Purchase Examination of the Western Performance Horse

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1. Introduction

Performing a purchase examination is a very important service that equine veterinarians provide clients. Equine veterinarians have unique training and expertise that can help the potential horse buyer make informed decisions about the horse being considered for purchase. Although many veterinarians consider purchase exams to be an arduous task burdened by potential litigation, purchase examinations can actually be a rewarding experience, which often results in a long-term veterinarian/patient relationship. Experience in equine practice and knowledge of the horse’s discipline are both advantages in advising clients about the potential of a horse’s medical condition to affect its intended use. The goal of the examining veterinarian should not be to identify any flaw that the horse might have and then discourage the sale based on those flaws. Rather, the veterinarian should thoroughly evaluate the horse and identify any abnormalities and inform the client (based on the veterinarian’s training and experience) of the potential for those abnormalities to affect the intended use of the horse. This information should be only one of many factors to be considered in whether or not to purchase the horse.

2. Purchase Examination

When asked to examine a horse for potential purchase, it is important that the veterinarian does a thorough examination with appropriate record keeping and documentation. Partial exams and incomplete record keeping can potentially lead to future problems that would be hard to defend. Although a potential purchaser may ask you to do a quick partial examination, horse owners can be affected by selective amnesia when they encounter problems like lameness. Therefore, a complete examination and good record keeping/documentation are imperative and easily defended.

3. Western Disciplines

Western horses, most commonly American Quarter Horses, are used for numerous working and showing purposes and often have injuries or problems that are related to their use. Although some lameness problems seem to be more frequent with certain disciplines, some lameness is quite common in all types of performance. Knowledge of these disciplines, their peculiarities, and the common problems associated with each use type (e.g., forelimb injuries and lameness in team roping horses) can be helpful to the veterinarian performing purchase examination.
Western horses compete in a wide variety of disciplines that all have individual variations of problems. However, they also have a variety of problems that are similar to those seen in other types of performance and competition horses.

Although knowledge of the intended disciplines and the potential problems with each is useful, a thorough and complete examination of all purchase cases is essential and should not be substantially different between disciplines or individuals. The different disciplines for which Western horses are commonly used have been well described in previous proceedings, and common lameness problems seen in these horses has been described. Therefore, this paper will not go into depth about each discipline, but rather, it will mention specific aspects of the examination as they relate to the intended use for the horse. Racing Quarter Horses are purchased at sales similar to the racing Thoroughbreds, and examination at sales will not be discussed in this paper.

Before a horse is examined for purchase examination, a standard permission to perform the purchase examination is obtained from the buyer and seller. These forms are recommended for all purchase examinations. Although it is yet to be tested in court, this form provides useful information, and at our hospital, it is thought to be helpful should any litigation result from the purchase examination. Although there can be advantages to having the seller present at the examination (e.g., the horse is demonstrably lame), the buyer is your client and deserves private discussion about the examination of the horse and the significance of findings during the examination without the seller being present. If the seller is not present, contact information is important should permission for more invasive procedures (like a nerve block) be desired by the buyer.

History of the horse’s use, show history, periods of rest, previous lameness, previous medical problems as well as therapies are all important information to acquire from the seller, if possible. However, many horses are presented for purchase examinations with very little known history. The buyer should be advised of the risk of purchasing a horse with an unknown history and particularly, horses that rely on sight to perform their occupation (e.g., roping horses and cutting horses that need to see the cattle they are working). This author recommends that the horse being examined be in use just before the purchase examination whenever possible.

The purchase examination should include a very thorough physical examination, a thorough lameness examination, and additional testing as warranted by the examination or desired by the client. Particular attention is given to all aspects of the examination that could identify potentially performance limiting problems or maintenance problems of which the buyer should be aware. The author uses the standard hospital medical record system to aid in the examination. However, many practitioners prefer to use a check list to prevent inadvertently overlooking part of the examination. A perfect horse is rare, and horses that are in active competition usually have identifiable problems. Assessing how the problems identified may affect the horse’s ability to perform its intended use is important.

4. Examination at Rest

Begin the examination by observing the horse’s overall appearance and conformation. Obvious conformational defects are observed, recorded, and discussed with the client. Although many horses compete successfully with conformational problems (e.g., mild carpal valgus), other conformations like very straight hocks and low rear fetlocks can, in some cases, become problematic or make the horse prone to injuries, particularly in hard stopping horses like reining horses and calf roping horses. Suspensory ligament injuries are relatively common in horses with this type of straight leg and can be career ending in some cases. Hoof conformation, balance, and quality should be observed; many outstanding performance horses have poorly conformed feet that are a continuous battle for the farrier and owner, and they often result in lameness.

After observing for conformational defects as well as swelling, lumps, bumps, and scars, a hands-on thorough physical examination is performed. The author systematically begins at the nose and proceeds through the tail, observing and palpating all structures that could present potential problems for the buyer.

A thorough oral exam is an important aspect of the evaluation. Normally, the age of the horse is determined by examining its teeth to ensure that the age is close to what is being represented. The author has been presented with a horse being sold as a 12 yr old when the teeth indicated its actual age as >20 yr. Dental problems such as parrot mouth, wave mouth, and missing teeth should be identified, and potential maintenance problems must be explained to the buyer.

The specifics of the ophthalmic examination as it relates to the purchase examination have been described in detail. Decreased vision can be a significant problem, particularly in horses that rely on sight to perform their occupation (e.g., roping horses and cutting horses that need to see the cattle they are working). The author has observed numerous horses presented for purchase examinations that were completely blind in one eye, and the buyer and the seller were unaware of the partial blindness. Decreased vision and evidence of previous ocular disease should be noted, and the significance of these abnormalities should be explained to the buyer.

Palpation of the larynx and trachea should be carefully performed. Asymmetry in the dorsal larynx could be a result of laryngeal hemiplegia. Palpation should be supplemented with airway endoscopy to
fully evaluate the laryngeal function. The thorax is carefully auscultated before and during forced respiration with a rebreathing bag. Careful cardiac auscultation should also be performed at this time.

Careful palpation of all four limbs and the back should be accomplished, evaluating for swelling, asymmetry, or pain. The ventral abdomen is carefully palpated for scars from previous abdominal surgeries. Previous colic surgeries in the medical history is an important thing for the buyer to know. Palpation with hoof testers and careful examination should be completed on all four feet. Examination of the peri-anal area, genitalia, and base of the tail for potential tumors is important, particularly in light-skinned and gray horses. Genital and ocular squamous cell carcinoma are relatively common in Paint Horses, which are commonly used for Western events. Gray horses, particularly older horses, have increased incidence of peri-anal melanomas.

Examination of the tail and evaluation for tail function is very important in horses intended for American Quarter Horse Association (AQHA) shows. According to AQHA rules, normal tail function is defined as “being able to raise the tail to or above the horizontal plane.” A horse’s inability to raise its tail to or above the horizontal plane in response to a tail test (which includes stimulating the anal sphincter) conducted on-site by an AQHA-approved veterinarian shall be considered a violation. Evidence of tail blocking could result in the owners being unable to show the horse in AQHA shows.

5. Lameness Exam

Lameness is one of the most common potential performance-limiting problems identified during purchase examinations. Therefore, a thorough lameness exam should be completed as part of all purchase examinations of performance horses. Preferably, the horse is observed in hand at a walk and jog on a hard surface. Complete flexion tests of the joints of the forelimbs and hindlimbs are completed on every case. Although the interpretation of flexion tests is clinician dependent and can be controversial, frequently performing these flexions will allow the clinician to determine what is significant. Lunging on a soft surface to watch the horse move freely is desirable in many cases. However, horses in certain disciplines like calf roping and team roping are not lunged on a line, because lunging on a line is unfamiliar to many Western-trained horses. Observing them move freely in a round pen is useful, if available.

Observing the horse moving with a rider can provide additional valuable information in some cases. Allowing the horse to rest after riding and then reevaluating the horse in hand can often show subtle exercise-induced lameness. Although it is not always possible to observe the horse with a rider, it can provide valuable information in some cases (e.g., a subtle lameness identified in hand may be worsened or totally absent when ridden).

In mature performance horses in active use, it is common to find problems. Lameness is the most common abnormality identified. The challenge is to determine whether or not the lameness can be tolerated. Horses in some disciplines like team roping often perform competitively despite lameness, whereas horses in other disciplines like barrel racing are more easily made less competitive because of lameness. Many older competition horses that are no longer competitive at professional levels are very useful at youth or novice levels and can be serviceable for years. If lameness is identified, the buyer and veterinarian have several options to consider: (1) discontinue the purchase exam and return to the seller to determine the cause, (2) pursue the lameness for a more accurate diagnosis to better determine prognosis, or (3) pursue radiographs and other ancillary testing without further examination. Many veterinarians choose to discontinue the exam at this point and return the horse to the seller. The author recommends this option particularly with severely lame horses or horses that have serious problems. This is safe but, at times, does not result in the best outcome for the buyer. If the cause for lameness is not readily apparent and the buyer wishes to pursue it, the lameness evaluation may be completed with the seller’s permission in an attempt to give the best information to the buyer. A large percentage of buyers prefer to make their decisions with as much information as possible. Although radiographs can provide valuable information, they do not always identify the source of lameness. Many horses can have significant lameness without radiographic abnormalities. Horses can also have numerous radiographic abnormalities that do not cause lameness. Many horses can and do perform well with lameness depending on the cause of lameness, intended discipline, and level of performance required by the purchaser. Determining those problems that are manageable can be very helpful to the buyer’s decision. Occasionally, sellers will decline further in-depth evaluation of the lameness, and the horse is usually returned to them to pursue the problem.

Radiographic evaluation is not an essential part of every purchase examination, but most buyers want information on which to base their decision. Radiography is the most common ancillary testing requested. Radiographs of the hocks and front feet are the most commonly requested and performed. They are usually warranted, because these are common areas of lameness. Young Quarter Horses to be affected by developmental or traumatic injuries to their stifles, and therefore, it is common to radiograph these joints as well. Barreling horse prospects that have been previously used for racing are usually evaluated for common racing injuries such as carpal and fetlock chip fractures. One area that can easily be overlooked is
the rear fetlocks. Performance horses that do hard stops such as reining horses, calf horses, and cutting horses can have traumatic injuries to the structures of the rear fetlocks. Although some of these injuries are well tolerated, others, such as suspensory branch and insertion lesions, are not well tolerated and have a tendency to reoccur. Careful evaluation with appropriate imaging, radiography and ultrasonography, is essential. Some cases warrant more advanced imaging modalities being employed, and these will be discussed elsewhere in this series.

6. Ancillary Testing
A Coggins test for equine infectious anemia is almost always done, unless very recent testing has been performed. Some buyers request complete blood count and serum chemistry panels be completed. Often, the buyer may request drug testing, usually for non-steroidal anti-inflammatory drugs, and occasionally, urine samples are submitted at the buyers request for complete drug-testing protocol.

Endoscopy is currently used as part of the purchase examination in horses that show at speed (e.g., barrel horses) where the noises associated with airway abnormalities could be detrimental or in any horse that the buyers want this information to help them with their decisions.

7. Reports
The American Association of Equine Practitioners has approved guidelines for reporting purchase examination20 and that has been covered in depth.1 One cannot emphasize enough the importance of appropriate communication about your opinions and documentation in the form of a report to the client, and a copy should be included in the record. A review of the attached reference list will aid the reader in obtaining basic information about purchase examinations and examples of record-keeping forms used by some authors.

8. Summary
Western horses are used for a variety of purposes. Knowledge of their use and the occupational hazards of those uses can be very advantageous to the veterinarian. A systematic thorough examination of each horse should help the examining veterinarian provide the most useful information to their clients.

References