



Chapter

8

ERASA

Endurance Ride Association of South Africa

Veterinary

CHAPTER 8

VETERINARY

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8.1 GENERAL PRINCIPLES

- 8.1.1 ERASA is responsible for the overall conduct and management of endurance riding in South Africa. This includes the maintenance of the welfare of the horses participating in endurance rides, and measures to protect the health and welfare of horses therefore form an important part of the endurance rules.
- 8.1.2 It is unlikely that these rules will cover every eventuality that might occur at an endurance ride. It is therefore expected of the veterinary panel that officiates at an endurance ride to, under exceptional circumstances and in close collaboration with the ride master at the ride, make decisions that, although outside these rules, are nevertheless in the spirit of the ERASA Constitution and Rules.
- 8.1.3 Veterinarians must advise riders on the health status of their horses and provide them with an early warning or specific advice on the management and handling of horses during an endurance ride.
- 8.1.4 It is the responsibility of the chief veterinarian officiating at a ride to ensure that the Ride Committee strictly applies the veterinary rules at the ride. Deviations from the veterinary rules must be reported on in the chief veterinarians report to the Council veterinarian, who shall investigate and, if indicated, discuss this with the management committee of the Union where the club involved is affiliated. If the council veterinarian is of the opinion that the deviation of the rules is serious, he can refer it to Council. A repetition of the same deviation of the rules at rides presented by the same club at a later date shall be reported to Council for further action.
- 8.1.5 The duties of the ride committee are explained in Chapter 6. It is emphasized that each ride committee is responsible to:

8.1.5.1 Appoint a chief veterinarian.

- 8.1.5.1.1 For major events (including National Championships and rides where international participation is expected) the Council Veterinarian or his delegate (as appointed by the Endurance Veterinary Interest Group) will serve as chief veterinarian.
- 8.1.5.1.2 At all other rides the Union veterinarian should be involved in the appointment of the chief veterinarian.

8.1.5.2 Provide a treatment area (under cover or in permanent shade)

- 8.1.5.2.1 At least one crush must be made available at all rides, and two small paddocks or stables, where horses which are under treatment can be kept for observation, should be provided.
- 8.1.5.2.2 At all ride bases where rides of 120km or longer are presented on a regular basis, the ride committee should make at least one stable with solid walls (brick, concrete or solid poles placed against one another) available at the treatment area, where a horse that is under treatment can be closed in. The inside of the stable walls should preferably be covered with soft material to prevent horses from injuring themselves.

8.1.5.3 Provide stabling and/or sufficient space for riders to erect their own paddocks.

- 8.1.5.3.1 Oversee that stables and/or paddocks that are made available at the ride venue are properly cleaned and disinfected prior to the ride.
- 8.1.5.3.2 Ensure that stables at the venue are well-ventilated.
- 8.1.5.3.3 At multiple day rides and major events (where horses arrive at the venue several days before the ride) provision shall be made for the daily removal from the stable area of all used bedding and manure (which is removed from the stables and/or paddocks by the riders/grooms).
- 8.1.5.3.4 Where the ride committee cannot provide sufficient stables and/or paddocks, a specific area where riders can erect their own paddocks shall be prepared.

8.1.5.4 Provide good quality drinking water for the horses.

8.1.5.5 Provide emergency services. This shall include (but is not limited to):

- 8.1.5.5.1 A horsebox with towing vehicle that can be used to fetch injured and/or horses experiencing some any form of trouble from the course.
- 8.1.5.5.2 Arrange for a farrier to be available at the ride venue.

8.1.5.6 In addition to the above, the ride committee shall see to it that the veterinary inspection area is properly demarcated (refer Chapter 2). The chief veterinarian must approve of:

8.1.5.6.1 The space provided in the inspection area for horses waiting to be examined, which must be sufficient to prevent injuries when a large number of horses are awaiting examination.

8.1.5.6.2 The surface of the trotting area:

- Should be flat to allow the veterinary panel to form an opinion on the horse's motion;
- Must be firm, flat and clean;
- Must be such that it will not severely deteriorate during the ride.

8.1.5.6.3 The trotting lanes shall be forty (40) metres in length, with ample space for the horses to turn around at the bottom end of each lane.

8.1.6 Chief Veterinarian. The duties of the chief veterinarian are listed in Chapter 6. It is emphasised that the chief veterinarian should appoint the rest of the veterinary panel and the treatment veterinarian(s), or see to it that they are appointed.

8.1.6.1 The chief veterinarian officiating at the ride may, after consultation with the ride committee, employ specific TRP (temperature, pulse and respiration) stewards or veterinary or veterinary nursing students to take the horse's temperature, pulse and respiration on behalf of the veterinary panel, on condition that all deviations shall be brought to the attention of the veterinary panel immediately.

8.1.6.2 The environmental temperature and humidity should be taken into consideration at endurance rides, as it can have a negative impact on the performance and welfare of the horses, especially when critical values are exceeded. Only limited information is available on the critical values and the measures that should be taken under extreme circumstances. The chief veterinarian shall consult with the ride master and the ride committee if he/she is of the opinion that the environmental conditions place the participating horses at risk (refer Chapter 2).

8.1.6.3 The chief veterinarian must submit a report after each ride meet. This report shall be submitted to the ride committee in the prescribed format (refer appendix A). The ride committee must submit the report to the ERASA central office.

8.1.7 Veterinarians. The duties and responsibilities of the veterinarians are explained in Chapter 6, and it is expected of all veterinarian who officiate at rides to study these. It is emphasized that:

8.1.7.1 The veterinary panel has absolute control over all matters pertaining to the welfare and safety of the horses.

8.1.7.2 Decisions made by the veterinary panel are final and cannot be appealed.

8.1.7.3 Veterinarians may:

8.1.7.3.1 Examine horses at any stage during the ride, and after such examination make a decision on the horse's continued participation in the ride and/or the whether the horse is fit to be removed from the ride venue.

8.1.7.3.2 Take samples (any bodily fluid or tissue) for laboratory analysis to detect the presence of prohibited substances from any horse that is entered for the ride.

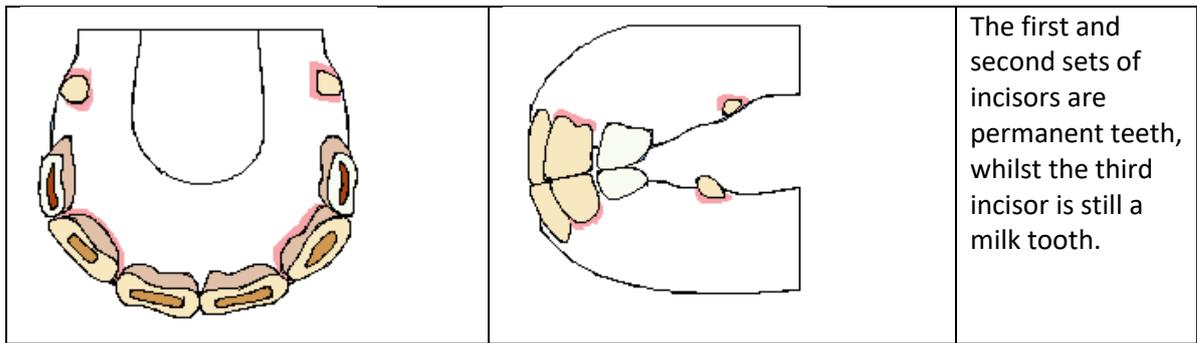
- 8.1.7.3.3 Perform a post mortem examination on any horse which was entered for a ride under ERASA rules and which died during the ride meet, or, if the responsible person is willing to carry the costs, arrange for a post mortem examination to be performed by a veterinary pathologist.
- 8.1.7.3.4 In cases of injury or disease, prescribe and/or administer treatment that, in the opinion of the veterinarian, is essential for the survival of the horse. Such treatment may not be refused by the rider/owner, and is for the account of the rider/owner. Also refer Chapter 9.
- 8.1.8 A horse showing symptoms that could be linked to any contagious or transmissible disease, or that was in contact with horses infected with such a disease or that comes from premises where there are horses infected with such a disease may not participate in ride meets, and the responsible person shall see to it that such horses are not taken to a ride meet. The same applies when there is suspicion, based on sound reasons, that a horse has contracted such a disease, and the veterinary panel officiating at a ride has the mandate to refuse such a horse entry to and/or to instruct that such a horse is to be removed from the ride venue.
- 8.1.9 At all rides all horses that were eliminated, retired, stopped the step ladder and/or completed the ride shall be monitored by the rider/person responsible on a regular basis. The onus is on the rider to report any signs of discomfort or illness to the treating veterinarian. Non-compliance with this article can lead to disciplinary action against the rider/person responsible.
- 8.1.10 Specific rules regarding horses participating in endurance rides are set out in Chapter 4 and are not repeated here. It is essential that study Chapter 4 should be studied before Chapter 8. The following is covered in Chapter 4:
- 4.1 Definition of horses
 - 4.2 Age of horses
 - 4.3 Classification of horses
 - 4.4 Passports and registration of horses
 - 4.5 Transponders (microchips)
 - 4.6 Marking of horses
 - 4.7 Equipment on horses
 - 4.8 Shoeing
 - 4.9 Behaviour of horses
 - 4.10 Stallions and pregnant mares
 - 4.11 Abuse of horses
 - 4.12 Release of horses
 - 4.13 Death of horses

8.2 AGE OF HORSES

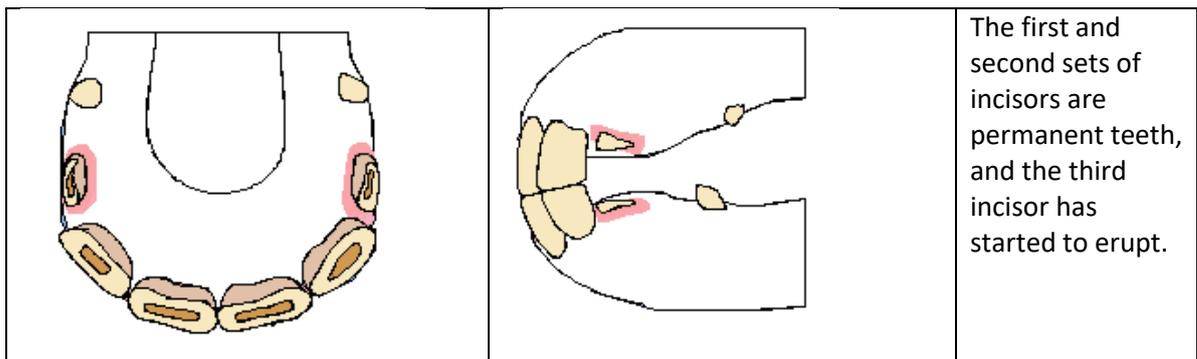
8.2.1 The rules regarding the age of horses are set out in article 4.2

8.2.2 The following is a guideline that can be used to determine the age of horses:

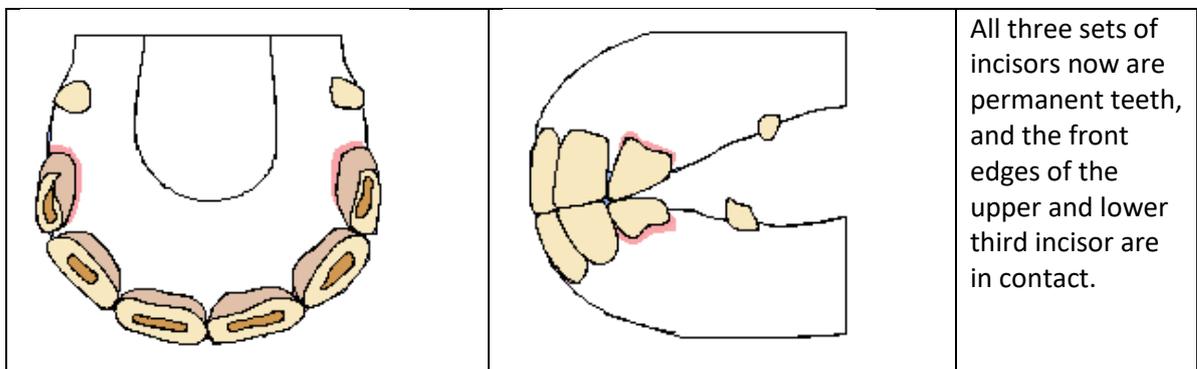
8.2.2.1 4 Years: The second set of incisors has erupted and there is full contact (over the entire width of the tooth) between the upper and lower incisors of this second set.



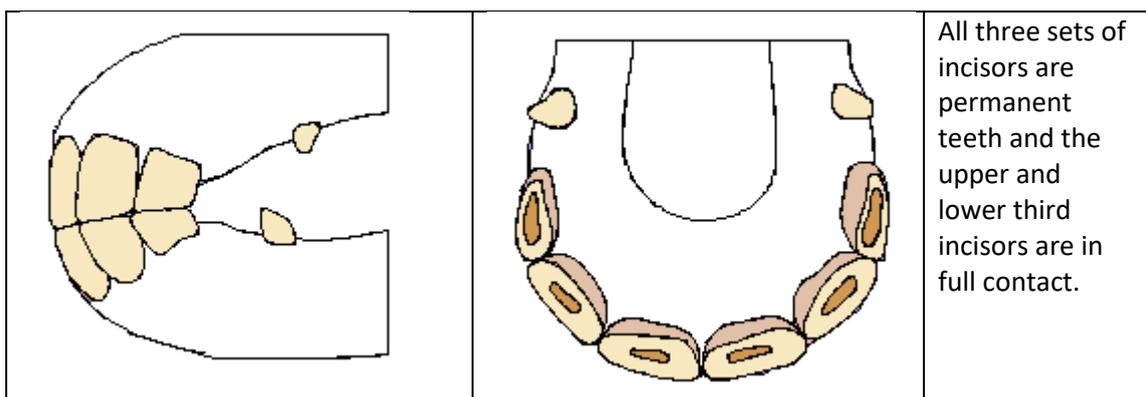
8.2.2.2 4 ½ Years. The third incisor starts to erupt (it is sufficient proof if only one of the third incisors has started to erupt)



8.2.2.3 5 Years. The third incisors have all erupted, and the front edges of the upper and lower third incisor are in contact.



8.2.2.4 6 Years. The upper and lower third incisors are in full contact



8.3 IMMUNISATION OF HORSES

8.3.1 Equine Influenza

8.3.1.1 Introduction

- 8.3.1.1.1 Equine Influenza is a highly infectious and contagious viral disease of horses. There are two different lines of the virus, the North American and the European line. Several strains of the virus are found within these lines.
- 8.3.1.1.2 Equine Influenza rapidly spreads from one horse to another. It is transmitted through infected droplets which are coughed up by horses, as well as through infected equipment (brushes, blankets, water troughs, feed troughs, etc) and clothing. It can also be contracted by horses when they drink from communal water troughs. Horses show symptoms within one (1) to five (5) days after being infected.
- 8.3.1.1.3 Symptoms are similar to flu in humans and include fever, nasal discharge, dry cough, depression and loss of appetite. Horses that are partly immune can carry and spread the virus without showing symptoms.
- 8.3.1.1.4 Equine Influenza is a controlled disease and all cases of Equine Influenza must be reported to the nearest state veterinarian
- 8.3.1.1.5 Horses that come into contact with infected horses will become infected and will also spread the virus to other horses stabled at the same yard when they return home.

8.3.1.2 Immunisation

- 8.3.1.2.1 All horses participating in endurance rides held under the auspices of ERASA must be vaccinated against equine influenza.
 - 8.3.1.2.1.1 An initial set of two vaccinations shall be administered. The first vaccination must be followed by a second vaccination not less than twenty-one (21) and not more than ninety (90) days after the first.
 - 8.3.1.2.1.2 After this a booster vaccination must be administered within a period of six (6) months plus twenty-one (21) days after the second vaccination of the first set.
 - 8.3.1.2.1.3 Thereafter horses must be vaccinated at least once every twelve months, on the condition that the last vaccination was administered within a period of six (6) months twenty-one (21) days before the date of the endurance ride for which the horse is entered. In practice this means that horses that participate regularly in endurance rides should be vaccinated once every six months.

- 8.3.1.2.2 A horse shall be vaccinated with at least the first set of two vaccinations, and at least seven days shall have passed after the second vaccination before the horse may be allowed to enter for an endurance ride.
- 8.3.1.2.3 The use of all commercially available vaccines which are registered in South Africa for use in horses is accepted by ERASA.
- 8.3.1.2.4 All vaccinations against equine influenza **must** be administered by a veterinarian and/or an Animal Technician and signed off by a veterinarian or State veterinarian. The name/type of vaccine, the serial/batch number, the date of administration and the route of administration must be recorded in the horse's passport. If the manufacturer of the vaccine provides a sticker (either a loose sticker or one that can be removed from the vaccine vial) with the vaccine, this sticker must also be pasted into the passport.
- 8.3.1.2.5 A horse for which a passport has not yet been issued, for rides up to 40 (forty) kilometres the person responsible must provide proof in the form of a veterinary certificate that the horse has been vaccinated against equine influenza. The same rules regarding the number of vaccinations/vaccination programme as well as the period before a ride during which the horse may not be vaccinated, apply here as well. The minimum information required (an example of a document that can be used for this purpose is appended as appendix B), is:
- The name of the vaccine.
 - The serial/batch number of the vaccine.
 - The date of administration of the vaccine.
 - The name of the person who administered the vaccine. A day rider must give proof of vaccination issued by a veterinarian. It is **compulsory** for these vaccinations to be administered by a veterinarian

8.3.2 African Horse Sickness (AHS)

8.3.2.1 Introduction

- 8.3.2.1.1 AHS is a highly infectious but non-contagious disease of horses, mules, donkeys (and all other species of the family Equidae) which is transmitted by insects. Nine serotypes of the virus are found, all of which are present all over South Africa, with the exception of a small part of the Western Cape.
- 8.3.2.1.2 AHS is not transmitted directly between horses, but is transmitted by midges which are infected when they feed on an infected animal. An incubation period of seven (7) to fourteen (14) days follows after the virus was ingested by the midge before the midge becomes infective (i.e. before the midge can transmit the disease to another horse).

- 8.3.2.1.3 Various forms of the disease occur, which include a mild form (showing only a febrile reaction), a lung form (“dunkop”), a heart form (“dikkop”) and a mixed form. Subclinical infections, where horses carry and spread the disease without any clinical signs, also occur.
- 8.3.2.1.4 AHS is a controlled disease and owners must, in accordance with the law, inform the local state veterinarian of all suspect cases. Official reporting forms can be obtained from the state veterinarian’s office. Samples of all suspect cases should be submitted to the Equine Research Centre of the Faculty of Veterinary Science of the University of Pretoria. Blood (collected in an EDTA tube, with purple top) is collected from live horses, whilst samples of the lungs on ice should be collected from all horses that may have died as a result of AHS.
- 8.3.2.1.5 The number of cases of AHS seen changes from year to year. The areas/districts where the disease occurs also changes from year to year (although it does occur annually in some areas and almost never in others). Riders should take note that there always is a risk in moving horses into an area where cases of AHS were already reported in a particular season, as the midges in that area will probably be infective and therefore could transmit the virus to a horse visiting the area. Until proven otherwise it has to be accepted that the bite of a single midge can transmit the disease. Research also indicates that horse can carry and spread the disease without showing any clinical signs. It is therefore strongly recommended that riders study the statistics (available on the website of the African Horse Sickness Trust) each year to allow them to make an informed decision on the risk involved in visiting a certain area. Riders are also encouraged to discuss the matter with the local veterinarian or state veterinarian.
- 8.3.2.2 Immunisation. It is required by law (Animal Diseases Act, Act 35 of 1984) that all horses, donkeys and mules shall be vaccinated against AHS annually.
- 8.3.2.2.1 All horses participating in endurance rides held under the auspices of ERASA must be vaccinated against AHS. It is highly recommended that as per **SAEF Directive** that horses be vaccinated as below:
- 8.3.2.2.1.1 Be vaccinated annually between 1 June and 31 October,**
- 8.3.2.2.2 Only one vaccine is currently available that is accepted by ERASA. This is manufactured by Onderstepoort Biological Products and consists of two fractions/injections. Both the fractions/injections shall be administered to a horse. The second fraction/injection may only be administered after a minimum period of three weeks after the administration of the first fraction/injection.
- 8.3.2.2.3 Horses shall have been vaccinated with both fractions/injections, and a period of at least twenty-one (21) days shall have lapsed since the

second fraction/injection was administered before a horse may enter for an endurance ride.

8.3.2.2.4 Horse residing in the magisterial districts of Malmesbury, Moorreesburg, Hopefield, Vredenburg, Wellington, Paarl, Stellenbosch, Strand/Somerset West, Kuilsriver, Bellville, Mitchells Plain, Wynberg, Simon's Town and Cape Town may only be vaccinated with prior permission of the Sate Veterinarian Boland.

8.3.2.2.5 All vaccinations against AHS must be administered by a veterinarian and/or an Animal Technician and signed off by a veterinarian or State veterinarian. The name/type of vaccine, the serial/batch number, the date of administration and the route of administration must be recorded in the horse's passport. If the manufacturer of the vaccine provides a sticker (either a loose sticker or one that can be removed from the vaccine vial) with the vaccine, this sticker must also be pasted into the passport.

8.3.2.2.6 A horse for which a passport has not yet been issued, for rides up to 40 (forty) kilometres, the person responsible must provide proof in the form of a veterinary certificate that the horse has been vaccinated against AHS. The same rules regarding the number of vaccinations/vaccination programme as well as the period before a ride during which the horse may not be vaccinated, apply here as well. The minimum information required (an example of a document that can be used for this purpose is appended as appendix B), is:

- The name of the vaccine.
- The serial/batch number of the vaccine.
- The date of administration of the vaccine.
- The name of the person who administered the vaccine. A day rider must give proof of vaccination issued by a veterinarian. It is compulsory for these vaccinations to be administered by a veterinarian.

8.3.2.3 Movement of horses

8.3.2.3.1 Strict rules apply to the movement of horses to the Western Cape. These regulations shall be adhered to by all members of ERASA. Information can be obtained from the following websites:

Email contact: move@myhorse.org.za

Website : www.myhorse.org.za

The website of the African Horse Sickness Trust

8.3.2.3.2 From time to time regulations regarding AHS and the movement of horses to or in other areas of the country are promulgated by government (central or provincial), and members of ERASA shall adhere to such regulations. Therefore any directive issued by SAEF will override any rules as in this rule book.

- 8.3.2.3.3 A transgression of these regulations will at the same time be regarded as a transgression of the rules of ERASA and disciplinary action can be taken against members who transgress these regulations.

8.4 VETERINARY CARDS

A veterinary card is issued to each rider at all rides presented under the rules of ERASA. At each inspection the veterinarians will record their findings on this card. See example in Appendix C. Also see Chapter 2.

8.5 IDENTIFICATION OF HORSES AND PASSPORT CONTROL AT RIDES

8.5.1 Identification of horses

8.5.1.1 At each ride the identification diagram and accompanying text in the passport of all horses entered for distances of forty (40) km and longer shall be checked by a veterinarian to confirm the identity of the horse in question. If a passport was issued for a horse that is entered for a distance of forty (40) km or less, this passports shall also be checked.

8.5.1.2 From 1 June 2012 onwards horses will be identified at rides by means of microchips.

8.5.1.2.1 If the microchip is not read by the microchip reader, the horse is to be identified by means of the description in the passport.

8.5.1.2.2 If a dispute regarding the identification of a horse should arise, the identification as in the passport will apply,

8.1.5.3 If the description of the horse in the passport does not correspond with the appearance of the horse presented to the veterinarian, the horse shall not be allowed to participate. It shall be recorded in the passport (on the pages "Identification of the horse described in the passport") that the description of the horse is incorrect, and the chief veterinarian officiating at the ride must sign this entry.

8.5.1.4 If the horse can be identified, but the description in the passport is lacking in some respects, the chief veterinarian officiating at the ride shall make a note in the passport (on the "Identification of the horse described in this passport") and also sign the entry. The horse shall not be allowed to enter for another endurance ride until such time as the description was rectified.

8.5.2 Veterinarians shall also check that, for each horse entered for the ride, the immunisations are up to date and in accordance with the rules. If a passport is available, this shall be done by checking the entries in the passport. For horses entered for rides of forty (40) km or less, the person responsible is to provide proof of all immunisations (also refer article 8.3 above).

8.5.2.1 Equine Influenza. If the immunisation history of the horse does not meet the requirements as set out in these rules, the horse shall be shown away and is to be removed from the venue. The chief veterinarian officiating at the ride shall make a note in the passport (on the pages where vaccinations against equine influenza are recorded) that the horse was shown away, stating the reasons.

8.5.2.2. **African Horse Sickness.** If the horse **was not** vaccinated against African Horse Sickness **during the previous calendar year (12 months)**, OR if the horse was vaccinated with the interval between vaccinations longer than twelve months, OR if no **correct** vaccinations against African Horse Sickness were recorded in this horse's passport, the horse shall be shown away and be removed from the venue of the ride. The chief veterinarian officiating at the ride shall make a note in the passport (on the pages where vaccinations against African Horse Sickness are recorded) that the horse was shown away, stating the reasons.

8.5.3 Administration

8.5.3.1 At all club and union rides the passports do not have to be checked for other administrative matters and no notes have to be made in those passports which meet all requirements.

8.5.3.2 At all national rides each passport is to be checked by the chief veterinarian officiating at the ride and is to be signed off thereafter (on the pages "Identification of the horse described in this passport"), thereby certifying that the description of the horse as in the passport corresponded with the appearance of the horse that was presented, that the vaccinations were all up to date and in accordance with the rules and that all administrative aspects met the prescribed requirements. Please note that:

8.5.3.2.1 Deviations regarding the description and vaccinations shall be recorded as explained in articles 8.5.1 and 8.5.2 above.

8.5.3.2.2 Other administrative deficiencies shall be recorded (by making a note in the passport on the pages "Identification of the horse described in this passport") in the passport and be signed off by the chief veterinarian officiating at the ride. The horse shall not be allowed to enter for another endurance ride until such time as the problems were rectified.

8.6 **VETERINARY INSPECTIONS** (also see Chapter 2)

The aspects as explained below shall be checked by the veterinarian doing the inspection, and he/she must record his findings on the prescribed veterinary card.

8.6.1 Pre-ride examination. At the pre-ride examination the veterinarian shall:

8.6.1.1 Check the horse's teeth to ascertain that the horse meets the minimum criteria with regards to the age of horses.

8.6.1.2 Assess the horse's habitus and ask the rider on the horse's appetite and water intake. Habitus (the general attitude of the horse, willingness to trot, interest in the environment) is graded as follows on the veterinary card:

"A" – Lively, interested in the environment, trots without much encouragement

"B" – Slightly depressed, has to be encouraged to trot

"C" – Depressed, refuses to trot or only trots with major encouragement

8.6.1.3 Assess the horse's metabolic state by examining the following:

- 8.6.1.3.1 Evaluate the pulse rate (beats per minute) and quality of the heartbeat through auscultation with a stethoscope, placed on the chest wall over the heart. Both the pulse rate and any abnormalities or murmurs are recorded on the veterinary card (the latter under comments). The veterinarian decides on the importance of the murmurs/abnormal rhythm at own discretion, but can ask for a second opinion.
- If the veterinarian is of the opinion that excitement or interference played a role, the pulse should be recounted.
 - The pulse rate must be counted before anything else.
 - The veterinarian can, at his own discretion, allow another horse (which trains or rides with the horse being examined) to remain in the veterinary area if he is of the opinion that the horse being examined will be anxious if left alone.
 - Keep in mind that pain can lead to an increased pulse rate, and do not assume that the increased rate is the result of exhaustion.
 -
- 8.6.1.3.2 Gut sounds. Auscultated with a stethoscope. If gut sounds are decreased or absent on the left hand side, the right hand side also shall be assessed. If no sounds are picked up, the assessment should be made in all four quadrants. Grading on the veterinary card:
- “N” - Normal gut sounds
 “↓” – decreased gut sounds
 “↑” – increased gut sounds.
- If both sides were auscultated, the square on the veterinary card is split into two and the findings for both sides are recorded on the veterinary card.
- 8.6.1.3.3 Determine the level of hydration by means of a skin fold test, done on the point of the shoulder and measured in seconds (the time it takes for the skin fold to return to normal). The time in seconds is recorded as follows on the veterinary card:
- “1” - ≤ 1 second
 “2” - > 1 to 2 seconds
 “3” - > 2 to 3 seconds
 “4” - > 3 seconds
- 8.6.1.3.4 Mucous membranes, with specific attention to:
- The colour and appearance; check mucous membranes under the lip and on the gums (the conjunctiva are only checked if there is reason to be concerned on the horse’s health). Grading on the vet card:

“A” – Normal (pink, moist, glistening)
 “B” – Congested, or dry/sticky
 “C” – Severely congested, dirty red colour
 - Measure the capillary refill time (in seconds). The time in seconds is recorded as follows on the veterinary card:

"1"	-	≤ 1 second
"2"	-	> 1 to 2 seconds
"3"	-	> 2 to 3 seconds
"4"	-	> 3 seconds

- 8.6.1.4 Auscultate the lungs and measure the respiratory rate. Horses showing signs of respiratory disease may not participate in the ride and shall be referred to the treating veterinarian.
- 8.6.1.5 Check for lesions and skin lesions on the withers, back, loins, rib cage, chest, shoulders and mouth. Also palpate the back to determine whether it is overly sensitive or painful. Check for lesions on the limbs, (including brushing and overreaching marks), hoof conditions and other abnormalities. All skin lesions shall be recorded in the "remarks" column on the veterinary card and shall also be indicated on the diagram of the horse on the reverse side of the veterinary card. At pre-ride inspections old lesions should also be recorded to allow for these to be distinguished from fresh lesions that occur during the ride. Grading as follows:
- "A" – No lesions
 "B" – Mild to moderate lesions
 "C" – Severe lesions
- 8.6.1.6 Evaluate the quality of the horse's shoeing (or hoof care for horses that participate barefoot), and, if necessary, make recommendations in this regard to the person responsible. It must be recorded on the veterinary card whether the horse is shod on all four, only in front or only behind, or not at all.
- 8.6.1.7 Examine the horse for signs of disease and, if indicated, refer the horse to the treating veterinarian.
- 8.6.1.7.1 The rectal temperature should be measured if there is any suspicion of disease. If the rectal temperature is above 38,4°C the horse should be referred to the treating veterinarian for a full clinical examination and, if indicated, treatment.
- 8.6.1.8 The horse's should be trotted out without a saddle, blanket, bandages or protective equipment, on a loose lead over a distance of forty (40) metres away from, and forty (40) metres back to, the veterinarian to evaluate soundness. Take note that unshod horses may be trotted with hoof boots. All deviations shall be recorded on the veterinary card. If the horse, in the opinion of the veterinarian, is lame, a vote by a panel of veterinarians shall be called for to determine whether the horse may participate in the ride. Horses should preferably be trotted without being chased.
- 8.6.1.8.1 Grading on the veterinary card:
- "A" – Sound, no signs of unevenness or lameness
 "B" – Uneven, but not consistently lame.
 "C" – Lame
- 8.6.1.8.2 A horse is considered to be lame if it shows a constant deviation or pain during the trot up.

8.6.1.8.3 Peculiar and/or abnormal gait which does not warrant elimination shall be recorded on the veterinary card.

8.6.1.9 Muscle tone should also be evaluated, and can be recorded in the “remarks” column on the veterinary card (if provision was not specifically made for this on the card). It is evaluated by palpating the major muscles of the hindquarters, and putting slight pressure on these. Muscles should give under slight pressure. If the muscles appear stiff (not warranting elimination), a note should be made on the veterinary card.

8.6.2 Inspections during the ride. Horses shall be inspected at the end of each loop of a ride. During this inspection the veterinarian shall:

8.6.2.1 Evaluate the habitus of the horse and ask the rider questions on the horse’s appetite and water intake. Decreased appetite and water intake and behavioural changes during a ride are early warning signs indicating that the horse is not recovering sufficiently.

8.6.2.2 Evaluate the horse’s metabolic state (as explained in Article 8.6.1.3 above).

8.6.2.2.1 The cardiac recovery index (CRI) shall be determined at all rides held under the gate timekeeping rules. It is recommended that the CRI is also determined at rides held under the compulsory hold time keeping rules.

8.6.2.2.1.1 The CRI is used to evaluate the horse’s ability to recover at the time of inspection, and gives a good indication of the horse’s ability to continue with the ride.

8.6.2.2.1.2 It is determined as follows:

- The horse’s pulse rate is measured
- The horse is trotted over a distance of eighty (80) metres (forty metres away from and forty metres back to the veterinarian), during which the horse’s soundness is evaluated. It takes an average of 28 – 30 seconds for a horse to trot over this distance (depending on the speed at which the horse is trotted)
- Exactly one minute after the horse started the trot-out (or approximately 30 seconds after completion of the trot-out) the pulse rate is measured again.
- The CRI is indicated on the veterinary card as 64/60, 48/52 or 44/44, etc.

8.6.2.2.1.3 High CRI’s

- Where the second pulse is higher by between four and eight beats per minute, the veterinarian should assess the relevance based on:
 - The first pulse rate. The closer the pulse rate was to 64 beats per minute, the higher the relevance of a higher second pulse rate.

- The horse's slip time (time taken from arrival at the ride base to presentation to the veterinary panel).
- Other parameters evaluated during the inspection of the horse.
- Where the second pulse rate is higher by eight or more beats per minute the horse should be called back for a re-examination (approximately fifteen minutes before the horse is to depart on the next loop).

8.6.2.2.1.4 Low CRI's and even CRI's

- Second pulse rates lower or equal to the first are an indication that the horse still recovers well and is capable of continuing with the ride.

8.6.2.2.2 Loss of gut sounds usually is an indication of exhaustion. The reflex/tonus of the anal sphincter should be evaluated when gut sounds are absent. Findings are to be assessed relative to all other parameters that are evaluated.

8.6.2.2.3 Thumps (when the muscles of the flank contract at the same rate as the heartbeat). The pulse rate of these horses often is below the maximum level allowed. Thumps are an indication of electrolyte imbalance, and a reason for elimination.

8.6.2.3 Auscultate the lungs and determine the respiratory rate.

8.6.2.4 Check for lesions on the withers, back, loins, girth chest, shoulders and mouth, and also palpate the back to determine whether it is overly sensitive or painful.

8.6.2.5 Check for lesions on the limbs (including brushing and overreach marks), hoof conditions and other abnormalities.

8.6.2.6 Check, if the horse started with shoes, whether all these are still in place. Lost shoes shall be replaced before the horse is allowed to continue with the ride. The horse shall be presented again to the veterinary panel after the shoe was replaced. Signs of lameness shall be dealt with as explained in 8.6.1.8 above.

8.6.2.7 Check for signs of disease or exhaustion (including, but not limited to, dehydration, excessive sweating, muscles tremors or spasms or cramps, glassy eyes, staring, colic, mild abdominal pain, reluctance to move) and, if indicated, refer the horse to the treating veterinarian. Diarrhoea leads to loss of fluids and electrolytes and horses with severe diarrhoea shall be eliminated.

8.6.2.8 Evaluate soundness as explained in article 8.6.1.8 above.

8.6.3 Compulsory re-examinations. At rides presented under the gate time keeping rules the ride committee can, in collaboration with the chief veterinarian, schedule compulsory re-examinations after the completion of a specific loop(s) of the ride. These compulsory re-examinations (also referred to as recovery inspections) are done approximately fifteen (15) minutes before the horse is to depart on the next loop. The re-examination takes on the same format as the inspections which are performed after completion of each loop.

- 8.6.4 Re-examinations can also be called for by a veterinarian at any stage (and at all rides, irrespective of the time keeping rules). The veterinarian shall note this on the veterinary cards, and the horse shall be presented for re-examination approximately fifteen (15) minutes before departure on the next loop. This re-examination also takes on the same format as the inspections which are performed after completion of each loop.
- 8.6.6 Final inspections. The final inspection is the inspection done after the horse has completed the last loop of the distance it was entered for. It takes on the same format as the other inspections performed after completion of the other loops, and the horse shall be fit to continue (as if there was another loop).
- 8.6.7 Release inspections
- 8.6.7.1 All horses shall, after completion of a ride, and before they are allowed to leave the ride venue, be presented to the veterinary panel/commission for a release inspection. During this inspection the veterinarian shall:
- 8.6.7.1.1 Evaluate the horse's habitus and ask the rider on the horse's appetite and water intake.
 - 8.6.7.1.2 Evaluate the horse's metabolic state as explained in articles 8.6.1.3 and 8.6.2.2.
 - 8.6.7.1.3 Examine the horse for signs of disease.
 - 8.6.7.1.4 If indicated, refer the horse to the treating veterinarian for a full clinical examination and, if indicated, treatment.
- 8.6.7.2 If the veterinarian is of the opinion that the horse is fit to travel he shall complete a release card and hand this to the person responsible.
- 8.6.7.3 After completion of rides of 140km or longer in one day, horses should remain at the ride venue for at least 24 hours and the veterinary panel should only allow a horse to leave earlier under exceptional circumstances

8.7 REASONS FOR ELIMINATION

- 8.7.1 Any condition that, in the opinion of the veterinarian, holds a risk for the health and welfare of the horse, or that would cause pain of the horse were allowed to continue, can lead to the elimination of the horse in question.
- 8.7.2 The following are major reasons for elimination of horses from endurance rides. The list is not a complete one, and it has to be kept in mind that the welfare of the horse takes precedence over any other factor. Any doubt regarding the horse's ability to continue with the ride should be discussed with the person responsible, with the recommendation that the horse should rather be retired (or the step ladder stopped). If indicated (if, in the opinion of the veterinarian, the horse is not fit to continue with the ride) the horse shall be eliminated.
- 8.7.2.1 Pulse rate. If the pulse rate is above the allowed maximum for the specific ride/loop.
- 8.7.2.2 Lameness. Elimination for lameness follows on a vote by a panel of veterinarians on the horse's ability to continue with the ride. If the majority voted that the horse cannot continue, the horse is eliminated.

- 8.7.2.3 Metabolic crisis. Signs of this include exhaustion, high pulse rate, increased capillary refill time, excessive dehydration, diarrhoea, absence of gut sounds, decrease in tone of the anal sphincter and glassy eyes. Elimination is based on the opinion of the line veterinarian and a second opinion by any other member of the veterinary panel. It is recommended that, at bigger rides (championships), elimination should be based on an independent vote by three veterinarians, without discussion.
- 8.7.2.4 Thumps. Refer to article 8.6.2.2.3 above.
- 8.7.2.5 Azoturia, as well as signs of related conditions such as muscle cramps and tying-up.
- 8.7.2.6 Severe epistaxis.
- 8.7.2.7 Treatment administered during a ride (excluding treatment which was authorised beforehand, refer Chapter 9), or illegal treatment administered by the rider or anyone else.
- 8.7.2.8 Injuries that cause pain and place the welfare and future athletic ability of the horse at risk.
- 8.7.2.9 Severe skin lesions.
- 8.7.2.10 General and/or specific signs of impaired health, such as severe dehydration, excessive sweating, muscle tremors or spasms or cramps, glassy eyes, staring, colic, moderate abdominal pain, reluctance to move or any other sign of physical problems.

8.8 BEST CONDITIONED HORSE

- 8.8.1 The ride committee determines beforehand in which categories a best conditioned horse award is to be made. It should be awarded in each category (child, junior/young rider, senior light weight, senior standard weight and senior heavy weight) and also for each distance (of 80km and longer) which are presented at a ride meet.
- 8.8.2 The purpose of the award is to determine which of the horses that completed the ride are still in the best condition.
- 8.8.2.1 Evaluation of the horses that are considered for the award is the responsibility of the veterinary panel (that can be supported herein by an experienced horseman). It is done after completion of the ride, and preferably on the day of the ride.
- 8.8.2.2 Only horses that completed the ride within one hour of the fastest time (in the specific category) are considered, which a maximum of five horses per category (at bigger rides ten horses in each category can be included).
- 8.8.2.3 Riders are under no obligation to present their horses if they are called.
- 8.8.2.4 Horses called for evaluation for best condition are still subject to testing for prohibited substances. 8.8.2.5 Horses that were treated after completion of the ride shall not be considered.
- 8.8.2.6 Horse ending the ride with a "B" grading for soundness shall not be considered.

8.8.3 At rides presented under the compulsory hold rules the best conditioned horse will be adjudicated on the following:

8.8.3.1 Points are awarded for four factors:

8.8.3.1.1 Riding time (100 points). Hundred (100) points are awarded to the horse with the fastest riding time. For all other horses one (1) point is deducted for each minute or part thereof that the horse's time was slower than the fastest horse. For rides over two (2) days one point is deducted for every two minutes, and for rides over three days one point is deducted for every three minutes.

8.8.3.1.2 Rider weight (100 points). Hundred (100) points are awarded to the heaviest rider that is considered for the award. For other riders one (1) point is deducted for each kilogram weighed in below the weight of the heaviest rider.

8.8.3.1.3 Average pulse rate (100 points). The average pulse rate for the horse during the ride is calculated. The pre-ride inspection is not considered (only "working" pulses are considered).

8.8.3.1.3.1 An average pulse of forty (40) is used as baseline and is awarded hundred (100) points.

8.8.3.1.3.2 Between forty-one(41) and forty-five(45) beats per minute, two (2) points per beat above forty (40) are deducted from hundred (100).

8.8.3.1.3.3 Between forty-six (46) and fifty (50) beats per minute, ten (10) points PLUS four points per beat above forty-five (45) are deducted from hundred (100).

8.8.3.1.3.3 Between fifty-one (51) and fifty-five (55) beats per minute, thirty (30) points PLUS six (6) points per beat above fifty-five (55) are deducted from hundred (100).

8.8.3.1.3.4 Between fifty-six (56) and sixty (60) beats per minute, sixty (60) PLUS eight (8) points per beat above fifty-five (55) are deducted from hundred (100).

8.8.3.1.4 Veterinary parameters (50 points). Penalty points are calculated as follows, and deducted from fifty (50):

8.8.3.1.4.1 Soundness

- If the horse was awarded an "A" at the end of the ride, no penalty points are incurred.
- Horses that were awarded a "B" at the end of the ride are not considered for the award.

8.8.3.1.4.2 Habitus, mucous membranes, lesions (girth, withers and back) and gut sounds:

- If the horse was awarded an “A” at the end of the ride, no penalty points are incurred.
- If the horse was awarded a “B” at the end of the ride, four (4) penalty points are incurred.
- If the horse was awarded a “C” at the end of the ride, eight (8) penalty points are incurred.

8.8.3.1.4.3 Hidration (skin fold) and capillary refill time. Both are calculated as follows:

- If the horse ends with a score of “1”, no penalty points are awarded.
- If the horse ends with a score of “2”, four (4) penalty points are awarded.
- If the horse ends with a score of “3”, eight (8) penalty points are awarded.
- Horses that end with a score of “4” are not considered for the award.

8.8.3.1.4.4 The total of all penalty points is subtracted from fifty (50). If no penalty points were incurred, the horse is awarded fifty (50) points.

8.8.3.2 After calculation of the points for all horses in a category, horses within a specific range of points (see below) are called on to be presented to the veterinary panel. The panel now evaluates the horses primarily on movement; if the horse that was awarded the highest score is still sound in the opinion of the veterinary panel (i.e. would be allowed to continue with the ride should there have been another loop), the best conditioned horse award is made to this horse. If the horse with the highest score is not sound and therefore eliminated from the award, the award will be made to the horse with the second highest score (on condition that this horse is sound), etc.

8.8.3.2.1 At rides on a single day all horses that end within ten (10) points from one another shall be called and checked; at two-day rides all horses within twenty (20) points and at three-day rides all horses within thirty (30) points.

8.8.3.2.2 If only one horse is in consideration, the horse still has to be called out for a physical examination.

8.8.3.2.3 If, in the opinion of the veterinary panel, no horse is sound at the trot-out, the award is not made.

8.8.3.2.4 Horses that qualify but were already removed from the ride venue are not considered for the award.

8.8.4 At rides held under the gate time keeping rules the form as in appendix D is used. Regarding this:

8.8.4.1 All horses that are considered for the award are called on to be presented to the veterinary panel, usually approximately two hours after the last horse that is to be considered, completed the ride.

- 8.8.4.2 Points are awarded for the following (the way points are allocated for each factor is indicated on the form):
- 8.8.4.2.1 Recovery rate (maximum 20 points). This is also known as the “slip time” and is the time between arrival at the ride base/check point and presentation to the veterinary panel (entry into the veterinary area). Slip times are recorded for each gate and an average is calculated at the end of the ride. Allocation of points is based on this average. The slip time at the end of the ride is not taken into consideration.
 - 8.8.4.2.2 Cardiac Recovery Index (maximum twenty points). The difference between the first and second pulse rate at each gate is calculated, after which the average for all gates is determined. Allocation of points is based on this average.
 - 8.8.4.2.3 Final riding time score (maximum thirty points). Points are allocated for the rider’s total riding time. The rider with the fastest time is awarded maximum points, and one point is deducted for every two (2) minutes that the other riders went slower than the fastest rider.
 - 8.8.4.2.4 Rider weight (maximum twenty points). The pre-ride weight of each rider (with tack) is used for this score. The heaviest rider being considered for the award is allocated maximum points, and one point is deducted for each kilogram that the other riders weighed less than the heaviest rider.
 - 8.8.4.2.5 Lameness score (maximum thirty points). Each horse being considered for the best conditioned horse award is trotted out to allow the veterinary panel to evaluate soundness. At least three veterinarians should be involved in this assessment. After the horse was trotted each of the veterinarians gives his/her opinion on whether the horse was sound, slightly uneven, sound with inconsistent signs of lameness, or lame. Points are awarded on the majority opinion. For example, if the majority is of the opinion that the horse was sound, maximum points are awarded, and if the majority is of the opinion that the horse was lame, the horse is eliminated from the award (but not from completing the ride).
 - 8.8.4.2.6 Quality of movement (maximum twenty points). This is evaluated as the horse trots out. Points are awarded on the majority opinion. Points are awarded separately for two elements (each of which counts ten points):
 - 8.8.4.2.6.1 Attitude. General appearance, habitus, interest in the surroundings are evaluated.
 - 8.8.4.2.6.2 Action. Willingness to trot, rhythm of movement and impulsion are evaluated.
 - 8.8.4.2.7 Metabolic score (maximum ten points). This is evaluated at the time when the horses that are being considered for the award are evaluated on motion. Each horse is evaluated by the same member

of the veterinary panel, and points are allocated for skin fold (in seconds), capillary refill time (in seconds), appearance of mucous membranes and quality of gut sounds at the time of this examination. Please note that no attention is given to the findings in relation to these criteria during the ride, and that the points are awarded on the findings of the specific examination on horses being considered for the award only. Points are allocated for each of the four parameters, after which an average score is calculated.

8.8.4.2.8 Lesions (maximum ten points). Evaluated at the same time as the metabolic assessment (on horses being considered for the award). This evaluation is done by another member of the veterinary panel, but all horses considered for the award are evaluated by the same veterinarian. Points are allocated for lesions (or the absence thereof) in the mouth, on the girth, saddle area and back and on the limbs. Please note that no attention is given to the findings in relation to these criteria during the ride, and that the points are awarded on the findings of the specific examination on horses being considered for the award only. Points are allocated for each of the three parameters, after which an average score is calculated.

8.8.4.3 The eight scores are added up, and the award is made to the horse with the highest aggregate score.

8.9 EUTHANASIA

8.9.1 If a horse is injured to such an extent that, in the opinion of the treating veterinarian or chief veterinarian or members of the veterinary panel, the horse should be euthanized:

8.9.1.1 The ride master should be informed.

8.9.1.2 The person responsible or his representative shall give permission for this in writing and prior to euthanasia being performed. If the person responsible or his representative cannot be found the veterinarian involved should, if at all possible, obtain a second opinion. If both veterinarians are of the opinion that euthanasia is indicated, euthanasia should be performed to spare the horse further suffering.

8.9.1.3 A comprehensive clinical report, including all findings of the veterinarian involved and the reasons why euthanasia was decided on, shall be compiled.

8.9.1.4 The decision on the method of euthanasia lies with the veterinarian involved.

8.9.1.5 If at all possible blood samples should be collected before euthanasia is performed, and these samples should be submitted to the laboratory for analysis (sample collection and handling as per the rules laid down in Chapter 9).

8.9.1.6 If at all possible a post mortem examination should be performed. It is recommended that samples should be collected from skeletal muscle, heart muscle, liver, kidneys, lungs and the adrenal gland and that these are submitted for histopathology.

8.9.1.7 Administrative aspects as explained in article 4.12 shall be adhered to.

Endurance Ride / Uithourit			
Ride Name / Ritnaam			
Club / Klub			
Date / Datum			
Ride type / Tipe rit	ERASA		FEI
Time keeping / Tydhou	Gate / Hek		Compulsory hold / Verpligte rus
Ride master / Ritmeester			

The purpose of this report is to give ERASA (and specifically the Veterinary Group) an overall view of the veterinary aspects of the ride. / Die doel met hierdie verslag is om aan ERASA (en spesifiek die Veterinêre Groep) 'n algehele oorsig rakende veterinêre aspekte van die betrokke rit te gee.

The report must be completed by the Chief Veterinarian officiating at the ride, and e-mailed or faxed within 14 days after the ride to the ERASA Office. A copy must be handed in to the ride committee. / Die verslag moet deur die Hoofveearts wat by die rit diens doen voltooi word, en moet binne 14 dae na die rit per e-pos of per faks na die ERASA Kantoor gestuur word. 'n Afskrif moet by die ritkomitee ingegee word by.

e-mail / e-pos: admin@erasa.co.za

The following must be sent with the report/ Die volgende moet saam met hierdie verslag ingedien word:

1. ERASA Medication forms/ETUE (refer 6.4 below) / ERASA Medikasievorms/ ETUE (verwys 6.4 hieronder) – only if samples for medication control were collected / slegs indien monsters vir medikasiebeheer geneem is
2. Completed Treatment Report (refer Appendix A to this report) / Voltooide Behandelingsverslag (verwys Aanhangsel A tot hierdie verslag)

1. Chief Veterinarian / Hoofveearts	
Name / Naam	
Address / Adres	
e-mail / e-pos	
Fax / Faks	
Cell nr / Sel nr	
2. Veterinarians / Veeartse	
2.1	Veterinary Panel / Veeartspaneel
	Members / Lede:
2.2	Treating Veterinarian(s) / Behandelingsveearts(e)

3. General matters / Algemene aspekte			
3.1	Surface of the veterinary examination area (please tick): / Oppervlakte van die veeartsondersoekarea (merk asb):		
	Hard / Hard		Soft / Sag
	Grass / Gras		Bare ground / Kaal grond
	Level / Gelyk		Uneven / Ongelyk
	Holes / Gate		Rocky / Klipperig
	Flat / Plat		
3.2	Did the veterinary examination area meet the required standard? / Het die veeartsondersoekarea aan die vereiste standaard voldoen?	Yes / Ja	No / Nee
	General comments regarding examination area (including suggestions for improvement) / Algemene kommentaar oor ondersoekarea (insluitend voorstelle ter verbetering):		
3.3	General comments (if any) on the stabling / accommodation of horses / Algemene kommentaar (indien enige) rakende die stalling / akkommodasie van perde		

4.1	Was/were the treating veterinarian(s) sufficiently equipped to deal with all casualties/emergencies? / Was die behandelingsveearts(e) voldoende toegerus om na alle ongevalle/noodgevalle om te sien?	Yes / Ja	No / Nee
4.2	Were there adequate provisions for a veterinary emergency service at the ride base, including stables/paddocks/crush(es)? Was daar voldoende fasiliteite vir die lewer van veeartsenykundige nooddienste, insluitend stalle/kampies/drukgang(e)?		
4.3	Was there a towing vehicle and horsebox ("horse ambulance") available for collecting injured and/or exhausted horses from the course? / Was daar 'n sleepvoertuig en perdewa ("perde-ambulans") beskikbaar om beseerde en/of uitgeputte perde op die baan te gaan haal?		
4.4	Were there screens available for erecting around an injured horse? / Was daar skerms beskikbaar om rondom 'n beseerde perd op te rig?		
4.5	For rides with check points away from the ride base, was a treating veterinarian and emergency equipment/medication available at each check point to apply immediate treatment in case of metabolic crises? / By ritte met kontrolepunte weg van die ritbasis, was daar 'n behandelingsveearts met noodtoerusting/ medikasie beskikbaar by elke kontrolepunt om noodbehandeling toe te pas in geval van metaboliese krisis?		
4.6	Was there a farrier in attendance? / Was daar 'n hoefsmid beskikbaar?	Yes / Ja	No / Nee
4.7	Were other ancillary services (eg. Physiotherapists) available? / Was enige ander aanvullende dienste (bv. Fisioterapeute) beskikbaar? If so, did they contact you prior to the ride to obtain permission to work at the ride? / Indien wel, het hul vooraf met jou geskakel om toestemming te kry om by die rit te werk?		
4.8	Comments / Kommentaar		
5. Passport control / Paspoortkontrole			

5.1	Total number of horses competing / Aantal perde wat deelgeneem het	
5.2	Number of passports showing errors in the identification of the horse / Aantal paspoorte met foute met die perd se beskrywing	
5.3	Number of passports with problems regarding immunisation / Aantal paspoorte met probleme rakende immunisasie	
5.4	Were the above horses allowed to compete? / Is bostaande perde toegelaat om deel te neem?	
	Comments / Kommentaar:	

6. Medication control / Medikasiebeheer			
6.1	Were samples collected from horses for the purposes of medication control ("dope testing")? / Is monsters van perde geneem vir die doel van medikasiebeheer ("dope testing")	Yes / Ja	No / Nee
<p>If YES, please complete question 6.2 to 6.5 as well. If NO, please ignore question 6.2 to 6.5. / Indien JA, voltooi asb vraag 6.2 tot 6.5 ook. Indien NEE, ignoreer as vraag 6.2 tot 6.5.</p>			
6.2	How were the horses selected? / Hoe is die perde gekies?		
6.3	Name of veterinarian who collected the samples: / Naam van veearts wat die monsters geneem het:		
6.4	To your knowledge have any entered horses received medication either in the last two weeks before or during the ride meet? Het enige perde volgens jou wete gedurende die laaste twee weke voor of gedurende die ritbyeenkoms behandeling ontvang?	Yes / Ja	No / Nee
<p>If yes, please attach the medication forms/ETUE to this report. / Indien wel, heg asb die toepaslike medikasievorms/ETUE aan by hierdie verslag.</p>			
6.5	Comments / Kommentaar		

7. Contact with other officials / Kontak met ander beamptes			
7.1	Was there a satisfactory contact with / Was daar genoegsame kontak met:	Yes / Ja	No / Nee
	Ride Master (during the ride meet) / Ritmeester (gedurende die ritbyeenkoms)		
	Organisers (before and during the ride meet) / Organiseerders (voor en gedurende die ritbyeenkoms)		
7.2	Comments / Kommentaar:		
8. General Comments / Algemene Kommentaar			

8.1	Give a short comment on your general impression of the event / Gee asb jou algemene indrukke rakende die rit:

9. Statistics / Statistiek		
9.1	Were any horses not allowed to start the ride (for veterinary reasons), and if so, how many? / Is enige perde weens veeartsenykundige redes nie toegelaat om met die rit te begin nie, en indien wel, hoeveel?	Number / Aantal
	Wat was die rede(s)? / For what reason(s)?	
9.2	Number of horses started / Aantal perde wat weggespring het	Number / Aantal
9.3	Number of horses finished / Aantal perde wat die rit voltooi het	
9.4	Number of horses eliminated at / Aantal perde geëlimineer by	

	Vet Gate/Check / Hek/Beheerpunt 1	
	Vet Gate/Check / Hek/Beheerpunt 2	
	Vet Gate/Check / Hek/Beheerpunt 3	
	Vet Gate/Check / Hek/Beheerpunt 4	
	Vet Gate/Check / Hek/Beheerpunt 5	
	Finish / Eindpunt	
	On course / Op die baan	
9.5	Reasons for elimination:	
	Diagnosis / Diagnose	Number/ Aantal
	A. Lameness / Mankheid	
	B. Metabolic / Metabolies	
	C. Thumps / Bonsing	
	D. Exertional rhabdomyopathies / Uitputting spiermiopatieë	
	E. Dehydration / Dehidrasie	
	F. Non-recovery (high pulse) / Nie-herstel (hoë pols)	
	Comments (please comment on any observations made regarding eliminations, especially if these can be related to aspects of the course/organisation of the ride) / Kommentaar (lewer asseblief kommentaar op waarnemings gemaak rakende eliminaties, veral as dit aspekte van die baan/organisasie van die rit raak)	
9.6	Please ask the treatment veterinarian(s) to complete the treatment report as in Appendix A hereto, and submit the completed treatment report with your report. / Vra asb die behandelingsveearts(e) om die verslag soos in Aangangsel A hiertoe in te vul, en dien die voltooide behandelingsverslag saam met jou verslag in.	
10. FOLLOW-UP AND SUGGESTIONS / OPVOLG EN VOORSTELL		
10.1	Should any aspect be <i>followed-up</i> with the Organisers? / Moet enige aspekte met die organiseerders opgevolg word?	Yes / Ja No / Nee
10.2	If yes: Please briefly describe the issue(s) to be followed up / Indien wel, gee asseblief 'n kort beskrywing van die aspek wat opgevolg moet word	

TREATMENT REPORT / BEHANDELINGSVERSLAG					
1	Please give a short description of all treatments / Gee asb 'n kort beskrywing van alle behandelings				
2. Horses treated / Perde behandel					
Ruiter / Rider	Horse's Name / Naam van Perd	UV Nr	Diagnosis/Reason for Treatment / Diagnose/Rede vir Behandeling	Treatment administered / Behandeling gegee	Remarks / Opmerkings

APPENDIX A TO VETERINARY REPORT / AANHANGSEL A TOT VEEARTSVERSLAG

8A-12

Rider / Ruiter	Horse's Name / Naam van Perd	UV Nr	Diagnosis/Reason for Treatment / Diagnose/Rede vir Behandeling	Treatment administered / Behandeling gegee	Remarks / Opmerkings

APPENDIX A TO VETERINARY REPORT / AANHANGSEL A TOT VEEARTSVERSLAG

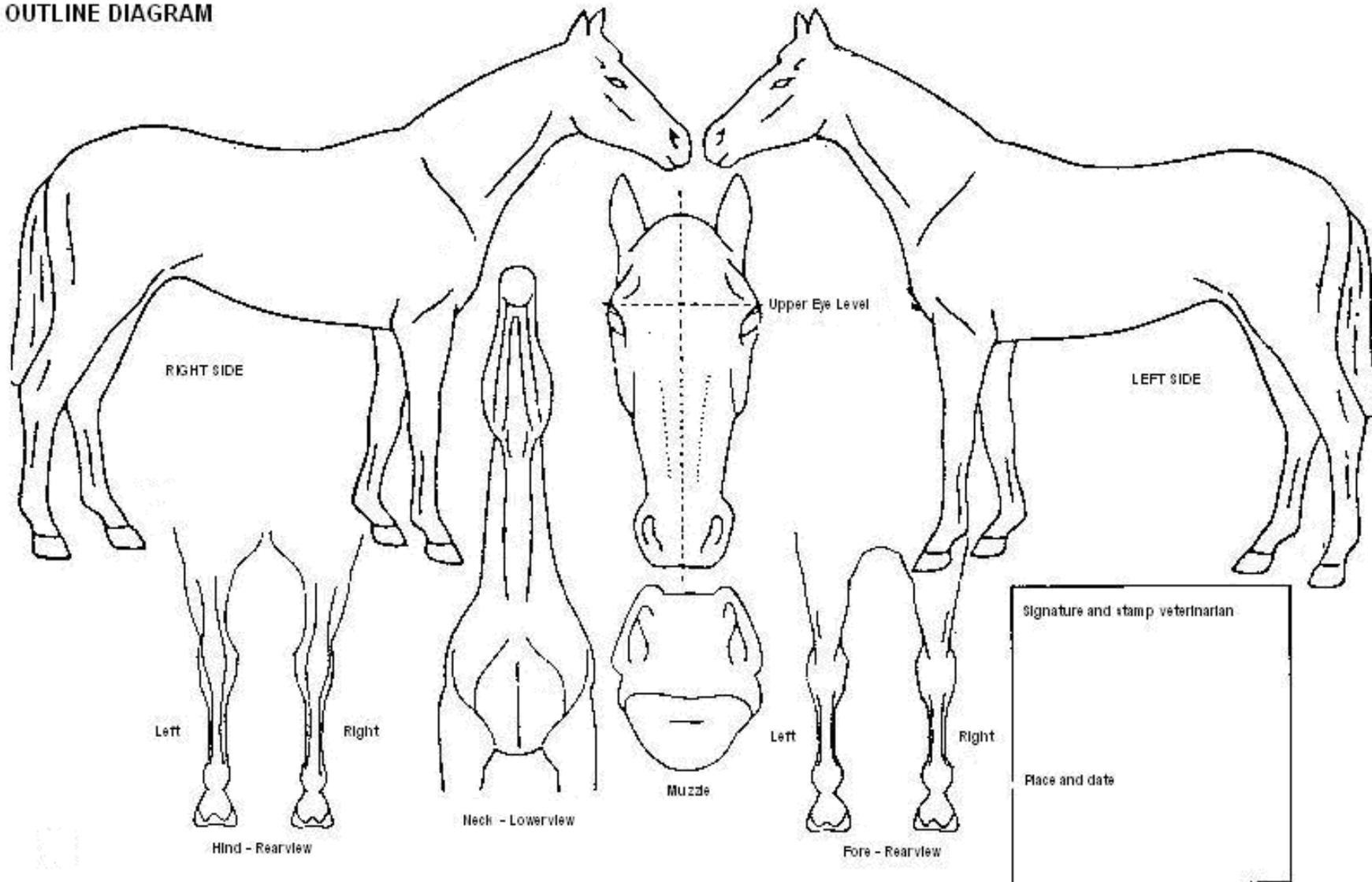
8A-13

Rider / Ruiter	Horse's Name / Naam van Perd	UV Nr	Diagnosis/Reason for Treatment / Diagnose/Rede vir Behandeling	Treatment administered / Behandeling gegee	Remarks / Opmerkings

APPENDIX B TO CHAPTER 8

ENDURANCE RIDE ASSOCIATION OF SOUTH AFRICA VACCINATION RECORD FOR HORSES This vaccination record can only be used for horses for which a passport was not issued (i.e. horses that are entered for ride over distances of up to and including 40km), and cannot be used as a replacement for the horse passport.	
NAME OF HORSE	BREED
SEX	COLOUR
DESCRIPTION OF MARKINGS - USE BLOCK CAPITALS ONLY AND COMPLETE OUTLINE DIAGRAM	
HEAD	
NECK	
LEFT FORE	
RIGHT FORE	
LEFT HIND	
RIGHT HIND	
BODY	
ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS)	

OUTLINE DIAGRAM



VACCINATION RECORD - AFRICAN HORSES SICKNESS ONLY

1. Details of all African Horse Sickness vaccinations administered to the horse must be recorded.
2. Horses should preferably be vaccinated annually between 01 July and 31 December, or, alternatively, with intervals not exceeding 12 months.
3. For horses with a passport, all vaccinations are to be administered by a veterinarian. For horses without a passport, it is recommended that all vaccinations are administered by a veterinarian.

Date			Type, Name and Batch no of vaccine	Name and address of person who administered the vaccine (print please)	Signature of person who administered the vaccine (and stamp, if administered by veterinarian)
DD	MM	YY			
			AHS I		
			AHS II		
			AHS I		
			AHS II		
			AHS I		
			AHS II		
			AHS I		
			AHS II		
			AHS I		
			AHS II		

APPENDIX C

TO CHAPTER 8

VEEARTSKAART
DATUM :

NOMMER	PERD	KLEUR	
	GESLAG		
	RUITER		

AFSTAND WAARVOOR INGESKRY		Pols KHI	Slymvliese	Hidrasie	Kapillêre Hervul	Dermkianke	Buikgord, skof en rug	Beweging	Habitus	Opmerkings	Veearts Handtekening
Voor-rit ondersoek											
HEK/ KONTROLEPUNT 1	Eerste Inspeksie	/									
	Her-Inspeksie	/									
	Her-Ondersoek	/									
HEK/ KONTROLEPUNT 2	Eerste Inspeksie	/									
	Her-Inspeksie	/									
	Her-Ondersoek	/									
Finale Inspeksie		/									

Eliminasie	Mank	Metabolies	Oor tyd	Uitgetree / Onttrek	Ander redes	Veearts Handtekening

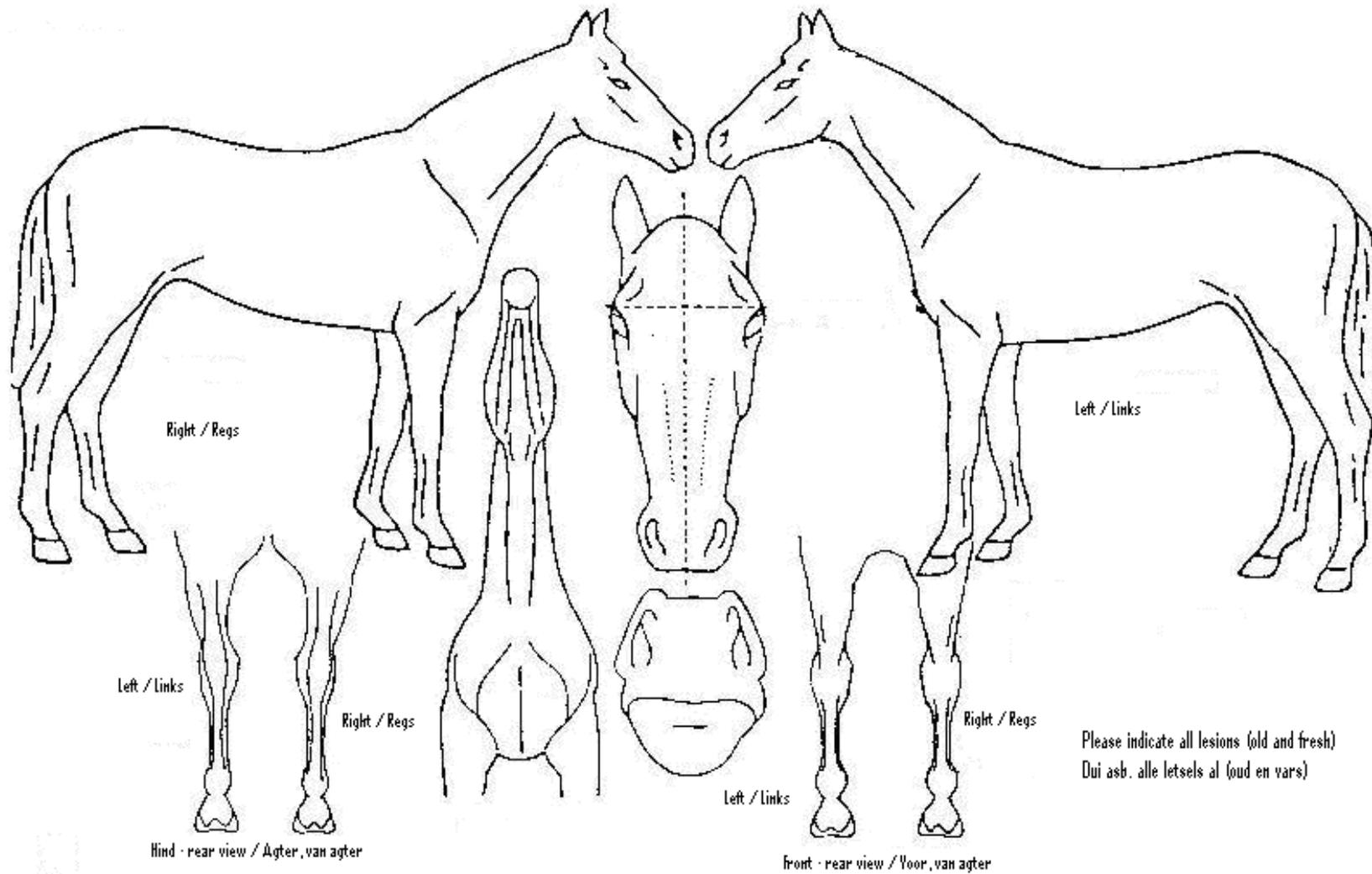
Please note that this Afrikaans version of the veterinary card is used at all rides over up to three loops. For longer rides the English version below is used.

VETERINARY CARD
DATE :

NUMBER	HORSE	COLOUR	
	SEX		
	RIDER		

DISTANCE ENTERED FOR		Pulse CRI	Mucous Membranes	Hydration	Capillary Refill	Gut Sounds	Girth Withers, Back	Motion	Habitus	Remarks	Vet' s Signature
Pre-Ride Inspection											
VET GATE 1	First Inspection	/									
	Re- Inspection	/									
	Re- Examination	/									
VET GATE 2	First Inspection	/									
	Re- Inspection	/									
	Re- Examination	/									
VET GATE 3	First Inspection	/									
	Re- Inspection	/									
	Re- Examination	/									
VET GATE 4	First Inspection	/									
	Re- Inspection	/									
	Re- Examination	/									
VET GATE 5	First Inspection	/									
	Re- Inspection	/									
	Re- Examination	/									
Final Inspection		/									

Elimination	Lame	Metabolic	Overtime	Retired/ Withdrawn	Other Reasons	Vet's Signature



The diagram of the horses is printed on the reverse side of all veterinary cards to allow veterinarians to indicate the location of lesions.

APPENDIX D
TO CHAPTER 8

ERASA BEST CONDITION SCORE SHEET (GATE TIME KEEPING SYSTEM)

Name of Ride/Location/Date

Name of Horse Distance

Name of Rider Rider number

1. RECOVERY RATES SCORE

Time taken to present at	
VG1	
VG2	
VG3	
VG4	
VG5	
Finish	
Average	

Ave time in minutes	Points awarded	Ave time in minutes	Points awarded		
1 - <2	20	7 - <8	10		
2 - <3	19	8 - <10	8		
3 - <4	18	10 - <13	6		
4 - <5	16	13 - <16	4		
5 - <6	14	16 - <19	2		
6 - <7	12	19 - 20	0		
				SCORE 1	

2. HEART RATE SCORE (Cardiac recovery index)

Difference in beats per minute before and after trot up

	Before	After	Difference
VG1			
VG2			
VG3			
VG4			
VG5			
Finish			
Average			

Average difference	Points awarded	Average difference	Points awarded
- 5	20	+ 1	12
- 4	19	+ 2	10
- 3	18	+ 3	8
- 2	17	+ 4	6
- 1	16	+ 5	4
0	14	> + 5	0

SCORE 2

3. FINAL RIDING TIME SCORE

The rider with the best time is awarded 30 points. For each of the following riders 1 point is deducted for every two minutes slower than the fastest time (i.e. if the second rider finished in a time 8 minutes slower than the winner, 4 points are deducted, if the next rider finished in a time 20 minutes slower than the winner, 10 points are deducted, etc, until a rider who finished 60 minutes slower than the winner will be awarded 0 points).

SCORE 3

4. RIDER WEIGHT SCORE

The heaviest rider is awarded 20 points. For the other riders 1 point is deducted for each kilogram that the rider weighs less than the heaviest rider (i.e. if the next heaviest rider weighed in at 4kg lighter than the heaviest rider, 4 points are deducted, and a rider who weighed in at 20kg or more lighter than the heaviest rider will be awarded 0 points).

SCORE 4

5. METABOLIC SCORE

Skin tent		Capillary refill		Mucous Membranes		Gut Sounds	
Seconds	Points	Seconds	Points	Grade	Points	Grade	Points
1	10	1 – 2	10	A	10	Normal	10
2	7.5	2 – 3	7.5	B	7.5	Slight decrease	7.5
3	5	3 – 4	5	C	5	Moderate decrease	5
4	2.5	4 – 5	2.5	D	2.5	Marked decrease	2.5
Score		Score		Score		Score	

Total score Divided by four (4) =

SCORE 7

6. LESIONS SCORE

Degree	Mouth	Girth, Saddle, Back	Limbs
No lesions	10	10	10
Mild lesions	7.5	7.5	7.5
Moderate lesions	5	5	5
Severe lesions	Eliminate	Eliminate	Eliminate
Score			

Total score Divided by three (3) =

SCORE 8

7. SOUNDNESS SCORE

Sound	Slight unevenness	Not consistently lame	Lame
30	20	10	Eliminate

SCORE 5

8. QUALITY OF MOVEMENT SCORE

Attitude (General Appearance, Brightness, Demeanour)				Score
10	8	6	4	

Action (Willingness to trot, Impulsion, Rhythm)				Score
10	8	6	4	

Add the two scores together for a total score out of 20

SCORE 6

GRAND TOTAL

	ASPECT	MAXIMUM	AWARDED
SCORE 1	SLIP TIME	20	
SCORE 2	CARDIAC RECOVERY	20	
SCORE 3	RIDING TIME	30	
SCORE 4	RIDER WEIGHT	20	
SCORE 5	METABOLIC	10	
SCORE 6	LESIONS	10	
SCORE 7	MOVEMENT	30	
SCORE 8	QUALITY OF MOVEMENT	20	
GRAND TOTAL		160	