

VACCINATIONS FOR ADULT HORSES

ALL VACCINATION PROGRAMS SHOULD BE DEVELOPED IN CONSULTATION WITH A LICENSED VETERINARIAN

DISEASE	Broodmares	Other Adult Horses (> 1 year of age) <i>previously vaccinated against the disease indicated</i>	Other Adult Horses (> 1 year of age) <i>unvaccinated or lacking vaccination history</i>	COMMENTS
Equine Herpesvirus (EHV)	3-dose series with product labeled for protection against EHV abortion. Give at 5, 7 and 9 months of gestation.	Annual (see comments)	3-dose series: <ul style="list-style-type: none"> • 2nd dose 4-6 weeks after 1st dose. • 3rd dose 4-6 weeks after 2nd dose. 	Consider 6-month revaccination interval for: <ul style="list-style-type: none"> • Horses less than 5 years of age. • Horses on breeding farms or in contact with pregnant mares. • Performance or show horses at high risk.
Equine Viral Arteritis (EVA)	Not recommended unless high risk.	Annual <i>Stallions, teasers:</i> Vaccinate 2-4 weeks before breeding season. <i>Mares:</i> Vaccinate when open.	Single dose (See comments)	<u>Prior to initial vaccination, intact males and any horses potentially intended for export should undergo serologic testing</u> and be confirmed negative for antibodies to EVA. Testing should be performed shortly prior to, or preferably at, the time of vaccination.
Influenza	<i>Previously vaccinated:</i> <u>Inactivated vaccine:</u> Semi-annual with one dose administered 4 - 6 weeks pre-partum. <u>Canary pox vector vaccine:</u> Semi-annual with one dose administered 4 - 6 weeks pre-partum. <i>Previously unvaccinated or having unknown vaccination history:</i> <u>Inactivated vaccine:</u> 3-dose series <ul style="list-style-type: none"> • 2nd dose 4 - 6 weeks after 1st dose. • 3rd dose 4 - 6 weeks pre-partum. <u>Canary pox vector vaccine:</u> 2-dose series <ul style="list-style-type: none"> • 2nd dose 4 - 6 weeks after 1st dose but no later than 4 weeks pre-partum 	Horses with ongoing risk of exposure: Semi-annual. Horses at low risk of exposure: Annual.	<u>Modified live vaccine:</u> Single dose administered intranasally. Revaccinate semi-annually to annually. <u>Inactivated vaccine:</u> 3-dose series <ul style="list-style-type: none"> • 2nd dose 4 - 6 weeks after 1st dose. • 3rd dose 3 - 6 months after 2nd dose. Revaccinate semi-annually to annually. <u>Canary pox vector vaccine:</u> 2-dose series <ul style="list-style-type: none"> • 2nd dose 4 - 6 weeks after 1st dose. Revaccinate semi-annually.	
Potomac Horse Fever (PHF)	<i>Previously vaccinated:</i> Semi-annual, with one dose given 4 - 6 weeks pre-partum. <i>Previously unvaccinated or having unknown vaccination history:</i> 2-dose series <ul style="list-style-type: none"> • 1st dose 7-9 weeks pre-partum. • 2nd dose 4-6 weeks pre-partum. 	Semi-annual to annual	2-dose series 2 nd dose 3-4 weeks after 1 st dose. Semi-annual or annual booster	A revaccination interval of 3 - 4 months may be considered in endemic areas when disease risk is high.
Rotavirus	3-dose series <ul style="list-style-type: none"> • 1st dose at 8 months gestation. • 2nd and 3rd doses at 4-week intervals thereafter. 	Not applicable	Not applicable	
Strangles <i>Streptococcus equi</i>	<i>Previously vaccinated:</i> <u>Killed vaccine containing M-protein:</u> Semi-annual with one dose given 4 - 6 weeks pre-partum. <i>Previously unvaccinated or having unknown vaccination history:</i> <u>Killed vaccine containing M-protein:</u> 3-dose series <ul style="list-style-type: none"> • 2nd dose 2 - 4 weeks after 1st dose. • 3rd dose 4 - 6 weeks pre-partum. 	Semi-annual to annual	<u>Killed vaccine containing M-protein:</u> 2-3 dose series <ul style="list-style-type: none"> • 2nd dose 2 - 4 weeks after 1st dose. • 3rd dose (where recommended by manufacturer) 2 - 4 weeks after 2nd dose. Revaccinate semi-annually. <u>Modified live vaccine:</u> 2-dose series administered intranasally. 2 nd dose 3 weeks after 1 st dose. Revaccinate semi-annually to annually.	Vaccination is <u>not</u> recommended as a strategy in outbreak mitigation.

VACCINATIONS FOR ADULT HORSES

ALL VACCINATION PROGRAMS SHOULD BE DEVELOPED IN CONSULTATION WITH A LICENSED VETERINARIAN

DISEASE	Broodmares	Other Adult Horses (> 1 year of age) <i>previously vaccinated against the disease indicated</i>	Other Adult Horses (> 1 year of age) <i>unvaccinated or lacking vaccination history</i>	COMMENTS
Equine Herpesvirus (EHV)	<p>3-dose series with product labeled for protection against EHV abortion.</p> <p>Give at 5, 7 and 9 months of gestation.</p>	Annual (see comments)	<p>3-dose series:</p> <ul style="list-style-type: none"> • 2nd dose 4-6 weeks after 1st dose. • 3rd dose 4-6 weeks after 2nd dose. 	<p>Consider 6-month revaccination interval for:</p> <ul style="list-style-type: none"> • Horses less than 5 years of age. • Horses on breeding farms or in contact with pregnant mares. • Performance or show horses at high risk.
Equine Viral Arteritis (EVA)	Not recommended unless high risk.	<p>Annual</p> <p><i>Stallions, teasers:</i> Vaccinate 2-4 weeks before breeding season.</p> <p><i>Mares:</i> Vaccinate when open.</p>	Single dose (See comments)	<p><u>Prior to initial vaccination, intact males and any horses potentially intended for export should undergo serologic testing</u> and be confirmed negative for antibodies to EVA. Testing should be performed shortly prior to, or preferably at, the time of vaccination.</p>
Influenza	<p><i>Previously vaccinated:</i> <u>Inactivated vaccine:</u> Semi-annual with one dose administered 4 - 6 weeks pre-partum. <u>Canary pox vector vaccine:</u> Semi-annual with one dose administered 4 - 6 weeks pre-partum.</p> <p><i>Previously unvaccinated or having unknown vaccination history:</i> <u>Inactivated vaccine:</u> 3-dose series</p> <ul style="list-style-type: none"> • 2nd dose 4 - 6 weeks after 1st dose. • 3rd dose 4 - 6 weeks pre-partum. <p><u>Canary pox vector vaccine:</u> 2-dose series</p> <ul style="list-style-type: none"> • 2nd dose 4 - 6 weeks after 1st dose but no later than 4 weeks pre-partum 	<p>Horses with ongoing risk of exposure: Semi-annual.</p> <p>Horses at low risk of exposure: Annual.</p>	<p><u>Modified live vaccine:</u> Single dose administered intranasally. Revaccinate semi-annually to annually.</p> <p><u>Inactivated vaccine:</u> 3-dose series</p> <ul style="list-style-type: none"> • 2nd dose 4 - 6 weeks after 1st dose. • 3rd dose 3 - 6 months after 2nd dose. <p>Revaccinate semi-annually to annually.</p> <p><u>Canary pox vector vaccine:</u> 2-dose series</p> <p>2nd dose 4 - 6 weeks after 1st dose. Revaccinate semi-annually.</p>	
Potomac Horse Fever (PHF)	<p><i>Previously vaccinated:</i> Semi-annual, with one dose given 4 - 6 weeks pre-partum.</p> <p><i>Previously unvaccinated or having unknown vaccination history:</i> 2-dose series</p> <ul style="list-style-type: none"> • 1st dose 7-9 weeks pre-partum. • 2nd dose 4-6 weeks pre-partum. 	Semi-annual to annual	<p>2-dose series</p> <p>2nd dose 3-4 weeks after 1st dose.</p> <p>Semi-annual or annual booster</p>	A revaccination interval of 3 - 4 months may be considered in endemic areas when disease risk is high.
Rotavirus	<p>3-dose series</p> <ul style="list-style-type: none"> • 1st dose at 8 months gestation. • 2nd and 3rd doses at 4-week intervals thereafter. 	Not applicable	Not applicable	
Strangles <i>Streptococcus equi</i>	<p><i>Previously vaccinated:</i> <u>Killed vaccine containing M-protein:</u> Semi-annual with one dose given 4 - 6 weeks pre-partum.</p> <p><i>Previously unvaccinated or having unknown vaccination history:</i> <u>Killed vaccine containing M-protein:</u> 3-dose series</p> <ul style="list-style-type: none"> • 2nd dose 2 - 4 weeks after 1st dose. • 3rd dose 4 - 6 weeks pre-partum. 	Semi-annual to annual	<p><u>Killed vaccine containing M-protein:</u> 2-3 dose series</p> <ul style="list-style-type: none"> • 2nd dose 2 - 4 weeks after 1st dose. • 3rd dose (where recommended by manufacturer) 2 - 4 weeks after 2nd dose. <p>Revaccinate semi-annually.</p> <p><u>Modified live vaccine:</u> 2-dose series administered intranasally.</p> <p>2nd dose 3 weeks after 1st dose. Revaccinate semi-annually to annually.</p>	Vaccination is <u>not</u> recommended as a strategy in outbreak mitigation.