

## EQUINE EMERGENCY - FIRST AID

Know your horses "normals":

Adult	99 to 100.5 F
Foals and yearlings	99.5 to 101 F
Pulse, resting	28 - 42 beats per minute
Respiration, resting	12 to 20 breathes per minute

### EQUINE FIRST AID KIT

Clean towel	Twitch	SMZ-TMP or Uniprim
Nolvasan scrub	Mineral oil/dose syringe	Butazolidin (Bute)
Gauze sponges/telfas	Saline	Banamine
Cling wrap	Wound ointment (Furacin)	Eye ointments-
Roll cotton	Sterile syringes & needles	Triple antibiotic &
Vetwrap 4"	Flashlight or penlight	Atropine
Ace bandage	Thermometer	Stethoscope
1" tape	Hoof pick/knife	Clippers
Scissors		

### EMERGENCIES

**COLIC** - Clinical signs are sweating, pawing, looking or biting at sides, stretching out, rolling...

**WHAT TO DO:** \* Remove feed.

- \* Walk animal if horse is down and rolling (*to prevent injury and attempt to stimulate motility*).
- \* Take temperature, pulse and respiration.
- \* Examine mucous membranes for color.
- \* Listen to stomach for "gut sounds".
- \* Note consistency and color of manure or absence of manure.
- \* Note if horse has eaten his breakfast/lunch/dinner or drank water
- \* Give 10 ml's of Banamine in the muscle or vein.
- \* Carefully administer mineral oil with an oral dose syringe (the more the better)
- \* You may even want load to your horse in your horse trailer to see if this will stimulate motility. (We all know what the first thing a horse does when it gets in a trailer).
- \* Call DVM if no change after the above.

**CHOKER** - Clinical signs are excessive salivation, feed coming out of nose, wrenching and arching neck...

**WHAT TO DO:** \* Remove feed.

- \* Take a clean sponge soaked in WARM water and squeeze it out INSIDE horses mouth. (Repeat several times)
- \* Massage throat area, see if you can feel a blockage - and continue to massage blockage
- \* Try to keep horse relaxed
- \* CALL DVM .

*continued on back*

**EYE INJURIES** - Clinical signs are tearing and matting around eyes, keeping eyelid closed, painful swollen eyelids...

**WHAT TO DO:** \* Keep horse quiet.

- \* Administer Banamine paste orally 10ml's or injectable Banamine 10ml's IM (1,000 lb horse)  
Once a day for three days. After 3 days administer Bute paste - 1gram, once a day for 4 days.
- \* Administer Atropine eye ointment once a day for three days (dilates pupil)
- \* Administer triple antibiotic eye ointment 3 - 4 times a day for five days
- \* Have horse wear an eye mask/fly mask during treatment
- \* CALL DVM if no change after a couple of days.

**BONE FRACTURE** - Clinical signs are swelling and heat over area, and non-weight bearing lameness.

**WHAT TO DO:** \* Apply a temporary splint with cotton and Vetrap.

- \* Other resources may be used to apply a splint if cotton is not readily available: Pillow, newspaper, plywood, twitch...
- \* CALL DVM.

**LACERATIONS** - Clinical signs are obvious - blood loss/tendon or bone visible

**WHAT TO DO:** \* Flush wound with COLD tap water or sterile saline and cover with clean/sterile wrap.

- \* Use a pressure wrap of Elasticon/Vetrap and gauze sponges to stop persistent bleeding.
- \* DO NOT APPLY OINTMENT TO A WOUND THAT WILL NEED SUTURING.
- \* CALL DVM

**BRUISES** - Clinical signs are swollen areas on body or legs, hair may be missing, area will be sore to touch.

**WHAT TO DO:** \* Apply cold water with a garden hose within the first 24 hours.

- \* If bruise is on the leg - wrap the leg after hosing down, after the first 24 hours apply a sweat bandage.
- \* Administer Bute paste per package instructions
- \* Make sure to exercise the horse to keep circulation active.

Resources:

Animal Poison Control Center (888) 426-4435  
[www.MyHorseMatters.Com](http://www.MyHorseMatters.Com)