

DBPR PMW-3300 – Bleeder’s Certificate



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
DIVISION OF PARI-MUTUEL WAGERING
1940 North Monroe Street
Tallahassee, Florida 32399-1038
www.MyFlorida.com/dbpr**

If you have any questions or need assistance in completing this form, please contact the Department of Business and Professional Regulation, Customer Contact Center, at 850.487.1395.

Bleeder’s Certificate

This is to certify that the horse _____
Name Tattoo
exhibited EIPH (Exercise Induced Pulmonary Hemorrhage) at _____
Track or Farm
on _____ and it is requested that the horse be placed on the Florida official
Date

Furosemide List.

The above named horse was seen bleeding from the nostril(s):

_____ after a race.

_____ after a workout.

_____ An endoscopic examination was not necessary to diagnose EIPH.

_____ An endoscopic examination was performed by Dr. _____

to confirm a diagnosis of EIPH.

Witnessing Veterinarian Date Witnessing Veterinarian Date

State Veterinarian Date