

Submission form to accompany blood samples for RFM study

- Veterinary Surgeon: _____
- Stud farm or owner: _____
- Animal name: _____
- Today's date: ____/____/2024
- Age of mare (years): _____ years
- Number of previous pregnancies (if known): _____
- Previous history of RFM (circle as applicable): Yes / No / Unknown
- Category for this foaling:
(please circle option a or b below **and** state time to passage of membranes*):
 - a) Healthy control (membranes passed in <4 hours): _____hours _____minutes

or

 - b) RFM (membranes retained for > 4 hours): _____ hours _____minutes

*This is the time taken from end of second stage labour (delivery of the foal) to end of third stage labour (expulsion of the fetal membranes in entirety).
- If the placenta is visible which surface was/is uppermost or facing to the outside?
(circle a, b or c)
 - a) The dark red chorionic surface
 - b) The lighter white allantoic surface
 - c) Not possible to state or unknown
- **If RFM (>4 hours to passage) please select the nature of the retention:**
 - a) Retained in entirety
 - b) Retained partially (e.g. a tag, tip of horn or one horn left behind)
_____ (details if known)

- Hours since foaling at time of blood sample: _____ hours.
NB must be **within 24 hours** of foaling for inclusion in this study:
- For mares with RFM, have any medications been given **prior** to blood sampling?
(circle a or b)
 - a) No
 - b) Yes (please provide details) _____
- How would you describe this foaling? (circle a, b or c)
 - c) Straightforward (none or very minimal intervention required)
 - d) Dystocia (significant intervention required)
 - e) Other _____

Check list:

- | | |
|---|--------------------------|
| Green top blood tube filled to top to exclude air | <input type="checkbox"/> |
| Red top blood tube | <input type="checkbox"/> |
| Submission form completed | <input type="checkbox"/> |
| Consent form signed | <input type="checkbox"/> |

We would be grateful if you could arrange to have the labelled blood samples and submission form dropped to the lab at Anglesey Lodge Equine Hospital, ideally as soon after sampling as possible. Outside of working hours a box left at the front gate can be used for drop off. In this event, please text the intern on call phone on 0870926832 to notify of a drop off.

Sincere thanks for your help and interest in this study.