

Veterinary Surgeons

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Est 1951 by Dr Percy Sykes AM
RANDWICK EQUINE CENTRE

Veterinarians • Equine Medicine & Surgery

Veterinary Surgeons

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19th June 2020

VETERINARY REPORT FOR 'INDIGENOUS'

Signalment: 3-Year-Old Bay Thoroughbred Filly – 985100012112721

Trainer: Mrs Gai Waterhouse & Mr Adrian Bott

Veterinarian: Dr Leanne Begg

Indigenous was first attended by Dr Richard Humberstone after kicking in the walker on Monday (8/6) sustaining a wound over left hind fetlock. The wound was stapled and started the filly was started on Trivettrin antibiotic.

The following morning the stable veterinarian, Dr Leanne switch she to Penicillin and gentamicin as the filly was becoming more painful.

Consultation with Dr Hayley Lang, specialist Equine Surgeon was sought on 11/6/20 as the filly was still very sore.

On exam the filly 4/5 lame on the left hind. She was painful and swollen with cellulitis over lateral sesamoid. There was no significant tendon sheath or fetlock effusion.

She was sedated and X-rays of the left hind fetlock were preformed. Revealing slight change and a very small bone opacity at the plantar lateral aspect of the lateral sesamoid adjacent to wound.

The leg and wound was thoroughly cleaned and the staples were removed to allow drainage. The area was blocked and the wound was explored revealing contact with the lateral sesamoid bone (exposure/ score ~1cm in the plantar lateral aspect of the lateral sesamoid). A regional limb ceftriaxone antibiotic limb perfusion was preformed, the wound was flushed and the leg was bandaged with antibiotic ointment. She was 15ml Bute IV.

She was sent to the REC Hospital for follow-up treatment and on 12/06 the exposed bone was curetted to help further debride and clean the injury. While in the hospital she has been treated with bandaging and local and systemic antibiotics. Recheck radiographs on 18/06/2020 shoe a small defect in the bone were it was debrided but no obvious sequestrum developing. She has been very comfortable on the leg. Potential complications still include further infection, such as infection of the bone or development of a sequestrum which could require a standing surgery.

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

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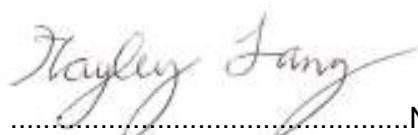
Indigenous

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Aftercare recommendations for 'Indigenous' include:

- 2 more weeks rest in a box with hand-walking, followed by 2 weeks in a small yard followed by 2 weeks rest in a larger paddock (6 weeks spell).
- Give 1 gram Bute once daily for 5 days.
- Give 2.5 scoops Sulprim paste orally twice daily for 10 days.
- Continue sterile bandaging of the leg for 2 more weeks, changing it every 3 days or as needed.
- Reassessment of the left hind fetlock including x-rays is recommended in 4 weeks or sooner if there is a problem. If the area has fully healed, then the spell may be able to be abbreviated.

Please call if you have any queries regarding this report.



.....NSW V10488

Dr Hayley Lang DVM Dip ACVS
Specialist Equine Surgeon
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