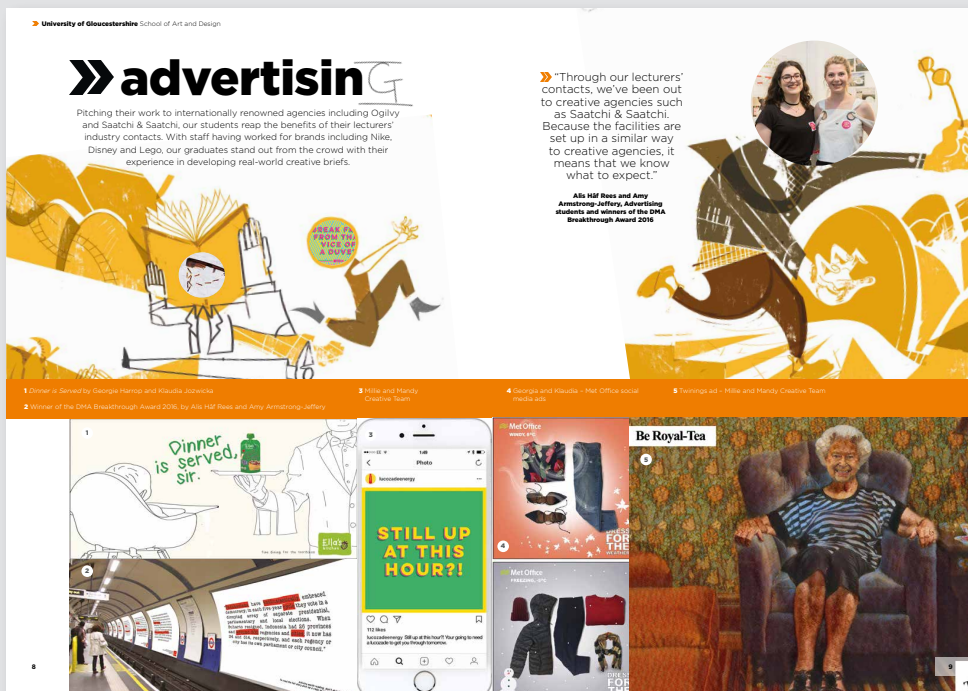




40 page A4 brochure
show- casing each course
within the Art & Design
school for potential
students



Equine Wetlabs Europe 2019



Go home with new skills
7-8 hours of wetlabs | 2-4 vets per Ultrasound Machine



Muscle Conditions – Diagnostics, Therapeutic Strategies & Prevention

Fri 25 - Sat 26 October Epidemiology Specialistrijnsdijk Helsingborg, Sweden

This course focuses on diagnostic techniques for clinical or subclinical muscle conditions and how to manage them medically, nutritionally and with physiotherapy (incl. the use of therapeutic modalities). Day 2 of the course covers training and performance protocols aimed at preventing and managing muscle conditions in equine athletes. The practical sessions on live horses and specimens will include: Examination of muscle tissue, acquisition of muscle biopsies, ultrasound of the back/pelvic muscles, applying therapeutic modalities & physiotherapy exercises.

Brian MacKenzie BVSc, DVM, PhD, DipACVIM, DipACVIM – Oregon State University, USA
Cathy McGowan BVSc, DipACVIM, MRCV, PhD, DipACVIM, PhD, MRCV – University of Liverpool, UK
Heli Hyytiäinen PT, MSc, VetPhysio, PhD – University of Helsinki, Finland

Advanced Ophthalmology

Tue 19 - Wed 20 February Lingpihong Diergesondheids, Utrecht, The Netherlands
Fri 22 - Sat 23 February Tiebinkliniek, Basel, Switzerland

This course was devised for equine practitioners with a good working knowledge in equine ophthalmology and provides an update on recently developed cutting-edge diagnostic/therapeutic techniques and medications. The 7 hours of wetlabs will allow attendees to hone their practical skills on live horses and specimens in true small groups under the watchful eye of 2 of the most highly respected and experienced equine ophthalmologists worldwide.

Dennis Brooks DVM, PhD, DipACVIM – Brooklyn, USA
Richard McMillan DVM, MS, DipACVIM, DipACVIM – Auburn University, USA
Silvia Stadler DVM, DipACVIM, Diergesondheids – Equine Eye, Switzerland

Neonatology in 1st Opinion Practice

Fri 29 - Sat 30 November Veterinární Klinika Větrníků Mlýnský, Pardubice, Czech Republic

The lectures and practical sessions of this course provide the equine practitioner with the knowledge and practical skills to confidently deal with the neonatal and post-neonatal foal in first opinion practice and the decision making when to refer to a dedicated neonatal intensive care unit. The hands-on practical sessions include placement of over-the-wire catheters and bandaging/splinting/casting, and there will be case-based PowerPoint discussions on imaging of the foal in the field.

Pam Wilkins DVM, MS, PhD, DipACVIM, DipACVIM – University of Illinois, USA
Emily Haggart BVSc, DipACVIM, MRCV – Roskilde Equine Hospital, UK
Jessica Kidd BA, DVM, CertESDH, DipECV, MRCV – Llanwrda, UK

Advanced Neonatology in Referral Practice

Mon 2 - Tue 3 December Clinique Equine des Brevenières, Paris, France

This course is aimed at equine practitioners who have attended the course on Neonatology in 1st Opinion Practice or vets with a good working knowledge in neonatology. The lectures and case-based topical discussions focus on advanced foal care of the critically ill foal requiring a clinic setting.

Pam Wilkins DVM, MS, PhD, DipACVIM, DipACVIM – University of Illinois, USA
Emily Haggart BVSc, DipACVIM, MRCV – Roskilde Equine Hospital, UK
Valérie Picardet DVM, PhD, MRCV, DipACVIM, DipACVIM – Centre Hospitalier Veterinaire Equine de la Vallée, France

"VetPD courses are organised so as to maximise the interaction between attendees and speakers: it's not just science and theory but a valuable exchange of experience both during the lectures and social time. As a speaker, it is such an enriching and enjoyable experience!"

Emma van Erck, Equine Sports Medicine Practice, Belgium

Introduction to Advanced Surgical Dental Extraction Techniques (incl. MTR, MTE & Segmentation: max. 18 vets)

Fri 18 - Sat 19 January Tierärztliche Klinik Isenhausen, Hannover, Germany
Fri 4 - Sat 5 October Hubert Simehofer DVM, MS, DipACVIM, DipACVIM – University of Vienna, Austria
Tim Barrett BVSc, MRCV, MRCV, DipACVIM, MRCV – Roskilde Equine Hospital, UK
Wolfgang Schneider DVM, MS, DipACVIM, DipACVIM – Tierärztliche Klinik Isenhausen, Germany

This 2-day highly practical course was devised for advanced practitioners and surgeons with a good working knowledge/experience in equine dentistry, specifically with dental extractions. The specialists will provide an overview on up-to-date surgical dental extraction techniques in horses, including minimally invasive repulsion (MIR) and minimally invasive transbuccal extraction (MTE) techniques. During the 7 hours of wetlabs in true small groups (2-3 vets per specimen) attendees will be able to further develop their surgical skills and train the MIR/MTE techniques under the close supervision of the world-renowned specialists.

Oral Dental Extraction Techniques (max. 24 vets)

Fri 20 - 21 September Tierklinik Hattenhausen, Frankfurt, Germany

This 2-day highly practical course is aimed at practitioners with a good working knowledge in equine dentistry who want to learn about various oral dental extraction techniques and how to apply them clinically. The specialists will share tips/tricks and pearls of wisdom especially during the 7 hours of practical sessions on equine specimens in true small groups (2-3 vets per specimen).

Hubert Simehofer DVM, MS, DipACVIM, DipACVIM – University of Vienna, Austria
Rob Pascoe BVSc, MRCV, DipACVIM, DipACVIM – Roskilde Equine Hospital, UK
Rabekah Kennedy BVSc, MRCV, MRCV – University of Edinburgh, Scotland

Beyond Basics: Modern Diagnostic & Therapeutic Techniques in Dentistry

Fri 8 - Sat 9 February Clinique Equine des Brevenières, Paris, France
Sat 9 - Sun 10 November Hovosvetskaia Equine, Helsinki, Finland

Developed for practitioners with experience in the field of equine dentistry this course provides a comprehensive overview on diagnostic and therapeutic techniques through lectures and extensive wetlabs (7 hrs, 2-3 vets per specimen) covering oral endoscopy, radiography, motorized reaming, local anesthetic techniques, periodontal therapies & incisor, canine and cheek tooth extraction techniques.

Hubert Simehofer DVM, MS, DipACVIM, DipACVIM – University of Vienna, Austria
Rob Pascoe BVSc, MRCV, DipACVIM, DipACVIM – Roskilde Equine Hospital, UK
Tim Barrett BVSc, MRCV, MRCV, DipACVIM, MRCV – Roskilde Equine Hospital, UK
Rabekah Kennedy BVSc, MRCV, MRCV – University of Edinburgh, Scotland
Kristen Nettleton DVM, MS, DipACVIM, DipACVIM – University of Guelph, Canada

VetPD in Cooperation with the South African Equine Veterinary Association (SAEVA)

All-inclusive Safari Equine Event

25 hrs of Safari, 20 hrs of lectures / case discussions;
6 20 hrs of wetlabs on live horses/specimens
3 - 9 November 2019, Dinokeng Game Reserve, South Africa
(1h from Johannesburg Airport)



Pam Wilkins DVM, MS, PhD, DipACVIM, DipACVIM – University of Illinois, USA
Jessica Kidd BA, DVM, CertESDH, DipECV, MRCV – Llanwrda, UK
Derek Knotenbeek BSc, BMS, DVM, DipACVIM, MRCV – Equine Medical Solutions, Scotland
Luis Lamas DVM, CertESDH, PhD, DipECV, MRCV – University of Lisbon, Portugal

What our speakers say:

"Both in the lead up to and during the 2017 South Africa event, the organisation by the VetPD team was outstanding: the team were very approachable, highly efficient and extremely accommodating. The location was stunning. The highlight of the event (with the exception of the educational material of course) were the twice daily safaris which "book-ended" the lectures and wetlabs, as well as providing exposure to the varied local wildlife, they offered a great environment for social interaction. This, in turn, led to a very comfortable atmosphere for both the lecture and wetlab sessions, attended by delegates with a healthy variety of experience and expertise. A thoroughly enjoyable and memorable experience!"

Sarah Peck, The Royal (Dick) School of Veterinary Studies and The Robin Institute, Scotland

Ultrasound of the Mid-Distal Limb & Stifle for Practitioners

Fri 4 - Sat 5 October Pferdeklins Pastern Breinhardt, Vienna, Austria

This course provides equine practitioners with the knowledge and especially the practical skills to competently and confidently scan the mid-distal front- and hindlimb incl. the stifle joint of the horse. Over the two days the attendees will spend 7 hours scanning the following anatomical regions in small groups (2-4 vets per ultrasound machine) on live horses: Patern, fetlock, digital flexor tendon sheath, flexor tendons, suspensory ligament, carpus, tarsus (incl. sheath) & stifle.

Roger Smith BA, MSc, PhD, DipACVIM, DipACVIM – Royal Veterinary College, UK
Marcus Neale DVM, MRCV, MRCV, DipACVIM, DipACVIM – Royal Veterinary College, UK
Andy Fiske-Jackson BVSc, MRCV, MRCV, DipACVIM, DipACVIM – Royal Veterinary College, UK

New Developments in Endoscopy & Respiratory Conditions

Fri 15 - Sat 16 March Clinica Equina Tiberti, Venice, Italy

This two-day practical course was developed to provide practitioners with an update on equine endoscopy, respiratory conditions and especially with the practical skills to perform most routine diagnostic endoscopic procedures (incl. GI) currently used in equine practice. The internationally renowned specialists will be sharing invaluable tips/tricks during the 7 hours of practical sessions on live horses/specimens, which will cover the upper/lower respiratory tract (incl. TW/BAL), overground endoscopy, sinuscopy, oral endoscopy & gastroscopy etc.

Patrick Pollock BVMS, CertESDH, FRCV, FRCV, DipACVIM, DipACVIM – University of Edinburgh, Scotland
David Sutton BA, MSc, CertESDH, FRCV, FRCV, DipACVIM, DipACVIM – University of Glasgow, Scotland
Francina Barcalo Oliver DVM, MRCV, MRCV, DipACVIM, DipACVIM – University of Edinburgh, Scotland

Orthopaedic Rehabilitation of the Equine Athlete

Tue 12 - Wed 13 February TBC, Germany
Tue 19 - Wed 20 March EquiPartner, near Ostend, Belgium
Fri 27 - Sat 28 September von Ballmoos Reha & Leistungszentrum, Zürich, Switzerland

This course covers how to use therapeutic exercise including physiotherapy as the foundation of rehabilitation of the equine athlete and how the following therapeutic modalities can be used: Whole body vibration, hyperbaric oxygen therapy, aquatic therapy, ESWT, radiofrequency therapy, therapeutic ultrasound, laser and pulsed electromagnetic therapy. On both afternoons, several of these modalities will be applied on clinical cases during the 7 hours of practical small groups sessions.

Steve Adair BVMS, DVM, DipACVIM, DipACVIM – University of Tennessee, USA
Andrés J. Kampa DVM, PhD, DipACVIM, DipACVIM – Kampa Equine Sports Medicine and Surgery, USA
Lee Clark BA, MSc, VetPhysio, PhD – Equine Physiotherapy, UK

"Perfect mix of theory and practical sessions, with excellent practical relevance. The course was very well organised and I would thoroughly recommend it. Well done VetPD!"

Caroline Bennett BVMS, MRCV, MRCV, DipACVIM, DipACVIM – University of Guelph, Canada

"Lectures were easy to understand and practical sessions were really helpful to putting the theory into practice. It's much easier to practice on specimens and whilst having a specialist watching over your shoulder – really good!"

Anna Lehto BVMS, MRCV, MRCV, DipACVIM, DipACVIM – University of Helsinki, Finland

"This was a highly practical course providing a great theoretical foundation. Even though I was already quite familiar with the presented techniques, I really learned some new tricks and got some useful insights for my daily work."

Nina Lindgren, Svenska Institutet för Equine AB, Sweden

EXCLUSIVE SKI & WHITE TURF EVENT

26 Jan - 4 Feb 2019 | Scuol - St.Moritz, Switzerland
18 hrs of lectures & case discussions | 20 hrs of wetlabs on live horses/specimens

In Partnership with:

white turf **ENSWOLD** **CLINICA ALPINA SA**

Prof. Gunther van Loon DVM, PhD, DipACVIM, DipACVIM, Asst. Member ECVI – Ghent University, Belgium
Dr. Carol Giller DVM, PhD, DipACVIM, DipACVIM, Asst. Member ECVI – Ghent University, Belgium
Dr. Kevin Knapton DVM, MS, DipACVIM, DipACVIM – University of Missouri, USA
Dr. Marcus J. Head BVMS, MRCV, MRCV, DipACVIM, DipACVIM – Roskilde Equine Hospital, UK
Dr. Arminia Widmer DVM, MS, DipACVIM, DipACVIM – White Turf, St. Moritz, Switzerland

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Please note that dates and speakers may change. Please go to our website to check this up to date information.



LONGFIELD LAUNCHES FIVE YEAR STRATEGY

Gloucestershire – like the rest of the country faces incredible care challenges in the years ahead.

People are living longer, and for some people that can mean living with far more complex health complications. Recent NHS research shows that 55 per cent of people in the county say they are living with poor health.

We want to be ready to meet those challenges. That is why we have launched our five-year care strategy to support more people.

Every year we support around 600 people yet research shows that there are more than 3,600 people who could benefit from palliative care in Gloucestershire.

So why do they not turn to us for support?

By talking to patients, families, GPs, staff and volunteers, we have highlighted the main reasons why people do not come to us for support: 1) most people believe a hospice is the place where you go to die, 2) they do not feel that a hospice is for them, as they are not that ill.

While our Hospice at Home service is a very important part of what we do, it is one of the services we offer. We support people to live well with their illnesses from the time they are diagnosed.

We have changed our name to take away the misconceptions about what people believe a hospice does. Longfield was the name of the house in Minchinhampton where the charity started in 1987, and where we are still based in our purpose built centre.



Taking care out into the community

Our strategy is to take our high quality and specialist services out into the community. We want people to be able to access our services no matter where they live.

Building on the foundations that we have established over the past 27 years, we are now taking our services into the community to enable more people to access our support.

In the future, we will be able to support patients in a community venue, close to home, such as their GP surgery, village hall or hospital. These sessions will include complementary therapy, counselling, art for health and other practical advice and support.

By 2020 we aim to have two satellite centres to provide permanent locations

in the community for people to access a broad range of day services.

This will include extending some of the services we currently offer from our Minchinhampton site and adding new services and new ways of working.

Every year in Gloucestershire more than 2,700 people die in hospital who would have liked to have died at home. We want to provide more Hospice at Home care in the future to support people's choice.

Education and training is part of our strategy to improve expertise and palliative care provided by other health care professionals in the county.

For a copy of the strategy, please visit our website longfield.org.uk or contact us on 01453 886868.

'Love, live, life'

– that was Kelsey's mantra

Kelsey Bliss and her family always knew that time was precious – so they made the most of every moment.

Every time three-year-old Angel-Rose Bliss visits her gran her routine is always the same. She goes into the living room and turns the light on under the glass engraving of Auntie Kelsey.

"That's Auntie 'Elsey,'" she says. Kelsey adored her nieces Angel-Rose and her older sister Star-Lily. "She was my best friend and I miss her," says six-year-old Star-Lily.

Kelsey was 23 when she died in July following a lung transplant.

"She had a phenomenal relationship with Star-Lily and Angel-Rose," says Kelsey's mum Teresa Daugherty. "She loved spending time with them and there were always lots of snuggles."

Kelsey was six weeks old when she was

diagnosed with cystic fibrosis. Hospital stays were a regular feature of her life and she had to take up to 80 tablets a day.

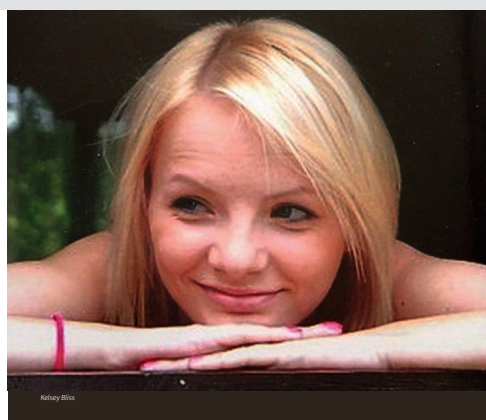
"It got her down because she didn't feel able to do things with her friends. After she finished at Thomas Keble School she was stuck at home a lot of the time. No wonder she got fed up."

She talked to her dad Keith every night and was close to her brothers Robert and Stephen, sister Melanie, stepdad Matt and stepmum Wendy. The family always did a lot together.

When it was suggested Kelsey try day therapy at Longfield she was adamant that she didn't want to go. "She thought it was somewhere old people went to die. I don't know what changed her mind."

"She described it as a space where she could be herself, where she could say what she thought and no one felt sorry for her."

"She described it as a space where she could be herself, where she could say what she thought and no one felt sorry for her."



"It was an amazing place where she could relax, discuss her fears and make new friends."

Kelsey had her favourite reclining chair in the corner of the day therapy room, where she would often snuggle up with her blanket and sleep.

Continued over...

BIG HEARTS WANTED

Laurence Llewellyn-Bowen

International designer Laurence Llewellyn-Bowen is helping Longfield with an exciting new fundraising campaign.

Big Heart aims to sign up 300 artists and celebrities to each create a piece of art which will be auctioned to raise much needed funds for our Art for Health service.

Laurence, who first won over the nation on BBC's Changing Rooms, is known worldwide for his interior design.

"Art is such a powerful medium for people to express those feelings which they may not be able to do with words," said Laurence. "Longfield understands the power of art and empowers people to use it as a form of expression and therapy."

"As a boy I lost my father to cancer. I personally understand how vital it is to help people live well at whatever stage of life."

"What a perfect campaign, raising money which will support Art for Health and help people with life-limiting illnesses to enjoy art and the joy of creating."

Funds raised will support our new Art for Health groups which have been launched in the community to engage people who have respiratory or heart disease – the two main causes of death in Gloucestershire.

Art for Health provides people with a focus and an outlet for their feelings and emotions. It also helps relax people and relieve anxiety and stress.

The campaign will be launched in the next few weeks and we will keep you posted about who signs up to help us. The auction will take place in September – you might be able to snap up a piece of original art and help us raise vital funds in the process.

GPS' FEEDBACK

Our five-year strategy has received the support of local GPs and health care professionals.

To ensure we are providing the care that is needed, we are consulting with health care professionals across Gloucestershire.

Dr Sarah Atherton, a GP at Locking Hill Surgery in Stroud, welcomed the proposals for outreach in the community.

"Care in the community is a vital part of Longfield's strategy as much of the NHS planning for the future is based on increasing community rather than hospital-based care," says Dr Atherton.

"Expanding the service to meet the needs of people with chronic, life-limiting conditions is important, that is not just focusing on the typical, historical focus of cancer. Recognising the importance of carers in the planning of services is vital. Satellite hubs is a great idea to cover more of Gloucestershire with the great care provided by the hospice."

Dr David Pouncey, a GP at Minchinhampton Surgery, agreed. He says: "I am thrilled that Longfield is extending its services, particularly support for care homes faced with the demands of providing the very best end of life care to the growing number of people in our community with frailty."

GP Dr Mark Porter, who is based at Culverhay Surgery in Wotton-under-Edge, praised the charity for our work.

"I'm very appreciative of the support Longfield has given my patients over the years," he says.

"I would strongly support the extension of its remit to heart and respiratory disease communities. Likewise, it is very good to hear that Longfield feels able to extend its bereavement support to the whole population."

"I'm very appreciative of the support Longfield has given my patients over the years"

