



State of Nevada Board of Veterinary Medical Examiners

4600 Kietzke Lane, Bldg. O, #265, Reno, NV 89502

(775) 688-1788 phone / (775) 688-1808 fax

Email: mail@vetboard.nv.gov Website: nvvetboard.nv.gov

Application for Registration of a Mobile Practice

Fee: \$50

(Cash is no accepted and fees are non-refundable)

TYPE OF OWNERSHIP

Sole Prop.: _____ Partnership: _____ Corp.: _____ LLC: _____ Other: _____

TYPE OF PRACTICE

Full-Service: _____ 24hr Emergency: _____ Spay/Neuter: _____ Specialty: _____

HOURS OF OPERATION

Mon-Fri: ____AM____PM **Sat:** ____AM____PM **Sun:** ____AM____PM **Holidays:** ____AM____PM

Anticipated Opening Date of Facility _____

Name of Facility _____

Facility Address _____

City _____

State _____

Zip _____

Telephone Number _____

Fax Number _____

E-Mail _____

Contact information for owner of facility if not a Licensed Veterinarian:

Name: _____

Address: _____

Phone: _____

Email _____

Nevada Business License

NRS 353C requires all licensing boards to provide the following information to the State Controller's office:

- ☐ I have a Nevada business license number assigned by the Nevada Secretary of State upon compliance with the Provisions of Chapter NRS 76. **My Nevada business license number is:** _____
- ☐ I do NOT have a Nevada business license number.
- ☐ I have applied for a Nevada business license with the Nevada Secretary of State upon compliance with the provisions of NRS chapter 76 and my application is pending.

OWNERSHIP AS A PARTNERSHIP

If **PARTNERSHIP**, list names of all partners, percent interest, title & veterinary license number.

<i>Name</i>	<i>% Interest</i>	<i>Title</i>	<i>License Number</i>

OWNERSHIP AS A CORPORATION

If **CORPORATION**, give exact name

Name of Corporation _____ Date Incorporated _____ State _____

If corporation, list names, titles (Pres., V.P., etc.) and veterinary license number, if applicable:

<i>Name</i>	<i>% Interest</i>	<i>Title</i>	<i>License Number</i>

Employed Licensed Veterinarians/Licensed Veterinary Technicians/Veterinary Technicians-in-Training:

Veterinarian in Charge

License

Name	License Type (DVM, LVT, VTIT)	License Number

STATEMENT OF RESPONSIBILITY

I, _____ (Print Name) veterinarian in charge of _____
hereby acknowledge and understand that I as the veterinarian in charge of said facility may be responsible for any violations of the Nevada Veterinary Practice Act (NRS/NAC 638) that may occur in said facility.

- I further acknowledge and understand that I may be named in any action taken by the Nevada State Board of Veterinary Medical Examiners against this facility.
- I further acknowledge and understand that the veterinarian in charge cannot require or permit the veterinarian(s) in said facility to violate any provision of any local, state, or federal laws or regulations pertaining to the practice of veterinary medicine or operation of a facility in Nevada.
- I further acknowledge and understand that upon the change of the veterinarian in charge of the facility, a self-inspection of the facility shall be performed jointly by the departing veterinarian in charge and the new veterinarian in charge.

Date: _____ Signature of Veterinarian in Charge: _____

State of Nevada Board of Veterinary Medical Examiners

Mobile Facility Self-Inspection

Facility	
Date of inspection	
Inspected by	

I: GENERAL	Yes	No	Not Applicable
Are all licenses including your associate's licenses, LVT, VTIT and your facility license available in your vehicle for inspection by the public? NAC 638.0437			
Do you have a current DEA and a Controlled Substance Registration?			
II: MEDICAL RECORDS NAC 638.0475			
Are medical records, including radiographs and all supporting documentation maintained in this state for at least 4 years?			
Are medical records being released to an owner within 48 hours of receiving the request?			
Does the written record contain the following information, in legible form:			
(a) Name, address and telephone number of the animal's owner?			
(b) Name or identifying number, or both, of the animal?			
(c) Age, sex, breed, and weight of animal?			
(d) Dates of care, custody or treatment of the animal?			
(e) A short history of the animal's condition as it pertains to the animal's medical status?			
(f) The results of and notations from an examination of the animal, including, without limitation, the temperature, pulse and respiration rate of the animal, and laboratory data pertaining to the animal?			
(g) Diagnosis or condition at the beginning of custody of the animal, including, without limitation, results of tests?			
(h) The immunization record of the animal?			
(i) All clinical information pertaining to the animal, including, without limitation, sufficient information to justify the diagnosis or determination of the medical status of the animal and to warrant any treatment recommended for or administered to the animal?			
(j) Do the notes taken during surgery must include the following:			
(k) The name and quantity of any drug administered for anesthesia and preanesthesia and the route of administration?			
(l) The procedure performed?			
(m) The times at which the surgery begins and ends?			
(n) If the surgery is performed in a veterinary facility using general anesthesia: 1) The vital signs of the animal at the beginning and end of the surgery that are appropriate to the species and condition of the animal at the time of surgery, including, without limitation, the temperature, pulse, heart rate, respiration, blood pressure, capillary refill time and oxygen levels of the animal; and			
(o) The vital signs of the animal recorded at least every 5 minutes during the surgery, including, without limitation, the pulse, heart rate and respiration of the animal?			
(p) Any medication and treatment administered, including, without limitation, amount and frequency?			
(p) Progress and disposition of the case?			
(q) The name of each person who is not an employee of the veterinarian who provided professional advice or performed treatments, examinations or other services pertaining to the animal?			
(r) Do computer records relating to the administration, prescribing or dispensing of a prescription drug contain the initials of the person who administered, prescribed or dispensed the prescription drug? The initials of the person who administered, prescribed or dispensed the prescription drug may be manually entered into the computer record or automatically generated by the computer.			

III: RADIOGRAPHS	NAC 638.0475	Yes	No	Not Applicable
(a) Is each radiograph other than intraoral dental radiographs labeled in the emulsion film as follows:				
(b) The name of the veterinarian or facility that took the radiograph?				
(c) The name or identifying number, or both, of the animal?				
(d) The name of the animal's owner?				
(e) The date on which the radiograph was taken?				
(f) The anatomical orientation depicted by the radiograph?				
(g) For each intraoral dental radiograph or other diagnostic image, the medical record must include (a-e) above either in a hard copy of the written medical record or in a computer file?				
(h) Are medical records being released to an owner within 48 hours of receiving the request?				
(i) Are radiographs or other diagnostic images being released within 48 hours after the request is made to another veterinarian who has the authorization of the owner of the owner?				
IV: MEDICAL RECORDS-SECURITY				
NAC 638.0475 Computer Records				
(a) Is the security of the computer records including digital radiographs securely maintained, backed-up daily and cumulatively backed-up monthly using technology designed to store data permanently?				
(b) Are they either inalterable or clearly indicate when they have been altered and the manner in which they have been altered?				
(c) Is any information related to the physical examination automatically generated by the computer? (defaults)				
V: DISPENSING PRESCRIPTION DRUGS & CONTROLLED SUBSTANCES	NAC 638.0628			
(a) Does the facility at which controlled substances are possessed, administered, prescribed or dispensed have one or more veterinarians who practice at that veterinary facility registered with the DEA and the State Board of Pharmacy? Are the certificates of registration with each agency available for inspection and carried in your vehicle?				
(b) Are the controlled substances for administration or dispensing secured in a locked container that is affixed to the structure and located within a locked room or located within a second locked container which is affixed to the structure?				
(c) Does only a veterinarian or a veterinary technician designated by the veterinarian have the keys or combination to unlock the two separate locks at the start of a business day or beginning of a shift, if the veterinary facility has veterinarians on successive shifts?				
(d) Is there restrictive access to the controlled substances to veterinarians or veterinary technicians only?				
(e) Does each veterinarian or veterinary technician who accesses the secure container which stores controlled substances record in a log the name of the veterinarian or veterinary technician who accessed the secure container and the date that he or she accessed the secure container and the name, strength and quantity of the controlled substance removed from or placed into the secure container and the total amount of all quantities of that particular controlled substance remaining inside the secure container?				
(f) Does the veterinarian who intends to destroy an unused portion of a controlled substance record in a log the name and quantity of the controlled substance that will be destroyed and the date and time that the controlled substance was destroyed? An entry made pursuant to this paragraph must be verified by an employee of the veterinary facility. (DEA form 41)				
(g) Do the purchasing, storage, disposal, and recordkeeping of controlled substances comply with all applicable state and federal laws?				
(h) Are all records, forms, and logs maintained for at least 4 years?				
(i) Are separate files maintained for the records of the purchase of each controlled substance listed in schedule II of controlled substances in NAC 453.520 and records of the dispensing of each controlled substance listed in schedule II of controlled substances in NAC 453.520?				
(j) Are controlled substances purchased by a veterinarian or with the knowledge of a veterinarian and are all controlled substances received by the veterinary facility verified by a veterinarian or with the knowledge of a veterinarian?				

	Yes	No	Not Applicable
(k) Do only veterinarians, veterinary technicians, veterinary technicians in training, or veterinary assistants prepare the prescription drugs, non-controlled, for dispensing?			
(l) Are prescription drugs which are new for an animal only dispensed when a veterinarian or veterinary technician is at the veterinary facility or is otherwise available at the time the prescription drug is dispensed?			
(m) Is the following notation made in the medical record of the animal : (1) The name, strength and quantity of the prescription drug; (2) The date the prescription drug was prescribed and dispensed; (3) The directions for use; (4) The name, signature or initials of the veterinarian who prescribed the prescription drug;; (5) The name, signature or initials of the veterinarian, veterinary technician, veterinary technician in training, or veterinary assistant who prepared the prescription drug for dispensing; or (6) The name, signature or initials of the veterinarian or veterinary technician who verified the prescription drug before the prescription drug was dispensed?			
(n) Is each vial or container which contains a prescription drug, including a controlled substance have affixed to the vial or container a label that contains: (1) The name or unique identifier of the animal and the name of the owner of the animal for which the prescription drug is prescribed; (2) The name, strength and quantity of the prescription drug; (3) The date the prescription drug was dispensed; (4) The name of the veterinarian who prescribed the prescription drug; (5) The expiration date of the prescription drug; (6) A unique number identifying the prescription drug dispensed; and (7) The directions for use?			
VI: DUTIES OF SUPERVISING VETERINARIAN			
NAC 638.057			
Are the supervising veterinarians:			
(a) Responsible for determining the competency of the licensed veterinary technician (s) or veterinary technician (s) in training to perform delegated tasks of animal health care?			
(b) Making all decisions relating to the diagnosis, treatment, management and future disposition of the animal?			
(c) Examining the animal before delegating any tasks to the licensed veterinary technician or veterinary technician in training? The examination must be conducted at such time as good veterinary medical practice requires, consistent with the particular task of animal health care which is delegated			
(d) Ensuring that unlicensed personnel do not perform duties that are specific to licensed veterinary technicians (NAC 638.053) or veterinarians?			
VII: ESTABLISHING A VCPR			
NAC 638.0175 & 638.048			
(a) Does the veterinarian assume responsibility concerning health and treatment of the animal?			
(b) Does the veterinarian have knowledge of present care and health sufficient to provide at least a general or preliminary diagnosis of the medical condition of the animal?			
(c) Does the veterinarian acquire this knowledge by conducting a physical exam or does the veterinarian acquire this knowledge by visiting the premises where the animal is kept in a timely manner appropriate to the medical condition of the animal?			
(d) Does the veterinarian obtain the informed consent of the client for medical treatment of the animal?			
(e) Does the veterinarian obtain the agreement of the client to follow the instructions provided by the veterinarian for the care and medical treatment of the animal?			
(f) Is the veterinarian establishing a veterinarian-client-patient relationship; and making a medical determination that the prescription drug is therapeutically indicated for the health and well-being of the animal prior to prescribing, dispensing, delivering or ordering another person to deliver any prescription drug, including, without limitation, any controlled substance?			

VIII: VACCINATION CLINIC NAC 638.600	Yes	No	Not Applicable
(a) Do medical records contain the following: name, address and phone number of the owner, animal's name or ID number, age, sex and breed of the animal?			
(b) When conducting a vaccination clinic are you transporting and storing vaccines in a manner that ensures the efficacy of the vaccines; and			
(c) Are you providing refrigeration, cold storage or any other method of storage for a vaccine that is recommended by the manufacturer of the vaccine; and			
(d) Are you equipped with the proper supplies and medications necessary for the treatment of anaphylaxis or any other reaction to a vaccine, including, without limitation: (a) Oxygen; (b) Epinephrine; (c) Injectable corticosteroids and antihistamines; (d) Intravenous catheters and injectable fluids; (e) Endotracheal tubes of varying and appropriate diameters; and (f) Equipment for resuscitating animals.			

COMMENTS: _____

Signature of Veterinarian-in-charge _____ Date _____

The Nevada State Board of Veterinary Medical Examiners has developed this self-inspection process to provide the veterinary facility owner the opportunity to review these standards of practice and provide quality services to the public.

- Instructions:**
- 1) The mobile self-inspection form must be signed and returned to the Board office either by mail, fax or e-mail.
 - 2) The following supporting documentation must be provided with the inspection form:
 - a. Copies of your current DEA and Nevada Pharmacy Board Controlled Substance Registration.
 - b. Two medical records that include treatment of the animal over a period of time.
 - c. Copies of two pages of a current controlled substance log for two drugs.
 - d. Photo or a copy of a prescription label.
 - e. Photo of how (safe; lockbox) you are storing your drugs, including controlled substances in your home and your vehicle.
 - f. A list of all licensed personnel that are employed by you. (veterinarians; veterinary technicians; veterinary techs-in-training)

RETURN TO:
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Reno, Nevada 89502
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Website: www.nvvetboard.us
Email: vetbdinfo@vetboard.nv.gov