



Gaming Commission

Veterinary Treatment Record Form VR1A

Use of this Form is recommended to assure compliance with Commission Rules 4012.4 and 4120.9

9

Veterinarian <i>Charles A. Moore DVM</i>		Return form to:		Telephone: 518-388-3400	
Trainer/Client <i>Mark Hinder</i>		N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305		Facsimile: 518-388-3403	
Horse <i>Southwind Petya</i>				Email: info@gaming.ny.gov	

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
<i>9-8-21</i>	<i>8:00 AM</i>	<i>Ulcers</i>	<i>Gastrogard - 1 tube by mouth</i>
<i>9-9-21</i>		<i>nothing</i>	



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Veterinarian <i>Steve Day</i>		Return form to: N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305		Telephone: 518-388-3400
Trainer/Client <i>Chris Ryder</i>		N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305		Facsimile: 518-388-3403
Horse <i>III DRINK TO TEST</i>		Email: info@gaming.ny.gov		

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
<i>8/6</i>	<i>8:00 AM</i>	<i>Ulcer Therapy</i>	<i>Backguard P.O.</i>
<i>8/8</i>	<i> </i>	<i> </i>	<i> </i>
<i>8/9</i>	<i> </i>	<i> </i>	<i> </i>



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Veterinarian	Janet A. Durso DVM		
Trainer/Client	Ray Schmitter		
Horse	Stop Staring		
Return form to:	N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305		
Telephone:	518-388-3400		
Facsimile:	518-388-3403		
Email:	info@gaming.ny.gov		

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
		no treatments	
		Janet A. Durso	

All entries must be complete and legible. Incomplete or illegible records will not be accepted. V1 09/01/20

Jason Simon 4/2011 - 2015 - 4/2018



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Veterinarian <i>Cottis Neek Equine</i> <i>Sean Ginn</i>		Return form to: N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	
Trainer/Client JENNIFER BOBGIORNO		Telephone: 518-388-3400	
Horse TOWN GOSSIP		Facsimile: 518-388-3403	
		Email: info@gaming.ny.gov	

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
9/8/21	10AM	Gastric ulcers	gastroguard - full tube ; orally
9/9/21	10AM	Gastric ulcers	gastroguard - full tube ; orally



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Veterinarian <i>Charles A. Wenz Jr DVM</i>		Return form to: N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	Telephone: 518-388-3400
Trainer/Client <i>Mark Harder</i>			Facsimile: 518-388-3403
Horse <i>King James Express</i>			Email: info@gaming.ny.gov

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
9-8-21	8:00 AM	Ulcers	Carthagand-1 tube by mouth
9-9-21		nothing	



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Veterinarian	P.G. Mallon		Return form to:	Telephone:	518-388-3400
Trainer/Client	Jessica Brusko		N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	Facsimile:	518-388-3403
Horse	Natamoni			Email:	info@gaming.ny.gov

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
8/7	1300	myositis	DMSO 30ml / 1000ml LRS IV
8/8	1400	sore	Phenylbutazone 25mg IV
↓	↓	SW	hyaluronic acid (Legend) IV



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Veterinarian <i>Brian J. Lauzon DVM</i>	Return form to: N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	Telephone: 518-388-3400
Trainer/Client <i>Mark Ford</i>	Email: info@gaming.ny.gov	Facsimile: 518-388-3403
Horse <i>Mullinix</i>		

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
8/24/11	9:15 AM	Mullinix Hemorrhoids Mullinix	ASST BOUT MAINT CORR. Joints ASST BOUT MAINT CORR. Joints ASST BOUT MAINT CORR. Joints
9/7/11	11:15 AM	ASST EXAM Mullinix	ASST BOUT MAINT CORR. Joints ASST BOUT MAINT CORR. Joints ASST BOUT MAINT CORR. Joints
9/24/11	9:15 AM	ASST EXAM Mullinix	ASST BOUT MAINT CORR. Joints ASST BOUT MAINT CORR. Joints ASST BOUT MAINT CORR. Joints
9/27/11	11:15 AM	ASST EXAM Mullinix	ASST BOUT MAINT CORR. Joints ASST BOUT MAINT CORR. Joints ASST BOUT MAINT CORR. Joints

BRIAN J LAUZON DVM
EQUINE VET SVC PC
PO BOX 478
FACTORVILLE PA 18419
BJLAUZONDVM@YAHOO.COM
570-335-0758 CELL



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Veterinarian	Brian J. Lauzon DVM	Return form to:	N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	Telephone:	518-388-3400
Trainer/Client	Cory Stanton			Facsimile:	518-388-3403
Horse	MATOL BERRY G 15398			Email:	info@gaming.ny.gov

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
8/31	1:00 PM	HARTZ MAST / JOINTS	FOR THE MEDICAL MASTICATION - LEARN HORSE JOINTS - LEARN KNEE JOINTS - HYPERLOOSE KNEE, AND 50 cc (the knee)

BRIAN J LAUZON DVM
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