

INSIDE OUT EQUINE HEALTH

# FAECAL EGG COUNTING FORM

Please fill out this form to provide details of the horse/s being tested. If you have multiple horses that were wormed on different dates with different worming products, please ensure I can distinguish between horses with details you provide.

**\*One owner, one form please**

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**Name**

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**Phone number**

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**Email address**

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**Postal address**

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**Date and time faecal sample collected**

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**Address horse is kept**

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**How many other horses is your horse housed with?**

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**Horse's name/s**

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**Date horse was last wormed**

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**What brand/s and type of worming product/s did you use.  
E.g. Equest plus tape / Ammo, paste / pellets**

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**Do you suspect that your horse is carrying a significant  
worm burden?**

Yes

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No

**Is your horse showing any clinical signs of carrying a worm burden? e.g. diarrhoea, weight loss, anaemia etc...**

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**I understand that the following are all limitations of FEC:**

- They do not accurately reflect the total adult strongyle or *Parascaris equorum* burden of the horse.
- They do not detect immature or larval stages of parasites including migrating large strongyles and ascarids, and/or encysted cyathostomins.
- Tapeworm infections are often missed or underestimated by faecal techniques because tapeworm egg shedding is intermittent.
- Pinworm eggs are usually missed since they are adhered as egg packets around the anus rather than being shed in the faeces.

Yes, I understand

No, I do not understand

Add this form to your express post bag containing your faecal sample, or fill out the online version at: <http://tinyurl.com/ioeh-fec-form>