

Disease	Description	Vaccination
West Nile Virus	Viral disease transmitted to horses via bite of infected mosquito. Clinical signs include lack of coordination, stumbling, loss of appetite, fever, muscle twitching, partial paralysis and neurological signs that may include head pressing, inability to stand up, convulsions and possibly death.	4 - 5 months of age for primary immunization booster 3 - 4 weeks after primary
Influenza	Highly contagious viral disease; considered the most economically important respiratory disease in horses. Clinical signs include fever (102.5 to 106.5 degrees F), frequent dry cough, nasal discharge, dehydration, lethargy, anorexia and possibly secondary bacterial pneumonia.	4 - 5 months of age for primary immunization 3-dose series for IM vaccines single dose for IN vaccines
Rotavirus A	Equine rotavirus is transmitted via fecal-oral contamination, and damages the tips of villi in the small intestine resulting in cellular destruction, maldigestion, malabsorption, and diarrhea. Little value to vaccinate foals because insufficient time to develop antibodies to protect during susceptible age.	Recommend only if there is a high risk of disease on the farm. Vaccinate mares at 8, 9 and 10 months of gestation, each pregnancy. Passive transfer of colostral antibodies aid in prevention of rotaviral diarrhea in foals.
Eastern, Western and Venezuelan Encephalomyelitis	Viral disease transmitted to horse via bite of infected mosquito. Clinical signs include loss of appetite, fever and neurological signs that may include head pressing and blindness.	4 - 5 months of age for primary immunization booster 3 - 4 weeks after primary and again 3 months after second booster in high risk areas vaccination can begin at 3 - 4 months of age followed by 3 additional doses.

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Tetanus	Caused by bacteria found in environment. Enters via penetrating wounds or umbilicus. Causes rigid paralysis and spasms of muscles, including jaw muscles. Often the horse has an anxious expression and may react to noises or movement with spasms or convulsions.	4 - 5 months of age for primary immunization booster 3 - 4 weeks after primary and again 3 months after first booster.
EHV-1 & EHV-4 (Rhinopneumonitis)	Highly contagious viral disease. Respiratory signs include fever, depression, loss of appetite, and nasal discharge. Majority of affected horses establish latent infections, which can be reactivated when the horse is stressed.	4 - 5 months of age for primary immunization booster 3 - 4 weeks after primary and again 3 months after first booster
Rabies	Contracted from the bite of a rabid animal. Affected horses may exhibit colic, lameness, muscle incoordination, incontinence, muscle spasms and paralysis, blindness and depression. Death follows within 3 - 5 days.	4 - 5 months of age for primary immunization booster 3 - 4 weeks after primary
Potomac Horse Fever	Bacterial disease linked to freshwater sources. Severity of clinical signs varies greatly. Most horses develop a fever accompanied by depression, loss of appetite, diarrhea and colic. Some horses founder.	4 - 5 months of age for primary immunization booster 3 - 4 weeks after primary. Vaccinate if disease is endemic in area.
Strep. Equi (Strangles)	Highly contagious bacterial disease. Common clinical signs are swollen lymph nodes, anorexia, fever, nasal discharge and difficulty swallowing. The swollen lymph nodes (especially in the throat area) may abscess.	4 - 5 months of age for primary immunization booster 3 - 4 weeks after primary. Vaccinate only if there is increased risk of disease.