

Horse Name:

Contact Information	Description
Microchip #:	Breed:
Owner:	Color:
Owner Tel:	Gender:
Veterinarian:	Year of Birth:
Veterinarian Tel:	Brand/Tattoo:
Farrier:	Markings:
Farrier Tel:	

Normal Values: Temperature: _____ Heart Rate: _____ Respiratory Rate: _____

[Typical Horse Norms: Temp. 99-101.5°F | Heart 28-44 beats/min | Respiratory 820 breaths/min]

Medical Information	Dates of Last Vaccinations
Allergies:	Tetanus: Rabies:
Medical Conditions:	Flu/Rhino: West Nile:
	Strangles: EWT:
Medications:	Other:
	Adverse Reactions:
Date of Last Deworming:	

Supplements:

Feed/Hay:



STEINBECK★PENINSULA

EQUINE CLINICS

steinbeckpeninsulaequine.com

Monterey Bay/Salinas Area:

15881 Toro Hills Avenue, Salinas, CA 93908 | (831) 455-1808

San Francisco Bay Area:

100 Ansel Lane, Menlo Park, CA 94028 | (650) 854-3162

At the Portola Valley Training Center

EMERGENCY MOBILE SERVICE + CLINICS: 24/7/365