**Owner’s Informed Consent:** Muscle Disease in Horses  
**UNIVERSITY OF MINNESOTA**  
**COLLEGE OF VETERINARY MEDICINE**

**General Information.** The University of Minnesota College of Veterinary Medicine is investigating the genetic basis of muscle disease in horses. Our goals are to determine the physiological and genetic (if any) basis for muscle disease and to enable accurate diagnosis and prognosis of this condition. This will ultimately allow the development of a simple blood-based DNA testing program to control the propagation of the muscle disease through informed and selective breeding.

A blood sample, drawn from the jugular vein by the research team or your veterinarian OR a hair root sample drawn by you (the horse’s owner), will be sent to the University of Minnesota Equine Genetics Laboratory. All results will be kept confidential. Participation in the study is voluntary and you may withdraw at any time.

**Risks.** The blood draw procedure is routine and we do not expect any complications, however on rare occasions mild discomfort, or a hematoma (swelling) at the venipuncture site may occur, and can be treated with pressure. However, these complications are rare, and almost always resolve themselves in a couple of days.

**Costs.** Other than the veterinarian fee for blood collection and the sample shipping charge there are no additional costs for participation in this study. In some cases we may pay for the shipping charge but this must be approved ahead of time.

**Follow-up.** It is likely that you or your veterinarian will be contacted by phone to clarify responses to the questionnaire. At this time we will also provide additional information as to how you could participate further.

**Study Contacts.** The contacts for this study are Dr. Molly McCue and Dr. James Mickelson (Phone: (612) 625-6731). They can also be contacted at egg1-muscledis@umn.edu. Either the researchers or horse owners involved in this study have the right to withdraw at any time. The cost of the DNA extraction and genotyping will be covered entirely by the research team.

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**Informed consent**

I, ____________________, understand that there may be unforeseen risks involved in any research activity. If I have any concerns about the performance of this study, I can contact the Department Chairman at The University of Minnesota Dr. Tom Molitor at (612) 625-7755 or the Institutional Animal Care and Use Committee (IACUC) at IACUC@umn.edu, phone: (612) 626-2126.

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**Note:** You will have a chance to electronically agree to the Owner’s Informed Consent in the Muscle Disease in Horses survey. This is a copy to review at your convenience.