

The Royal College of Veterinary Surgeons

DIPLOMA IN EQUINE SOFT TISSUE SURGERY

PAPER I

(Basic Sciences)

Tuesday 2 May 1995

10.00 a.m. to 1.00 p.m. (3 hours)

SECTION A

Two long—answer questions of which a candidate must choose ONE question to answer in approximately 1½ hours

Candidates are warned that illegible handwriting may result in examiners being unable to award marks for information which candidates intended to convey

1. Describe in detail the three phases of repair of a soft tissue wound.
2. Describe the important anatomical features and relationships of the cheek teeth in the horse. Discuss their importance in the pathogenesis, diagnosis and treatment of pathological conditions which may commonly affect these teeth.

P.T.O. for **Section B**

The Royal College of Veterinary Surgeons

DIPLOMA IN EQUINE SOFT TISSUE SURGERY

PAPER I
(Basic Sciences)

Tuesday 2 May 1995

10.00 p.m. to 1.00 p.m. (3 hours)

SECTION B

**TEN compulsory short—answer questions to
be answered in approximately 1 ~ 2 hours
(allowing some 9 minutes for each question)**

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which candidates intended to convey*

3. Describe the innervation of the equine larynx.
4. Describe the sequence of events which take place during descent of the equine testis. How do these relate to cryptorchidism?
5. List the factors which may contribute to reduction of local resistance to infection indicating the way in which they exert their effects.
6. Describe, with the aid of diagrams, the arterial blood supply of the equine intestine.
7. Describe the biological properties of:—
 - (a) chromic catgut
 - (b) polyglactin 910
 - (c) polydioxanone.
8. What are the metabolic sequelae following rupture of the bladder in a foal? What steps would you take to correct them prior to embarking upon surgery?

P.T.O. for questions 9, 10, 11 and 12

9. What is the rationale for the use of alpha 2 agonist drugs for epidural anaesthesia in horses?
How do they produce their effect?

10. Describe the mechanisms involved in swallowing. How may the process be evaluated?

11. How may pathological factors cause disturbance of gastrointestinal motility in horses with gastrointestinal disease?

12. Describe the pathological features of squamous cell carcinoma of the penis in the horse.

The Royal College of Veterinary Surgeons

DIPLOMA IN EQUINE SOFT TISSUE SURGERY

PAPER II

(Clinical Aspects)

Tuesday 2 May 1995

2.00 p.m. to 5.00 p.m. (3 hours)

This papers consists of Six questions
of which a candidate must choose *FIVE* to answer
(which allows some 35 minutes for each question)

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1. Torsion of the large intestine as a cause of colic appears to be increasing in frequency. Discuss the possible causes and explain in detail how you would manage such a case.
2. Describe how you would investigate and treat a stabled 7 year old Thoroughbred gelding which has suffered a severe bout of epistaxis. Give reasons for your course of action.
3. Penetrating wounds are potentially more dangerous than lacerated wounds. Discuss this statement using commonly occurring wounds in the horse to support your argument.
4. Critically evaluate the use of lasers in equine soft tissue surgery.
5. Perforation of the rectal wall is a serious hazard during rectal examination of the abdominal cavity. How may the risk of this accident be minimised? How would you manage an animal in which the injury has been sustained?
6. A stallion is kicked on the penis during an attempt at serving a mare. Describe the sequence of pathological events which may follow such an injury. How would you manage such a case? What is the prognosis for the stallion returning to normal stud duties?

The Royal College of Veterinary Surgeons
DIPLOMA IN EQUINE SOFT TISSUE SURGERY

PAPER I

(Basic Sciences)

Monday 20 April 1998

10.00 a.m. to 1.00 p.m. (3 hours)

SECTION A

*Two long-answer questions of which
a candidate must choose ONE question
to answer in approximately 1½ hours*

***Candidates are warned that illegible handwriting may result
in examiners being unable to award marks for information
which candidates intended to convey***

1. Discuss the causes and sequelae of intestinal distension in the horse.
2. Discuss the role of the laryngopalatal junction in health and disease.

P.T.O. for Section B

The Royal College of Veterinary Surgeons
DIPLOMA IN EQUINE SOFT TISSUE SURGERY

PAPER I

(Basic Sciences)

Monday 20 April 1998

10.00 p.m. to 1.00 p.m. (3 hours)

SECTION B

***TEN compulsory short-answer questions to
be answered in approximately 1½ hours
(allowing some 9 minutes for each question)***

*Candidates are warned that illegible handwriting may result
in examiners being unable to award marks for information
which candidates intended to convey*

3. Describe the anatomy and physiology of the equine oesophagus. Which of the features described complicate the management of oesophageal diseases in the horse?
4. By the use of an annotated diagram, illustrate the topographical anatomy of the auditory tube diverticulum (guttural pouch) as viewed endoscopically.
5. Describe the pharmacological options available for the management of post-operative paralytic ileus following colic surgery.
6. **List** the primary neoplasms which affect the gastrointestinal tract of the horse. Where may they be located and how may they cause clinical disease?
7. Construct a flow diagram to describe the biochemical pathways involved in the processes of fibrinogenesis/fibrinolysis in the equine peritoneum.
8. **List**, in approximate descending order of likelihood, the possible causes of dysphagia in the horse.

P.T.O. FOR QUESTIONS 9, 10, 11 and 12

9. What is the value of ultrasonography in the diagnosis of surgical diseases of the equine abdomen?
 10. What is the rationale for the use of alpha 2 agonist drugs for epidural anaesthesia? How do they produce their effect, and what advantages and disadvantages do they have compared to local analgesic agents?
 11. Describe the important anatomical features of the paranasal sinuses and their significance in the pathogenesis and treatment of sinusitis.
 12. Describe the anatomy of the neonatal bladder and its importance in neonatal disease.
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DIPLOMA IN EQUINE SOFT TISSUE SURGERY

PAPER II

(Clinical Aspects)

Monday 20 April 1998

2.00 p.m. to 5.00 p.m. (3 hours)

This papers consists of *Six* questions
of which a candidate must choose *FIVE* to answer
(which allows some 35 minutes for each question)

**Candidates are warned that illegible handwriting may result
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1. What are the indications for caesarean section in the mare? Discuss the factors the surgeon must take into consideration in attempting to ensure the short and long term success of the operation.
 2. What complications may arise following a severe lacerated wound to the dorsal aspect of a proximal hind canon? Discuss your initial examination and treatment of the wound and how it would help to reduce the likelihood of these complications.
 3. A recently purchased 2-year-old cob mare is presented with a history of persistent dribbling of urine and significant scalding of the hind limbs. Describe how you would investigate and treat this case.
 4. Critically evaluate the potential role for endodontic therapy in the management of molar tooth root disease in horses.
 5. Describe the indications for, and the technique(s) and possible sequelae of, large colon resection in the horse.
 6. Discuss in detail, the factors to be considered in developing a protocol for perioperative antimicrobial prophylaxis in a high throughput equine hospital with a mixed case load.
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THE ROYAL COLLEGE OF VETERINARY SURGEONS

DIPLOMA IN EQUINE SOFT TISSUE SURGERY

THURSDAY 17 JULY 2003

PAPER I
BASIC SCIENCES
(3 hours)

SECTION A
[1½ hours]

Candidates are required to answer **ONE** of the following **two** questions

Allow 1½ hours.

Illegible handwriting or failure to answer the question in the form requested may result in examiners being unable to award marks for information which candidates intended to convey.

1. Discuss the role of high-speed treadmill exercise testing in the evaluation of upper respiratory tract function in horses.
2. Discuss the concept of the “gut brain” and how considerations of gastrointestinal tract motility influence the management of colic cases.

P.T.O. for Section B

THE ROYAL COLLEGE OF VETERINARY SURGEONS
DIPLOMA IN EQUINE SOFT TISSUE SURGERY

THURSDAY 17 JULY 2003

PAPER I
BASIC SCIENCES
SECTION B
[1½ hours]

Candidates are required to answer **all TEN** of the following questions.
Allow 9 minutes per question.

Illegible handwriting or failure to answer the question in the form requested may result in examiners being unable to award marks for information which candidates intended to convey. Use diagrams where necessary

3. What are the **anatomical** arguments for and against the use of a frontal, as opposed to a lateral, approach to surgical exploration and treatment of paranasal sinus disease in horses?
4. **List** the urinary tract lesions that can precipitate uroperitoneum in foals. **List** the available diagnostic techniques.
5. What are the relevant anatomical features that influence the choice of surgical treatment of a horse bleeding from a fungal lesion within a guttural pouch?
6. **Outline** the possible ways in which the caecum can be involved in primary and secondary intestinal obstruction.
7. **Outline** the factors a surgeon must consider when making a ventral midline abdominal incision for an exploratory laparotomy in a Thoroughbred racehorse gelding and **list** the techniques available for its closure.
8. Indicate with the **aid of a diagram** the normal neonatal gastrointestinal tract and its potential relationship to disease processes in the adult horse.
9. **List** the various measures that might be employed to minimise post-operative intestinal adhesions and **briefly** explain the principle behind each.
10. What are the anatomical features of a normal temporo-mandibular joint? Mention the diagnostic methods that can be used to investigate possible disease at this location.

P.T.O. for Questions 11 and 12

11. What factors determine the success or failure of autogenous pinch skin grafts to take?
 12. Why are the risks of equine general anaesthesia so much higher than for other domesticated species? Speculate how the peri-operative fatality rate might be improved in future.
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THE ROYAL COLLEGE OF VETERINARY SURGEONS
DIPLOMA IN EQUINE SOFT TISSUE SURGERY

THURSDAY 17 JULY 2003

PAPER II
CLINICAL ASPECTS
(3 hours)

Candidates are required to answer **FIVE** of the following **six** questions.

Allow 35 minutes per question.

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1. Describe the pathogenesis, diagnosis and management of the various types of displacement that can afflict the equine large intestine.
2. What are the indications for performing an “en bloc preputial resection”? Describe the technique, its possible complications and how to manage them.
3. Discuss the methods that may be used to provide surgical support for healing in equine ulcerative keratitis.
4. Prosthetic laryngoplasty for the treatment of recurrent laryngeal neuropathy is sometimes unsuccessful. Discuss the complications that lead to failure and **outline** how their incidence may be reduced.
5. You are presented with an incontinent 5 month-old filly. Describe your evaluation of the case and potential treatment.
6. Discuss how you would assess a horse with a suspected progressive ethmoidal haematoma which is causing intermittent, low grade, unilateral epistaxis. What treatment options would you consider for this patient?
