

## 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

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**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.