

BOARD OF VETERINARY MEDICINE

INSTRUCTIONS/CHECKLIST FOR REGISTRATION OF A VETERINARY ESTABLISHMENT AND CHANGES OR UPDATES TO A LICENSED ESTABLISHMENT

BEFORE YOU PROCEED, READ THE FOLLOWING INFORMATION CAREFULLY:

- 1) Review the Virginia laws and regulations pertaining to the practice of veterinary medicine at <http://www.dhp.virginia.gov/vet/>;
- 2) An incomplete application and failure to select the appropriate boxes will delay processing;
- 3) Submit a required application and fee by postal mail 45 days prior to anticipated opening date, check or money order, made payable to “Treasurer of Virginia;”
- 4) An inspection is required prior to practicing in a new, change of service upgrade, change of location or renovation of surgical suite;
- 5) Date of the anticipated opening of the veterinary establishment must be recorded on the application. The inspector will make every effort to schedule the inspection as close to the requested inspection date as possible;
- 6) At time of inspection, the veterinary establishment must be in compliance with all applicable standards set forth in the Board’s regulations. If a second inspection is required, a re-inspection fee may be assessed. [Guidance Document 76-21.2:1](#), Veterinary Establishment Inspection Report, provides a description of the inspection requirements;
- 7) A Veterinarian-in-Charge (VIC) who holds an active Virginia license must be identified and the “Veterinarian-in-Charge” section of the application must be completed; and
- 8) An email address and/or phone number that is marked as “private” are not subject to public release.

Application Notifications from the Board

- Email confirmation of receipt of application are typically sent within 21 business days;
- Email notice when veterinary establishment registration issued. **Note:** Veterinary establishments are not registered until they receive notification from the Board that the registration has been issued. An application in process is not sufficient to operate; and
- Postal mailing of the registration.

License Expiration Dates

Registrations issued prior to July 1 expire on December 31 of the current year. Registrations issued on or after July 1 expire December 31 of the following year.

Board Communication

- Email address: The Board’s preferred method of communication with applicants and licensees is through email notifications. Maintaining a current email address with the Board office provides a mechanism for up-to-date and cost effective communication. **Note:** It is recommended that you add the Board’s email address to your list of contacts to avoid the Board’s communication being identified as SPAM.
- To receive automatic board regulatory updates via email, register with the Virginia Regulatory Town Hall at <http://townhall.virginia.gov/>.

Board of Veterinary Medicine Contact Information

Address: 9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

Webpage: <http://www.dhp.virginia.gov/vet/>

Email: vetbd@dhp.virginia.gov

Phone: (804) 597-4133

Fax: (804) 527-4471

VETERINARY ESTABLISHMENT REGISTRATION FORM

NEW or CHANGE

| | | | | |
|--|---|----------------------------------|---|--|
| Name of Veterinary Establishment | | Registration No. (if applicable) | Anticipated Inspection Date | |
| Address of Veterinary Establishment | | City | State | Zip Code |
| Email to Receive Board Communication <input type="checkbox"/> Public or <input type="checkbox"/> Private | | Website (if available) | Veterinary Establishment Phone # | |
| Name of Veterinarian-in-Charge (VIC) | VIC's Email <input type="checkbox"/> Public or <input type="checkbox"/> Private | | VIC's Phone # <input type="checkbox"/> Public or <input type="checkbox"/> Private | |
| VIC's License Number: | | | | <input type="checkbox"/> Cell <input type="checkbox"/> Other |
| <input type="checkbox"/> New, STATIONARY OPEN 24 Hours: Pursuant to 18VAC150-20-200(A) & (B)(1) establishment must be open 24 hours and encompass all aspects of health care for small and/or large animals; on site lab, radiology and surgical services; equipped to handle emergency critical care and hospitalization; and licensed personnel on premises at all times. Inspection and fee of \$300 required. | | | | |
| <input type="checkbox"/> Small Animal Only <input type="checkbox"/> Large Animal Only <input type="checkbox"/> Mixed <input type="checkbox"/> Laboratory services on site <input type="checkbox"/> Radiology/Imaging on site <input type="checkbox"/> Hospitalization <input type="checkbox"/> Licensed personnel on premises at all times | | | | |
| Does the establishment operate mobile unit(s) from which veterinary services are provided (i.e. RV unit)? <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, how many units? _____ How many mobile units have surgery suites? _____ | | | | |

APPLICANTS DO NOT USE SPACES BELOW THIS LINE – FOR OFFICE USE ONLY

| APPLICANT # | FEE | RECEIPT # | Date Received | Inspection Date | Registration Number |
|-------------|-----|-----------|---------------|-----------------|---------------------|
| | | | | | |

New, STATIONARY OPEN LESS THAN 24 HOURS: Pursuant to 18VAC150-20-200(A) & (B)(2) establishment open less than 24 hours must encompass all aspects of health care for small and/or large animals; on site surgical services; and licensed personnel are available during advertised hours of operation. Inspection and fee of \$300 required.

- Small Animal Only Large Animal Only Mixed
 Licensed personnel available during advertised hours of operation
Laboratory services: In-house or Outside services
Radiology/Imaging: In-house or Outside services
Hospitalization: Yes or No

Does the establishment operate mobile unit (s) from which veterinary services are provided (i.e. RV unit)? Yes No. If yes, how many units? _____
How many mobile units have surgery suites? _____

New, LIMITED STATIONARY: Pursuant to 18VAC150-20-200(A) & (C) establishment scope of practice is less than full service. Inspection and fee of \$300 required.

- Small Animal Only Large Animal Only Mixed
 Licensed personnel available during advertised hours of operation
Laboratory services: In-house or Outside services
Radiology/Imaging: In-house or Outside services
Hospitalization: Yes or No

Describe all limited services provided (i.e. general surgery, spay/neuter clinic; orthopedics; cardiology; dentistry; endocrinology; ophthalmology; dermatology; oncology, chiropractic; acupuncture; wellness/vaccine clinics; behavior modification; and/or physical therapy or rehabilitation):

Does the establishment operate mobile unit(s) from which veterinary services are provided (i.e. RV unit)? Yes No. If yes, how many units? _____
How many mobile units have surgery suites? _____

New, AMBULATORY AGRICULTURAL or EQUINE: Pursuant to 18VAC150-20-201(A) establishment is an ambulatory practice in which health care is performed at the location of the animal. Inspection and fee of \$300 required.

- Agricultural Only Equine Only Agricultural/Equine Mixed

New, AMBULATORY HOUSE CALL AND PROCEDURALIST: Pursuant to 18VAC150-20-201(B) establishment is an ambulatory practice in which health care of small animals is performed at the residence or owner or another establishment registered by the Board. Inspection and fee of \$300 required.

Is surgery a service provided (pursuant to 18VAC150-20-201(B)(1) surgery may only be performed in an inspected surgical suite)? Yes No

For Proceduralists, describe all services provided (i.e. euthanasia; hospice; dentistry; chiropractic; acupuncture; wellness/vaccinations; behavior modification; and/or physical therapy or rehabilitation):

New, AMBULATORY MOBILE SERVICE: Pursuant to 18VAC150-20-201(C) establishment is a veterinary clinic or hospital that can be moved from one location to another and from which veterinary services are provided. Inspection and fee of \$300 required.

How many units will be operated under this establishment registration? _____

How many mobile units have surgery suites? _____

Laboratory services: In-house or Outside services

Radiology/Imaging: In-house or Outside services

Hospitalization: Yes or No

CHANGE TO CURRENT SURGICAL SUITE: Pursuant to 18VAC150-20-180(A)(3), a reinspection is required for any addition or renovation of a stationary or ambulatory establishment that involves changes to the structure or composition of a surgery room; and pursuant to 18VAC150-20-201(B)(1), surgery may only be performed in an inspected surgical suite. Inspection and fee of \$300 required.

Adding a surgical suite(s)

Renovation of surgical suite(s)

CHANGE of LOCATION: Inspection and fee of \$300 required. Ambulatory mobile establishments are allowed change of location without an inspection, but change of address notification is required.

CHANGE OF NAME OF VETERINARY ESTABLISHMENT: No Inspection or fee.

Does this establishment replace one currently registered by the Board? If yes, what is the name and registration number?

YES

NO

ATTESTATION OF VETERINARIAN-IN-CHARGE:

I _____ agree to serve as the Veterinarian-in-Charge at the establishment name herein and assume the duties and responsibilities incumbent to the role as specified in the Regulations Governing the Practice of Veterinary Medicine (18VA150-20-10 et seq.) of the Virginia Board of Veterinary Medicine. By signing my name below, I acknowledge that I have read and understand the responsibilities of the Veterinarian-in-Charge and agree to perform those duties.

Name of Veterinarian-in-Charge

Signature of Veterinarian-in-Charge

Date