



Venue

From to

Discipline

Vet Name

1. FEI Veterinarians & Other Treating Professionals

1.1 Official Veterinarians at this Event

FEI ID	Complete Name	Assignment	Date Present

Were any FEI Official Vets not found in the list (no FEI ID or no Vet Card)?

YES/NO

1.2 Permitted Treating Veterinarians at this Event

FEI ID	Complete Name	Role
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Were any FEI Permitted Treating not found in the list (no FEI ID or no Vet Card)?

YES/NO

1.3 Other Treating Professionals

Were there any Other Treating Professionals at this show?

YES/NO

Name	Contact	Phone	Role
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Were there any problems arising regarding Other Treating professionals?

YES/NO

1.4 FEI Veterinarian ID Card

Were there any issues regarding procedure and requirements of the FEI Vet ID Card? **YES/NO**

Please provide details of any problems issues regarding procedure and requirements of the FEI Vet ID Card:

Were any FEI Official Vets or FEI Treating Vet not found in the tables above (no FEI ID Card or no Vet Card)? **YES/NO**

1.5 Organising Committee Arrangements

Did the Organising Committee make the necessary arrangements with the Veterinary delegate in sufficient time and in accordance with the FEI Veterinary Regulations (VRs) (article 1022)? **YES/NO**

Was remuneration agreed between the Veterinary Delegate and OC before the event? **YES/NO**

Has the OC agreed to pay all travel and accommodation costs? **YES/NO**

1.6 Meeting with Veterinarians

The Veterinary Delegate should arrange a meeting with all other veterinarians present before the start of competition (VRs article 1013.5). Did the meeting with the veterinarians occur? **YES/NO**

Please provide details of any comments or matters arising:

2. Stables

2.1 Stable and Stable Area Requirements

Were the Stable and Stable Area Requirements provided in a suitable way and in accordance with the VRs (article 1023)? YES/NO

2.2 Stable Size

Were the stables a minimum of 3m x 3m? YES/NO

Were at least 20px of the stables 4m x 3m? YES/NO

2.3 Stable Biosecurity (required for all Events, VRs article 1023, IV)

Were groups of Horses separated within the Stable Area into groups of visiting/local Horses, and were appropriate with Horses from the same country/region and with Horses of the same vaccination status (VR 1023.10)? YES/NO

2.4 Minimum Stable Security (required for all Events, VRs article 1023, IV)

Was there an effective security system to prevent unauthorised persons from entering the Designated Stable Area? YES/NO

Was security at night sufficient? YES/NO

2.5 Other Stable Requirements

Description	Testing boxes	Treatment boxes	Isolation stables and facilities
How many?			
Was this a sufficient number?			
Were they suitable?			

3. Veterinary Services & Arrangements

3.1 Veterinary Services

If the provision of veterinary services was insufficient or if you have suggestions for the future, please provide your opinion here:

4. Biosecurity & Examination on Arrival

4.1 General Provisions

Were all provisions and requirements for Biosecurity provided by the Organising Committee (VRs article 1026)? **YES/NO**

4.2 Examination on Arrival

Was an examination on arrival organised? **YES/NO**

Name of Veterinarian(s) completing the Examination on Arrival (ensure FEI ID and other information is entered above in section 1.1):

FEI ID	Complete Name	Assignment	Dates Present
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Total number of horses arriving at the venue	Total number of horses NOT admitted to the venue	Total number of horses arriving with injuries	Number of horses sent to isolation facility	Number of horses arriving not entered for competition
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4.3 Comments on non-competing horses

Please provide comments regarding those horses entering the venue that are not competing (for example, display sports, other sports):

5. International Movement of Horses

5.1 Shipping Company

Was there an Official Shipping Company for the Show? YES/NO

Who was the Official Shipping Company for the Event? :

5.2 Transport

Were all provisions and requirements for Biosecurity provided by the Organising Committee (VRs article 1026)? YES/NO

5.3 Arrangements with Government Authorities

Were all provisions and requirements for Biosecurity provided by the Organising Committee (VRs article 1026)? YES/NO

6. Passport Control

6.1 Passports

Total number of passports presented:

Total number of passports with Irregularities (VRs 1030):

6.2 Passport Irregularities

Horse Passport # or FEI ID	Horse Name	PR FEI ID	Person Responsible (PR) / Athlete Name	NF	Violation	Sanction Penalty (CHF)	PR signature obtained in Passport
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7. Horse Inspection(s)

7.1 Horse Inspection Conditions

Were the conditions for the Horse Inspection in accordance with the VRs article 1024 & 1033? YES/NO

Surface type:

7.2 Horse Inspection for Competition / Class

Select discipline to display information about the show's competitions:

Inspection Panel Participants:

FEI ID	Complete Name	Assignment

First Horse Inspection:

Event Code	Number of Horses Presented	Number of Horses sent to Holding Box	Number of Horses Not Accepted	Number of Horses Withdrawn	Number of Horses Accepted AFTER Holding Box

Second Horse Inspection (if applicable)

Event Code	Number of Horses Presented	Number of Horses sent to Holding Box	Number of Horses Not Accepted	Number of Horses Withdrawn	Number of Horses Accepted AFTER Holding Box

Vet Gates and Final Inspection:

Event Code :	Total Number of Horses Presenting at Vet Gate	Total Number of Horses Eliminated at Vet Gate	Number of Horses Eliminated for Metabolic	Number of Horses Eliminated for Irregularity of Gait Lameness	Number of Horses Accepted AFTER Holding Box
CH-M-E					

Details for Horses Not Accepted, Withdrawn or Eliminated:

Event Code :	Horse Passport # or FEI ID	Horse Name	Holding Box	Withdrawn, Not Accepted OR Eliminated	Phase
CH-M-E					

8. Horse Fatalities

Please provide information regarding any horse fatalities occurring and ensure this information is reported to the FEI Veterinary Department within 12 hours of the incident :

Horse Passport Number / FEI ID	Horse Name	Date & Time of death

9. Horse Injuries And Illnesses

9.1 Details of Referral Clinic for the Event

Name of Referral Clinic:

Contact Person:

Telephone Number:

Address:

9.2 Horse Injuries & Illnesses

Horse Passport Number / FEI ID	Horse Name	Outcome

10. Veterinary Forms

Total Number Received:	Passport Number / FEI ID	Horse Name
Veterinary Form A		

Passport Number / FEI ID

Horse Name

Veterinary Form B

11. Appointed FEI Approved Laboratory

Central Laboratory:

12. Equine Anti-Doping & Controlled Medication Program

12.1 Testing Veterinarians

Was a Testing Veterinarian present? *If no Testing Veterinarian is present, the Veterinary Delegate should obtain the samples*

YES/NO

12.2 Number of Horses Tested

How many horses have been tested?

12.3 Facilities and Testing

Please provide any comments about the facilities or other aspects of testing, if applicable:

12.4 Veterinary Forms

To your knowledge, have any of the Horses presented for Testing received medication, i.e. have any Veterinary Forms been received (General Regulations Article 146)?

YES/NO

Please provide details in the table below of Veterinary Forms received for Horses presented for Testing.

Horse Passport Number / FEI ID	Horse Name	Veterinary Form Attached to this Report

13. Comments, follow-up and Improvements

Please give a short comment on your general impression of the event:

Does further follow-up action need to be taken with the Event Organiser? YES/NO

Do you have any additional recommendations for future improvements to the event? YES/NO

Please give a short description of areas for improvements and how they could be achieved:

SIGNATURE: _____ **DATE:** _____

Return to

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