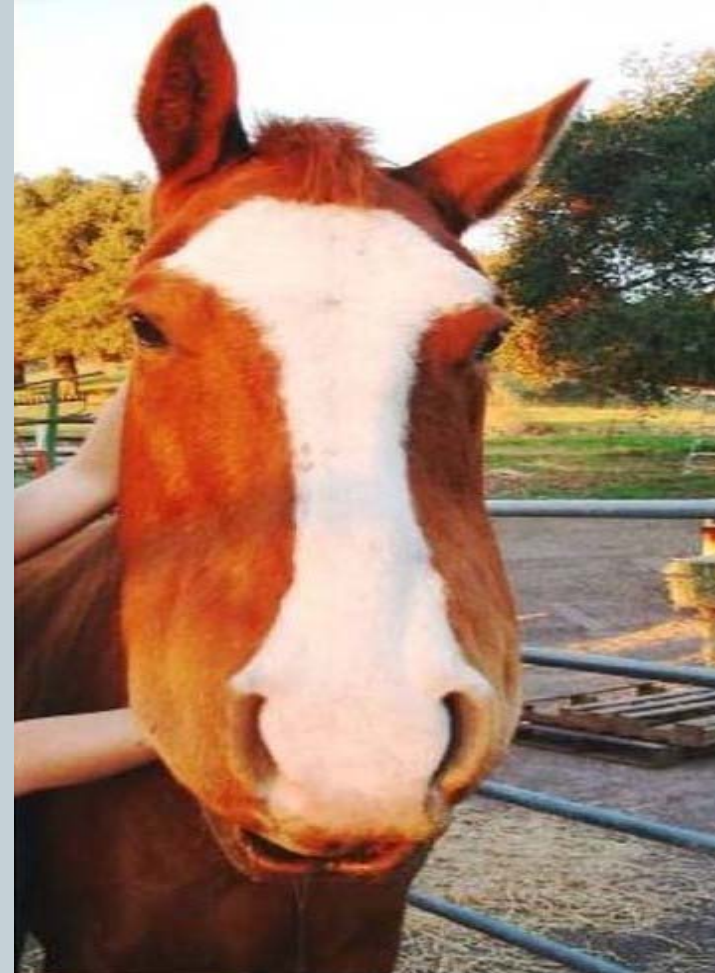


# CAUSES & SYMPTOMS



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- **Caused by**
  - Drug reaction
  - Insects
  - Bee sting
  - Snake bite
- **Symptoms**
  - Swelling of face, muzzle or throat
  - Noisy and/or labored breathing
  - Hives
  - Itchiness



# FOALING EMERGENCIES





# FOALING



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- Problems are rare, but usually serious
- Ideally the mare should be attended when she foals so problems can be identified quickly





# STAGES OF FOALING



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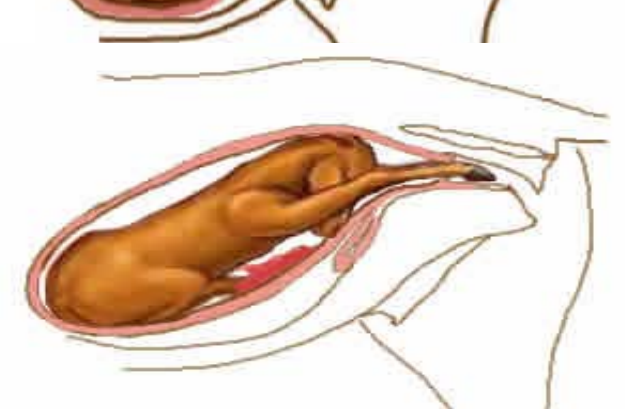
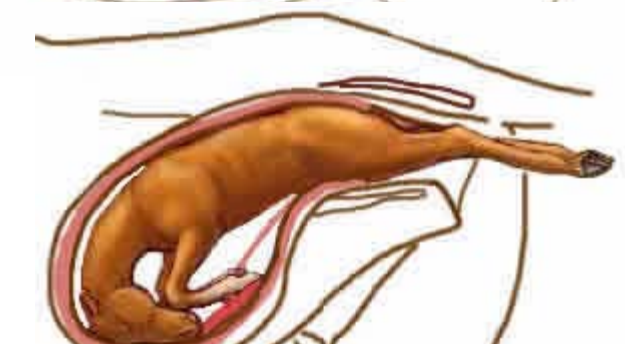
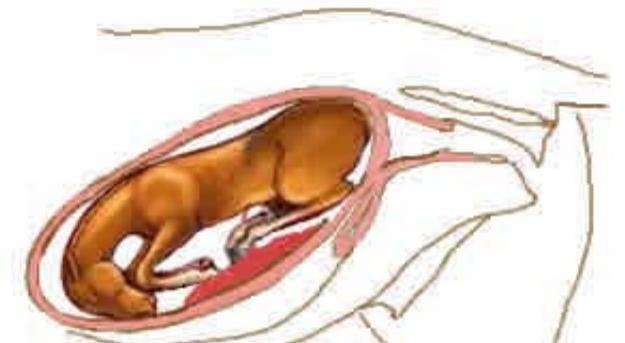
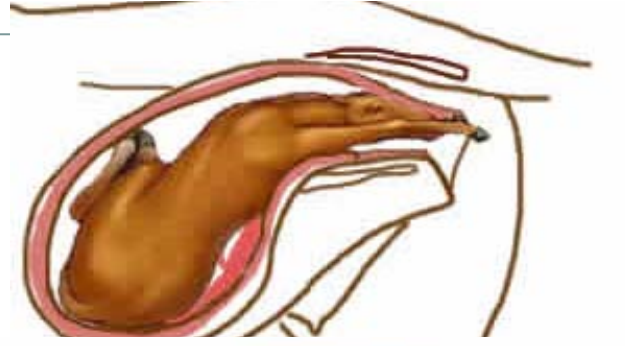
**Stage 1:** 2-5 hours, restless, pacing, down and getting up, sweating, urination. Water breaks.

**Stage 2:** 5-15 min. after water breaks - amnion, forefeet then nose appear. Mare lays down and begins having contractions.

*If > 20-30 min before delivery, provide assistance.*

**Stage 3:** 15-90 min. after delivery, expulsion of placenta. *If > 2 hrs get assistance.*







# THE 1, 2, 3 of FOALING



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## A NORMAL FOALING:

Foal should stand in **1 hour**

Foal should nurse in **2 hours**

Mare should pass afterbirth  
within **3 hours**





# DANGER SIGNS



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Notify your veterinarian immediately if:

- The foal seems depressed or lethargic
- Temperature  $> 102^{\circ}$  F
- Increased or labored breathing
- Straining to urinate or defecate
- Signs of colic
- Yellow around the eyes or gums
- Swollen or painful joints
- Swollen or painful umbilicus
- Diarrhea





# VETERINARY EXAM



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ENVIRONMENT



# ENVIRONMENT



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- Take time to evaluate & remove potential hazards



**By knowing what is normal for your horse and acting promptly when something is abnormal, you can help to minimize the impact of illness or injury.**





QUESTIONS?