

**February 20, 2020**  
**Board Room 1**  
**1:00 p.m.**

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**Call to Order – Tregel Cockburn, D.V.M.**

- Welcome
  - Emergency Egress Procedures
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**Ordering of Agenda – Dr. Cockburn**

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**Public Comment – Dr. Cockburn**

The Board will receive all public comment related to agenda items at this time. The Board will not receive comment on any regulatory process for which a public comment period has closed or any pending or closed complaint or disciplinary matter.

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**Discussion Items – Dr. Cockburn/Leslie Knachel**

**Pages 1-82**

- **Presentation on Veterinary Drug Distribution - Darren Petri, Food and Drug Administration**
  - **Develop Timeline for Committee Review of Veterinary Establishment Regulations and Guidance Documents**
    - **Veterinary Establishment Regulations (Pages 1-29)**
    - **Veterinary Establishment Guidance Documents**
      - 76-21.2.1: Veterinary Establishment Inspection Report (Pages 30-56)
      - 150-5: Use of Compounded Drugs in Veterinary Practice (Pages 57-59)
      - 150-6: Ambulatory Mobile Service Establishments – Change of Location without Inspection (Page 60)
      - 150-7: Disposition of Cases Involving Failure of Veterinarian-in-Charge to Notify Board of Veterinary Establishment Closure (Pages 61-63)
      - 150-8: Disposition of Cases Involving Practicing on an Expired License or Registration (Pages 64-65)
      - 150-9: Medical Recordkeeping (Pages 66-77)
      - 150-13: Controlled Substances (Schedule II-VI) in Veterinary Practice (Pages 71-78)
      - 150-15: Disposition of Routine Inspection Violations (Page 79)
      - 150-16: Protocol to follow upon Discovery of a Loss or Theft of Drugs (Page 80)
      - 150-23: Disposal of Deceased Animals (Pages 81-82)
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**New Business – Dr. Cockburn**

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**Scheduling Next Meeting – Ms. Knachel**

**Page 83**

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**Meeting Adjournment – Dr. Cockburn**

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This information is in **DRAFT** form and is subject to change.

*Commonwealth of Virginia*



**VIRGINIA BOARD OF VETERINARY MEDICINE**

**REGULATIONS**

**GOVERNING THE PRACTICE OF VETERINARY**

**MEDICINE**

**Title of Regulations: 18 VAC 150-20-10 et seq.**

**Statutory Authority: § 54.1-2400 and Chapter 38  
of Title 54.1 of the *Code of Virginia***

**Effective Date: September 18, 2019**

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## **Part I. General Provisions.**

### **18VAC150-20-10. Definitions.**

The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"AAVSB" means the American Association of Veterinary State Boards.

"Automatic emergency lighting" is lighting that is powered by battery, generator, or alternate power source other than electrical power, is activated automatically by electrical power failure, and provides sufficient light to complete surgery or to stabilize the animal until surgery can be continued or the animal moved to another establishment.

"AVMA" means the American Veterinary Medical Association.

"Board" means the Virginia Board of Veterinary Medicine.

"Companion animal" means any dog, cat, horse, nonhuman primate, guinea pig, hamster, rabbit not raised for human food or fiber, exotic or native animal, reptile, exotic or native bird, or any feral animal or animal under the care, custody or ownership of a person or any animal that is bought, sold, traded, or bartered by any person. Agricultural animals, game species, or any animals regulated under federal law as research animals shall not be considered companion animals for the purposes of this chapter.

"CVMA" means the Canadian Veterinary Medical Association.

"DEA" means the U.S. Drug Enforcement Administration.

"ICVA" means the International Council for Veterinary Assessment.

"Immediate supervision" means that the licensed veterinarian is immediately available to the licensed veterinary technician or assistant, either electronically or in person, and provides a specific order based on observation and diagnosis of the patient within the last 36 hours.

"Owner" means any person who (i) has a right of property in an animal; (ii) keeps or harbors an animal; (iii) has an animal in his care; or (iv) acts as a custodian of an animal.

"Preceptee" or "extern" means a student who is enrolled and in good standing in an AVMA accredited college of veterinary medicine or AVMA accredited veterinary technology program and who is receiving practical experience under the supervision of a licensed veterinarian or licensed veterinary technician.

"Preceptorship" or "externship" means a formal arrangement between an AVMA accredited college of veterinary medicine or an AVMA accredited veterinary technology program and a veterinarian who is licensed by the board and responsible for the practice of the preceptee. A preceptorship or externship shall be overseen by faculty of the college or program.

"Private animal shelter" means a facility that is used to house or contain animals and that is owned or operated by an incorporated, nonprofit, and nongovernmental entity, including a humane society, animal welfare organization, society for the prevention of cruelty to animals, or any other organization operating for the purpose of finding permanent adoptive homes for animals.

"Professional judgment" includes any decision or conduct in the practice of veterinary medicine, as defined by § 54.1-3800 of the Code of Virginia.

"Public animal shelter" means a facility operated by the Commonwealth, or any locality, for the purpose of impounding or sheltering seized, stray, homeless, abandoned, unwanted, or surrendered animals, or a facility operated for the same purpose under a contract with any locality.

"Specialist" means a veterinarian who has been awarded and has maintained the status of diplomate of a specialty organization recognized by the American Board of Veterinary Specialties of the American Veterinary Medical Association, or any other organization approved by the board.

"Surgery" means treatment through revision, destruction, incision or other structural alteration of animal tissue. Surgery does not include dental extractions of single-rooted teeth or skin closures performed by a licensed veterinary technician upon a diagnosis and pursuant to direct orders from a veterinarian.

"Veterinarian-in-charge" means a veterinarian who holds an active license in Virginia and who is responsible for maintaining a veterinary establishment within the standards set by this chapter, for complying with federal and state laws and regulations, and for notifying the board of the establishment's closure.

"Veterinary establishment" or "establishment" means any stationary or ambulatory practice, veterinary hospital, animal hospital, or premises wherein or out of which veterinary medicine is being conducted.

"Veterinary technician" means a person licensed by the board as required by § 54.1-3805 of the Code of Virginia.

**18VAC150-20-15. Criteria for delegation of informal fact-finding proceedings to an agency subordinate.**

A. Decision to delegate. In accordance with § 54.1-2400 (10) of the Code of Virginia, the board may delegate an informal fact-finding proceeding to an agency subordinate upon determination that probable cause exists that a practitioner may be subject to a disciplinary action.

B. Criteria for delegation. Cases that may be delegated to an agency subordinate are those that do not involve standard of care or those that may be recommended by a committee of the board.

C. Criteria for an agency subordinate. An agency subordinate authorized by the board to conduct an informal fact-finding proceeding shall include current or former board members deemed knowledgeable by virtue of their training and experience in administrative proceedings involving the regulation and discipline of health professionals.

**18VAC150-20-20. [Repealed]**

**18VAC150-20-30. Posting of licenses; accuracy of address.**

A. All licenses and registrations issued by the board shall be posted in a place conspicuous to the public at the establishment where veterinary services are being provided or available for inspection at the location where an equine dental technician is working. Licensees who do relief or temporary work in an establishment shall carry a license with them or post it at the establishment. Ambulatory veterinary practices that do not have an office accessible to the public shall carry their licenses and registrations in their vehicles.

B. It shall be the duty and responsibility of each licensee, registrant, and holder of a registration to operate a veterinary establishment to keep the board apprised at all times of his current address of record and the public address, if different from the address of record. All notices required by law or by this chapter to be mailed to any veterinarian, veterinary technician, registered equine dental technician, or holder of a registration to operate a veterinary establishment shall be validly given when mailed to the address of record furnished to the board pursuant to this regulation. All address changes shall be furnished to the board within 30 days of such change.

**18VAC150-20-40 through 18VAC150-20-60. [Repealed]**

**18VAC150-20-70. Licensure renewal requirements.**

A. Every person licensed by the board shall, by January 1 of every year, submit to the board a completed renewal application and pay to the board a renewal fee as prescribed in 18VAC150-20-100. Failure to renew shall cause the license to lapse and become invalid, and practice with a lapsed license may subject the licensee to disciplinary action by the board. Failure to receive a renewal notice does not relieve the licensee of his responsibility to renew and maintain a current license.

B. Veterinarians shall be required to have completed a minimum of 15 hours, and veterinary technicians shall be required to have completed a minimum of eight hours, of approved continuing education for each annual renewal of licensure. Continuing education credits or hours may not be transferred or credited to another year.

1. Approved continuing education credit shall be given for courses or programs related to the treatment and care of patients and shall be clinical courses in veterinary medicine or veterinary technology or courses that enhance patient safety, such as medical recordkeeping or compliance with requirements of the Occupational Health and Safety Administration (OSHA).

2. An approved continuing education course or program shall be sponsored by one of the following:

a. The AVMA or its constituent and component/branch associations, specialty organizations, and board certified specialists in good standing within their specialty board;

b. Colleges of veterinary medicine approved by the AVMA Council on Education;

- c. International, national, or regional conferences of veterinary medicine;
  - d. Academies or species-specific interest groups of veterinary medicine;
  - e. State associations of veterinary technicians;
  - f. North American Veterinary Technicians Association;
  - g. Community colleges with an approved program in veterinary technology;
  - h. State or federal government agencies;
  - i. American Animal Hospital Association (AAHA) or its constituent and component/branch associations;
  - j. Journals or veterinary information networks recognized by the board as providing education in veterinary medicine or veterinary technology; or
  - k. An organization or entity approved by the Registry of Approved Continuing Education of the AAVSB.
3. A licensee is exempt from completing continuing education requirements and considered in compliance on the first renewal date following his initial licensure by examination.
4. The board may grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the licensee, such as temporary disability, mandatory military service, or officially declared disasters.
5. The board may grant an extension for good cause of up to one year for the completion of continuing education requirements upon written request from the licensee prior to the renewal date. Such an extension shall not relieve the licensee of the continuing education requirement.
6. Licensees are required to attest to compliance with continuing education requirements on their annual license renewal and are required to maintain original documents verifying the date and subject of the program or course, the number of continuing education hours or credits, and certification from an approved sponsor. Original documents must be maintained for a period of two years following renewal. The board shall periodically conduct a random audit to determine compliance. Practitioners selected for the audit shall provide all supporting documentation within 14 days of receiving notification of the audit unless an extension is granted by the board.
7. Continuing education hours required by disciplinary order shall not be used to satisfy renewal requirements.
8. Up to two hours of the 15 hours required for annual renewal of a veterinarian license and up to one hour of the eight hours required for annual renewal of a veterinary technician license may be satisfied through delivery of veterinary services, without compensation, to low-income individuals receiving health services through a local health department or a free clinic

organized in whole or primarily for the delivery of those services. One hour of continuing education may be credited for three hours of providing such volunteer services, as documented by the health department or free clinic.

9. Falsifying the attestation of compliance with continuing education on a renewal form or failure to comply with continuing education requirements may subject a licensee to disciplinary action by the board, consistent with § 54.1-3807 of the Code of Virginia.

C. A licensee who has requested that his license be placed on inactive status is not authorized to perform acts that are considered the practice of veterinary medicine or veterinary technology and, therefore, shall not be required to have continuing education for annual renewal. To reactivate a license, the licensee is required to submit evidence of completion of continuing education hours as required by § 54.1-3805.2 of the Code of Virginia and this section equal to the number of years in which the license has not been active for a maximum of two years.

**18VAC150-20-75. Expired license; reinstatement; practice with an expired or lapsed license not permitted.**

A. A license may be renewed up to one year after the expiration date, provided a late fee as prescribed in 18VAC150-20-100 is paid in addition to the required renewal fee. A license shall automatically lapse if the licensee fails to renew by the expiration date. The practice of veterinary medicine without a current, active license is unlawful and may subject the licensee to disciplinary action by the board.

B. Reinstatement of licenses expired for more than one year shall be at the discretion of the board. To reinstate a license, the licensee shall pay the reinstatement fee as prescribed in 18VAC150-20-100 and submit evidence of completion of continuing education hours as required by § 54.1-3805.2 of the Code of Virginia and 18VAC150-20-70 equal to the number of years in which the license has been expired, for a maximum of two years. The board may require additional documentation of clinical competency and professional activities.

**18VAC150-20-80 and 18VAC150-20-90. [Repealed]**

**18VAC150-20-100. Fees.**

The following fees shall be in effect:

Veterinary application for licensure	\$200
Veterinary application for faculty licensure	\$100
Veterinary license renewal (active)	\$175
Veterinary license renewal (inactive)	\$85
Veterinary faculty license renewal	\$75

Veterinary reinstatement of expired license	\$255
Veterinary license late renewal	\$60
Veterinary faculty license late renewal	\$25
Veterinarian reinstatement after disciplinary action	\$450
Veterinary intern/resident license -- initial or renewal	\$25
Veterinary technician application for licensure	\$65
Veterinary technician license renewal	\$50
Veterinary technician license renewal (inactive)	\$25
Veterinary technician license late renewal	\$20
Veterinary technician reinstatement of expired license	\$95
Veterinary technician reinstatement after disciplinary action	\$125
Equine dental technician initial registration	\$100
Equine dental technician registration renewal	\$70
Equine dental technician late renewal	\$25
Equine dental technician reinstatement	\$120
Initial veterinary establishment registration	\$300
Veterinary establishment renewal	\$200
Veterinary establishment late renewal	\$75
Veterinary establishment reinstatement	\$75
Veterinary establishment reinspection	\$300
Veterinary establishment -- change of location	\$300
Veterinary establishment -- change of veterinarian-in-charge	\$40
Duplicate license	\$15
Duplicate wall certificate	\$25

Returned check	\$35
Licensure verification to another jurisdiction	\$25

## **Part II. Licensure for Veterinarians and Veterinary Technicians.**

### **18VAC150-20-110. Requirements for licensure by examination as a veterinarian.**

A. The applicant, in order to be licensed by the board to practice veterinary medicine, shall:

1. Have received a degree in veterinary medicine from a college or school of veterinary medicine accredited by the AVMA, as verified by an official transcript from the applicant's college or school, indicating completion of the veterinary degree. In lieu of a degree from an accredited college or school, an applicant may submit verification that he has fulfilled the requirements of the Educational Commission of Foreign Veterinary Graduates of the AVMA or the Program for the Assessment of Veterinary Education Equivalence of the AAVSB or any other substantially equivalent credentialing body as determined by the board; and
2. Have passed the North American Veterinary License Examination (since the fall of 2000) or the National Board Examination and the Clinical Competency Test (prior to the fall of 2000) of the ICVA or any other substantially equivalent national examination as approved by the board with a score acceptable to the board.

B. All applicants shall also:

1. Submit the application fee specified in 18VAC150-20-100 and a complete application on a form obtained from the board;
2. Provide verification that any license to practice veterinary medicine issued by a board of veterinary medicine in another state or United States jurisdiction is in good standing;
3. Sign a statement attesting that the applicant has read, understands, and will abide by the statutes and regulations governing the practice of veterinary medicine in Virginia; and
4. Have committed no acts that would constitute a violation of § 54.1-3807 of the Code of Virginia.

C. If the application for licensure has not been successfully completed within one year from the date of initial submission, a new application and fee shall be required.

### **18VAC150-20-115. Requirements for licensure by examination as a veterinary technician.**

A. The applicant, in order to be licensed by the board as a veterinary technician, shall:

1. Have received a degree in veterinary technology from a college or school accredited by the AVMA or the CVMA.

2. Have filed with the board the following documents:

- a. A complete application on a form obtained from the board;
- b. An official copy, indicating a veterinary technology degree, of the applicant's college or school transcript; and
- c. Verification that the applicant is in good standing by each board in another state or United States jurisdiction from which the applicant holds a license, certification, or registration to practice veterinary technology.

3. Have passed the Veterinary Technician National Examination approved by the AAVSB or any other board-approved, national board examination for veterinary technology with a score acceptable to the board.

4. Sign a statement attesting that the applicant has read, understands, and will abide by the statutes and regulations governing the practice of veterinary medicine in Virginia.

5. Have submitted the application fee specified in 18VAC150-20-100.

6. Have committed no acts that would constitute a violation of § 54.1-3807 of the Code of Virginia.

B. The application for licensure shall be valid for a period of one year after the date of initial submission, after which time a new application and fee shall be required.

**18VAC150-20-120. Requirements for licensure by endorsement as a veterinarian.**

The board may, in its discretion, grant a license by endorsement to an applicant who is licensed to practice veterinary medicine in another jurisdiction of the United States, provided that the applicant:

1. Holds at least one current, unrestricted license in another jurisdiction of the United States and is not a respondent in any pending or unresolved board action in any jurisdiction;
2. Provides documentation of having been regularly engaged in clinical practice for at least two of the past four years immediately preceding application;
3. Provides documentation of completion of at least 30 hours of continuing education requirements during the preceding four years;
4. Submits the application fee specified in 18VAC150-20-100 and a complete application on a form obtained from the board;
5. Signs a statement attesting that the applicant has read, understands, and will abide by the statutes and regulations governing the practice of veterinary medicine in Virginia; and

6. Has committed no acts that would constitute a violation of § 54.1-3807 of the Code of Virginia.

**18VAC150-20-121. Requirements for licensure by endorsement for veterinary technicians.**

In its discretion, the board may grant a license by endorsement to an applicant who is licensed, certified or registered to practice as a veterinary technician in another jurisdiction of the United States, provided that the applicant:

1. Holds at least one current and unrestricted license, certification, or registration issued by the regulatory entity in another jurisdiction of the United States and that he is not a respondent in any pending or unresolved board action in any jurisdiction;
2. Provides documentation of having been regularly engaged in clinical practice as a licensed, certified, or registered veterinary technician for at least two of the past four years immediately preceding application;
3. Has received a degree in veterinary technology from a college or school accredited by the AVMA or the CVMA or has passed the Veterinary Technician National Examination approved by the AAVSB or any other board-approved national board examination for veterinary technology with a score acceptable to the board;
4. Provides documentation of completion of at least 16 hours of continuing education requirements during the preceding four years;
5. Submits the application fee specified in 18VAC150-20-100 and a complete application on a form obtained from the board;
6. Signs a statement attesting that the applicant has read, understands, and will abide by the statutes and regulations governing the practice of veterinary medicine in Virginia; and
7. Has committed no acts that would constitute a violation of § 54.1-3807 of the Code of Virginia.

**18VAC150-20-122. Requirements for faculty licensure.**

A. Upon payment of the fee prescribed in 18VAC150-20-100 and provided that no grounds exist to deny licensure pursuant to § 54.1-3807 of the Code of Virginia, the board may grant a faculty license to engage in the practice of veterinary medicine as part of a veterinary medical education program accredited by the American Veterinary Medical Association Council on Education to an applicant who:

1. Is qualified for full licensure pursuant to 18VAC150-20-110 or 18VAC150-20-120;
2. Is a graduate of an accredited veterinary program and has an unrestricted current license or if lapsed, is eligible for reinstatement in another United States jurisdiction; or
3. Is a graduate of a veterinary program and has advanced training recognized by the American Board of Veterinary Specialties or a specialty training program acceptable to the veterinary medical education program in which he serves on the faculty.

B. The dean of a veterinary medical education program shall provide verification that the applicant is being or has been hired by the program and shall include an assessment of the applicant's clinical competency and clinical experience that qualifies the applicant for a faculty license.

C. The holder of a faculty license shall be entitled to perform all functions that a person licensed to practice veterinary medicine would be entitled to perform as part of his faculty duties, including patient care functions associated with teaching, research, and the delivery of patient care that takes place only within a veterinary establishment or diagnostic and clinical services operated by or affiliated with the veterinary program. A faculty license shall not authorize the holder to practice veterinary medicine in nonaffiliated veterinary establishments or in private practice settings.

D. A faculty license shall expire on December 31 of the second year after its issuance and may be renewed annually without a requirement for continuing education, as specified in 18VAC150-20-70, as long as the accredited program certifies to the licensee's continued employment. When such a license holder ceases serving on the faculty, the license shall be null and void upon termination of employment. The dean of the veterinary medical education program shall notify the board within 30 days of such termination of employment.

**18VAC150-20-123. Requirements for an intern/resident license.**

A. Upon payment of the fee prescribed in 18VAC150-20-100 and provided that no grounds exist to deny licensure pursuant to § 54.1-3807 of the Code of Virginia, the board may issue a temporary license to practice veterinary medicine to an intern or resident. Upon recommendation of the dean or director of graduate education of the veterinary medical education program, such a license may be issued to an applicant who is a graduate of an AVMA-accredited program or who meets requirements of the Educational Commission of Foreign Veterinary Graduates or the Program for the Assessment of Veterinary Education Equivalence of the American Association of Veterinary State Boards, as verified by the veterinary medical education program. The application shall include the beginning and ending dates of the internship or residency.

B. The intern or resident shall be supervised by a fully licensed veterinarian or a veterinarian who holds a faculty license issued by the board. The intern or resident shall only practice within a veterinary establishment or diagnostic and clinical services operated by or affiliated with the veterinary program. A temporary license shall not authorize the holder to practice veterinary medicine in nonaffiliated veterinary establishments or in private practice settings.

C. An intern or resident license shall expire on August 1 of the second year after its issuance and may be renewed upon recommendation by the dean or director of graduate education of the veterinary medical education program.

**18VAC150-20-130. Requirements for practical training in a preceptorship or externship.**

A. The practical training and employment of qualified students of veterinary medicine or veterinary technology shall be governed and controlled as follows:

1. A veterinary student who is enrolled and in good standing in a veterinary college or school accredited or approved by the AVMA may be engaged in a preceptorship or externship. A veterinary preceptee or extern may perform duties that constitute the practice of veterinary medicine for which he has received adequate instruction by the college or school and only under the on-premises supervision of a licensed veterinarian.

2. A veterinary technician student who is enrolled and in good standing in a veterinary technology program accredited or approved by the AVMA may be engaged in a preceptorship or externship. A veterinary technician preceptee or extern may perform duties that constitute

the practice of veterinary technology for which he has received adequate instruction by the program and only under the on-premises supervision of a licensed veterinarian or licensed veterinary technician.

B. Whenever a veterinary preceptee or extern is performing surgery on a patient, either assisted or unassisted, the supervising veterinarian shall be in the operatory during the procedure. Prior to allowing a preceptee or extern in veterinary medicine to perform surgery on a patient unassisted by a licensed veterinarian, a licensed veterinarian shall receive written informed consent from the owner.

C. When there is a veterinary preceptee or extern practicing in the establishment, the supervising veterinarian shall disclose such practice to owners. The disclosure shall be by signage clearly visible to the public or by inclusion on an informed consent form.

D. A veterinarian or veterinary technician who supervises a preceptee or extern remains responsible for the care and treatment of the patient.

#### **18VAC150-20-135. Voluntary practice by out-of-state practitioners.**

Any veterinarian who seeks registration to practice on a voluntary basis under the auspices of a publicly supported all volunteer, nonprofit organization that sponsors the provision of health care to populations of underserved people shall:

1. File a complete application for registration on a form provided by the board at least five business days prior to engaging in such practice. An incomplete application will not be considered;
2. Provide a complete record of professional licensure in each state in which he has held a license and a copy of every current license;
3. Provide the name of the nonprofit organization, the dates and location of the voluntary provision of services;
4. Pay a registration fee of \$10; and
5. Provide a statement from a representative of the nonprofit organization attesting to its compliance with provisions of subdivision 4 of §54.1-3801 of the Code of Virginia.

### **Part III. Unprofessional Conduct.**

#### **18VAC150-20-140. Unprofessional conduct.**

Unprofessional conduct as referenced in subdivision 5 of § 54.1-3807 of the Code of Virginia shall include the following:

1. Representing conflicting interests except by express consent of all concerned given after a full disclosure of the facts. Acceptance of a fee from both the buyer and the seller is prima facie evidence of a conflict of interest.
2. Practicing veterinary medicine or equine dentistry where an unlicensed person has the authority to control the professional judgment of the licensed veterinarian or the equine dental technician.

3. Issuing a certificate of health unless he shall know of his own knowledge by actual inspection and appropriate tests of the animals that the animals meet the requirements for the issuance of such certificate on the day issued.
4. Revealing confidences gained in the course of providing veterinary services to a client, unless required by law or necessary to protect the health, safety or welfare of other persons or animals.
5. Advertising in a manner that is false, deceptive, or misleading or that makes subjective claims of superiority.
6. Violating any state law, federal law, or board regulation pertaining to the practice of veterinary medicine, veterinary technology or equine dentistry.
7. Practicing veterinary medicine or as an equine dental technician in such a manner as to endanger the health and welfare of his patients or the public, or being unable to practice veterinary medicine or as an equine dental technician with reasonable skill and safety.
8. Performing surgery on animals in an unregistered veterinary establishment or not in accordance with the establishment registration or with accepted standards of practice.
9. Refusing the board or its agent the right to inspect an establishment at reasonable hours.
10. Allowing unlicensed persons to perform acts restricted to the practice of veterinary medicine, veterinary technology, or an equine dental technician including any invasive procedure on a patient or delegation of tasks to persons who are not properly trained or authorized to perform such tasks.
11. Failing to provide immediate supervision to a licensed veterinary technician or an assistant in his employ.
12. Refusing to release a copy of a valid prescription upon request from an owner, unless there are medical reasons documented in the patient record and the veterinarian would not dispense the medication from his own practice.
13. Misrepresenting or falsifying information on an application or renewal form.
14. Failing to report suspected animal cruelty to the appropriate authorities.
15. Failing to release a copy of patient records when requested by the owner; a law-enforcement entity; or a federal, state, or local health regulatory agency.
16. Committing an act constituting fraud, deceit, or misrepresentation in dealing with the board or in the veterinarian-owner-patient relationship, or with the public.
17. Representing oneself as a "specialist" without meeting the definition set forth in 18VAC150-20-10 or using the words "specialist" or "specialty" in the name of a veterinary establishment unless there is a veterinarian on staff who meets the definition of a "specialist."
18. Failure to submit evidence of correction resulting from a violation noted in an inspection or reported by another agency within 14 days, unless an extension is granted by the board.

**18VAC150-20-150 through 18VAC150-20-170. [Repealed]**

#### **Part IV. Standards of Practice.**

**18VAC150-20-171. Specialty practice in a limited setting.**

A licensed veterinarian may conduct drug testing at animal shows and events or examine any animal and express a professional judgment as to its health at (i) genetic screening clinics where animals are examined for cardiac, ophthalmic and auditory diseases, (ii) agricultural fairs, (iii) 4-H or other youth organization competitions, (iv) livestock auctions, (v) horse races, (vi) hunt club events, (vii) pet adoption events, or (viii) animal shows including, but not limited to dog, cat, and horse shows.

**18VAC150-20-172. Delegation of duties.**

A. A licensed veterinarian may delegate the administration (including by injection) of Schedule VI drugs to a properly trained assistant under his immediate supervision. The prescribing veterinarian has a specific duty and responsibility to determine that the assistant has had adequate training to safely administer the drug in a manner prescribed.

B. Injections involving chemotherapy drugs, subgingival scaling, intubation, or the placement of intravenous catheters shall not be delegated to an assistant. An assistant shall also not be delegated the induction of sedation or anesthesia by any means. The monitoring of a sedated or anesthetized patient may be delegated to an assistant, provided a veterinarian or licensed veterinary technician remains on premises until the patient is fully recovered.

C. Tasks that may be delegated by a licensed veterinarian to a properly trained assistant include:

1. Grooming;
2. Feeding;
3. Cleaning;
4. Restraining;
5. Assisting in radiology;
6. Setting up diagnostic tests;
7. Prepping a patient or equipment for surgery;
8. Dental polishing and scaling of teeth above the gum line (supragingival);
9. Drawing blood samples; or
10. Filling of Schedule VI prescriptions under the direction of a veterinarian licensed in Virginia.

D. A licensed veterinarian may delegate duties electronically, verbally, or in writing to appropriate veterinary personnel provided the veterinarian has physically examined the patient within the previous 36 hours.

E. Massage therapy, physical therapy, or laser therapy may be delegated by a veterinarian to persons qualified by training and experience by an order from the veterinarian.

F. The veterinarian remains responsible for the duties being delegated and remains responsible for the health and safety of the animal.

**18VAC150-20-173. Informed consent for surgery.**

A. Before surgery is performed, informed consent shall be obtained from the owner and documented in the patient record. Veterinarians shall inform an owner of the risks, benefits, and alternatives of the recommended surgery that a reasonably prudent practitioner in similar practice in Virginia would tell an owner.

B. An exception to the requirement for consent prior to performance of surgery may be made in an emergency situation when a delay in obtaining consent would likely result in imminent harm to the patient.

C. If a veterinary preceptee or extern is to perform the surgery, either assisted or unassisted, the informed consent shall include that information. If the surgery is to be performed by a preceptee or extern unassisted by the veterinarian, the written informed consent shall specifically state that information.

**18VAC150-20-174. Prescribing of controlled substances for pain or chronic conditions.**

A. Evaluation of the patient and need for prescribing a controlled substance for pain.

1. For the purposes of this section, a controlled substance shall be a Schedules II through V drug, as set forth in the Drug Control Act (§ 54.1-3400 et seq. of the Code of Virginia), which contains an opioid, to include tramadol and buprenorphine.

2. Nonpharmacologic and non-opioid treatment for pain shall be given consideration prior to treatment with opioids. Prior to initiating treatment with a controlled substance, as defined, the prescriber shall perform a history and physical examination appropriate to the complaint and conduct an assessment of the patient's history as part of the initial evaluation.

3. If a controlled substance is necessary for treatment of acute pain, the veterinarian shall prescribe it in the lowest effective dose appropriate to the size and species of the animal for the least amount of time. The initial dose shall not exceed a 14-day supply.

B. If the prescribing is within the accepted standard of care, a veterinarian may prescribe a controlled substance containing an opioid for management of chronic pain, terminal illnesses, or certain chronic conditions, such as chronic heart failure, chronic bronchitis, osteoarthritis, collapsing trachea, or related conditions.

1. For prescribing a controlled substance for management of pain after the initial 14-day prescription referenced in subsection A of this section, the patient shall be seen and evaluated for the continued need for an opioid. For the prescribing of a controlled substance for terminal illnesses or certain chronic conditions, it is not required to see and reevaluate the patient for prescribing beyond 14 days.

2. For any prescribing of a controlled substance beyond 14 days, the veterinarian shall develop a treatment plan for the patient, which shall include measures to be used to determine progress in treatment, further diagnostic evaluations or modalities that might be necessary, and the extent to which the pain or condition is associated with physical impairment.

3. For continued prescribing of a controlled substance, the patient shall be seen and reevaluated at least every six months, and the justification for such prescribing documented in the patient record.

C. Prior to prescribing or dispensing a controlled substance, the veterinarian shall document a discussion with the owner about the known risks and benefits of opioid therapy, the responsibility for the security of the drug and proper disposal of any unused drug.

D. Continuation of treatment with controlled substances shall be supported by documentation of continued benefit from the prescribing. If the patient's progress is unsatisfactory, the veterinarian shall assess the appropriateness of continued use of the current treatment plan and consider the use of other therapeutic modalities.

E. The medical record for prescribing controlled substances shall include signs or presentation of the pain or condition, a presumptive diagnosis for the origin of the pain or condition, an examination appropriate to the complaint, a treatment plan, and the medication prescribed to include the date, type, dosage, and quantity prescribed.

## **Part V. Veterinary Establishments.**

### **18VAC150-20-180. Requirements to be registered as a veterinary establishment.**

A. Every veterinary establishment shall apply for registration on a form provided by the board and submit the application fee specified in 18VAC150-20-100. The board may issue a registration as a stationary or ambulatory establishment. Every veterinary establishment shall have a veterinarian-in-charge registered with the board in order to operate.

1. Veterinary medicine may only be practiced out of a registered establishment except in emergency situations or in limited specialized practices as provided in 18VAC150-20-171. The injection of a microchip for identification purposes shall only be performed in a veterinary establishment, except personnel of public or private animal shelters may inject animals while in their possession.

2. An application for registration must be made to the board 45 days in advance of opening or changing the location of the establishment or requesting a change in the establishment category listed on the registration.

3. Any addition or renovation of a stationary establishment or an ambulatory establishment that involves changes to the structure or composition of a surgery room shall require reinspection by the board and payment of the required fee prior to use.

B. A veterinary establishment will be registered by the board when:

1. It is inspected by the board and is found to meet the standards set forth by 18VAC150-20-190 and 18VAC150-20-200 or 18VAC150-20-201 where applicable. If, during a new or routine inspection, violations or deficiencies are found necessitating a reinspection, the prescribed reinspection fee will be levied. Failure to pay the fee shall be deemed unprofessional conduct and, until paid, the establishment shall be deemed to be unregistered.

2. A veterinarian currently licensed by and in good standing with the board is registered with the board in writing as veterinarian-in-charge and ensures that the establishment registration fee has been paid.

### **18VAC150-20-181. Requirements for veterinarian-in-charge.**

A. The veterinarian-in-charge of a veterinary establishment is responsible for:

1. Regularly being on site as necessary to provide routine oversight to the veterinary establishment for patient safety and compliance with law and regulation.
2. Maintaining the facility within the standards set forth by this chapter.
3. Performing the biennial controlled substance inventory and ensuring compliance at the facility with any federal or state law relating to controlled substances as defined in § 54.1-3404 of the Code of Virginia. The performance of the biennial inventory may be delegated to another licensee, provided the veterinarian-in-charge signs the inventory and remains responsible for its content and accuracy.
4. Notifying the board in writing of the closure of the registered facility 10 days prior to closure.
5. Notifying the board immediately if no longer acting as the veterinarian-in-charge.
6. Ensuring the establishment maintains a current and valid registration issued by the board.

B. Upon any change in veterinarian-in-charge, these procedures shall be followed:

1. The veterinarian-in-charge registered with the board remains responsible for the establishment and the stock of controlled substances until a new veterinarian-in-charge is registered or for five days, whichever occurs sooner.
2. An application for a new registration, naming the new veterinarian-in-charge, shall be made five days prior to the change of the veterinarian-in-charge. If no prior notice was given by the previous veterinarian-in-charge, an application for a new registration naming a new veterinarian-in-charge shall be filed as soon as possible, but no more than 10 days, after the change.
3. The previous establishment registration is void on the date of the change of veterinarian-in-charge and shall be returned by the former veterinarian-in-charge to the board five days following the date of change.
4. Prior to the opening of the business, on the date of the change of veterinarian-in-charge, the new veterinarian-in-charge shall take a complete inventory of all Schedules II through V drugs on hand. He shall date and sign the inventory and maintain it on premises for three years. That inventory may be designated as the official biennial controlled substance inventory.

C. Prior to the sale or closure of a veterinary establishment, the veterinarian-in-charge shall:

1. Follow the requirements for transfer of patient records to another location in accordance with § 54.1-2405 of the Code of Virginia; and
2. If there is no transfer of records upon sale or closure of an establishment, the veterinarian-in-charge shall provide to the board information about the location of or access to patient records and the disposition of all scheduled drugs.

#### **18VAC150-20-185. Renewal of veterinary establishment registrations.**

A. Every veterinary establishment shall be required to renew the registration by January 1 of each year and pay to the board a registration fee as prescribed in 18VAC150-20-100.

B. Failure to renew the establishment registration by January 1 of each year shall cause the registration to expire and become invalid. Practicing veterinary medicine in an establishment with an expired registration may subject a licensee or registration holder to disciplinary action by the board. The registration may be renewed without reinspection within 30 days of expiration, provided the

board receives a properly executed renewal application, renewal fee, and a late fee as prescribed in 18VAC150-20-100.

C. Reinstatement of an expired registration after 30 days shall be at the discretion of the board and contingent upon a properly executed reinstatement application and payment of the late fee, the reinspection fee, the renewal fee and the veterinary establishment registration reinstatement fee. A reinspection is required when an establishment is reinstated.

**18VAC150-20-190. Requirements for drug storage, dispensing, destruction, and records for all establishments.**

A. All drugs shall be maintained, administered, dispensed, prescribed and destroyed in compliance with state and federal laws, which include § 54.1-3303 of the Code of Virginia, 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 USC § 801 et seq.), as well as applicable portions of Title 21 of the Code of Federal Regulations.

B. All repackaged tablets and capsules dispensed for companion animals shall be in approved safety closure containers, except safety caps shall not be required when any person who requests that the medication not have a safety cap, or in such cases in which the medication is of such form or size that it cannot be reasonably dispensed in such containers (e.g., topical medications, ophthalmic, or otic). An owner request for nonsafety packaging shall be documented in the patient record.

C. All drugs dispensed for companion animals shall be labeled with the following:

1. Name and address of the facility;
2. First and last name of owner;
3. Animal identification and species;
4. Date dispensed;
5. Directions for use;
6. Name, strength (if more than one dosage form exists), and quantity of the drug; and
7. Name of the prescribing veterinarian.

D. All veterinary establishments shall maintain drugs in a secure manner with precaution taken to prevent theft or diversion. Only the veterinarian, veterinary technician, pharmacist, or pharmacy technician shall have access to Schedules II through V drugs, with the exception provided in subdivision 6 of this subsection.

1. In a stationary establishment, the general stock of Schedules II through V drugs shall be stored in a securely locked cabinet or safe that is not easily movable.

2. The establishment may also have a working stock of Schedules II through V drugs that shall be kept in (i) a securely locked container, cabinet, or safe when not in use or (ii) direct possession of a veterinarian or veterinary technician. A working stock shall consist of only those drugs that are necessary for use during a normal business day or 24 hours, whichever is less.

3. Whenever the establishment is closed, all general and working stock of Schedules II through V drugs and any dispensed prescriptions that were not delivered during normal business hours shall be securely stored as required for the general stock.

4. Prescriptions that have been dispensed and prepared for delivery shall be maintained under lock or in an area that is not readily accessible to the public and may be delivered to an owner by an unlicensed person, as designated by the veterinarian.

5. Whenever a theft or any unusual loss of Schedules II through V drugs is discovered, the veterinarian-in-charge, or in his absence, his designee, shall immediately report such theft or loss to the Board of Veterinary Medicine and the Board of Pharmacy and to the DEA. The report to the boards shall be in writing and sent electronically or by regular mail. The report to the DEA shall be in accordance with 21 CFR 1301.76(b). If the veterinarian-in-charge is unable to determine the exact kind and quantity of the drug loss, he shall immediately take a complete inventory of all Schedules II through V drugs.

6. Access to drugs by unlicensed persons shall be allowed only under the following conditions:

a. An animal is being kept at the establishment outside of the normal hours of operation, and a licensed practitioner is not present in the facility;

b. The drugs are limited to those dispensed to a specific patient; and

c. The drugs are maintained separately from the establishment's general drug stock and kept in such a manner so they are not readily available to the public.

E. Schedules II through V drugs shall be destroyed by (i) transferring the drugs to another entity authorized to possess or provide for proper disposal of such drugs or (ii) destroying the drugs in compliance with applicable local, state, and federal laws and regulations. If Schedules II through V drugs are to be destroyed, a DEA drug destruction form shall be fully completed and used as the record of all drugs to be destroyed. A copy of the destruction form shall be retained at the veterinarian practice site with other inventory records.

F. The drug storage area shall have appropriate provision for temperature control for all drugs and biologics. If drugs requiring refrigeration are maintained at the facility, the drugs shall be kept in a refrigerator with the interior thermometer maintained between 36°F and 46°F. If a refrigerated drug is in Schedules II through V, the drug shall be kept in a locked container secured to the refrigerator, or the refrigerator shall be locked. Drugs stored at room temperature shall be maintained between 59°F and 86°F.

G. The stock of drugs shall be reviewed frequently, and expired drugs shall be removed from the working stock of drugs at the expiration date and shall not be administered or dispensed.

H. A distribution record shall be maintained in addition to the patient's record, in chronological order, for the administration and dispensing of all Schedules II through V drugs. This record is to be maintained for a period of three years from the date of transaction. This distribution record shall include the following:

1. Date of transaction;
2. Drug name, strength, and the amount dispensed, administered, and wasted;
3. Owner and animal identification; and
4. Identification of the veterinarian authorizing the administration or dispensing of the drug.

I. Original invoices for all Schedules II through V drugs received shall be maintained in chronological order on the premises where the stock of drugs is held, and the actual date of receipt shall be noted. All drug records shall be maintained for a period of three years from the date of transaction.

J. A complete and accurate inventory of all Schedules II through V drugs shall be taken, dated, and signed on any date that is within two years of the previous biennial inventory. Drug strength must be specified. This inventory shall indicate if it was made at the opening or closing of business and shall be maintained on the premises where the drugs are held for three years from the date of taking the inventory.

K. Inventories and records, including original invoices, of Schedule II drugs shall be maintained separately from all other records, and the establishment shall maintain a continuous inventory of all Schedule II drugs received, administered, or dispensed, with reconciliation at least monthly. Reconciliation requires an explanation noted on the inventory for any difference between the actual physical count and the theoretical count indicated by the distribution record. A continuous inventory shall accurately indicate the physical count of each Schedule II drug in the general and working stocks at the time of performing the inventory.

L. Veterinary establishments shall (i) maintain records of the dispensing of feline buprenorphine and canine butorphanol, (ii) reconcile such records monthly, and (iii) make such records available for inspection upon request.

M. 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. The records shall show the name of the drugs used; strength, if any; date repackaged; quantity prepared; initials of the veterinarian verifying the process; the assigned lot or control number; the manufacturer's or distributor's name and lot or control number; and an expiration date.

N. If a limited stationary or ambulatory practice uses the facilities of another veterinary establishment, the drug distribution log shall clearly reveal whose Schedules II through V drugs were used. If the establishment's drug stock is used, the distribution record shall show that the procedure was performed by a visiting veterinarian who has the patient record. If the visiting veterinarian uses his own stock of drugs, he shall make entries in his own distribution record and in the patient record and shall leave a copy of the patient record at the other establishment.

### **18VAC150-20-195. Recordkeeping.**

A. A legible, daily record of each patient treated shall be maintained by the veterinarian at the registered veterinary establishment and shall include at a minimum:

1. Name of the patient and the owner;
2. Identification of the treating veterinarian and of the person making the entry (Initials may be used if a master list that identifies the initials is maintained.);
3. Presenting complaint or reason for contact;
4. Date of contact;
5. Physical examination findings;
6. Tests and diagnostics performed and results;
7. Procedures performed, treatment given, and results;
8. Drugs administered, dispensed, or prescribed, including quantity, strength and dosage, and route of administration. For vaccines, identification of the lot and manufacturer shall be maintained;
9. Radiographs or digital images clearly labeled with identification of the establishment, the patient name, date taken, and anatomic specificity. If an original radiograph or digital image is transferred to another establishment or released to the owner, a record of this transfer or release shall be maintained on or with the patient's records; and
10. Any specific instructions for discharge or referrals to other practitioners.

B. An individual record shall be maintained on each patient, except that records for economic animals or litters of companion animals under the age of four months may be maintained on a per owner basis. Patient records, including radiographs or digital images, shall be kept for a period of three years following the last office visit or discharge of such animal from a veterinary establishment.

C. An initial rabies certification 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."

### **18VAC150-20-200. Standards for stationary veterinary establishments.**

A. Stationary establishments. A stationary establishment shall provide surgery and encompass all aspects of health care for small or large animals, or both. All stationary establishments shall meet the requirements set forth in this subsection:

1. Buildings and grounds must be maintained to provide sanitary facilities for the care and medical well-being of patients.

a. Temperature, ventilation, and lighting must be consistent with the medical well-being of the patients.

b. There shall be on-premises:

(1) Hot and cold running water of drinking quality, as defined by the Virginia Department of Health;

(2) An acceptable method of disposal of deceased animals, in accordance with any local ordinance or state and federal regulations; and

(3) Refrigeration exclusively for carcasses of companion animals that require storage for 24 hours or more.

c. Sanitary toilet and lavatory shall be available for personnel and owners.

2. Areas within building. The areas within the facility shall include the following:

a. A reception area separate from other designated rooms;

b. Examination room or rooms containing a table or tables with nonporous surfaces;

c. A room that is reserved only for surgery and used for no other purpose. In order that surgery can be performed in a manner compatible with current veterinary medical practice with regard to anesthesia, asepsis, life support, and monitoring procedures, the surgery room shall:

(1) Have walls constructed of nonporous material and extending from the floor to the ceiling;

(2) Be of a size adequate to accommodate a surgical table, anesthesia support equipment, surgical supplies, and all personnel necessary for safe performance of the surgery;

(3) Be kept so that storage in the surgery room shall be limited to items and equipment normally related to surgery and surgical procedures;

(4) Have a surgical table made of nonporous material;

(5) Have surgical supplies, instruments, and equipment commensurate with the kind of services provided;

(6) Have surgical and automatic emergency lighting to facilitate performance of procedures; and

(7) For establishments that perform surgery on small animals, have a door to close off the surgery room from other areas of the practice.

3. The veterinary establishment shall have, at a minimum, proof of use of either in-house laboratory service or outside laboratory services for performing lab tests, consistent with appropriate professional care for the species being treated.

4. For housing animals, the establishment shall provide:

- a. An animal identification system at all times when housing an animal;
- b. Accommodations of appropriate size and construction to prevent residual contamination or injury;
- c. Accommodations allowing for the effective separation of contagious and noncontagious patients; and
- d. Exercise areas that provide and allow effective separation of animals or walking the animals at medically appropriate intervals.

5. A veterinary establishment shall either have radiology service in-house or documentation of outside services for obtaining diagnostic-quality radiographs. If radiology is in-house, the establishment shall:

- a. Document that radiographic equipment complies with Part VI (12VAC5-481-1581 et seq.), Use of Diagnostic X-Rays in the Healing Arts, of the Virginia Radiation Protection Regulations of the Virginia Department of Health, which requirements are adopted by this board and incorporated herewith by reference in this chapter.
- b. Maintain and utilize lead aprons and gloves and individual radiation exposure badges for each employee exposed to radiographs.

6. Minimum equipment in the establishment shall include:

- a. An appropriate method of sterilizing instruments;
- b. Internal and external sterilization monitors;
- c. Stethoscope;
- d. Equipment for delivery of assisted ventilation appropriate to the species being treated, including endotracheal tubes;
- e. Adequate means of determining patient's weight; and
- f. Storage for records.

**B. Additional requirements for stationary establishments.**

1. A stationary establishment that is open to the public 24 hours a day shall have licensed personnel on premises at all times and shall be equipped to handle emergency critical care and hospitalization. The establishment shall have radiology/imaging and laboratory services available on site.

2. A stationary establishment that is not open to the public 24 hours a day shall have licensed personnel available during its advertised hours of operation and shall disclose to the public that the establishment does not have continuous staffing in compliance with § 54.1-3806.1 of the Code of Virginia.

3. All stationary establishments shall provide for continuity of care when a patient is transferred to another establishment.

C. Limited stationary establishments. When the scope of practice is less than full service, a specifically limited establishment registration shall be required. Upon submission of a completed application, satisfactory inspection, and payment of the veterinary establishment registration fee, a limited establishment registration may be issued. Such establishments shall have posted in a conspicuous manner the specific limitations on the scope of practice on a form provided by the board.

D. A separate establishment registration is required for separate practices that share the same location.

#### **18VAC150-20-201. Standards for ambulatory veterinary establishments.**

A. Agricultural or equine ambulatory practice. An agricultural or equine ambulatory establishment is a mobile practice in which health care is performed at the location of the animal. Surgery on large animals may be performed as part of an agricultural or equine ambulatory practice provided the establishment has surgical supplies, instruments, and equipment commensurate with the kind of surgical procedures performed. All agricultural or equine ambulatory establishments shall meet the requirements of a stationary establishment for laboratory, radiology, and minimum equipment, with the exception of equipment for assisted ventilation.

B. House call or proceduralist establishment. A house call or proceduralist establishment is an ambulatory practice in which health care of small animals is performed at the residence of the owner of the small animal or another establishment registered by the board. A veterinarian who has established a veterinarian-owner-patient relationship with an animal at the owner's residence or at another registered veterinary establishment may also provide care for that animal at the location of the patient.

1. Surgery may be performed only in a surgical suite at a registered establishment that has passed inspection. However, surgery requiring only local anesthetics may be performed at a location other than in a surgical suite.

2. House call or proceduralist establishments shall meet the requirements of a stationary establishment for laboratory, radiology, and minimum equipment, with the exception of equipment for assisted ventilation.

C. **Mobile service establishment.** A mobile service establishment is a veterinary clinic or hospital that can be moved from one location to another and from which veterinary services are provided. A mobile service establishment shall meet all the requirements of a stationary establishment appropriate for the services provided.

D. A separate establishment registration is required for separate practices that share the same location.

**18VAC150-20-205. [Repealed]**

**18VAC150-20-210. Revocation or suspension of a veterinary establishment registration.**

The board may revoke or suspend or take other disciplinary action deemed appropriate against the registration of a veterinary establishment if it finds the establishment to be in violation of any provision of laws or regulations governing veterinary medicine or if:

1. The board or its agents are denied access to the establishment to conduct an inspection or investigation;
2. The holder of a registration does not pay any and all prescribed fees or monetary penalties;
3. The establishment is performing procedures beyond the scope of a limited stationary establishment registration; or
4. The establishment has no veterinarian-in-charge registered with the board.

**Part VI. Equine Dental Technicians.**

**18VAC150-20-220. Requirements for registration as an equine dental technician.**

A. A person applying for registration as an equine dental technician shall provide a recommendation from at least two veterinarians licensed in Virginia who attest that at least 50% of their practice is equine, and that they have observed the applicant within the past five years immediately preceding the attestation and can attest to his competency to be registered as an equine dental technician.

B. The qualifications for registration shall include documentation of one of the following:

1. Current certification from the International Association of Equine Dentistry;
2. Completion of a board-approved certification program or training program;
3. Completion of a veterinary technician program that includes equine dentistry in the curriculum; or
4. Evidence of equine dental practice for at least five years and proof of 16 hours of continuing education in equine dentistry completed within the five years immediately preceding application for registration.

C. In order to maintain an equine dental technician registration, a person shall renew such registration by January 1 of each year by payment of the renewal fee specified in 18VAC150-20-100 and attestation of obtaining 16 hours of continuing education relating to equine dentistry within the past three years.

1. Equine dental technicians shall be required to maintain original documents verifying the date and subject of the continuing education program or course, the number of continuing education hours, and certification of completion from a sponsor. Original documents shall be maintained for a period of two years following renewal. The board shall periodically conduct a random audit to determine compliance. Practitioners selected for the audit shall provide all supporting documentation within 14 days of receiving notification of the audit, unless granted an extension by the board.

a. The board may grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the technician, such as temporary disability, mandatory military service, or officially declared disasters.

b. The board may grant an extension for good cause of up to one year for the completion of continuing education requirements upon written request from the technician prior to the renewal date. Such an extension shall not relieve the technician of the continuing education requirement.

2. Registration may be renewed up to one year after the expiration date, provided a late fee as prescribed in 18VAC150-20-100 is paid in addition to the required renewal fee.

3. Reinstatement of registration expired for more than one year shall be at the discretion of the board. To reinstate a registration, the applicant shall pay the reinstatement fee as prescribed in 18VAC150-20-100 and submit evidence of completion of continuing education hours equal to the number of years in which the registration has been expired, for a maximum of two years. The board may require additional documentation of clinical competency and professional activities.

#### **18VAC150-20-230. Application requirements for registration as an equine dental technician.**

In addition to the evidence of qualification required in 18VAC150-20-220, an applicant for registration shall provide:

1. Submission of a completed application and the applicable fee as specified in 18VAC150-20-100; and

2. Submission of satisfactory evidence of good moral character as specified in an application provided by the board.

#### **18VAC150-20-240. Standards of practice for equine dental technicians.**

A. The practice of an equine dental technician may include the performance of routine dental maintenance with nonmotorized hand tools but shall not include cutting or chipping teeth or extraction of rooted teeth.

**B. The planing or leveling of equine teeth using motorized tools or the extraction of wolf teeth premolars shall be performed in accordance with §54.1-3813 C 2 of the Code of Virginia.**

**C. A record of each individual patient treated shall be maintained by the equine dental technician and shall include all relevant procedures performed. Client records shall be kept for a period of three years following the last visit and shall be available for inspection.**



# Virginia Board of Veterinary Medicine

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<b>Registration Number:</b>	<b>Inspection Type:</b>
<b>Name of Veterinary Establishment:</b>	<b>Inspection Results:</b>
<b>Address:</b>	<b>Inspection Date:</b>
<b>City:</b>	<b>Inspection Start Time and End Time:</b> 24-hour format (13:00)
<b>State:</b>	<b>Inspector Name:</b>
<b>Zip Code:</b>	<b>FRP Reporting Status:</b>
<b>Establishment Hours of Operation:</b>	Stationary:
<b>Establishment Phone Number:</b>	Ambulatory:
<b>Establishment Fax Number:</b>	<b>Number of Mobile Units:</b>
<b>Establishment Website:</b>	<b>Inspection Result To (person):</b>
<b>Establishment Email:</b>	<b>Inspection Result To (email address):</b>
<b>Veterinary-in-Charge:</b>	<b>Inspector Comments Below:</b>
<b>Veterinary-in-Charge License Number:</b>	
<b>Veterinary-in-Charge Photo Number:</b>	
<b>Veterinary-in-Charge Email:</b>	

<b>Key:</b>	<b>NC= Non Compliant</b>	<b>NC-R= Non Compliant Repeat Violation</b>	<b>NA= Not Applicable</b>
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**Licensed and Registrations - All Establishments**

**Result Notes**

Result	Notes
<p><b>1 18VAC150-20-30(A)</b></p>	<p>All licenses and registrations 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 that do not have an office accessible to the public shall carry their licenses and registrations in their vehicles.</p> <p><u>Guidance:</u> A license or registration is considered to be in a "place conspicuous to the public" when it is hung in an area that is easily accessed by the public for review. The original license or registration (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 offices for a small fee.</p> <p><u>Violation:</u> Minor - 1 point</p>
<p><b>2 § 54.1-3805</b></p>	<p>No person shall practice veterinary medicine or as a veterinary technician in this Commonwealth unless such person has been licensed by the Board.</p> <p><u>Violation:</u> Major - 5 points</p>
<p><b>3 18VAC150-20-70(A)</b></p>	<p>Failure to renew an individual license shall cause a license to lapse and become invalid, and practice with a lapsed license may subject the licensee to disciplinary action by the board.</p> <p><u>Guidance:</u> All individual licenses must be current. An expired license will be reported as a violation and documentation of practicing without a valid license will be obtained.</p> <p><u>Violation:</u> Major - 5 points</p>
<p><b>4 18VAC150-20-185(B)</b></p>	<p>All veterinary establishment registrations are current. Failure to renew a veterinary establishment permit shall cause the permit to lapse and become invalid.</p> <p><u>Guidance:</u> An expired registration will be reported as a violation and documentation of practicing without a valid registration will be obtained. Reinspection required after registration has been expired for more than 30 days.</p> <p><u>Violation:</u> Major - 5 points</p>

Veterinarian-in-Charge (VIC)

Result Notes

<p>5. <b>18VAC150-20-190(A)</b>                  Every veterinary establishment shall have a veterinarian-in-charge (VIC) who is registered with the Board in order to operate.  <u>Guidance:</u> When there is a change in the VIC, an application for a new permit, naming the new veterinarian-in-charge, shall be made five days prior to the change of the veterinarian-in-charge. If no prior notice was given by the previous veterinarian-in-charge, an application for a new permit naming a new veterinarian-in-charge shall be filed as soon as possible but no more than 10 days after the change. Days are counted as calendar days.                  Violation: Major - 5 points</p>		
<p>6. <b>18VAC150-20-181(A)(1)</b>                  Veterinarian-in-Charge is responsible for regularly being on site as necessary to provide routine oversight to the veterinary establishment for patient safety and compliance with law and regulation.                  Violation: Major - 5 points</p>		
<p>7. <b>18VAC150-20-181(A)(4)</b>                  Prior to opening of the business, on the date of the change of VIC, the new VIC shall take a complete inventory of all Schedules II through V drugs on hand. He shall date and sign the inventory and maintain it on premises for three years. That inventory may be designated as the official biennial controlled substance inventory.                  Violation: Major - 5 points</p>		
<p><b>Requirements for drug storage, dispensing, destruction, and records for all veterinary establishments.</b></p>		
<p>8. <b>18VAC150-20-190(A)</b>                  All drugs shall be maintained, administered, dispensed, prescribed and destroyed in compliance with state and federal laws, which include § 54.1-3303 of the Code of Virginia, 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.  <u>Guidance:</u> This regulation incorporates by reference all applicable laws and regulations related to drug storage, dispensing, destruction, and records. It is not cited as a violation if there is a specific violation identified in this section of the inspection report form.                  Violation: Major - 5 points</p>		<p>Notes</p>

**9 18VAC150-20-190(B)**

**§ 54.1-3461**

**§ 54.1-3462**

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.

Violation: Minor - 1 point

**10 18VAC150-20-190(C)**

**§ 54.1-3410**

All drugs dispensed for companion animals shall be labeled with the following:

1. Name and address of the facility;
2. First and last name of owner;
3. Animal identification and species;
4. Date dispensed;
5. Directions for use;
6. Name, strength (if more than one dosage form exists) and quantity of the drug; and
7. Name of the prescribing veterinarian.

Guidance: 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.

Violation: Major - 5 points for no label; or 2 points for an incomplete label.

11

**18VAC150-20-190(B)(6)**

All veterinary establishment shall maintain drugs in a secure manner with precaution taken to prevent theft or diversion. Only the veterinarian, veterinary technician, pharmacist, or pharmacy technician shall have access to Schedule II through V drugs with the exception provided in subdivision 6 of this subsection.

6. Access to drugs by unlicensed persons shall be allowed only under the following conditions:

- a. Animal is being kept at the establishment outside of the normal hours of operation, and a licensed practitioner is not present in the facility;
- b. The drugs are limited to those dispensed to a specific patient; and
- c. The drugs are maintained separately from the establishment's general drug stock and kept in such a manner so they are not readily available to the public.

Guidance: Only personnel designated in the subsection shall have access to Schedule II, III, IV and V drugs. Drug stocks in establishments where keys and lock combinations are accessible to 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.

The veterinary establishment may want to ask self-assessment questions such as the following:

- Do procedures cover securing drugs from arrival at the establishment until administration to the patient or distribution to the client?
- Are drugs that must be maintained in a secure manner ever stored in an unlocked refrigerator?
- Are blank prescription pads lying around the office where anyone could tear one or more off?

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 the veterinarian, veterinary technician, pharmacist or pharmacy technician.

Violation: Major - 5 points

12

**18VAC150-20-190(D)(1)**

In a stationary establishment, the general stock of Schedule II through V drugs shall be stored in a securely locked cabinet or safe that is not easily movable.

Violation: Major - 5 points

13	<b>18VAC150-20-190(D)(A)</b>	The establishment may also have a working stock of Schedules II through V drugs that shall be kept in (i) a securely locked container, cabinet, or safe when not in use or (ii) direct possession of a veterinarian or veterinary technician. A working stock shall consist of only those drugs that are necessary for use during a normal business day or 24 hours, whichever is less.	<u>Guidance:</u> Working stock that is in use during a procedure or treatment must remain within eyesight and supervision of a veterinarian or veterinary technician at all times.	Violation: Major - 5 points
14	<b>18VAC150-20-190(D)(3)</b>	Whenever the establishment is closed, all general and working stock of Schedules II through V drugs and any dispensed prescriptions that were not delivered during normal business hours shall be securely stored as required for the general stock.		Violation: Major - 5 points
15	<b>18VAC150-20-190(D)(4)</b>	Prescriptions that have been dispensed and prepared for delivery shall be maintained under lock or in an area that is not readily accessible to the public and may be delivered to an owner by an unlicensed person, as designated by the veterinarian.		Violation: Major - 5 points

**18VAC150-20-190(D)(3)  
§ 54.1-3404(E)**

Whenever a theft of or any unusual loss of Schedule II through V drugs is discovered the VIC, or in his absence, his designee, shall immediately report such theft or loss to the Board of Veterinary Medicine and the Board of Pharmacy and to the DEA. The report to the boards shall be in writing and sent electronically or by regular mail. The report to the DEA shall be in accordance with 21 CFR 1301.76(b). If the VIC is unable to determine the exact kind and quantity of the drug loss, he shall immediately take a complete inventory of all Schedules II through V drugs.

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 Administration.

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).

Violation: Major - 3 points

**17 18VAC150-20-190(E)**

Schedules II through V shall be destroyed by (i) transferring the drugs to another entity authorized to possess or provide for proper disposal of such drugs or (ii) destroying the drugs in compliance with applicable local, state and federal laws and regulations. If Schedules II through V drugs are to be destroyed, a DEA drug destruction form shall be fully completed and used as the record of all drugs to be destroyed. A copy of the destruction form shall be retained at the veterinary practice site with other inventory records.

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](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/state laws and regulations.

Violation: Major - 2 points

<p><b>18</b> <b>15VAC150-20-190(F)</b></p> <p>The drug storage area has appropriate provision for temperature control for all drugs and biologics. If drugs requiring refrigeration are maintained at the facility, they shall be kept in a refrigerator with interior thermometer maintained between 36°F and 46°F. If a refrigerated drug is in Schedules II through V, the drug shall be kept in a locked container secured to the refrigerator, or the refrigerator shall be locked. Drugs stored at room temperature are maintained between 59°F and 86°F.</p>	
<p><b>19</b> <b>15VAC150-20-190(G)</b></p> <p>The stock of drugs shall be reviewed frequently, and expired drugs shall be removed from the working stock of drugs at the expiration date and shall not be administered or dispensed.</p> <p><u>Guidance:</u> The expiration date on all drugs, including prepackaged stock, should be regularly checked and drugs that are expired shall 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.</p> <p>Pursuant to the Code of Virginia, § 54.1-3401 defines "drug" to mean (i) articles or substances recognized in the official United States Pharmacopoeia National Formulary or official Homeopathic Pharmacopoeia of the United States, or any supplement to any of them; (ii) articles or substances intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or animals; (iii) articles or substances, other than food, intended to affect the structure or any function of the body of man or animals; (iv) articles or substances intended for use as a component of any article specified in clause (i), (ii), or (iii); or (v) a biological product. A vaccine is considered to be a drug and should be removed from working stock once expired.</p> <p><u>Violation:</u> Major - 5 points for 6 or more 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. If expired drugs are found in both less than 60 days or more than 60 day categories, the higher point value of 4 is assigned.</p>	

20 **18VAC150-20-190(B)**

**§ 54.1-3-404**

A distribution record shall be maintained in addition to the patient's record, in chronological order, for the administering and dispensing of Schedules II through V drugs. The distribution record shall include the following:

1. Date of transaction.
2. Drug name, strength, and the amount dispensed, administered and wasted.
3. Owner 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."

When a veterinarian with a veterinary establishment registration uses the surgery facilities of another veterinary establishment, the drug distribution log(s) must clearly show 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 veterinary establishment where the surgery was performed.

Violation: Major - 5 points for no record; or 3 points for incomplete record or records not maintained in chronological order.

21 **18VAC150-20-190(D)**

**§ 54.1-3-404**

Original invoices for all Schedules II through V drugs received shall be maintained in chronological order on the premises where the stock of drugs is held and the actual date of receipt shall be noted. All drug records shall be maintained for a period of three years from the date of transaction.

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.

Violation: Major - 5 points for no record; or 3 points for an incomplete record or a record not maintained for three years.

<p><b>22</b> <b>18VAC150-20-190(J)</b> <b>§ 54.1-3404</b></p>	<p>A complete and accurate inventory of all Schedules II through V drugs shall be taken, dated, and signed on any date which is within two years of the previous biennial inventory.</p> <p>The biennial inventory:</p> <ol style="list-style-type: none"> <li>1. Must have the drug strength specified.</li> <li>2. Shall indicate if it was taken at the opening or closing of business.</li> <li>3. Shall be maintained on premises where the drugs are held for two years from the date of taking the inventory.</li> </ol>	<p><b>Guidance:</b> The inventory must be taken on any date which is within two years 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. Expired Schedule II through V drugs that are removed from working stock but still on premises during a biennial inventory must be counted. The performance of the biennial inventory may be delegated to another licensee, provided the VIC signs and dates the inventory and remains responsible for its content and accuracy.</p> <p><b>Violation:</b> Major - 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.</p>
<p><b>23</b> <b>18VAC150-20-190(K)</b></p>	<p>Inventories and records, including original invoices, of Schedule II drugs shall be maintained separately from all other records, and the establishment shall maintain a continuous inventory of all Schedule II drugs received, administered, or dispensed, with reconciliation at least monthly. Reconciliation requires an explanation noted on the inventory for any difference between the actual physical count and the theoretical count indicated by the distribution records. A continuous inventory shall accurately indicate the physical count of each Schedule II drug in the general and working stocks at the time of performing the inventory.</p>	<p><b>Violation:</b> Major - 5 points if inventory not done monthly and/or is missing required information; or 3 points if the inventory is only missing required information.</p>
<p><b>24</b> <b>§ 54.1-2502</b></p>	<p>Every veterinary establishment licensed by the Board of Veterinary Medicine shall maintain records of the dispensing of feline buprenorphine and canine butorphanol, reconcile such records monthly, and make such records available for inspection upon request.</p>	<p><b>Violation:</b> Major - 5 points for no record; or 3 points for incomplete record(s). Requirement for the dispensing records is new, non-compliance will be noted, but no violation will be cited for failure to maintain the required records until July 1, 2020.</p>

Notes	Result
<p><b>25 18VAC150-20-190(M)</b>            If a limited stationary or ambulatory practice uses the facilities of another veterinary establishment, the drug distribution log shall clearly reveal whose Schedules II through V drugs were used. If the establishment's drug stock is used, the distribution record shall show that the procedure was performed by a visiting veterinarian who has the patient record. If the visiting veterinarian uses his own stock of drugs, he shall make entries in his own distribution record and in the patient record and shall leave a copy of the patient record at the other establishment.            Violation: Major - 5 points for no record; or 3 points for incomplete record(s).</p>	
Bulk Reconstitution of Injectable, Bulk Compounding or Repackaging	
<p><b>26 18VAC150-20-190(L)</b>            Veterinary establishments in which bulk reconstitution of injectable, bulk compounding or the repackaging 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 repackaging records shall show the following:</p> <ol style="list-style-type: none"> <li>1. Name of the drugs used;</li> <li>2. Strength, if any;</li> <li>3. Date repackaged;</li> <li>4. Quantity prepared;</li> <li>5. Initials of the veterinarian verifying the process;</li> <li>6. Assigned lot or control number;</li> <li>7. Manufacturer's or distributor's name and lot or control number; and</li> <li>8. Expiration date.</li> </ol> <p><b>Guidance:</b> 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 repackaged. Dispensing, labeling and recordkeeping requirements must be followed when repackaging 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 repackaged 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.            Violation: Major - 2 points</p>	
Patient/Medical Recordkeeping	
<p><b>27 18VAC150-20-200(A)(6)(D)</b>            All veterinary establishments must have storage for records.            Violation: Major - 2 points</p>	

28 **18VAC150-20-195(A)**

A legible, daily record of each patient treated shall be maintained at the veterinary establishment and shall include at a minimum:

1. Name of the patient and the owner;
2. Identification of the treating veterinarian and of the person making the entry (Initials may be used if a master list that identifies the initials is maintained.);
3. Presenting complaint or reason for contact;
4. Date of contact;
5. Physical examination findings;
6. Tests and diagnostics performed and results;
7. Procedures performed, treatment given, and results;
8. Drugs administered, dispensed or prescribed, including quantity, strength and dosage, and route of administration. For vaccines identification of the lot and manufacturer shall be maintained;
9. Radiographs or digital images clearly labeled with identification of the establishment the patient name, date taken, and anatomic specificity. If an original radiograph or digital image is transferred to another establishment or released to the owner, a records of this transfer or release shall be maintained on or with the patient's records; and
10. Any specific instructions for discharge or referrals to other practitioners.

Guidance: A medical record should allow 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.

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.

Violation: 5 points for no records; or 3 points for only missing required information.

29 **18VAC150-20-195(B)**

An individual record 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 owner basis. Patient records, including radiographs or digital images, shall be kept for a period of three years following the last office visit or discharge of such animal from a veterinary establishment.

Violation: 3 points if individual records not maintained on each patient; and/or 1 point if records not maintained for required time period.

30	<p><b>18VAC150-20-195(C)</b></p> <p>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."</p> <p>Violation: Major - 2 points</p>	
All Veterinary Establishments		
31	<p><b>18VAC150-20-130(C)</b></p> <p>When there is a veterinary preceptee or extern practicing in the establishment, the supervising veterinarian shall disclose such practice to owners. The disclosure shall be by signage clearly visible to the public or by inclusion on an informed consent form.</p> <p>Violation: Minor - 1 point</p>	
All Stationary Veterinary Establishments		
32	<p><b>18VAC150-20-200(D)</b></p> <p>A separate establishment registration is required for separate practices that share the same location.</p> <p>Violation: Major - 5 points</p>	
Establishments Performing Surgery		
33	<p><b>18VAC150-20-200(A)(2)(c)</b></p> <p>The areas within the facility shall include a room that is reserved only for surgery and used for no other purpose.</p> <p>Violation: Minor - 1 point</p>	
34	<p><b>18VAC150-20-200(A)(2)(c)(1)</b></p> <p>The surgery room shall have walls constructed of nonporous material and extending from the floor to ceiling.</p> <p>Violation: Minor - 1 point</p>	
35	<p><b>18VAC150-20-200(A)(2)(c)(2)</b></p> <p>The surgery room shall be of a size adequate to accommodate a surgical table, anesthesia support equipment, surgical supplies, and all personnel necessary for safe performance of the surgery.</p> <p>Violation: Minor - 1 point</p>	
36	<p><b>18VAC150-20-200(A)(2)(c)(3)</b></p> <p>The surgery room shall be kept so that storage in the surgery room shall be limited to items and equipment normally related to surgery and surgical procedures.</p> <p>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.</p> <p>Violation: Minor - 1 point</p>	

		Laboratory	Result Notes
37	<p><b>18VAC150-20-200(A)(7)(e)(4)</b> The surgery room shall have a surgical table made of non-porous material. Violation: Minor - 1 point</p>		
38	<p><b>18VAC150-20-200(A)(2)(4)(5)</b> The surgery room shall have surgical supplies, instruments, and equipment commensurate with the kind of services provided. Violation: Minor - 1 point</p>		
39	<p><b>18VAC150-20-200(A)(7)(e)(6)</b> The surgery room shall surgical and automatic emergency lighting to facilitate performance of procedures. Guidance: Section 150-20-10 of the Regulations Governing the Practice of Veterinary Medicine defines "automatic emergency lighting" to mean lighting which is powered by battery, generator, or alternate power source other than electrical power, is activated automatically by electrical power failure, and provides sufficient light to complete surgery or to stabilize the animal until surgery can be continued or the animal moved to another establishment. Violation: Minor - 1 point</p>		
40	<p><b>18VAC150-20-200(A)(2)(e)(7)</b> The surgery room for establishments that perform surgery on small animals, have a door to close off the surgery room from other areas of the practice. Violation: Minor - 1 point</p>		
41	<p><b>18VAC150-20-100(A)(3)</b> Any addition or renovation of a stationary establishment or ambulatory establishment that involves changes to the structure or composition of a surgery room shall require reinspection by the board and payment of the required fee prior to use. Violation: Minor - 1 point</p>		
42	<p><b>18VAC150-20-200(A)(3)</b> The veterinary establishment shall have, at a minimum, proof of use of either in-house laboratory service or outside laboratory services for performing lab tests, consistent with appropriate professional care for the species being treated. Guidance: Stationary facilities open 24 hours a day are required to have onsite laboratory services. For all other veterinary establishments which may opt to use an outside laboratory service, a letter, email, or invoice may serve as documentation for compliance purposes. Violation: Major - 5 points</p>		

Housing		Result	Notes
43	<p><b>18VAC150-20-200(A)(4)(a)</b></p> <p>For housing animals, the establishment shall provide an animal identification system at all times when housing an animal.</p> <p>Violation: Minor - 1 point</p>		
44	<p><b>18VAC150-20-200(A)(4)(b)</b></p> <p>For housing animals, the establishment shall provide accommodations of appropriate size and construction to prevent residual contamination or injury.</p> <p>Guidance: A mobile service establishment shall meet all requirements of a stationary establishment appropriate for the services provided.</p> <p>Violation: Minor - 1 point</p>		
45	<p><b>18VAC150-20-200(A)(4)(c)</b></p> <p>For housing animals, the establishment shall provide accommodations allowing for the effective separation of contagious and noncontagious patients.</p> <p>Violation: Minor - 1 point</p>		
46	<p><b>18VAC150-20-200(A)(4)(d)</b></p> <p>For housing animals, the establishment shall provide exercise areas that provide and allow effective separation of animals or walking the animals at medically appropriate intervals.</p> <p>Violation: Minor - 1 point</p>		
Radiology		Result	Notes
47	<p><b>18VAC150-20-200(A)(5)</b></p> <p>A veterinary establishment shall either have radiology service in-house or documentation of outside service for obtaining diagnostic-quality radiographs.</p> <p>Guidance: Stationary facilities open 24 hours a day are required to have onsite radiology/imaging services. For all other veterinary establishments which may opt to use an outside radiology/imaging service, a letter, email, or invoice may serve as documentation for compliance purposes.</p> <p>Violation: Minor - 1 point</p>		
48	<p><b>18VAC150-20-200(A)(5)(a)</b></p> <p>If radiology is in-house, the establishment shall document that radiographic equipment complies with Part VI (12VAC5-481-1581 et seq.), Use of Diagnostic X-Rays in the Healing Arts, of the Virginia Radiation Protection Regulations of the Virginia Department of Health.</p> <p>Guidance: Dental units are considered to be radiographic equipment.</p> <p>Violation: Major - 5 points</p>		

		Result	Notes
49	<p><b>18VAC150-20-200(A)(3)(D)</b></p> <p>If radiology is in-house, maintain and utilize lead aprons and gloves and individual radiation exposure badges for each employee exposed to radiographs.</p> <p><u>Guidance:</u> A mobile service establishment shall meet all requirements of a stationary establishment appropriate for the services provided.</p> <p>Violation: Major - 5 points</p>		
<b>Minimum Equipment</b>			
50	<p><b>18VAC150-20-200(A)(6)(a)</b></p> <p>Minimum equipment in the establishment shall include an appropriate method of sterilizing instruments.</p> <p><u>Guidance:</u> Veterinary establishments must have an appropriate method of sterilizing instruments. Ambulatory mobile veterinary establishments must meet this requirement if appropriate for the services provided.</p> <p>Violation: Minor - 1 point</p>		
51	<p><b>18VAC150-20-200(A)(6)(b)</b></p> <p>Minimum equipment in the establishment shall include internal and external sterilization monitors.</p> <p><u>Guidance:</u> Veterinary establishments must have an appropriate method for internal and external sterilization monitoring. Ambulatory mobile veterinary establishments must meet this requirement if appropriate for the services provided.</p> <p>Violation: Minor - 1 point</p>		
52	<p><b>18VAC150-20-200(A)(6)(c)</b></p> <p>Minimum equipment in the establishment shall include a stethoscope.</p> <p>Violation: Minor - 1 point</p>		
53	<p><b>18VAC150-20-200(A)(6)(e)</b></p> <p>Minimum equipment in the establishment shall include adequate means of determining patient's weight.</p> <p><u>Guidance:</u> Veterinary establishments must have an appropriate method of determining a patient's weight. Ambulatory mobile veterinary establishments must meet this requirement if appropriate for the services provided.</p> <p>Violation: Minor - 1 point</p>		

Stationary Veterinary Establishments - Open 24 hours/day		Result	Notes
1	<p><b>18VAC150-20-200(B)(1)</b></p> <p>A stationary establishment that is open to the public 24 hours a day shall have licensed personnel on premises at all times and shall be equipped to handle emergency critical care and hospitalization. The establishment shall have radiology/imaging and laboratory services available on site.</p> <p>Violation: Major - 5 points</p>		
<b>Buildings and Grounds</b>			
2	<p><b>18VAC150-20-200(A)(1)</b></p> <p>Buildings and ground must be maintained to provide sanitary facilities for the care and medical well-being of patients.</p> <p>Violation: Major - 2 points</p>		
3	<p><b>18VAC150-20-200(A)(1)(a)</b></p> <p>Temperature, ventilation, and lighting must be consistent with the medical well-being of patients.</p> <p>Guidance: A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p>Violation: Minor - 1 point</p>		
4	<p><b>18VAC150-20-200(A)(1)(b)(1)</b></p> <p>There shall be on premises hot and cold running water of drinking quality, as defined by the Virginia Department of Health.</p> <p>Guidance: A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p>Violation: Minor - 1 point</p>		
5	<p><b>18VAC150-20-200(A)(1)(c)(2)</b></p> <p>There shall be on premises an acceptable method of disposal of deceased animals, in accordance with any local ordinance or state and federal regulations.</p> <p>Guidance: A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p>Violation: Minor - 1 point</p>		

		Result	Notes
6	<p><b>18VAC150-20-200(A)(1)(b)(3)</b>  There shall be on premises refrigeration exclusively for carcasses of companion animals that require storage for 24 hours or more.</p> <p><b>Guidance:</b> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><b>Violation:</b> Minor - 1 point</p>		
7	<p><b>18VAC150-20-200(A)(1)(c)</b>  Sanitary toilet and lavatory shall be available for personnel and owners.</p> <p><b>Guidance:</b> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><b>Violation:</b> Minor - 1 point</p>		
8	<p><b>18VAC150-20-200(A)(2)(a)</b>  The areas within the facility shall include a reception area separate from other designated rooms.</p> <p><b>Guidance:</b> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><b>Violation:</b> Minor - 1 point</p>		
9	<p><b>18VAC150-20-200(A)(2)(b)</b>  The areas within the facility shall include an examination room or rooms containing a table or tables with nonporous surfaces.</p> <p><b>Guidance:</b> A mobile service establishment shall meet all requirements of a stationary establishment appropriate for the services provided.</p> <p><b>Violation:</b> Minor - 1 point</p>		
<b>Minimum Equipment</b>			
10	<p><b>18VAC150-20-200(A)(5)(d)</b>  Minimum equipment in the establishment shall include equipment for delivery of assisted ventilation appropriate to the species being treated, including endotracheal tubes.</p> <p><b>Guidance:</b> Ambulatory agricultural/equine and house call/proceduralist veterinary establishment are exempt from meeting the requirements for assisted ventilation. Ambulatory mobile veterinary establishments must meet this requirement if appropriate for the services provided.</p> <p><b>Violation:</b> Minor - 1 point</p>		

**Stationary Veterinary Establishments - Open < 24 hours/day**

Notes

Result

Result	Notes
<p>1 <b>18VAC150-20-200(D)(2)</b> <b>§ 54.1-3806.1</b> A stationary establishment that is not open to the public 24 hours a day shall have licensed personnel available during its advertised hours of operation and shall disclose to the public that the establishment does not have continuous staff, in compliance with § 54.1-3806.1 of the Code of Virginia. <u>Guidance:</u> The Disclosure form cannot be printed on the front or back of another document. It can be smaller than a standard piece of paper. <u>Violation:</u> 3 points for missing form; and/or 1 point if form not compliant.</p>	
<p><b>Buildings and Grounds</b></p>	
<p>2 <b>18VAC150-20-200(A)(1)</b> Buildings and ground must be maintained to provide sanitary facilities for the care and medical well-being of patients. <u>Violation:</u> Major - 2 points</p>	
<p>3 <b>18VAC150-20-200(A)(1)(a)</b> Temperature, ventilation, and lighting must be consistent with the medical well-being of patients. <u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided. <u>Violation:</u> Minor - 1 point</p>	
<p>4 <b>18VAC150-20-200(A)(1)(b)(1)</b> There shall be on premises hot and cold running water of drinking quality, as defined by the Virginia Department of Health. <u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided. <u>Violation:</u> Minor - 1 point</p>	
<p>5 <b>18VAC150-20-200(A)(1)(b)(2)</b> There shall be on premises an acceptable method of disposal of deceased animals, in accordance with any local ordinance or state and federal regulations. <u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided. <u>Violation:</u> Minor - 1 point</p>	

6	<p><b>18VAC150-20-300(A)(1)(b)(3)</b></p> <p>There shall be on premises refrigeration exclusively for carcasses of companion animals that require storage for 24 hours or more.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>				
7	<p><b>18VAC150-20-200(A)(1)(g)</b></p> <p>Sanitary toilet and lavatory shall be available for personnel and owners.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>				
8	<p><b>18VAC150-20-200(A)(2)(a)</b></p> <p>The areas within the facility shall include a reception area separate from other designated rooms.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>				
9	<p><b>18VAC150-20-300(A)(2)(b)</b></p> <p>The areas within the facility shall include an examination room or rooms containing a table or tables with nonporous surfaces.</p> <p><u>Guidance:</u> A mobile service establishment shall meet all requirements of a stationary establishment appropriate for the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>				
<b>Minimum Equipment</b>			<b>Result</b>	<b>Notes</b>	
10	<p><b>18VAC150-20-300(A)(6)(d)</b></p> <p>Minimum equipment in the establishment shall include equipment for delivery of assisted ventilation appropriate to the species being treated, including endotracheal tubes.</p> <p><u>Guidance:</u> Ambulatory agricultural/equine and house call/proceduralist veterinary establishment are exempt from meeting the requirements for assisted ventilation. Ambulatory mobile veterinary establishments must meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>				

**Stationary Veterinary Establishments - Limited**

Notes

Result

<p>1 <b>18VAC150-20-200(C)</b></p>	<p>When the scope of practice is less than full service, a specifically limited [stationary] establishment registration shall be required. Such establishments shall have posted in a conspicuous manner the specific limitations on the scope of practice on a form provided by the board.</p> <p>Guidance: The registration will include any limitations and will be considered the "form provided by the board." A registration 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 registration (not a photocopy) should be posted or available for inspection. Duplicate copies of a registration can be obtained through the Board of Veterinary Medicine's office for a small fee. Any license or registration that is expired will be reported and documentation of practicing without a valid license or permit will be obtained.</p> <p>Violation: Minor - 1 point</p>	<p>Result</p>
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**Stationary Veterinary Establishments - Open Less than 24 hours/day**

Notes

Result

<p>2 <b>18VAC150-20-200(B)(2)</b> § 54.1-3806.1</p>	<p>A stationary establishment that is not open to the public 24 hours a day shall have licensed personnel available during its advertised hours of operation and shall disclose to the public that the establishment does not have continuous staff, in compliance with § 54.1-3806.1 of the Code of Virginia.</p> <p>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.</p> <p>Violation: 3 points for missing form; and/or 1 point if form not compliant.</p>	<p>Result</p>
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**Buildings and Grounds**

Notes

Result

<p>3 <b>18VAC150-20-200(A)(1)</b></p>	<p>Buildings and ground must be maintained to provide sanitary facilities for the care and medical well-being of patients.</p> <p>Violation: Major - 2 points</p>	<p>Result</p>
<p>4 <b>18VAC150-20-200(A)(2)</b></p>	<p>Temperature, ventilation, and lighting must be consistent with the medical well-being of patients.</p> <p>Guidance: A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p>Violation: Minor - 1 point</p>	<p>Result</p>

5	<p><b>18VAC150-20-200(A)(1)(b)(1)</b></p> <p>There shall be on premises hot and cold running water of drinking quality, as defined by the Virginia Department of Health.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>	
6	<p><b>18VAC150-20-200(A)(1)(b)(2)</b></p> <p>There shall be on premises an acceptable method of disposal of deceased animals, in accordance with any local ordinance or state and federal regulations.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>	
7	<p><b>18VAC150-20-200(A)(1)(b)(3)</b></p> <p>There shall be on premises refrigeration exclusively for carcasses of companion animals that require storage for 24 hours or more.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>	
8	<p><b>18VAC150-20-200(A)(1)(c)</b></p> <p>Sanitary toilet and lavatory shall be available for personnel and owners.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>	
9	<p><b>18VAC150-20-200(A)(2)(a)</b></p> <p>The areas within the facility shall include a reception area separate from other designated rooms.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>	
10	<p><b>18VAC150-20-200(A)(2)(b)</b></p> <p>The areas within the facility shall include an examination room or rooms containing a table or tables with nonporous surfaces.</p> <p><u>Guidance:</u> A mobile service establishment shall meet all requirements of a stationary establishment appropriate for the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>	

Minimum Equipment		Result	Notes
11	<p><b>18VAC150-20-200(A)(6)(d)</b></p> <p>Minimum equipment in the establishment shall include equipment for delivery of assisted ventilation appropriate to the species being treated, including endotracheal tubes.</p> <p><b>Guidance:</b> Ambulatory agricultural/equine and house call/proceduralist veterinary establishment are exempt from meeting the requirements for assisted ventilation. Ambulatory mobile veterinary establishments must meet this requirement if appropriate for the services provided.</p> <p><b>Violation:</b> Minor - 1 point</p>		

**Ambulatory Veterinary Establishments - Agricultural and Equine Establishments**

**Notes**

**Result**

**1 18VAC150-20-201(A)**

An agricultural or equine ambulatory establishment is a mobile practice in which health care is performed at the location of the animal. Surgery may be performed as part of an agricultural or equine ambulatory practice provided the establishment has surgical supplies, instruments, and equipment commensurate with the kind of surgical procedures performed.

**Violation: Major - 5 points**

**Ambulatory Veterinary Establishments - House Call or Proceduralist Establishments**

**Notes**

**Result**

**2 18VAC150-20-200(B)**

A house call or proceduralist establishment is an ambulatory practice in which health care of small animals is performed at the residence of the owner of the small animal or another establishment registered by the board. A veterinarian who has established a veterinarian-owner-patient relationship with an animal at the owner's residence or at another registered veterinary establishment may also provide care for that animal at the location of the animal.

**Violation: Major - 5 points**

**3 18VAC150-20-200(B)(1)**

A house call or proceduralist practice may only perform surgery in a surgical suite at a registered establishment that has passed inspection. However, surgery requiring only local anesthetics may be performed at a location other than in a surgical suite.

**Guidance:** The locations where surgeries are performed should be maintained for the inspector's review. The house call or proceduralist practice is compliant if the surgery suite used was inspected and part of another registered veterinary establishment.

**Violation: Major - 5 points**

**Ambulatory Veterinary Establishments - Mobile Service**

		Result	Notes
<b>18VAC150-20-201(C)</b>			
<p>A mobile service establishment is a veterinary clinic or hospital that can be moved from one location to another and from which veterinary services are provided. A mobile service establishment shall meet all the requirements of a stationary establishment appropriate for the services provided.</p> <p>Violation: Major - 5 points</p>			
<b>Buildings and Grounds</b>			
1	<p><b>18VAC150-20-200(A)(1)</b></p> <p>Buildings and ground must be maintained to provide sanitary facilities for the care and medical well-being of patients.</p> <p>Violation: Major - 2 points</p>		
2	<p><b>18VAC150-20-200(A)(1)(a)</b></p> <p>Temperature, ventilation, and lighting must be consistent with the medical well-being of patients.</p> <p>Guidance: A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p>Violation: Minor - 1 point</p>		
3	<p><b>18VAC150-20-200(A)(1)(b)(1)</b></p> <p>There shall be on premises hot and cold running water of drinking quality, as defined by the Virginia Department of Health.</p> <p>Guidance: A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p>Violation: Minor - 1 point</p>		
4	<p><b>18VAC150-20-200(A)(1)(b)(2)</b></p> <p>There shall be on premises an acceptable method of disposal of deceased animals, in accordance with any local ordinance or state and federal regulations.</p> <p>Guidance: A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p>Violation: Minor - 1 point</p>		

		Result	Notes
5	<p><b>18VAC150-20-200(A)(1)(b)(3)</b></p> <p>There shall be on premises refrigeration exclusively for carcasses of companion animals that require storage for 24 hours or more.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>		
6	<p><b>18VAC150-20-200(A)(1)(c)</b></p> <p>Sanitary toilet and lavatory shall be available for personnel and owners.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>		
7	<p><b>18VAC150-20-200(A)(2)(a)</b></p> <p>The areas within the facility shall include a reception area separate from other designated rooms.</p> <p><u>Guidance:</u> A mobile service establishment shall meet this requirement if appropriate to the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>		
8	<p><b>18VAC150-20-200(A)(2)(b)</b></p> <p>The areas within the facility shall include an examination room or rooms containing a table or tables with nonporous surfaces.</p> <p><u>Guidance:</u> A mobile service establishment shall meet all requirements of a stationary establishment appropriate for the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>		
<b>Minimum Equipment</b>			
9	<p><b>18VAC150-20-200(A)(9)(a)</b></p> <p>Minimum equipment in the establishment shall include equipment for delivery of assisted ventilation appropriate to the species being treated, including endotracheal tubes.</p> <p><u>Guidance:</u> Ambulatory agricultural/equine and house call/proceduralist veterinary establishment are exempt from meeting the requirements for assisted ventilation. Ambulatory mobile veterinary establishments must meet this requirement if appropriate for the services provided.</p> <p><u>Violation:</u> Minor - 1 point</p>		



**Pictures**

Veterinary Establishment

Date:

**Virginia Board of Veterinary Medicine**  
**Use of Compounded Drugs in Veterinary Practice**

**Guidance**

**Q: May a veterinarian prescribe a compounded drug product?**

**A:** A Virginia licensed veterinarian may prescribe a compounded drug product by preparing a valid prescription pursuant to federal and state laws and regulations for an individual patient with which there exists a valid veterinarian-client-patient relationship. The client may obtain the compounded drug product from a pharmacy of their choice that is properly licensed by the Virginia Board of Pharmacy. The payment arrangements for a prescribed compounded drug product are not under the purview of the Board of Veterinary Medicine. However, a pharmacist must be compliant with the Virginia Board of Pharmacy regulation, 18VAC110-20-390(A), which states “*A pharmacist shall not solicit or foster prescription practice with a prescriber of drugs or any other person providing for rebates, ‘kickbacks,’ fee-splitting, or special charges in exchange for prescription orders unless fully disclosed in writing to the patient and any third party payor.*”

**Q: May a veterinarian obtain compounded drug products from a pharmacy for administration in his/her office?**

**A:** Yes, a Virginia licensed veterinarian may obtain compounded drug products from a pharmacy that is properly licensed by the Virginia Board of Pharmacy for *administration* in the course of their professional practice.

**Q: May a veterinarian dispense a compounded drug product?**

**A:** A veterinarian may dispense a compounded drug product as follows:

**Drug Compounded by Veterinarian in Veterinary Facility**

A veterinarian may dispense a compounded drug produce *if it is compounded by the veterinarian* pursuant to Virginia Code § 54.1-3410.2(J).

**Drug Compounded by Pharmacy and Purchased by Veterinarian**

A veterinarian may only dispense a compounded drug obtained from a pharmacy under the conditions set forth in § 54.1-3301(2) which states “... a veterinarian shall only be authorized to dispense a compounded drug, distributed from a pharmacy, when (i) the animal is his own patient, (ii) the animal is a companion animal as defined in regulations promulgated by the Board of Veterinary Medicine, (iii) the quantity dispensed is no more than a seven-day supply, (iv) the compounded drug is for the treatment of an emergency condition, and (v) timely access to a compounding pharmacy is not available, as determined by the prescribing veterinarian;...”

**Q:** What is the penalty for a licensee of the Virginia Board of Veterinary Medicine who is found to be dispensing compounded drug product not in accordance with federal law or the Virginia Drug Control Act?

**A:** The licensee may be subject to disciplinary action.

### **Applicable Laws**

#### **§ 54.1-3301. Exceptions.**

*This chapter shall not be construed to:*

- 1. Interfere with any legally qualified practitioner of dentistry, or veterinary medicine or any physician acting on behalf of the Virginia Department of Health or local health departments, in the compounding of his prescriptions or the purchase and possession of drugs as he may require;*
- 2. Prevent any legally qualified practitioner of dentistry, or veterinary medicine or any prescriber, as defined in § 54.1-3401, acting on behalf of the Virginia Department of Health or local health departments, from administering or supplying to his patients the medicines that he deems proper under the conditions of § 54.1-3303 or from causing drugs to be administered or dispensed pursuant to §§ 32.1-42.1 and 54.1-3408, except that a veterinarian shall only be authorized to dispense a compounded drug, distributed from a pharmacy, when (i) the animal is his own patient, (ii) the animal is a companion animal as defined in regulations promulgated by the Board of Veterinary Medicine, (iii) the quantity dispensed is no more than a seven-day supply, (iv) the compounded drug is for the treatment of an emergency condition, and (v) timely access to a compounding pharmacy is not available, as determined by the prescribing veterinarian;*

#### **§ 54.1-3401. Definitions.**

*"Compounding" means the combining of two or more ingredients to fabricate such ingredients into a single preparation and includes the mixing, assembling, packaging, or labeling of a drug or device (i) by a pharmacist, or within a permitted pharmacy, pursuant to a valid prescription issued for a medicinal or therapeutic purpose in the context of a bona fide practitioner-patient-pharmacist relationship, or in expectation of receiving a valid prescription based on observed historical patterns of prescribing and dispensing; (ii) by a practitioner of medicine, osteopathy, podiatry, dentistry, or veterinary medicine as an incident to his administering or dispensing, if authorized to dispense, a controlled substance in the course of his professional practice; or (iii) for the purpose of, or as incident to, research, teaching, or chemical analysis and not for sale or for dispensing. The mixing, diluting, or reconstituting of a manufacturer's product drugs for the purpose of administration to a patient, when performed by a practitioner of medicine or osteopathy licensed under Chapter 29 (§ 54.1-2900 et seq.), a person supervised by such practitioner pursuant to subdivision A 6 or A 19 of § 54.1-2901, or a person supervised by such practitioner or a licensed nurse practitioner or physician assistant pursuant to subdivision A 4 of § 54.1-2901 shall not be considered compounding.*

#### **§ 54.1-3410.2. Compounding; pharmacists' authority to compound under certain conditions; labeling and record maintenance requirements.**

*A. A pharmacist may engage in compounding of drug products when the dispensing of such compounded products is (i) pursuant to valid prescriptions for specific patients and (ii) consistent with the provisions of § 54.1-3303 relating to the issuance of prescriptions and the dispensing of drugs.*

*Pharmacists shall label all compounded drug products that are dispensed pursuant to a prescription in accordance with this chapter and the Board's [Pharmacy] regulations, and shall include on the labeling an appropriate beyond-use date as determined by the pharmacist in compliance with USP-NF standards for pharmacy compounding.*

*B. A pharmacist may also engage in compounding of drug products in anticipation of receipt of prescriptions based on a routine, regularly observed prescribing pattern.*

*Pharmacists shall label all products compounded prior to dispensing with (i) the name and strength of the compounded medication or a list of the active ingredients and strengths; (ii) the pharmacy's assigned control number that corresponds with the compounding record; (iii) an appropriate beyond-use date as determined by the pharmacist in compliance with USP-NF standards for pharmacy compounding; and (iv) the quantity.*

*C. In accordance with the conditions set forth in subsections A and B, pharmacists shall not distribute compounded drug products for subsequent distribution or sale to other persons or to commercial entities, including distribution to pharmacies or other entities under common ownership or control with the facility in which such compounding takes place; however, a pharmacist may distribute to a veterinarian in accordance with federal law.*

*Compounded products for companion animals, as defined in regulations promulgated by the Board of Veterinary Medicine, and distributed by a pharmacy to a veterinarian for further distribution or sale to his own patients shall be limited to drugs necessary to treat an emergent condition when timely access to a compounding pharmacy is not available as determined by the prescribing veterinarian.*

*A pharmacist may, however, deliver compounded products dispensed pursuant to valid prescriptions to alternate delivery locations pursuant to § 54.1-3420.2.*

*A pharmacist may provide a reasonable amount of compounded products to practitioners of medicine, osteopathy, podiatry, or dentistry to administer to their patients, either personally or under their direct and immediate supervision, if there is a critical need to treat an emergency condition, or as allowed by federal law or regulations. A pharmacist may also provide compounded products to practitioners of veterinary medicine for office-based administration to their patients.*

*Pharmacists who provide compounded products for office-based administration for treatment of an emergency condition or as allowed by federal law or regulations shall label all compounded products distributed to practitioners other than veterinarians for administration to their patients with (i) the statement "For Administering in Prescriber Practice Location Only"; (ii) the name and strength of the compounded medication or list of the active ingredients and strengths; (iii) the facility's control number; (iv) an appropriate beyond-use date as determined by the pharmacist in compliance with USP-NF standards for pharmacy compounding; (v) the name and address of the pharmacy; and (vi) the quantity. Pharmacists shall label all compounded products for companion animals, as defined in regulations promulgated by the Board of Veterinary Medicine, and distributed to a veterinarian for either further distribution or sale to his own patient or administration to his own patient with (a) the name and strength of the compounded medication or list of the active ingredients and strengths; (b) the facility's control number; (c) an appropriate beyond-use date as determined by the pharmacist in compliance with USP-NF standards for pharmacy compounding; (d) the name and address of the pharmacy; and (e) the quantity.*

*E. Pharmacists shall ensure compliance with USP-NF standards for both sterile and non-sterile compounding.*

*J. Practitioners who may lawfully compound drugs for administering or dispensing to their own patients pursuant to §§ 54.1-3301, 54.1-3304, and 54.1-3304.1 shall comply with all provisions of this section and the relevant Board regulations.*

## Virginia Board of Veterinary Medicine

### Ambulatory Mobile Service Establishments – Change of Location without Inspection

Question: Is an inspection required when an ambulatory mobile service establishment changes location?

Answer: The *Regulations Governing the Practice of Veterinary Medicine* states the following:

#### ***18VAC150-20-180. Requirements to be registered as a veterinary establishment.***

*A. Every veterinary establishment shall apply for registration on a form provided by the board and submit the application fee specified in 18VAC150-20-100. The board may issue a registration as a stationary or ambulatory establishment. Every veterinary establishment shall have a veterinarian-in-charge registered with the board in order to operate.*

*2. An application for registration must be made to the board 45 days in advance of opening or changing the location of the establishment or requesting a change in the establishment category listed on the registration.*

Minutes from December 19, 1996, meeting and subsequent revisions on November 14, 2007 and October 24, 2017, reflect that the Board determined ambulatory mobile service establishment are allowed to change location without an inspection, but the establishment must inform the Board within 30 days if there is any change in the address of record pursuant to the following regulation:

#### ***18VAC150-20-30. Posting of licenses; accuracy of address.***

*B. It shall be the duty and responsibility of each licensee, registrant, and holder of a registration to operate a veterinary establishment to keep the board apprised at all times of his current address of record and the public address, if different from the address of record. All notices required by law or by this chapter to be mailed to any veterinarian, veterinary technician, registered equine dental technician, or holder of a registration to operate a veterinary establishment shall be validly given when mailed to the address of record furnished to the board pursuant to this regulation. All address changes shall be furnished to the board within 30 days of such change.*

**Virginia Board of Veterinary Medicine**

**Guidance for  
 Disposition of Cases Involving Failure of Veterinarian-in-Charge to Notify Board of  
 Veterinary Establishment Closure**

Guidance

**Q: What will the Board accept as notification of closure?**

**A:** Notification must be in writing, and the Board must be notified 10 days prior to closure. Notification may be sent via email or mail. The Veterinary Establishment Closure Form is available to utilize to notify the Board of the closure of a veterinary establishment.

Board Action for Non-Compliance

The Board adopted the following guidelines for resolution of cases of non-compliance by a veterinarian-in-charge's failure to provide prior notification to the Board of a veterinary establishment's closure in accordance with 18VAC150-20-181:

**Veterinarian-in-Charge**

Cause	Possible Action
First offense: 90 days or less after closure	Advisory Letter
First offense: 91 days or more	Confidential Consent Agreement
Second offense	Consent Order; Reprimand

Applicable Law, Regulation and Guidance

Code of Virginia

**§ 54.1-3804. Specific powers of Board.**

*In addition to the powers granted in § 54.1-2400, the Board shall have the following specific powers and duties:*

*3. To regulate, inspect, and register all establishments and premises where veterinary medicine is practiced.*

**§ 54.1-2405. Transfer of patient records in conjunction with closure, sale, or relocation of practice; notice required.**

*A. No person licensed, registered, or certified by one of the health regulatory boards under the Department shall transfer records pertaining to a current patient in conjunction with the closure, sale or relocation of a professional practice until such person has first attempted to notify the patient of the pending transfer, by mail, at the patient's last known address, and by publishing prior notice in a newspaper of general circulation within the provider's practice area, as specified in § 8.01-324.*

*The notice shall specify that, at the written request of the patient or an authorized representative, the records or copies will be sent, within a reasonable time, to any other like-regulated provider of the patient's choice or provided to the patient pursuant to § 32.1-127.1:03. The notice shall also disclose whether any charges will be billed by the provider for supplying the patient or the provider chosen by the patient with the originals or copies of the patient's records. Such charges shall not exceed the actual costs of copying and mailing or delivering the records.*

*B. For the purposes of this section:*

*"Current patient" means a patient who has had a patient encounter with the provider or his professional practice during the two-year period immediately preceding the date of the record transfer.*

*"Relocation of a professional practice" means the moving of a practice located in Virginia from the location at which the records are stored at the time of the notice to another practice site that is located more than 30 miles away or to another practice site that is located in another state or the District of Columbia.*

#### Regulations Governing the Practice of Veterinary Medicine

#### **18VAC150-20-181. Requirements for veterinarian-in-charge.**

*A. The veterinarian-in-charge of a veterinary establishment is responsible for:*

- 1. Regularly being on site as necessary to provide routine oversight to the veterinary establishment for patient safety and compliance with law and regulation.*
- 2. Maintaining the facility within the standards set forth by this chapter.*
- 3. Performing the biennial controlled substance inventory and ensuring compliance at the facility with any federal or state law relating to controlled substances as defined in § 54.1-3404 of the Code of Virginia. The performance of the biennial inventory may be delegated to another licensee, provided the veterinarian-in-charge signs the inventory and remains responsible for its content and accuracy.*
- 4. Notifying the board in writing of the closure of the registered facility 10 days prior to closure.*
- 5. Notifying the board immediately if no longer acting as the veterinarian-in-charge.*
- 6. Ensuring the establishment maintains a current and valid registration issued by the board.*

*B. Upon any change in veterinarian-in-charge, these procedures shall be followed:*

- 1. The veterinarian-in-charge registered with the board remains responsible for the establishment and the stock of controlled substances until a new veterinarian-in-charge is registered or for five days, whichever occurs sooner.*
- 2. An application for a new registration, naming the new veterinarian-in-charge, shall be made five days prior to the change of the veterinarian-in-charge. If no prior notice was given by the previous veterinarian-in-charge, an application for a new registration naming a new*

*veterinarian-in-charge shall be filed as soon as possible, but no more than 10 days, after the change.*

*3. The previous establishment registration is void on the date of the change of veterinarian-in-charge and shall be returned by the former veterinarian-in-charge to the board five days following the date of change.*

*4. Prior to the opening of the business, on the date of the change of veterinarian-in-charge, the new veterinarian-in-charge shall take a complete inventory of all Schedules II through V drugs on hand. He shall date and sign the inventory and maintain it on premises for three years. That inventory may be designated as the official biennial controlled substance inventory.*

*C. Prior to the sale or closure of a veterinary establishment, the veterinarian-in-charge shall:*

*1. Follow the requirements for transfer of patient records to another location in accordance with § 54.1-2405 of the Code of Virginia; and*

*2. If there is no transfer of records upon sale or closure of an establishment, the veterinarian-in-charge shall provide to the board information about the location of or access to patient records and the disposition of all scheduled drugs.*

**VIRGINIA BOARD OF VETERINARY MEDICINE****DISPOSITION OF CASES INVOLVING PRACTICING ON AN EXPIRED LICENSE OR REGISTRATION**

The Board adopted the following guidelines for resolution of cases of practicing with an expired license or registration:

**Practicing with an Expired Individual License****Veterinarian**

**(Veterinarian-in-Charge may be subject to disciplinary action for allowing unlicensed persons to practice)**

Cause	Possible Action
First offense; 31 days or less	Advisory Letter
First offense; 32 days to one year	Confidential Consent Agreement
First offense; more than one year	Consent Order; Reprimand or may result in the Board holding an informal conference
Second offense; one or more days	Consent Order; Monetary Penalty of \$1000 or may result in the Board holding an informal conference

**Veterinary Technician/Equine Dental Technician**

Cause	Possible Action
First offense; 31 days or less	Advisory Letter
First offense; 32 days to one year	Confidential Consent Order
First offense; more than one year	Consent Order; Reprimand or may result in the Board holding an informal conference
Second offense; one or more days	Consent Order; Monetary Penalty of \$1000 or may result in the Board holding an informal conference

**Practicing with an Expired Veterinary Establishment Registration****Veterinary Establishment**

Cause	Possible Action
First offense; 31 days or less	Advisory letter
First offense; 32 days to one year	Confidential Consent Agreement
First offense; more than one year	Consent Order; Reprimand or may result in the Board holding an informal conference
Second offense; one or more days	Consent Order; Monetary Penalty of \$1000 or may result in the Board holding an informal conference

**Veterinarian-in-Charge**

Cause	Possible Action
First offense; 31 days or less	Advisory Letter
First offense; 32 days to one year	Confidential Consent Agreement

<b>First offense; more than one year</b>	<b>Consent Order; Reprimand or may result in the Board holding an informal conference</b>
<b>Second offense; one or more days</b>	<b>Consent Order; Monetary Penalty of \$1000 or may result in the Board holding an informal conference</b>

## **Board of Veterinary Medicine Medical Recordkeeping**

The Board of Veterinary Medicine often receives questions regarding medical record keeping requirements. The most frequently asked questions are the following:

- 1. Is a veterinarian required to maintain a record on every patient?**
- 2. May all records for the animals of one owner be filed together?**
- 3. Is a veterinarian required to use a specific format for documenting information in the record?**
- 4. May an assistant transcribe a medical record entry for a veterinarian?**
- 5. What is the length of time a medical record must be kept?**
- 6. When must a veterinarian release a medical record to the client?**
- 7. How may a record be amended?**
- 8. Do the requirements of the Health Insurance Portability and Accountability Act (HIPAA) apply to veterinary medical records?**
- 9. How should veterinary medical records be handled when closing or selling a practice?**

### **1. Is a veterinarian required to maintain a record on every patient?**

A daily record of each patient treated must be maintained by the veterinarian (see 18VAC150-20-195 below). This includes a brief visit that may result in a referral or tentative diagnosis. Records for economic animals or litters of companion animals under the age of four months may be maintained on a per owner basis.

### **2. May all records for the animals of one owner be filed together?**

The regulations do not speak to how to organize the daily record of each patient. The Board recommends that if a master file is kept, the record should have individual files contained within for each animal other than economic animals or litters of companion animals under the age of four months.

### **3. Is a veterinarian required to use a specific format for documenting information in the record?**

No, regulations do not specify a format required for recordkeeping. The Board recommends using a problem-oriented (SOAP) format that allows any veterinarian, by reading the record, to proceed with the proper treatment and care of the animal and allows the Board or other agency to determine the advice and treatment recommended and performed by the practitioner.

The problem oriented veterinary medical record or SOAP format is the most widely-used format by the veterinary profession. It includes the following elements:

The “S” in SOAP stands for subjective findings. These are things that are communicated by the client and recorded in the patient’s history, such as name, age, date of visit, including vaccination history along with the current complaint. This information is essential in properly identifying the animal in the record and providing information that may be essential as the examination proceeds. For the most part, the information is accepted as true, but always be aware of incomplete information or inaccurate perceptions.

The “O” or objective part of the record documents observations about the patient. It should include physical exam findings and everything seen, felt, touched, or smelled. Examples include, but are not limited to temperature, weight, body condition, assessment of all organs and data obtained by instrumentation.

The “A” or assessment portion of the record uses the information gathered to formulate a diagnosis or tentative diagnosis in order to formulate a plan for each complaint.

The “P” or plan portion documents the recommendations to the client. Communicating the recommendations is extremely important to aid in the client’s understanding of a *therapeutic plan* in which medications are prescribed or a *diagnostic plan* in which additional tests or information is needed to make a final diagnosis. The client’s decision to proceed or decline a therapeutic or diagnostic plan should be documented.

If an animal is hospitalized, an abbreviated version of the SOAP, including an assessment of the patient’s progress and condition can be added to the record daily.

#### 4. May an assistant transcribe a medical record entry for a veterinarian?

There are no provisions restricting who transcribes a medical record entry. The veterinarian is required to maintain the record, regardless of who makes the entries. The Board recommends that the veterinarian sign-off on his entries.

#### 5. What is the length of time a medical record must be kept?

Regulations require that a record be kept for a period of three years following the last office visit or discharge of such animal from a veterinary practice.

#### 6. When must a veterinarian release a medical record to the client?

Failure to release patient records when requested by the owner: a law-enforcement entity; or a federal, state, or local health regulatory agency may be considered unprofessional conduct and may result in disciplinary action. The veterinarian is considered the owner of the original medical record and may provide a copy of the record to the requester.

Radiographs are required to be maintained as part of the patient’s record. If an original radiograph is transferred to another establishment or released to the owner, a record of this transfer must be maintained on or with the patient’s record.

**7. How may a record be amended?**

Regulations do not require a specific format for amendments. The Board recommends never altering an original record and amending records by dating all information, including amendments, on the day entered.

**8. Do the requirements of the Health Insurance Portability and Accountability Act (HIPAA) apply to veterinary medical records?**

The HIPAA requirements only apply to human medical records.

**9. How should veterinary medical records be handled when closing or selling a practice?**

Regulations require that upon the sale or closure of a veterinary establishment involving the transfer of patient records to another location, the veterinarian shall follow the requirements found in § 54.1-2405 of the Code of Virginia.

The Code of Virginia requires notification to current patients via mail and notice in a newspaper of general circulation within the veterinarian's practice area. A current patient is defined as a patient encounter with the provider or his professional practice during the two-year period immediately preceding the date of the record transfer.

Failure to provide the two forms of notification may result in disciplinary action.

Pursuant to 18VAC150-20-181(C)(2), if there is no transfer of records upon sale or closure of an establishment, the veterinarian-in-charge shall provide the board information about the location of or access to patient records.

**References****Code of Virginia****§ 54.1-2405. Transfer of patient records in conjunction with closure, sale, or relocation of practice; notice required.**

*A. No person licensed, registered, or certified by one of the health regulatory boards under the Department shall transfer records pertaining to a current patient in conjunction with the closure, sale or relocation of a professional practice until such person has first attempted to notify the patient of the pending transfer, by mail, at the patient's last known address, and by publishing prior notice in a newspaper of general circulation within the provider's practice area, as specified in § 8.01-324.*

*The notice shall specify that, at the written request of the patient or an authorized representative, the records or copies will be sent, within a reasonable time, to any other like-regulated provider of the patient's choice or provided to the patient pursuant to § 32.1-127.1:03. The notice shall also disclose whether any charges will be billed by the provider for supplying the patient or the*

*provider chosen by the patient with the originals or copies of the patient's records. Such charges shall not exceed the actual costs of copying and mailing or delivering the records.*

*B. For the purposes of this section:*

*"Current patient" means a patient who has had a patient encounter with the provider or his professional practice during the two-year period immediately preceding the date of the record transfer.*

*"Relocation of a professional practice" means the moving of a practice located in Virginia from the location at which the records are stored at the time of the notice to another practice site that is located more than 30 miles away or to another practice site that is located in another state or the District of Columbia.*

### **§ 32.1-127.1:03. Health records privacy.**

*1. Health care entities shall disclose health records to the individual who is the subject of the health record, except as provided in subsections E and F and subsection B of § 8.01-413.*

*B. As used in this section:*

*"Health care entity" means any health care provider, health plan or health care clearinghouse.*

*"Health care provider" means those entities listed in the definition of "health care provider" in § 8.01-581.1, except that state-operated facilities shall also be considered health care providers for the purposes of this section. Health care provider shall also include all persons who are licensed, certified, registered or permitted or who hold a multistate licensure privilege issued by any of the health regulatory boards within the Department of Health Professions, except persons regulated by the Board of Funeral Directors and Embalmers or the Board of Veterinary Medicine.*

### **Regulations Governing the Practice of Veterinary Medicine**

#### **18VAC150-20-140. Unprofessional conduct.**

*Unprofessional conduct as referenced in subdivision 5 of § 54.1-3807(5) of the Code of Virginia shall include the following:*

*15. Failing to release a copy of patient records when requested by the owner; a law-enforcement entity; or a federal, state, or local health regulatory agency.*

#### **18VAC150-20-195. Recordkeeping.**

*A. A legible, daily record of each patient treated shall be maintained by the veterinarian at the registered veterinary establishment and shall include at a minimum:*

- 1. Name of the patient and the owner;*
- 2. Identification of the treating veterinarian and of the person making the entry (Initials may be used if a master list that identifies the initials is maintained.);*
- 3. Presenting complaint or reason for contact;*
- 4. Date of contact;*

5. *Physical examination findings;*
6. *Tests and diagnostics performed and results;*
7. *Procedures performed, treatment given, and results;*
8. *Drugs administered, dispensed, or prescribed, including quantity, strength and dosage, and route of administration. For vaccines, identification of the lot and manufacturer shall be maintained;*
9. *Radiographs or digital images clearly labeled with identification of the establishment, the patient name, date taken, and anatomic specificity. If an original radiograph or digital image is transferred to another establishment or released to the owner, a record of this transfer or release shall be maintained on or with the patient's records; and*
10. *Any specific instructions for discharge or referrals to other practitioners.*

*B. An individual record shall be maintained on each patient, except that records for economic animals or litters of companion animals under the age of four months may be maintained on a per owner basis. Patient records, including radiographs or digital images, shall be kept for a period of three years following the last office visit or discharge of such animal from a veterinary establishment.*

*C. An initial rabies certification 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."*

**18VAC150-20-181. Requirements for veterinarian-in-charge.**

*C. Prior to the sale or closure of a veterinary establishment, the veterinarian-in-charge shall:*

1. *Follow the requirements for transfer of patient records to another location in accordance with § 54.1-2405 of the Code of Virginia; and*
2. *If there is no transfer of records upon sale or closure of an establishment, the veterinarian-in-charge shall provide to the board information about the location of or access to patient records and the disposition of all scheduled drugs.*

## Virginia Board of Veterinary Medicine

### Controlled Substances (Schedule II-VI) in Veterinary Practice

Veterinarians are allowed to prescribe, administer, and dispense controlled substances in keeping with the requirements of the Virginia Drug Control Act, specifically § 54.1-3409 of the Code of Virginia, and the statutes and regulations governing the practice of veterinary medicine. A bona fide practitioner-patient relationship (in the case of a veterinarian, a practitioner-client-patient relationship), as set forth in § 54.1-3303 of the Code of Virginia, must first exist before drugs can be prescribed by a veterinarian and dispensed by a veterinary establishment to its own patients.

#### Veterinary prescriptions

The Board of Veterinary Medicine often receives questions regarding what is required of a veterinarian in prescribing or dispensing a prescription for controlled substances. In Virginia, the term “controlled substances” is defined as any prescription drug including Schedule VI drugs. The most frequently asked questions are the following:

1. What authority does a veterinarian have to prescribe?
2. Does a veterinarian have a right to refuse to provide a prescription?
3. May a veterinarian charge a fee for writing the prescription?
4. What information is required on a prescription and in what format?
5. Are there any prescription requirements specific to a Schedule II drug?
6. Does a veterinarian have to honor a prescription request by a pharmacy sent via telephone or fax?
7. What is required of a pharmacist in filling a prescription?
8. May one veterinary establishment “fill a prescription” for a patient seen by a veterinarian at another establishment?
9. May a veterinarian purchase controlled substances for the purpose of reselling?
10. May a veterinarian or veterinary establishment donate an expired or unexpired controlled substance (Schedule II – VI)?
11. May an owner return or donate an unused Schedule II – V drug to a veterinarian that was dispensed to an animal or a human?
12. May an owner return or donate an unused Schedule VI drug to a veterinarian that was dispensed to an animal or a human?
13. May a veterinarian provide a general stock of controlled drugs (Schedule II – VI) for administering or dispensing by a pet store establishment or boarding kennel?

#### **I. What authority does a veterinarian have to prescribe?**

Veterinarians are authorized to prescribe Schedule II through VI drugs by federal and state law. Specifically, the Virginia Drug Control Act provides:

##### **§ 54.1-3409. Professional use by veterinarians.**

*A veterinarian may not prescribe controlled substances for human use and shall only prescribe, dispense or administer a controlled substance in good faith for use by animals within the course of his professional practice. He may prescribe, on a written prescription or on oral prescription as authorized by § 54.1-3410. . . Such a prescription shall be dated and signed by the person prescribing on the day when issued, and shall bear the full name and address of the owner of the*

*animal, and the species of the animal for which the drug is prescribed and the full name, address and registry number, under the federal laws of the person prescribing, if he is required by those laws to be so registered.*

However, the following portions of §§54.1-3408 and 54.1-3303 also apply, and they detail what is required to render a valid prescription.

**§ 54.1-3408. Professional use by practitioners.**

*A. A practitioner of ... veterinary medicine... shall only prescribe, dispense, or administer controlled substances in good faith for medicinal or therapeutic purposes within the course of his professional practice.*

*B. The prescribing practitioner's order may be on a written prescription or pursuant to an oral prescription as authorized by this chapter...*

**§ 54.1-3303. Prescriptions to be issued and drugs to be dispensed for medical or therapeutic purposes only.**

*A. A prescription for a controlled substance may be issued only by a practitioner of . . . veterinary medicine who is authorized to prescribe controlled substances... The prescription shall be issued for a medicinal or therapeutic purpose and may be issued only to... animals with whom the practitioner has a bona fide practitioner-patient relationship.*

Section 54.1-3303(A) pertains to all authorized prescribers, not just veterinarians. For veterinarians, it should be taken to mean a bona fide practitioner-client-patient relationship. Section A continues,

*...a bona fide practitioner-patient relationship means that the practitioner shall (i) ensure that a medical or drug history is obtained; (ii) provide information to the patient [client] about the benefits and risks of the drug being prescribed; (iii) perform or have performed an appropriate examination of the patient, either physically or by the use of instrumentation and diagnostic equipment through which images and medical records may be transmitted electronically; except for medical emergencies, the examination of the patient shall have been performed by the practitioner himself, within the group in which he practices, or by a consulting practitioner prior to issuing a prescription; and (iv) initiate additional interventions and follow-up care, if necessary, especially if a prescribed drug may have serious side effects... Any practitioner who prescribes any controlled substance with the knowledge that the controlled substance will be used otherwise than medicinally or for therapeutic purposes shall be subject to the criminal penalties provided in § 18.2-248 for violations of the provisions of law relating to the distribution or possession of controlled substances.*

It should be noted that the pharmacist who fills the prescription must determine if the prescription is valid, and part of this determination involves establishing that a bona fide practitioner-patient-client-pharmacist relationship exists as provided in § 54.1-3303.

*A. For purposes of this section, a bona fide practitioner-patient-pharmacist relationship is one in which a practitioner prescribes, and a pharmacist dispenses, controlled substances in good faith to his patient for a medicinal or therapeutic purpose within the course of his professional practice...*

*B. In order to determine whether a prescription which appears questionable to the pharmacist results from a bona fide practitioner-patient relationship, the pharmacist shall contact the prescribing practitioner or his agent and verify the identity of the patient and name and quantity of the drug prescribed.... No prescription shall be filled [by a pharmacy] unless there is a bona fide*

*practitioner-patient-pharmacist relationship. A prescription not issued in the usual course of treatment or for authorized research is not a valid prescription.*

## **2. Does the veterinarian have the right to refuse to provide a prescription?**

The *Regulations Governing the Practice of Veterinary Medicine*, 18VAC150-20-140(6) and (12), provide that it is unprofessional conduct to violate any state law, federal law, or board regulation pertaining to the practice of veterinary medicine and to refuse to release a copy of a valid prescription upon request from a client. **The Board has held consistently that it is unprofessional conduct for a veterinarian to refuse to provide a prescription to a client if he would have dispensed the medication for the patient from his own animal facility.** This does not mean that the veterinarian is compelled to release a prescription when requested if there are medical reasons for not releasing it and he would not dispense the medication from his own practice.

Prior to issuance of a refill authorization of a prescription, the decision to require an examination of the animal is at the discretion of the professional judgment of the treating veterinarian.

## **3. May a veterinarian charge a fee for writing the prescription?**

There is nothing in statute or regulation to prohibit a practitioner from charging a reasonable fee for writing the prescription if he so chooses.

## **4. What information is required on a prescription and in what format?**

### **§ 54.1-3408.01. Requirements for prescriptions.**

*A. The written prescription referred to in § 54.1-3408 shall be written with ink or individually typed or printed. The prescription shall contain the name, address, and telephone number of the prescriber. A prescription for a controlled substance other than one controlled in Schedule VI shall also contain the federal controlled substances registration number assigned to the prescriber. The prescriber's information shall be either preprinted upon the prescription blank, electronically printed, typewritten, rubber stamped, or printed by hand.*

*The written prescription shall contain the first and last name of the patient for whom the drug is prescribed. The address of the patient shall either be placed upon the written prescription by the prescriber or his agent, or by the dispenser of the prescription. If not otherwise prohibited by law, the dispenser may record the address of the patient in an electronic prescription dispensing record for that patient in lieu of recording it on the prescription. Each written prescription shall be dated as of, and signed by the prescriber on, the day when issued. The prescription may be prepared by an agent for the prescriber's signature.*

*This section shall not prohibit a prescriber from using preprinted prescriptions for drugs classified in Schedule VI if all requirements concerning dates, signatures, and other information specified above are otherwise fulfilled.*

*No written prescription order form shall include more than one prescription. . .*

*C. The oral prescription referred to in §54.1-3408 shall be transmitted to the pharmacy of the patient's choice by the prescriber or his authorized agent. For the purposes of this section, an authorized agent of the prescriber shall be an employee of the prescriber who is under his immediate and personal supervision, or if not an employee, an individual who*

*holds a valid license allowing the administration or dispensing of drugs and who is specifically directed by the prescriber.*

**§ 54.1-3409. Professional use by veterinarians.**

*He may prescribe, on a written prescription or on oral prescription as authorized by § 54.1-3410...Such a prescription shall be dated and signed by the person prescribing on the day when issued, and shall bear the full name and address of the owner of the animal, and the species of the animal for which the drug is prescribed and the full name, address and registry number, under the federal laws of the person prescribing, if he is required by those laws to be so registered.*

**5. Are there any prescription requirements specific to a Schedule II drug?**

In addition to the prescription requirements found in the response to Question 4 above, the following information is provided for writing prescriptions for Schedule II drugs:

**§ 54.1-3411. When prescriptions may be refilled.**

*Prescriptions may be refilled as follows:*

- 1. A prescription for a drug in Schedule II may not be refilled.*

In addition, answers to the following questions related to multiple prescriptions may be found on the DEA's website located at [http://www.deadiversion.usdoj.gov/faq/mult\\_rx\\_faq.htm](http://www.deadiversion.usdoj.gov/faq/mult_rx_faq.htm) :

**DEA Questions & Answers - Issuance of Multiple Prescriptions for Schedule II Controlled Substances**

*What does this rule allow a practitioner to do?*

*What are the requirements for the issuance of multiple prescriptions for schedule II controlled substances?*

*Does this rule require or mandate a practitioner to issue multiple prescriptions for schedule II controlled substances?*

*What is the effective date of the rule change?*

*Is there a limit on the number of schedule II dosage units a practitioner can prescribe to a patient?*

*Is there a limit on the number of separate prescriptions per schedule II substance that may be issued during the 90-day time period?*

*How is the issuance of multiple schedule II prescriptions different than issuing a refill of a schedule II prescription?*

*Is post-dating of multiple prescriptions allowed?*

*What is expected of the pharmacist?*

**6. Does a veterinarian have to honor a prescription request by a pharmacy sent via telephone or fax?**

A veterinarian may honor such a request if a valid practitioner-client-patient relationship exists as described previously and the veterinarian is sure that the client has requested it. However, the veterinarian is not compelled to do so. Section §54.1-3408.02 allows the transmission of faxed prescriptions.

**§ 54.1-3408.02. Transmission of prescriptions.**

*Consistent with federal law and in accordance with regulations promulgated by the Board [of Pharmacy], prescriptions may be transmitted to a pharmacy by electronic transmission or by facsimile machine and shall be treated as valid original prescriptions.*

**§ 54.1-3410. When pharmacist may sell and dispense drugs.**

**§ 54.1-3410. When pharmacist may sell and dispense drugs.**

*A. A pharmacist, acting in good faith, may sell and dispense drugs and devices to any person pursuant to a prescription of a prescriber as follows:*

*1. A drug listed in Schedule II shall be dispensed only upon receipt of a written prescription that is properly executed, dated and signed by the person prescribing on the day when issued and bearing the full name and address of the patient for whom, or of the owner of the animal for which, the drug is dispensed, and the full name, address, and registry number under the federal laws of the person prescribing, if he is required by those laws to be so registered. If the prescription is for an animal, it shall state the species of animal for which the drug is prescribed;*

*2. In emergency situations, Schedule II drugs may be dispensed pursuant to an oral prescription in accordance with the Board's [of Pharmacy] regulations;*

*3. Whenever a pharmacist dispenses any drug listed within Schedule II on a prescription issued by a prescriber, he shall affix to the container in which such drug is dispensed, a label showing the prescription serial number or name of the drug; the date of initial filling; his name and address, or the name and address of the pharmacy; the name of the patient or, if the patient is an animal, the name of the owner of the animal and the species of the animal; the name of the prescriber by whom the prescription was written; ...and such directions as may be stated on the prescription.*

*B. A drug controlled by Schedules III through VI or a device controlled by Schedule VI shall be dispensed upon receipt of a written or oral prescription as follows:*

*1. If the prescription is written, it shall be properly executed, dated and signed by the person prescribing on the day when issued and bear the full name and address of the patient for whom, or of the owner of the animal for which, the drug is dispensed, and the full name and address of the person prescribing. If the prescription is for an animal, it shall state the species of animal for which the drug is prescribed.*

*2. If the prescription is oral, the prescriber shall furnish the pharmacist with the same information as is required by law in the case of a written prescription for drugs and devices, except for the signature of the prescriber.*

*A pharmacist who dispenses a Schedule III through VI drug or device shall label the drug or device as required in subdivision A 3 of this section.*

*C. A drug controlled by Schedule VI may be refilled without authorization from the prescriber if, after reasonable effort has been made to contact him, the pharmacist ascertains that he is not available and the patient's health would be in imminent danger without the benefits of the drug. The refill shall be made in compliance with the provisions of § 54.1-3411.*

*If the written or oral prescription is for a Schedule VI drug or device and does not contain the address or registry number of the prescriber, or the address of the patient, the pharmacist need not reduce such information to writing if such information is readily retrievable within the pharmacy.*

*D. Pursuant to authorization of the prescriber, an agent of the prescriber on his behalf may orally transmit a prescription for a drug classified in Schedules III through VI if, in such cases, the written record of the prescription required by this subsection specifies the full name of the agent of the prescriber transmitting the prescription.*

**8. May one veterinary establishment "fill a prescription" for a patient seen by a veterinarian at another establishment?**

No. There is no provision in Virginia law that allows for veterinary establishments or any other establishment not duly licensed by the Board of Pharmacy to dispense controlled substances to fill a prescription.

**9. May a veterinarian purchase controlled substances (including Schedule VI drugs and devices) for the purpose of retailing?**

No. A veterinarian does not have statutory authority to purchase controlled drugs for the purpose of wholesaling to a pharmacy, another practitioner, a veterinary establishment or commercial entity.

**10. May a veterinarian or veterinary establishment donate an expired or unexpired controlled substance (Schedule II - VI)?**

The meaning of "donation" in this context refers to the transferring of controlled substances without a prescription. A veterinarian may opt to not charge for a properly dispensed controlled substance.

**Expired Schedule II - VI Controlled Substances.** There is no authority to donate expired substances because they may be considered adulterated and must be destroyed in accordance with federal and state laws and regulations.

#### **Unexpired Schedule II-VI Controlled Substances**

The Drug Enforcement Agency (DEA) only permits the transfer of a Schedule II-V drug from one DEA registrant to another DEA registrant regardless of payment method.

**11. May an owner return or donate an unused Schedule II - V drug to a veterinarian that was dispensed to a pet or human?**

The Drug Enforcement Agency (DEA) only permits the transfer of Schedule II-V drug from one DEA registrant to another DEA registrant. Because the patient/client is not a DEA registrant, he may not transfer a Schedule II-V drug to anyone except during a drug take-back event wherein law enforcement receives the drug from the patient/client for destruction purposes only. Violations of this requirement can result in DEA imposing on the veterinarian a \$10,000 fine per incident.

#### *§ 54.1-3411.1. Prohibition on returns, exchanges, or re-dispensing of drugs; exceptions.*

*A. Drugs dispensed to persons pursuant to a prescription shall not be accepted for return or exchange for the purpose of re-dispensing by any pharmacist or pharmacy after such drugs have been removed from the pharmacy premises from which they were dispensed except:*

1. *In a hospital with an on-site hospital pharmacy wherein drugs may be returned to the pharmacy in accordance with practice standards;*
2. *In such cases where official compendium storage requirements are assured and the drugs are in manufacturers' original sealed containers or in sealed individual dose or unit dose packaging that meets official compendium class A or B container requirements, or better, and such return or exchange is consistent with federal law; or*
3. *When a dispensed drug has not been out of the possession of a delivery agent of the pharmacy.*

*B. The Board of Pharmacy shall promulgate regulations to establish a Prescription Drug Donation Program for accepting unused previously dispensed prescription drugs that meet the criteria set forth in subdivision A 2, for the purpose of re-dispensing such drugs to indigent patients, either through hospitals, or through clinics organized in whole or in part for the delivery of health care services to the indigent. Such program shall not authorize the donation of Schedule II-V controlled substances if so prohibited by federal law. No drugs shall be re-dispensed unless the integrity of the drug can be assured.*

*C. Unused prescription drugs dispensed for use by persons eligible for coverage under Title XIX or Title XXI of the Social Security Act, as amended, may be donated pursuant to this section unless such donation is prohibited.*

*D. A pharmaceutical manufacturer shall not be liable for any claim or injury arising from the storage, donation, acceptance, transfer, or dispensing of any drug provided to a patient, or any other activity undertaken in accordance with a drug distribution program established pursuant to this section.*

*E. Nothing in this section shall be construed to create any new or additional liability, or to abrogate any liability that may exist, applicable to a pharmaceutical manufacturer for its products separately from the storage, donation, acceptance, transfer, or dispensing of any drug provided to a patient in accordance with a drug distribution program established pursuant to this section.*

**12. May an owner return or donate an unused Schedule VI drug to a veterinarian that was dispensed to a pet or a human?**

While state law does not prohibit a veterinarian from receiving back an already dispensed Scheduled VI drug for destruction purposes, there is no provision in law for a veterinarian to re-dispense this returned drug.

**13. May a veterinarian provide a general stock of controlled drugs (Schedule II - VI) for administration or dispensing by a pet store establishment or boarding kennel?**

There is no allowance in law for a veterinarian to provide a pet store establishment or boarding kennel with a general stock of controlled substances to be given to animals, either by donation or for a fee. In Virginia, the term "controlled substances" is defined as any prescription drug including Schedule VI drugs. The meaning of "donation" in this context refers to the transferring of controlled substances without a prescription. However, a veterinarian may opt to not charge for a properly dispensed controlled substance.

A veterinarian is allowed to prescribe, administer, and dispense controlled substances in keeping with the requirements of the Virginia Drug Control Act, specifically § 54.1-3409 of the *Code of Virginia*, and the statutes and regulations governing the practice of veterinary medicine. A veterinarian

may prescribe, label and dispense a drug for the treatment of a specific animal after establishing a bona fide practitioner-patient relationship.

## VIRGINIA BOARD OF VETERINARY MEDICINE

### Disposition of Routine Inspection Violations

The Board of Veterinary Medicine (Board) conducts routine inspections of veterinary establishments every three years. The guidance document, 76-21.2:1 Veterinary Establishment Inspection Report provides a checklist of the laws and regulations with which veterinary establishments must comply. For each violation found during an inspection, a point value is assigned. Point values are available on the veterinary establishment inspection report form. **Please note that violations cited during last and current inspections are repeat violations and receive double the assigned point value.**

Following an inspection in which one or more violations of the laws or regulations are cited, a veterinary establishment is required to submit a written response to the Board pursuant to 18VAC150-20-140(18) within 14 calendar days of the inspection unless an extension is granted by the Board. A response must detail the action(s) taken to correct each deficiency and may be submitted via mail, email or fax. Failure to provide a written response may subject a veterinary establishment and a veterinarian-in-charge to disciplinary action.

#### Veterinary Establishment Effective Date of July 1, 2014

Total Points*	*Possible Action
0 – 10 points	Routine inspection in three years
11 – 15 points	Confidential Consent Agreement; routine inspection in three years
16 – 20 points	Pre-hearing consent order; monetary penalty of \$250; unannounced inspection in two years
21 or more points	Pre-hearing consent order ; monetary penalty of \$500; unannounced inspection in one year

#### Veterinarian-In-Charge Effective Date of July 1, 2014

Inspection Points	*Possible Action
11 – 15 points	Confidential Consent Agreement
16 points or more	Pre-hearing consent order; monetary penalty of \$250

\*Violations found during a required re-inspection may subject the establishment and the veterinarian-in-charge to additional action by the Board.

## **VIRGINIA BOARD OF VETERINARY MEDICINE**

### **Protocol to follow upon discovery of a loss or theft of drugs**

#### **Guidance:**

Whenever a theft or any other unusual loss of any controlled substance is discovered, the Veterinarian-in-Charge, or in his absence his designee, shall immediately report such theft or loss to all of the following:

1. Virginia Board of Veterinary Medicine in writing;
2. Virginia Board of Pharmacy in writing; and
3. U.S. Drug Enforcement Agency

The Boards of Veterinary Medicine and Pharmacy request written notification be sent via email, FAX or postal carrier. The Board 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.

#### **Reference**

***18VAC150-20-190. Requirements for drug storage, dispensing, destruction, and records for all establishments.***

***5. Whenever a theft or any unusual loss of Schedules II through V drugs is discovered, the veterinarian-in-charge, or in his absence, his designee, shall immediately report such theft or loss to the Board of Veterinary Medicine and the Board of Pharmacy and to the DEA. The report to the boards shall be in writing and sent electronically or by regular mail. The report to the DEA shall be in accordance with 21 CFR 1301.76(b). If the veterinarian-in-charge is unable to determine the exact kind and quantity of the drug loss, he shall immediately take a complete inventory of all Schedules II through V drugs.***

## VIRGINIA BOARD OF VETERINARY MEDICINE

### Disposal of Deceased Animals

A veterinary establishment is required to have an acceptable method for disposal of deceased animals. Refrigeration exclusively for carcasses of companion animals that require storage for 24 hours or more is required. Disposal of a deceased animal must also be compliant with all local ordinances.

When a deceased animal is to be returned to its owner, the veterinarian or his/her designee should discuss with the owner preferences for the return of the animal to include type of container and/or wrapping.

In addition, the U.S. Fish and Wildlife Service's Secondary Pentobarbital Poisoning of Wildlife fact sheet provides information on which animals are affected, how to prevent accidental poisoning, and penalties for noncompliance. Questions on secondary poisoning of wildlife should be directed to the U.S. Fish and Wildlife Service, Office of Law Enforcement Resident Agent in Charge, at the Richmond District Office at 804-771-2883.

#### References

#### Regulations

##### ***18VAC150-20-200. Standards for veterinary establishments.***

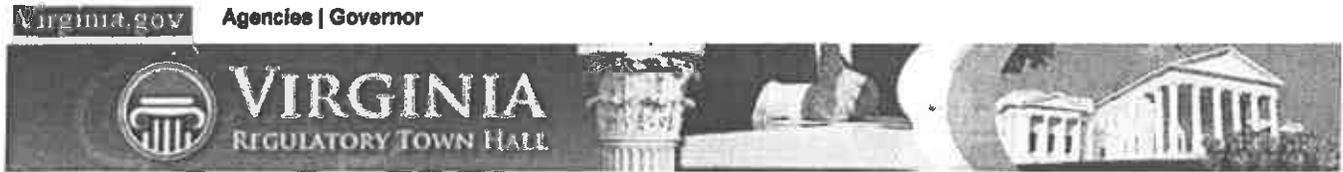
***A. Stationary establishments. A stationary establishment shall provide surgery and encompass all aspects of health care for small or large animals, or both. All stationary establishments shall meet the requirements set forth in this subsection:***

- 1. Buildings and grounds must be maintained to provide sanitary facilities for the care and medical well-being of patients.***
  - a. Temperature, ventilation, and lighting must be consistent with the medical well-being of the patients.***
  - b. There shall be on-premises:***
    - (1) Hot and cold running water of drinking quality, as defined by the Virginia Department of Health;***
    - (2) An acceptable method of disposal of deceased animals, in accordance with any local ordinance or state and federal regulations; and***
    - (3) Refrigeration exclusively for carcasses of companion animals that require storage for 24 hours or more.***

#### Other

Please review the Department of Environmental Quality's guidance documents at [www.deq.virginia.gov](http://www.deq.virginia.gov) related to the following:

- **Waste Guidance Memo No. 03-2009: On-Site Burial of Routine Animal Mortality**
- **Waste Guidance Memo No. 02-2009: On-Site Composting of Routine Animal Mortality**



**Meetings and public hearings**

Showing 15 meetings scheduled for **The Future**

Today Next Week Next 30 Days Past Week Past 30 Days Past Year Previous Years

Agency

Regulatory Board

Date	Time	Meeting Title	Board
Feb-13 2020 (Thu)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u> CANCELED	Board of Veterinary Medicine
Feb-20 2020 (Thu)	1:00 pm	<u>Board of Veterinary Medicine - Ad Hoc Inspections Committee Meeting</u>	Board of Veterinary Medicine
★ Mar-05 2020 (Thu)	9:00 am	<u>Board of Veterinary Medicine - Board meeting</u>	Board of Veterinary Medicine
Mar-05 2020 (Thu)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine
Apr-09 2020 (Thu)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine
May-07 2020 (Thu)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine
Jun-10 2020 (Wed)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine
Jul-28 2020 (Tue)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine
★ Jul-28 2020 (Tue)	9:00 am	<u>Board of Veterinary Medicine - Board meeting</u>	Board of Veterinary Medicine
Aug-25 2020 (Tue)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine
Sep-29 2020 (Tue)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine
Oct-29 2020 (Thu)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine
★ Oct-29 2020 (Thu)	9:00 am	<u>Board of Veterinary Medicine - Board meeting</u>	Board of Veterinary Medicine
Nov-17 2020 (Tue)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine
Dec-09 2020 (Wed)	9:00 am	<u>Board of Veterinary Medicine - Informal Conferences</u>	Board of Veterinary Medicine