



AMERICAN EQUINE INSURANCE GROUP

Equine Major Medical and Surgical Coverage Wording

(Annual limit \$10,000)

In consideration of the additional premium, fully earned, paid in respect of each horse to be insured for this coverage, such premium to be shown in the declarations or in accordance with endorsements of the policy to which this wording applies, the Company agrees to payment of the following:

Reasonable and customary charges of a licensed veterinarian(s) which are necessitated by accident, illness, disease or injury, occurring and reported to the company prior to the actual expiration date of the policy as described in Item C of the Policy Declarations Page 1. Services must be performed during the coverage period or within 30 days after the expiration date of the policy.

LIMIT OF INSURANCE: Annual aggregate limit as stated in Item J of the Declarations or any endorsements of the policy for covered procedures.

DEDUCTIBLE: \$300.00 each and every claim or recurrence thereof made during the period of insurance for each occurrence of accident, illness, injury, disease or surgical procedure. This coverage is primary to colic surgical coverage provided by this policy (AEM 211), however this coverage is excess of the aggregate limit of any other benefits or insurance.

CLAIM NOTIFICATION: See Item G of the Policy Declarations Page 1.

EXCLUSIONS: This endorsement excludes claims arising from any of the following:

1. Any undisclosed condition of the horse or any condition excluded by the policy or by any endorsement to which this endorsement is attached.
2. Any elective surgery and/or procedures including but not limited to: any surgery to correct laryngeal hemiplegia, entrapment of epiglottis, neurectomy, castration, and/or caslicks.
3. Any alternative procedures including but not limited to: cosmetic procedures, chiropractic, massage, acupuncture treatment, whirlpool, treadmill treatment, laser treatment, magnetic blanket treatment, and/or other alternative treatments.
4. Any claim as a result of malicious or willful injury and/or poisoning and/or gross negligence whether or not caused by the insured.
5. Costs of transportation, veterinary travel, and/or call charges.
6. Any treatments normally associated with the maintenance of a healthy horse.
7. Birth defects, developmental conditions, growth or nutritional conditions, and/or congenital conditions including but not limited to: undescended testicles, umbilical hernia, or corrective treatment such as for contracted tendons or club foot whether evident or not at the effective date of coverage for the insured horse.
8. Treatment rendered more than ninety (90) days prior to notifying us of the condition.
9. Any dental procedure unless necessitated by a visible, external, accidental and violent means injury.
10. Any farrier services including but not limited to corrective shoeing and/or therapeutic shoeing, whether or not medically necessitated or veterinarian prescribed.
11. Any post mortem and/or necropsy procedure.
12. Any radial shock wave therapy.
13. Any procedures or joint treatments such as injections of synovial fluid, stimulators or replacers including cortico-steroids and/or anabolic steroids whether or not used in conjunction with any other treatments.
14. Any charges arising out of complications from an excluded procedure, treatment, or condition.
15. Any horse used for racing or intended for racing.
16. Any horse under 6 months old or over 15 years old.

This endorsement is subject otherwise to the terms, conditions, exclusions and limitations of the policy to which this endorsement is attached.