



CENTRE HOSPITALIER UNIVERSITAIRE VÉTÉRINAIRE Faculté de médecine vétérinaire

Client:

36687 - Gendarmerie Royale Patient:

121396

DMV: DR Keith Murch

2257, County Road 31

du Canada - Carrousel

Spring

1, Sandridge Rd

C.P. 8900

Équin

Ottawa, ON K1A 0R2

Hanovrien

Hongre Jun 20, 2020

510 kg

Winchester, ON K0C 2K0

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613-774-2159 855-238-1393

Date de la Visite:

22-01-24 08:02

Date de sortie:

Raison de la visite:

OCD jarret droit (DIRT)

Client discharge letter (HEQ Chirurgie) (Case Summary & Instructions)

Summary

Spring, a 1 year and 7 months old gelding Hanovrien, was presented to the Equine Surgery Department on January 24th 2022 for osteochondrosis dissecans (OCD) evaluation of the hocks.

PROBLEMS IDENTIFIED AND PROCEDURES:

- <u>Physical examination</u> (January 24th): Severe distension of the right hock and mild distension of the left one. Weight = 510 kg
- Blood analysis (January 24th): Mild lymphopenia.
- Tarsal X-rays (January 24th):
- * Right hock: OCD of the distal intermediate ridge of the tibia with synovitis and free fragments in the medial recessus.
- * Left hock: irregular surface of the distal intermediate ridge of the tibia with a strong supicion of fragmentation.
- Arthroscopy of both hocks (January 25th): under general anesthesia
- * Right hock: removal of all the fragments and debridement of the lesion. Mild inflammation was present in the joint.
- * Left hock: on the left distal intermediate ridge of the tibia, the lesion was debrided.
- Wisconsin (January 25th): 360 eggs per gram of strongle and 1 egg of Anoplocephala Perfoliata

The prognosis for life is excellent and the prognosis for sport is good.

RECOMMENDATIONS

1) EXERCISE:

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- Please keep Spring on complete stall rest for the next 2 weeks. Then, he can be hand-walked for 2 weeks, starting with 5 minutes twice a day the first week and 10 minutes daily the second one.
- Then, Spring can go in a small paddock (30ft x 30ft) for 4 more weeks, followed by 4 weeks in a larger paddock. After 3 months, if he is doing well and in agreement with your veterinarian, Spring can progressively resume his regular exercise routine.

2) WOUNDS AND BANDAGES:

27/01/2022

- Please change the bandages immediately if there are soiled or no longer in place.
- Otherwise, bandages in place on discharge day can be changed in 2-3 days with the material provided at the discharge and using the materials in the order shown in the video: https://www.youtube.com/watch?v=chjSzVPpFPq
- Then, you can change them every 2 to 3 days until suture removal. You can protect them with stable wrap on top.
- Upon each bandage change, please make sure that the incisions are dry, non-swollen, non-painful, and that there is no discharge. If you notice any of these signs, please contact your treating veterinarian immediately.
- Suture removal by your treating veterinarian are due during week of February 8th. The wounds needs to be cleaned with an antiseptic solution prior suture removal. Please do not apply any cream or ointment on it. Apply one last bandage after the suture removal.

IMPORTANT : PLEASE KEEP HIS STALL CLEAN AT ALL TIME TO AVOID CONTAMINATION OR INFECTION OF HIS WOUNDS.

3) FOLLOW-UP:

- Please monitor Spring's temperature twice a day for one week following discharge. If he develops fever (> 38.5°C), respiratory signs, any swelling or discharge at the level of the surgical incisions, any lameness or any sign of depression/dysorexia (reduced appetite), please do not hesitate to call your veterinarian or us. His temperature stayed around 38°C during his hospitalisation, an inflammatory process with pulmonary origin could be possible so please not to give hay during transport and then feed him from the ground during his convalescence.
- Please also make sure that he drinks enough (about 25-30L per day), eats well and that his manure remain normal in quantity and quality. If his water intake decreases, you may add apple juice to his water or place a salt lick. Adding 2 tea spoon of salt, mixed with molasse or corn syrup, given in the mouth two to four times a day, usually increases water consumption of horses.

4) MEDICATION:

- PHENYLBUTAZONE (non-steroidal anti-inflammatory, 2.2mg/kg PO, 1g/tablet): please administer orally 1 tablet at night on January 27th. Then, administer orally 1 tablet once a day (every morning) until January 30th. In case of diarrhea, anorexia or any other sign that concerns you, stop the medication and contact your vet or us.
- **DEWORMING**: the coprology of Spring's manure revealed a high rate of strongyles and tapeworms. Deworming with an association of Moxidectin and Praziquantel (Equest plus) is highly recommended in the next weeks. Please wait at least 1 week post-surgery to administer the treatment.

Thank you for referring Spring to the CHUV and entrusting us with his care. If you have any questions or concerns, please do not hesitate to contact us.

Dre DMV, DÉS, DACVS, Equine surgery and lameness clinician Dmv, Equine surgery resident

In accordance with current MAPAQ recommendations, we recommend isolating your animal from the herd for the next 14 days. If this is not a possibility, you will at least need to prevent any direct contact with other animals and increase applicable hygiene measures (https://www.mapaq.gouv.qc.ca/SiteCollectionDocuments/Santeanimale/Bulletins/Bulletin_zoosanitaire-Recommandations_rassemblement_chevaux_VF.PDF).

Please take your horse's temperature once daily for a week following discharge. If it is between 38.2 °C (100.7 °F) and 38.4 °C (101.3 °F), recheck it a few hours later; if it is at or above 38.5 °C (101.3 °F), please call your veterinarian.

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