

THE KNOR GREEK MANHATTAN (G-F)

NYS Gaming Commission

Veterinary Record Form VR1a

Use is recommended to assure compliance with Section 4012.4 and 4120.9 of NYCRR 9E

NET: Dr. D. Brien

Trainer/Client: Tom Shireffs

Horse: Buckie Sensation



One Broadway Center, P.O. Box 7500
 Schenectady, NY 12301 7500
 (518) 388-3400 (Phone) (518) 388-3403 (Fax)
 www.gaming.ny.gov

Date:	Time:	Diagnosis:	Treatment: Drug Administered, Dose, & Route of Administration
9/6/14	9:40am	mild inflammation	500mg banamine IV TID
9/6/14	3:45pm	platelet vitamin	Calcium, vitamin B, IV TID
		epinephrine + bronid	
		dehydration	

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VET:

Haeser

Trainer/Client:

J. Nosedo

Horse:

Grandeur



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Date:

6/6/14

Time:

4:02

Diagnosis:

*FLUID REPLACEMENT - ELECTROLYTE
REPLACEMENT - VITAMIN SUPPLEMENT*

Treatment: Drug Administered, Dose, & Route of Administration

LIFE GUARD - URINARY ANTISEPTIC 700mg 1000 LITERS BLENDED VIT B12 - 11

[Signature]

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ET: Nordberg
 rainer/client: hypox
 orse: Five Iron

Date:	Time:	Diagnosis:	Treatment: Drug Administered, Dose, & Route of Administration
6/19	3pm	mild dehydration	life guard electrolytes NRSR 5ml subcut (oral)
6/14	3pm	muscle pain	prohios paste

(Handwritten signature)

