

Neonatal Foal Care

Great Lakes Equine recommendations:

Umbilical cord care within 30 minutes.

Navel treatment should be initiated within 30 minutes of the cord breaking. It is ideal to use a 0.5% solution of chlorhexidine (Nolvasan) instead of betadine/iodine. Dilute 1 part 2% chlorhexidine solution with 3 parts sterile water. The solution can be picked up at GLEWC a few weeks prior to foaling. Ensure thorough soaking of the navel but avoid excessive handling (use clean gloves) to avoid transfer of bacteria from your hands. Ideally you should dip the navel approximately 3 times (every 6-8 hours) during the first 24 hours. Again, it is important to stress that the stall must be kept extremely clean (clean several times/day) to avoid any infections of the umbilicus.

Prophylactic use of enemas.

A foal should pass meconium (fetal manure) within 4 hours of foaling. Meconium impaction (failure to pass the first bowel movement) is a common problem. To prevent this; an enema can be administered, one time, after the foal is born. Do not give any further enemas, if the foal appears to be straining or showing signs of colic call your veterinarian.

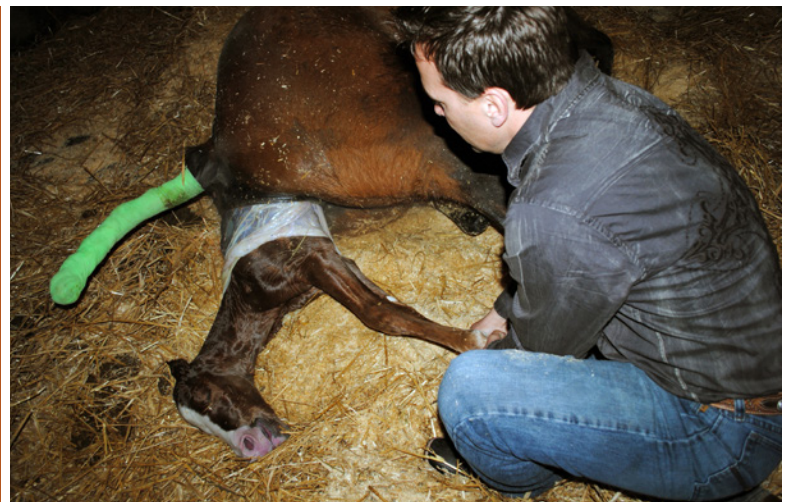
Make sure the foal is urinating.

It is important to ensure that your foal urinates normally after birth. This can be very difficult since it can be up to 8-11 hours before the first urination. If you notice your foal urinating ensure that the foal is not leaking urine from the umbilicus at the same time. Common problems encountered include patent urachus (urine leaking from umbilicus) this can predispose a foal to umbilical infection. Another common problem includes a ruptured bladder. During delivery the mare can push so hard that the bladder of the foal may rupture. In addition, it is always important to never lift a foal in its abdomen region to prevent rupturing the bladder. Signs of a ruptured bladder can be failure to urinate, straining to urinate, inappetance, or signs of colic. The foal may appear normal at birth and signs may not become apparent until 2-3 days after birth.

Allow the foal to nurse on it's own.

It is also important to allow the foal to search for the udder and find the teats on its own. Most foals become frustrated and resist any efforts of human aid. If the foal is not nursing by 4 hours then an

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attempt can be made to assist the foal, in addition, please call your veterinarian.

Schedule a newborn foal evaluation & IgG blood test.

After your foal is born call your veterinarian to schedule an examination and an IgG test. The IgG test is usually performed at 12-24 hours after nursing, if the foal is lacking an appropriate level of IgG (antibodies passed from the colostrum) then it is very susceptible to infection. If at the on the IgG is determined to be low, IgG rich plasma can be given intravenously to supplement the foal and therefore prevent infection. An examination is important to identify any problems with the foal either congenital or acquired during foaling. Ensure you save the placenta for evaluation at this same time.

Allow the mare and foal to bond.

Remember it is very important, especially in maiden mares, to allow the mare and foal time to bond. If a maiden mare has been too disturbed she may reject her foal. Sometimes it is more important to allow uninterrupted bonding time then to strictly adhere to the umbilical care, etc. guidelines. Use common sense when you do decide to dip the umbilicus or give the enema, go in the stall quietly, no more than 2-3 people (one holding the mare, one holding the foal, and one performing the task) should be in the stall, perform the task and leave the stall. Admire the baby from a distance until they have established a strong bond. Never separate the foal from the mare (unless the mare is trying to physically harm the foal) and always allow the mare to see the foal near her head if you are handling the foal. If you are unfamiliar with foaling mares use caution – an otherwise quiet, gentle mare may become very protective of her newborn foal.

Interfere if necessary!

Reasons to interfere with the newborn after birth:

- If the foal is completely expelled and the amniotic sac has not torn, tear the membranes away from the nose and face of the foal to prevent asphyxia.
- If the amniotic sac has torn normally do not intervene. The foal will initially have a series of gasps with neck arching usually 30 seconds after delivery that quickly develops into a fast but regular breathing pattern. Intervention is not necessary unless the foal fails to become sternal (sit upright) within 5 minutes and/or has a low, labored respiratory pattern.
- Do not cut the umbilical cord. Allow it to break naturally. **Call if there is excessive bleeding from the umbilical cord after it breaks.** Do not clamp the umbilicus unless there appears to be a bleeding problem. This has been associated with a higher incidence of infection. If a clamp must be applied do not use string, use a sterile umbilical clamp/sterile hemostat.
- A normal foal usually stands by 2 hours of age and should nurse by 2-4 hours of age. **If the foal has not nursed by 4 hours of age, please call your veterinarian.**