IMPORT HEALTH REQUIREMENTS OF CANADA FOR EQUINE EMBRYOS EXPORTED FROM THE UNITED STATES OF AMERICA

GENERAL INFORMATION

The embryos must be shipped in accordance with an import permit issued by the Canadian Food Inspection Agency (CFIA). The shipment must be accompanied by a zoosanitary export certificate (i.e., U.S. Origin Health Certificate) as described below. The certificate to be used is included in this file.

The zoosanitary export documentation pertaining to the shipment must clearly describe the embryos and the country of origin. The export document must be issued by an inspector of the central veterinary service of the country of origin (i.e., a salaried USDA-APHIS-VS veterinarian); or, by a veterinarian designated for such purposes by the central veterinary service of the country of origin and endorsed by an official veterinary inspector of the central veterinary service of the country of origin (i.e., issued by an accredited veterinarian and endorsed by a salaried USDA-APHIS-VS veterinarian.)

The original zoosanitary export certificate must clearly describe the shipment and identify the United States as the country of origin.

Embryos presented for importation into Canada must be in sterile straws or pipettes, each marked with the collection date, identity of the donor and the embryos collection premises.
UNITED STATES HEALTH CERTIFICATE FOR
EXPORT OF EQUINE EMBRYOS TO CANADA

Part A: IDENTIFICATION

1. Import permit number:
2. Importer:
   a) Name: _________________________________________________
   b) Address: ________________________________________________
                  ________________________________________________
                  ________________________________________________
3. Species and Commodity: EQUINE EMBRYOS
4. Exporting Country: UNITED STATES OF AMERICA
5. Issuing Authority: UNITED STATES DEPARTMENT OF AGRICULTURE
6. Donor Identification: see attached table
7. Total number of straws/embryos:
8. Origin of the Embryos:
   a) Name of exporter: ________________________________________
   b) Address: ________________________________________________
                  ________________________________________________
                  ________________________________________________
   c) Name of embryo collection premises where embryos were collected if different from above:
                  ________________________________________________
                  ________________________________________________
                  ________________________________________________
8. Destination of the Embryos:
   a) Name of Consignee: ________________________________
   b) Address: ____________________________________________
                 ____________________________________________
                 ____________________________________________

Part B: HEALTH INFORMATION

The undersigned accredited veterinarian hereby certifies the following:
1. The donor mare(s) have not been on a premises where *T. equigenitalis* has been isolated during the 60 days immediately preceding the collection of the embryo(s) for export to Canada or a premises currently under quarantine or investigation for CEM and have not been bred naturally or inseminated with semen from a stallion positive for CEM, or a stallion resident upon a positive premises or under quarantine or investigation for CEM.

2. The flushing medium used to collect the embryo(s) contains antibiotics effective against *T. equigenitalis*.

3. Embryos are in sterile straws or pipettes, each marked with the collection date, identity of the donor and the embryos collection premises.

Date and signature of Accredited Veterinarian

Date and signature of endorsing Veterinarian Federal
(Valid only if USDA Veterinary Seal appears over signature)

Printed name and address of Accredited Veterinarian

Printed name and address of endorsing Federal Veterinarian
Health Certificate No.
(Valid only if USDA Veterinary Seal appears over certificate number)

### Embryo Identification

<table>
<thead>
<tr>
<th>The Identification Of The Donor Mare</th>
<th>Identification Of The Semen Donor/Stallion (if natural breeding)</th>
<th>Embryo Collection Dates</th>
<th>Premises Identification-Name and address</th>
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<tbody>
<tr>
<td>Name</td>
<td>Breed</td>
<td>Registration Number AND</td>
<td>Name</td>
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