Information Sources for and Providers of Equine Health Care, 2015

As part of the U.S. Department of Agriculture’s National Animal Health Monitoring System’s (NAHMS) Equine 2015 study, data were collected regarding equine health and management practices from a representative sample of operations with 5 or more equids in 28 States within 4 regions (see map below). The 28 States represented 71.8 percent of all equids in the United States and 72.1 percent of all U.S. farms with equids. The 28-State target population represented 71.6 percent of all equids on farms with 5 or more equids and 70.9 percent of farms with 5 or more equids in the United States.

More detailed information on the study design and sampling methodology is available in NAHMS Equine 2015 tabular summary report at http://www.aphis.usda.gov/nahms.

During the study, equine owners or operators were asked to rate the importance of various sources of information related to equine health care. Overall, veterinarians were a source of information for making equine health care decisions on 79.8 percent of operations (figure 1). Other health care information sources commonly consulted were farriers (65.2 percent of operations), other equine owners (34.6 percent), feed/veterinary supply store personnel (33.6 percent), and equine magazines/books (33.0 percent).

Private veterinarians were the primary resource for equine health care decisions on the majority of operations (70.7 percent). Veterinarians were relied on not only for health care information but also for the services they provide. Overall, 78.7 percent of operations used the services of a veterinarian at least once in the previous 12 months.

General services provided by veterinarian

Just under one-half of all operations (46.4 percent) used a veterinarian for individual-animal diagnoses or treatments. Other common services included administration of or consultation on vaccines, providing drugs or vaccines, providing diagnostic testing, and dentistry (figure 2).

Approximately three-fourths of large operations (20 or more equids) [76.5 percent] used a veterinarian at least once in the last 12 months for individual-animal diagnosis or treatment compared with only 37.0 percent of small operations (5 to 9 equids). A higher percentage
of large operations used a veterinarian for each of the services listed in figure 2, which might be because large operations have more animals to care for or it might be a reflection of the primary use of equids on those operations. Overall, only 6.2 percent of operations used a veterinarian to perform a biosecurity assessment.

### Primary dental care provider

The majority of operations (59.7 percent) provided dental care to resident equids.\(^1\) Of these operations, the highest percentage used a veterinarian to provide dental care. An equine dentist who was not a veterinarian was the primary provider of dental care for resident equids on 16.9 percent of operations (figure 3). A higher percentage of operations with a primary function of equine boarding stable/training, riding stable, or equine breeding provided dental care to resident equids compared with operations with a primary functions of farm/ranch or residence with equids for personal use.

### Hoof care provider

Over 90 percent of operations (92.7 percent) had provided hoof care for resident equids. Overall, 60.0 percent of operations used a hired farrier to provide hoof care for resident equids and 26.2 percent used operation personnel.

### Conclusion

Equine facility owners or operators rely on veterinarians to provide health care information; however, study results revealed the potential for growth in the services provided by veterinarians, such as herd consultations in nutrition, biosecurity assessments for large operations, and nearly all services for small operations. Over one-half of operations used a hired farrier to provide equine hoof care, while over one-fourth had operation personnel do the hoof care.

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\(^1\)For this study, a resident equid was defined as an equid that spent or was expected to spend more time on the operation than on any other operation.