



## POST FOALING CHECK

### **When and why?**

After the birth of a foal we recommend a post foaling check by one of our vets. This check is important to ensure the health and well being of both the mare and the new foal.

In most cases we would recommend arranging for a post foaling check 12 to 24 hours after birth. However if you have any concerns with either the mare or the foal prior to this time you should get in touch immediately. If your mare has been treated for placentitis (an inflammation of the placenta) during pregnancy we recommend we attend the foal as soon as possible as these foals are particularly vulnerable.

New born foals can deteriorate rapidly if there are underlying problems, so if in doubt give us a call to chat about your foal's progress.

### **The examination**

At this initial examination of your new born foal we will perform a thorough physical examination, assessing the health of the foal whilst also checking for congenital conditions. It is not uncommon to identify hernias, angular or flexural limb deformities as well as a host of other potential issues, which when identified early can generally be managed successfully.

The mare will also be examined to ensure she is recovering well from the birth and the placenta checked to ensure it has been passed completely. Remember to collect and keep the placenta in a clean bucket so we can examine it at the time of our visit.

### **Owner Observations**

When assessing the new born foal it is vital to discuss your observations of the foal in the first 12 hours of it's life. Normal, healthy foals generally follow a very consistent behavioural pattern which can give us early indicators if things are not quite right. The Owner's Section of the Post Foaling Check Template lists what you need to look out for and record. Vital indicators include time taken to stand, (not standing by two hours of age would be considered abnormal) and the time taken to latch on and suckle. Foals that have not suckled from the mare by 4 hours of age should receive immediate veterinary attention.



## **IgG Testing**

Is a routine blood test which can be performed at the foal check. The test checks the foal has received adequate antibodies from suckling the mare's colostrum. The test needs to be carried out between 12 and 36 hours of age. If foals do have low levels of antibodies they are susceptible to infection and are considered to have partial or complete failure of passive transfer. When identified early (less than 18 hours of age) we can provide the foal with colostrum (either milked from the mare, synthetic or frozen and thawed). In cases where the problem hasn't been identified until after 24 hours, the foal is unable to absorb the antibodies through its gut and so it is best to administer a plasma transfusion intravenously.

In most cases this test can be carried out on the yard with results available in 5 minutes, although in some cases we will submit the sample to a laboratory for more detailed analysis. This test is highly recommended in most cases and essential if you want to insure your foal from birth or if your mare "ran milk" (dripping milk from the udder) prior to the foaling.

## **Treatments**

In most cases we will administer a tetanus antitoxin at the post foaling check which provides the foal with immediate immunity to tetanus. This protection lasts for about 3 months, by which time the foal is ready to start its vaccinations.

We recommend that the navel /umbilicus of the foal is treated in the first hour of birth with a 0.5% chlorhexidine based navel dip. This treatment should be repeated every 6-8 hours in the first 24 hours.

Impaction of the meconium (the first faeces) is the most common cause of colic in new born foals and is more commonly seen in colt foals than in fillies. If you haven't observed the foal passing the meconium we will likely perform a rectal examination and if necessary we will administer an enema.

Some foals will be put onto prophylactic antibiotics for the first 3 days of life. This is very much on an individual basis and depends largely on the mare's pregnancy history and the environment into which the foal has been born. If required the vet will discuss this with you.