The Mid Atlantic racing states joined together to implement a Mid-Atlantic Uniform Medication Program, effective January 1, 2014. These rules and policies have been implemented in New York, New Jersey, Pennsylvania, Delaware, Maryland, West Virginia, Virginia and Massachusetts. The Mid-Atlantic Program has spawned a national uniformity effort that has resulted in the National Uniform Medication Program that is being adopted and implemented throughout the racing industry in North America. The elements of the Uniform Program are as follows:

All medications have been divided into 2 categories.

There is a category of medications called Controlled Therapeutic Substances. This category contains a list of therapeutic medications that have been recognized as necessary in the routine treatment of illness or injury in the horse. Withdrawal time guidance and uniform laboratory detection thresholds for these medications are being provided as a safe harbor for horsemen. Horsemen are strongly encouraged to restrict use of medications to those on the Controlled Therapeutic Substances list, which will be amended from time-to-time. The list was developed by the RMTC’s Scientific Advisory Committee, which is comprised of the racing industry’s most respected toxicologists, pharmacologists, analytical chemist and regulatory and practicing veterinarians and combines international research efforts and practical considerations, have been approved by the RMTC Board, reviewed by the ARCI’s Drug Testing and Standards and Practices Committee and the ARCI Board. The list is a living document and will be amended from time-to-time. The medications currently on the Controlled Therapeutic Substances List are listed later in this booklet.

The recommendations for these therapeutics are available on the THA website (tharacing.com) and are listed alphabetically and by category of medication.
The other category of medications, which are the medications not on the Controlled Therapeutic Substances List, are called Prohibited Substances. No guidance is given as to recommended dosage and uniform testing detection level. Use of these medications is not necessarily prohibited in training, but they may not be present in the horse in a post race sample and, therefore, extreme caution must be exercised in their use in a horse entered to race. It is recognized that there are medications that may be used in the treatment of illness or injury in the horse that are not on the Controlled Therapeutic Substances List and for which no treatment guidance or uniform testing levels are provided. Horsemen and veterinarians are strongly cautioned to withdraw a horse from racing for a sufficient period of time after the administration of a medication not on the Controlled Therapeutic Substances list to ensure against a positive test. The penalties for the presence of these medications in post race samples are enhanced.

Substances that do not affect the organ systems of a horse such as antibiotics, anti-microbials, vaccines, etc. (except for procaine penicillin and levamisole) are not prohibited and are not the subject of testing.

Salix® (furosemide), pursuant to Commission supervised administration, is the only medication that can be administered to a horse within 24 hours of its race.

The use of adjunct bleeder medications is prohibited.

Although five (5) nonsteroidal anti-inflammatories (NSAIDs) and recommendations for their use are listed on the Controlled Therapeutic Substances List - diclofenac, firocoxib, flunixin, ketoprofen, phenylbutazone - they may not be used in combination and only one of these NSAIDs may be present in a post-race sample.

No intra-articular (IA) corticosteroid may be administered within seven (7) days of a race. The recommendations for the IA corticosteroids on the Controlled Therapeutic Substances list are limited to administrations in one (1) articular space. In regards to methylprednisolone acetate (Depo-Medrol), horsemen are strongly cautioned against the use of this medication for a horse in training. A trainer who chooses to race a horse that has been treated with Depo-Medrol despite this warning should, at his/her expense, get the horse tested prior to entry to ensure that the horse will test below the regulatory limit.
All laboratories performing testing for jurisdictions in this program are required to accredited to ISO 17025 (International laboratory standards) and the RMTC Code of Standards. These laboratories are required to participate in the RMTC’s external quality assurance program.

All participating jurisdictions are required to adopt and enforce the Multiple Medication Violation System, which tracks and regulates those horsemen who commit multiple medication infractions. Multiple medication rules offenders face mandatory enhanced penalties under the system.

All medications are classified (1-5) based upon their potential to influence a horse’s performance and the welfare of the horse. All medications are also assigned a penalty class (A-D). Horsemen can consult the Uniform Classification of Foreign Substances, List, maintained and updated from time-to-time by the ARCI, to determine a particular substance’s classifications which can be found here.

The ARCI also maintains a recommended system of Penalty Guidelines (Class A-D) for regulators to consider when adjudicating medication violations. Horsemen should consult these Guidelines.

For any specific questions regarding the uniform program, compliance with the program, medication guidelines and withdrawal times and the appropriate use of medications, you are encouraged to contact Dionne Benson, Executive Director of the RMTC at 859-224-2844 and/or consult your regulatory Equine Medical Director or State Veterinarian.
WARNING: The information on the Controlled Therapeutic Substances List does not constitute and is not a guaranty, warranty or assurance that the use of any of the therapeutic medications at the dosage and withdrawal time listed will not result in a positive post-race test.

Use of this information does not lessen or relieve any trainer’s responsibility for affirming that, during a horse race, a horse is free of any therapeutic medication listed in his or her state’s racing commission rulebook, and for complying with provisions of the state racing commission’s regulations.

Owners, trainers or any other persons responsible for the care of a racehorse are strongly advised to consult a veterinarian and the state racing commission regulatory veterinarian for guidance and advice on the use and withdrawal times of all therapeutic medications, as testing methodologies may change with little or no notice. The guidelines provided in this list are not consistent with foreign regulations or laboratory methods.

PLEASE NOTE: These guidelines are based upon the administration of a single medication. Combining medications or using multiple doses of single medication may significantly affect withdrawal times.

All drugs and medications are classified (1-5) based upon their potential to influence a horse’s performance and the welfare of the horse. All drugs and medications are also assigned a penalty class (A-D). Horsemen can consult the Uniform Classification of Foreign Substances, List, maintained and updated from time-to-time by the ARCI, to determine a particular substance’s classifications which can be found here.

The ARCI also maintains a recommended system of Penalty Guidelines (Class A-D) for regulators to consider when adjudicating medication violations. Horsemen should consult these Guidelines.
**ACEPROMAZINE** (Atrovet®, Notensil®, PromAce®)

- **Withdrawal time:** 48 hours
- **Threshold:** 10 ng/ml HEPS in urine
- **Dosage:** Single IV dose of acepromazine at 0.05 mg/kg
- **Class:** 3 – Penalty Class B
- **Points:** 2
- **Expires:** 2 Years

**ALBUTEROL** (Proventil®, Ventolin®)

- **Withdrawal time:** 72 hours
- **Threshold:** 1 ng/ml in urine
- **Dosage:** 720 micrograms total dose intra-nasal only.
  - Based upon dosing up to 4 times per day
- **Class:** 3 – Penalty Class B
- **Points:** 2
- **Expires:** 2 Years
- **Notes:** Administration of albuterol other than via intra-nasal routes is not recommended. Use of therapeutic doses of oral albuterol even outside of the recommended withdrawal guidelines carries a substantial risk of exceeding the regulatory threshold.

**BETAMETHASONE** (Betason®)

- **Withdrawal time:** 7 days
- **Threshold:** 10 pg/mL of plasma or serum
- **Dosage:** Single intra-articular administration of 9 milligrams of Betamethasone Sodium Phosphate and Betamethasone Acetate Injectable Suspension, USP (American Regent product #0517-0720-01)
- **Class:** 4 – Penalty Class C
- **Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days
- **Expires:** 1 Year
**BUTORPHANOL** (Torbugesic®)

- **Withdrawal time:** 48 hours
- **Threshold:** 300 ng/mL of total butorphanol in urine or 2 ng/mL of free butorphanol in plasma or serum
- **Dosage:** Single IV dose of butorphanol as Torbugesic® (butorphanol tartrate) at 0.1 mg/kg
- **Class:** 3 – Penalty Class B
- **Points:** 2
- **Expires:** 2 Years

**CETIRIZINE** (Zyrtec®)

- **Withdrawal time:** 48 hours
- **Threshold:** 6 nanograms per milliliter in plasma or serum
- **Dosage:** 0.4 milligram per kilogram twice a day for 5 doses.
- **Class:** 4 – Penalty Class C
- **Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days
- **Expires:** 2 Years
- **Notes:** Do not administer any avermectin drugs (including ivermectin) within 48 hours of a race if the horse has been administered cetirizine as it carries an increased risk of a concentration of cetirizine in excess of the regulatory threshold.

**CIMETIDINE** (Tagamet®)

- **Withdrawal time:** 24 hours
- **Threshold:** 400 nanograms per milliliter in plasma or serum
- **Dosage:** 20 milligram per kilogram BID for 7 doses
- **Class:** 5 – Penalty Class D
- **Points:** 0
- **Expires:** n/a

**CLENBUTEROL** (Ventipulmin®)

- **Withdrawal time:** 14 days
- **Threshold:** 140 pg/mL of urine or LOD in plasma or serum
- **Dosage:** Oral administration of clenbuterol as Ventipulmin® syrup (Boehringer-Ingelheim Vetmedica Inc., NADA 140-973) at 0.8 mcg/kg twice a day
- **Class:** 3 – Penalty Class B
- **Points:** 2
- **Expires:** 2 Years
**DANTROLENE** (Dantrium®)
- **Withdrawal time:** 48 hours
- **Threshold:** 100 pg/mL 5-hydroxydantrolene in plasma or serum
- **Dosage:** Oral administration of 500 mg of dantrolene as paste (compounding pharmacy) or capsule formulation (Proctor and Gamble)
- **Class:** 4 – Penalty Class C
- **Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days
- **Expires:** 1 Year

**DETOomidine** (Dormosedan®)
- **Withdrawal time:** 48 hours
- **Threshold:** 2 nanograms per milliliter of carboxydetomidine in urine; 1 nanogram per milliliter of detomidine in plasma
- **Dosage:** Single intravenous dose of 5 milligrams
- **Class:** 3 – Penalty Class B
- **Points:** 2
- **Expires:** 2 Years

**DEXAMETHASONE** (Azium®, Dexam SP®)
- **Withdrawal time:** 72 hours
- **Threshold:** 5 pg/mL of plasma or serum
- **Dosage:** IM and IV administration of dexamethasone sodium phosphate or oral administration of dexamethasone at 0.05 mg/kg regardless of route
- **Class:** 4 – Penalty Class C
- **Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days
- **Expires:** 1 Year
**DICLOFENAC** (Surpass®)

**Withdrawal time:** 48 hours  
**Threshold:** 5 ng/mL of plasma or serum  
**Dosage:** Five inch ribbon topical application of 1% diclofenac liposomal cream formulation. (Surpass Topical Anti-Inflammatory Cream, IDEXX Pharmaceuticals)  
**Class:** 4 – Penalty Class C  
**Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.  
**Expires:** 1 Year  
**Warning:** Horsemen are urged to avoid combining the non-steroidal anti-inflammatory drugs Flunixin (Banamine®), Ketoprofen (Ketofen®), Diclofenac (Surpass®), Firocoxib (Equioxx®) and Phenylbutazone (Butazolidin®). Only one NSAID can be present in a post-race test sample below established thresholds. If more than one NSAID is detected in a post-race sample above the established thresholds, it is considered stacking and is a medication violation subject to penalty.

**DMSO - DIMETHYL SULfoxIDE**

**Withdrawal time:** 48 hours  
**Threshold:** 10 mcg/mL of plasma or serum  
**Dosage:** 2 ounces topically administered  
**Class:** 4 – Penalty Class C  
**Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.  
**Expires:** 1 Year
**FIROCOXIB (EQUIOXX®)**

Withdrawal time: 14 days  
Threshold: 20 ng/mL of plasma or serum  
Dosage: Oral administration of firocoxib as EQUIOXX oral paste at a daily dose of 0.1 mg/kg for four days  
Class: 4 – Penalty Class C  
Points: 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.  
Expires: 1 Year  
Warning: Horsemen are urged to avoid combining the non-steroidal anti-inflammatory drugs Flunixin (Banamine®), Ketoprofen (Ketofen®), Diclofenac (Surpass®), Firocoxib (Equioxx®) and Phenylbutazone (Butazolidin®). Only one NSAID can be present in a post-race test sample below established thresholds. If more than one NSAID is detected in a post-race sample above the established thresholds, it is considered stacking and is a medication violation subject to penalty.

**FLUNIXIN (Banamine®)**

Withdrawal time: 32 hours  
Threshold: 20 ng/mL of plasma or serum  
Dosage: Single IV dose of flunixin as Banamine® (flunixin meglumine) at 1.1 mg/kg  
Class: 4 – Penalty Class C  
Points: 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.  
Expires: 1 Year  
Warning: Horsemen are urged to avoid combining the non-steroidal anti-inflammatory drugs Flunixin (Banamine®), Ketoprofen (Ketofen®), Diclofenac (Surpass®), Firocoxib (Equioxx®) and Phenylbutazone (Butazolidin®). Only one NSAID can be present in a post-race test sample below established thresholds. If more than one NSAID is detected in a post-race sample above the established thresholds, it is considered stacking and is a medication violation subject to penalty.
**FUROSEMIDE** (Salix®)
- Withdrawal time: 4 hours
- Threshold: 100 ng/mL of plasma or serum
- Dosage: Single IV dose of furosemide up to 500 mg
- Class: n/a
- Points: n/a
- Expires: n/a

**GLYCOPYRROLATE** (Robinul®)
- Withdrawal time: 48 hours
- Threshold: 3 pg/mL plasma or serum
- Dosage: Single IV dose of 1 mg of glycopyrrolate as Glycopyrrolate Injection, USP (American Regent product # 0517-4601-25)
- Class: 3 – Penalty Class B
- Points: 2
- Expires: 2 Years

**GUAIFENESIN** (Mucinex®)
- Withdrawal time: 48 hours
- Threshold: 12 ng/mL in plasma or serum
- Dosage: 2 grams BID for 5 doses
- Class: 4 – Penalty Class C
- Points: 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.
- Expires: 1 Year

**ISOFLUPREDONE** (Predef2x®)
- Withdrawal time: 7 days
- Threshold: 100 pg/mL plasma or serum
- Dosage: 10 milligrams total dose subcutaneous or 20 milligrams total dose in one articular space
- Class: 4 – Penalty Class C
- Points: 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.
- Expires: 1 Year
**KETOPROFEN** (Ketofen®)

- **Withdrawal time:** 24 hours
- **Threshold:** 2 ng/mL of plasma or serum
- **Dosage:** Single IV dose of ketoprofen as Ketofen® at 2.2 mg/kg
- **Class:** 4 – Penalty Class C
- **Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.
- **Expires:** 1 Year
- **Warning:** Horsemen are urged to avoid combining the non-steroidal anti-inflammatory drugs Flunixin (Banamine®), Ketoprofen (Ketofen®), Diclofenac (Surpass®), Firocoxib (Equioxx®) and Phenylbutazone (Butazolidin®). Only one NSAID can be present in a post-race test sample below established thresholds. If more than one NSAID is detected in a post-race sample above the established thresholds, it is considered stacking and is a medication violation subject to penalty.

**LIDOCAINE** (Xylocaine®)

- **Withdrawal time:** 72 hours
- **Threshold:** 20 pg/mL of total 30H-lidocaine in plasma or serum
- **Dosage:** 200 mg of lidocaine as its hydrochloride salt administered subcutaneously
- **Class:** 2 – Penalty Class B
- **Points:** 2
- **Expires:** 2 Years

**MEPIVACAINE** (Carbocaine®)

- **Withdrawal time:** 72 hours
- **Threshold:** 10 ng/mL total hydroxymepivacaine in urine or above LOD of mepivacaine in plasma or serum
- **Dosage:** Single 0.07 mg/kg subcutaneous dose of mepivacaine
- **Class:** 2 – Penalty Class B
- **Points:** 2
- **Expires:** 2 Years
**METHOCARBAMOL** (Robaxin®)

- **Withdrawal time:** 48 hours
- **Threshold:** 1 ng/mL of plasma or serum
- **Dosage:** Single IV dose of 15 mg/kg methocarbamol as Robaxin® or 5 grams orally
- **Class:** 4 – Penalty Class C
- **Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.
- **Expires:** 1 Year
- **Warning:** An oral dose may be utilized but longer withdrawal time may be required to fall below the threshold. Trainers using methocarbamol orally for multiple days are encouraged to have the horse tested prior to entry.

**METHYLprednisolone** (DepoMedrol®)

- **Withdrawal time:** See Dosing Specifications
- **Threshold:** 100 pg/mL of plasma or serum
- **Dosage:** Total dose of methylprednisolone acetate suspension in one articular space. The recommended withdrawal for methylprednisolone acetate is a minimum of 21 days at a 100 milligram dose.
- **Class:** 4 – Penalty Class C
- **Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.
- **Expires:** 1 Year
- **Warning:** Notwithstanding the ARCI recommendation, horsemen are strongly cautioned against the use of Depo-Medrol for a horse in training. A trainer who chooses to race a horse that has been treated with Depo-Medrol despite this warning should, at his/her expense, get the horse tested prior to entry to ensure that the horse will test below the regulatory limit, which is 100 picograms per milliliter of plasma or serum.
**OMEPRAZOLE** (Gastrogard®)

Withdrawal time: 24 hours
Threshold: Omeprazole Sulfide 10 ng per ml in serum or plasma
Dosage: Single 2.2 gram oral dose of omeprazole as Gastrogard® for up to 4 days
Class: 5 – Penalty Class D
Points: 0
Expires: n/a

**PHENYL BUTAZONE** (Bute, Butazolidin®)

Withdrawal time: 24 hours
Threshold: 2 mcg/mL of plasma or serum
Dosage: Single IV dose of phenylbutazone at 4.0 mg/kg
Class: 4 – Penalty Class C
Points: 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.
Expires: 1 Year
Warning: Horsemen are urged to avoid combining the non-steroidal anti-inflammatory drugs Flunixin (Banamine®), Ketoprofen (Ketofen®), Diclofenac (Surpass®), Firocoxib (Equioxx®) and Phenylbutazone (Butazolidin®). Only one NSAID can be present in a post-race test sample below established thresholds. If more than one NSAID is detected in a post-race sample above the established thresholds, it is considered stacking and is a medication violation subject to penalty.

**PREDNISOLONE** (Solu-delta Cortef®)

Withdrawal time: 48 hours
Threshold: 1 ng/mL serum or plasma
Dosage: 1 mg/kg orally
Class: 4 – Penalty Class C
Points: 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.
Expires: 1 Year
**PROCAINE PENICILLIN** (Wycillin®)

(administration within 30 days of a race must be reported to the Stewards and the horse must be submitted to 6-hour pre-race surveillance)

- **Withdrawal time:** May not be administered following entry into a race
- **Threshold:** 25 ng/mL plasma or serum
- **Dosage:** Intramuscular at 17 milligrams per kilogram
- **Class:** 3 – Penalty Class B
- **Points:** 2
- **Expires:** 2 Years
- **Warning:** Administration must be reported to Commission

**RANITIDINE** (Zantac®)

- **Withdrawal time:** 24 hours
- **Threshold:** 40 ng/mL serum or plasma
- **Dosage:** 8 mg/kg twice daily for seven doses
- **Class:** 5 – Penalty Class D
- **Points:** 0
- **Expires:** n/a

**TRIAMCINOLONE ACETONIDE** (Vetalog®)

- **Withdrawal time:** 7 days
- **Threshold:** 100 pg/mL plasma or serum
- **Dosage:** Total dose of 9mg in one articular space
- **Class:** 4 – Penalty Class C
- **Points:** 1/2, with incremental increases of 1/2 point for each additional violation within 365 days.
- **Expires:** 1 Year

**XYLAZINE** (Rompun®)

- **Withdrawal time:** 48 hours
- **Threshold:** 200 pg/ml of plasma or serum
- **Dosage:** 200 mg Intravenous
- **Class:** 3 – Penalty Class B
- **Points:** 2
- **Expires:** 2 Years
A blood specimen from a horse found to contain cobalt in excess of 25 nanograms per milliliter of blood plasma or serum shall be considered a positive finding. The Stewards and Judges shall be instructed to apply this regulation in the following manner:

1) A horse which tests for cobalt between 25 nanograms per milliliter of blood plasma or serum and 50 nanograms per milliliter of blood plasma or serum shall be placed on the vets list and not be permitted to start in a race until the horse tests for cobalt below 25 nanograms per milliliter of blood plasma or serum. All costs associated with any retesting shall be paid for by the owner of the horse.

2) A horse whose cobalt level exceeds 50 nanograms per milliliter of blood plasma or serum shall be disqualified, the trainer of the horse shall be suspended and/or fined at the discretion of the Stewards or Judges and assessed points under the multiple medication violation point system. As previously stated the horse shall be placed on the vets list and not permitted to start in a race until the horse tests for cobalt below 25 nanograms per milliliter of blood plasma or serum. All costs associated with retesting the horse shall be paid for by the owner of the horse.
GABA

GABA has been identified as being used on race day in several jurisdictions through records seized from veterinarians. Often, GABA is administered as a part of a substance called “Carolina Gold”. It is believed that this substance is often given at or around Lasix time. The purported use is to calm a horse prior to a race so that it remains calm through the paddock and even into the post-parade.

No United States racing jurisdiction allows the administration of exogenous GABA in the 24 hours prior to post time.

The GABA threshold in the horse may not exceed 110 ng/mL in plasma/blood.

GABA is considered a Class 3 substance with a Penalty Category B.

TCO2

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

The regulatory threshold for TCO2 is 37.0 millimoles per liter of plasma/serum or a base excess level of 10.0 millimoles, and;

The decision level to be used for the regulation of TCO2 is 37.0 millimoles per liter of plasma/serum plus the measurement uncertainty of the laboratory analyzing the sample, or a base excess level of 10.4 millimoles per liter of plasma/serum.
THIRD PARTY LASIX ADMINISTRATION PROCEDURES

The administration of Salix® (furosemide), to a horse on race-day will be by a Maryland Racing Commission designated veterinarian and according to the following rules and procedures:

1. The only medication allowed to be administered to a horse within 24 hours of its race is Salix® (furosemide).

2. The administration of any adjunct medication within 24 hours of the horse’s race is strictly forbidden.

3. A Commission designated veterinarian who does not practice on the grounds will be administering Salix®.

4. All horses shall be administered Salix® on the grounds of the operating racetrack in their assigned stall.
5. All horses declaring the use of Salix® must be on the grounds of the operating track at least 4 hours prior to post time for their race.

6. Trainers or their representative not requesting the use of Salix® shall declare their horse off of Salix® at the time of entry.

7. Trainers or their representative are responsible to contact and inform the Salix® Clerk at the operating track the dosage of Salix® their horse is to receive.

8. The Salix® Clerk will prepare a list of all horses scheduled to receive Salix®, their dosage and their location at the operating racetrack.

9. The Veterinarian designated to administer Salix® will identify the horse by its tattoo number, record the dosage and time of administration for each horse treated and make a written report to the Stewards and the State Veterinarian.

10. Trainers are responsible for having their representative present and available when the designated Veterinarian arrives to treat their horse.

11. If the Veterinarian designated to administer Salix® cannot locate a horse for treatment or the trainers representative, the Veterinarian will contact the stewards and relay the information.

12. It is recommended that a horse receive Salix® 4 hours prior to its race, at a dosage between 2 cc’s and 10 cc’s. Salix® will be administered IV only.

13. Under no circumstance will Salix® be permitted to be administered to a horse within 3 hours of its race.

14. A horse that is entered on Salix® and does not receive Salix® will not be permitted to run.

15. The State Veterinarian is responsible for determining a horses’ eligibility for the use of Salix® and also obtaining and verifying the proper documentation for a first-time Salix® horse.
Any horse entered to run in Maryland and designated to use Salix® will be administered Salix® by First Equine Horse Heath Services LLC.

The trainer or authorized agent is responsible for providing the Salix® Clerk with the proper dosage information for their horse.

It is recommended that the Salix® Clerk be contacted immediately upon the horse's entry:

MRC Salix® Clerk
Melanie Martin – 443-631-4891 or (301) 725-0400 ex. 8329

Salix® Dosage Information

Salix® Treatment Schedule

<table>
<thead>
<tr>
<th>Race</th>
<th>Post</th>
<th>Treatment</th>
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<tbody>
<tr>
<td>1</td>
<td>12:35</td>
<td>8:35 - 9:35</td>
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<tr>
<td>2</td>
<td>1:03</td>
<td>9:03 - 10:03</td>
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<td>3</td>
<td>1:31</td>
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<td>9:59 - 10:59</td>
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<td>2:56</td>
<td>10:56 - 11:56</td>
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<td>7</td>
<td>3:35</td>
<td>11:25 - 12:25</td>
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<td>8</td>
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<td>11:55 - 12:55</td>
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<tr>
<td>9</td>
<td>4:24</td>
<td>12:24 - 1:24</td>
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</tbody>
</table>

Times are approximate.

No horse will be treated within 3 hours of post time
Joint Injection Reporting

The trainer of record of a horse that was claimed shall have his veterinarian supply the State Veterinarian, within 72 hours, a report in writing or email of the joint(s) injection(s) performed on the claimed horse within the last 30 days. Report will include joint(s) involved, medication used (Depo-Medrol, Hyaluronic Acid, etc) and the dose used. This data will be shared with the party who claimed the horse.

Methylprednisolone

Notwithstanding the ARCI recommendation, horsemen are strongly cautioned against the use of Depo-Medrol for a horse in training. A trainer who chooses to race a horse that has been treated with Depo-Medrol despite this warning should, at his/her expense, get the horse tested prior to entry to ensure that the horse will test below the regulatory limit, which is 100 picograms per milliliter of plasma or serum.

Procaine Penicillin

Only Procaine Penicillin administrations within 30 days of a race need be reported to the state racing commission. The surveillance requirement remains in effect. The commission or the racetrack, as the case may be, will provide a security guard for the horse at the owner/trainer’s expense. Please note that the testing threshold for Procaine Penicillin is 25 nanograms per milliliter in plasma regardless of the surveillance requirement, and this testing threshold will be enforced.
Compounded Substances

1. The possession or use of a drug, substance, or medication on association grounds that has not been approved by the appropriate federal agency (e.g., the United States Food and Drug Administration) for any use in (human or animal) is forbidden without prior permission of the commission or its designee.

2. It is a violation of this regulation to possess, use, or distribute a compounded medication on association grounds if there is an FDA approved equivalent of that substance available for purchase. A difference in available formulations or concentrations does not alleviate the need to use FDA approved products.

3. It is a violation of this regulation to possess, use, or distribute a compounded medication on association grounds made from bulk substances if an FDA-approved equivalent is available for purchase.

4. Combining two or more substances with pharmacologic effect constitutes the development of a new drug. This may only be done in accordance with state and local laws and must contain FDA-approved medications, if available.

5. Compounded veterinary drugs: Veterinary drugs shall be compounded in accordance with all applicable state and federal laws. Compounded medication shall be dispensed only by prescription issued by a licensed veterinarian to meet the medical needs of a specific horse and for use only in that specific horse.

6. Labels on compounded veterinary drugs: All compounded medications must be labeled in accordance with section ARCI-011-020(D) Medical Labeling.

7. Possession of an improperly labeled product by any person on association grounds is considered a violation of this section.
Levamisole

Levamisole is commercially available as a dewormer for cattle, sheep, goats and pigs. It also has conventional off-label uses in horses as an immunostimulant and as a medication for treatment of Equine Protozoal Myelitis (EPM).

Levamisole metabolizes in the horse to aminorex and possibly also pemoline, both of which are potent stimulants assigned a 1/A Classification in the Association of Racing Commissioners International Uniform Classification of Foreign Substances. The identification of either of these substances in a post-race sample is associated with a potential career-ending penalty.

In consideration of its conventional use in horses, the Racing Medication and Testing Consortium contemplated an administration study to develop guidance on the use of levamisole and surveyed practicing veterinarians on their use of levamisole. Survey results included indications for use; route of administration (oral or injectable); dose (500 milligrams to 2,500 milligrams); and frequency and duration of treatment (3 days to unending).

Given the prevalence of compounded levamisole products and that survey results established there is no commonly used treatment protocol, the RMTC determined an administration study would yield limited information.

Therefore, the RMTC recommends that following withdrawal of the medication, levamisole-treated horses be subjected to testing prior to entry to verify that levamisole and its metabolites have been eliminated from the horse. Before submitting a sample for clearance testing it is advisable to consult the regulatory authority to make sure that your sample meets the laboratory’s requirements for matrix and volume.

Herbal Products & Homeopathic Remedies

The Racing Medication and Testing Consortium has published guidance for horsemen on use of herbal products and homeopathic remedies.

The RMTC said caution is necessary in regard to using such products or remedies in proximity to a race.
Horses can be inadvertently exposed to, or come in contact with, regulated substances that if detected in a post-race urine or blood test can result in significant penalties. The trainer responsibility rule requires that horsemen bear responsibility for the presence of unauthorized substances in a horse at the time of testing regardless of intent or the route of exposure.

The Racing Medication and Testing Consortium is offering guidance for horsemen in managing the horse’s environment to prevent contamination.

In addition to a specific sanction applicable to a particular violation, an individual found by the:

A. Stewards or judges to have violated a provision of this chapter may be subject to:

(1) A fine of up to $2,500;

(2) The suspension of any license issued by the Commission for a period of up to 360 days; and

(3) Referral to the Commission for additional sanctions if the stewards or judges determine that a greater sanction is warranted than they are empowered to impose; and

B. Commission to have violated a provision of this chapter may be subject to:

(1) A fine of up to $5,000;

(2) The suspension or revocation of any license issued by the Commission; and

(3) Certain conditions of licensure as imposed by the Commission.
MULTIPLE MEDICATION VIOLATION SYSTEM

1. A trainer who receives a penalty for a medication violation based upon a horse testing positive for a Class 1—5 medication with Penalty Class A—C, as provided in the most recent version of the Association of Racing Commissioners International Uniform Classification Guidelines for Foreign Substances, shall be assigned points as follows:

<table>
<thead>
<tr>
<th>Penalty / Class</th>
<th>Points for Controlled Medication</th>
<th>Points for Non Controlled Medication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class A</td>
<td>n/a</td>
<td>6</td>
</tr>
<tr>
<td>Class B</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Class C</td>
<td>1/2, with incremental increases of 1/2 point for each additional violation within 365 days</td>
<td>1, with incremental increases of 1/2 point for each additional violation within 365 days</td>
</tr>
<tr>
<td>Class D</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

2. The points assigned to a medication violation by the stewards or judges shall not be applied until a final adjudication of the enforcement of any such violation.

3. A trainer’s cumulative points for violations in all racing jurisdictions shall be maintained by the Association of Racing Commissioners International. Once all appeals are waived or exhausted, the points shall immediately become part of the trainer’s official record and shall be considered by the Commission in its determination to subject the trainer to the mandatory enhanced penalties by the stewards or judges as provided in this regulation.

4. If the Stewards, Judges, or Commission determine that the violation is due to environmental contamination, they may assign fewer or no points against the trainer based upon the specific facts of the case.

5. Multiple positive tests for the same medication incurred by a trainer prior to delivery of the official notice by the laboratory may be treated as a single violation. In the case of a positive test indicating multiple
substances found in a single post-race sample, the stewards or judges may treat each substance found as an individual violation for which points will be assigned.

6. The stewards or judges shall consider all points for violations in all racing jurisdictions as contained in the trainer’s official record when determining whether the mandatory enhancements provided in this regulation shall be imposed.

7. In addition to the penalty for the underlying offense, the following penalty shall be imposed upon a licensed trainer based upon the cumulative points contained in their official record:

<table>
<thead>
<tr>
<th>Penalty Classification</th>
<th>Time to Expungement</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>3 years</td>
</tr>
<tr>
<td>B</td>
<td>2 years</td>
</tr>
<tr>
<td>C</td>
<td>1 year</td>
</tr>
</tbody>
</table>

8. 8) Multiple medication points are not a substitute for the current penalty system and are intended to be an additional uniform penalty when the licensee:

(a) Has more than one violation for the relevant time period; and
(b) Exceeds the permissible number of points.

9. The suspension periods, as provided in §C(6) of this regulation, shall run consecutive to any suspension imposed for the underlying offense.

10. The stewards’ or judges’ ruling shall distinguish between the penalty for the underlying offense and any penalty based upon a steward’s or judge’s review of a the trainer’s cumulative points and regulatory record, which may be considered an aggravating factor in a case.

11. Points assigned to a trainer for a medication violation shall expire on the anniversary date of the date the suspension is completed as follows:

<table>
<thead>
<tr>
<th>Points</th>
<th>Suspension in Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 - 5.5</td>
<td>15 to 30</td>
</tr>
<tr>
<td>6 - 8.5</td>
<td>30 to 60</td>
</tr>
<tr>
<td>9 - 10.5</td>
<td>90 to 180</td>
</tr>
<tr>
<td>11 or more</td>
<td>180 to 360</td>
</tr>
</tbody>
</table>
Maryland’s Thoroughbred Racetracks:

**Pimlico Race Course**
5201 Park Heights Avenue
Baltimore, MD 21215
(410) 542-9400

**Laurel Park**
198 Laurel Race Track Road
Laurel, MD 20724
(301) 725-0400

**Timonium**
Maryland State Fair
2200 York Road
Timonium, MD 21093
(410) 252-0200

Maryland’s Standardbred Racetracks:

**Rosecroft Raceway**
6336 Rosecroft Drive
Fort Washington, MD 20744
(301) 567-4500

**Ocean Downs Racetrack**
10218 Race Track Rd
Berlin, MD 21811
(410) 641-0600

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**STATE OF MARYLAND**

**DEPARTMENT OF LABOR, LICENSING AND REGULATION**

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