


# HEALTH DECLARATION FOR HORSE SALES

Sale :	NZB Ready-to-Run Sale 2021	Lot Number :	194
Name of horse :	UN-NAMED	Year of birth :	2019
Breeding (Sire) :	BELARDO	(Dam) :	MANUREKA
Sex :	BEELDING	Colour :	BAY

## PART ONE: VENDOR'S (OR AGENT'S) STATEMENT:

1.	Name :	HARUHI FARM	Relationship to vendor :	AGENT
2.	Source of horse :	Homebred	<input checked="" type="radio"/> Yes / <input type="radio"/> No	
		Other (give details)		
3.	Horse's weight :	463 kg	Date weighed :	10/11/21
4.	Horse's height :	15.2 hh		
				Circle as appropriate
5.	During the horse's ownership, has it suffered from any form of colic, intestinal disorder or undergone abdominal surgery?			Yes / <input checked="" type="radio"/> No
	OR Is there any evidence of previous abdominal surgery?			Yes / <input checked="" type="radio"/> No
	If yes to either of the above questions, provide details below:			
6.	During the horse's ownership, has it suffered from any significant illness or disease?			Yes / <input checked="" type="radio"/> No
	If Yes, please provide details below:			
7.	During the horse's ownership, has it suffered from any accident, lameness, fracture, tendon, or ligament injury?			<input checked="" type="radio"/> Yes / <input type="radio"/> No
	If Yes, please provide details below: HORSE SUSTAINED INJURY WHILST UNLOADING FROM HORSE TRUCK 22/1/21 THAT REQUIRES SURGERY - REPORT FILED.			
8.	During the horse's ownership, has it undergone invasive joint surgery, surgical fracture repair or surgical intervention of the upper respiratory tract?			Yes / <input checked="" type="radio"/> No
	If Yes, please provide details below:			
9.	To the best of your knowledge, is the horse in good health and does it exhibit normal clinical signs at the time of this report?			<input checked="" type="radio"/> Yes / <input type="radio"/> No
	If NO, please provide details below:			

	Details of any abnormalities noted above and/or other comments:

I certify that to the best of my knowledge and belief, the above particulars are correct and true.	
Name :	SHANNON TAYLOR
Signed :	
Date :	10/11/21

# HEALTH DECLARATION FOR HORSE SALES

Sale :	NZB Ready-to-Run Sale 2021	Lot Number :	194
Name of horse :	UN-NAMED	Year of birth :	2019
Breeding (Sire) :	BE LARDO	(Dam) :	MANUREKA
Sex :	6E L D I N G	Colour :	BAY

## PART TWO: VETERINARIAN'S STATEMENT:

1.	Name of horse and/ or Lot Number :	MANUREKA '19 - LOT 194	Circle as appropriate
	Microchip #	985125000103526	
	Brands	HF, 82 over 9	
2.	Does an external examination of the eye with a bright light reveal any abnormalities?		Yes / <u>No</u>
	If Yes, provide full details below:		
3.	Is horse an entire male and does it have two palpable and descended testicles?		Yes / No
	If No, provide full details below:		
	OR already castrated		<u>Yes</u>
4.	Does the horse have a "club" foot or "club" feet?		Yes / <u>No</u>
5.	Is there evidence of an undershot mandible ("Parrot mouth")?		Yes / <u>No</u>
6.	Is auscultation of the heart within normal limits?		<u>Yes</u> / No
	If No, provide full details below:		
7.	Are both jugular veins patent?		<u>Yes</u> / No

	Details of any abnormalities noted in 2-7 above:

Disclaimer


Lot No: 194

This document has been prepared for the sole use by the veterinarian engaged by the Purchaser/Purchaser's agent. It is understood and agreed that this document will only be used for the purpose of the veterinarian engaged by the purchaser advising their client and is only for the New Zealand Bloodstock "Ready-to-Run" sales on 17-18 November 2021. No other use is permitted.

It may not be used or relied on (in whole or part) by anyone else, or for any other purpose or in any other contexts, without our prior written agreement.

The Purchaser/Purchaser's agent understands and accepts that the veterinarian and practice make no statement, representation or warranty about this horse's soundness, suitability for purchase or fitness for purpose.

The Purchaser/purchaser's agent is deemed to be aware that any information or opinion contained in this report is only based on a reasonable assessment of the matters in 1-7 above. Some clinical signs of disease, injury or abnormality that may have manifested themselves in a full examination may not be apparent. The veterinarian and practice accept no responsibility or liability in relation to any issues unrelated to 1-7 above.

Name	:	MARK CHISTY BVet
Signed	:	
Date	:	10/11/21
For and on behalf of Clinic (Clinic name):		HAVNUR FARM LP



## Discharge summary and instructions

**Date:** 28/01/2021

**Patient:** Manurewa-Belardo 19

**Owner:** Haunui Bloodstock Ltd

**Diagnosis:** Right forelimb septic digital flexor tendon sheath – Surgically lavaged and debrided under general anaesthesia



12 Sim Road, Karaka

POSTAL ADDRESS  
PO Box 135 Drury 2247

Phone: +64 9 294 7307

Fax: +64 9 294 7323

vets@vetassociates.co.nz  
www.vetassociates.co.nz

### Discharge Instructions:

#### Medication:

Trimethoprim sulfa (TMPS): Please administer 2 scoops of powder orally every 12 hours for the next 12 days. This is an antibiotic and his next dose is due this evening.

\*\*\*The above medication can have negative side effects when administering. If you notice any signs of colic, diarrhoea, lethargy or inappetence discontinue immediately and contact Veterinary Associates as he will need to be re-evaluated.

#### Activity:

Manurewa-Belardo 19 will require a rehabilitation period of 6 weeks. For the first 4 weeks he will need to be on box rest. During the first 2 weeks he can have access to hand grazing however the amount of walking should be kept to a minimum. For the second 2 weeks (once sutures are removed) he can be hand walked for 20 minutes per day. For the final 2 weeks Manurewa-Belardo 19 can have access to a large yard, please continue hand walking during this time. After 6 weeks of rehabilitation a lameness examination before he can resume regular turnout schedule with no restrictions.

#### Bandaging:

Please maintain Manurewa-Belardo 19 in a bandage for the following 12 days until the sutures have been removed (Tuesday 7/2). After suture removal it is recommended to apply one last bandage and leave it in place for 2-3 days to support the healed wound. Please change the bandages every 2-3 days. If the bandaged become wet, soiled or slips please change immediately. The bandage layers are as follows:

- 1) Melolin pad over incisions
- 2) Rolled gauze to hold the melolin pad in place
- 3) Gamgee around the lower leg that extends from the foot to the bottom of the knee
- 4) Vetrap over the Gamgee
- 5) Duct tape bootie that fits over the foot and extends up the back of the bandage
- 6) Tensoplast at the top and bottom of the bandage. At the top it should stick to at least 5 cm of skin and at the bottom it should wrap below the heel bulbs to cover the duct tape at the back of the leg. Manurewa-Belardo 19 was noted to chew his bandages while in hospital. If this continues wrapping the entire leg in tensoplast will prevent him from damaging the bandage.

When changing the bandage please monitor the surgical site and tendon sheath for any increase swelling or discharge. If you notice any of these signs or if Manurewa-Belardo 19 develops right forelimb lameness please contact Veterinary Associates immediately as he will need to be reassessed at this time.

#### Recheck:

In 12 days' time (approximately 7/2/2021) the sutures can be removed from the surgical site.

Ivan Bridge<sup>Director, BVSc</sup> Neil Houston<sup>Director, BVSc, MACVSc (EqMed)</sup> Lacy Kamm<sup>DVM, MS, DACVS</sup> Jenny Sonis<sup>DVM, MS, DACVIM</sup>

Kevin Miers<sup>Director, BVSc</sup> Jeremy Bullock<sup>BVSc (Dist), BSc</sup> Felicity Wade<sup>BVSc</sup>

Ben Vosloo<sup>BVSc</sup> Jordana Del La Varis<sup>BVSc (Dist)</sup> Kaylin Touché<sup>DVM</sup> Lauren Kubala<sup>BVSc</sup> Alice Barker<sup>BVSc</sup>

A final recheck examination is recommended after 6 weeks rehabilitation to ensure he is not lame before continuing with regular turnout.

## Case Summary:

### History:

Manurewa-Belardo 19 is a yearling Thoroughbred colt that presented to Veterinary Associates Equine Hospital for evaluation and treatment of a right forelimb laceration in the palmar pastern with suspected digital flexor tendon sheath involvement. Manurewa-Belardo 19 sustained the trauma several hours prior to presentation at the hospital while unloading from a truck. Due to the location of the wound and suspected tendon sheath involvement he was referred.

### Physical examination:

Manurewa-Belardo 19 was bright, alert and responsive on presentation. All vital parameters were within normal limits. An intravenous catheter was placed and broad spectrum antibiotics were administered.

### Diagnostics and treatment at hospital:

Ultrasound examination of the right forelimb digital flexor tendon sheath:

- Mild effusion of the digital flexor tendon sheath
- Gas noted within the tendon sheath consistent with wound communication
- No overt damage could be detected to the deep digital flexor tendon or superficial digital flexor tendon

### Wound palpation:

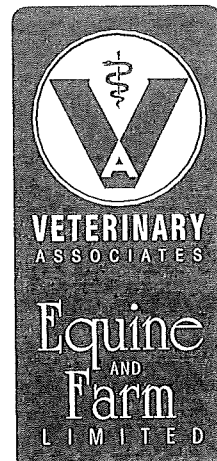
- The wound was digitally assessed and communication with the tendon sheath was confirmed.
- It was noted that the very distal aspect of the superficial digital flexor tendon, distal to the main medial and lateral branching had been severed. The area of tendon affected was estimated to be less than 50% and due to the location being so distal, the proximal portion of the superficial digital flexor tendon had not recoiled. Manurewa-Belardo 19 also did not have any fetlock drop which is considered classic for complete superficial digital flexor tendon rupture. This indicates that the integrity and function of the superficial digital flexor has not been compromised.

Needle lavage and debridement of the right forelimb digital flexor tendon sheath:

- The patient was induced under general anaesthesia and placed in left lateral recumbency for the surgery
- The digital flexor tendon sheath was infused with sterile saline and approximately 10 L was lavaged throughout the tendon sheath through multiple needle locations
- The surgical site was closed with absorbable suture in the subcutaneous space and nonabsorbable suture for the skin that will need to be removed in 12 days time.
- Manurewa-Belardo 19 recovered from anaesthesia with no immediate complications.

### Case progression:

Following surgery Manurewa-Belardo 19 remained comfortable while in hospital. A mild amount of discharge was noted from the surgical site post-operatively for 4 days. During this time Manurewa-Belardo 19 received a regional limb perfusion of antibiotics. Once the wound had sealed and Manurewa-Belardo 19 regional limb perfusions were discontinued and he was transitioned to oral antibiotics. At discharge Manurewa-Belardo 19 was sound at the walk.



12 Sim Road, Karaka

POSTAL ADDRESS  
PO Box 135 Drury 2247

Phone: +64 9 294 7307

Fax: +64 9 294 7323

vets@vetassociates.co.nz  
www.vetassociates.co.nz