

PetPro Supplemental Questionnaire VETERINARIANS / VETERINARY HOSPITALS

PLEASE ANSWER ALL QUESTIONS

Risk Name: _____

Risk website address: _____

FEIN: _____

Date Business Started: _____

Is this practice mostly: Small Animal ___% Large Animal ___% Is this hospital accredited by AAHA? Yes No

Employees and Volunteers

1. Number of Employees: Veterinarians _____ Technicians _____ Assistants _____ Receptionists _____
2. Does this risk do background checks and/or require drug testing? Yes No
3. Are all Veterinarians, technicians and lab technicians licensed or certified? Yes No
4. Does this risk have procedures in place for proper prescribing, dispensing, and storing of prescription drugs? Yes No
5. Are scheduled drugs kept in a locked cabinet, and tracked as required by law? Yes No
6. Does this risk store drug surplus separately from the workings supply, restricting access to key individuals? Yes No
7. Are employees trained in the proper disposal of sharps and medical waste? Yes No
8. Does this risk provide training or information on zoonotic diseases to employees? Yes No
9. Does this risk provide personal protective equipment? Yes No
10. Does this risk clearly label the cages of aggressive or fearful animals? Yes No
11. Does this risk have procedures in place for identifying and handling an animal with a known bite history? Yes No
12. Is this risk aware of, and compliant with, all state regulations and protocols regarding rabies exposure? Yes No
13. Does this risk have a formal policy for reporting bites and scratches? Yes No
14. Are all animals on-leash or in carriers when moving them through the facility? Yes No
15. Are employees taught the proper techniques for lifting and restraining animals? Yes No
16. Are signs posted requiring owners to keep animals on-leash or in carriers? Yes No
17. Are inpatients fitted with ID collars at intake? Yes No



- 18. Are owners allowed in exam rooms? Yes No Treatment Rooms? Yes No
- 19. Does this risk allow owners to restrain animals? Yes No
- 20. Does this risk have isolation areas for infectious animals? Yes No
- 21. If so, does the isolation area have a separate ventilation system? Yes No
- 22. Does risk practice or recommend any non-traditional treatments? (homeopathic, chiropractic) Yes No

Explain: _____

- 23. Does this risk have formal procedures for tracking scheduled substances? Yes No
- 24. Does this risk train employees in the proper disposal of medical waste, including sharps? Yes No
- 25. Does this risk have an x-ray processor? Yes No
- 26. If so, how does this risk dispose of developer? _____
- 27. Does this risk require employees to wear x-ray exposure badges? Yes No
- 28. Are all chemical solutions clearly marked? Yes No
- 29. Does this risk maintain MSDS sheets for all chemicals? Yes No
- 30. Are refrigerated medical and biological materials stored separately from personal items? Yes No
- 31. Does this risk have a formal policy for maintaining medical equipment? Yes No
- 32. Does this risk have a system for removing anesthesia waste? Yes No
- 33. Are gas cylinders securely fastened to prevent leaks? Yes No
- 34. How does this risk store and remove euthanized/deceased animals? _____
- 35. Does this risk keep detailed records of all euthanasia, including owner consent? Yes No
- 36. Does this risk have an incinerator? Yes No

Producer's Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____