

AAEP Guidelines for Vaccination of Horses

The schedule below is a suggested vaccination schedule provided by the American Association of Equine Practitioners and is based on generally accepted veterinary practices. These guidelines are neither regulations nor directives for all situations and shouldn't be interpreted as such. It's the responsibility of attending veterinarians, through an appropriate veterinarian-client-patient relationship, to utilize this information coupled with available products to determine the best professional care for their patients. For a complete discussion of vaccination guidelines, please see the AAEP resource guide, *Guidelines of Vaccination of Horses*. **Consult with your veterinarian regarding the specific needs of your horse.**

Disease/Vaccine	Foals/Weanlings	Yearlings	Performance Horses	Pleasure Horses	Broodmares	Comments
West Nile virus	First dose: 3 to 4 months. Second dose: 1 month later (plus third dose at 6 months in endemic areas).	Annual booster, prior to expected risk. Vaccinate semi-annually or more frequently (every 4 months), depending on risk.	Annual booster, prior to expected risk. Vaccinate semiannually or more frequently (every 4 months), depending on risk.	Annual booster, prior to expected risk. Vaccinate semi-annually or more frequently (every 4 months), depending on risk.	Annual, 4 to 6 weeks prepartum (see full text in guidelines)	Annual booster is after primary series. In endemic areas, booster as required or warranted due to local conditions conducive to disease risk. Vaccinate semiannually or more frequently (every 4 months), depending on risk.
Tetanus toxoid	From nonvaccinated mare- First dose: 3 to 4 months. Second dose: 4 to 5 months. From vaccinated mare- First dose: 6 months. Second dose: 7 months. Third dose: 8 to 9 months.	Annual	Annual	Annual	Annual, 4 to 6 weeks prepartum	Booster at time of penetrating injury or surgery if last dose not administered within 6 months
Encephalomyelitis (EEE, WEE, VEE)	EEE (in high-risk areas) First dose: 3 to 4 months. Second dose: 4 to 5 months. Third dose: 5 to 6 months. WEE, EEE (in low-risk areas) and VEE from non-vaccinated mare- First dose: 3 to 4 months. Second dose: 4 to 5 months. Third dose: 5 to 6 months. From vaccinated mare- First dose: 6 months. Second dose: 7 months. Third dose: 8 months.	Annual, spring Annual, spring	Annual, spring Annual, spring	Annual, spring Annual, spring	Annual, 4 to 6 weeks prepartum Annual, 4 to 6 weeks prepartum	In endemic areas booster EEE and WEE every 6 months; VEE only needed when threat of exposure; VEE may be available only as a combination vaccine with EEE and WEE.
Influenza	Inactivated injectable from nonvaccinated mare- First dose: 6 months. Second dose: 7 months. Third dose: 8 months, then at 3-month intervals. From vaccinated mare- First dose: 9 months. Second dose: 10 months. Third dose: 11 to 12 months, then at 3-month intervals. Intranasal modified live virus- First dose: 11 months; has been safely administered to foals younger than 11 months (see comments).	Every 3 to 4 months. Every 6 months.	Every 3 to 4 months. Every 6 months.	Annual with added boosters prior to likely exposure. Every 6 months.	At least semi-annual, with 1 booster 4 to 6 weeks prepartum. Annual before breeding (see comments).	A series of at least 3 doses is recommended for primary immunization of foals. Not recommended for pregnant mares until data available. Use inactivated vaccine for prepartum booster. If first dose is administered to foals younger than 11 months of age, administer second dose at or after 11 months of age.

Disease/Vaccine	Foals/Weanlings	Yearlings	Performance Horses	Pleasure Horses	Broodmares	Comments
Rhinopneumonitis (EHV-1 and EHV-4)	First dose: 4 to 6 months. Second dose: 5 to 7 months. Third dose: 6 to 8 months, then at 3-month intervals.	Booster every 3 to 4 months up to annually.	Booster every 3 to 4 months up to annually.	Optional: semiannual if elected.	Fifth, seventh, ninth month of gestation (inactivated EHV-1 vaccine); optional dose at third month of gestation.	Vaccination of mares before breeding and 4 to 6 weeks prepartum is suggested. Breeding stallions should be vaccinated before the breeding season and semiannually.
Strangles	Injectable- First dose: 4 to 6 months. Second dose: 5 to 7 months. Third dose: 7 to 8 months (depending on the product used). Fourth dose: 12 months. Intranasal- First dose: 6 to 9 months. Second dose: 3 weeks later.	Semiannual	Optional: semiannual if risk is high.	Optional: semiannual if risk is high.	Semiannual with 1 dose of inactivated M-protein vaccine 4 to 6 weeks prepartum.	Vaccines containing M-protein extract may be less reactive than whole-cell vaccines. Use when endemic conditions exist or risk is high. Foals as young as 6 weeks of age may safely receive the intranasal product. A third dose should be administered 2 to 4 weeks prior to weaning.
Rabies	From nonvaccinated mare- First dose: 3 to 4 months. Second dose: 12 months. From vaccinated mare- First dose: 6 months. Second dose: 7 months. Third dose: 12 months.	Annual	Annual	Annual	Annual, before breeding.	Vaccination recommended in endemic areas. Do not use modified-live-virus vaccines in horses.
Potomac Horse Fever	First dose: 5 to 6 months. Second dose: 6 to 7 months.	Semiannual	Semiannual	Semiannual	Semiannual with 1 dose 4 to 6 weeks prepartum.	Booster during May to June in endemic areas.
Botulism	From nonvaccinated mare- See comments. From vaccinated mare- 3 dose series of toxoid at 30-day intervals starting at 2 to 3 months of age.	Consult your veterinarian.	Consult your veterinarian.	Consult your veterinarian.	Initial 3-dose series at 30-day intervals with last dose 4 to 6 weeks prepartum. Annually thereafter, 4 to 6 weeks prepartum.	Only in endemic areas. A third dose administered 4 to 6 weeks after the second dose may improve the response of foals to primary immunization. Foal from nonvaccinated mare may benefit from: 1) toxoid at 2, 4 and 8 weeks of age; 2) transfusion of plasma from vaccinated horse; or 3) antitoxin. Efficacy needs further study.
Equine Viral Arteritis	Intact colts intended to be breeding stallions: One dose at 6 to 12 months of age.	Annual for colts intended to be breeding stallions.	Annual for colts intended to be breeding stallions.	Annual for colts intended to be breeding stallions.	Annual for seronegative, open mares before breeding to carrier stallions; isolate mares for 21 days after breeding to carrier stallion.	Annual for breeding stallions and teasers, 28 days before start of breeding season; virus may be shed in semen for up to 21 days. Vaccinated mares do not develop clinical signs even though they become transiently infected and may shed virus for a short time.
Rotavirus A	Little value to vaccinate foal because insufficient time to develop antibodies to protect during susceptible age.	Not applicable.	Not applicable.	Not applicable.	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.	Check concentrations of immunoglobulins in foal to be assured that there is no failure of passive transfer.

*As with administration of all medications, the label and product insert should be read before administration of all vaccines.

Schedules for stallions should be consistent with the vaccination program of the adult horse population on the farm and modified according to risk.

EEE=Eastern equine encephalomyelitis; WEE=Western equine encephalomyelitis; VEE=Venezuelan equine encephalomyelitis; EHV-1=equine herpesvirus-1; EHV-4=equine herpesvirus-4