



150 Dexter Rd ▪ Spartanburg, SC 29303 ▪ 864-583-4805

Animal Information:

Horse Name (if known): _____

Shelter Accession #: _____

Breed (species): _____

Color: _____

Gender: Male-intact Male-NPT Female

Age Class: Juvenile Young Adult Adult Aged

Estimated Age : _____

Physical Examination Findings:

T: _____ P: _____ R: _____

Attitude / Behavior: _____

MM: Pink Moist Pale Tacky

CRT: <1 sec. 1-2 sec. >2 sec.

Ext. Parasites: Non Observed Ticks Lice

Few Moderate Numerous

Eyes / Ears: NSF Other: _____

Nose / Mouth: NSF Other: _____

Lameness / Feet: NSF Other: _____

Integument: NSF Other: _____

Cardio / Resp: NSF Other: _____

GI / Abdomen: NSF Other: _____

N-M / M-S: NSF Other: _____

Other: _____

Equine Physical Examination Findings

Case Information:

Case ID #: _____

Case Horse #: _____

Owner (if known): _____

Exam Date: _____

Custody Date: _____

Environmental Conditions: _____

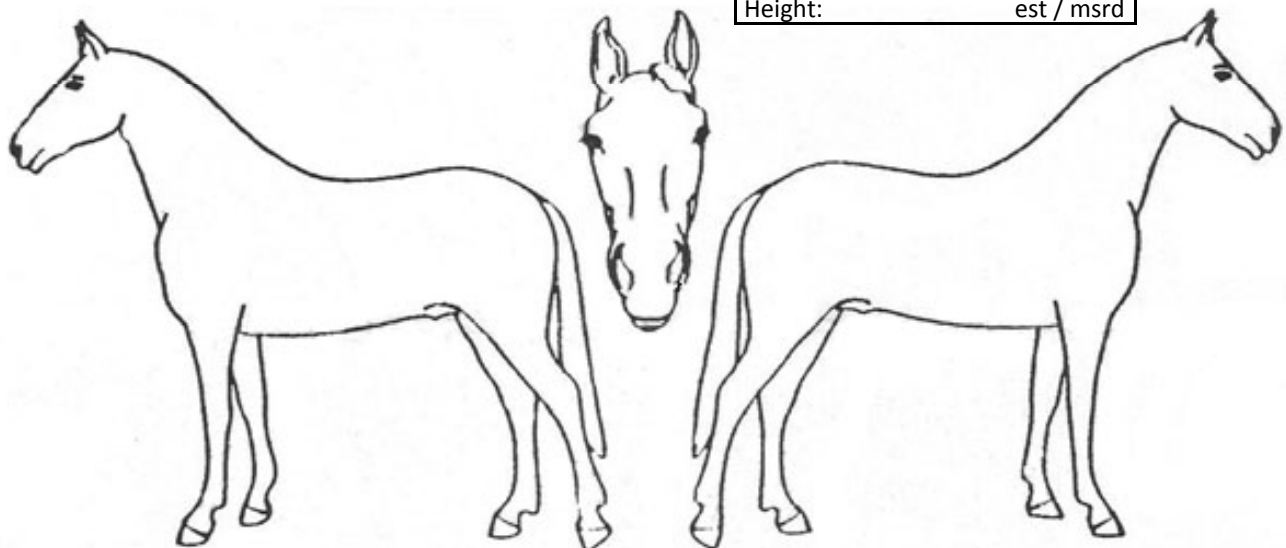
Time of Examination: _____

History (per owner): *include vet, farrier, deworming, etc.*

Assessment (brief):

Henneke BCS		Weight		
Neck		Date	Weight	Initials
Withers				
Loin				
Tailhead				
Ribs				
Shoulder				
Overall				

Height: _____ est / msrd



Equine Physical Examination Continuation

Animal Name (if known): _____

Case ID #: _____

Shelter Accession #: _____

Case Animal #: _____

S/O Continued:

Dental Condition:

- Not Examined NSF
- Hooks, Rostral / Caudal (_____)
- Enamel Points (_____)
- Incisor Malocclusion (_____)
- Missing Teeth (_____)
- Mucosal Ulceration (_____)
- Loose Teeth (_____)
- Step Defects (_____)
- Wave Mouth (_____)

Lameness / Condition of Feet:

- NE Standing only NSF
- Abscess (_____)
- Atrophic frogs (_____)
- Chips / Cracks (_____)
- Club (_____)
- Overgrown (_____)
- Under run heels (_____)
- Lamé (_____)
- Grade 1: Intermittent Mild
- Grade 2: Circumstantial
- Grade 3: Consistent @ Trot
- Grade 4: Marked Consistent
- Grade 5: Minimal Weight Bearing

Integument:

- Not Examined NSF
- Abnormal Shedding (_____)
- Alopecia, Generalized (_____)
- Alopecia, Other (_____)
- Foreign Material (_____)
- Fecal Pasting (_____)
- Matted (_____)
- Rain Rot (_____)
- Other (_____)

Plan:

Diagnostic Testing Recommendations:

- CBC Chem UA Electrolytes
- EIA / Coggins Quantitative Fecal
- Rads: _____
- Other: _____
- Samp. Collected Recommend to \bar{o}

Vaccination: now following weight gain

Deworming: now gradual (after fecal)