

Vetting a Horse

What is involved in a good purchase examination?

By William C. Stone, DVM, MS, Dipl. ACVS

“So, Doc, can you vet this horse?”

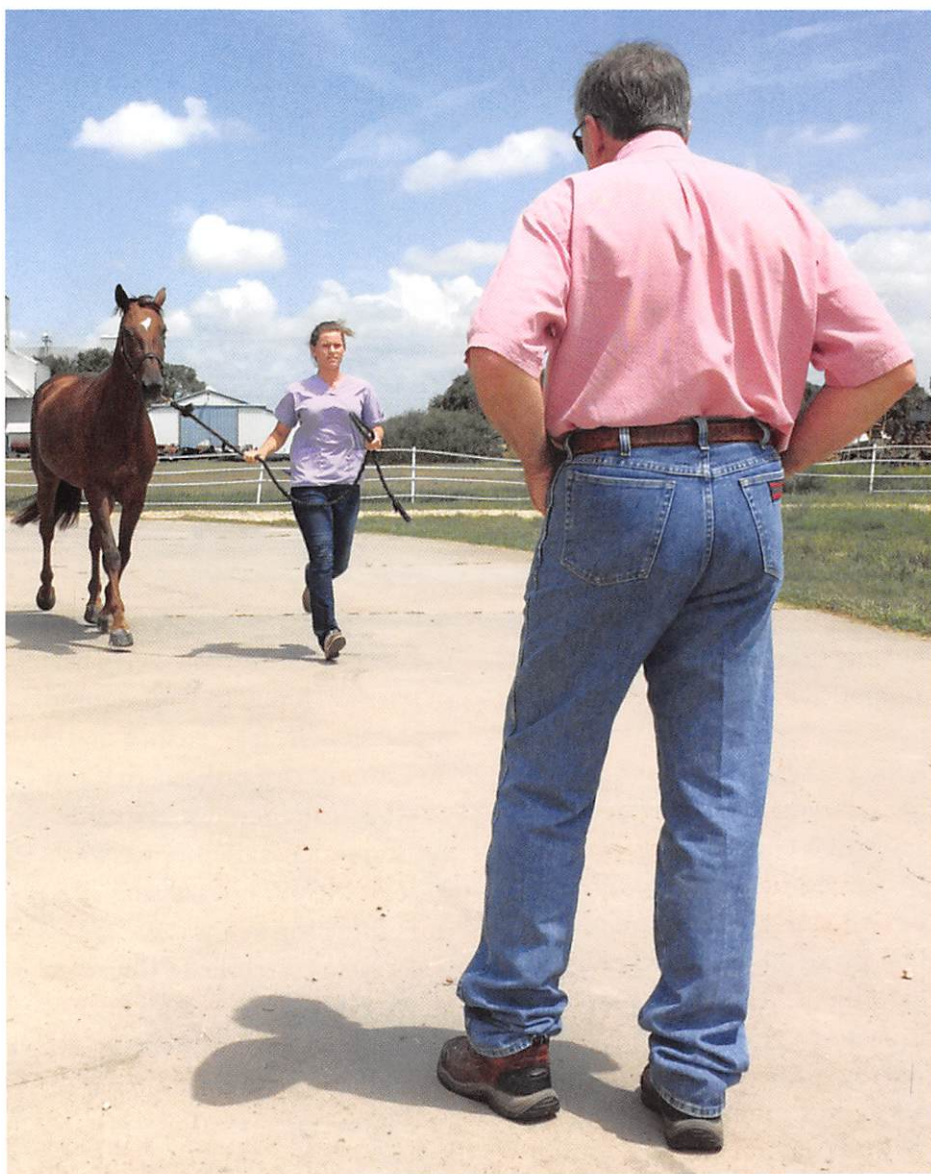
What does that mean? What does that cost? What should I expect?

I am constantly amused by the term “vetting,” and as horsemen and women, you should take pride every time you hear that term—as do I, as a veterinarian. Vetting is a name we, as horse people and veterinarians, have given to our business and government communities.

The term originated from horse racing. Prior to a race, a veterinarian was required to give approval for a horse’s fitness to compete. (<https://en.wikipedia.org/wiki/Vetting>) Therefore, vetting became a prerequisite to competition. Alternatively, in our current political season, a prerequisite to service, or in a business context, the term describes the due diligence process.

In contrast to political vetting, which often seems to come down to which media outlet can dig up the most dirt on a candidate, veterinarians are often asked to provide information about a prospective purchase based on judgment and physical clues.

When I do an examination, I



The walk test

generate an opinion, and then I spend the rest of the exam finding sufficient support for, or evidence to refute, my opinion. I remember Orly de Hoyas many years ago talking about a vetting that Dr. Currie did for him. Orly told me the Doc went over the horse repeatedly and finally told him: “There is something about this individual I just do not like.” That was all Orly needed. When you have a long-standing relationship, as Orly and Doc did—that is all anyone needs.

While some purchase

examinations fall into that category—and all of them require that kind of judgment—equine sales have become a global enterprise. We are still finding horses “in the pasture,” but it is just a different pasture. The impact of our choices and decisions are greater than before. If the horse is going into your personal space, decisions will trend one direction, and if the horse is going into a program, and personal space is not available, decisions will trend in a different direction.

You as a buyer have to frame



The physical examination includes checking the eyes, ears, heart, lungs, teeth, and the musculoskeletal system.

the question. Are you buying a competitive show horse or are you inviting a horse to join the family? Some horses are both, but on the first day, you as a buyer need to frame that choice.

Sometimes a horse will be presented as an investment. In their own right, horses are a poor investment. Among a group of professionals, we joke about the Clayton Stone Theorem of horses as an investment.

The Clayton Stone Theorem states, "Anything that eats, defecates, and [potentially develops a serious illness] while you are sleeping IS NOT AN INVESTMENT." Over the years, we who have lived by that adage have added the McCormick Corollary: "And it might buck the [rider] off."

For the purposes of this discussion, we will focus on the purchase of a competitive show horse. Actually, the purchase of a horse really is an investment—you cannot spend non-trivial dollars and not evaluate the expenditure as an investment. It is an investment in the joy and development of the rider. In light of that investment,

our responsibility as veterinarians, in partnership with your equine professionals, is to ensure that investment can provide that joy.

It is from here we start the vetting process. Before we start though, we are not passing or failing as in school. We are evaluating suitability. Otherwise stated, we are evaluating fit to function. Some aspects of suitability are the responsibility of the trainer, and others are the responsibility of the veterinarian. Final judgment of suitability is a collaborative decision among the trainer, the rider, and the veterinarian. It is important to remember, a horse that is not suitable in one setting may be quite suitable in another. This examination is as much about fit as it is about that thing we sometimes try to call soundness.

The Physical Exam

We examine the basics—eyes, ears, heart, lungs, and teeth. We look at bumps and lumps, scars, and such. Most of these findings are trivial but some can have some long-term impact.

The Passive Musculoskeletal Examination

This is where the horse begins to tell his story. Does he have symmetry in his forelimb and his hind limb? How does he respond to hoof testers? Does the horse have abnormal swelling? Is he sore there? Is he sore to manipulation here? Is the soreness we see here related to soreness we see there? All the pieces fit together somewhere. As veterinarians, of all the players in the purchase, we usually spend the least amount of time with the horse so it is important that we listen to the story carefully.

Exam in Motion

For an examination of the horse's movement, this may be in hand, on the lunge line, or under saddle depending on the setting and relative safety. It is customary to provide flexion tests of the forelimbs and the hind limbs. It is important to note that by definition a flexion test places the limb in a position it will never

assume in the normal path of flight. Interpretation of flexion tests requires judgment—the response to flexion is a subjective call.

I had two residents, one was a linebacker before he became a veterinarian, and the other a flight nurse. Horses responded differently to flexion tests from these two individuals. The linebacker made them all sore and the nurse made very few sore—but the ones that were sore after the flight nurse flexed them had a challenge that required investigation. This is not to say that the linebacker was less effective; they both often got to the same place, but the linebacker just had to use a different set of tools.

Diagnostics

Unfortunately, the list of diagnostics available to the equine industry is enormous and growing. Each little bell and whistle makes the next vendor's machine a little better than the other one, and the next veterinarian a little smarter

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than the other one. When digital technology first allowed the wave of diagnostic machines to expand exponentially, I was told that “you vets are seeing stuff that has been there all the time and you don't know what you are looking at.” (M. McCormick, personal communication) Despite the intellectual challenge, he is right. This increased awareness only makes the answer to many questions clear as mud.

Sometimes a veterinarian's hands, mind, and clinical judgment are his or her best tools. Diagnostic imaging and testing should confirm our physical findings and answer the questions the examination has posed—not create new questions. Each diagnostic modality has a certain sensitivity and a certain specificity. Overly sensitive diagnostics, such as nuclear scintigraphy (a modality

that uses radioactive markers to show areas of inflammation often not clinically detectable), often generate unnecessary concerns that will have very little impact on the ability of a horse to perform the task we ask of them.

Diagnostic imaging and testing for purchase should have high specificity, as the reason we do these tests is to resolve ambiguity, not create confusion. As an example, we often—and advisably—perform drug screens on horses presented for purchase. We have two choices for laboratories to do that testing. One is very fast at providing a test of high sensitivity, but approximately 10 percent of the time, it records false positive results for the presence of a drug—the specificity of testing from that laboratory is inadequate. False positive results generate ambiguities and mistrust.

Evaluating the legs and hooves, as well as conducting flexion tests, is part of the physical examination.



The horse is suitable for the intended use as _____

The horse is suitable with reservations for the intended use as _____

The horse is unsuitable for the intended use as _____

What are the limits of suitability?

The other laboratory takes two days longer but resolves the ambiguity of the presence of drugs in a horse with accuracy—high specificity.

The Opinion

An opinion is the veterinarian's deliverable. That opinion is a function of the training, experience, and knowledge of the provider, mixed with the information provided through the examination. As I mentioned earlier, that opinion is a statement of suitability, or fit—not soundness.

We often hear that a horse did not “pass” the vetting, or worse, the horse “failed.” These terms, in my opinion, are not useful in reporting the result of a purchase examination. There is a plethora of articles on reporting purchase examinations. The American Association of Equine Practitioners has established guidelines for reporting the results of purchase examinations, indicating that the decision regarding suitability is the responsibility of the buyer. (See Additional Reading.) Even so, we try to help with that decision, and find reporting categories shown in the box above quite useful.

As the buyer, you can write your own definition. Suitability

can be as trivial as the horse is the same color as one that bit you as a child to a non-trivial criterion such as it bucked you off! You can impose the same limits regarding the vetting.

While the statement of suitability from a veterinary medical perspective may reflect a set of facts and conditions, some of which may require management, it is ultimately your decision whether you want to manage those conditions. If your last horse had challenges with regard to its feet that required special shoeing or advanced imaging, and ultimately the horse developed a soft tissue injury in the hoof requiring retirement, then you may set some stern limits on hoof conformation. Your limits may exclude some horses; however, for someone else, not carrying the same historical concern, the limits may not be exclusive, and the horse you refused will work fine for them. Just as we do not all fit into the same shoes, we do not all fit the same horse.

You are the buyer, and you set the limits of suitability; however, in fairness to sellers, critically evaluate your criterion for suitability and share that with the seller. For example, we performed a purchase exam for an

out-of-state buyer; the horse was evaluated by the buyer's trainer and presented to the buyer who made an offer on the horse. The buyer had two veterinarians, one of whom requested highly sensitive diagnostic imaging, requiring evaluation of those studies by two more veterinarians. Ultimately, the buyer declined the purchase because they did not like the horse's glue-on shoes. The process took two weeks and was very expensive for the buyer and not fair to the horse because ultimately the horse did not meet the buyer's suitability criteria at the onset. A local person bought the horse a few months later and he is competing successfully and providing joy.

For any successful transaction, frame your questions at the beginning. In many cases, your veterinary professional will understand your concerns because you have a relationship with them, much like Orly and Doc. Other times, you will be away from home, and if you anticipate your suitability criteria, the veterinary professional can help you determine whether this is the one! 🐾

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Additional Reading: American Association of Equine Practitioners. (2009). Reporting Purchase Examinations. Retrieved from American Association of Equine Practitioners: <http://www.aaep.org/info/reporting-purchase-examinations>.