



Northeast Pennsylvania Equine Clinic, L.L.C.

Ellen L. Johnson, D.V.M.

4326 State Route 1001 • Thompson • PA • 18465

Tel: 570-727-2868 • Fax: 570-727-2935

NPEC Reply Form

Emergency Transportation- I own a safe, registered and inspected trailer and would like to provide:

Trailer for rent at cost of _____ Trailering services at cost of _____

Colostrum Bank- I am willing to donate colostrum to the NPEC colostrum bank

Due date(s) of mare(s) - _____

Yes, I would like to be on the N.P.E.C. mailing list for complimentary:

___ Announcements ___ N.P.E.C. Newsletters ___ Your Healthy Horse magazine

Please send me the following N.P.E.C. handouts:

- ___ Deworming
- ___ Equine First Aid Kit
- ___ Equine Vaccinations
- ___ First Aid Treatment Notes
- ___ Notes on Foaling for Horse Owners
- ___ Your Horse's Health (a folder put together by NPEC containing blank record forms, information on first aid, assessing your horses vital signs, colic, parasites, dental care, sheath cleaning, vaccinations, prescription medicines, Recommended References. (\$5.00))
- ___ Nutritional Evaluation Worksheet
- ___ Pre/Post Operative Care for Castration
- ___ Preventing Degenerative Joint Disease
- ___ Selected References ___ Strangles
- ___ Tapeworms

I would like to borrow a video. Please enclose a returnable \$10.00 deposit.

- ___ Care & Management of the Newborn foal
- ___ Regumate
- ___ Flu Avert
- ___ Hay Quality
- ___ Colic
- ___ Internal Parasites

Please send me one or more of the following booklets and/or articles from the American Association of Equine Practitioners. (AAEP)

- ___ Colic
- ___ Cool Semen Transport
- ___ Dental Care
- ___ E.I.A.
- ___ E.P.M.
- ___ Emergency Care
- ___ Equine Gastric Ulcers
- ___ Equine Insurance
- ___ Equine Viral Arteritis
- ___ Expectant Mare
- ___ Fescue
- ___ Foal Growth
- ___ Foaling Mare & Newborn
- ___ Hay Quality
- ___ Older Horse
- ___ Overweight Horse
- ___ Older Horse
- ___ Overweight Horse
- ___ Parasite Control
- ___ Purchase Exams
- ___ West Nile Virus

Product Information:

- ___ Legend
- ___ Adequan
- ___ Equirab
- ___ Equinyl Combo
- ___ Foundation
- ___ Ulcerguard
- ___ Preventicare Colic Insurance

Comments/Requests/Suggested Topics for Future Clinics, Newsletters or Handouts:

Name _____ Telephone _____

Address _____



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Thank you for your response!