The benefits of this kangaroo care have resulted in a precipitous drop in premature infant deaths and neurosteroid levels and NMS and assess how these levels change in response to squeeze, which further investigations.

SERUM ELECTROLYTES AND GLUCOSE LEVELS

Studies have provided new insights into serum electrolytes and glucose levels, for example, allowing veterinarians to immediately respond to changes in these parameters. This information is crucial for the supportive therapy required in neonatal foals. Changes in these levels can indicate underlying issues such as dehydration or metabolic disorders. Regular monitoring of these levels is necessary, especially in the first few hours after birth, to ensure the foal receives appropriate care.

NEONATAL CRITICAL CARE

A NICU will be able to provide specialized equipment and expertise that a critically ill foal needs. It is essential for survival. It can occur during birth if the umbilical cord is compressed, if the placenta is functioning poorly, is infected, or is too small to support the developing fetus. It can also occur during gestation if the placenta is underdeveloped or if there are issues with the umbilical cord. In addition, other conditions can arise, such as sepsis, pneumonia, and respiratory distress, which require immediate attention.

Call your veterinarian if you observe:

- Straining to urinate: This can progress to lack of suckle reflex or attachment to the mare. It is often the first sign of a problem and should be addressed immediately.
- Abnormal mucous membrane color: This can indicate underlying health issues.
- Labored respiration: This can be an early sign of respiratory distress or pneumonia.
- Faecal urgency: This can indicate digestive issues or infections.
- Occult blood in the faeces: This can indicate gastrointestinal problems such as inflammation or bleeding.

NICU

The foal will initially display jerky, uncoordinated movement that improves with each passing hour. The foal will sit sternal with his head held up within moments of birth. He will follow the mare at a snail's pace, looking for her vulva, and will try to get in receptor position. He may even try to get in the mare's mouth. If he is not allowed to nurse, he will try to get his head inside the mare's mouth. He will also try to get his head inside the mare's mouth and will try to suckle from it. He may even try to get his head inside the mare's mouth and will try to get his head inside the mare's mouth.

Other veterinarians like Bill Thomas, DVM, Dipl. ACVIM, former chief of cardiology at the Veterinary School of Medicine, UC Davis, showed that the management of neonatal foals is a critical area for research. His main research interests related to late pregnancy and the prevention of sepsis with antimicrobials. While this is a positive advancement, caring for a sick foal is still an area in need of research to improve outcomes.

Dr. John Madigan, DVM, professor of equine medicine, described how he has seen a change in the way foals are handled. In the past, foals were often kept in isolation for the first week of life, but now they are allowed to spend time with their mothers and other foals. This change has led to better outcomes for foals and their mothers. Dr. Madigan has been involved in several studies to improve the care of neonatal foals, including the development of new antimicrobials and the use of kangaroo care.

Other veterinarians like Dr. Rossdale, DVM, PhD, Dipl. ACVIM, professor of equine medicine, have studied molecular markers of changes in normal Thoroughbred foals in the 1960s. His main research interests related to late pregnancy and the prevention of sepsis with antimicrobials. While this is a positive advancement, caring for a sick foal is still an area in need of research to improve outcomes.

Amal's Story

Dr. Madigan shared the story of Amal, a foal who was born prematurely and required special care. Amal was brought to the UC Davis NICU at 40 days of age, weighing just 46 pounds when brought to the UC Davis NICU. A healthy average foal weighs 70-80 pounds at birth, so Amal's weight was significantly lower. She was underdeveloped and had inadequate bone formation in her knees and hocks since complete ossification had not occurred. Amal was very weak and underdeveloped and required special care.

Amal's condition was diagnosed with the help of new diagnostic tools, including molecular markers of changes in normal Thoroughbred foals in the 1960s. This allowed the veterinarians to monitor her progress and make informed decisions about her care. Amal was treated aggressively with supportive therapy and was able to make a full recovery. She was discharged from the NICU after 60 days and was able to return home to her owner.

Amal's story highlights the importance of research in the field of neonatal foal care. It shows how new diagnostic tools can be used to improve outcomes for foals and their mothers. The care of neonatal foals is a complex and challenging area, but with continued research and collaboration between veterinarians, we can make significant progress in improving outcomes for these vulnerable animals.