



# ISOLATION PLAN

*Required for any competition with onsite stabling for the competition.*

## Event Grounds

Address: \_\_\_\_\_

## Competition Manager

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

## Event Veterinarian

Vet/Clinic Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Clinic Phone: \_\_\_\_\_

## Referral Hospital

Name: \_\_\_\_\_

Emergency #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

## State Veterinarian

Name: \_\_\_\_\_

Emergency #: \_\_\_\_\_

Email: \_\_\_\_\_

## List of Reportable Diseases in this State (information maintained on the EDCC website\*)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Isolation Point of Contact

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_



# ISOLATION PLAN

Please complete the appropriate sections for onsite or offsite isolation stabling as applicable to the event.

## ONSITE ISOLATION STABLING

Note: Onsite isolation stabling required if competition stabling for the event is 10 days or longer.

Horse Count for Previous Event: \_\_\_\_\_

Location of Isolation Stabling: \_\_\_\_\_

- 1. Is isolation stabling a separate structure from competition stabling?  Yes  No
- 2. Is isolation stabling outside of general horse, human, and vehicle traffic routes?  Yes  No
- 3. Are isolation stall immediately available? (Meaning not used for storage, clear of debris, and ready to put a horse into at the start of the event)  Yes  No
- 4. Is signage posted designating restricted access?  Yes  No
- 5. Map upload \_\_\_\_\_
- 6. Description of where isolation is on event grounds: \_\_\_\_\_  
\_\_\_\_\_

### PERIMETER FENCING

Perimeter Fencing (choose one):

- Isolation perimeter has permanent fencing to enclose
- Isolation perimeter has temporary fencing to enclose
- Isolation stabling does not have perimeter fencing
- Temporary fencing available and to be assembled to enclose isolation stabling

### TYPE OF ISOLATION STALLS

- 1. Do all stalls have at least 3 solid walls a minimum of 8 feet tall?  Yes  No
- 2. Describe stall construction material: \_\_\_\_\_  
\_\_\_\_\_
- 3. Describe stall flooring material: \_\_\_\_\_

### ISOLATION SUPPLIES

- 1. Is there separate dedicated stall cleaning equipment in isolation?  Yes  No
- 2. Is there separate dedicated feeding equipment in isolation?  Yes  No
- 3. Is the water and electrical supply in close proximity to isolation?  Yes  No
- 4. Source of disposable gloves/booties/coveralls:

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

- 5. Location of storage of isolation supplies (footbath, disinfectant, PPE, hand sanitizer): \_\_\_\_\_  
\_\_\_\_\_

### DISINFECTION

- 1. List the product(s) used for disinfection in isolation: \_\_\_\_\_  
\_\_\_\_\_
- 2. Is there separate dedicated stall cleaning equipment in isolation?  Yes  No
- 3. Are stalls cleaned AND disinfected before each event?  Yes  No



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## VECTOR CONTROL

1. Describe all fly control measure for premises (i.e. foggers, sprayer, traps, etc.): \_\_\_\_\_

2. Are rodent traps used in isolation stabling?  Yes  No

3. Is feed stored in sealed bins?  Yes  No

4. Are sealed bins available for feed storage?  Yes  No

5. Is hay stored off the ground (on pallets)?  Yes  No

## OFFSITE ISOLATION STABLING

*Note: Offsite permitted for competitions less than 10 days.*

Address of offsite isolation stabling location: \_\_\_\_\_

Number of isolation stalls available: \_\_\_\_\_

## POINT OF CONTACT FOR OFFSITE ISOLATION STABLING

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone #: \_\_\_\_\_

## TYPE OF AGREEMENT WITH FACILITY: (choose one)

- None
- Verbal
- Written