



**AB.VMA**  
Alberta Veterinary Medical Association

***PRACTICE INSPECTION  
AND  
PRACTICE STANDARDS  
BYLAWS***

*With amendments in force as of February 7, 2003*

*For the purposes of the Veterinary Profession Act and the General Regulation these Bylaws establish the minimum practice standards for the practice of veterinary medicine. A veterinarian or permit holder in the practice of veterinary medicine shall maintain no less than the established minimum practice standards and shall be subject to periodic inspections at intervals as established by the Alberta Veterinary Medical Association Council.*

## TABLE OF CONTENTS

<b>I</b>	<b>LARGE ANIMAL FACILITY</b>	4
	GENERAL	4
	FACILITY	5
	SURGERY	5
	DIAGNOSTIC IMAGING	5
	CLINICAL PATHOLOGY	6
	PHARMACY	6
	RECORDS	7
	PERSONNEL AND CARE OF ANIMALS	8
	LIBRARY	8
<b>II</b>	<b>LARGE ANIMAL AMBULATORY PRACTICE</b>	8
	GENERAL	8
	FACILITY	9
	SURGERY	9
	DIAGNOSTIC IMAGING	9
	CLINICAL PATHOLOGY	10
	PHARMACY	10
	RECORDS	11
	VEHICLES/EQUIPMENT	12
	LIBRARY	12
<b>III</b>	<b>SMALL ANIMAL FACILITY</b>	13
	GENERAL	13
	FACILITY	13
	SURGERY	14
	DIAGNOSTIC IMAGING	15
	CLINICAL PATHOLOGY	16
	PHARMACY	16
	RECORDS	17
	PERSONNEL AND CARE OF ANIMALS	18
	LIBRARY	19
<b>IV</b>	<b>SMALL ANIMAL HOUSECALL PRACTICE</b>	19
	GENERAL	19
	EXAMINATION FACILITIES	20
	SURGERY	20
	CLINICAL PATHOLOGY	20
	PHARMACY	20
	RECORDS	21
	VEHICLES	22
	LIBRARY	22
<b>V</b>	<b>SMALL ANIMAL EMERGENCY FACILITY</b>	22
	GENERAL	22
	FACILITY -	23
	SURGERY	24
	DIAGNOSTIC IMAGING	25
	CLINICAL PATHOLOGY	26
	PHARMACY	26
	EQUIPMENT AND SUPPLIES	28
	RECORDS	29
	PERSONNEL AND CARE OF ANIMALS	30
	LIBRARY	31

TABLE OF CONTENTS cont'd

<b>VI</b>	<b>EMBRYO TRANSFER FACILITY</b>	31
	GENERAL	31
	FACILITY -	32
	SURGERY.	33
	PHARMACY	33
	RECORDS	34
	PERSONNEL AND CARE OF ANIMALS .	34
	LIBRARY	35
<b>VII</b>	<b>EMBRYO TRANSFER AMBULATORY PRACTICE</b>	35
	GENERAL	35
	SURGERY	36
	PHARMACY	36
	RECORDS	36
	VEHICLES AND EQUIPMENT	37
	LIBRARY	38
<b>VIII</b>	<b>LARGE ANIMAL CONSULTATIVE PRACTICE</b>	38
	GENERAL	38
	FACILITY	38
	CLINICAL PATHOLOGY	39
	PHARMACY	39
	RECORDS	40
	VEHICLES AND EQUIPMENT	41
	LIBRARY	41
<b>IX</b>	<b>PRIVATE DIAGNOSTIC LABORATORY</b>	41
	GENERAL	41
	FACILITY	42
	RECORDS	43
	QUALITY CONTROL	44
	LIBRARY	44
<b>X</b>	<b>HOLISTIC FACILITY</b>	44

## **I LARGE ANIMAL FACILITY:**

### **A. GENERAL**

- 1) Phone listings, and other forms of legal advertising comply with the A. V.M.A. General Regulation.
- 2) Disposal of carcasses and body tissue is conducted according to local and provincial regulations -(The Destruction and Disposal of Dead Animals Regulation -The Livestock Diseases Act).
- 3) The following insurance is in place:
  - a) Liability.
  - b) Malpractice.
- 4) When a veterinary practice employs an AHT who is practising in accordance with the Veterinary Profession Act, General Regulation, Section 9 & 10, the AHT must be registered in accordance with Section 8 of the Veterinary Profession Act, General Regulation. The certificate of registration from the AAAHT must be made available to the PIPS Inspector.
- 5) All lay staff who dispense production animal and equine F-2 (OTC) medications in veterinary clinics are required to pass the provincial government's Production Animal Medicine examination. The practice must provide documentation confirming the lay staff's Production Animal Medicine certification to the ABVMA Inspector. This training is also recommended for Animal Health Technologists, and lay staff in companion animal practices, although it is not a requirement.

### **B. FACILITY**

- 1) Building is of good construction and permanent in nature with:
  - a) Adequate heating.
  - b) Adequate lighting.
  - c) Adequate ventilation and screening.
- 2) Reception area and restroom facilities are:
  - a) Presentable and free from hazards.
  - b) Clean and orderly with furnishings in good repair.
- 3) Examination and treatment areas are clean and orderly with:
  - a) Running water.
  - b) Adequate drainage.
  - c) Appropriate cleaning equipment and supplies.
  - d) Covered waste receptacle.
  - e) Impervious surfaces. (easily cleaned)
  - f) Headgate and chute system are adequate for restraint of cattle(required only if doing in clinic/hospital work on cattle).
- 4) There is an unloading chute with a ramp in good repair.
- 5) Parking is adequate.
- 6) There is adequate cupboard space for storage of drugs, equipment, cleaning materials, etc.
- 7) All areas inside and outside appear clean and orderly.
- 8) The following equipment is owned and in routine use:
  - a) Thermometer.
  - b) Otoscope/Ophthalmoscope.
  - c) Stethoscope.
  - d) Sterile needles, syringes and I. V. catheters available.
  - e) Parenteral fluids available in adequate quantities.
  - f) Hoofcare equipment (nippers, knives, hoof testers).
- 9) Adequate fire extinguisher(s) are present and in working order.
- 10) Refuse is stored in closed containers.
- 11) All areas are adequately ventilated and free of offensive odors.
- 12) Fly control is adequate.
- 13) Rodent control is adequate.

- 14) All biomedical waste shall be stored, transported and disposed of in compliance with Provincial and Federal Legislation.
- 15)
  - a) The facility is self contained and has a solid permanent wall between it and adjacent businesses. All public entrances must meet Practice Inspection and Practice Standards Bylaws.
  - b) The facility has a separate and distinct entrance directly from the street or, if the facility is in a building containing more than one business, directly from a common lobby, hallway or mall.
  - c) The facility has, and appears to have, the practice of veterinary medicine as its primary purpose.
  - d) The signage of the facility does not present to the public that it is operated in connection with another enterprise.
  - e) Standards c) and d) do not prohibit the provision of ancillary services in the facility, which are incidental and subordinate to the professional services provided in the facility.
  - f) The facility has no direct public access to a commercial establishment.
    - i) where animals are bought or sold;
    - ii) providing animal food or other goods and services used principally by, with or for animals.
  - g) Practices that have passed PIPS inspection under the present Bylaws will be exempt from articles a) to f) inclusive above until their next regularly scheduled inspection.

**C. SURGERY**

- 1) Autoclave (and/or gas sterilization) is in use.
- 2) Sterile equipment (instruments and drapes) for at least two surgeries is on hand at all times.
- 3) Major surgeries are carried out using aseptic techniques appropriate for the procedure.
- 4) Sterility indicators are present within each surgery pack.
- 5) Surgery packs must be dated. Surgery packs must be reautoclaved prior to use if the dating extends beyond 30 days.
- 6) Masks, caps, and sterile gloves and gowns are available.
- 7) Emergency lighting is in working order.
- 8) Equipment in cold sterilization is available for non-sterile procedures.
- 9) Gas anesthetic equipment is vented to the exterior of the building. If exterior venting is not provided, a suitable alternative is in place and maintained under manufacturer's guidelines.
- 10) Documentation shall be provided that indicates that anesthetic equipment is inspected, calibrated and verified every 24 months by an independent third party acceptable to the Practice Inspection and Practice Standards Committee.

**D. DIAGNOSTIC IMAGING**

- 1) Diagnostic radiography is provided on premises.  
or
- 2) Radiographic cases are referred to another facility and there is written evidence of these referrals.
- 3) The equipment is registered with the ABVMA Radiation Protection Program. Current Registration No.(s)\_\_\_\_\_.
- 4) This area is free from related hazards to patients, clients and personnel.
- 5) Protective equipment includes:
  - a) Collimeter.
  - b) Protective apron.
  - c) Protective gloves with cuff.
  - d) Monitoring badges are worn and sent in regularly for analysis.
  - e) Thyroid Protector.
- 6) Radiographs are permanently labelled with exposure type marking devices.

- a) Clinic name/date/patient file number,  
or
- b) Clinic name/date/patient identification.
- 7) All radiographs and hard copy ultrasound, fluoroscopic images and any other diagnostic images are stored in a manner which preserves their quality and allows for retrieval.
- 8) Radiographic log is maintained which includes:
  - a) Owner/patient identification.
  - b) MAS and KV and other patient data (optional).
- 9) A radiograph viewer is easily accessible.
- 10) Screens and cassettes are free from defects.
- 11) Radiographs are of diagnostic quality.
- 12) A documented Quality Assurance Program is in place, consistent with that outlined in the ABVMA's Radiation Protection Program Manual and an individual in the practice (Veterinarian or Animal Health Technologist) is identified as the Quality Control Officer.

#### **E. CLINICAL PATHOLOGY**

- 1) The following equipment is owned and in routine use within the practice:
  - a) Microscope with oil immersion (or ready access to one).
  - b) Centrifuge for blood vials and microhematocrit (or ready access to one).
  - c) Equipment for fecal flotation.
  - d) Equipment for urinalysis.
- 2) Records, stored in orderly fashion and readily retrieved.
- 3) Clinical pathology services are provided.

#### **F. PHARMACY**

- 1) Storage, safekeeping and preparation of drugs are in accordance with Federal and Provincial laws and ABVMA Council Guidelines and Bylaws.
- 2) Refrigeration is adequate in all respects.
- 3) All drugs are stored according to manufacturers directions.
- 4) Narcotic and controlled drug register is maintained.
- 5) Narcotic and controlled drugs are stored in a manner which protects them against loss or theft.
- 6) Dispensed drugs (excluding Schedule F, part II drugs dispensed as packaged and labelled by the manufacturer) are labelled as to:
  - i) Name of client.
  - ii) Name of drug.
  - iii) Date dispensed.!
  - iv) Quantity.
  - v) Name of facility or veterinarian dispensing the drug.
  - vi) Identification of the animal(s).
  - vii) DIN.
  - viii) Direction for use.
- 7) Adequate record (e.g. itemized receipts) are kept of all Schedule F, part 1 drugs.
- 8) Expired drugs are kept separate prior to return to manufacturer.
- 9) A system for safeguarding for expiry date is in use.
- 10) Emergency drug kit is available and contains: Atropine, Epinephrine, Calcium Gluconate, Respiratory Stimulant, Corticosteroids, needles and syringes.
- 11) Sterile needles and syringes, I. V. catheters and parenteral fluids are available.
- 12) All retailing of pharmaceuticals and biologicals (including prescriptions for feed additives) requires the establishment of a veterinarian client relationship and a medical record.
- 13) Prescriptions contain a warning of the required withdrawal period of the medication used for food producing animals.
- 14) Prescription (Schedule F, Part I) drugs are not maintained in areas directly accessible to the general public. Display of F-1 medications within the clinic only is permitted, provided the public has no direct physical access to the item on display.

**G. RECORDS**

- 1) Records for large animals shall be clear, legible and retrievable and shall be maintained on either a herd (flock) or individual basis.
- 2) Records contain:
  - a) Animal(s) identification (i.e. tattoo, tag no., lot no., pen no., age, markings, sex, species, etc.)
  - b) Name, address and telephone number of the client.
  - c) Presenting history and symptoms of the individual, group or herd (flock).
  - d) Vaccination status of the individual or herd (flock).
  - e) Laboratory reports including clinical pathology and necropsy findings.
  - f) Record of the assessment of the individual, group or herd (flock) documenting:
    - i) Physical visitation of the production site when appropriate.
    - ii) Verbal (when practical) or written communication with the owner.
    - iii) Sufficient information to indicate the assessment (examination) of the individual group or herd (flock), planned treatment and any reports that are applicable.
    - iv) Written protocol documenting drugs prescribed or dispensed including strength, dosage, quantity, precautions, withdrawal times, etc.
    - v) Original tax prescription forms are maintained for 5 years.
- 3) Euthanasia forms or equivalent are available.
- 4) Records are maintained for 5 years.
- 5) Computerized medical records are acceptable providing they meet the same criteria as non computerized records as stated in the ABVMA regulations as well as the following:
  - a) The records are kept in a systematic matter
  - b) The records must be completed in a timely manner
  - c) The records may be made and maintained in an electronic computer system providing:
    - i) the system provides visual display of recorded information
    - ii) the system provides access to the information by the owner's and/or patient name
    - iii) the system is capable of printing the information promptly
    - iv) the system includes a password or otherwise provides reasonable protection against unauthorized access. Continuity of access to files must be ensured by making access codes available to a responsible accessible party.
    - v) the system backs up files and allows recovery of backed up files or otherwise protects against loss of, damages to and accessibility of information.

It is also suggested that the system is capable of visually displaying the recorded information of each patient in chronological order:

      - a) records the date and time for each entry of information for each patient
      - b) indicate any changes in recorded information
      - c) preserves the original content of the recorded information when changed or updated
      - d) is capable of being printed separately from the recorded information of each patient.
    - vi) Any member who ceases to practice for any reason, or upon death their Executor shall:
      - a) retain all medical records for required period of time; or
      - b) transfer all medical records to a member who assumes responsibility for the practice, including the medical records; or
      - c) transfer all medical records to:
        - i) another member practicing in that locality, or
        - ii) a secure storage area with a person designated to allow

- iii) all veterinarians reasonable access to the records; and shall publish a notice in the local or area newspaper indicating where the records can be accessed.

**H. PERSONNEL AND CARE OF ANIMALS**

- 1) Provision is made for 24 hour emergency veterinary service:
  - a) By assignment of veterinarian on premises, or
  - b) By referring the caller to a staff veterinarian, or
  - c) By referring the caller to another pre-arranged specified cooperating facility or service.
- 2) Practice is directed and supervised by a registered veterinarian.
- 3) All personnel present a neat and clean appearance.
- 4) Course of treatment of all patients is determined by a veterinarian.
- 5) Patients are checked at night as required.
- 6) Hospitalized patients are provided with overnight care until stabilization of post-surgical or critically ill patients has occurred.
- 7) Hospitalized animals are examined by a veterinarian at least once daily.
- 8) Hospitalized animals are watered and fed an adequate diet at least once daily.
- 9) Proper bedding is available.
- 10) Stalls are cleaned daily.

**I. LIBRARY**

- 1) Includes:
  - a) One current and accepted veterinary reference text on:
    - i) Internal Medicine.
    - ii) Clinical Pathology.
    - iii) Surgery.
    - iv) And where applicable, radiology.
  - b) One current medical text for each of the species or classes of animals with which the veterinarian(s) are professionally involved.
- 2) Includes adequate subscriptions to professional journals (at least two refereed journals).
- 3) Includes the Veterinary Profession Act, General Regulation and By-laws.
- 4) Includes copies of the following:
  - i) The Regulations and Schedule of The Narcotic Control Act.
  - ii) Schedule F, G, and H of The Food and Drug Act.
  - iii) The Animal Protection Act.
  - iv) The Production Animal Medicine Regulation.
  - v) The Compendium of Medicating Ingredient Brochures.
  - vi) Compendium of Pharmaceuticals and Specialties.

**II LARGE ANIMAL AMBULATORY PRACTICE:**

**A. GENERAL**

- 1) The practice has a fixed mailing address.
- 2) The practice has a listed telephone number.
- 3) Phone listings, and other forms of legal advertising comply with the A.V.M.A. General Regulation.
- 4) Provision is made for 24 hour emergency veterinary service:
  - a) By assignment of veterinarian on premises, or
  - b) By referring the caller to a staff veterinarian, or
  - c) By referring the caller to another pre-arranged specified cooperating facility or service.
- 5) The practice has an agreement with one or more animal clinics/hospitals for the provision of hospitalization, surgery and other services not provided by the ambulatory practice.  
Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 6) The following insurance is in place:
  - a) Liability.
  - b) Malpractice.
- 7) When a veterinary practice employs an AHT who is practising in accordance with the Veterinary Profession Act, General Regulation, Section 9 & 10, the AHT must be registered in accordance with Section 8 of the Veterinary Profession Act, General Regulation. The certificate of registration from the MAHT must be made available to the PIPS Inspector.
- 8) All lay staff who dispense production animal and equine F-2 (OTC) medications in veterinary clinics are required to pass the provincial government's Production Animal Medicine examination. The practice must provide documentation confirming the lay staff's Production Animal Medicine certification to the ABVMA Inspector. This training is also recommended for Animal Health Technologists, and lay staff in companion animal practices, although it is not a requirement.

**B. FACILITY -(If applicable)**

- 1) Building is of good construction and permanent in nature with:
  - a) Adequate heating.
  - b) Adequate lighting.
  - c) Adequate ventilation and screening.
- 2) Reception area and restroom facilities are:
  - a) Presentable and free from hazards.
  - b) Clean and orderly with furnishings in good repair.
- 3) Parking is adequate.
- 4) There is adequate cupboard space for storage of drugs, equipment, cleaning materials, etc.
- 5) All areas inside- and outside appear clean and orderly.
- 6) Adequate fire extinguisher(s) are present and in working order.
- 7) Refuse is stored in closed containers.
- 8) All areas are adequately ventilated and free of offensive odors.
- 9) Fly control is adequate.
- 10) Rodent control is adequate.
- 11) All biomedical waste shall be stored, transported and disposed of in compliance with Provincial and Federal Legislation.

**C. SURGERY**

- 1) Autoclave (and/or gas sterilization) is in use.
- 2) Sterile equipment (instruments and drapes) for at least two surgeries is on hand at all times.
- 3) Sterile gloves, sleeves and suture material are available.
- 4) Surgery packs must be dated. Surgery packs must be reautoclaved prior to use if the dating extends beyond 30 days.
- 5) Sterility indicators are present within each pack.
- 6) Equipment kept in cold sterilization solution is available for non-sterile procedures
- 7) All surgical equipment is kept neat, orderly and in good condition.
- 8) All necessary equipment and materials are available for local anesthetics, sedations, epidurals and intravenous anesthesia.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. DIAGNOSTIC IMAGING**

- 1) Diagnostic radiography is provided on premises,  
or
- 2) Radiographic cases are referred to another facility and there is written evidence of these referrals.

- 3) The equipment is registered with the ABVMA Radiation Protection Program. Current Registration No.(s)\_\_\_\_\_.
- 4) This area is free from related hazards to patients, clients and personnel.
- 5) Protective equipment includes:
  - a) Collimeter.
  - b) Protective apron.
  - c) Protective gloves with cuff.
  - d) Monitoring badges are worn and sent in regularly for analysis.
  - e) Thyroid Protector.
- 6) Radiographs are permanently labelled with exposure type marking devices.
  - a) Clinic name/date/patient file number,  
or
  - b) Clinic name/date/patient identification.
- 7) All radiographs and hard copy ultrasound, fluoroscopic images and any other diagnostic images are stored in a manner which preserves their quality and allows for retrieval.
- 8) Radiographic log is maintained which includes:
  - a) Owner/patient identification.
  - b) MAS and KV and other patient data (optional).
- 9) A radiograph viewer is easily accessible.
- 10) Screens and cassettes are free from defects.
- 11) Radiographs are of diagnostic quality.
- 12) A documented Quality Assurance Program is in place, consistent with that outlined in the ABVMA's Radiation Protection Program Manual and an individual in the practice (Veterinarian or Animal Health Technologist) is identified as the Quality Control Officer.

#### **E. CLINICAL PATHOLOGY**

- 1) Clinical pathology services are provided.  
Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2) There is proper equipment present for the collection of blood, urine samples, bacterial cultures and other clinical pathology specimens.
- 3) Accurate records are maintained on clinical pathology tests for individual cases.
- 4) Necropsies are performed from the mobile unit.

#### **F. PHARMACY**

- 1) Storage, safekeeping, preparation and dispensing of drugs are in accordance with Federal and Provincial Laws and ABVMA Council Guidelines and Bylaws.
- 2) Refrigeration is adequate in all respects.
- 3) All drugs are stored according to manufacturers directions.
- 4) Narcotic and controlled drug register is maintained.
- 5) Narcotic and controlled drugs are stored in a manner which protects them against loss or theft.
- 6) Dispensed drugs (excluding Schedule F, part II drugs dispensed as packaged and labelled by the manufacturer) are labelled as to:
  - i) Name of client.
  - ii) Name of drug.
  - iii) Date dispensed.
  - iv) Quantity.
  - v) Name of facility or veterinarian dispensing the drug.
  - vi) Identification of the animal(s).
  - vii) DIN.
  - viii) Direction for use.
- 7) Adequate record (e.g. itemized receipts) are kept of all Schedule F, part I drugs.
- 8) Expired drugs are kept separate prior to return to manufacturer.

- 9) A system for safeguarding for expiry date is in use.
- 10) Emergency drug kit is available and contains: Atropine, Epinephrine, Calcium Gluconate, Respiratory Stimulant, Corticosteroids, needles and syringes.
- 11) Sterile needles and syringes, I. V. catheters and parenteral fluids are available.
- 12) All retailing of pharmaceuticals and biologicals (including prescriptions for feed additives) requires the establishment of a veterinarian client relationship and a medical record.
- 13) Prescriptions contain a warning of the required withdrawal period of the medication used for food producing animals.
- 14) Prescription (Schedule F, Part I) drugs are not maintained in areas directly accessible to the general public. Display of F-1 medications within the clinic only is permitted, provided the public has no direct physical access to the item on display.

## G. RECORDS

- 1) Records for large animals shall be clear, legible and retrievable and shall be maintained on either a herd (flock) or individual basis.
- 2) Records contain:
  - a) Animal(s) identification (i.e. tattoo, tag no., lot no., pen no., age, markings, sex, species, etc.)
  - b) Name, address and telephone number of the client.
  - c) Presenting history and symptoms of the individual, group or herd (flock).
  - d) Vaccination status of the individual or herd (flock).
  - e) Laboratory reports including clinical pathology and necropsy findings.
  - f) Record of the assessment of the individual, group or herd (flock) documenting:
    - i) Physical visitation of the production site when appropriate.
    - ii) Verbal (when practical) or written communication with the owner.
    - iii) Sufficient information to indicate the assessment (examination) of the individual group or herd (flock), planned treatment and any reports that are applicable.
    - iv) Written protocol documenting drugs prescribed or dispensed including strength, dosage, quantity, precautions, withdrawal times, etc.
- 3) Euthanasia forms or equivalent are available.
- 4) Records are maintained for 5 years.
- 5) Original fax prescription forms are maintained for 5 years.
- 6) Computerized medical records are acceptable providing they meet the same criteria as non computerized records as stated in the ABVMA regulations as well as the following:
  - a) The records are kept in a systematic matter
  - b) The records must be completed in a timely manner
  - c) The records may be made and maintained in an electronic computer system providing:
    - i) the system provides visual display of recorded information
    - ii) the system provides access to the information by the owner's and/or patient name
    - iii) the system is capable of printing the information promptly
    - iv) the system includes a password or otherwise provides reasonable protection against unauthorized access. Continuity of access to files must be ensured by making access codes available to a responsible accessible party.
    - v) the system backs up files and allows recovery of backed up files or otherwise protects against loss of, damages to and accessibility of information.It is also suggested that the system is capable of visually displaying the recorded information of each patient in chronological order:
    - a) records the date and time for each entry of information for each patient
    - b) indicate any changes in recorded information
    - c) preserves the original content of the recorded information when

- changed or updated
- d) is capable of being printed separately from the recorded information of each patient.
- vi) Any member who ceases to practice for any reason, or upon death their Executor shall:
  - a) retain all medical records for required period of time; or
  - b) transfer all medical records to a member who assumes responsibility for the practice, including the medical records; or
  - c) transfer all medical records to:
    - i) another member practicing in that locality, or
    - ii) a secure storage area with a person designated to allow all veterinarians reasonable access to the records; and
    - iii) shall publish a notice in the local or area newspaper indicating where the records can be accessed.

**H. VEHICLES/EQUIPMENT**

- 1) The vehicle is clean, orderly and in good repair.
  - 2) Proper and adequate equipment is available for use in routine ambulatory work.
    - a) Thermometer.
    - b) Otoscope/Ophthalmoscope.
    - c) Stethoscope.
    - d) Obstetrical equipment.
    - e) Hoof care equipment.
    - f) Restraint devices.
  - 3) Equipment is clean, neat and in good repair.
  - 4) Clean overalls or outer garments are available for each call.
  - 5) Footwear is available, that can be cleaned and disinfected on the premises after each professional call.
  - 6) Syringes, instruments, intravenous apparatus and parenteral medication are sterile or sterilized for each procedure.
  - 7) Refuse is stored in closed containers.
  - 8) Refrigeration of drugs is adequate.
  - 9) Communication with ambulatory vehicle is available. (Radio, telephone, pager)
- Comments: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**I. LIBRARY**

- 1) Includes:
  - a) One current and accepted veterinary reference text on:
    - i) Internal Medicine.
    - ii) Clinical Pathology.
    - iii) Surgery.
    - iv) And where applicable, radiology.
  - b) One current medical text for each of the species or classes of animals with which the veterinarian(s) are professionally involved.
- 2) Includes adequate subscriptions to professional journals (at least two refereed journals).
- 3) Includes the Veterinary Profession Act, General Regulation and By-laws.
- 4) Includes copies of the following:
  - i) The Regulations and Schedule of The Narcotic Control Act.
  - ii) Schedule F, G, and H of The Food and Drug Act.
  - iii) The Animal Protection Act.
  - iv) The Production Animal Medicine Regulation.
  - v) The Compendium of Medicating Ingredient Brochures.
  - vi) Compendium of Pharmaceuticals and Specialties.

**III SMALL ANIMAL FACILITY:****A. GENERAL**

- 1) A hospital maintenance schedule is in evidence e.g. Changing developing tanks.
- 2) A recognized disinfectant and/or germicide is available.
- 3) Trash is disposed of safely and often so that it does not accumulate.
- 4) Exterior of building and grounds are kept clean and free of hazards.
  - a) Snow and ice in winter, rubbish and feces at all times are removed as efficiently and quickly as possible.
  - b) There is adequate exterior lighting at entrances, walkways and parking lots.
  - c) The facility is adequately identified.
- 5) Fly control is adequate.
- 6) Rodent control is adequate.
- 7) The following insurance is in place:
  - a) Liability.
  - b) Malpractice.
- 8) The facility is free of all hazards and obstructions to traffic flow.
- 9) Fire extinguishers are available, and conform to municipal regulations.
- 10) Instructions for building evacuation and animal handling in case of fire or other emergencies is posted and familiar to staff.
- 11) Emergency phone numbers including fire, hospital and poison control centre is posted.
- 12) Doors and windows shall be secured and/or self closing to prevent the escape or theft of animals.
- 13) Refrigerated storage for carcasses and body tissues is provided and readily available or disposal services for the prompt and immediate removal of the same are available and a record of service utilization is maintained.
- 14) Disposal of carcasses and body tissue is conducted according to local and provincial regulations -(The Destruction and Disposal of Dead Animals Regulation -The Livestock Diseases Act).
- 15) Phone listings, and other forms of legal advertising comply with the A.V.M.A. General Regulation.
- 16) When a veterinary practice employs an AHT who is practising in accordance with the Veterinary Profession Act, General Regulation, Section 9 & 10, the AHT must be registered in accordance with Section 8 of the Veterinary Profession Act, General Regulation. The certificate of registration from the AHT must be made available to the PIPS Inspector.
- 17) All lay staff who dispense production animal and equine F-2 (OTC) medications in veterinary clinics are required to pass the provincial government's Production Animal Medicine examination. The practice must provide documentation confirming the lay staff's Production Animal Medicine certification to the ABVMA Inspector. This training is also recommended for Animal Health Technologists, and lay staff in companion animal practices, although it is not a requirement.

**B. FACILITY**

- 1) Reception area and restroom facilities are:
  - a) Presentable and free from hazards.
  - b) Clean and orderly with furnishings in good repair.
- 2) Examination Facilities:
  - a) Is a room(s) separate from the reception area. The following equipment, is readily available:
    - i) Examination table constructed of readily sanitized material.
    - ii) Scale.
    - iii) Stethoscope.
    - iv) Otoscope and Ophthalmoscope.
    - v) Disinfectant or alcohol.

- vi) Sterile needles and syringes.
- vii) Thermometer.
- viii) Examination Gloves.
- b) Is clean, orderly, well lighted with good ventilation.
- c) Is constructed of readily sanitized material.
- d) Contains covered waste receptacles or demonstrates a system by which wastes do not accumulate within the exam room, between appointments.
- e) Is of sufficient area for the doctor, patient, and client.
- 3) All biomedical waste shall be stored, transported and disposed of in compliance with Provincial and Federal Legislation.
- 4)
  - a) The facility is self contained and has a solid permanent wall between it and adjacent businesses. All public entrances must meet Practice Inspection and Practice Standards Bylaws.
  - b) The facility has a separate and distinct entrance directly from the street or, if the facility is in a building containing more than one business, directly from a common lobby, hallway or mall.
  - c) The facility has, and appears to have, the practice of veterinary medicine as its primary purpose.
  - d) The signage of the facility does not present to the public that it is operated in connection with another enterprise.
  - e) Standards c) and d) do not prohibit the provision of ancillary services in the facility, which are incidental and subordinate to the professional services provided in the facility.
  - f) The facility has no direct public access to a commercial establishment.
    - i) where animals are bought or sold;
    - ii) providing animal food or other goods and services used principally by, with or for animals.
  - g) Practices that have passed PIPS inspection under the present Bylaws will be exempt from articles a) to f) inclusive above until their next regularly scheduled inspection.

### C. SURGERY

- 1) Sterile:
  - a) Aseptic technique is followed for major surgical procedures in a separate single purpose room. This room shall consist of; walls, floors and doors constructed of solid impervious material that can be easily sanitized. Major surgery is defined as
    - i) any thoracic, orthopedic or abdominal procedures or;
    - ii) any soft tissue procedures of greater than 15 minutes duration.
  - b) The surgery room is maintained in a clean and orderly fashion.
  - c) A surgery table is provided that can be readily sanitized.
  - d) Adequate lighting is provided including emergency lighting.
  - e) Caps, masks, sterile gowns and gloves are in use for major surgical procedures. Gowns, gloves, instruments, towels and drapes, are autoclaved prior to each major surgical procedure.
  - f) Sterile suture material is available and in use.
  - g) Surgery packs are prepared outside the surgery suite.
  - h) An autoclave and/or gas sterilization is in use to prepare sterile packs.
  - i) Sterility indicators are present within each surgical pack.
  - j) Surgery packs must be dated. Surgery packs must be reautoclaved prior to use if the dating extends beyond 30 days.
  - k) The preparation of the patient is conducted outside the room where major surgery is performed.
  - l) An oxygen source and means of positive ventilation is available at all times as well as endotracheal tubes with intact cuffs.
  - m) A surgery log is kept giving date, identification of patient, and procedure (may coincide with anesthetic log).

- n) Laparotomy drapes are utilized and exclude unprepared area of skin where practical, cover the table top, side to side.
- o) Skin drapes are utilized for major surgeries where applicable.
- 2) Non-Sterile Surgery: (i.e. Dentistry and Surgical Prep. Area) Dentistry and patient preparation area.
  - a) The following equipment is available:
    - i) Clippers.
    - ii) Vacuum cleaner.
    - iii) Surgical scrub material.
    - iv) Cold sterilization solution.
    - v) Dental scalers, extractors, elevators.
    - vi) Sterile I.V. and urinary catheters.
    - vii) Sink.
- 3) Inhalation anesthesia (which includes an anesthetic machine, oxygen supply, endotracheal tubes and masks) is used in major surgical procedures.
- 4) Gas anesthetic equipment is vented to the exterior of the building. If exterior venting is not provided, a suitable alternative is in place and maintained under manufacturer's guidelines.
- 5) Anesthetic Log book is kept (may be combined with surgical log) and contains:
  - a) Client/patient i.d.
  - b) Pre-Anesthetic agent.
  - c) Anesthetic agent.
- 6) Infiltrative and intravenous anesthetic agents are available and in use as appropriate.
- 7) Respiratory monitoring is employed.
- 8) Cardiac monitoring is employed (esophageal stethoscope or ECG/oscilloscope).
- 9) Parenteral fluids are readily available.
- 10) Respiratory stimulants are readily available.
- 11) Equipment for the alleviation of hypothermia during surgery and post-operative is available.
- 12) A recovery area is provided where a patient may be frequently observed following anesthesia (need not be separate from animal compartments).
- 13) Documentation shall be provided that indicates that anesthetic equipment is inspected, calibrated and verified every 24 months by an independent third party acceptable to the Practice Inspection and Practice Standards Committee.

#### **D. DIAGNOSTIC IMAGING**

- 1) Diagnostic radiography is provided on premises.  
or
- 2) Radiographic cases are referred to another facility and there is written evidence of these referrals.
- 3) This area is separate from the room where major surgery is performed.
- 4) The equipment is registered with the ABVMA Radiation Protection Program. Current Registration No.(s)\_\_\_\_\_.
- 5) This area is free from related hazards to patients, clients and personnel.
- 6) Protective equipment includes:
  - a) Collimeter.
  - b) Protective apron.
  - c) Protective gloves with cuff.
  - d) Monitoring badges are worn and sent in regularly for analysis.
  - e) Thyroid Protector.
- 7) Radiographs are permanently labelled with exposure type marking devices.
  - a) Clinic name/date/patient file number.  
or
  - b) Clinic name/date/patient identification.
- 8) All radiographs and hard copy ultrasound, fluoroscopic images and any other diagnostic images are stored in a manner which preserves their quality and allows for retrieval.



- vii) DIN.
- viii) Direction for use.
- 8) Childproof dispensing containers are available.
- 9) Prescription pads are available.
- 10) A system for safeguarding for expiry date is in use.
- 11) Expired drugs are stored separately until removed from premises.
- 12) Adequate refrigeration is available.
- 13) Prescription (Schedule F, Part I) drugs are not maintained in areas directly accessible to the general public. Display of F-1 medications within the clinic only is permitted, provided the public has no direct physical access to the item on display.

## G.RECORDS

- 1) Clear and legible individual records are maintained for every patient.
- 2) Records contain:
  - a) Patient identification including species, age and sex. ,
  - b) Name, address and telephone number of client.
  - c) Present illness and history of the patient.
  - d) Vaccination record.
  - e) Laboratory reports including pathology, radiology histopathology, Cardiograms, etc. (as applicable).
  - f) Record of the patient's medical or surgical treatments including drugs prescribed or dispensed, strength, dosage, quantity, etc.
  - g) Final assessment of the patient.
  - h) Each entry must be dated, signed or initialed.
- 3) Adequate daily records are maintained for hospitalized animals or patients maintained on premises for more than one day.
- 4) Medical and surgical records contain sufficient information to indicate the assessment of the patient, planned treatment, and results or necropsy reports if applicable.
- 5) Records are maintained for 5 years after the last patient visit.
- 6) When files or reports are maintained in different locations, a cross indexing system which allows for prompt retrieval and intra or interfacility use is available.
- 7) Euthanasia consent forms are available and in use.
- 8) A dead animal file is maintained for 5 years.
- 9) Original fax prescription forms are maintained for 5 years.
- 10) Computerized medical records are acceptable providing they meet the same criteria as non computerized records as stated in the ABVMA regulations as well as the following:
  - a) The records are kept in a systematic manner
  - b) The records must be completed in a timely manner
  - c) The records may be made and maintained in an electronic computer system providing:
    - i) the system provides visual display of recorded information
    - ii) the system provides access to the information by the owner's and/or patient name
    - iii) the system is capable of printing the information promptly
    - iv) the system includes a password or otherwise provides reasonable protection against unauthorized access. Continuity of access to files must be ensured by making access codes available to a responsible accessible party.
    - v) the system backs up files and allows recovery of backed up files or otherwise protects against loss of, damages to and accessibility of information.

It is also suggested that the system is capable of visually displaying the recorded information of each patient in chronological order:

    - a) records the date and time for each entry of information for each patient
    - b) indicate any changes in recorded information

- c) preserves the original content of the recorded information when changed or updated
- d) is capable of being printed separately from the recorded information of each patient.
- vi) Any member who ceases to practice for any reason, or upon death their Executor shall:
  - a) retain all medical records for required period of time; or
  - b) transfer all medical records to a member who assumes responsibility for the practice, including the medical records; or
  - c) transfer all medical records to:
    - i) another member practicing in that locality, or
    - ii) a secure storage area with a person designated to allow all veterinarians reasonable access to the records; and
    - iii) shall publish a notice in the local or area newspaper indicating where the records can be accessed.

#### H. PERSONNEL AND CARE OF ANIMALS

- 1) Facilities for the proper care and containment of all hospitalized patients is provided. (i.e. kennels, runs)
- 2) Wards are clean and orderly.
- 3) Floors are of water impervious materials and easily cleaned and disinfected.
- 4) Lighting is adequate.
- 5) Ventilation is adequate.
- 6) Each patient has a separate compartment which ensures comfort and adequate ventilation.
- 7) Kennels/cages have a method for securely fastening them closed.
- 8) Kennels are sturdy enough to prevent cage movement while occupied. 5/6 sides of the cage are solid and of a water impervious material that is readily cleaned, disinfected and maintained.
- 9) Cages with barred doors have bars no farther apart than 2 inches and must be readily cleaned, disinfected and maintained.
- 10) There is a method of attaching patient identification to the compartment.
- 11) Litter trays are sufficient for the case load of cats.
  - a) They are not to be shared between currently hospitalized cases.
  - b) They are disposable or readily sanitized.
- 12) Each ward contains no more than 25 compartments.
- 13) Bags of feed and feeding utensils are stored in clean dry areas.
- 14) An adequate variety and quantity of foods (including prescription diets) and dishes are available to feed and water hospitalized patients.
- 15) The dishes and utensils are easily cleaned and sanitized or disposable.
- 16) Refrigeration for spoilable foods is available.
- 17) Adequate exercise is provided for hospitalized patients, (assuming not contraindicated for condition or species).
  - a) Animals are given:
    - 2 walks outdoors per day (animal double leashed),
    - or
    - Animals are released into an exercise yard or an area greater than 15 square feet which is cleaned between occupancy of different animals.
- 18) Runs:
  - a) Walls and floors are of water impervious material properly drained and easily cleaned.
  - b) Partitions are solid to a minimum of 4 feet high between runs.
  - c) Runs are covered adequately to keep animal contained as well as protected from the weather.
- 19) Adequate personnel is on hand to assist in the treatment of outpatients and inpatients.
- 20) Hospitalized animals are examined by a veterinarian at least once daily.
- 21) There is evidence that overnight care is provided until stabilization of post-surgical or

- critically ill patients has occurred.
- 22) Provision is made for 24 hour emergency veterinary service
    - a) By assignment of veterinarian on premises, or
    - b) By referring the caller to a staff veterinarian, or
    - c) By referring the caller to another pre-arranged specified cooperating facility or service-

#### **I. LIBRARY**

- 1) Includes:
  - a) One current and accepted veterinary reference text on:
    - i) Internal Medicine.
    - ii) Clinical Pathology.
    - iii) Surgery.
    - iv) And where applicable, radiology.
  - b) One current medical text for each of the species or classes of animals with which the veterinarian(s) are professionally involved.
- 2) Includes adequate subscriptions to professional journals (at least two refereed journals).
- 3) Includes the Veterinary Profession Act, General Regulation and By-laws.
- 4) Includes copies of the following:
  - i) The Regulations and Schedule of The Narcotic Control Act.
  - ii) Schedule F, G, and H of The Food and Drug Act.
  - iii) The Animal Protection Act.
  - iv) Compendium of Pharmaceuticals and Specialties.

#### **IV SMALL ANIMAL HOUSECALL PRACTICE:**

##### **A. GENERAL**

- 1) The practice has a fixed mailing address.
- 2) The practice has a listed telephone number.
- 3) Phone listings, and other forms of legal advertising comply with the A.V.M.A. General Regulation.
- 4) Provision is made for 24 hour emergency veterinary service:
  - a) By assignment of veterinarian on premises, or
  - b) By referring the caller to a staff veterinarian. or
  - c) By referring the caller to another pre-arranged specified cooperating facility or service.
- 5) The practice has a written agreement with one or more small animal clinics/hospitals for the provision of hospitalization, surgery and other services not provided by the house call practice.
- 6) Veterinary services are provided by the practice on the clients premises and no procedures requiring general anesthetic are performed.
- 7) The following insurance is in place:
  - a) Liability.
  - b) Malpractice.
- 8) When a veterinary practice employs an AHT who is practising in accordance with the Veterinary Profession Act, General Regulation, Section 9 & 10, the AHT must be registered in accordance with Section 8 of the Veterinary Profession Act, General Regulation. The certificate of registration from the AAAHT must be made available to the PIPS Inspector.
- 9) All lay staff who dispense production animal and equine F-2 (OTC) medications in veterinary clinics are required to pass the provincial government's Production Animal Medicine examination. The practice must provide documentation confirming the lay staff's Production Animal Medicine certification to the ABVMA Inspector. This training is also recommended for Animal Health Technologists, and lay staff in companion animal practices, although it is not a requirement.

**B. EXAMINATION FACILITIES**

- 1) Sanitized material is available to cover examination surface.
- 2) A disinfectant is available to clean examination surface.
- 3) Records are readily available.
- 4) There is adequate means to dispose of, or removal of wastes.
- 5) The following equipment is available:
  - a) Thermometer.
  - b) Stethoscope.
  - c) Ophthalmoscope/Otoscope.
  - d) Alcohol or topical disinfectant.
  - e) Examination light (e.g. Pen light).
- 6) All biomedical waste shall be stored, transported and disposed of in compliance with Provincial and Federal Legislation.

**C. SURGERY**

- 1) Autoclave (and/or gas sterilization) is in use.
- 2) Sterile gloves and suture material is available.
- 3) Surgery packs must be dated. Surgery packs must be reautoclaved prior to use if the dating extends beyond 30 days. Sterility indicators are present within each surgery pack.
- 4) Equipment kept in cold sterilization solution is available for non-sterile procedures.
- 5) All surgical equipment is kept neat, orderly and in good condition.
- 6) Emergency lighting equipment is available.
- 7) All necessary equipment and materials are available for local anesthetics, sedations etc.

**D. CLINICAL PATHOLOGY**

- 1) Clinical pathology services are provided.
- 2) There is proper equipment present for the collection of blood, urine samples, bacterial cultures and other clinical pathology specimens.
- 3) Accurate records are maintained on clinical pathology tests for individual cases.
- 4) Necropsies are performed by an outside agency.  
Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**E. PHARMACY**

- 1) Storage, safekeeping, preparation and dispensing of drugs are in accordance with Federal and Provincial Laws and ABVMA Council Guidelines and Bylaws.
- 2) There is adequate handling and storage of drugs according to the manufacturers direction.
- 3) A controlled and narcotic drug register is maintained.
- 4) Controlled and narcotic drugs are stored in a manner which protects them against loss or theft.
- 5) Dispensed drugs (excluding Schedule F, part II drugs dispensed as packaged and labelled by the manufacturer) are labelled as to:
  - i) Name of client.
  - ii) Name of drug.
  - iii) Date dispensed.
  - iv) Quantity.
  - v) Name of facility or veterinarian dispensing the drug.
  - vi) Identification of the animal(s).
  - vii) DIN.
  - viii) Directions for use.
- 6) Child proof dispensing containers are available.
- 7) Refrigeration available for biologic and other drugs requiring refrigeration.
- 8) Sterile needles and syringes, I.V. catheters and parenteral fluids are available.
- 9) Expired drugs are kept separate from other drug storage until destroyed or returned to

- the manufacturer.
- 10) A system for safeguarding for expiry dates is in use.
  - 11) Emergency kit:
    - a) Atropine.
    - b) Epinephrine.
    - c) Calcium Gluconate.
    - d) Corticosteroids.
    - e) A diuretic.
    - f) Respiratory stimulant.
    - g) Oxygen supply and resuscitation equipment.
    - h) Sterile I. V. catheters, drips, and parenteral fluids.
    - i) Dextrose.
    - j) Blood glucose evaluator.
    - k) Urinalysis sticks.
    - l) Heparin.
  - 12) Prescription (Schedule F, Part I) drugs are not maintained in areas directly accessible to the general public. Display of F-1 medications within the clinic only is permitted, provided the public has no direct physical access to the item on display.

## F. RECORDS

- 1) Patient records include:
  - a) Clients name, address and telephone number.
  - b) Identification of patient including species, age and sex.
  - c) Vaccination, illness and surgical record.
  - d) Diagnostic tests used, laboratory reports.
  - e) Diagnosis, treatments used.
  - f) Records are maintained for 5 years after the last patient visit.
- 2) A dead animal file is maintained for 5 years.
- 3) Euthanasia consent forms are available and in use.
- 4) Each entry must be dated, signed or initialed.
- 5) Original fax prescription forms are maintained for 5 years.
- 6) Computerized medical records are acceptable providing they meet the same criteria as non computerized records as stated in the ABVMA regulations as well as the following:
  - a) The records are kept in a systematic matter
  - b) The records must be completed in a timely manner
  - c) The records may be made and maintained in an electronic computer system providing:
    - i) the system provides visual display of recorded information
    - ii) the system provides access to the information by the owner's and/or patient name
    - iii) the system is capable of printing the information promptly
    - iv) the system includes a password or otherwise provides reasonable protection against unauthorized access. Continuity of access to files must be ensured by making access codes available to a responsible accessible party.
    - v) the system backs up files and allows recovery of backed up files or otherwise protects against loss of, damages to and accessibility of information.

It is also suggested that the system is capable of visually displaying the recorded information of each patient in chronological order:

    - a) records the date and time for each entry of information for each patient
    - b) indicate any changes in recorded information
    - c) preserves the original content of the recorded information when changed or updated
    - d) is capable of being printed separately from the recorded

- information of each patient.
- vi) Any member who ceases to practice for any reason, or upon death their Executor shall:
    - a) retain all medical records for required period of time; or
    - b) transfer all medical records to a member who assumes responsibility for the practice, including the medical records; or
    - c) transfer all medical records to:
      - i) another member practicing in that locality, or
      - ii) a secure storage area with a person designated to allow all veterinarians reasonable access to the records; and
      - iii) shall publish a notice in the local or area newspaper indicating where the records can be accessed.

### G. VEHICLES

- 1) The vehicle is clean, orderly and in good repair.
- 2) A portable holding compartment (kennel or cage) is available in the vehicle to permit patient transportation.
- 3) The compartment is secure and clean.

### H. LIBRARY

- 1) Includes:
  - a) One current and accepted veterinary reference text on:
    - i) Internal Medicine.
    - ii) Clinical Pathology.
    - iii) Surgery.
    - iv) And where applicable, radiology.
  - b) One current medical text for each of the species or classes of animals with which the veterinarian(s) are professionally involved.
- 2) Includes adequate subscriptions to professional journals (at least two refereed journals).
- 3) Includes the Veterinary Profession Act, General Regulation and By-laws.
- 4) Includes copies of the following:
  - i) The Regulations and Schedule of The Narcotic Control Act.
  - ii) Schedule F, G, and H of The Food and Drug Act.
  - iii) The Animal Protection Act.
  - iv) Compendium of Pharmaceuticals and Specialties.

### V SMALL ANIMAL EMERGENCY FACILITY:

A facility (or part of a facility set aside) to be specifically operated, equipped and staffed on a part-time basis for providing of emergency service. Hours of operation should be specified and are usually when most primary care facilities are not seeing patients i.e. weeknights, weekends, and holidays. Patients are transferred to their primary care veterinarian the next working day. Minimum standards of hospital/clinic plus emergency/critical care standards are required. Routine non-emergency care is specifically not performed. A doctor is in attendance at all hours of operation and sufficient staff is always available to provide timely and appropriate care. Doctors, support staff, instrumentation from medications and supplies must be sufficient to provide a level of emergency care. An open channel of communication should be established between the emergency facility and the primary care veterinarians. This includes both the transfer of information from the emergency facility, but also a regular feedback system from the referring veterinarian to maintain a good working relationship and to improve the general quality of patient care in the community.

### A. GENERAL

- 1) A clinic maintenance schedule is in evidence e.g. Changing developing tanks.
- 2) A recognized disinfectant and/or germicide is available.

- 3) Trash is disposed of safely and often so that it does not accumulate.
- 4) Exterior of building and grounds are kept clean and free of hazards.
  - a) Snow and ice in winter. rubbish and feces at all times are removed as efficiently and quickly as possible.
  - b) There is adequate exterior lighting at entrances, walkways and parking lots.
  - c) The facility is adequately Identified.
- 5) Fly control is adequate.
- 6) Rodent control is adequate.
- 7) The following insurance is in place:
  - a) Liability.
  - b) Malpractice.
- 8) The facility is free of all hazards and obstructions to traffic flow.
- 9) Fire extinguishers are available, and conform to municipal regulations.
- 10) Instructions for building evacuation and animal handling in case of fire or other emergencies is posted and familiar to staff.
- 11) Emergency phone numbers including fire, hospital and poison control centre is posted.
- 12) Phone listings, and other forms of legal advertising comply with the A.V.M.A. General Regulation.
- 13) Doors and windows shall be secured and/or self closing to prevent the escape or theft of animals.
- 14) Refrigerated storage for carcasses and body tissues is provided and readily available or disposal services for the prompt and immediate removal of the same are available and a record of service utilization is maintained.
- 15) Disposal of carcasses and body tissue is conducted according to local and provincial regulations -(The Destruction and Disposal of Dead Animals Regulation -The Livestock Diseases Act).
- 16) A functional emergency generator is in place.
- 17) When a veterinary practice employs an AHT who is practising in accordance with the Veterinary Profession Act, General Regulation, Section 9 & 10, the AHT must be registered in accordance with Section 8 of the Veterinary Profession Act, General Regulation. The certificate of registration from the AAAHT must be made available to the PIPS Inspector.
- 18) All lay staff who dispense production animal and equine F-2 (OTC) medications in veterinary clinics are required to pass the provincial government's Production Animal Medicine examination. The practice must provide documentation confirming the lay staff's Production Animal Medicine certification to the ABVMA Inspector. This training is also recommended for Animal Health Technologists, and lay staff in companion animal practices, although it is not a requirement.

## **B. FACILITY**

- 1) Reception area and restroom facilities:
  - a) Are presentable and free from hazards.
  - b) Are clean and orderly with furnishings in good repair.
  - c) Display a sign indicating animals will be treated in order of severity of medical condition rather than order of arrival.
- 2) Examination Facilities:
  - a) Is a room(s) separate from the reception area.

The following equipment, is readily available:

    - i) Examination table constructed of readily sanitized material.
    - ii) Scale.
    - iii) Stethoscope.
    - iv) Otoscope and Ophthalmoscope.
    - v) Disinfectant or alcohol.
    - vi) Sterile needles and syringes.
    - vii) Thermometer.

- viii) Examination Gloves.
- b) Is clean, orderly, well lighted with good ventilation.
- c) Is constructed of readily sanitized material.
- d) Contains covered waste receptacles or demonstrates a system by which wastes do not accumulate within the exam room, between appointments
- 3) All biomedical waste shall be stored, transported and disposed of in compliance with Provincial and Federal Legislation.
- 4)
  - a) The facility is self contained and has a solid permanent wall between it and adjacent businesses. All public entrances must meet Practice Inspection and Practice Standards Bylaws.
  - b) The facility has a separate and distinct entrance directly from the street or, if the facility is in a building containing more than one business, directly from a common lobby, hallway or mall.
  - c) The facility has, and appears to have, the practice of veterinary medicine as its primary purpose.
  - d) The signage of the facility does not present to the public that it is operated in connection with another enterprise.
  - e) Standards c) and d) do not prohibit the provision of ancillary services in the facility, which are incidental and subordinate to the professional services provided in the facility.
  - f) The facility has no direct public access to a commercial establishment.
    - i) where animals are bought or sold;
    - ii) providing animal food or other goods and services used principally by, with or for animals.
  - g) Practices that have passed PIPS inspection under the present Bylaws will be exempt from articles a) to f) inclusive above until their next regularly scheduled inspection.

### C. SURGERY

- 1) Sterile:
  - a) Aseptic technique is followed for major surgical procedures in a separate single purpose room. This room shall consist of; walls, floors and doors constructed of solid impervious material that can be easily sanitized. Major surgery is defined as
    - i) any thoracic, orthopedic or abdominal procedures or;
    - ii) any soft tissue procedures of greater than 15 minutes duration.
  - b) The surgery room is maintained in a clean and orderly fashion.
  - c) A surgery table is provided that can be readily sanitized.
  - d) Adequate lighting is provided including emergency lighting.
  - e) Caps, masks, sterile gowns and gloves are in use for major surgical procedures. Gowns, gloves, instruments, towels and drapes, are autoclaved prior to each major surgical procedure.
  - f) Sterile suture material is available and in use.
  - g) Surgery packs are prepared outside the surgery suite.
  - h) An autoclave and/or gas sterilization is in use to prepare sterile packs.
  - i) Sterility indicators are present within each surgical pack.
  - j) Surgery packs must be dated. Surgery packs must be reautoclaved prior to use if the dating extends beyond 30 days.
  - k) The preparation of the patient is conducted outside the room where major surgery is performed.
  - l) An oxygen source and means of positive ventilation is available at all times as well as endotracheal tubes with intact cuffs.
  - m) A surgery log is kept giving date, identification of patient, and procedure (may coincide with anesthetic log).
  - n) Laparotomy drapes are utilized and exclude unprepared area of skin where practical, cover the table top, side to side.

- o) Skin drapes are utilized for major surgeries where applicable.
- 2) Non-Sterile Surgery: (i.e. Dentistry and Surgical Prep. Area) Dentistry and patient preparation area.
  - a) The following equipment is available:
    - i) Clippers.
    - ii) Vacuum cleaner.
    - iii) Surgical scrub material.
    - iv) Cold sterilization solution.
    - v) Dental scalers, extractors, elevators.
    - vi) Sterile I. V. and urinary catheters.
    - vii) Sink.
- 3) Inhalation anesthesia (which includes an anesthetic machine, oxygen supply, endotracheal tubes and masks) is used in major surgical procedures.
- 4) Gas anesthetic equipment is vented to the exterior of the building. If exterior venting is not provided, a suitable alternative is in place and maintained under manufacturer's guidelines.
- 5) Anesthetic log book is kept (may be combined with surgical log) and contains:
  - a) Client/patient i.d.
  - b) Pre-Anesthetic agent.
  - c) Anesthetic agent.
- 6) Infiltrative and intravenous anesthetic agents are available and in use as appropriate.
- 7) Respiratory monitoring is employed.
- 8) Cardiac monitoring is employed (esophageal stethoscope or ECG/oscilloscope).
- 9) Parenteral fluids are readily available.
- 10) Narcotic antagonists are readily available.
- 11) Respiratory stimulants are readily available.
- 12) Equipment for the alleviation of hypothermia during surgery and post-operative is available.
- 13) A recovery area is provided where a patient may be frequently observed following anesthesia (need not be separate from animal compartments) .
- 14) Documentation shall be provided that indicates that anesthetic equipment is inspected, calibrated and verified every 24 months by an independent third party acceptable to the Practice Inspection and Practice Standards Committee.

#### **D. DIAGNOSTIC IMAGING**

- 1) Diagnostic radiography is provided on premises.
- 2) This area is separate from the room where major surgery is performed.
- 3) The equipment is registered with the ABVMA Radiation Protection Program.  
Current Registration No.(s)\_\_\_\_\_.
- 4) This area is free from related hazards to patients, clients and personnel.
- 5) Protective equipment includes:
  - a) Collimeter.
  - b) Protective apron.
  - c) Protective gloves with cuff.
  - d) Monitoring badges are worn and sent in regularly for analysis.
  - e) Thyroid Protector.
- 6) Radiographs are permanently labelled with exposure type marking devices.
  - a) Clinic name/date/patient file number.or
  - b) Clinic name/date/patient identification.
- 7) A documented Quality Assurance Program is in place, consistent with that outlined in the ABVMA's Radiation Protection Program Manual and an individual in the practice (Veterinarian or Animal Health Technologist) is identified as the Quality Control Officer.
- 8) Radiographic log is maintained which includes:
  - a) Owner/patient identification.
  - b) MAS and KV and other patient data. (optional)

- 9) A radiograph viewer is easily accessible.
- 10) Screens and cassettes are free from defects.
- 11) Radiographs are of diagnostic quality.
- 12) Radiographs are transferred with the animal to the primary care veterinarian.

#### E. CLINICAL PATHOLOGY

- 1) Equipment on the premises includes:
  - a) Microscope.
  - b) Centrifuge.
  - c) Microhematocrit.
  - d) Refractometer.
  - e) Urinalysis equipment.
  - f) Equipment for collection of blood samples, urine samples, bacterial cultures and other clinical pathology specimens.
  - g) Blood glucose evaluator.
  - h) Equipment for CBC and platelet evaluation.
- 2) Clinical pathology services are provided.  
Explain: \_\_\_\_\_

- 
- a)
    - i) Blood biochemical and seriological analysis.
    - ii) Body fluid analysis.
    - iii) Cytology.
    - iv) Microscopic fecal exam.
    - v) Bleeding times.
    - vi) B.U.N.
  - b) Specimen collection is done for:
    - i) Cultures and sensitivities.
    - ii) Necropsies.
  - c) Clear legible records are kept on the premises while a legible copy is released with the patient to the primary care veterinarian.

#### F. PHARMACY -Shall include or equivalent:

- 1) Storage, safekeeping, preparation and dispensing of drugs are in accordance with Federal and Provincial Laws and ABVMA Council Guidelines and Bylaws.
- 2) Area is clean and orderly.
- 3) Recommended drugs:
  - Dextrans
  - 5% dextrose
  - 2.5% dextrose & 0.45% saline
  - 50% dextrose in water
  - Lactated Ringer's solution
  - Mannitol
  - Potassium chloride
  - 0.9% and 5- 7.5% saline
  - Sodium bicarbonate
  - Sterile water for injection
  - Acepromazine
  - Acetylcysteine
  - Activated charcoal
  - A, D, E vitamins, injectable
  - Aminophylline
  - Amrinone
  - Antibiotics (assorted types, dosage forms)
  - Antihistamine(s)
  - Apomorphine

Ascorbic acid  
Assorted eye and ear medications  
Atropine  
B vitamins, injectable  
Butorphanol (analgesic)  
Calcium gluconate and chloride  
CaNa<sub>2</sub> EDTA  
Captopril  
Carbonic anhydrase inhibitor  
Chlorpormazine  
Desoxycorticosterone  
Dexamethasone  
Dimercaprol (other antidotes, based on type of practice caSelOad)  
Dipyrrone  
Dobutamine  
Dopamine  
Doxapram  
Emerald II (birds)  
Ensure plus  
Epinephrine  
Ethanol  
Euthanasia solution  
Fenbendazole  
Flourinef  
Flunixin meglumine  
Furosemide  
Heparin  
Hydralazine, injectable  
Hydralazine  
Inhalation anesthetic  
Isoproterenol  
Ketamine  
Lactulose  
Lidocaine  
Magnesium sulfate  
Metoclopramide  
Morphine  
Nalorphine  
Naloxone  
Neostigmine  
Neuromuscular blocking agent  
Nitroglycerin ointment  
Oxymorphone  
Oxytocin  
Pepto-Bismol  
Phenobarbital  
Phenylephrine  
Pralidoxime (organophosphate antidote)  
Prednisolone succinate  
Procainamide  
Propranolol  
Quinidine  
Sodium nitroprusside  
Sulfadimethoxine  
Thiobarbiturate  
Valium

- Verapamil
- Vinegar (for neutralization of alkali)
- Xylazine (emetic in cats)
- 4) Source of whole blood for transfusion purposes is available (either a donor(s) or stored whole blood, stored whole red blood cells and stored frozen plasma).
- 5) Narcotic and controlled drugs are stored in a manner which protects them against loss or theft.
- 6) Narcotic and controlled drug register is maintained.
- 7) Dispensed drugs (excluding schedule F, part II drugs dispensed as packaged and labelled by the manufacturer) are labelled as to:
  - i) Name of client.
  - ii) Name of drug.
  - iii) Date dispensed.
  - iv) Quantity.
  - v) Name of facility or veterinarian dispensing the drug.
  - vi) Identification of the animal(s).
  - vii) DIN.
  - viii) Direction for use.
- 8) Childproof dispensing containers are available.
- 9) Prescription pads are available.
- 10) A system for safeguarding for expiry date is in use.
- 11) Expired drugs are stored separately until removed from premises.
- 12) Adequate refrigeration is available.
- 13) Prescription (Schedule F, Part I) drugs are not maintained in areas directly accessible to the general public. Display of F-1 medications within the clinic only is permitted, provided the public has no direct physical access to the item on display.

**G. EQUIPMENT AND SUPPLIES** -Shall include or equivalent:

- 1) Ambu bag, face mask, oxygen source
- Autoclave
- Baby food
- Bags (large, heavy plastic) for handling animal remains
- Bandage, tape, and splint materials
- Bird Cage(s)
- Blender
- Chest drain units (continuous suction collection devices)
- Containers for disposal of biohazardous waste
- Cotton-tipped applicators
- Diagnostic peritoneal lavage catheters
- Disposable plastic gloves
- ECG oscilloscope monitor(s)
- ECG recorder
- Endotracheal tubes
- Enema equipment
- Fluid administration sets (including microdrip and burettes)
- Fluid infusion pump(s)
- Fluid warming chamber
- Fluorescein stain
- Freezer
- Glass slides, assorted stain preparations
- Heat block, heat lamps or circulating warm water heating blanket
- Hydrogen peroxide
- Incubator(s)
- Intravenous catheters (assorted length, gauge, type), catheter caps, extension tubing
- IV stands

Laryngoscope and blades  
Oxygen cage(s)  
Paper coveralls for isolation  
Pediatric feeding tubes  
Petrolatum  
Portable cage(s)  
Prescription diets  
Refrigerator  
Reptile Tank(s)  
Respirator(s)  
Sandbags and wedges for positioning  
Schirmer tear test strips  
Sterile aqueous lubricant  
Stomach tubes & pump  
Suction apparatus & catheters  
Surgical scrub and disinfectant solutions (chlorhexidine, iodinated)  
Surgical instrument packs (general, orthopedic, laminectomy, ophthalmology, chest, laceration)  
Suture material (assorted sizes)  
Syringes, needles (assorted sizes)  
Syringes, 60 cc catheter-tip  
Temperature and pulse monitors  
Thermometers  
Three-way stopcocks  
Tongue blades  
Tonometer  
Tracheostomy tubes  
Trocar chest drain cannulas (assorted sizes)  
Urinary catheters (including Foley catheters)  
Urine collection bags (for use with indwelling urinary catheters)  
Wood's lamp

## H. RECORDS

- 1) Clear and legible individual records are maintained for every patient.
  - a) Accurate and complete.
  - b) Records parameters to allow accurate and quick assessment of trends in critical patients.
  - c) Discharge forms are in triplicate. Copies for:
    - i) Medical Records.
    - ii) Client.
    - iii) Primary Care Veterinarian (mailed if necessary).
- 2) Records contain:
  - a) Patient identification including species, age and sex.
  - b) Name, address and telephone number of client.
  - c) Present illness and history of the patient.
  - d) Vaccination record.
  - e) Laboratory reports including pathology, radiology histopathology, cardiograms, etc. (as applicable).
  - f) Record of the patients medical or surgical treatments including drugs prescribed or dispensed, strength, dosage, quantity, etc.
  - g) Final assessment of the patient.
  - h) Each record must be dated, signed or initialed.
- 3) Adequate daily records are maintained for hospitalized animals or patients maintained on premises for more than one day.
- 4) Records are maintained for 5 years after the last patient visit.
- 5) Euthanasia consent forms are available and in use.
- 6) A dead animal file is maintained for 5 years.

- 7) Computerized medical records are acceptable providing they meet the same criteria as non computerized records as stated in the ABVMA regulations as well as the following:
- a) The records are kept in a systematic matter
  - b) The records must be completed in a timely manner
  - c) The records may be made and maintained in an electronic computer system providing:
    - i) the system provides visual display of recorded information
    - ii) the system provides access to the information by the owner's and/or patient name
    - iii) the system is capable of printing the information promptly
    - iv) the system includes a password or otherwise provides reasonable protection against unauthorized access. Continuity of access to files must be ensured by making access codes available to a responsible accessible party.
    - v) the system backs up files and allows recovery of backed up files or otherwise protects against loss of, damages to and accessibility of information.

It is also suggested that the system is capable of visually displaying the recorded information of each patient in chronological order:

    - a) records the date and time for each entry of information for each patient
    - b) indicate any changes in recorded information
    - c) preserves the original content of the recorded information when changed or updated
    - d) is capable of being printed separately from the recorded information of each patient.
  - vi) Any member who ceases to practice for any reason, or upon death their Executor shall:
    - a) retain all medical records for required period of time; or
    - b) transfer all medical records to a member who assumes responsibility for the practice, including the medical records; or
    - c) transfer all medical records to:
      - i) another member practicing in that locality, or
      - ii) a secure storage area with a person designated to allow all veterinarians reasonable access to the records; and
      - iii) shall publish a notice in the local or area newspaper indicating where the records can be accessed.

## I. PERSONNEL AND CARE OF ANIMALS

- 1) Facilities for the proper care and containment of all hospitalized patients is provided. (i.e. kennels, runs)
- 2) Wards are clean and orderly.
- 3) Floors are of water impervious material and easily cleaned and disinfected.
- 4) Lighting is adequate.
- 5) Ventilation is adequate.
- 6) Each patient has a separate compartment which ensures comfort and adequate ventilation.
- 7) Kennels/cages have a method for securely fastening them closed.
- 8) Kennels are sturdy enough to prevent cage movement while occupied, 5/6 sides of the cage are solid and of a water impervious material that is readily cleaned, disinfected and maintained.
- 9) Cages with barred doors have bars no farther apart than 2 inches and must be readily cleaned, disinfected and maintained.
- 10) There is a method of attaching patient identification to the compartment.
- 11) Litter trays are sufficient for the caseload of cats.
  - a) They are not to be shared between currently hospitalized cases.

- b) They are disposable or readily sanitized.
- 12) Each ward contains no more than 25 compartments.
- 13) Bags of feed and feeding utensils are stored in clean dry areas.
- 14) An adequate variety and quantity of foods (including prescription diets) and dishes are available to feed and water hospitalized patients.
- 15) The dishes and utensils are easily cleaned and sanitized or disposable.
- 16) Refrigeration for spoilable foods is available.
- 17) Adequate exercise is provided for hospitalized patients, (assuming not contraindicated for condition or species).
  - a) Animals are given:
    - 2 walks outdoors per day (animal double leashed),
    - or
    - Animals are released into an exercise yard or an area greater than 15 square feet which is cleaned between occupancy of different animals.
- 18) Runs:
  - a) Walls and floors are of water impervious material properly drained and easily cleaned.
  - b) Partitions are solid to a minimum of 4 feet high between runs.
  - c) Runs are covered adequately to keep animal contained as well as protected from the weather.
- 19) A registered Veterinarian must be present and on duty during hours of operation. Suitable qualified lay staff must be available to assist.

## J. LIBRARY

- 1) Includes:
  - a) One current and accepted veterinary reference text on:
    - i) Internal Medicine.
    - ii) Clinical Pathology.
    - iii) Surgery.
    - iv) Radiology.
    - v) Emergency medicine.
  - b) One current medical text for each of the species or classes of animals which the emergency clinic treats.
- 2) Includes adequate subscriptions to professional journals (at least two refereed journals).
- 3) Includes the Veterinary Profession Act, General Regulation and By-laws.
- 4) Includes copies of the following:
  - i) The Regulations and Schedule of The Narcotic Control Act.
  - ii) Schedule F, G, and H of The Food and Drug Act.
  - iii) The Animal Protection Act.
  - iv) Compendium of Pharmaceuticals and Specialties.

## VI EMBRYO TRANSFER FACILITY:

### A. GENERAL

- 1) Phone listings, and other forms of legal advertising comply with the ABVMA General Regulation.
- 2) The practice of embryo transfer is performed in accordance with the Province of Alberta Artificial Insemination of Domestic Animals Act and Regulations.
- 3) The following insurance is in place:
  - a) Liability.
  - b) Malpractice.
- 4) When a veterinary practice employs an AHT who is practising in accordance with the Veterinary Profession Act, General Regulation, Section 9 & 10, the AHT must be registered in accordance with Section 8 of the Veterinary Profession Act, General Regulation. The certificate of registration from the AAAHT must be made available to the PIPS Inspector.

- 5) All lay staff who dispense production animal and equine F-2 (OTC) medications in veterinary clinics are required to pass the provincial government's Production Animal Medicine examination. The practice must provide documentation confirming the lay staff's Production Animal Medicine certification to the ABVMA Inspector. This training is also recommended for Animal Health Technologists, and lay staff in companion animal practices, although it is not a requirement.

## B. FACILITY

- 1) Building is of good construction and permanent in nature with:
  - a) Adequate heating.
  - b) Adequate lighting.
  - c) Adequate ventilation and screening.
- 2) Reception area and restroom facilities are:
  - a) Presentable and free from hazards.
  - b) Clean and orderly with furniture in good repair.
- 3) Examination and treatment areas are clean and orderly with:
  - a) Running water.
  - b) Adequate drainage.
  - c) Appropriate cleaning equipment and supplies.
  - d) Covered waste receptacle.
  - e) Impervious surfaces. (Easily cleaned).
  - f) Headgate and chute system are adequate for restraint of cattle (required only if doing in clinic/hospital work on cattle).
- 4) There is an unloading chute with a ramp in good repair.
- 5) Parking is adequate.
- 6) There is adequate cupboard space for storage of drugs, equipment, cleaning materials, etc.
- 7) All areas inside and outside appear clean and orderly.
- 8) The following equipment is owned and in routine use:
  - a) Embryo recovery, handling and transfer equipment is available in adequate quantities.
  - b) Sterile needles, syringes and I.V. catheters are available.
  - c) Parenteral fluids are available in adequate quantities.
  - d) International Embryo Transfer Society: Embryo washing procedures are in place using sterile new disposable washing plates.
  - e) Proper Embryo washing fluids in sufficient quantity.
  - f) Microscope capable of 50 times magnification.
  - g) Electronically controlled Embryo freezer.
  - h) Liquid Nitrogen tanks.
- 9) Adequate fire extinguisher(s) are present and in working order.
- 10) Refuse is stored in closed containers.
- 11) All areas are adequately ventilated and free of offensive odors.
- 12) Fly control is adequate.
- 13) Rodent control is adequate.
- 14) All biomedical waste shall be stored, transported and disposed of in compliance with Provincial and Federal Legislation.
- 15)
  - a) The facility is self contained and has a solid permanent wall between it and adjacent businesses. All public entrances must meet Practice Inspection and Practice Standards Bylaws.
  - b) The facility has a separate and distinct entrance directly from the street or, if the facility is in a building containing more than one business, directly from a common lobby, hallway or mall.
  - c) The facility has, and appears to have, the practice of veterinary medicine as its primary purpose.
  - d) The signage of the facility does not present to the public that it is operated in connection with another enterprise.
  - e) Standards c) and d) do not prohibit the provision of ancillary services in the

- facility, which are incidental and subordinate to the professional services provided in the facility.
- f) The facility has no direct public access to a commercial establishment.
    - i) where animals are bought or sold;
    - ii) providing animal food or other goods and services used principally by, with or for animals.
  - g) Practices that have passed PIPS inspection under the present Bylaws will be exempt from articles a) to f) inclusive above until their next regularly scheduled inspection.

**C. SURGERY** -(If surgical techniques are performed)

- 1) Autoclave (and/or gas sterilization) is in use.
- 2) Stethoscope.
- 3) Thermometer.
- 4) Sterile equipment (instruments and drapes) for at least two surgeries is on hand at all times.
- 5) Major surgeries are carried out using aseptic techniques appropriate for the procedure.
- 6) Sterility indicators are present within each surgery pack.
- 7) Surgery packs must be dated. Surgery packs must be reautoclaved prior to use if the dating extends beyond 30 days.
- 8) Masks, caps and sterile gloves and gowns are available.
- 9) Emergency lighting is in working order.
- 10) Equipment in cold sterilization is available for non-sterile procedures.
- 11) Gas anesthetic equipment is vented to the exterior of the building. If exterior venting is not provided, a suitable alternative is in place and maintained under manufacturer's guidelines.

**D. PHARMACY**

- 1) Storage, safekeeping, preparation and dispensing of drugs are in accordance with Federal and Provincial laws and ABVMA Council Guidelines and Bylaws.
- 2) Refrigeration is adequate in all respects.
- 3) All drugs are stored according to manufacturers directions.
- 4) Narcotic and controlled drug register is maintained.
- 5) Narcotic and controlled drugs are stored in a manner that protects them against loss or theft.
- 6) Dispensed drugs (excluding Schedule F, Part II drugs dispensed as packaged and labeled by the manufacturer) are labeled as to:
  - a) Name of client.
  - b) Name of drug.
  - c) Date dispensed.
  - d) Quantity.
  - e) Name of facility or veterinarian dispensing the drug.
  - f) Identification of the animal(s).
  - g) DIN.
  - h) Direction for use.
- 7) Adequate records (e.g. itemized receipts) are kept of all Schedule F, Part I drugs.
- 8) Expired drugs are kept separate prior to return to manufacturer.
- 9) A system of safeguarding for expiry date is in use.
- 10) Emergency drug kit is available and contains: Atropine, Epinephrine, Calcium Gluconate, Respiratory Stimulant, Corticosteroids, needles and syringes.
- 11) Prescriptions contain a warning of the required withdrawal period of the medication used for food producing animals.
- 12) Prescription (Schedule F, Part I) drugs are not maintained in areas directly accessible to the general public. Display of F-1 medications within the clinic only is permitted, provided the public has no direct physical access to the item on display.

**E. RECORDS**

- 1) Adequate records are maintained on all cases. Records of donor and recipient animals contain:
  - a) Client's name, address and telephone number.
  - b) Identification of patient include breed & age.
  - c) History.
  - d) Identification of sires used.
  - e) Detailed superovulation schedule including drugs used and lot number.
  - f) Number of embryos produced by donor.
  - g) Identification of embryos corresponds to the International Embryo Transfer Society standardized system.
- 2) Records are retained for at least five years.
- 3) Original fax prescription forms are maintained for 5 years.
- 4) Computerized medical records are acceptable providing they meet the same criteria as non computerized records as stated in the ABVMA regulations as well as the following:
  - a) The records are kept in a systematic matter
  - b) The records must be completed in a timely manner
  - c) The records may be made and maintained in an electronic computer system providing:
    - i) the system provides visual display of recorded information
    - ii) the system provides access to the information by the owner's and/or patient name
    - iii) the system is capable of printing the information promptly
    - iv) the system includes a password or otherwise provides reasonable protection against unauthorized access. Continuity of access to files must be ensured by making access codes available to a responsible accessible party.
    - v) the system backs up files and allows recovery of backed up files or otherwise protects against loss of, damages to and accessibility of information.  
It is also suggested that the system is capable of visually displaying the recorded information of each patient in chronological order:
      - a) records the date and time for each entry of information for each patient
      - b) indicate any changes in recorded information
      - c) preserves the original content of the recorded information when changed or updated
      - d) is capable of being printed separately from the recorded information of each patient.
    - vi) Any member who ceases to practice for any reason, or upon death their Executor shall:
      - a) retain all medical records for required period of time; or
      - b) transfer all medical records to a member who assumes responsibility for the practice, including the medical records; or
      - c) transfer all medical records to:
        - i) another member practicing in that locality, or
        - ii) a secure storage area with a person designated to allow all veterinarians reasonable access to the records; and
        - iii) shall publish a notice in the local or area newspaper indicating where the records can be accessed.

**F. PERSONNEL AND CARE OF ANIMALS**

- 1) Provision is made for 24 hour emergency veterinary service:
  - a) By assignment of veterinarian on premises, or
  - b) By referring the caller to a staff veterinarian, or
  - c) By referring the caller to another pre-arranged specified cooperating facility or service.

- 2) Practice is directed and supervised by a registered veterinarian.
- 3) Course of treatment of all donor and recipient animals is determined by a veterinarian.
- 4) All personnel present a neat and clean appearance.

#### **G. LIBRARY**

- 1) Includes:
  - a) One current and accepted veterinary text on:
    - i) Reproductive Endocrinology.
    - ii) Theriogenology.
    - iii) Surgery.
    - iv) Emergency Medicine.
  - b) One current medical text for each of the species or classes of animals with which the veterinarian(s) are professionally involved.
- 2) Includes adequate subscriptions to applicable professional journals (at least 2 refereed journals).
- 3) Includes the Veterinary Profession Act, General Regulation and Bylaws.
- 4) Includes copies of the following:
  - i) The Regulation and Schedule of The Narcotic Control Act.
  - ii) Schedule F, G & H of The Food and Drug Act.
  - iii) The Animal Protection Act.
  - iv) The Production Animal Medicine Regulation.
  - v) The Compendium of Medicating Ingredient Brochures.
  - vi) Compendium of Pharmaceuticals & Specialties.

#### **VII EMBRYO TRANSFER AMBULATORY PRACTICE:**

##### **A. GENERAL**

- 1) The practice has a fixed mailing address.
- 2) The practice has a listed telephone number.
- 3) Phone listings and other forms of legal advertising comply with the ABVMA General Regulation.
- 4) Provision is made for 24 hour emergency veterinary service:
  - a) By assignment of veterinarian on premises, or
  - b) By referring the caller to a staff veterinarian, or
  - c) By referring the caller to another pre-arranged specified cooperating facility or service.
- 5) The practice has an agreement with one or more animal clinics/hospitals for the provision of hospitalization, surgery and other services not provided by the ambulatory practice.  
Explain: \_\_\_\_\_  
\_\_\_\_\_
- 6) The following insurance is in place:
  - a) Liability.
  - b) Malpractice.
- 7) The practice of embryo transfer is performed in accordance with the Province of Alberta Artificial Insemination of Domestic Animals Act and Regulations.
- 8) When a veterinary practice employs an AHT who is practising in accordance with the Veterinary Profession Act, General Regulation, Section 9 & 10, the AHT must be registered in accordance with Section 8 of the Veterinary Profession Act, General Regulation. The certificate of registration from the AAAHT must be made available to the PIPS Inspector.
- 9) All lay staff who dispense production animal and equine F-2 (OTC) medications in veterinary clinics are required to pass the provincial government's Production Animal Medicine examination. The practice must provide documentation confirming the lay staff's Production Animal Medicine certification to the ABVMA Inspector. This training is

also recommended for Animal Health Technologists, and lay staff in companion animal practices, although it is not a requirement.

**B. SURGERY** - (If surgical techniques are performed)

- 1) Autoclave (and/or gas sterilization) is in use.
- 2) Stethoscope.
- 3) Thermometer.
- 4) Sterile equipment (instruments and drapes) for at least two surgeries is on hand at all times.
- 5) Major surgeries are carried out using aseptic techniques appropriate for the procedure.
- 6) Sterility indicators are present within each surgery pack.
- 7) Surgery packs must be dated. Surgery packs must be reautoclaved prior to use if the dating extends beyond 30 days.
- 8) Masks, caps and sterile gloves and gowns are available.
- 9) Equipment in cold sterilization is available for non-sterile procedures.
- 10) All necessary equipment and materials are available for local anesthetics, sedations, epidurals and intravenous anesthesia.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. PHARMACY**

- 1) Storage, safekeeping, preparation and dispensing of drugs are in accordance with Federal and Provincial Laws and ABVMA Council Guidelines and Bylaws.
- 2) Refrigeration is adequate in all respects.
- 3) All drugs are stored according to manufacturers directions.
- 4) Narcotic and controlled drug register is maintained.
- 5) Narcotic and controlled drugs are stored in a manner which protects them against loss or theft.
- 6) Dispensed drugs (excluding Schedule F, Part II drugs dispensed as packaged and labeled by the manufacturer) are labeled as to:
  - i) Name of client.
  - ii) Name of drug.
  - iii) Date dispensed.
  - iv) Quantity
  - v) Name of facility or veterinarian dispensing the drug.
  - vi) Identification of the animal(s).
  - vii) DIN.
  - viii) Direction for use.
- 7) Adequate record (e.g. itemized receipts) are kept of all Schedule F, Part I drugs.
- 8) Expired drugs are kept separate prior to return to manufacturer.
- 9) A system for safeguarding for expiry date is in use.
- 10) Emergency drug kit is available and contains: Atropine, Epinephrine, Calcium Gluconate, Respiratory Stimulant, Corticosteroids, needles and syringes.
- 11) Sterile needles and syringes, I. V. catheters and parenteral fluids are available.
- 12) Prescriptions contain a warning of the required withdrawal period of the medication used for food producing animals.
- 13) Prescription (Schedule F, Part I) drugs are not maintained in areas directly accessible to the general public. Display of F-1 medications within the clinic only is permitted, provided the public has no direct physical access to the item on display.

**D. RECORDS**

- 1) Adequate records are maintained on all cases. Records of donor and recipient animals contain:
  - a) Client's name, address and telephone number.
  - b) Identification of patient include breed & age.

- c) History.
  - d) Identification of sires used.
  - e) Detailed superovulation schedule including drugs used and lot number.
  - f) Number of embryos produced by donor.
  - g) Identification of embryos corresponds to the International Embryo Transfer Society standardized system.
- 2) Records are retained for at least five years from the last visit.
  - 3) Computerized medical records are acceptable providing they meet the same criteria as non computerized records as stated in the ABVMA regulations as well as the following:
    - a) The records are kept in a systematic matter
    - b) The records must be completed in a timely manner
    - c) The records may be made and maintained in an electronic computer system providing:
      - i) the system provides visual display of recorded information
      - ii) the system provides access to the information by the owner's and/or patient name
      - iii) the system is capable of printing the information promptly
      - iv) the system includes a password or otherwise provides reasonable protection against unauthorized access. Continuity of access to files must be ensured by making access codes available to a responsible accessible party.
      - v) the system backs up files and allows recovery of backed up files or otherwise protects against loss of, damages to and accessibility of information.

It is also suggested that the system is capable of visually displaying the recorded information of each patient in chronological order:

      - a) records the date and time for each entry of information for each patient
      - b) indicate any changes in recorded information
      - c) preserves the original content of the recorded information when changed or updated
      - d) is capable of being printed separately from the recorded information of each patient.
    - vi) Any member who ceases to practice for any reason, or upon death their Executor shall:
      - a) retain all medical records for required period of time; or
      - b) transfer all medical records to a member who assumes responsibility for the practice, including the medical records; or
      - c) transfer all medical records to:
        - i) another member practicing in that locality, or
        - ii) a secure storage area with a person designated to allow all veterinarians reasonable access to the records; and
        - iii) shall publish a notice in the local or area newspaper indicating where the records can be accessed.

#### **E. VEHICLES & EQUIPMENT**

- 1) The vehicle is clean, orderly and in good repair.
- 2) Proper and adequate equipment is available including:
  - a) Embryo recovery, handling and transfer equipment is available in adequate quantities.
  - b) Sterile disposable needles and syringes are available.
  - c) Microscope capable of 50 times magnification.
  - d) Embryo washing fluids in sufficient quantities.
  - e) Liquid Nitrogen tanks.
  - f) Electronically Controlled Embryo Freezer.
- 3) Equipment is clean, neat and in good repair.
- 4) Clean coveralls or outer garments are available for each call.

- 5) Footwear is available, that can be cleaned and disinfected on the premises after each professional call.
- 6) Refuse is stored in closed containers.
- 7) All biomedical waste shall be stored, transported and disposed of in compliance with Provincial and Federal Legislation.

#### **F. LIBRARY**

- 1) Includes:
  - a) One current and accepted veterinary text on:
    - i) Reproductive Endocrinology.
    - ii) Theriogenology.
    - iii) Surgery.
    - iv) Emergency Medicine.
  - b) One current medical text for each of the species or classes of animals with which the veterinarian(s) are professionally involved.
- 2) Includes adequate subscriptions to applicable professional journals (at least 2 refereed journals).
- 3) Includes the Veterinary Profession Act, General Regulation and Bylaws.
- 4) Includes copies of the following:
  - i) The Regulation and Schedule of The Narcotic Control Act.
  - ii) Schedule F, G & H of The Food and Drug Act.
  - iii) The Animal Protection Act.
  - iv) The Production Animal Medicine Regulation.
  - v) The Compendium of Medicating Ingredient Brochures.
  - vi) Compendium of Pharmaceuticals & Specialties.

#### **VIII LARGE ANIMAL CONSULTATIVE PRACTICE:**

##### **A. GENERAL**

- 1) The practice has a fixed mailing address.
- 2) The practice has a listed telephone number.
- 3) Phone listing and other forms of legal advertising comply with the ABVMA General Regulation.
- 4) Provision is made for 24 hour emergency veterinary service:
  - a) By assignment of veterinarian on premises, or
  - b) By referring the caller to a staff veterinarian, or
  - c) By referring the caller to another pre-arranged specified cooperating facility or service.
- 5) The following insurance is in place:
  - a) Liability.
  - b) Malpractice.
- 6) When a veterinary practice employs an AHT who is practising in accordance with the Veterinary Profession Act, General Regulation, Section 9 & 10, the AHT must be registered in accordance with Section 8 of the Veterinary Profession Act, General Regulation. The certificate of registration from the AAAHT must be made available to the PIPS Inspector.
- 7) All lay staff who dispense production animal and equine F-2 (OTC) medications in veterinary clinics are required to pass the provincial government's Production Animal Medicine examination. The practice must provide documentation confirming the lay staff's Production Animal Medicine certification to the ABVMA Inspector. This training is also recommended for Animal Health Technologists, and lay staff in companion animal practices, although it is not a requirement.

##### **B. FACILITY** (If applicable)

- 1) Building is of good construction and permanent in nature with:
  - a) Adequate heating.
  - b) Adequate lighting.

- c) Adequate ventilation and screening.
- 2) Reception area and restroom facilities are:
  - a) Presentable and free from hazards.
  - b) Clean and orderly with furnishings in good repair.
- 3) Parking is adequate.
- 4) There is adequate cupboard space for storage of drugs, equipment, cleaning materials, etc.
- 5) All areas inside and outside appear clean and orderly.
- 6) Adequate fire extinguisher(s) are present and in working order.
- 7) Refuse is stored in closed containers.
- 8) All areas are adequately ventilated and free of offensive odors.
- 9) Fly control is adequate.
- 10) Rodent control is adequate.
- 11) All biomedical waste shall be stored, transported and disposed of in compliance with Provincial and Federal Legislation.
- 12) a) The facility is self contained and has a solid permanent wall between it and adjacent businesses. All public entrances must meet Practice Inspection and Practice Standards Bylaws.
- b) The facility has a separate and distinct entrance directly from the street or, if the facility is in a building containing more than one business, directly from a common lobby, hallway or mall.
- c) The facility has, and appears to have, the practice of veterinary medicine as its primary purpose.
- d) The signage of the facility does not present to the public that it is operated in connection with another enterprise.
- e) Standards c) and d) do not prohibit the provision of ancillary services in the facility, which are incidental and subordinate to the professional services provided in the facility.
- f) The facility has no direct public access to a commercial establishment.
  - i) where animals are bought or sold;
  - ii) providing animal food or other goods and services used principally by, with or for animals.
- g) Practices that have passed PIPS inspection under the present Bylaws will be exempt from articles a) to f) inclusive above until their next regularly scheduled inspection.

**C. CLINICAL PATHOLOGY**

- 1) Clinical Pathology services are provided.  
Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2) There is proper equipment present for the collection of blood, urine samples, bacterial cultures and other clinical pathology or necropsy specimens.
- 3) Accurate records are maintained on clinical pathology tests and necropsy findings for individual cases.
- 4) Necropsies are performed. If by an outside agency describe.  
Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. PHARMACY**

- 1) Storage, safekeeping, preparation and dispensing of drugs are in accordance with Federal and Provincial Laws and ABVMA Council Guidelines and Bylaws.
- 2) Refrigeration is adequate in all respects.
- 3) All drugs are stored according to manufacturers directions.
- 4) Narcotic and controlled drug register is maintained.
- 5) Narcotic and controlled drugs are stored in a manner which protects them against loss or

- theft.
- 6) Dispensed drugs (excluding Schedule F, Part II drugs dispensed as packaged and labeled by the manufacturer) are labeled as to:
    - i) Name of client.
    - ii) Name of drug.
    - iii) Date dispensed.
    - iv) Quantity.
    - v) Name of facility or veterinarian dispensing the drug.
    - vi) Identification of the animal(s).
    - vii) DIN.
    - viii) Directions for use.
  - 7) Adequate record(s) are kept of all Schedule F, Part I drugs.
  - 8) Expired drugs are kept separate prior to disposal.
  - 9) A system for safeguarding for expiry date is in use.
  - 10) All retailing of pharmaceuticals and biologicals (including prescriptions for feed additives) requires the establishment of the veterinarian-client relationship and a medical record.
  - 11) Prescriptions contain a warning of the required withdrawal period of the medication used for food producing animals.
  - 12) Prescription (Schedule F, Part I) drugs are not maintained in areas directly accessible to the general public. Display of F-1 medications within the clinic only is permitted, provided the public has no direct physical access to the item on display.

#### **E. RECORDS**

- 1) Records for Large Animals shall be clear, legible and retrievable and shall be maintained on either a herd or individual basis.
- 2) Records contain:
  - a) Animal(s) identification (i.e. tag no., lot no., pen no., age, markings, sex, species).
  - b) Name, address and telephone number of the client.
  - c) Presenting history and symptoms of the individual, group or herd (flock).
  - d) Vaccination status of the individual or herd (flock).
  - e) Laboratory reports including clinical pathology and necropsy findings.
  - f) Record of the assessment of the individual, group or herd (flock) documenting:
    - i) Physical visitation of the production site.
    - ii) Verbal (when practical) or written communication with the owner.
    - iii) Sufficient information to indicate the assessment of the individual or herd, planned treatment and results or necropsy reports if applicable.
    - iv) Written protocol documenting drugs prescribed or dispensed including strength, dosage, quantity precautions, withdrawal times, etc.
- 3) Euthanasia forms or equivalent are available (optional use).
- 4) Records are maintained for 5 years.
- 5) Consultation report is provided to the client following visitation to the production site within 30 days of the visit.
- 6) Original fax prescription forms are maintained for 5 years.
- 7) Computerized medical records are acceptable providing they meet the same criteria as non computerized records as stated in the ABVMA regulations as well as the following:
  - a) The records are kept in a systematic matter
  - b) The records must be completed in a timely manner
  - c) The records may be made and maintained in an electronic computer system providing:
    - i) the system provides visual display of recorded information
    - ii) the system provides access to the information by the owner's and/or patient name
    - iii) the system is capable of printing the information promptly
    - iv) the system includes a password or otherwise provides reasonable protection against unauthorized access. Continuity of access to files must be ensured by making access codes available to a responsible

- accessible party.
- v) the system backs up files and allows recovery of backed up files or otherwise protects against loss of, damages to and accessibility of information.
- It is also suggested that the system is capable of visually displaying the recorded information of each patient in chronological order:
- a) records the date and time for each entry of information for each patient
  - b) indicate any changes in recorded information
  - c) preserves the original content of the recorded information when changed or updated
  - d) is capable of being printed separately from the recorded information of each patient.
- vi) Any member who ceases to practice for any reason, or upon death their Executor shall:
- a) retain all medical records for required period of time; or
  - b) transfer all medical records to a member who assumes responsibility for the practice, including the medical records; or
  - c) transfer all medical records to:
    - i) another member practicing in that locality, or
    - ii) a secure storage area with a person designated to allow all veterinarians reasonable access to the records; and
    - iii) shall publish a notice in the local or area newspaper indicating where the records can be accessed.

## **F. VEHICLES & EQUIPMENT**

- 1) The vehicle is clean, orderly and in good repair.
- 2) Proper and adequate equipment is carried for herd, flock diagnosis or treatment.
- 3) Equipment is clean, neat and in good repair.
- 4) Clean overalls, or outer garments are available for each call.
- 5) Footwear is available, that can be cleaned and disinfected on the premises after each professional call.
- 6) Refuse is stored in closed containers.
- 7) Refrigeration of drugs is adequate.

## **G. LIBRARY**

- 1) Includes appropriate reference material for a consultative practice.
  - a) Material must be current and contain accepted veterinary reference text(s) for each of the species or classes of animals which the veterinarian(s) are professionally involved.
  - b) Include subscriptions to professional journals (at least 2 refereed journals).
- 2) Includes the Veterinary Profession Act, General Regulation and Bylaws.
- 3) include copies of the following:
  - i) The Regulations and Schedule of the Narcotic Control Act.
  - ii) Schedule F, G and H of the Food and Drug Act.
  - iii) The Animal Protection Act.
  - iv) The Production Animal Medicine Regulation.
  - v) The Compendium of Medicating Ingredient Brochures.
  - vi) Compendium of Pharmaceuticals and Specialties.

## **IX PRIVATE DIAGNOSTIC LABORATORY:**

### **A. GENERAL**

- 1) A facility maintenance schedule is in evidence.
- 2) A recognized disinfectant and/or germicide is available.
- 3) Trash is disposed of safely and often so that it does not accumulate.
- 4) Exterior of building and grounds are kept clean and free of hazards.

- a) Snow and ice in winter is removed as quickly as possible.
- b) There is adequate exterior lighting at entrances, walkways and parking lots.
- c) The facility is adequately identified.
- 5) Fly control is adequate.
- 6) Rodent control is adequate.
- 7) The following insurance is in place:
  - a) Liability.
  - b) Malpractice.
- 8) The facility is free of all hazards and obstructions to traffic flow.
- 9) Fire extinguishers are available, and conform to municipal regulations.
- 10) Instructions for building evacuation and animal handling in case of fire or other emergencies is posted and familiar to staff.
- 11) Emergency phone numbers including fire, hospital and poison control centre are posted.
- 12) Doors and windows shall be secured and/or self closing.
- 13) Refrigeration storage for carcasses and body tissues is provided and readily available or disposal services for the prompt and immediate removal of the same are available.
- 14) Disposal of carcasses and body tissue is conducted according to local and provincial regulations -(The Destruction and Disposal of Dead Animals Regulation -The Livestock Diseases Act).
- 15) Phone listings, and other forms of legal advertising comply with the ABVMA General Regulation.
- 16) Practise is directed and supervised by a registered veterinarian.
- 17) All personnel present a neat and clean appearance.

## B. FACILITY

- 1) Building is of good construction and permanent in nature.
  - a) Adequate heating.
  - b) Adequate lighting.
  - a) Adequate ventilation and screening.
- 2) Reception area and restroom facilities are:
  - a) Presentable and free from hazards.
  - b) Clean and orderly with furnishings in good repair.
- 3) Post Mortem and Laboratory areas are clean and orderly with:
  - a) Running water.
  - b) Adequate drainage.
  - c) Appropriate cleaning equipment and supplies.
  - d) Covered waste receptacle.
  - e) Impervious surfaces (easily cleaned).
- 4) There is an unloading dock or other means of unloading large carcasses, for laboratories involved in anatomic pathology on large animals.
- 5) Parking is adequate.
- 6) There is adequate cupboard space for storage of equipment, cleaning materials, etc.
- 7) All areas inside and outside appear clean and orderly.
- 8) Appropriate equipment and facilities are available for various tests to be run.
- 9) All areas are adequately ventilated and free of offensive odors.
- 10) Measures are in place to protect against zoonotic diseases.
- 11) All biomedical waste shall be stored, transported and disposed of in compliance with Provincial and Federal Legislation.
- 12)
  - a) The facility is self contained and has a solid permanent wall between it and adjacent businesses. All public entrances must meet Practice Inspection and Practice Standards Bylaws.
  - b) The facility has a separate and distinct entrance directly from the street or, if the facility is in a building containing more than one business, directly from a common lobby, hallway or mall.
  - c) The facility has, and appears to have, the practice of veterinary medicine as its

- d) primary purpose.  
The signage of the facility does not present to the public that it is operated in connection with another enterprise.
- e) Standards c) and d) do not prohibit the provision of ancillary services in the facility, which are incidental and subordinate to the professional services provided in the facility.
- f) The facility has no direct public access to a commercial establishment.
  - i) where animals are bought or sold;
  - ii) providing animal food or other goods and services used principally by, with or for animals.
- g) Practices that have passed PIPS inspection under the present Bylaws will be exempt from articles a) to f) inclusive above until their next regularly scheduled inspection.

### C. RECORDS

- 1) Records are maintained on all cases including:
  - a) Specimen identification
  - b) Specimen entry and tracking
  - c) System to easily retrieve results.
- 2) Laboratory records are maintained for a reasonable time by the laboratory. For government regulated tests, records are to be maintained for the time period required by the government. The laboratory results will be incorporated into the medical records of the submitting veterinary clinic where they will be maintained for five years.
- 3) Original fax prescription forms are maintained for 5 years.
- 4) Computerized medical records are acceptable providing they meet the same criteria as non computerized records as stated in the ABVMA regulations as well as the following:
  - a) The records are kept in a systematic matter
  - b) The records must be completed in a timely manner
  - c) The records may be made and maintained in an electronic computer system providing:
    - i) the system provides visual display of recorded information
    - ii) the system provides access to the information by the owner's and/or patient name
    - iii) the system is capable of printing the information promptly
    - iv) the system includes a password or otherwise provides reasonable protection against unauthorized access. Continuity of access to files must be ensured by making access codes available to a responsible accessible party.
    - v) the system backs up files and allows recovery of backed up files or otherwise protects against loss of, damages to and accessibility of information.  
It is also suggested that the system is capable of visually displaying the recorded information of each patient in chronological order:
      - a) records the date and time for each entry of information for each patient
      - b) indicate any changes in recorded information
      - c) preserves the original content of the recorded information when changed or updated
      - d) is capable of being printed separately from the recorded information of each patient.
    - vi) Any member who ceases to practice for any reason, or upon death their Executor shall:
      - a) retain all medical records for required period of time; or
      - b) transfer all medical records to a member who assumes responsibility for the practice, including the medical records; or
      - c) transfer all medical records to:

- i) another member practicing in that locality, or
- ii) a secure storage area with a person designated to allow all veterinarians reasonable access to the records; and
- iii) shall publish a notice in the local or area newspaper indicating where the records can be accessed.

**D. QUALITY CONTROL**

- 1) Quality assurance procedures are maintained.
- 2) Instruments are maintained and calibrated and records of such are kept.
- 3) Laboratory manuals are available that summarize each standard operating procedure.
- 4) Staff Qualifications:
  - a) Personnel are adequately trained to operate laboratory equipment and perform required tests.
  - b) Continuing Education for staff is available.

**E. LIBRARY**

- 1) Includes:
  - a) Current reference texts applicable to species and type of pathology being performed.
- 2) Includes adequate subscriptions to professional journals (at least two refereed journals).
- 3) Includes the Veterinary Profession Act, General Regulation and Bylaws.
- 4) Includes copies of the following:
  - i) The Regulations and Schedule of The Narcotic Control Act.
  - ii) Schedule F, G, and H of The Food and Drug Act.
  - iii) The Animal Protection Act.
  - iv) The Production Animal Medicine Regulation.
  - v) The Compendium of Medicating Ingredient Brochures.
  - vi) Compendium of Pharmaceuticals and Specialties.

**X HOLISTIC FACILITY:**

**A HOLISTIC (OR COMPARABLE TERM) VETERINARY CLINIC:**

- a) must provide an integrated approach to case management utilizing conventional veterinary medicine and a minimum of three Complementary and Alternative Veterinary modalities. These modalities must be provided by one or more approved (non-provisional) veterinarians on an on-going basis;
- b) must meet all the minimum standards for each appropriate category of facility (e.g., small animal facility, large animal facility, housecall practice, etc.) as specified in the Practice Inspection & Practice Standards Bylaws; and
- c) must submit an 'Application for a Holistic Veterinary Clinic' for approval by the Practice Inspection & Practice Standards Committee.