

Monthly Routine Visit Days

Visit Day 1

West London
1st Tuesday
of each
month
£15
per client

Visit Day 2

South Berks/
North Hants
(below M4)
2nd Tuesday
£5
per client

Visit Day 3

South Hants/
Surrey
(below M3)
3rd Tuesday
£5
per client

Visit Day 4

North Berks
(between
M4 & M3)
4th Tuesday
£5
per client

Visit Day 5

Oxon/Berks
1st Thursday
£5
per client

- Only routine work: vaccinations, teeth rasp, blood tests, microchips and health checks
- For details on areas covered please speak to reception or see our website
- Must be booked with reception by 1pm the day before
- All cancellations must be made through reception. Payment will be required either at the time of booking or on the day. Clients are unable to request a particular vet, however if you do require a vet at a certain time, then please book a separate appointment which will be charged at the normal rate.

Please call the practice to book your appointment.

Please note that we need a minimum of 48 hrs notice for medication to be collected or posted so the treating vet can approve.

Insurance reminder – how do we deal with your claim?

- 1) Start your claim as soon as your horse starts its treatment. Don't wait until the treatment is complete. Most insurance companies pay out within 10-14 days, therefore they should pay you before you need to pay us.
- 2) Send your claim form to us for the vet to complete their section. We will then send it back to you, along with your horse's clinical history. We charge a fee for this initial report.
- 3) You then need to send the claim form, clinical history and all invoices on to your insurance company.
- 4) All invoices must be paid to us directly, by you, within our 28 day terms, we won't accept payment directly from your insurance company.
- 5) We will send further invoices to you for payment, which we recommend you send on to your insurance company immediately.

SCOTT DUNN'S EQUINE CLINIC

Straight Mile Farm · Maidenhead Road · Wokingham · Berkshire · RG40 5RW

Tel: 01344 426066 · Lines open 24/7 · Email: admin.scottdunn@cvsvets.com · www.scott-dunns.co.uk

Opening Hours: Monday to Friday - 8.00am to 6.00pm

Issue 33 :: Summer 2019 - will be available in July 2019.



Issue 32 :: Spring March 2019

Newsletter

SCOTT DUNN'S EQUINE CLINIC



Veterinary Surgeons: Iain McKenzie BVM&S Cert AVP (ES-0) MRCVS
Chris Neal BSc (Hons) BVSc MRCVS, Amy McCarthy DVM MRCVS
Gloria Apati DrMedVet MRCVS and Robert Oulton DVM MRCVS

Inside this issue: Spotlight on... Equine Flu

Worming



Worm Right

Talk to us today
about worming –
get your vets
advice.

We can offer extremely competitive prices on wormers – please ask at reception.
For a detailed treatment plan please see our website www.scott-dunns.co.uk

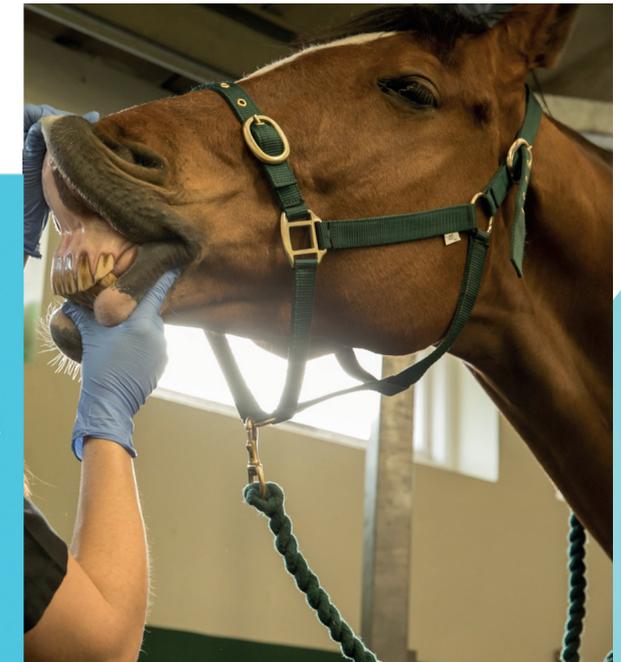


Join the Horse Health Programme today and benefit from:

- Annual Health Check
- Dental check with Routine Float & Sedation if required
- Annual Flu & Tetanus Vaccination
- 4x Faecal Egg Counts
- Autumn Tapeworm Saliva Test with an Autumn Wormer as required
- 20% discount on Lifetime Care Medicines
- 10% off all Veterinary Treatments including medicines, carried out by the practice only
- Multi Horse Discount

All for just **£10.99** a month!

www.horsehealthprogramme.co.uk



Spotlight on Equine Flu



What's New with Equine Flu?

Recently, it has been hard to ignore the Equine Influenza outbreak. Outbreaks of the virus have been seen in both vaccinated (mild and rapidly contained) and unvaccinated (severe and in some cases fatal) horses across the country since the start of January.

Classical signs of nasal discharge, fever, depression and malaise are seen, however, the challenge is in diagnosing it in vaccinated horses as their clinical appearance is much more non specific. Horses can also shed the virus asymptotically, which is a major reason why events such as racing have been suspended recently. Furthermore, these vaccinated horses only shed the virus for a short period of time (a few days), hence the earlier samples are taken the more accurate the test results. Therefore horses showing any sign of malaise should be examined as soon as possible to prevent the spread of the virus further.

The Issue with Vaccination

The outbreak has highlighted some major issues with vaccination status. It is hard to believe that only 40% of horses are vaccinated in the country, when ideally it must be 80% in order to benefit from herd immunity and prevent issues such as this from occurring again. Most people state that their horse never leaves the yard or doesn't interact with others – however it is important to note that the virus can be spread via aerosol for an average of 2km (and in some cases up to 13km). It is also quite stubborn and can remain active in water and other fomites for several days – hence when a horse has moved on from an area the virus can still be apparent.

Currently, our vaccines are working well at reducing the clinical signs of the condition. It is a well known phenomenon that the

influenza virus mutates over time (a concept known as antigenic drift), which makes it much harder for the immune system to detect it. Currently, we envisage that the outbreak is just another form of this process, however, accurate sub typing of the virus will take months and subsequent recommendations for future vaccination regimes will then be implemented. However, it seems sensible to boost immunity with a 6 monthly influenza vaccine that contains both the Clade 1 and Clade 2 sub-lineage until this is known. It is important to note that outbreaks in vaccinated horses have mainly occurred due to unvaccinated horses being introduced to a premises, illustrating the importance of vaccination.

How do we test for it?

Currently we can test for Equine Influenza by passing a nasopharyngeal swab and looking for the presence of Equine Influenza DNA. Fortunately, the HBLB (racing industry) funds subsidises testing for the virus via the Animal Health Trust and so it is a cheap and relatively easy test to perform.

What to do if you suspect it?

If you suspect a horse is showing clinical signs, it is important to isolate the individual and put biosecurity measures in place. If appropriate this should include isolation of contacts as well for up to 7 days after the clinical diagnosis has been confirmed. Disinfection of all equipment, stabling, horse boxes etc are essential, and the use of normal detergents eg. Virkon are suitable for killing off the virus. A useful app to download is the EquiBioSafe, which is free to download and gives useful information on correct biosecurity procedure.

If you have any concerns, please call our vets.

Written by Chris Neal BSc (Hons) BVSc MRCVS

A day in the life of a Receptionist

Scott Dunn's couldn't survive without our two most important people, Receptionists Kelly who works from 8am-5pm and Jess who works 9am-6pm Monday to Friday.

- On a typical morning the first priority is to check the out of hours report to see if there are any new cases that have been admitted to the clinic overnight.
 - Then on to the vet's diary to familiarise ourselves with the day ahead and to ensure the vets are aware of any equipment or additional medicine they may need to take with them.
 - Next on the list is to clear all incoming emails from the enquiries inbox. We receive a variety of requests from registering a new client or receiving lab results which need passing onto the relevant vet and saving on the horse's record, to the more in-depth requests such as estimates for treatments, insurance claims or booking pre-purchase exams.
 - From around 9am the phone lines tend to get pretty busy and with both receptionists in, they prioritise any emergencies that come in by designating them to the nearest available vet. We have an online tracker system which enables us to pinpoint the vet's location. This is really helpful as we can let the client know exactly how far away the vet is.
 - We have many visitors to reception throughout the day. These can be clients picking up medication/dropping off samples or booking appointments. We are also the first point of contact for clients that have horses being admitted either for emergencies, lameness work ups, elective surgeries or diagnostic examinations. Also many couriers throughout the day delivering medication and supplies.
 - Once a week we schedule the monthly routine visit day for a region. We can book a maximum of 12 yard visits for one vet, so this takes a lot of planning. We need to ensure we plan the best route for the vet and give them enough time to carry out the treatments that are required and get from A to B.
 - As we reach the end of the day and clients are off to see their horses in the evenings, we often get emergency calls, things like kick wounds that may need a stitch or the more serious colic cases, again we check the diary and the vehicle trackers to see which vet is closest and can attend the quickest. Unfortunately this can mean we have to rearrange another appointment so the emergency is seen first.
 - If a horse is admitted to the clinic for emergency surgery, we phone our on-call surgeon to ensure they are here at the time of arrival, book a vet to anaesthetise for surgery and ensure the nurse team are prepared and ready to receive the incoming patient. Communication is key to ensure the best possible outcome in an emergency. It is vital that as first point of contact we advise vets and nurses as quickly as we can so we are correctly prepared for every eventuality.
 - At the end of each day, once all vets have returned from their appointments we will pass them any insurance claim forms, vet referrals, reports or messages that need their attention before signing the phones over to our out-of-hours answering service between 6pm and 8am.
- And of course in between all of the above the phone is always ringing!



Kelly



Jess