

POAC MEDICATION REPORT

Make sure you are aware of the current POAC Drug Rules and Regulations:

No person shall cause to be administered internally or externally to a pony, either before or during an approved event, any medication or drug that is of such character as could affect the pony's performance or appearance at that event, EXCEPT FOR THOSE CONDITIONALLY PERMITTED THERAPEUTIC MEDICATIONS, THE USE OF WHICH IS SPECIFICALLY PROVIDED FOR IN THE THERAPEUTIC MEDICATIONS SECTION B OF THIS RULE AND NOT OTHERWISE PROHIBITED BY GOVERNMENTAL REGULATIONS. It is your responsibility to read and understand the current POAC Handbook for complete information on Drugs and Medications prior to your participation in a POAC event.

Permitted Therapeutic Medications:

Only the 13 drugs or medications listed below may be administered within 24 hours of showing. The appropriate dosage as detailed in the POAC Handbook must be administered. Administration of these drugs does not require that the animal be withdrawn and kept out of competition for a period not less than 24 hours after the medication is administered. Nor is there a requirement that the medication report be filed with Show Management, except when Lidocaine/Mepivacaine is used.

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|-------------------------|-------------------------------|---------------------------|
| 1. Phenylbutazone | 6. Meclofenamic Acid (Arquel) | 10. Acetazolamide |
| 2. Diclofenac (Surpass) | 7. Naproxen | 11. Furosemide (Lasix) |
| 3. Flunixin (Banamine) | 8. Firocoxib (Equioxx) | 12. Isoxsuprine |
| 4. Ketoprofen | 9. Eltenac | 13. Lidocaine/Mepivacaine |
| 5. Dexamethasone | | |

Product name _____

Amount Administered _____ Strength _____

Route of Administration Oral Topical Injectable
 Intravenous
 Intramuscular
 Subcutaneous

Date of Administration _____ Time of Administration _____

Diagnosis and Reason for Administration (*this must be for a therapeutic purpose only*) _____

Name and phone number of licensed veterinarian prescribing/administering the medication (*PLEASE ATTACH prescription*) _____

While this Medication Report must be filed only if the administered medication will be present in amounts detectable in blood and/or urine samples at the time of competition/sampling, exhibitors are hereby cautioned that it is their responsibility to determine whether or not such medication has had time to clear the pony's system. IF THERE IS ANY DOUBT, A MEDICATION REPORT SHOULD BE FILED. Exhibitors, owners, trainers and veterinarians are cautioned against the use of medicinal preparations, tonics, pastes and products of any kind, the ingredients and quantitative analysis of which are not specifically known, as they may contain a forbidden substance.

Pony Back Number(s) _____

Pony Name _____ Reg.# _____

Foal Date _____ Color _____ Mare Stallion Gelding

Owner Name _____ Exhibitor Name _____ Trainer Name _____

Printed Name and Signature of Owner/Responsible Party _____ Date _____

Printed Name and Signature of Veterinarian/Person Administering Medication _____ Date _____

Signature of Show Management _____ Time of Receipt _____ Date _____