

# RIDE STEWARD RESOURCES

## 1. Extra Forms

Blank EDRA Steward Report & Incident Report

## 2. EDRA Refund Policies

## 3. USEF Hot Weather Precautions

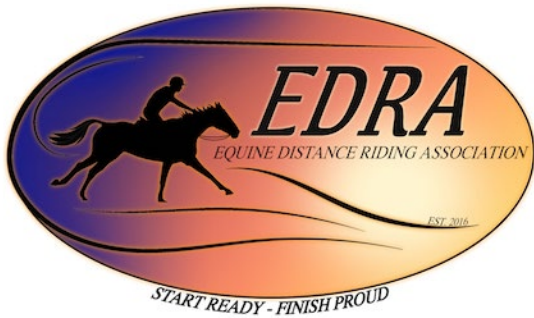
## 4. Drug Sampling

EDRA Drug Sampling Form

UC Davis (aka CAHFS – Equine Analytical Chemistry Lab, EACL) Visual Drug Sampling Instructions

UC Davis (aka CAHFS – Equine Analytical Chemistry Lab, EACL) Submission Form

UC Davis (aka CAHFS – Equine Analytical Chemistry Lab, EACL) Test Sample Shipping Invoice



## Steward's Report

Ride Name: \_\_\_\_\_

Ride Date: \_\_\_\_\_

Ride Manager: \_\_\_\_\_

Steward: \_\_\_\_\_

**Entries:**

- 
- 
- 

**General Comments:**

**Non-Reportable Incidents:**

Dogs:

Helmets:

Trails:

Suggestion.

**Other Issues and Matters:**

Stewards Manual was given to XXX to transport to the next ride. XXX was given the drug testing kit/cooler/key for safe keeping and transport to XXX.



## Incident Report – Incident #1

Name of person(s) and/or horse(s) involved:

- 
- 
- 
- 
- 
- 

Incident Description:

Steward's Action Taken:

Resolution:

Further Actions Required:

## Incident Report – Incident #2

Name of person(s) and/or horse(s) involved:

- 
- 
- 
- 
- 
- 

Incident Description:

Steward's Action Taken:

Resolution:

Further Actions Required:



**Thank you for pre-registering for the \_\_\_\_\_ Ride!**

EDRA offers a variety of distance rides of various mileage, relays, intro rides, and ride-and-ties, as well as some USEF recognized distance competitions, for those interested and eligible. As you complete this application, you will see the distances and ride types this ride is offering. Please make sure your equine meets our age requirements, depending upon the distance you choose, and read our late fee and refund policies.

Entrants must pay in advance to secure a spot. If you prefer to pay by check, send an e-mail to the ride manager and you will be sent a fillable form to snail mail back, along with your check. All snail mailed entry registrations must be post marked no later than two weeks prior to the event.

***Thanks to EDRA's Mary & Anna Memorial Youth Fund and this Ride Manager's matching discount, participants under age 18 entering distance rides, ride free!***

**EDRA Late Fee:** Participants are strongly encouraged to pre-register online and pay in advance for EDRA events. If this is not possible, the participant should email the Ride Manager and request a fillable form to snail mail back, with payment. Those who do not pre-register and pay their entry within one week of the event will incur an additional \$20 late fee, to be paid by cash or check during their on-site registration or check-in.

**EDRA Refund Policies:** Because completion awards, veterinarian services, sanitary toilets, and other expenses have been incurred months in advance of the event, participants may cancel up to 48-hours before the ride to receive a refund for all but \$20 of the amount paid. Refunds are not offered for cancellations with less than 48 hours' notice. The only exception is that a refund for all but \$20 may be offered to participants who arrive at ride camp with their equine but are unable to start the ride due to an unanticipated issue. (E.g., equine or rider are injured or become ill between vet-in, and the ride start).

Additionally, in the event of a situation beyond the ride manager's control (e.g., snow, wildfire, government shutdown that prevents the ride from taking place), a ride may be cancelled with less than 48 hours' notice. In these unique situations, the ride manager may determine a refund policy that allows them to recoup already incurred and non-refundable costs (e.g., land manager permit fees, veterinarians, ride awards and sanitary facilities).

# HOT WEATHER PRECAUTIONS

## USEF recommendations for participants:

- All parties are responsible for evaluating their specific situation and taking necessary steps to ensure healthy safe competition.
- If the total (temperature + humidity) is below 130, you can enjoy the competition.
- When the number (temperature + humidity) falls between 130 and 150, you should begin to monitor for potential signs of heat stress in the horse.
- When the number (temperature + humidity) falls between 150 and 180, it is critical to monitor the horse for signs of heat stress.
- If the number (temperature + humidity) is above 180, US Equestrian encourages alternative competition times.

## HEAT ALERT: US EQUESTRIAN RECOMMENDATIONS FOR COMPETITIONS



### HEAT INDEX > 180

Consider Alternative  
Competition Times

*Normal cooling is almost ineffectual*

### HEAT INDEX > 150

Use Caution

*Monitor closely for signs of heat stress  
From 130-150, begin to monitor*

### HEAT INDEX < 130

Enjoy the competition!

*The horse can keep its body cool*

### NOTE

This scale is based on the sum of temperature plus relative humidity. The National Weather Service utilizes a complex formula for calculating the Heat Index. Thus, the National Weather Service's scale and this scale for heat index are not equivalent measurements.

*Information provided by AAEP*

### HEAT INDEX

=



TEMPERATURE

+

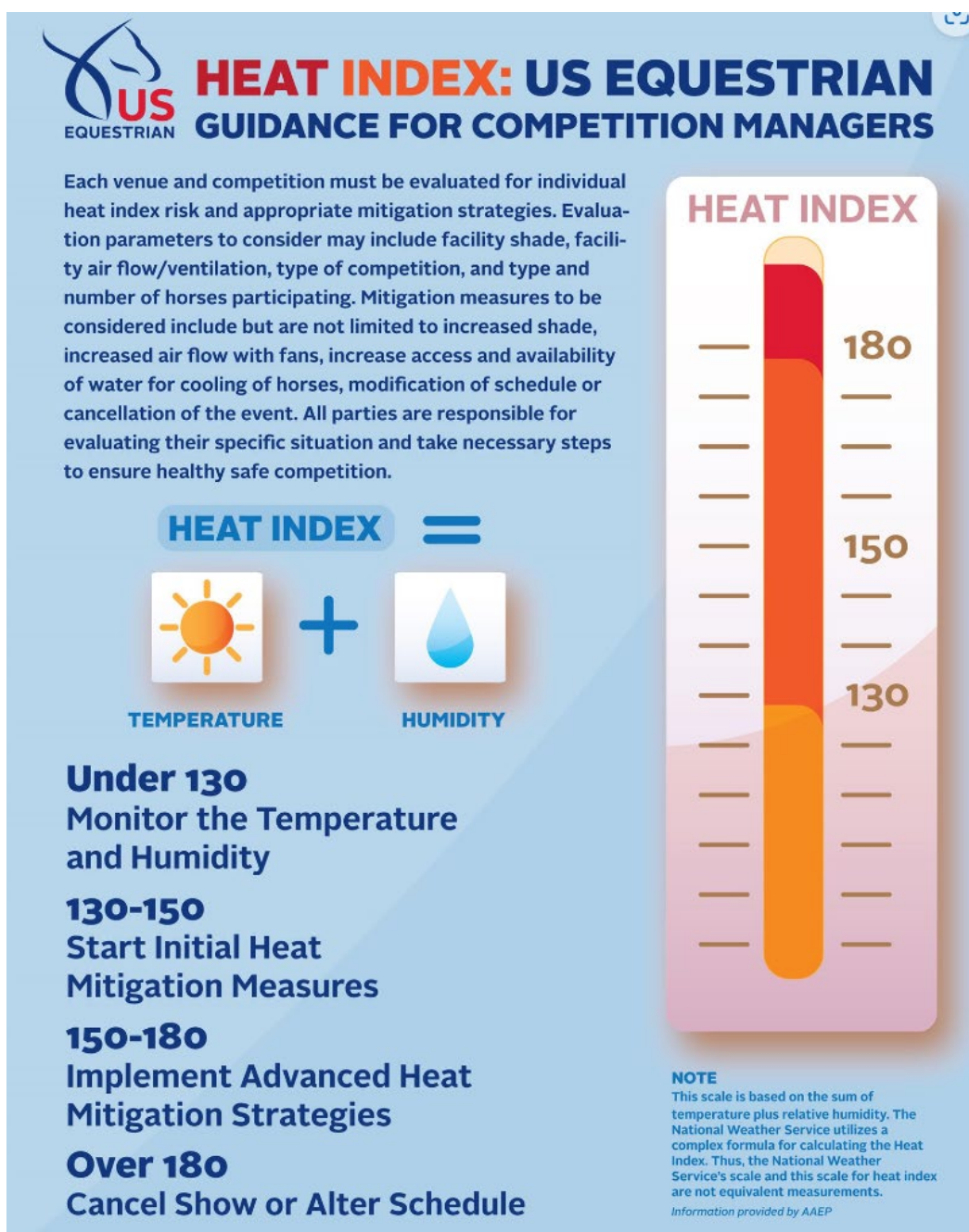


HUMIDITY



## USEF recommendations for competition managers:

- Evaluate heat risk factors at the venue and implement necessary heat mitigation measures.
- Evaluation parameters to consider may include facility shade, facility air flow/ventilation, type of competition, and type and number of horses participating.
- Mitigation measures to be considered include but are not limited to increased shade, increased air flow with fans, increased access and availability of water for cooling of horses, modification of schedule, or cancellation of the event.
- Continually monitor temperature and relative humidity at the event grounds. If the temperature combined with the relative humidity is greater than 180, we recommend cancelling the event for that day or rescheduling classes to early mornings and/or later in the evenings when temperatures and humidity may be lower.
- IMPORTANT NOTE - The heat index can vary from location to location and at different times during the day, so it is important to consistently check the temperature and humidity for your location.



### USEF quick tips from Dr. Katie Flynn:

- Monitor - Monitor horse and human athlete health in hot weather.
- Stay Hydrated - It is important that human and horse athletes remain hydrated and stay cool in the shade or in area with fans, when possible.
- Heat Stress Signs in a Horse
- Elevated temperature (105-107 °F)
- Rapid breathing
- Rapid pulse
- Stumbling or weakness
- Dry skin
- Dehydration
- IMPORTANT NOTE - An overheated horse should be cooled off with cool water, provided fluids for rehydration and placed in the shade or in an area where there is a breeze or fan. If a horse is not back to normal within an hour or signs worsen, contact a veterinarian.

## TREATING AN OVERHEATED HORSE

**Signs of heatstroke may include the following:** temperature as high as 105 to 107 F; rapid breathing, rapid pulse; stumbling, weakness, depression; refusal to eat or work; dry skin and dehydration. In severe cases, a horse may collapse or go into convulsions or a coma.

### SHADE

Remove tack and place animal in the shade; if possible add a breeze with a fan.



### COOL OFF

Splash or spray the horse with cool water; you can ice neck, forehead, inside of front and back legs.



### RE-HYDRATE

Provide water to replace the fluids the horse lost with sweat. Electrolytes may also be given orally.



### MONITOR

If the horse is not back to normal within an hour or if you're unsure, call your veterinarian immediately!

**The Drug Sampling  
Procedure may be found in  
General Rules, Appendix C.**

The Steward will photograph the completed information below, forwarding it to the EDRA Drug Coordinator, Jill Brewster (425) 356-9444 or [jillk007@gmail.com](mailto:jillk007@gmail.com) so that he/she may inform the rider of drug testing results on their equine. The Steward should ensure the information provided below is legible and easy to read.

BAR CODE (from test selected): \_\_\_\_\_

RIDE NAME: \_\_\_\_\_

RIDE DATE: \_\_\_\_\_

RIDER NAME: \_\_\_\_\_

RIDER NUMBER: \_\_\_\_\_

RIDER EMAIL ADDRESS: \_\_\_\_\_

RIDER PHONE NUMBER: \_\_\_\_\_

EQUINE OWNER: \_\_\_\_\_

EQUINE NAME: \_\_\_\_\_

RESPONSIBLE PARTIES (rider, owner, trainer, and/or support crew of the equine): \_\_\_\_\_

EQUINE REGISTRATION # (IF ANY): \_\_\_\_\_

EDRA LOGBOOK #: \_\_\_\_\_

IF NO EDRA LOGBOOK, LIST ALL DOCUMENTS USED (if any): \_\_\_\_\_

IF NO DOCUMENTS, PERSON IDENTIFYING EQUINE: \_\_\_\_\_

COLOR: \_\_\_\_\_

MARKINGS:

FACE: \_\_\_\_\_

LEGS: \_\_\_\_\_

OTHER (include tattoos, scars, brands, etc.): \_\_\_\_\_

### Step Three (Selection of blood sampling supplies – from drug testing cooler)

- A. The Head Veterinarian, Steward and RP shall put on clean gloves. Gloves must be used during the entire sampling procedure until the sample containers are sealed in a security bag and are no longer directly handled. Gloves should be changed immediately if requested by the RP and or if any chance of contamination has occurred.
- B. Wearing clean gloves, have the RP remove from the Testing Box one small zip lock bag containing the testing materials. Place all the supplies on a clean surface. The supplies should include three test tubes, one blood draw needle, one needle holder, blank labels, three bar-coded labels, alcohol wipes, and one u-secure label.
- C. Have the RP visually inspect the equipment and verbally verify that it is in new condition. The RP may reject the equipment and choose another zip lock bag.
- D. Verify with the RP that the three bar code labels are identical. Fill out all three of the bar-coded labels. Where it requests the track name, write "EDRA" and the race name (e.g., Sand Canyon). Provide the date and the person drawing the sample. Have RP confirm that the labels are completed accurately.

### Step Four (Blood draw and shipping samples)

- A. In front of the RP, clean the draw site with a disinfectant swab and allow it to dry.
- B. Collect blood into the three blood tubes filling them until no vacuum remains.

- C. Place a plain label over the test tube stopper in such a way that the stopper cannot be removed without removing the label and have the RP initial the label across the top of the tube with a permanent marker.
- D. With the bar code vertically placed on the test tube, wrap the bar-coded label around the test tube. The entire bar code must be visible. Record the bar code for the equine listed above here and have the RP initial that the bar code is correct. (Photographs of the correct labeling placement are available for viewing in drug cooler.)
- E. Place the tubes back into the small plastic bag. Squeeze air out of the bag and seal it with the u-secure label across the full width of the bag so the contents may not be accessed without breaking the seal. Have the RP sign across the u-secure label with a permanent marker.
- F. The Head Veterinarian shall complete the sample shipping invoice and place it back in the Testing Box. Be sure that all samples to be mailed are listed on the shipping invoice.
- G. All samples must be kept secure AND COOL until all samples for an event are drawn. As soon as reasonably possible thereafter, place the tubes in the Testing Box with the frozen coolant, affix the shipping label found in the Testing Box, seal the container shut with shipping tape and mail the samples to the contracted lab: Kenneth L. Maddy Equine Analytical Chemistry Laboratory, University of California, Davis, 620 West Health Sciences Drive, Davis, CA 95616-5270

**Step Five (Confirmation of process by parties)**

All parties shall sign this document.

**HEAD VETERINARIAN:** I hereby attest that: (a) to the best of my knowledge the equine identified above is the equine from which a blood sample was taken, and (b) I followed the blood draw process set forth above without alteration, modification or variation and, (c) to the best of my knowledge a clean and uncontaminated blood sample was obtained.

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NAME DATE AND TIME

**STEWARD:** I hereby attest that: (a) to the best of my knowledge the equine identified above is the equine from which a blood sample was taken, and (b) I personally observed all steps of the blood draw and the process was followed in its entirety without alteration, modification or variation, and (c) to the best of my knowledge a clean and uncontaminated blood sample was obtained.

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NAME DATE AND TIME

**RP:** I hereby attest that: (a) to the best of my knowledge the equine identified above is the equine from which a blood sample was taken, and (b) I personally observed all steps of the blood draw and the process was followed in its entirety without alteration, modification or variation, and (c) to the best of my knowledge a clean and uncontaminated blood sample was obtained. I further attest that: I am or will immediately become familiar with the EDRA drug rule and will assure that the owner of the equine is aware that a blood test was drawn and is aware of the EDRA drug rule.

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NAME DATE AND TIME

**The Steward will place this completed form in the Ride Steward’s Manual under the tab provided for the specific ride.**

**Once results are back to the EDRA Drug Coordinator, he/she will contact participants whose equines passed the drug testing and advise them of the results. He/she will forward a hard copy of the testing results to the Steward Coordinator so that they may be filed in the Ride Steward’s Manual with the random number list and rider forms, thus completing the drug testing protocol for that event.**

**If an equine fails the drug test, the EDRA President will be notified and the President will initiate the required steps outlined in the Drug Rule, Appendix C.**

## Sample Labeling and Packaging

### Supplies provided for each sample:



Red Tag for Locking Cooler



Blood Collection Vials



Collection Needle



Needle Holder



Blood tube container



Blood Tube Label



Blood Tube Evidence Seal



Alcohol Wipe



Biohazard Bag

### Sampling/Labeling Procedure for Blood:

1. Fill out Blood tube labels with all necessary information
2. Draw blood tubes as full as possible
  - a. Place evidence seal over stopper (Figure 1)
  - b. Place barcoded label with barcode vertical and wrap around (Figure 2 & 3)
  - c. Have witness initial top of blood tube (Figure 4)



Figure 1



Figure 2



Figure 3



Figure 4

### Shipping Instructions:

1. Freeze ice packs
2. Place blood sample triplicates into biohazard bags and place all samples into insulated blood tube container.
3. Fill out invoice forms and place into a provided Ziploc bag.
  - a. Include Sample ID, gender, and sample type
4. Place all samples, ice pack, and paperwork into the cooler
5. Close lid and lock cooler through ring with the provided Red Tag
6. Place cooler into cardboard box and tape shut
7. Fill out the provided pre-paid FedEx airbill and place into the provided FedEx sleeve. Attach to the outside of the box
8. Ship via Fedex



## CAHFS- Equine Analytical Chemistry Laboratory Submission Form

FOR MORE INFO VISIT: <https://cahfs.vetmed.ucdavis.edu/>

<b>Shipping address:</b> EACL- CAHFS 620 West Health Sciences Drive Davis, CA 95616	<b>Correspondence Address:</b> EACL- CAHFS PO Box 1770 Davis, CA 95617-1770
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Submitter Details				Bill-to Details (if different from submitter)			
<i>***Submitter will be billed and is responsible for payment if left blank.</i>							
Name:				Name:			
Mailing Address:				Mailing Address:			
City				City			
State:		Zip Code:		State:		Zip Code:	
Telephone number:				Telephone number:			

**Submission details:**

Sample Reference: <small>(for multiple samples – attach a separate shipping invoice)</small>	Sample Collection Date:	
# Samples Submitted: Blood (s) _____ Urine(s) _____ Hair _____ Other (specify): _____ <small>(SST preferred)</small>		
Requested Analysis:	Post-Race or Post-Competition Testing	Condition of Entry Hair Testing
	Pre-Purchase Drug Screen	Residue Avoidance Testing (livestock)
	Split Sample Analysis	Feed or Evidence Testing
	Pharmacology submission	Therapeutic Drug Monitoring (specify drug below)
	Other:	
Medications Administered:		

**Reporting details:**

Provide results by (select box):	<input type="checkbox"/> Fax number: <input type="checkbox"/> Email address:
Provide results to: <small>(if different from submitter)</small>	

**Submission Policies:**

- Preliminary results will be provided within 10 working days of receipt of sample. Confirmatory results, if required, may incur additional fees and require your approval.
- Under no circumstances is EACL testing to be used to provide certification of a product or certify the health status of an animal.
- Invoices for testing performed by EACL will be provided via USPS mail; payment is due within 30 days of invoice date.
- Submissions from current California Horse Racing Board (CHRB) licensees require prior approval by the CHRB and the results will be shared with the CHRB.
- I certify that I am not a covered person, represent a covered person, or am requesting testing on a covered horse as defined by the Horseracing Integrity and Safety Authority.
- I understand that specimens submitted are the property of CAHFS. Client information provided to CAHFS, and the tests results from samples submitted to CAHFS, will be treated as confidential information consistent with applicable legal standards, including, but not limited to, California Business and Professions Code section 4857 and Evidence Code section 1040. Client information and test results are automatically provided to the veterinarian listed on the submission form. Such confidential information will not be divulged to third parties without written consent of the client, except when required by law, which includes requirements that test results be provided to regulatory agencies. University, its officers, employees, and agents shall not be accountable for any loss, expense (including attorneys' fees), damage, or liability of any kind resulting from or arising out of services provided hereunder unless caused by negligent or willful acts or omissions by University, its officers, employees, or agents.

Signature of Submitter \_\_\_\_\_

Date \_\_\_\_\_

## TEST SAMPLE SHIPPING INVOICE

Circle/mark applicable fields

	<b>Sample ID</b>	<b>Matrix</b> <small>U=Urine, B=Blood, H=Hair</small>	<b>Lasix</b>	<b>Gender</b> <small>C=Colt S=Stallion F=Filly M=Mare G=Gelding R=Ridgeling</small>	<b>Reported Medications</b>
1		U B H	<input type="checkbox"/>	C S F M G R	
2		U B H	<input type="checkbox"/>	C S F M G R	
3		U B H	<input type="checkbox"/>	C S F M G R	
4		U B H	<input type="checkbox"/>	C S F M G R	
5		U B H	<input type="checkbox"/>	C S F M G R	
6		U B H	<input type="checkbox"/>	C S F M G R	
7		U B H	<input type="checkbox"/>	C S F M G R	
8		U B H	<input type="checkbox"/>	C S F M G R	
9		U B H	<input type="checkbox"/>	C S F M G R	
10		U B H	<input type="checkbox"/>	C S F M G R	
11		U B H	<input type="checkbox"/>	C S F M G R	
12		U B H	<input type="checkbox"/>	C S F M G R	
13		U B H	<input type="checkbox"/>	C S F M G R	
14		U B H	<input type="checkbox"/>	C S F M G R	
15		U B H	<input type="checkbox"/>	C S F M G R	
16		U B H	<input type="checkbox"/>	C S F M G R	
17		U B H	<input type="checkbox"/>	C S F M G R	
18		U B H	<input type="checkbox"/>	C S F M G R	
19		U B H	<input type="checkbox"/>	C S F M G R	
20		U B H	<input type="checkbox"/>	C S F M G R	

Remarks: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Location: \_\_\_\_\_

Collection overseen by: \_\_\_\_\_

Date Collected: \_\_\_\_\_ Tracking #: \_\_\_\_\_