

PPEs – worthy of their reputation?

PRE-PURCHASE examinations (PPEs) are a daunting task for any recently graduated veterinary surgeon. Although experience and confidence will increase, PPEs should always be approached with a certain degree of caution.

Recent experiences with a full five-stage PPE of a warm-blood dressage mare caused me some concern. After the examination, I called the prospective purchaser with the findings and deemed the horse suitable for purchase. As her previous horse had been a little excitable, the temperament of this new horse seemed refreshingly sensible.

Unfortunately, within a week of purchase, neither the new owner nor a professional rider were able to ride the horse. I was duly informed the horse had been sent back and I was understandably upset the sale had not worked out.

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Practice Notes



The sellers would not give a full refund, so the purchasers lost money and had the headache of thinking they had found the right horse, only to have to return it. After this experience, I reflected on the case and undertook some investigations to find out how common problems are at PPEs.

Although it is impossible to say with any certainty how many PPEs are undertaken each year, a broad guess can be made by assessing the numbers of blood samples submitted to the Horseracing Forensic Laboratory (HFL) for storage under

the Veterinary Defence Society (VDS) scheme. Approximately 15,000 samples are submitted annually, and the VDS assumes 50 to 75 per cent of all private examinations for purchase have blood samples taken. This would suggest there are up to 30,000 private PPEs done in the UK each year.

PPE claims form 80 to 90 per cent of the equine claims work defended by the VDS. Of all the PPEs undertaken annually, the number of claims the VDS is involved in stays fairly constant at 75 to 80 cases per year. This means a tiny percent-

age of all vettings will ultimately require defence by the VDS, and this should, hopefully, allay some of the fears of veterinary surgeons starting out on their PPE careers. As the VDS is not the only company that insures veterinary practitioners, these figures may be open to interpretation, and statistical analysis is difficult. Obviously, there are PPEs that will give you a headache at practice level, but many of these can be successfully managed in-house.

Interestingly, the largest number of claims result from a missed feature, such as a scar, melanomata or a case of stringhalt. Although scars can be insignificant to the future career of the horse, it is vital to try to identify scars over the upper respiratory tract or neurorectomy surgical sites. Stringhalt is also counted as a missed feature. This neuromuscular disorder can be a very equivocal problem, as it occasionally only shows at certain gaits, on certain working surfaces or at the second trot up.

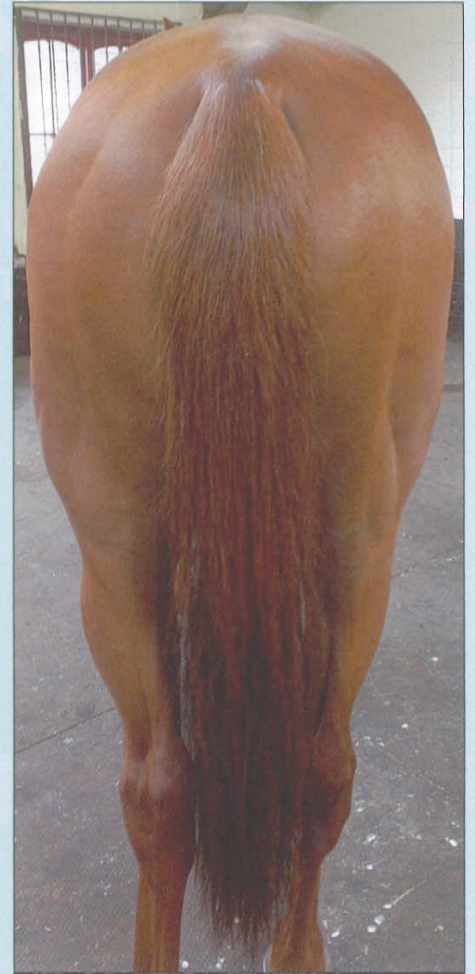
The next highest number of claims usually relate to lameness. This often becomes a contentious issue if the horse is lame soon after purchase and radiographs reveal arthritic changes. VDS blood samples can be invaluable in these cases for protecting the purchaser, vet and vendor alike. In the presence of obvious radiographic changes, purchasers will often feel these changes must have existed at the time of the PPE and, therefore, a previous lameness problem has been missed. Unfortunately, as vets, we can vouch for the fact radiographic changes do not necessarily correlate with lameness.

Surprisingly, missed sarcoids only come third on the list of common claims. These are most easily missed if they affect the ocular canthi or the axillae.

This highlights how important it is to palpate the skin in these regions carefully and examine the horse in good light conditions. After examination, any suspicious areas of alopecia, skin nodules or thickenings should be recorded and discussed.

There was only one claim last year due to ageing, which shows the increased awareness of ageing by dentition, and also probably reflects the increasing number of horses with passports or papers recording their date of birth. The minority of other claims fell into a miscellaneous bracket.

Interestingly, the number of claims stays consistently low in those practitioners qualified less than five years. Presumably, this is because few vets will do PPEs until they become more expe-



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rienced. After this, the claim numbers stay fairly consistent, whether the vet is 10 years or 40 years qualified.

Once the VDS is informed of a potential claim, it will assess the information available and decide on the best course of

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action. Such cases will rarely progress to court proceedings unless there is confidence the vet was not negligent and there is a good chance of success. A settlement is usually only offered if the VDS feels the actions of the vet were indefensible. There are cases instigated years after the PPE has been completed – however, these are more likely to be defended successfully.

So how do we protect ourselves? It does seem that continually doing PPEs and maintaining your skill set is a logical way of avoiding problems. Repetition of the procedure will keep your clinical skills acute, and will also maintain your communication skills to prospective purchasers. If you are ever in the unfortunate position of having to defend your actions, it will sound far better if you undertake PPEs on a weekly basis rather than once a year.

Although not ideal, horses previously treated by a veterinary practice can then be examined for purchase by the same practice. In this situation, any history held by the practice must be revealed to the purchaser after permission has been given by the vendor.

It also must be remembered you are working solely for the purchaser. The new-style PPE certificates, which were launched in 2011, help clarify whether the examining vet has any knowledge of the horse's previous medical history. This certificate contains a statement meaning the purchaser is less able to claim he or she did not have knowledge of any previous veterinary history with the practice concerned.

Examination

When examining the horse and recording the findings, it is important to have appropriate light conditions and to remember to palpate, as well as visualise, all areas. It is also important to state if you have not been able to examine any area of the horse due to its temperament or behaviour as you cannot, therefore, form a clinical opinion. The worksheets are a useful place to jot down clinical notes and other findings, which are not necessarily recorded on the certificate, but have been discussed with the purchaser: – this may include the horse's behaviour. The worksheet can be kept together with the carbon copy of the certificate and the original of the submission form for the VDS blood sample, making it easy to refer back to in the event of a problem.

It is important to remember the PPE is a statement of the

suitability of the horse to do a particular job, and use of words such as "pass" or "fail" should be avoided. It is also important to bear in mind the job the animal is required for – a horse with mild valgus deformity may be perfectly acceptable for a fun riding horse, but may not stand up to the rigours of eventing.

As a vet, you are assisting the purchaser; however, he or she should still remember the phrase " caveat emptor" or "buyer beware".

We should also now be recording passport numbers and the owner of the horse, if it is being sold through an agent or third party. This helps ascertain that the practice has no relevant clinical history. The new style of certificate also clarifies whether flexion tests or lunging on a hard circle have been completed.

"When examining the horse and recording the findings, it is important to have appropriate light conditions and to remember to palpate, as well as visualise, all areas."

services. When completing the certificate, it is wise to remember the RCVS principles of certification.

The old format certificates will still be honoured, but any case requiring defence will be aided if the vet has used new-style certificates.

This helps show you are up to date and doing a reasonable quantity of PPEs. If a limited or two-stage examination has been completed, the purchaser should sign a letter stating they are aware of the examination's limitations.

If this letter is completed, it will make cases easier to defend as the purchaser cannot then claim ignorance of the limitations. Interestingly, it seems opinion is divided on whether lunging on a hard surface is part of the limited PPE, although in all cases, this should be stated on the certificate.

In conclusion, although PPEs are a daunting aspect of equine clinical work for vets, if you do the job thoroughly and fairly, the number of cases that cause problems are minimal. When approaching a PPE, remember that careful examination, good communication and following the RCVS principles of certification should keep you out of trouble.

Acknowledgements

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Sarcoids can easily be missed and cause problems for practitioners.



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