



Mare Breeding Soundness Record

Year _____

General Information

Name _____

Breed _____ Reg # _____

Age _____ ID (tattoo, microchip) _____

Body condition score: _____ Weight (loss/gain) _____

Purchase date: _____

Performance History (previous use, intended use): _____

Management (feeding, exercise, etc) _____

Health History

Conformation		Comments
Hoof & Leg abnormalities	☐ acceptable ☐ unacceptable	
Joint disorders	☐ acceptable ☐ unacceptable	
Pelvic injuries/ abnormalities	☐ acceptable ☐ unacceptable	
Teeth (over/under shot jaw)	☐ acceptable ☐ unacceptable	
Genetic disorders: Hyperkalemic periodic paralysis (HYPP), overo lethal white syndrome (OLWS), Glycogen branching enzyme deficiency (GBED), Severe combined immunodeficiency (SCID), Junctional epidermolysis bullosa (JEB)	☐ acceptable ☐ unacceptable	
Other diseases with genetic origin to consider: Polysaccharide storage myopathy (PSSM), Degenerative suspensory ligament desmitis (DSL), Recurrent exertional rhabdomyolysis (RER), Hyperelastosis cutis (HC), Hereditary equine regional dermal asthenia (HERDA), Laryngeal hemiplegia (roaring)		

Vaccination History:

Encephalomyelitis (EEE,WEE, VEE)				
Influenza				
Tetanus Toxoid				
Rhinopneumonitis (EHV-1, EHV-4)				
Strangles (Strep, equi)				
Rabies				
EVA				
Other: Botulism, Potomac Horse Fever (PHF), Rotavirus				

Dental History: _____

Serological testing (Coggins, EVA etc.) _____

Disease/ Illness History:	Date	Comment
Accidents		
Lameness		
Laminitis		
Colic		
Cushing's disease/ Metabolic syndrome		
EVA, abortions		

Surgical History: _____

Reproductive History

Age at 1st heat _____ Age 1st breeding _____ # pregnancies _____

Interval between heats: _____ Length of heat _____

Year: _____ Outcome _____

Teasing method: _____

Breeding dates: _____

Breeding Method (pasture, hand breeding, AI): _____

External genitalia exam: _____

Palpation / Ultrasound Results: Date: _____

Foaling date: _____ ☐ normal ☐ assisted #cycles/ conception _____

Mothering ability/ milk production: _____

Year: _____ Outcome _____

Teasing method: _____

Breeding dates: _____

Breeding Method (pasture, hand breeding, AI): _____

External genitalia exam: _____

Palpation / Ultrasound Results: Date: _____

Foaling date: _____ ☐ normal ☐ assisted #cycles/ conception _____

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