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The following topics may be included in the handout along with books and references, but these topics will not be taught.

1. First Aid Kit
2. Camp Gear
3. LNT
4. Care of Tack
5. Accessory Equipment

Supplemental references and readings:

Horse Sense on National Forest Pack Trips
USDA Forest Service
P O Box 7669
Missoula, MT  59807

Mountain Manners
Back Country Horsemen of Montana
P O Box 5431
Helena, MT  59604

Ninemile Packing Clinic
Ninemile Wildlands Training Center
20325 Remount Road
Huson, MT  59846
Back Country Horsemen’s Guidebook
Back Country Horsemen
P O Box 1192
Columbia Falls, MT  59912

Horse Sense
Back Country Horsemen
P O Box 1192
Columbia Falls, MT  59912

Horse Sense for the Trail Rider
Back Country Horsemen of Washington
P O Box 191
Hobart, WA  98025

North American Trail Riding Conference
P O Box 224
Sedalia, CO  80135
1-303-688-1677

Mule and Horse Packing Clinic
Chuck Miller
926 Orchard
Hamilton, MT  59840
1-406-961-5453

Cherry Hill Packin’ In
on Mules and Horses
Smoke Elser and Bill Brown
Mountain Press Publishing Co.
P O Box 2399
Missoula, MT  59806
1-800-234-5308

Horse Packing Illustrated
Dusty Johnson
Saddleman Press
Box 909
Loveland, CO  80539

Guidelines for Horse Transportation
by Road and Air
Catherine Kohn DVM

Trailering Your Horse

http://www.horsekeeping.com
I GENERAL HORSEMANSHIP

A. Matching Ability of Horse to Rider - Selecting the right horse
1. Green Rider vs. Green Horse
2. Breed, Sex, Size, Age, Conformation (especially good withers, legs, and feet), Experience, Attitude, Manners, Gentle Disposition, Stamina, Reliable Under all Conditions
3. A proficient trail horse should be versatile, level headed, well trained, and will willingly cross water, jump a log, pony another horse, lead a pack horse, climb and descend steep slopes, wait patiently, and deal calmly with the unexpected. He should also be able to load and unload easily, stand tied quietly for extended periods of time. Accept the high line, hobbles, or picket rope.
4. Emphasize rewards and reinforcements, not punishments. Our horses can’t be willing partners if we are unclear and inconsistent with them (whipping, etc.).

B. Fitness and Conditioning
1. The horse should be calm, confident, responsive to the rider, attentive to the trail and well conditioned for the ride.
2. The horse and rider should be prepared for what lies ahead as far as obstacles and other surprises. If obstacles or terrain seem intimidating, get off and lead your horse.
3. The horse should have at least a few weeks of conditioning prior to a long or extended trip. This could include regular trail riding a few hours a day, to climbing steep mountainous trails, and pack stock carrying loads.
4. Getting to know all the horse’s quirks or particular individual characteristics when exposed to uncommon trail occurrences, such as unusual noises, sudden movement of wildlife, dogs, lamas, bikes, etc.
5. The unfit horse will tend to tire easily as will the underweight horse.

C. Saddling and Bridling
1. Saddle Fitting
   a. Equimeasure System
   b. 24” Flexible Curve
   c. Thermography and computerized saddle pad
   d. See III, A. 1
   e. The most common causes of poor fitting saddles
include bridging (Refers to where the saddle makes contact only at the withers and lower back with no contact at the middle portion, thus creating pressure sores at the contact areas. Horses with problems in this area will often carry their head and neck high and drop their back to relieve pain in the lower back area.) from irregular contact on either side, too narrow of a fit, incorrect placement of the center of gravity in the front of the saddle, manufacturer deficiencies, too rigid of a longitudinal axis, a saddle with a broken or twisted tree, and a saddle that moves to one side on a round-backed horse with low withers will make the rider sit crooked thus putting uneven weight on the horse’s back. Balance of not only the saddle, but also the rider is paramount.

f. Pain - Ill fitting saddles create behavioral problems to the extreme of bucking; also consider pain from sharp teeth, rough hands, a harsh bit, rider imbalance, and improper shoeing

g. Pads - If the saddle is a poor fit, the pad cannot make up the difference. It will merely change or increase the pressure points. One of the most common mistakes in treating saddle sores is to add more padding.

h. Physical signs of improper saddle fit: obvious sores; white hairs under the saddle; temporary swellings after saddle removal; scars or hard spots in the muscle or skin; atrophy of the muscles on the sides of the withers

i. Behavioral signs of improper saddle fit: objection to be saddled; hypersensitive to grooming; difficult to shoe; not wanting to move; bucking; unwilling to stand still

j. Training problems due to improper saddle fit: “cold-back” during mounting; slow to warm up or relax; resistant to training aids; obscure lamenesses; inability to travel straight; swishing the tail; pinning the ears; grinding the teeth; tossing the head

k. Factors to consider when evaluating saddle fit: structure of the saddle; position of the saddle on the back; contact of the bars with absence of bridging; correct width and height of gullet to clear the withers; the fit of the tree to the horse’s back, especially across the withers; the saddle should sit squarely in the center of the back; the levelness of the seat (The deepest part of the seat should be parallel to the level floor.
The cantle should be higher than the pommel or at least somewhat level. If the deep part of the seat is not level with the ground and seems inclined forward, chances are the saddle is too wide for the horse and will sit down on the horse’s spine leaving little clearance between the horse and the gullet. This will usually produce sore withers. The rider will feel pitched forward and struggling with leg position with this type of saddle. If the deep part of the seat is inclined backward, the saddle tree is probably too narrow which will also produce sore withers. The rider will have trouble keeping the lower leg back and under, and the rider will hit the pommel during the rise of the trot. Place one hand on the pommel and the other on the cantle, alternate pressure from hand to hand, if the saddle rocks, then the saddle is again not a good fit. The less motion you get the better the fit.); the placement of the girth; how the rider fits in the saddle; saddle bar or panel should sit two fingers width behind the shoulder blade so the shoulder is free to move without restriction.

1. A word of caution. A saddle that fits well today may not fit after six months of steady work. It’s a good idea to recheck your saddle every several months to see if it’s still comfortable for your horse. The saddle that fits the two year old will not fit the horse as an eight year old and will not fit again when the horse is older. The horse’s musculature and conformation changes over the years influenced by growth, work, and nutrition. Therefore, the saddle fit on the different age of the horse will vary.

2. Bit Fitting - We converse with our horses by several means, one of which includes reins and bits. If that line of communication becomes garbled, then our horses do not respond to our desires. A suitable bit should be compatible with the horse’s level of training. A young horse that is just learning usually will require the basics of a snaffle bit. Another consideration is the rider’s skills, e.g. if you tend to have busy or heavy hands, a milder bit such as a snaffle, will be the bit of choice. Other considerations in proper bitting of the horse should be the horse’s dental health. Horses teeth should ideally be floated or filed yearly, and the mouth inspected for other abnormalities.

a. Pressure areas of bit
b. Snaffle bits - Defined as any bit that works through direct pressure as opposed to curb bits, which work via leverage. The snaffle is perfect for introducing young horses to the fundamentals and for teaching a horse to accept rein contact and travel in a round and balanced frame. There are many types of snaffle bits and uses, but we will not expound on them here.

c. Curb bits - This is a bit which the rein attaches below the level of the mouth piece at the ends of shanks which can be 2-8 inches in length. The shanks may be loose or fixed. This type of bit requires less support from the rider’s hands and will be ridden with a longer rein. The shanks produce a leverage effect which amplifies rein pressure. For example, if a shank is 3 inches long and the purchase is 1 inch, the ratio is 3 to 1. Meaning the horse will feel 3 pounds of force for every 1 pound applied by the rider. The straighter the shank will activate the bit more quickly than if the shank is curved. A curb bit stimulates other pressure points such as the curb strap against the sensitive nerves of the lower jaw. A general rule of thumb is to be able to slip 2 fingers between the strap or chain and the jaw. The curb strap also prevents the shanks from being pulled back too far and over rotating the mouth piece. When the shanks of a curb bit are drawn back, the mouth piece is rotated downward against the bars and tongue. Some curbs have a port in the middle of the bit which applies pressure to the palate. A curb bit may have a solid, single or multi jointed mouthpiece with no port, low port, a high port, or something in the middle. A bit without a port will put pressure on the tongue as it rolls down across the lower jaw. If the port is tall and narrow, it will put pressure on the tongue, bars and palate. The kindest bit will have a curb mouthpiece which accommodates the tongue and allows the horse to swallow without restriction, encouraging a softer mouth.

d. Bit fit - A snaffle bit should be adjusted so that
it rests snugly against the corners of the mouth without creating a full wrinkle. The snaffle is light weight and allows the horse to pick up the bit and hold it comfortably in his mouth. The curb bit is heavier and should be set with one full wrinkle. The width of the bit is correct when the shanks come in contact with the corners of the lips without pressing inward against the skin. A bit that is too narrow presses the lips against the horse’s teeth. A bit that is wider than the mouth will slide around and irritate the horse.

e. The correct bit will be exhibited if your horse travels in a round and balanced frame, has a mouth that is quiet and remains closed when he feels pressure, carries his head on the vertical or at a 90 degree angle to the ground, and remains relaxed and willing when you apply rein contact. An incorrect bit will produce a rigid frame with a head and neck elevation, an open mouth, sticking his tongue out or over the bit, carrying his head above or behind the vertical, and becomes tense or frightened with rein contact.

f. The bit test - Lay the bit in the palm of your hand and close your fingers to simulate how it will feel inside your horse’s mouth. Then tug on the rings or the shanks mimicking a pull on the reins. If it’s a curb bit, try it with the curb strap attached and the curb strap under your wrist so that you can feel the leverage effect. If any bit pinches or causes discomfort when held in your hand, imagine what it can do inside your horse’s tender mouth. Nothing influences the effectiveness and severity of a bit more than a rider’s hands. Remember the shank is for the rider, the bit is for the horse.

g. The horse’s level of training, the rider’s skill level, and the various bit features are all considerations but too in-depth to mention here.

3. Equipment and tack must fit properly without changing right before or during the ride

D. Proper Riding Position

1. The mount
   a. Tack properly adjusted (girth tightened, stirrups down, reins untied)
   b. Square the horse on all four feet so your weight doesn’t throw him off balance
   c. Use the terrain for mounting (rocks, stumps, banks)
d. Your rein hand on the neck or mane, and the other hand on the opposite side of the pommel or cantle

e. With your foot in the stirrup, push off with the other foot and swing that leg over the top of the horse, lowering yourself gently into the saddle, and put that foot into the other stirrup, and straighten your saddle - keeping your body perpendicular to the ground keeps your balance

f. Once you are up and straight, you should be looking forward and between your horse’s ears with the horse standing still until you give it the command to move forward

g. You should be proficient at mounting and dismounting from either side and using the terrain to your advantage

h. Summary - Control of the horse, “form” on the mount, the best use of available terrain to make the mount as easy as possible on the horse and rider.

2. Position in Saddle - The purpose of proper trail equitation is to make the horse’s job of carrying the rider as easy as possible and to enable the horse’s performance to be as safe and smooth as possible. The rider’s form should be appropriate to preserving the horse’s soundness and conserving the horse’s energy as much as conditions permit. Related to this is the rider’s endeavors to deal with the horse’s manners to accomplish smoothness in horse performance and safety for self and others.

a. A rider must be balanced to move in harmony with the horse and non-interference as he adjusts to various terrain. A rider who is not balanced will use more muscle tension and grip for security which will tire and debilitate the rider.

b. The rider should sit upright and light in the saddle at all gaits - never slouch or become heavy in the saddle.

c. On flat ground, the rider is balanced over the feet so a vertical line can be dropped from the head and shoulders to the hip and the ball of the foot. The saddle has to fit the rider properly in order for this to occur.

d. The rider’s heel should be slightly lower than the toes.

e. The stirrup should be under the ball of the foot - which is the least tiring position. Stirrups placed too close to the toe or heel can cause rider discomfort, numbness of the feet, and sore knees.
f. Any leaning or drifting to one side of the saddle, can cause soreness in the horse’s back — this may be due to several problems including uneven stirrups, loose girth, improper weight distribution or imbalance of the rider.

g. Rider should guard against slouching, rounding their backs, “chair seat” position, arched backs, stiff or pinched shoulder blades, etc.

h. Ascending a hill, the rider’s body should incline slightly forward. This does not mean standing in the stirrups and leaning forward, but by folding the torso at the hip joints and keeping the back flat. In this position, weight is shifted off the buttocks and redistributed on the rider’s inner thighs. The stirrups receive some of this redistributed weight, but should not bear the entire burden. This “half seat” in front of the vertical position requires the rider’s stirrup length to be adjusted in such a way as to permit sufficient flexing of the ankles, knees and hip joints. This is particularly true for these joints to remain flexible during the standing trot. This position should be over the horse’s center of gravity (near the withers).

i. Riding downhill, the rider should appear as though he would land lightly on his feet if the horse disappeared from under him. The heels again should drop, gripping with the thighs and calves.

j. Whether riding up or down hills, the rider’s weight needs to remain off the horse’s loin to have complete freedom of movement for the horse to balance itself. If the ascent or descent is steep, calf pressure may be needed to keep the rider’s legs and seat in an effective position. On a steep climb, the rider may desire to use the horse’s mane to stay forward as long as the horse’s control is maintained.

4. Dismount
   a. The horse should be standing square and quiet.
   b. Left hand should be holding the reins and horn.
   c. Bring the right leg out of the stirrup and up over the cantle, grabbing the cantle with the right hand, maintaining a hold of the horse with the reins and the saddle so if he should move, you can vault back into the saddle or dismount.
   d. Continue to dismount would be to take your foot out of the left stirrup, slid down to the ground, while maintaining a hold on your horse’s reins and saddle.

5. Length of Stirrups
a. When mounted, you should be able to maintain the vertical position described in 2.c above.

6. At the walk
   a. Rider should display balance, lightness and body alertness thus reacting to sudden unexpected changes such as shying and stumbling.

7. At the trot
   a. Rider should either be posting lightly, riding out of the saddle by standing in the stirrups, or sitting to the trot. These three positions will depend on speed of the trot, terrain, horse’s gait, and most importantly the rider’s ability to avoid bouncing or hitting the saddle thus jarring the horse.

8. At the canter
   a. The faster the speed of the horse, the farther forward you lean, although at an easy canter, the upper body should be vertical and the seat bones in contact with the saddle.

9. Light in the Saddle (vs. Heavy). Heavy in the saddle means not riding light, balanced and in sync with your horse’s motion. This “light riding” frees up the horse’s hind quarters to do his work easier and also keeping the saddle balanced on the horse’s back to prevent shifting and bruising, thus making the horse’s job of carrying you over miles and miles much easier.

10. Long Distance Riding - Sore legs or back due to improper position

11. Reins - The contact with the horse’s mouth should be free and light until asking him for a directional change. When turning to the left, the direct rein is in your left hand and the indirect rein is in your right hand. So that whether neck reining or turning with a direct rein, the horse should turn in that direction either by pulling with the direct rein or using the indirect rein (neck reining). Whether ascending or descending a hill or turning, there should be contact with the bit or hackamore to the point where the horse responds.

E. Loading, Unloading, Transportation and Safety
1. Techniques or Methods of Loading
2. Trailer safety items to consider
   a. Flooring, wiring, brakes, tires, break away, ventilation, footing, tying, hay bags, leg wraps, fire extinguisher

3. Driving and backing techniques and safety considerations
   a. Always drive with lights on; dusty and dirty.
windshields can reduce visibility; know your stopping distance; downhill traffic has the right away; wintertime consider chains and cables; if sliding, do not use brakes, feather or bump the manual trailer brake lever; watch for washboards on mountain roads as they can cause trailer to fishtail; drive slowly on rough roads to prevent damage to tires, wheels, and springs, etc.; avoid potholes; apply brakes before a bump or hole to slow down and then release them just before hitting the hole (this allows the tire to roll out of the hole rather than slamming into the far edge of it); put in correct gear before starting up a steep, gravel hill so that you won’t have to shift half way up and lose momentum; gear down if going down a steep, long hill so that your brakes don’t heat up and fail; adjust electric trailer brakes a little bit higher than towing vehicle so that the trailer will help pull the vehicle in line when breaking

4. Towing vehicle and tires must be adequate for the size of the trailer and weight of the load

5. Condition your horse for loading, trailering, and unloading so that each trip is stress free and as safe as possible for the horse. If a horse has a bad experience in a trailer, he could become a problem loader in the future.

6. Vehicle and trailer safety on the road and at trail heads.
   a. Considerations for backing, parking, turning around and using a ground guide when possible.
   b. Maintenance: Rotate tires (including spare); replace tires with worn tread; repack wheel bearings; grease axles, hinges, hitch mechanism and pins; adjust brakes; check safety chains for wear; check hitch ball for wear; check or replace the 12 volt break away battery; check tire pressure on trailer and truck/car; check lug nuts for tightness; check lights, brakes and turn signals; check oil, antifreeze, brake and transmission fluids.
   c. Check List: Driver’s mirror adjustment; trailer hitch locked and pinned; safety chains attached; run away cable attached; electric cord plugged in; jack stand cranked up; horse(s) tied; rear door closed, latched and clipped; lights working; tack room door closed and locked; electric brake box in vehicle working; passenger mirror adjusted.

7. Coggins Papers, Health Certificates, Entry Permits
F. Grooming

1. Keep your horse well groomed before each ride or day’s journey and after the ride. This will help check for minor injuries, cuts, swellings, sore backs, girth rubs, chin strap rubs, etc.
II HORSE CARE

A. Health

1. Vaccinations
   a. Tetanus
   b. Eastern/Western Encephalitis
   c. West Nile Virus
   d. Rhinopneumonitis
   e. Influenza
   f. Strangles
   g. Rabies
   h. Potomac Horse Fever

2. Deworming
   a. Type of wormers
   b. Programs for usage

3. Dentistry
   a. Bit problems
   b. Eating problems
   c. Weight problems
   d. Head Carriage

4. Vet exam
   a. Blood Profile to identify anemia, infections, thyroid deficiencies, etc.

5. Lose of weight due to:
   a. Dehydration
   b. Decreased food intake
   c. Bottom of the pecking order
   d. Parasites
   e. Etc.

B. Nutrition

1. Fiber or roughage in the form of grass or hay is the most natural horse feed.
   a. Digestion is slow and continuous which is important for competitive or distance horses
   b. Fiber will increase water consumption thus providing a reservoir for both water and electrolytes
   c. All forage is more digestible when it is young and less mature.
   d. Alfalfa is higher in protein than grass or timothy hay.
   e. Alfalfa is high in calcium and low in phosphorus (calcium is necessary for muscle function).
   f. Calcium lost in sweat can lead to “tie-up” and “thumps”.
   g. 50% grass and 50% alfalfa is ideal for horses used for long distance trail rides.
   h. Beet pulp is another excellent roughage because of the high content of digestible fiber and has an excellent water holding capacity. It
is a good non-starch energy source and is highly palatable. Therefore, it can be used to fatten up horses but not have the horse get “hot” as is seen with grain products.

i. Examples of the above items can include pelleted feeds, alfalfa cubes and pellets, chopped hay and straw, and complete feeds.

2. Fats
a. Fats yield 2.5 times as much energy as carbohydrates.
b. In the form of vegetable oil, soy bean oil, animal fat, or rice bran, these are added to the diet to supplement calories.
c. For the hard keeper, fat should be added to forage and concentrates.
d. Supplemental fat to the diet should begin early in the conditioning phase and continue through the season of heavy use.

3. Carbohydrates
a. They are found in grains, concentrates, fresh green grass, alfalfa hay, and are converted to glucose.
b. Concentrates are added when energy requirements from hay and forage are not met.
c. Grains or concentrates should not comprise more than 50% of the ration and should not be fed more than 5 pounds at a time.

4. Salt
a. Free choice at all times
b. Plain vs. trace mineral
c. Excess iron can be toxic

5. Vitamins and minerals
a. Most essential vitamins are obtained in the horse’s normal diet unless there is a deficiency in the diet or a required amount due to a special activity.
b. Trace minerals also are obtained in most diets except in areas where there are deficiencies e.g. selenium
c. Free choice mineral powders

6. Water
a. Fresh, clean water should be available at all times.
b. Always allow the horse to drink at any water crossing.
c. Fresh grass has about 70% water content.
d. The average horse drinks about 5 gallons of water daily under normal conditions.
e. Therefore, on hot days or under stress conditions, horses will require more than 5
7. Basic Guidelines
   a. Most working horses will eat approximately 2% to 2.5% of their body weight in hay daily (or about 25 pounds of hay for a 1,000 pound horse).
   b. When energy requirements are not met by sufficient hay or grass, grains or pelleted feed will need to be added as a supplement. Adding vegetable or corn oil to a diet is a rich source of calories that will substitute for carbohydrates in grains. Oils will also slow digestion which will aid in a fast uptake of glucose, thus producing high energy requirements without producing the “hot” horse.
   c. Six stages or situations that horses require specialized nutrition.
      1. Sucklings or unweaned foals
      2. Growing horses (weanlings thru 3 year olds)
      3. Breeding horses
      4. Performance horses
      5. Geriatric horses
      6. Special-needs horses (horses that tie-up, Cushings disease horses, etc.)

C. Hoof Care and Shoeing
   1. Type of terrain and environment
   2. Lameness and improper shoeing
      a. Signs - stumbling, cranky, tail ringing, head tossing, bucking, refusing to go forward, other attitude changes.
   3. Should be shod on a regular basis and reset especially before long, hard rides

D. Problems on the Trail
   1. Stress
   2. Fatigue
   3. Weather
   4. Terrain
   5. Change in Diet
   6. Water
   7. Electrolytes
   8. Lameness
   9. Tying up

E. Problems in Camp
   1. Colic
      a. Impaction, diarrhea, dehydration
   2. Drinking out of the same water buckets
   3. Improper Tying (High line, trees)
4. Skin problems (brushes, saddle pads, blankets, etc.)
5. Tying up
6. Respiratory
7. Monitoring the horse: manure, attitude, appetite, mucous membranes, temperature, GI sounds, etc.
III TACK AND EQUIPMENT

A. Saddles and Accessory Equipment for the Horse
1. Fitting - Bars, trees, cantle and pommel
   a. Trees - Full QH for well muscled, low withers;
      STD or TB tree for high, narrow withers;
      Semi QH for in-between the above two;
      Arabian tree for narrow backs and low
      withers.
2. Types
3. Rigging
4. Girths
5. Stirrups
6. Pads and Blankets
7. Breast Collars
8. Cruppers
9. Britchings

B. Saddles for the Rider
1. Larger Saddle has greater weight bearing surface
   area which is a benefit to the horse
2. Plenty of room in the seat
   a. Too small a seat pushes the weight of the
      rider against the cantle and causes excessive
      pressure over the horse’s loins
3. Two point position (standing balanced) in stirrups
4. Saddle should allow knees to point forward and
   even contact down the thighs and legs
5. Seat should be comfortable as you sit relaxed
6. Sit in the deepest part of the saddle, feet and
   stirrups drop naturally, heels slightly down and
   in line with hips and shoulders
   Example - Sitting in the saddle in this position,
   if the saddle should suddenly disappear, you would
   land on your feet. If the stirrups are too far
   forward, and you are in a chair sitting position
   and the saddle disappears, you would land on your
   rear.

C. Bits and Devices for Control of the Horse
1. See I-2
2. Hackamores
   a. Pressure should be on the nose toward the
      curb chain not pressure on the curb to the
      nose.
3. Tie downs, martingales

D. Clothing
1. Poncho or duster - Tied on back of saddle,
practice putting on while riding at home as some horses shy at this maneuver

2. Boots with riding heel

3. Chaps for protection and to provide warmth

4. Western hat protects from sun, rain, snow, branches

5. Leather gloves protect from sap and keep wet reins from slipping through the hands

6. Type of clothing for weather conditions
IV PACKING

A. Considerations for type of horse
   1. Breed, sex, age, experience and manners
   2. See I, A, 1-4

B. Type of Pack Saddle
   1. Decker
   2. Sawbuck

C. Proper Fit
   1. Powder the back of the horse with talcum powder or pancake mix, wet the bars of the pack saddle, place it on the horse’s back, and remove to see if the powder comes in contact with all portions of the bars. If not, they need to be reformed or use another pack saddle.

D. Common Mistakes
   1. Saddling - too loose a girth
   2. Unbalanced load
   3. Tying the pack string too short or too long
   4. Saddle and girth rubs

E. Training and Conditioning
   1. See I, B 1-5

F. Basic Equipment
   1. Hitches, knots, slings, panniers, and mantees

G. See packing books
   1. Packin’ In on Mules and Horses
      by Smoke Elser and Bill Brown
   2. Horse Packing Illustrated
      by Dusty Johnson
   3. Mule and Horse Packing Clinic
      by Chuck Miller
V. FIRST AID - EQUINE

A. Vital Signs

1. Mucous Membranes (gums, sclera of the eye)
   a. Press fingertip to the gum membranes to blanch away the color. Refill time should be no more than two seconds.
   1. Pale membranes with slow refill time indicate inadequate circulation and could predispose to shock.
   2. Brick-red membranes with refill time less than one second indicates severe shock, most commonly colic, and would require immediate medication attention.
   3. Blue or purple mucous membranes indicate severe and usually irreversible shock with a grave prognosis.

2. Heart Rate
   a. Use a stethoscope on the left side of the horse’s chest. Use your hand against the same area. Use your finger on the bottom side of the jaw where the artery crosses. Take the pulse for 15 seconds and multiply by four to get the rate. Normal rate is 30-40 BPM.
   1. 40-60 BPM indicates pain or stress.
   2. 60-80 BPM for more than 15 minutes, indicates severe dehydration and early stages of shock.
   3. Greater than 80 BPM in a colicky horse indicates desperate need of surgical intervention or intensive care.
   4. Greater than 100 BPM in a colicky horse indicates grave prognosis with a low survival rate.

3. Respiratory Rate (RR)
   a. Can be taken by watching the horse’s chest inhale and exhale, and this is considered one breath, or by feeling the air flow out of the nostrils. Normal rate is 12-24.
   1. Rapid and shallow breathing is indicative of pain, fever, or severe alterations in the metabolic status in the horse.

4. Rectal Temperature
   a. Shake the thermometer down. Leave in rectum for two to three minutes. Normal temperature is 98-101.
   1. Fever (>101) indicates infection,
endotoxemia, severe dehydration.
2. Low body temperature with cold and clammy limbs and body indicate shock.

5. Intestinal Sounds.
   a. Using a stethoscope or your ear against the side or flank area of the horse on both sides, with the right side being more significant, normal sounds should be rumbling, gurgling, and fluid like at least every minute.
   1. No sounds indicate abnormal GI motility requiring treatment and fluid intake.
   2. Sounds similar to a pebble falling down a well indicates the presence of gas in the bowel.
   3. Squeaky sounds indicate little GI motility.
   4. Excessive amount of intestinal sounds indicates spasms or hyper activity due to irritation of the bowel or correction of an obstruction beginning.
   5. Sounds similar to a rolling surf on a sandy beach or sand moving in a paper bag indicates sand colic.

6. Hydration Level
   a. Pinch the skin on the neck or just in front of the shoulder. If it snaps back to normal position, the horse is well hydrated.
   b. If the skin remains elevated for approximately 5 seconds, the horse is mildly dehydrated.
   c. If the skin remains elevated for 7 seconds or longer, he is severely dehydrated.

B. Colic
1. Signs - Uncomfortable, pawing, looking back at sides, curling upper lip, rolling, lying still but looking back at side, any one or combination of the above are signs of abdominal pain or colic. There are different types of colic and treatment for you to do in alleviating pain and replacing fluid loss or preventing dehydration until further treatment is available.
   a. Walking the horse for 30-60 minutes can be helpful in restoring abdominal motility and/or alleviating pain.
   b. Allow the horse to drink as much as possible. Encouraging water intake again reduces dehydration and helps restore normal intestinal function.
   c. Do not feed or allow the horse to eat grain or hay, as this will add to an impaction problem and with decreased motility may make the problem
worse.

d. If the horse wants to lay quiet, this is okay, but do not allow the horse to roll.

2. Treatment
   a. Offer water freely to the horse periodically
   b. Walk the horse if he wants to roll
   c. One dose of Banamine paste (three doses per tube for a 1,000 pound horse); can repeat in 12 hours
   d. Certain tranquilizers are useful but all are injectable and to be administered IV or IM, and unless educated in their use, these could do more harm than good

C. Saddle Sores and Girth Rubs
   1. Keep an eye on girth and saddle areas for rubs or soreness
   2. Treatment
      a. Change or correct cinch or saddle position
      b. Adjust uneven loads
      c. Add padding to affected areas
      d. Apply bag balm or antibiotic ointment
      e. Give one dose of oral Banamine paste
      f. After getting the horse home, give time to heal before using again
      g. Tincture of Benzoin will help “toughen up” the skin, but apply only if skin is unbroken

D. Wounds (Lacerations, punctures, etc.)
   1. Treatment
      a. Clean best as possible, sponging, flushing to remove foreign bodies, etc.
      b. Do not rub or scrub wound with loose dirt in wound, as this could force debris into the tissue or wound and contaminate deeper healthy tissue.
      c. After 1 and 2 above, apply hydrogen peroxide
      d. Wound may now be washed with iodine surgical scrub. After two washings, rinse several times to eliminate all soap or suds
      e. Wound can now be irrigated or flushed with betadyne solution or hydrogen peroxide
      f. Bleeding - if a vessel is severed and bleeding is constant, apply any type of pressure (manual or bandage). If available, use a hemostat to clamp on the blood vessel if needed.
      g. Bandage - apply antibiotic ointment (if needed), cover wound with 4 x 4 gauze pads or combine dressing and then overwrap with Coflex. If a larger area is involved, cover with a sterile cotton leg roll and overwrap with elastoplast
or Coflex. Duct tape, electrician tape, white tape will secure the bandage if needed.  

h. Medications to alleviate pain (if deep wounds or bone is involved); begin antibiotics until a veterinarian is available.  
1. Banamine oral paste - one dose every 12 hours  
2. Phenylzone (bute paste) - four grams orally for a 1,000 pound horse (each line on the tube equals one gram). If a veterinarian is not available for 24 hours, give two grams every 12 hours.  
3. Antibiotic pills (Tribrissen) - 12 pills every 12 hours (1,000 pound horse). Can be crushed and given in the feed or dissolved in water making a paste solution and put in a dose syringe and administered orally, or mixed into the feed.  

E. Rope Burns  
1. Treatment  
   a. Clean area with iodine scrub.  
   b. Rinse well and dry good  
   c. Apply antibiotic ointment with non-adherent dressing or combine dressing and Coflex bandage over top  
   d. One dose of oral Banamine paste for 1,000 pound horse.  
   e. Give 12 antibiotic pills (Tribrissen) twice daily orally (1000 pound horse). These may be dissolved in water and given by dose syringe or mixed in the feed.  
   f. If burns are deep into tendons or bone is exposed, keep bandaged and get veterinary help ASAP.  

F. Lameness  
1. Most “non-obvious” lameness will be in the foot, most commonly stone bruises or foot abscesses. One will need some expertise, a pair of hoof testers to determine the (sore) area, and be able to feel for a high throbbing pulse behind the fetlock.  
   a. Treatment - If you can open the bruised area with a hoof knife for drainage, then infuse 7% iodine and apply a poultice and wrap the foot or apply an easy boot.  
2. Injury to joints, tendons, or ligaments will usually exhibit heat, swelling, and pain on squeezing the area or flexion of the joint. If tendon or suspensory are involved (swollen, hot, painful), do not ride, and lead the horse home at a walk.  
   a. Treatment - Apply cold water or ice for the
first 48 hours.

b. Paint DMSO on the area using a tooth brush
c. Apply poultice using a tongue depressor as if applying putty
d. One dose of oral Banamine paste plus four grams of bute paste (for 1000 pound horse)

3. Myositis or “tie-up” condition - If the horse appears stiff in the hind quarters and reluctant to move, takes short strides, and appears to stretch as to urinate.
   a. Treatment - Do not continue to ride
   b. Keep him quiet and still
   c. Give one dose of Banamine paste (1000 pound horse)
   d. Give one syringe of electrolyte paste

G. Eye Injuries - Eye problems are very serious and are not to be taken lightly and require veterinary assistance ASAP. The two most common problems you will encounter will be corneal ulcers or moon blindness (uveitis).

1. Corneal ulcer - occurs from foreign body penetrating any part of the exterior eye. The eye will appear mostly closed, tearing, and painful.
   a. Treatment - apply eye wash
   b. Apply Opticaine - a local anesthetic which will decrease pain
   c. Apply Atropine - will decrease pain and dilate the pupil.
   d. Apply Gentocin (ointment or solution) several times daily. If solution is used, squirt into eye directly. If ointment is used, apply inside the lower eyelid.
   e. Give one dose of oral Banamine paste twice daily (1000 pound horse).
   f. Give two grams of oral bute paste twice daily (1000 pound horse).
   g. Add eye patch to eliminate light and help protect the eye.

2. Moon blindness (uveitis) - Inflammation of the inner eye. This type of eye will appear bluish, the pupil will be very constricted (compare with the normal eye) and tearing.
   a. Treatment - Apply Opticaine
   b. Apply Atropine
   c. Apply Durafilm (Gentocin plus steroid)
   d. Give one pack of Azium powder in feed twice daily (1000 pound horse)
   e. Give one dose of oral Banamine paste twice daily (1000 pound horse)

3. If in doubt between these two conditions, do not give the Azium powder but treat the condition as if it
were a corneal ulcer.

H. Respiratory Infections
1. Signs are coughing, nasal discharge, off feed, fever.
   a. Treatment - Take temperature (over 101, treat)
   b. Give 12 antibiotic pills (Tribrissen) twice daily orally - dissolve pills in water and dose or mix in feed (1000 pound horse)
   c. Give one dose of oral Banamine paste twice daily (1000 pound horse)
   d. If the horse is severely depressed, and the fever is over 103 degrees, give two grams of bute paste in addition to above (1000 pound horse)

I. Dehydration
1. Skin Pinch Test
2. CRT
3. Tacky and Dry Mouth
4. Mucous Membranes
   a. Pink, Pale, Muddy, Cyanotic (Blue), Purple
5. Sunken eye balls
6. Reluctant to move
7. Not drinking

J. Heat Exhaustion
1. T - 105+
2. No sweating
3. Won’t drink
4. Hose or wet down from head to tail in cool water
5. Keep cool and in shade

K. Euthanasia - Fractured legs or other injuries which you feel are not treatable and life threatening, and/or you can’t get the horse out of back country or cannot get assistance, the following methods may be used.
1. Aim a firearm at the intersection of two lines from the base of the ear to the opposite eye (X).
2. If the horse is down, cut the jugular vein on the underside of the neck.

L. Basic Medications to Pack
1. Equine First Aid Kit of the Flathead BCH by Ron Stuber, VMD
2. Wilderness Outfitters List by Smoke Elser, 3800 Rattlesnake Dr., Missoula, MT 59802
3. Veterinary Medicine for Back Country Horsemen, BCH of CA, P O Box 11095, Bakersfield, CA 93389
VI FIRST AID - HUMAN

A. Initial Assessment - Assess for responsiveness by attempting to arouse the patient
   1. Assess the airway - open mouth, examine and clear obvious obstructions
   2. Assess for breathing - look, listen and feel
   3. Assess for circulation - check pulse at neck (carotid artery), check for severe bleeding, treat for shock
   4. Assume disability - cervical spine precautions, avoid moving the patient, consider jaw thrust to open airway
   5. Protect patient from environmental exposure and examine major injuries

B. Vital signs
   1. Heart rate or pulse (60-80) - wrist, neck, upper arm, outside of ankle. Check for rate, rhythm, and quality of pulse.
   2. Respiration rate (12-20)
   3. Skin condition and temperature
   4. Pupils - Check for size and reactivity.
      a. Unequal - stroke or brain injury
      b. Constricted - CNS disease or narcotic overdose
      c. Dilated - Cardiac arrest or head injury
   5. Color of mucous membranes (pink, pale, blue, dry, moist)
   6. CRT
      a. Fingernails
      b. Mucous membranes

C. Medical history
   1. Patient’s complaint
   2. Current medical problems
   3. Allergies
   4. Present medications

D. Complete examination (specially if patient is unconscious)
   1. Head - open airway and breathing, check ears and nose for fluid and/or blood
   2. Neck - assess cervical spine
   3. Shoulders - deformity, swelling, abrasions, punctures, tenderness, lacerations, burns
   4. Arms - same assessment as shoulders plus check for pulse at wrist, movement, and sensation
   5. Chest - same assessment as shoulders plus difficult
breathing
6. Abdomen - tenderness, rigidity, distention, bruising
7. Back - pain, possible spinal injury
8. Pelvis - pain and instability
9. Legs and feet - same as shoulders plus check for movement and sensation

E. Soft tissue injuries
1. Bruises
2. Hematoma
3. Blisters - moleskin, drain with sterile needle, apply antibiotic ointment and dressing
4. Sprains
5. Abrasions
6. Lacerations
7. Puncture wounds - if there is an impaled object, do not remove it
8. Control bleeding

F. Treatment for closed injuries
1. Ice or cold water
2. Compression bandages to reduce swelling and bleeding
3. Elevate above heart level

G. Controlling bleeding
1. Direct pressure
2. Elevation
3. Pressure points

H. Cleansing wounds
1. Thoroughly clean wound with clean water, surgical scrub solutions if available
2. Remove debris from wound by irrigation or plucking out
3. Do not scrub dirt and debris into open wound
4. Apply antibiotic dressing and bandage
5. Check circulation and movement to assess if bandage is too tight

I. Infections
1. Signs
   a. Redness and swelling
   b. Heat, pain, pus
   c. Red streaks radiating from the wound
   d. Fever and chills
   e. Swollen lymph nodes

J. Signs and symptoms of fractures and dislocations
1. Pain and tenderness
2. Crepitus  
3. Swelling and discoloration  
4. Deformity  
5. Loss of function or range of motion at a joint (dislocation)  
6. Loss of function at a bone (fracture)

K. Assessment of fractures and dislocations  
1. Remove clothing and visualize the injury  
2. Look for deformity, swelling, discoloration  
3. Feel for tenderness, deformity and swelling  
4. Assess circulation  
   a. Check distal pulse in wrist or foot  
   b. Check temperature and color in hand or foot  
5. Sensation and movement  
   a. Test for sensation to touch for pain  
   b. Ask the person to move his fingers and toes

L. Treatment of fractures and dislocations  
1. Immobilize the injury  
2. Clean and dress wounds  
3. Splint before moving  
4. Remove tight clothing and jewelry  
5. Elevate to reduce swelling, compression and ice if required  
6. Treat for shock  
   a. Keep patient warm  
   b. Elevate feet above head

M. Basic splints  
1. Qualities of a good splint  
   a. Rigid and supporting the injury  
   b. Padding the injury  
   c. Lightweight  
   d. Offers access to distal circulation  
   e. Pneumatic  
2. Extremity sling and rigid type splint utilizing wood, tree limbs, newspaper, pillows, clothing  
3. Traction

N. Treatment of eye injuries  
1. Don’t rub irritated eye  
2. Don’t manually remove penetrated objects  
3. Irrigate eye to remove foreign debris  
4. Bandage shut the injured eye

O. Brain and spinal cord injuries  
1. Changes in level of consciousness  
2. Disorientation, confusion, incoherence, irritability  
3. Headache
4. Vision disturbances
5. Nausea and vomiting
6. Paralysis
7. Seizures
8. Combativeness
9. Blood or CSF from the ears, nose or mouth
10. Obvious skull fracture
11. Slow pulse, rising blood pressure, irregular respirations
12. Concussion - usually mild even with loss of consciousness

P. CPR
1. When to apply - all non-breathing and pulseless patients
2. Technique of CPR
   a. Place the heel of one hand on the lower half of the sternum about two finger widths above the xiphoid process. Place the heel of the other hand on top of the hand that is on the chest, interlocking fingers.
   b. Compress the chest approximately two inches straight down, leaning forward so your arms are directly over the patient with the back straight and the elbows stiff.
   c. Rate of compressions is 100/minute.
   d. After 15 chest compressions, give two rescue breaths and continue this cycle continuously.

Q. Signs of Shock
1. Confusion, restlessness, anxiety
2. Cold, clammy, sweaty, pale skin
3. Rapid and shallow breathing
4. Rapid and weak pulse
5. Increased CRT
6. Nausea and vomiting
7. Fainting
8. Thirst

R. Treatment for Shock
1. Keep warm, flat on back, elevate feet unless head injury
2. Check for open airway, breathing, and circulation
3. Treat the cause, e.g. bleeding (compression bandage), swelling (apply ice)
4. Maintain body temperature
5. No food or water intake
6. Prompt emergency transport to medical facility
PREVENTION IS THE BEST TREATMENT: WEAR A HELMET!

DECIDE EARLY IF YOU NEED TO EVACUATE!
How to evacuate?? Call for helicopter or help with a cell or satellite phone, ride a horse, or walk out.

References: National Outdoor Leadership School Wilderness First Aid 3rd Edition by Tod Schimelpfenig and Linda Lindsey; First Responder in Emergency Care by the National Safety Council
VII SAFETY AND TRAIL COURTESY

A. Preparation
1. Know the area you are going to
2. Notify friends and/or rangers as to where you will be and when you’ll be returning
3. Compass, GPS, Maps
4. Survival Equipment
   a. Evaluate an adverse situation - physical condition, health, and number of people involved. Consider your location, where you came from, weather conditions, resources available, likelihood of rescue
   b. Threat level - drowning, animal attack, exposure, dehydration, illness or injury, lost
   c. Priorities for survival - stay positive, build a fire, work together, stay calm
   d. First aid kit - keep simple - medications (aspirin, pain relievers, etc.), vet wrap, tape, dressing, splint
   e. Gear - Space blankets, garbage bags, rope, knife, duct tape, handgun, bear spray, Oregon saw, OB wire saw, heat packs, foot warmers, fire starter (lighter, fire paste, ethanol starter, Orion fire starter - also can be used as a flare), flashlight and batteries, glow sticks, whistle, signal mirror, and iodine tablets
   f. Cell phone or satellite phone
   g. Always tell someone and write it down where you are going and when you expect to return and do not travel alone.
   h. If lost - S.T.O.P. (Sit Down to Think, Observe, Plan); stay calm and stay put
5. Check weather conditions before leaving and prepare accordingly (e.g. insect repellent, sufficient rain gear, etc.)

B. Trail Etiquette and Safety
1. Preferably travel with experienced and knowledgeable horsemen and packers
2. Wait for all horses at water crossings or obstacles
3. Don’t move out until all are mounted in the saddle
4. Beware of your own horse in relationship to other riders and pack stock
a. Riding or pack saddles that need to be readjusted
b. Notice any other horse as to minor lameness, lost shoes, cuts, saddles or saddle bags slipping to one side, or pack equipment displacing.
c. Beware of other horse’s individual traits (the unruly horse, pinning ears, humping up, swinging their heads around, young, green, obstinate horses, etc.

5. Separate unfriendly horses.
6. Point out hazards to other riders.
7. Keep the slow horses in the back.
9. Yield to uphill users and pack strings.
10. Stand out - during hunting season, wear blaze orange.
11. Know certain disabilities or health problems of people in the party.
12. Keep tack well maintained and in good repair.
13. Approaching hikers or bikers, talk with them and have them return the conversation so the horses hear and see them. Also, have them stand on the downhill side of trail.
14. Give right away when possible (saddle horses should give way to pack stock)
15. Stay at least one to one and a half horse lengths behind horse in front and don’t crowd horses in front of you.
16. If you have a kicker, tie a red ribbon on his tail to notify other riders.
17. Horses in a string may develop a pecking order depending on the speed of their gait, their herd boss instinct, mares in heat, shy and skittish young horses, and kickers etc. These individuals will have to be sorted out as to where they will best fit in the string of horses on the trail.
18. Is your horse ready for the trail?
a. Leading, obstacles, gates, water crossings, conditioning.
19. Checklist for equipment, clothing, food, etc.
20. Project leader should have any communications that are available (cell phone, two-way radios).
21. Project leader should have a plan to get an injured person(s) to medical help.
22. Use of a chainsaw should require two persons at all times.
23. Trail work - always consider safety with axes, saws, etc. and be alert to your surroundings including to your rear and overhead.
24. Avoid bending branches and flipping them into the rider behind you
25. Indicate to riders behind you if you are going to stop on a trail
26. Don’t cut switch-backs
27. Walk while in the lead; don’t trot or gait away from the group unless all riders agree
28. If any rider needs to stop, notify the leader or rider ahead of them
29. Avoid stopping when going uphill or downhill when there is another rider behind you
30. Notify the leader if a rider starts to lag behind for any reason
31. Be respectful of others and the environment
32. Expect the unexpected
   a. Lightning - Leave ridges or summits; dismount; avoid solitary trees, water, high ground and open spaces; move away from your horse, especially if he is shod, and remove any metal gear; seek low lying areas such as ditches or trenches or under shrubs
   b. Snow and ice - Walk slow through deep soft snow as faster gaits will strain muscles and tendons; give your horse his head if on hard-packed snow or ice, but keep enough contact to prevent him from rushing; check snow fields before crossing them and make sure they are not hollowed out or water running beneath; fog and snow may cause whiteout conditions and cover the trails; wet rocks can be treacherous to climb
   c. Darkness - Be aware of how long it may take you to return to camp or trailhead; horses can see well at night and flashlights can be used to point down the trail or attach two or three glow sticks with duct tape to the breast collar which should last 8-10 hours
   d. Cougars - Stay still and stand tall if on foot; shout, wave your arms and throw rocks
   e. Bears - stay calm; avoid direct eye contact; do not run; make noise if it does not retreat
   f. Bees - If you are in a group, usually the third or fourth horse will start to get stung; if your horse starts to jump or buck, move down the trail as fast as possible; during bee season, full chaps or pants tucked into your boots are advisable, as jeans over the top of boots allow the bees to go up your pants leg
   g. Snakes - Wear boots; check logs and rocks with a long stick before sitting down
33. Know your horse’s limitations and don’t ask him to do something he is incapable of doing.
34. Consider dismounting and leading in treacherous areas.

PROTOCOL FOR TEACHING DEFENSIVE HORSE SAFETY COURSE

INTRODUCTION

In 1964 Congress passed the Wilderness Act which established a designated wilderness system in the Untired States, involving public lands. This act set aside vast areas to be held in perpetuity as natural and untrammeled by man as possible. The act set aside these lands in their most primitive conditions, with specific exceptions for public recreation, as a resource benchmark for future generations.

Americans are using our wilderness and roadless areas more and more each year as major recreational areas. Our government agencies are making better and more sensitive management decisions requiring more access and presence in these wilderness and roadless areas.

RATIONALE

The use of pack and riding animals to access the roadless and wilderness areas of Montana has been historically proven. There are many proven and unique skills needed to successfully and safely use horses and mules in these undeveloped lands. The Back Country Horsemen of Montana Defensive Horse Safety Course is designed to train, develop, and improve the safe use of equine in the back country. The BCH of Montana will initiate a stock safety training format that will be consistent in all Chapters of Montana.

GOALS

The goals of the course will be to meet the training requirements of The Health and Safety Code (FSM 6709.II.04.1) and to provide livestock safety training for the BCH of Montana members and volunteers thereby reducing job hazards for volunteers and personnel who work with livestock.

OBJECTIVES

The training will include horse handling, horse behavior, accident potential, equipment, first aid for people and stock, and riding safety skills. This training will require 8 hours with a 4 hours refresher once every three years.

LESSON ONE - 2 Hours - An introduction to equine behavior (the nature of the horse) and equipment used in riding and packing into our roadless lands.

OBJECTIVES:

I. Participants will be exposed to the physical and psychological characteristics of equine.
II. Participants will develop a clearer understanding of the proper equipment required for safe use and handling of equine, such as bits, saddles, pads, and halters.
III. Attendees will learn proper fitting of equine equipment.
IV. Participants will be introduced to safe equine practices, such as loading, unloading, hauling and hauling equipment (trucks and trailers).
MATERIALS:

- A Power Point Program developed and interpreted by Bob Hoverson, Nine Mile Wildlands Training Center, and a video by Dr. Robert Miller, DVM
- Bits: Curb, snaffle and hackamore
- A good riding saddle (for mountain use) and pack saddle with good pad
- Halter with ropes for each animal

PROCEDURE:

I. Watch and discuss “The Nature of the Horse”, a Power Point program.
II. Discussion of controlling devices (bits, bridles) and hands on demo and practice.
III. Discussion of good riding saddles for the mountains including pads. This will include a demo of how to fit.
IV. A demo of how to catch, halter and tie the equine.
V. A display of good stock hauling equipment, trucks or trailers, pointing out safety for equine and handlers.
VI. Stock behavior and accident potential will be discussed.
VII. A discussion of proper clothing used around livestock (boots, chaps, raingear) and their safety features.

LESSON TWO - 2 Hours - Introduction into proper stock handling techniques including catching, tying, grooming, saddling, bridling, and mounting.

OBJECTIVES

I. An overall demonstration and hands on equine handling exercise.
II. Participants will demo proper and safe catching, haltering, tying, grooming, saddling and mounting techniques and become proficient with each.

MATERIALS

- One saddle horse for demo
- Saddle, pad, proper bit-bridle, halter and rope per student
- Grooming equipment so that all stock can be groomed properly
- Gentle saddle horse for each participant

PROCEDURE

I. A demo of catching, haltering, tying, grooming, saddling and mounting equine safely.
II. Hands on - all attendees will proceed to catch, halter, groom, saddle, bridle and mount safely.
III. All participants will critique safety techniques, add comments on safety of the above procedures.

LESSON THREE - 2 Hours - Attendees will mount and demonstrate safe mounting and riding skills and techniques. Attendees will critique mounting and riding skills of each other.

OBJECTIVES

I. Participants will develop safe mounting and riding skill by comparing and sharing safety information and demos of experienced riders.
MATERIALS

- One horse or mule, riding saddle, pad, proper bridle, bit, halter and rope per participant.
- Grooming equipment so that all equine can be properly groomed.
- Arena or riding area for hands on practice, observation and demos.

PROCEDURE

I. All attendees will catch, halter, groom, saddle, bridle-bit equine safely.
II. All participants will ride equine at a walk and trot and practice figure 8 maneuvers with all critiquing safety techniques.

LESSON FOUR - 2 Hours - Developing a working understanding of what a good trail veterinary first aid kit should be and some practical skills in how to use it. Developing an understanding of accident probability for people involved in equine activities and what first aid could be given on the trail for both people and equine by lay personnel.

OBJECTIVE

I. To develop practical veterinary first aid skills for stock and first aid skills for people in stock related accidents for lay personnel.

MATERIALS:

- One complete layman’s veterinary first aid kit.
- One complete standard, American Red Cross approved, layman’s first aid kit for humans.

PROCEDURES

I. Discussion and demo of veterinary first aid kit contents, where they can be obtained and how to care for them.
II. Discussion and demo of a standard human first aid kit (American Red Cross).
III. Identification of symptoms and common equine injuries and illness and how to care for them.
IV. Identification of symptoms of common human equine accidents and how to treat them, i.e. broken bone, head injuries, eye injuries, cuts and bruises.