

Horseracing Integrity & Welfare Unit: The Basics



What is the Horseracing Integrity & Welfare Unit?

The Horseracing Integrity & Welfare Unit, also known as HIWU, is the independent agency that will be enforcing the **Horseracing Integrity and Safety Authority's (HISA) Anti-Doping and Medication Control (ADMC) Program**.

The program, which applies to Thoroughbred racing, goes into effect January 1, 2023.

Where did HIWU come from?

HIWU, established in 2022, is a division of Drug Free Sport International, a worldwide leader in drug testing in sports. Among Drug Free Sport International's business partners are the NFL, NBA, NCAA, MLB, PGA Tour, NASCAR, International Tennis Federation, and International Testing Agency.

What does Drug Free Sport International have to do with HISA?

Drug Free Sport International has contracted with HISA to build an enforcement agency to administer HISA's ADMC Program. That enforcement agency is HIWU.

What are HIWU's responsibilities?

- TESTING - HIWU will oversee the testing process, including:

- Managing test distribution planning (what horses will be selected for testing and when)
- Implementing all test barn and sample collection protocols
- Maintaining the integrity of chain of custody for samples

- RESULTS MANAGEMENT - HIWU will directly:

- Receive all test results from accredited laboratories
- Notify relevant constituents of test results
- Manage the hearing and/or arbitration processes following positive lab results and other ADMC Program violations

- LABORATORY ACCREDITATION - HIWU will enforce the harmonization of labs by:

- Ensuring that testing laboratories meet the required accreditation standards to maintain uniform testing capabilities across the country

- INVESTIGATIONS - HIWU's investigative arm will:

- Direct and conduct investigations of possible ADMC Program violations
- In January 2023, establish a tip line for whistleblowers to confidentially pass on information about possible anti-doping and controlled medication concerns.
- Consider all legitimate sources of intelligence and information to inform testing and investigations

- EDUCATION - HIWU will maintain open communications with the Thoroughbred industry by:

- Keeping all Thoroughbred industry stakeholders apprised of the ADMC Program regulations and how they are affected
- Publishing imposed sanctions and maintaining a repository of resources for stakeholders

In addition to full-time HIWU staff members, HIWU's efforts will be facilitated by collaboration with current employees in the racing industry, including those from state racing commissions, racetracks, and laboratories, as well as veterinarians and horsemen.

*Please be advised that the responsibilities and requirements set forth above are contained in the regulations submitted by the Horseracing Integrity and Safety Authority to the Federal Trade Commission (FTC) on August 17, 2022, and published by the FTC in the Federal Register on October 28, 2022. Accordingly, these regulations are subject to change until they have received final approval by the FTC, which will occur before the ADMC Program takes effect on January 1, 2023.



Horseracing Integrity & Welfare Unit:

Known Detection Times and Screening Limits of Common Controlled Medications



Background:

Under HISA's Anti-Doping and Medication Control (ADMC) Program, it is the responsibility of attending veterinarians and Responsible Persons, i.e., trainers, to determine appropriate withdrawal guidance for a substance administered to a Covered Horse based on factors including, but not limited to, that individual horse's health and metabolism, other prescribed medications the horse may be receiving, a veterinarian's and/or trainer's risk aversion level, and published Detection Times.

The attached table should be consulted as a guide when determining appropriate withdrawal guidance for the medications listed.

Empty boxes indicate that there is not information available regarding dosing protocol, Detection Time, or Screening Limit for that specific substance.

All administrations of Controlled Medication Substances are prohibited within 48 hours of a race (restricted administration time), with the following exceptions as per HISA's ADMC Program Prohibited List. These substances may be administered ≥ 24 hours before a race or Vets' List workout:

- Orally administered vitamins
- Vaccines
- Anti-ulcer medications (e.g., Cimetidine, Omeprazole, and Ranitidine)
- Unsupplemented isotonic electrolyte solutions by oral or IV administration
- Altrenogest in female horses
- Antimicrobials (antibiotics) and other anti-infective agents, excluding procaine penicillin or other antimicrobial/anti-infective agents containing or metabolizing to Prohibited Substances
- Antiparasitic/anthelmintics approved and registered for use in horses, excluding levamisole or other antiparasitic/anthelmintics metabolizing to and/or containing other Prohibited Substances



Horseracing Integrity & Welfare Unit:

Known Detection Times and Screening Limits of Common Controlled Medications



Terms To Know:

- **Banned Substance:** prohibited at all times from being possessed, administered, or present in relation to a Covered Horse.
- **Controlled Medication Substance:** permitted for use or administration in a Covered Horse, except in close proximity to a race or Vets' List workout. As specified in the Prohibited List, certain Controlled Medication Substances are also prohibited from being present in samples collected following an official timed workout.
- **Covered Horse:** a Thoroughbred that has completed at least one official timed workout.
- **Detection Time (DT):** the earliest time after administration of a medication to a group of test horses that the medication's concentration is below the Limit of Detection (i.e., the lowest concentration of a substance that can be identified by a laboratory) or defined Screening Limit in a specific matrix (e.g., serum, plasma, urine, or hair) in all of the test horses. The number of test horses used to determine a DT will be specified.
- **Prohibited List:** identifies Banned Substances/Methods and Controlled Medication Substances/Methods.
- **Responsible Person:** a Covered Horse's trainer; if the horse doesn't have a trainer, the Responsible Person is the Covered Horse's owner; included as a Covered Person.
- **Restricted Administration Time (RAT):** an interval prior to a race during which the administration of a substance, or substances, is strictly prohibited. RATs can be enforced by drug testing, as well as by surveillance or the acquisition of evidence that an administration occurred during the prohibited period.
- **Screening Limit (SL):** An internal trigger for laboratories. If initial testing finds a concentration of a substance in a sample from a Covered Horse that is below the SL, the laboratory will not pursue the possible presence of a Prohibited Substance. If initial testing finds a concentration of a substance to be above the SL, the laboratory will pursue confirmatory analysis to solidify the positive finding. An SL value can be but is not always a Limit of Detection.
- **Withdrawal Guidance:** a recommendation traditionally provided by regulators or veterinarians as to the minimum interval between administration of a medication, including specific dosage and route of administration, and a race or timed workout. Under HISA's ADMC Program, it is the responsibility of attending veterinarians and Responsible Persons, i.e., trainers, to determine appropriate withdrawal guidance for a substance administered to a Covered Horse. Such guidance will not be provided by HISA or HIWU.

Please be advised that the responsibilities and requirements of the ADMC Program are contained in the regulations submitted by the Horseracing Integrity and Safety Authority to the Federal Trade Commission (FTC) on August 17, 2022. Accordingly, these regulations are subject to change until they have received final approval by the FTC, which will occur before the ADMC Program takes effect on January 1, 2023.

The information enclosed herein is not exhaustive. For more information, please consult the ADMC Program regulations submitted by the Horseracing Integrity and Safety Authority to the Federal Trade Commission (FTC), which were published by the FTC in the Federal Register on October 28, 2022.

Table Endnotes:

¹Number of test horses used in research studies to determine Detection Time.

¹ Albuterol administered by any route other than inhalation is a Banned Substance. Evidence that albuterol was administered by a route other than inhalation, regardless of concentration in a sample, constitutes an Anti-Doping Rule Violation.

² The detection of more than one NSAID in a horse's Post-Race or Post-Work blood sample constitutes a Stacking Violation (detection of more than 1 NSAID in a blood sample).

³ Three NSAIDs (Flunixin, Ketoprofen, Phenylbutazone) are associated with DTs of 48 hours. Only one of the three may be administered using a withdrawal guidance based on the 48-hour DT. To avoid a Stacking Violation, the following secondary DTs should be applied for the following 3 NSAIDs: Flunixin: 144 hours; Ketoprofen 96 hours; Phenylbutazone: 168 hours.

⁴ The detection of more than one corticosteroid in a horse's Post-Race or Post-Work blood sample constitutes a Stacking Violation.

Horseracing Integrity & Welfare Unit:

Known Detection Times and Screening Limits of Common Controlled Medications



Substance	Dosage	Detection Time <small>Unless Specified as Restricted Administration Time (RAT)(#Horses*)</small>	Screening Limit
Acepromazine	1. 0.15 mg/kg single oral dose 2. 0.05 mg/kg single IV dose (20 horses)	1. 72 hours (6) 2. 48 hours (20)	10 ng/mL as 2-(1- hydroxyethyl) promazine sulfoxide (HEPS) in urine or 0.02 ng/mL in serum or plasma
Albuterol ¹ (Salbutamol)	5 x 100 µg actuations per dose for 2 days dosed every 4 hours	72 hours	0.5 ng/mL in urine
Betamethasone ⁴			0.2 ng/mL in urine
Butorphanol	0.1 mg/kg single IV dose	72 hours (6)	1 ng/mL in urine or 0.01 ng/mL in serum or plasma
Cetirizine	0.4 mg/kg twice daily for 5 doses.	48 hours (9)	3 ng/mL in serum or plasma
Ciclesonide ⁴	5.5 mg/day x 5 days, then 4.1 mg/ day x 5 days via inhalation (Aservo Equihaler).	48 hours (6)	
Cimetidine	20 mg/kg orally twice daily for a total of 7 doses	RAT: 24 hours (9)	400 ng/mL in serum or plasma
Dantrolene	500 mg orally once daily for 3 days	48 hours (12)	3 ng/mL of 5-hydroxydantrolene in unhydrolyzed urine or 0.1 ng/mL in serum or plasma as 3-hydroxydan- trolene
Detomidine	0.02 mg/kg single IV dose	48 hours (10)	2 ng/mL 3-carboxydetomidine in urine or 0.02 ng/mL in serum or plasma
Dexamethasone ⁴	Single 20 mg IV, IM, or oral dose	72 hours (20)	0.2 ng/mL in urine
Dexamethasone Sodium phosphate ⁴	0.06 mg/kg single IV dose	72 hours (6)	
Diclofenac ²			50 ng/mL in urine
Dipyrrone ²	30 mg/kg single IV dose	72 hours (10)	1,000 ng/mL of 4-methylaminoanti- pyrine in urine
Firocoxib ²	100 mcg/kg orally once daily for total of 7 doses	360 hours (20)	2 ng/mL in serum or plasma
Flunixin ^{2,3}	1. 1.1 mg/kg single IV dose 2. 500 mg single IV dose	1. 48 hours (16) 1. 48 hours (12)	4 ng/mL in serum or plasma
Furosemide		RAT: 48 hours (6)	50 ng/mL in urine or 0.1 ng/mL in serum or plasma
Furosemide (where permitted by exemption)	1 mg/kg single IV dose	RAT: 4 hours	100 ng/mL in serum or plasma AND urine; specific gravity < 1.010

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Substance	Dosage	Detection Time <small>Unless Specified as Restricted Administration Time (RAT)(#Horses*)</small>	Screening Limit
Glycopyrrolate	1 mg single dose IV	48 hours (20)	0.003 ng/mL in serum or plasma
Guaifenesin (glycerol guaiacolate)	2 grams total body dose, orally twice daily for 5 doses	48 hours (9)	1 ng/mL in serum or plasma
Hydroxyzine	190 mg twice daily for a total of 9 doses	96 hours (2)	
Ipratropium	5.5 mcg/kg once daily via nebuliza- tion for 3 total doses	120 hours (6)	0.25 ng/mL in urine
Isoflupredone ⁴		Serum concentrations associated with an experimental dose of 8 mg IA single joint (6 horses) were all below Limit of Detection by 14 days	
Ketoprofen ^{2,3}	2.2 mg/kg single IV dose	48 hours (24)	2 ng/mL in serum or plasma
Lidocaine	200 mg of lidocaine, as lidocaine hydrochloride, administered subcutaneously	48 hours (6)	10 ng/mL as 3-hydroxylidocaine in urine or 0.02 ng/mL as 3-hydroxyli- docaine in serum or plasma
Medetomidine			5 ng/mL as 3-hydroxymedeto- midine in urine or 0.02 ng/mL as 3-hydroxymedetomidine in serum or plasma
Mepivacaine	40 mg (2 mL) single dose SQ distal limb	72 hours (6)	10 ng/mL as 3-hydroxymepivacaine in urine or 0.05 ng/mL in serum or plasma
Methocarbamol	15 mg/kg single IV dose	48 hours (20)	1 ng/mL in serum or plasma
Misoprostol	5 mcg/kg orally twice daily for 14 days		
N-Butylscopolammonium	0.3 mg/kg single IV dose	48 hours (6)	25 ng/mL in urine or 0.05 ng/mL in serum or plasma
Omeprazole	2.2 g orally once daily for 4 doses	RAT: 24 hours (9)	10 ng/mL in serum or plasma as omeprazole sulfide
Phenylbutazone ^{2,3}	4.4 mg/kg single IV dose	48 hours (17)	0.2 mcg/mL in serum or plasma
Procaine	17 mg (~17,000 IU) per kg IM	48 hours	25 ng/mL in serum or plasma
Ranitidine	8 mg/kg orally twice daily for 7 doses	RAT: 24 hours (9)	40 ng/mL in serum or plasma
Romifidine	80 mcg/kg single IV dose	60 hours (6)	1 ng/mL in urine
Triamcinolone ⁴			0.5 ng/mL in urine
Xylazine	200 mg single IV dose	72 hours (6)	10 ng/mL in urine (as 4-hydroxyla- zine) or 0.05 ng/mL in serum or plasma

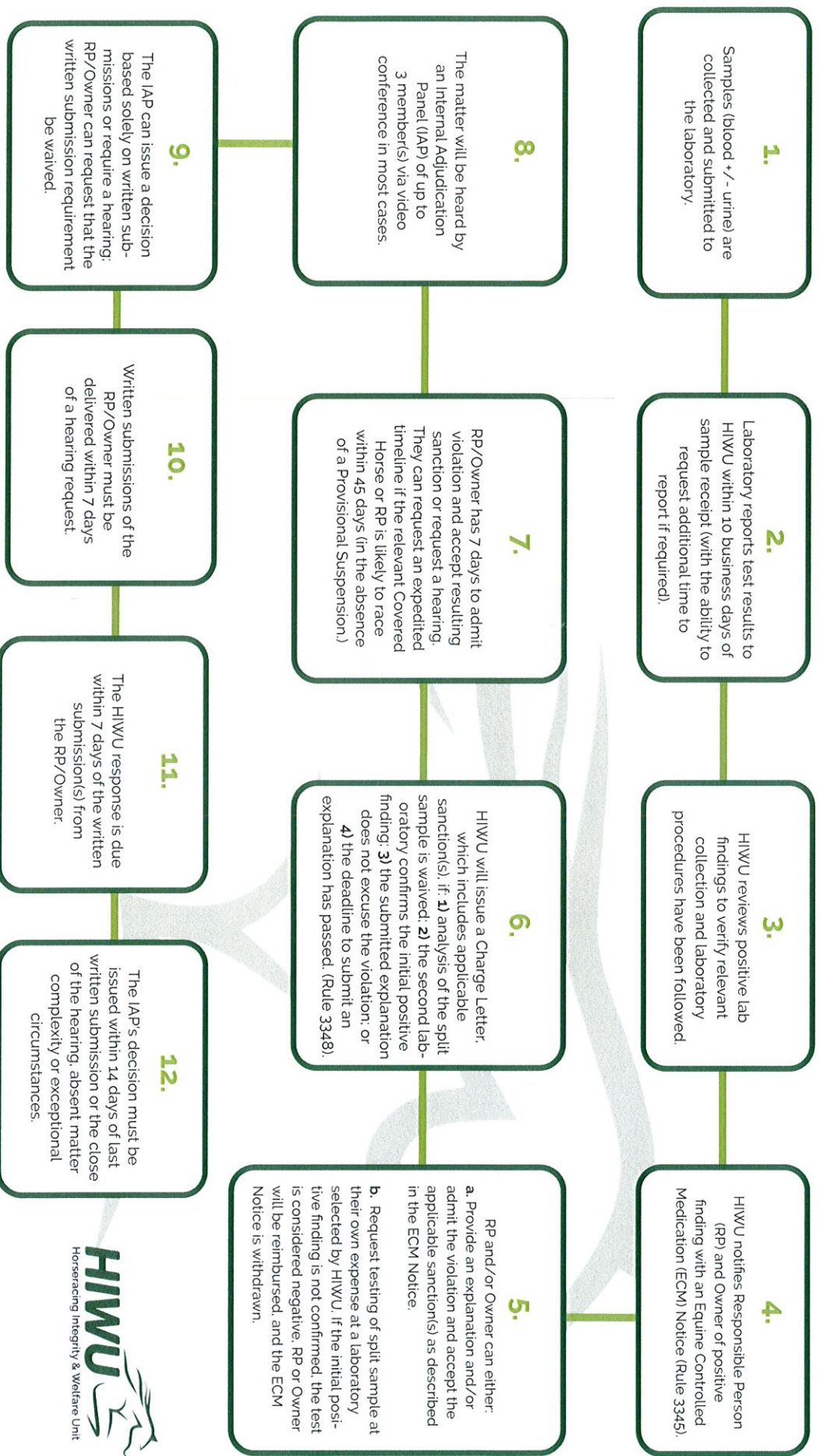
Results Management:

Controlled Medication Rule Violations

A **Controlled Medication Rule Violation** can include the presence of any Controlled Medication Substance in a Post-Race sample and the presence of specified Controlled Medication Substances in a Post-Work sample, as per the Prohibited List. Other violations include, but are not limited to:

- Using a Controlled Medication Substance/Method in a manner contrary to horse welfare.
- Administering or attempting to administer a Controlled Medication Substance/Method in relation to the Race Period.
- Conspiring to commit a Controlled Medication Rule Violation.

This fact sheet refers to processes for **preference or use violations** associated with Controlled Medication Rule Violations. The results management processes for other Controlled Medication Rule Violations are substantially similar.



Results Management:

Controlled Medication Rules Violations

Appeal

Decisions can be reviewed de novo (without deference to the previous IAP decision) by an administrative law judge if either party files an appeal within 30 days of the IAP decision. An additional de novo review of the administrative law judge's decision may be conducted by the Federal Trade Commission (FTC) at its sole discretion.

Public Disclosure

HIWU will publicly disclose the resolution of a violation within 20 calendar days of a final decision, a resolution between HIWU and the RP/Owner, or the withdrawal of a charge.

RP/Owner is entitled to legal counsel and can agree to a settlement with HIWU at any time up to point of final decision.

The adjudication process for Controlled Medication Rule Violations is intended to be accelerated compared to Anti-Doping Rule Violations.

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The information enclosed herein is not exhaustive. For more information, please consult the ADMC Program regulations submitted by the Horseracing Integrity and Safety Authority to the Federal Trade Commission.

Terms To Know

Controlled Medication Substances/Methods: permitted for use or administration in a Covered Horse except in close proximity to a race or Vets' List workout; as specified in the Prohibited List, certain Controlled Medication Substances/Methods are also prohibited from being used/administered in close proximity to routine official timed workouts.

Internal Adjudication Panel: impartial members, e.g., stewards and/or lawyers, appointed by mutual agreement of HISA and HIWU to hear Controlled Medication Violations; accredited stewards are eligible to be part of the IAP but cannot hear cases originating in their own states.

Race Period: the period commencing 48 hours prior to a race or Vets' List workout and ending one hour after such event or at the end of any sample collection process following those events (whichever is later). The Prohibited List may specify a Race Period that is shorter or longer than the aforementioned period for certain Controlled Medication Substances/Methods.



Understanding the Prohibited List



As per HISA's ADMC Program, the Prohibited List categorizes substances into two groups:

Banned Substances and Banned Methods

Banned Substances and Banned Methods are prohibited at all times.

They have been placed in this category due to their actual or potential:

- Ability to enhance the performance of covered horses
- Detrimental impact on horse welfare
- Masking properties

Substances that have no current approval by any government regulatory authority for veterinary or human use and/or are not universally recognized by veterinary authorities for valid veterinary use are also considered banned substances.

Examples of banned substances and banned methods include:

- Anabolic steroids
- Growth hormones
- Gene doping
- Erythropoietins (EPO)
- Blood doping

Controlled Medication Substances and Controlled Medication Methods

Controlled Medication Substances and Controlled Medication Methods are permitted for use or administration in a covered horse except in close proximity to a race or vets' list workout. They are prohibited from being present in samples collected following those events. As specified in the Prohibited List, certain controlled medication substances are also prohibited from being present in samples collected following routine official timed workouts.

Examples of controlled medication methods include:

- Intra-articular injections (prohibited within 14 days of a race and within 7 days of a timed and reported workout)
- Use of a nasogastric tube (prohibited within 24 hours of a race)
- Intra-articular injections of polyacrylamide hydrogels (prohibited within 180 days of a race)

The following controlled medication substances are prohibited from being in a sample collected following a race or any kind of official timed workout:

- Analgesics
- Nonsteroidal anti-inflammatory drugs (NSAIDs)
- Local anesthetics
- Corticosteroids

Examples of controlled medication substances that may be present in samples collected following routine official timed workouts only include:

- Dantrolene
- Methocarbamol
- Glycopyrrolate
- Furosemide

Violations associated with banned substances/methods (Anti-Doping Violations) are generally subject to more significant sanctions than violations associated with controlled medication substances/methods (Controlled Medication Rule Violations).

Laboratories will not report positive results for the presence of controlled medication substances in out-of-competition test samples.

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*Please be advised that the information enclosed herein is not exhaustive. For more information about the Prohibited List, including the full list of Prohibited Substances, please consult Rule Series 4000 (Prohibited List) and the Technical Document of the Anti-Doping and Medication Control Program regulations submitted by the Horseracing Integrity and Safety Authority to the Federal Trade Commission (FTC), which were published by the FTC in the Federal Register on October 28, 2022.



