

# AAEP Equine Dental Care Guidelines



Tools to Connect to Your Clients  
and Their Horses

## Frequency of Visits

All horses should have a veterinary oral and dental examination at least annually. For horses 2-5 years, over 20 years, and those with known dental pathology, more frequent visits may be necessary. Decisions regarding specific frequency of visits should be based on the individual needs of the horse.

## Health Evaluation:

### Subjective

History, including evaluation of:

- Previous health concerns
- Breed, life stage and life style (activity level)
- General housing and management
- Current ration/diet/pasture
- Bitting and tack requirements
- Behavior/vices

### Objective

Comprehensive oral and dental examination including:

- General health assessment (TPR)
- Body condition scoring
- Extra-oral masticatory system (visual and palpation)
- Restraint and/or sedation
- Incisor and canine evaluation
- Intra-oral speculum examination (visual and palpation)



### Assessment

On the basis of history and oral and dental exam findings, assessments are made for:

- Masticatory and/or weight loss problems
- Bitting and/or headshaking issues
- Head asymmetry, draining tracts, and/or nasal discharge
- Deciduous teeth condition and exfoliation
- Incisor and/or canine problems
- Abnormal dental wear patterns
- Diastema and/or periodontal disease

*These guidelines are intended to provide information for practitioners regarding the care and treatment of their equine patients. The information contained in these guidelines should not be construed as dictating an exclusive protocol, course of treatment, or procedure.*

## Plan:

Client communication and education plan to include:

### Diagnostic plan

#### Every horse should have:

- Annual comprehensive oral and dental examination

#### Customized plan based upon:

- Age, use, and dental exam findings
- Young horses evaluated for deciduous teeth condition and exfoliation
- Radiographs for older horses suspected of having EOTRH (Equine Odontoclastic Tooth Resorption and Hypercementosis)

### Therapeutic plan

#### Every horse should have:

- Based on the yearly dental exam, routine floating of sharp points and occlusal abnormalities

#### Customized plan based upon:

- Referral information/findings
- Oral examination with mirrors, oral endoscope, dental picks and/or probes
- Upper respiratory system endoscopy
- Nasal discharge
- Extra-oral radiographs
- Intra-oral radiographs

### Prevention plan

#### Every horse should have or receive:

- Oral home hygiene
- Feeding plan, diet changes
- Tack changes or training adjustments

#### Customized plan based upon assessment:

- Flush, clean, open and/or pack diastemata
- Occlusal adjustments and odontoplasty
- Extraction of loose, decayed or retained deciduous teeth (young horses)
- Extraction of wolf teeth
- Extraction of loose, decayed and/or fractured senile teeth (geriatric horses)
- Referral for advanced diagnostics and/or specialist therapy

### Follow-up plan

- Establish plan for follow-up based upon assessment and treatment
- Recommend future care considerations
- Schedule date for next visit or reminder notice

### Documentation

- Thorough charting and documentation of patient visit should be left with the client (individualized dental chart).
- Chart should include accepted dental nomenclature and graphics so that any veterinarian can follow-up (see AAEP Proceedings Annual Convention 2010 & 2014).