PONY INJURIES – INCIDENT REPORT

Please note this report should be completed for all incidents where a horse requires medical attendance or other horse welfare reporting

EVENT:

Name of Club	
Ground	
Match Name & Handicap Level	
Teams (Players)	1. 1. 2. 2. 3. 3. 4. 4.
Umpires	
Date & Time of Incident	
Ground Condition	
Temperature	
Humidity	
Extreme Weather – actions taken (e.g. shortened chukkas etc.)	

Please insert the relevant code below:

	Code:		Code:
Sudden Death	SD	Facial Injury	FI
Fracture Fatality	FF	Soft Tissue	ST
Fracture	F	Other	O

HORSE:

Name of Owner or Player	
Name of Horse & Brands/Markings	
Injury/Incident Code *(see above table)*	
Injury Description and Comments	
Age	
Horse Condition and Body Score	
Horse Fitness Level *(early/mid/end season fitness)*	
Shoeing type -	

Description - **When shod last -**	
Any previous injuries or illness	
Distance/Time travelled to Venue	
Arrival time at ground	
Match Time	
Brief Description of how the incident occurred	
Contributing Factors:	None apparent Outside Interference Evidence of pre-existing injury Accident Surface condition Weather
Treatments/Euthanasia	
Euthanasia was performed at the event	
Horse removed by equine ambulance for assessment	
Horse referred to veterinary clinic	
Treatments	
Name of attending veterinarian/Clinic	
Other Comments or Information	

Signed:	**Name:**	**Position:**
	Date:	