

Comprehensive Alpaca Record & Evaluation (CARE)

Compiled by Laura Coussens, Kissin' Coussens Alpacas (KCA), 2000

The CARE checklist is for recording pertinent information, including strengths and weaknesses, for the purpose of buying, selling and breeding alpacas. The assistance of a qualified veterinarian is required to safely and accurately complete this evaluation. Related animals may be evaluated on their own CARE. Animals may also be re-evaluated as they mature. References are noted in parentheses, see section 15. Revisions will be available in the AOBA Library or by contacting KCA.

(Affix full fleece photo here)

(Affix shorn photo here)

1. General Information

Registered name: _____ Date: _____

Sex: _____ DOB: _____

Microchip/Tattoo: _____ ARI no.: _____

Country/state of birth: _____

Type: (Huacaya, Suri or cross): _____

Color/markings: _____

Breeder: _____

Owner/farm: _____

Address: _____

Phone: _____ Fax: _____

Email: _____ Web site: _____

Months/years at current residence: _____

Type of housing: _____

Companions (species/number): _____

Previous sale price(s)/date(s): _____

Previous owner(s)/date(s): _____

Full siblings/ARI nos.: _____

Veterinarian: _____ Phone: _____

2. Fiber [A44-84; H102-5; J; F; S]

Uniformity (consistency of length, fineness, crimp and color): _____

Staple length (____ mos. growth): _____

Fineness: _____

Crimp style (shoulder, side and rump): _____

Luster: _____

Tensile strength: _____

Guard hair: _____

Handle: _____

Lock formation: _____

Coverage: _____

Weathering/dry tips: _____

Cotting/matting: _____

Annual fleece weight (prime/total): _____

Histograms (note: sex, age, diet, location of sample): _____

Notes: _____

3. Behavior [A26-42, 142, 173; M49-50, 54-55, 390; C37; J]

Temperament: _____

Caught/haltered/lead easily? _____

Aggressive to other animals or people? _____

Evidence of vices? _____

Notes: _____

4. Diet [A126-138; M12-44; C33-39; J; V]

Type of pasture: _____

Hay: _____

Pellets: _____

Grains: _____

Vitamins and minerals: _____

Dietary changes/dates: _____

Notes: _____

5. Medical History [C41-2; A, M]

Weight at birth/1 mo./6 mos./1 yr./18 mos./2 yrs: _____

Full term/normal birth? _____

Began nursing @ (min./hrs.): _____

IgG: _____ @ (hours/days): _____

Transfused/date? _____

Post-transfusion IgG/date? _____

Bottle fed/reason(s)? _____

Neutered/reason(s)? _____

Disease resistance: _____

Thermoregulatory adaptability: _____

Previous medical conditions/illnesses/prognoses: _____

Current medical conditions/illnesses/prognoses: _____

Injuries/surgeries/prognoses: _____

Vaccines (types and dates): _____

Dewormings (types and dates): _____

Allergies? _____

Fecal exam(s)/dates: _____

Urinalysis: _____

Blood tests - Serum Chemistry: _____

CBC: _____

Thyroid: _____

Trace elements: _____

Other: _____

Notes: _____

6. Locomotion [A85-6, 93; M70, 528-30; H104]

Gaits - Walk: _____
Pace: _____
Trot: _____
Gallop: _____
Do feet track in a straight line? _____
Cross over at midline? _____
Free and flowing? _____
Stiff or lame? _____
Notes: _____

7. Physical Evaluation [A, M, C, V, S, J]

Height (34-40 in. adult): _____ Weight (105 lbs. min., shorn): _____
Body condition (normal, thin, obese): _____
Check: withers, between rear legs, behind elbow, chest, perineum.
Body temperature (99.5° F - 102° F, resting adult): _____
Head - Symmetrical and wedge-shaped? _____
Elongated/roman nose? _____
Fragile face? _____
Wry face? _____
Cleft palate? _____
Abscesses? _____
Nostrils - Air movement through both nostrils? _____
Discharge? _____
Lips: _____
Tongue: _____
Dentition - Overshot/Undershot jaw? _____
Lower incisors trimmed? _____
Retained deciduous incisors? _____
Canine (fighting) teeth erupted/trimmed: _____
Cheek teeth (Molars/Premolars): _____
Ears - Evidence of deafness (Increased visual acuity/tactile sensations;
responds to loud noises by sensing herd dynamics): _____
Spear shaped (normal)? _____
Long or short? _____
Banana or pancake shaped? _____
Forward set ears? _____
Curled/Fused? _____
Frostbitten? _____
Parasites? _____
Eyes - Evidence of blindness? _____

Constricted pupil? _____
Dilated pupil? _____
Opacities? _____
Cataracts? _____
Persistent pupillary membrane? _____
Ectropion/entropion? _____
Lacerations? _____
Tearing? _____
Iris color (brown, gray, mixed, blue): _____
Neck/Spine/Tail - Short or long neck? _____
 Throat latch: swelling? _____
 Scoliosis? _____
 Long or short back? _____
 Swayed or humped-back? _____
 Crooked tail/no tail? _____
Chest capacity - Deep with well sprung ribs? _____
Hindquarters - Wide with a slight slope toward tail? _____
Tail set - Normal (sloped rump) or high (llama like): _____
Legs - Knock kneed, bowed out at knee? _____
 Calf-kneed, buck-kneed? _____
 Cocked ankle or down in fetlock? _____
 Base narrow or base wide? _____
 Camped forward/camped behind? _____
 Post legged? _____
 Cow-hocked? _____
 Sickle-hocked, bowed legs? _____
 Luxating patella? _____
 Contracted tendons? _____
 Short or long legged? _____
Feet - Toenails straight and trimmed? _____
 Pads normal? _____
 Toe in (pigeon toed)/toe out (splayed feet): _____
 Syndactyly/polydactyly: _____
Bone size - Large, average or small-boned: _____
Well-Muscled? _____
Heart - Heart Rate: _____
 Murmur? _____
 Arrhythmia? _____
Lungs - Respiratory rate: _____
 Abnormal sounds? _____
Skin - Pigmentation: _____
 Dermatitis, alopecia, external parasites, etc.: _____

Teats - four (normal), functional, normal sized for gender? _____

Hernias - Umbilical? _____

Scrotal? _____

Ulcers: _____

Notes: _____

8. Reproduction [A170-183, M381-429; C99-117, N]

Male - Testicles - Size (left, right): _____

Consistency (left, right): _____

Cryptorchid/monorchid? _____

Scrotal edema/nodules? _____

History or signs of heat stress? _____

Epididymis (left, right): _____

Penis - Preputial adhesions? _____

Curvature? _____

Semen evaluation? _____

Preputial, urethral culture/results: _____

Libido (weak or strong?): _____

Precopulatory behavior: _____

Copulatory behavior: _____

Proper position/penetration? _____

Bred/Impregnated first female (age): _____

Number of pregnancies confirmed: _____

Number of viable cria produced: _____

Number of cria in utero: _____

History of milk production: _____

Date last settled a female: _____

Female - Current pregnancy status: _____

Date of last parturition: _____

Time between parturition and rebreeding: _____

Date(s) bred: _____

Breeding behavior: _____

Pregnancy determination method: _____

Due date: _____

Service sire/ARI no.: _____

First impregnated (age): _____

Number of pregnancies: _____
Number of viable cria produced: _____
Dystocias: _____
Vulva - Vertical or horizontal? _____
Discharge? _____
Clitoris - Prominent? _____
Intersexed? _____
Hymen - Present/absent? _____
Partial persistent hymen/tags? _____
Vaginal discharge? _____
Vaginal cultures/results/treatments: _____

Cervix - opening normal? _____
Uterus - size (left horn/right horn): _____
Ovaries - size (left/right): _____
Mammary secretions/swelling? _____
History of milk production (incl. IgG): _____
Mothering ability: _____

Notes: _____

9. Offspring [photos attached?]

Number of male and female offspring: _____(m) / _____(f)
Names (reg. nos.): _____

Overall health: _____

Fiber characteristics/statistics: _____

Colors/Markings: _____

Number of male offspring gelded/reason: _____

Number of female offspring culled/reason: _____

Conformational faults: _____

Defects/abnormalities: _____

Show record: _____

Notes: _____

10. Sire [photo attached?]

Registered name: _____

Reg. no.: _____ DOB: _____

Deceased? _____ Cause of death: _____

Height, weight, color, photo: _____

Sire/Reg. no.: _____

Dam/Reg. no. : _____

Fiber characteristics/statistics: _____

Conformational faults: _____

Temperament: _____

History of milk production: _____

Abnormalities/illnesses in sire? _____

Number of pregnancies achieved: _____

Number of viable cria produced (M/F): _____

Number of male offspring gelded/deceased (reason): _____

Number of female offspring culled/deceased (reason): _____

Show record: _____

Full siblings/Reg. nos.: _____

Notes: _____

11. Dam [photo attached?]

Registered name: _____

Reg no.: _____ DOB: _____

Deceased? _____ Cause of death: _____

Height, weight, color, photo: _____

Sire/Reg. no.: _____

Dam/Reg. no.: _____

Fiber characteristics/statistics: _____

Conformational faults: _____

Temperament: _____

History of milk production: _____

Abnormalities/illnesses in dam? _____

Number of pregnancies? _____

Number of viable cria produced (M/F)? _____

Reabsorptions/Abortions/Stillbirths? _____

Dystocias? _____

Number of male offspring gelded/deceased (reason): _____

Number of female offspring culled/deceased (reason): _____

Show record: _____

Full siblings/Reg. nos.: _____

Notes: _____

12. Training [A139-143]

Halter: _____

Performance: _____

Loading/transporting: _____

Clicker: _____

TTeam: _____

Mallon: _____

Notes: _____

13. Shows/Awards/Promotions [H95-115]

Fleece: _____

Halter: _____

Performance: _____

Promotions/Advertising: _____

Other: _____

14. Additional documents (note if attached):

ARI certificate: _____

ARI records: _____

Health/veterinary records: _____

Blood tests: _____

Progesterone reports: _____

Semen evaluation: _____

Breeding record: _____

Sales Contract: _____

Breeding contract: _____

Histogram reports: _____

State Health Certificate: _____

References: _____

Other: _____

15. References:

A) The Alpaca Book (E. Hoffman/Fowler)

M) Medicine and Surgery of South American Camelids (Fowler)

C) Caring for Llamas and Alpacas (C. Hoffman/Asmus)

N) Llama and Alpacas Neonatal Care (Smith/Timm/Long)

V) Veterinary Lama Field Manual (Evans)

S) Secrets of the Andean Alpaca - The Field Guide (Krieger)

H) ALSA Handbook (2000, Alpaca and Llama Show Association, Inc.)

J) The Alpaca Registry Journal - Spring 1999 (ARI, Inc.)

F) 2000 Clip Care Manual (AFCNA, Inc.)