ECHO RIDGE VETERINARY HOSPITAL

Clinical Animal Nutrition Survey© for Equine

A System Approach to Identifying Vitamin and Mineral Imbalances and Organ Distress

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NAME _____ AGE _____ SEX _____OWNER _____ DATE _____

*Put a number in the box in front of the symptom **only if it applies** to your horse. LEAVE BLANK if it does not apply.*
1 = mild or not very often. 2 = moderate or somewhat frequent. 3 = severe or constantly happening.

GROUP ONE - SYMPATHETIC					
	High anxiety		Stall walker or wall banger		Sweat patterns on neck
	Keyed up, fails to calm, nervous		Can be aggressive		Doesn't like being left behind others
	Can get diarrhea with any stress		Cribber		Get upset with routine change
	Unable to relax, startles easily		Often gets skin welts or eruptions		Head shaking
			SCORE: Add all columns =		Score divided by 36 X 100 = %

GROUP TWO - PARASYMPATHETIC					
	Joint stiffness		Subject to infections		Poor circulation, sensitive to cold
	Ringbone		Eyes or nose watery		Low thyroid function
	Low energy, sluggish		Frequently eats dirt		Tends to be overweight
	Slow starter, slow mover		Dry to lose droppings, alternating		Weak muscle tone
			SCORE: Add all columns =		Score divided by 36 X 100 = %

GROUP THREE – CARBOHYDRATE METABOLISM, SUGAR HANDLING					
	Trembles, episodes of weakness		Urinating large amounts		Insulin resistance
	Crested neck		Passes a lot of gas		Behavior changes
	Distended abdomen		Poor metabolism		Increased water consumption
	Decreased willingness to move out		Cannot lose weight even with diet		Overweight

	SCORE: Add all columns =	Score divided by 36 X 100 = %

GROUP FOUR – CARDIO RESPIRATORY					
	Exercise intolerance		Swelling in legs		Coughs with some regularity
	Significant loss of muscle mass		Seems disoriented at times		Difficulty breathing
	Weak spells		Rear legs tremble, weak		Shortness of breath
	Rapid pounding heart		Abdominal distension		Has had pneumonia more than once
			SCORE: Add all columns =		Score divided by 36 X 100 = %

GROUP FIVE – LIVER					
	Gas		Allergies		Crusty lip sores
	Manure watery or diarrhea		Generally itchy		Elevated cholesterol, triglycerides
	Appears bloated		Change in appetite		Elevated liver enzymes, lipase
	Lethargic, depressed, restless		Has frequently been on antibiotics		Itching, red or squinting eyes
	Increased shedding		On a drug for long time		Rubs at ears or face
			SCORE: Add all columns =		Score divided by 45 X 100 = %

GROUP SIX - DIGESTION					
	Cribber		History of colic		Quality of hay or grain questionable
	Goes off feed when stressed		Recurrent diarrhea		Recurrent intestinal parasites
	Odd colored manure		Odd odor to stool		Poor coat
	Stomach distress common		Chews to one side		Drops food and doesn’t eat it
			SCORE: Add all columns =		Score divided by 36 X 100 = %

GROUP SEVEN – A – Thyroid Glands					
	Increased shedding		Oily, greasy coat, body odor		Depression, mentally dull
	Thinning, sparse coat, bald spots		Weak pulse		Exercise intolerant
	Dry, scaly skin		Elevated blood cholesterol		Back/neck problems
	Obese or can't lose weight		Weak ligaments		Increased pigment to skin
			SCORE GROUP SEVEN A: Add all columns =		Score divided by 36 X 100 = %

GROUP SEVEN – B – Pituitary Gland					
	Adrenal or thyroid dysfunction		Weight gain around rear end, fat pads		Abnormal heat cycles in mares
	Abnormal thirst		Cresty neck		Pigment spots to skin
			SCORE GROUP SEVEN B: Add all columns =		Score divided by 18 X 100 = %

GROUP SEVEN – C – Adrenal Glands, Hyperactive					
	Excessive water consumption		Breathes heavy with little exercise		Muscles seem weak
	Increased urination		Lethargic		Distended abdomen
	Thin skin		Overweight		Change in behavior or attitude
	Decline in arthritic symptoms		Weak topline		Doesn't shed out in spring
			SCORE GROUP SEVEN C: Add all columns =		Score divided by 36 X 100 = %

GROUP SEVEN – D – Adrenal Glands, Hypoactive					
	Weakness		Slow heart		Intermittent anorexia
	Depression		Weak pulse		Has collapsed for unknown reason

	SCORE GROUP SEVEN D: Add all columns =	Score divided by 18 X 100 = %

GROUP EIGHT – Musculoskeletal (Calcium / Magnesium Metabolism)					
	Greater than 15 years		Difficulty getting up and down		Laminitis
	History of any joint injury / surgery		Arthritic, degenerative joint disease		Knees over in front
	Back or neck problems		Splint injury		Recurrent sprains or strains
	Bone spurs or enlarged joints		Ringbone		Poor hooves
		SCORE GROUP EIGHT: Add all columns =			Score divided by 36 X 100 = %

GROUP NINE - Renal					
	Abnormal or frequent urination		History of bladder stones		Leaking urine
	History of bladder infections		High blood calcium or phosphorus		Swollen penis
	Reduced renal function		Elevated vitamin D level		Prostate enlarged
		SCORE GROUP NINE: Add all columns =			Score divided by 27 X 100 = %

GROUP TEN – Immune					
	Increased shedding, poor quality fur		Skin crawls when being touched		Frequent or recurrent infections
	Red bumps to skin		Vaccinated regularly		Dental issues, infected tooth
	Scabs, sores, or crusts to skin or ears		Warts or history of		History of Lyme, EPM or other organisms
	Dandruff, flaking		Has had cancer of some kind		Experienced a vaccine reaction
			SCORE GROUP TEN: Add all columns =		Score divided by 36 X 100 = %

GROUP ELEVEN – Pain					
	Lameness, abnormal gait		Just stands in one spot		Wobbly
	Withdrawn		Grinding teeth		Shifting weight off area of body
	Reluctant to move		Change in mood		Decreased appetite
	Dislike or intolerance of handling		Hunched back or sway back		Restlessness; pacing
	Overall activity less than normal		Groaning, moaning, grunting		Lower or tilted head or ears
	Looks depressed		Weeping, red, cloudy, squinting eyes		Temperamental
	Hanging or tucked tail, won't swish		Heavy breathing, increased heart rate		Avoids or can't square up
	Cribbing, wall banging, stall walking		Licking inanimate objects (can often be a sign of intestinal pain)		
			SCORE GROUP ELEVEN: Add all columns =		Number divided by 69 X 100 = %

SCORE / TALLY	
Primary Group:	%
Secondary Group:	%
Tertiary Group:	%

IMPORTANT

TO THE OWNER: Please list below the five main physical and or health complaints for this equine in order of importance:

1. _____
2. _____
3. _____
4. _____
5. _____

OTHER COMMENTS YOU WOULD LIKE TO MAKE:

DIET BEING FED (Including all supplements):