

Hospital Standards Self-Evaluation Checklist



August 2014



The Hospital Standards Self-Evaluation Checklist was developed by the Veterinary Medical Board (Board) and its Multidisciplinary Advisory Committee with input from the public and profession in order to assist Hospital Directors' review of minimum standards to achieve compliance with the law. The Board strongly recommends involvement of the entire staff in a team effort to become familiar with and maintain the minimum standards of practice.

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INTRODUCTION

Authority and Requirement to Inspect

The Board has the authority to inspect veterinary hospitals under the Business and Professions Code (BPC) and the California Code of Regulations, Title 16, Division 20 (CCR). Please reference the Appendix for specific BPC and CCR authority sections. Additionally, every veterinary hospital is required to be in compliance with the minimum standards required by law at all times.

The Inspection Program

The Board has two types of inspections: random routine inspections and complaint-initiated inspections. Inspections are performed in a similar manner and all items on the Inspection Report are inspected in both types of inspections. However, during a complaint initiated inspection particular attention may be directed toward a specific issue, and/or a Division of Investigation investigator may accompany the inspector to perform interviews. Licensed veterinarians and registered veterinary technicians in good standing may be hospital inspectors and are required to successfully complete a thorough training program as well as participate in periodic updates. If you are interested in becoming an inspector, contact the Board for more information.

The Inspection

Once the inspection is complete, the inspector will review the report with the managing licensee or designated representative. Part of the Inspection Report is dedicated to identifying deficiencies, listing individual corrections, listing what items are required to be submitted to demonstrate compliance (e.g. pictures, receipts, written narratives, photocopies, etc.), and discussing their correction to meet the minimum standards requirements. The inspector may also have educational materials available to assist with the correction of certain issues. Questions are encouraged so that the managing licensee and/or staff are clear on each issue. The hospital inspectors are professionals representing the Board; as such they are expected to treat veterinarians, staff members, and the facility in a professional manner at all times.

Throughout the *Hospital Standards Self-Evaluation Checklist*, objectives are cited and examples for compliance are given. These examples are merely suggestions and a starting point to help the veterinary hospital meet minimum standards requirements.

Examples cited are neither prescriptive nor the only means by which individual veterinary hospitals may meet minimum standard requirements.



1. After Hours Referral/Hospital Closure

Objective(s)

- Visible, obvious, posted sign outside the primary entrance with telephone number and location where emergency after hours veterinary care is available.
- Notify the public via answering machine or service when premises will be reopened and where after hours emergency veterinary care is available.
- Full disclosure prior to rendering services if NO after hours emergency care is available.

Example(s) of Compliance

- ▶ After hours care information visibly posted on sign outside primary entrance.

CCR § 2030(e)

- (e) When a veterinary premises is closed, a sign shall be posted and visible outside the primary entrance with a telephone number and location where emergency care is available. An answering machine or service shall be used to notify the public when the veterinary premises will be re-opened and where after hours emergency care is available. If no after hours emergency care is available, full disclosure shall be provided to the public prior to rendering services.

2. License/Permit Displayed

Objective(s)

- Display of original premise permit, veterinary license, and/or veterinary technician registration at principal place of employment where it is easily visible and readable to consumer.
- Original license shall not be defaced.
- Display in areas commonly used by the consumer.
- Relief staff may carry wallet copy.

Example(s) of Compliance

- ▶ Display of original license/permit in waiting room.
- ▶ Display of original license/permit in reception/lobby area.
- ▶ Display of original license/permit in check-in/check-out area.
- ▶ Address on license may be covered, but must be viewable during an inspection.

BPC § 119

Any person who does any of the following is guilty of a misdemeanor:

- (a) Displays or causes or permits to be displayed or has in his or her possession either of the following:
 - (1) A canceled, revoked, suspended, or fraudulently altered license.
 - (2) A fictitious license or any document simulating a license or purporting to be or have been issued as a license.
- (b) Lends his or her license to any other person or knowingly permits the use thereof by another.
- (c) Displays or represents any license not issued to him or her as being his or her license.
- (d) Fails or refuses to surrender to the issuing authority upon its lawful written demand any license, registration, permit, or certificate which has been suspended, revoked, or canceled.
- (e) Knowingly permits any unlawful use of a license issued to him or her.
- (f) Photographs, photostats, duplicates, manufactures, or in any way

reproduces any license or facsimile thereof in a manner that it could be mistaken for a valid license, or displays or has in his or her possession any such photograph, photostat, duplicate, reproduction, or facsimile unless authorized by this code.

- (g) Buys or receives a fraudulent, forged, or counterfeited license knowing that it is fraudulent, forged, or counterfeited. For purposes of this subdivision, “fraudulent” means containing any misrepresentation of fact.

As used in this section, “license” includes “certificate,” “permit,” “authority,” and “registration” or any other indicia giving authorization to engage in a business or profession regulated by this code or referred to in Section 1000 or 3600.

BPC § 4850

Every person holding a license under this chapter shall conspicuously display the license in his or her principal place of business.

3. Correct Address

Objective(s)

- Address change must be reported to the Board within 30 days. Failure to do so could result in a \$25 penalty fee.

BPC § 4852

Every person holding a license issued under this chapter who changes his or her mailing address shall notify the Board of his or her new mailing address within 30 days of the change. The board shall not renew the license of any person who fails to comply with this section unless the person pays the penalty fee prescribed in Section 4905. An applicant for the renewal of a license shall specify in his or her application whether he or she has changed his or her mailing address and the board may accept that statement as evidence of the fact.

CCR § 2004

Each person holding a certificate of registration, license, permit or other authority issued by the board shall notify the board at its principal office if any changes of mailing address within thirty (30) days after any such change.

4. Notice of No Staff on Premise

Objective(s)

- If there are to be no personnel on premises at times animal patients are present, NOTICE shall be given to client prior to initiating treatment.
- A conspicuously posted sign may serve as notice to clients. Conspicuous posting areas include, but are not limited to, the lobby and reception area.

Example(s) of Compliance

- ▶ Example signage: “There may be times when no personnel are on the premises.”
- ▶ Notice of no staff on premises noted on admittance form.
- ▶ Notice of no staff on premises noted on estimate/receipts.

CCR § 2030(d)(3)

- (d) If animals are housed or retained for treatment, the following shall be provided:
 - (3) If there are to be no personnel on the premises during any time an animal is left at the veterinary facility, prior notice of this fact shall be given to the client. For purposes of this paragraph, prior notice may be accomplished by posting a sign in a place and manner conspicuous to the clients of the premises, stating that there may be times when there is no personnel on the premises.



FACILITIES

5. General Sanitary Conditions

Objective(s)

- Practice instruments kept clean and sanitary at all times.
- Practice apparatus kept clean and sanitary at all times.
- Practice apparel kept clean and sanitary at all times.
- Premise must be kept clean and sanitary.

Example(s) of Compliance

- ▶ Shelves and countertops are clean to the touch.
- ▶ Trash cans emptied on a regular basis.
- ▶ Floors mopped/scrubbed regularly.
- ▶ Maintain a cleaning schedule.

BPC § 4854

All premises where veterinary medicine, veterinary dentistry, or veterinary surgery is being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times, and shall conform to those minimum standards established by the Board.

CCR § 2030

“All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or possess the following minimum standards...”

6. Temperature and Ventilation

Objective(s)

- Temperature and ventilation shall be maintained to assure the comfort of all patients.

CCR § 2030(f)(2)

- (f) The veterinary premises shall meet the following standards:
 - (2) The facility, its temperature, and ventilation shall be maintained so as to assure the comfort of all patients.

7. Lighting

Objective(s)

- Indoor lighting for halls, wards, reception areas, examination and surgical rooms shall be adequate and functional.

CCR § 2030(a)

- (a) Indoor lighting for halls, wards, reception areas, examining and surgical rooms shall be adequate for their intended purpose.

8. Reception/Office

Objective(s)

- A reception room and office exist. A combination of the two is acceptable.

CCR § 2030(b)

- (b) A reception room and office, or a combination of the two.

9. Exam Rooms

Objective(s)

- Exam rooms separate from other areas of the facility.
- Exam rooms are of sufficient size to accommodate the veterinarian, an assistant, the patient, and client.

CCR § 2030(c)

- (c) An examination room separate from other areas of the facility and of sufficient size to accommodate the doctor, assistant, patient and client.

10. Food and Beverage

Objective(s)

- All drugs and biologicals shall be maintained, administered, dispensed, and prescribed in compliance with State and Federal laws.
- No human food or beverages shall be stored near any drug or biologicals.
- Human food or beverages are stored and consumed in designated areas only; away from animal and laboratory areas.

Example(s) of Compliance

- ▶ No human food or beverages located in refrigerators, treatment areas, pharmacy, or laboratory.
- ▶ Separate refrigerators for human food must be marked.

CCR § 2030(f)(6)

- (f) The veterinary premises shall meet the following standards:

- (6) All drugs and biologicals shall be maintained, administered, dispensed, and prescribed in compliance with state and federal laws.

Title 8, CCR § 3368 (a) and (b)

- (a) Application. This Section shall apply only where employees are permitted to consume food or beverages, or both, on the premises.
- (b) Prohibited Areas. Food and beverages shall not be stored or consumed in a toilet room or in an area where they may be contaminated by any toxic material.

11. Fire Precautions

Objective(s)

- Meet requirements of local and State fire prevention codes.

Example(s) of Compliance

- ▶ Fire extinguishers are inspected and in compliance with local State, and fire prevention codes.

CCR § 2030(f)(1)

- (f) The veterinary premises shall meet the following standards:
 - (1) Fire precautions shall meet the requirements of local and State fire prevention codes.

Title 8, CCR § 6151(c)(1)

- (c) General Requirements.
 - (1) The employer shall provide portable fire extinguishers and shall mount, locate and identify them so that they are readily accessible to employees without subjecting the employees to possible injury.

Title 8, CCR § 6151(e)(3)

- (e) Inspection, Maintenance and Testing.
 - (3) Portable fire extinguisher shall be subjected to an annual maintenance check. Stored pressure extinguishers do not require an internal examination. The employer shall record the annual maintenance date and retain this record for one year after the last entry or the life of the shell, whichever is less. The record shall be available to the Chief upon request.

12. Oxygen Equipment

Objective(s)

- Provide for the delivery of oxygen in emergency situations.

Example(s) of Compliance

- ▶ Ambu bag.
- ▶ Resuscitation bag.
- ▶ Oxygen via anesthetic machine.

CCR § 2030(f)(11)

(f) The veterinary premises shall meet the following standards:

- (11) The veterinary premises shall have equipment to deliver oxygen in emergency situations.

13. Emergency Drugs and Equipment

Objective(s)

- Regularly maintained emergency drugs and equipment shall be readily available.

CCR § 2030(f)(12)

(f) The veterinary premises shall meet the following standards:

- (12) Appropriate drugs and equipment shall be readily available to treat an animal emergency.

14. Laboratory Services

Objective(s)

- Clinical pathology and histopathology diagnostic laboratory services shall be available on premises or outside services will suffice.

CCR § 2030(f)(5)

(f) The veterinary premises shall meet the following standards:

- (5) Clinical pathology and histopathology diagnostic laboratory services shall be available within the veterinary premises or through outside services.

15. X-ray

Objective(s)

- Meet requirements for California Code of Regulations, Title 17.

Example(s) of Compliance

- ▶ No human body parts are visible in the radiograph or digital image.
- ▶ Radiographs demonstrate proper collimation.
- ▶ Radiograph equipment must be registered with the State (and local agencies as necessary) and checked regularly and documented. Documentation should be available for inspection.
- ▶ Equipment, gloves, and aprons are used and regularly monitored for tears/holes.
- ▶ All staff allowed to take radiographs have personal monitoring badges.
- ▶ Proper signage posting outside radiograph area (at entrance—not inside).
- ▶ Required signage displayed as:
 1. “CAUTION X-RAY AREA.”
 2. Posting of Title 17 or the location of Title 17 regulation in the x-ray area.
 3. California Department of Public Health Form RH-2364, “Notice to Employees.”

CCR § 2030(f)(4)

(f) The veterinary premises shall meet the following standards:

- (4) The veterinary premises shall have the capacity to render diagnostic radiological services, either on the premises or through other commercial facilities. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.

Title 17, CCR § 30255(b)(2)

(b) Each user shall:

- (2) Conspicuously post a current copy of this regulation, a copy of applicable licenses for radioactive material, and a copy of operating and emergency procedures applicable to work with sources of radiation. If posting of documents specified in this paragraph is not practicable the user may post a notice which described the documents and states where it may be examined.

16. X-ray Identification

Objective(s)

- Radiograph and digital images shall include hospital or veterinarian's name, client name, patient name, and, the date radiograph was taken.
- All exposed radiographs and digital images, except for intraoral radiographs, shall have legible, permanent identification incorporated into the radiograph at the time of processing.

Example(s) of Compliance

- ▶ Identification for radiographs must be embedded in the radiograph and, for digital images, must be attached to the file.
- ▶ The hospital inspector may review radiographs or digital images selected at random for verification.

CCR § 2032.3(c)(2)

- (c) (2) Radiographs and digital images, except for intraoral radiographs, shall have a permanent identification legibly exposed in the radiograph or attached to the digital file, which shall include the following:
- (A) The hospital or clinic name and/or the veterinarian's name,
 - (B) Client identification,
 - (C) Patient identification, and
 - (D) The date the radiograph was taken.

17. X-ray Safety Training for Unregistered Assistants

Objective(s)

- It is required that unlicensed staff who are allowed to take x-rays complete x-ray safety training. The Radiation Safety Examination in the Practice Act may be used to meet this requirement.
- All training documentation is maintained and available for inspection.

BPC § 4840.7

- (a) A registered veterinary technician who has been examined by the board in the area of radiation safety and techniques may operate radiographic equipment under the indirect supervision of a licensed veterinarian.
- (b) (1) A veterinary assistant who has been trained in the area of radiation safety and techniques may operate radiographic equipment under the direct supervision of a registered veterinary technician or a licensed veterinarian.
 - (2) The responsible managing licensee of a veterinary premise shall maintain records of the training described in paragraph (1). A veterinary assistant for whom records of this training do not exist shall not operate radiographic equipment.
 - (3) The training records described in paragraph (2) shall be made available to the board upon request and at the time of any inspection of the veterinary premises.

18. Waste Disposal

Objective(s)

- Disposal of hazardous waste materials shall comply with all applicable State, Federal and local laws and regulations.

Example(s) of Compliance

- ▶ Maintain a contract with an approved waste control service to dispose of hazardous waste.
- ▶ Appropriate size sharps containers are available and maintained throughout the premise.

CCR § 2030(f)(3)

(f) The veterinary premises shall meet the following standards:

- (3) The disposal of waste material shall comply with all applicable state, federal and local laws and regulations.

19. Disposal of Animals

Objective(s)

- Sanitary methods for the disposal of deceased animal patients is provided and maintained.
- Maintain name of disposal service on file.
- Where the client of a deceased patient has not given authorization to dispose of his or her animal, the carcass must be retained in a freezer for at least 14 days.

CCR § 2030(f)(7)

(f) The veterinary premises shall meet the following standards:

- (7) Sanitary methods for the disposal of deceased animals shall be provided and maintained.

CCR § 2030.1(b)

- (b) When the client has not given the veterinarian authorization to dispose of his or her deceased animal, the veterinarian shall be required to retain the carcass in a freezer for at least 14 days prior to disposal.

20. Freezer

Objective(s)

- Maintain a working freezer of sufficient size for storage of deceased animals or have access to such equipment.

CCR § 2030.1(b)

- (f) When the client has not given the veterinarian authorization to dispose of his or her deceased animal, the veterinarian shall be required to retain the carcass in a freezer for at least 14 days prior to disposal.

21. Compartments

Objective(s)

- Maintain cleanliness and sanitation of compartments housing animals.

Example(s) of Compliance

- ▶ Barriers between compartments prevent nose-to-nose contact between animals.
- ▶ Prevent cross-contamination through effective separation of animals and their waste products.
- ▶ Surfaces are solid and non-porous.

CCR § 2030(d)(1)

- (d) If animals are housed or retained for treatment, the following shall be provided:
- (1) Compartments for animals which are maintained in a comfortable and sanitary manner.

22. Exercise Runs

Objective(s)

- Maintain cleanliness and sanitation of runs.
- Provide effective separation of animals and their waste products.
- Provide for outdoor walks if no exercise runs are available.

Example(s) of Compliance

- ▶ Individual or covered drains.
- ▶ Update older gates/runs to prevent injury to animals.
- ▶ No nose-to-nose contact between animals.

CCR § 2030.1(a)

For purposes of these rules and regulations, a “small animal fixed premises” shall mean a fixed veterinary premises which concentrates in providing veterinary services to common domestic household pets.

In addition to the requirements in section 2030, small animal fixed premises shall provide:

- (a) Where animals are kept on the veterinary premises for 24 hours or more, the animals shall be provided with an opportunity for proper exercise. Compliance with this section may be achieved by the use of exercise runs or by providing the animal with the opportunity for outdoor walks. Where a premises has exercise runs, they shall be clean and sanitary and provide for effective separation of animals and their waste products.

23. Contagious Facilities

Objective(s)

- Maintain proper isolation separate from common areas.

Example(s) of Compliance

- ▶ Protocols are in place to prevent spread of infectious disease.

CCR § 2030(d)(2)

- (d) If animals are housed or retained for treatment, the following shall be provided:
 - (2) Effective separation of known or suspected contagious animals.



24. Separate Surgery

Objective(s)

- Prevent infection.
- The surgery room that is used for aseptic is separate and distinct from other rooms in the facility.
- Equipment and materials housed/stored in the surgery room are limited to items directly related to the performance of aseptic surgery.

Example(s) of Compliance

- ▶ Keep doors closed at all times.
- ▶ The surgery room is completely enclosed with solid walls floor to ceiling and has no access via window or door to the immediate outside.
- ▶ All doors leading from the interior of the facility to the surgery room are made of non-porous material, are easily cleaned and have a good seal when closed.
- ▶ No open shelving is present in the surgery room.
- ▶ The surgery room shall not have a functional sink with an open drain.

CCR § 2030(g)(1) – (5)

- (g) A veterinary premises which provides aseptic surgical services shall comply with the following:
- (1) A room, separate and distinct from all other rooms shall be reserved for aseptic surgical procedures which require aseptic preparation. A veterinarian may perform emergency aseptic surgical procedures in another room when the room designated for aseptic surgery is occupied or temporarily unavailable.
 - (2) Storage in the surgery room shall be limited to items and equipment normally related to aseptic surgery or surgical procedures. Equipment not normally related to surgery and surgical procedure includes, but is not limited to, equipment used for dental prophylaxis, autoclaves and non-surgical radiographic equipment.

- (3) Open shelving is prohibited in the surgical room.
- (4) The surgery room shall not contain a functional sink with an open drain.
- (5) The doors into the surgery room must be able to be fully closed, the entire door space be made of non-porous material and not provide access from outside the hospital. In cases where the size of the animal prevents entry to the hospital via a regularly-sized door, doors for outside access are permitted as long as such doors are able to be fully closed, fill the entire door space and be made of non-porous material.

25. Surgery Lighting/X-ray/Emergency

Objective(s)

- The surgery room is well-lighted.
- The surgery room has in-room equipment for viewing radiographs.
- Surgery room must have effective emergency lighting.

Example(s) of Compliance

- ▶ Maintain functional emergency lighting.

CCR § 2030(g)(6)

(g) A veterinary premises which provides aseptic surgical services shall comply with the following:

- (6) The surgery room shall be well-lighted, shall have equipment for reviewing radiographs and shall have effective emergency lighting with a viable power source.

26. Surgery Floors, Tables and Countertop

Objective(s)

- The floors, tabletops, and countertops of the surgery room shall be of a non-porous material suitable for regular disinfecting and cleaning, and are disinfected regularly.

CCR § 2030(g)(7)

(g) A veterinary premises which provides aseptic surgical services shall comply with the following:

- (7) The floors, table tops, and counter tops of the surgery room shall be of a non-porous material suitable for regular disinfecting, and cleaning, and shall be cleaned and disinfected regularly.

27. Endotracheal Tubes

Objective(s)

- Endotracheal tubes in a variety of sizes must be readily available on the premises and must be properly maintained.

Example(s) of Compliance

- ▶ Endotracheal tubes are kept clean and stored in a sanitary manner.

CCR § 2032.4(b)(5)

See below.

28. Resuscitation Bags

Objective(s)

- Resuscitation or rebreathing bags (both of various sizes) must be clean and regularly maintained.

Example(s) of Compliance

- ▶ Functional, clean, re-breathing bags are readily available in appropriate sizes.

CCR § 2032.4(b)(5)

(b) When administering general anesthesia, a veterinarian shall comply with the following standards:

- (5) When administering general anesthesia in a hospital setting, a veterinarian shall have resuscitation or rebreathing bags of appropriate volumes for the animal patient and an assortment of endotracheal tubes readily available.

29. Anesthetic Equipment

Objective(s)

- Anesthetic equipment shall be functional and available at all times.

Example(s) of Compliance

- ▶ Maintain anesthetic equipment inspection.

CCR § 2030(f)(10)

(f) The veterinary premises shall meet the following standards:

- (10) Anesthetic equipment in accordance with the procedures performed shall be maintained in proper working condition and available at all times.

30. Anesthetic Monitoring

Objective(s)

- Provide for a method of respiratory monitoring during general anesthesia of animal.
- Provide for a method of cardiac monitoring during general anesthesia of animal.

Example(s) of Compliance

- ▶ Respiratory monitoring could include a rebreathing bag or respirometer.
- ▶ Cardiac monitoring could include a stethoscope or electrocardiographic monitor.

CCR § 2032.4(b)(3) & (4)

- (b) When administering general anesthesia, a veterinarian shall comply with the following standards:
- (3) Provide respiratory monitoring including, but not limited to, observation of the animal's chest movements, observation of the rebreathing bag, or respirometer.
 - (4) Provide cardiac monitoring including, but not limited to, the use of a stethoscope, pulseoximeter or electrocardiographic monitor.

31. Surgical Packs and Sterile Indications

Objective(s)

- Use separate sterile surgical pack, for each animal.
- Use of indicator to assure surgical pack is sterile.

Example(s) of Compliance

- ▶ In-pack monitors to verify proper sterilization (in the interior of the pack).
- ▶ Surgical packs are stored and handled in a manner that maintains sterility.

CCR § 2030(g)(9) & (10)

- (g) A veterinary premises which provides aseptic surgical services shall comply with the following:
- (9) In any sterile procedure, a separate sterile pack shall be used for each animal.
 - (10) All instruments, packs and equipment that have been sterilized shall have an indicator that reacts to and verifies sterilization.

32. Sterilization of Equipment

Objective(s)

- Practice instruments kept clean and sanitary.
- Practice instruments sterilized in a manner appropriate for the type of surgery being performed.

Example(s) of Compliance

- ▶ Effective sterilization is appropriate for items being sterilized.
- ▶ Equipment is stored and handled in a manner that maintains sterility.

CCR § 2030(f)(8) and (g)(8)(B)

- (f) The veterinary premises shall meet the following standards:
- (8) Veterinary medical equipment used to perform aseptic procedures shall be sterilized and maintained in a sterile condition.
- (g) A veterinary premises which provides aseptic surgical services shall comply with the following:
- (8) Surgical instruments and equipment shall be:
 - (B) Sterilized as required by the surgical procedure performed and instruments used.

33. Sanitary Attire

Objective(s)

- Proper surgical attire for the surgeon, assistant, and ancillary personnel is required.
- Proper surgical attire for the surgical team handling instruments shall consist of sanitary cap, sanitary mask, sterilized surgical gown with long sleeves, and sterilized gloves completely covering hair, mouth, nose, and any facial hair except for eyebrows and eyelashes.
- During aseptic surgical procedures, surgical assistants or personnel in proximity of the procedure must wear a cap and mask.

CCR § 2030(g)(11) and (h)

(g) A veterinary premises which provides aseptic surgical services shall comply with the following:

(11) The following attire shall be required for aseptic surgery:

(A) Each member of the surgical team shall put on an appropriate sanitary cap and sanitary mask which covers his or her hair and mouth, nose and any facial hair, except for eyebrows or eyelashes. All members of the surgical team who will be handling the instruments or touching the surgical site shall wear sterilized surgical gowns with long sleeves and sterilized gloves.

(B) Ancillary personnel in the surgery room shall wear clean clothing, footwear, sanitary cap and mask.

(h) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear clean clothing and footwear when appropriate.

For purposes of this section, "clean surgery" shall mean the performance of a surgical operation for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.



DANGEROUS DRUGS/ CONTROLLED SUBSTANCES

34. Expired Drugs

Objective(s)

- Expired drugs must not be purchased, sold, or traded and are disposed of through appropriate methods.
- Expired controlled drugs are not allowed to be transferred other than through reverse distribution for controlled drugs.

Example(s) of Compliance

- ▶ Regular inspections and disposal of expired drugs are required. Special attention should be paid to crash carts and emergency kits.

CCR § 2030(f)(6)

(f) The veterinary premises shall meet the following standards:

- (6) All drugs and biological shall be maintained, administered, dispensed, and prescribed in compliance with state and federal laws.

BPC § 4169(a)(4)

(a) A person or entity may not do any of the following:

- (4) Purchase, trade, sell, or transfer dangerous drugs or dangerous devices after the beyond use date on the label.

BPC § 4342

- (a) The board may institute any action or actions as may be provided by law and that, in its discretion, are necessary, to prevent the sale, of pharmaceutical preparations and drugs that do not conform to the standard and tests as to quality and strength, provided in the latest edition of the United States Pharmacopoeia or the National Formulary, or that violate any provision of the Sherman Food, Drug and Cosmetic Law (Part 5 (commencing with § 109875) of Division 104 of the Health and Safety Code).
- (b) Any knowing or willful violation of any regulation adopted pursuant to Section 4006 shall be subject to punishment in the same manner as is provided in Sections 4336 and 4321.

And refer to Health and Safety Code §§ 111330–111510.

35. Drug Security Controls

Objective(s)

- The facility provides effective controls and procedures to guard against theft and diversion of controlled substances.
- The facility stores all controlled substances in a securely locked, substantially constructed cabinet.

Code of Federal Regulations (CFR) § 1301.75

- (a) Controlled substances listed in Schedule I shall be stored in a securely locked, substantially constructed cabinet.
- (b) Controlled substances listed in Schedule II, III, IV, and V shall be stored in a securely locked, substantially constructed cabinet. However, pharmacies and institutional practitioners may disperse such substances throughout the stock of noncontrolled substances in such a manner as to obstruct the theft or diversion of the controlled substances.
- (c) This section shall also apply to nonpractioners authorized to conduct research or chemical analysis under another registration.
- (d) Carfentanil etorphine hydrochloride and diprenorphine shall be stored in a safe or steel cabinet equivalent to a U.S. Government Class V security container.

36. Drug Logs

Objective(s)

- The facility/Drug Enforcement Administration (DEA) license holder maintains purchasing and receiving records consistent with requirements in law.
- The facility/DEA license holder maintains dispensing records with required information for each controlled substance.
- The facility/DEA license holder maintains records for controlled substances dispensed of in any other manner with required information for each controlled substance.

CFR § 1304.22(c)

Each person registered or authorized (by § 1301.13(e) or §§ 1307.11-1307.13 of this chapter) to manufacture, distribute, dispense, import, export or conduct research with controlled substances shall maintain records with the information listed below.

(c) Records for dispensers and researchers. Each person registered or authorized to dispense or conduct research with controlled substances shall maintain records with the same information required of manufacturers pursuant to paragraph (a)(2)(i), (ii), (iv), (vii), and (ix) of this section:

(a) (2) For each controlled substance in finished form,

- (i) The name of the substance;
- (ii) Each finished form (e.g., 10-milligram tablet or 10-milligram concentration per fluid ounce or millimeter) and the number of units or volume of finished form in each commercial container (e.g., 100-tablet bottle or 3-millimeter vial);
- (iv) The number of units of finished forms and/or commercial containers acquired from other persons, including the date of and number of units and/or commercial containers in each acquisition to inventory and the name, address, and registration number of the person from whom the units were acquired;
- (vii) The number of commercial containers distributed to other persons, including the date of and number of containers in each reduction from inventory, and the name, address, and registration number of the person to whom the containers were distributed;
- (ix) The number of units of finished forms and/or commercial containers distributed or disposed of in any other manner by the registrant (e.g., by distribution of complimentary samples or by destruction), including the date and manner of distribution or disposal, the name, address, and registration number of the person to whom distributed, and the quantity in finished form distributed or disposed.

In addition, records shall be maintained of the number of units or volume of such finished form dispensed, including the name and address of the person to whom it was dispensed, the date of dispensing, the number of units or volume dispensed, and the written or typewritten name or initials of the individual who dispensed or administered the substance on behalf of the dispenser. In addition to the requirements of this paragraph, practitioners dispensing gamma-hydroxybutyric acid under a prescription must also comply with § 1304.26.

37. Background Checks for Veterinary Assistants

Objective(s)

- Conduct background checks for all veterinary assistants who have access to controlled substances.
- Restrict access to controlled substances from any person who has a drug- or alcohol- related felony conviction.

BPC § 4836.1(b)

Prior to authorizing a veterinary assistant to obtain or administer a controlled substance by the order of a supervising veterinarian, the licensee manager in a veterinary practice shall conduct a background check on that veterinary assistant. A veterinary assistant who has a drug- or alcohol-related felony conviction, as indicated in the background check, shall be prohibited from obtaining or administering controlled substances.

38. Controlled Substance Utilization and Review System (CURES) Reporting

Objective(s)

- All controlled substances that are prescribed are reported to the Department of Justice through the Controlled Substance Utilization Review and Evaluation System.

Health and Safety Code § 11165

- (a) To assist health care practitioners in their efforts to ensure appropriate prescribing, ordering, administering, furnishing, and dispensing of controlled substances, law enforcement and regulatory agencies in their efforts to control the diversion and resultant abuse of Schedule II, Schedule III, and Schedule IV controlled substances, and for statistical analysis, education, and research, the Department of Justice shall, contingent upon the availability of adequate funds in the CURES Fund, maintain the Controlled Substance Utilization Review and Evaluation System (CURES) for the electronic monitoring of, and Internet access to information regarding, the prescribing and dispensing of Schedule II, Schedule III, and Schedule IV controlled substances by all practitioners authorized to prescribe, order, administer, furnish, or dispense these controlled substances.

- (b) The Department of Justice may seek and use grant funds to pay the costs incurred by the operation and maintenance of CURES. The department shall annually report to the Legislature and make available to the public the amount and source funds it receives for support of CURES.
- (c) (1) The operation of CURES shall comply with all applicable federal and state privacy and security laws and regulations.
- (2) CURES shall operate under existing provisions of law to safeguard the privacy and confidentiality of patients. Data obtained from CURES shall only be provided to appropriate state, local, and federal public agencies for disciplinary, civil, or criminal purposes and to other agencies or entities, as determined by the Department of Justice, for the purpose of educating practitioners and others in lieu of disciplinary, civil, or criminal actions. Data may be provided to public or private entities, as approved by the Department of Justice, for educational, peer review, statistical, or research purposes, provided that patient information, including any information that may identify the patient, is not compromised. Further, data disclosed to any individual or agency as described in this subdivision shall not be disclosed, sold or transferred to any third party. The Department of Justice shall establish policies, procedures, and regulations regarding the use, access, evaluation, management, implementation, operation, storage, disclosure, and security of the information within CURES, consistent with this subdivision.
- (d) For each prescription for a Schedule II, Schedule III, or Schedule IV controlled substance, as defined in the controlled substances schedules in federal law and regulations, specifically Sections 1308.12, 1308.13, and 1308.14, respectively, of Title 21 of the Code of Federal Regulations, the dispensing pharmacy, clinic, or other dispenser shall report the following information to the Department of Justice as soon as reasonably possible, but not more than seven days after the date a controlled substance is dispensed, in a format specified by the Department of Justice:
- (1) Full name, address, and, if available, telephone number of the ultimate user or research subject, or contact information as determined by the Secretary of the United States Department of Health and Human Services, and the gender, and date of birth of the ultimate user.
- (2) The prescriber's category of licensure, license number, national provider identifier (NPI) number, if applicable, and federal controlled substance registration number, and the state medical license number of any prescriber using the federal controlled substance registration number of a government-exempt facility.

- (3) Pharmacy prescription number, license number, NPI number, and federal controlled substance registration number.
 - (4) National Drug Code (NDC) number of the controlled substance dispensed.
 - (5) Quantity of the controlled substance dispensed.
 - (6) International Statistical Classification of Diseases, 9th revision (ICD-9) or 10th revision (ICD-10) Code, if available.
 - (7) Number of refills ordered.
 - (8) Whether the drug was dispensed as a refill of a prescription or as a first-time request.
 - (9) Date of origin of the prescription.
 - (10) Date of dispensing the prescription.
- (e) The Department of Justice may invite stakeholders to assist, advise, and make recommendations on the establishment of rules and regulations necessary to ensure the proper administration and enforcement of the CURES database. All prescriber and dispenser invitees shall be licensed by one of the boards or committees identified in subdivision (d) of Section 208 of the Business and Professions Code, in active practice in California, and a regular user of CURES.
- (f) The Department of Justice shall, prior to upgrading CURES, consult with prescribers licensed by one of the boards or committees identified in subdivision (d) of Section 208 of the Business and Professions Code, one or more of the boards or committees identified in subdivision (d) of Section 208 of the Business and Professions Code, and any other stakeholder identified by the department, for the purpose of identifying desirable capabilities and upgrades to the CURES Prescription Drug Monitoring Program (PDMP).
- (g) The Department of Justice may establish a process to educate authorized subscribers of the CURES PDMP on how to access and use the CURES PDMP.

39. Current DEA

CCR § 2030(f)(6)

(f) The veterinary premises shall meet the following standards:

- (6) All drugs and biological shall be maintained, administered, dispensed, and prescribed in compliance with state and federal laws.

CFR § 1301.11

- (a) Every person who manufactures, distributes, dispenses, imports, or exports any controlled substance or who proposes to engage in the manufacture, distribution, dispensing, importation or exportation of §§ Sec. 1301.22 through 1301.26. Except as provided in paragraph (b) of this section, only persons actually engaged in such activities are required to obtain a registration; related or affiliated persons who are not engaged in such activities are not required to be registered. (For example, a stockholder or parent corporation of a corporation manufacturing controlled substances is not required to obtain a registration.)
- (b) As provided in sections 303(f) and 401(h) of the Act (21 U.S.C. 823(f) and 841(h)), it is unlawful for any person who falls within the definition of “online pharmacy” (as set forth in section 102(52) of the Act (21 U.S.C. 802(52)) and Sec. 1300.04(h) of this chapter) to deliver, distribute, or dispense a controlled substance by means of the Internet if such person is not validly registered with a modification of such registration authorizing such activity (unless such person is exempt from such modified registration requirement under the Act or this chapter). The Act further provides that the Administrator may only issue such modification of registration to a person who is registered as a pharmacy under section 303(f) of the Act (21 U.S.C. 823(f)). Accordingly, any pharmacy registered pursuant to Sec. 1301.13 of this part that falls within the definition of an online pharmacy and proposes to dispense controlled substances by means of the Internet must obtain a modification of its registration authorizing such activity following the submission of an application in accordance with Sec. 1301.19 of this part. This requirement does not apply to a registered pharmacy that does not fall within the definition of an online pharmacy set forth in Sec. 1300.04(h). Under the Act, persons other than registered pharmacies are not eligible to obtain such a modification of registration but remain liable under section 401(h) of the Act (21 U.S.C. 841(h)) if they deliver, distribute, or dispense a controlled substance while acting as an online pharmacy without being validly registered with a modification authorizing such activity.

CFR §1301.12 Separate registrations for separate locations.

- (a) A separate registration is required for each principal place of business or professional practice at one general physical location where controlled substances are manufactured, distributed, imported, exported, or dispensed by a person.



40. Managing Licensee

Objective(s)

- Ensure that the premise complies with all applicable laws and regulations governing the physical and operational components of a premise.
- Ensure that no unlicensed activity is occurring within the premises or in any location where any function of veterinary medicine, veterinary surgery, or veterinary dentistry is being conducted off the premises under the auspices of the premise.
- Maintain appropriate physical presence within the facility to ensure compliance with the premise requirements.

CCR § 2030.05

- (a) A Licensee Manager is the California licensed veterinarian named as the Licensee Manager on a facility's premises permit.
- (b) The Licensee Manager is responsible for ensuring that the premises for which he/she is manager complies with the requirements in sections 4853, 4854, 4855 and 4856 of the Business and Professions Code, Division 2, Chapter 11, Article 3. The Licensee Manager is responsible for ensuring that the physical and operational components of a premises meet the minimum standards of practice as set forth in sections 2030 through 2032.5 of the California Code of Regulations, Title 16, Division 20, Article 4.
- (c) The Licensee Manager is responsible for ensuring that no unlicensed activity is occurring within the premises or in any location where any function of veterinary medicine, veterinary surgery or veterinary dentistry is being conducted off the premises under the auspices of this premises license.
- (d) The Licensee Manager shall maintain whatever physical presence is reasonable within the facility to ensure that the requirements in (a) – (c) are met.
- (e) Each licensed veterinarian shall be responsible for their individual violations of the Veterinary Medicine Practice Act or any regulations adopted thereunder.

41. Veterinary Reference Library

Objective(s)

- Selection of current textbooks, reference materials, and journals are accessible on premise.

Example(s) of Compliance

- ▶ Access to subscription journals, online reference materials, textbooks, electronic reference materials, etc.

CCR § 2030(f)(9)

(f) The veterinary premises shall meet the following standards:

- (9) Current veterinary reference materials shall be readily available on the premises.

42. Record Keeping

Objective(s)

- The result of the physical examination and treatment shall be noted in the animal patient's medical record.
- Records are maintained for a minimum of three (3) years after the animal's last visit.

CCR § 2032.3

- (a) Every veterinarian performing any act requiring a license pursuant to the provisions of Chapter 11, Division 2, of the code, upon any animal or group of animals shall prepare a legible, written or computer generated record concerning the animal or animals which shall contain the following information:
 - (1) Name or initials of the person responsible for entries.
 - (2) Name, address and phone number of the client.
 - (3) Name or identity of the animal, herd or flock.
 - (4) Except for herds or flocks, age, sex, breed, species, and color of the animal.

- (5) Dates (beginning and ending) of custody of the animal, if applicable.
 - (6) A history or pertinent information as it pertains to each animal, herd, or flock's medical status.
 - (7) Data, including that obtained by instrumentation, from the physical examination.
 - (8) Treatment and intended treatment plan, including medications, dosages, route of administration, and frequency of use.
 - (9) Records for surgical procedures shall include a description of the procedure, the name of the surgeon, the type of sedative/anesthetic agents used, their route of administration, and their strength if available in more than one strength.
 - (10) Diagnosis or assessment prior to performing a treatment or procedure.
 - (11) If relevant, a prognosis of the animal's condition.
 - (12) All medications and treatments prescribed and dispensed, including strength, dosage, route of administration, quantity, and frequency of use.
 - (13) Daily progress, if relevant, and disposition of the case.
- (b) Records shall be maintained for a minimum of three (3) years after the animal's last visit. A summary of an animal's medical records shall be made available to the client within five (5) days or sooner, depending if the animal is in critical condition, upon his or her request. The summary shall include:
- (1) Name and address of client and animal.
 - (2) Age, sex, breed, species, and color of the animal.
 - (3) A history or pertinent information as it pertains to each animal's medical status.
 - (4) Data, including that obtained by instrumentation, from the physical examination.
 - (5) Treatment and intended treatment plan, including medications, their dosage and frequency of use.
 - (6) All medications and treatments prescribed and dispensed, including strength, dosage, route of administration, quantity, and frequency of use.
 - (7) Daily progress, if relevant, and disposition of the case.

- (c) (1) Radiographs and digital images are the property of the veterinary facility that originally ordered them to be prepared. Radiographs or digital images shall be released to another veterinarian upon the request of another veterinarian who has the authorization of the client. Radiographs shall be returned to the veterinary facility which originally ordered them to be prepared within a reasonable time upon request. Radiographs originating at an emergency hospital shall become the property of the next attending veterinary facility upon receipt of said radiograph(s). Transfer of radiographs shall be documented in the medical record.
- (2) Radiograph and digital images, except for intraoral radiographs, shall have a permanent identification legibly exposed in the radiograph or attached to the digital file, which shall include the following:
- (A) The hospital or clinic name and/or the veterinarian's name,
 - (B) Client identification,
 - (C) Patient identification, and
 - (D) The date the radiograph was taken.
- (3) Non-digital intraoral radiographs shall be inserted into sleeve containers and include information in subdivision (c)(2)(A)-(D). Digital images shall have identification criteria listed in subdivision (c)(2)(A)-(D) attached to the digital file.
- (d) Laboratory data is the property of the veterinary facility which originally ordered it to be prepared, and a copy shall be released upon the request of the client.
- (e) The client shall be provided with a legible copy of the medical record when the patient is released following emergency clinic service. The minimum information included in the medical record shall consist of the following:
- (1) Physical examination findings.
 - (2) Dosages and time of administration of medications.
 - (3) Copies of diagnostic data or procedures.
 - (4) All radiographs and digital images, for which the facility shall obtain a signed release when transferred.
 - (5) Surgical summary.
 - (6) Tentative diagnosis and prognosis, if known.
 - (7) Any follow-up instructions.

SMALL ANIMAL MOBILE CLINIC

43. Hot and Cold Water

44. 110-Volt Power

45. Collection Tank for Waste

46. Floors, Tabletops and Countertops

Objective(s)

- Maintain hot and cold water.
- Maintain 110-volt power source for diagnostic equipment.
- Maintain collection tank for waste material.
- Maintain floors, tabletops and countertops clean and disinfected.

CCR § 2030.2(a)(1) – (3) and (5)

For purposes of these regulations, a “small animal mobile clinic” shall mean a trailer or mobile facility established to function as a veterinary premises which concentrates in providing veterinary services to common domestic household pets and is required by section 4853 of the code to be registered with the board.

(a) A small animal mobile clinic shall have:

- (1) Hot and cold water.
- (2) A 110-volt power source for diagnostic equipment.
- (3) A collection tank for disposal of waste material.
- (5) Floors, table tops, and counter tops shall be of a non-porous material suitable for regular disinfecting, and cleaning, and shall be cleaned and disinfected regularly.

NOTE:

In addition to the above minimum standards, small animal mobile clinics shall comply with the minimum standards set forth in CCR §§ 2030(f)(6) and 2030.2, including the following items as applicable:

1. After Hours Referral
2. License/Permit Displayed
3. Correct Address
5. General Sanitary Conditions
6. Temperature and Ventilation
7. Lighting
9. Exam Rooms
10. Food and Beverage
11. Fire Precautions
12. Oxygen Equipment
13. Emergency Drugs and Equipment
14. Laboratory Services
- 15–17. X-Ray Standards
18. Waste Disposal
19. Disposal of Animals
20. Freezer/Carcass Storage
21. Compartments
- 24–33. Surgery Standards
- 34–39. Drug Standards
- 40–42. Practice Management Standards

SMALL ANIMAL VACCINATION CLINIC

47. Veterinarian on Site

48. Adequate Equipment

49. Fresh Clean Water

50. List of Emergency Services

Objective(s)

- Licensed veterinarian is on site.
- Maintain adequate equipment.
- Maintain clean water.
- Provide contact information of local emergency services.

CCR § 2030.3(a), (b), (g), (h) and (j)

- (a) The term “small animal vaccination clinic” shall mean a privately or publicly supported vaccination clinic where a veterinarian performs vaccinations and/or immunizations against disease on multiple animals, and where the veterinarian may also perform preventative procedures for parasitic control.
- (b) A veterinarian must remain on site throughout the duration of a vaccination clinic and must maintain responsibility for all medical decisions made. The veterinarian is responsible for proper immunization and parasitic procedures and the completeness of recommendations made to the public by the paraprofessional staff that the veterinarian supervises or employs. The veterinarian is responsible for consultation and referral of clients when disease is detected or suspected.
- (g) Equipment shall be of the type and quality to provide for the delivery of vaccines and parasiticides in the best interest of the patient and with safety to the public.

- (h) Fresh, clean water shall be available for sanitizing and first aid. Disposable towels and soap shall be readily available.
- (j) The vaccination clinic shall provide a legible list of the name, address, and hours of operation of all facilities that provide or advertise emergency services and, when applicable, the location of other clinics provided by the same entity on that day, that are located within a 30-minute or 30-mile radius.

NOTE:

In addition to the above minimum standards, small animal vaccination clinics shall comply with the minimum standards set forth in CCR §§ 2030(f)(6) and 2030.3, including the following items as applicable:

- 2. License/Permit Displayed
- 3. Correct Address
- 5. General Sanitary Conditions
- 7. Lighting
- 10. Food and Beverage
- 11. Fire Precautions
- 13. Emergency Drugs and Equipment
- 18. Waste Disposal
- 26. Floors, Tabletops and Countertops
- 34. Expired Drugs
- 42. Record Keeping

APPENDIX

Res BPC §4809.5 states, in part,

“The Board may at any time inspect the premises in which veterinary medicine, veterinary dentistry, or veterinary surgery is being practiced.”

The Board is required to inspect, and the veterinarian is required to allow an unannounced inspection, pursuant to BPC § 4809.7, “The board shall establish a regular inspection program that will provide for random, unannounced inspections.” An inspector is allowed to perform an unannounced inspection whether or not the managing licensee is present.

The veterinarian is also required to allow an unannounced inspection by the Board pursuant to BPC §4856: “(a) All records required by law to be kept by a veterinarian subject to this chapter, including, but not limited to, records pertaining to diagnosis and treatment of animals and records pertaining to drugs or devices for use on animals, shall be open to inspection by the board, or its authorized representatives, during an inspection as part of a regular inspection program by the board, or during an investigation initiated in response to a complaint that a licensee has violated any law or regulation that constitutes grounds for disciplinary action by the board. A copy of all those records shall be provided to the board immediately upon request. (b) Equipment and drugs on the premises, or any other place, where veterinary medicine, veterinary dentistry, veterinary surgery, or the various branches thereof is being practiced, or otherwise in the possession of a veterinarian for purposes of that practice, shall be open to inspection by the board, or its authorized representatives, during an inspection as part of a regular inspection program by the board, or during an investigation initiated in response to a complaint that a licensee has violated any law or regulation that constitutes grounds for disciplinary action by the board.”

Specific areas requiring inspection by the Board are outlined in CCR § 2030: “All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or possess the following minimum standards.”

Responsibilities of Veterinarians and Registered Veterinary Technicians

All licensed veterinarians and registered veterinary technicians are responsible for knowing the laws governing their respective professions. This includes all laws in the California Veterinary Medicine Practice Act and all related laws regulating drugs, radiologic installations, safety issues (Cal/OSHA), etc. The facility's Managing Licensee (premise permit holder) is ultimately responsible for overseeing and ensuring that all these laws are being met. This responsibility is outlined in BPC § 4853—Registration of place of practice.

All aspects of medical care for patients are under the control of a veterinarian licensed by the state of California. The veterinarian may delegate some animal health care tasks to licensed registered veterinary technicians as specified by California law. The veterinarian may also delegate tasks to unlicensed assistants, but unlicensed assistants may not perform tasks restricted to licensed registered veterinary technicians.

The primary laws regulating animal health care tasks can be found in CCR §2034 – Animal Health Care Tasks Definitions, CCR § 2035 – Duties of Supervising Veterinarian, CCR § 2036 – Animal Health Care Tasks for R.V.T., CCR § 2036.5 – Animal Hospital Health Care Tasks for Unregistered Assistants, BPC § 4836.1 – Administration of Drugs by registered veterinary technician and unregistered assistant, BPC § 4840 – Authorized services by technicians, BPC § 4840.2 –Unauthorized practices, and BPC § 4840.7 – Operation of radiographic equipment; Training records.





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