

Thermal Imaging History Form

Owners Name:

Horses Name:

Date:

Breed/Colour:

Age:

Horses Main Purpose:

Medial History:

Describe the current problem and give date of onset of problem:

What physical changes did you notice? Was it sudden or slow?

Does your saddle fit or has it been checked recently?

When was your horses teeth done?

Other injuries or problems in the last 2-3 years:

Present medications, dosages and duration of treatment:

Major surgeries of illnesses and approximate dates:

Does the horse wear paddock boots?

Does the horse wear exercise boots when worked?

Any genetic problems seen in this sire or dam? What? How many affected?

Any family weakness?

Any x-rays or scans, if so what did they show?

Any body work and what did the therapist find and work on?

Training History

Give approximate training schedule for 4-6 weeks before onset of problem, including amount of work days or time off. What ground surfaces worked on.

Describe exercise done by horse in the 24 hours before imaging.

Describe the horses diet included all supplements and feed.

How much grass do they get, describe type of grass:

Time on the grass?

What sort of grass?

Are they break feed?

Daily?

How much space?

Are they stabled?

What length of time in stable?

Any liniment or body washed used on the horse in the last 3 days – if so please list as can make a difference to temperature of legs.