

Animal Welfare Underwriting Supplement

Animals Supported: Cats Dogs Other (describe)

Animal care outreach programs (check all that apply):

Pet shelter Pet clinic/hospital Pet Pharmacy

Pet adoption Pet therapy Disaster relief Wildlife education Workshops/Education

Cat TNR program Dog obedience training

Children's programs Tours Special fund raising events

How frequently does your board meet?

Are your bylaws available online? If yes, URL:

Otherwise attach most recent copy

Are your financial statements online? If yes, URL:

Otherwise attach most recent copy

Staff: # Veterinarians # Technicians # Assistants # Reception/Clerical

Other (describe)

Accreditations:

1	Do you screen prospective owners at the facility?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2	Is there a quality control program in place to document client/patient interaction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3	Are owners required to have their pets on a leash or pet carrier in waiting rooms?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4	Do you verify insurance, licensing and references for any "relief" professionals?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5	Are non-employees escorted by experienced employees throughout facility?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6	Are there separate entrances for aggressive, injured or infectious animals?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7	Are cages/kennels clearly labeled for special needs/aggressive/fearful animals?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8	Is there an infection control plan that is regularly updated and reviewed with staff?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9	Do you have secure storage and monitoring procedures for controlled substances?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10	Has there been a legal review of the practice's consent forms?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11	Are your patient records digital through practice management software?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11a	Name of software:		
11b	If "Yes" are computers & networks backed up to off-site or cloud storage?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11c	If "No" do you store records & valuable papers in a fire resistant safe or container?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12	Do you keep detailed records of all euthanasia, including owner consent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13	Are flammable chemicals stored in accordance with NFPA 30?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14	Are gas cylinders securely fastened to prevent leaks?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15	Has all imaging equipment been installed per manufacturer specifications?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
16	Is your radiological or imaging equipment under manufacturer's warranty?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17	Is your facility used for veterinary teaching programs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17a	If "Yes" are written contracts with waivers & hold-harmless provisions utilized?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17b	If "Yes" are interns only allowed to treat animals under veterinarian supervision?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18	Do you permit job-shadowing ("volunteer") student-workers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18a	If "Yes", do you enforce strict rules regarding limited duties and patient interaction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19	Are refrigeration units equipped with temperature alarms?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
20	Is wastewater discharged into municipal sewage systems?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
21	Do you have a hazardous material storage program?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
22	Do you have proper chemical spill kits readily available throughout premises?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
23	Are all operating rooms equipped with anesthesia gas scavenging systems?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
24	Do you use a specialized medical waste disposal service?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
25	Do you have reciprocal agreements with other practices in the event of disaster?	<input type="checkbox"/> Yes	<input type="checkbox"/> No