



DEPARTMENT FOR ENVIRONMENT, FOOD AND RURAL AFFAIRS
SCOTTISH GOVERNMENT
WELSH GOVERNMENT

DEPARTMENT OF AGRICULTURE, ENVIRONMENT AND RURAL AFFAIRS
NORTHERN IRELAND

HEALTH CERTIFICATE FOR EXPORT OF THOROUGHBRED HORSES IN CONTINUOUS TRAINING FROM
THE UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND TO THE UNITED STATES OF
AMERICA

1. No:.....

EXPORTING COUNTRY: UNITED KINGDOM (GREAT BRITAIN AND NORTHERN IRELAND)

ISSUING COMPETENT AUTHORITY: ⁽¹⁾ APHA (GB) / ⁽¹⁾ DAERA (N. IRELAND)

FOR COMPLETION BY: ⁽²⁾ OFFICIAL VETERINARIAN / ⁽³⁾ WHOLE TIME VETERINARY OFFICIAL

2. UK region of provenance and competent authority:

2.1 Region: ⁽¹⁾ Great Britain (England/Scotland/Wales) / ⁽¹⁾ Northern Ireland:

2.2 Competent Authority: ⁽¹⁾ Defra/SG/WG / ⁽¹⁾ DAERA

I. Identification of the animal

Name	Breed	Sex	Age	Colour	Microchip number

A full description using the sketch on page 4 should be completed. Whorls on head and neck should be described in the narrative and indicated by a small cross (x).

II. Origin of the animal

a) Name and address of exporter:

b) Address of premises of residency:

c) Address of premises of inspection, if different than residency:

d) Name and address of owner:

e) Port of embarkation:

III. Destination of the animal

- a) Name and address of consignee:

- b) Means of transportation and proposed route of travel:

- c) Port of U.S. entry:
- d) Address of the destination location:

- e) Premises of temporary holding (if longer than 48hrs):

Name	Address	Country

f) APHIS permit number:

IV. Health information

I, the undersigned, certify that:

- a) on (date), I examined the animal identified at paragraph I above within 48 hours of departure from port of embarkation, and found it free from clinical signs or symptoms of infectious or contagious disease, and also free of ectoparasites;
- b) I have received a declaration from the owner of the said animal stating that:
 - (1) **EITHER** (i) the said animal has been continuously resident in (insert either Great Britain or Northern Ireland) during the past 60 days;
 - (1) **OR** (ii) the said animal has also been resident in the (4) following countries during the past 60 days, and support certification addressing the relevant requirements of this certificate has been obtained from the country of residence:

Premises	Country	Dates (dd/mm/yyyy)
		From: Until:
		From: Until:
		From: Until:

- c) so far as I can determine, the said animal has not been vaccinated with a live, attenuated or inactivated vaccine during the last 14 days;
- d) so far as I can determine, the said animal has not been exposed to any infectious or contagious disease during the last 60 days;

e) so far as I can determine, the said animal has not been on a premises where African horse sickness, dourine, glanders, surra, ulcerative lymphangitis, equine piroplasmiasis, epizootic lymphangitis, contagious equine metritis (CEM), equine infectious anaemia (EIA), Venezuelan equine encephalomyelitis (VEE) or vesicular stomatitis has occurred during the 60 days immediately preceding exportation nor have these diseases occurred on any adjoining premises during the same period of time;

f) ⁽¹⁾ **(NOT APPLICABLE FOR ALL GELDINGS)**

As far as I can determine, this animal has not been on any premises, since the first collection of swabs for export purposes and at least during the 60 day immediately preceding exportation, where it is known that the contagious equine metritis organism has been isolated;

g)

- i. The horse is registered in Weatherby's Ltd.
- ii. I have examined records of the horse's activities maintained by the trainer and certified to be current, true, and factual by the veterinarian in charge of the training or racing stable;
- iii. I have examined the records of the horse's activities maintained by Weatherby's Limited and certified by the breed association to be current, true, and factual for the following information:
 - i. Identification of the horse by name, sex, age, breed, and all identifying marks.
 - ii. Identification of all premises where the horse has been since reaching 731 days of age and the dates of that the horse was at each premise.
 - iii. None of the premises where the horse has been since reaching 731 days of age is exclusively dedicated to the breeding of horses, the horse has never been bred, breeding of the horse has never been attempted, and the horse has never been commingled and left unattended with sexually intact adult horses of the opposite sex.
- iv. I have compared records maintained by the approved breed association with the records kept by the trainer and have found the information in those two sets of records to be consistent and current.

h)

⁽¹⁾ **FOR HORSES LESS THAN 731 DAYS OF AGE**

they have never been used for breeding, either live or artificial.

⁽¹⁾ **FOR FEMALES OVER 731 DAYS OF AGE:**

on the following dates/times being at least 72 hours apart and within a 12 day period, the last date being within 30 days of shipment, swabs were taken from the mucosal surfaces of the clitoral fossa, the clitoral sinuses and - included in at least one of these three sets - the distal cervix or endometrium of the said thoroughbred horse and submitted⁽⁵⁾ to a bacteriological test for the contagious equine metritis organism at a laboratory approved by the Competent Authority of the country of residence, with a negative result in each case:

1	(date and time)	2	(date and time)	3	(date and time)
---	-----------------	---	-----------------	---	-----------------

⁽¹⁾ **FOR INTACT MALES OVER 731 DAYS OF AGE (NOT APPLICABLE FOR ALL GELDINGS) :**

on the following dates/times being at least 72 hours apart and within a 12 day period, the last date being within 30 days of shipment, swabs were taken from the prepuce, the urethral sinus, the distal urethra and the fossa glandis, including the diverticulum of the fossa glandis of the said thoroughbred horse and ⁽⁵⁾ submitted to a bacteriological test for the contagious equine metritis organism at laboratory approved by the Competent Authority of the country of residence, with a negative result in each case:

1	(date and time)	2	(date and time)	3	(date and time)
---	-----------------	---	-----------------	---	-----------------

i) the said animal has either:

(1) never cultured positive for CEM in the testing cycle preceding exportation,
OR

(1) cultured positive for CEM on (date and time), was
treated using (describe protocol) and

has been culture negative on (date and time), being
not less than 21 days after the last antibiotic treatment.

V. This certificate is valid for 10 days from the date of signature by the (2) Official Veterinarian.

Stamp

(6) SignedRCVS

Name in
block letters:.....

Date of issuance:

Address

Notes:

APHIS recognises separately the regions and the disease statuses of Great Britain and Northern Ireland as stipulated in the relevant section of the Federal Register (Vol. 86 No.155).

VI. (3) I, the undersigned, certify that:

a) (1) (NOT APPLICABLE FOR ALL GELDINGS AND ANY MALES/FEMALES UNDER 731 DAYS OLD) the CEM swabs referred to in paragraph IV h) have been sent to laboratory/laboratories, approved by the Competent Authority of (insert either Great Britain or Northern Ireland) to perform bacteriological tests for contagious equine metritis;

b) RCVS is an Official Veterinarian of the Department for Environment, Food and Rural Affairs/Scottish Government/Welsh Government, or an Authorised Veterinary Inspector (AVI) appointed by the Department of Agriculture, Environment and Rural Affairs (DAERA) in Northern Ireland, and is authorised to sign this certificate.

I have received a declaration from the exporter or transporter that travel arrangements have been made for transport of the horse to the United States to:

- 1) Travel in a cleaned and disinfected conveyance, transport vehicle or container.
- 2) Be held separate and apart and not have contact, breeding or otherwise, with animals not complying with at least the same health requirements as described in this health certificate.
- 3) Have a record kept and available for review containing the details of their journey.

(6) SignedRCVS

Name in
block letters:.....

(1) Salaried Veterinary Official of the Department for Environment, Food and Rural Affairs/Scottish Government/Welsh Government

(1) Salaried Authorised Veterinary Official of the Department of Agriculture, Environment and Rural Affairs (DAERA) in Northern Ireland

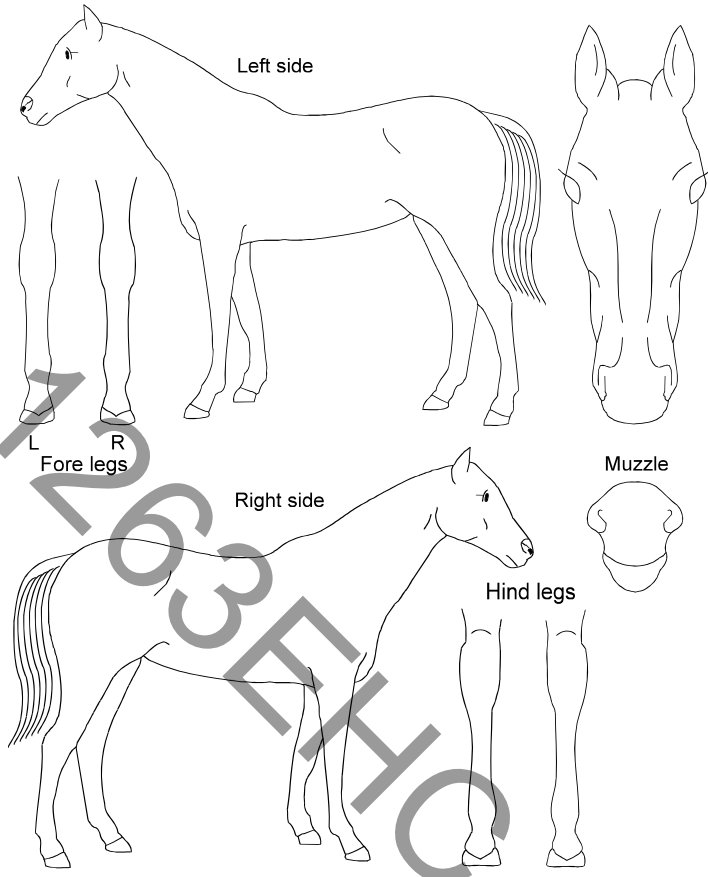
Office Address	APHA/DAERA Stamp	OV Stamp

Date

FOOTNOTES

- (1) Delete as appropriate.
- (2) Official Veterinarian (OV) is an Authorized veterinarian of the Department for Environment, Food and Rural Affairs (DEFRA) or of the Department of Agriculture, Environmental and Rural Affairs (DAERA)."
- (3) Salaried Veterinary Official of the National Government in the Department of Environmental Food Rural Affairs in Great Britain or Department of Agriculture, Environment and Rural Affairs in Northern Ireland.
- (4) Only countries that racing Thoroughbreds may be from/reside in are Germany, France, Republic of Ireland, Northern Ireland, and Great Britain (England, Scotland, Wales), as well as APHIS recognized CEM-free countries for competition purposes. The APHIS recognized animal health status of a region/country can be found at <https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/animal-and-animal-product-import-information/animal-health-status-of-regions>
- (5) All swabs must be submitted to the same laboratory, and must arrive at the laboratory within 48 hours of sampling.
- (6) An original wet-ink signature is required

No:



INSTRUCTIONS

Kindly complete silhouette and description **AND** enter number of passport/identification certificate

- White markings to be shown in red.
- Mark the diagram with the exact position of any distinguishing marks, scars or brands. Brands to be drawn in position. Scars to be marked and indicated with an arrow (→).
- Whorls should be marked with a cross(X).
- Stars or blazes on the face and any other marking to be drawn in on the diagrams showing position and shape as accurately as possible.
- Please ensure that the diagram and the written description agree.
- If no markings, this fact should be stated.

OV Stamp
Date

Name	Breed	Colour	Age	Sex
Head/Neck				
Limbs LF				
RF				
LH				
RH				
Body				
Acquired marks (scars, tattoos, microchip, etc.)				

The horse certified on this health certificate is as described in horse passport/identification certificate number:

Signature:.....RCVS Official Veterinarian

.....NAME IN BLOCK CAPITALS