Veterinary Surgeons

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 Rachel Salz BSc (Hons) BVetMed MRCVS Dip ACVSMR Victoria Locke MA VetMB CertAVP(EM) MRCVS Ramon Perez DVM Ilona Bayliss MA VetMB MRCVS Megan Bartels BVS (Hons) Emily Sanford DVM Est 1951 by Dr Percy Sykes AM

4th February 2021

VETERINARY REPORT FOR 'KUNG FU MUSHU'

Equine Specialists

Veterinarians • Equine Medicine & Surgery

Signalment: Trainer: Owner/Agent: Spellina@: Veterinarian:

3-Year-Old Bay Thoroughbred Filly -985100012129100 Mr Peter & Paul Snowden **Triple Crown Syndications** Muskoka Farms Dr Gary Baitz BVSc – Thank you for referring this case

On the 2nd February 2021, 'Kung Fu Mushu' was referred to Randwick Equine Centre (REC) for arthroscopic surgery after radiographs identified a bone fragment associated with the left knee.

On examination at REC she had mild increased filling of the left knee (mid-carpal joint), and moderate (2/5) grade lameness at the trot on a firm flat surface. She had a positive response to flexion of the left knee which increased the lameness.

On the 3rd February, 'Kung Fu Mushu' underwent general anaesthesia and arthroscopic surgery of the left mid carpal joint. At surgery there was recent appearing small bone fragment (~4mm x 3mm) on the dorsomedial aspect of the 3rd carpal bone, the bone fragment was removed and the adjacent damaged cartilage and bone was curetted to firmly attached healthy cartilage and subchondral bone. The remainder of the 3rd carpal bone showed mild degenerative cartilage changes. The opposing radial carpal bone had full thickness cartilage loss on the dorsal margin with minimal underlying bone involvement. The loose damage cartilage was removed to healthy bone and firmly attached healthy cartilage. The damaged articular cartilage area involved approximately 20% of the radial carpal bones weight bearing surface. The remainder of the articular cartilage was in good condition.

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

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 LOCATED at CANTERBURY EQUINE QUARANTINE CENTRE Cnr of King and Frederick Streets, Canterbury, NSW 2193 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



Matthew Oliver Heaton Bvet Med MRCVS Charles Spicer-Jenkins BVM&S BSc (Hons) MRCVS Jessica Flook DVM Charmaine Tam BVM&S MRCVS Brianna Ritota DVM Jessica Ramm BVSc Hannah Nagel BVSc (hons)

Resident Consultants

.../2

Anna Robson BVMS MRCVS

Karon Hoffmann BVSc Dip VCS MVSc PhD Dip ECVDI Colin Dunlop BVSc Dip ACVA Treve Williams OAM BVSc MRCVS Greg Nash BVSc MANCVS

Veterinary Surgeons



Arthroscopic images before (left) and (right) after fragment and damaged cartilage removal in the left knee involving the radial carpal bone (top) and 3rd carpal bone (bottom).

LOCATED at CANTERBURY EQUINE QUARANTINE CENTRE Cnr of King and Frederick Streets, Canterbury, NSW 2193 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-'Kung Fu Mushu'

Aftercare recommendations for 'Kung Fu Mushu' include:

- Continued stall rest for a further four 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 on the 15th February 2021
- A four week course of weekly intramuscular pentosan polysulphate should be administered commencing at the time of suture removal and then continued monthly while spelling, then given weekly when back in training.
- Following the period of stall rest, small yard rest is recommended for four weeks, before being allowed paddock exercise for 3 months. She should be kept as light in condition as possible while spelling and the feet well balanced.

The prognosis for racing is considered fair to good. On resumption to training, swimming should be incorporated into the training regime as well as spacing fast work as much as possible. She may require intra-articular anti-inflammatory medication in future race preparations.

Please call should you have any questions regarding this report.

Manden NSW V3860

Dr Jonathan Lumsden BVSc Dip VCS MS Dip ACVS Specialist Equine Surgeon REC

LOCATED at CANTERBURY EQUINE QUARANTINE CENTRE Cnr of King and Frederick Streets, Canterbury, NSW 2193 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