NEW YORK STATE OF OPPORTUNITY. | Gaming Commission

Jockey Club Gold Cup (G1) Veterinary Treatment Records October 2, 2015

NYS Gaming Commission

Veterinary Record Form VR1a

Use is recommended to assure compliance with Section 4012.4 and 4120.9 of NYCRR 9E

VET: CARR

Trainer/Client: J. JERKENS

Horse: WICKED STRONG #1

One Broadway Center, P.O. Box 7500
Schenectady, NY 12301-7500
(518) 388-3400 (Phone) (518) 388-3403 (Fax)
www.gaming.ny.gov

Date:	Time:	Diagnosis:	Treatment: Drug Administered, Dose, & Route of Administration
10/2	11:25	Blood Builder	Mul Vits B1 B12 B Complex + C IV 20cc

NYS Gaming Commission

Veterinary Record Form VR1a

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VET: JAMES HUNT

Trainer/Client: PLETCHER

Horse: COACH INGE #2

One Broadway Center, P.O. Box 7500
Schenectady, NY 12301-7500
(518) 388-3400 (Phone) (518) 388-3403 (Fax)
www.gaming.ny.gov

Date:	Time:	Diagnosis:	Treatment: Drug Administered, Dose, & Route of Administration
10/2/15			NO TREATMENT

NYS Gaming Commission

Veterinary Record Form VR1a

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VET: JAMES HUNT

Trainer/Client: PLETCHER

Horse: CONSTITUTION #3

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Schenectady, NY 12301-7500
(518) 388-3400 (Phone) (518) 388-3403 (Fax)
www.gaming.ny.gov

Date:	Time:	Diagnosis:	Treatment: Drug Administered, Dose, & Route of Administration
10/2/15			NO TREATMENT

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One Broadway Center, P.O. Box 7500, Schenectady, NY 12301-7500
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VET: Russell S Cohen DVM

TRAINER/CLIENT: Jerkens

HORSE: Essex #4

Veterinary Record Form VR1a
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Section 4012.4 and 4120.9 of NYCRR 9E
9/1/15

DATE	TIME	DIAGNOSIS	TREATMENT - DRUG ADMINISTERED, DOSE & ROUTE OF ADMINISTRATION
12/2/15	—	—	NO TREATMENT

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One Broadway Center, P.O. Box 7500, Schenectady, NY 12301-7500
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VET: Galvin

TRAINER/CLIENT: DiPrima

HORSE: Looks to Spare #5

Veterinary Record Form VR1a
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Section 4012.4 and 4120.9 of NYCRR 9E
9/1/15

DATE	TIME	DIAGNOSIS	TREATMENT - DRUG ADMINISTERED, DOSE & ROUTE OF ADMINISTRATION
10/2	9:53	Stomach Ulcer MJB	Gastro-Gard-Oral

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VET: Galvin

TRAINER/CLIENT: DiPrima

HORSE: Looks to Spare #5

Veterinary Record Form VR1a
Use is recommended to assure compliance with Section 4012.4 and 4120.9 of NYCRR 9E
6/29/15

DATE	TIME	DIAGNOSIS	TREATMENT - DRUG ADMINISTERED, DOSE & ROUTE OF ADMINISTRATION
10/2	10:53am	DEHYDRATION	- 1 LITER SALINE/NIT IV - ELECTROLYTES BY TUBE
			w/ Galvin, m

NYS Gaming Commission

Veterinary Record Form VR1a

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VET: JAMES HUNT

Trainer/Client: CLEMENT

Horse: TONALIST #6

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www.gaming.ny.gov

Date:	Time:	Diagnosis:	Treatment: Drug Administered, Dose, & Route of Administration
10/2/15			NO TREATMENT