

EMERGENCY 101: WHAT TO DO IF YOU HAVE AN EQUINE EMERGENCY

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Your horse should have regular routine health checks by your veterinarian once or twice a year. This allows us to get to know your horse and address any health issues before it becomes an emergency. Spring/fall vaccines and routine dental care are great opportunities to have a routine health check and to ask your veterinarian about any questions or concerns.

As a horse owner, you should know how to recognize serious problems, respond promptly and take appropriate action while waiting for the veterinarian to arrive. Are you ready in case of a natural disaster (flooding, barn fire, hurricane, etc.)? There are many online resources to help you prepare for such instances. You should have a copy of important documents in a safe location (proof of ownership, emergency contact numbers, insurance policy, etc.). Make sure vaccines and Coggins are up to date in case of evacuation. Identify your horse either with a microchip, a tattoo (for those OTTB), luggage tags in the mane, or write your phone number on the hooves or body with a sharpie. Know your plan and practice it so you can be prepared!

Keep important information handy so in an emergency it's readily available. This could include the veterinarian's emergency contact number, the insurance policy number and contact information, and phone numbers for friends or neighbors that can assist you in case of emergency. If you have a boarding facility, do you have emergency contact information for your owners (the spouse, the children, the parents, etc.)? Do you have authority to contact the veterinarian if you cannot get in touch with the owner during an emergency? As a horse owner, always have a backup contact that can make a decision for you if you cannot be reached (on a plane, in a meeting, out of the country, in a bad reception spot, etc). The worst thing you can do is to be unreachable when your horse is in trouble!

Have transport available if your horse needs to get to an emergency center for treatment. If you own a truck and trailer, keep it maintained, full of gas and dug out of mud or snow. If you do not own a trailer, know who you can contact to use their trailer in an emergency. Finally, make sure your horse is accustomed to loading and riding in a trailer. An emergency is not the time to teach a horse to load.

Rule #1 is to stay safe! Horses can be dangerous when they are injured or panicking. You cannot help your horse if you are injured too. If it is safe to approach your horse, catch and calm the horse if possible. Take it to a safe place, either a stall or paddock away from other horses. Call for assistance to help you if needed. Help can be used to hold the horse while you look it over, call the veterinarian, and administer first aid while waiting for the veterinarian to arrive. Have a first aid kit handy in the barn, in the trailer, and on a trail ride. Make sure supplies haven't expired and keep it fully stocked. Some basic items in your first aid kit could include: a stethoscope, a thermometer, hoof pick, eye wash, antiseptic solution, latex gloves, flashlight and spare batteries, bandage materials, scissors, duct tape, etc.

As a horse owner, you should be familiar with your horse and their attitudes and behaviors so you can identify any change in behavior that could indicate a problem. Be able to recognize signs of distress in your horse: decreased appetite, abnormal behavior, lying down longer than normal, abnormal discharge, sudden non-weight bearing lameness, squinting or tearing of the eye, fever, etc. Know how to do a basic examination and what normal vital signs are for your horse.

Normal temperature = 99.0-101.5 F

Normal heart rate = 28-44 beats per minute

*listen behind the left elbow or feel the pulse under the jaw

Normal respiratory rate = 10-24 breaths per minute

*listen to the lungs, watch the nostril flare, or watch the chest rise/fall

Normal gum color = pink and moist

Normal capillary refill time = less than 2 seconds

*press your finger on the gums and count the seconds until color returns

Normal skin tent on the neck = less than 2-3 seconds

Normal gut sounds = gurgling or tinkling in each of the four quadrants

If you are unsure of how to perform a basic examination, ask your veterinarian to show you when they are out doing a routine health check.

Common Emergencies

Colic – A term used to describe any type of abdominal pain. It can be life threatening and should be taken seriously. Common signs to watch for: looking at the belly (flank watching), kicking at the belly, stretching out, lying down/rolling, pawing, and decreased manure production. Do a basic examination if it is safe and have that information ready when you talk to the veterinarian.

Wounds and bleeding – Horses frequently get cuts and scrapes. As a horse owner, you need to know which wounds need immediate veterinary attention: excessive bleeding, puncture wounds over joints, deep lacerations, wounds over joints or tendons, foreign body penetrations, etc. When in doubt, take a picture for your veterinarian. If there is excessive bleeding, apply a pressure bandage for 20-30 minutes while waiting for the veterinarian to arrive. If there is gross contamination in the wound, hose it off and wrap it to prevent more debris in the wound while waiting for the veterinarian. Occasionally, there will not be a wound present but a swollen leg (cellulitis). In that instance, you could cold hose the leg for 30 minutes and apply a sweat bandage (nitrofurazone under a pressure bandage) until the veterinarian arrives. If the leg looks unstable, you could apply a splint over a bandage to support the limb from further damage while waiting for the veterinarian. Finally, heads can be bandaged strategically to prevent more contamination in a wound or to decrease swelling around an eye. Nitrofurazone is safe

on the cornea so don't be afraid to apply it over very swollen eyelids. This can help draw the edema out of tissues so the veterinarian can get the eyelids open to assess the eye when they arrive. If your horse has a foreign body penetration, leave it in place until the veterinarian arrives. Removing it could potentially make the situation worse (blood loss or further internal damage).

Nail in the foot – If you find a nail in your horse's foot, do NOT remove. Your veterinarian will want to take a radiograph to determine what structures may be involved and create the best treatment plan for your horse. The only time it is ever appropriate to remove the nail is if the horse could drive it further into the foot by stepping down on it after you have discovered it. In that case, mark the spot of nail penetration with a sharpie since the hole tends to close over quickly.

Eye injuries – Signs to watch for if you suspect an eye injury include: squinting, excess tear production, mucoid discharge, cloudy eye, swelling or laceration of the eyelids, etc. Eyes require immediate attention. Do not attempt to treat the injury without having a veterinarian first assess the extent of injury. Try to prevent the horse from rubbing an irritated eye while waiting for your veterinarian to arrive.

Sudden non-weight bearing lameness – Possible causes include foot abscess, fracture, septic joint, tendon injury, cellulitis, or laminitis. If you suspect a fracture, do not move the horse until the limb has been stabilized. Moving without stabilization could cause further damage that may be irreparable. Fractures do not always occur on the legs. They can occur anywhere on the body, most frequently, the head or jaw. A lot of fractures can be repaired quite nicely but may be expensive so know what your financial commitment can be before an emergency happens.

Laminitis – An extremely painful condition caused by inflammation within the hoof capsule. In severe cases it can result in detachment of the coffin bone from the hoof wall and puncture through the sole. The condition usually occurs in the front feet but 1 to 4 feet can be affected. Signs of suspected laminitis include: increased digital pulses (which can be felt on each side of the fetlock), heat in the foot, abnormal "walking on eggshells" gait, sawhorse stance (rocking back on the hind legs to take weight off the front end), or lying down more than usual. Some conditions predispose horses to developing laminitis so having routine health checks by your veterinarian can be important in preventing this condition.

Allergic reactions – Horses can have allergic reactions just like people, from medications, contact with something in the environment, bee stings or snake bites to name a few. If your horse develops swelling in the face, muzzle or throat area, or breaks out in full body hives, it could be an allergic reaction. If you notice your horse with noisy or labored breathing, the airway may be swelling closed and you should contact your veterinarian immediately.

Choke – Signs of choke include a sudden onset of retching or coughing, extending the neck, and nasal discharge usually brown or green in color. If you suspect your horse is choking, take away food and water and try to keep your horse calm and their head down. Do NOT attempt to remove anything from their mouth or force anything down their throat.

Foals and foaling – Fortunately, foaling problems are rare, but when there is a problem it is usually serious. Ideally the mare should be attended when she is foaling so that problems can be quickly identified. After the mare's water breaks, the foal's front feet and nose should appear within 5-10 minutes. A dystocia (difficulty birthing) usually occurs when the foal is not positioned correctly, so if no progress is being made in those first ten minutes, notify your vet so they can start heading your way quickly. Redbag can also occur after the mare's water breaks. This occurs when the placenta starts to separate from the uterus before the foal has broken through. This can be life threatening to the foal so the bag needs to be torn open, allowing the foal access to oxygen.

Once the foal is on the ground, a normal healthy foal will stand within 1 hour of birth and nurse within 2 hours of birth. The mare should pass the placenta within 3 hours of foaling. Your job is to make sure that foal stands and nurses on time so that they get the benefit of the mare's colostrum to boost their little immune systems. When the mare passes the placenta, be sure to save it for the veterinarian to inspect. It can be placed in a clean bucket or trash bag. Your veterinarian will want to make sure the entire placenta has passed and no tags are left behind in the uterus as that can be detrimental to the mare's health. You should have your veterinarian out to exam the newborn foal and placenta 6-12 hours after the foaling. This allows enough time for the immunoglobulin (IgG) levels to rise after ingesting the colostrum. If the levels aren't high enough at that time, your veterinarian may administer plasma to the foal to boost their immune system. Your veterinarian will also exam the foal to check for any health risks that could be detrimental for the foal.

A foal's health can deteriorate quite quickly so it is important to check them several times during the day. Danger signs for foals include: depression or lethargy, unresponsiveness, fever, labored breathing, straining to defecate or urinate, colic signs (rolling up on their back), yellow around eyes or gums, swollen joints, swollen or painful umbilicus +/- discharge, or diarrhea. If you notice any abnormality with your foal, it is better to consult with your veterinarian sooner rather than later.

In summary, be prepared, have a plan and practice it! Since we cannot keep our horses wrapped in bubble wrap 24/7, you can take steps to minimize potential hazards in their environment to keep them safe. When in doubt, take a picture and call your veterinarian. We are more than happy to help you! And finally, put some thought into the tough questions (do you have the finances to put your horse through emergency surgery?) because rational thought sometimes escapes in times of emergency.