

Horse Health Parameters Form

Owner _____ Date _____ Time _____ AM / PM

Horse _____ Breed _____ Age _____ Sex _____ Color _____

History _____

Reason for exam today _____

Findings (E) Excellent, (G) Good, (F) Fair, (P) Poor

General attitude and demeanor:

Bright, alert, responsive Quiet, alert, responsive Lethargic Mildly depressed Depressed

Comments _____

Appetite: Normal More than normal Less than normal Not eating

Comments _____

Body Condition (1-9) _____ **Skin and Coat** E G F P **Mane and Tail** E G F P

Comments _____

Movement: (*Normal, lame, wobbly, weak*) LF _____ RF _____ LH _____ RH _____

Comments _____

Head, face, throat looks and feels: *From front* Normal Abnormal *From sides* Normal Abnormal

Left eye: Normal Red Cloudy Watery Squinting Growth

Right eye: Normal Red Cloudy Watery Squinting Growth

Comments _____

Temperature _____ **Pulse** _____ **Respiration** _____ **Capillary refill time** _____

Mucous membranes Pink Pale pink Red Dark Toxic line

Pulse feels: Normal Weak Irregular **Heart sounds:** Normal Weak Irregular

Respiratory sounds: Normal Abnormal Comments _____

Gut Sounds: 0 absent, 1 fewer than normal, 2 normal, 3 more than normal Upper left side _____ Lower left side _____

Upper right side _____ Lower right side _____

Feet: Heat 0-5/Digital Pulse 0-5 LF ____/____ RF ____/____ LH ____/____ RH ____/____

Limbs look and feel: Normal Abnormal LF _____ RF _____ LH _____ RH _____

Body, neck, and back look and feel: Normal Abnormal _____

Under belly looks and feels: Normal Abnormal _____

Tail and under tail look and feel: Normal Abnormal _____

Sheath or udder looks and feels: Normal Abnormal _____

Other notes _____