Commonwealth of Virginia - Department of Health Professions
Veterinary Medicine Establishment Inspection Report
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VETERINARY ESTABLISHMENT INSPECTION REPORT

		Date	**Time**	**Inspection Hours**
Name of Facility		**Permit No** ☐ **PENDING**		**Expiration Date**
Street Address		**City**		**State** VIRGINIA / **ZIP**
Hours of Operation		**Phone No**		**Fax No**
Veterinarian-in-Charge		**License No**		**Expiration Date**
Other Staff				
Type of Practice	**Type of Inspection** ☐ **New** ☐ **Routine** ☐ **Reinspection** ☐ **Other (Describe)**			

C = Compliant
NC = Not Compliant
NA = Not Applicable or Not reviewed

C/ NC/ NA	#	Major/ Minor / Points	Law/Regulation	Description
				Licenses and Permits
	1	Minor 1 point	18VAC150-20-30(A)	All licenses and permits issued by the board shall be posted in a place conspicuous to the public or available at the establishment where veterinary services are being provided. Licensees who do relief work in an establishment shall carry a license with them or post at the establishment. Ambulatory veterinary practices or equine dental technicians that do not have an office accessible to the public shall carry their licenses and permits in their vehicles. Guidance A license or permit is considered to be in a "place conspicuous to the public" when it is hung in an area that is easily accessed and read by the public. The original license or permit (not a photocopy) should be posted or available for inspection. Duplicate copies of a license can be obtained through the Board of Veterinary Medicine's office for a small fee. Any license or permit that is expired will be reported and documentation of practicing without a valid license or permit will be obtained.
	2	Major 5 points	§ 54.1-3805	No person shall practice veterinary medicine or as a veterinary technician in this Commonwealth unless such person has been licensed by the Board.
	3	Major 5 points	18VAC150-20-70(A)	All individual licenses are current. Failure to renew an individual license shall cause the license to lapse and become invalid.
	4	Major 5 points	18VAC150-20-185(B)	All veterinary establishment permits are current. Failure to renew a veterinary establishment permit shall cause the permit to lapse and become invalid.

				Veterinarian-in-Charge (VIC)
	5	Major 5 points	18VAC150-20-180(A)	Every veterinary establishment shall have a veterinarian-in-charge (VIC) who is registered with the Board.
	6	Major 5 points	18VAC150-20-181(A)	VIC is responsible for - Regularly being on site no less than monthly; - Maintaining the facility within the standards set forth by the regulations. - Notifying the boards in writing of the closure of the permitted facility 10 days prior to closure. - Notifying the board immediately if no longer acting as the veterinarian-in-charge. - Ensuring the establishment maintains a current and valid permit issued by the board. Guidance The VIC may be subject to disciplinary action for violations of the laws and regulations found during an inspection.
				Requirements for drug storage, dispensing, destruction, and records for all establishments, full service and restricted.
	7	Major 5 points	18VAC150-20-190(A)	All drugs shall be maintained, administered, dispensed, prescribed and destroyed in compliance with state and federal laws which include the Drug Control Act (§ 54.1-3400 et seq. of the Code of Virginia), applicable parts of the federal Food, Drug, and Cosmetic Control Act (21 USC § 301 et seq.), the Prescription Drug Marketing Act (21 USC § 301 et seq.), and the Controlled Substances Act (21 § 801 et seq.) as well as applicable portions of Title 21 of the Code of Federal Regulations.
	8	Minor 1 point	§ 54.1-3461 § 54.1-3462 18VAC150-20-190(B)	Repackaged tablets and capsules dispensed for companion animals are in approved safety closure containers, except safety caps are not required when medication cannot be reasonably dispensed in such containers. A client requesting non-safety packaging shall be documented in the patient record. Guidance When drugs are taken from a stock bottle and put into another container at the time of dispensing, the drugs are considered to be **repackaged**. As provided in § 54.1-3300, the definition of "dispense" means to deliver a drug to an ultimate user or research subject by or pursuant to the lawful order of a practitioner, including the prescribing and administering, packaging, labeling or compounding necessary to prepare the substance for delivery.
	9	Major 5 points 2 points See guidance	§ 54.1-3410 18VAC150-20-190(C)	All drugs dispensed for companion animals shall be labeled with the following: 1. Name and address of the facility. 2. Name of the client. 3. Animal identification 4. Date dispensed 5. Directions for use 6. Name, strength (if more than one dosage form exists) and quantity of the drug 7. Name of prescribing veterinarian Guidance The last name of the client satisfies item #2 above. Animal identification is satisfied by including the animal's name and species. For drugs that do not have a pharmaceutical insert, consider providing information to clients about drug reactions, interactions and side effects. An uninformed client may receive misinformation from friends or the internet regarding a drug. Points assigned: 5 points for no label; or 2 points for an incomplete label.

	10	Major 5 points	18VAC150-20-190(D)(1)	All Schedule II, III, IV, and V drugs shall be maintained under lock at all times. Only licensed veterinarians or licensed veterinary technicians have access to Schedule II, III, IV and V drugs. Guidance Unlicensed personnel may not have access to Schedule II, III, IV and V drugs. Drug stocks in facilities where keys and lock combinations are accessible to unlicensed staff or the public (i.e. keys left in the lock, on a counter, hung on a hook; or combinations widely distributed or posted) are not considered secure. If the key or the combination is not secure, the drugs are not secure. Evaluate office procedures regularly and make adjustments to avoid future problems. Ask some important questions such as the following: • Do procedures cover securing drugs from the moment of arrival at the facility until administration to the patient or distribution to the client? • Are drugs that must be maintained under lock ever stored at the reception desk in an unsecured manner and distributed by unlicensed personnel? • Are drugs that must be maintained under lock ever stored in an unlocked refrigerator? • Are blank prescription pads lying around the office where anyone could tear one off? • Is there a check and balance system in place to detect possible theft or loss of drugs? An unlicensed person may receive and open packages with unknown contents that may potentially contain drugs. However, once it is determined that the contents include Schedule II, III, IV or V drugs, the handling of the package contents must be turned over to licensed personnel. Schedule II, III, IV or V drugs that require refrigeration must be kept in a locked refrigerator or in a locked container placed inside the refrigerator. The possession, administration, dispensing and disposing of Schedule II, III, IV and V drugs must be done in compliance with federal and state laws. All required documentation must be maintained at the location authorized to possess the drugs.
	11	Major 3 points	§ 54.1-3404(E) 18VAC150-20-190(D)(2)	Theft or unusual loss of Schedule II, III, IV, or V drugs is reported immediately to the Boards of Veterinary Medicine and Pharmacy and to the U.S. Drug Enforcement Administration. Guidance Whenever a theft or any other unusual loss of a controlled substance is discovered, the Veterinarian-in-Charge is required by state and federal laws and/or regulations to immediately report such theft or loss to all of the following: 1. Virginia Board of Veterinary Medicine; 2. Virginia Board of Pharmacy; and 3. U.S. Drug Enforcement Agency. The Boards of Veterinary Medicine and Pharmacy request written notification sent via email or letter. The Board of Veterinary Medicine recommends contacting local law enforcement. Reports to the DEA must be made in accordance with 21 C.F.R. § 1301.76(b). If the Veterinarian-in-Charge is unable to determine the exact kind and quantity of the drug loss, he shall immediately make a complete inventory of all Schedules II through V drugs.

	12	Major 2 points	18VAC150-20-190(E)	Schedule II, III, IV and V are destroyed properly. Guidance Inspectors will verify that Schedule II, III, IV and V drugs are properly destroyed in accordance with DEA requirements available at http://www.deadiversion.usdoj.gov/drug_disposal/index.html **Disposal of Controlled Substances** A practitioner may dispose of out-of-date, damaged, or otherwise unusable or unwanted controlled substances, including samples, by transferring them to a registrant who is authorized to receive such materials. These registrants are referred to as "Reverse Distributors." The practitioner should contact the local DEA field office for a list of authorized Reverse Distributors. Schedule I and II controlled substances should be transferred via the DEA Form 222, while Schedule III–V compounds may be transferred via invoice. The practitioner should maintain copies of the records documenting the transfer and disposal of controlled substances for a period of two years. It is recommended that Schedule VI drugs be destroyed in the same manner as Schedule III-V drugs. Expired drugs may be considered adulterated drugs, may not be transferred or donated and must be destroyed as required by federal and state laws and regulations.
	13	Major 5 points 4 points 3 points 2 points See guidance	18VAC150-20-190(F)	Drug storage area has appropriate refrigeration with interior thermometer maintained between 36°F and 46°F. Drugs stored at room temperature are maintained between 59°F and 86°F. Drugs are removed from working stock upon expiration. Guidance The expiration date on all drugs, including prepackaged stock, should be regularly checked and drugs that are expired must be separated from working stock. A drug expires on the month, day and year listed on the container. If only a month and year are provided, drug expires on the last day of the month listed on container. Points assigned: 5 points for more than 5 expired drugs; or 4 points for 1-5 drugs expired 60 days or more; or 3 points for 1-5 drugs expired less than 60 days; and 2 additional points for out-of-range temperatures.
	14	Major 5 points 3points See guidance	§ 54.1-3404 18VAC150-20-190(G)	A distribution record shall be maintained in addition to the patient's record, in chronological order, for the administering and dispensing of Schedule II, III, IV and V drugs. Distribution records are to be maintained for a period of two years from the date of transaction. The distribution record shall include the following: 1. Date of transaction. 2. Drug name, strength, and the amount dispensed, administered and wasted. 3. Client and animal identification; and 4. Identification of the veterinarian authorizing the administration or dispensing of the drug. Guidance The veterinarian's initials are acceptable to meet the requirement of "identification of the veterinarian." The Board recommends that a veterinary establishment maintain a signature list of all employees in the veterinary establishment. The list should contain the individual's printed name, signature and initials. When a veterinarian with a mobile or house call practice occasionally uses the surgery facilities of a full service veterinary hospital, the drug distribution log (s) must clearly reveal whose controlled substances were used for what purpose. If the facility's stock is used, the hospital log must show that the surgery was performed by a visiting veterinarian who has the patient record and a record of administration shall be maintained at the facility. If the visiting veterinarian uses his own stock of drugs, he must make entries in his own log and patient records and shall leave a copy of the record at the full-service facility. Points assigned: 5 points for no record; or 3 points for incomplete record or records not maintained in chronological order.

	15	Major 5 points 3 points See guidance	§ 54.1-3404 18VAC150-20-190(H)	Original invoices for all Schedule II, III, IV, and V drugs received shall be maintained in chronological order on the premises where stock of drugs is held with the actual date of receipt is noted. Drug records shall be maintained for a period of two years from the date of transaction. Original invoices for all Schedule II drugs received shall be maintained separately from other records. Guidance The original invoices, not copies, need to be filed in chronological order. Do not file the invoices by supplier, by drug or any other filing method other than in chronological order. Points assigned: 5 points for no record or a record not maintained for two years; or 3 points for an incomplete record.
	16	Major 5 points 3 points See guidance	§ 54.1-3404 18VAC150-20-190(I)	A complete and accurate inventory of all Schedule II, III, IV and V drugs shall be taken, dated and signed on any date which is within two years of the previous biennial inventory. The biennial inventory must 1. Have the drug strength specified. 2. Must indicate if it was taken at the opening or closing of business. 3. Must be maintained on premises where the drugs are held for two years from the date of taking the inventory. Guidance The inventory must be taken on any date which is within two year of the previous inventory, but may be taken more often. The purpose of indicating whether the biennial inventory was taken at the opening or closing of business is to determine whether the drugs received or used on the day of the inventory should be counted, if a drug audit is conducted. The inventory must be signed and dated by the Veterinarian-in-Charge. Points assigned: 5 points if inventory not done within two years of the previous inventory and/or is missing required information; or 3 points if the inventory is only missing required information.
	17	Major 5 points	18VAC150-20-181(A)(3)	The VIC is responsible for performing the biennial inventory and ensuring compliance at the facility with any federal or state law relating to controlled substances. The biennial inventory if delegated to another licensee is signed by the VIC who is responsible for its content and accuracy.
				Bulk Reconstitution of Injectable, Bulk Compounding or Prepackaging
	18	Major 2 points	18VAC150-20-190(J)	Veterinary establishments in which bulk reconstitution of injectable, bulk compounding or the prepackaging of drugs is performed shall maintain adequate control records for a period of one year or until the expiration whichever is greater. Reconstitution, compounding and prepackaging records shall show the following: 1. Name of the drug(s) used; 2. Strength, if any; 3. Date repackaged; 4. Quantity prepared; 5. Initials of the veterinarian verifying the process; 6. Assigned lot or control number; 7. Manufacturer's or distributor's name and lot or control number; and 8. Expiration date. Guidance When drugs are taken from a stock bottle and put into another container prior to prescribing in anticipation of future dispensing, the drugs are considered to be **prepackaged**. Dispensing, labeling and recordkeeping requirements must be followed when prepackaging drugs. Transferring drugs to another container can affect the stability of the product. Expiration dates play an important role in maintaining the stability of a drug. The expiration date for a drug prepackaged is the same as the original stock bottle or is one year from the date of transfer whichever is less. It is best practice to store drugs under conditions which meet the United States Pharmacopeia and the National Formulary (USP-NF) specifications or manufacturers' suggested storage for each drug.

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				Patient/Medical Recordkeeping
	19	Major 2 points	18VAC150-20-200(A)(4)(d)(7)	All veterinary establishments must have storage for records.
	20	Major 5 points 3 points See guidance	18VAC150-20-195(A)	Daily patient records shall be maintained at the veterinary establishment and shall include pertinent medical data such as drugs administered, dispensed or prescribed, and all relevant medical and surgical procedures performed. Patient records should contain at a minimum 1. Presenting complaint/reason for contact. 2. Physical examination findings, if appropriate. 3. Tests performed and results. 4. Procedures performed/treatment given and results. 5. Drugs (and their dosages) administered, dispensed or prescribed. Guidance When cases are presented, the Board takes a position that "if it is not in the record, it did not happen." A medical record should be kept in a problem-oriented (Subjective, Objective, Assessment and Plan referred to as SOAP) format that allows any veterinarian, by reading the record, to proceed with the proper treatment and care of the animal and allow the Board or other agency to determine the advice and treatment recommended and performed by the practitioner. If an animal is hospitalized, an abbreviated version of the SOAP, including an assessment of the patient's progress and condition should be added to the record daily. The use of preprinted forms, stamps, or stickers is encouraged. Standardized medical abbreviations may be used to make recordkeeping. Handwritten records must be legible to be useful. If the veterinarian discovers that the record is incomplete or in error, the veterinarian may amend the record, being sure to date and initial when the amendment was made. Each record entry should be dated and identify the person making the entry. Points assigned: 5 points for no records; or 3 points for only missing required information.
	21	Major/ Minor 3 points 1 point See guidance	18VAC150-20-195(B)	Individual records shall be maintained on each patient, except that records for economic animals or litters of companion animals under the age of four months may have records maintained on a per client basis. Client records shall be kept for a period of three years following the last office visit or discharge of such animal from a veterinary establishment. Guidance Points assigned: 3 points if individual records not maintained on each patient; and/or 1 point if records not maintained for required time period.
	22	Major 2 points	18VAC150-20-195(C)	An animal identification system must be used by the establishment.
	23	Minor 1 point	18VAC150-20-200(A)(3)(c)	A veterinary establishment shall maintain radiographs as part of the patient's record. If a radiograph is transferred to another establishment or released to the client, a record of this transfer must be maintained on or with the patient's record.
	24	Major 2 points	18VAC150-20-195(E)	An initial rabies certificate for an animal receiving a primary rabies vaccination shall clearly display the following information: *"An animal is not considered immunized for at least 28 days after the initial or primary vaccination is administered."* Guidance The best practice is to include this statement on all rabies vaccination certificates to ensure compliance.

	25	Minor 3 points 1 point See guidance	§ 54.1-3806.1	Any animal medical care facility, excluding those facilities dealing with livestock, which does not provide continuous medical care for all animals left in its charge shall, before taking charge of the animal provide the client or agent thereof with a disclosure form which specifies the hours and days when continuous medical care is not available at the facility. The form shall be separate and apart from any other form or information provided by the facility. Only one signed form per client shall be required, and the form shall be kept by the facility. Guidance The Disclosure form cannot be printed on the front or back of another document. It can be smaller than a standard piece of paper. Points assigned: 3 points for missing form; and/or 1 point if form not compliant.
				STANDARDS FOR VETERINARY ESTABLISHMENTS **Full –Service Establishments** • With in-house radiology: Inspect Parts A, B, C, H and I • With outside radiology: Inspects Parts A, B, C and H **Restricted Establishments** Large Animal Ambulatory • With in-house radiology: Inspect Parts A, D, E and I • With outside radiology: Inspects Parts A, D and E Small Animal House Call • With surgery and in-house radiology: Inspect Parts A, D, F, H and I • With surgery and outside radiology: Inspects Parts A, D, F and H • No surgery and in-house radiology: Inspect Parts A, D, F and I • No surgery and outside radiology: Inspect Parts A, D and F Small Animal Outpatient • With surgery and in-house radiology: Inspect Parts A, B, D, G, H and I • With surgery and outside radiology: Inspects Parts A, B, D, G and H • No surgery and in-house radiology: Inspect Parts A, B, D, G and I • No surgery and outside radiology: Inspects Parts A, B, D and G
				Part A: All Veterinary Establishments
	26	Major 5 points	18VAC150-20-200(A)(2)(d)	A veterinary establishment shall have, as a minimum, proof of either in-house laboratory service or outside laboratory services for performing lab tests consistent with appropriate professional care for the species treated. Laboratory services are required for performing the following lab test, consistent with appropriate professional care for the species treated: urinalysis, including microscopic examination of sediment; complete blood count, including differential; flotation test for ova of internal parasites; skin scrapings for diagnosing external parasites; blood chemistries; cultures and sensitivities; biopsy; complete necropses, including histopathology; and serology. Guidance If using an outside laboratory service, a letter, email, or invoice may serve as documentation.
	27	Major 5 points	18VAC150-20-200(A)(3)(a)	A veterinary establishment shall either have radiology service in-house or documentation of outside services for obtaining diagnostic-quality radiographs. Guidance If using an outside radiograph service, a letter, email, or invoice may serve as documentation.
	28	Minor 1 point	18VAC150-20-200(A)(4)(d)(3)	Required equipment includes a stethoscope.
	29	Minor 1 point	18VAC150-20-200(A)(4)(d)(4)	Required equipment includes a thermometer.
	30	Minor 1 point	18VAC150-20-200(A)(4)(d)(5)	Required equipment includes equipment for assisted ventilation including a resuscitation bag and endotracheal tubes. (NOTE Part E: Restricted Establishments - Large Animal, Ambulatory Practice is not required to have equipment for assisted ventilation.)

	31	Minor 1 point	18VAC150-20-200(A)(4)(d)(6)	Required equipment includes scales. (NOTE Part E: Restricted Establishments - Large Animal, Ambulatory Practice is not required to have scales.)
				Part B: Stationary Veterinary Establishment
	32	Major 2 points	18VAC150-20-200(A)(1)	Buildings and grounds maintained to provide sanitary facilities for the care and medical well-being of patients.
	33	Minor 1 point	18VAC150-20-200(A)(1)(a)	Temperature, ventilation and lighting must be consistent with the medical well-being of the patients.
	34	Minor 1 point	18VAC150-20-200(A)(1)(b)(1)	Hot and cold running water of drinking quality as defined by the Virginia Department of Health.
	35	Minor 1 point	18VAC150-20-200(A)(1)(b)(2)	An acceptable method of disposal of deceased animals.
	36	Minor 1 point	18VAC150-20-200(A)(1)(b)(3)	Refrigeration exclusively for carcasses of companion animals that require storage for 24 hours or more.
	37	Minor 1 point	18VAC150-20-200(A)(1)(c)	Sanitary toilet and lavatory shall be available for personnel and clients.
	38	Minor 1 point	18VAC150-20-200(A)(2)(a)	Areas within the facility shall include a reception area separate from other designated rooms.
	39	Minor 1 point	18VAC150-20-200(A)(2)(b)	Areas within the facility shall include examination room(s).
	40	Minor 1 point	18VAC150-20-200(A)(2)(e)(1)	Animal housing areas shall be provided with separate compartments constructed in such a way as to prevent residual contamination.
	41	Minor 1 point	18VAC150-20-200(A)(2)(e)(2)	Animal housing areas shall be provided with accommodations allowing for the effective separation of contagious and noncontagious patients. Guidance Effective separation includes crates or pens away from other animals.
	42	Minor 1 point	18VAC150-20-200(A)(2)(e)(3)	Animal housing areas shall be provided with exercise runs which provide and allow effective separation of animals or walking the animals at medically appropriate intervals. Guidance Facilities without exercise runs must show documentation of walking animals at medically appropriate intervals.
	43	Minor 1 point	18VAC150-20-200(A)(4)(a)	Examination room must contain a table with nonporous surface.

	44	Minor 1 point	18VAC150-20-200(A)(4)(d)(1)	Required equipment includes a steam pressure sterilizer or an appropriate method of sterilizing instruments.
	45	Minor 1 point	18VAC150-20-200(A)(4)(d)(2)	Required equipment includes internal and external sterilization monitors, if steam pressure sterilizers are used.
				Part C: Full-Service Establishments
	46	Major 2 points	18VAC150-20-200(A)	A full-service establishment shall encompass all aspects of health care for small or large animals, or both. Guidance All aspects of health care include hospitalization services and shall provide surgery.
				Part D: Restricted Establishments
	47	Minor 1 point	18VAC150-20-200(B)	Restricted establishment shall have posted in a conspicuous manner the specific limitations on the scope of practice on a form provided by the board. Guidance In addition to the veterinary establishment permit, the Board issued "specific limitations on the scope of practice" form shall be posted to meet this requirement.
				Part E: Restricted Establishment – Large Animal, Ambulatory Practice
	48	Major/ Minor 2 points 1 point See guidance	18VAC150-20-200(B)(1)	Health care of large animals performed at the location of the animal. Surgery on large animals may be performed as part of a large animal ambulatory practice provided the facility has surgical supplies, instruments and equipment commensurate with the kind of surgical services provided. Guidance Points assigned: 2 points if surgical supplies, instruments and equipment are not appropriate for services provided; and/or 1 point if health care not provided at the location of the animal.
				Part F: Restricted Establishment – Small Animal, House Call Practice
	49	Major/ Minor 5 points 1 Point See guidance	18VAC150-20-200(B)(2)	Health care of small animals performed at the residence of the owner. Surgery may be performed only in a surgical suite which has passed inspection. Guidance If a veterinarian-client-patient relationship exists, a veterinarian may provide health care at a boarding site. Point assigned: 5 points if surgery not performed in an appropriately inspected surgical suite; and/or 1 point if health care not provided at the residence of the owner.

				Part G: Restricted Establishment – Small Animal, Outpatient Practice
	50	Major/ Minor 5 points 1 point See guidance	18VAC150-20-200(B)(3)	Health care of small animals performed at a stationary facility. Surgery may be performed only in a surgical suite which has passed inspection. Guidance Stationary facility may include a mobile unit in which the care of the small animals takes place. Points assigned: 5 points if surgery not performed in an appropriately inspected surgical suite; and/or 1 point if health care not provided at a stationary facility.
				Part H: Establishments Performing Surgery
	51	Minor 1 point	18VAC150-20-200(A)(2)(c)	There shall be a room reserved only for surgery and used for no other purpose. The walls of the surgery room are constructed of nonporous material and extend from floor to ceiling. The surgery room shall: 1. Be of a size adequate to accommodate a surgical table, anesthesia support equipment, surgical supplies, the veterinarian, an assistant and the patient. 2. Be kept so that storage in the surgery room is limited to items and equipment normally related to surgery and surgical procedures. 3. For small animal facilities, have a door to close off the surgery room from other areas of the practice. Guidance Items that are not normally related to surgery may not be stored in the surgery room. Dentistry can include surgical procedures (for example: extractions, fistula repair, subgingival cleaning, etc.) Therefore, dental units may be stored and used in a surgery room. It is recommended that dental procedures, which are often considered contaminated procedures, be scheduled after sterile surgical procedures scheduled on the same day. The surgery suite should be cleaned and disinfected after contaminated procedures such as dentistry.
	52	Minor 1 point	18VAC150-20-200(A)(4)(b)	The surgery suite shall have the following minimum equipment: 1. A surgical table with nonporous surface; 2. Surgical supplies, instruments and equipment commensurate with the kind of surgical services provided; 3. Automatic emergency lighting; 4. Surgical lighting; 5. Instrument table, stand, or tray; and 6. Waste receptacle.
				Part I: Establishments with In-House Radiology
	53	Major 5 points	18VAC150-20-200(A)(4)(c)	If radiology is performed in-house must have the following minimum equipment: - An x-ray machine - Lead aprons and gloves - Radiation exposure badges
	54	Major 5 points	18VAC150-20-200(A)(3)(b)(2)	Document that radiographic equipment complies with all requirements of 12VAC5-480-8520, Veterinary Medicine Radiographic Installations of the Virginia Department of Health document, "Ionizing Radiation Rules and Regulations" (1988). Guidance The regulations 12VAC5-480 et seq. were repealed effective 9/20/06 and replaced with 12VAC5-481-1580 through 12VAC5-481-1650, Part VI, "Use of Diagnostic X-rays In The Healing Arts" (2006), Virginia Radiation Protection Regulations of the Virginia Department of Health. Veterinary establishments are required to be in compliance with the most current regulations governing the use of diagnostic x-rays in the healing arts. Virginia Department of Health may be accessed for more information on veterinary x-rays at http://www.vdh.virginia.gov/epidemiology/radiologicalhealth/xray/vet.htm .

	55	Major 5 points 2 points See guidance	18VAC150-20-200(A)(3)(b)(1)	Each radiograph shall be permanently imprinted with the identity of the facility or veterinarian, patient, date of exposure and include permanent imprinting to reflect anatomic specificity. Guidance Digital radiograph systems are acceptable, but the required information must be included on the image or within the software. Non-digital radiographs, including dental radiographs, must contain the required identifying information. Points assigned: 5 points for no identification; or 2 points for incomplete or illegible information.

POINT TOTAL
(Violations cited during last and current inspections are repeat violations and receive double the assigned point value)

Current Inspection Point Total	
Repeat Violation Point Total	
Total Points	

COMMENTS:

This animal facility has been inspected by an inspector of the Department of Health Professions. I acknowledge that the conditions that have been deemed by the inspector as not being in compliance have been explained to me and that I have received a copy of the inspection report.

Immediate correction is expected for any conditions reported on this inspection report that may constitute a violation of the statutes and regulations governing veterinary medicine.

A copy of this inspection report will be reviewed by the Board of Veterinary Medicine office. If it is discovered that any of the deficiencies warrant further Board action, then I will be notified, and a reinspection may be conducted.

Signature of Inspector Date

Signature of Person Receiving Inspection Report Date

(Revised 02/13)