



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

DEPARTMENT OF AGRICULTURE, ENVIRONMENT AND RURAL AFFAIRS, NORTHERN IRELAND

No:

TEMPORARY EXPORT AND RE-ENTRY OF INTERNATIONAL RACEHORSES FROM THE UNITED KINGDOM TO JAPAN
HEALTH CERTIFICATE

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

FOR COMPLETION BY: OFFICIAL VETERINARIAN

I. Identification of the racehorse

| Name | Breed | Age | Colour | Sex |
|------|-------|-----|--------|-----|
| | | | | |

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

II. Origin of the racehorse

a) Name and address of exporter:

b) Name and address of premises of permanent residence of the racehorse:

c) Name and address of owner:

d) * ONLY IN THE CASE OF A RETURNING RACEHORSE ⁽¹⁾ *

The racehorse was exported from Japan on:

(date)

III. Destination of the racehorse

a) Name and address of consignee:

b) Means of transportation:

(flight number; vessel name; lorry number)

IV. Movement information of racehorse during the last 60 days

| Listed Country' ⁽²⁾ | Date of entry | Date of exit | Name and address of premises |
|--------------------------------|---------------|--------------|------------------------------|
| | | | |
| | | | |

V. Health Information

I, the undersigned, being an Official Veterinarian hereby certify in respect of the racehorse described above that:

1. during the 60 days immediately prior to shipment to Japan, or in case of a 'returning racehorse⁽¹⁾' during the period of time since the racehorse left Japan, the racehorse meets the following requirements:
 - (a) I have received a written declaration from the owner*/agent of the owner* of the racehorse stating that, during the period of time mentioned at 1. above, the racehorse has been resident only in the United Kingdom and / or any one of the **Listed countries⁽²⁾**:
 - (b) the United Kingdom, or any of the **Listed countries⁽²⁾** the racehorse has visited during the period of time mentioned above, has been free from African Horse Sickness and Venezuelan Equine Encephalomyelitis for at least 2 years prior to shipment to Japan;
 - (c) as far as can be determined, and in accordance with a written declaration from the owner*/agent of the owner* during the period of time mentioned at 1. above, the racehorse has been stabled at premises under veterinary supervision in which no cases of the following diseases have occurred, nor has the racehorse for export shown clinical signs of these diseases: Anthrax, Epizootic Lymphangitis, Equine Infectious Anaemia, Equine Influenza, Equine Encephalomyelitis (Eastern and Western Equine Encephalomyelitis, and Japanese Encephalomyelitis), Equine Morbillivirus Pneumonia (Hendra virus infection), Equine Paratyphoid (*Salmonella abortus equi*), Equine Piroplasmosis, Equine Rhinopneumonitis, Surra, Trypanosomoses, Equine Viral Arteritis, Glanders, Horse Pox, Nipah virus infection, Rabies and Vesicular Stomatitis;
 - (d) I have received a written declaration from the owner*/agent of the owner* stating that during the period of time mentioned above the racehorse has not been resident in a racehorse breeding premises, and has not been used for natural breeding or artificial insemination;
2. the international racehorse meets one of the following requirements:
 - (a) **EITHER*** the racehorse was tested for the following diseases with negative results within 30 days immediately prior to shipment to Japan:
 - (b) **OR*** the racehorse was tested for the following diseases with negative results within 60 days prior to shipment to Japan. Following the taking of the samples, the racehorse has not come into contact with other horses not of the same health status other than at the time of training and racing:

| Disease | Method of Test | Date of Sampling and Date of Test | Result |
|---------------------------|--|-----------------------------------|--------|
| Equine infectious anaemia | Agar Gel Immunodiffusion Test | | |
| Equine piroplasmosis | either competitive ELISA* or Indirect Fluorescent Antibody Test (IFAT)* | | |
| Equine Viral Arteritis | either Serum neutralisation Test* or real-time RT-PCR using nasopharyngeal swab* | | |

(c) **OR*** **IN THE CASE OF A RETURNING RACEHORSE⁽¹⁾ STAYING IN ANY OF THE LISTED COUNTRIES⁽²⁾ FOR 14 DAYS OR LESS**

as far as can be determined, and in accordance with a written declaration from the owner*/agent of the owner* the racehorse has not come into contact with other horses except those of the same health status other than at the time of training and racing under official supervision, has been stabled in approved insect vector protected facilities, has been treated with an insect repellent on each occasion prior to leaving the facilities, and has shown no signs of the listed diseases mentioned at paragraph V.1(c) above having undergone regular clinical inspections conducted by an official veterinarian;

3.* ONLY WHEN THE RACEHORSE HAS BEEN IN ONE OF THE FOLLOWING TEST COUNTRIES⁽³⁾ DURING THE 60 DAYS PRIOR TO SHIPMENT TO JAPAN OR ANY OTHER LISTED COUNTRY⁽²⁾ *

the racehorse has been tested for the following diseases with negative results within 30 days immediately prior to shipment to Japan or any other **Listed country⁽²⁾**:

| Test Country ⁽³⁾ | Disease | Method of Test | Date of Sampling and Date of Test | Result(s) |
|--|-----------------------|---|-----------------------------------|-----------|
| Kingdom of Bahrain Kingdom of Saudi Arabia Qatar United Arab Emirates | Surra | Giemsa-stained blood smear and either ELISA* or Indirect fluorescent antibody test* or Card agglutination test* or PCR* | | |
| Kingdom of Bahrain Kingdom of Saudi Arabia Qatar United Arab Emirates | Trypanosomoses | Giemsa-stained blood smear and either ELISA* or Indirect fluorescent antibody test* or PCR* | | |
| Kingdom of Saudi Arabia | Glanders | either Complement fixation test* or ELISA* | | |
| Singapore | Nipah virus infection | either ELISA* or Serum Neutralisation Test* | | |
| Kingdom of Saudi Arabia, United States of America | Vesicular Stomatitis | Serum Neutralization Test | | |

4. In the case the international racehorse has stayed in Test Countries for Vesicular Stomatitis within 60 days before export to Japan, the horse must be tested for Vesicular Stomatitis by serum neutralization test with negative results within 14 days immediately prior to shipment to Japan or other Listed Countries other than Test Countries for Vesicular stomatitis.

5. (a) **EITHER*** the racehorse has been vaccinated against **Equine Influenza** twice at an interval of 4 to 6 weeks, or once in the case of a booster, within 6 months immediately prior to shipment to Japan.

Dates of vaccination: 1: (date); 2: (date)
Name of vaccine:
Batch number:

(b) **OR*** the racehorse has been vaccinated against **Equine influenza** in accordance with the recommendations of a manufacturer with a vaccine authorised by the government of the Listed Countries between 21 and 90 days before shipment to Japan either with a primary course or a booster.

(c) **AND** the racehorse was tested for **Equine Influenza** using a nasopharyngeal swab taken during the 5 days prior to shipment to Japan.

Date of Sampling: Date of Test:
Method of Test: **either** RT-PCR* **or** antigen ELISA* Result:

6. (a) **EITHER*** the horse has not been vaccinated against **West Nile Virus (WNV)**; **and**, it has been resident in premises located in the centre of a 50 kilometre area during the 14 days immediately prior to shipment to Japan in which no cases of **WNV** were confirmed during the 60 days immediately prior to shipment to Japan;

(b) **OR*** the horse was vaccinated against WNV using a government authorised vaccine in accordance with the manufacturer's recommendations during the 12 months prior to shipment to Japan*

Dates of vaccination: 1: (date)
2: (date)

Name of vaccine:

Batch number:

7. I have received a written declaration from the owner*/agent of the owner* stating that during the 60 days prior to shipment to Japan, including transportation between any **Listed countries**⁽²⁾;

- (a) all equipment, containers, land vehicles and loading premises of a ship or an aircraft which have been/will be used for transportation of the international racehorse have been/will be fully cleansed and disinfected with a government approved disinfectant;
- (b) the horse has not been/will not be loaded with any animal (equine or cloven-hoofed animals) other than racehorses participating in international horseraces of the same health status;
- (c) no additional feed and/or litter has been/will be provided at any port of call during the transportation of the horse.

VI. **Vaccination history (if applicable)***

| Type of Vaccination | Date of vaccination |
|---------------------|---------------------|
| | |
| | |
| | |

VII. **This certificate is valid for 14 days.**

Stamp

SignedRCVS

Name in block

letters:

Official Veterinarian

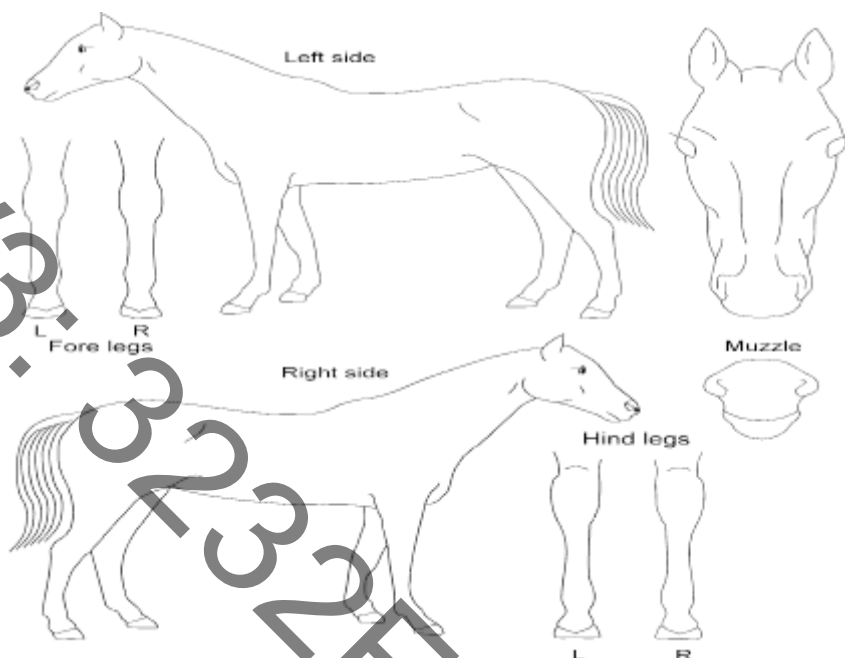
Date

Address

.....

Footnotes

- (1) **'Returning racehorse'**: any racehorse originated in Japan which has been temporary exported to a 'Listed country' for a period no longer than 90 days and is returning back to Japan after racing.
- (2) **'Listed countries'**: Canada, France, Germany, Hong Kong (*), Ireland, Italy, Kingdom of Bahrain (**), Kingdom of Saudi Arabia (***), Qatar (****), Singapore, United Arab Emirates, United Kingdom, Republic of Korea, United States of America.
- (*) Temporary residency in the equine disease-free zone in Conghua City, China (Conghua Training Centre) is approved.
- (**) The Bahrain International Airport and the Rashid Equestrian and Horseracing Club in the Kingdom of Bahrain only.
- (***) The King Khalid International Airport and King Abdul Aziz Racecourse in the Kingdom of Saudi Arabia only.
- (****) For the horses exported to Qatar, they may only stay in the Listed Countries except for the Kingdom of Bahrain and the Kingdom of Saudi Arabia.
- (3) **'Test Country'**: means the country where the test for the following diseases must be conducted:
- Equine piroplasmiasis**: Canada, France, Germany, Hong Kong, Ireland, Italy, the Kingdom of Bahrain, the Kingdom of Saudi Arabia, Qatar, Singapore, the United Arab Emirates, the United Kingdom, the Republic of Korea, the United States of America.
- Equine infectious anaemia**: Canada, France, Germany, Hong Kong, Ireland, Italy, the Kingdom of Bahrain, the Kingdom of Saudi Arabia, Qatar, Singapore, the United Arab Emirates, the United Kingdom, the Republic of Korea, the United States of America.
- Surra**: the Kingdom of Bahrain, the Kingdom of Saudi Arabia, Qatar, the United Arab Emirates.
- Trypanosomiasis**: the Kingdom of Bahrain, the Kingdom of Saudi Arabia, Qatar, the United Arab Emirates.
- Equine viral arteritis**: Canada, France, Germany, Hong Kong, Ireland, Italy, the Kingdom of Bahrain, the Kingdom of Saudi Arabia, Qatar, Singapore, the United Arab Emirates, the United Kingdom, the Republic of Korea, and the United States of America.
- Glanders**: the Kingdom of Saudi Arabia.
- Nipah virus infection**: Singapore.
- Vesicular stomatitis**: the Kingdom of Saudi Arabia and the United States of America.
- * Delete as applicable



INSTRUCTIONS

EITHER complete silhouette and description OR 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.

Stamp

Date

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

The horse certified on this health certificate is as described in horse passport/identification certificate number:.....
 Signature:.....RCVS Official Veterinarian
NAME IN CAPITALS