RECOMMENDED MINIMUM STANDARDS FOR COMPANION ANIMAL VETERINARY PRACTICES IN MICHIGAN

APPROVED BY MVMA BOARD OF DIRECTORS ON 12/1/04
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Note: This document was drafted in response to a request from the Michigan Board of Veterinary Medicine for an MVMA recommendation on specific standards for veterinary practices in Michigan.

The document represents a consensus of opinions from various MVMA committees, individual members, and the Board of Directors. It is a statement by the MVMA as to what the association considers appropriate minimum standards for veterinary practices in Michigan.

Compliance with the recommendations in this document does not guarantee full compliance with local, state, and federal laws and regulations.

It is not intended to be a requirement to belong to MVMA, but to be considered by the Board of Veterinary Medicine when (if) they revise the veterinary rules to include practice standards.
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I. DEFINITIONS

“Health Product” means a product used, or intended to be used, in the diagnosis, prevention, control or treatment of animal diseases.

“Caretaker” means a person designated verbally or in writing by an owner of an animal to be responsible for medical decisions relative to that animal, in the absence of the owner.

“Companion Animal” means a dog, a cat, or any other animal kept as a pet where a significant human-animal bond is present. Companion animal does not include cattle, sheep, new world camelids, goats, bison, captive cervidae, ratites, swine, equines, poultry and aquaculture products.

“Emergency Lighting” means an alternate source of light sufficient to complete a major surgical procedure, if the primary lighting fails.

“Extra-label Use” means the administration of a health product in a manner not specified in the directions on the product’s labeling. This includes dosage, species, or disease indication.

“General Medicine” means the routine diagnosis and/or medical treatment of diseases of animals.

“Major Surgical Procedure” means a surgical procedure that presents a significant risk of complication and/or infection to the patient. These procedures include, but are not limited to, those that enter a body cavity, joint, bone, or eye. Surgical procedures such as routine cat orchietomy (castration), routine cat onychectomy (declawing), small skin closures, injections, electronic identification implants (microchips etc.) and needle aspirations are not considered a major surgical procedure although they may require anesthesia.

“Over-The-Counter Drug (OTC)” means a health product that may be legally distributed without an order from a licensed veterinarian.

“Prescription Drug” means a health product that may only be legally distributed by or on the order of a licensed veterinarian.

“Veterinarian” means a veterinarian licensed to practice in Michigan.

“Veterinarian-Client-Patient Relationship means:
(a) The attending veterinarian has assumed the responsibility for making medical judgments regarding the health of the patient(s) and the need for medical treatment, and the client has agreed to follow the instructions of the attending veterinarian; and

(b) There is sufficient knowledge of the patient(s) by the attending veterinarian to initiate a general or preliminary diagnosis of the medical condition of the patient(s). This means that the attending veterinarian has recently seen and is acquainted personally with the keeping and care of the patient(s) by virtue of an examination of the patient(s); or by medically appropriate and timely visits to the premises where the patient(s) is kept, or by medically appropriate and timely visits by the client and the patient(s) to the attending veterinarian’s facility; and

(c) The attending veterinarian, or a veterinarian to whom authorization for the care of the patient(s) has been transferred by the attending veterinarian and who has accepted such authorization (veterinarians of established veterinary emergency facilities are defined as having had and accepted such authorization), is readily available for follow-up in case of adverse reactions or failure of the regimen of therapy; and

(d) The attending veterinarian maintains records documenting relevant information pertaining to the patient(s) and drug therapy.

“Veterinary Facility” (herein referred to as “facility”) means a structure, building, or vehicle into which the public brings their animals to receive the services of a veterinarian. This includes, but is not limited to, facilities commonly referred to as mobile clinics, satellite clinics, outpatient clinics, veterinary hospitals and veterinary clinics. It does not mean the premises of a veterinarian’s client.

“Veterinary Practice” (herein referred to as “practice”) means an entity that provides veterinary service to the general public. A veterinary practice includes, but is not limited to veterinarians and staff, facilities, and equipment.

II. REQUIREMENTS FOR A VETERINARY PRACTICE

A. The practice must adhere to all local, state and federal laws and regulations, including MIOSHA requirements.

B. FRAUDULENT PROMOTION OR ADVERTISING

(1) It is unethical for veterinarians to identify themselves as members of an AVMA recognized specialty organization or otherwise imply that the veterinarian or a veterinarian associated with the practice is a specialist if such certification has not been awarded. Statements that
infer specialization include, but are not limited to, terms such as dermatologist, cardiologist, or phrases using the term "special," such as in "special interest" or "special training."1

(2) Limitations of services – A veterinarian or veterinary practice that limits the scope of services provided shall not be prohibited from advertising, or otherwise informing clients or potential clients of that limitation by statements such as “practice limited to species/service).”

(3) Nothing in this section shall mean that a veterinarian or veterinary practice may not advertise, or otherwise inform clients or potential clients of the services offered.

C. REQUIREMENTS FOR PUBLIC NOTICES

(1) A veterinary practice shall provide to clients arriving at and phoning in outside of regular business hours, information as to when and where emergency service may be obtained.

(2) A veterinary practice shall advise clients leaving animals at a veterinary facility for medical or surgical care if there will be times during the animal’s stay when no veterinary personnel will be on the premises. This shall be by informed consent.

D. REQUIREMENTS FOR PROVIDING GENERAL MEDICINE SERVICES

The veterinary practice shall provide examination facilities in which space, light, laboratory aids, diagnostic equipment and trained staff are adequate to ensure the proper examination of patients and the comfort of the client.

Materials and equipment for the proper examination and the safety of patients are required. The basic equipment includes that which is necessary for safe handling of patients as well as instruments for minor surgery and diagnostic examination. The following shall be readily available: sterile equipment for injections, light sufficient for the procedure, a stethoscope, a scale for body weight measurement that is appropriate for the species on which it is being used, restraint equipment, a thermometer, an otoscope, a microscope, an ophthalmoscope, potable hot and cold water, hand soap, disposable towels, disinfectant solutions, a medical waste container, and disposable exam gloves. The equipment that will be reused shall be adequately cleaned and prepared to prevent the likelihood of nosocomial infection.

(1) A practice shall provide, when indicated, either on the premises or by referral, routine laboratory diagnostic procedures, relative to the scope of the services offered. Procedures include, but are not limited to, hematology, blood chemistry, urinalysis, microscopic parasitic
examination, histopathology, and culture and sensitivity testing. Laboratory results/reports shall be accessible so as to verify their use.

(2) A practice shall provide, when indicated, either on the premises or by referral, routine diagnostic radiology, relative to the scope of the services offered. Documentation shall be accessible so as to verify the use of diagnostic radiology. Films, taken and/or stored on the premises, shall be of diagnostic quality and permanently identified as to patient. All radiographic installations shall meet applicable law.

(3) A practice shall assure, where under the direct control of the practice, that all drugs, immunologic agents, and other medications are stored, transported, reconstituted and utilized in such manner that the patient receives full potential benefit of the medication. Outdated animal health products shall be properly disposed of. Disposable hypodermic needles shall be used once and disposed of properly.

E. REQUIREMENTS FOR PROVIDING ANESTHESIA AND ALL SURGICAL SERVICES

(1) A practice shall utilize equipment that is clean or sterile, as indicated, and in good repair.

(2) A practice shall prepare patients by techniques that are adequate to prevent nosocomial infection.

(3) Practice staff directly involved in surgical procedures shall wear clean and/or sterile garments and sterile gloves as necessary to prevent nosocomial infection.

(4) A practice shall use anesthetic agents, monitoring equipment, pain management and recovery protocol, appropriate for the procedures being performed and the patient’s condition.

(5) A practice shall have available for immediate use, intubation equipment, oxygen and the means to support respiratory function.

(6) Excluding emergency situations, a veterinarian shall not administer a general anesthetic or perform major surgery on a companion animal except in a veterinary facility.

(7) Emergency lighting shall be available in the room where major surgical procedures are performed.

F. REQUIREMENTS FOR PROVIDING MAJOR SURGICAL SERVICES FOR COMPANION ANIMALS
(1) Major surgical procedures shall be performed in a room separate and distinct from all other rooms. Storage in the surgical room shall be limited to items and equipment normally related to surgery and surgical procedures. No animals or persons, other than the immediate surgical patient(s) and personnel appropriately involved in the major surgical procedure may be in the room. A veterinarian may perform emergency aseptic surgical procedures in another room when the room designated for aseptic surgery is occupied or temporarily unavailable due to an ongoing surgical procedure.

(2) A practice shall utilize instruments and drapes that have been sterilized by either steam or gas. A method of monitoring to assure adequate sterilization, that includes the date of sterilization, shall be used. In any sterile procedure, a separate sterile pack, blade, drape and instruments shall be used for each procedure.

(3) Certain non-sterile procedures may require sterile instrumentation, such as complicated dental extractions.

(4) The following attire shall be required for major surgical procedures:

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

(b) Ancillary personnel in the surgery room shall wear clean clothing and footwear. A sanitary cap and mask shall be required for personnel in the immediate proximity of the sterile field.

G. REQUIREMENTS FOR PATIENT RECORDS

(1) A practice shall keep an individual legible patient record for each animal for at least three years after the last patient visit or interaction. The record is expected to be written so that another veterinarian can interpret it. The record shall include, when applicable, at least the following information:

(a) Identification of the patient and owner.
(b) Reason for visit.
(c) Diagnostic procedures utilized and their reports.
(d) Results of the physical exam and a list of abnormal findings.
(e) Procedures performed.
(f) Health products used, dispensed, or prescribed, including name, strength, dose, dosing interval, and amount dispensed.
(g) Daily progress notes if hospitalized.
(h) Documentation of informed consent.
(i) Documentation of diagnostic options and treatment plans.
(j) Records of any client communication.

(2) An individual patient record is the property of that practice. Upon request by the owner or caretaker of a patient of the practice, a practice shall provide all of the available information pertinent to the medical history of the patient. Transfer of the information may be accomplished by photocopying the patient record or by providing a summary of the patient record sufficient so as to allow care to be continued by another veterinarian and so proper safeguards for human health can be assured. This shall be completed in a timely manner and a reasonable fee may be charged for this service.

H. OWNERSHIP OF RADIOGRAPHS/DIAGNOSTIC IMAGING STUDIES

(1) A radiograph, or digital facsimile, is part of the individual patient record and is the property of the practice. A radiograph, or digital facsimile, shall be kept as part of the individual patient record for a period of at least three years. In cases where the ownership of a radiograph is transferred, the practice acquiring the radiograph shall keep the radiograph for a minimum of three years.

(2) Upon request from a veterinarian and with consent from the owner or caretaker of a patient, a practice shall transfer the radiograph of that patient, or a copy of similar diagnostic quality, to the veterinarian requesting the radiograph. This shall be completed in a timely manner and a reasonable fee may be charged for the service. Unless ownership of a radiograph is transferred by written consent from the practice, the veterinarian requesting and receiving the radiographs shall be responsible for returning the radiograph to the practice in a timely manner.

(3) Upon request from the owner of a patient, a practice shall transfer a copy of similar diagnostic quality to the owner. A reasonable fee may be charged for the service.

I. SANITARY REQUIREMENTS

(1) A veterinary facility shall be maintained in a sanitary manner so that cleanliness, sanitation, and odor prevention are obvious and adequate.
(2) There shall be no accumulation of clutter, dust, dirt, hair, blood, urine, feces or saliva.

(3) Animals that are housed in the facility shall be housed so as to prevent disease from exposure to feces, urine, and body fluids of other animals. An enclosure used to house an animal shall be cleaned and disinfected prior to placing another animal in the enclosure. Animals shall be removed from the enclosures when they are disinfected.

(4) When a hosing or flushing method is used for cleaning/disinfecting an enclosure, any animal contained shall be removed during this process.

(5) Medical waste shall be disposed of in accordance with the Michigan Medical Waste Act.

J. TEMPERATURE VENTILATION AND LIGHTING

(1) A veterinary facility shall maintain a room temperature and ventilation that ensures the welfare of the animals in the facility.

(2) Lighting inside and outside the facility must be adequate.

K. PROCEDURAL REQUIREMENTS FOR THE OPERATION OF A COMPANION ANIMAL VETERINARY FACILITY

(1) Clients waiting to receive veterinary services shall not be permitted to wait in a room where animals of other clients are being housed, examined or treated.

(2) Animals shall be housed in a room separate from the rooms used for routine patient examination and/or surgery. The room shall contain separate holding compartments for each companion animal housed.

(3) Cadavers of companion animals kept on the premises for more than twelve hours shall be frozen or placed in cold storage. For additional requirements, see the Bodies of Dead Animals Act (Act 239 of Public Acts of 1982 as amended) and the Michigan Medical Waste Act.

III. REQUIREMENTS FOR USING ANIMAL HEALTH PRODUCTS

A. Labeling

(1) Health products dispensed in the manufacturer’s original container shall be accompanied by the original instructions or labeling and must be affixed with a label that includes all of the following information:
(a) Date the drug was dispensed.
(b) Name of the patient.
(c) Name of the client.
(d) Complete instructions for use of the drug.
(e) Name of the drug.
(f) Strength for unit dose.
(g) Quantity dispensed.
(h) Expiration date of the drug, when appropriate.
(i) Veterinarian’s name or clinic’s name, telephone number, and any appropriate precautionary statements, such as “keep out of reach of children.”
(j) Withholding time or other needed warnings.

(2) Health products dispensed in other than the manufacturer’s original container shall be:

(a) Equipped with a child-safe lock mechanism, if appropriate.
(b) Affixed with the veterinarian's label that includes all information under (1).

(3) Over-the-counter drugs, that are dispensed to be used in an extra-label manner, shall be subject to all requirements in A1.

B. PRESCRIBING AND DISPENSING

(1) Prescription drugs or over-the-counter drugs to be used in an extra-label manner shall not be prescribed or dispensed unless a valid veterinarian-client-patient relationship exists.

(2) Veterinarians must honor a client’s request for a written prescription in lieu of dispensing.

(3) The prescribing of over-the-counter drugs to be used in an extra-label manner for the temporary alleviation of symptoms until a veterinarian-client-patient relationship can be established shall not be considered a violation of (B1).

(4) For these sections, a veterinarian-client-patient relationship for a companion animal shall exist only if the veterinarian has examined the companion animal within the previous twelve months. Some medical conditions and/or drug uses may require more frequent examinations and/or patient monitoring.

(5) Controlled substance security and records must adhere to appropriate laws.
IV. REQUIREMENTS FOR INDIVIDUAL VETERINARIANS IN A PRACTICE

A. CONTINUING EDUCATION

(1) A veterinarian must attend or participate in scientific continuing education programs. (The minimum number of hours per year to be determined.)

(2) A veterinarian shall have access to current medical literature applicable to the areas of practice in which engaged. Access shall be on the premises of the primary location from which the veterinarian provides services. The literature shall include at least five of any combination of the following:

(a) Text books published within the preceding five years.
(b) Current subscriptions to scientific journals.
(c) Notes or proceedings from educational programs conducted in the past five years.
(d) Access to veterinary-specific Internet resources.

B. PERSONAL HYGIENE

(1) A veterinarian shall project an image of cleanliness and neatness and maintain standards adequate to prevent the spread of disease.

V. REQUIREMENTS FOR HOUSE CALL PRACTICES

A. REQUIREMENT FOR PATIENT RECORDS

(1) A house call practice shall maintain an individual legible patient record as outlined in Section II.G.

B. A house call practice must maintain a relationship with a stationary practice for such services as radiographs, surgery, and hospitalized patient care.

C. A house call practice must provide emergency coverage for its patients, either directly or by referral to another practice.

D. Surgical procedures may not be performed in the owner’s home.

Reference:

(1) 2003 AVMA Directory, Principles of Veterinary Medical Ethics of the American Veterinary Medical Association: Professional Behavior p.35

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