

# ENDOSCOPIC EXAMINATION FOR KWPN HORSES

## Breathing apparatus

### Procedure

- The breathing apparatus will be examined with the help of a laryngoscope and will be recorded on a DVD according to the KWPN specifications. The DVD will be mailed to the KWPN office for evaluation in Holland.
- The DVD must be submitted to the KWPN-NA office **within one month** of the examination.
- The examination must take place at either a Veterinary Teaching Hospital or a hospital/clinic that is on a par with a veterinary teaching hospital and specializes in internal medicine.
- The DVD must include two minutes of laryngeal examination.

### Age

- The examination must be done after December 1<sup>st</sup> of the two-year-old year. Horses may have the procedure done ONE time per year. If a new Endoscopic examination is submitted, a copy of the results of the previous examination must be included.

### Evaluation

- The DVD will be evaluated by an endoscopy committee. The endoscopy committee has the right to refuse an evaluation if the examination does not meet the KWPN specifications.
- The committee has the right to request additional footage.
- A new endoscopy examination may not be submitted until the following year. At that time the committee will also take the first examination into account.
- Horses meet the requirements if they have a normal and well-functioning breathing apparatus and are free of roaring and if breathing is normal during rest and work.

### Re-evaluation

- If the owner does not agree with the results of the evaluation by the committee, they may request a re-evaluation. The request must be made in writing and must be submitted within one month of the receipt of the results. The re-evaluation will be done by a separate committee. The re-evaluation will be done using the same DVD as the first evaluation as well as – if so desired – additional views.

**REQUIREMENTS FOR DVD RECORDING DURING THE EDOSCOPY EXAMINATION FOR THE  
FRONTAL AIR PASSAGES OF THE HORSE FOR THE KWPN  
(Version 09/01/2007)**

- Films must be recorded on a DVD and the DVD must be finalized. Video tapes are no longer accepted.
- If recordings of more than one stallion are on a single DVD, there must be a single recording for each stallion and the name and registration number of each stallion must be listed clearly in the menu.
- During the endoscopic examination of the frontal air passages the horse will be twitched. In principle the horse should NOT be sedated, unless he would be a danger to himself or others. If sedation is given it must be clearly marked on the DVD and in the accompanying documentation.
- On the DVD must be marked with:
  - Registration number of the horse
  - Stamp or name of the submitting veterinarian
  - Information must be written or printed on the DVD, do not use labels since these may come loose and sometimes add vibration at high speeds and can damage the player.
- Please send the DVD to the KWPN-NA office in such a manner it has to be signed for.  
PO Box O or 609 E. Central Ave  
Sutherlin, OR 97479  
If you save a copy of the DVD at home, you can send the DVD by regular mail and it will not be necessary the KWPN-NA office signs for the delivery. However, in that case do notify us of the shipment so we know to expect it by emailing [office@kwpn-na.org](mailto:office@kwpn-na.org).
- The DVD should be sent along with a copy of the registration paper and the signed companion form on which the submitting veterinarian declares that the recording was made in his/her presence and that he/she certifies that the recording belongs to the animal that he has identified on the DVD from the information on the registration paper.
- Right at the start of the recording the following must clearly be stated (by way of the title generator of the endoscope)
  - Date (Endoscopy may not take place until after December 1st of the horse's two-year-old year).
  - Registration number of the horse
  - Chip number of the horse (if there is one)
  - Possible sedation (type of sedation, brand name, dosage, how given, period of time prior to recording).
- After that will be the recording where the following will be recorded in this order:
  - Enter the scope through the right nostril to in front of the larynx with a view of the throat.
  - The larynx must be recorded for at least 30 seconds in a resting state.
  - The larynx must on the screen while trying to get the larynx to move by occlusion of the nasal passages. At least one abduction and 1 adduction must be recorded (in questionable cases further abductions and adductions should be filmed).
  - The effects of two slap tests should be filmed (slapping behind the right shoulder blade).
- A second recording must be made if the larynx is not completely symmetrical.
  - This time the scope must enter the left nostril (until in front of the larynx)
  - The larynx must again be recorded for at least 30 in a resting state.
  - The larynx must again be on the screen while getting it to move by occlusion of the nasal passages. At least At least one abduction and 1 adduction must be recorded (in questionable cases further abductions and adductions should be filmed).
  - The effects of two slap tests should be filmed (this time slapping behind the left shoulder blade).
- The overall length of the recording on the DVD should not be longer than five minutes and a rather high recording method should be used (two hours per DVD for example).
- **Checklist for mailing the DVD:**
  - Check the DVD meets the criteria.
  - Copy of the registration paper of the stallion.
  - Accompanying form completed and signed by the attending veterinarian.
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**If one of these items is missing, the recording will not be evaluated.**



# Endoscopic Examination

PLEASE ENTER REQUESTED INFORMATION AND SEND THIS FORM WITH THE DVD TO THE ADDRESS BELOW

Horse Name: \_\_\_\_\_ Date of Procedure: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Location of Procedure: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Clinician Name: \_\_\_\_\_

Clinician Signature: \_\_\_\_\_

### Area Examined:

Nasal passages: \_\_\_\_\_

Epiglottis\*: \_\_\_\_\_

Ethmoid Area: \_\_\_\_\_

Arytenoids\*: \_\_\_\_\_

Pharynx\*: \_\_\_\_\_

Ventricles\*: \_\_\_\_\_

G.P. Openings: \_\_\_\_\_

Trachea: \_\_\_\_\_

Soft Palate: \_\_\_\_\_

Guttural Pouches: \_\_\_\_\_

### Endoscopic Report:

\*Mark Lesions

### Comments:



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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Return form and DVD to:

KWPN of North America, KWPN-NA  
609 E. Central ❖ P.O. Box O  
Sutherlin, OR 97479

Phone: 541-459-3232 ❖ Fax: 541-459-296 7 ❖ E-mail: office@kwpn-na.org