

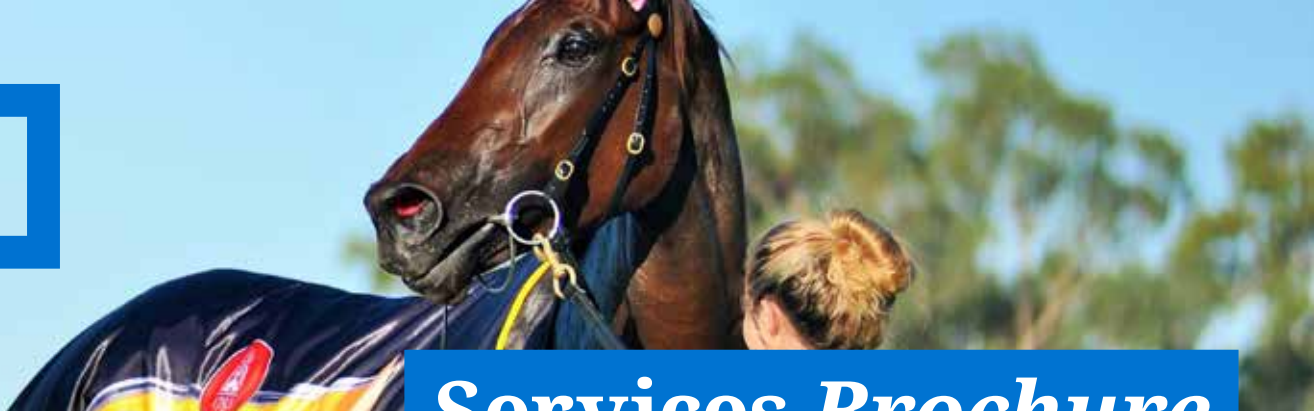


PERTH EQUINE
HOSPITAL

Services

Brochure





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Ultrasound

Ultrasonography is a valuable and widely used diagnostic tool in horses. An Ultrasound works by producing sound waves, but at a frequency we cannot hear.

These sound waves are generated by the probe the veterinarian uses, which enter the body and are reflected back off the tissue and bone where an electronic system in the machine then translates the information in to the moving image visible on the screen.

Perth equine Hospital has several digital ultrasonography machines and probes that can be used to scan different parts of the body such as:

- **Legs – tendons**
- **Chest – heart**
- **Abdomen – internal structures**
- **Reproductive system – pregnancy diagnosis/point in cycle**



Surgery

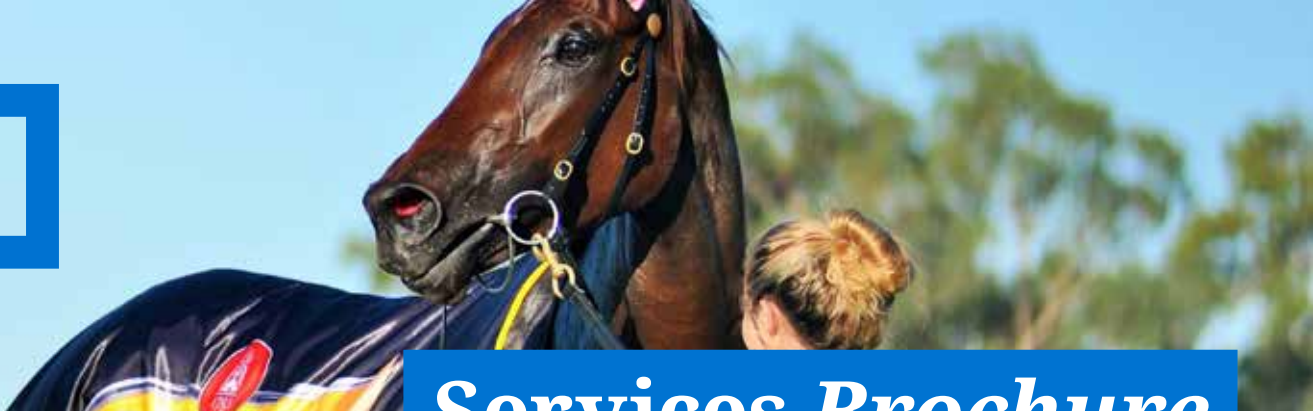
At Perth Equine Hospital we have a full equine surgical suite, with advanced anaesthetic monitoring equipment, and a padded air conditioned induction and recovery box. With our quiet gantry we can ensure your horse has a smooth, quick, and safe transition from the induction box to the surgical suite, then back to the recovery box, where they can comfortably wake up in peace.

With our full surgical facilities we are able to perform a wide range of routine and emergency surgical procedures including, but not limited to:

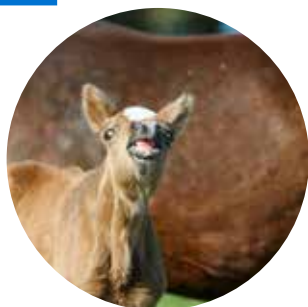
- **Arthroscopies – key hole joint surgeries for bone chip removals, flush a septic joint**
- **Upper airway – tie back, tie forward, vocal cord resection**
- **Colic Surgeries**

- **Wound repair**
- **Fracture repairs**
- **Foal surgeries – umbilical hernia repairs, check ligament, transphyseal bridging.**
- **Routine castrations and cryptorchidectomy (undescended testicle)**
- **Eye surgeries**

Our surgical procedures are performed by our equine surgeon Dr Josie Hardwick. Dr Josie joined our team in 2014 after completing a rigorous 3 year training program at Randwick Equine Centre in Sydney.



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Reproduction

Perth Equine Hospital veterinarians have vast experience in equine reproduction. From routine follicle testing, pregnancy diagnosis and monitoring, and fresh/chilled/frozen artificial insemination. With our crush being inside we are able to scan your mares comfortably, for both vet and horse, out of the hot or cold weather.

If you have a crush or safe area for scanning at home, we are also able to come to you with our portable digital ultrasound machine.

If you need to store your stallions semen, we have tanks filled with liquid nitrogen which are kept filled on a regular bases, and securely locked away. We are available to help with any foaling emergencies – dystocia's and emergency caesarian – and mare and foal intensive care treatment.



Radiography

Perth Equine Hospital has a portable digital wireless radiography machine, making it easy to use in the hospital and to transport out to on the road consultations and for emergencies. Digital radiography does not require film processing, and allows instant examination of x-rays on the large wireless screen.

Making it a huge asset being able to provide a quick diagnosis and treatment. All images taken are able to be sent via email or on a USB to our clients, referring vets or farriers.



Equine Hospital

Perth Equine Hospital is a purpose built veterinary facility based in the heart of Ascot, WA, close to Ascot racecourse. Our facilities include:

- Straight and circular asphalt trot-up areas
- Day yards
- Intensive care stalls
- Full surgical suite
- Padded anaesthetic induction and recovery stall
- Equine stocks
- Diagnostic equipment (x-ray, ultrasound, endoscopy, ECG)
- Dental gear (powerfloat and rasps)
- On-site laboratory
- Pharmacy
- Space for client and float parking



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Endoscopy

An endoscope allows the veterinarian to visualise inside the body by means of a flexible fibre-optic scope. Perth Equine Hospital is equipped with a range of endoscope units for diagnosis of a wide range of conditions.

Passed through the nose, much like a tube when drenching, detailed examination of the upper and lower airway respiratory tracts, sinus, larynx, trachea, bronchi and guttural pouches is possible. Conditions such as Epiglottic entrapment, Laryngeal Paralysis and even pneumonia can be diagnosed by respiratory endoscopy.

Using our longer gastroscope, we can examine the stomach for presence of ulcers.

Other areas of the body such as the gastrointestinal tract (stomach, rectum, small colon) and urinary tract (urethra, bladder) can also be examined by endoscope.

Most endoscopic examinations are performed with the horse in the crush, and with the endoscope being connected to a large screen, you as the client will be able to see exactly what the vets sees. We are also able to perform endoscopies at your in stables with our portable endoscopes.

For horses with mechanical airway issues we can use our dynamic respiratory scope to examine the throat while exercising including galloping.

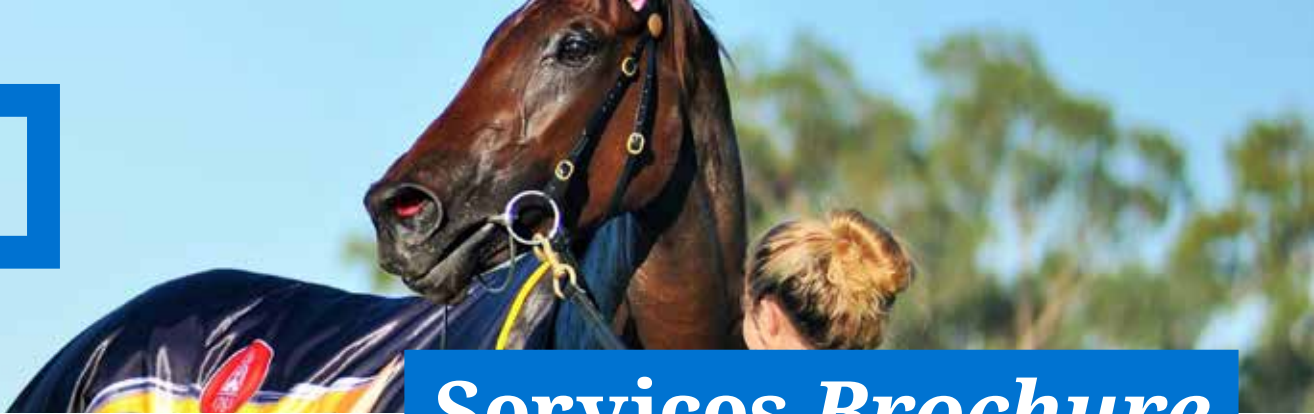


Ambulatory

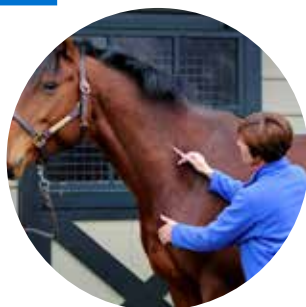
As well as being on call 24/7, 365 days a year for all your emergency needs, we also offer consultations at the convenience of your home or agistment. With our portable wireless digital xray machine, digital ultrasound machine, portable endoscope, dynamic respiratory scope (used when exercising) and dental power floats, alongside our fully equipped cars we are able to diagnose and treat the majority of ailments out on the road.

Procedures commonly performed by our on the road and emergency service include, but not limited to:

- **Routine health checks**
- **Vaccinations**
- **Drenches**
- **Lameness examinations**
- **Pre purchase examinations**
- **Dental examinations**
- **Radiographs**
- **Ultrasounds – tendon/pregnancy diagnosis**
- **Wound repairs**
- **Endoscope – resting and at exercise**



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Infectious Disease and Vaccination

Strangles

Strangles is a highly infectious and contagious respiratory disease caused by the bacteria *Streptococcus equi* subspecies *equi* which can be spread by both direct, and indirect routes of transmission. The morbidity is accepted to be between 30-100%, and mortality 0-10% as a result of asphyxiation or complication. Older horses may have age-acquired immunity, which generally means they will not develop clinical disease, or if they do, it will be mild.

This is compared to immunologically naive, young horses who will commonly develop more serious disease, with a protracted recovery. The infectious organism is able to maintain self within the environment for a short time, but the best reservoir of infection is a carrier animal – an animal who is infected, and can infect others, but does not show any signs of clinical illness – in doing so, slides under the radar! Horses are capable of shedding for 4-6 weeks after they become infected.

There is a vaccination available for Strangles, which is given as a primary killed vaccine, with two subsequent boosters, given at 2-week intervals; then upkept annually. The vaccine is not perfect, and there have been incidences of vaccination reaction.

Tetanus

Tetanus is a highly fatal infectious disease by the toxin of *Clostridium tetani*. Signs of muscular rigidity, hyperesthesia and convulsions are due to the potent exotoxin, tetanospasm. Infection usually occurs through contamination of wounds with spores.

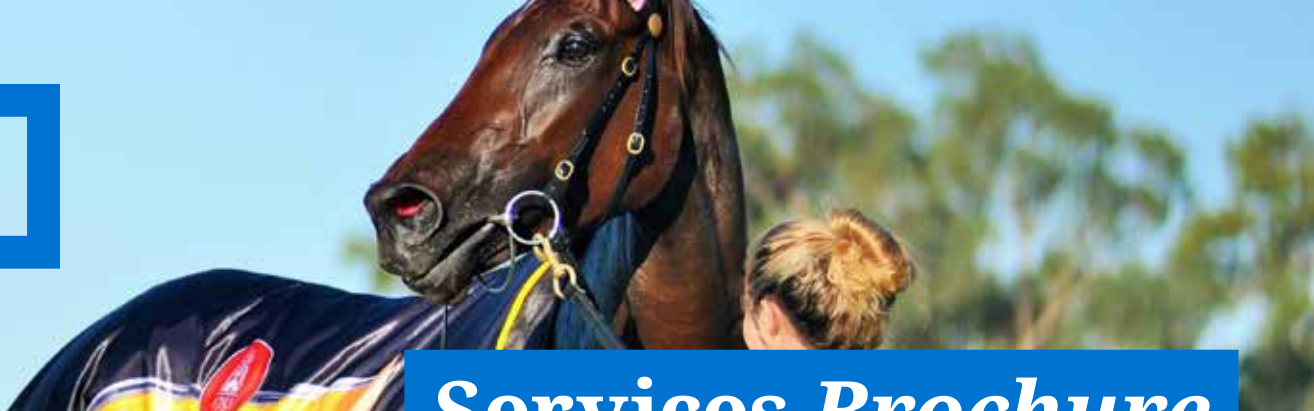
If conditions within the wound are suitable then the spores germinate, bacteria proliferate, and toxins are elaborated.

Spores are viable for many months in the wound, often long after the wound have healed. The incubation period is typically 7-21 days, with a range of several days to several months. The toxin migrates via peripheral nerves and blood to the CNS (grey matter of brain and spinal cord). The toxin binds to gangliosides blocking the release of inhibitory neurotransmitters.

Tetanus is a highly preventable disease through vaccination with the toxoid and the treatment of wounds. If an animal has a wound then a booster with toxoid is administered if their vaccination status is up to date. TAT and toxoid should be administered if naive followed by toxoid 3 weeks later. In foals, coverage is usually provided by vaccinating the mare 4-6 weeks before foaling.

Hendra Virus

Hendra Virus, henceforth referred to as HeV, is a highly infectious, contagious disease that can be transmitted to humans, and lead to abrupt death in both humans and horses. Transmitted by droplets from flying foxes to horses, and through secretions/excretions between horses, and to humans. Vaccination is the only known protection against HeV, and so horses travelling to Northern NSW or QLD should be vaccinated. The protocol is 2 vaccinations, 21-41d apart, with 6mo boosters thereafter.



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Dentistry

Looking after your horse's teeth is an important aspect of their health care. The teeth can develop sharp edges and uneven wear which can compromise their ability to grind their food sufficiently which in turn can result in a drop in condition. Teeth issues can also cause behavioural problems as the horse may attempt to alleviate the pain, from example the bit in its mouth.

For your horse to perform and look its best, they will need regular dental care. We recommend for a horse under 5 years to be checked twice a year, or every 6 months. Over 5 years of age to be checked once a year, every 12 months. If they have any pre-existing dental issues such as, but not limited to, large hooks, a waved mouth, or periodontal disease, they should be seen every 3 months, or as directed by your veterinarian.

At Perth Equine Hospital we are well equipped to give your horse a full and thorough dental examination, using hand rasps and power tools in a secure and safe environment in our clinic. We are also able to come to you to perform this service depending on your facilities.

We are able to perform:

- **Tooth extractions**
- **Wolf teeth removal**
- **Cap removal**
- **Dental radiographs**
- **Corrective dental work**
- **Routine dental work**

We are also happy work alongside your dental specialist if needed.



Gastroscope

A gastroscope, put simply, is a procedure to look inside the horse's stomach. Why do we do gastroscopes? The main reason we investigate the horse's stomach is to diagnose Equine Gastric Ulcer Syndrome (EGUS).

Is your horse under performing? Going through some behavioural changes? Has a poor appetite, being a fussy eater, poor coat condition, or pain when girthing? Then they may be suffering from gastric ulcers. The most efficient way to get a definitive answer to see if they have gastric ulcers is by using a gastroscope to visualise the horse's stomach to see if ulcers are present or not. If they do have ulcers, the vet will grade the type and

then we will offer the most appropriate treatment for your horse. It is important that the stomach is empty for this procedure, the horse will need to be fasted for 12hrs prior to the gastroscopy. Water is to be removed the morning of the procedure, or 4-6hrs prior. A full history will be taken, and a full examination will be done before the procedure begins.

This procedure is done at the hospital within our crush. Sedation is given so the horse is relaxed and stands quietly throughout the procedure. The vet will pass a gastroscope, a flexible endoscope which is a long tube-like instrument approximately 3.5m long with a light and lens



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Gastroscope (cont.)

for viewing, through the horse's nose and down the oesophagus, viewing the stomach and the proximal duodenum (the first part of the small intestines), and pylorus. The vet can manoeuvre around the stomach via a hand piece which is connect to the gastroscope, with which they are also able to inflate the stomach with air to improve visualisation, and use water to clear away debris from the camera lens and stomach lining. The gastroscope is connected to a computer screen so the veterinarian can clearly see what

is present in the stomach and take still images and video recordings, as necessary. Once the examination has ended, the stomach is deflated. The sedation has worn off, the horse will be given a small wet feed before travelling home.

Equine Gastric Ulcer Syndrome, EGUS, is an umbrella term to describe erosive and ulcerative diseases of the stomach and is further divided into the glandular, squamous region, and the pylorus. Ulcers are graded 0-4 depending on there severity.