Louisa Veterinary Clinic P.C.

Basic Horse Vaccination Protocol

High Risk Equine- Large numbers of horses on the farm or they leave the farm for shows or trail rides.

Low Risk Equine- Couple horses on the farm that never leaves the farm, with other horses nearby.

* Please discuss your specific situation with the Veterinarian on staff.
* Too many vaccines should not all be given at same time for best results.
* West Nile Vaccine should be given in April

**Foals:**

 High Risk:

Birth: Tetanus Antitoxin

 8 weeks: Strangles Vaccine, West Nile

 10 weeks: Strangles booster

 12 weeks: Eastern/Western Encephalomyelitis and Tetanus

 Influenza, Rhinopneumonitis, West Nile

 16 weeks: Influenza, Rhinopneumonitis, Rabies, West Nile

 24 weeks: West Nile

 Low Risk:

 Birth: Tetanus Antitoxin

 12 weeks: Eastern/Western Encephalomyelitis and Tetanus

 West Nile

 16 weeks: Rabies and West Nile

 24 weeks: West Nile

**Yearlings and two year olds:**

 High Risk:

 Yearly: Eastern/Western Encephalomyelitis and Tetanus

 Influenza, Rhinopneumonitis, Rabies, Strangles, West Nile

 Low Risk:

 Yearly: Eastern/Western Encephalomyelitis and Tetanus

 Rabies and West Nile

**Mares, breeding:**

 Yearly: Eastern/Western Encephalomyelitis and Tetanus

 Influenza, Rhinopneumonitis, Rabies, Strangles, West Nile

 3, 5, 7, 9 months of pregnancy:

 Rhinopneumonitis (should alternate between live and killed vaccine approved for pregnant mares.)

**Stallions Standing at Stud:**

 Yearly: Eastern/Western Encephalomyelitis and Tetanus

 Influenza, Rhinopneumonitis, Rabies, Strangles, West Nile

**Gelding and Open Mares:**

 High Risk:

 Yearly: Eastern/Western Encephalomyelitis and Tetanus

 Rabies, West Nile, Influenza, Rhinopneumonitis

 Low Risk:

 Yearly: Eastern/Western Encephalomyelitis and Tetanus

 Rabies and West Nile