



884 Iron Works Pike ■ Lexington, Kentucky 40511 ■ Telephone (859) 294-0030 ■ Fax (859) 294-0050

BREEDING SHED REQUIREMENTS AND POLICIES

~ BREEDING SHED WILL OPEN FEBRUARY 15 ~

STALLION BOOKING OFFICE HOURS

8:00 AM - 4:30 PM Monday through Friday ■ 8:00 AM - 12:00 noon Saturday and Sunday
Breeding sessions at 7:30 AM and 2:00 PM daily

BREEDING SHED REQUIREMENTS:

- All mares must have proper identification when presented for breeding (halter nameplate or neck strap with name).
- All maiden mares must be jumped prior to their first visit.
- All state and federal requirements must be met.
- Mares should arrive at the breeding shed promptly for their scheduled session.
- Spendthrift Farm will make every reasonable attempt to breed your mare but reserves the right not to breed the mare at any given session if mare is deemed a danger to the stallion and/or staff.

MARE REQUIREMENTS:

A Breeding Shed Form must be presented each time a mare is bred; requirements are as follows:

DOMESTIC MAIDEN MARES (U.S. and CANADA): A negative aerobic uterine culture is required for the initial cover and for any return covers from the **third heat** and subsequent covers (not including doubles). All cultures must be over 48 hours old but less than 30 days old. **The culture for return covers must be taken from the current heat period.** A culture certificate must accompany the mare to the breeding shed. ***All maiden mares must be jumped prior to their first visit.***

DOMESTIC BARREN MARES: A negative aerobic uterine culture is required for the initial cover and for any return covers from the **third heat** and subsequent covers (not including doubles). All cultures must be over 48 hours old but less than 30 days old. **The culture for return covers must be taken from the current heat period.** A culture certificate must accompany the mare to the breeding shed.

DOMESTIC FOALING MARES: No culture is required for the first visit except for mares whose foals have died within seven days of birth. A negative aerobic uterine culture is required for a **second** visit and every subsequent visit thereafter (not including doubles). All staples must be removed before the mare is brought to the breeding shed. **Foal heat mares may be bumped at short notice.**

IMPORTED MAIDENS AND MARES IMPORTED FROM NON-CEM AFFECTED COUNTRIES: All fillies of foreign origin must have two (2) sets of negative CEM cultures (minimum of 72 hours elapsing between the samples being collected) from the clitoral fossa, clitoral sinus(es) and one (1) CEM culture from the endometrium. This swab may be included with either of the required sets of swabs, or in the case of a pregnant mare, the swab may be collected after foaling. The first three (3) mares bred after the imported filly must be CF tested 15-25 days post-breeding. A negative aerobic uterine culture is required within 30 days prior to the first visit. A negative aerobic uterine culture is required for a third visit and every subsequent visit thereafter (not including doubles). ***The mare must be jumped prior to the first visit.***

IMPORTED FOALING AND BARREN MARES/MARES IMPORTED FROM CEM AFFECTED COUNTRIES: Contact the State Veterinarian's Office in Frankfort, Kentucky regarding testing procedures and acquisition of quarantine releases for the breeding season. A copy of the Quarantine Release (which should include results of the CEM endometrium culture) must accompany the mare on her first trip to the breeding shed. The first three (3) mares bred after the imported mare will be required to have a CF test drawn 15-25 days post-breeding. Imported barren mares must also have a negative aerobic uterine culture within 30 days of the first visit. A negative aerobic uterine culture taken from the current heat period is required for all return covers (not including doubles) for both Imported Barren and Imported Foaling mares.

DOUBLE: ***A Breeding Shed Form must accompany the mare each time she is presented to be bred.*** First trip mares will always be given preference over doubles.

Please contact us with any questions regarding these policies.



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BREEDING SHED FORM

THIS BREEDING SHED FORM MUST ACCOMPANY MARE EACH TIME SHE IS PRESENTED FOR BREEDING

BREEDING SESSIONS: 7:30 AM and 2:00 PM daily

BOOKING HOURS: 8:00 AM - 4:30 PM Monday – Friday ■ 8:00 AM - 12:00 noon Saturday & Sunday

Date: _____ Breeding Session (AM or PM) _____

Stallion: _____

Mare: _____ Age/Color: _____

PLEASE CHECK BEGINNING STATUS: Foaling Barren Maiden Imported for 2010 season

■ Mare must have proper identification (halter nameplate or neckstrap) in order to be bred.

■ Cultures must be taken within 30 days.

Please **CIRCLE** the appropriate requirements for this trip and attach the required documents. **THE MARE WILL NOT BE BRED WITHOUT THESE DOCUMENTS.**

	1ST TRIP	2ND TRIP	3RD TRIP	4TH TRIP & Etc.	DOUBLE
DOMESTIC MAIDEN:	Shed Form Uterine Culture Jumped	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
DOMESTIC BARREN:	Shed Form Uterine Culture	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
DOMESTIC FOALING:	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
IMPORTED MAIDEN:	Shed Form Uterine Culture *2 CEM Cultures *1 set to include Endometrium Swab Jumped	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
IMPORTED BARREN:	Shed Form Uterine Culture Quarantine Release Endometrium CEM Culture	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
IMPORTED FOALING:	Shed Form Quarantine Release Endometrium CEM Culture	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form

Do we have permission to TRANQUILIZE this mare if necessary? Yes No

****Please tell us if this mare has any characteristics or conditions that our breeding shed needs to be aware of.** (For example, difficult to handle, slight impairments, etc.) _____

Farm: _____ Farm Mgr. or person completing this form: _____

Farm office phone: _____ Cell phone or pager: _____

Farm Veterinarian: _____ Veterinarian's phone: _____