

**THE JOCKEY CLUB
THOROUGHBRED SAFETY COMMITTEE
RECOMMENDATION
August 11, 2013**

Recommendation: National Uniform Medication Program

The Reformed Racing Medication Rules were first released in 2011 with the goal of creating industry resolve to achieve national uniformity in medication rules, penalties and laboratory standards. The Jockey Club commends those states that have committed to adopting uniform medication rules recommended by the Racing Medication and Testing Consortium and approved by the Association of Racing Commissioners International.

Based upon the review of current racing regulations, discussions with industry policy makers, veterinarians, trainers, owners, horsemen's associations, drug testing laboratories, feedback from customers, and in an attempt to synthesize the parallel medication reforms within the industry, the Thoroughbred Safety Committee calls for:

“All United States racing authorities adopt, or commit to adopt the National Uniform Medication Program by January 1, 2014. The National Uniform Medication Program was recommended by the Racing Medication and Testing Consortium (RMTC) and approved by the Association of Racing Commissioners International and includes regulatory levels and restricted administration times for controlled therapeutic medications; accreditation by the RMTC of all laboratories conducting analyses of racing samples including full participation in an external quality assurance program, and; progressive penalties designed to enforce longer periods of suspension for those licensees persistently operating outside of the rules.”

The Jockey Club acknowledges recent efforts by the Thoroughbred Horsemen's Association and looks forward to the adoption of uniform medication rules by January 1, 2014 by racing jurisdictions that have committed to uniform medication rules, laboratory accreditation and new penalties. As of August 11, 2013 that list includes Delaware, Maryland, Massachusetts, New Jersey, New York, Pennsylvania, Virginia and West Virginia.

In collaboration with key industry stakeholders including regulatory authorities, veterinary medical associations, horsemen associations, racetracks, breed registries, the Thoroughbred Safety Committee calls for the periodic review of the rules in light of statistical trends and new information to ensure the rules are properly aligned with objectives of enhancing the health, safety and welfare of racing's athletes, both human and equine.

National Uniform Medication Program

By January 1, 2014, all Thoroughbred pari-mutuel racing jurisdictions shall commit to implement:

1. Two-category drug classification system

- Regulatory levels and restricted administration times provided for controlled therapeutic medications with all other substances (subject to limited exception), prohibited.
- Furosemide, administered by the regulatory veterinarian, shall be the only allowed medication permitted within 24 hours of post time. No adjunct bleeder or other medication shall be allowed on race-day.

2. Drug Testing

- All drug testing facilities shall be accredited or apply for accreditation by the RMTTC, including full participate in the external quality assurance program.
- All laboratories shall quantify the amounts of the controlled therapeutic medications present in post-race samples.
- All blood and urine samples tested shall be screened for prohibited and controlled therapeutic medications using modern laboratory instrumentation and methods of analysis. The use of Enzyme-linked immunosorbent assay (ELISA) and Thin Layer Chromatographic (TLC) methods should be restricted to use in special circumstances only.

3. Penalties

- All states shall adopt immediately the RCI Uniform Classification Guidelines for Foreign Substances and Recommended Penalties and Model Rule.
- All states shall adopt, or commit to adopt by January 1, 2014, the new Multiple Medication Violation system.

4. Other safety and security items

- Practicing veterinarians shall be included in enhanced security protocols, including collection of syringes.
- “In-today” horses shall be clearly identified 24 hours prior to post to facilitate enhanced security protocols. Horses that have unauthorized veterinary contact shall be subject to scratch.

- All horses placed on official veterinary lists shall perform a timed workout to the satisfaction of the official veterinarian and pass a drug test following the workout.
- All jurisdictions shall promulgate rules authorizing out of competition testing for prohibited substances prior to entry.
- No intra-articular administrations shall be permitted within seven (7) days of post time or an official workout in order to be removed from veterinary lists.
- For all horses completing timed workouts, trainers shall maintain and make available for regulatory inspection, complete training records including veterinary treatments for all horses stabled on association property or other facilities.

Regulatory Limits and Restricted Administration Times for Controlled Therapeutic Medications comprising the National Uniform Medication Program (rev. 8/1/2013).

Drug	Threshold (Analyte)	Withdrawal	Drug	Threshold (Analyte)	Withdrawal
Acepromazine	10 ng/mL in urine (HEPS)	48 hours	Mepivacaine	10 ng/mL in urine (total hydroxymepivacaine) or LOD in plasma (mepivacaine)	72 hours
Betamethasone	10 pg/mL in plasma or serum	7 days	Methocarbamol	1 ng/mL in plasma or serum (IV or oral)	48 hours
Butorphanol	300 ng/mL of total butorphanol in urine or 2 ng/mL of free butorphanol in plasma	48 hours	Methylprednisolone	100 pg/mL in plasma or serum	21 days
Clenbuterol	140 pg/mL in urine; LOD in plasma	14 days	Furosemide	100 ng/mL in blood and urine specific gravity < 1.010	4 hours
Dantrolene	0.1 ng/mL of 5-OH dantrolene in plasma or serum	48 hours	Glycopyrrolate	3 pg/mL in plasma or serum	24 hours
Detomidine*	1 ng/mL carboxydetomidine in urine or LOD of detomidine in plasma	72 hours	Ketoprofen	10 ng/mL in plasma or serum	24 hours

Drug	Threshold (Analyte)	Withdrawal	Drug	Threshold (Analyte)	Withdrawal
Dexamethasone	5 pg/mL in plasma or serum	72 hours	Omeprazole	1 ng/ml in urine (omeprazole sulfide)	24 hours
Diclofenac	5 ng/mL in plasma or serum	48 hours	Phenylbutazone	2 mcg/mL in plasma or serum	24 hours
DMSO	10 mcg/mL plasma or serum	48 hours	Prednisolone	1 ng/mL of plasma or serum	48 hours
Firocoxib	20 ng/mL in blood; applies to EQUIOXX™ paste	14 days	Procaine/Procaine Penicillin	25 ng/mL of plasma or serum	**
Flunixin	20 ng/mL plasma or serum	24 hours	Triamcinolone Acetonide	100 pg/mL in plasma or serum	7 days
Lidocaine*	20 pg/mL of 3OH-Lidocaine in plasma or serum	72 hours	Xylazine*	LOD (TBD) in plasma or serum	48 hours

* Interim Recommendation

** In addition to threshold for procaine penicillin the following must occur: 1) mandatory reporting of administration; 2) no administration after entry to race; and 3) mandatory surveillance at the horse owner's expense for 6 hours prior to racing