

# 2020 Minnesota Racing Commission Trainer's Reference Manual



This manual provides trainers, owners, and others an understanding of the rules and procedures that apply to the medication and health of horses at Minnesota racetracks.

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## Special Note:

- **UNTIL FURTHER NOTICE ALL COGGINS AND HEALTH CERTIFICATES MUST BE SUBMITTED BY EMAIL TO [MRCINFO@STATE.MN.US](mailto:MRCINFO@STATE.MN.US) AT LEAST 24 HOURS PRIOR TO ARRIVAL.**
- **Coggins:** All horses must have a current Equine Infectious Anemia (EIA or Coggins) certificate to come on the grounds. No horse is eligible to start in a race if it does not have a current Coggins certificate. If you are delinquent, please have your veterinarian correct this matter immediately. Late EIA certificates should be turned into the Veterinarians' Office.
- **Health Certificates:** All horses (including pony and outrider horses) entering the enclosure of the racetrack must have an original health certificate issued within 10 days prior to arrival at the track that shows the Coggins date, rectal temperature, and EHV1 vaccination record for each horse (date vaccinated and specific product used).
- **Piroplasmosis:** All Quarter Horses coming through the stable gate from any state with a suspect case of Equine Piroplasmosis (EP) are required to provide a piroplasmosis test (*Theileria equi*) taken within 12 months. The test result should

identify each horse by name and tattoo number and should be attached to the certificate of veterinary inspection. Currently this is required only for Quarter Horses arriving from Texas.

## **TRAINER'S RESPONSIBILITIES**

Trainers are responsible for:

- Knowing and understanding the medication rules under which racing is conducted in Minnesota. This manual paraphrases rules that pertain to medications and horse health procedures. Questions on the materials contained in this manual should be addressed with Dr. Lynn Hovda, Chief Commission Veterinarian or the Stewards.
- Knowing and documenting the treatment status of each horse in their care and guarding them from harm.
- Keeping all the necessary paperwork relating to the health and medication status of their horses complete and up to date. This is a new rule and trainers are advised to refer to the **TRAINER TREATMENT ADVISORY**.
- Ensuring that no injectable substances, hypodermic needles, or syringes are in their possession, in the possession of their employees, or in automobiles or horse trailers, sleeping, storage, or stabling areas owned by or assigned to that trainer or trainer's employees. Equine first-aid kits containing medications for shipping purposes should not be kept on the grounds.
- Ensuring that all individuals working with or on his/her horses are licensed by the Minnesota Racing Commission (MRC).

## **ALBUTEROL AND CLENBUTEROL**

- In January 2019, the Association of Racing Commissioners International (ARCI) voted to amend the Controlled Therapeutic Medication Schedule (CTMS) for the bronchodilator albuterol to make it a "prohibited substance in Quarter horses with no applicable withdrawal time for Quarter horses or breeds racing with Quarter horses." This change also includes Thoroughbreds competing in a mixed race against Quarter horses.
- A similar change to the CTMS occurred in 2017 when the bronchodilator clenbuterol became a "prohibited substance in Quarter horses with no applicable withdrawal time for Quarter horses or breeds racing with Quarter horses." This change also included Thoroughbreds competing in a mixed race against Quarter horses.
- Industrial Laboratory, the 2020 MRC contract laboratory, has been instructed to report any albuterol and clenbuterol findings above the level of detection (LOD) in samples submitted from Quarter horse races and from mixed races including Quarter horses. A horse with a positive finding for albuterol or clenbuterol is placed on the Veterinarian's List as soon as the finding is reported.

- Quarter horse trainers and Thoroughbred trainers with horses competing in a mixed race are advised to stop using albuterol and clenbuterol immediately.
- Be well advised that out of competition hair testing for albuterol and clenbuterol is routinely performed throughout the meet. Your horse may be tested once or multiple times or not at all.

### **BISPHOSPHONATES**

- Bisphosphonate medications are NOT allowed on the grounds. If you have any bisphosphonate medications you must remove them from the grounds. This means you should not have them in your tack room, horse trailer, personal vehicle or any other storage unit on the backside.
- Trainers with any horse entering the grounds that has been treated with a bisphosphonate must notify the Commission Veterinarian as soon as the horse is present on the grounds. The horse will be placed on the Veterinarian's List for 6 months following treatment.
- A post-race blood test resulting in a positive finding for any bisphosphonate medication will be deemed a Class A penalty and the horse placed on the Veterinarian's List as soon as the finding is reported.

### **BLEEDERS**

A horse that bleeds for the first time will be placed on the Veterinarian's List and is ineligible to race for a minimum of 14 days following the observed bleeding. Longer periods of ineligibility result from subsequent bleeding incidents:

- 30 days for a second bleed within 365 days
- 6 months for a third bleed within 365 days
- Lifetime for a fourth bleed within 365 days

### **CHAIN SHANKS**

Chain shanks used to restrain a horse must have the chain portion covered with a soft material to prevent injury to the horse's mouth.

### **CLAIMED HORSES**

Each claimed horse must be taken directly to the detention barn as blood and urine are taken from all claimed horses after a race. The original trainer/owner of the horse is responsible for the horse until testing is completed. The new owner/trainer may observe but must not have contact with the horse until after the test samples are obtained. Once testing is completed and the samples signed for, the horse will be released to the new owner/trainer. The new owner/trainer must have a licensed individual present to take custody of the horse as soon as the test is completed.

A claim will be voided if the horse dies or is euthanized within one hour of racing or the horse is placed on the Veterinarian's List for a musculoskeletal injury, cardiac abnormality or respiratory unsoundness (i.e. bleeding externally from one or both nostrils) within one hour of racing.

MRC rules require that the trainer of a claimed horse submit to the Commission Veterinarian's Office an accurate record of all treatments provided and corticosteroid and intra-articular joint injections administered to the horse within 30 days before the race in which the horse was claimed. This must be done within 72 hours after the race is made official. This record will be provided to the new trainer.

### **CORNELL COLLAR**

The use of the Cornell Collar is regulated in Minnesota by house rule. Should you have a horse that needs to race with a Cornell Collar your veterinarian MUST come into the Veterinarian's Office prior to entry and obtain the appropriate forms to enroll the horse in the program. Once approved, the horse will need to wear the collar in every start. Should you wish to discontinue the use of the Cornell Collar, you must fill out a "discontinue" form in the Veterinarian's office. Once discontinued, the horse may not race again wearing the Cornell Collar during the current season.

### **DEATH OF A HORSE**

The death of a horse must be reported immediately by the trainer to their practicing veterinarian who is then responsible for notifying a Commission Veterinarian. MRC rules require that any horse dying on the grounds be sent with all body parts intact to the University of Minnesota Veterinary Diagnostic Laboratory for a complete post mortem examination (necropsy). Arrangements are coordinated through the Commission Veterinarian's Office as specific paperwork, including insurance information, needs to accompany the horse.

### **ELECTRICAL, MECHANICAL AND BATTERY-OPERATED DEVICES**

No electrical, mechanical, or battery-powered device or machine may be used to administer therapy or treatment to a horse within 48 hours of the time the horse is scheduled to race, unless approved in advance by the Stewards in consultation with the Commission Veterinarian.

### **EPO & BLOOD DOPING AGENTS**

The Minnesota Racing Commission tests for erythropoietin (EPO), darbepoetin and other red blood cell growth factors. In addition to action by the Stewards, all horses with a positive test for blood doping agents such as EPO and others will be placed on the Veterinarian's List and not removed for a minimum of 6 months and until deemed healthy by a Commission Veterinarian.

## **EQUINE INFECTIOUS ANEMIA (EIA)**

Each horse and pony entering the grounds needs to have a negative EIA test taken within the previous 12 months. This test is commonly referred to as a "Coggins test." Test certificates that expire while the horse is stabled or racing at Canterbury Park must be renewed or the owner/trainer will be asked to remove the horse or move it to the isolation stalls until a new test certificate is obtained. Each horse's registration certificate should have an attached copy of that horse's current EIA test certificate. A copy of the negative EIA test results must be attached to the registration certificate by 9:00 am on the day in which the horse is scheduled to race.

- **Until further notice, all Coggins must be submitted 24 hours prior to arrival with the health certificates to [mrcinfo@state.mn.us](mailto:mrcinfo@state.mn.us).**
- Horses **cannot** be shipped into Canterbury Park with EIA certificates pending or expired.
- Horses **cannot** leave the starting gate if their Coggins is not current.

## **EXAMINATION OF HORSES BY COMMISSION VETERINARIANS**

The most common type of exam performed is a brief pre-race exam conducted the morning of race day. Disputes on the morning of a race about the soundness of a horse can often be avoided if the Commission Veterinarians are allowed to become familiar with a particular horse before it is entered into a race. Some horses may have an old problem that causes a strange way of traveling. Trainers with a horse in this category should arrange an advance exam with the Commission Veterinarian or risk having the horse scratched during prerace examinations.

### **Pre-race examinations:**

Aims and objectives of the examining Commission Veterinarian are to:

- Prevent a fresh minor injury from becoming a major injury.
- Promote safe racing by reducing the number of horses racing erratically due to musculoskeletal or neurological problems.
- Enforce humane laws and animal welfare.
- Offer the betting public a reasonable degree of consistency regarding the physical state of horses racing at Canterbury Park.

On race days, pre-race exams will be conducted by the Commission Veterinarians between 7:30 AM and 10:30 AM. Until they have been checked, horses scheduled to race **should NOT be iced, poulticed, or placed in bandages**. All bandages must be removed and mud and other poultices washed off before the exam occurs. Horses are identified by tattoo or microchip, examined manually, and jogged outside the stall. An attendant must be available to identify and handle the horse. If no attendant is available

to handle the horse or the horse cannot be found, the Stewards will be notified and the horse may be scratched from that day's card.

Be advised that all information obtained on prerace examinations or workouts is shared with other racing jurisdictions through the The Jockey Club Incompass prerace module.

### **Other Examinations:**

Other exams are sometimes necessary for the overall wellness of the racing program and safety of the horse and/or rider. Occasionally, a Commission Veterinarian will ask to check a horse that is not scheduled to race on that day. The most common reason for such an exam is to reassess a possible racing related injury. Differences of opinion may occur in individual cases, however, if the trainer and Commission Veterinarian work together these problems can be resolved.

Horses which have been off racing for more than six months but less than one year will need to be examined by a Commission Veterinarian and may be required to have an observed work of ½ mile in :52 or better on the racetrack prior to entry. If you have a horse in this category please obtain the horse's history and be able to communicate with the Commission Veterinarian why the horse has been laid off and what treatment has been provided.

## **FUROSEMIDE**

A horse is eligible to run on furosemide if the trainer and MRC licensed, practicing veterinarian determine that it would be in the horse's best interest to do so. This means that horses do not have to be a documented bleeder. They do, however, have to be registered in the Furosemide Program prior to scratch time. If the horse has not previously raced on furosemide in Minnesota, the trainer or assistant trainer will need to contact the Commission Veterinarian's office and sign the horse into the Furosemide Program.

### **FUROSEMIDE ADMINISTRATION**

Furosemide is administered IV (intravenously) by the MRC licensed, practicing veterinarian employed by the owner or trainer of the horse. The dosage of furosemide must be at least 150 mg (3mLs) but cannot exceed 250 mg (5mLs) per dose administered and is given in the right jugular vein. Furosemide may not be administered in the muscle (IM).

Horses eligible and registered to receive furosemide in Minnesota will be treated in their own stalls. Trainers are responsible for arranging furosemide administration with their MRC licensed private veterinarian and for having their horse in its assigned stall. On race day your veterinarian will arrive with a detention barn employee. The employee will confirm the identity of the horse by tattoo or microchip,

verify barn/stall location, and observe the furosemide treatment. They function as observers and are NOT there to hold or otherwise help restrain a horse.

If the horse, your employee, the veterinarian, and the detention barn employee are not all at the assigned location before or at the time the furosemide treatment is due, the Stewards will be notified and the horse may be scratched.

Horses scheduled to race on furosemide must remain in their assigned stalls until leaving for the paddock. Unless it is a genuine medical emergency, no veterinarian may have contact with a horse after it has received furosemide. Veterinarians found in a stall of a horse already treated with furosemide will result in the horse being scratched. No stomach tubes, medical devices, infrared or laser devices or other gadgets or gizmos should be in the stall after the horse has received furosemide.

A furosemide schedule for treatment times based on regular post times is available in the Commission Veterinarian's office. Times will be determined by the official clock located in the furosemide office (West side of Barn A-6). On days when post times vary due to special events, simulcasts etc., trainers should inform their employees that the furosemide treatment deadlines will be different. Once these post times are known they will be posted on the Commission Veterinarian's office bulletin board.

## **FUROSEMIDE LIST**

A copy of the furosemide list is kept in the Commission Veterinarian's office. If a horse's name appears on the furosemide list from prior years and the horse has raced with furosemide during its most recent race, it is eligible to use furosemide in Minnesota. Horses already listed on the furosemide list will not have to be registered again.

All other horses will need to be signed up in the Commission Veterinarian's office. This generally takes only a few minutes.

## **FUROSEMIDE LIST - REMOVAL FROM LIST**

To remove a horse from the furosemide list, trainers must submit a written request to the Commission Veterinarian's office no later than scratch time for the race in which the horse is entered. This form is available in the Commission Veterinarian's office. Once a horse is removed from the furosemide list, it will not be eligible to use furosemide in Minnesota again during the racing season unless it bleeds again, is placed on the Veterinarian's List for a minimum of 14 days and is registered with the furosemide program; or the horse is claimed or transferred to another licensed trainer.

## **GELDED HORSES**

The correct sex of a horse must be reported to the Racing Office. It is important for trainers to check that geldings and ridglings are correctly identified when registration papers are turned in. A colt that has been castrated since his last start should be reported to the Racing Office and Commission Veterinarian's office before that horse is entered.

## **HEALTH CERTIFICATES**

**Until further notice, health certificates must be submitted 24 hours prior to arrival to [mrcinfo@state.mn.us](mailto:mrcinfo@state.mn.us) .**

A legible, correctly completed, and signed certificate of veterinary inspection (CVI or health certificate) issued by a veterinarian within 10 days of arrival must accompany each horse shipping onto the grounds. The Minnesota Board of Animal Health requires that each horse be well identified with complete information of Equine Infectious Anemia (Coggins) status recorded on the health certificate for each horse, including the date, laboratory and accession number of the most recent negative test. The certificate must also contain a rectal temperature and the date of the most recent vaccination with an FDA approved modified live or killed virus vaccine specific for EHV-1. Vaccinations must have been given no less than 14 days nor more than 4 months prior to arrival. Incomplete, inaccurate, or otherwise abnormal certificates are forwarded to the Minnesota Board of Animal Health.

## **HORSE IDENTIFICATION**

All horses must be accurately identified prior to racing or they will be scratched from the race. Currently, horses may be identified either by lip tattoo or microchip.

## **IN TODAY SIGNS**

In-today signs must be posted by **8AM** on the stall of each horse racing that day. The signs must remain posted until the horse returns to its stall after racing. These signs are available from the CBY Stable Gate or Andrew Vold, CBY Stall Superintendent.

## **INFECTIOUS DISEASES**

Every horse entering the backside must have been vaccinated by a veterinarian with an FDA approved modified live or killed virus vaccine specific for EHV-1 not less than 14 days and not more than 4 months prior to the date of entry. The vaccination date and specific name of the vaccine must appear on the health certificate.

Vaccinations are strongly recommended, but not required, for Eastern and Western Encephalitis, Tetanus, West Nile Virus, Influenza and Strangles.

Any horse in your care that has developed a potentially contagious illness (especially Herpes Virus (EHV-1) or Strangles) should be reported immediately to your private veterinarian and a Commission Veterinarian so other horses in the stable area are not unnecessarily exposed. Any horse with signs of neurologic EHV-1 will be tested as this disease is reportable to the Board of Animal Health in Minnesota.

Any horse exhibiting signs of strangles needs to be monitored closely and isolated from other horses. Any horse with an active, draining node or fever with enlarged nodes will have to be removed immediately from the racetrack and cannot return until deemed healthy. Please do not hide these horses as it only irritates other trainers whose horses may become ill and makes life more difficult for everyone. The Stewards and Security Office will be notified of trainers failing to comply with this policy.

## **MEDICATIONS**

### **ALLOWED MEDICATIONS:**

- **Furosemide is the only allowed race day medication.**
- Horses are allowed to race on furosemide without prior evidence of bleeding but need to be entered into the Furosemide Program prior to entry time.
- According to Minnesota Rule 7890.0140 furosemide shall be administered IV (intravenously) by the veterinarian employed by the owner or trainer of the horse.
- The administered furosemide must be at least 150 mg (3 mLs) but cannot exceed 250 mg per dose (5 mLs) administered and is administered 4 hours before post time using the RIGHT jugular vein.
- No additional furosemide is allowed.

### **OTHER MEDICATIONS WITH PERMISSIBLE LIMITS.**

#### **1. Medications with regulatory detection limits**

- The ARCI list of controlled therapeutic medications has been amended by the MRC with changes to both NSAID and corticosteroid thresholds.
- Refer to the list at the end of this document for specific MRC Amended ARCI information including suggested doses and routes of administration, and detection times.
- **Be WELL advised that these are ONLY suggested doses, routes of administration, and detection times.** Each horse is different in height, weight, and ability to metabolize medications.

- The use of several medications at the same time often results in delayed clearance (it stays in the body longer) and a possible medication violation, so plan accordingly.
- Horses that are dehydrated due to a lack of water prior to racing, have been administered furosemide, are racing in hot and humid weather, or other factors will not eliminate medications from their body as rapidly and reductions in dose or extending the time period between dosing and racing is often needed.

## 2. Nonsteroidal anti-inflammatory agents (NSAIDS)

- One of the three following NSAIDS may be used 48 hours prior to a race or workout in amounts resulting in post-race or official time workout levels less than the following permissible limits:
  - Bute (phenylbutazone): The maximum permissible limit 0.3 mcg/mL of blood.
  - Flunixin: The maximum permissible limit is 5 ng/mL of blood.
  - Ketoprofen: The maximum permissible limit is 2 ng/mL of blood.
- NO other NSAID may be present in the post-race or official timed workout sample (blood or urine). Thresholds for other NSAIDs have been suspended.
- Refer to the **NSAID Advisory** for complete information.

## 3. Corticosteroids

- **NO** corticosteroid may be administered by intra-articular injection within 7 days before post time for the race in which the horse was entered. **One** of four corticosteroids in the concentration below the following permissible limits:
  - Betamethasone: the maximum permissible limit is 10 picograms/mL of blood
  - Isoflupredone: The maximum permissible limit is 100 picograms/mL
  - Methylprednisolone: The maximum permissible limit is 100 picograms/mL of blood
  - Triamcinolone: the maximum permissible limit is 100 picograms/mL of blood
- No other corticosteroid may be present in the post-race or official timed workout sample (blood or urine)
- Thresholds for other corticosteroids have been suspended.
- Refer to the **Corticosteroid Advisory** for further information.

## 4. Anabolic Steroids

No Androgenic-anabolic steroids (AAS) shall be permitted in test samples collected from racing horses except for endogenous concentrations of nandrolone and naturally occurring substances boldenone and testosterone at concentrations less than the indicated thresholds. Concentrations of these AAS shall not exceed the following plasma or serum thresholds for free substance or urine threshold concentrations for total substances.

- Boldenone:

- In male horses other than geldings - 15 ng/ml of total boldenone in urine.
- In fillies, mares, and geldings - 1 ng/mL total boldenone in urine.
- All horses regardless of sex - not greater than 25 pg/ml of boldenone in plasma or serum.
- Nandrolone:
  - In geldings - 1 ng/ml total nandrolone in urine or not greater than 25 pg/ml of nandrolone in plasma or serum.
  - In fillies and mares - 1 ng/ml total nandrolone in urine or not greater than 25 pg/ml of nandrolone in plasma or serum.
  - In male horses other than geldings - 45 ng/ml of metabolite, 5 $\alpha$ -oestrane-3 $\beta$ , 17 $\alpha$ -diol in urine.
- Testosterone:
  - In geldings - 20 ng/ml total testosterone in urine or 100 pg/ml of testosterone in plasma or serum.
  - In fillies and mares - 55 ng/ml total testosterone in urine or 100 pg/ml of testosterone in plasma or serum.
  - In fillies and mares that are confirmed pregnant at the time of racing, testosterone is not regulated.
  - In male horses other than geldings - 2000pg/mL serum.

## 5. Cobalt

Random testing for cobalt will occur throughout the season. The current threshold for cobalt in the serum is 25ppb. In addition to sanctions from the Stewards, any horse testing over this level will be placed on the Veterinarian's List and not allowed to race until the level has fallen below 25ppb. The owner is responsible for the cost of repeat testing.

## GENERAL INFORMATION

- No medications other than furosemide may be administered to any horse within 48 hours of a race. This includes the use of medications administered by inhalation therapy (nebulizers, inhalers, etc.) and feeding of sodium bicarbonate or other alkalinizing agents. Topical ointments, leg rubs, and paints may be used after entry, provided these substances do not contain any of the following: procaine penicillin, chloramphenicol, benzocaine, lidocaine, mepivacaine, corticosteroids, ethanol or other medications.
- PLEASE READ ALL LABELS CAREFULLY. Be especially alert to topical products containing ethanol, ethyl alcohol, or "alcohol" as these can readily be absorbed through the skin and result in a positive test.
- No drugs or medications are allowed in the paddock or detention barn.
- Unopened bottles of rubbing alcohol for topical use in the detention barn are provided by the HBPA.

- The finding of a drug in a horse's post-race test sample is a serious violation. Many drugs stay in a horse's system for well over 48 hours. Trainers should remain aware of the complete medical histories of their horses and drug detection times. When in doubt, trainers should consult with the Chief Commission Veterinarian or Stewards
- The owners of horses with positive post-race tests or medication overages will be notified by mail for each violation.

## **MEDICAL/GATE SCRATCHES**

Requests to scratch a particular horse for medical reasons should be turned into the Steward's Office. In general, the Stewards request that one of the Commission Veterinarians check the horse's condition before the scratch becomes official. Trainers should follow up on a scratch request to make sure that the Stewards have acted on it. Horses for which a veterinary scratch is being requested should not be medicated or removed from the grounds until the scratch has been approved by the Stewards. In true emergencies, the private veterinarian handling the case will fill out a medication card which they must turn into the Commission Veterinarians' office.

All horses scratched on the track prior to a race automatically go on the Veterinarian's List for a **minimum** of **seven** days (MRC Rule 7877.0175 Subp. 8). If a workout is required, the horse may not be worked for the Commission Veterinarian during this seven-day period. A copy of the Veterinarian's List is posted outside the office door and is updated weekly. Notice of when and why a horse is placed on the Veterinarian's List is left in the trainer's mailbox.

## **MORTALITY REVIEW**

A committee composed of a steward, commission veterinarian, trainer or assistant trainer, attending veterinarian, track superintendent and the director of racing will meet after the death of each horse. The purpose of this meeting is to review information and gather additional data about the death of the horse. Participation is mandatory and trainers are advised that they will need to bring a copy of their trainer treatment record for that horse.

## **NERVED HORSES/PREGNANT HORSES**

"Nerving" of a horse which is to race is limited to posterior digital nerves. Horses that have been nerved must be registered with the Veterinarian's Office before entering into a race.

Pregnant horses must be registered with the Racing Secretary and Veterinarian's Office and the expected foaling date posted. Mares or fillies greater than 150 days of gestation are ineligible to enter or race.

## **NON-RECOGNIZED RACING EQUIPMENT**

Non-recognized racing equipment must not be used on a horse on a day the horse is scheduled to race, unless it is approved in advance by the stewards in consultation with the Commission Veterinarian. Non-recognized racing equipment means any article, appliance, or device that the Commission Veterinarian determines may cause or mask pain in a horse including but not limited to kinesiology tape, rubber bands, nose rings, iron halters and copper tail or ankle wires.

## **NSAID SPECIFIC INFORMATION**

(bute [phenylbutazone], flunixin, or ketoprofen)

### **Bute (phenylbutazone):**

- Feeding. Feeding of bute is not recommended. Trainers who give oral bute are advised to stop. Horses often delay eating feed that has been doctored with bute, so putting bute in the feed the night before a race may result in a positive test.
- IV use. Intravenous administration by a veterinarian results in immediate distribution of the medication to the bloodstream, which in turn speeds up the clearance time. The IV use of bute at 4 mg/kg (2 grams for the average size horse) at 48 hours is the normal ARCI recommendation.

**Flunixin (Banamine):** The therapeutic window for flunixin is very narrow. Based on current research using a dose of 1.1 mg/kg IV, the ARCI recommended withdrawal time for flunixin in horses of all sizes is AT LEAST 48 hours. This does not mean that you cannot give it at 48 hours, just that you should be aware that a medication violation may occur.

**Ketoprofen:** The test level for ketoprofen for a 48-hour withdrawal has been lowered to 2 ng/mL, which is consistent with an IV dose of 2.2mg/kg. There is no recommended dose for oral ketoprofen. Trainers are advised to be very careful if you have used ketoprofen indiscriminately in the past.

Careful consideration should be given to the use of an NSAID. Horses that are dehydrated, suffering from liver or kidney disease, or other systemic illnesses may take considerably longer to clear an NSAID from their system.

## **OUT OF COMPETITION TESTING**

Horses on the grounds are subject to out of competition testing. Any horse may be chosen for testing based on laboratory feedback, investigator's surveillance and percentage of wins obtained each week from The Jockey Club.

## **POST-RACE DETENTION BARN INFORMATION**

Selection of horses to be tested after a race will not necessarily be based on order of finish. Random testing by the Stewards frequently occurs. Horse attendants should be prepared to go to the detention barn whenever a horse is raced and be equipped with MRC license, halter, and shank. Horses selected for testing are to be taken directly to the detention barn. A minor injury (e.g. grabbed quarter) or lameness of a tagged horse will be evaluated by the detention barn veterinarian. At the discretion of the detention barn veterinarian, horses with more serious problems may be treated by their private veterinarian.

Important information:

- Employees for the trainer are responsible for bathing and cooling out that horse. This includes claimed horses. Claimed horses remain with the original trainer until post-race testing is complete.
- Body washes/rubs and leg ointments are not allowed in the detention barn.
- No food or beverages, including alcoholic beverages, may be consumed in the detention barn.
- No smoking is allowed in the detention barn.
- Horses that enter the detention barn must be accompanied by an attendant other than someone on a pony. Ponies should not be tied up outside the detention barn.
- Each horse will be assigned an individual water bucket. The horse should drink from this bucket only.
- The detention barn provides wash water, sponges, and scrapers.
- All persons who enter the detention barn must have their I.D. badges and a legitimate purpose for being there. Unlicensed people will not be allowed in the detention barn.
- Persons who are intoxicated or disorderly will be asked to leave or escorted out by security.
- For safety reasons, children under 16 years of age are not allowed in the detention barn.

## **POST RACE URINE/BLOOD SAMPLING**

Three tubes of blood will be taken from each horse selected for sampling: two for testing and one for a split sample. Urine will also be collected. Blood is collected at approximately 30 minutes after arrival for all horses. Horses will be kept a minimum of 1 hour to obtain urine. Urine samples obtained will be split, provided that sufficient quantity was obtained.

Samples and splits will be labeled and sealed in the presence of the trainer or the trainer's designated witness. This person will be required to acknowledge as having

witnessed the obtaining, labeling, and sealing of the samples. Blood samples are centrifuged and refrigerated as separated whole blood. Urine is frozen.

### **SHOCK WAVE THERAPY**

Only veterinarians licensed by the Minnesota Racing Commission can own a machine and perform shock wave therapy. All horses receiving shock wave therapy must be reported on a special form and cannot race or have a timed workout for 10 days. These horses will be placed on the Veterinarian's List for the 10-day period. All shock wave treatments are to be performed at a site and time designated by an MRC DVM. Currently this location is the stall adjacent to the pool, but this may change if the weather is inclement. Appointments for shock wave therapy should be made through your veterinarian and the Commission Veterinarian's office.

### **SPLIT SAMPLE TESTING**

If a horse tests over the allowed limit of a permitted medication or is positive for other medications, split samples may be sent to an alternate, MRC approved split sample laboratory for additional testing. The trainer may choose from the list of MRC approved split sample laboratories PROVIDED the laboratory has the available equipment and technical expertise to identify the positive sample at qualitative and quantitative levels similar to the original drug testing laboratory, can meet the turnaround time of 14 days, and will accept the sample. If none of the laboratories on the list are able to do the split sample testing, the Chief Commission Veterinarian will work to find an alternate laboratory.

The request for split sample testing must be made to the Stewards in writing within 72 hours of notification of a violation. Once the decision is made to send a split sample the trainer has 24 hours to contact the Chief Commission Veterinarian or her designee. Trainers are responsible for all costs associated with the testing of split samples. These costs, usually between \$500 and \$1500, must accompany the split sample. The trainer is responsible for the cost of shipping (\$35 to \$100 depending on location of laboratory chosen). Please see the Chief Commission Veterinarian for more information.

### **TCO2 TESTING**

It is illegal in Minnesota to treat horses with sodium bicarbonate or other alkalinizing agents within 48 hours of racing. The Commission Veterinarians routinely collect blood before racing for every horse in chosen races. Races are chosen at random.

Blood will be taken in the horse's own stall on the backside before leaving for the paddock or in the receiving barn if necessary. No blood will routinely be collected for split sample testing. If you desire a split sample, you must notify the Commission Veterinarian at the time of testing. A second tube of blood will then be drawn and sent to

the lab as a completely separate and blinded sample. The sample will be sent to Industrial Laboratories; no other laboratories are available for split sample testing. You will be responsible for the cost of the test. We ask that you cooperate fully with the Commission Veterinarian if your horse is in one of the races chosen.

## **TESTING**

Industrial Laboratories in Colorado is the Minnesota Racing Commission's 2020 contract laboratory. Three tubes of blood in addition to urine will be collected from each horse that goes to the detention barn. LC/MS/MS is the primary testing method; a few select ELISA kits are also used. **This methodology is very sensitive and specific and may be different from other racetracks where you have been.** Do NOT assume that just because your horse did not test positive elsewhere that it will be fine here.

**ALL** corticosteroids are included in routine and regular testing by LC/MS/MS. Some of them are regulated by threshold (permissible limit) and some by limit of detection (LOD).

## **TRACK ACCIDENTS**

With few exceptions, all horses pulling up on the racetrack will be removed by the horse ambulance. Blood samples will be taken from these horses, either on the track, if possible, or at the detention barn. Horses removed by ambulance from the track will generally be taken to their barns. Catastrophic injuries requiring euthanasia and deceased horses will go directly to the blue room.

## **VETERINARIAN'S LIST**

Horses are placed on the Veterinarian's List for a wide variety of reasons. These include, but are not limited to:

- Unsoundness before, during, or after a race
- Illness
- Injuries
- Bleeding during or after a race or workout
- Medication errors
- Mandatory stand down times (shock wave therapy), bisphosphonates
- Positive test results with penalty category A (ARCI penalties and potentially for penalty category B and C)
- Other issues such as expired or lack of a current EIA test certificate.

A copy of the Veterinarian's List is posted outside the Commission Veterinarian's office and an individual notice placed in the trainer's mailbox. **It is the trainer's responsibility** to know if a horse in their care is on the Veterinarian's List and to arrange to have the horse removed from the list. Horses scratched in the saddling

paddock, walking ring, on the track surface, or at the starting gate will automatically be placed on the Veterinarian's List and **cannot** be removed for a minimum of seven days. This is an MRC rule and the Commission Veterinarians will not override it.

### **Procedural Information:**

- Horses will be ineligible to start in a race while on the Veterinarian's List.
- Notification forms are addressed to the trainer and placed in their mailbox. Either an "off date" will be noted on the form **or** an indication as to what needs to be done for the horse to be removed from the Veterinarian's List.
- The MINIMUM stay on the Veterinarian's List is an automatic **seven** days.
- Horses cannot work to get off the list until the morning of day eight. Day one is the day the horse was put on the Veterinarian's List.
- Horses needing to work to be removed from the list are seen by appointment only. This means you need to call the office and arrange this in advance. Please do not wait until 15 minutes before you intend to work the horse.
- Thoroughbreds must work 1/2 mile, in 52 seconds or less and Quarter Horses 220 yards in 13 seconds or less.
- Blood will be obtained after the workout; occasionally urine will be obtained. The horse will not be removed from the list until blood/urine results are returned.
- Trainers are responsible for the cost of blood sample analysis. The trainer's name and name and tattoo / microchip number of each horse working to be removed from the Veterinarian's List will be provided to the horsemen's bookkeeper.
- Prior to obtaining blood or urine, the Commission Veterinarian will palpate limbs and observe the horse move. Do not give bute or other drugs before this examination and collection of serum or urine.

## **WORKOUT APPOINTMENTS**

Arrangements to work a horse should be made at least one day in advance. Last minute requests will be considered but often cannot be accommodated.

- Works for the Commission Veterinarians must be scheduled for the first group of horses working after the break. Trainers must make these appointments in the Commission Veterinarian's office. Special needs are always easier to meet with some advance notice.
- All workouts before a Commission Veterinarian will be conducted under the same medication requirements as those on race days. The Commission Veterinarian will draw blood and/or collect urine after a workout for medication testing.
- Trainers are responsible for the cost of blood sample analysis. The trainer's name and name and tattoo / microchip number of each horse working to be removed from the veterinarian's list will be provided to the horsemen's bookkeeper for billing.

- In some cases, the Commission Veterinarian may request that the jockey riding the horse in a race be the person riding it for the workout.

## **WORKOUT REQUIREMENTS**

### **THIS IS IMPORTANT AND SHOULD NOT BE OVERLOOKED**

A horse, other than a first-time starter, which has not started for a period of more than one year is ineligible to start in a race until it has completed three timed workouts, at least one of which must be before a Commission Veterinarian and no more than 30 days prior to date of entry.

First time starters four years or older must have three timed workouts with at least one official timed work observed and approved by the Commission Veterinarian not more than 30 days prior to the race in which the horse has been entered. Thoroughbreds will be required to work 1/2 mile in :52 or less, and Quarter Horses will be required to work 220 yards in 13 seconds or less. These works are conducted under the same medication and testing rules as racing. A horse is not eligible to be entered in a race until negative results of the post-workout medication testing have been returned to the Commission Veterinarian.