



***NTRA SAFETY & INTEGRITY ALLIANCE***  
***2012 APPLICATION FOR ACCREDITATION***

***RACETRACK APPLICATION***

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Applicant

For NTRA Safety & Integrity Alliance Use only:

Date Received:

Received By:

## ***ALLIANCE ACCREDITATION APPLICATION INSTRUCTIONS***

### ***I. COMPLETING THIS FORM:***

- A. This form must be completed by a person who is a Principal<sup>1</sup> of the Applicant. The Applicant is referred to herein as “You.” For purposes of this form, Applicant shall be defined to include any corporation, limited liability company, association, operation, firm, partnership, trust or other form of business association, as well as any sole proprietor or natural person.
- B. Read each question carefully prior to answering. Answer every question completely. If a question does not apply to you, write “Does not Apply” in response to that question. If there is nothing to disclose in response to a particular question, write “None” in response to that question.
- C. If you need additional space to answer any questions(s), you may include attachments; however, if you do, be sure to indicate on each page of each attachment the number(s) of the related question(s) that you are answering and reference the attachment on the form in the space provided.
- D. Please do not make any modifications to the questions contained on the form.
- E. Initial each page of this form in the space provided after you have checked your answers and are sure they are complete and correct.

### ***II. BEFORE YOU SUBMIT THIS FORM TO THE NTRA SAFETY & INTEGRITY ALLIANCE, BE SURE THAT:***

- A. All attachments required for this form are included.
- B. Copies of all the required documents identified in this application are attached to this form.
- C. Every question has been answered truthfully and completely.
- D. You retain a completed copy of this form for your own records.

### ***III. FILING OF THIS FORM WITH THE NTRA SAFETY & INTEGRITY ALLIANCE:***

- A. Submit the original form and attachments to:

NTRA Safety & Integrity Alliance  
2525 Harrodsburg Rd.  
5th Floor  
Lexington, KY 40504

Mike Ziegler  
Executive Director  
(859) 422-2668  
mziegler@ntra.com

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<sup>1</sup> A principal includes: (a) an Applicant’s officers and directors; (b) an Applicant’s principal management employees, including any chief executive officer, chief financial officer, chief operating officer or general manager; (c) an Applicant’s owners or partners, if an unincorporated business.

#### IV. IMPORTANT NOTICES

Upon receipt of this completed Application and the filing fee, the Alliance will conduct a formal review of its contents. Following Application review, the Alliance may request additional information from Applicant.

A site inspection will be scheduled for the NTRA Safety & Integrity Alliance Accreditation Assessment Team (“Assessment Team”) prior to Accreditation. The Assessment Team will visit Applicant’s facility for the purpose of confirming that Applicant’s facilities and protocols are consistent with information included in Applicant’s application and otherwise consistent with the standards set forth in the Code.

Following review of this Application and completion of the site inspection, Applicant will be eligible for Accreditation and will be promptly notified of its status.

#### V. ABBREVIATIONS AND DEFINITIONS

**AAEP:** American Association of Equine Practitioners.

**Accreditation:** The process by which individual Members shall be certified to be in compliance with the Code. The levels of accreditation are as follows:

**Full Accreditation:** Accreditation without condition or limitation.

**Provisional Accreditation:** Accreditation conditioned upon the future implementation of specifically identified standards according to a specified timetable in order to attain Full Accreditation.

**Provisional Accreditation Pending Regulatory Conformity with Alliance Code of Standards:** Accreditation awarded to Members meeting substantially all the standards as required by the Code with any exceptions due to non-compliance by local regulatory authority.

**Denial of Accreditation:** Non-compliance with the Code.

**ARCI:** Association of Racing Commissioners International.

**Application:** Refers to this 2012 Application for Accreditation including any and all attachments, supporting documents and all other information submitted to the Alliance by the Applicant pursuant hereto.

**Association Veterinarian:** A veterinarian employed by the racetrack association.

**Code:** Refers to the NTRA Safety & Integrity Alliance Code of Standards, as it may be amended from time to time (Attached as Exhibit A to this Document).

**Compliance Program:** A program that is a coordinated system of organizational structures and processes managed by a dedicated Compliance Officer to help ensure compliance with the Alliance safety and integrity reform standards set forth in the Alliance Code as well as applicable laws and regulations as further described in the ***National Thoroughbred Racing Association Safety & Integrity Alliance Guidance for Racetrack Member Compliance Program*** (Attached as Exhibit B to this Document).

**Horse Handlers:** Trainers, jockeys, exercise riders, veterinarians, grooms, outriders, pony people and anyone else who comes into direct contact with a horse within Racetrack Member’s racetrack enclosure.

**House Rules:** Rules promulgated by racetracks concerning activities on racetrack grounds, including, without limitation, any interim measure consistent with the Code adopted by a Racetrack Member in advance of the promulgation of regulations and or legislation in racing jurisdictions.

**InCompass Solutions:** Technology solutions company that provides centralized software applications and systems that serve North American racetracks and simulcast outlets. Its central database also serves as a platform for several industry safety initiatives, including the Jockey Health Information Systems.

**Member:** Racetracks, owners, breeders, horsemen, jockeys, sales companies, vets, racing fans, breed registries and the associations that represent these stakeholders who agree to uphold and support the goals and objectives of the Alliance.

**Model Rules:** A set of rules adopted by the Association of Racing Commissioners International as models for use by the various racing regulatory bodies in crafting their own administrative rules. (Model Rules referenced in this Document

and the Code are attached as Exhibit C to this Document).

**Non-Race Day:** Any day or period of time not part of a Race Day.

**Non-Race Period:** Any day or period of time not part of a Race Period.

**Official Veterinarian:** A licensed veterinarian employed by the state regulatory body who is qualified to objectively and competently perform the regulatory duties as detailed by the Model Rule **ARCI-006-070**. Some duties of the Official Veterinarian, as indicated by an asterisk (\*) in the Model Rule **ARCI-006-070** may be performed by an Association Veterinarian as long as the Association Veterinarian has no employment history or business relationship that could constitute a conflict of interest or impede in the performance of official duties.

**Phase II:** Refers to the implementation of certain standards set forth in the Code upon the commencement of live racing at a Racetrack Member's track, no sooner than calendar year 2013.

**Plan(s):** Any request for a plan or plans in this Document will be satisfied by a written Document that includes but is not limited to: a definitive series of measures to be taken, a list of responsible personnel to implement those measures, resources needed to carry out those measures, a reporting system, a compliance mechanism and a reasonable timetable for instituting change.

**Post-Mortem Veterinary Examinations:** Examinations of fatally injured horses that are conducted substantially in conformity with the recommended protocols of the AAEP including, but not limited to the identification of drugs, racing plates and any pre-existing conditions; however, such examinations shall not require full veterinary necropsies.

**Practicing Veterinarian:** A veterinarian in private practice, responsible for the day-to-day medical care of a horse.

**Race Day:** The period of time twenty-four hours prior to post time of a race in which a horse is entered to run through the release of a horse from post-race testing.

**Race Period:** The period of time beginning when a horse is entered in a race through release of the horse from post-race testing.

**Racing Participants:** People who engage in and derive income directly from horse racing activities at Racetrack Member facilities. This includes, but is not limited to racehorse owners, trainers, jockeys and breeders.

**RMTC:** Racing Medication and Testing Consortium.

**Standard Procedures:** Any request for a statement of standard procedures will be satisfied by a written document that includes but is not limited to: a definitive series of measures taken to meet an objective, a list of personnel responsible for implementing those measures, a reporting system that includes a list of individuals or agencies that regularly receive information about the program (if applicable), a compliance mechanism and a timetable.

**Starter:** The racing official responsible for dispatching the horses for a race.

**Starter's List:** A list maintained by the starter that identifies horses that are ineligible to be entered in any race because of poor, erratic or inconsistent behavior or performance in the starting gate. Any horse on the Starter's List shall be refused entry until it has been demonstrated to the starter that it has been satisfactorily loaded, schooled in, and broken away from the gate.

**Steward:** A duly appointed racing official with powers and duties specified by statute or rules.

**Stewards' List:** A list maintained by the stewards of horses that are ineligible to be entered in a race because of poor, erratic or inconsistent performance; or because of behavior on the racetrack that endangers the health or safety of other participants in racing; or there exists a question as to the exact identification or ownership of said horse, or for any other reason at the judgement of the Stewards. Such horse shall remain on the Stewards' List and be refused entry until it has been demonstrated to the Stewards that the horse can compete satisfactorily, or the question of identity or ownership has been corrected to the Stewards' satisfaction.

**Veterinarian in Charge ("VIC"):** Veterinarian with controlling authority over a program or procedure.

**Wagering Incident:** Any incident that might reasonably affect the public's confidence in Member's wagering pools including, but not limited to suspicious wagering patterns, totalisator and data communications malfunctions, substantial late ticket cancellations, and failures to stop betting after the official start of a race.

All other capitalized terms not defined above shall have the meanings attributed to such terms in the Code.

VI. QUESTIONNAIRE

A. General Information

List the following:

1. Applicant's Executive Offices:

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2. URL of Applicant's Web Site:

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3. Mailing Address:

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4. Identify the Senior Management individual or individuals to whom the compliance officer will report under your Compliance Program.

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5. List the telephone number and e-mail address for each person named above.

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6. Provide the name and address of government agency(ies) that licenses(license) Applicant.

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7. List dates of live racing to be held in 2012.

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8. List expected dates of live racing to be held in 2013.

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**B. Injury And Fatality Reporting and Prevention**

1. *Do you participate in the InCompass Equine Injury Database (EID)?*

Yes    No

If YES,

- When did you begin participation in EID?
- List veterinarian(s) responsible for completion of injury reports and indicate veterinarian's employment status (Official Veterinarian/Commission Veterinarian/Association Veterinarian).
- If applicable, list personnel responsible for data entry (if other than veterinarian(s) listed above).
  - Describe how, and by whom, information is provided to data entry personnel for EID submission.
- Provide confirmation from InCompass verifying your current participation in the EID.
- For which of the following circumstances do you enter data into the EID?

➤ Scratches

- AM - Official Veterinarian Scratches related to racing soundness?
  - If no, provide a Plan for commencement of such reporting.
- AM - Scratches submitted by trainers or private practicing veterinarians relating to illness, racing soundness or other medical conditions?
  - If no, provide a Plan for commencement of such reporting.
- PM - Veterinary scratches relating to horses injured traveling to, in, or exiting the paddock or saddling enclosure?
  - If no, provide a Plan for commencement of such reporting.
- PM - Veterinary scratches relating to horses injured or determined to be unsound in the post parade?
  - If no, provide a Plan for commencement of such reporting.
- PM - Veterinary scratches relating to gate incidents or flipped horses (Injury status unclear)?
  - If no, provide a Plan for commencement of such reporting.

➤ Racing

- Fatal Conditions (musculoskeletal injuries and/or sudden death)?
  - If no, provide a Plan for commencement of such reporting.
- Non-Fatal Conditions (musculoskeletal and/or otherwise)?
  - If no, provide a Plan for commencement of such reporting.

Initials \_\_\_\_\_

➤ Training

- Fatal Conditions (musculoskeletal injuries and/or sudden death)?
  - If no, provide a Plan for commencement of such reporting.
- Non-Fatal Conditions (musculoskeletal and/or otherwise)?
  - If no, provide a Plan for commencement of such reporting.
- When training data is submitted, who is responsible for providing information?
- Is follow up conducted to confirm the accuracy of the data received from “second-hand” sources?
- Please provide EXCEL spreadsheet (downloaded from EID Web site) of EID participation for the previous 60 days of live racing. If unable to complete for preceding 60 days because it is the beginning of a race meet or the race meet is less than 60 days, provide previous meet’s EID data. Horse and trainer names may be redacted.

If NO,

- Explain reasons for current non-participation and Plans for future participation.

2. ***Are all racehorses subject to a pre-race examination by a Regulatory or Association Veterinarian?***

Yes  No

If YES,

- List veterinarian(s) responsible for examinations and indicate veterinarian’s job title (Official Veterinarian, Association Veterinarian).
- Provide written documentation of the protocols utilized for pre-race veterinary examination, signed by Veterinarian in Charge (VIC).
- Provide written documentation of the protocols detailing lines of communication and procedures enlisted between the examining veterinarian and the stewards when the examining veterinarian determines a horse is unsuitable to participate.
- Does your examining veterinarian utilize the InCompass Pre-Race Examination module to collect and share examination data on all horses subjected to pre-race examination?

If NO,

- Explain why all horses are not subject to a pre-race examination by a Official or Association Veterinarian and describe any other measures taken to examine horses pre-race and provide Plans for future pre-race examination programs.
- Describe your efforts in advocating for adoption of pre-race examination protocols.

3. ***Are all racehorses subject to post-race observation by an Official or Association Veterinarian?***

Yes  No

If YES,

- List Veterinarian(s) in Charge (VIC) of observing horses following each race and indicate veterinarian’s job title (Official Veterinarian, Association Veterinarian).
- Provide written documentation of protocols involved in post-race veterinary observation, signed by Veterinarian in Charge (VIC).
- Provide written explanation of follow-up involved with horses observed to potentially have an injury and/or other medical condition, signed by Veterinarian in Charge (VIC).

If NO,

- Explain why all horses are not subject to post-race observation by a Official or Association Veterinarian and describe any other measures taken to examine horses post-race and describe future Plans for implementing a post-race examination program.

4. *Are all racehorses that suffer catastrophic injury during the Race Day at your facility subject to Post Mortem Veterinary Examination?*

Yes  No

If YES,

- Provide written documentation from your racing commission confirming that Post Mortem Veterinary Examinations are being performed on all horses suffering catastrophic injuries, signed by the Official Veterinarian or other appropriate racing commission representative.
- Provide written documentation of standard procedures for all horses undergoing Post Mortem Veterinary Examination, including the taking of blood, urine, and/or tissue samples for drug testing, signed by the Official Veterinarian.
- Attach an example of a Post Mortem Veterinary Examination report for a Race Day racehorse, with all identifying information redacted.
- Describe how Post Mortem Veterinary Examination information is used (e.g., racing commission annual statistical reports) and list individuals or organizations authorized to receive Post Mortem Veterinary Examination information.

If NO,

- List any circumstances under which a Post Mortem Veterinary Examination may be authorized and attach an example of a Post Mortem Veterinary Examination report for a Race Day racehorse, with all identifying information redacted.

5. *Are racehorses that suffer catastrophic injury during any Non-Race Day activity at your facility subject to Post Mortem Veterinary Examination?*

Yes  No

If YES,

- Explain the circumstances under which a horse that suffers catastrophic injury during any Non-Race Day would have a Post Mortem Examination performed.

If NO,

- Describe any future Plans where Post Mortem Veterinary Examinations will be conducted on any horse suffering catastrophic injury during any Non-Race Day.
- Describe your efforts in advocating for adoption of Post Mortem examination protocols.

6. *Do you maintain a Veterinarian's List?*

Yes  No

If YES,

- List veterinarian(s) in charge of maintaining such list and indicate veterinarian's job title (Official Veterinarian, Association Veterinarian).
- Provide written explanation of the protocols involved to determine if a horse warrants addition to the List, signed by Veterinarian in Charge.
- Provide written explanation of the protocols and procedures for a horse being removed from the Veterinarian's List, signed by Veterinarian in Charge, including what personnel are capable of physically removing a horse from the Veterinarian's List.
- Provide documentation of states or jurisdictions with whom you share Veterinarian's List information, signed by Veterinarian in Charge.
- Provide confirmation that you utilize InCompass Solutions Race Track Operating System ("RTO") for sharing Veterinarian's Lists among jurisdictions.

If NO,

- Explain why you do not maintain a Veterinarian's List and list alternative resources upon which you rely and provide a Plan for your future participation in a Veterinarian's List.



C. Safety Equipment and Safer Racing Environment

1. *Do you prohibit horses from wearing horseshoes on their front feet that have certain traction devices such as toe grabs that may restrict the natural forward slide of the hoof upon impact?*

Yes  No

If YES,

- Provide a copy of the state regulatory body rule or regulation or House Rule, signed by the appropriate issuing authority, outlining all banned traction devices.
- Provide written documentation of standard procedures for pre-race shoe inspections/changes, and the recording thereof, signed by the person(s) responsible for enforcing rules on horseshoes.
- Attach one example of your communications regarding shoe standards to your personnel with a need-to-know (such as an in-house memo) and at least one example of your communications to horsemen (e.g., overnight or condition book page) regarding shoe standards.

If NO,

- Explain why you have not adopted a horseshoe policy and describe Plans for future policy adoption.

2. *Do you require all licensed jockeys to only use cushioned riding crops in accordance with the RCI Model Rules during all races?*

Yes  No

If YES,

- Provide a copy of your House Rule or state regulatory body rule or regulation requiring cushioned riding crops, signed by appropriate issuing authority.
- Provide written documentation of standard procedures for ensuring compliance with the riding crop specifications and use of the riding crop regulations, and name(s) of individual(s) responsible for enforcement.
- Attach one example of your communications regarding riding crop standards and use of the riding crop regulations to your personnel with a need-to-know (such as an in-house memo) and an example of your communications to jockeys and trainers (e.g., overnight or condition book page) regarding riding crop standards and observance/enforcement of the riding crop regulations.

If NO,

- Explain why cushioned riding crops are not in general use and provide a Plan for their adoption in future.

3. *Are all assistant starters and licensees mounted on a horse or stable pony on association grounds at any time required to wear safety helmets?*

Yes  No

If YES,

- Provide a copy of your state regulatory body rule or regulation or House Rule requiring safety helmets for designated licensees, signed by appropriate issuing authority.
- Provide written documentation of standard procedures for ensuring compliance with the safety helmet rule(s) and name(s) of individual(s) responsible for enforcement.
- Attach an example of your communications regarding riding helmets to your personnel with a need-to-know (such as an in-house memo) and at least one example of your communications to horsemen, jockeys, exercise riders and other backstretch workers (e.g., overnight or condition book page) regarding safety helmets.

If NO,

- List any licensee not required to wear a safety helmet while mounted on a horse or a stable pony on association grounds and give detailed explanation why such licensee is not required to wear a safety helmet.
- Explain why a safety helmet rule is not currently in place and provide a Plan for future implementation.

4. ***Are all assistant starters and all licensees who are mounted on a horse or stable pony on association grounds at any time, required to wear safety vests?***

Yes  No

If YES,

- Provide a copy of your state regulatory body rule or regulation or House Rule requiring safety vests, signed by appropriate issuing authority.
- Provide written documentation of standard procedures for ensuring compliance with the safety vest rule(s) and name(s) of individual(s) responsible for enforcement.
- Attach one example of your communications regarding safety vests to your personnel with a need-to-know (such as an in-house memo) and to backstretch licensees such as exercise riders or jockeys.

If NO,

- Explain why a rule for safety vests for assistant starters or certain other licensees who may perform certain job functions on horseback is not in place, and provide a Plan for future implementation.

5. ***Are all your starting and training gates equipped with padding?***

Yes  No

If YES,

- Provide the manufacturer or other specifications for gate/padding utilized in your starting and training gates.

If NO,

- Explain why padded starting gates are not in use and provide a Plan for future implementation.

6. ***Do you have an on-site equine ambulance?***

Yes  No

If YES,

- Provide a copy of your state regulatory body rule or regulation or House Rule requiring an equine ambulance, signed by appropriate issuing authority.
- Attach a copy of the ambulance manufacturer's specifications for your equipment, if available.
- Attach a copy of the list of standard medical triage equipment contained in the equine ambulance.

If NO,

- Explain why you do not have an on-site equine ambulance and detail your alternative measures for providing emergency care to injured horses, and provide a Plan for securing an on-site equine ambulance.

7. ***Does your regulatory body have a policy for addressing substance abuse and addiction for licensees in a manner similar to the Model Rule ARCI-008-010?***

Yes  No

If YES,

- Provide a copy of your state regulatory body rule or regulation concerning substance abuse and addiction.
- Provide examples of communications to horsemen and/or employees in which you provide information on where individuals can seek assistance, if needed.
- Provide a description of any human care/social services facility or organization with which your racing facility is associated and/or funds for purposes of assisting individuals with substance abuse or addiction issues.

If NO,

- Provide a Plan for advocating your regulatory body to adopt a rule or regulation concerning substance abuse or adiction.

**8. Does your track have a program to assist personnel with Problem Gambling?**

Yes  No

If YES,

- Does your program include support for both frontside and backstretch personnel?
- Does your program reflect recommendations as provided in the ARCI model rule on Problem Gambling and the Responsible Wagering Resources Guide for Race Track Managers published by the Winners Federation?
- Please describe your in place program and provide any support materials utilized in ensuring awareness of the program and provide a plan for implementing such a program.

If NO,

- Explain why you do not have an in place program to support both front side and backstretch personnel with gambling problems.

**9. Do you fund and/or participate in independent research to promote a safer racing environment?**

Yes  No

If YES,

- Provide written documentation of your participation in/funding of independent safety research within the past 12 months.
- Attach one example of your communications regarding safety research program participation to your personnel with a need-to-know.
- Provide a list of responsible personnel, job titles and contact information.

If NO,

- Explain why you do not participate in safety research and your Plan for participating in such programs in the future.

**10. Do you have standard operating procedures for managing track surface maintenance?**

Yes  No

If YES,

- Provide written documentation of your track maintenance program including equipment used and water applied.
- Provide examples of weather data collected.
- Provide examples of daily measurement data collected and the methods used to collect data.
- Provide examples of surface sampling analysis.
- Describe equipment used on racing surfaces.

If NO,

- Explain why you do not have written standard operating procedures for your racing surface maintenance.

**11. Do you participate in racetrack surface research studies and the uniform recording of daily track maintenance focusing on safety of dirt, turf and synthetic surfaces?**

Yes  No

If YES,

- Attach one example of your communications regarding racetrack surface research study participation to your personnel with a need-to-know.
- Provide a list of responsible personnel, job titles and contact information.

If NO,

- Explain why you do not participate in racetrack surface research studies and your Plan for participating in such programs in future.

**12. Do you offer or make available continuing education for personnel involved in the safety and management of horses at your facility?**

Yes  No

If YES,

- Attach examples of your continuing education programs. For example:
  - In-house training modules relevant to horse handling, such as handbooks or videos;
  - Outside programs relevant to horse safety attended by your personnel; or,
  - Training programs relevant to horse handling offered at your facility by outside organizations (such as Groom Elite, Groom Development, or ROAP Certificate Programs).

If NO,

- Explain why you do not offer continuing education and provide your Plan for participating in such programs in future.

**13. Has your state regulatory body adopted the use of the Uniform National Trainers Test?**

Yes  No

If YES,

- Please provide a copy of the written test used in your state, signed by a steward (or appropriate testing official).

If NO,

- Please provide a copy of the written test used in your state, signed by a steward (or appropriate testing official) and provide your advocacy plans for adoption of the Uniform National Trainers Test.

**14. Do all Stewards at your facility meet minimum standards for accreditation as established by ARCI and the Racing Officials Accreditation Program (“ROAP”)?**

Yes  No

If YES,

- Provide confirmation that all Stewards meet the experience, education and examination requirements necessary to be accredited and are in good standing with all racing jurisdictions.

If NO,

- Explain why all of your Stewards are not accredited and submit your Plan to ensure that all Stewards are fully accredited in the future.

**15. Does your state regulatory authority participate in the RCI Rulings Database and regularly submit information regarding regulatory rulings on all licensees?**

Yes  No

If YES,

- Please provide a copy of the most recent submission to the RCI Rulings Database, signed by a steward.

If NO,

- Explain why your regulatory authority does not participate in the RCI Rulings Database.

**16. Do you have standard operating procedures for dealing with catastrophically injured horses at your racetrack(s) and training facilities?**

Yes  No

If YES,

- List veterinarian(s) in charge of responding to injured horses and indicate veterinarian's job title (Regulatory Veterinarian, Association Veterinarian, etc.).
- Provide written documentation of standard procedures for obtaining bio samples (blood, urine or tissue) prior to administration of euthanasia solution, signed by Veterinarian in Charge.
- Provide written documentation of standard procedures for the equine ambulance staff and veterinarians ministering to catastrophically injured horses, signed by the Veterinarian in Charge.
- Provide a written Plan for public communications regarding catastrophic injuries.

If NO,

- Explain why you do not have standard operating procedures for dealing with catastrophically injured horses and submit your Plan for such emergencies, including a Plan for public communications concerning catastrophic injuries.

**17. Does your track have an early warning system in place to warn personnel on the racetrack of loose horses?**

Yes  No

If YES,

- Describe the in place system.
- Provide written documentation of standard procedures for operating the system when it is necessary, signed by the person responsible for its operation.

If NO,

- Explain the procedures involved with warning personnel on the racetrack about loose horses..

**18. Do you maintain a Stewards' List?**

Yes  No

If YES,

- List steward(s) in charge of maintaining such list and indicate steward's job title (Association Steward, State Steward).
- Provide written explanation of the protocols involved to determine if a horse warrants addition to the list, signed by steward responsible for maintaining list.
- Provide written explanation of the protocols and procedures for a horse being removed from the list, signed by steward responsible for maintaining list.
- Provide documentation of states or jurisdictions with whom you share Stewards' List information, signed by steward responsible for maintaining list.
- If applicable, provide confirmation that you utilize InCompass Solutions' Race Track Operating System ("RTO") for sharing Stewards' Lists among jurisdictions.

If NO,

- Explain why you do not maintain a Stewards' List and list alternative resources upon which you rely and provide a Plan for your future participation in a Stewards' List.

**19. Do you maintain a Starter's List?**

Yes  No

If YES,

- Provide name and contact information for Head Starter.
- Provide written explanation of the protocols involved to determine if a horse warrants addition to the list, signed by Head Starter.

- Provide written explanation of the protocols and procedures for a horse being removed from the list, signed by Head Starter.
- Provide documentation of states or jurisdictions with whom you share Starter's List information, signed by veterinarian in charge.
- If applicable, provide confirmation that you utilize InCompass Solutions Race Track Operating System ("RTO") for sharing Starter's Lists among jurisdictions.

If NO,

- Explain why you do not maintain a Starter's List and list alternative resources upon which you rely and provide a Plan for your future participation in a Starter's List.

**20. Do you have standard operating procedures for managing outbreak of infectious disease at your racetrack(s) and training facilities?**

Yes  No

If YES,

- Provide written documentation of steps taken to reduce the potential risks associated with outbreak of infectious disease prior to an outbreak.
- List veterinarian(s) in charge of responding to reports of outbreak of infectious disease and indicate veterinarian's job title (Official Veterinarian, Association Veterinarian, etc.).
- Provide written documentation of standard procedures when there is an outbreak of an infectious disease.
- Provide a written Plan for public communications regarding outbreak of infectious disease.

If NO,

- Explain why you do not have standard procedures in place for dealing with outbreak and management of infectious disease and describe your Plan for future adoption of such procedures.

**21. Do you have standard operating procedures for managing fire safety at your racetrack(s) and training facilities?**

Yes  No

If YES,

- Provide written documentation of standard procedures when there is a fire at your racetrack(s) or training facility.
- Provide written documentation of steps taken to reduce risks of fire.

If NO,

- Explain why you do not have standard procedures in place for dealing with fire safety and provide a Plan for future adoption of such procedures.

**22. Does your track have standard operating procedures for managing the safety of human athletes, equine athletes and racing participants in its saddling paddock and walking ring?**

Yes  No

If YES,

- Provide written documentation of standard procedures for managing safety in the saddling paddock and walking rings, including the personnel involved with overseeing the procedures.

If NO,

- Explain why you do not have standard procedures in place for managing safety in the saddling paddock and walking ring and provide a Plan for future adoption of such procedures.

23. *Does your track have a standing safety committee which meets regularly to discuss issues concerning safety at your track?*

Yes  No

If YES,

- List member(s) groups represented on your safety committee.
- Provide documentation of safety committee meetings (i.e. meeting agendas or meeting minutes).

If NO,

- Explain why you do not have a standing safety committee and provide a Plan for future adoption of a safety committee.

24. *Does your track ensure that there are practicing veterinarians on duty at your track at all hours when there is either training or racing occurring?*

Yes  No

If YES,

- Describe how your track ensures that there is practicing veterinarian coverage at all hours when there is either racing or training occurring.

If NO,

- Explain why you do not ensure that there is adequate veterinarian coverage at your facility at all times when either racing or training is occurring and provide a Plan to ensure veterinary coverage in the future.

#### **D. Medication and Testing**

1. *Describe the procedure for drug testing at your facility.*

- a. How many horses are routinely selected to be sent to the test barn?
- b. Which horses are routinely selected to be sent to the test barn?
- c. What criteria are used to select non-routine horses for sampling?
- d. Are additional horses routinely selected for sampling in stakes races?

2. *Do you participate in testing for alkalinizing substances (TCO<sub>2</sub> or Milk-Shaking)?*

Yes  No

If YES,

- Provide written documentation of your state regulatory body rule or regulation or House Rule requiring testing for alkalinizing substances, signed by appropriate issuing authority.
- Provide written documentation of standard procedures for sample collection and handling, signed by the Veterinarian in Charge.

If NO,

- Explain why you do not participate in testing for alkalinizing substances and provide a Plan for testing in future and provide an advocacy Plan for adoption of rules or regulations in the future.
- Describe your efforts in advocating for adoption of regulations requiring testing for alkalinizing substances and correlating penalties for violations.

3. *Do you participate in testing for androgenic anabolic steroids for horses in training and competition?*

Yes  No

If YES,

- Provide written documentation of your state regulatory body rule or regulation or House Rule requiring testing for androgenic anabolic steroids, signed by appropriate issuing authority.

If NO,

- Explain why you do not participate in testing for androgenic anabolic steroids and provide an advocacy Plan for adoption of regulations on androgenic anabolic steroid testing.
- Describe your efforts in advocating for adoption of regulations requiring testing for androgenous anabolic steroids and correlating penalties for violations.

**4. Does your regulatory body regulate the use of Non-Steroidal Anti-Inflammatory Drugs (“NSAIDS”) in a manner consistent with ARCI Model Rule 011-020?**

Yes  No

If YES,

- Provide a copy of the state regulatory rule regarding the administration of NSAIDS, signed by the Regulatory Veterinarian.

If NO,

- Provide a copy of the state regulatory rule detailing that NSAIDS are not allowed to be administered on Race Day in your racing jurisdiction.
- Describe your efforts in advocating for adoption of regulations for use of NSAIDS and correlating penalties for violations.

**5. Has your state adopted Penalties based on drug classifications for medication violations in a manner consistent with ARCI Model Rule 011-020 (B)?**

Yes  No

If YES,

- Please provide detailed drug and therapeutic medication penalties, by classification, signed by a steward or appropriate commission representative.
- If penalties are deemed a policy decision as opposed to encoded by rule, please provide documentation that the penalty classifications are followed, signed by a steward or appropriate commission representative.

If NO,

- Please provide documentation of the existing drug and therapeutic medication penalties in place in your racing jurisdiction.

**6. Does your regulatory body regulate and test for the use of furosemide (Salix®, Lasix®) in a manner consistent with ARCI Model Rule 011-020?**

Yes  No

If YES,

- Provide a copy of the state regulatory rule regarding the use and administration of furosemide, signed by the Regulatory Veterinarian.
- Provide documentation from the official laboratory detailing the use of specific gravity and/or appropriate serum threshold.

If NO,

- Provide a copy of the state regulatory rule detailing the differences between the current rule in your jurisdiction and the identified model rule for the administration and regulation of furosemide.
- Provide a Plan regarding advocacy for the adoption of a regulation concerning testing for and using furosemide (Salix®, Lasix®).
- Describe your efforts in advocating for adoption of regulations for use of furosemide and correlating penalties for violations.



- Describe your efforts in advocating for adoption of an out-of-competition testing program and correlating penalties for violations.

**7. Do you prohibit possession or use of blood doping agents?**

Yes  No

If YES,

- Provide written documentation of your state regulatory body rule or regulation or House Rule regarding the prohibition of the possession or use of blood doping agents, signed by the appropriate issuing authority.

If NO,

- Explain why you do not prohibit the possession or use of blood doping agents and your advocacy Plan for adoption of regulations on blood doping agents.

**8. Do you participate in out-of-competition testing for blood doping agents?**

Yes  No

If YES,

- Provide written documentation of your state regulatory body rule or regulation or House Rule requiring out-of-competition testing for blood doping agents, signed by appropriate issuing authority.
- Provide written documentation detailing the procedures for sample collection and chain of custody for out-of-competition samples.

If NO,

- Explain why you do not participate in out-of-competition testing and provide an advocacy Plan for the adoption of regulations on out-of-competition testing.
- Describe your efforts in advocating for adoption of an out-of-competition testing program and correlating penalties for violations.

**9. Do you regulate or prohibit the use of Extracorporeal Shock Wave Therapy or substantially similar procedures?**

Yes  No

If YES,

- Provide written documentation of your state regulatory body rule or regulation or House Rule regarding the use of Extracorporeal Shock Wave Therapy or substantially similar procedures, signed by the appropriate issuing authority.
- If applicable, provide documentation on how the use of Extracorporeal Shock Wave Therapy or substantially similar procedures is controlled off association grounds.

If NO,

- Explain why you do not regulate or ban the use of Extracorporeal Shock Wave Therapy or substantially similar procedures and your advocacy Plan for adoption of regulations on Extracorporeal Shock Wave Therapy or substantially similar procedures.
- Describe your efforts in advocating for adoption of regulations for use of Extracorporeal Shock Wave Therapy and correlating penalties for violations.

**10. Do you regulate or prohibit the use of drugs, substances or medication that have not been approved by the United States Food and Drug Administration (“FDA”) for any use?**

Yes  No

If YES,

- Provide written documentation of your rule(s) regarding the use of Non-FDA Approved Drugs, substances or medications signed by the appropriate issuing authority.

If NO,

- Explain why you do not regulate or ban the use of Non-FDA Approved Drugs, substances or medications and your advocacy Plan for adoption of regulations on Non-FDA Approved Drugs.

**11. Do you support and promote the participation by your state racing commission in the RMTC program for the frozen storage and retrospective super testing of a suspect horse's racing plasma and/or urine samples?**

Yes  No

If YES,

- Provide an example of your communication to your state racing commission advocating its participation in the RMTC program for frozen samples and retrospective testing.

If NO,

- Explain why you do not support your state racing commission's participation in the RMTC program for frozen samples and retrospective testing and your advocacy Plan for supporting such participation in future.

**12. Have random inspections of test barn operations been performed in your facility anytime in the past?**

Yes  No

If YES,

- Provide written documentation of standard procedures for random inspections of test barn operations, signed by Veterinarian in Charge or individual responsible for overseeing inspections and giving dates of the most recent inspection(s).

If NO,

- Explain why you do not have random inspections of your test barn operations and provide a Plan for random inspections in future.

**13. Has the testing laboratory that is responsible for testing plasma and/or urine samples from your racing facility participated in an External Quality Assurance Program in the past 12 months?**

Yes  No

If YES,

- Provide written documentation that such a program has taken place, signed by the Laboratory Director or individual responsible for overseeing the testing facility and giving the number of proficiency samples tested and the target analyte(s) identified in each sample in the most recent year.

If NO,

- Explain why the laboratory has not participated in an external quality assurance program in the past 12 months.
- Describe Plans in place for the laboratory to participate in an External Quality Assurance Program in the future.

**14. Does your track have a mechanism in place to communicate with horsemen and practicing veterinarians current medication and testing protocols and, when appropriate, proposed new, regulatory authority-approved changes to medication and testing regulations and protocols?**

Yes  No

If YES,

- Describe the mechanism in place to communicate with horsemen and practicing veterinarians at your track current medication and testing protocols and, when appropriate, proposed new, regulatory authority-approved changes to medication and testing regulations and protocols.
- If applicable, list member(s) groups represented on your medication communication committee.

- Provide documentation of medication communication committee meetings (i.e. meeting agendas or meeting minutes).

If NO,

- Explain why you do not have a mechanism in place to communicate with horsemen and practicing veterinarians at your track current medication and testing protocols and, when appropriate, proposed new, regulatory authority-approved changes to medication and testing regulations and protocols and provide a Plan for implementing a program in the future.

#### **E. Security**

**1. Do you have a detailed Security Plan for your racetrack, barn area and other restricted areas within your enclosure?**

Yes  No

If YES,

- Provide written documentation of the Security Plan at your racetrack, signed by the Head of Security at your racetrack.

If NO,

- Explain why you do not have a detailed Security Plan for your racetrack, barn area and other restricted areas within your enclosure and describe your Plan for implementing one in the future.

**2. Have you participated in an independent security assessment performed by a qualified security assessment organization in the past 12 months?**

Yes  No

If YES,

- Provide written documentation of the security procedures reviewed, including dates, signed by an authorized agent of the independent security assessment organization that conducted the review.

If NO,

- Explain why you have not participated in an independent security assessment and your Plan for securing an independent security assessment.

**3. Do you require all security staff to periodically participate in security training programs?**

Yes  No

If YES,

- Provide written documentation of security training modules, list training staff or agencies (including job titles) and give dates for most recent security training program.

If NO,

- Explain why you do not require all security training staff to periodically participate in security training programs and provide a Plan for implementing security training in future.

#### **F. Safety and Health of Jockeys**

**1. Do you follow standard procedures for weighing out and weighing in of jockeys?**

Yes  No

If YES,

- Provide written documentation of your state regulatory body rule or regulation, or your House Rule, regarding weighing of jockeys, signed by appropriate issuing authority.

- Provide written documentation of standard procedures for ensuring compliance with the rule(s) regarding the weighing of jockeys and name(s) and job title(s) of individual(s) responsible for enforcement.
- Attach one example of your communications to your personnel with a need-to-know regarding the procedures for weighing jockeys (such as an in-house memo).

If NO,

- Explain why you do not have standard procedures for weighing jockeys and provide your Plan for instituting such procedures in future.

**2. Does the scale of weights used at your racetrack(s) reflect the scale of weights recommended by the Model Rule ARCI-010-020(D)?**

Yes    No

If YES,

- Provide a copy of your state regulatory body rule or regulation concerning the jockey scale of weights.

If NO,

- Provide written documentation of the scale of weights currently used at your facility, signed by the person responsible for assigning weights for races.

**3. Do all the jockeys at your racetrack(s) participate in the InCompass Solutions' Jockey Health Information System database?**

Yes    No

If YES,

- Provide a written description of procedures in place to enable jockeys to input their health information into the system, signed by the person responsible.
- Provide examples of communication used to ensure the jockeys are aware of the system.

If NO,

- Explain why jockeys at your racetrack(s) are not participating in the Jockey Health Information System and describe Plans to ensure their future participation.

**4. Is your track participating in the Jockey Injury Database?**

Yes    No

If YES,

- List the person (s) responsible for providing data for the Jockey Injury Database.
- Provide an example (redacted, if necessary) of data provided to Jockey Injury Database.

If NO,

- Explain reasons for current non-participation and Plans for future participation.

**5. Does your track have written protocols and procedures in place to provide timely, quality medical care for those who are injured or become ill on racetrack grounds?**

Yes    No

If YES,

- Provide a written description of protocols and procedures in place to provide timely, qualified medical care for those who are injured or become ill on racetrack grounds.
- Provide the name and qualifications of the track medical director or other responsible party who oversees all racetrack emergency services.
- Provide the name(s) and qualifications of track emergency medical personnel, including Nurse(s), Medical Doctor(s), Paramedic(s), Emergency Medical Technician(s), and transportation provider(s).

- Describe staffing of emergency medical personnel, including quantity of and location(s) where personnel are detailed, at all times when there is either racing or training taking place at your facility.
- Describe the facility(ies) in place at your track for emergency medical care, including equipment available for treatment.
- Describe the protocols in place for transportation of injured personnel to emergency medical facility(ies) including those off the grounds.
- Describe the equipment used to transport injured personnel to local hospitals/trauma centers.
- List the name(s) of area hospitals with which your track has a relationship provide a general description of the hospitals' level of care (including level of trauma care provided).

If NO,

- Explain why you do not have protocols and procedures in place for providing timely, quality medical care for those who become ill or are injured on racetrack grounds and provide a Plan for submitting one.

**6. Has your regulatory authority adopted the Model Rule ARCI-008-030(A)(2) and (3) concerning the qualifications required for jockeys to be eligible to compete?**

Yes  No

If YES,

- Provide a copy of your state regulatory body rule or regulation concerning the qualifications required for jockeys to compete.

If NO,

- Provide a written description of the licensing and eligibility requirements for jockeys and provide your advocacy Plans for adoption of the Model Rule.

**7. Does your racetrack(s) maintain a minimum of \$1,000,000 per incident insurance policy for all jockey participants?**

Yes  No

If YES,

- Provide evidence that a policy exists.
- Provide examples of communication to jockeys making them aware of what insurance coverage is in place on their behalf.

If NO,

- Explain what insurance is in place for jockeys and describe your Plans to provide a \$1,000,000 policy in the future.

**8. Do you and/or racing participants who compete at your racetrack(s) support programs geared toward funding jockey disability support?**

Yes  No

If YES,

- Provide examples of ways in which you either support jockey disability programs or encourage support from participants at your racetrack(s).
- Provide examples of your public endorsements of jockey disability programs.

If NO,

- Explain why you do not support or encourage support by participants in racing at your racetrack(s) of any jockey disability programs and describe your Plans for future support of programs geared toward funding jockey disability support.

**G. Aftercare and Transition of Retired Racehorses**

**1. Do you support programs to facilitate the transition and aftercare of retired racehorses?**

Yes  No

If YES,

- Provide examples of ways in which you participate in funding for equine transition programs, such as a starter fee, statutory check-off for purses or handle, public fundraiser(s) for equine retirement organization(s), direct contributions to equine retirement organizations, etc.
- Provide a description of any on-site racehorse transition facility, including names and job titles of personnel (if applicable).
- Provide examples of your public endorsements of equine retirement, such as Web links, track program ads, Public Service Announcements on in-house monitors, etc.
- Provide examples of your communications to horsemen and owners in which you give contact information for organizations that place horses in transition.
- Describe any state-funded racehorse transition programs you participate in.
- Provide written documentation of any House Rule you have regarding “zero tolerance” policies for horses sent to slaughter (if applicable). Include at least one example of public communications to horsemen regarding this policy.

If NO,

- Explain why you do not support any programs to facilitate the transition and aftercare of retired racehorses and submit any Plans for future participation in such programs.

**H. Wagering Security**

**1. Does your racetrack(s) have specific protocols in place for stop wagering devices and the chain of command for their operation?**

Yes  No

If YES,

- Provide written documentation of the protocols in place for stop wagering devices and chain of command.
- Provide written documentation of the protocols in place for situations when there is a malfunction of the stop wagering device.

If NO,

- How does your racetrack(s) close the pools at the beginning of a race?

**2. Does your racetrack(s) have the right to request and receive transactional data from guest sites and their totalisator company?**

Yes  No

If YES,

- Provide documentation of the written agreement between you as a host and a guest that stipulates the right to receive transactional wagering data.

If NO,

- Explain why you do not have the right to request and receive transactional data from your guest sites and describe your Plan to secure such information in the future.

3. *Does your totalisator provider meet the standards set forth in the Statement on Auditing Standard 70?*

Yes  No

If YES,

- Provide a written copy of the audit opinion provided to your totalisator provider indicating they meet the standards set forth in the Statement on Auditing Standard 70, signed by the person responsible for relationships with your totalisator provider.

If NO,

- Explain why your totalisator provider has not met the Statement on Auditing Standard 70 and describe your Plan for corrective measures in this area.

4. *Has your totalisator provider had its equipment tested, reviewed, and reported on by an independent equipment certification provider?*

Yes  No

If YES,

- Provide a written copy of the report provided to your totalisator provider indicating their equipment was tested, reviewed, and reported on by an independent equipment certification provider, signed by the person responsible for relationships with your totalisator provider.

If NO,

- Explain why your totalisator provider has not had its equipment tested, reviewed and reported on by an equipment certification provider and describe your Plan to secure such review and reporting in the future.

5. *Do you or your regulatory authority allow wagers into your pools from jurisdictions/facilities that allow cancel delays of any length of time?*

Yes  No

If YES,

- Explain any Plan in place to advocate for changing the policy allowing wagers into your pools from jurisdictions/facilities that allow cancel delays.

6. *Do you or your regulatory authority allow wagers into your pools from jurisdictions/facilities that have “double-hopped” from secondary jurisdictions/facilities?*

Yes  No

If YES,

- Explain any Plan in place to advocate for changing the policy allowing wagers into your pools from jurisdictions/facilities that allow “double hops.”

7. *Do you have protocols in place to make decisions whether to include or exclude guest wager pools from your wagering pools when active timing of wagers placed cannot be verified?*

Yes  No

If YES,

- Describe, in written detail, the process that takes place concerning exclusion of guest wagers from your wagering pools.

If NO,

- Explain why there are no protocols in place that are implemented in cases when timing of guest pool wagers cannot be verified and provide your Plan to implement such protocols in the future.

8. *Do you have a policy in place that determines your actions taken, as a guest, when your wagers are not included in a host’s wagering pools?*

Yes  No

If YES,

- Describe, in written detail, the policy concerning exclusion of wagers placed when you are a guest in wagering pools.
- Describe, and give examples of, the communication to customers explaining your policy for handling exclusion from a host's wagering pools.

If NO,

- Explain why there is no policy in place for handling exclusion from a host's wagering pools and provide your Plan for implementing such a policy in the future.

**9. Are your races broadcast and recorded with a timestamp display synchronized with atomic time in an Hours, Minutes, and Seconds format (HH:MM:SS)?**

Yes  No

If YES,

- What atomic clock do you synchronize the video broadcast with?
- Is the broadcast display synchronized with the totalisator record?
- How frequently are the times synchronized?
- Please provide evidence (still photo or DVD of a race running) that clearly displays atomic time on your broadcast.

If NO,

- Explain why races are not broadcast and recorded with timestamping and describe your Plan for implementing timestamp procedures in the future.

**10. Is your totalisator record keeping timestamped and synchronized with atomic time?**

Yes  No

If YES,

- What atomic clock do you synchronize the video broadcast with?
- Do you keep a log of last wager received and the official start of every race?
- Please provide a sample of the wager log and official start log.

If NO,

- Explain why there is no timestamp on totalisator logs and official start records and describe your Plan for implementing such a protocol in the future.

**11. What version of ITSP ("Intertote System Protocol") software is your totalisator provider operating under?**

**12. Do you have protocols in place that you enact upon suspicion of a Wagering Incident?**

Yes  No

If YES,

- Describe, in written detail, the protocols in place that are enacted upon suspicion of a Wagering Incident.

If NO,

- Explain why you do not have protocols in place that are enacted upon suspicion of a Wagering Incident and describe your Plan for implementing such protocols in the future.

**13. Do you have protocols in place for communications to the public regarding investigations of Wagering Incidents?**

Yes  No



If YES,

- Describe, in written detail, the protocols in place for communications to the public regarding investigations of Wagering Incidents.

If NO,

- Explain why you do not have protocols in place for communications to the public regarding investigations of Wagering Incidents and describes your future Plans to implement a public communications strategy.

14. *Describe and give examples of communications regarding the mechanism in place by which the public can report Wagering Incidents.*

15. *Do you have protocols in place to perform due diligence on wagering entities seeking access to your wagering pools?*

Yes  No

If YES,

- Describe, in written detail, the protocols implemented to perform due diligence on wagering entities seeking access to your wagering pools.

If NO,

- Explain why you do not have protocols implemented to perform due diligence on wagering entities seeking access to your wagering pools and describe your Plan for implementing a due diligence program in the future.

## **I. Compliance Program**

1. *Do you have a Compliance Program in place?*

Yes  No

If YES,

- Please attach documentation demonstrating the design, implementation and maintenance of your Compliance Program.
- Is your Compliance Program prepared in accordance with compliance guidelines issued by NTRA Safety & Integrity Alliance?
- Who is your Compliance Officer?

If NO,

- Why not?
- Describe your Plans to implement an effective Compliance Program in the future.

## **J. Other**

1. *Do you offer other programs or utilize other types of safety equipment not otherwise listed above? (For example, safety rail on racetrack, etc.)*

Yes  No

If YES, list and describe.

**EXHIBIT A**



***NATIONAL THOROUGHBRED RACING ASSOCIATION  
SAFETY & INTEGRITY ALLIANCE***

***2012  
Code of Standards***



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## **PREAMBLE**

The health and safety of our human and equine athletes and the integrity of our sport are horse racing's top priorities. To accomplish these important priorities, the National Thoroughbred Racing Association ("NTRA") has organized the NTRA Safety and Integrity Alliance ("Alliance").

Alliance membership includes racetracks, owners, breeders, horsemen, jockeys, sales companies, veterinarians, racing fans, breed registries and the associations that represent these stakeholders who agree to uphold and support the goals and objectives of the Alliance ("Members"). The Alliance's purpose is to establish standards and practices to promote safety and integrity in horse racing and to secure their implementation. Alliance Members individually and collectively are committed to ensure that the sport of horse racing is pursued in a manner consistent with high ethical standards and compliance with applicable laws and regulations.

This Code of Standards ("Code") is intended to set forth for Alliance Members a common minimum set of standards to be followed by Members in their respective roles in the horseracing industry. Members acknowledge and support the Code and will implement measures and/or abide by measures implemented by other Members, as appropriate, to adhere to the Code. Also, since the Code represents minimum standards, Members are encouraged to not only meet but exceed the standards of the Code.

This Code sets forth standards in the areas of: (1) injury reporting and prevention; (2) a safer racing environment; (3) medication and testing; (4) jockey safety and health; (5) aftercare for retired horses; and (6) wagering security. The Code further sets standards with respect to compliance and enforcement. The measures included in this Code represent the collective consideration and work product of key stakeholder organizations and individuals within the horseracing industry. These standards have been formulated through various task forces, working groups and other industry initiatives over the past several years.

This Code represents the fourth version of the standards adopted by the Alliance and, over time, as new research and recommendations which merit inclusion become available, the Code may be further amended. Racetrack Members that received re-accreditation in 2011 will be required to adhere to the 2011 Code until the expiration or revocation of the applicable twenty-four (24) month accreditation.

## **IMPLEMENTATION**

Alliance Members will use reasonable efforts available to effect reforms, including House Rules, uniform model rule development through the Association of Racing Commissioners International ("ARCI"), uniform model rule adoption at the state level and legislative advocacy. The Alliance will lead these advocacy efforts with the support and cooperation of its Members. Certain components of the reforms will be implemented once definitive conclusions are reached by the Alliance. Except as expressly provided for in this Code, all references to a specific ARCI model rule shall be deemed to include the specific ARCI model rule that existed as of January 1, 2012 and any subsequent modifications to that model rule that are consistent with this Code.

Notwithstanding anything in this Code to the contrary, the inability of a Member to comply with any provision of this Code due to contrary legislative or regulatory enactment shall not be the basis for denial or revocation of accreditation so long as the Member petitions the legislative or regulatory authority and diligently seeks to amend the contrary provision to bring it into conformity with this Code. If, however, after a reasonable period of time, a Member's advocacy fails to achieve passage of the amendment necessary to bring the contrary legislative or regulatory enactment into conformity with the Code, such failure shall result in revocation of current accreditation, awarding of provisional accreditation or denial of future accreditation.

## **COSTS**

Alliance Members agree that the costs of implementing the reforms should be the collective responsibility of the industry. Each segment of the industry must contribute to the cost of the reforms and such costs should be borne by the elements of the industry that benefit from the reform and/or cause the reform to be incurred. Specific allocation of costs is not addressed in this Code. Costs required for implementation of the Code will differ by location and thus costs must be addressed at the local level through the normal contractual and/or regulatory process.

## **UTILIZING AND ADHERING TO THE CODE**

The horse racing industry and the Alliance Membership are composed of many different constituencies. However, since much of the organized activity in horse racing takes place at the racetrack, some provisions of the Code are addressed specifically to “Racetrack Members.” Nonetheless, each Member shall strive to adhere to each of the standards in the Code specifically applicable to that Member and to ensure that its employees, contractors and/or agents adhere to those standards.

## **ABBREVIATIONS AND DEFINITIONS**

**AAEP**: American Association of Equine Practitioners.

**Accreditation**: The process by which individual Members shall be certified to be in compliance with the Code. The levels of accreditation are as follows:

**Full Accreditation**: Accreditation without condition or limitation.

**Provisional Accreditation**: Accreditation conditioned upon the future implementation of specifically identified standards according to a specified timetable in order to attain Full Accreditation.

**Provisional Accreditation Pending Regulatory Conformity with Alliance Code of Standards**: Accreditation awarded to Members meeting substantially all the standards as required by the Code with any exceptions due to non-compliance by local regulatory authority.

**Denial of Accreditation**: Non-compliance with the Code.

**ARCI**: Association of Racing Commissioners International.

**Application**: Refers to this 2010 Application for Accreditation including any and all attachments, supporting documents and all other information submitted to the Alliance by the Applicant pursuant hereto.

**Association Veterinarian**: A veterinarian employed by the racetrack association.

**Code**: Refers to the NTRA Safety & Integrity Alliance Code of Standards, as it may be amended from time to time (Attached as Exhibit A to this Document).

**Compliance Program**: A program that is a coordinated system of organizational structures and processes managed by a dedicated Compliance Officer to help ensure compliance with the Alliance safety and integrity reform standards set forth in the Alliance Code as well as applicable laws and regulations as further described in the ***National Thoroughbred Racing Association Safety & Integrity Alliance Guidance for Racetrack Member Compliance Program*** (Attached as Exhibit B to this Document).

**Horse Handlers**: Trainers, jockeys, exercise riders, veterinarians, grooms, outriders, pony people and anyone else who comes into direct contact with a horse within Racetrack Member’s racetrack enclosure.

**House Rules**: Rules promulgated by racetracks concerning activities on racetrack grounds, including, without limitation, any interim measure consistent with the Code adopted by a Racetrack Member in advance of the promulgation of regulations and or legislation in racing jurisdictions.

**InCompass Solutions**: Technology solutions company that provides centralized software applications and systems that serve North American racetracks and simulcast outlets. Its central database also serves as a platform for several industry safety initiatives, including the Jockey Health Information Systems.

**Member**: Racetracks, owners, breeders, horsemen, jockeys, sales companies, vets, racing fans, breed registries and the associations that represent these stakeholders who agree to uphold and support the goals and objectives of the Alliance.

**Model Rules:** A set of rules adopted by the Association of Racing Commissioners International as models for use by the various racing regulatory bodies in crafting their own administrative rules. (Model Rules referenced in this Document and the Code are attached as Exhibit C to this Document).

**Non-Race Day:** Any day or period of time not part of a Race Day.

**Non-Race Period:** Any day or period of time not part of a Race Period.

**Official Veterinarian:** A licensed veterinarian employed by the state regulatory body who is qualified to objectively and competently perform the regulatory duties as detailed by the Model Rule **ARCI-006-070**. Some duties of the Official Veterinarian, as indicated by an asterisk (\*) in the Model Rule **ARCI-006-070** may be performed by an Association Veterinarian as long as the Association Veterinarian has no employment history or business relationship that could constitute a conflict of interest or impede in the performance of official duties.

**Phase II:** Refers to the implementation of certain standards set forth in the Code upon the commencement of live racing at a Racetrack Member's track, no sooner than calendar year 2013.

**Plan(s):** Any request for a plan or plans in this Document will be satisfied by a written Document that includes but is not limited to: a definitive series of measures to be taken, a list of responsible personnel to implement those measures, resources needed to carry out those measures, a reporting system, a compliance mechanism and a reasonable timetable for instituting change.

**Post-Mortem Veterinary Examinations:** Examinations of fatally injured horses that are conducted substantially in conformity with the recommended protocols of the AAEP including, but not limited to the identification of drugs, racing plates and any pre-existing conditions; however, such examinations shall not require full veterinary necropsies.

**Practicing Veterinarian:** A veterinarian in private practice, responsible for the day-to-day medical care of a horse.

**Race Day:** The period of time twenty-four hours prior to post time of a race in which a horse is entered to run through the release of a horse from post-race testing.

**Race Period:** The period of time beginning when a horse is entered in a race through release of the horse from post-race testing.

**Racing Participants:** People who engage in and derive income directly from horse racing activities at Racetrack Member facilities. This includes, but is not limited to racehorse owners, trainers, jockeys and breeders.

**RMTC:** Racing Medication and Testing Consortium.

**Standard Procedures:** Any request for a statement of standard procedures will be satisfied by a written document that includes but is not limited to: a definitive series of measures taken to meet an objective, a list of personnel responsible for implementing those measures, a reporting system that includes a list of individuals or agencies that regularly receive information about the program (if applicable), a compliance mechanism and a timetable.

**Starter:** The racing official responsible for dispatching the horses for a race.

**Starter's List:** A list maintained by the starter that identifies horses that are ineligible to be entered in any race because of poor, erratic or inconsistent behavior or performance in the starting gate. Any horse on the Starter's List shall be refused entry until it has been demonstrated to the starter that it has been satisfactorily loaded, schooled in, and broken away from the gate.

**Steward:** A duly appointed racing official with powers and duties specified by statute or rules.

**Stewards' List:** A list maintained by the stewards of horses that are ineligible to be entered in a race because of poor, erratic or inconsistent performance; or because of behavior on the racetrack that endangers the health or safety of other participants in racing; or there exists a question as to the exact identification or ownership of said horse, or for any other reason at the judgement of the Stewards. Such horse shall remain on the Stewards' List and be refused entry



until it has been demonstrated to the Stewards that the horse can compete satisfactorily, or the question of identity or ownership has been corrected to the Stewards' satisfaction.

**Veterinarian in Charge ("VIC"):** Veterinarian with controlling authority over a program or procedure.

**Wagering Incident:** Any incident that might reasonably affect the public's confidence in Member's wagering pools including, but not limited to suspicious wagering patterns, totalisator and data communications malfunctions, substantial late ticket cancellations, and failures to stop betting after the official start of a race.

## **CODE OF STANDARDS**

**1. INJURY AND FATALITY REPORTING AND PREVENTION.** Timely and accurate reporting of injuries and fatalities is critical to the creation and maintenance of a national database concerning horse injuries and fatalities. This national database will be invaluable to the epidemiological study of the causes of horse injuries and fatalities as well as the determination of precautions necessary to lessen the incidence and severity of horse injuries. The individual participation in the database will be kept confidential but nationwide statistics will be made available publicly from time to time for the purpose of promoting public confidence in the injury reporting process. Injury prevention must also be accomplished by thorough pre- and post-race exams conducted by qualified Regulatory or Association Veterinarians with the authority to keep horses from running in any race until that horse is determined to be medically fit to run. In furtherance of these important objectives, each Alliance Member shall be required to do the following:

### ***A. Reporting of Injuries and Fatalities***

Member shall participate in The Jockey Club's Equine Injury Database ("EID"). Upon adoption of this Code, Member shall immediately commence reporting injuries sustained and fatalities suffered during any Race Period and any fatalities suffered during any Non-Race Period at a Member's racetrack(s). Efforts to facilitate EID data collection and reporting of all injuries sustained at a Member's racetrack(s) during a Non-Race Period will be required in Phase II of the Code.

### ***B. Pre-Race Veterinary Examinations***

Pre-race veterinary examinations shall be performed by Official Veterinarians on all horses entered at Racetrack Members' racetrack(s). Regulators shall be petitioned to adopt a mandatory protocol for pre-race veterinary examinations of horses substantially similar, in form and substance, to the ARCI model rule identified as **ARCI-011-030(A)**. In addition, so long as such model rule has not been adopted in any racing jurisdiction, Racetrack Members in such jurisdictions shall adopt a House Rule substantially similar, in form and substance, to **ARCI-011-030(A)** and make provision for an Official Veterinarian to perform such pre-race examinations, record the examination information in the electronic database that is available from InCompass Solutions, and promptly submit the information to the racing commission and/or the stewards. If, however, after a reasonable period of time, a Member's advocacy fails to achieve passage of the amendment necessary to bring the contrary legislative or regulatory enactment into conformity with the Code, such failure shall result in revocation of current accreditation, awarding of provisional accreditation or denial of future accreditation.

### ***C. Post-Race Veterinary Examinations***

Post-race inspections shall be performed by Official Veterinarians on all horses at the conclusion of every race run at Racetrack Members' racetrack(s) to determine if horses are injured or return lame or unsound. To the extent the regulatory authorities do not so regulate post-race veterinary inspections, Members shall advocate the adoption of a mandatory protocol for post-race veterinary inspections. In addition, so long as such a rule has not been adopted in a racing jurisdiction, Racetrack Members shall adopt a House Rule and make provision for an Official Veterinarian to perform such post-race inspections, record the examination information, and promptly submit the information to the racing commission and/or the stewards.

### ***D. Post-Mortem Veterinary Inspections***

To facilitate accurate and complete reporting as part of EID, Post-Mortem Veterinary Examinations shall be performed on all horses that die or are euthanized during a Race Period or a Non-Race Period at Racetrack Members' racetrack(s), based on the protocols detailed in the **AAEP Guidelines for Necropsy of Racehorses**.

To the extent the regulatory authorities do not adopt a mandatory protocol for Post-Mortem Veterinary Examinations consistent with the AAEP Guidelines for Necropsy of Racehorses, Members shall advocate for the adoption of protocols for Post-Mortem Veterinary Examinations. In addition, so long as such protocols have not been adopted in any racing jurisdiction, Racetrack Members in such jurisdictions shall adopt a House Rule and provide appropriate veterinary personnel to perform such Post-Mortem Veterinary Examinations, record the examination information, and promptly submit the information to the EID. If, however, after a reasonable period of time, a Member's advocacy fails to achieve passage of the amendment necessary to bring the contrary legislative or regulatory enactment into conformity with the Code, such failure shall result in revocation of current accreditation, awarding of provisional accreditation or denial of future accreditation.

#### ***E. Veterinarians' List***

Racetrack Members shall maintain a Veterinarians' List under guidelines established by the ARCI Model Rule **ARCI-011-030(B)**, Veterinarians' List, which states that the Official Veterinarian shall maintain the Veterinarians' List of all horses that are determined to be unfit to compete in a race due to illness, physical distress, unsoundness, infirmity, non-permitted medication or any other medical condition. Members must adhere to ARCI model rules, which state that a horse may be removed from the Veterinarians' List when, in the opinion of the Official Veterinarian, (1) the condition which caused the horse to be placed on the Veterinarians' List is resolved and (2) the horse's status is returned to that of racing soundness.

Further, Members shall require Official Veterinarian participation in InCompass Solutions' Veterinarians' List Module. Members participating in the Veterinarians' List module shall share their Veterinarians Lists with other jurisdictions participating in the module. Participating Members will honor each other's list through a system of reciprocity.

**2. SAFETY EQUIPMENT AND SAFER RACING ENVIRONMENT.** The horse racing industry as a whole must collectively invest in an infrastructure that is needed to make a safer racing environment. Alliance Members shall adopt the following safety measures:

#### ***A. Shoes and Hoof Care***

Racetrack Members shall require the elimination of toe grabs greater than 4mm and other traction devices on front horse shoes in Thoroughbred racing. So long as such rules have not been adopted in a Member's racing jurisdiction, Members in such jurisdictions shall adopt and/or adhere to a House Rule pertaining to the elimination of toe grabs greater than 4mm and other traction devices on front horse shoes in Thoroughbred racing.

#### ***B. Riding Crop***

Regulators shall be petitioned to adopt the ARCI Model Rule **ARCI-010-035(E)(7)**, pertaining to the use of crops and the ARCI Model Rule **ARCI-010-035(A)(1)(a-b)**, pertaining to the specifications of crops to be utilized. So long as such rules have not been adopted in a racing jurisdiction, Members in such jurisdictions shall adopt and/or adhere to House Rules consistent with the ARCI Model Rule **ARCI-010-035(E)(7)**, relating to the use of crops and the ARCI Model Rule **ARCI-010-035(A)(1)(a-b)**, pertaining to the specifications of crops to be utilized.

#### ***C. Safety Helmet and Safety Vest***

Regulators shall be petitioned to adopt the ARCI Model Rules **ARCI-008-010(Z)(1-2)**, pertaining to the wearing of Safety Helmets and Safety Vests, including modifications to the Model Rule based on any subsequent recommendations by The Jockeys' Guild. So long as such rules have not been adopted in a racing jurisdiction, Members in such jurisdictions shall adopt and/or adhere to House Rules consistent with the ARCI Model Rules **ARCI-008-010(Z)(1-2)**, pertaining to the wearing of Safety Helmets and Safety Vests. Further, until such time that ARCI Model Rule **ARCI-008-010(Z)(1)** requires all assistant starters wear a properly secured Safety Helmet at all times when handling a horse, Racetrack Members shall adopt and adhere to a House Rule requiring use of a Safety Helmet by all assistant starters at all times when handling a horse.

#### **ARCI 008-010(Z)(1)**

Any licensee mounted on a horse or stable pony on association grounds must wear a properly secured safety helmet at all times. The licensee is responsible for providing sufficient evidence of his/her helmet meeting one of the following minimum safety standards: American Society for Testing and Materials (ASTM 1163); UK Standards (EN-1384 and PAS-015); or, Australia/New Zealand Standard (AS/NZ 3838).

#### **ARCI 008-010(Z)(2)**

Any person mounted on a horse or stable pony on the association racing surface, all assistant starters and anyone handling a horse in a starting gate must wear a safety vest at all times. The safety vest must comply with one of the following minimum standards: (a) British Equestrian Trade Association (BETA):2000 Level 1; (b) Euro Norm (EN) 13158:2000 Level 1; (c) American Society for Testing and Materials (ASTM) F2681-08; (d) Shoe and Allied Trade Research Association (SATRA) Jockey Vest Document M6 Issue 3; or, (e) Australian Racing Board (ARB) Standard 1.1998.

### **D. Safety Equipment**

#### **1. Padded Starting Gate**

Regulators shall be petitioned to adopt the ARCI Model Rule **ARCI-007-020(F)(1)**, pertaining to padded starting gates. So long as such rule has not been adopted in any racing jurisdiction, Racetrack Members in such jurisdictions shall adopt a House Rule consistent with the ARCI Model Rule **ARCI-007-020(F)(1)**, relating to padded starting gates.

#### **2. Equine Ambulance**

Racetrack Members shall adhere to the ARCI Model Rule **ARCI-007-020(I)(1-6)**, pertaining to the provision of a horse ambulance or shall adopt a House Rule consistent with the ARCI Model Rule **ARCI-007-020(I)(1-6)**, pertaining to the provision of a horse ambulance.

### **E. Substance Abuse and Addiction**

Regulators shall be petitioned to adopt the ARCI Model Rule **ARCI-008-010(H)** pertaining to substance abuse and addiction and testing of licensees.

### **F. Safety Research**

Racetrack Members shall participate in and/or fund industry safety research in areas including but not limited to racetrack surface studies, epidemiological studies, and other studies which are designed to promote a safer racing environment for humans and horses.

### **G. Racing Surface Maintenance**

Racetrack members shall have protocols in place to manage the maintenance of all racing surfaces. These protocols shall include, but not be limited to, the following:

- 1) On a daily basis, document the specific maintenance procedures performed on the racing surface including, but not limited to, equipment used and any water applied to ensure consistency of maintenance;
- 2) On a daily basis, collect weather data and utilize weather resource support for track maintenance decisions;
- 3) Develop a daily surface measuring program utilizing going stick, Clegg hammer, pentrometer or other compaction testing device; race times; moisture measurements or other relevant data. Use of this data may include comparison of outcomes for the surface on an annual basis;
- 4) Conduct daily measurement of racetrack cushion for consistent depth. Cushion measurement shall be used to determine harrow depth;
- 5) Perform periodic testing of surface materials to ensure consistency both over time and around the surface of all racing and training surfaces.

- 6) Perform regular track surveying to insure grades and elevations are uniform;
- 7) Document methods used to ensure that a consistent base or pad exists under the cushion to support the hoof;
- 8) Document methods used by the track to ensure that the composition is consistent at all locations on the track;
- 9) Document any repair or maintenance to the equipment used on the racing surface.

#### ***H. Safety Training and Continuing Education***

Racetrack Members shall provide periodic training to all racetrack employees having direct contact with the horse, including assistant starters concerning safe practices to be followed in the conduct of their jobs. All Members shall provide periodic training to their employees having direct contact with the horse concerning safe practices to be followed in the conduct of their jobs, e.g. Groom Elite Program, Groom Development Program, Racing Officials Accreditation Program, and the NTRA Track Superintendent Field Days.

Regulators shall be petitioned to adopt the RCI Model Rule **ARCI 008-020(4)** requiring at least four (4) hours annual Continuing Education for trainers, beginning no later than January 31, 2012.

Further, Racetrack Members shall adhere to the RCI Model Rule **ARCI 006-015(A)** requiring accreditation of all stewards employed by the racetrack and, where necessary, shall petition regulators to adhere to RCI Model Rule **ARCI 006-015(A)** requiring accreditation of all stewards employed by regulatory bodies.

Racetrack Members shall encourage participation by Racing Officials in the Racing Officials Accreditation Program (ROAP) Certification Program.

Upon application for accreditation, Racetrack Member shall submit its Training and Continuing Education Plan.

#### ***I. Uniform National Trainers Test***

Racetrack members shall petition their regulatory authority to adopt the use of the Uniform National Trainers Test.

#### ***J. Catastrophic Injury Planning and Procedures***

Racetrack Members shall plan for and have protocols in place for instances of catastrophic injury to horses during racing and training at Racetrack Members' racetrack(s) and training facilities. Such planning shall include, but not be limited to appropriate means of communication to the public, either through the AAEP On-Call Program or AAEP trained spokespersons. Further, racetrack shall have an operable on-track warning system and operating protocols in place for incidents occurring during training hours designed to sufficiently alert and provide notice to personnel on the racetrack.

#### ***K. Infectious Disease Management***

Racetrack members shall plan for and have protocols in place for instances of infectious disease outbreak within their enclosures. Such protocols shall be based on guidelines recommended by **AAEP's Guidelines for the Management of Outbreak of Infectious Disease**.

#### ***L. Fire Safety Planning and Procedures***

Racetrack members shall plan for and have protocols in place for instances of fire within their enclosures. Such protocols shall be based on the RCI Model Rule **ARCI-007-025(B)**, Fire Prevention.

#### ***M. Paddock Safety***

Racetrack Members shall plan for and have protocols in place to manage the safety of their Saddling Paddocks and Walking Rings. Such protocols should include crowd management policies as well as emergency response procedures for human and equine injuries.

## *N. Safety Committee*

Racetrack Members shall establish a standing racetrack Safety Committee. Safety Committees shall include, but not be limited to, representatives of the following stakeholder groups: Track Management, Track Medical Personnel, Jockeys, Horsemen, Veterinarians, and Security. Committees shall meet regularly upon commencement of a Member's race meet and as necessary thereafter.

## *O. Veterinary Care*

Racetrack Members shall make certain that a practicing veterinarian is available for treatment at all times during Racing Periods and training hours. An organized rotation among practicing veterinarians to ensure coverage throughout Racing and training hours shall be considered a best practice.

**3. MEDICATION AND TESTING:** Without proper pre- and post-race testing and security procedures, horse health and safety can be compromised. The Alliance believes that the regulation of drugs and therapeutic medications be consistent on a nationwide basis to better facilitate the training and racing of horses in multiple states. Members shall therefore insist on the implementation of consistent rules and penalties regarding medication and testing as follows:

### *A. Uniform Medication Rules and Penalties*

Members shall insist that local regulatory authorities regulate drugs and therapeutic medications consistent with ARCI Model Rules, **ARCI-011-010**, **ARCI-011-015**, and **ARCI 011-020** based on RMTC recommendations. Further, Members shall insist that local regulatory authorities adopt uniform minimum penalties consistent with ARCI Model Rules, **ARCI-011-020(B)**, based on RMTC recommendation.

To the extent the regulatory authorities do not so regulate drugs and therapeutic medications in accordance with ARCI Model Rules, **ARCI-011-010**, **ARCI-011-015**, and **ARCI 011-020** and adopt minimum penalties consistent with ARCI Model Rules, **ARCI-011-020(B)** the Members shall advocate the adoption of such rules and penalties by the regulatory authority. If, however, after a reasonable period of time, a Member's advocacy fails to achieve passage of the amendment necessary to bring the contrary legislative or regulatory enactment into conformity with the Code, such failure shall result in revocation of current accreditation, awarding of provisional accreditation or denial of future accreditation.

### *B. Alkalinizing Substances*

Racetrack Member shall prohibit and test for the use of alkalinizing substances in the racing of Thoroughbreds, consistent with RMTC recommendations that establish uniform threshold levels, pre-race sampling protocols, and effective testing procedures to detect prohibited levels of carbon dioxide in Thoroughbred racehorses.

To the extent the local regulatory authorities do not so regulate alkalinizing substances, the Members shall advocate the adoption of such rules by the regulatory authority. If, however, after a reasonable period of time, a Member's advocacy fails to achieve passage of the amendment necessary to bring the contrary legislative or regulatory enactment into conformity with the Code, such failure shall result in revocation of current accreditation, awarding of provisional accreditation or denial of future accreditation.

Upon application for accreditation, Racetrack Member shall submit its plan for prohibiting and testing for alkalinizing substances.

### *C. Exogenous Anabolic Steroids*

Racetrack Member shall prohibit the use of exogenous anabolic steroids in training and in competition in a manner consistent with the ARCI model rule **ARCI-011-020(J)**, based on RMTC recommendations. To the extent the regulatory authorities do not so regulate exogenous steroids, Members shall advocate the adoption of such rules by the regulatory authority.

To the extent the regulatory authorities do not so regulate exogenous steroids, Members shall advocate the adoption of such rules by the regulatory authority. If, however, after a reasonable period of time, a Member's advocacy fails to achieve passage of the amendment necessary to bring the contrary legislative or regulatory

enactment into conformity with the Code, such failure shall result in revocation of current accreditation, awarding of provisional accreditation or denial of future accreditation.

#### ***D. Shock Wave Therapy***

Member shall ensure that Extracorporeal Shock Wave Therapy be utilized in a manner consistent with the ARCI Model Rule **ARCI-011-015(5)**.

To the extent the regulatory authorities do not so regulate Extracorporeal Shock Wave Therapy, Member shall advocate the adoption of such rules by the regulatory authority. If, however, after a reasonable period of time, a Member's advocacy fails to achieve passage of the amendment necessary to bring the contrary legislative or regulatory enactment into conformity with the Code, such failure shall result in revocation of current accreditation, awarding of provisional accreditation or denial of future accreditation.

#### ***E. Out of Competition Testing***

Members shall insist that local regulatory authorities institute out of competition testing for blood and/or gene doping agents in a manner consistent with the ARCI model rule **ARCI-011-022**, based on RMTC recommendations.

To the extent the regulatory authorities do not so regulate out of competition testing, Members shall advocate the adoption of such rules by the regulatory authority. If, however, after a reasonable period of time, a Member's advocacy fails to achieve passage of the amendment necessary to bring the contrary legislative or regulatory enactment into conformity with the Code, such failure shall result in revocation of current accreditation, awarding of provisional accreditation or denial of future accreditation.

#### ***F. Frozen Sample Testing***

Members shall support and promote the participation by state racing commissions in a program for the frozen storage and retrospective super testing of suspect horse racing plasma and/or urine samples.

#### ***G. Laboratory Quality Assurance***

Members shall support and promote the participation by its official testing laboratory in an external Alliance approved Quality Assurance Program. Programs that qualify include, but are not limited to: the Testing Integrity Program, Interstate Drug Testing Alliance, Racing Medication and Testing Consortium and Association of Official Racing Chemists.

#### ***H. Security Assessment and Training***

1. Racetrack Members shall participate in a security assessment performed by an Alliance approved qualified security assessment organization.

A security assessment should include, but not be limited to:

- (1) A physical review of the facility's perimeter;
  - (2) Backstretch accessibility review;
  - (3) Licensee authentication review;
  - (4) Review of security personnel procedures (including but not limited to: hiring, training and supervision of backstretch security personnel; and review of general security practices;
  - (5) Security Department integration/liaison with outside law enforcement or industry security regulatory resources.
2. Racetrack Member may be subject to random on-site inspection and assessment of medication and drug testing standards and protocols as established by RMTC, to include, at a minimum, examination of test barn and chain of custody procedures.

Racetrack Members shall be required to submit a plan to the Alliance for implementing recommendations made as a result of the security assessment or assessment of medication and drug testing standards and protocols.

3. Racetrack Members shall plan for and have protocols in place for racing security. Such planning and

protocols may be based on *Security Recommendations of the RMTC and the NTRA Safety & Integrity Alliance*, which may be found attached as Exhibit 4.

4. Racetrack Members shall require all security staff to periodically participate in a security training program conducted in conformity with training protocols to be provided by the Alliance.

#### ***I. Medication and Testing Education Committee***

Racetrack Members, in cooperation with their Stewards and/or regulatory authority, shall coordinate periodic communication with their horsemen and practicing veterinarians in writing and where practical, through information sessions, concerning proposed changes in medication and testing regulation and protocols.

**4. SAFETY AND HEALTH OF JOCKEYS:** The health and safety of human athletes is one of the top priorities of the Alliance. Members must take affirmative steps to assure the public and participants that all human athletes are competing at top form with the benefit of the best medical care readily available. Consequently, Members are required as follows:

#### ***A. Jockey Weights***

Members shall adhere to the ARCI Model Rule ***ARCI-010-035(C)(7)(a-b)***, regarding the equipment included when weighing jockeys.

#### ***B. Jockey Scale of Weights***

Racetrack Member shall petition its regulatory body to adopt the ARCI Model Rule, ***ARCI-010-020(D)***, pertaining to the jockey scale of weights.

#### ***C. Jockey Health Information System***

Members, through cooperative efforts with Jockeys' Guild, Inc., shall require participation by members of their jockey colony in the InCompass Solutions' Jockey Health Information System, to the extent it is consistent with HIPAA guidelines, which allows confidential access to a rider's detailed medical records by authorized medical personnel.

#### ***D. Jockey Qualifications***

Regulators shall be petitioned to adopt the ARCI Model Rule, ***ARCI-008-030(A)((2) and (3)***, pertaining to the qualifications for licensing jockeys.

#### ***E. Ambulance Support***

Racetrack Member shall adhere to the ARCI Model Rule ***ARCI-007-020 (A)(6), (8) and (9)*** regarding a properly equipped and staffed ambulance on the racetrack during training and racing hours.

#### ***F. Medical Care***

Racetrack Members shall plan for and have protocols in place for instances of injury to jockeys and other racetrack personnel. Such planning and protocols shall be based on ***Medical Care Recommendations of Jockeys' Guild, Inc. and the NTRA Safety and Integrity Alliance Medical Care Committee***, which can be found attached as Exhibit 5.

#### ***G. Insurance***

In racing states where workers compensation benefits are not afforded jockeys by statute or regulation, Racetrack Members shall maintain a minimum standard of \$1,000,000, per incident, worth of accident medical expense coverage for all jockey participants.

#### ***H. Insurance***

Racetrack Member shall petition its regulatory body to adopt the ARCI Model Rule, ***ARCI-007-025(H)***,

pertaining to the posting of Jockey Insurance coverage in the jockeys' quarters.

### ***I. Jockey Disability Support***

As advocates for jockey health and safety, the Alliance and the horse racing industry as a whole share in the responsibility for providing care for disabled jockeys. Racetrack Members shall encourage participation by all Racing Participants in funding jockey disability support programs such as the Permanently Disabled Jockeys Fund.

### ***J. Jockey Injury Database***

In an effort to learn more about injuries sustained by riders on a nation-wide basis, Members shall participate in a program coordinated by the Jockeys' Guild geared toward the collection of data associated with rider injuries sustained at their racetrack.

**5. AFTERCARE AND TRANSITION OF RETIRED RACEHORSES:** As advocates for the thoroughbred racehorse, the Alliance and the horse racing industry as a whole share in the responsibility for providing care and/or retraining of racehorses after they can no longer compete on the racetrack.

Racetrack Members shall affiliate with recognized placement/adoption program(s) that meet AAEP criteria. Member Tracks shall help facilitate the transfer of horses to its affiliated recognized placement/adoption program(s) by doing such things as: Providing owners and trainers with contact information for recognized placement/adoption program(s); promoting placement/adoption program(s); cooperating with state funded programs; providing stalls and/or staff to help facilitate the transfer of horses to affiliated recognized placement/adoption facilities; or other means intended to assist with the placement of horses in transition. Racetrack Members shall participate in and facilitate a funding strategy that shares the costs of funding among Racing Participants through mutually agreed upon methods. Racetrack member shall readily promote its aftercare program through its track website.

**6. WAGERING SECURITY:** A high degree of wagering security is vital to ensure public confidence in pari-mutuel wagering. Accordingly, Racetrack Members shall adopt uniform protocols relating to Wagering Incidents.

#### ***A. Wagering Incident Prevention Protocols:***

1. Member shall adhere to the ARCI Model Rule **ARCI 004-014(A)(2)(d)** regarding stop wagering devices and the chain of command for responsibility for stop wagering;
2. Member shall add language to its simulcast sales contracts that stipulates that the Member has the right to request and receive transactional data (tickets sold, cashed, canceled, and time verifications), including Inter-Tote System Protocol ("ITSP") logs from each guest site and each guest site's respective totalisator provider;
3. Member's totalisator provider shall either (a) provide proof that the totalisator provider meets the standards set forth in the Statement on Auditing Standard 70 ("SAS 70") concerning in-place internal controls; or (b) provide proof that the totalisator provider's equipment has been tested, reviewed and reported on favorably by a mutually agreed upon equipment certification provider;
4. To minimize pool transfer delays, the practice of cancel delays shall be discontinued, unless cancel delays are allowed by statute or regulation, in which case Member shall advocate for adoption of regulatory action disallowing the practice of cancel delays;
5. To minimize pool transfer delays, the practice of double hops shall be discontinued, unless double hops are allowed by statute or regulation, in which case Member shall advocate for adoption of regulatory action disallowing the practice of double hops;
6. Member shall have protocols in place which mandate exclusion of any guest's wagering pool when the Racetrack Member cannot verify that all wagers in the guest's wagering pool were received prior to the official start of the race;



7. Member shall have protocols in place and shall publicize its policies to its wagering customers when, as a guest, it is excluded from a host's wagering pool;
8. Timing systems associated with the video broadcast and recording and with totalisator record keeping shall be synchronized with atomic time in a Hours, Minutes, and Seconds format (HH:MM:SS). Time stamps shall be placed on final totalisator transactions to assist in the validation of the official time of pool closing. Member shall record the date and time (in hours, minutes, and seconds) of the official start time of every race;
9. Member shall conduct regular compliance checks with its totalisator and audio-visual provider to confirm compliance with time stamp protocols required in Subsection 6.A.6. above;
10. Member shall require its totalisator provider to operate using the most current version of ITSP, as adopted by the 2020 Committee of the Thoroughbred Racing Associations of North America.

#### ***B. Wagering Incident Investigation Protocols***

Member shall adopt the following protocols relating to any Wagering Incident:

1. Member shall promptly conduct a thorough investigation of any and all suspected Wagering Incidents. If, after conducting its investigation, a Member reasonably suspects that a Wagering Incident may have occurred, Member shall immediately inform its jurisdictional regulatory authority of the occurrence of a suspected Wagering Incident;
2. After notifying the appropriate regulatory authority of the occurrence of a suspected Wagering Incident, Member shall promptly provide transactional data and video of the race to the regulatory authority and/or to other investigatory entities where reasonably requested;
3. Public Communication regarding Wagering Incidents which the Member has determined may potentially impact wagering security shall be coordinated with the regulatory authority investigating the potential Wagering Incident. Prompt and detailed public notification is encouraged in all circumstances except those when an ongoing investigation may be compromised;
4. Member shall implement a Wagering Incident reporting mechanism that is easily accessible to the wagering public and employees who might have knowledge of the occurrence of a Wagering Incident.

#### ***C. Wagering Pool Due Diligence***

Members shall adopt minimum requirements for wagering entities to be permitted access into their simulcast wagering pools. These requirements include, but are not limited to, disclosure of licensing and regulatory supervision of the entity, identification and review of all officers, directors, partners and shareholders with a five percent or greater share of ownership or beneficial interest and all top level management personnel, where business is conducted (country, state/province of wagering hubs, and jurisdictions from which wagers are accepted), technology and vendors utilized, and registered Web site addresses. Member or its agent shall verify the aforementioned information.

### **III. ADHERENCE AND ENFORCEMENT**

#### ***A. Compliance Program***

Members shall implement an effective compliance program to ensure adherence to this Code. The Alliance shall develop a guidance document for use by Members to assist them in their program development. Implementation of an effective compliance program consistent with Alliance guidance shall be required for accreditation.

### ***B. Condition for Accreditation***

Members shall adhere to this Code including any House Rule promulgated and implemented pursuant to this Code as a condition for maintaining Alliance accreditation.

Members shall be subject to periodic audit and/or review at Member's expense (but such expense to be agreed to by the Alliance and Member in advance) by the Alliance (or its designee) for purposes of certifying the Member's accreditation status under the Alliance.

### ***C. Enforcement***

Members satisfying substantially all conditions for certification shall receive full accreditation for a period of twenty-four (24) months, provided Member continues to adhere to Alliance standards during that time period. Members satisfying substantially all conditions for certification except for specifically identified standards may receive provisional accreditation for a period of twenty-four (24) months provided Member satisfies unmet conditions in a specified timeframe and further adheres to all other Alliance standards during that time period. Should a full or provisionally accredited Member be found to be in breach of Alliance standards, such Member may be entitled to a probationary accreditation subject to curing the deficiency or deficiencies in a specified time frame. Any Member who has been found to have materially breached this Code may have its accreditation revoked by the Alliance after notice of and reasonable opportunity to cure such breach. Further, the Alliance may publish on its Web site the names and accreditation status of all Members.



**EXHIBIT 1**



**NATIONAL THOROUGHBRED RACING ASSOCIATION  
SAFETY & INTEGRITY ALLIANCE**

***Model Rules Referenced***



## ***ARCI-004-014 Authorized Pari-mutuel Wagering Entity Requirements***

### ***A. Totalisator System Standards - Facilities and Equipment***

#### **(2) Hardware Requirements.**

- (d) Stop wagering devices. The totalisator company shall install two separate devices that activate the stop wagering function of the totalisator system in a manner consistent with stop wagering procedures approved by the Commission.
  - (A) The primary device must be located in or near the stewards or racing judges, in a location approved by the Commission, to issue the stop wagering command during normal operations and activate the “off bell.”
  - (B) The secondary “back up” device must be installed in the totalisator room to allow the totalisator operator to issue the stop wagering command if a totalisator malfunction or human error prevents the totalisator system from activating the stop wagering function at the appropriate time.
  - (C) The totalisator company or mutuels department shall ensure that stop wagering occurs.
  - (D) The totalisator company, for good reason, may request from the Commission additional or alternative stop wagering devices.

## ***ARCI 006-015 Stewards***

### ***A. Accreditation***

To qualify for appointment as a Steward, the appointee shall meet the experience, education and examination requirements necessary to be accredited by the Racing Officials Accreditation Program in association with the Universities of Arizona and Louisville and be in good standing with all racing jurisdictions.

## ***ARCI 006-070 Official Veterinarian***

### ***A. General***

The official veterinarian shall:

- (1) be employed by the Commission or similar agency having jurisdictional authority;
- (2) be a graduate veterinarian and be licensed to practice in this jurisdiction;
- (3) be qualified to objectively and competently provide the regulatory duties described herein;
- (4) refuse employment or payment, directly or indirectly, from any horse owner or trainer of a horse racing or intending to race in this jurisdiction while employed as the official veterinarian for the commission;
- (5) refrain from directly treating or prescribing for any horse under his/her jurisdiction except in cases of emergency, accident or injury;
- (6) have no employment history or business relationship prior to employment as the official veterinarian that could constitute a conflict of interest or impede in the performance of official duties.

### ***B. Responsibilities***

Should the Commission be unable to provide adequate veterinary staffing to fulfill the duties described below, some of the official veterinarian responsibilities, as indicated by an asterisk (\*), may be shared with or deferred to, an association-employed veterinarian. The association-employed veterinarian is responsible for adhering to and upholding the rules and regulations of the commission and shall be accountable to the commission.

The official veterinarian shall:

- (1) \* recommend to the stewards any horse deemed unsafe to be raced, or a horse that it would be inhumane to allow

to race;

- (2) \* conduct pre-race inspections on all potential starters on race day;
- (3) \* inspect any horse when there is a question as to the physical condition of such horse independent of the horse's entry status;
- (4) \* be present in the paddock during saddling, on the racetrack during the post parade and at the starting gate until the horses are dispatched from the starting gate for the race;
- (5) \* recommend to the stewards the scratching of any horse that is, in the opinion of the official veterinarian, injured, ill, or otherwise unable to compete due to a medical or health-related condition;
- (6) \* inspect any horse which appears in physical distress during the race or at the finish of the race; and shall report such horse together with his/her opinion as to the cause of the distress to the stewards and to the official veterinarian, if the inspection was done by either the racing veterinarian or an association-employed veterinarian;
- (7) \* provide emergency medical care to horses injured racing and effect case transfer to the practicing veterinarian;
- (8) \* be authorized to humanely destroy any horse deemed to be so seriously injured that it is in the best interests of the horse to so act; and
- (9) \* report to the Commission the names of all horses humanely destroyed or which otherwise expire at the meeting and the reasons therefore;
- (10) \* maintain all required records of postmortem examinations performed on horses which have died within the jurisdiction of the Commission;
- (11) \* maintain the Veterinarian's List of horses ineligible to race;
- (12) supervise and control the Test Barn;
- (13) supervise the taking of all specimens for testing according to procedures approved by the Commission;
- (14) provide proper safeguards in the handling of all laboratory specimens to prevent tampering, confusion, or contamination and assure sample integrity;
- (15) provide the stewards with a written statement regarding the nature and seriousness of all laboratory reports of prohibited substances in equine samples.
- (16) have jurisdiction over the practicing licensed veterinarians within the enclosure for the purpose of these rules;
- (17) review and consult with the applicants and the stewards/Commission regarding Commission license applications of practicing veterinarians, veterinary technicians or assistants, vendors of medical supplies and equipment, non-veterinarian health care providers (massage therapists, nutritionists, physical therapists, etc.);
- (18) \* cooperate with practicing veterinarians and other regulatory agencies to take measures to control communicable and/or reportable equine diseases.

## ***ARCI 007-020 Facilities And Equipment***

### ***A. Facilities for Patrons and Licensees***

- (6) An association shall provide a properly equipped to transport ambulance, staffed with at least one certified paramedic during training and two certified paramedics during racing hours. If the ambulance is being used to transport an individual, the association may not conduct a race, or allow horses with riders on the racetrack, until the ambulance is replaced.
- (8) Unless otherwise approved by the Commission or the stewards, an ambulance shall follow the field at a safe distance during the running of races.
- (9) The ambulance must be parked at an entrance to the racing strip except when the ambulance is being used to transport an individual or when it is following the field during the running of a race.

### ***F. Starting Gates***

- (1) During racing hours, an association shall provide at least two operable padded starting gates, which have been approved by the Commission.

### ***I. Equine Ambulance***

- (1) An association shall provide an equine ambulance staffed by trained personnel on association grounds on each day that the racetrack is open for racing or training.
- (2) The ambulance must be properly ventilated and kept at an entrance to the racing strip when not in use.
- (3) The ambulance must be a covered vehicle that is low to the ground and large enough to accommodate a horse in distress. The ambulance must be able to:
  - (a) navigate on the racetrack during all weather conditions; and
  - (b) transport a horse off the association grounds.
- (4) The ambulance must be equipped with:
  - (a) large, portable screens to shield a horse from public view;
  - (b) ramps to facilitate loading a horse;
  - (c) adequate means of loading a horse that is down;
  - (d) a rear door and a door on each side;
  - (e) a padded interior;
  - (f) a movable partition to initially provide more room to load a horse and to later restrict a horse's movement;
  - (g) a shielded area for the person who is attending to the horse; and
  - (h) an adequate area for the storage of water and veterinary drugs and equipment.
- (5) An association may not conduct a race unless an equine ambulance or an official veterinarian-approved substitute is readily available.
- (6) The equine ambulance, its supplies and attendants and the operating procedures for the equine ambulance must be approved by the official veterinarian.

#### ***ARCI-007-025 Operations***

##### ***B. Fire Prevention***

- (1) An association shall develop and implement a program for fire prevention on association grounds. An association shall instruct employees working on association grounds of the procedures for fire prevention.
- (2) Not later than \_\_\_ days before the first day of a race meeting, an association shall deliver to the Commission a copy of the state or local fire marshal's certification regarding the association's compliance with fire safety regulations or the fire marshal's plan of corrections. The certification or plan must be based on an inspection of the association grounds conducted by the fire marshal not more than 30 days before the first day of a race meeting.
- (3) No person shall:
  - (a) smoke in stalls, feed rooms or under shed rows;
  - (b) burn open fires or oil and gas lamps in the stable area;
  - (c) leave unattended any electrical appliance that is plugged-in to an electrical outlet.
  - (d) permit horses to come within reach of electrical outlets or cords;
  - (e) store flammable materials such as cleaning fluids or solvents in the stable area; or
  - (f) lock a stall which is occupied by a horse.
- (4) An association shall post a notice in the stable area which lists the prohibitions outlined in 3a-f above.

##### ***H. Posting of Jockey Insurance Coverage***

- (1) An association shall have on file with the commission a copy of the actual policy and post in the jockeys' quarters a summary of the association's insurance coverage for jockeys who are injured while on the grounds of the association and shall, upon the request of any licensed jockey who is participating in the race meeting, provide a copy of the policy of such insurance. Such request shall be made in writing to a racing official designated by the



association in the notice to respond to such requests.

- (2) In the event that the insurance policy is changed during the race meeting the association shall promptly notify the commission and post a notice of any such changes.

### ***ARCI-008-010 General Provisions***

#### ***H. Substance Abuse/Addiction***

- (1) All licensees shall be deemed to be exercising the privileges of their license, and to be subject to the requirements of these rules, when engaged in activities that could affect the outcome of a race or diminish the conditions of safety or decorum required in restricted areas.
- (2) It shall be a violation to exercise the privileges granted by a license from this Commission if the licensee:
  - (a) Is engaged in the illegal sale or distribution of alcohol or a controlled substance;
  - (b) Possesses, without a valid prescription, a controlled substance;
  - (c) Is intoxicated or under the influence of alcohol or a controlled substance;
  - (d) Is addicted, having been determined to be so by a professional evaluation, to alcohol or other drugs and not engaged in an abstinence-based program of recovery acceptable to the Commission;
  - (e) Has in his/her possession within the enclosure any equipment, products or materials of any kind which are used or intended for use in planting, propagating, cultivating, growing, harvesting, manufacturing, compounding, converting, producing, processing, preparing, testing, analyzing, packaging, repackaging, storing, containing, concealing, injecting, ingesting, inhaling or otherwise introducing into the human body a controlled dangerous substance;
  - (f) Refuses to submit to urine or drug testing, when notified that such testing is based on a random drug testing procedure, is based on reasonable suspicion that the person is using drugs or alcohol or is based on the licensee's acting as if in an impaired condition; or
  - (g) Presently has drugs (controlled substances) or alcohol in his or her body. With regard to alcohol, the results of a breathalyzer test showing a reading of more than .05 percent of alcohol in the blood shall be the criterion for a finding of alcohol present in the body. With regard to other controlled substances, presence of the drug in any quantity measured by the testing instrument establishes the presence of the drug for purposes of this paragraph.
- (3) At its discretion, the Commission may conduct random or episodic random drug testing, as well as testing based on reasonable suspicion, in order to ensure safety on the racetrack.
- (4) When conducted, random drug testing shall apply, equally, to all licensees who are, at the time of the random testing, exercising the privileges of their license in such ways as may affect the outcome of a race or diminish the conditions of safety or decorum required in restricted areas.
- (5) No notice need be given as to onset or cessation of random testing.
- (6) For licensees who are tested under the provisions in this chapter, and whose testing shows the presence of drugs (controlled substances) or alcohol, any field screening test results shall be confirmed by a laboratory acceptable to the Commission which shall include Gas Chromatography/ Mass Spectrometry (GC/MS) procedures.
- (7) When the sample quantity permits, each test sample shall be divided into portions so that one portion may be used for the confirmation procedure and another portion may be utilized by the licensee to obtain an independent analysis of the urine sample.
- (8) The Commission shall provide for a secure chain of custody for the sample to be made available to the licensee.
- (9) All costs for the transportation and testing for the sample portion made available for the licensee shall be the financial responsibility of the requesting person.
- (10) Payment shall be due from the requesting person within 30 days of receipt of notice of the costs.
- (11) A licensee penalized or restricted pursuant to this chapter shall retain rights of due process with respect to any determination of alleged violations which may adversely affect the right to hold a license.
- (12) If there has been a violation, under number 2 above, the following procedures will be followed:

- (13) The Commission may, at its discretion, order the licensee to obtain a professional assessment to determine whether there is a substantial probability that the licensee is dependent on, or abuses, alcohol or other drugs or the Commission may act on the information at hand.
- (14) Actions in the case of first violators may include revocation of the license, suspension of the license for up to six months, placing the violator on probation for up to 90 days or ordering formal assessment and treatment.
- (15) Treatment or assessment, if ordered, must meet the conditions given in numbers 16-18 below.
- (16) The license of the person may be revoked or suspended for a period of up to one year or a professional assessment of the person may be ordered by the Commission.
- (17) If a professional assessment indicates presence of a problem of alcohol or other drug abuse that is not treatable within the reasonably foreseeable future (360 days) the license may be suspended for a period of up to one year.
- (18) If a professional assessment indicates presence of a treatable problem of alcohol or other drug abuse or dependence, the Commission may order the licensee to undergo treatment as a condition of continuing licensure. Such treatment will be through a program or by a practitioner, acceptable to the licensee and the Commission. Required features of any program or practitioner acceptable to the Commission will be:
  - (a) Accreditation or licensure by an appropriate government agency, if required by state statute;
  - (b) A minimum of one year follow-up of formal treatment; and
  - (c) A formal contract indicating the elements of the treatment and follow up program that will be completed by the licensee and, upon completion, certified to the Commission as completed. To effect the contract, the licensee will authorize release of information by the treating agency, hospital or individual.
- (19) For third-time violators, the violator's license may be revoked and the violator may be deemed ineligible for licensure for up to five years.
- (20) Although relapse (failure to maintain abstinence) is not inevitable, it is common for relapse to occur in recovery from alcoholism or other substance dependence. Therefore, a licensee who is engaged in a formal program of recovery, and is compliant with all provisions other than abstinence, will not be regarded automatically as having committed a new violation.
- (21) When a licensee is determined to have failed in maintaining abstinence, the licensee shall furnish to the Commission an assessment by the treating agency, hospital or individual practitioner indicating whether the licensee was compliant with the agreed upon program of recovery, and an opinion as to whether a "new violation" occurred.
- (22) The Commission will determine whether a new violation has occurred in each instance. If a new violation has occurred, the Commission will proceed under numbers 13-15 above or numbers 16-18 above. Otherwise, the licensee shall continue in the agreed upon program of recovery.

## **Z. Safety Equipment**

### (1) Helmets

Any licensee mounted on a horse or stable pony on association grounds must wear a properly secured safety helmet at all times. The licensee is responsible for providing sufficient evidence that his/her helmet meeting one of the following safety standards: American Society for Testing and Materials (ASTM 1163); UK Standards (EN-1384 and PAS-015); or, Australian/New Zealand Standard (AS/NZ 3838).

### (2) Vests

Any person mounted on a horse or stable pony on the association racing surface, all assistant starters and anyone handling a horse in a starting gate must wear a safety vest at all times. The safety vest must comply with one of the following minimum standards:

- (a) British Equestrian Trade Association (BETA):2000 Level 1
- (b) Euro Norm (EN) 13158:2000 Level 1
- (c) American Society for Testing and Materials (ASTM) F2681-08
- (d) Shoe and Allied Trade Research Association (SATRA) Jockey Vest Document M6 Issue 3
- (e) Australian Racing Board (ARB) Standard 1.1998

#### *ARCI-008-020 Trainers*

- (4) Beginning no later than January 31, 2013, in order to maintain a current license, trainers must complete at least four (4) hours per calendar year of continuing education courses approved by the ARCI or the commission in that jurisdiction

#### *ARCI-008-030 Jockeys*

##### *A. Eligibility*

- (2) A jockey shall pass a physical examination given within the previous twelve months by a licensed physician affirming fitness to participate as a jockey. The stewards may require that any jockey be reexamined and may refuse to allow any jockey to ride pending completion of such examination
- (3) An applicant shall show competence by prior licensing and the demonstration of riding ability, which may include participation in up to five races with the prior approval of the stewards with the consideration of the recommendations from the starter, the head outrider, and the designated representatives of the jockeys and the horsemen at the track. The demonstration of riding ability is defined at a minimum of:
- (a) Breaking with a horse in company from the starting gate;
  - (b) Working a horse in company around the turn and down the stretch;
  - (c) Switching the riding crop from one hand to the other while maintaining control of the horse in a stretch drive;
  - (d) Causing a horse to switch leads coming out of the turn.

#### *ARCI-010-020 Weights*

##### *D. Scale of Weights*

- (1) With the exception of apprentice allowances, handicap races, three (3) year old horses entered to run in races against horses four (4) years old and upwards, and the allowance provided in subsection (2) of this section, no jockey shall be assigned a weight of less than 118 pounds. For three (3) year old horses entered to run in races against horses four (4) years old and upwards from January 1 through August 31, no jockey shall be assigned a weight of less than 116 pounds.
- (2) Except in handicaps, fillies two (2) years old shall be allowed three (3) pounds, and fillies and mares **three (3) years old and upward shall be allowed five (5) pounds before September 1, and three (3) pounds** thereafter in races where competing against horses of the opposite sex.
- (3) Quarter Horses, Appaloosas and Paints minimum scale weights shall be 120 pounds for two-year-olds, 122 pounds for three-year-olds, and 124 pounds for four-year olds and older.
- (4) A notice shall be included in the daily program that all jockeys will carry approximately three (3) pounds more than the published weight to account for safety equipment (vest and helmet) that is not included in require weighing out procedures. Additionally, upon stewards' approval, jockeys may weigh in with an additional three (3) pounds for inclement weather gear.

#### *ARCI-010-035 Running of the Race*

##### *A. Equipment*

- (1) All riding crops are subject to inspection and approval by the stewards and the clerk of scales.
- (a) Riding crops shall have a shaft and a flap and will be allowed in flat racing including training, only as follows.
    - (A) Maximum weight of eight ounces;

- (B) Maximum length, including flap of 30 inches
  - (C) Minimum diameter of the shaft of three-eighths inch; and
  - (D) Shaft contact area must be smooth, with no protrusions or raised surface, and covered by shock absorbing material that gives a compression factor of at least one-millimeter throughout its circumference.
- (b) The flap is the only allowable attachment to the shaft and must meet these specifications:
- (A) Length beyond the end of the shaft a maximum of one inch;
  - (B) Width a minimum of 0.8 inch and a maximum of 1.6 inches;
  - (C) No reinforcements or additions beyond the end of the shaft;
  - (D) No binding within seven inches of the end of the shaft; and
  - (E) Shock absorbing characteristics similar to those the contact area of the shaft.

### ***C. Jockey Requirements***

#### **(7) Weighing Out**

- (a) A jockey's weight shall include his/her clothing, boots, saddle and its attachments and any other equipment except the bridle, bit, blinkers, goggles, number cloth and safety equipment including helmet, vest, over-girth, reins and breast collar.
- (b) Upon Stewards approval, jockeys may be allowed up to three (3) pounds more than published weights to account for inclement weather clothing and equipment.

### ***E. Post to Finish***

#### **(7) Use of Riding Crop**

- (a) Although the use of a riding crop is not required, any jockey who uses a riding crop during a race shall do so only in a manner consistent with exerting his/her best efforts to win.
- (b) In all races where a jockey will ride without a riding crop, an announcement of such fact shall be made over the public address system.
- (c) No electrical or mechanical device or other expedient designed to increase or retard the speed of a horse, other than the riding crop approved by the stewards, shall be possessed by anyone, or applied by anyone to the horse at any time on the grounds of the association during the meeting, whether in a race or otherwise.
- (d) Riding crops shall not be used on two-year-old horses before April 1 of each year.
- (e) The riding crop shall only be used for safety, correction and encouragement.
- (f) All riders should comply with the following when using a riding crop:
  - (A) Showing the horse the riding crop and giving it time to respond before hitting it;
  - (B) Having used the riding crop, giving the horse a chance to respond before using it again;
  - (C) Using the riding crop in rhythm with the horse's stride.
- (g) Prohibited use of the riding crop includes but are not limited to striking a horse:
  - (A) on the head, flanks or on any other part of its body other than the shoulders or hind quarters except when necessary to control a horse;
  - (B) during the post parade or after the finish of the race except when necessary to control the horse;
  - (C) excessively or brutally causing welts or breaks in the skin;

- (D) when the horse is clearly out of the race or has obtained its maximum placing;
  - (E) persistently even though the horse is showing no response under the riding crop; or
  - (F) striking another rider or horse.
- (h) After the race, horses will be subject to inspection by a racing or official veterinarian looking for cuts, welts or bruises in the skin. Any adverse findings shall be reported to the stewards.
- (i) The giving of instructions by any licensee that if obeyed would lead to a violation of this rule may result in disciplinary action also being taken against the licensee who gave such instructions

### ***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.

#### ***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.

#### ***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.

#### ***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 or 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) Antirryhthmic agents (exclusive of lidocaine, bretylium and propanolol); 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 Guidelines 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. (Tables can be found at end of model rules referenced)
- (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 the official veterinarian or his/her designee shall be notified using the prescribed form, that the horse is 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) Furosemide shall be the only authorized bleeder medication
- (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 by the official veterinarian, the racing veterinarian or his/her designee no less than four hours prior to post time for the race for which the horse is entered.
  - (b) Any veterinarian or vet techs participating in the administration process must be prohibited from working as private veterinarians or technicians on the race track or with participating licensees;
  - (c) 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.
  - (d) The dose administered shall not exceed 500 mg. nor be less than 150 mg.
  - (e) Furosemide shall be administered by a single, intravenous injection.
  - (f) 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 by the official veterinarian, the racing veterinarian or his/her designee no less than four hours prior to post time for the race for which the horse is entered.
  - (b) Any veterinarian or vet techs participating in the administration process must be prohibited from working as private veterinarians or technicians on the race track on or with participating licensees;

- (c) The furosemide dosage 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 proximity of its stall in the care, custody and control of its trainer or the trainer's designated representative under general association and/or Commission security surveillance until called to the saddling paddock.
- (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.
- (5) The administering authority or association may assess a fee on licensed owners of treated horses to recoup the reasonable costs associated with the administration of furosemide in the manner prescribed in these rules.

### ***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***

- (1) 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

#### **H. Environmental Contaminants and Substances of Human Use**

- (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 -hydroxystanozolol (metabolite of stanozolol (Winstrol)) - 1 ng/ml in urine for all horses regardless of sex;
  - (b) Boldenone (Equipoise® 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 TCO<sub>2</sub> 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 TCO<sub>2</sub> 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 TCO<sub>2</sub> 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.

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

- (1) 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.
- (2) Horses to be tested may be selected at random, with probable cause, or as determined by the commission;
- (3) 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.
- (4) 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.
- (5) 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.

### ***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

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:

<b>LICENSED TRAINER:</b>		
<b>1<sup>st</sup> offense</b>	<b>2<sup>nd</sup> LIFETIME offense in any jurisdiction</b>	<b>3<sup>rd</sup> LIFETIME offense in any jurisdiction</b>
<ul style="list-style-type: none"> <li>○ Minimum one-year suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of a three-year suspension.</li> <li style="text-align: center;"><b>AND</b></li> <li>○ 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).</li> <li style="text-align: center;"><b>AND</b></li> <li>○ May be referred to the Commission for any further action deemed necessary by the Commission.</li> </ul>	<ul style="list-style-type: none"> <li>○ 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.</li> <li style="text-align: center;"><b>AND</b></li> <li>○ 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).</li> <li style="text-align: center;"><b>AND</b></li> <li>○ May be referred to the Commission for any further action deemed necessary by the Commission.</li> </ul>	<ul style="list-style-type: none"> <li>○ 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.</li> <li style="text-align: center;"><b>AND</b></li> <li>○ 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).</li> <li style="text-align: center;"><b>AND</b></li> <li>○ May be referred to the Commission for any further action deemed necessary by the Commission.</li> </ul>
<b>LICENSED OWNER:</b>		
<b>1<sup>st</sup> offense</b>	<b>2<sup>nd</sup> LIFETIME offense in owner's stable in any jurisdiction</b>	<b>3<sup>rd</sup> LIFETIME offense in owner's stable in any jurisdiction</b>
<ul style="list-style-type: none"> <li>○ Disqualification and loss of purse.</li> <li style="text-align: center;"><b>AND</b></li> <li>○ 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.</li> </ul>	<ul style="list-style-type: none"> <li>○ Disqualification and loss of purse.</li> <li style="text-align: center;"><b>AND</b></li> <li>○ 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.</li> </ul>	<ul style="list-style-type: none"> <li>○ Disqualification, loss of purse and \$50,000 fine.</li> <li style="text-align: center;"><b>AND</b></li> <li>○ 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.</li> <li style="text-align: center;"><b>AND</b></li> <li>○ Referral to the Commission with a recommendation of a suspension for a minimum of 90 days.</li> </ul>



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:

<b>LICENSED TRAINER:</b>		
<b>1<sup>st</sup> offense</b>	<ul style="list-style-type: none"> <li>○ Minimum 15-day suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of a 60-day suspension.</li> <li><b>AND</b></li> <li>○ Minimum fine of \$500 absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of \$1,000.</li> </ul>	<b>2<sup>nd</sup> offense (365-day period) in any jurisdiction</b> <ul style="list-style-type: none"> <li>○ Minimum 30-day suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of a 180-day suspension.</li> <li><b>AND</b></li> <li>○ Minimum fine of \$1,000 absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of \$2,500.</li> </ul>
		<b>3<sup>rd</sup> offense (365-day period) in any jurisdiction</b> <ul style="list-style-type: none"> <li>○ Minimum 60-day suspension absent mitigating circumstances. The presence of aggravating factors could be used to impose a maximum of a one-year suspension.</li> <li><b>AND</b></li> <li>○ 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).</li> <li><b>AND</b></li> <li>○ May be referred to the Commission for any further action deemed necessary by the Commission.</li> </ul>
<b>LICENSED OWNER:</b>		
<b>1<sup>st</sup> offense</b>	<ul style="list-style-type: none"> <li>○ Disqualification and loss of purse [in the absence of mitigating circumstances]*.</li> <li><b>AND</b></li> <li>○ Horse must pass a commission-approved examination before becoming eligible to be entered.</li> </ul>	<b>2<sup>nd</sup> offense in stable (365-day period) in any jurisdiction</b> <ul style="list-style-type: none"> <li>○ Disqualification and loss of purse [in the absence of mitigating circumstances]*.</li> <li><b>AND</b></li> <li>○ Horse must pass a commission-approved examination before becoming eligible to be entered.</li> </ul>
		<b>3<sup>rd</sup> offense in stable (365-day period) in any jurisdiction</b> <ul style="list-style-type: none"> <li>○ Disqualification and loss of purse, and in the absence of mitigating circumstances a \$5,000 fine.*</li> <li><b>AND</b></li> <li>○ 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.</li> </ul>

\*(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.*)

<b>LICENSED TRAINER</b>	<b>Phenylbutazone (&gt;2.0-5.0 mcg/ml) Flunixin (&gt;20-100 ng/ml) Ketoprofen (&gt;10-50 ng/ml) Furosemide (&gt;100 ng/ml) and no furosemide when identified as administered**</b>	<b>Phenylbutazone (&gt;5.0 mcg/ml) Flunixin (&gt;100 ng/ml) Ketoprofen (&gt;50 ng/ml) and CLASS C Violations</b>
1 <sup>st</sup> Offense (365-day period) in any jurisdiction	Minimum fine of a written warning to a maximum fine of \$500	Minimum fine of \$1,000 absent mitigating circumstances
2 <sup>nd</sup> Offense (365-day period) in any jurisdiction	Minimum fine of a written warning to a maximum fine of \$750	Minimum fine of \$1,500 and 15-day suspension absent mitigating circumstances
3 <sup>rd</sup> Offense (365-day period) in any jurisdiction	Minimum fine of \$500 and to a maximum fine of \$1,000	Minimum fine of \$2,500 and 30-day suspension absent mitigating circumstances
<b>LICENSED OWNER</b>	<b>Phenylbutazone (&gt;2.0-5.0 mcg/ml) Flunixin (&gt;20-100 ng/ml) Ketoprofen (&gt;10-50 ng/ml) Furosemide (&gt;100 ng/ml) and no furosemide when identified as administered**</b>	<b>Phenylbutazone (&gt;5.0 mcg/ml) Flunixin (&gt;100 ng/ml) Ketoprofen (&gt;50 ng/ml) AND CLASS C VIOLATIONS</b>
1 <sup>st</sup> Offense (365-day period) in any jurisdiction	Horse may be required to pass commission-approved examination before being eligible to run.	Loss of purse. Horse must pass commission-approved examination before being eligible to run
2 <sup>nd</sup> Offense (365-day period) in any jurisdiction	Horse may be required to pass commission-approved examination before being eligible to run	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 <sup>rd</sup> Offense (365-day period) in any jurisdiction	Disqualification and loss of purse. Horse must pass commission-approved examination before being eligible to run	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

\*If the trainer has not had more than one violation within the previous two years, the Stewards/Judges are encouraged to issue a warning in lieu of a fine provided the reported level is below 3.0 mcg/ml, absent of aggravating factors.

\*After a two year period, if the licensee has had no further violations, any penalty due to an overage in the 2.0 – 5.0 category will be expunged from the licensee’s record for penalty purposes.



**EXHIBIT 2**



**NATIONAL THOROUGHBRED RACING ASSOCIATION  
SAFETY & INTEGRITY ALLIANCE**

***AAEP Guidelines for Necropsy of Racehorses***



## *AAEP Guidelines for 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 will 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***

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.



**EXHIBIT 3**



***NATIONAL THOROUGHBRED RACING ASSOCIATION  
SAFETY & INTEGRITY ALLIANCE***

***AAEP Guidelines for the Management  
of Outbreak of Infectious Disease***





## **AAEP Guidelines for the Management of Outbreak of Infectious Disease**

Developed by the AAEP Infectious Disease Task Force. Task Force Members: Mary C. Scollay, DVM, Chair; William Bernard, DVM, Dip. ACVIM; Brian S. Carroll, DVM; Roberta M. Dwyer, DVM, MS, Dip. ACVPM; Robert E. Holland Jr., DVM, Ph.D.; Daniel G. Kenney, VMD, Dip. ACVIM; Maureen T. Long, DVM, Ph.D.; Paul Lunn, BVSc, MS, Ph.D., MRCVS, Dip. ACVIM; and Josie L. Traub-Dargatz, DVM, MS, Dip. ACVIM.

These guidelines were written for use by veterinarians who encounter contagious infectious disease in horses. In the event of an equine infectious disease outbreak, veterinarians are expected to promptly implement measures to contain and treat the affected population and to prevent disease in the unaffected. The purpose of these guidelines is to promote an effective first response by providing a clear, concise action plan proceeding from generalized signs to specific diagnosis of contagious disease.

The veterinarian on scene is the most qualified person to initiate the outbreak control plan and is critical to effective outbreak control. Each infectious disease outbreak is unique and an existing plan may require modification for specific situations. If necessary, clinical observations, laboratory results and epidemiologic data, once properly collected, may be evaluated by infectious disease experts off-site.

In the event of reportable disease, veterinarians are to abide by state regulations. These guidelines do not supersede existing state protocol.

These guidelines are not intended to replace textbooks, scientific literature, or journal articles. Comprehensive information on the management of infectious diseases is widely available and is recommended reading

### ***Pre-Outbreak Considerations***

The implementation of a management program before an outbreak will maximize the effectiveness of the response plan should infectious disease occur. An effective program incorporates risk management, resource management, and horse management and is unique to each equine event.

#### **1. Risk Management**

*Risk aversion:* The extent to which one will take action to avoid a negative outcome.

In the context of equine infectious disease, risk aversion may be summarized as:

How badly do you want to keep disease out, and what are you willing to do about it?

Risk aversion is likely disease-specific and should be clearly defined before introduction of horses into a facility.

When making this determination, factors to be considered include:

##### **i. Population**

- Mobility—potential for exposure/infection prior to arrival
- Susceptibility to pathogen

##### **ii. Facility**

- Type of housing
- Population density
- Isolation capabilities

##### **iii. Event**

- Duration
- Presence or absence of centralized regulatory authority—ability to establish and enforce requirements/restrictions/perimeters, etc.

##### **iv. Disease**

- Awareness of on-going disease outbreaks elsewhere and potential for spread
- Define intent—to prevent introduction of specific pathogen or prevent occurrence of clinical disease
- Endemic vs. epidemic disease
- Determine actionable disease threshold

#### **2. Resource Management**

##### **i. Personnel**

- Establish 'chain of command'

- Verify contact information for:
  - a. State Department of Agriculture Veterinarian
  - b. USDA Area-Veterinarian-In-Charge
  - c. Area practicing veterinarians
- Assess personnel resources and skill level:
  - a. Veterinarians
  - b. Veterinary technicians
  - c. Laypersons
- Assess communications needs and designate specific individuals for communications tasks

ii. **Facility**

- Identify potential isolation facilities on grounds/off grounds
- Facility prep (if turnover between events is < 7days)
  - a. Disinfection—Biosecurity Guidelines

### 3. **Horse Management**

i. **Establish:**

- Criteria for suspected infectious disease reporting
- Reporting system
- Notify veterinarians and horsemen of responsibility to report
- Health requirements for access to grounds and make necessary notifications:
  - a. Health Certificate +/- disease specific disclaimer
  - b. Coggins Test
  - c. Vaccinations (requirements vs. recommendations)
- Horse tracking system:
  - a. Origin and date/time of arrival
  - b. Location of horse while present at event
  - c. Contact info for individual responsible for horse (s)
  - d. Contact info for attending veterinarian
  - e. Destination and date/time of departure
  - f. Mode of transport—private van/trailer, commercial carrier or air

#### **When Equine Infectious Disease is Suspected**

**The Veterinarian's Responsibilities:**

- Do No Harm—do not rush into a stall/barn until you have a plan on how to leave it.
- Respond to the 'worst case scenario' until you have a specific diagnosis.

**Getting Started**

Have an established response plan for control of contagious disease outbreaks—a planned response is the most effective tool for minimizing outbreak impact.

i. **Maintain a log, recording events as they occur, including:**

- Case identification—which horse(s) got sick, where, and when
- Control measures implemented
- Horse movement—within facility, entering and exiting facility
- Diagnostic testing results
- Communications with practitioners, horsemen, and regulatory veterinarians

ii. **Establish effective communication, including:**

- Regular meetings providing clear information and simple instructions to
  - Facility management
  - Horsemen
  - Veterinarians
  - Media
  - Related industry affiliates
- Note: Effective communication minimizes speculation and establishes expectations.

iii. **Manage time effectively.**

- Delegate tasks that do not require execution by a licensed veterinarian. (Utilize licensed veterinary technicians for sample collection, physical inspections, temperature recording, etc.)

**Using the Guidelines**

Refer to clinical sign-based flowcharts and guidelines for response-plan recommendations in the absence of a specific, confirmed diagnosis. Specific flowcharts and guidelines can be found at [www.aaep.org](http://www.aaep.org).

1. **Suspected Case of Infectious:**

i. **Respiratory Disease**

- Respiratory Disease Flowchart
- Respiratory Disease Guidelines

ii. **Neurologic Disease**

- Neurologic Disease Flowchart
- Neurologic Disease Guidelines

iii. **Diarrheal Disease**

- Diarrheal Disease Flowchart
- Diarrheal Disease Guidelines

iv. **Vesicular Disease**

- Vesicular Disease Flowchart

2. **Disease specific guidelines may be employed after diagnosis:**

- Botulism
- Clostridial diarrhea/enteritis
- Eastern Equine Encephalitis
- Equine Herpes virus
- Equine Viral Arteritis
- Influenza
- Potomac Horse Fever
- Rabies
- Salmonellosis
- Strep equi infection
- Venezuelan Equine Encephalitis
- West Nile Virus
- Western Equine Encephalitis



**EXHIBIT 4**



***NATIONAL THOROUGHBRED RACING ASSOCIATION  
SAFETY & INTEGRITY ALLIANCE***

***Security Recommendations of the  
Racing Medication and Testing Consortium  
and the NTRA Safety and Integrity Alliance***



The NTRA Safety and Integrity Alliance is committed to ensuring that its accredited facilities observe high standards of racing security. The following recommendations and guidelines are provided as examples of best practices for Alliance members to address appropriate aspects of barn area security on race day. However, the Alliance does not advocate or endorse a “one-size-fits-all” approach. Our goal is simply to ensure that accredited facilities demonstrate a clear, comprehensive security plan.

1. The administration of any Controlled Therapeutic Medication to a horse within 24 hours of the scheduled post time for which a horse is entered to compete shall result in a scratch *except for the Administration of not less than 150 mg and not more than 500 mg of furosemide intravenously only by the Official Veterinarian or designee only not less than four (4) hours prior to the scheduled post time of the race for which a horse is entered to compete.*
2. Except in circumstances involving the health and safety of the horse, contact with a horse by a veterinarian other than an Official Veterinarian or designee any time 24 hours prior to the post time of the race for which a horse is entered to compete may result in a scratch.
3. Contact with a horse within 24 hours prior to the post time of the race for which a horse is entered to compete (unless the horse has been previously scratched) shall only be by licensed personnel or an individual issued a visitor’s pass or other identifying credential, notwithstanding veterinarians approved under Section 2 above and shall only be permitted for general husbandry purposes, including, but not limited to, feeding, watering, bandaging, applying tack, applying topical dressings such as antiseptics, ointments, salves, leg rubs, leg paints, hoof care products, and liniments, provided that such activities do not result in the Administration of Controlled Therapeutic Medication(s) or Prohibited Substance(s).
4. Horse(s) arriving on racing association property less than four (4) hours prior to the scheduled post time of the first race on the day for which the horse is entered to compete are subject to scratch with discretion given to stewards to consider extenuating circumstances.
5. All horses entered to compete that do not reside on racing association property are required to go directly to the receiving barn and be placed in an IN TODAY stall upon arriving on association grounds and are subject to heightened surveillance in order to prevent unauthorized access to horses that would provide an opportunity for inappropriate medication administration.
6. All horses entered to compete shall be clearly identified by signs plainly stating “IN TODAY” displayed clearly next to or on the stall doors not less than twenty-four (24) hours prior to the scheduled post time of the race in which the horse is entered to compete, or be subject to scratch. “IN TODAY” signs should contain the tattoo number, color and sex of the entered horse, along with a local 800 number for track security in order to facilitate reporting violations. Copies of a horse identifier’s list of entered horses with their tattoo numbers shall be made available to security personnel who patrol the general barn area to be used for checks of “IN TODAY” horses.
7. All horses on the association grounds may be required to report to a receiving barn forty-five (45) minutes prior to the scheduled post time for the race in which the horse is entered to compete. Access to the receiving barn should be controlled by security to prevent unauthorized access to horses.
8. All barns, associated storage rooms, tack rooms, dormitory rooms and vehicles authorized to be present on racing association property shall be subject to search by security personnel employed or contracted by the racing association and/or the relevant racing regulatory authority. Inspections shall comply with association policies and procedures regarding predication, execution and scope of said inspections, as well as the inclusion of racing regulatory personnel and/or other individuals (such as a horsemen’s group representative and the trainer or trainer’s representative/employee) authorized to participate or witness the inspection. Failure of a licensee to cooperate with searches may result in fines or suspensions.
9. Earned Surveillance:
  - a. All horses racing from a stable that is the subject of medication violations involving Prohibited Substances shall report to the receiving barn eight (8) hours prior to the scheduled post time for the race in which the horse is entered to compete for a period of not less than 30 days.



- b. Such stables meeting these criteria shall also be subject to increased scrutiny by security personnel, including, but not limited to, “ride-along” programs involving the use of security personnel assigned to directly monitor the Licensee for a period of not less than 30 days, use of video surveillance, increased random visits to the barn.
  - c. Veterinarians and other licensees who are the subject of medication violations involving Prohibited Substances shall also be subject to earned surveillance by security personnel, including, but not limited to the use of security personnel assigned to directly monitor the Licensee for a period of time determined by the (entity with security oversight?), but not less than 30 days.
10. Training of Security Personnel: Racing associations shall develop comprehensive training programs that enable backstretch security personnel to expand their knowledge and abilities in policing and securing the stable area. Associations should support and participate in available security training opportunities, such as those provided by the Thoroughbred Racing Protective Bureau (TRPB) and the Organization of Racing Investigators. These programs should promote use of “best practices” to secure horses on race day.
11. Reporting and Communication: All racing associations and commissions shall display and support a toll-free, anonymous tip line in both English and Spanish in one or more of the following locations: track kitchen, each barn in the stabling area and the receiving barn, as well as in the overnight sheets and the condition book. Association investigators should, through appropriate dissemination mechanisms such as TRPB, ensure information regarding alleged untoward activity on the part of licensees, improper race-day substances, or other useful or actionable intelligence gleaned during their race meeting is shared among their peers and to racing commission investigators.

**EXHIBIT 5**



***NATIONAL THOROUGHBRED RACING ASSOCIATION  
SAFETY & INTEGRITY ALLIANCE***

***Medical Care Recommendations of  
Jockeys' Guild, Inc. and The NTRA Safety & Integrity  
Alliance Medical Director Committee***



***Medical Care Recommendations of Jockeys' Guild, Inc. and  
The NTRA Safety & Integrity Alliance Medical Director Committee***

The NTRA Safety and Integrity Alliance is committed to ensuring that its accredited facilities observe high standards of medical care for those who are injured or become ill on racetrack grounds. The following recommendations and guidelines are designed to ensure the Alliance members address all aspects of medical care, particularly the care that is afforded to riders and others who sustain traumatic injuries. However, the Alliance does not advocate or endorse a “one-size-fits-all” approach. Our goal is simply to ensure that accredited facilities demonstrate a clear, comprehensive plan to provide timely, quality medical care to those who are injured or become ill on racetrack grounds.

***1) Medical Director/Staff Oversight***

It is strongly recommended that tracks have a designated Medical Director who is a licensed, insured, board-certified physician trained in family practice (minimum), or specialty areas such as internal medicine, emergency medicine or surgical specialties such as orthopedics, neurosurgery or trauma.

The Medical Director or a designated health care professional ensures that all professional medical staff are licensed and certified and oversees all racetrack emergency services, including nursing staff, paramedics/EMTs, facilities, injury treatment protocols, access to the Jockey Health Information System (JHIS), transportation to emergency medical facilities, communication with outside care providers (such as emergency care hospitals or post-op rehabilitation facilities), and compliance with the Alliance Code of Standards. The Medical Director is also responsible for certifying a rider's fitness to ride or to resume riding after any on-track incident that may impair the rider's reflexes, decision making or ability to maintain control of his/her horse in a race.

If a track does not retain a Medical Director, it must demonstrate a reasonable strategy for timely provision of comparable services at the levels described above, and a complete chain of command. At minimum, the individual assuming the responsibilities described above must be a licensed, certified Paramedic.

***2) On-site Emergency Medical Staff***

In addition to Medical Director or comparable physician-in-charge, the following emergency medical staff are recommended for staffing on-site emergency care facilities at racetracks:

Registered, licensed nurse(s) with experience in emergency medicine; Certified paramedic(s) to be present during all races, as required by ARCI Model Rule ARCI-007-020; and Emergency Medical Technician(s) (EMTs) to assist the lead paramedic, nursing team and the Medical Director.

In consultation with racetrack management and the designated lead paramedic, the Medical Director will determine the number of individuals needed to staff each position and establish a clear chain of command/division of responsibilities for medical staff and other track personnel (e.g., security, outriders or communications team) with a “need to know.”

***3) On-Site First Aid Facilities***

The track's first aid facility must comply with Occupational Safety & Health Administration (OSHA) standards, be regularly serviced, inspected and updated and include the following minimum services/features:

Private room(s) equipped with enough trauma beds to handle at least one seriously injured rider, preferably two to three; adequate space/beds/facilities to enable patient triage in the event of simultaneous emergencies (either on track or in other parts of the track's physical plant, e.g., grandstand); treatment capabilities to stabilize a rider physically and medically and monitor the rider's vital signs until the rider can be transported to an emergency care facility (Medical Director or physician-in-charge to provide detailed lists of treatment capabilities); and HIPAA-compliant, detailed standards of care for riders.

Participation in the proprietary JHIS to facilitate use of jockeys' confidential health records by medical care providers in accordance with HIPAA is required. The Medical Director or physician-in-charge is responsible for establishing and enforcing standards for creating, accessing, using, sharing and updating JHIS information in accordance with HIPAA.

#### **4) Transportation of Injured Riders**

Any vehicle used to transport an injured rider or patient to an emergency care facility located on or off the racetrack grounds must at minimum accommodate the same level of care as a properly equipped, OSHA-approved emergency care facility. In consultation with track management, the track's Medical Director or physician-in-charge is responsible for designing a comprehensive transportation plan to:

Transport a rider to the nearest Trauma Level One (TLO) facility or to the track's own first aid facility for stabilization prior to moving to a TLO or comparable facility; provide direct communication between first responders and first aid staff; facilitate an ambulance following the field in each race, no more than ¼ mile behind the last horse running in the race; develop a plan for races where the ambulance is not directly following the field in each race (i.e., turf races or "off-track" races); enable the timely transportation of riders to appropriate care facilities in the event of a multi-horse accident; enable the timely transport of injured personnel to the appropriate care facilities in situations where track ambulances are prohibited from transport due to local ordinance or regulation, including detailing protocols for communications with municipal resources; field an ambulance in the event of mechanical failures or other equipment problems (i.e., a backup plan); and inform all racetrack and medical care personnel of their explicit duties/responsibilities to provide swift, appropriate care or services in the event of an emergency.

Provision for a helipad or a designated area in which a medical helicopter can safely land and take off from a racetrack is strongly encouraged.

#### **5) Use of Trauma Level One (TLO) Facilities**

Tracks are strongly encouraged to develop a working relationship with a Trauma Level One (TLO) facility. The Medical Director or physician-in-charge will provide written protocols for selecting emergency care facilities and addressing the following considerations:

Availability and proximity of TLO (first choice) or other emergency care facilities; the rider's injuries and personal preferences for emergency care; and availability of aftercare - including physical therapy, rehabilitative services and long-term care - to minimize the number of times a rider must be moved to secure the highest quality of care appropriate to his/her injuries.

Tracks are advised to establish communication with area hospitals regarding their readiness to accept injured riders in advance of a race meet (i.e., for general preparation) or a specific medical emergency.