



Gaming Commission

2-1

Veterinary Treatment Record Form VR1A

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

Veterinarian	Rowan Schenburger VMD		Return form to:	Telephone: 518-388-3400
Trainer/Client	Marcus Melander		N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	Facsimile: 518-388-3403
Horse	Grace in Heaven			Email: info@gaming.ny.gov

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
9/3/25	11.00 AM	---	No treatments
9/4/25	11.00 AM	---	11
9/5/25	9.00 AM	---	11

Handwritten signature

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



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2-2

Veterinarian	Anjelka Bosnjak	
Trainer/Client	Matthew Bax	
Horse	Starzbok Lou	
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
Ø	Ø	no treatment - ARB	Ø



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Veterinarian Dr. P. G. Mallowe	Return form to: N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	Telephone: 518-388-3400
Trainer/Client Geo. Deherm		Facsimile: 518-388-3403
Horse Sharp Sevev		Email: info@gaming.ny.gov

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
9/3	1430	hydration	2000 ml Melft-sol IV
	↓	neustic	30 ml VTB; 5 ml VTB; 500mg CaCo
	↓	Chondroprotection	5ml Adequan IM



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2-4

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Veterinarian	Rowan Schornburg VMD		Return form to:	Telephone: 518-388-3400
Trainer/Client	Marcus Melander		N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	Facsimile: 518-388-3403
Horse	Jula Hot to Chill			Email: info@gaming.ny.gov

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
9/3/25	11.00 AM	—	ND + treatments
9/4/25	11.00 AM	—	'' ''
9/5/25	9.00 AM	—	'' ''

[Signature]

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2-5

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Veterinarian	SEAN GRASSO DVM	Return form to:	Telephone: 518-388-3400
Trainer/Client	CORY STRATTON	N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	Facsimile: 518-388-3403
Horse	OVERALLS		Email: info@gaming.ny.gov

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
9/4/25	N/A	N/A	N/A



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2-6

Veterinarian	Rowan Schomburg VMD		Return form to:	Telephone: 518-388-3400
Trainer/Client	Marcus Melander		N.Y.S. Gaming Commission One Broadway Center Schenectady, N.Y. 12305	Facsimile: 518-388-3403
Horse	Nezuko Kamado S			Email: info@gaming.ny.gov

Date	Time	Diagnosis	Treatment: Drug Administered, Dose & Route of Transmission
9/3/25	11:00am	---	NO treatments
9/4/25	11:00am	---	1" 1"
9/5/25	9:00am	---	1" 1"

Rowan Schomburg



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2-8

Veterinarian	Chad Calice DVM		
Trainer/Client	JENNY MELANDER		
Horse	B EYE LASH		
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
9/3	3:30 pm	Dehydration / Inflammation	5L LRS w/ 60ml Dq50, IV
9/4	3:00 pm	Inflammation	Flunixin meglumine 500mg IV
9/4	8 pm	Gastric ulcers	Omeprazole 2.2gm PO

Chad Calice DVM

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