



## **Northeast Pennsylvania Equine Clinic, L.L.C.**

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### **Notes on Foaling for Horse Owners**

#### **Preparing the mare:**

- Tetanus toxoid booster one month prior to foaling.
- Avoid deworming the mare in the last 6-8 weeks of pregnancy.
- Move the mare into foaling stall and increase feed 2 to 4 weeks before due date. (This is in addition to the feed increase beginning with the last trimester).
- Have water and salt available at all times. Provide clean, ample bedding. Straw is ideal.
- Avoid disturbing the mare. Avoid turning barn lights on and off at night.
- Open Caslick's, if applicable, preferably within the last 2 or 3 weeks of pregnancy.
- Wrap tail and wash perineal area. This could be done at the time of waxing of the teats or during early labor.

#### **Signs of impending birth:**

- Attitude and behavior changes.
- Noticeable enlargement of udder ("bagging up") 3 to 6 weeks prior.
- Swelling and relaxation (elongation) of vulva in last few weeks, more so in the last 24 hours.
- Relaxation of pelvic ligaments.
- Leaking of colostrum a few days prior. (Note: If leakage is heavy, or continues for more than a few days, collect and freeze colostrum and/or get colostrum from another source.)
- Waxing of teat ends within 48 hours of birth. (Exception: a few mares don't wax at all; a few wax up to one week prior to foaling.)
- Early labor (4-5 hours prior to foaling): Increased heart and respiratory rate. Signs resembling colic (sweating, pacing, rolling, frequent urination/defecation).

#### **Foaling process:**

- Heavy labor, rupture of the thin, translucent water bag, and passage of the foal is normally within 20-30 minutes.
- If the placenta or "red bag", which is very dark red in color, is bulging out of the vulvar lips first, this must be opened immediately as you risk the foal dying from lack of oxygen, as the placenta prematurely separates. This can be done carefully with a pair of scissors.
- Remove the membranes from foal's head.
- If the foal's entire body is not expelled from the mare, pull the foal all the way out so that kicking feet cannot injure the mare's vulva.
- Allow the mare to lick the foal dry and bond with the foal.
- The umbilical cord normally ruptures when foal is on the ground.

Foaling process continued:

- Avoid disturbing the mare and breaking of the cord for at least 5 minutes after birth and until pulsing of the cord has stopped. (Blood is being passed from the placenta into the foal). If the cord has not broken on its own, get the mare up and allow her to move around. This should break the cord. If necessary, apply umbilical tape or a large plastic alligator clamp 1-2 inches from the foal's belly and pull apart the cord 6 to 8 inches from the foal.

After the foal is born:

- Dip the umbilical cord stump in 2% or 7% tincture of iodine. If using 7% strength, be very careful not to spill iodine as it will burn the foal's skin, eyes or mucous membranes with it. Repeat a couple of times during the first hour and then 2 to 3 times daily until the stump is dry (usually 2 to 3 days).
- Keep the foal warm and dry and out of drafts.
- If the foal doesn't nurse within 1 hour, milk the mare and save the colostrum which can be bottle fed by you, or given by your veterinarian by stomach tube.
- Placenta (afterbirth) should be passed within 1/2 to 3 hours of delivery of foal.
- Inspect and/or save placenta for the veterinarian to examine.
- Watch for foal to pass the first manure (meconium) within 6 to 8 hours of birth.
- Watch for normal urination, i.e. a good stream of normal colored urine coming from the urethra. Watch for dribbling of urine from the umbilical stump.
- If the mare did not receive the tetanus toxoid booster 1 month prior to foaling, the foal will need tetanus antitoxin at birth and then a tetanus toxoid booster when 1 month old.
- Deworming the mare, 3 to 5 days after foaling, is a good practice.

When to call the veterinarian:

- If early labor is longer than 4-6 hours.
- *Immediately*, if both front feet with bottom of hooves pointing down are not the first parts of the foal coming out.
- If mare is torn during delivery of foal and requires suturing (stitching).
- If foal is not up and nursing within 1 hour of birth.
- *Immediately*, if the foal appears weak or depressed, breathing is labored or rapid, or the color of the gums is not pink. Never "wait and see" if you suspect *any* problem with a foal.
- If placenta hasn't passed within 3-6 hours (retained placenta is an emergency in the horse).
- If no meconium is passed within 8 hours.
- If there is a delay in the drying up of the umbilical cord, if the umbilical stump is swollen or painful, or if a hernia is suspected.
- A blood sample from the foal should be checked 24-36 hours after birth for the immunoglobulin (antibody) level. Approximately 10% of newborn foals suffer complete failure of antibody transfer from the mare, another 10% suffer partial failure of antibody transfer.
- If this is not the mare's first foal and there is a history compatible with neonatal isoerythrolysis, or if the foal is very valuable, speak with us about testing for and preventing neonatal hemolytic crisis and death of the foal.

## **NPEC Notes on Foaling**

### Looking Ahead:

- Begin the foal's regular deworming program at 2 months. Consult your veterinarian for the foal's special needs.
- Vaccinations begin at 3 months of age.

We hope you have found these notes helpful. Please call if you have any questions. If you still feel uncomfortable about handling foaling, let us know, so that we can coach you further. We also recommend arranging for someone to help you at the time, especially if you are new at this. If all goes well with the foaling, we look forward to examining and caring for you mare and foal at 24 to 36 hours after birth. Best of luck!