The Veterinary Protocol for the Examination of Racehorses for Importation into Hong Kong

1 The Objectives of the Veterinary Examination

The Hong Kong Jockey Club requires that all racehorses to be imported into Hong Kong must undergo a comprehensive veterinary examination for suitability for use as a racehorse in Hong Kong prior to obtaining approval to be imported.

The objectives of the Club veterinary examination are:

(i) To protect the interests of Club members by assuring, as far is possible, that horses that either – may prematurely become unsound, or may be potentially unsafe, or that may have little realistic chance of racing successfully under Hong Kong conditions because of pre-existing veterinary problems, are not imported.

(ii) To ensure that the veterinary condition of the horse is fully disclosed to the prospective owner so that he or she is aware of any pre-existing veterinary problems that may affect the future racing suitability of a horse prior to importation and can thereby make an informed decision on whether or not to proceed with the importation of the horse.

(iii) To ensure that the Club’s limited stabling and training facilities are efficiently utilized by ensuring, as far as possible, that horses that either require a prolonged period of rest and rehabilitation or which, because of pre-existing veterinary conditions, have no realistic chance of being safe, economically viable racehorses are not imported into Hong Kong.

2 The Process of Veterinary Examination for Import Suitability

The process of examining and certifying horses as suitable for importation into Hong Kong for use as a racehorse is multi-layered and consists of three stages:

2.1 An initial pre-purchase examination by a veterinary surgeon appointed by the prospective owner or his / her agent according to the protocols of the Club.

2.2 A review of the examination certification and of diagnostic images obtained during the examination by an expert veterinary surgeon nominated by the Club to maintain a consistent standard of assessment of horses and to act as a quality control service.

2.3 A final review and assessment of the Club nominated veterinary surgeon’s report by a Club veterinarian to who will:

(i) Confirm or revise the assessment of the suitability of the horse for importation.
(ii) In the event of a horse having a condition of potential significance for racing in Hong Kong, advise the prospective owner of the veterinary classification of the horse via the Club’s Racing Registry Department.

3  **Stage One: The Initial Veterinary Examination**

3.1 The actual veterinary examination for suitability for use as a racehorse may be performed by any reputable veterinary surgeon. The initial examining veterinary surgeon may be recommended and engaged by the Shipping Agent or by the Bloodstock Agent negotiating the sale of the horse, or may be engaged directly by the prospective buyer of the horse.

3.2 The initial examining veterinary surgeon has no relationship with the Club and his / her duty of care is to the prospective owner of the horse.

3.3 Prospective owners are encouraged to research the credentials and reputation of veterinary surgeons recommended by agents and where possible, to use the services of a veterinary surgeon known to them.

3.4 It is recommended that the examining veterinary surgeon should not be the usual veterinary service provider for the seller and / or trainer of the horse. Use of the seller’s veterinary surgeon to perform a pre-purchase examination is a potential conflict of interest and should be avoided whenever reasonably possible. If the examining veterinary surgeon is the usual veterinary service provider for the owner and / or trainer of the horse being examining, he / she must declare this fact in the certification.

3.5 Where veterinary resources are limited or, in regions from which very few horses are exported to Hong Kong, the Club's nominated veterinary surgeon may, with the permission of the Club and the agreement of the prospective owner of the horse, perform both the initial examination and review procedures for the suitability for importation process.

3.6 In regions in which infectious disease that may disqualify an infected horse from being permanently imported into Hong Kong (for example Equine Piroplasmosis) is present, or if a horse has recently been imported to the place of examination from such a region, the initial examining veterinary surgeon should be prepared to arrange collection of samples for testing for the disease(s) at the time of the initial examination if requested by the prospective owner or his / her agent.

3.7 The examination must be performed according to the protocol described below and must be documented in format of the model certificate “HKJC Veterinary Certificate and Guidelines for the Examination of Racehorses for Importation into Hong Kong” at Annex A. Veterinary surgeons may make minor modifications to the format to include additional information or to meet individual needs, however the general format must be maintained.

3.8 It is not acceptable to provide certification that states that ‘a horse was examined according to the protocol of the Hong Kong Jockey Club and found to suitable for importation’ without providing a comprehensive report of the examination documented in the required format.
3.9 Diagnostic images obtained during the examination must be completely and accurately labeled and be of high diagnostic quality. Copies of the digital images (in DICOM format) must be forwarded to a Club nominated veterinary surgeon for review and may be rejected if improperly labeled or of poor quality.

3.10 The Club reserves the right to refuse to accept certification from an individual veterinary surgeon or their nominated veterinary surgeon if, in the opinion of the Club, the standard of service provided by the veterinary surgeon has been demonstrated to not meet the required standards of the Club.

4 The Hong Kong Jockey Veterinary Examination Protocol for Assessing Suitability for Importation into Hong Kong

The initial examining veterinary surgeon must perform the following examinations, provide a detailed description of any abnormalities detected in the required format and provide an opinion on the potential significance of these findings for suitability for racing:

4.1 Obtain Details of any Relevant History

The initial examining veterinary surgeon must obtain clinical history of the horses from an appropriate representative of the vendor and identify that person on the certificate. Relevant clinical history includes, but is not limited to:

- Previous surgery.
- Recent significant injury.
- Recent illness and medical treatments, including recent intra articular joint medication.
- Incidents of epistaxis.
- Incidents of irregular heart rhythm or other cardiac abnormalities.
- Known vices.
- Others.

The horse’s recent race, trial and training history should also be obtained if possible.

4.2 Perform a Standard Five-Stage Veterinary Examination for Suitability for Racing

- A preliminary physical examination at rest
- A Trot-up (in-hand) with observation for lameness / performance of flexion tests.
- Strenuous exercise (ridden) at half pace or faster listening for "wind" problems and post-exercise auscultation of the heart and lungs.
- A rest period of 10-20 minutes after exercise followed by a physical examination and repeat trot-up.

4.3 Perform an Endoscopic Examination of the Upper Respiratory Tract

The endoscopic examination must be performed after the exercise component of the five-stage vetting or on a treadmill. The examination should include observation of at least 3 swallows, nasal occlusion and examination to the level of the bifurcation of the trachea. The endoscope must be passed up both nostrils to assess the condition of the nasal passages. If sedation is used, that fact should be noted.
Laryngeal function must be described using one of the grading systems listed below according to the examiner's preference and experience. The grading system used must be specified in the report.

(i) The "Havemeyer" System

**Grade I** - All arytenoid cartilage movements are synchronous and symmetrical and full arytenoid cartilage abduction can be achieved and maintained.

**Grade II** - Arytenoid cartilage movements are asynchronous and/or asymmetric at times but full arytenoid cartilage abduction can be achieved and maintained.

- Sub-Grade 1: Transient asynchrony, flutter or delayed movements are seen.
- Sub-Grade 2: There is asymmetry of the rima glottides much of the time due to reduced mobility of the affected arytenoid and vocal fold but there are occasions, typically after swallowing or nasal occlusion when full symmetrical abduction is achieved and maintained.

**Grade III** - Arytenoid cartilage movements are asynchronous and / or asymmetric. Full arytenoid cartilage abduction cannot be achieved and maintained.

- Sub-Grade 1: There is asymmetry of the rima glottides much of the time due to reduced mobility of the arytenoid and vocal fold but there are occasions, typically after swallowing or nasal occlusion when full symmetrical abduction is achieved but not maintained.
- Sub-Grade 2: Obvious arytenoid abductor deficit and arytenoid asymmetry. Full abduction is never achieved.
- Sub-Grade 3: Marked but not total arytenoid abductor deficit and asymmetry with little arytenoid movement. Full abduction is never achieved.

**Grade IV** - Completed immobility of the arytenoid cartilage and vocal fold.

(ii) The Lane System

**Grade 1** - All movements, both adductory and abductory, are synchronised and symmetrical regardless of whether sedated or examined before or after exercise.

**Grade 2** - All major movements are symmetrical and a full range is achieved. Transient asynchrony, flutter or delayed opening.
Grade 3  - Asymmetry of the rima glottides at rest due to reduced motility by the left arytenoid cartilage and vocal fold. On occasions, typically after swallowing or during the nostril closure maneuver, full symmetrical abduction is achieved.

Grade 4  - There is consistent asymmetry of the rima glottides but with some residual active motility by the left arytenoid cartilage and vocal fold. Full abduction is not achieved at any stage.

Grade 5  - True hemiplegia. There is obvious and consistent asymmetry of the rima glottides with no residual active motility by the left arytenoid cartilage and vocal fold. No responses to the 'slap' test are provoked.

(iii) Exercise Induced Pulmonary Haemorrhage Syndrome (EIPHS)

The presence of blood in the upper airway after the exercise component of the examination must be reported.

It is recommended that the following EIPHS grading system be used:

- **Grade 0** - No blood detected in the pharynx, larynx, trachea or main stem bronchi.
- **Grade 1** - Presence of one or more flecks, or two or less short (less than 1/4 length of the trachea), narrow (less than 10% of the tracheal) streams of blood in the trachea or main stem bronchi.
- **Grade 2** - One long stream of blood (greater than 1/2 length of trachea) or greater than 2 short streams occupying less than 1/3 of the tracheal circumference.
- **Grade 3** - Multiple, distinct streams of blood covering more than 1/3 of the tracheal circumference. No blood pooling at the thoracic inlet.
- **Grade 4** - Multiple, coalescing streams of blood covering greater than 90% of the tracheal surface. Blood pooling at the thoracic inlet.

The detection of Grade 3 or Grade 4 EIPHS or epistaxis after the exercise component of the five-stage vetting is an unacceptable condition.

4.4 Perform a Radiographic Examination according to the following Protocol

Radiographs should (ideally) be obtained on the day of the veterinary examination. If the radiographs are obtained prior to this examination, please document both the acquisition date/s, as well as the level of activity / work completed by the horse during the interim period.
Properly labeled radiographs of diagnostic quality of the following joints must be obtained. The minimum number of views required is forty six (46):

- **Carpus**: 5 views: \( \text{DP}_a / \text{D55}^\circ \text{L-PrMO} / \text{D75}^\circ \text{M- PrLO} / \text{Flexed LM} / \text{Flexed D60}^\circ \text{Pr-DD} \text{Distal Oblique view of Distal Carpal Bones.} \)

- **Fetlocks**: Please ensure sufficient collimation to include the pastern joint(s).
  6 views: Front - \( \text{DP}_a / \text{D45}^\circ \text{L-PrMO} / \text{D45}^\circ \text{M-PrLO} / \text{Flexed LM} / \text{Flexed D125}^\circ \text{ Distal-PaPr Oblique} / \text{LM.} \)

- **Hind**: 4 views: \( \text{DP}_l / \text{D45}^\circ \text{L-PrMO} / \text{D45}^\circ \text{M- PrLO} / \text{LM.} \)

- **Stifle**: 2 views: \( \text{LM} / \text{Cd-Cr.} \)

- **Foot**: 2 or 3 views: Front only – \( \text{LM} \) and \( \text{D60}^\circ \text{Pr-DiO} \) views of P3 and separately, the navicular bone, of which the outline should be clearly discernable on the films.

- Other structures which, on clinical examination, show signs that warrant radiographic examination.

- Any additional views required to further evaluate lesion(s) detected.

4.5 **Perform an Ultrasonographic Examination of the structures of the palmar metacarpal region including the superficial flexor tendons and the suspensory ligaments including the origin and branches**

A recognized standard approach for the examination of the structures and for recording findings must be used including:

- **Clipping or shaving over the structure to be examined, unless** the examining veterinary surgeon is of the opinion that the horse’s hair coat is sufficiently fine so as to permit the adequate evaluation of the structures without this requirement.

- Performing sequential evaluation of flexor tendons, and suspensory ligament (origin, body and branches) using zone classification or measured intervals from the accessory carpal bone.

- Performing cross-sectional and longitudinal evaluations. Any variation in cross-sectional area between limbs should be documented with objective measurements.

- Describing any detected lesions in terms of cross-sectional area, fibre pattern, longitudinal distribution and percentage of the cross sectional area affected.

If any signs of thickening or other evidence of injury to the structures of the plantar metatarsal region are present, an ultrasound examination should be performed.
Collect a Blood Sample for testing for prohibited substances on the day of, and soon as possible, after completion of the five stage examination.

The sample should be properly labeled, stored and transported to an approved analytical laboratory as soon as possible.

5  The Timing of the Initial Examination

5.1 The initial veterinary examination must be performed within **thirty (30) days** prior to the horse entering pre-export quarantine for shipment to Hong Kong.

In the event that the thirty-day validity of the certification expires before the horse enters pre-export quarantine through no fault of the prospective owner, trainer or agent, an application for an exemption may be made to an officer of the Department of Veterinary Regulation and International Liaison.

5.2 An exemption may be granted under the following conditions:

(i) The period since the initial veterinary examination does not exceed sixty (60) days.

(ii) A clinical examination, lameness examination and endoscopy examination must be performed and the examining veterinary surgeon must certify that there is no evidence that the horse has suffered any injury or medical condition that would be likely to affect its suitability for importation since the initial examination.

(iii) A blood sample was collected for testing for NSAIDs on the day of, and soon as possible, after completion of the examination and subsequently shown to be negative.

(iv) The person(s) responsible for the care of the horse since the initial examination must provide a statement that no injury or medical condition has occurred since the initial examination that would be likely to affect its suitability for importation.

(v) The prospective owner and trainer of the horse must certify that they have no objection to the waiving of the full examination requirement.

6  A Guide to the Classification of the Suitability of Racehorses for Importation into Hong Kong

6.1 The Club does not require a rigid PASS or FAIL assessment of a horse, however all veterinarians involved in the process of examining a horse or reviewing the findings of an examination, must disclose the detection of any condition that may have potential significance for the future suitability of horse for racing in Hong Kong.

6.2 The Hong Kong Jockey Club examination for suitability for importation is, in effect, a pre-purchase examination and the examining veterinary surgeon should assess the horse on that basis.
6.3 If no significant abnormalities are detected, the initial examining veterinary surgeon should certify the horse as **Acceptable for Importation into Hong Kong for use as a racehorse** bearing in mind that the certification and diagnostic images obtained from the examination will be reviewed by the Club’s nominated veterinary surgeon in the country of origin and that all horses are subjected to thorough inspections on arrival in Hong Kong.

6.4 If abnormalities are detected during the examination, the initial examining veterinary surgeon must:

(i) Document the abnormality by providing a detailed description of the findings in the required certification format.

(ii) Provide a clinical assessment of the potential significance of the abnormality for future racing in the Hong Kong environment according to the following classifications.

(a) The detected abnormality is of low potential significance for the future suitability of the horse for racing and is noted for the sake of completeness.

   OR

(b) In my opinion, the detected abnormality is of moderate potential significance for the future suitability of the horse for racing in Hong Kong.

6.5 **Conditions of Potential Significance for Future Racing In Hong Kong**

If an initial examining veterinary surgeon is uncertain of the potential significance of a pre-existing condition for racing in Hong Kong, it is strongly recommended that he or she discuss the findings with a Club nominated veterinary surgeon, who may also wish to consult with a Hong Kong Jockey Club veterinary surgeon.

The assessment of the condition as being of low or moderate (or even high) potential significance for future racing must also be made on the bases of the clinical judgment and experience of the initial examining veterinary surgeon, although the assessment may be changed by the Club’s nominated veterinary surgeon or by a Club veterinary surgeon during the review processes.

As a guideline, the following conditions must be reported and their potential significance for suitability for racing be commented upon. However, the list is by no means complete and the initial examining veterinary surgeon is expected to apply his or her clinical judgment to the assessment of the overall suitability of an individual horse.

- Musculoskeletal abnormalities (for example small osteochondral chip fractures, OCD lesions, **identifiable disruption in the smooth contour of subchondral bone**, splint fractures or some bone cysts depending on location, severity and clinical implications) without evidence of significant degenerative changes, that are not causing lameness at the time of examination and with evidence that the horse has raced successfully with the pre-existing condition if applicable, and when the examining veterinarian is of the opinion that the condition is of only low to moderate potential significance for racing in Hong Kong.
- Evidence of mild osteoarthritis of high motion joints and evidence of moderate osteoarthritis of any other joint.

- Clinically detectable signs of inflammation of the superficial digital flexor tendons or any of the structures of the suspensory apparatus without evidence of significant lesions on ultrasonic examination.

- Sesamoiditis.

- Hoof abnormalities, including but not limited to, quarter cracks (active or healed), sheared heels, flat sole conformation, collapsed heels / bars, significant fever rings, seedy toe, club foot conformation, etc.

- Pelvic asymmetry or evidence of chronic back pain including evidence of poor muscle development and painful or restricted range of spinal and/or pelvic motion.

- Any previous surgical procedure.

- Heart abnormalities that are assessed to be of low potential clinical significance for racing performance.

- Easily induced, difficult to replace, intermittent dorsal displacement of the soft palate.

- Epiglottic entrapment.

- Laryngeal hemiplegia without an abnormal breathing noise during strenuous exercise and assessed to be Havemeyer II or III, or Lane 3 on endoscopic examination.

- Sub-epiglottic cysts.

- Mild stable vices, including but not limited to, crib biting, weaving, box walking, wind sucking, etc, that are assessed to have little potential significance for the horse's suitability for use as a racehorse.

- Cryptorchidism.

- Parrot mouth or any other mouth / teeth disorder with potential significance for suitability for racing or stable management.

- Jugular vein injury / scarring.

- Apparent immaturity, a height of less than 15 hands or any evidence of poor condition / musculoskeletal development.

- Eye abnormalities without significant impairment of vision.

- Any other condition(s) considered to be of significance by the examining veterinary surgeon.
6.6 Veterinary Conditions that render a Horse Unsuitable for Importation.

The following list of 'unacceptable' conditions is provided for the initial examining veterinary surgeons guidance. However it should be noted that the suitability for importation examination is a pre-purchase examination and the examining veterinary surgeon should apply his or her clinical judgment in assessing the significance of any abnormalities detected for the horse's future suitability for racing.

Pre-existing conditions that render a horse unacceptable for importation into Hong Kong because of high potential significance to affect a horse's suitability for racing in Hong Kong include, but are not limited to, the following:

- The presence of lameness / gait abnormality at the time of examination, which in the opinion of the examining veterinary surgeon may have a significant impact on the health and suitability of the horse for racing.
- Fractures with a high potential significance to affect a horse's suitability for racing.
- Laminitis.
- Radiographic evidence of moderate to advanced osteoarthritis in high motion joints.
- Extensive disruption in the smooth contour of subchondral bone.
- Bone cysts depending on location, severity and clinical implications.
- Sesamoiditis depending on severity and clinical implications.
- The presence of ultrasonic evidence of significant injury to the superficial digital flexor tendons or to the suspensory apparatus including core lesions, disruption of fibre patterns, abnormal fibre patterns and significantly enlarged cross section area of the structures.
- Evidence or history of any neurectomy.
- Significant hoof capsule distortion / deformity with the potential to cause significant clinical consequences for a racehorse.
- Wobbler syndrome and other neurological disorders.
- A history of epistaxis attributable to exercise induced pulmonary haemorrhage (EIPHS).
- EIPHS – Grade 3 or 4 on scoping after exercise component of the examination.
- Laryngeal paralysis with the production of an abnormal breathing noise and endoscopic grading of the larynx as Havemeyer III or IV, or Lane 3, 4 or 5, Pharyngeal/laryngeal developmental anomalies (eg. rostral displacement palato-pharyngeal arch, severe hypoplastic epiglottis, etc.)
- Chondritis of larynx or epiglottis with significant clinical implications.
• Persistent displacement of the soft palate.
• Ethmoid haematoma.
• Marked narrowing of nasal passages for example choncal enlargement, septal deviation, etc. (It is important that both nasal passages are examined during the endoscopic component of the examination is performed.)
• A history of any clinically significant heart irregularity or myocardial damage with the potential to affect racing performance or racing safety, for example atrial fibrillation.
• Blindness in one or both eyes.
• Stable vices, which in the opinion of the examining veterinary surgeon may have a significant impact on the health and suitability of the horse for racing.
• Any other condition(s) considered to be of significance by the examining veterinary surgeon.

7 Making a Recommendation

The initial examining veterinary surgeon should, after consideration of the guidelines provided above and, after consultation with a Club nominated veterinary surgeon if necessary, and after exercising his or her own clinical judgment, report his/her recommendations in the following format.

Within the limits of the examination:

1. No abnormality that may significantly affect the horse's future suitability for racing has been detected and I believe this horse meets the requirements of the Hong Kong Jockey Club for suitability for importation into Hong Kong.

OR

2. I believe this horse clinically meets the requirements of the Hong Kong Jockey Club, but, in my opinion, a finding of *low / moderate* potential significance for future suitability to race has been noted. The prospective owner should be made aware of those findings, so that an informed decision as to whether to proceed with the importation may be made.

OR

3. I believe this horse does not meet the requirements of the HKJC for suitability for importation into Hong Kong.

8 Stage Two: The Nominated Veterinary Surgeon’s Review

8.1 To provide a quality control service the Club has nominated a number of experienced and highly reputable equine veterinarians in each major exporting region to review the certification and diagnostic images provided by the initial examining veterinary surgeon.
8.2 The purpose of the review is to:

(i) Provide a quality control procedure for the certification and diagnostic imaging provided by initial examining veterinary surgeons.

(ii) To assure, as far as possible, consistency in the assessment of the significance of conditions detected during the examination and therefore consistency of decision-making on the suitability of horses for importation.

8.3 The Club expects that the nominated veterinary surgeon will reject any certification that is not provided in the format required by the Club and / or when the diagnostic images provided are not of diagnostic quality.

8.4 The nominated veterinary surgeon may also request further examination of horses to clarify any queries that may arise regarding the suitability of a horse and may overrule the opinion of the initial examining veterinary surgeon.

8.5 The nominated veterinary surgeon is also expected to play a role in the education of local practitioners in the requirements of the Club and to provide liaison services between practitioners, agents and the Club.

8.6 The nominated veterinary surgeon does not physically examine the horse and does not obtain the diagnostic images. Therefore, the nominated veterinary surgeon can only comment and advise on the information and images provided to him or her by the initial examining veterinary surgeon.

8.7 The nominated veterinary surgeon’s recommendation must be provided in the same format as the initial examining veterinary surgeon’s recommendation as provided on Section 7. The nominated veterinary surgeon may change the recommendation classification of the horse if, in his opinion, the classification made by the initial examining veterinary surgeon is inappropriate.

8.8 The nominated veterinary surgeon is not an employee of the Club but rather a private contractor that provides a service for owners and shipping agents to maintain quality standards and facilitate the approval of suitable horses for importation into Hong Kong.

9 Stage Three: Approval of the Importation of a Horse by the Club.

9.1 Once the certification and diagnostic images provided by the initial examining veterinary surgeon have been reviewed by the Club nominated veterinary surgeon and an assessment of the suitability of the horse for importation into Hong Kong, the nominated veterinary surgeon must then forward a report in the format specified by the Club to the Hong Kong Jockey Club for a final review and approval.

9.2 When the examination has been completed by the initial examining veterinary surgeon, and the certification and diagnostic images have been forwarded to the Club nominated veterinary surgeon, reviewed and commented upon, the nominated veterinary surgeon must then forward a report in the model certificate format specified by the Club (Nominated Veterinarian’s Report on a Racehorse to be Exported to Hong Kong) and provided at Annex B to the Hong Kong Jockey Club for a final review and approval for importation.
9.3 The Hong Kong Jockey Club reserves the right to refuse the importation of any horse deemed to be unsuitable and also to inform owners of any concerns about either the process of examination or of the veterinary condition of the horse that may arise from the review of the veterinary certification.

10 Notification of the Prospective Owner

10.1 When conditions of low or moderate potential significance for future racing in Hong Kong are detected and reported, the Club will notify the prospective owner(s) of the horse and advise them to seek expert opinion from their trainer and veterinary clinical advisor to assist them in deciding whether to proceed with importation of the horse. If an owner decides to proceed with the importation of a horse with a pre-existing condition of some potential significance for racing in Hong Kong, the Club requires that the prospective owner acknowledges receipt of that advice and of the potential risks associated with importing the horse.

10.2 The objective of the veterinary examination is not to block the importation of horses with minor pre-existing veterinary problems, but to ensure, as far as possible, that these problems are disclosed and that prospective owners are provided with the opportunity to make an informed decision on whether or not to proceed with the importation of a horse.

11 Retention of Veterinary Records and Diagnostic Images

11.1 All relevant documentation and diagnostic images obtained during the examination and certification of horses for importation into Hong Kong must be retained for at least two years and must be made available to the Club on request.

11.2 All imported horses are examined by Club veterinarians and trainers on arrival in Hong Kong and any non-disclosed, pre-existing conditions detected during that examination will be thoroughly investigated. Any evidence of improper certification or negligence will be followed up and may be reported to the relevant Veterinary Board.

12 Model Certificates

The model certificates (HKJC Veterinary Certificate and Guidelines for the Examination of Racehorses for Importation into Hong Kong and Nominated Veterinarian’s Report on a Racehorse to be Exported to Hong Kong) may be obtained from shipping agents, nominated veterinary surgeons or from the Department of Veterinary Regulation and International Liaison of the Hong Kong Jockey Club.