



Coastal Alabama Community College Veterinary Technology Program Clinical Facility Hospital Standards

Prospective Clinical Site: _____

To ensure that students in Coastal Alabama Community College's veterinary technology program are learning skills at veterinary facilities devoted to high medical standards and patient care, the program has provided this list of minimum criteria for approval of site clinics. Potential Site Clinics must meet the Minimum Standards for Veterinary Facilities set forth by the Alabama State Board of Veterinary Medical Examiners and the additional criteria found below. The program director or instructor will review this criterion during the clinical site interview and inspection prior to approval.

AAHA accredited practices may provide their AAHA accreditation number in lieu of this form. AAHA-accreditation number (if applicable): _____

Building Facilities: Exterior/Interior, Exam Rooms, Treatment Area and Kennels:

- Exterior – Clean and in good repair
 - Adequate safeguards for clients and patients
 - Clean and well maintained grounds
 - Fecal material and rubbish must be removed from lawns, sidewalks, and parking areas on a daily schedule.
 - Signs and exterior lighting sufficient and maintained for identification and safety
 - Parking area sufficient and safe for clients and staff
- Interior – Clean and in Good Repair
 - Presents a professional appearance
 - Floors, walls, and windows easily cleaned and sanitized
 - Seating and furniture clean and neat
- Exam Rooms – Clean and in Good Repair
 - Examination facilities of sufficient size for patient examinations and feature adequate lighting.
 - Each examination room must be supplied with cleaning materials, disinfectant, disposable towels, and a waste receptacle.
 - To facilitate hand washing between each patient, a sink must be located in or convenient to each examination room.
- Treatment Area – Clean and in Good Repair
 - Walls, floors, doors, and ceilings in good repair
- Kennel – Clean and in Good Repair
 - Walls, floors, doors, and ceilings in good repair

Medical Records:

- There must be an established system of medical record keeping within the practice to ensure all patient records are filed or digitally stored in a secure and consistent manner for the required amount of time set forth by state regulations
- Client identification must include: owner's name, physical address, home phone, cell phone, and alternate means of contact (email)
- Each pet owned by a client must have its own medical record
- Each patient must be properly identified. The following identification must be recorded accurately on each patient's medical record: patient's name (ID number if applicable), species, breed, date of birth, sex, color and/or markings, and microchip or tattoo (if applicable).
- Medical records must be legible and entries noted with the practice team members' initials.
- SOAP or Problem-oriented medical records are utilized. All medical records must include:
 - Chief Complaint
 - Patient History
 - Physical Examination Results
 - Assessment (tentative or definitive diagnosis)
 - Plan (diagnostic and/or therapeutic)
 - Include all client communication, discharge instructions, consultations, procedures (including descriptions of surgical, dental, anesthetic, and medical procedures) and signed consent forms.
- All patients must be given an appropriate physical examination prior to all medical or surgical procedures. A systematic procedure of examination should be followed.

Pharmacy:

- Drugs must only be dispensed or administered by order of a licensed veterinarian.
- An adequate supply of drugs and supplies must be available and organized in a standard manner. Drugs should be stored under conditions recommended by the manufacturer.
- Child-resistant containers are used unless otherwise requested by the client. Requests must be documented in the medical record.
- Each dose of any medication administered, dispensed, or prescribed must be recorded on the medical record.
- When dispensing medication, each label must:
 - Be typed or printed
 - Be permanently affixed to the container
 - Include warning labels, if appropriate
- When dispensing medication, each label must be recorded with:
 - Client's first and last name
 - Patient's name and species
 - Date dispensed
 - Name of drug and strength
 - Usage directions including route of administration
 - Dosage and quantity dispensed, including number of refills
 - Hospital's name, address, and phone number

- Name of the veterinarian dispensing the drug
- The pharmacy contains a current written or electronic reference text of pharmaceuticals.
- Controlled drugs must be stored in a securely locked, substantially constructed cabinet or safe as required by federal, state, or provincial regulations with access limited to licensed veterinarians and licensed veterinary technicians.
- A separate log is maintained for all administered and dispensed Schedule II controlled substances and kept in an area separate from the controlled substances. A separate log is maintained for Schedule III-V controlled substances.
- Current antidote information must be readily available for emergency reference in addition to the telephone number of an animal poison control center.
- All expired drugs must be removed from working stock promptly and returned or disposed of in accordance with federal, state, or provincial regulations.
- Drugs used in euthanasia procedures must be identified, segregated, and stored in a locked cabinet.
- Hazardous medications must be handled in accordance with federal, state, and provincial regulations and staff must wear appropriate Personal Protective Equipment (PPE).

Laboratory:

- Adequate space must be provided for performance of services and proper storage of reagents and equipment.
- All surfaces, including but not limited to, counter tops and seat covers, must be impervious and stain resistant and there must be adequate lighting in all work areas.
- Each specimen must be sufficiently identified with the proper patient information.
- The practice must be capable of performing in-house laboratory services, including:
 - Hematology
 - Serology
 - Blood chemistry analysis
 - Urinalysis including sediment evaluation
 - Serum electrolytes
- Reference range values must be available for all laboratory tests performed for each species commonly treated in the practice.
- Restrictions must be in place to prohibit eating and drinking in lab areas.
- Food or drink items must not be stored in refrigerators where lab specimens are routinely kept.
- Hazardous biological and chemical waste is disposed of properly.
- Each necropsy procedure must be thorough and detailed in the medical record.

Diagnostic Imaging:

- Radiology services must be provided.
- Radiation producing equipment is operated only by trained practice team members aware of hazards, actual and potential, to themselves, assisting practice team members, patients, and other nearby individuals.
- Educational information must be available to all staff concerning radiation safety and radiation safety policies must be on file.

- Radiation safety procedures must be in compliance with all federal, state, provincial, or local regulations.
- Dosimeter monitoring of exposure levels must be provided for all personnel working with or near an x-ray generator. The records must be maintained indefinitely and communicated to the staff.
- The individual dosimetry badge must be worn near the collar on the outside of the leaded apron.
- Machines must be inspected in accordance with federal, state, or provincial regulations and results posted.
- Images of patients must be identified properly and filed for easy location and retrieval and retained in compliance with federal, state, or provincial regulations.
- Radio-opaque characters must be used to indicate orientation and right (R) and left (L) sides of the patient.
- Permanent identification of each image is required and should include date, patient identification, and hospital name.
- All personnel must wear protective apparel (aprons, gloves, and thyroid shields) while in the room during exposure.

Anesthesiology:

- Anesthesia services must be provided.
- A patient assessment must be performed prior to the administration of any premedication, sedation, or anesthetic (within 24 hours of the procedure).
- Anesthetic agents must be administered by a veterinarian or trained practice team member under the supervision of a veterinarian on the premises. Administration must be in compliance with federal, state, or provincial regulations.
- Some method of respiratory monitoring must be used, such as observing chest movements, watching the rebreathing bag, or use of a respiratory monitor.
- A qualified practice team member must be in place for serial monitoring of the anesthetized patient until fully recovered. Observations should occur at frequent intervals until the patient is fully recovered and a separate anesthesia record maintained.
- When endotracheal tubes are used, they must remain in place during recovery from anesthesia until protective reflexes (swallow or gag) have returned.
- A separate anesthesia record must be kept for each patient's anesthetic episode.
- Emergency drugs and equipment must be readily available, kept in a designated place, portable, clearly labeled, and stocked at all times.
- All monitors, anesthetic delivery devices, and other equipment needed for the administration of general anesthesia must be readily available, in good repair, serviced, calibrated, and inspected regularly according to manufacturer's recommendations.
- Anesthetic machines should be serviced according to manufacturer recommendation, including vaporizer validation and re-calibration if needed. If no such recommendation exists, then the anesthetic agent delivery system should be validated annually. Test results should be maintained. Documentation of service should be affixed to each anesthesia machine and vaporizer that is in use.

- An appropriate passive or active scavenging system must be in place for waste anesthetic gases. The scavenging systems must be maintained in accordance with manufacturer's recommendations and a preventive maintenance plan must be documented. All anesthetic machines should be leak tested daily.
- The anesthetic area must have emergency lighting available.
- Some means of assisting ventilation, either manual or mechanical, must be readily available and utilized as needed.
- There must be a designated area for induction of general anesthesia and a designated area for recovery outside of the surgical suite.

Surgery:

- Surgical services must be provided.
- All surgeries must be performed by a licensed veterinarian.
- Surgeons, surgical assistants, and operating room attendants must wear a surgical cap and mask at all times while in the surgical suite and when a sterile field exists therein. All scalp and facial hair must be completely covered by the cap and mask. In addition, surgeons and surgical assistants must wear a sterile surgical gown and sterile, single use gloves. Operating room attendants should remain outside the sterile field. Traffic of non-sterile practice team members between two sterile fields is prohibited (i.e. between the patient and instrument table)
- A regular maintenance program for autoclaves and other sterilizing equipment must be instituted.
- Surgical packs must be steamed or gas sterilized.
- Sterile surgical packs must be used for each patient.
- When gas or steam sterilization procedures are used, sterility indicators must be in evidence on the exterior surface of each unit.
- When surgical bundles are sterilized, indicators that confirm effective sterilization (adequate time, temperature, and saturated steam) must be used in the center of each pack.
- Drapes, towels, gauze sponges, suture materials, and gowns must be properly wrapped prior to sterilization.
- Surgical packs must be dated with the date on which they were sterilized. If not used within 60 days, packs must be re-sterilized prior to use. The packs must also be marked with the initials of the team member who prepared the pack and the contents of the pack.
- Pre-operative preparation, including clipping and initial cleaning of the surgical site, must be performed outside the operating room. The preparation room should be a separate room convenient to the operating room and well lit. Floors, walls, and counter tops should be of smooth, impervious material which is easily cleaned.
- There must be a surgical scrub area located outside the surgery suite and in an area immediately adjacent to the surgery suite.
- The operating room must be a separate, closed, single purpose room entered only for activities associated with aseptic surgical procedures. Floors, walls, doors, and other surfaces must be made of smooth, impervious material which can be easily cleaned.
- Only items normally used during surgical procedures should be stored in the surgery suite.
- A source of automatic emergency lighting must be available.

- If applicable, any laser equipment must be stored and maintained according to federal, state, local, and provincial regulations.
- If applicable, all Personal Protective Equipment (PPE) must be worn when laser equipment is in use according to the manufacturer's instructions and maintained according to federal, state, local, and provincial regulations.

Dentistry:

- Dentistry services must be provided and all dental procedures performed under general anesthesia with patients intubated.
- A routine examination of any animal must include examination of the teeth and structures of the oral cavity.
- Only properly trained practice team members may perform dental procedures in compliance with state or provincial licensing bodies.
- Practice team members performing, assisting, or monitoring anesthesia during dental procedures must wear masks, eye protection, and gloves, or other protective equipment.
- The decision to extract teeth must be made by the veterinarian.
- Dental prophylaxis must not be done in the operating room.
- Dental records, including anatomic dental documentation or charts, must be part of the medical record.

Nursing Care:

- Nursing care, including hospitalization, must be provided.
- All patient care provided by the nursing staff must be under the supervision of a veterinarian.
- All patients must be properly identified upon admission (i.e. ID band and cage card).
- Animal holding areas must be secure, escape-proof, in good condition, easily cleaned, and adequate for the size of the patient. Patients should be individually housed unless requested by the owner and approved by the veterinarian.
- There must be effective separation of contagious and non-contagious animals.
- A veterinarian must examine every hospitalized patient at least once every 24 hours and document the findings.
- Each administered medication must be entered on the patient's medical record showing date, name of drug, type, dose, route of administration, frequency of administration, and identification of individual who administered the medication.
- The practice staff must demonstrate humane care of animals. The facility must provide for the prevention of animal abuse and neglect of patients.
- Appropriate Personal Protective Equipment (PPE) must be worn by all personnel performing therapeutic bathing and dipping.
- The nursing staff must be familiar with the proper handling and disposal of all waste materials and the cleaning and disinfection of cages and runs.

Housekeeping and Maintenance:

- The facility and staff must present a professional appearance.
 - Fixtures, including light and plumbing fixtures
 - Equipment and appliances

- Cages and runs
- All cleaning supplies must be used in accordance with manufacturers' instructions and in compliance with federal, state, local, and provincial regulations.
- Soiled or contaminated linens must be handled in such a way as to prevent cross-contamination of other areas of the hospital. Surgical laundry must be cleaned separately.
- Faucets and drains must be inspected regularly and maintained in proper working order.
- Tanks containing compressed gases must be securely fastened to prevent tipping or falling, checked monthly for leaks, and stored away from heat sources.
- Mechanical systems throughout the hospital must be maintained in accordance with written preventive maintenance programs.
- Waste disposal must be carried out in accordance with good public health practice and federal, state, provincial, and local regulations.
- Biomedical waste, such as culture plates, tubes, contaminated sponges, swabs, biologicals, needles, syringes, and blades, must be disposed of according to federal, state, local, and provincial regulations.
- Adequate safety precautions must be used in disposing animal carcasses and tissue specimens. Disposal must be in accordance with federal, state, local, and provincial regulations.
- Deceased animals not disposed of within 24 hours must be sealed in heavy plastic bags, identified, and refrigerated or frozen.
- If an incinerator is used, it must be installed and maintained according to federal, state, local, and provincial regulations.
- Grounds surrounding an animal hospital must be neat, attractive, and in safe condition at all times.
- Rubbish, papers, and fecal material from animals must be picked up from lawns, sidewalks, and parking areas on a daily schedule.
- The hospital must be equipped to operate under safe and sanitary conditions.
- Waste anesthetic gas systems, ventilation and heating systems and air conditioning and heating equipment must be installed in accordance with applicable codes and appropriate standards.
- The ventilation system must ensure that a controlled and regularly filtered air supply is provided in critical areas, such as the surgical suite and isolation areas.
- Water must be safe for use by employees, patients, and clients in accordance with federal, state, local, and provincial regulations.

Safety:

- Adherence to all OSHA safety regulations must be maintained and documentation of inspections (self and external) should be readily available.
- An appropriate eye wash station must be available, clearly marked, and maintained.
- Fire protection/policies and procedures should be inspected yearly and documentation readily available.
- Flammable and combustible materials must be stored and secured according to federal, state, local, and provincial regulations.
- All Safety Data Sheets must be organized in a binder and kept in a central location. Employees must be educated on the location and use of the binder.

- Appropriate personal protection equipment must be worn. Specific PPE will depend on the hazards and risk of the activity but may include but are not limited to: safety glasses, face masks, gloves, and gowns.
- All secondary containers must be labeled appropriately according to federal, state, local, and provincial regulations.
- All OSHA ergonomic and noise regulations (including use of hearing protection if noise levels exceed 85 decibels) must be adhered to.
- Impervious containers for needles and other sharps must be readily available and disposed of according to federal, state, local, and provincial regulations.
- Educational information and warnings must be available to all staff concerning safety and reporting of non-compliance.
- If utilized, all chemical hoods and ethylene oxide exhaust ventilation must be installed and maintained according to federal, state, local, and provincial regulations.
- Food and drink should not be in any area of the hospital except the designated break or lunch room. Lab samples, medications, and diagnostic chemical reagents should not be kept in the same refrigerator as human food or drinks.
- Appropriate signage must be used throughout the veterinary hospital. These signs must notify employees of specific health hazards such as radiation, oxygen, and laser use. Exits must be clearly marked. Signs indicating temporary hazards, such as a wet floor, should be used as needed.
- Formalin should be ordered in small, pre-diluted containers and stored in appropriate locations.
- Ground fault circuit interrupters must be used in wet areas.

I have physically examined the hospital and found them to be in accordance with the above standards.

Coastal Alabama Instructor/Director Name (print): _____

Coastal Alabama Instructor/Director Name (signature): _____

Site Clinic Representative Name (print): _____

Site Clinic Representative Name (signature): _____

Site Clinic Representative Position: _____

This document was created with permission from the AAHA Standards of Accreditation, April 2018