

Care and Management of the Newborn Foal

The First 48 Hours of Life

The first two days of a foal's life are critical. Careful observation, prompt intervention when needed and knowing what is normal versus abnormal can make the difference between a healthy start and a life-threatening emergency.

1. Immediately After Birth (0–2 Hours)

Normal Events and Behaviour

- * Foal begins breathing within 30 seconds
- * Foal makes strong respiratory efforts; may cough or sneeze
- * Foal attempts to sit sternal (upright on chest) within 5 minutes
- * Mare nickers, licks foal, shows interest
- * Umbilical cord breaks naturally when mare or foal moves

Normal Parameters

- * Respiratory rate: 30–40 breaths/min initially (may be irregular at first)
- * Heart rate: 80–120 bpm at birth then decreases over a few hours to 40–80 bpm
- * Mucous membranes: Pink, moist
- * Temperature: 37.5–38.9°C (99.5–102°F)

Management

- * Allow quiet bonding time; avoid unnecessary interference
- * Ensure airway is clear (remove membranes from nose/mouth if needed)
- * Dip the umbilical stump in 0.5% chlorhexidine, 1% povidone-iodine or 2% iodine solution for several seconds; repeat 2–3 times in first 24 hours
- * Ensure foal is dry and warm (especially in cold or wet conditions)

Be Concerned If:

- * Foal does not breathe within 30–60 seconds
- * Weak or gasping respirations
- * Foal remains flat on side and does not attempt to sit upright
- * Blue, purple, or very pale gums

Call the Vet Immediately If:

- * No breathing or heartbeat
- * Severe weakness or unresponsiveness
- * Obvious deformities affecting breathing or standing

2. Standing and Nursing (2–6 Hours)

Normal Behaviour

- * Foal attempts to stand within 30 minutes
- * Successfully stands by 1–2 hours
- * Nurses by 2 hours (no later than 3 hours)
- * Nurses frequently (every 20–30 minutes)

Normal Parameters

- * Suckle reflex: Strong and coordinated
- * Urination: Within first 8–10 hours
- * Meconium passage: Within 3–4 hours

Management

- * Observe quietly to ensure foal finds the udder and latches correctly
- * Check mare's udder for milk/colostrum
- * Ensure foal swallows while nursing (listen/feel)
- * Monitor for straining or discomfort when passing meconium

Be Concerned If:

- * Foal cannot stand by 2 hours
- * Foal stands but cannot coordinate nursing

- * Repeated unsuccessful attempts to latch
- * Tail swishing, straining, or colic signs (meconium retention)

Call the Vet If:

- * Foal has not nursed by 3 hours
- * Meconium not passed by 12 hours
- * Foal shows abdominal pain, rolling, or repeated straining
- * Mare has no milk or has a painful udder

3. First 12–24 Hours

Normal Behaviour

- * Bright, curious, responsive
- * Alternates between nursing and sleeping
- * Nurses 4–7 times per hour
- * Bonds strongly with mare

Normal Parameters

- * Heart rate: 80–100 bpm
- * Respiratory rate: 20–40 breaths/min
- * Temperature: 37.5–38.9°C (99.5–102°F)
- * Gums: Pink and moist
- * Capillary refill time: <2 seconds

Critical Management Tasks

- * IgG (passive transfer) test at 12–24 hours
- * Continue umbilical stump care
- * Observe joints for swelling or heat
- * Monitor manure and urine output

Be Concerned If:

- * Foal becomes dull, weak, or isolates
- * Diarrhoea (mild “foal heat diarrhoea” usually occurs later, around 5–10 days)
- * Swollen, painful joints
- * Cloudy eyes or nasal discharge
- * Umbilical stump is swollen, wet, or painful

Call the Vet If:

- * IgG is low or unknown
- * Fever (>39°C / 102°F) or low temperature (<37.2°C / 99°F)
- * Signs of infection, lameness, or joint swelling
- * Foal stops nursing or becomes weak

4. 24–48 Hours

Normal Behaviour

- * Strong, coordinated movement
- * Curious, playful short bursts
- * Consistent nursing pattern
- * Normal bonding with mare

Normal Parameters

- * Heart rate: 70–100 bpm
- * Respiratory rate: 20–30 breaths/min
- * Temperature: Stable within normal range

Management

- * Turnout in a clean, safe, small paddock if weather and footing allow
- * Continue daily umbilical checks
- * Monitor mare for retained placenta or post-foaling complications
- * Maintain a clean, dry environment

Be Concerned If:

- * Foal becomes lethargic or weak
- * Reduced nursing frequency
- * Lameness or reluctance to move
- * Persistent diarrhoea
- * Swollen navel or discharge

Call the Vet If:

- * Any sudden change in behaviour or appetite
- * Signs of septicaemia (dullness, fever, weakness)
- * Lameness or joint swelling
- * Umbilical infection suspected

Key Rule for Owners

A healthy foal is bright, curious, stands easily, and nurses often.

Any foal that is weak, dull, not nursing, or has an abnormal temperature should be treated as an emergency.

When in doubt, call your Vet early—newborn foals can deteriorate rapidly, but early treatment is often very successful.