Author: Tim Mair (Reviewed by T Mair)

Chapter 3. Recording treatment decisions

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Overview

Maintaining accurate and contemporaneous records of anthelmintic treatments for individual equids (including horses and donkeys) and herds of equids is a vital component of a parasite control programme. Both current and historical data are required to inform the decision-making process with regards to anthelmintic use. Any person permitted to prescribe a prescription only medicine (POM-V and POM-VPS) must comply with the Veterinary Medicine Regulations 2013 (as amended). Prescriptions may be verbal or in writing. Sufficient information about the equid and the way it is kept must be known to the prescriber in order to prescribe and supply medicines, including anthelmintics. If a veterinary medicine is supplied against a prescription that is not in writing, then the person who prescribes the product must make a record of the reason for prescribing it. This record must be kept by the prescriber for a period of five years from the date of prescribing. Further information on prescribing or supplying veterinary medicines can be found on the gov.uk webpage.

Information that should be recorded when considering the need for anthelmintic treatment of equids:

- Owner and patient details – contact information (name and address) and horse history (age, sex, weight, passport details, relevant clinical history).
- An up-to-date risk assessment relating to the individual's or group's likely exposure to parasite infection and any associated data (e.g., stocking density, age group(s), pasture management, closed/open herd status).
- Test results – details of the test(s) used, date that test(s) was/were undertaken and the results.
- Anthelmintic treatment – details of treatment used and associated rationale.

Anthelmintic Treatment Decision Records

Records of previous anthelmintic treatments, as well as previous test results and risk assessments, should form an important part of the horse's health record. This information will be highly relevant and helpful in situations where parasite-associated disease (clinical or sub-clinical) is encountered on the premises and also when the horse changes premises / ownership (see Quarantine chapter – to be added 2026).

Owner and patient details

The RCVS Code of Professional Conduct requires veterinarians to record the identity of an animal or group of animals. While there is no such requirement in the relevant Codes of Practice for SQPs and pharmacists, it is good practice to maintain accurate records of owner and patient details (Table 1) to help inform the decision-making process for prescribing.

There is an obligation for all prescribers to check the passport before prescribing a veterinary medicine to an equid.

Table 1. Template for recording owner and patient details.

Owner's name:	
Owner's address:	
Equid's name:	
Premises the equid is kept (if different from the address of the owner)	
Passport number/UELN:	
Food-producing status	
Age:	*Years/months*
Breed:	
Sex:	*Entire male/gelding/female*
Weight (kg):	
Method used to estimate weight:	*Weighbridge/weigh tape/estimated*
Any concurrent disease noted:	

Prescribers who are not veterinary surgeons should **not prescribe if concurrent disease or abnormal clinical signs are noted** and should refer to a veterinary surgeon.

Risk Assessment Data - factors indicating potential for helminth transmission

The risk assessment-based approach (detailed in Chapter 1.3. A risk assessment-based approach to equine parasite control in adult horses) takes into consideration a broad range of factors, such as **C**linical history, **A**ge Profile, **N**umber of horses, **T**est results, and **E**nvironment, to help determine the **R**isk profile for an individual horse. The results of the risk profile assessment (Table 2) will help to inform the decision-making process for whether there is a need to prescribe an anthelmintic for an individual adult horse and aid the recording of the rationale for doing so.

Table 2. Template for recording risk assessment data for an individual adult horse.

Risk Factor			LOW RISK	MEDIUM RISK	HIGH RISK
C	**C**linical history	History of worm associated disease	☐	☐	☐
A	**A**ge profile	Age	☐	☐	☐
N	**N**umber of horses	Stocking density	☐	☐	☐
T	**T**est results	Previous faecal egg counts	☐	☐	☐
		Previous small redworm ELISA tests	☐	☐	☐
		Previous tapeworm ELISA tests	☐	☐	☐
		Faecal egg count reduction tests (FECRT)	☐	☐	☐
E	**E**nvironment	Herd management	☐	☐	☐
		Access to grazing	☐	☐	☐
		Pasture management	☐	☐	☐
		Quarantine procedures	☐	☐	☐
R	**R**isk profile	*Place a tick in the appropriate box for each of the risk factors and total up the number of ticks in each risk category to determine the risk profile of the horse and assess the need to prescribe an anthelmintic.*			

Test results

Regular testing (see Chapter 1.2. Using monitoring tools effectively to determine the need for anthelmintic treatment) will help to determine which equids require anthelmintic treatment and which active to prescribe (see Chapter 2. Selecting and using anthelmintics appropriately), and keeping a record of these will help to inform the rationale for prescribing a particular anthelmintic active (Table 3).

Table 3. Template for recording FEC test results for an individual equid.

	Date	Strongyles	Ascarids	Comments
Faecal egg count (FEC) result in eggs per gram (EPG)				

Table 4. Template for recording ELISA test results for an individual equid.

	Date	Tapeworm ELISA Score	Comments
Tapeworm ELISA score **Saliva test** – low score threshold - 0.09 **Serum test** – low score threshold 2.7			
	Date	Small redworm ELISA Score	Comments
Small redworm ELISA score <14.37 - threshold for 1,000 total cyathostomin burden <15.61 - threshold for 5,000 total cyathostomin burden <30.46 - threshold for 10,000 total cyathostomin burden			

It is also good practice to perform post-treatment FECRTs (faecal egg count reduction tests) to check effectiveness of anthelmintics on parasite populations (see Chapter 4. Testing for anthelmintic resistance). Maintaining a record of post-treatment FEC results will help to provide an overview of the anthelmintic resistance (AR) profile on the premises and inform prescribing decisions to avoid the unnecessary use of ineffective anthelmintics in the future (Table 5).

Table 5. Template for recording FECRT results from the named equid, another equid or group of equids tested to check the effectiveness of anthelmintics actives on the premises.

Faecal egg count reduction test (FECRT) result (%)	Are the results for the named equid or other equid(s) on the premises?	Date	Active tested	Target parasite	Pre-treatment FEC (EPG)	Post-treatment FEC (EPG)	FECRT result (%)	Comment

Anthelmintic treatment

Knowledge of previous anthelmintic prescription information, such as the active prescribed and time of year the active was prescribed, will help to inform future prescribing decisions (Table 6). Prescribing the right anthelmintic active at the right time of year to target the parasite species of concern, or stage of development is essential for slowing the development of AR (see Chapter 2. Selecting and using anthelmintics appropriately). Therefore, it is important to understand whether the previous anthelmintic treatment prescribed was the appropriate active to target the parasite species of concern, or stage of development for the time of year, to prevent routine use of the same actives and increased selection pressure for AR.

Table 6. Template for recording anthelmintic prescription information for an individual equid.

Prescriber name:			
Prescriber signature:			
Issue date	Anthelmintic active(s)	Product tradename Strength & formulation	Rationale
FBZ – fenbendazole; PYR – pyrantel; IVM – ivermectin; MOX – moxidectin; PRAZ – praziquantel			

Further guidance on the information that must be included in a written prescription can be found on the gov.uk webpage.

Passports

Currently, all horses, ponies, donkeys and related animals (including zoo species like zebras) are considered to be food-producing animals in the UK. All horses must have a passport, with the exception of semi-wild horses in areas such as the New Forest. In the passport, horses can be declared as either intended for human consumption (food-

producing) or not intended for human consumption (non-food-producing). All horses are considered food-producing animals unless signed out of the human food chain in the passport. All new passports issued to foals are not signed out of the food chain, but replacement passports or passports issued to adult horses (i.e. horses that were not issued with a passport within 12 months of birth) are automatically signed out. Additional guidance on the use of medicines in food- and non-food-producing horses, and record keeping requirements including the horse passport, can be found on the gov.uk webpage.

If, as a veterinary surgeon, pharmacist or Suitably Qualified Person you prescribe, administer or dispense any medicine for use in a horse, you must:

- Ask to be shown the animal's passport if you do not have prior knowledge of its status (if you have seen the passport recently and are aware of the horse's current status, you do not have to see it before each treatment).
- Satisfy yourself that the passport supplied relates to the horse in question.
- Note whether the horse is declared as 'intended' for human consumption in the passport or there is no declaration, or the horse is declared as 'not intended' for human consumption. If the declaration is not signed, you must consider the horse as being 'intended' for human consumption.
- Satisfy yourself it is a valid passport (depending on the passport age - refer to section II or section IX). *Passports issued after 1 January 2016 (see Section II, Part II), older passports issued before 2016 (see Section IX, Part II), an older passport (without section IX) is not fully valid and requires updating.*
- Withdrawal periods as stated on the product label and in the SPC must be followed and recorded for horses intended for human consumption.

If you do not have prior knowledge of the horse's status and a passport is not available, or if you are not satisfied that the passport relates to the horse in question, follow the 'horse presented without a passport' procedure on the gov.uk webpage. It is important to follow these procedures as the keeper of a food-producing animal must keep documentation on the acquisition of a veterinary medicinal product and the records relating to the product for at least five years following administration, or other disposal

of the product, irrespective of whether or not the animal concerned is no longer in that keeper's possession or has been slaughtered or has died during that period. This information should be discussed with the owner when first prescribing for an individual equid or group of equids.