VETERINARY CARE

A dealer must establish and maintain a program of adequate veterinary care. [2.40, 3.110, Policy #3, Policy #22]

Adequate Veterinary Care

An adequate program of veterinary care must include, but not be limited to:

- availability of appropriate:
 - facilities [2.40(b)(1)]
 - personnel [2.40(b)(1)
 - equipment [2.40(b)(1)]
 - emergency, weekend, and holiday care [2.40(b)(2)]
- use of appropriate methods to prevent, control, diagnose, and treat diseases and injuries [2.40(b)(2)]
- daily observation of the animals to assess their health by the dealer, employee or attending veterinarian [2.40(b)(3)]
- a mechanism for direct and frequent communication with the attending veterinarian on problems of animal health, well-being and behavior [2.40(b)(3)]
- pre-procedural and post-procedural care in accordance with established veterinary medical and nursing procedures [2.40(b)(5)]
- a preventive medical program, if necessary, for
 - zoonotic disease
 - dietary considerations
- a treatment/management plan for conditions requiring long term care, such as:
 - arthritis or lameness
 - stereotypic behaviors
 - under or over weight animals
 - foot care for elephants

- a method of euthanasia consistent with the current Report of the AVMA Panel on Euthanasia
- proper storage of drugs, biologicals, fluids, and other medical supplies and equipment
- necropsy guidelines should include, at a minimum, documentation that necropsies will be performed: [Policy #22]
 - on all marine mammals [3.110(d)]
 - on all elephants
 - at the discretion of the attending veterinarian when a high death loss is occurring
 - when a significant number of unexplained deaths is occurring
 - when a strong chance exists that an undiagnosed infectious disease is present (with or without potential zoonoses)
 - when the circumstances around a death indicate that a violation of the AWA may have contributed to the death

NOTE: You (the inspector), in consultation with your Supervisory Animal Care Specialist, may request a dealer to conduct necropsies on selected regulated animals.

The necropsy should be performed by or under the supervision of a veterinarian experienced with the species and include, but not be limited to:

- a systemic gross pathology examination (internal and external)
- appropriate microbiological cultures and histopathology of lesions
- other indicated tests

Attending Veterinarian's Responsibilities

A dealer must:

• employ an attending veterinarian under formal arrangements [2.40 (a)(1)]

12.10.2 ANIMAL CARE

- assure the attending veterinarian has the appropriate authority to:
 - ensure adequate veterinary care [2.40(a)(2)]
 - oversee the adequacy of other aspects of animal husbandry [2.40(a)(2)]
- communicate to the veterinarian timely and accurate information on the animal's health, well-being and behavior [2.40(b)(3)]

The dealer **must** consult with his/her attending veterinarian to:

- determine the program of veterinary care
- develop a schedule of regular visits to the premises
- approve any modification in the frequency of providing drinking water
- obtain guidance for personnel on:
 - handling
 - immobilization
 - anesthesia
 - analgesia
 - tranquilization
 - euthanasia
 - pre- and post-procedural care, such as:
 - **R** wound care
 - **R** drugs/dosages
 - **R** activity level
- determine the method(s) of euthanasia for the animals which must be consistent with the current Report of the AVMA Panel on Euthanasia

NOTE: Gunshot is **not** considered an acceptable method of *routine* euthanasia but may be used in emergency or field situations where other more acceptable methods of euthanasia are not feasible.

The dealer **should** consult with his/her attending veterinarian to:

- determine adequacy of routine animal husbandry practices, such as:
 - hoof/foot care
 - grooming
 - cleaning and sanitation
 - dental care
- design the facility's surgical facilities
- determine the facility's procedure for surgeries on regulated animals which must require that:
 - survival surgeries be performed using aseptic technique
 - major operative procedures for non-rodents be performed only in dedicated surgical facilities
 - short non-survival surgeries be performed:
 - R aseptically, or
 - R in a dedicated surgical facility, or
 - R in a clean area, free of clutter, and using acceptable veterinary practices
 - long non-survival surgeries where the animal may show evidence of infection be performed:
 - R aseptically, and/or
 - in a dedicated surgical facility
 - no eating, drinking or smoking be allowed in the surgery areas
 - food handling areas not be used for surgeries
- determine the facility's use of drugs, fluids and other medical supplies or equipment
- determine the facility's policy on the use of expired drugs, fluids and other medical material which must include either
 - disposing of outdated drugs, fluids, and medical supplies or
 - appropriately labeling and separating outdated drugs, fluids and medical supplies from non-

12.10.4 ANIMAL CARE expired medical materials to be used in the following situations:

R for non-regulated animals

R for non-regulated activities

R for acute terminal procedures on regulated animals with the exception of drugs to relieve pain or distress and emergency drugs

The attending veterinarian's approval and signature is required on the facility's:

- program of veterinary care
- environmental enhancement plan for nonhuman primates
- exercise plan for dogs
- acclimation statement for animals housed at the facility

A veterinarian's signature is required on:

- acclimation certificates for transport
- health certificates

NOTE: A dealer may use more than one veterinarian, if necessary to provide adequate veterinary care for all the species housed at the facility.

NOTE: If you (the inspector) have a concern with the instructions or guidance the dealer has received from the attending veterinarian, you should contact the Regional Office and discuss the concern with a Supervisory Animal Care Specialist.

Species Specific

Dogs and Cats

The dealer must have the attending veterinarian's approval for:

- the exercise plan for dogs
- the outdoor housing for dogs/cats in temperatures below 50° F
- the relative humidity level in the indoor housing facility

Nonhuman Primates

The dealer must have the attending veterinarian's approval for:

- the acclimation status of nonhuman primates housed outdoors
- the environmental enhancement plan
- the temperature range for nonhuman primates' housing facility
- the relative humidity level for nonhuman primates' housing facility
- the sanitation schedule of enclosure surfaces for scentmarking species

Marine Mammals

RESERVED-Pending approval of negotiated rules

Health Records

All facilities must have a system of health records. [Policy #3]

Requirements

Health records must be:

- current
- legible
- sufficiently comprehensive to demonstrate the delivery of adequate veterinary care
- consistent with professional standards

NOTE: A system of health records should be described in the written Program of Veterinary Care for those facilities not employing a full time veterinarian.

Contents

Health records should include, but not be limited to:

- the identity of the animal
- a description of any:
 - illness
 - injury
 - distress
 - behavioral abnormality

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- resolution of any noted problem(s)
- dates, details, and results (if appropriate) of all medically-related:
 - observations
 - examinations
 - tests
 - procedures, such as:
 - R vaccinations
 - **R** fecal examinations
 - **R** radiographs
 - **R** surgeries
 - R necropsies
- treatment plans which should include:
 - diagnosis
 - prognosis, when appropriate
 - type of treatment
 - frequency of treatment
 - duration of treatment
 - criteria and/or schedule for re-evaluation by the attending veterinarian
 - allowable activity level for the animal
 - restriction, if any, for the animal
- treatment history which should include:
 - dates of all treatment
 - names of drugs or other medications given
 - ► dose & route
 - frequency
 - duration of treatment

Record-keeping

Records may be kept in any format the facility chooses as long as all required information is readily available.

Group health records:

Routine husbandry and preventive medical procedures performed on a group of animals may be recorded on herd-health type records.

Individual health records:

Treatment of an individual animal must be on an entry specific for that animal.

Availability

Health records must be readily available.

Health records at a facility may be held by:

- the licensee or other designated employee(s)
- the attending veterinarian

If health records are divided between personnel, the records must be:

- appropriately cross-referenced
- readily available
- complete with all required information

Health records must be held:

- for at least 1 year after the animal's disposition or death
- longer than 1 year as required by other applicable laws or policies

A copy of an animal's health records must accompany the animal when it is transferred to another dealer, research facility, person or location.

The transferred health record should contain:

- the animals's medical history
- information on any ongoing or chronic problems
- the most current preventive medical procedures, such as:
 - vaccinations
 - deworming

Written Program of Veterinary Care

If the dealer does **not** employ a full time attending veterinarian, THEN the Program of Veterinary Care (PVC) must:

• be written on the Animal Care Program of Veterinary
Care for Research Facilities or Exhibitors/Dealers form

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(APHIS Form 7002 - see page 12.10.10) or an equivalent format [2.40(a)(1)]

- include the frequency of regularly scheduled visits to the premises
- be reviewed annually
- be updated as needed for situations such as:
 - the addition of a new species of animal
 - a new attending veterinarian
 - a change in the preventive medical program
- be initialed and dated by the dealer:
 - whenever it is changed, or
 - reviewed without change (at least annually)
- be initialed and dated by the attending veterinarian
 - whenever it is changed, or
 - reviewed without change (at least annually)

It is recommended that the PVC contain an explanation of the health records system. [Policy #3]