

## Program of Veterinary Care

### Kennel and Veterinarian Information.

A Program of Veterinary Care has been established between:

Kennel		Veterinarian	
Owner name:		Name:	
Kennel name:		Clinic name:	
License/Premises Identification Number:		License and Accreditation Number:	
Address:		Address:	
City, State, Zip code:		City, State, Zip code:	
Phone:	Email:	Phone:	Email:

### Definition of Veterinary Care.

**Veterinary care.** A kennel or kennel dealer must establish and maintain a program of disease control and prevention, euthanasia, and adequate veterinary care under the supervision of a licensed veterinarian. A written program of veterinarian care, signed and dated by the veterinarian and kennel manager, must be kept on file at the kennel and available for review by the Board upon request. The program of veterinary care must be reviewed by the kennel manager and veterinarian annually and updated as needed. The veterinarian must visit the facility as often as necessary to supervise the program, with a minimum of an annual visit. Sick or injured animals must receive veterinary care promptly. (*Minnesota Rule 1721.0520*)

### Signatures.

Kennel Manager (print name):	Signature:	Date:
Veterinarian (print name):	Signature:	Date:

### Veterinarian Visits.

<i>Date of Last Veterinarian Visit:</i>		<i>Next Scheduled Veterinarian Visit:</i>	
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**Disease Control and Prevention.**

**Physical examinations (select one)**

A licensed veterinarian is on site and examines animals upon intake.

Designated staff members examine animals upon intake (select one of the following two choices)

Animals are examined by a veterinarian within \_\_\_\_\_ hours.

Animals are examined by a veterinarian as needed.

Other.

*If "Other" was selected, please describe below:*

**Isolation Protocols:**

**Cleaning and disinfection**

Protocol:

Products:

Frequency:

**Parasite and Pest Control Program.**

Describe frequency of sampling/testing and treatment.

**Dogs**

Ectoparasites (fleas, ticks, mites, etc.)
Intestinal Parasites (roundworms, hookworms, tapeworms, etc.)
Blood Parasites (Heartworm, Lyme Disease, etc.)

**Cats:**

Ectoparasites (fleas, ticks, mites, etc.)
Intestinal Parasites (roundworms, hookworms, tapeworms, etc.)
Blood Parasites (Heartworm, Lyme Disease, etc.)

**Rodent Control**

Protocols:	Frequency:
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**Vaccination.**

Specify disease and frequency of vaccination.

**Dogs:**

Disease:	Schedule:	
	Juvenile:	Adult:
ADENOVIRUS-2		
BORDETELLA		
DISTEMPER		
HEPATITIS		
LEPTOSPIROSIS		
PARAINFLUENZA		
PARVOVIRUS		
RABIES		
OTHER (List below)	N/A	N/A

**Cats:**

Disease:	Schedule:	
	Juvenile:	Adult:
CALICIVIRUS		
HERPESVIRUS		
PANLEUKOPENIA		
RABIES		
OTHER (List below)	N/A	N/A

**Euthanasia.**

Specify protocol and method(s). The protocol for euthanasia must be in accordance with the *American Veterinary Medical Association (AVMA) Guidelines for the Euthanasia of Animals*.

Protocol:
Method(s) of Euthanasia:

*\* Minnesota Statute 1721.0520, Subpart 10: Upon a proper determination by a licensed veterinarian, an impounded or stray animal may be immediately euthanized if the animal is physically suffering and is beyond cure through reasonable care and treatment.*

**Emergency Care.**

Describe Provisions for care of animals presenting with emergent illness or injury)

Emergency Care Procedures/Protocols:
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*\*AVMA Companion Animal Care Guidelines: An emergency medical plan must be in place to provide appropriate and timely veterinary medical care for any animal who is injured, in distress, or showing signs of illness.*

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