

PARKER RESERVOIR MT. HOLDING CORRAL REPORT

September 18-19 2010

Twin Peaks 2010 Gather

Signalment: Approx. 450 lb 4 month old sorrel male mustang with star, stripe, snip markings and pastern on R-rear presented with a L-rear leg de-gloving type injury plus additional other smaller type open wounds to appendages. Causative agent of initiating injuries unknown.

History: Case was gathered during the PM hrs of 9-18-10 on Parker Reservoir MT., and then transported to holding facility for closer observation and Tx. by responsible parties.

Exam Findings: Close examination revealed multiple epidermal lacerations to leg areas that could easily be resolved with suturing. However, the most severe wound was located at posterior region of L-rear leg. A classical de-gloving type pendulous flap was evident extending the entire length of the flexor tendon area with exposure of superficial flexor tendon (SFT); inverted V shaped. After cleaning exposed area with chlorhexidine solution it was noted that SFT sheath was also broken/disrupted therefore exposing tendon to environment.

Treatment:

9-18-2010, Sutures were placed to align epidermal wound edges where needed to promote healing. De-gloving flap was trimmed at its retaining base (jxn. of fetlock) and entire affected area scrubbed with chlorhexidine for protective wrapping. Nitrofurazone was topically applied along with 4X4 gauze and then sealed with Flexus bandage. 3 cc's IV banamine give for pain. Advised COR that leg wound would need EOD attention to reach its best results for second intention healing to occur. Decision was made to ship injured patient to Fallon holding center in Nevada on 9-19-10 to continue wound therapy.

9-19-2010, Patient showing signs of 4-5% dehydration, diarrhea, tachycardia, tachypnea, lethargy and grade-2 lameness on injured limb. Fluid volume replacement was attempted using Revitalyte powder pack in tap water. Approx 360 cc's was given orally with 60 cc feeding

syringe before patient became R-lateral recumbent. 2 cc's banamine IM administered.
Prognosis becomes poor for full recovery.

Outcome: Consensus among all parties to euthanize and bury on site @ approx 09:35 hr.

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