valereferrals

Welcome

Welcome to our first newsletter of 2019, we hope you have had a good Christmas and New Year and like us you are ready for a busy year ahead. Here at Vale Referrals we have a packed year planned with a new oncology service being launched in South Wales in January and CPD being offered regionally and locally throughout the year. Alongside this there will be a significant extension to our hospital enabling us to continually improve and develop our services and of course our daily care and commitment to our clients and their pets.

We look forward to working with you all in 2019 and will keep you updated with our news throughout the year.

News in brief



In November we attended the London Vet Show at ExCel and enjoyed meeting up with colleagues along with attending some great talks. Our Ophthalmologist Brian Patterson spoke on the "Approach to the painful eye" and also led

"Improve your skills: ophthalmology case workshop". A great few days had by all.

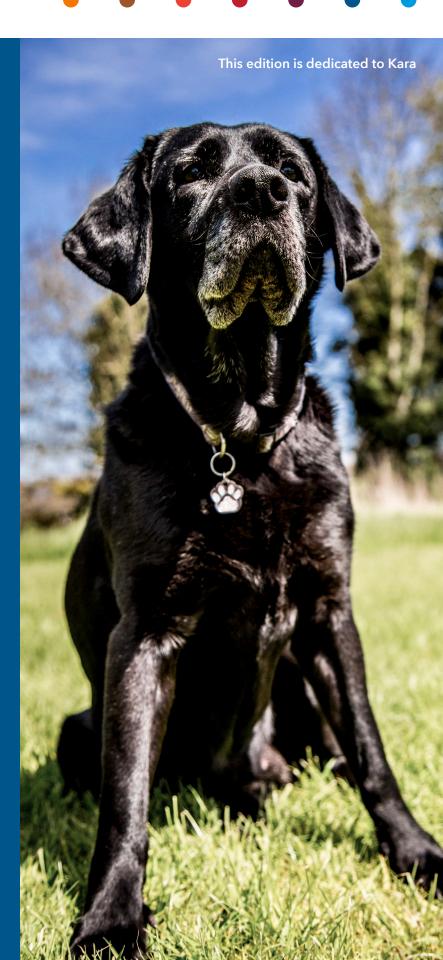
New Recruits

Vale would like to welcome Andy Rushent to the night team. Andy graduated from the University of Bristol in 2017 with first-class honours after four years of studying Veterinary Nursing and Bioveterinary Science. He has keen interests in anaesthesia, emergency and critical care and medical nursing. Andy is enjoying his new role very much and is looking to start studying for a certificate in anaesthesia next year.





We would also like to welcome Becky Kingston who has joined the team as a referral administrator. Becky joins Hannah as a first point of contact when referring to Vale. She has a veterinary background having previously worked as a Stud Manager. When Becky is not doing her "day job" she can be found helping her husband tend their herd of dairy cows. Becky also enjoys spending time with her three lovely dogs.



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South Wales Oncology clinic started January 2019

Stefano Zago DVM (Hons) MSc (Clin Onc) MRCVS

Vale Referrals are pleased to announce a new oncology service for South Wales. Headed by Medical Oncologist Stefano Zago and supported by the Vale Referrals team, this service started January 16th 2019. The service runs every Wednesday from Alphavet Referrals, Langstone Business Park, Langstone, Newport NP18 2LH.

To organise a referral please contact Vale Referrals 01453 547934 or email referrals@valevets.co.uk including all relevant history and patient details.



An adder encounter

Brian Patterson BVM&S Cert VOphthal MRCVS





European Adder (Vipera berus) by Thomas Brown https://en.wikipedia.org/wiki/Creative_Commons

Our ophthalmology service was presented in May 2017 with Daisy, a nine-year-old intrepid terrier, who had been for her afternoon walk on a local common when curiosity got the better of her and she decided to investigate a recently awoken adder with the unfortunate consequence that she was bitten in the facial area. Interestingly, two other dogs in the same walking area had suffered snake bites within the past 48 hours and her primary vets were therefore well-versed and well prepared for such emergencies. She was admitted to her primary vets within 40 minutes of the

attack in a collapsed and cyanotic state with marked swelling to the left facial and periocular region. Supportive therapy includina antivenom administration was provided and her general status improved overnight, although by the following morning hyphema was noted in the left eye in association with some fine corneal abrasions. Sequential intraocular pressure (IOP) readings were taken during her period of hospitalisation and it became apparent that an elevation in IOP was occurring despite the use of a topical carbonic anhydrase inhibitor (Trusopt) prompting referral.

A complete ophthalmic review was performed on admission which highlighted problems with respect to the left globe. Globe position and movements were normal although marked eye discomfort, conjunctival haemorrhage and hyphema were present. A markedly elevated intraocular pressure of 50 mmHg was recorded (Tonovet) and although the eye did not elicit a menace response it retained a dazzle reflex and a consensual pupillary

light response to the right eye which confirmed that the injured eye was capable of light recognition. The cornea was oedematous which severely limited direct observation of the intraocular structures so an ophthalmic ultrasound exam was performed to triage the intraocular structures. Fortunately, no pathology affecting the posterior segment was noted although a guarded prognosis for eye health and function remained. Fluorescein retaining, linear corneal surface abrasions with epithelial vesicles were observed. A general clinical examination revealed no evidence of wider health issues and hospital-based treatment was commenced with topical ofloxacin antibiotic eyedrops (Exocin) 96hr left eye, prednisolone acetate anti-inflammatory eyedrops (Pred Forte) q6hr left eye , travoprost 'anti-glaucoma' eyedrops (Travatan) q6hr left eye, meloxicam (Metacam) 0.1 mg/kg PO q24hr and marbofloxacin (Marbocyl) 2 mg/kg PO q24hr. Reference range intraocular pressure and improved comfort levels were quickly established in the left eye. An opaque track traversing



Image I Daisy on presentation: Corneal become obscure the presence of hyphema within the anterior chamber. Conjunctival haemorrhage is present.



Image 2 with resolution of corneal oedema, sites of corneal trauma and hyphema are more apparent.



Image 3 appearance of eye following TPA injection.

the entire thickness of the cornea consistent with a fang puncture became observable in the dorso-lateral corneal quadrant as corneal oedema subsided although hyphema and fibrin continued to obscure the appreciation of any tapetal reflection. Daisy continued to make satisfactory ophthalmic progress over several days of hospitalisation although a relatively large fibrin clot persisted within the anterior chamber and it was decided to manage this by injecting 20 µg of tissue plasminogen activator (TPA) (Actilyse) into the anterior chamber which resulted in complete dissolution of the clot allowing for resolution of nearnormal visual axis clarity and restoration of a positive menace response.

Following discharge from the hospital, Daisy attended a series of outpatient examinations over the next six weeks with her medications gradually being tapered and ultimately discontinued. Her intraocular pressure remained within reference range following cessation of all medications, the eye was comfortable with no evidence of visual deficits. Daisy has returned to normal terrier duties with no long term issues regarding the health of her left eye.



Image 4 caption - appearance of eye at the conclusion of treatment.

In the UK, 90% of adder bites affecting humans occur on the hands or feet. This differs from canine snakebite injuries the majority of which (approximately 80%) involve the face or neck. A review of snakebite injuries in the United Kingdom, reported by the Veterinary Poisons Information Service, suggested that nearly 70% of snake bites occur between April and July particularly between the hours of 1500 and 1600 with clinical signs typically developing within two hours of adder bites. Whilst mortality levels are low (approximately 5%) following canine

adder bites the particular concern in this case was that the snakebite, with apparent envenomation, appeared to penetrate the cornea. Adder venom contains a complex mixture of proteins and peptides with haemolytic, proteolytic and cytotoxic activity designed to immobilise the victim and to cause tissue digestion around the bite site. In addition, the risk of bacterial infection following snakebites is recognised. Very little literature regarding the effects of ocular snakebite injury in dogs exists. A series of 11 cases in the USA where dogs suffered snakebites to the periocular and ocular region reported pain, facial oedema, blepharospasm, blepharoedema, corneal ulceration, uveitis, chemosis, conjunctival hyperaemia, conjunctival and eyelid haemorrhage as common ophthalmic findings. Vision loss occurred in two of these cases but thankfully for Daisy she made a full recovery. Whether she has learned any lessons remains to be seen!

Fixed Price Bilateral Cataract Surgery £3700.00
Price includes post operative care package.

Ophthalmology Consultation £180.00



Have you seen www.whatseye.co.uk? It's a free to use WhatsApp based telemedicine service. WhatsEye harnesses the power of WhatsApp, effectively putting a veterinary Ophthalmologist in your pocket. The aim is to provide you with case support, in a timely fashion with minimal demands on your already busy day.

Sarah's 40 at 40

Our general manager Sarah Newall has taken on a challenge in celebration of reaching 40. Sarah is raising money for two charities; Great Western Air Ambulance and East Anglian Air Ambulance. Sarah previously worked closely with Northampton Air Ambulance

and has seen first hand the time and time and resources it takes to keep an aircraft in the air, which is approximately £3500 per mission.

Sarah has also experienced first hand what is like to be in need of an air

ambulance. A bad horse riding accident in rural Norfolk left her requiring emergency aid from East Anglian Air Ambulance who came to the rescue and transported Sarah safely and quickly to hospital.

The rules of the 40 at 40 challenge.

- 1. Races: must be timed
- 2. Minimum distance 5km
- **3.** At least 5 x 10km
- **4.** 1 x sub-60 minute 10km
- 5. At least 1 half marathon
- 6. Max 1 Parkrun per month
- **7.** Max 2 x Race at your Pace monthly challenges

Sarah is now half way through achieving her 40 at 40 and is training for her biggest challenge yet - Manchester Marathon.



To donate to Sarah's challenge please use this link **uk.virginmoneygiving.com/SarahNewall2** Thank You.





To help make sending a referral as quick and easy for you as possible, we have an online referral form which also allows you to upload patient history and diagnostic work. You can find this at www.valereferrals.co.uk/ online-referral-request-form or find it at the top of the home page.

Once we have received your referral with all the relevant history we will contact your client and arrange their appointment.

CT outpatient requests can also be easily sent to us online. Just head to ww.valereferrals.co.uk/CT-request/

Total Cases	538
Surgery	100
Cardiology	92
Dermatology	10
Medicine	269
Ophthalmology	67

Cases referred to Vale in December 2018

How do we rate?

We strive to offer your client the best service and care, we understand that their experience contributes to your reason for choosing us as your referral centre. Vale Referrals send out a client questionnaire following your client's visit and our aim will be to provide you all with a biannual report on the cases we have seen from you.

This will include which disciplines you have referred to, case outcome and how your client found their experience. We will also highlight any feedback where we have had to review and improve our service, to show our passion and dedication for developing and improving our services to you and your client.

What some clients have said about us

Client from Hay Veterinary Group says:

"Thank you for all your care concern and treatment of both my dog and myself. You were very kind thorough and considerate. We came away with a better understanding of Millie's problem and of her treatment."

Client from Arrowfield Vets says:

"Excellent service, great care was taken to ensure our dog was well looked after. All staff were helpful and very friendly."

Client from Clockhouse Vets says:

"Excellent service. Expert advice, allowed time for discussion. Made everything clear."

Client from Avenue Vets says:

"The loveliest text I have ever received was from the night team when Banjo was an in-patient letting us know he was fine, recovering well and enjoyed his supper. This arrived as we were home alone facing up to his having one of two devastating differential diagnoses. Such a kind and thoughtful thing to do!"

Upcoming CPD / Events

IVC Referral Network South West Study Day - Red Flags in Practice -When to ask for help

Speakers: from Bath, Rowe and Vale Referrals

Date: Thurs 7th March 2019 **Time:** 9.30am - 4.30pm

Location: De Vere Tortworth Court Hotel, Gloucestershire

For further information please email Nicola Thorp NThorp@independentvetcare.co.uk

Out of hours service

For out of hour emergency advice or for emergency referral please call **© 01453 547934**



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