

HORSE RESCUE UNITED

P.O. Box 308, Newport, NJ 08345
(609) 481-8561

Dear Veterinarian, _____ adopted a horse from Horse Rescue United (HRU).

We require information pertaining to the horse's condition once a year by June 15 annually from the attending veterinarian, as per the adoption agreement. This will ensure the well-being of our adopted horses. **Please complete this form and return to us directly to the mailing address above (or fax to 716-645-2840 OR email to lunar_aradia@yahoo.com) within three weeks of your visit with the horse.** Thank you for your cooperation.

Sincerely,
Horse Rescue United, Inc.

VETERINARY FOLLOW UP FORM

This form to be filled out by a Veterinarian only

Horse's Name: _____ Breed: _____ Tattoo: _____
Age: ____ Gender: ____ Height: _____ Color/Markings: _____

1. Is horse on adequate worming program? [] Yes [] No Date of last worming _____
2. Is shelter and turnout adequate for the horse? [] Yes [] No
3. Teeth: [] recently floated [] adequate [] needs attention
4. Hooves: [] recently trimmed [] well cared for [] adequate [] needs attention
5. Eyes: [] good condition [] need attention
6. Check off inoculations administered: Date inoculations were administered _____
____ EW ____ Tetanus ____ Rabies ____ West Nile ____ Others* _____

*Other inoculations due—those recommended to you by your veterinarian for endemic diseases in your area.

7. Please rate the condition of this horse according to the chart on Page 3- # _____
 8. Please note any visible signs of lameness: _____
 9. Date of exam: _____ Use of horse: _____
- Address of stabling site: _____

10. Coggins drawn as per your state requirements: _____ ****copy to be mailed to us****

11. Have you treated this horse for an injury or illness within the past 12 months?
[] Yes [] No If yes, what illness or injury and what treatment was given?

12. If a mare, is this horse in foal? [] Yes [] No If yes, when due? _____

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Veterinarian's Name (print): _____

Name of Clinic: _____

Address: _____ State & License # _____

Telephone: _____ Fax: _____

By signing this form, I certify that I have personally examined the above-mentioned equine within the past three weeks and he or she is in the health/condition that I have listed above.

Veterinarian's Signature: _____ Date: _____

Your recommendations or comments are appreciated:

If there is any concern for this horse, please contact HRU confidentially at (609) 481-8561 or lunar_aradia@yahoo.com.

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CONDITION	NECK	WITHERS	LOIN	TAILHEAD	RIBS	SHOULDER
1 POOR	Bone structure easily noticeable Animal extremely emaciated; no fatty tissue can be felt	Bone structure easily noticeable	Spinous processes projects prominently	Tailhead (pinbones) and hook bones projecting prominently	Ribs projecting prominently	Bone structure easily noticeable
2 VERY THIN	Faintly discernible Animal Emaciated	Faintly discernible	Slight fat covering overbase of spinous processes. Transverse processes of lumbar vertebrae feel rounded. Spinous processes are prominent.	Tailhead prominent	Ribs prominent	Faintly discernible
3 THIN	Neck accentuated	Withers accentuated	Fat buildup halfway on spinous processes but easily discernible. Transverse processes cannot be felt	Tailhead prominent but individual vertebrae cannot be visually identified. Hook bones appear rounded, but are still easily discernible. Pin bones not distinguishable.	Slight fat cover over ribs. Ribs easily discernible.	Shoulder accentuated
4 Moderately THIN	Neck not obviously thin	Withers not obviously thin	Negative crease along back	Prominence depends on conformation, fat can be felt. Hook bones not discernible	Faint outline discernible	Shoulder not obviously thin
5 Moderate	Neck blends smoothly into body	Withers rounded over spinous processes	Back level	Fat around tailhead beginning to feel spongy	Ribs cannot be visually distinguished but can be easily felt	Shoulder blends smoothly into body
6 Moderately FLESHY	Fat beginning to be deposited	Fat beginning to be deposited	May have slight positive crease down back	Fat around tailhead feels soft	Fat over ribs feels spongy	Fat beginning to be deposited
7 FLESHY	Fat deposited along neck	Fat deposited along withers	May have positive crease down back	Fat around tailhead is soft	Individual ribs can be felt, but noticeable filling between ribs with fat.	Fat deposited behind shoulder
8 FAT	Noticeable thickening of neck Fat deposited along inner buttocks	Area along withers filled with fat	Positive crease down back	Tailhead fat very soft	Difficult to feel ribs	Area behind shoulder filled in flush with body
9 Extremely FAT	Bulging fat Fat along inner buttocks may rub together. Flank filled in flush.	Bulging fat	Obvious positive crease down back	Bulging fat around tailhead	Patchy fat appearing over ribs	Bulging fat

