

Veterinary Consultation Form

NOTE TO TRAINER: THIS ATTENDANCE MAY HAVE IMPLICATIONS UNDER THE ORDERS AND RULES OF RACING AND CONSULTATION WITH YOUR VETERINARY SURGEON IS ADVISED

Racecourse:	Date:	Race (where applicable):
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Horse:	Trainer/Owner:
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Incident/Clinical Findings:

Outcome:	D Died	D Destroyed	D Examined, treated	D Examined, untreated
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Details of Treatment:

It is the responsibility of the treating veterinary surgeon to ensure that, unless this horse has been declared in Section IX of its passport as 'Not Intended for Slaughter for Human Consumption', any qualifying medication given to it is recorded in Section IX of its passport. If passport is not available issue BEVA form: EQUINE REQUIRING EMERGENCY TREATMENT IN THE ABSENCE OF A PASSPORT

Instructions for follow-up treatment/veterinary attendance:

In my opinion this horse is FIT/UNFIT to travel to:
With special conditions for travel (if none, state 'none'):

Racecourse Veterinary Surgeon Signed Tel. No.	BHA Veterinary Officer: Tel. No. Fax No.
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***Note to racecourse veterinary surgeon:** Please hand one copy to the horse attendant, one to the Veterinary Officer, and retain one copy for your records.