

EQUINE VETERINARY PRACTICES, HEALTH AND MEDICATION - CHAPTER 11

ARCI-011-005 Purpose:

To describe requirements and procedures used to ensure the health and welfare of racehorses and to safeguard the interests of the public and the participants in racing.

Adopted in Version 1.4 ARCI 8/27/02 NAPRA 10/2/02

ARCI-011-010 Veterinary Practices

A. Veterinarians under Authority of Official Veterinarian

Veterinarians licensed by the Commission and practicing at any location under the jurisdiction of the Commission are under the authority of the official veterinarian and the stewards. The official veterinarian shall recommend to the stewards or the Commission the discipline that may be imposed upon a veterinarian who violates the rules.

B. Treatment Restrictions

- (1) Except as otherwise provided by this subsection, no person other than a veterinarian licensed to practice veterinary medicine in this jurisdiction and licensed by the Commission may administer a prescription or controlled medication, drug, chemical or other substance (including any medication, drug, chemical or other substance by injection) to a horse at any location under the jurisdiction of the Commission.
- (2) This subsection does not apply to the administration of the following substances except in approved quantitative levels, if any, present in post-race samples or as they may interfere with post-race testing:
 - (a) A recognized non-injectable nutritional supplement or other substance approved by the official veterinarian;
 - (b) A non-injectable substance on the direction or by prescription of a licensed veterinarian; or
 - (c) A non-injectable non-prescription medication or substance.
- (3) No person shall possess a hypodermic needle, syringe or injectable of any kind on association grounds, unless otherwise approved by the Commission. At any location under the jurisdiction of the Commission, veterinarians may use only one-time disposable needles, and shall dispose of them in a manner approved by the Commission. If a person has a medical condition which makes it necessary to have a syringe at any location under the jurisdiction of the Commission, that person may request permission of the stewards and/or the Commission in writing, furnish a letter from a licensed physician explaining why it is necessary for the person to possess a syringe, and must comply with any conditions and restrictions set by the stewards and/or the Commission.
- (4) Veterinarians shall not have contact with an entered horse on raceday except for the administration of furosemide under the guidelines set forth in ARCI-011-020 F.) unless approved by the official veterinarian.

- (5) Any horse entered for racing must be present on the grounds [4]* 5 hours prior to the post time of the race they are entered in.

* (The RMTTC recommended 4 hours the Joint Model Rule Committee changed it to 5 hours in order to allow the legal administration of Salix)

C. Veterinarians' Reports

- (1) Every veterinarian who treats a racehorse at any location under the jurisdiction of the Commission shall, in writing on the Medication Report Form prescribed by the Commission, report to the official veterinarian or other commission designee at the racetrack where the horse is entered to run or as otherwise specified by the commission, the name of the horse treated, any medication, drug, substance, or procedure administered or prescribed, the name of the trainer of the horse, the date and time of treatment and any other information requested by the official veterinarian.
- (2) The Medication Report Form shall be signed by the practicing veterinarian.
- (3) The Medication Report Form must be filed by the treating veterinarian not later than post time of the race for which the horse is entered. Any such report is confidential and its content shall not be disclosed except in the course of an investigation of a possible violation of these rules or in a proceeding before the stewards or the Commission, or to the trainer or owner of record at the time of treatment.
- (4) A timely and accurate filing of a Medication Report Form that is consistent with the analytical results of a positive test may be used as a mitigating factor in determining the nature and extent, if any, of a rules violation.

Adopted in Version 1.4 ARCI 8/27/02 NAPRA 10/2/02

Version 2.1 to 3.0 ARCI 4/3/04 NAPRA 4/3/04: Amended new rule language

Version 3.2 to 3.3 ARCI 12/7/05: Added and modified rule language

ARCI-011-015 Prohibited Practices

The following are considered prohibited practices:

- (1) The possession or use of a drug, substance or medication on the premises of a facility under the jurisdiction of the Commission for which a recognized analytical method has not been developed to detect and confirm the administration of such substance; or the use of which may endanger the health and welfare of the horse or endanger the safety of the rider; or the use of which may adversely affect the integrity of racing; or,
- (2) The possession or use of a drug, substance, or medication on the premises of a facility under the jurisdiction of the Commission that has not been approved by the United States Food and Drug Administration (FDA) for any use in (human or animal) is forbidden without prior permission of the Commission or its designee.
- (3) The possession and/or use of blood doping agents, including but not limited to those listed below, on the premises of a facility under the jurisdiction of the Commission is forbidden:
 - (a) Erythropoietin;
 - (b) Darbepoetin;
 - (c) Oxyglobin®; and

- (d) Hemopure®.
- (5) The use of Extracorporeal Shock Wave Therapy or Radial Pulse Wave Therapy shall not be permitted unless the following conditions are met:
 - (a) Any treated horse shall not be permitted to race for a minimum of 10 days following treatment;
 - (b) The use of Extracorporeal Shock Wave Therapy or Radial Pulse Wave Therapy machines shall be limited to veterinarians licensed to practice by the Commission;
 - (c) Any Extracorporeal Shock Wave Therapy or Radial Pulse Wave Therapy machines on the association grounds must be registered with and approved by the Commission or its designee before use;
 - (d) All Extracorporeal Shock Wave Therapy or Radial Pulse Wave Therapy treatments must be reported to the official veterinarian on the prescribed form not later than the time prescribed by the official veterinarian.
- (6) The use of a nasogastric tube (a tube longer than six inches) for the administration of any substance within 24 hours prior to the post time of the race in which the horse is entered is prohibited without the prior permission of the official veterinarian or his/her designee.

Adopted in Version 1.4 ARCI 8/27/02 NAPRA 10/2/02
Version 2.1 to 3.0 ARCI 4/3/04 NAPRA 4/3/04: Amended new rule language
Version 4.3 to 4.4 ARCI Board 12/10/08: Amended Shock wave to 10 days

ARCI-011-020 Medications and Prohibited Substances

Upon a finding of a violation of these medication and prohibited substances rules, the stewards shall consider the classification level of the violation as listed in at the time of the violation in the Uniform Classification Guidelines of Foreign Substances as promulgated by the Association of Racing Commissioners International and impose penalties and disciplinary measures consistent with the recommendations contained therein. The stewards shall also consult with the official veterinarian to determine if the violation was a result of the administration of a therapeutic medication as documented in a veterinarian's Medication Report Form received per ARCI-011-010 (C). The stewards may also consult with the laboratory director or other individuals to determine the seriousness of the laboratory finding or the medication violation. Penalties for all medication and drug violations shall be investigated and reviewed on a case by case basis. Extenuating factors include, but are not limited to:

- (1) The past record of the trainer, veterinarian and owner in drug cases;
- (2) The potential of the drug(s) to influence a horse's racing performance;
- (3) The legal availability of the drug;
- (4) Whether there is reason to believe the responsible party knew of the administration of the drug or intentionally administered the drug ;
- (5) The steps taken by the trainer to safeguard the horse;
- (6) The probability of environmental contamination or inadvertent exposure due to human drug use;
- (7) The purse of the race;

- (8) Whether the drug found was one for which the horse was receiving a treatment as determined by the Medication Report Form;
- (9) Whether there was any suspicious betting pattern in the race, and;
- (10) Whether the licensed trainer was acting under the advice of a licensed veterinarian.

As a result of the investigation, there may be mitigating circumstances for which a lesser or no penalty is appropriate for the licensee and aggravating factors, which may increase the penalty beyond the minimum.

A. Uniform Classification Guidelines

The following outline describes the types of substances placed in each category. This list shall be publicly posted in the offices of the official veterinarian and the racing secretary.

(1) Class 1

Opiates, opium derivatives, synthetic opioids, psychoactive drugs, amphetamines and U.S. Drug Enforcement Agency (DEA) scheduled I and II drugs. Also found in this class are drugs which are potent stimulants of the nervous system. Drugs in this class have no generally accepted medical use in the racehorse and their pharmacological potential for altering the performance of a race is very high.

(2) Class 2

Drugs in this category have a high potential for affecting the outcome of a race. Most are not generally accepted as therapeutic agents in the racehorse. Many are products intended to alter consciousness or the psychic state of humans, and have no approved or indicated use in the horse. Some, such as injectable local anesthetics, have legitimate use in equine medicine, but should not be found in a racehorse. The following groups of drugs are in this class:

- (a) Opiate partial agonists, or agonist-antagonists;
- (b) Non-opiate psychotropic drugs, which may have stimulant, depressant, analgesic or neuroleptic effects;
- (c) Miscellaneous drugs which might have a stimulant effect on the central nervous system (CNS);
- (d) Drugs with prominent CNS depressant action;
- (e) Antidepressant and antipsychotic drugs, with or without prominent CNS stimulatory or depressant effects;
- (f) Muscle blocking drugs which have a direct neuromuscular blocking action;
- (g) Local anesthetics which have a reasonable potential for use as nerve blocking agents (except procaine); and
- (h) Snake venoms and other biologic substances, which may be used as nerve blocking agents.

(3) Class 3

Drugs in this class may or may not have an accepted therapeutic use in the horse. Many are drugs that affect the cardiovascular, pulmonary and autonomic nervous systems. They all have the potential of affecting the performance of a racehorse. The following groups of drugs are in this class:

- (a) Drugs affecting the autonomic nervous system which do not have prominent CNS effects, but which do have prominent cardiovascular or respiratory system effects (bronchodilators are included in this class);
- (b) A local anesthetic which has nerve blocking potential but also has a high potential for producing urine residue levels from a method of use not related to the anesthetic effect of the drug (procaine);
- (c) Miscellaneous drugs with mild sedative action, such as the sleep inducing antihistamines;
- (d) Primary vasodilating/hypotensive agents; and
- (e) Potent diuretics affecting renal function and body fluid composition.

(4) Class 4

This category is comprised primarily of therapeutic medications routinely used in racehorses. These may influence performance, but generally have a more limited ability to do so. Groups of drugs assigned to this category include the following:

- (a) Non-opiate drugs which have a mild central analgesic effect;
- (b) Drugs affecting the autonomic nervous system which do not have prominent CNS, cardiovascular or respiratory effects
 - (A) Drugs used solely as topical vasoconstrictors or decongestants
 - (B) Drugs used as gastrointestinal antispasmodics
 - (C) Drugs used to void the urinary bladder
 - (D) Drugs with a major effect on CNS vasculature or smooth muscle of visceral organs.
 - (E) Antihistamines which do not have a significant CNS depressant effect (This does not include H1 blocking agents, which are listed in Class 5);
- (c) Mineralocorticoid drugs;
- (d) Skeletal muscle relaxants;
- (e) Anti-inflammatory drugs--those that may reduce pain as a consequence of their anti-inflammatory actions, which include:
 - (A) Non-Steroidal Anti-Inflammatory Drugs (NSAIDs);
 - (B) Corticosteroids (glucocorticoids); and
 - (C) Miscellaneous anti-inflammatory agents.
- (f) Anabolic and/or androgenic steroids and other drugs;
- (g) Less potent diuretics;
- (h) Cardiac glycosides and antiarrhythmics including:
 - (A) Cardiac glycosides;
 - (B) Antirrythmic agents (exclusive of lidocaine, bretylium and propranolol); and
 - (C) Miscellaneous cardiotoxic drugs.
- (i) Topical Anesthetics--agents not available in injectable formulations;
- (j) Antidiarrheal agents; and

- (k) Miscellaneous drugs including:
 - (A) Expectorants with little or no other pharmacologic action;
 - (B) Stomachics; and
 - (C) Mucolytic agents.

(5) Class 5

Drugs in this category are therapeutic medications for which concentration limits have been established as well as certain miscellaneous agents. Included specifically are agents, which have very localized action only, such as anti-ulcer drugs and certain anti-allergenic drugs. The anticoagulant drugs are also included.

B. Penalties

- (1) In issuing penalties against individuals found guilty of medication and drug violations a regulatory distinction shall be made between the detection of therapeutic medications used routinely to treat racehorses and those drugs that have no reason to be found at any concentration in the test sample on race day.
- (2) The stewards or the commission will use the Racing Medication and Testing Consortium's penalty category and schedule as a starting place in the penalty stage of the deliberations for a rule violation for any drug listed in the *Association of Racing Commissioners International Uniform Classification Guidelines for Foreign Substances*.
- (3) If a licensed veterinarian is administering or prescribing a drug not listed in the RCI *Uniform Classification Guide lines for Foreign Substances* or shown in the RMTC *Penalty Guideline Listing*, the identity of the drug shall be forwarded to the official veterinarian to be forwarded to the Racing Medication and Testing Consortium for classification.
- (4) Any drug or metabolite thereof found to be presenting a pre- or post-race sample which is not classified in the most current RCI *Uniform Classification Guidelines for Foreign Substances* shall be assumed to be a RCI Class 1 Drug and the trainer and owner shall be subject to those penalties as set forth in schedule "A" unless satisfactorily demonstrated otherwise by the Racing Medication and Testing Consortium, with a penalty category assigned.
- (5) The penalty categories and their related schedules, if applicable, shall be on the following criteria:
 - (a) Whether the drug is approved by the U.S. Food and Drug Administration for use in the horse;
 - (b) Whether the drug is approved by the U.S. Food and Drug Administration for use in any species;
 - (c) Whether the drug has any legitimate therapeutic application in the equine athlete;
 - (d) Whether the drug was identified as "necessary" by the RMTC Veterinary Advisory Committee;
 - (e) Whether legitimate, recognized therapeutic alternatives exist, and;
 - (f) The current RCI Classification of the drug.

- (6) The penalty categories “A”, “B” and “C” and their related schedules for Trainers and Owners are shown in the following tables.

The following are recommended penalties for violations due to the presence of a drug carrying a Category “A” penalty and for violations of ARCI-011-015: Prohibited Practices:

LICENSED TRAINER:		
1st offense	2nd LIFETIME offense in any jurisdiction	3rd LIFETIME offense in any jurisdiction
<ul style="list-style-type: none"> ◦ Minimum one-year suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of a three-year suspension. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Minimum fine of \$10,000 or 10% of total purse (greater of the two) absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of \$25,000 or 25% of purse (greater of the two). <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ May be referred to the Commission for any further action deemed necessary by the Commission. 	<ul style="list-style-type: none"> ◦ Minimum three-year suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of license revocation with no reapplication for a three-year period. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Minimum fine of \$25,000 or 25% of total purse (greater of the two) absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of \$50,000 or 50% of purse (greater of the two). <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ May be referred to the Commission for any further action deemed necessary by the Commission. 	<ul style="list-style-type: none"> ◦ Minimum five-year suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of license revocation with no reapplication for a five-year period. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Minimum fine of \$50,000 or 50% of total purse (greater of the two) absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of \$100,000 or 100% of purse (greater of the two). <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ May be referred to the Commission for any further action deemed necessary by the Commission.
LICENSED OWNER:		
1st offense	2nd LIFETIME offense in owner’s stable in any jurisdiction	3rd LIFETIME offense in owner’s stable in any jurisdiction
<ul style="list-style-type: none"> ◦ Disqualification and loss of purse. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Horse shall be placed on the veterinarian’s list for 90 days and must pass a commission-approved examination before becoming eligible to be entered. 	<ul style="list-style-type: none"> ◦ Disqualification and loss of purse. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Horse shall be placed on the veterinarian’s list for 120 days and must pass a commission-approved examination before becoming eligible to be entered. 	<ul style="list-style-type: none"> ◦ Disqualification, loss of purse and \$50,000 fine. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Horse shall be placed on the veterinarian’s list for 180 days and must pass a commission-approved examination before becoming eligible to be entered. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Referral to the Commission with a recommendation of a suspension for a minimum of 90 days.

The following are recommended penalties for violations due to the presence of a drug carrying Category “B” penalty, for the presence of more than one NSAID in a plasma/serum sample, subject to the provisions set forth in ARCI-011-020 E.(1)(c) and for violations of the established levels for total carbon dioxide:

LICENSED TRAINER:

<p>1st offense</p> <ul style="list-style-type: none"> ◦ Minimum 15-day suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of a 60-day suspension. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Minimum fine of \$500 absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of \$1,000. 	<p>2nd offense (365-day period) in any jurisdiction</p> <ul style="list-style-type: none"> ◦ Minimum 30-day suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of a 180-day suspension. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Minimum fine of \$1,000 absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of \$2,500. 	<p>3rd offense (365-day period) in any jurisdiction</p> <ul style="list-style-type: none"> ◦ Minimum 60-day suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of a one-year suspension. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Minimum fine of \$2,500 absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of \$5,000 or 5% of purse (greater of the two). <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ May be referred to the Commission for any further action deemed necessary by the Commission.
LICENSED OWNER:		
<p>1st offense</p>	<p>2nd offense in stable (365-day period) in any jurisdiction</p>	<p>3rd offense in stable (365-day period) in any jurisdiction</p>
<ul style="list-style-type: none"> ◦ Disqualification and loss of purse [in the absence of mitigating circumstances]*. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Horse must pass a commission-approved examination before becoming eligible to be entered. 	<ul style="list-style-type: none"> ◦ Disqualification and loss of purse [in the absence of mitigating circumstances]*. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Horse must pass a commission-approved examination before becoming eligible to be entered. 	<ul style="list-style-type: none"> ◦ Disqualification and loss of purse, and in the absence of mitigating circumstances a \$5,000 fine.* <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> ◦ Horse shall be placed on the veterinarian’s list for 45 days and must pass a commission-approved examination before becoming eligible to be entered.

* (The RMTC recommendation called for loss of purse to happen in absence of mitigating circumstances the Joint Model Rules Committee has made loss of purse mandatory in their proposal)

The following are recommended penalties for violations due to the presence of a drug carrying a Category “C” penalty and overages for permitted NSAIDs and furosemide: *(All concentrations are for measurements in serum or plasma.)*

LICENSED TRAINER	<p>Phenylbutazone (2.1-4.9 mcg/ml) Flunixin (21-99 ng/ml) Ketoprofen (11-49 ng/ml) Furosemide (>100 ng/ml) and no furosemide when identified as</p>	<p>Phenylbutazone (≥5.0 mcg/ml) Flunixin (≥100 ng/ml) Ketoprofen (≥50 ng/ml) and CLASS C Violations</p>
-------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------

	administered**	
1 st Offense (365-day period) in any jurisdiction	Minimum fine of \$250 absent mitigating circumstances	Minimum fine of \$500 absent mitigating circumstances
2 nd Offense (365-day period) in any jurisdiction	Minimum fine of \$500 absent mitigating circumstances	Minimum fine of \$1,000 and 15-day suspension absent mitigating circumstances
3 rd Offense (365-day period) in any jurisdiction	Minimum fine of \$1,000 and 15-day suspension absent mitigating circumstances	Minimum fine of \$2,500 and 30-day suspension absent mitigating circumstances
LICENSED OWNER	Phenylbutazone (2.1-4.9 mcg/ml) Flunixin (21-99 ng/ml) Ketoprofen (11-49 ng/ml) Furosemide (>100 ng/ml) and no furosemide when identified as administered**	Phenylbutazone (≥5.0 mcg/ml) Flunixin (≥100 ng/ml) Ketoprofen (≥50 ng/ml) AND CLASS C VIOLATIONS
1 st Offense (365-day period) in any jurisdiction		Loss of purse. Horse must pass commission-approved examination before being eligible to run
2 nd Offense (365-day period) in any jurisdiction		Loss of purse. If same horse, placed on veterinarian's list for 45 days, must pass commission-approved examination before being eligible to run
3 rd Offense (365-day period) in any jurisdiction		Loss of purse. Minimum \$5,000 fine. If same horse, placed on veterinarian's list for 60 days, must pass commission-approved examination before being eligible to run

- (7) The recommended penalty for a violation involving a drug that carries a Category “D” penalty is a written warning to the trainer and owner. Multiple violations may result in fines and/or suspensions
- (8) Any licensee of the commission, including veterinarians, found to be responsible for the improper or intentional administration of any drug resulting in a positive test may, after proper notice and hearing, be subject to the same penalties set forth for the licensed trainer.
- (9) The licensed owner, veterinarian or any other licensed party involved in a positive laboratory finding shall be notified in writing of the hearing and any resulting action. In addition their presence may be required at any and all hearings relative to the case.
- (10) Any veterinarian found to be involved in the administration of any drug carrying the penalty category of “A” shall be referred to the State Licensing Board of Veterinary Medicine for consideration of further disciplinary action and/or license revocation. This is in addition to any penalties issued by the stewards or the commission.
- (11) Any person who the stewards or the commission believe may have committed acts in violation of criminal statutes may be referred to the appropriate law enforcement agency. Administrative action taken by the stewards or the commission in no way prohibits a prosecution for criminal acts committed, nor does a potential criminal prosecution stall administrative action by the stewards or the commission.

Procedures shall be established to ensure that a licensed trainer is not able to benefit financially during the period for which the individual has been suspended. This includes, but is not limited to, ensuring that horses are not transferred to licensed family members.

C. Medication Restrictions

- (1) A finding by the commission approved laboratory of a prohibited drug, chemical or other substance in a test specimen of a horse is prima facie evidence that the prohibited drug, chemical or other substance was administered to the horse and, in the case of a post-race test, was present in the horse's body while it was participating in a race. Prohibited substances include:
 - (a) Drugs or medications for which no acceptable threshold concentration has been established;
 - (b) Therapeutic medications in excess of established threshold concentrations;
 - (c) Substances present in the horse in excess of concentrations at which such substances could occur naturally; and
 - (d) Substances foreign to a horse at concentrations that cause interference with testing procedures.
- (2) Except as otherwise provided by this chapter, a person may not administer or cause to be administered by any means to a horse a prohibited drug, medication, chemical or other substance, including any restricted medication pursuant to this chapter during the 24-hour period before post time for the race in which the horse is entered.

D. Medical Labeling

- (1) No person on association grounds where horses are lodged or kept, excluding licensed veterinarians, shall have in or upon association grounds which that person occupies or has the right to occupy, or in that person's personal property or effects or vehicle in that person's care, custody or control, a drug, medication, chemical, foreign substance or other substance

that is prohibited in a horse on a race day unless the product is labeled in accordance with this subsection.

- (2) Any drug or medication which is used or kept on association grounds and which, by federal or state law, requires a prescription must have been validly prescribed by a duly licensed veterinarian, and in compliance with the applicable state statutes. All such allowable medications must have a prescription label which is securely attached and clearly ascribed to show the following:
 - (a) The name of the product;
 - (b) The name, address and telephone number of the veterinarian prescribing or dispensing the product;
 - (c) The name of each patient (horse) for whom the product is intended/prescribed;
 - (d) The dose, dosage, duration of treatment and expiration date of the prescribed/dispensed product; and
 - (e) The name of the person (trainer) to whom the product was dispensed.

E. Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)

- (1) The use of one of three approved NSAIDs shall be permitted under the following conditions:
 - (a) Not to exceed the following permitted serum or plasma threshold concentrations which are consistent with administration by a single intravenous injection at least 24 hours before the post time for the race in which the horse is entered:
 - (i) Phenylbutazone – 2 micrograms per milliliter;
 - (ii) Flunixin – 20 nanograms per milliliter;
 - (iii) Ketoprofen – 10 nanograms per milliliter.
 - (b) These or any other NSAID are prohibited to be administered within the 24 hours before post time for the race in which the horse is entered.
 - (c) The presence of more than one of the three approved NSAIDs, with the exception of Phenylbutazone in a concentration below 0.5 microgram per milliliter of serum or plasma or any unapproved NSAID in the post-race serum or plasma sample is not permitted. The use of all but one of the approved NSAIDs shall be discontinued at least 48 hours before the post time for the race in which the horse is entered.
- (2) Any horse to which a NSAID has been administered shall be subject to having a blood and/or urine sample(s) taken at the direction of the official veterinarian to determine the quantitative NSAID level(s) and/or the presence of other drugs which may be present in the blood or urine sample(s).

F. Furosemide

- (1) Furosemide may be administered intravenously to a horse, which is entered to compete in a race. Except under the instructions of the official veterinarian or the racing veterinarian for the purpose of removing a horse from the Veterinarian's List or to facilitate the collection of a post-race urine sample, furosemide shall be permitted only after the official veterinarian has placed the horse on the Furosemide List. In order for a horse to be placed on the Furosemide List the following process must be followed.

- (a) After the horse's licensed trainer and licensed veterinarian determine that it would be in the horse's best interests to race with furosemide they shall notify the official veterinarian or his/her designee, using the prescribed form, that they wish the horse to be put on the Furosemide List.
 - (b) The form must be received by the official veterinarian or his/her designee by the proper time deadlines so as to ensure public notification.
 - (c) A horse placed on the official Furosemide List must remain on that list unless the licensed trainer and licensed veterinarian submit a written request to remove the horse from the list. The request must be made to the official veterinarian or his/her designee, on the proper form, no later than the time of entry.
 - (d) After a horse has been removed from the Furosemide List, the horse may not be placed back on the list for a period of 60 calendar days unless it is determined to be detrimental to the welfare of the horse, in consultation with the official veterinarian. If a horse is removed from the official Furosemide List a second time in a 365-day period, the horse may not be placed back on the list for a period of 90 calendar days.
 - (e) Furosemide shall only be administered on association grounds.
 - (f) Upon the request of the regulatory agency designee, the veterinarian administering the authorized bleeder medication shall surrender the syringe used to administer such medication which may then be submitted for testing
- (2) The use of furosemide shall be permitted under the following circumstances on association grounds where a detention barn is utilized:
- (a) Furosemide shall be administered at the direction of the official veterinarian no less than four hours prior to post time for the race for which the horse is entered.
 - (b) A horse qualified for furosemide administration must be brought to the detention barn within time to comply with the four-hour administration requirement specified above.
 - (c) The dose administered shall not exceed 500 mg. nor be less than 150 mg.
 - (d) Furosemide shall be administered by a single, intravenous injection.
 - (e) After treatment, the horse shall be required by the Commission to remain in the detention barn in the care, custody and control of its trainer or the trainer's designated representative under association and/or Commission security supervision until called to the saddling paddock.
- (3) The use of furosemide shall be permitted under the following circumstances on association grounds where a detention barn is not utilized:
- (a) Furosemide shall be administered no less than four hours prior to post time for the race for which the horse is entered.
 - (b) The furosemide dosage administered shall not exceed 500 mg. nor be less than 150 mg.
 - (c) Furosemide shall be administered by a single, intravenous injection.
 - (d) The trainer of the treated horse shall cause to be delivered to the official veterinarian no later than one hour prior to post time for the race for which the horse is entered the following information under oath on a form provided by the Commission:
 - (A) The name of the horse, racetrack name, the date and time the furosemide was administered to the entered horse;

- (B) The dosage amount of furosemide administered to the entered horse; and
 - (C) The printed name and signature of the attending licensed veterinarian who administered the furosemide.
- (4) Test results must show a detectable concentration of the drug in the post-race serum, plasma or urine sample.
- (a) The specific gravity of post-race urine samples may be measured to ensure that samples are sufficiently concentrated for proper chemical analysis. The specific gravity shall not be below 1.010. If the specific gravity of the urine is found to be below 1.010 or if a urine sample is unavailable for testing, quantitation of furosemide in serum or plasma shall be performed;
 - (b) Quantitation of furosemide in serum or plasma shall be performed when the specific gravity of the corresponding urine sample is not measured or if measured below 1.010. Concentrations may not exceed 100 nanograms of furosemide per milliliter of serum or plasma

G. Bleeder List

- (1) The official veterinarian shall maintain a Bleeder List of all horses, which have demonstrated external evidence of exercise induced pulmonary hemorrhage from one or both nostrils during or after a race or workout as observed by the official veterinarian.
- (2) Every confirmed bleeder, regardless of age, shall be placed on the Bleeder List and be ineligible to race for the following time periods:
 - (a) First incident – 14 days;
 - (b) Second incident within 365 day period – 30 days;
 - (c) Third incident within 365 day period –180 days;
 - (d) Fourth incident within 365-day period – barred for racing lifetime.
- (3) For the purposes of counting the number of days a horse is ineligible to run, the day the horse bled externally is the first day of the recovery period.
- (4) The voluntary administration of furosemide without an external bleeding incident shall not subject the horse to the initial period of ineligibility as defined by this policy.
- (5) A horse may be removed from the Bleeder List only upon the direction of the official veterinarian, who shall certify in writing to the stewards the recommendation for removal.
- (6) A horse which has been placed on a Bleeder List in another jurisdiction pursuant to these rules shall be placed on a Bleeder List in this jurisdiction.

H. Anti-Ulcer Medications

The following anti-ulcer medications are permitted to be administered, at the stated dosage, up to 24 hours prior to the race in which the horse is entered.

- (1) Cimetidine (Tagamet®) – 8-20 mg/kg PO BID-TID
- (2) Omeprazole (Gastrogard®) – 2.2 grams PO SID
- (3) Ranitidine (Zantac®) – 8 mg/kg PO BID

COMMITTEE NOTE: Consortium is currently discussing administration dead-line for Ranitidine.

I. Environmental Contaminants and Substances of Human Use

COMMITTEE NOTE: Consortium says that potential substances identified in this section will be put through the same scientific review process in order to determine whether a threshold concentration can be established.

- (1) The following substances can be environmental contaminants in that they are endogenous to the horse or that they can arise from plants traditionally grazed or harvested as equine feed or are present in equine feed because of contamination during the cultivation, processing, treatment, storage or transportation phases:
- (2) The following drugs are recognized as substances of human use and addiction and which could be found in the horse due to its close association with humans:
- (3) Regulatory thresholds have been set for the following substances.
 - (a) Caffeine – 100 nanograms of caffeine per milliliter of serum or plasma
- (4) If the preponderance of evidence presented in the hearing shows that a positive test is the result of environmental contamination or inadvertent exposure due to human drug use it should be considered as a mitigating factor in any disciplinary action taken against the affected trainer.

J. Androgenic-Anabolic Steroids

- (1) No AAS shall be permitted in test sample collected from racing horses except for residues of the major metabolite of **stanozolol**, **nandrolone**, and the naturally occurring substances **boldenone** and testosterone at concentrations less than the indicated thresholds.
- (2) Concentrations of these AAS shall not exceed the following urine threshold concentrations for total (*i.e.*, free drug or metabolite and drug or metabolite liberated from its conjugates):
 - (a) 16 β -hydroxystanozolol (metabolite of stanozolol (Winstrol)) – 1 ng/ml in urine for all horses regardless of sex;
 - (b) Boldenone (Equipose® is the undecylenate ester of boldenone) in male horses other than geldings – 15 ng/ml in urine. No boldenone shall be permitted in geldings or female horses.
 - (c) Nandrolone (Durabolin® is the phenylpropionate ester and Deca-Durabolin® is the decanoate ester)
 - (A) In geldings - 1 ng/ml in urine
 - (B) In fillies and mares – 1 ng/ml in urine
 - (d) Testosterone
 - (A) In geldings – 20 ng/ml in urine
 - (B) In fillies and mares – 55 ng/ml in urine
- (3) Any other anabolic steroids are prohibited in racing horses.
- (4) Post-race urine samples must have the sex of the horse identified to the laboratory.
- (5) Any horse to which an anabolic steroid has been administered in order to assist in the recovery from illness or injury may be placed on the veterinarian's list in order to monitor the concentration of the drug or metabolite in urine. After the concentration has fallen below the designated threshold for the administered AAS, the horse is eligible to be removed from the list.

K. Alkalinizing Substances

The use of agents that elevate the horse's TCO₂ or Base excess level above those existing naturally in the untreated horse at normal physiological concentrations is prohibited. The following levels also apply to blood gas analysis:

- (1) The regulatory threshold for TCO₂ is 37.0 millimoles per liter of plasma/serum or a base excess level of 10.0 millimoles, and;
- (2) The decision level to be used for the regulation of TCO₂ is 37.0 millimoles per liter of plasma/serum plus the measurement uncertainty of the laboratory analyzing the sample, or a base excess level of 10.4 millimoles per liter of plasma/serum.

Adopted in Version 1.4 ARCI 8/27/02 NAPRA 10/2/02

Version 1.4 to 2.0 ARCI 4/26/03 NAPRA 4/14/03: Rule topic was renumbered to ARCI-011-023

Version 2.1 to 3.0 ARCI 4/3/04 NAPRA 4/3/04: Amended and modified new rule language

Version 3.2 to 3.3 ARCI 12/7/05: Added and modified rule language

Version 4.0 to 4.1 ARCI 4/26/07: Added new rule language

Version 4.1 to 4.15 ARCI Board of Directors meeting 12/5/2007: Amended rule language

Version 4.3 to 4.4 ARCI Board 12/10/08: Amended language

Version 4.4 to 4.5 ARCI 4/23/09: Amended language added Alkalinizing Substances

Version 4.7 to 4.8 ARCI Board 10/22/10 Amended language regarding Phenylbutazone level 5.0 to 2.0

ARCI-011-022 Out of Competition Testing for Blood and/or Gene Doping Agents

Any horse on the grounds at a racetrack or training center under the jurisdiction of the commission; or under the care or control of trainer or owner licensed by the commission is subject to testing for blood and/or gene doping agents without advance notice. This rule does not apply to therapeutic medications approved by the FDA for use in the horse.

Horses to be tested may be selected at random, with probable cause, or as determined by the commission;

The Commission Veterinarian, or any licensed veterinarian or licensed veterinary technician authorized by the commission, may at any time, take a urine, blood or hair sample from a horse for this purpose.

Prohibited substances, practices and procedures are defined as:

- (a) Blood doping agents including, but not limited to Erthropoietin (EPO), Darbepoetin, Oxyglobin, Hempure, Aransep or any substance that abnormally enhances the oxygenation of body tissues.
- (b) Gene doping agents or the non-therapeutic use of genes, genetic elements, and/or cells that have the capacity to enhance athletic performance or produce analgesia.

Cooperation with the Commission Veterinarian, or any licensed veterinarian or licensed veterinary technician authorized by the commission, includes:

- (a) Assisting in the immediate location and identification of the horse selected
- (b) for out of competition testing;
- (c) Providing a stall or safe location to collect the samples;
- (d) Assisting the veterinarian in properly procuring the samples;
- (e) Split samples will be collected as per PMRMR-025-023-C.

- (6) Out of competition samples will be sent to the official laboratory of the commission, or other laboratory as designated by the commission with reports made in accordance with the provisions of these medication rules and the penalty provisions thereof.

Adopted Version 4.1 ARCI 4/26/07

ARCI-011-023 Testing

A. Reporting to the Test Barn

- (1) The official winning horse and any other horse ordered by the Commission and/or the stewards shall be taken to the test barn to have a blood and urine samples taken at the direction of the official veterinarian.
- (2) Random or extra testing may be required by the stewards or the Commission at any time on any horse on association grounds.
- (3) Unless otherwise directed by the stewards or the official veterinarian, a horse that is selected for testing must be taken directly to the test barn.
- (4) A track security guard shall monitor access to the test barn area during and immediately following each racing performance. All persons who wish to enter the test barn area must be a minimum of 18-years-old, be currently licensed by the Commission, display their Commission identification badge and have a legitimate reason for being in the test barn area.

B. Sample Collection

- (1) Sample collection shall be done in accordance with the guidelines and instructions provided by the official veterinarian.
- (2) The official veterinarian shall determine a minimum sample requirement for the primary testing laboratory.
 - (a) If the specimen obtained from a horse is less than the minimum sample requirement, the entire specimen shall be sent to the primary testing laboratory.
 - (b) If a specimen obtained is greater than the minimum sample requirement but less than twice that amount, the portion of the sample that is greater than the minimum sample requirement shall be secured as the split sample.
 - (c) If a specimen obtained is greater than twice the minimum sample requirement, a portion of the sample approximately equal to the amount provided for the primary testing laboratory shall be secured as the split sample.
 - (d) Split samples collected for simultaneous determination of TCO₂ levels shall be collected and shipped in accordance with C. of this rule.
 - (e) Blood samples must be collected at consistent time, preferably not later than one hour post-race.

C. Alkalinizing Substances

- (1) Pre-race Sampling, Post-race Testing
 - (a) Blood samples for TCO₂ and base excess testing should be collected within one hour pre-race. The samples must be handled in a consistent manner and cannot be frozen.
 - (b) If a secure detention barn is available, a sample may be obtained prior to furosemide administration and the horse must be kept in the secure detention barn until race time.

- (c) The provisions of this rule pertaining to B. Sample Collection and C. Storage and Shipment of Split Samples shall not apply to blood samples drawn for TCO₂ analysis.
 - (d) Split sample analyses of TCO₂ must be run in parallel with the official sample at the official laboratory in order to avoid delays in testing that result in lower TCO₂ values as a result of sample degradation.
 - (e) Blood samples must be processed within 120 hours and tested using standardized, reproducible, validated procedures.
- (2) Pre-race Sampling, Pre-race Testing
- (a) The commission shall adopt standard operating procedures that include but is not limited to calibration procedures, sampling procedures, personnel and notification processes.
 - (b) If a sample taken pre-race is determined to above the thresholds stated in ARCI-011-020 K. (2) the horse shall be scratched.
 - (c) Any owner, trainer or other licensed delegate of the owner or trainer who refuses or fails to permit any horse to be tested when a demand for testing has been made by an authorized commission designee shall have the applicable horse scratched.
- (3) Post-race Sampling, Post-race Testing

Post-race sampling of thoroughbreds is discouraged.

D. Storage and Shipment of Split Samples

- (1) Split samples obtained in accordance with Subsection B, Numbers 2b and 2c above shall be secured and made available for further testing in accordance with the following procedures:
- (a) A split sample shall be secured in the test barn under the same manner as the portion of the specimen acquired for shipment to a primary laboratory until such time as specimens are packed and secured for shipment to the primary laboratory. Split samples shall then be transferred to a freezer at a secure location approved by the Commission.
 - (b) A freezer for storage of split samples shall be equipped with two hasps or other devices to provide for use of two independent locks. One lock shall be the property of the Commission and one lock shall be the property of a representative of the group representing a majority of the horsemen at a race meeting. The locks shall be closed and locked so as to prevent access to the freezer at all times except as specifically provided by these rules.
 - (c) A freezer for storage of split samples shall be opened only for depositing or removing split samples, for inventory, or for checking the condition of samples.
 - (d) When a freezer used for storage of split samples is opened, it shall be attended by both a representative of the Commission and the owner, trainer or designee. A log shall be maintained that shall be used each time a split sample freezer is opened to specify each person in attendance, the purpose for opening the freezer, identification of split samples deposited or removed, the date and time the freezer was opened, and the time the freezer was closed and to verify that both locks were secured prior to and after opening of the freezer.

- (e) Any evidence of a malfunction of a split sample freezer or samples that are not in a frozen condition during storage shall be documented in the log and immediately reported to the official veterinarian or a designated Commission representative.
- (2) Provisions for split sample testing for TCO₂ analysis shall be arranged by the trainer or designee at the time of sampling. The trainer shall be responsible for the cost of split sample testing. The trainer or designee shall make arrangements for payment prior to or at the time of sampling. Split sample analysis of TCO₂ must be run in parallel with the official sample at the official laboratory as described in C. of this rule.
- (3) A trainer or owner of a horse having been notified that a written report from a primary laboratory states that a prohibited substance has been found in a specimen obtained pursuant to these rules may request that a split sample corresponding to the portion of the specimen tested by the primary laboratory be sent to another laboratory approved by the Commission. The request must be made in writing and delivered to the stewards not later than three (3) business days after the trainer of the horse receives written notice of the findings of the primary laboratory. Any split sample so requested must be shipped within an additional 48 hours.
- (4) The owner or trainer requesting testing of a split sample shall be responsible for the cost of shipping and testing. Failure of the owner, trainer or designee to appear at the time and place designated by the official veterinarian shall constitute a waiver of all rights to split sample testing. Prior to shipment, the Commission shall confirm the split sample laboratory's willingness to simultaneously provide the testing requested, the laboratory's willingness to send results to both the person requesting the testing and the Commission, and arrangements for payment satisfactory to the split sample laboratory. If a reference laboratory will accept split samples, that laboratory must be included among the laboratories approved for split sample testing.
- (5) Prior to opening the split sample freezer, the Commission shall provide a split sample chain of custody verification form that shall provide a place for recording the following information and such other information as the official veterinarian may require. The form shall be fully completed during the retrieval, packaging, and shipment of the split sample. The split sample chain of custody form requirements are:
 - (a) The date and time the sample is removed from the split sample freezer;
 - (b) The sample number;
 - (c) The address where the split sample is to be sent;
 - (d) The name of the carrier and the address where the sample is to be taken for shipment;
 - (e) Verification of retrieval of the split sample from the freezer;
 - (f) Verification of each specific step of the split sample packaging in accordance with the recommended procedure;
 - (g) Verification of the address of the split sample laboratory on the split sample package;
 - (h) Verification of the condition of the split sample package immediately prior to transfer of custody to the carrier; and
 - (i) The date and time custody of the sample is transferred to the carrier.
- (6) A split sample shall be removed from the split sample freezer by a Commission representative in the presence of a representative of the horsemen's association.

- (7) The owner, trainer or designee shall pack the split sample for shipment in the presence of the representative of the Commission, in accordance with the packaging procedures recommended by the Commission. A form shall be signed by both the horsemen's representative and the Commission representative to confirm the packaging of the split sample. The exterior of the package shall be secured and identified with initialed tape, evidence tape or other means to prevent tampering with the package.
- (8) The package containing the split sample shall be transported in a manner prescribed by the commission to the location where custody is transferred to the delivery carrier charged with delivery of the package to the Commission-approved laboratory selected by the owner or trainer.
- (9) The owner, trainer or designee and the Commission representative shall inspect the package containing the split sample immediately prior to transfer to the delivery carrier to verify that the package is intact and has not been tampered with.
- (10) The split sample chain of custody verification form shall be completed and signed by the representatives of the Commission and the owner or trainer. A Commission representative shall keep the original and provide a copy for the owner or trainer.

E. Frozen Samples

The commission has the authority to direct the official laboratory to retain and preserve by freezing samples for future analysis. The fact that purse money has been distributed prior to the issuance of a laboratory report from the future analysis of a frozen sample shall not be deemed a finding that no drug substance prohibited by these rules has been administered.

F. Laboratory Minimum Standards

Laboratories conducting either primary or split post-race sample analysis must meet at least the following minimum standards.

- (1) A testing laboratory must be accredited by a recognized accrediting body to any standards set forth and required by the Commission.

COMMITTEE NOTE: The Consortium is currently addressing accreditation issues and currently has not settled the issue, however it is anticipated that eventually there will be testing laboratory accreditation standards and one or more accrediting bodies.

- (2) A testing laboratory must have, or have access to, LC/MS instrumentation for screening and/or confirmation purposes.
- (3) A testing laboratory must be able to meet minimum standards of detection, which is defined as the specific concentration at which a laboratory is expected to detect the presence of a particular drug and/or metabolite or by the adoption of a regulatory threshold.

Adopted in Version 1.4 ARCI 8/27/02 NAPRA 10/2/02

Version 1.4 to 2.0 ARCI 4/26/03 NAPRA 4/14/03: Rule topic was renumbered from ARCI-011-020

Version 2.1 to 3.0 ARCI 4/3/04 NAPRA 4/3/04: Amended and modified rule language

Version 4.0 to 4.1 ARCI 4/26/07: Added new rule language

Version 4.1 to 4.2 ARCI 3/36/08: Added new rule language

Version 4.4 to 4.5 ARCI 4/23/09 Amended language TCO2 Testing added

ARCI-011-025 Trainer Responsibility

The purpose of this subsection is to identify responsibilities of the trainer that pertain specifically to the health and well being of horses in his/her care.

- (1) The trainer is responsible for the condition of horses entered in an official workout or race and is responsible for the presence of any prohibited drug, medication or other substance, including permitted medication in excess of the maximum allowable level, in such horses. A positive test for a prohibited drug, medication or substance, including permitted medication in excess of the maximum allowable concentration, as reported by a Commission-approved laboratory, is prima facie evidence of a violation of this rule. In the absence of substantial evidence to the contrary, the trainer shall be responsible.
- (2) A trainer shall prevent the administration of any drug or medication or other prohibited substance that may cause a violation of these rules.
- (3) A trainer whose horse has been claimed remains responsible for any violation of rules regarding that horse's participation in the race in which the horse is claimed.
- (4) The trainer is responsible for:
 - (a) Maintaining the assigned stable area in a clean, neat and sanitary condition at all times;
 - (b) Using the services of those veterinarians licensed by the Commission to attend horses that are on association grounds;
- (5) Additionally, with respect to horses in his/her care or custody, the trainer is responsible for:
 - (a) The proper identity, custody, care, health, condition and safety of horses;
 - (b) Ensuring that at the time of arrival at locations under the jurisdiction of the Commission a valid health certificate and a valid negative Equine Infectious Anemia (EIA) test certificate accompany each horse and which, where applicable, shall be filed with the racing secretary;
 - (c) Having each horse in his/her care that is racing, or is stabled on association grounds, tested for Equine Infectious Anemia (EIA) in accordance with the jurisdiction's law and for filing evidence of such negative test results with the racing secretary;
 - (d) Using the services of those veterinarians licensed by the Commission to attend horses that are on association grounds;
 - (e) Immediately reporting the alteration of the sex of a horse to the horse identifier and the racing secretary;
 - (f) Promptly reporting to the racing secretary and the official veterinarian when a posterior digital neurectomy (heel nerving) is performed and ensuring that such fact is designated on its certificate of registration;
 - (g) Promptly notifying the official veterinarian of any reportable disease and any unusual incidence of a communicable illness in any horse in his/her charge;
 - (h) Promptly reporting the serious injury and/or death of any horse at locations under the jurisdiction of the Commission to the stewards and the official veterinarian and compliance with the rules in this chapter governing post-mortem examinations;
 - (i) Maintaining a knowledge of the medication record and status;
 - (j) Immediately reporting to the stewards and the official veterinarian knowledge or reason to believe, that there has been any administration of a prohibited medication, drug or substance;
 - (k) Ensuring the fitness to perform creditably at the distance entered;

- (l) Ensuring that every horse he/she has entered to race is present at its assigned stall for a pre-race soundness inspection as prescribed in this chapter;
- (m) Ensuring proper bandages, equipment and shoes;
- (n) Presence in the paddock at least 20 minutes before post time or at a time otherwise appointed before the race in which the horse is entered;
- (o) Personally attending in the paddock and supervising the saddling thereof, unless excused by the stewards; and
- (p) Attending the collection of a urine or blood sample or delegating a licensed employee or the owner to do so.

Adopted in Version 1.4 ARCI 8/27/02 NAPRA 10/2/02
Version 2.1 to 3.0 ARCI 4/3/04 NAPRA 4/3/04: Modify rule language

ARCI-011-030 Physical Inspection of Horses

A. Assessment of Racing Condition

- (1) Every horse entered to participate in an official race shall be subjected to a veterinary inspection prior to starting in the race for which it is entered.
- (2) The inspection shall be conducted by the official veterinarian or the racing veterinarian.
- (3) The agency or the association employing the examining veterinarian(s) should provide a staffing level of not less than 2 veterinarians.
- (4) The trainer of each horse or a representative of the trainer must present the horse for inspection as required by the examining veterinarian. Horses presented for examination must have bandages removed; the legs must be clean. Prior to examination horses may not be placed in ice nor shall any device or substance be applied that impedes veterinary clinical assessment.
- (5) The assessment of a horse's racing condition shall include:
 - (a) Proper identification of each horse inspected;
 - (b) Observation of each horse in motion;
 - (c) Manual palpation and passive flexion of both forelimbs;
 - (d) Visual inspection of the entire horse and assessment of overall condition;
 - (e) Clinical observation in the paddock and saddling area, during the parade to post and at the starting gate, during the running of the race, and following the race until the horse has exited the race track; and,
 - (f) Any other inspection deemed necessary by the official veterinarian and/or the racing veterinarian.
- (6) The official veterinarian and/or the racing veterinarian shall maintain a permanent continuing health and racing soundness record of each horse inspected.
- (7) The official veterinarian and/or the racing veterinarian are authorized access to any and all horses housed on association grounds regardless of entry status.
- (8) If, prior to starting, a horse is determined to be unfit for competition, or if the veterinarian is unable to make a determination of racing soundness, the veterinarian will recommend to the Stewards the horse be scratched.

- (9) Horses scratched upon the recommendation of the official veterinarian and/or the racing veterinarian are to be placed on the Veterinarian's List.

B. Veterinarian's List

- (1) The official veterinarian shall maintain the Veterinarian's List of all horses which are determined to be unfit to compete in a race due to illness, physical distress, unsoundness, infirmity or any other medical condition. Horses so listed are ineligible to enter to race in any jurisdiction until released by an official veterinarian or racing veterinarian.
- (2) A horse may be removed from the Veterinarian's List when, in the opinion of the official veterinarian, the condition which caused the horse to be placed on the veterinarian's List is resolved and the horse's status is returned to that of racing soundness.
- (3) Horses working to be released from the Veterinarian's List are to be in compliance with ARCI-001-020 and are to be subjected to post-work biologic sample collection for laboratory confirmation or compliance.
- (4) Horses may be released from the Veterinarian's List only by authorization of an official veterinarian or the racing veterinarian.
- (5) Horses having generated a "positive" post race test for an RCI Class I, II, III, or IV substance shall be required to generate a negative test at the expense of the current owner prior to being entered for the first start following the positive test

A. Postmortem Examinations

- (1) The Commission may require a postmortem examination of any horse that dies or is euthanized on association grounds.
- (2) The Commission may require a postmortem examination of any horse that dies or is euthanized at recognized training facilities within this jurisdiction.
- (3) If a postmortem examination is to be conducted, the Commission shall take possession of the horse upon death for postmortem examination. All shoes and equipment on the horse's legs shall be left on the horse.
- (4) If a postmortem examination is to be conducted, the Commission or its representative shall collect blood, urine, bodily fluids, or other biologic specimens immediately, if possible before euthanization. The Commission may submit blood, urine, bodily fluids, or other biologic specimens collected during a postmortem examination for analysis. The presence of a prohibited substance in a specimen collected during the postmortem examination may constitute a violation.
- (5) All licensees shall be required to comply with postmortem examination requirements as a condition of licensure. In proceeding with a postmortem examination the Commission or its designee shall coordinate with the owner or the owner's authorized agent to determine and address any insurance requirements.
- (6) Postmortem examinations shall be conducted according to the most recent edition of the *American Association of Equine Practitioners Guidelines for the Necropsy of Racehorses*.

Adopted in Version 1.4 ARCI 8/27/02 NAPRA 10/2/02
Version 2.1 to 3.0 ARCI 4/3/04 NAPRA 4/3/04: Modify rule language
Version 4.4 to 4.5 ARCI 4/23/09 Amend language
Version 4.6 to 4.7 ARCI Board 12/6/09 Amended Postmortem Examination

(EDITOR'S NOTE: The information below is included for commissions' use in case it is required because of it being cited in the above rule. It is not part of the Model Rules rather it is only included for reference.)

AAEP GUIDELINES FOR THE NECROPSY OF RACEHORSES

General Guidelines

The AAEP recommends that all horses that die or are euthanized at a licensed racetrack or training facility undergo a complete necropsy by a board-certified veterinary pathologist at an accredited veterinary diagnostic laboratory. Necropsy findings should be entered into The Jockey Club Equine Injury Database.

It is recommended that regular communication and interaction between the on-site regulatory veterinarian(s), practicing racetrack veterinarians, and the pathology staff at the diagnostic laboratory be established. This will enhance the necropsy process and the resultant information. It will also facilitate collaborative efforts when specific research interests are identified.

Transportation options for necropsy cases should be identified prior to need. Storage, pending transport, and transportation of the body should be managed in such a way that tissue degradation and the development of post-mortem artifacts are minimized. Care should also be taken to employ good infection control practices with respect to equine infectious and/or zoonotic disease.

If time or distance constraints preclude the transport of a deceased horse to the veterinary diagnostic laboratory, a field necropsy is recommended.

Field Necropsy

It is recommended for racetracks where field necropsy must be performed that a dedicated facility be available for performing necropsies. This facility should be located in a secluded area and be enclosed and covered for both privacy and protection from the elements. (A temperature-controlled environment is recommended in areas where extreme weather conditions may exist.) Facility design should allow an equine ambulance to drive through. The enclosure should contain a large, well-drained concrete or asphalt slab with a rough finish providing adequate traction. Ample hot and cold water supply and hose are required to clean the area. Disinfection and/or sanitization protocols should be employed following each necropsy.

Field necropsy requires advance communication with carcass removal companies to determine requirements to insure that necropsied remains can be removed. Carcass removal and disposal should be performed by a licensed animal disposal company and in compliance with local, state, and federal regulations.

Regulatory veterinarians are encouraged to seek guidance from veterinary pathologists to establish field necropsy protocols. Minimum standards for field necropsy are as follows:

For appendicular injuries, the affected limb at the site of the injury should undergo gross dissection (+/- diagnostic imaging, toxicology, histopathology) and appropriate documentation of findings (written description and photography). The necropsy report should include identification of the affected anatomical structure(s) including a description of gross lesions found in bones, joints, ligaments, tendons, skin and blood vessels.

For non-appendicular conditions, reasonable effort should be made to determine and document the cause of death. For sudden death occurring during or immediately after a race, the cardiovascular and respiratory systems warrant as comprehensive an examination as is possible.

Race-related Fatalities

For race-related fatalities, a 'best practice' inquest protocol is recommended that incorporates ante-mortem information (examples include: interviews with personnel relevant to the horse and/or the incident, exercise history, race replay video, medical history) and post-mortem findings.

Ante- or immediately post-mortem blood samples (and urine, when available) should be collected, maintained under chain of custody protocols, and submitted to the official racing laboratory.

(7) *Approved by the AAEP Board of Directors, August 2009.*