

RCI Model Rules Committee

PETITION FOR NEW RULE OR CHANGE TO EXISTING RULE

Grace Period/Mitigating Circumstances for positives associated with either Laboratory Change or Change in screening methodology within a Laboratory for recognized therapeutic medications

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A. Brief Description of the Issue:

Whenever the drug screening methodology changes for a jurisdiction, whether it is from a lab change or a change of screening method within a lab, there is a resultant spike in positive tests for therapeutic medications.

B. Discussion of the Issue and Problem

Provide background on the issue to build context. Address the following:

What specific problems or concerns are involved in this issue?

Horsemen and women are being penalized severely for the appropriate use of legitimate therapeutic medications because of surprise changes in their identification.

Who does the issue affect?

Everyone in horse racing. Horsemen and women who are harmed by being charged with a violation beyond their control, and everyone in horse racing is negatively impacted by the bad press associated with dozens of positive tests in the sport.

What existing model rules relate to this issue?

Penalty structure associated with limit of detection positive tests for therapeutic medications.

Provide relevant quantitative or statistical information if possible.

Examples:

New Mexico corticosteroids: The change from UC Davis to Industrial Laboratories was associated with a spike in corticosteroids positive tests. At the time, UC Davis used pooled urine samples to **screen** for corticosteroids, and confirmation was conducted if the pooled urine sample was positive. Industrial **screens** for corticosteroids in serum. This

change in **screening** methodology resulted in more positive tests, blindsiding the horsemen and veterinarians who had confidence in their treatment protocols.

California bisphosphonates: With the change in regulations regarding the use of bisphosphonates came a change in the **screening** methodology at UC Davis. Identification of this class of drug went from a few weeks to at least three years. Horses that had been legally administered bisphosphonates, in some cases by previous trainers/owners were suddenly positive.

Industrial Laboratories Aminocaproic acids: The change in laboratories from Truesdail to Industrial in Maryland and New Jersey, in addition to a suspected change in screening methodology at Industrial, resulted in positive tests exceeding 15, associated with the administration of aminocaproic acid as far out as 8 days prior. There are a similar number that have occurred in at least 2 other jurisdictions.

C. Possible Solutions and Impact

Provide possible recommendations to solve the problem.

We have three possible recommendations for this problem:

1. Offer a grace period for positive tests for therapeutic medications when there is a lab change or lab screening procedure change.
2. These changes could be included as mitigating circumstances in hearings with minimal penalties and warnings issued to horsemen in order to prevent ongoing violations.
3. A screening limit or threshold could be set at the previous lab limit of detection.

Include details on each proposed solution such as

What solution does this proposal provide?

Horsemen and women will no longer be held responsible for circumstances beyond their control with respect to appropriate use of therapeutic medications in a time frame well outside of racing.

How will the solution fix the problem?

Regulations such as setting violations for therapeutic medications at the limit of detection have damaged the reputation of horse racing unnecessarily, and handicapped veterinarians in their ability to appropriately treat and diagnose horses.

How will the change affect any entities or stakeholders?

- (1) Save reputations of trainers from positives associated with lab changes rather than inappropriate medication
- (2) Save the reputation of the sport, which suffers every time a positive is reported in the media
- (3) Save both horsemen/women and racing commissions the legal expenses associated with fighting/defending these positive tests

How will you or your organization be affected by the proposed change?

Horsemen/women and veterinarians have significant “positive fatigue” resulting from the calling of unexpected positive tests for substances used well outside of any effect.

What are the benefits of the proposed change?

See above.

What are the possible drawbacks of the proposed change?

The argument could be made that this would permit “pushing the envelope” for the use of therapeutic medications. However, the list, attached as Appendix A,

Identify possible fiscal impact of the recommended change.

This would save Commissions and Horsemen/women hundreds of thousands in legal fees.

D. Please identify any affected stakeholder groups that expressed support or opposition. (These stakeholders may include the racetracks, breed registries, owners, trainers, jockeys, veterinarians, or others.)

For those stakeholder groups that have expressed an opinion, please list the points on which they agree or disagree, and the arguments they have expressed.

NAARV is the sponsor of this proposal,

Are there any affected stakeholder groups that have not been consulted on this proposal?

The RMTC has not reviewed this current proposal, the Jockey’s Guild has also not been consulted.

Please submit any formal letters of support or opposition by stakeholder groups.

To Follow.

E. Attach the model rule language you are proposing. Please show new language with underlined text. If you are proposing that current model rule language be eliminated, please strikeout the language to be deleted.

F. Do any racing jurisdictions currently have a version of this rule in effect? If yes, please attach copies of those rules.

G. Review the RCI Model Rules and identify any other Model Rules this change would affect and submit proposed amendments to those rules to comply with changes that would be made by this proposal.

FILING THIS REQUEST WITH RCI DOES NOT GUARANTEE YOUR PROPOSAL WILL BE CONSIDERED BY THE MODEL RULES COMMITTEE. IF YOU HAVE OPPOSITION FROM AN INTERESTED PARTY, YOU ARE STRONGLY ENCOURAGED TO TRY TO REACH CONSENSUS PRIOR TO FILING THIS FORM.

Appendix A

AAEP compiled therapeutic medications with Zero Tolerance

Acetylsalicylic Acid
Aminocaproic Acid
Atropine
Beclomethasone
Betamethasone
Cromolyn Sodium
Dantrolene
Dexamethasone
Diazepam
Dipyrrone
Flouroprednisolone
Ibuprofen
Isoflupredone
Isoxsuprine
Meclofenamic Acid
Methylergonovine
Naproxen
Pentoxifylline
Phenytoin
Reserpine
Triamcinolone
Trichlomethiazide