



MAINE STATE HARNESS RACING COMMISSION

EXERCISED INDUCED PULMONARY HEMORRHAGE (E.I.P.H.) CERTIFICATE

Horse _____ Color _____ Sex _____

Tattoo # _____ Date _____

The above named horse is placed on the Maine State Harness Racing Commission's list of horses exhibiting E.I.P.H. The horse was examined:

_____ on the track during/after _____ race.
_____ in the paddock before/after the _____ race.
_____ in the stable area after the _____ race.
_____ in the stable area after training exercise.

Determination of the presence of E.I.P.H. of the above named horse and for good cause shown. The method of evaluation was:

- 1. Endoscopic examination.
2. Personal observation such as _____
3. Evaluation of the horse's medical condition _____

I, the undersigned, acknowledge that the above information is true and accurate to the best of my ability.

Printed Name of Trainer

Signature of Trainer

Signature of Veterinarian

Approved _____ Disapproved _____ By the Commission Veterinarian

Signature of Commission Veterinarian