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Leanne Begg BVSc Dip VCS MS MANZCVS Dip ACVIM Jonathan Lumsden BVSc Dip VCS MS Dip ACVS

James Whitfeld BVSc

Richard Humberstone BVSc Cert EP MRCVS

Chris O'Sullivan BVSc MS Dip VCS MANZCVS Dip ACVS

Hayley Lang DVM ACVS

Rachel Lambeth BVSc Dip VCS MVCS

Ruth Franklin BVetMed MRCVS

Rachel Salz BSc (Hons) BVetMed MRCVS Dip ACVSMR

Victoria Locke MA VetMB CertAVP(EM) MRCVS

Ilona Bayliss MA VetMB MRCVS

Ramon Perez DVM



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RANDWICK EQUINE CENTRE

Veterinarians • Equine Medicine & Surgery

Veterinary Surgeons

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Resident Consultants

Karon Hoffmann BVSc Dip VCS MVSc PhD DipECVDI D R Hutchins BVSc Hon. DVSc FANZCVS OAM Treve Williams BVSc MRCVS

Colin Dunlop BVSc Dip ACVA

22nd November, 2017

VETERINARY REPORT FOR 'APOLLO D'ORO'

Signalment:

Three Year Old Thoroughbred gelding

Microchip:

985100012050630

Trainer:

Mrs Gai Waterhouse and Mr Adrian Bott

On the 22nd November, 2017 'Apollo D'Oro' was again found to be lame in his near foreleg. He has effusion (increased synovial fluid) in the intercarpal joint of his knee with mild pain on knee flexion. Radiographs of his near for knee revealed significant lysis and sclerosis of his third carpal bone that has progressed since his most recent radiographs of the 21st January 2017.

We recommend that 'Apollo D'Oro' have a minimum of three months spell. He should continue to receive weekly intramuscular administration of Cartrophen during his next preparation.

......N3877

Dr Leanne Begg\B\ 多6 DipVetClinStud MS MANZCVS Dip ACVIM

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PLEASE ENSURE THAT THIS REPORT IS FORWARDED TO THE HORSE'S OWNER AND THE PERSON RESPONSIBLE FOR THE FUTURE CARE OF THE HORSE, AS WELL AS TO THE INSURER, IF APPLICABLE

Veterinary Surgeons

Greg Nash BVSc MANZCVS

Leanne Begg BVSc Dip VCS MS MANZCVS Dip ACVIM Jonathan Lumsden BVSc Dip VCS MS Dip ACVS

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Veterinary Surgeons

Tate Morris DVM

Sophia Sommerauer Dr Med Vet

Kate Robson BVetBiol BVSc (Hons)

Jonathan Lee BSc (VB) DVM

Sarah SmithBVMS MRWS

Resident Consultants

Thomas Bayes BVM BVS (Hons) MRCVS

Treve Williams BVSc MRCVS Colin Dunlop BVSc Dip ACVA

25th January 2017

VETERINARY REPORT FOR 'APOLLO D'ORO'

Signalment:

Two Year Old Thoroughbred gelding

Microchip:

985100012050630

Trainer:

Mrs Gai Waterhouse and Mr Adrian Bott

On the 23rd January 2017, 'Apollo D'Oro' was referred to Randwick Equine Centre for arthroscopic surgery after radiographs identified a third carpal bone fragmentation associated with the left knee. On examination the horse had marked filling of the left knee (mid-carpal joint), lameness (grade 3/5) and pain response to knee flexion.

On the 25th January, 'Apollo D'Oro' underwent general anaesthesia and arthroscopic surgery of the left mid carpal joint. At surgery there was chronic appearing bone and cartilage damage associated with the medial aspect of the radial facet of the third carpal bone. The damaged cartilage and bone was curetted to firmly attached healthy cartilage and subchondral bone. The damaged areas involved approximately 15% of the third carpal bones weight bearing surface. There was a partial tear of the medial intercarpal ligament. The remainder of the articular cartilage was in good condition.

The surgical procedure was uneventful as was recovery from general anaesthesia. Since surgery the horse has been treated with antibiotics, phenylbutazone, sterile bandaging and stall rest and is progressing well.



Arthroscopic images before (left) and (middle) after debridement of damaged cartilage and bone in the left knee. Image of the partial tearing of the medial intercarpal ligament (right).

PLEASE ENSURE THAT THIS REPORT IS FORWARDED TO THE HORSE'S OWNER AND THE PERSON RESPONSIBLE FOR THE FUTURE CARE OF THE HORSE, AS WELL AS TO THE INSURER, IF APPLICABLE

3 Jane Street Randwick NSW 2031 Sydney Australia Postal PO Box 195 Randwick NSW 2031 Sydney Australia

Phone (612) 9399 7722 Fax (612) 9398 5649 E-Mail Address reception@randwickequine.com.au

-2-'Apollo D'Oro'

Aftercare recommendations for 'Apollo D'Oro' include:

- Continued stall rest for a further 8 weeks. Hand walking (10 minutes daily) may commence once the sutures are removed.
- Give 5 ml phenylbutazone once daily for mouth for 5 more days.
- Temperature and appetite should be monitored during the first week. If there is a rise in temperature (above 38.5°C), dullness in demeanour, loss of appetite or increased lameness, swelling or wound discharge, please call the clinic.
- Continued bandaging of the knee for a further 2 (two) weeks, changing the bandage every two
 to three days.
- The sutures should be removed around the 6th February 2017
- A four week course of weekly intramuscular pentosan polysulphate should be administered commencing at the time of suture removal, continued monthly while spelling, then given weekly when back in training.
- Following the period of stall rest, small yard rest is recommended for 8 weeks, before being allowed paddock exercise for 2-4 months (6-9 month spell). He should be kept as light in condition as possible while spelling and the feet well balanced.
- A course of IRAP therapy or joint medication should be considered on resumption of training, especially if there is persistent joint filling or pain on flexion.

The prognosis for racing is considered fair. On resumption to training, swimming should be incorporated in to the training regime as well as spacing fast work as much as possible. Careful attention should be made to keeping his feet well balanced. Thank you for the opportunity to treat 'Apollo D'Oro' and we look forward to following his racing career.

Please call the clinic if you have any queries regarding this report.

.....N10488

Dr Hayley Lang DVM Dip ACVS Specialist Equine Surgeon

Hayley Jung

RANDWICK EQUINE CENTRE