

CONTROLLED THERAPEUTIC MEDICATIONS

Substance	Withdrawal Guideline	Threshold	Route of Administration	Experimental Administration Dosage
Acepromazine	48 hours	HEPS - 10 ng/mL of urine	Intravenous	0.05 mg/kg
Albuterol	72 hours	1 ng/mL of urine	Intra-nasal ¹	720 mcg total dose
Betamethasone	7 days	10 pg/mL of plasma or serum	Intra-articular as betamethasone acetate and betamethasone sodium phosphate	9 mg total in one articular space
Butorphanol	48 hours	Free butorphanol 2 ng/ml of plasma or serum or total butorphanol 300 ng/ml of urine	Intravenous	0.1 mg/kg
Clenbuterol	14 days	140 pg/mL in urine or LOD in plasma or serum	Orally	0.8 mcg/kg twice daily (max. 30 days)
Dantrolene	48 hours	5-OH dantrolene 0.1 ng/mL of plasma or serum	Orally	500 mg total dose
Detomidine	72 hours	Carboxydetomidine 1 ng/mL of urine or LOD of detomidine in plasma or serum	Sublingual (Dormosedan Gel)	40 mcg/kg sublingual
Dexamethasone	72 hours	5 pg/mL of plasma or serum	Intravenous ² , oral, and intramuscular	0.05 mg/kg
Diclofenac	48 hours	5 ng/mL of serum or plasma	Systemic	5" ribbon of Surpass every 12 hours to one site
DMSO	48 hours	10 mcg/mL of plasma or serum	Topical	Up to two ounces
Firocoxib	14 days	20 ng/mL of plasma or serum	Orally	0.1 mg/kg for 4 days
Flunixin	32 hours	20 ng/mL of serum or	Intravenous	1.1 mg/kg

¹ Note: Administration of albuterol other than via intra-nasal routes is not recommended. Use of therapeutic doses of oral albuterol even outside of the recommended withdrawal guidelines carries a substantial risk of exceeding the regulatory threshold.

² Note: IV route is based on dexamethasone sodium phosphate.

		plasma		
Furosemide	4 hours	100 ng/mL in blood and urine specific gravity < 1.010	Intravenous	500 mg total dose
Glycopyrrolate	48 hours	3 pg/mL of serum or plasma	Intravenous	1 mg total dose
Isoflupredone	7 days	100 pg/mL of serum or plasma	Subcutaneous or Intra-articular administration of isoflupredone acetate	10 mg total dose subcutaneous or 20 mg total dose in one articular space
Ketoprofen	24 hours	2 ng/mL of serum or plasma	Intravenous	2.2 mg/kg
Lidocaine	72 hours	20 pg/mL of total 3- OH-lidocaine in plasma or serum	Subcutaneous	200 mg total dose
Mepivacaine	72 hours	3-OH-mepivacaine - 10 ng/mL in urine or mepivacaine at LOD in plasma or serum	Subcutaneous – distal limb	0.07 mg/kg
Methocarbamol	48 hours ³	1 ng/mL of serum or plasma	Intravenous and Oral	15 mg/kg IV; 5 g orally
Methylprednisolone	21 days	100 pg/mL in plasma or serum	Intra-articular as methylprednisol one acetate	100 mg total in one articular space ⁴
Omeprazole	24 hours	omeprazole sulfide - 1 ng/mL in urine	Orally	3.9 mg/kg
Phenylbutazone	24 hours ⁵	2 mcg/mL of serum or plasma	Intravenous	4.0 mg/kg
Prednisolone	48 hours	1 ng/ml of serum or plasma	Orally	1 mg/kg
Procaine penicillin ⁶		25 ng/mL of serum or plasma	Intra-muscular	17 mg/kg
Triamcinolone acetonide	7 days	100 pg/mL of plasma or serum	Intra-articular	9 mg total in one articular space
Xylazine	48 hours	0.01 ng/mL of plasma or serum	Intravenous	Up to 1 mg/kg

³ Note: There is a potential for reaction when methocarbamol is administered with phenylbutazone. If you elect to use these medications in concert, the withdrawal time for methocarbamol may need to be increased to 72 hours.

⁴ Note: At the 100 mg experimental dose, the safe time for administration to meet the 100 pg/mL threshold was 21 days – protocols vary and a smaller dose may be utilized which may allow plasma concentrations to fall below the threshold more quickly.

⁵ This withdrawal guideline is based upon the historic prohibition on administration within 24 hours of racing. Please note that intravenous administration at a dose of 4 mg/kg at 24 hours before racing may result in some phenylbutazone concentrations that are above the regulatory threshold.

⁶ Also requires: 1. Mandatory notification of procaine penicillin administration and 2. mandatory surveillance at the horse owner's expense for 6 hours before racing