

Veterinary Council of India

(Statutory body established under Indian Veterinary Council Act, 1984)



DRAFT COPY OF
Veterinary Council of India – Minimum Standards
of Veterinary Practice Regulations, 2016

INDEX

Sl.No.	PART No.	Regulation No.	CONTENTS	PAGE No.
1	PART-I		PRELIMINARY	3 to 7
2	PART-II		ACCREDITATION OF VETERINARY PRACTICE INSTITUTIONS	8 to 15
3		I	ACCREDITATION	
4		II	ACCREDITATION COMMITTEES	
5		III	POWERS OF THE STATE LEVEL AND CENTRAL ACCREDITATION COMMITTEES	
6		IV	APPEAL	
7		V	NORMS FOR VETERINARY PRACTICE	
8		VI	PERSONNEL	
9	PART-III		GUIDELINES FOR VETERINARY PRACTICE INSTITUTIONS	16 to 31
10		VII	GUIDELINES for Veterinary Dispensaries/Veterinary Hospitals/Veterinary Polyclinics/ Super Speciality Veterinary Hospitals/Veterinary Clinics for small animals/ Veterinary Hospitals for small animals/Super Speciality Hospitals for small animals	
11		VIII	GUIDELINES FOR THE ANIMAL DISEASE DIAGNOSTIC CENTERS/LABORATORIES	
12	PART-IV		GUIDELINES FOR VETERINARY SERVICE	32 to 37
13		IX	EVALUATION OF VETERINARY SERVICE ESTABLISHMENTS	
14		X	NOTIFICATION AND EPIDEMIOLOGICAL INFORMATION	
15	PART-V		CERTIFICATION PROCEDURES, MINOR VETERINARY SERVICES, GOOD VETERINARY PRACTICE AND ILLEGAL VETERINARY PRACTICE	38 to 45
16		XI	CERTIFICATION PROCEDURES	
17		XII	GOOD VETERINARY PRACTICE	
18		XIII	SUPERVISION AND DIRECTION OF MINOR VETERINARY SERVICES	
19		XIV	ILLEGAL PRACTICE OF VETERINARY MEDICINE	
20	PART-VI		MINIMUM STANDARDS FOR VETERINARY PRACTICE INSTITUTIONS	46 to 93
21		XV	GENERAL	
22		XVI	VETERINARY DISPENSARY	
23		XVII	VETERINARY HOSPITAL	
24		XVIII	VETERINARY POLYCLINIC	
25		XIX	SUPER SPECIALITY VETERINARY HOSPITAL	

26		XX	VETERINARY CLINIC FOR SMALL ANIMALS	
27		XXI	VETERINARY HOSPITAL FOR SMALL ANIMALS	
28		XXII	SUPER SPECIALITY HOSPITAL FOR SMALL ANIMALS	
29		XXIII	ANIMAL DISEASE DIAGNOSTIC CENTER	
30		XXIV	ANIMAL DISEASE DIAGNOSTIC LABORATORY	
31		XXV	EMERGENCY MOBILE VETERINARY SERVICE UNIT	

Veterinary Council of India
DRAFT COPY OF MINIMUM STANDARDS OF VETERINARY PRACTICE REGULATIONS, 2016

NOTIFICATION

New Delhi, the _____

GSR _____ In exercise of the powers conferred under preamble read with clause (n) of sub-section (2) of section 66 of the Indian Veterinary Council Act, 1984 (52 of 1984), the Veterinary Council of India, with the previous approval of the Central Government, hereby makes the following regulations namely Veterinary Council of India - Minimum Standards of Veterinary Practice - Regulations, 2016.

PART – I

PRELIMINARY

1.Short Title and Commencement:

(i). These regulations may be called the “Veterinary Council of India - Minimum Standards of Veterinary Practice - Regulations, 2016”. These regulations are part of the total set of regulations to be framed in a phased manner so as to include all the spheres of activities in which the services of veterinarians are required. The present regulations pertain to the veterinary services rendered by Registered Veterinary Practitioners in respect of disease diagnosis; medical, surgical, gynaecological treatment and reproductive aid to animals and animal production and management of animals.)

(ii). They shall come into force with immediate effect from the date of publication in the Official Gazette.

(a). '**Act**' means the Indian Veterinary Council Act, 1984 (52 of 1984).

(b). '**Animal**' means any animal other than humans and includes, but not limited to, fowl, fish, birds and reptiles, wild or domestic, living or dead.

(c). '**Animal Ambulance**' means a mode of transport by road/air/rail/water, equipped with facilities for providing emergency aid, which carries sick or injured animals safely to or from a veterinary dispensary, veterinary hospital, veterinary polyclinic, diagnostic centre.

(d). '**Animal Disease Diagnostic Center**' means an institution under the charge of Registered Veterinary Practitioner which receives animals for the purpose of diagnosis and has facilities of performing diagnostic tests that help in diagnosis of animal disease.

(e). '**Animal Disease Diagnostic Laboratory**' means an institution, established by an individual/co-operative/Non-Governmental organization/State or UT Government/any agency, under the charge of Registered Veterinary Practitioner which receives/collects samples of animals for the purpose of diagnosis and has facilities of performing tests that help in diagnosis of animal disease.

(f). '**Biomedical Waste**' is hazardous or aesthetically obnoxious waste that demand special attention to ensure safe disposal. Biomedical wastes include blood-soaked swabs and dressings, infected animal carcasses, soiled dressings, contaminated or infectious waste, pharmaceutical waste, cytotoxic waste, sharps, and syringes generated during examination, diagnosis and treatment.

(g). '**Client**' means and includes the owner of the patient or his/her representative who presents the patient(s) to a veterinarian and/or seeks his/her advice and treatment.

(h). '**Consultant**' is a Registered Veterinary Practitioner who provides veterinary services (treatment or professional advice) at a place on an occasion provided to him/her by any organization or by any Non-Governmental organization or by a State Government or by any Government agency or by a body Corporate or by his/her own establishment.

(i). '**Council**' means Veterinary Council of India established under Section 3 of Indian Veterinary Council Act, 1984.

(j). '**Emergency Mobile Veterinary Services**' means the services provided by the State/UT Government through a Central call-center with a toll free number for addressing the emergencies in animal health either by providing on site aid to the animal or lifting the animal from the site to nearest Veterinary Hospital/Veterinary Polyclinic/Super Speciality Veterinary Hospital for relief of the animal, as the case may be, under the supervision of a registered Veterinary Practitioner.

(k). '**Immediate Supervision**' means directing the Para veterinary staff/personnel when the supervising Registered Veterinary Practitioner, Para veterinary staff/personnel and Animal Patient are in audible and visual range for the treatment of the animal patient.

(l). '**Indirect Supervision**' means directing the Para veterinary staff/personnel, when the supervising Registered Veterinary Practitioner has completed initial examination of the animal patient and not present on the premises for the treatment of the animal patient.

(m). '**Illegal Veterinary Practice**' means the practice of Veterinary medicine by any person other than a registered Veterinary practitioner to any species of animal(s) in any one or all branches (by whatever name called) of Veterinary science in violation of Sections 57 (1), 30 (a) and 30 (c) of Indian Veterinary Council Act, 1984.

(n). **'Minor Veterinary Services'** means minor veterinary services rendered under the supervision and guidance of a registered Veterinary practitioner by a person trained for the purpose as prescribed under clause (b) of Section 30 of the Act.

(o). **"Mobile Veterinary Practice"** means providing a wide range of medical or surgical or gynaecological services to animals in a movable trailer, pick-up, or other vehicle on land or water or airship designed or modified to function as a veterinary facility.

(p). **'Para Veterinary staff/personnel'** means a person who is permitted to render minor veterinary services by a State Government by order issued by the Directorate of Animal Husbandry (by whatever name called) of such State as defined in Section 30 (b) of Indian Veterinary Council Act, 1984.

(q). **'Patient'** means and includes animal as defined in part I (2) (b) above or a group of them being treated or managed or advised to be treated or managed by registered Veterinary Practitioner(s).

(r). **'President'** means the President of the Veterinary Council of India elected under sub-section (4) of Section 3 of the Act.

(s). **'Quack'** means any person other than a Registered Veterinary Practitioner who pretends to be a Veterinarian and dispenses Veterinary medical advice and treatment.

(t). **'Regulation Committee'** means the Regulation Committee of the Veterinary Council of India constituted under sub-section (1) of Section 12 of the Act.

(u). **'Registered Veterinary Practitioner'** means a registered Veterinary practitioner as defined in Indian Veterinary Council Act, 1984.

(v). **'Regulations'** means the Regulations framed by Veterinary Council of India as per the provisions of the Indian Veterinary Council Act, 1984.

(w). **'Secretary'** means the Secretary of the Veterinary Council of India appointed under sub-section (1) of Section 11 of the Act.

(x). **'Specialist' means** any Registered Veterinary Practitioner who possess a minimum professional standing of 8 years in clinical practice with a M.V.Sc. qualification in any of the branches of Veterinary Science is considered to be a Specialist in that branch or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/ Veterinary Gynaecology/Reproductive technology/Animal Production.

(y). **'Super Specialist'** means any Registered Veterinary Practitioner who possess a minimum professional standing of 10 years with a M.V.Sc. and Phd or an equivalent to doctorate qualification in any of the branches of Veterinary Science is considered to be a Super-Specialist in that branch or who possesses a minimum professional

standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology/Animal Production.

(z). **'State/UT Veterinary Council'** means a Veterinary Council established under Section 32 and includes a Joint State Veterinary Council established in accordance with an agreement under Section 33.

(aa). **'Supervision'** means an action or instance of directing the para veterinary staff/ personnel either through written or oral instructions for the treatment of the Patient by the Registered Veterinary Practitioner after examination of the Patient either through 'Immediate Supervision' or 'indirect supervision.

(ab). **'Super Speciality Hospital for small animals'** means an institution, established by an individual/co-operative/Non-Governmental organization/State or UT Government/any agency, consisting of casualty/emergency services, I.C.U. facilities, out-patient & in-patient facilities, major & minor surgical facilities, full-fledged Diagnostic laboratory for small animals under the charge of a registered veterinary practitioner where the prescribed number of super-specialists provide diagnosis, treatment, surgical solutions, health care management and operates round the clock.

(ac). **'Super Speciality Veterinary Hospital'** means an institution consisting of casualty/emergency services, I.C.U. facilities, out-patient & in-patient facilities, major & minor surgical facilities, full-fledged Diagnostic laboratory, Post mortem facility , incinerator facility for small & large animals under the charge of a registered veterinary practitioner where the prescribed number of super-specialists provide diagnosis, treatment, surgical solutions, health care management, advise on veterinary clinical and production issues which operates round the clock.

(ad). **'Veterinarian'** means a person who practices veterinary medicine with a recognized degree included under Schedule-I & II of the Indian Veterinary Council Act, 1984 and registered with a State/UT Veterinary Council or Veterinary Council of India.

(ae). **'Veterinary Biological Institute'** means any Institute/establishment which produces vaccines/antigens/antibodies or any other preparations/kits intended for use in disease diagnosis, treatment, immunization of animals.

(af). **'Veterinary Clinic for small animals'** means an institution, established by an individual/co-operative/Non-Governmental organization/State or UT Government/any agency, where a registered veterinary practitioner renders services like prophylaxis, disease diagnosis, treatment or advice for animals on the request of a client including surgical procedures like spaying or neutering or suturing of wounds.

(ag). **'Veterinary Dispensary'** means a veterinary institution under the charge of a registered Veterinary practitioner for providing out-patient veterinary services related to veterinary practice.

(ah). **'Veterinary Hospital'** means an institution under the charge of a registered veterinary practitioner where veterinary services like out-patient & in-patient facilities, major & minor surgical facilities, limited diagnostic laboratory facilities for small and large animals are provided.

(ai). **'Veterinary Hospital for small animals'** means an institution, established by an individual/co-operative/Non-Governmental organization/State or UT Government/any agency, consisting of casualty/emergency services, out-patient & in-patient facilities, major & minor surgical facilities, full-fledged Diagnostic laboratory for small animals under the charge of a registered veterinary practitioner where the prescribed number of specialists gives diagnosis, health care, treatment or advises in various branches of veterinary medical service which operates round the clock.

(aj). **'Vetero-legal case'** means a case of injury or ailment or death of animal with legal implications and submitted to the Registered Veterinary Practitioner for the examination/conducting Post-mortem procedure and expert opinion by the investigation agencies of the State/Central Government.

(ak). **'Veterinary Polyclinic'** means an institution consisting of casualty/emergency services, out-patient & in-patient facilities for small & large animals, major & minor surgical facilities for small & large animals, full-fledged Diagnostic laboratory, Post mortem facility, incinerator facility, training facilities under the charge of a registered veterinary practitioner where the prescribed number of specialists gives diagnosis, health care, treatment or advises in various branches of veterinary medical service which operates round the clock.

(al). **"Veterinary Practice"** means the practice of Veterinary medicine by a registered Veterinary practitioner to any species of animals in any one or all branches (by whatever name called) of Veterinary science.

(am). **'Registered Veterinary Practitioner'** means a person holding a veterinary qualification recognized under the Indian Veterinary Council Act, 1984 and registered with a State/UT Veterinary Council.

(an). **'Veterinary Premises'** means any facility where the practice of veterinary medicine is undertaken, including, but not limited to, a mobile unit, mobile clinic, outpatient clinic, livestock farm with treatment facilities, satellite clinic, public service outreach of a veterinary facility, or veterinary hospital or dispensary or polyclinic or clinic. The term 'veterinary premises' shall not include the premises of a client.

(ao). **'Veterinary Practice Institution'** means any kind of institution under the charge of a registered veterinary practitioner which includes, but not limited to, Veterinary Dispensary, Veterinary Hospital, Veterinary Poly Clinic, Super Speciality Veterinary Hospital, Veterinary Clinic for small animals, Veterinary Hospital for small animals, Super Speciality Hospital for small animals, Veterinary Biological Institute/Research Institute, Animal Disease Diagnostic Center/Laboratory, Laboratory animal facility/house, Zoo/wild life Hospital, Veterinary research establishments.

(ap). **"Veterinary Service"** means an establishment of administrative nature established by any State/UT government or Non-Governmental organization or agency or body corporate or co-operative society or individual (s) to provide complete range of services in medical, surgical, gynaecological, biotechnological tools, animal nutrition, animal production, disease diagnosis, disease prevention &

control and all other branches of Veterinary science that alleviates pain & sufferings of animals or enhance animal & human life or prevent zoonosis or animal related activities for the development of the society through the registered veterinary practitioners and by the registered veterinary practitioners.

PART-II

ACCREDITATION OF VETERINARY PRACTICE INSTITUTIONS

I. Accreditation

1. Standards for veterinary practice have been established as a mechanism by which the profession can promote and maintain an excellent standard of practice in the treatment of animals. In setting standards for Veterinary Practice Institutions, these regulations serve to protect the best interests of clients, patients and the veterinary profession.
2. In order to provide Veterinary services in any Veterinary Practice Institution, the Head/In charge of such Veterinary Practice Institution should obtain accreditation from the Veterinary Council of India
3. Each and every '*Veterinary Practice Institution*' is required to declare that it fulfils all of the standards laid down by these regulations for each of the Veterinary Practice Institutions specified for.
4. On publication of these Regulations, for the purpose of accreditation of the Veterinary Practice Institutions, Head/in charge of the respective Veterinary Practice Institution shall submit the proposals in a prescribed format (Annexure-) along with prescribed fee to the State /UT Veterinary Council through the Director (by whatever name called) of State/UT Animal Husbandry and Veterinary Services. On receipt of proposals, State/UT Council may, through a State level Accreditation Committee, inspect the institutions for assessment of the physically available manpower, infrastructure, equipment, other facilities and the documents/record keeping in accordance with the standards laid down through these Regulations. After inspection of the institutions, State level Accreditation Committee will submit the inspection report in the prescribed format along with its recommendations to the State / UT Veterinary Council. The State/UT Veterinary Councils shall forward the received proposals from the Veterinary Practice Institutions along with the inspection report & the recommendations made by the State level Accreditation Committee and 1/4th share of the Fees realized for such purpose(s) to the Veterinary Council of India. After receipt of proposal from the State/UT Veterinary Council, Veterinary Council of India will grant accreditation/ recognition to the Veterinary Practice Institution based on the recommendations of Central Accreditation Committee. This entire process, from submitting proposals by the Head/in charge of the Veterinary Practice Institution to the granting of accreditation by Council, shall be through online procedure only for which Council will communicate suitable guidelines time to time.
5. In case of private clinic (s), such applications are to be received by the District Veterinary Officer (by whatever name called) in order to forward them provided in

the prescribed format by such Institutions to the State/UT Veterinary Council through the Director of Animal Husbandry and Veterinary Services.

6. In case the application is made for a particular/limited activity of the Institution, it should be specifically mentioned in the Application and in such case, accreditation shall be considered for that activity only.

7. The Veterinary Practice Institution must specify which of their premises (i.e. if it has more than one premises/branches) meet these regulations.

8. The applicant institution/authority/individual shall have to deposit the amount of fees (as fixed by Veterinary Council of India from time to time) to the State/UT Veterinary Council while making the application. Applications without the accompanying fees shall not be considered by the State/UT Veterinary Council.

9. The State/UT Veterinary Council may, then examine such applications and recommend (either without or after inspection as deemed fit) for provisional accreditation or accreditation or rejection.

10. The State/UT Veterinary Councils on examining each proposal carefully, may recommend for provisional accreditation of the institutions for the first instance and may prescribe certain time limit for strengthening them in a phased manner by the State Government within 3 years from the notification of these regulations. The time limit so given should not exceed 5 years under any circumstances and such a limit shall be a binding to the Animal Husbandry and Veterinary Services Department of the State/UT to fulfil all the standards as specified in these regulations. Upon fulfilment of the standards or completion of the time limit, whichever is earlier, the Director of A.H. and Veterinary Services of the State/UT shall submit a fresh application along with compliance report of fulfilment of the standards to the State/UT Veterinary Council for further consideration.

9. For the existing private veterinary clinics or other non-governmental Veterinary Practice Institutions, the time limit shall be maximum of two years. The procedures for fresh application in such cases will remain the same as in the case of Government institutions.

10. The Directors of Animal Husbandry and Veterinary Services (by whatever name called) of the States/UTs shall forward the proposals in prescribed format for accreditation of all the Veterinary Practice Institutions under their jurisdiction to the respective State/UT Veterinary Councils within one year from the date of notification of these Regulations.

11. State/UT Veterinary Councils shall submit the proposal along with inspection report of State Level Accreditation Committee and recommendation after due verification to the Veterinary Council of India within 90 days from the date of receipt of such proposal from the Directors of Animal Husbandry and Veterinary Services.

12. Veterinary Council of India shall grant provisional accreditation/accreditation or reject the proposal within 60 days from the date of receipt of such proposal from the State/UT Veterinary Council.

13. All the Units / Centres (by whatever name called), where minor veterinary services are provided under the charge of a para veterinary staff/personnel, shall be upgraded to Veterinary Dispensaries, i.e. as per the minimum standards specified for a Veterinary Dispensary in these regulations, in a phased manner by the State Government within 3 years of notification of these Regulations. The time limit so given should not exceed 5 years and such a limit shall be a binding to the Animal Husbandry and Veterinary Services Department (by whatever name called) of the State/UT to fulfil all the requirements as specified for a Veterinary Dispensary in these regulations. Upon fulfilment of the minimum standards as specified for a Veterinary Dispensary or completion of the time limit, whichever is earlier, the Director of Animal Husbandry and Veterinary Services (by whatever name called) of the State/UT shall submit application in the prescribed form to the respective State/UT Veterinary Councils for accreditation. If the State Government of the State/UT fails to upgrade such units to the standards specified for a Veterinary Dispensary within the maximum time limit of 5 years, such units deemed to be ceased to provide any kind of minor veterinary services and to be closed till the facilities are fulfilled as specified for a Veterinary Dispensary in these regulations.

14. The public must be notified about the nature of veterinary services being provided at the Veterinary Practice Institution by suitable means.

15. It shall be binding on the part of State/UT Government to provide/create all the necessary facilities as provided in these Regulations at the various Veterinary Practice Institutions under their jurisdiction failing which the provisional accreditation of such institution(s) shall be withdrawn.

16. The Head of the Institutions shall sign the 'Declaration of Compliance' every five years to maintain the minimum standards of such Institute. The accreditation which is to be renewed every five years will be subjected to the 'Declaration of Compliance'.

17. No Veterinary Practice Institution shall provide any kind of veterinary services without a valid accreditation granted by Veterinary Council of India after five years from the date of publication of these Regulations.

II. Accreditation Committees

1. On publication of these Regulations, for the purpose of accreditation of the Veterinary Practice Institutions, the State/UT Veterinary Councils shall constitute 'State Level Accreditation Committees' in their respective States/UTs and Veterinary Council of India shall constitute one 'Central Accreditation Committee' for each of the four (i.e. North, South, East and West) Regions.

2. North Region consists of Punjab, Haryana, Himachal Pradesh, Uttar Pradesh, Uttarakhand and Delhi States.

3. East Region consists of Bihar, Jharkhand, Orissa, West Bengal, Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland, Tripura and Sikkim States.

4. West Region consists of Maharashtra, Goa, Gujarat, Madhya Pradesh, and Chhattisgarh States.

5. South Region consists of Andhra Pradesh, Telangana, Karnataka, Tamilnadu, Kerala, Puducherry States and UT of Andaman Nicobar.

A. Central Accreditation Committee:

6. The Veterinary Council of India shall, on publication of these Regulations, constitute one 'Central Accreditation Committee' for each Region.

7. The provisions of VCI-General Regulations, 1991 shall be applicable to this 'Central Accreditation Committee'.

8. The Veterinary Council of India shall constitute 'Central Accreditation Committee' for each of the four Regions with the following members:

(i). President or Vice President of the Council - one – Chairman

(ii). Members of the Council – Three

(iii). Representative nominated by the Central Government to represent the Ministry dealing with the Department of Animal Husbandry, Dairying & Fisheries - One (Representative should be a registered veterinary practitioner)

(iv). The quorum of the Central Accreditation Committee shall be three out of five members.

(v). Secretary of the Council or any official of the Council designated by the Council shall attend each and every meeting of the 'Central Accreditation Committee of each Region to record and execute the minutes of the meeting.

B. State Level Accreditation Committee:

9. The State/UT Veterinary Councils shall on publication of these Regulations, constitute a State/UT level Accreditation Committee with the following members:

(i). President of the State/UT Veterinary Council – Chairman

(ii). Members of the State/UT Veterinary Council – Three

(iii). Representative nominated by the State Government, other than the officials of applicant Department i.e. Animal Husbandry Department, to represent the Ministry dealing with the State Department of Animal Husbandry - One (Representative should be a registered veterinary practitioner)

(iv). The quorum of the State level Accreditation Committee shall be three out of five members including the President of the State/UT Council.

(v). Registrar of the State/UT Veterinary Council shall attend each and every meeting of the 'State Level Accreditation Committee' to record and execute the minutes of the meeting.

III. Powers of the State Level and Central Accreditation Committees

1. The Veterinary Practice Institution shall submit a proposal for accreditation in the prescribed format and on payment of such fees as may be decided from time to time by the Veterinary Council of India, to the State/UT Veterinary Council through the Director of State Animal Husbandry and Veterinary Services.
2. The State/UT Veterinary Council shall get the proposal examined by the State Level Accreditation Committee.
3. The State/UT Veterinary Council then fix a date and time for the inspection under intimation to the proposer/Head/in-charge of the Veterinary Practice Institution. Such intimation should be sent not less than 2 weeks before the date of inspection.
4. The institution shall show all the facilities and all the required records/documents as mentioned in the duly filled formats for accreditation, to the inspecting team.
5. The committee members shall verify the authenticity of the information/documents provided with the available facilities including manpower, infrastructure, equipment, records etc., in accordance with Part-III, IV,V and VI of these Regulations.
6. The committee shall have all the powers and responsibilities to inspect all the veterinary Practice Institutions as deemed necessary or as directed by State/UT Veterinary Council or Veterinary Council of India.
7. No new Veterinary Practice Institution could start any of their activities without obtaining accreditation certificate from Veterinary Council of India. Already existing Veterinary Practice Institutions shall not continue their activities without submitting proposal for provisional accreditation/accreditation certificate from Veterinary Council of India beyond one year from the date of publication of these Regulations. The Veterinary Practice Institutions granted provisional accreditation by Veterinary Council of India with a rider clause to strengthen the facilities within certain time limit shall submit the compliance within the stipulated time along with the complete fulfilment of deficient facilities mentioned in the rider clause for obtaining regular accreditation from Veterinary Council of India or otherwise such Veterinary Practice Institution shall not continue the services after the time limit mentioned in the rider clause. The existing Centres/Units providing only Minor Veterinary Services shall not continue the services beyond five

years from the date of publication of these Regulations unless they got upgraded to Veterinary Dispensaries and obtained accreditation/ recognition from the Veterinary Council of India.

8. The Accreditation Committees of the Veterinary Council of India and State/UT Veterinary Council shall have powers to obtain original/certified copies in desired number of any of the documents from the proposer/in-charge of the Veterinary Practice Institution who has applied for accreditation or from the Director of the State Animal Husbandry and Veterinary Services, who has forwarded the proposal. However, such documents shall be the property of the State/UT Veterinary Council or Veterinary Council of India as the case may be, who shall keep in their safe custody without divulging any of the contents. The Veterinary Council of India, if deem necessary, may obtain any such documents/statements from the concerned State/UT Veterinary Council.
9. The Accreditation Committee of the State/UT Veterinary Council or Veterinary Council of India shall have authority to obtain any statement duly signed by any of the authorized/responsible personnel of the accredited institution.
10. In case it comes to the notice of the State/UT Veterinary Council that veterinary practice is being undertaken by any registered veterinary practitioner without accreditation of such Veterinary Practice Institution and without a valid certificate, the respective State/UT Council shall then verify the facts and initiate action against the practitioner (s) by directing the registered veterinary practitioner (s) to abstain from such activity and the local administration or State Government shall be informed accordingly. For this purpose, if necessary, the State/UT Veterinary Council may even inspect such a facility through its accreditation Committee. Such action by the State/UT Veterinary Councils shall immediately be brought to the notice of the Veterinary Council of India by the Registrar of the State/UT Veterinary Council.
11. Upon examination of the proposals of provisional accreditation/accreditation/ rejection along with the State level Accreditation Committee report and the recommendation of the State/UT Council signed by the Registrar and authenticated by the President to the Veterinary Council of India, the Secretary or any official designated by the Council, Veterinary Council of India shall cause to place such reports and recommendations before the Central Accreditation Committee of the respective Region with the approval of the President of the Council.
12. After verifying the State Level Accreditation Committee report and the recommendation of State/UT Council, Central Accreditation Committee of respective Region will convey its recommendation to the Council. Based on the recommendation of Central Accreditation Committee, the Veterinary Council of India will grant the provisional accreditation/ accreditation or reject the proposal. The Secretary, Veterinary Council of India will issue a certificate of provisional accreditation/accreditation in the format as prescribed at **Annexure-** . If, veterinary Council of India refuses to grant provisional accreditation/accreditation, refusal to issue a certificate will be intimated to the respective State/UT Veterinary Council with information to the Director of

- Animal Husbandry and Veterinary Services of the State/UT and concerned Veterinary Practice Institution, specifying the reasons for the same.
13. Provided, upon being so required, the State level Committee of the State/UT may reconsider the request for accreditation/licensing and take into account new/additional information as may be forwarded by the Director of State/UT Animal Husbandry and Veterinary Services. The State level Accreditation Committee shall submit its report and recommendations in the same manner as prescribed for the initial report.
 14. The State level accreditation committee on receiving information from the Veterinary Council of India shall have power to inspect and report about the Veterinary Practice Institution to review in case of improvement carried out as suggested.
 15. Every accredited Veterinary Practice Institution shall have to get renewed their accreditation every five years, upon submission of an application, Declaration of Compliance and fees as specified by Veterinary Council of India.
 16. The recommendations made by the Central accreditation committee shall be treated as final and the decision made thereof by the Veterinary Council of India related to provisional accreditation/accreditation/rejection will be binding on the party concerned and no part of it will be challenged in any court of law barring any provisions contained in the Constitution of India.
 17. The committee members shall be reimbursed for the contingencies, honorarium and travel expenses as per Government of India rules and regulations framed for such committees.

IV. Appeal

1. The Veterinary Council of India shall be the appellate authority for matters connected therewith and related thereto accreditation of Veterinary Practice Institutions in India. The Appeal shall be filed by the affected party within 30 days of the receipt of the reply to the proposal for Accreditation.
2. Save where otherwise expressly provided in the Indian Veterinary Council Act of 1984 or by any other law for the time being in force, an appeal shall lie to the Council against any adverse communication on the Accreditation of the Veterinary Practice Institution, by the aggrieved party within 60 days of such communication or against any order passed or against any complaint made for or against. The decision of the Council as Appellate Authority shall be final.
3. Veterinary Council of India shall take a decision on any Appeal within 90 days from the date of receipt of Appeal.
4. Where an Appeal has been admitted by the Council, the Appeal shall be decided in accordance with the opinion of the majority of the members present in that meeting.
5. Where there is no majority, the President of the Council shall have the right to cast vote.
6. In an Appeal, the memorandum filed by the aggrieved party shall be in prescribed format and the memorandum shall contain precisely the substantial points being challenged based on the information provided in the Application to the State Level Accreditation Committee. The Council may allow the aggrieved party to argue only on these points and no additional information/evidence or submission of new facts

will not be entertained, which were not brought to the notice of the State Level Accreditation Committee through their Application for accreditation.

7.The Council will have, however, power to summon an individual/expert/or organisation to appear before it or provide in writing any evidence/opinion for which it can take recourse to Newspapers publication too. The Council shall have power to get exhibited any document related to the point/order in question.

8.The Council shall have power to constitute a commission to examine any person, inspect any Veterinary Practice Institution or place of incidence.

9.The Council will have, however, no power to call any of the members of the accreditation committees to appear before it. However, they can be requested to give their opinion as and when required.

10.The Council shall have power to obtain evidence or statements on oaths.

11.The Veterinary Council of India will have powers to frame Guidelines appropriate enough for the smooth functioning and to provide working mechanism for the issues related to Good Veterinary Practice and accreditation of Veterinary Practice Institutions.

V. Norms for Veterinary Practice

1.Any accredited Veterinary Practice Institution providing veterinary services shall display, in local or acceptable language, the type of the unit indicating the nature of service being provided as defined in these regulations so that the public can request for the available service. The Veterinary Practice Institution shall be responsible for making available the necessary facilities by way of building/ infrastructure, equipment, manpower (qualified, trained and supporting personnel) and Medicines/ Biological products as prescribed for Good Veterinary Practice.

2.These regulations by no way make or intend to make it mandatory on any person or agency or Non-Governmental Organization or State/UT Government to undertake veterinary practice or prohibit them from doing so. But a person or an agency or Non-Governmental Organization or State/UT Government who undertakes the onus of providing veterinary services shall do so as prescribed in these Regulations and shall maintain a record of all such activities to be made available to the accreditation agency on demand.

3.Veterinary practice includes the responsibility to supervise and direct the Minor Veterinary services and every registered veterinary practitioner shall do so without any negligence on his/her part and as laid down in these Regulations.

4.While State/UT/Central Governments currently hold the responsibilities of Veterinary services, there is and shall be no bar on any agency, co-operative, Non-Government Organizations, and/or individual to provide any (aspect of) Veterinary services, provided that such veterinary practice (or part thereof) shall be performed consistent with the laws prevailing for the time being and as per the provisions of the Indian Veterinary Council Act, 1984 (52, of 1984) and the regulations made there under.

5.Veterinary Practice Institutions of other than the Government, involving themselves in veterinary practice can choose to provide the holistic primary veterinary service or a specialized service or a super-specialized service, provided

that registered veterinary practitioners with the prescribed professional standing, competence and qualification are to be engaged to perform such service.

6.The basics for regulating veterinary practice shall be "Good Veterinary Practice" (GVP). Guidelines on GVP, circulated by the Council for achieving an acceptable standard of Veterinary Practice shall be based on the presence of a holistic veterinary service delivery system in the Institution, State/Region/Country.

7.Prevention of animal diseases shall be done by registered veterinary practitioners and as per the rules and regulations regulating such activity and as adopted by the State/UT Government.

VI.Personnel

1.In-charge of any Veterinary Practice Institution shall be a Registered Veterinary Practitioner.

2.A high standard of professional conduct, cleanliness, and personal appearance must be maintained by all members of the Veterinary Practice Institutions at all times. It is mandatory to be in professional attire while providing services in the Veterinary Institution and the professional attire includes White apron with name & designation badge and shoes for the Registered Veterinary Practitioners; Navy Blue apron with name & designation badge and shoes for the Para Veterinary staff/personnel and Khaki colour apron with name & designation badge and shoes for the other supportive staff.

3.The Veterinary Practice Institutions must have, and implement, a written policy that provides for the ongoing professional development of its registered veterinary practitioners and para veterinary staff/personnel adequate to maintain a high standard of professional care. The Veterinary Practice Institutions should encourage the registered veterinary practitioners for regular consultations, attendance at conferences, seminars, and meetings of the relevant professional institutions/organization/society etc.

4.All para veterinary staff/personnel must be trained for the tasks performed by them. The para veterinary staff/personnel (by whatever name called) should obtain training from any Veterinary Institution recognized by the State/UT Government or shall be prepared to undergo required training at the earliest.

5.There must be sufficient trained para veterinary staff/personnel for proper care and observation of in-patient animals. There must be a dedicated trained para veterinary staff/personnel available at the time when animals are undergoing elective anaesthesia or any specialized procedures by a registered veterinary practitioner. At these times, they must not have other duties.

6.Direct supervision by the Registered Veterinary Practitioner:

Individuals not possessing recognized veterinary qualifications and not registered with Veterinary Council are prohibited from practicing veterinary medicine. Para Veterinary staff/personnel who are permitted to render Minor Veterinary Services shall not practice veterinary medicine which include treatment of animals by using schedule 'H' drugs, pregnancy diagnosis, Dystocia relief procedures, treatment of reproductive diseases or disorders, Major & minor surgeries including the suturing of

wounds, manipulation of fractures, embryo transfer, disease diagnosis or any other related services. But, they can administer the Schedule 'H' drugs for treatment of animals, administer medicines for the treatment of reproductive diseases or disorders in animals under the direct supervision of the Registered Veterinary Practitioner and can assist the Registered Veterinary Practitioner in dystocia relief procedures, Major & Minor surgeries, manipulation of fractures, disease diagnosis or any other related services as defined in Section 30 (b) of the Indian Veterinary Council Act, 1984. Direct supervision includes:

- (i). Registered veterinary practitioner must be available on the veterinary premises and/or should be readily available.
- (ii). Registered veterinary Practitioner shall complete examination of the animal for disease diagnosis before directing the Para Veterinary staff/personnel for administration of medicines/drugs.
- (iii). The registered veterinary practitioner must assume liability for the quality of any treatment or any veterinary service performed.
- (iv). The fee for services rendered, if any, shall be paid to the Registered Veterinary Practitioner or Veterinary institution providing the facility.

7. Veterinary Hospital, Veterinary Poly clinic, Super Speciality Veterinary Hospital, Super Speciality Hospital for small animals shall have stay arrangement with amenities in the Veterinary Practice Institution premises for the on duty staff.

8. All Veterinary Practice Institutions must have a library of essential reference books or a Reference Library in electronic form. This should include latest editions covering all of the major clinical and production disciplines of Veterinary Science. All the Veterinary Practice Institutes must subscribe to at least one current journal pertaining to their services

PART - III

GUIDELINES FOR THE VETERINARY PRACTICE INSTITUTIONS

VII. Guidelines for Veterinary Dispensaries/Veterinary Hospitals/Veterinary Polyclinics/ Super Speciality Veterinary Hospitals/Veterinary Clinics for small animals/ Veterinary Hospitals for small animals/Super Speciality Hospitals for small animals

A. GENERAL GUIDELINES

1. There must be a waiting room for clients that are of an adequate size and with sufficient seating for the workload of the Veterinary Practice Institutions. Allow a seating area sufficient for three people (owner of patient) per consulting veterinarian.
2. There must be at least one consulting room that provides a clean and hygienic environment for consultation in private. The room must have running tap water. There must be an examination table, the surface of which is impervious and able to

be cleaned and disinfected easily. Sufficient diagnostic equipment to carry out routine physical examinations of the patients should be available. Examination rooms should be equipped with a suitable ventilation system or an exhaust facility to remove offensive odours rapidly. There must be a covered area/space with Travis for examination of large animals.

3. There must be an operating room that is used solely for carrying out sterile surgical procedures. Specifically, this room must not be used for dental work (other than that required to have aseptic conditions) or abscess drainage. This must be air conditioned and equipped with adjustable table and suitable surgical lighting. Surgical instruments, drapes, and surgeon's clothing must be provided that is suitable for the types of operations performed.

4. A legible system (facility) of documenting the records of all the case histories of all the current patients must be provided. There must be an efficient system for filing and retrieving patient records either through offline or online and in the form of hard copies or soft copies.

5. There must be separate room(s) for the accommodation of patients. The number of cages/rooms must commensurate with the workload of the clinics. The cages/room must be of an adequate size for the animal to be housed. The cages/rooms must be of safe construction and maintained in a hygienic condition. There must be solid partitions between cages. Cages must not be able to drain waste into adjoining cages. The cage room(s) must be well ventilated and maintained at a comfortable temperature. There must be facilities for storage of food and for the cleaning and storage of utensils and food bowls. The wall and floor surfaces of cages must be impervious to permit thorough cleaning and disinfection.

6. Seating facility for client(s) of an in-patient animals must be made available within the premises.

7. There must be a written Standard operating procedures (SOP) for dealing with infectious cases. This guideline must ensure that any other animals being treated at the veterinary premises are not exposed to increased risk of infection. The guideline must specify where the infectious cases will be examined and treated, and the method of disinfection used afterwards. Either facilities for the isolation of infectious cases must be provided which are separate and remote from the other animals or where accommodation is not available, a written guideline for dealing with such cases must be formulated or written confirmation of the ability to refer such cases to another clinic with correct isolation facilities must be implemented. All Accredited Veterinary Practice Institutions containing the isolation wards for infectious cases must have the same standard of cages as described in (5) above.

8. The floors of all of the rooms used for client waiting, the dark room, examination, treatment, surgery, or animal accommodation must have an impervious surface or walls with scrub-able (with disinfectants) ceramic tiled surfaces to the height of 1.5 meters above the floor to allow effective cleaning and disinfection.

9. The inside of the premises must be maintained to a high standard, kept clean, eliminate offensive odours and in good decorative order as far as possible. The outside of the building must be maintained in a good state. The immediate area surrounding the building must be kept clean and tidy. There should be car parking available for clients, with easy access to the main entrance of the premises.

10. All premises, where veterinary service (including its various branches of Veterinary Science) is being practiced, and all instruments, equipment, apparatus and apparel used in connection with those practices, shall be kept clean and sanitized and shall conform to the standards specified for different types of facilities.

11. Emergency service either by staff veterinarians or by pre-arranged referral to another veterinarian within a reasonable distance shall be provided at all times. Referral must be acknowledged and agreed upon by both the referring and referred veterinarians.

12. Ambulatory services specifically for large animals may be made available at the Veterinary Hospitals, Veterinary polyclinics, Super Speciality Veterinary Hospitals and Ambulatory services specifically for small animals at the Veterinary Hospitals for small animals and Super Speciality Hospital for small animals and such services shall be available round the clock.

13. Post-Mortem examination of animals shall not be allowed in open places or fields or in any other premises except in the Post-Mortem Halls at the Veterinary Hospitals/Veterinary Polyclinics/Super Speciality Veterinary Hospitals, where proper facilities for conducting Post-Mortem and disposal of cadavers are available.

14. Post-Mortem examination and Incinerator facilities for disposal of cadavers to prevent spread of pathogens should be set up in the Veterinary Hospitals, Veterinary Polyclinics and Super Speciality Veterinary Hospitals.

15. Pet care accessories can be displayed for retail sale, provided that the display is of an acceptably professional nature. The shop area must be clean and tidy, and well organised. Merchandising signs and displays must not contain misleading messages. Toxic and hazardous drug/chemicals must be displayed according to the requirements of the Drug and Cosmetics Act, 1941 and Rules framed thereunder. Taxation policy of the State/Central Government will apply for the retail sales. Merchandising should, however, not be encouraged in the Government Veterinary Practice Institutions which are primarily meant for public services.

B. MEDICAL RECORDS

1. Medical records serve as a basis for planning patient care and promote communication among members of the hospital staff. The records furnish documentary evidence of the patient's illness, hospital care, and treatment and serve as a basis of review, study, and evaluation of medical care rendered by the hospital. As per Sub-section (d) of Section 30 of Indian Veterinary Council Act, 1984 "A veterinarian is entitled to give evidence at an inquest or any court of law as an expert" whereupon the medical records are of vital importance.

2. Medical records shall communicate all valuable information and must be legible. Single uniform identification number for a patient must be used through all departments on all records/reports (such as radiographs, ultra sound scanning

reports, CT scan reports, disease diagnostic laboratory reports, and necropsy records etc.,).

3. Medical records must be kept for a specific time period as per regulations (usually up to 5 years) of the State/UT Government. Medical record of any patient (out-patient/in-patient) must contain the following or as applicable:

- i. Serial number & date
- ii. Patient Information
- iii. Client Information
- iv. Physical examination information
- v. Vaccination record
- vi. Medical record including Laboratory examination records (diagnostic tests/scanning reports/ECG reports/Biopsy reports/Necropsy reports etc., (if any)
- vii. Complete record of medical/surgical/reproductive treatment undergone at that Institution
- viii. Record of Health care management
- ix. Discharge summary for in-patient cases

C. EXAMINATION FACILITIES

1. Examination facilities are necessary for the complete physical examination of patients. History taking, general/specific physical examination, vaccination, out-patient therapy, minor procedures and client education are often intended functions of an examination room.

2. The in-charge of the Veterinary Practice Institution must see that the Standard Operating Procedures for the various services are evolved for the Institution.

3. The in-charge of the Veterinary Practice Institution must see that the Standard Operating Procedures are followed scrupulously by the staff of the Institution for which all the staff have to be provided orientation on regular basis.

4. Provision of Computer and peripherals with internet connectivity and relevant software for analysing the previous health status of the patient

5. Provision of Examination table with a readily sanitized fluid-impervious clean surface, all the instruments/equipment/materials required for physical examination/vaccination/out-patient therapy/minor procedures

6. Provision of Cleaning materials, disinfectants, clean/disposable towels/gauze and a waste receptacle.

7. Provision for hand washing between each patient.

8. Provision of sanitizing the Examination table between each patient.

9. Provision of a radiograph viewer in the examination room.

D. EQUIPMENT

1. Various equipment and veterinary service aids in use at the Veterinary Practice Institution(s) shall conform to the highest standards. Proper hygiene and sanitary measures have to be practiced to avoid any contamination/infection during its use on the patient (livestock/animal). Equipment requiring sterilization should be sterilized before use.
2. Instruments and equipment requiring periodic maintenance must be serviced and calibrated at intervals as recommended by the manufacturer. Maintenance records must be kept.
3. Registered Veterinary Practitioners must be trained in handling, maintaining and utilizing the various instruments and equipment.
4. Sterilization of instruments, gowns and drapes in sufficient quantities to meet the workload of the practice shall be done as per the Standard Operating Procedure.
5. Boiling, cold sterilization and ultraviolet cabinets are not acceptable unless for specific equipment such as cold sterilization of endoscopic equipment. Sterility indicators must be used to monitor the efficiency of the system. Instruments must be cleaned and re-sterilized prior to use for each new surgical case.
6. Face masks, gloves and suitable protection gears for staff using oral or surgical or gynaecological or microbiological procedures or any other procedures involving infections must be sterilized.
7. Facilities for proper storage of instruments and equipment should be provided.

E. LABORATORY

1. Laboratory Diagnosis services are necessary for the proper diagnosis and treatment of many cases. Whether the procedures are performed within or outside the hospital will be determined by the services available, economics, proximity of the hospital to outside laboratories and qualifications of such laboratories to handle animal samples. When an outside laboratory is used, except for histopathological services, result of life-dependent procedures should be available within 12 hours following sample collections. Results for periodic health monitoring, geriatric examinations, histopathology, and other tests of this nature should be timely. The choice of procedures used with any particular patient is a professional decision.
2. Guidelines for diagnostic laboratories/Animal disease diagnostic centers/Laboratories must be as per the Part-III and VI of these Regulations.

F. DIAGNOSTIC IMAGING/X-RAY/ULTRA SOUND SCANNING/CT SCANNING/MRI

1. The hospital must have the capacity to generate quality radiographic and other images as is considered necessary from time to time on the premises. Diagnostic

imaging exists to aid in the accurate diagnosis and evaluation of medical and surgical problems and to assist in determining an appropriate course of management.

2. Radiographic and imaging equipment must be operated only by the persons aware of all hazards, actual and potential, to themselves, assisting personnel, patients, and other nearby individuals in order to eliminate or reduce hazards to minimum acceptable levels.

3. It is desirable to have a separate room devoted to radiography. The protective barrier effect of the walls and doors should be such that adjacent occupied areas would not receive radiation above recommended levels.

4. Radiation safety procedures must be in compliance with all safety regulations.

5. Lead aprons and gloves must be used during exposure.

6. Radio-opaque character must be used to identify right (R) and left (L) sides of the patient. Permanent identification of each image is required additionally, client's name and patient description should be included.

7. Other imaging technics such as Diagnostic Ultrasonography, Doppler scanning, CT scanning and MRI scanning should be taken up in separate rooms. The technicians handling these machines should follow the safety procedures as per the safety regulations.

8. Records of the results must be maintained indefinitely and Images of patients must be identified properly and filed for easy location and retrieval. Because these images are an element of the medical record, they must also be retained.

9. Hospital personnel must be made aware of the medical and legal importance of proper image identification and of organized storage of these imaging records.

G. ANAESTHESIA

1. Standards:

i. Anaesthesia service must include performance of routine pre-anaesthetic examinations and exercise of proper safeguards in selection and use of anaesthetics. Although the type of anaesthesia for each procedure is left to the discretion of the attending veterinarian, the continued study, evaluation, and use of newer and safer anaesthetic agents and equipment is recommended.

ii. Anaesthesia service must include performance of routine pre-anaesthetic examinations and exercise of proper safeguards in selection and use of anaesthetics.

iii. Anaesthetic agents must be administered by veterinarian or by persons trained in their administration and then only under supervision of a veterinarian who must be on the premises. Administration must be in compliance with regulations.

iv. It is the direct responsibility of the hospital i/c to provide support staff anaesthetic safety and training programs and ensure supervision of the programs.

v. Some method of respiratory monitoring must be used such as observing chest movements, watching the re-breathing bag, or use of a respirator monitor.

vi. If endotracheal tubes are used, they must remain in place during anaesthesia until appropriate protective reflexes have returned.

vii. In the events of cardiac arrest, standard procedures for cardiac resuscitation should be followed using drugs and equipment to be found in an emergency cabinet, or on an emergency tray. Doses and dosages should be printed on all emergency drugs or be readily available in chart form.

2. Equipment:

- i. All equipment needed for the administration of local and general anaesthesia must be readily available and in good functioning order.
- ii. The anaesthetic areas must have emergency lighting available.
- iii. The anaesthetic area must contain the following:-
 - a. Pre-anaesthetic agents
 - b. Induction anaesthetic agents for intravenous administration
 - c. Anaesthetic and pre-anaesthetic antagonists, as appropriate
 - d. Appropriately sized endotracheal tubes and tube adapters
 - e. Antiseptic agent for venepuncture preparation
 - f. Sterilized needles and syringes
 - g. A stethoscope
 - h. A machine for the administration of gaseous anaesthesia that includes a canister containing a fresh agent to absorb carbon dioxide.
 - i. Gaseous agent for the induction and maintenance of general anaesthesia
 - j. An oxygen source and a device for administration of the oxygen
 - k. A gas scavenging system that complies with safety regulations.
 - l. A re-breathing bag or similar device for monitoring respiration.
 - m. A multi para vital monitor
- iv. Support equipment
 - a. Emergency medications and equipment required in the event of a cardiac arrest (may be located in the operating room) must be available.
 - b. Intravenous catheters, administration sets, intravenous fluids and/ or other cardiovascular support medications (plasma expanders fluids) must be readily available.
- v. Some means of assisting ventilation must be readily available during general anaesthesia, either manual or mechanical.

3. Structure:

- i. The facility must contain an area for the administration of general anaesthesia.
- ii. A recovery area outside the operating room or a recovery room where the patient can be observed closely until appropriate protective reflexes have returned must be available. Observation should occur at frequent intervals until the patient is in sternal recumbency.

H. SURGERY

1. For the purpose of convenience of categorization of surgical interventions, the following definitions can be used:

- (i). Surgery - The act of incising living tissue an operative procedure; and/or in a room or facility where an operative procedures done(i.e. the operating room).

- (ii). Aseptic Surgery – Surgery performed in ways or by means sufficiently free of microorganisms so that significant infection or suppuration does not occur
- (iii). Minor Surgery - Any surgical intervention that neither penetrates and exposes a body cavity or bone nor produces permanent impairment of physical or physiologic functions, Example are superficial wound suturing and cutaneous biopsy.
- (iv). Major Surgery – Any surgical intervention that penetrates and exposes the body cavity or bone; and procedure that has the potential for producing permanent physical or physiological impairment; and/ or any procedure associated with extensive transaction or dissection of tissue.

2. Standards:

i. Preparation of Patient:

- a. A standard, accepted procedure must be used to prepare the patient for surgery.
- b. All personnel assisting in the pre-surgical preparation of the patient must be aware of the danger and sources of bacterial contamination. They must be adequately trained and under the direct supervision of a veterinarian consistent with law.

ii. Surgical Attire:

- a. The Veterinary Surgeon and the other surgical assistants must be properly attired with cap, mask, sterile gown, and sterile gloves when major surgery is performed.
- b. Surgeons, surgical assistants, and operating room attendants must wear a surgical cap and mask at all times while in the surgical suite and when a sterile field exists therein. All scalp and facial hair must be completely covered by the cap and mask. Operating room attendants should remain outside of the sterile field. The sterile field is the area above the sterile drapes on the operating table and adjacent instrument trays. The sterile field extends from the edges of these drapes in a vertical plane to the ceiling.

iii. Sterility:

- a. Surgical procedures require the use of sterilized instrument, gowns, towels, drapes, and gloves as well as clean caps and masks.
- b. A regular maintenance program for autoclaves and other sterilizing equipment must be instituted. Employee training must be adequate for the proper operation of the equipment and awareness of any malfunction that may occur. In large animal surgery where gloves are not used, extra precaution needs to be taken for scrubbing.
- c. When gas or steam sterilization procedures are used, sterility indicators must be in evidence on the exterior surface of each unit.
- d. When large surgical bundles (gowns, drapes, instrument plucks) are sterilized, monitors that verify appropriate steam temperature and time must be used in the centre of each pack. Steam must penetrate every fibre of the material sufficient to kill both spore-forming and non-spore-forming bacteria. However, penetration of steam into large surgical bundles will be slower, so at least 30 minutes must be allowed for sterilization

- e. When a pressure cooker is used for sterilisation, packs will be moist upon removal and drying must be completed immediately in an oven.
 - f. The drapes, laparotomy sheets, towels, gauze sponges, suture materials, and gowns to be sterilized must be properly wrapped. The contents of the bundles must be in good repair, cleaned or laundered, dried, wrapped and sterilized.
 - g. Surgical packs must be dated. If not used, packs must be re-autoclaved every 30 days. Shelf life may be extended by using alternative wraps i.e. double wrap, steripeel, and dust covers.
 - h. Latex rubber gloves must be prepared for re-sterilisation by sorting them into pairs by sizes, testing for holes, and dusting inside and outside with powdered starch preparation. They then must be autoclaved after being placed in a suitable pack. The usual time for processing is only 15 minutes at 15 pounds pressure; but sterility must be verified by a monitor placed within each pack if the pouch does not have a self-indicator. The surgeon must remove excess power from the glove surface at the beginning of a surgical procedures
- iv. Steam under pressure is best for sterilisation of gowns, gloves, towels, laparotomy sheets, and gauze sponges. Any autoclave type apparatus equipped with a pressure gauge must maintain steam at a pressure high enough and for a period long enough to kill all bacteria and their spores.
 - v. Brushes used for scrubbing surgeon's hands must be thoroughly washed and sterilized. Reusable caps and masks should be laundered after each day's use.
 - vi. Equipment that must be present in the operation theatre:
 - a) Surgical light of adequate candle power to illuminate the surgical field, preferably the type of lamp which is completely enclosed to avoid dust accumulation.
 - b) Instrument table(s) constructed of impervious material
 - c) Surgical table(s) constructed of impervious material.
 - d) Intravenous fluid hanger(s).
 - e) A gas anaesthetic machine capable of being able to provide respiratory assistance with a vaporizer's compatible with the agent(s) used.
 - f) A bucket receptacle of impervious material (kick/bucket), preferably mobile.
 - g) A unit for supply of oxygen
 - h) Suction pump
 - i) Battery-operated or alternate power supply emergency lighting.
 - j) Adequate drugs for emergency used readily available in an accessible emergency box or designated place (may be located in the anaesthetic induction area).

vii. Proper venting of all excess anaesthetic waste gases must be provided in accordance with the regulations by the State/Central Government.

viii. Surgical instrumentation must be properly cleaned, in good repair, and sufficient in number and variety to match the requirements of the surgical case load.

3. Infrastructure:

i. Surgical Preparation Room:

Primary preparation must be performed outside the operating room. The preparation room should be a separate room convenient to the operating room and well lit. Floors, walls, and counter tops should be smooth, impervious material which is easily cleaned.

ii. Operating Room:

- a. The operating room must be a separate, closed, single-purpose room for the performance of only aseptic surgical procedures.
- b. An aseptic surgical suite can be located anywhere in the hospital provided it is convenient to the recovery rooms and the preparatory room. It must be out of traffic areas.
- c. The operating room must be so constructed and equipped that cleanliness can be easily maintained.
- d. Flooring must be of an impervious material.
- e. Walls must be of a washable, impervious material.
- f. Doors must be well fitted and should be wide enough to permit passage of patients.
- g. Doors must be kept closed and traffic into the surgical suite kept to a minimum. A viewing window will reduce the need for support personnel to open the door to see into the room.

I. IN-PATIENT CARE

1. In-patient care must include the provisions of diagnostic, pre-surgical, surgical, and recovery procedures as well as limited custodial care (where relevant).
2. All the patient care provided by the para veterinary staff/personnel must be under the supervision of a veterinarian.
3. All patients must be positively and properly identified (sufficient to differentiate between two like animals) during their hospital stay.
4. Each medication must be entered on the patient's medical record showing date, name of drug, type, dose, route of administration (when more than one route is acceptable), and frequency of administration.
5. The care taking staff must demonstrate humane care of animals. The facility must prevent animal abuse or neglect of patients.
6. Care taking staff must ensure that all animals are individually housed.
8. Care taking staff must be trained to know to record the parameters advised by the Veterinarian time to time and to ensure patient's comfort and cleanliness.

9. Care taking staff must be trained in the proper restraint and compassionate handling of the patients.
10. Care taking staff must be trained in the principles of contagious in-patient care i.e. Proper hand washing between patients is considered to be the most effective way to prevent cross-contamination and also trained in providing therapeutic bathing and dipping.
11. Care taking staff shall remove the faecal/dung waste and sanitize the premises promptly
12. The Care taking staff must be familiar with the proper handling and disposal of all waste materials and the cleaning and disinfection of compartments, exercise areas, and runs.

J. VACCINATION

1. Vaccines must be used in conjunction with National/ Regional/ State/ District/ local disease control or eradication program. For vaccination of individual animal on the request of the owner, the decision about the justification of such vaccination shall depend on the registered veterinary practitioner.
2. Vaccination shall be done under the supervision of the registered veterinary practitioners who have been requested by the animal owner for providing medical/surgical assistance/consultation and has complete knowledge of past and present history of the client's animal. He /she must have taken the client into confidence before undertaking a vaccination.
3. Revaccination recommendations should be designed to maintain clinically relevant immunity while minimizing adverse event potential. Additional information, including vaccine-specific scientific data on minimum, average, and maximum duration of immunity is desired to craft optimal revaccination frequency recommendations.
4. Vaccines, including polyvalent products, should be selected to include only those antigens appropriate for the specific risk needs of the patient, thereby eliminating unnecessary immune system stimulation and lowering potential risks of adverse events.
5. Multiple dose vaccine vials must be carefully managed to minimize the potential for delivering inappropriate levels of antigen or adjuvant and to optimize the potential for maximum potency of the antigens present and minimize the opportunity for contamination with extraneous microbes or chemicals.
6. Veterinarians should consider creating a core vaccine program, intended for use in the majority of animals in their jurisdiction/practice area.
7. Information about the benefits and risks of vaccination shall be provided to the owner(s) to enable him/her to make a decision about individual vaccine selection and vaccination program choices.
8. There may be a more developed, scientifically based, and statistically valid evaluation of vaccine products to provide practitioners with a basis for developing vaccination programs that maximize benefits and minimize associated risks for the patients under their care.

9. Proper cold chain for all types of vaccine should be ensured by the veterinary institution and Veterinarian for the benefit of the end users.

K. ANIMAL HOLDING AREAS

1. There are no specific ward requirements, however, all animal holding areas must be secure, escape-proof and easily cleaned.
2. Runs and exercise areas must be available, maintainable, secure, escape-proof, and adequate in relation to the normal case load.
3. If cages and rooms are provided, they must be large enough to be comfortable for any size patients admitted to the facility.
4. All cages and rooms must be comfortable to animals and easy to keep clean.
5. All runs/floors should be sloped and individually drained to prevent cross-contamination. If drained by a common trough, the trough must be covered.

L. PHARMACY

Facilities must be provided for storage, safekeeping, and use of drugs in accordance with regulations. Norms be prepared for internal use or dispensing. Internal controls should be in effect for substances that can be abused (by simple norms).

1. The hospital in-charge of the Veterinary Practice Institution is responsible for maintenance of the pharmacy and required to maintain records of controlled substances.
2. The drugs must be stored in the locked cabinet but not stored in the store of drugs to which it applies.
3. Adequate quantities of drugs and supplies must be available at all times. The hospital in-charge must ensure that all outdated drugs are returned or disposed off, in accordance with set norms.
5. When dispensing medication read the label, name and date of expiry, (if appropriate); include warning labels, if appropriate.
6. Each label must have recorded thereon (a) Client's name, (b) Patient's name, (c) date (d) name of the drug, usage directions including route of administration (f) Quantity dispensed; Hospital's name and address and phone number; Name of the veterinarian prescribing the drug.
7. Use a child-resistant container where needed.
8. Drugs must only be dispensed or administered on the order of a Veterinarian.
9. Drugs used exclusively in euthanasia procedures must be stored in a locked cabinet. It is recommended that these agents be identified and segregated.
10. Each dose of any medication administered, dispensed or prescribed must be recorded on the medical records, including usage directions, quantity and number of refills (could be a counterfoil of label).
11. Telephone calls, oral instructions on which changes made in medications or dosages also may be recorded on the patient's chart or record.
12. If clients bring their own medications to the hospital these drugs must not be administered unless they can be identified. Orders to administer these

medications must be given by the veterinarian in charge. Drugs which are not to be used should be stored and returned to the client upon the discharge of the animal from the hospital.

13. Hazardous medications (e.g. chemotherapeutic medications) must be handled in accordance with drug regulations enforced from time to time.
14. Storage of drugs must not allow for any cross-contamination, but it should permit all preparations to be found readily and easily.
15. The container of the drugs being dispensed must in no casual way be changed.
16. Each pharmacy must contain at least one reference text or compendium of pharmaceuticals which is current (within 3 years) and provides the necessary information on drugs, chemicals and biological in use within the hospital or dispensed for use by the client.
17. Current antidote information must be readily available for emergency reference in addition to the telephone number of the nearest toxicologist.
18. Staff education about adverse reactions and contraindications for the use of all drug, chemicals, and biological used within the hospital is encouraged.
19. The client should be made aware of possible adverse drug reactions and the proper procedure to follow if problems should occur.

M. HOUSEKEEPING AND MAINTENANCE

1. Standard:

i. The house keeping goal is to maintain an environment that is safe for the patients, clients, and employees. This programme must provide maximum disease control throughout the hospital.

Housekeeping Plan:

- a. there must be a written housekeeping and maintenance program (a check list at a minimum) for establishing and maintaining a safe, sanitary, functional, and pleasant environment for clients, patients, and employees.
 - b. The planning, administration and development of a written comprehensive housekeeping plan (Standard Operating Procedure for cleaning, sterilization and disinfection) is the responsibility of the housekeeping supervisor.
 - c. The implementation of the written comprehensive housekeeping plan must be aware of the written housekeeping program and practice standards.
- ii. Personnel responsible for the supervision of housekeeping must have a basic knowledge of health care and sanitation, including the principles of bacteriology, chemistry and related sciences and they apply to diseases control and prevention.
 - iii. All cleaning supplies must be used in accordance with bio-safety regulations.
 - iv. Furnishings must be properly maintained and conveniently arranged in order to be pleasing to the client and conducive to the patient's comfort.
 - v. All fixtures, furnishings, and equipment must be maintained, free from excessive wear and good repair.

- vi. Linens must be stored in such a way as to minimize contamination from surface contact or airborne sources.
- vii. Soiled or contaminated linens must be handled in such a way as to prevent cross contamination of other areas of the hospital.
- viii. Faucets and drains must be inspected regularly and maintained in proper working order.
- ix. Compressed gas tank valves, regulators, lines, and washers must be checked periodically for leakage.
- x. Mechanical systems, throughout the hospital must be maintained in accordance with written preventive maintenance programs.

- xi. Bio-medical Waste Disposal
 - a. Bio-medical Waste disposal must be carried out in accordance with good public health practice and biomedical waste disposal rules.
 - b. Deceased animals not disposed of within 24 hours must be sealed safely.

- xii. Recommended Building Exterior
 - a. Grounds surrounding an animal hospital must be neat, attractive and in safe condition at all times
 - b. Lawns, flowers, and plantings must be regularly cut, watered, and trimmed.
 - c. Rubbish, papers and faecal material from animals must be picked up from lawns, sidewalks, and parking areas on a daily schedule.
 - d. Signs must be of a professional appearance and in good repair, and lighting must be in good taste and useful in identifying the facility.

2. Equipment:

- i. The hospital must be equipped to operate under safe and sanitary conditions.
- ii. An adequate supply of clean or disposable lines and supplies must be available and in good repair.
- iii. Tools and materials for simple building maintenance and repair must be available.
- iv. All hospitals must provide adequate emergency lighting. The hospital's battery-operated lights or alternate power source must be maintained on a regular basis. If flashlights are used, they also must be maintained on a regular basis.
- v. Appropriate fire extinguishers must be readily available and maintained in accordance with the regulations State/Central Government.

3. Structure:

- i. Ventilation and heating system equipment must be installed in accordance with appropriate standards. (if used)
- ii. The ventilation system must ensure that a fresh air supply is provided in critical areas, such as the surgical suite, preparation areas, Intensive care units and ward areas.

N. CONTINUING VETERINARY EDUCATION

1. Every Veterinarian has to undergo at least 50 hours of training in any one of the approved training courses/Institutes before renewing the Registration with State/UT Veterinary Council or Veterinary Council of India.

2. A professional library consisting of basic textbooks, current periodicals in Veterinary Science and a facility with internet access to different professional web sites must be provided.

3. Continuing veterinary education requirements must be met as per the need of the veterinary practice and Veterinarians' oath.

O. EMERGENCY SERVICES

1. Emergency services (professional diagnosis and emergency treatment) must be provided and must be readily available at all times in the Veterinary Practice Institutions under the charge of a Registered Veterinary Practitioner.

2. Every accredited Veterinary Practice Institution must have a procedure by which a sick or injured animal may be assessed and either treated or referred to a nearby Veterinary Hospital or Veterinary Polyclinic or Super Speciality Veterinary Hospital.

3. Emergency services or referral services to an appropriate facility must be available round the clock.

4. Emergency service must be adequate to ensure the treatment of the patient within a reasonable period of time.

5. When a patient is transferred to a referral hospital, a copy or summary of the medical record must accompany the patient.

VIII. GUIDELINES FOR THE ANIMAL DISEASE DIAGNOSTIC CENTERS/LABORATORIES

A. GENERAL

1. Veterinary Institutions like Veterinary Hospitals/Veterinary Polyclinics/Super Speciality Veterinary Hospitals/Veterinary Hospitals for small animals/Super Speciality Hospital for small animals must provide or have access to veterinary diagnostic laboratory services that perform routine clinical pathology, bacteriology, virology, parasitology, feed & fodder analysis, water analysis and toxicological tests, rapidly and accurately. They must have adequate qualified staff and should also act as collection centres.

2. Where samples are submitted to an outside laboratory for testing, they must be collected, stored, packaged, and dispatched in a manner which:

- a) ensures the safety of people in contact with the samples and
- b) minimise sample deterioration to ensure the best test result.

3. Where diagnostic tests are performed by the Veterinary Hospital/Animal Disease Diagnostic Center itself:

a) any diagnostic test other than routine urine and blood smear examination must be conducted in room or designated area used specifically for that purpose and which is kept clean and organised.

b) Quantities of stain, reagents, chemicals, diagnostic kits adequate for the number of animal patients/samples shall be provided.

c) Registered veterinary practitioners are engaged for diagnosis/interpretation. Each such facility shall specify the tests they conduct and shall maintain a record of the sample profile and results in each case. They shall also declare the methods they used (in each case) for various diagnostic tests and the normal values while providing the results. Each result shall be signed by the registered veterinarian concerned along with her/ his name and registration number appearing conspicuously.

d) Veterinarians and staff must have an understanding of the principles of quality control as it relates to all diagnostic testing conducted by the institution/Animal Disease Diagnostic Center. controls should be used to ensure accurate results. Records of quality control programmes must be kept (stored). These should demonstrate that periodic evaluations are made of equipment, reagents, and technical integrity.

e) protective clothing and disposable gloves must be provided and shall have the facility for restraint of animals and for collection of material.

f) the clinic must maintain diagnostic equipment to a high standard that ensures accurate results are obtained consistently.

g) The Diagnostic Center should have a well-ventilated room preferably with walls, work table and laboratory furniture that can be easily sanitized/disinfected. It shall have regular water supply, electricity and waste disposal facility. The Diagnostic Center shall have rooms/areas where animals can be handled with minimal stress on them.

h) it is recommended that any diagnostic service provider should be able to provide a minimum of diagnostic laboratory services themselves like Skin scrapings, faecal sample examination, routine semen function test, cytology, urine analysis, urine sediments, and routine Haematological tests.

- i) Biopsy, if necessary, shall normally be performed in a room provided for the purpose and shall be conducted under proper analgesia prescribed only by a veterinarian.
- j) there must be provision for proper disposal of Bio-medical waste.
 - iii. Animal Disease Diagnostic Laboratory may be established independently or attached to a Veterinary Polyclinic/Super Speciality Veterinary Hospital/Veterinary Hospital for small animals/Super Speciality Hospital for small animals.
 - iv. The laboratory shall not be in the same building housing the post mortem and incinerator facilities and shall be at a considerable distance and well protected to avoid contamination.
 - v. The Laboratory should have an attached inoculation room/shed, staff room and wash room.
 - vi. The diagnostic laboratory shall have facility for microbiology, pathology, parasitology, feed & fodder analysis and clinical bio-chemistry procedures leading to diagnosis of disease/surveillance.
 - vii. The laboratory staff may opine on the samples received from prevailing field problems and should refer the unsolved problems, if the laboratory does not have proper equipment or chemicals or technique, to the State Disease Diagnostic laboratory or University or Regional or Reference laboratories as may deemed fit for confirmatory diagnosis/interpretation.
 - viii. All samples while referred should be properly labelled to indicate the species, identification number of the patient and client details, the type of sample (tissue/organ etc), method of preservation, test to be carried out etc.
 - ix. No sample shall be referred to any agency/laboratory/individual outside India for diagnosis without prior approval of the State/Central Government Animal Husbandry authorities.

B. STANDARD OPERATIVE PROCEDURE

1. The standard procedures laid down in the relevant scientific books/documents etc. should be followed for handling each type of sample in the laboratory. Simultaneously, every care should be taken to avoid spread of infection either to humans or to other animals. Further, whenever there is a need, the staff of the diagnostic laboratory can also collect the appropriate materials as suggested/ required by the Veterinarian.
2. The results of the tests should be communicated without delay, so that the results can be efficiently used by the veterinarian.
3. At the end of every day the results along with patient ID number, Client details etc. may be entered/ recorded in the computer with relevant software so that the results can be accessible to all.
4. The results of laboratory tests and the trend of various etiological agents may be discussed periodically (preferably at the end of every month) with the field Veterinarians to appraise them of the type of organisms, their antibiotic/drug

sensitivity in that area. The diagnostic laboratory may also draw macro epidemiological maps to make treatment more effective.

5. The diagnostic Laboratory shall depute/ send its staff to various workshops/ meetings/seminars and to participate in such related forum where exchange of information can influence to achieve better service delivery and preparation of effective National programmes.
6. Any diagnostic laboratory run by an organization, Institution, Non-Governmental organization or individual(s) may also participate in the discussion of results or shall send information on the tests, which they conduct, every month to the District veterinary officer and In-charge of Veterinary polyclinic of the state/ UT concerned. Such information shall form part of the epidemiological data generated in the district.
7. Standard established procedures for sampling should be followed in all the cases without causing undue stress or damage to the animal or danger to the owner.
8. Proper disposal of Bio-medical waste should be done.

PART -IV

GUIDELINES FOR VETERINARY SERVICE

IX. EVALUATION OF VETERINARY SERVICE ESTABLISHMENTS

A. GENERAL

1.The quality of the Veterinary Service depends on a set of factors, which include fundamental principles of an ethical, organisational and technical nature. The Veterinary Service shall conform to these fundamental principles, regardless of the political, economic or social situation. The Veterinary Council of India (Standards of Professional Conduct, Etiquette and Code of Ethics for veterinary professionals) Regulations, 1992 as amended from time to time shall be the basis of ethical practice.

2.It is necessary that these fundamental principles are complied by the Veterinary Service to establish and maintain confidence for a veterinary certificate issued by a State veterinary service to be acceptable by the Veterinary Services of other States.The same fundamental principles should apply to the organization(s) other than veterinary service who are establishing and applying animal health measures and issuing various certificates.

3.Fundamental principles of quality: -

The Veterinary Service shall comply with the following principles to ensure the quality of their activities:

- a) The officials of Veterinary Service should have the relevant qualifications, scientific expertise and experience to give them the competence to make sound professional judgments. - **Professional judgment**

b).Care shall be taken to ensure that Veterinary Services' staff are free from any commercial, financial, hierarchical, political or other pressures which might affect their judgment or decisions - ***Independence***

c)The Veterinary Service shall be impartial. In particular, all the parties affected by their activities have a right to expect their services to be delivered under reasonable and non-discriminatory conditions - ***Impartiality***

d) The Veterinary Service will make an endeavour to see that the work of each of their officials is of a consistently high level of integrity. Any fraud, corruption or falsification by the officials shall be identified and efforts will be made to correct them by the veterinary service. - ***Integrity***

e) The Veterinary Service shall at all times act in an objective, transparent and non-discriminatory manner – ***Objectivity***

B. ORGANIZATION

1. The Veterinary Service must be able to demonstrate by means of an appropriate legislation or order or gazette notification that they are in a position to have administrative control of the establishment and powers to apply animal health measures, and of veterinary certification activities. The veterinary service shall define and document the structure responsibilities of the organisations engaged in animal identification, control of animal movements, animal disease control and its reporting, epidemiological surveillance and in communication of epidemiological information and animal welfare.

2. A similar demonstration as above should be made by Veterinary Service when they are in charge of veterinary public health activities.

3. The responsibility, power and jurisdiction of the personnel's in each position, having an impact on the quality of veterinary services shall be described within the Veterinary Service. 4.The job descriptions shall include the requirements for education, training, technical knowledge and required experience of veterinary personnel.

C. PROCEDURES AND STANDARDS

1. The Veterinary Service shall develop and document appropriate standards and procedures for the implementation and management of animal health measures as and when required and periodically reviewed and revised. These procedures and standards may be evolved and drafted as per the requirements relate to:

a. programming and management of daily/monthly/quarterly/half-yearly/yearly activities.

b. prevention and control of disease outbreaks.

c. epidemiological surveillance and zoning.

d. inspection and sampling techniques.

e. diagnostic tests for animal diseases.

f. preparation, production and control of biological products for use in the diagnosis or prevention of diseases.

- g. disinfection and de-ticking.
- h. treatment intended to destroy, if appropriate, pathogens in animal products.
- i. programming the production parameters of animals with regard to Meat, Milk and Eggs.
- j. cost economics involved in Meat, Milk and Eggs production under different housing types, feeding practices for different breeds and their market demand in the respective State
- k. proper disposal of cadavers in case of natural or un-natural deaths of animals

2. The Veterinary Service shall develop a uniform on-line software program suitable for the respective State to integrate and to execute the above procedures & standards rendered at all the Veterinary Practice Institutions under its control.

D. INFORMATION, COMPLAINTS AND APPEALS

1. The Veterinary Administration shall undertake to reply to legitimate requests from Veterinary Administrations of other States or any other authority, in particular ensuring that any requests for information, complaints or appeals that they may present are dealt with in a timely manner.

2. A record shall be maintained of all complaints and appeals and of the relevant action taken by the Veterinary Service. Complaints and Disciplinary action on complaints as per Standards of Professional conduct, etiquette and code of ethics for veterinary practitioners, 1992 regulations.

3. Documentation - The Veterinary Service shall have at their disposal a reliable and up to date documentation system suited to their activities.

4. Self-evaluation - The Veterinary Service should undertake periodical self-evaluation especially by documenting achievements against goals, and demonstrating the efficiency of their organisational components and resource adequacy.

(e) Communication - Veterinary Service should have effective internal and external systems of communication covering administrative and technical staff levels and parties affected by their activities.

E. Safety Procedures to be adopted by the Veterinary Practice

1. It must be the established policy of all Veterinary Services' to do all that is necessary to ensure the health, safety, and welfare of all of its members, employees and clients. To meet this end, veterinary practice must adopt policies related to matters of health and safety compatible with the guidelines issued for the purpose by respective branches of veterinary profession.

2. Personnel working in the Veterinary Service should receive annual updates and additional training when procedures or policy changes.

3. The Heads of Veterinary Services' shall have a responsibility to:
 - a. provide and maintain a safe working environment.
 - b. provide and maintain facilities for the safety and health of all staff at work.
 - c. ensure that staff are not exposed to hazards in the course of their work.
 - d. ensure that the equipment in the work place is designed, set up, and maintained to be safe for the users.
 - e. the inherent emergency procedures pertaining to the respective field of veterinary procedure should be followed.
 - d. provide free immunization as per the standard protocol to all the staff against the zoonotic diseases.
4. Each Veterinary Service must establish the following management systems:
 - a) All Veterinary Practice Institutions under their control must have a written general guideline on health and safety that reflects a positive commitment to protecting people in the work place. The guidelines must be easily understood, be visible, and form the basis for the development of rules and safety procedures for various location providing veterinary services.
 - b) Separate rules must be drawn up and displayed for each area of the Veterinary Practice Institution (Veterinary Dispensaries/ Veterinary Hospitals/ Veterinary polyclinics/Super Speciality Veterinary Hospitals/Veterinary Clinics for small animals/Veterinary Hospitals for small animals/ Super Speciality Hospitals for small animals) such as waiting room, pharmacy, laboratory, treatment room for anaesthesia and radiography, isolation wards, Post-mortem Hall/Incinerator hall, etc. These must cover general and specific aspects of health and safety that relate to potential hazards that may occur in those areas. The general rules at Veterinary Practice Institutions must cover cleanliness, tidiness, restraint of animals, first aid boxes, and fire rules/guidelines. Specific rules must cover relevant protective clothing and equipment, proper use of equipment, handling of drugs, poisons, waste, and chemicals. Specific precaution against zoonotic disease should be displayed.
 - c) The practice must identify and assess all hazards, and appropriate controls must be developed to protect people from these. Hazards must be monitored in the work place. Staff may need to be personally monitored for their exposure to particular hazards. The work environment must be periodically re-evaluated for new or changed hazards, and safety standards upgraded accordingly.
 - d) Each Veterinary Institute must have a written, effective, general emergency plan to cope with all types of emergency likely to occur in any part of the clinic. This plan should cover what detection and alarm systems are needed, what emergency equipment is required and its positioning, the development and display of evacuation plans, emergency services required, and staff responsibilities in an emergency.
 - e) Each Veterinary Institute must record and report all occupational illnesses and accidents. (as specified in guidelines-to be prepared) to the concerned authority.
 - f) Any Poisons or Harmful Substances as defined in Drug & Cosmetic Act, 1940 & Veterinary Pharmacopoeia must not be stored on or above, or in any cupboard or place where food, drink, or medicines are stored or displayed.

- g) Any Standard Poisons or Harmful Substance as defined in the relevant Act and Veterinary Pharmacopoeia should be label properly and displayed and must be kept at a higher place (more than 1.5 metres above the floor).
- h) All veterinarians must be immunized against the risk of infectious diseases of zoonotic importance.
- i) Any other safety procedure promulgated by the state and/or Central Government related to Veterinary practice or delivery, from time to time shall be binding on all Veterinary Services’.

F. Bio-medical Waste Disposal

1.The Veterinary Service must provide all the facilities for hygienic storage of waste prior to disposal and proper disposal mechanism/system with required aids/material to all the Veterinary Practice Institutions under its control.

2. The Veterinary Service shall evolve Standard Operating Procedure for disposal of Bio-medical Waste and following measures to be taken while preparing the SOP:

i. Bio-medical Waste must be segregated depending on whether it is of the General or Special category. This must not create an offensive appearance or allow the development of bad odours. Special waste may need to be refrigerated prior to collection.

ii.General waste (non-infectious waste, packaging materials, non-infectious animal bedding, etc) can be disposed of by Local Authority through landfill, recycling or incineration.

iii.Special wastes include anatomical waste, blood-soaked swabs and dressings, infected animal carcasses, soiled dressings, contaminated or infectious waste from examination, treatment, and kennel rooms, pharmaceutical waste, cytotoxic waste, sharps, and syringes. Special wastes (other than sharps) must be bagged in Polythene bags (with a minimum thickness of 50 microns if of low density and 25 microns if of high density). Cytotoxic wastes are to be placed into coloured cytotoxic waste containers with Eye-catching colours used for the label. Also representative colours for different waste should be used where a professional medical waste service is available to the Veterinary Practice Institution, it must be used to collect and incinerate special waste. Where there is no such service available, special waste must be disposed of in the same way that the Veterinary Practice Institution disposes of cadavers. Eco-friendly waste disposal should be practiced with help of trained person.

(The Biomedical wastes (management and handling) Rules, 1995 issued under Environmental (Protection) Act, 1984 may be followed).

iv.Sharp waste poses a potential hazard because of the risk of injury. They must be placed directly into approved containers. They must be stored in non-reusable, leak-proof, and puncture-proof containers with an aperture that must inhibit removal of the contents.

v. The Veterinary Service must provide facilities for Post-Mortem at Veterinary Hospitals/ Veterinary Polyclinics/Super Speciality Veterinary Hospitals and shall not allow Post-Mortem in open places or fields or any other places/Veterinary Practice Institutions.

vi. The Veterinary Service must provide facilities for the hygienic storage of cadavers. The disposal of dead animals must give the client no cause for complaint and cause no public offence or nuisance or community Health problems. They may be incinerated in a suitable crematorium or burial in a manner which meets the approval of the local authority in case of natural or un-natural deaths of animals.

G. Record Keeping

1. The Veterinary Service shall evolve online mechanism for maintenance of Records in all the Veterinary Practice Institutions under its control and accordingly, shall draft a Standard Operating Procedure.

2. While preparing the SOP, it should see that

A. every veterinarian involved in a veterinarian-client-patient relationship and performing any act on any animal or group of animals in his or her custody or in custody of an animal hospital, shall prepare a legible, written, individual (or group) animal and client record concerning the animal(s), containing the following information:

i. Name, address, and phone number of the client.

ii. Name or identity of animal(s), including species, breed, age, sex, weight, colour and other relevant information.

iii. The medical record.

The medical record shall contain:

(a) A history of pertinent information as it pertains to the animal's medical status.

(b) Notation of the physical examination findings.

(c) Treatment or intended treatment plans, or both, including medications, medication strengths (when available in more than one strength) and amounts administered, dispensed, or prescribed and frequency of use as well as route of administration, including those medications used for sedation, induction, and maintenance of anaesthesia.

(d) Data and interpretation(s) of diagnostic procedures including, but not limited to, radiographs, laboratory, ultrasound, ECG, CT scan.

(e) A diagnosis or tentative diagnosis.

(f) When pertinent, a prognosis.

(g) Progress notes and disposition of the case.

(h) Dates (beginning and ending) of custody of the animal with daily notations.

(i) In the case of vaccination clinics, a certificate, including the information required by (i) and (ii) above may serve as the medical record.

(j) Name and digital signature/initials of the veterinarian responsible for entries.

(k) Names and digital signatures/initials of all ancillary and authorized individuals responsible for entries.

(l) Records for surgical procedures that include a description of the procedure, surgical findings when pertinent, and response to or recovery from anaesthesia.

(m) Group records are acceptable for herds, flocks, or litters of animals that lack individual identification by name or that include a number of individuals to which the same medical record applies. Records shall contain the requirements listed in (ii) and (iii) of above.

B. All records shall be the property of the veterinary facility or Practice institution that created such records and shall be kept for a minimum of three years after the visit by the patient.

C. Copies of records/reports and radiographs or a summary of records will be made available within a reasonable time upon the client's request.

X. NOTIFICATION AND EPIDEMIOLOGICAL INFORMATION

1. All notifications and all information sent by the Central Government to the States shall be regarded as having been sent to the State concerned and action and steps be initiated by all the registered veterinary practitioners to implement them as directed by the State Director of Animal Husbandry and Veterinary Services.

2. All efforts including furnishing of disease related information should be made to minimize the spread of important animal diseases and to assist in achieving National/regional control of these diseases.

3. States shall be responsible to comply with the specified notification requirements about the control and spread of animal diseases and provide information on the measures taken to prevent the spread of diseases as and when required by the Central Government.

4. States shall send following to the Central Government:

i. notification by the earliest mode of communication (fax or e-mail) within 24 hours, of any of the following events:

a) for List A diseases, (as defined by Office International des Epizooties), the first occurrence or re-occurrence of a disease, if the State was previously considered to be free from that particular disease;

b) important new findings which are of epidemiological significance to other states;

ii. monthly reports on the absence or presence and evolution of diseases in List A, and findings of epidemiological importance to other states with respect to diseases which are not in List A;

iii. annual reports on all diseases considered to be of socio- economic importance or of major veterinary interest.

iv. the Veterinary Administration of a State in which an infected zone (district) was identified shall inform the Central Government when this zone/State is free from the disease.

v. a State/District shall be considered to have infection for a particular disease until a period exceeding the infective period has elapsed after the last reported case, and when full prophylactic and appropriate animal health measures have been applied to prevent possible reappearance or spread of the disease.

PART -IV

CERTIFICATION PROCEDURES, MINOR VETERINARY SERVICES AND GOOD VETERINARY PRACTICE

XI.CERTIFICATION PROCEDURES

1. Certification should be based on the highest possible ethical standards, the most important of which is that the professional integrity of the certifying veterinarian must be respected and safeguarded.
2. It is essential not to include in the certification requirements additional specific matters which cannot be accurately and honestly signed by a veterinarian. For example, these requirements should not include certification of an area as being free from non-notifiable diseases, the occurrence of which the signing veterinarian is not necessarily informed about.
3. Certification for events which will take place after the document is signed and when these events are not under the direct control and supervision of the signing veterinarian is not acceptable.
4. Certification is not acceptable in case of freedom from diseases based on purely clinical examination and herd history is of limited value and also with the diseases for which there is no specific diagnostic test, or the value of the test as a diagnostic aid is limited.
5. Guidelines for issue of Certificates :
 - i.All certificates should contain the Name, complete address (office/work place), e-mail ID, contact number, State/UT Council Registration number, Designation of the issuing Veterinarian.
 - ii.All the certificates shall contain a File number denoting the serial number of the Certificate, year of issue, date of issue and Dispatch number.
 - iii. Issuing authority/Veterinarian must make suitable entries of all the Certificates issued by him/her serial number-wise, date-wise in a separate Register.
 - iv. Paper certificates should be pre-printed, if possible on one sheet of paper and issued by the Veterinary Administration on officially headed notepaper and, if possible, using printing techniques which prevent forgery. Electronic certification procedures should include equivalent safeguards.
 - v. Certificates should be written in terms that are as simple, unambiguous and easy to understand, without losing their legal meaning.

- vi. If so required, certificates should be written in the language understood by the certifying veterinarian.
- vii. Certificates should include appropriate identification of animals and animal products except where this is impractical (e.g. day-old chicks).
- viii. A veterinarian should not be required to certify matters that are outside his/her knowledge or which he/she cannot ascertain and verify.
- ix. Where appropriate, the veterinarian, by order enquire, test or examine animal, bird or animal product before the certificate is signed.
- x. The text should not be amended except by deletions which must be signed and stamped by the certifying veterinarian. The signature and stamp must be in a colour different to that of the printing of the certificate.
- xi. Certificates should be signed by the veterinarian after due consideration of the event. They should not sign blank or incomplete certificates, or certificates relating to animals or animal products which are not under their control.
- xii. Certifying veterinarians should ensure before signing that certificates have been completed fully and correctly and that no part of it is left blank. Where a certificate is signed on the basis of supporting documentation, the certifying veterinarian should be in possession of that document before signing.
- xiii. A veterinarian should not certify the animals or animal products on the matters that are outside his purview or control or jurisdiction or authority.
- xiv. Electronic certification should carry the same information as conventional certificates. But, the Veterinary Administration must have in place systems for the security of electronic certificates against access by unauthorised persons or organizations and the certifying veterinarian must be officially responsible for the secure use of his/her electronic signature.

6. Issuing veterinarian shall be liable for the truthfulness of the contents of the Certificate.
7. For any kind of false claims in the Certificate, issuing veterinarian shall be liable.
8. Certifying the animals or animal products on the matters that are outside the purview or control or jurisdiction or authority may attract punishment.

XII. GOOD VETERINARY PRACTICE

1. Essential element of Good Veterinary Practice is "write what you do and do what you write". It shall be the duty of a registered Veterinary practitioner to make note of all his actions (in professional service delivery). She/ he will act similarly while directing and supervising minor Veterinary services.

2. Each Registered Veterinary Practitioner shall display his registration number along with his/her name on the nameplate, visiting card (if any), prescription, veterinary medical reports, sample dispatch records or any such or similar professional records/reports which are written and submitted by him/her.

3. A Registered Veterinary Practitioner must show extreme compassion towards animal patients and must seek to ensure the health and welfare of animals, committed to their care and to fulfil their professional responsibilities, by maintaining the following basic principles of practice:

A. Veterinarian and Animal interaction:

Registered Veterinary Practitioner:

- i. Must show extreme compassion towards animal patients
- ii. Should exercise due diligence, care and skill to provide adequate, appropriate and timely treatment to the patients.
- iii. Should provide or arrange to provide first aid and emergency care to animals presented at the veterinary premises.
- iv. Should conduct a complete and thorough physical examination of the patient or reasonable number of animals if presented as a group for the diagnosis.
- v. Perform or advise to perform laboratory procedures (haematology, urinalysis, radiography, Histo-Pathology Examination etc.,) to aid in diagnosis as per discretion.
- vi. Prescribe and dispense medicines judiciously.
- vii. Should refer cases responsibly to another Veterinary Institute or Veterinarian when the patient condition needs better care and facilities for diagnosis and treatment.

B. Veterinarian and Client interaction:

Registered Veterinary Practitioner:

- i. must be open and honest to the clients and respect their requirement and need, taking care to provide appropriate information about the disease, diagnostic procedures to be followed, line of treatment, cost involved and prognosis in simple vernacular language.
- ii. should deal with clients in a courteous manner.
- iii. should provide impartial and independent advice.
- iv. must keep accurate client and patient clinical records.
- v. must inform and take informed consent from the client before performing complicated procedures.
- vi. should give clear instructions regarding the care & management of patients and medication.
- vii. should provide the client with information on where to obtain veterinary service in his or her absence.

C. Veterinarian and Public interaction:

Registered Veterinary Practitioner:

- i. must ensure the impact of his/her actions on the environment and the public health in protection of animal health and welfare.
- ii. must certify facts and opinions ensuring due diligence and utmost care keeping with the relevant governing laws and rules.
- iii. must try and maintain a cordial relationship with the public at large.

- iv. should not render any services or advice that will deceive or betray the public.
- v. must be a harbinger of knowledge and impart scientific knowledge, attitude and skill to everyone whom he or she come across ,as and when the occasion and space permits.

D. Veterinarian's relationship with Peers and Team:

Registered Veterinary Practitioner:

- i. must work together with others in a veterinary team to co-ordinate the care of animals and the delivery of services.
- ii. must ensure that tasks are delegated only to those who have the appropriate competence.
- iii. must not impede other professional colleagues complying with the laws and rules.
- iv. should never make any attempt, directly or indirectly, to adversely influence the sound professional judgment of another veterinarian.

E. Ethical Professional Practice:

Registered Veterinary Practitioner:

- i. should renew their Registration with the State/UT Veterinary Council or Veterinary Council of India before expiry of the validity.
- ii. should practice maintaining the highest plane of honesty, integrity and fairness.
- iii. should handover the legibly written prescription to the client after treatment in case of out-patients and a detailed dis-charge summary sheet along with the treatment/ Medical record in case of in-patients.
- iv. should not issue a health certificate/certificate of veterinary inspection for any Livestock or Livestock products without physical inspection & appropriate tests and outside his/her purview or control or jurisdiction or authority.
- v. should treat all animals entrusted to them in keeping with extreme compassion and high degree of professional standards of humane care and treatment.
- vi. should not prescribe/dispense drugs indiscriminately without the knowledge of therapeutic indications.
- vii. should be readily available for emergency coverage, for follow-up evaluations in the event of adverse reactions or in the failure of the treatment regimen.
- viii. should update his or her knowledge and skill through constantly referring scientific literature and attending continuing veterinary education programmes.
- ix. if a consultant, shall display his/ her registration number of State/UT Veterinary Council or Veterinary Council of India along with his/ her name and announce the nature of practice, time of practice etc. conspicuously.

- He/ she shall display any fee and/ or other charges for the service(s), conspicuously for the clients to read and understand.
- x. has no restriction to render any treatment, medication or advice in any branch of veterinary science and shall always use his/her veterinary medical skill and knowledge for the benefit of any animal requiring their attention. But professional ethics demand that he/she normally do not indulge in such activity or specialized/ super-specialized services unless he/she acquire the necessary qualification, professional standing and skills to do so.
 - xi. should report to the concerned authority in case of a suspected incident of animal cruelty, as per the law in force.
 - xii. should not indulge in any unethical practice against the Standard of Professional Conduct Etiquette and Code of Ethics for Veterinary Practitioners Regulations, 1992

XIII.SUPERVISION AND DIRECTION OF MINOR VETERINARY SERVICES

1. Every registered Veterinary Practitioner shall record the Name, Mobile Number of all the persons undertaking or carrying out minor Veterinary services under his/her supervision and direction as provided under section 30(b) and shall exhibit the same along with the place or occasion such activities are carried out conspicuously where the public can see/ read it.

2.A registered Veterinary practitioner for supervision and direction of minor Veterinary services, he/ she shall examine the Patient initially and then either through written or oral instructions he/she can direct the Para Veterinary Personnel for dispensing the medicines towards the treatment of Patient. After, examination of the Patient, further supervision of minor veterinary services can be done either in his/her presence or absence at the Veterinary Institute. In an area or institution where there are more than one registered veterinary practitioners in attendance, such supervision and guidance shall be shared among them as assigned/ agreed upon. Practicing of Veterinary medicine which include treatment of animals by using schedule 'H' drugs; Pregnancy Diagnosis; Dystocia relief procedures; treating reproductive diseases or disorders; Major & Minor surgeries including suturing of wounds; Manipulation of fractures; disease diagnosis or any other related veterinary services are not considered as Minor Veterinary Services.

3.A Para Veterinary staff/personnel may render the following minor veterinary services under the 'indirect supervision' of a Veterinarian, if the animal is anesthetized, these tasks shall require the Immediate supervision of a veterinarian:

- a. Teeth cleaning.
- b. Enemas.
- c. Application of bandages.
- d. Catheterization of the unobstructed bladder and inserting indwelling catheter.
- fe Gavage.
- f. Ear flush. h. Surgical site preparation.
- g. Diagnostic imaging:

- i. Patient preparation and positioning.
- ii. Operation of X-ray/ultrasound/CT scan/MRI machines.
- iii. Oral and rectal administration of radio-opaque materials.

h. Injections of medications not otherwise prohibited:

- i. Intramuscular.
- ii. Subcutaneous.
- iii. Intravenous.

- i. Oral medications.
- j. Topical medication.

j. Laboratory - Collection and preparation of samples for:

- i. Collection of tissue during or after a veterinarian has performed necropsy. ii. Urinalysis.
- iii. Hematology.
- iv. Parasitology.
 - i. Exfoliate cytology.
 - ii. Microbiology.
 - iii. Blood chemistry.
 - iv. Serology.
 - v. Coprology.

- n. Administration of pre-anesthetic drugs.
- o. Oxygen therapy.
- p. Removal of partially exposed foreign objects from skin and feet.
- q. Administration of immunological agents/vaccines.
- r. Administration of oral anti-parasitic preparations.

4.A Para Veterinary staff/personnel may render the following services under the 'immediate supervision' of a veterinarian:

- a. Endotracheal intubation.
- b. Blood administration and collection.
- c. Fluid aspiration.
- d. Intraperitoneal injections.
- e. Monitoring of vital signs of anesthetized patient.
- f. Endocardiography
- f. Application of splints.
- g. Induce anaesthesia by intravenous, intramuscular, or subcutaneous injection, or by inhalation.
- h. When the animal is anesthetized, all the services listed under indirect supervision.
- i. Euthanasia
- j. Assist veterinarian during surgery and diagnostics.

5. Under the conditions of an emergency, a Para Veterinary staff/personnel may render the following lifesaving aid and treatment only after direct communication

with the Registered Veterinary Practitioner who is either present or in route to the location of the collapsed/distressed/ill health/injured animal:

- (i) Application of tourniquets or pressure bandages, or both, to control haemorrhage.
- (ii) Administration of pharmacological agents and parental fluids.
- (iii) Resuscitative oxygen procedures.
- (iv) Establishing open airways including intubation appliances.
- (v) External cardiac massage.
- (vi) Application of temporary splints or bandages to prevent further injury to bones or soft tissue.
- (vii) Application of appropriate wound dressings and external supportive treatment in severe burn cases.

6. Person(s) who are permitted to carry out minor veterinary services shall do as notified by the State government and strictly as provided under the Indian Veterinary Council Act, 1984. For the purpose, the State Governments, Institutions, organisations, Non-Governmental organizations or agencies or individual establishments concerned shall declare the names of persons employed by them by whatever name designated for minor veterinary services and shall also declare the names of the registered Veterinary practitioners under whose direction and supervision such (notified) minor Veterinary services shall be carried out. All para veterinary staff/personnel shall display his or her identity card at his or her place of employment as to be easily accessible to the public or clients. The place or an occasion where such notified minor veterinary service is carried out shall exhibit the name of the registered Veterinary practitioner under whose supervision and direction the minor veterinary service is being carried out for the benefit of the public. The Registered Veterinary Practitioner shall be responsible to declare immediate closure of any such institution where sub-standard is being followed and will report the matter to the respective State/UT Veterinary Council immediately. In case of illegal Veterinary Practice, the Registered Veterinary Practitioner with official jurisdiction can register cases of 'Illegal veterinary practice' with proper evidence under sections 23, 24, 25, 416, 417, 418 and 419 of the Indian Penal Code, 1960

XIV. IILEGAL PRACTICE OF VETERINARY MEDICINE

1. 'Veterinary Practice' can be practiced by a Registered Veterinary Practitioner only. Any person other than a Registered Veterinary Practitioner practicing Veterinary medicine shall be considered as 'Illegal Veterinary Practice' which is punishable. For, such purpose, following are defined:

i. 'Illegal Veterinary Practice' means the practice of Veterinary medicine by any person other than a registered Veterinary practitioner to any species of animal(s) in any one or all branches (by whatever name called) of Veterinary science in violation of Section 57 (1), 30 (a) and 30 (c) of Indian Veterinary Council Act, 1984.

ii. "Veterinary Practice" means the practice of Veterinary medicine by a registered Veterinary practitioner to any species of animal(s) in any one or all branches (by whatever name called) of Veterinary science.

iii. 'Registered Veterinary Practitioner' means a person holding a veterinary qualification included in the Schedule-I and Schedule-II of the Indian Veterinary Council Act, 1984 and registered with a State/UT Veterinary Council or Veterinary Council of India

iv. 'Un-authorized person' means a person in any of the following categories:

- a. holding a veterinary qualification recognized under the Indian Veterinary Council Act, 1984 but not registered with a State/UT Veterinary Council or Veterinary Council of India.
- b. holding a veterinary qualification recognized under the Indian Veterinary Council Act, 1984 but not renewed the registration with a State/UT Veterinary Council or Veterinary Council of India.
- c. holding a veterinary qualification recognized under the Indian Veterinary Council Act, 1984 but deleted from the register of State/UT Veterinary Council or Veterinary Council of India.

v. 'Unqualified person' means a person holding any qualification which is not included in Schedule-I and Schedule-II of Indian Veterinary Council Act, 1984.

vi. 'Quack' means any person other than a Registered Veterinary Practitioner who pretends to be a Veterinarian and dispenses Veterinary medical advice and treatment to the animal patients.

vii. 'Para Veterinary staff/personnel' means a person who is permitted to render minor veterinary services by a State Government by order issued by the Directorate of Animal Husbandry (by whatever name called) of such State as defined in Section 30 (b) of Indian Veterinary Council Act, 1984.

2.As per the Section 57 (1) of Indian Veterinary Council Act, 1984, practice of Veterinary medicine by an 'Un-authorized person' or by an 'Un-qualified person' or by 'Para veterinary staff/personnel' or by 'Quack' or by any person other than a Registered Veterinary Practitioner is treated as 'illegal veterinary practice'

3.As per the Section 57 (2) of Indian Veterinary Council Act, 1984, the persons who are into 'illegal Veterinary Practice' shall be punishable on first conviction with fine upto thousand rupees and on any subsequent conviction with imprisonment which may extend to six months or with fine not exceeding five thousand rupees or with both.

4.Any Registered Veterinary Practitioner with an official jurisdiction can register cases of 'Illegal veterinary practice' practiced in his/her jurisdiction with proper evidence under sections 23, 24, 25, 416, 417, 418 and 419 of the Indian Penal Code, 1960

PART -V

MINIMUM STANDARDS FOR VETERINARY PRACTICE INSTITUTIONS

XV. GENERAL

1. Veterinary Practice Institutions undertaking professional service shall analyse the needs of the animal, client, household, society, village, mandal, Taluk, Block, District and State in that order. A macro level (regional or national) policy shall be developed for the country on the basis of this grass root data.

2. The primary objective of Veterinary services is animals welfare and well being that optimising (as against maximise) its health and performance. Any effort therefore must sustain environment, compliment human development and deliver social justice. The principles under which the primary Veterinary Services are delivered are :

a) The health promotion, essential animal health care and veterinary medical service must be delivered under the principle of equity; for this there should be universal coverage.

b) Besides curative aspects, primary Veterinary medical care should include promotive, preventive and development services.

c) The service for development should be effective, efficient, affordable and acceptable to local communities, through choice of appropriate methods and in a manner that it can be delivered at all levels.

d) Individuals and community should be encouraged to be involved in developing a self-reliant and progressive system whose basis would be awareness of feeding, breeding and management through a knowledge delivery system as part of a professional service.

e) Because of close inter-relation among animal, man (community) and environment, veterinary sector must reach beyond health care and veterinary medical service, to include other support systems needed for feeding, breeding and the overall development of animals.

f) Veterinary centres shall seek to promote overall development of the animals through overall development of the society in which they are brought up so that animals and society play a mutually complementary role, rather than veterinarians seeking isolated development of animals without involving the society.

3. The standards for Infrastructure, Equipment and Manpower prescribed in these Regulations for different Veterinary Practice Institutions are the minimum standards required for the accreditation of the Institutions under the categories of Veterinary Dispensary/ Veterinary Hospital/Veterinary Polyclinic/Super Speciality Veterinary Hospital/Veterinary Clinic for small animals/Veterinary Hospital for small animals/Super Speciality Hospital for small animals/Animal Disease Diagnostic center/Animal Disease Diagnostic Laboratory and Emergency Mobile Veterinary Service Units.

4. The Veterinary Practice Institutions, apart from the minimum standards, shall provide the essential infrastructure, equipment and manpower if the situation demands. The Veterinary Practice Institutions shall provide additional Infrastructure, Equipment and Manpower in accordance to the patient attendance/work load/additional facilities.

5. Number of out-patient cases to be attended by a single registered Veterinary practitioner in 8 working hours should not exceed 50 i.e. on an average minimum of 10 minutes per one out patient case. Mass/group vaccination of cattle, sheep & goat, poultry and dogs; mass/group deworming of calves, sheep & goat, poultry and dogs cannot be reported as out-patient cases. If the number of out-patient cases exceeds 50 in 8 working hours period, Veterinary Practice Institutions managed by the State Government / any Government agency/ Non-Governmental organizations/individual (s) have to appoint one more registered Veterinary Practitioner.

6. All Veterinary Practice Institutions may establish Veterinary services delivery system/ mechanism as per the Acts and/or Regulations in existence or that which may come into existence in the States or under the Central Government.

XVI. VETERINARY DISPENSARY

A.FUNCTIONS:

1.The Veterinary Dispensary shall generally undertake the following jobs :-

- a)Health assessment, Timely diagnosis & appropriate treatment for pathological/metabolic/nutritional diseases/ disorders/ deficiencies.
- b)Artificial Insemination
- c) Pregnancy Diagnosis
- d) Dystocia relief procedures
- e) Treatment of Reproductive system diseases/disorders
- f) Tranquilization/sedation/local anaesthesia of all species of animals
- g) Surgical procedures like Spaying, neutering, repairing of wounds etc.,
- h) Manipulation fractures through non-surgical procedures
- i) Treatment of wounds/injuries/abscesses
- j) Ophthalmic examination and simple ocular procedures
- k) Otoscopy and ear flushing/ear cleansing/required treatment
- l) Collection and screening of blood smears/skin scrapings/urine /dung/ faecal matter. Collection of blood/serum samples, swabs, biopsy samples for referring to the Veterinary Hospital/Veterinary Poly clinic/Super Speciality Veterinary Hospital for confirmative diagnosis.
- m) Euthanasia
- n) Emergency care pending transport/referring the patient to a nearby Veterinary Hospital/ Veterinary Poly Clinic
- o) Prescribing and dispensing the drugs for the treatment
- p) Prophylactic/Blanket Vaccination
- q) Preventive/curative treatment for worm burden
- r) In house veterinary service delivery limited to a specific time as decided by the State/UT Government.
- s) Limited Veterinary Services can be delivered at the farmers door step in case of emergency.
- t) Studying the prevailing animal husbandry, animal health and animal development practices and identifying problems through Participatory Developmental Approach

(PDA) and deriving methods to solve problems that are encountered and preventing their recurrence.

u) Advising community on feed & fodder production and proper nutrition/feed formulations to the Livestock after assessing economic viability, availability, socio-economic status of the animal owners etc., and sensitizing the community on the role of essential nutrients, micronutrients, feed and fodder, safe water, shelter (housing), basic hygienic as part of the management and Maternal and offspring care, early nutrition & care of growing animals, including animal welfare.

v) Ensuring regular breeding of animals through health promotion, sexual health care, breeding policy of the State/Country, reproduction technology, care of pregnant animals etc.

x) Collection of data with respect to the animals (all species) and the owners of animals within the jurisdiction of the Dispensary. Assisting in Surveillance & monitoring (epidemiology); control & prevention of diseases, environmental assessment, risk assessment etc., and to report to the Animal Husbandry Department on control & prevention of endemic diseases or intoxication through observing environment residues, endemic areas etc.

y) Referring the cases of Vetero legal/ disease out-break/ suspicious deaths of animals to the nearby Veterinary Hospital/Veterinary Poly Clinic for Post Mortem and proper disposal of cadavers.

z) Authority to inspect slaughter house and meat shop as may be authorized by the State/UT Government.

B.INFRASTRUCTURE -LOCATION AND STRUCTURE

1. Veterinary Dispensary must be established at a Gram Panchayat for a cluster of Gram panchayats or at a Ward for a cluster of Wards of a Municipality or a Municipal Corporation at a suitable place which is easily approachable to the clients.

2. A Veterinary Dispensary shall have the following minimum infrastructure/ facilities

:

- i) Registration area (30 to 40 Sq. ft).
- ii) Adequate shaded waiting area for client & patient as per the demand
- iii) A well ventilated Animal examination area with roof for cattle where Travis is placed on elevated ground with proper drainage facility. (10' x 12')
- iv) A well ventilated area with roof and elevated platform (i.e. at least 2 feet height above the ground level) for cattle for performing minor surgical procedures/emergency dystocia relief procedures/ emergency rumenotomy/any other emergencies of animal collapse etc., (15' x 12')
- v) Animal examination room with running tap water facility for small ruminants/canines/felines/ avian species etc., (8' X10')
- vi) A diagnostic Room/area with running tap water for examining the blood smears/milk/ urine/dung etc., (40 Sq.ft)
- vii) IV fluid/in house treatment area for small ruminants/canine/ felines/post-operative area in spaying/neutering etc., (100 Sq.ft)
- viii) A mini operation theatre for performing spaying, neutering and minor surgical procedures for small ruminants/canine/felines. (80 Sq.ft)
- ix) Medicine Dispensing room (40 Sq.ft)

- x) Adequate space for Semen storage facility and for periodic testing of semen straws
- xi) Adequate store space with shelves/cup boards/cabinets for medicines/equipment/records etc.,
- xii) A room for Registered Veterinary Practitioner for farmer/client interaction/consultation (100 Sq.ft)
- xiii) Adequate seating facility for para veterinary staff/personnel
- xiv) Minimum one Toilet with proper drainage facility
- xv) Availability of clean running tap water in all spaces/areas with proper drainage and water disposal facility.
- xvi) Adequate storage space for the System of disposal of medical waste, animal waste and biomaterial as per Rule enforced.

C.EQUIPMENT:

A Veterinary Dispensary must have following equipment/instruments/tools/accessories etc.:

1. Computers and peripherals with internet connectivity and relevant software for animal/client/Dispensary management.
2. One Travis per 20 daily attendance of cattle and an additional Travis for every 10 additional attendance of cattle.
3. One small animal table for every 10 small animal attendance.
4. Thermometers-two
5. Stethoscope-one
6. Ophthalmoscope-one
7. Otoscope-one
8. Laryngoscope-one
9. Veterinary BP apparatus-one
10. Binocular microscope with camera and digital support-one
11. Revolving stools-four
12. Specimen collection containers and vacutainers (as per need)
13. Standard staining kits (as per need)
14. Lateral flow kits for common diseases (as per need)
15. Mastitis testing kits (as per need)
16. Glass ware (as per need)
17. Eye speculum-one
18. Vaginal speculum-one
19. Percussion hammer-one
20. Centrifuge
21. Tooth cutter
22. Tooth rasper
23. Teat syphons-four
24. Urinary catheters (as per need)
25. Examination lights-one
26. Electric dehorner-one
27. Veterinary electric Hair clipper-one

28. Battery operated Veterinary Hair clipper-one
29. Infrared lamp-one
30. Trocar & cannula for large ruminants-one
31. Trocar & cannula for small ruminants-one
32. Endotracheal tube-two
33. Probang/stomach tubes-two
34. Ambu's respirator-one
35. Suction pump-one
36. Restraining devices for large & small ruminants, dogs, cats, birds etc.,(as per need)
37. Weighing machine with platform-one
38. Baby weighing machine-one
39. Hydraulic table for spay & neutering in canines-one
40. Shadow less lamp with stand for spay & neutering in canines-one
41. Instrument trolley-two
42. Surgical Instruments set for spay & neutering in canines-two
43. Autoclave-one
44. Surgical instrument set for minor surgical procedures-two
45. Dressing drum (small)-one
46. Dressing drum (large)-one
47. Sterilized hand gloves, surgical caps and facemasks- (as per need)
48. Artificial Insemination set- two
49. Thawing unit for frozen semen straws
50. Liquid Nitrogen container for semen straw storage-one
51. Thermos flask-one
52. Rectal examination gloves (as per need)
53. Gum Boots-eight pairs
54. Dystocia set-one
55. Hoof trimming set (standard)-one
56. I.V. drip stands-four
57. Sterilizer-one
58. Refrigerator
59. Syringes, IV drip sets, IV cannulas, scalp veins (as per need)
60. White Aprons-two, Navy Blue aprons-two and Khaki aprons-six, Gynaecological aprons-two
61. Uninterrupted power supply back up equipment
62. Adequate furniture/instrument cabinets/cup boards/ almarhas etc., for making the Hospital operational
63. Essential equipment/containers/bags for wastes & sharps disposal (as per need)

D.DRUGS, CHEMICALS AND CONSUMABLES:

Essential drugs, chemicals and consumables needs to be provided as per the requirement made by the Registered Veterinary Practitioner of the concerned

Veterinary Dispensary based on the patient attendance, disease prevalence, area specificity etc.,

E.MAN POWER:

1. Veterinary Dispensary shall have at least the following personnel in position:

- a) Registered Veterinary Practitioner at the basic level designation (by whatever name called) in the A.H. Department will be the in charge of the Institution.
- b) One trained para veterinary personnel, by whatever name called, who is permitted to render minor veterinary service under the direction and supervision of the registered veterinary practitioner
- c) One Animal attendant
- d) One Sweeper/Safaiwala

2. Number of out-patient cases to be attended by a single registered Veterinary practitioner at the basic level designation (by whatever name called) in the A.H. Department in 8 working hours should not exceed 50 i.e. on an average minimum of 10 minutes per one out patient case. Mass/group vaccination of cattle, sheep & goat, poultry and dogs; mass/group deworming of calves, sheep & goat, poultry and dogs cannot be reported as out-patient cases. If the number of cases exceeds 50 in 8 working hours period, State Government have to appoint one more registered Veterinary Practitioner at the second level (promoted from the basic level) designation (by whatever name called) in the A.H. Department.

XVII. VETERINARY HOSPITAL

A.FUNCTIONS:

A veterinary hospital shall essentially perform the functions as the Veterinary Dispensary, but shall provide additional services such as in-patient services; disease diagnosis by Bio chemical assays, blood smears, disease diagnostic kits, ultra sound scanning, X-ray; conducting major surgeries, conducting Post Mortem, disposing the Cadavers. The hospital shall provide round the clock services for emergencies and for in-patients. It shall have a Epidemiological data processing unit for analysing the disease profile data of the patients disease-wise, system-wise, area-wise etc., The Veterinary Hospital shall have at least one animal ambulance suitable for large animals at its disposal.

B.INFRASTRUCTURE - LOCATION AND STRUCTURE:

1. Veterinary Hospital must be established at Legislative Constituency/Division/Block levels at a suitable place which is easily approachable to the clients.

2. Minimum facilities needed for veterinary hospital are the same as that of the Veterinary Dispensary with the following additional infrastructure/facilities:

- i) In-patient wards for at least three large animals
- ii) In-patient wards for at least five small ruminants/canines / felines
- iii) Diagnostic laboratory for auto analyser for Bio chemical assays and other disease diagnostic equipment for conducting the diagnostic tests (150 Sq.ft)
- iv) Adequate space for ultra sound scanning of small ruminants/canines/felines
- v) Adequate space for X-ray and for major surgeries in cattle
- vi) Adequate space for X-ray for small ruminants/canine/ felines etc.,
- vii) Adequate space for operation theatre for major surgeries in canines/felines etc.,
- viii) Adequate space for operation theatre for major surgeries in Livestock
- ix) Adequate space for Post-Mortem facility & Incinerator facility of Cattle/small ruminants/canines/felines etc.,
- x) Adequate space for client seating arrangement

C.EQUIPMENT:

A Veterinary Hospital must have following equipment/instruments/tools/ accessories etc.,:

1. Computers and peripherals with internet connectivity and relevant software for animal/client/Dispensary management.
2. One Travis per 20 daily attendance of cattle and an additional Travis for every 10 additional attendance of cattle.
3. One small animal table for every 10 small animal attendance.
4. Thermometers-Four
5. Stethoscope-Three
6. Ophthalmoscope-one
7. Otoscope-one
8. Laryngoscope-two
9. Veterinary BP apparatus-one
10. Binocular microscope with camera and digital support-one
11. Revolving stools-Eight
12. Specimen collection containers and vacutainers (as per need)
13. Standard staining kits (as per need)
14. Lateral flow kits for common diseases (as per need)
15. Mastitis testing kits (as per need)
16. Auto analyser for Bio chemical assays-one
17. Glass slides (as per need)
18. Cover slips (as per need)
19. Eye speculum-one

20. Vaginal speculum-one
21. Percussion hammer-one
22. Tooth cutter
23. Tooth rasper
24. Teat syphons-four
25. Urinary catheters (as per need)
26. Examination lights-one
27. Electric dehorner-one
28. Veterinary electric Hair clipper-one
29. Battery operated Veterinary Hair clipper-one
30. Infrared lamp-one
31. Trocar & cannula for large ruminants-one
32. Trocar & cannula for small ruminants-one
33. Endotracheal tube-two
34. Probang/stomach tubes-two
35. Ambu's respirator-one
36. Suction pump-one
37. Centrifuge-one
38. Restraining devices for large & small ruminants, dogs, cats, birds etc.,(as per need)
39. Weighing machine with platform-one
40. Digital precision weighing machine-one
41. X-ray machine unit for large animals-one
42. X-ray machine unit for small animals-one
43. Ultrasound scanning machine unit for small animals-one
44. Ultrasound scanning machine unit for ruminants-one
45. Hydraulic table for small animal major surgeries-one
46. Shadow less lamp with stand for small animal operation theatre-one
47. Shadow less lamp with stand for large animal operation theatre-one
48. Instrument trolley-four
49. Surgical Instruments set for small animal major surgeries-two
50. Surgical Instruments set for large animal major surgeries-two
51. Autoclave-one
52. Refrigerator
53. Surgical instrument set for minor surgical procedures-four
54. Dressing drum (small)-two
55. Dressing drum (large)-two
56. Sterilized hand gloves, surgical caps and facemasks- (as per need)
57. Artificial Insemination set- two
58. Thawing unit for frozen semen straws
59. Liquid Nitrogen container for semen straw storage-one
60. Thermos flask-one
61. Rectal examination gloves (as per need)
62. Gum Boots-eight pairs

63. Dystocia set-one
64. Hoof trimming set (standard)-one
65. Post-mortem set-one
66. Incinerator unit-one
67. I.V. drip stands-ten
68. Sterilizer-one
69. Syringes, IV drip sets, IV cannulas, scalp veins (as per need)
70. White Aprons-two, Navy Blue aprons-two and Khaki aprons-six
71. Uninterrupted power supply back up equipment
72. Adequate furniture/instrument cabinets/cup boards/ almarhas etc., for making the Hospital operational
73. Essential equipment/containers/bags for wastes & sharps disposal (as per need)

D.DRUGS, CHEMICALS AND CONSUMABLES:

Essential drugs, chemicals and consumables needs to be provided as per the requirement made by the In-charge of the concerned Veterinary Hospital based on the patient attendance, disease prevalence etc.,

E. MAN POWER:

A Veterinary Hospital shall have at least the following personnel in position:

- a) One registered veterinary practitioner at the second level (promoted from the basic level) designation (by whatever name called) in the A.H. Department will be the in charge of the Institution.
- b) Two additional Registered Veterinary practitioners at the basic level designation (by whatever name called) in the A.H. Department and who possess a minimum professional standing of 8 years, to support veterinary services i.e. Promotion, production management, technology, community development, animal welfare, extension etc. (like the Veterinary Dispensary) and for attending to the in-patient patients round the clock and to conduct the Post-Mortem examination.
- c) Two trained para veterinary personnel, by whatever name called, who is permitted to render minor veterinary service under the direction and supervision of the registered veterinary practitioners
- d) One trained para veterinary staff assisting the Laboratory work and Post-Mortem examination
- e) three Animal attendants
- e) One Sweeper/Safaiwala
- f) One driver for the animal ambulance

XVIII. VETERINARY POLYCLINIC

A.FUNCTIONS:

1. In Veterinary Polyclinic, the specialists shall provide service to all cases referred to them or seek their support for diagnosis, prevention, treatment or advice, from the OPD, Veterinary Dispensaries or Veterinary Hospitals. A Veterinary Polyclinic shall provide specialised services in Surgery & radiology, Clinical medicine, Laboratory diagnostics, Epidemiology & preventive medicine, Reproduction technology, Gynaecology & obstetrics, Animal Production & Management and other relevant services needed apart from the services provided by the Veterinary Hospital. A Polyclinic shall provide specialized services in casualty/emergency care services and in-patient services round the clock. It shall update the District or State/UT administration on disease prevalence by analysing the disease profile data of the patients of its and the data of patients received from the other Veterinary Practice Institutions of the District through its Epidemiological data processing unit disease-wise, system-wise, area-wise etc., There shall be at least one animal ambulance suitable for large animals with each polyclinic.

2.The Veterinary Polyclinic shall normally provide reach out service to support the functions of the Veterinary Dispensaries & Veterinary Hospitals in preventive, therapeutic or rehabilitative health service.

3.District Human Resource Development Centre:

A District Human Resource Development centre should be an integral part of Veterinary Polyclinic, where subject specialists will update the Registered Veterinary Practitioners of the District on the latest trends of the Veterinary practice, animal production and management and provide hands on training for improving the Veterinary service delivery mechanism at the level of Veterinary Dispensaries and Veterinary Hospitals. The Centre will organize training programs for the para staff / personnel of the District to improve the skills of the Para veterinary personnel for assisting the Registered Veterinary Practitioners in the Veterinary services delivery mechanism.

B.INFRASTRUCTURE - LOCATION AND STRUCTURE:

1. Veterinary Polyclinic must be established at District level at a suitable place which is easily approachable to the clients.

2.The major infrastructure and components of a Veterinary Polyclinic shall be as listed below. Each component shall have adequate space as per the units of the components, workload and location Grade of the city and type (i.e. Grade A/B/C/D) of such city.

Section	Components (Activities)
Section-A	1.Reception-cum- waiting area for small animals. 2.Casualty/Emergency Section

	<ol style="list-style-type: none"> 3. Loading/Unloading platform 4. Weigh bridge for cattle & Weighing scale with platform for small ruminants/canines etc., and Baby weighing scale for puppies/felines etc., 5. Pharmacy 6. Animal holding (waiting room) area for large animals 7. Garage for Mobile Clinical unit/animal ambulance 8. Parking facilities
Section-B	<ol style="list-style-type: none"> 1. Administration Office 2. Admission-Record room and Central server 3. Office of Doctors 4. OPD space for small animals 5. Minor surgical unit for small animals 6. Injection/Infusion Rooms for small animals 7. Store 8. Library-cum-conference room 9. District Human Resource Development Centre
Section-C	<ol style="list-style-type: none"> 1. OPD space for ruminants 2. Injection/Infusion space for ruminants 2. Artificial Insemination Unit 3. Minor surgical unit for ruminants
Section-D	<ol style="list-style-type: none"> 1. Diagnostic laboratory Unit (Bio chemical lab; Bacteriology lab; Pathology lab; Parasitology lab and Animal Nutrition lab) 2. Epidemiological data processing unit.
Section-E	<ol style="list-style-type: none"> 1. Digital X-ray Unit 2. Ultrasound & ECG Unit 3. Physiotherapy Unit
Section-F	<ol style="list-style-type: none"> 1. Small animal operation theatre with ancillary 2. Large animal operation theatre with ancillary 3. Obstetrical room for large animals 4. Obstetrical room for small animals
Section-G	<ol style="list-style-type: none"> 1. Post-operative care room for small animals 2. Post-operative care room for ruminants

INDOOR UNIT

Section-H	<ol style="list-style-type: none"> 1. Wards for small animals with seating arrangement to clients 2. Wards for large animals with seating arrangements to clients 3. Conveniences
-----------	--

SUPPORTING FACILITIES/DISPOSAL SYSTEMS

Section-I	<ol style="list-style-type: none"> 1. Isolation wards 2. Post Mortem Hall
-----------	---

	3.Incinerator Hall
Section -J	1.Sewarage Treatment Plant 2.Disposal of medicinal wastes, animal waste, biomaterial waste as per the norms of the State/ Central Government
Section-K	1. Central Oxygen Facility 2.Round the clock Supply of Water, Light 3.Laundry & Sterilizer 4.Maintenance Section 5.Cafeteria
Section-L	1.Tarining Hall for staff/farmers/clients 2.Trainee (staff/farmers/clients) Hostel

C.EQUIPMENT:

A Veterinary Polyclinic must have following equipment/instruments/tools/ accessories etc., Section-wise:

Section	Equipment/units/instruments/accessories/tools etc., required at different components
Section-A	<p>1.Reception-cum- waiting for small animals: Computers and peripherals with internet connectivity and relevant software for animal/client/Hospital management.</p> <p>2.Casualty/Emergency Section: (i). Emergency crash cart-one with all essentials (ii). Small animal Stretchers-four (iii). Oxygen delivery unit-at two points (iv). Pulse Oximeter-one (iv). Ventilator assistance-one (v). Endotracheal tubes-two (vi). Bedding area for large animals (vii). All other equipment required in emergencies</p> <p>3.Weigh bridge for cattle & Weighing scale with platform for small ruminants/canines and Baby weighing scale for puppies/felines etc.,</p> <p>4.Animal holding (waiting room) for large animals: (i).Proper arrangements for tying the animals</p> <p>5.Garage: (i).Mobile Clinical unit</p>
Section-B	1.Administration Office:

	<p>(i). Adequate furniture & seating arrangement for the staff (ii). Adequate storage space for keeping the files of office 2.Admission –Record room – main computer etc.:</p> <p>(i). Computers & peripherals with relevant software for managing the records in electronic form (ii). Adequate furniture to keep & maintain physical records</p> <p>4.Office of Doctors:</p> <p>(i). Adequate furniture & seating arrangement for Registered Veterinary Practitioners</p> <p>4. OPD for small animals: Computers and peripherals with internet connectivity and relevant software for animal/client/Hospital management.</p> <p>(i). One small animal table for every 10 small animal attendance. (ii). Thermometers-Four (iii). Stethoscope-Three (iv). Ophthalmoscope-one (v). Otoscope-one (vi). Laryngoscope-two (vii).Veterinary BP apparatus-one (viii). Revolving stools-Eight (ix). Specimen collection containers and vacutainers (as per need) (x). Percussion hammer-one (xi). Urinary Catheters- (as per need) (xii).Veterinary electric Hair clipper-one (xiii). Battery operated Veterinary Hair clipper-one (xiv). Infrared lamp-one (xv). Stomach tube-one (xvi). Examination lamp-two (xvii). Dressing drum (small)-two (xviii). I.V. drip stands-five (xix). Sterilizer-one (xx). Syringes, IV drip sets, IV cannulas, scalp veins (as per need) (xxi). Instrument trolley- four (xxii).White Aprons, Navy Blue aprons and Khaki aprons (as per need) (xxiii). Essential equipment/containers/bags for wastes & sharps disposal (as per need)</p> <p>5.Minor surgical unit for canines/felines/avian etc., (i). Adjustable stainless steel top wet tables-two (ii). Instrument sets-four</p>
--	--

	<p>(iii).Dressing drums (small)-two</p> <p>6. Injection/Infusion Rooms for canines/felines etc.,</p> <p>(i). I.V. drip stands-eight</p> <p>(ii). Syringes, IV drip sets, IV cannulas, scalp veins (as per need)</p> <p>7. Store</p> <p>(i). Adequate racks/cup boards/alimrhas etc., for storage</p> <p>8. Library-cum-conference room</p> <p>(i). Basic Text books in all branches of Veterinary Science</p> <p>(ii). Specialized edition books in all branches of Veterinary Science</p> <p>(iii).Current journals related to veterinary practice-at least five</p> <p>(iv).Computer and peripherals with internet connection for e-books</p> <p>(v). Audio visual aids</p> <p>(vi).Over Head projector</p> <p>(vii). Video conferencing equipment</p> <p>9.District Human Resource Development Centre</p> <p>(i). Adequate furniture and seating arrangement for a Registered Veterinary Practitioner</p> <p>(ii). Computer and peripherals with internet connection</p> <p>(iii).Xerox machine-one</p> <p>(iv).Scanning machine-one</p> <p>(v). Stationery (as per need)</p>
Section-C	<p>1.OPD for ruminants</p> <p>Computers and peripherals with internet connectivity and relevant software for animal/client/Hospital management.</p> <p>i. Computers and peripherals with internet connectivity and relevant software for animal/client/Dispensary management.</p> <p>ii. One Travis per 20 daily attendance of cattle and an additional Travis for every 10 additional attendance of cattle.</p> <p>iii. Thermometers-Four</p> <p>iv. Stethoscope-Three</p> <p>v. Specimen collection containers and vacutainers, glass slides, swabs (as per need)</p> <p>vi. Lateral flow kits for common diseases (as per need)</p> <p>vii. Mastitis testing kits (as per need)</p> <p>viii.Vaginal speculum-one</p> <p>ix. Percussion hammer-one</p> <p>x. Tooth cutter</p>

	<ul style="list-style-type: none"> xi. Tooth rasper xii. Teat syphons-four xiii. Urinary catheters (as per need) xiv. Electric dehorner-one xv. Battery operated veterinary hair clipper xvi. One Infrared lamp-one xvii. Trocar & cannula for large ruminants-one xviii. Trocar & cannula for small ruminants-one xix. Restraining devices for large & small ruminants, dogs, cats, birds etc.,(as per need) xx. Instrument trolley-two xxi. Rectal examination gloves (as per need) xxii. Gum Boots-eight pairs xxiii. I.V. drip stands-ten xxiv. Sterilizer-one xxv. Syringes, IV drip sets, IV cannulas, scalp veins (as per need) xxvi. White Aprons, Navy Blue aprons and Khaki aprons, Gynaecological aprons (as per need) xxvii. Adequate furniture/instrument cabinets/cup boards/ almarhas etc., xxviii. Essential equipment/containers/bags for wastes & sharps disposal (as per need) <p>2.Injection/Infusion space for ruminants</p> <ul style="list-style-type: none"> (i). Adequate number of I.V. drip stands (ii).Adequate quantity of Disposables like IV dip sets, syringes etc., <p>3.Artificial Insemination Unit</p> <ul style="list-style-type: none"> i. Ultrasound scanning machine unit -one ii. Artificial Insemination gun- two iii. Liquid Nitrogen container for semen straw storage-one iv. Semen straws of highly pedigreed of all types of cattle breeds v. Thawing unit-one vi. Adequate quantity of disposables like AI gun sheaths, rectal examination gloves etc., vii. Gynaecological aprons (as per need) viii.Gum boots (as need) <p>4.Minor surgical unit for ruminants</p> <ul style="list-style-type: none"> i. Surgical instrument set for minor surgical procedures-four ii. Hoof trimming set (standard)-one
Section-D	1.Diagnostic laboratory Unit (Bio chemical lab; Bacteriology lab;

	<p>Pathology lab; parasitology lab and Animal Nutrition lab) shall have following:</p> <p>1.All the equipment required for conducting following tests:</p> <ul style="list-style-type: none"> (i) Urine – complete urine exam (ii) Faecal sample – Parasitic/protozoal exam (iii) Blood sample- Protozoa, microfilaria, Haematology, CBP (iv) Biochemical tests-LFT, KFT, Blood sugar, Thyroid profile etc., (v) Skin scrapping – microscopic ecto parasites (vi) Milk - CMT, culture and sensitivity (vii). Somatic cell count in Milk (viii) Microbial culture and sensitivity. (Saliva, urine, pus, uterine discharge/any discharges etc.) (ix).Histology or Histopathology of the tissues/biopsy material (x).Assessing the antibody titres (xi) Detection of infectious diseases like Brucellosis, IBR, TB, Anthrax, Pasteurellosis, PPR, FMD, Blue Tongue etc., by following accurate diagnostic procedures (xii). Feed and Fodder analysis Dry matter, Moisture, Energy, Crude protein, TDN, Macro & Trace Mineral composition, fungi, bacterial load etc., (ix). Water analysis for hardness, bacterial load etc., <p>2..Adequate furniture and aids for Epidemiological data processing unit.</p> <p>3.Computers and peripherals with internet connectivity and relevant software for Laboratory management.</p>
Section-E	<ul style="list-style-type: none"> i. X-ray Unit-one ii. Ultrasound scanning Unit-one iii. Physiotherapy Unit-one iv. E.C.G Unit - one
Section-F	<ul style="list-style-type: none"> 1.Small animal operation theatre with ancillary table/Mayo table -one ii. Shadowless lamp with stand-one iii.Instrument trolleys-two iv.Drums for autoclaving-two v.Instrument sets-two vi.Cautery apparatus-one vii.Suction pump-one <ul style="list-style-type: none"> i. Operation table

	<p>viii. Multipara vitals monitor-one ix. Gaseous anaesthesia unit-one x. Endotracheal tubes-two xi. Oxygen supply unit xii. Back-up generator-one xiii. Sterilized/disposable hand gloves, surgical caps and facemasks- (as per need) xiv. IV Drip stand-one</p> <p>2. Large animal operation theatre with ancillary i. Surgical Instruments set—two ii. Raised platform/suitable sterilizable bedding for performing surgery iii. Shadowless lamp-one iii. Dressing drum (small)-two iv. Dressing drum (large)-two v. Sterilized/disposable hand gloves, head caps and facemasks- (as per need) vi. I.V. Drip stands-one</p> <p>3. Obstetrical room for large animals i. Dystocia set-two ii. Proper Bedding iii. IV drip stands-two iv. All disposables required</p> <p>4. Obstetrical room for small animals i. Dystocia set-two ii. Proper Bedding iii. IV drip stands-two iv. All the disposables required</p>
Section-G	<p>1. Post-operative care room for canines/felines etc., (i). Required number of tables and I.V. drip stands (ii). Client seating arrangement (iii). Essential disposables</p> <p>2. Post-operative care room for ruminants (i). Required bedding and I.V. drip stands (ii). Client seating arrangement (iii). Essential disposables</p>

Section-H	<p>1.Wards for small animals (i). Required number of tables and I.V.drip stands (ii).Client seating arrangement (iii).Essential disposables</p> <p>2.Wards for large animals (i). Required number of rooms and I.V.drip stands (ii).Client seating arrangement (iii).Essential disposables</p>
Section-I	<p>1.Isolation wards (i). Required number of tables/rooms and I.V.drip stands (ii).Essential disposables</p> <p>2.Post Mortem Hall i.Raised platform for conducting Post Mortem for large animals ii.Suitable Table with drainage facility for conducting Post Mortem in small animals iii.Post Mortem sets-two</p> <p>3.Incinerator Hall i.High voltage power connection ii.Incinerator -one</p>
Section -J	<p>1.Sewarage Treatment Plant 2.Disposal of medicinal wastes, animal waste, biomaterial waste as per the norms of the State/ Central Government</p>
Section-K	<p>1. Central Oxygen Facility 2.Round the clock Supply of Water, Light 3.Laundry & Sterilizer 4.Maintenance Section 5.Cafeteria</p>
Section-L	<p>1.Tarining Hall for staff/farmers/clients (i). Audio visual aids (ii).Over Head projector (iii). Video conferencing equipment (optional) (v). Computer and peripherals with internet facility (vi). Adequate furniture & seating arrangement for the trainees & trainers</p> <p>2.Trainee (staff/farmers/clients) Hostel (i). Suitable and adequate furniture for the comfort of the trainees</p>

D.DRUGS, CHEMICALS AND CONSUMABLES:

Essential drugs, chemicals and consumables needs to be provided as per the requirement made by the In-charge of the Veterinary Polyclinic based on the patient attendance, disease prevalence, in-patient cases, specialization services provided etc.,

E.MANPOWER:

A Veterinary Polyclinic shall have at least the following personnel in position:

- a) One Registered Veterinary Practitioner at the third level (promoted from the second level) designation (by whatever name called) in the A.H.Department with M.V.Sc. qualification preferably in any one of the fields of Veterinary Medicine, Surgery, Gynaecology or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/ Reproductive technology and shall be the over all in-charge of the Polyclinic.
- b) One Registered Veterinary practitioner at second level (promoted from the basic level) designation (by whatever name called) in the Department with M.V.Sc., qualification preferably in the field of Veterinary Medicine or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- c) Two Registered Veterinary practitioners at the basic level designation (by whatever name called) in the A.H. Department and who possess a minimum professional standing of 8 years with M.V.Sc., qualification in the field of Veterinary Medicine or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- d) One Registered Veterinary practitioner at second level (promoted from the basic level) designation (by whatever name called) in the A.H. Department with M.V.Sc., qualification preferably in Veterinary Surgery or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/ Veterinary Surgery/Veterinary Gynaecology/Reproductive technology..
- e) One Registered Veterinary practitioner at the basic level designation (by whatever name called) in the A.H. Department and who possess a minimum professional standing of 8 years with M.V.Sc., qualification in the field of Veterinary Surgery or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology..
- f) One Registered Veterinary practitioner at second level (promoted from the basic level) designation (by whatever name called) in the Department with M.V.Sc., qualification preferably in the field of Veterinary Gynaecology or who possesses a minimum professional standing of 14 years in clinical practice in

Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.

- g) One Registered Veterinary practitioner at the basic level designation (by whatever name called) in the A.H. Department and who possess a minimum professional standing of 8 years with M.V.Sc., qualification in the field of Veterinary Gynaecology or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- h) One Registered Veterinary practitioner at second level (promoted from the basic level) designation (by whatever name called) in the A.H. Department with M.V.Sc., qualification preferably in any of the field of Veterinary Microbiology or Veterinary Pathology or Veterinary Parasitology or Veterinary Public Health or who possesses a minimum professional standing of 14 years in Laboratory/clinical practice for Disease diagnosis laboratory and Epidemiological data processing unit.
- i) One Registered Veterinary practitioner at the basic level designation (by whatever name called) in the A.H. Department and who possess a minimum professional standing of 8 years with M.V.Sc., qualification preferably in any of the field of Veterinary Microbiology or Veterinary Pathology or Veterinary Parasitology or Veterinary Public Health (or) who possesses a minimum professional standing of 14 years in clinical practice in Laboratory practice for Disease diagnosis laboratory and Epidemiological data processing unit.
- j) One Registered Veterinary practitioner at second level (promoted from the basic level) designation (by whatever name called) in the A.H. Department with M.V.Sc., qualification preferably in the field of Livestock Production Management or Animal Nutrition or Poultry Science or Dairy Science or who possesses a minimum professional standing of 14 years in clinical practice in Animal Production for Animal Production & Management issues and to provide Animal Nutrition Lab services.
- k) One Registered Veterinary practitioner at second level (promoted from the basic level) designation (by whatever name called) in the A.H. Department with M.V.Sc., qualification preferably in the field of Veterinary Extension or who possesses a minimum professional standing of 14 years in clinical practice/Animal production for District Human Resource Development Unit

Besides this there shall be the following para Veterinary and supporting staff :

1. Office staff as per the norms of the State/institution
2. Para Veterinary staff - ten
- 3 .Laboratory technician cum Radiographer-one
- 4 .Operation Theatre Technicians-two
5. Pharmacist-one
- 6.Peon cum Lab attendant-one
7. In-patient ward attendants-two
- 8.Ambulance driver-one
9. Record keeper-one
10. Store keeper-one
- 11.Sweeper cum attendant-six
- 12.Peon-three

13. Electrician cum maintenance mechanic-one

XIX. SUPER SPECIALITY VETERINARY HOSPITAL

A. FUNCTIONS:

In Super Speciality Veterinary Hospital, the super specialists shall provide support service to all cases referred to them or seek their support for diagnosis, prevention, treatment or advice, from the OPD, Veterinary clinics for small animals, Veterinary Dispensaries or Veterinary Hospitals or Veterinary Hospitals for small animals or Veterinary Polyclinics. A Super Speciality Veterinary Hospital shall provide super-specialized services in Surgery & radiology, Clinical medicine, Laboratory diagnostics, Epidemiology & preventive medicine, Reproduction technology, Gynaecology & obstetrics, Animal Production & Management and other relevant services needed apart from the services provided by the Veterinary Polyclinic. It shall provide the super-specialized services in casualty/emergency care services; ICU/Critical Care services; in-patient services round the clock. It shall have a Epidemiological data processing unit for analysing the disease profile data of the patients disease-wise, system-wise, area-wise etc., and shall apprise the disease prevalence to the State administration. There shall be at least one animal ambulance each for small and large animals.

The Super Speciality Veterinary Hospital shall normally provide reach out service to support the function of the Veterinary Dispensaries, Veterinary Hospitals, Veterinary polyclinics, Veterinary clinics for small animals, Veterinary hospitals for small animals in preventive, therapeutic or rehabilitative health service.

B. INFRASTRUCTURE - LOCATION AND STRUCTURE:

1. Super Speciality Veterinary Hospital must be established at a District Headquarters for a cluster of Districts representing a Region of the State or at State Headquarters at a suitable place which is easily approachable to the clients.

2. The major infrastructure and components of a Super Speciality Veterinary Hospital shall be as listed below. Each component shall have adequate space as per the units of the components, workload and location Grade of the city and type (i.e. Grade A/B/C/D) of such city.

Section	Components (Activities)
Section-A	1.Reception -cum- waiting area for small animals. 2.Casualty/Emergency Section 3. Loading/Unloading platform 4.Weigh bridge for cattle & Weighing scale with platform for small ruminants/canines etc., and Baby weighing scale for puppies/felines etc., 5.Pharmacy

	6. Animal holding (waiting room) area for large animals 7. Garage for Mobile Clinical unit/animal ambulance 8. Parking facilities
Section-B	1. Administration Office 2. Admission -Record room and Central Server 3. Office of Doctors 4. OPD for small animals 5. Minor surgical unit for small animals 6. Injection/Infusion Rooms for small animals 7. Store 8. Library-cum-conference room 9. District Human Resource Development Centre
Section-C	1. OPD for ruminants 2. Injection/Infusion space for ruminants 2. Artificial Insemination Unit 3. Minor surgical unit for ruminants
Section-D	1. Diagnostic laboratory Unit (Bio chemical lab; Bacteriology lab; Virology lab; Pathology lab; Parasitology lab and Animal Nutrition lab) 2. Epidemiological data processing unit.
Section-E	1. Digital X-ray Unit, Mobile X-ray unit, C arm 2. Ultrasound scanning unit, Colour Doppler unit, Echo Unit, E.C.G. Unit 3. CT scanning unit 4. MRI (optional) 5. Laser therapy unit 6. Dialysis unit 7. Physiotherapy unit 8. Dental unit 9. Ophthalmology unit
Section-F	1. Two Small animal operation theatres with ancillary 2. Two Large animal operation theatre with ancillary 3. Obstetrical room for large animals 4. Obstetrical room for small animals 5. I.C.U/Critical Care Unit
Section-G	1. Post-operative care room for canines/felines etc., 2. Post-operative care room for ruminants

INDOOR UNIT

Section-H	1. Wards for small animals 2. Wards for large animals 3. Accommodation for clients
-----------	--

	4. Conveniences
SUPPORTING FACILITIES/DISPOSAL SYSTEMS	
Section-I	1.Isolation wards 2.Post Mortem Hall 3.Incinerator Hall
Section -J	1.Sewarage Treatment Plant 2.Disposal of medicinal wastes, animal waste, biomaterial waste as per the norms of the State/ Central Government
Section-K	1. Central Oxygen Facility 2.Round the clock Supply of Water, Light 3.Laundry & Sterilizer 4.Maintenance Section 5.Cafeteria

C.EQUIPMENT:

1.The actual requirement and type of equipment, drugs, chemicals and consumables may be decided as per the design and field of services to be provided by a Super Speciality Veterinary Hospital

2.A Super Speciality Veterinary Hospital must have following equipment/ instruments/tools/ accessories etc., Section-wise:

Section	Minimum Equipment/units/instruments/ accessories/tools etc., required at different components
Section-A	<p>1.Reception: Computers and peripherals with internet connectivity and relevant software for animal/client/Hospital management.</p> <p>2.Patient/Animal & Client waiting area for small Animals: Adequate seating arrangement for clients</p> <p>3.Casualty/Emergency Section: (i). Emergency crash cart-one with all essentials (ii). Small animal Stretchers-four (iii). Oxygen delivery unit-at two points (iv). Pulse Oximeter-one (iv). Ventilator assistance-one (v). Endotracheal tubes-two (vi). Bedding area for large animals (vii). All other equipment required in emergencies (viii). Lifesaving essential drugs</p>

	<p>4. Weigh bridge for cattle & Weighing scale with platform for small ruminants/canines/felines etc, and Baby weighing scale for puppies /cats</p> <p>4. Animal holding (waiting room) for large animals: (i). Proper arrangements for tying the animals</p> <p>5. Garage: i. Mobile Clinical unit/Animal Ambulance</p>
Section-B	<p>1. Administration Office: (i). Adequate furniture & seating arrangement for the staff (ii). Adequate storage space for keeping the files of office</p> <p>2. Admission-Record room & Central Server (i). Computers & peripherals with relevant software for managing the records in electronic form (ii). Adequate furniture to keep & maintain physical records</p> <p>4. Office of Doctors: (i). Adequate furniture & seating arrangement for Registered Veterinary Practitioners</p> <p>4. OPD for small animals: Computers and peripherals with internet connectivity and relevant software for animal/client/Hospital management.</p> <p>(i). One table for every 10 small animal attendance. (ii). Thermometers-Four (iii). Stethoscope-Three (iv). Ophthalmoscope-one (v). Electronic Otoscope -one (vi). Laryngoscope-two (vii). Veterinary BP apparatus-one (viii). Revolving stools-Eight (ix). Specimen collection containers and vacutainers (as per need) (x). Percussion hammer-one (xi). Urinary Catheters- (as per need) (xii). Veterinary electric Hair clipper-one (xiii). Battery operated Veterinary Hair clipper-one (xiv). Infrared lamp-one (xv). Stomach tube-one (xvi). Examination lamp-two (xvii). Dressing drum (small)-two (xviii). I.V. fluid drip stands-five</p>

	<p>(xix). Sterilizer-one (xx). Syringes, IV drip sets, IV cannulas, scalp veins (as per need) (xxi). Instrument trolley- four (xxii).White Aprons, Navy Blue aprons and Khaki aprons (as per need)</p> <p>(xxiii). Essential equipment/containers/bags for wastes & sharps disposal (as per need)</p> <p>5.Minor surgical unit for canines/felines/avian etc., (i). Adjustable stainless steel top wet tables-two (ii). Instrument sets-four (iii).Dressing drums (small)-two</p> <p>6. Injection/Infusion Rooms for canines/felines etc., (i). I.V. drip stands-eight (ii). Syringes, IV drip sets, IV cannulas, scalp veins (as per need)</p> <p>7. Store</p> <p>8. Library-cum-conference room (i). Basic Text books in all branches of Veterinary Science (ii). Specialized & super specialized books in all branches of Veterinary Science (iii).Current journals related to veterinary practice-at least ten (iv).Computer and peripherals with internet connection for e-books (v). Audio visual aids (vi).Projector (vii). Video conferencing equipment</p>
Section-C	<p>1.OPD for ruminants Computers and peripherals with internet connectivity and relevant software for animal/client/Hospital management.</p> <p>xxix. Computers and peripherals with internet connectivity and relevant software for animal/client/Dispensary management.</p> <p>xxx. One Travis per 20 daily attendance of cattle and an additional Travis for every 10 additional attendance of cattle.</p> <p>xxxi. Thermometers-Four xxxii. Stethoscope-Three xxxiii. Specimen collection containers and vacutainers, glass slides, swabs (as per need) xxxiv. Lateral flow kits for common diseases (as per need) xxxv. Mastitis testing kits (as per need)</p>

	<p>xxxvi. Vaginal speculum-one xxxvii. Percussion hammer-one xxxviii. Teat syphons-four xxxix. Urinary catheters (as per need) xl. Electric dehorner-one xli. Battery operated veterinary hair clipper xlii. One Infrared lamp-one xliii. Trocar & cannula for large ruminants-one xliv. Trocar & cannula for small ruminants-one xlv. Restraining devices for large & small ruminants, dogs, cats, birds etc.,(as per need) xlvi. Digital precision weighing machine-one xlvii. Instrument trolley-two xlviii. Rectal examination gloves (as per need) xlix. Gum Boots-eight pairs l. I.V. drip stands-ten li. Sterilizer-one lii. Syringes, IV drip sets, IV cannulas, scalp veins (as per need) liii. White Aprons, Navy Blue aprons, Khaki aprons and Gynaecological aprons (as per need) liv. Adequate furniture/instrument cabinets/cup boards/ almarhas etc., lv. Essential equipment/containers/bags for wastes & sharps disposal (as per need)</p> <p>2.Injection/Infusion space for ruminants (i). Adequate number of I.V. drip stands (ii).Adequate quantity of Disposables like IV dip sets, syringes etc.,</p> <p>3.Artificial Insemination Unit ix. Ultrasound scanning machine unit -one x. Artificial Insemination gun- two xi. Liquid Nitrogen container for semen straw storage-one xii. Semen straws of highly pedigreed of all types of cattle breeds xiii.Adequate quantity of disposables like AI gun sheaths, rectal examination gloves etc., xiv. Gynaecological aprons (as per need) xv. Gum boots (as need)</p> <p>4.Minor surgical unit for ruminants iii. Surgical instrument set for minor surgical procedures-four iv. Hoof trimming set (standard)-one</p>
--	---

	v.
Section-D	<p>Diagnostic laboratory Unit (Bio chemical lab; Bacteriology lab; Virology lab; pathology lab; parasitology lab and Animal Nutrition Lab) shall have the following:</p> <p>1.All the equipment required for conducting following tests:</p> <ul style="list-style-type: none"> (i) Urine – complete urine exam (ii) Faecal sample – Parasitic/protozoal exam (iii) Blood sample- Protozoa, microfilaria, Haematology, CBP (iv) Biochemical tests-LFT, KFT, Blood sugar, Thyroid profile, serum electrolytes etc., (v) Skin scrapping – microscopic ecto parasites (vi) Milk - CMT, culture and sensitivity (vii). Somatic cell count in Milk (viii) Microbial culture and sensitivity. (Saliva, urine, pus, uterine discharge/any discharges etc.) (ix).Histology or Histopathology of the tissues/biopsy material (x).Assessing the antibody titres (xi) Detection of infectious diseases like Brucellosis, IBR, TB, Anthrax, Pasteurellosis, PPR, FMD, FMD DIVA, Blue Tongue etc., by following accurate diagnostic procedures like ELISA/PCR/other methods (xii). Feed and Fodder analysis Dry matter, Moisture, Energy, Crude protein, TDN, ADF & NDF, Macro & Trace Mineral composition, Type of toxins & levels, fungus, bacterial load etc., (ix). Water analysis for hardness, bacterial load, type of toxin & levels etc. <p>2..Adequate furniture and aids for Epidemiological data processing unit.</p> <p>3.Computers and peripherals with internet connectivity and relevant software for Laboratory management.</p>
Section-E	<ul style="list-style-type: none"> i. Digital X-ray Unit-one ii. Mobile X-ray unit-one iii. C arm-one iv. Ultrasound scanning Unit-one v. Colour Doppler unit-one vi. Echo unit-one vii. ECG unit-one viii.CT scan unit-one ix. MRI-one (optional) x. Laser therapy unit-one

	<ul style="list-style-type: none"> xi. Dialysis unit-one xii. Physiotherapy Unit-one xiii. Dental unit-one xiv. Ophthalmology unit
Section-F	<ul style="list-style-type: none"> 1.Small animal operation theatre with ancillary table/Mayo table -two <ul style="list-style-type: none"> i. Operation ii. Shadowless lamp with stand-two iii. Instrument trolleys-four iv. Drums for autoclaving-four v. Instrument sets-six vi. Caутery apparatus-two vii. Suction pump-two viii. Multipara vitals monitor-two ix. Gaseous anaesthesia unit-two x. Endotracheal tubes-four xi. Oxygen supply units-two xii. Back-up generator-one xiii. Sterilized/disposable hand gloves, surgical caps and facemasks- (as per need) xiv. IV Drip stand-two xv. Laparoscopic unit-one xvi. Ventilator Assistance-one 2.Large animal operation theatre with ancillary <ul style="list-style-type: none"> i. Surgical Instruments set—four ii. Raised platform/suitable sterilizable bedding for performing surgery-two iii. Shadowless lamp-two iii. Dressing drum (small)-four iv. Dressing drum (large)-four v. Sterilized/disposable hand gloves, head caps and facemasks- (as per need) 3. Obstetrical room for large animals <ul style="list-style-type: none"> i. Dystocia set-two ii Proper Bedding iii. IV drip stands-two iv. All disposables required 4. Obstetrical room for small animals <ul style="list-style-type: none"> i. Dystocia set-two

	<ul style="list-style-type: none"> ii Proper Bedding iii.IV drip stands-two iv.All the disposables required
Section-G	<ul style="list-style-type: none"> 1.Post-operative care room for canines/felines etc., <ul style="list-style-type: none"> (i). Required number of tables and I.V.drip stands (ii).Client seating arrangement (iii).Essential disposables 2.Post-operative care room for ruminants <ul style="list-style-type: none"> (i). Required bedding and I.V. drip stands (ii).Client seating arrangement (iii).Essential disposables
Section-H	<ul style="list-style-type: none"> 1.Wards for small animals <ul style="list-style-type: none"> (i). Required number of tables and I.V.drip stands (ii).Client seating arrangement (iii).Essential disposables 2.Wards for large animals <ul style="list-style-type: none"> (i). Required number of rooms and I.V.drip stands (ii).Client seating arrangement (iii).Essential disposables
Section-I	<ul style="list-style-type: none"> 1.Isolation wards <ul style="list-style-type: none"> (i). Required number of tables/rooms and I.V.drip stands (ii).Essential disposables 2.Post Mortem Hall <ul style="list-style-type: none"> i.Raised platform for conducting Post Mortem for large animals ii.Suitable Table with drainage facility for conducting Post Mortem in small animals iii.Post Mortem sets-two 3.Incinerator Hall <ul style="list-style-type: none"> i.High voltage power connection ii.Incinerator -one
Section -J	<ul style="list-style-type: none"> 1.Sewarage Treatment Plant unit 2.Required containers/bags for disposal of medicinal wastes, animal waste, biomaterial waste as per the norms of the State/ Central Government
Section-K	<ul style="list-style-type: none"> 1. Central Oxygen Facility 2.Round the clock Supply of Water, Light

	3.Laundry equipment 4.Sterilizer
--	-------------------------------------

D.DRUGS, CHEMICALS AND CONSUMABLES :

Essential drugs, chemicals and consumables needs to be provided as per the requirement made by the In-charge of the Super Speciality Veterinary Hospital based on the patient attendance, in-patient services, super-specialization services provided etc.,

E.MANPOWER:

A Super Speciality Veterinary Hospital shall have the following personnel in position:

- a) One Registered Veterinary Practitioner at the fourth level (promoted from the third level) designation (by whatever name called) in the A.H. Department with M.V.Sc.and Phd or equivalent doctoral qualification preferably in any one of the fields of Veterinary Medicine, Surgery, Gynaecology, who shall be the over all in-charge of the Polyclinic or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/ Veterinary Gynaecology/Reproductive technology.
- b) One Registered Veterinary practitioner at third level (promoted from the second level) designation (by whatever name called) in the A.H. Department with M.V.Sc., and Phd or equivalent doctoral qualification preferably in the field of Veterinary Medicine or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- c) Two Registered Veterinary practitioners at second level (promoted from the basic level) designation (by whatever name called) in the Department and who possess a minimum professional standing of 10 years with M.V.Sc., along with Phd or equivalent doctoral qualification preferably in the field of Veterinary Medicine or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology/Animal Production.
- d) Two Registered Veterinary practitioners at the basic level designation (by whatever name called) in the A.H. Department with M.V.Sc., qualification preferably in the field of Veterinary Medicine or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/ Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- e) One Registered Veterinary practitioner at third level (promoted from the second level) designation (by whatever name called) in the A.H. Department with M.V.Sc., and Phd or equivalent doctoral qualification preferably in the field of Veterinary Surgery or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary

Medicine/Veterinary Surgery/Veterinary Gynaecology/ Reproductive technology.

- f) Two Registered Veterinary practitioners at second level (promoted from the basic level) designation (by whatever name called) in the Department with M.V.Sc., and Phd or equivalent doctoral qualification preferably in the field of Veterinary Surgery or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- g) Two Registered Veterinary practitioners at the basic level designation (by whatever name called) in the A.H.Department and who possess a minimum professional standing of 10 years with M.V.Sc., and Phd or equivalent doctoral qualification preferably in the field of Veterinary Surgery or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- h) One Registered Veterinary practitioner at third level (promoted from the second level) designation (by whatever name called) in the A.H. Department with M.V.Sc., and Phd or equivalent doctoral qualification preferably in the field of Veterinary Gynaecology or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- i) Two Registered Veterinary practitioners at second level (promoted from the basic level) designation (by whatever name called) in the Department with M.V.Sc., and Phd or equivalent doctoral qualification preferably in the field of Veterinary Gynaecology or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- j) Two Registered Veterinary practitioners at the basic level designation (by whatever name called) in the A.H. Department and who possess a minimum professional standing of 10 years with M.V.Sc., and Phd or equivalent doctoral qualification preferably in the field of Veterinary Medicine or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
- k) One Registered Veterinary practitioner at second level (promoted from the basic level) designation (by whatever name called) in the A.H. Department with M.V.Sc., and Phd or equivalent doctoral qualification preferably in any of the field of Veterinary Microbiology or Veterinary Pathology or Veterinary Parasitology or Veterinary Public Health or who possesses a minimum professional standing of 20 years in clinical practice in Laboratory/Clinical practice for Disease diagnosis laboratory and Epidemiological data processing unit.
- l) One Registered Veterinary practitioner at the basic level designation (by whatever name called) in the A.H. Department and who possess a minimum professional standing of 10 years with M.V.Sc., qualification preferably in any of the field of Veterinary Microbiology or Veterinary Pathology or Veterinary Parasitology or Veterinary Public Health or who

possesses a minimum professional standing of 14 years in Laboratory/clinical practice for Disease diagnosis laboratory and Epidemiological data processing unit.

- m) One Registered Veterinary practitioner at second level (promoted from the basic level) designation (by whatever name called) in the A.H. Department with M.V.Sc., and Phd or equivalent doctoral qualification preferably in the field of Livestock Production Management or Animal Nutrition or Poultry Science or Dairy Science or who possesses a minimum professional standing of 20 years in Animal Production for Animal Production & Management issues and to provide the Animal Nutrition lab services.

Besides this there shall be the following para Veterinary and supporting staff :

1. Office staff as per the norms of the State/institution
2. Para Veterinary staff - ten
3. Laboratory technician cum Radiographer-one
4. Operation Theatre Technicians-two
5. Pharmacist-one
6. Peon cum Lab attendant-one
7. In-patient ward attendants-two
8. Ambulance driver-one
9. Record keeper-one
10. Store keeper-one
11. Sweeper cum attendant-six
12. Peon-three
13. Electrician cum maintenance mechanic-one

XX. VETERINARY CLINIC FOR SMALL ANIMALS

A. FUNCTIONS:

The Veterinary Clinic for small animals shall generally undertake the following jobs for small animals :-

- a) Health assessment, Timely diagnosis & appropriate treatment for pathological/ metabolic/ nutritional infections/ diseases/ disorders/ deficiencies.
- b) Tranquilization/sedation/local anaesthesia of small animals
- c) Surgical procedures like Spaying, neutering, repairing wounds etc.,
- d) Manipulation fractures through non-surgical procedures
- e) Treatment of wounds/injuries/abscesses
- f) Ophthalmic examination and simple ocular procedures
- g) Otoscopy and ear flushing/ear cleansing/required treatment
- h) Collection and screening of blood smears/skin scrapings/urine /faecal matter.
- i) Collection of blood/serum samples, swabs, biopsy samples for referring to the Veterinary Hospital/Veterinary Poly clinic for confirmative diagnosis.
- k) Euthanasia
- l) Emergency care pending transport/referring the patient to a nearby Veterinary Hospital/ Veterinary Poly Clinic
- m) Prescribing and dispensing the drugs for the treatment

- n) Prophylactic Vaccination
- o) Preventive/curative treatment for worm burden
- p) Intravenous infusion of fluids
- q) Referring the cases of Veterinary legal/ disease out-break/ suspicious deaths of animals to the nearby Veterinary Hospital/Veterinary Poly Clinic for Post Mortem and proper disposal of cadavers.
- r) Reporting of disease out-break, if any noticed, to the District Veterinary Officer (by whatever name called)

B. INFRASTRUCTURE - LOCATION AND STRUCTURE:

1. Veterinary Clinic for small animals can be established at any prominent place where the demand for such veterinary services are existing and it shall be with accordance to the law/rules/regulations of the local bodies of the State Government or State Government.

2. A Veterinary clinic for small animals shall have the following minimum Infrastructure / facilities :

- i. Registration area (30' / 40' sq.ft.)
 - ii. Adequate shaded waiting area for client & patient as per the demand
 - iii. Animal examination room with running tap water facility for canines/felines/avian species etc., (8' X10')
 - iv. A diagnostic Room/area with running tap water for examining the blood smears/ urine/faecal matter/skin scrappings etc., (40 Sq.ft)
 - v. IV fluid/in house treatment area for small canine/ felines etc., (50 Sq.ft)
 - vi. A mini operation theatre for performing spaying, neutering and minor surgical procedures. (80 Sq.ft) (this facility is optional)
 - vii. Medicine Dispensing room (40 Sq.ft)
 - viii. Adequate store space with shelves/cup boards/cabinets for medicines/ equipment/records etc.,
 - ix. A space for Registered Veterinary Practitioner for client interaction/consultation (50 Sq.ft.)
 - x. Minimum one Toilet with proper drainage facility
- Adequate storage space for the System of disposal of medical waste, animal waste and biomaterial as per Rule enforced.

C. EQUIPMENT:

A Veterinary Clinic for small animals must contain following equipment/instruments/accessories/ tools:

- (i). Computers and peripherals with internet connectivity and relevant software for animal/client/clinic management.
- (ii). One small animal table for every 10 small animal attendance.
- (iii). Thermometers-Four
- (iv). Stethoscope-Three
- (v). Ophthalmoscope-one
- (vi). Otoscope-one
- (vii). Laryngoscope-two

- (viii).Veterinary BP apparatus-one
- (ix). Revolving stools-Eight
- (x). Specimen collection containers and vacutainers (as per need)
- (xi). Percussion hammer-one
- (xii). Urinary Catheters- (as per need)
- (xiii).Veterinary electric Hair clipper-one
- (xiv). Battery operated Veterinary Hair clipper-one
- (xv). Infrared lamp-one
- (xvi). Stomach tube-one
- (xvii). Examination lamp-two
- (xviii). Dressing drum (small)-two
- (xix). I.V. drip stands-five
- (xx). Sterilizer-one
- (xxi). Syringes, IV drip sets, IV cannulas, scalp veins (as per need)
- (xxii). Instrument trolley- four
- (xxiii). Essential equipment/containers/bags for wastes & sharps disposal (as per need)

D.DRUGS, CHEMICALS AND CONSUMABLES :

Essential drugs, chemicals and consumables needs to be provided as per the requirement made by the In-charge of the Veterinary Clinic based on the patient attendance, disease prevalence, area specificity etc.,

E.MANPOWER:

- A Veterinary Clinic for small animals shall have the following personnel in position:
- a) Registered Veterinary Practitioner holding its charge.
 - b) One trained para veterinary personnel, by whatever name called, who is permitted to render minor veterinary service under the direction and supervision of the registered veterinary practitioner
 - c) One Peon cum sweeper cum attendant

XXI. VETERINARY HOSPITAL FOR SMALL ANIMALS

A.FUNCTIONS:

A veterinary hospital for small animals shall essentially perform the functions as the Veterinary Clinic for small animals, but shall provide additional specialist services such as in-patient services; disease diagnosis by Bio chemical assays, blood smears, disease diagnostic kits, ultra sound scanning, X-ray; conducting major surgeries. The hospital shall provide round the clock services for emergencies and for in-patients. It shall have a Epidemiological data processing unit for analysing the disease profile data of the patients disease-wise, system-wise, area-wise etc., and analysed data on

disease prevalence will be updated to the District Veterinary Officer (by whatever name called). Veterinary Hospital for small animals shall send the dead animal (s), if any, for conducting the Post-mortem and for disposal of Cadavers. The Veterinary Hospital for small animals shall have at least one animal ambulance suitable for small animals at its disposal.

B.INFRASTRUCTURE - LOCATION AND STRUCTURE:

1. Veterinary Hospital for small animals can be established at any prominent place where the demand for such veterinary services are existing and it shall be with accordance to the law/rules/regulations of the local bodies of the State Government or State Government.

2.The major infrastructure and components of a Veterinary Hospital for small animals shall be as listed below. Each component shall have adequate space as per the units of the components, workload and location Grade of the city and type (i.e. Grade A/B/C/D) of such city.

Section	Components (Activities)
Section-A	1.Reception 2.Patient/Animal & Client waiting area 3.Casualty/Emergency Section 4. Weighing scale with platform for small canines and Baby weighing scale for puppies/felines etc., 5.Pharmacy 6.Garage for Mobile Clinical unit/animal ambulance 7.Parking facilities
Section-B	1.Administration Office 2. Admission -Record room and Central Server 3. Office of Doctors 4. Out-patient facility 5.Minor surgical unit 6. Injection/Infusion Rooms 7. Store 8. Library-cum-conference room
Section-C	1. Diagnostic laboratory Unit (Bio chemical lab/Bacteriology lab/Virology lab/pathology & parasitology lab) 2. Epidemiological data processing unit.
Section-D	1.Digital X-ray Unit 2.Ultrasound, E.C.G Unit 3.Physiotherapy unit
Section-E	1.Operation theatre with ancillary 2.Obstetrical room
Section-F	1.Post-operative care room

INDOOR UNIT	
Section-G	1. In-patient Wards with seating arrangement to clients 2. Conveniences
SUPPORTING FACILITIES/DISPOSAL SYSTEMS	
Section-I	1. Isolation wards
Section -J	1. Sewerage Treatment Plant 2. Disposal of medicinal wastes, animal waste, biomaterial waste as per the norms of the State/ Central Government
Section-K	1. Central Oxygen Facility 2. Round the clock Supply of Water, Light 3. Laundry & Sterilizer 4. Maintenance Section 5. Cafeteria

C.EQUIPMENT:

A Veterinary Hospital must have following equipment/instruments/tools/ accessories etc.,:

1. Computers and peripherals with internet connectivity and relevant software for animal/client/Dispensary management.
2. One small animal table for every 10 small animal attendance.
3. Thermometers-Four
4. Stethoscope-Three
5. Ophthalmoscope-one
6. Otoscope-one
7. Laryngoscope-two
8. Veterinary BP apparatus-one
9. Binocular microscope with camera and digital support-one
10. Revolving stools-Eight
11. Specimen collection containers and vacutainers (as per need)
12. Standard staining kits (as per need)
13. Lateral flow kits for common diseases (as per need)
14. Auto analyser for Bio chemical assays-one
15. Glass ware (as per need)
16. Eye speculum-one
17. Percussion hammer-one
18. Urinary catheters (as per need)
19. Examination lights-one
20. Veterinary electric Hair clipper-one
21. Battery operated Veterinary Hair clipper-one
22. Infrared lamp-one
23. Endotracheal tube-two
24. Probang/stomach tubes-two

25. Ambu's respirator-one
26. Suction pump-one
27. Centrifuge-one
28. Restraining devices for dogs, cats, birds etc.,(as per need)
29. Weighing machine with platform-one
30. Baby weighing machine-one
31. X-ray machine unit -one
32. Ultrasound scanning machine unit -one
33. Hydraulic table for small animal major surgeries-one
34. Shadow less lamp with stand for small animal operation theatre-one
35. Instrument trolley-four
36. Surgical Instruments set for major surgeries-two
37. Autoclave-one
38. Refrigerator
39. Surgical instrument set for minor surgical procedures-four
40. Dressing drum (small)-two
41. Dressing drum (large)-two
42. Sterilized hand gloves, surgical caps and facemasks- (as per need)
43. Dystocia set-one
44. I.V. drip stands-ten
45. Sterilizer-one
46. Syringes, IV drip sets, IV cannulas, scalp veins (as per need)
47. White Aprons, Navy Blue aprons and Khaki aprons (as per need)
48. Uninterrupted power supply back up equipment
49. Adequate furniture/instrument cabinets/cup boards/ almarhas etc., for making the Hospital operational
50. Essential equipment/containers/bags for wastes & sharps disposal (as per need)

D.DRUGS, CHEMICALS AND CONSUMABLES :

Essential drugs, chemicals and consumables needs to be provided as per the requirement made by the In-charge of the Veterinary Hospital based on the patient attendance, in-patient services, specialization services provided etc.,

E.MANPOWER:

A Veterinary Hospital for small animals shall have the following personnel in position:

- a).One Registered Veterinary Practitioner and who possess a minimum professional standing of 10 years with M.V.Sc. qualification preferably in any one of the fields of Veterinary Medicine, Surgery, Gynaecology or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology, who shall be the over all in-charge of the Institution.

- b).One Registered Veterinary practitioner and who possess a minimum professional standing of 8 years with M.V.Sc., qualification in the field of Veterinary Medicine or who possesses a minimum professional standing of 14 years in clinical practice.
- c).One Registered Veterinary practitioner and who possess a minimum professional standing of 5 years with B.V.Sc.&A.H. qualification preferably with a Post Graduate Diploma in the field of Veterinary Medicine.
- d). One Registered Veterinary practitioner and who possess a minimum professional standing of 8 years with M.V.Sc., qualification in the field of Veterinary Surgery or who possesses a minimum professional standing of 14 years in clinical practice.
- e).One Registered Veterinary practitioner and who possess a minimum professional standing of 5 years with B.V.Sc.& AH qualification preferably with a Post Graduate Diploma in the field of Veterinary Surgery.
- f).One Registered Veterinary practitioner and who possess a minimum professional standing of 8 years with M.V.Sc., qualification in the field of Veterinary Gynaecology or who possesses a minimum professional standing of 14 years in clinical practice.
- g).One Registered Veterinary practitioner and who possess a minimum professional standing of 5 years with B.V.Sc.& AH, qualification preferably along with Post Graduate Diploma in the field of Veterinary Gynaecology.
- h).One Registered Veterinary Practitioner and who possess a minimum professional standing of 8 years with M.V.Sc. qualification in the field of Veterinary Microbiology or Veterinary Pathology or Veterinary Parasitology or Veterinary Public Health (or) who possesses a minimum professional standing of 14 years in Laboratory practice for Disease diagnosis laboratory and Epidemiological data processing unit.

Besides this there shall be the following para Veterinary and supporting staff :

1. Office staff as per the norms of the State/institution
2. Para Veterinary staff - five
- 3 .Laboratory technician cum Radiographer-one
- 4 .Operation Theatre Technicians-one
5. Pharmacist-one
- 6.Peon cum Lab attendant-one
7. In-patient ward attendants-one
- 8.Ambulance driver-one
9. Record keeper & Store keeper-one
- 10.Sweeper cum attendant-two
- 11.Peon-one
- 12.Electrician cum maintenance mechanic-one

XXII. SUPER SPECIALITY HOSPITAL FOR SMALL ANIMALS

A.FUNCTIONS:

In Super Speciality Hospital for small animals, the super specialists shall provide support service to all cases referred to them or seek their support for diagnosis, prevention, treatment or advice, from the OPD, Veterinary clinics for small animals, Veterinary Dispensaries or Veterinary Hospitals or Veterinary Polyclinics or Veterinary Hospitals for small animals. A Super Speciality Veterinary Hospital shall provide super-specialized services in Surgery & radiology, Clinical medicine, Laboratory

diagnostics, Epidemiology & preventive medicine, Reproduction technology, Gynaecology & obstetrics, Animal Production & Management and other relevant services needed apart from the services provided by the Veterinary Hospital for small animals. It shall provide the super-specialized services in casualty/emergency care services; ICU/Critical Care services; in-patient services round the clock. It shall have a Epidemiological data processing unit for analysing the disease profile data of the patients disease-wise, system-wise, area-wise etc., and it will update the State Veterinary Officer (by whatever name called). Super Speciality Hospital for small animals shall send the dead animal (s), if any, for conducting the Post-mortem and for disposal of Cadavers. There shall be at least one animal ambulance for small animals.

B.INFRASTRUCTURE - LOCATION AND STRUCTURE:

1. Super Speciality Hospital for small animals can be established at any prominent place where the demand for such veterinary services are existing and it shall be with accordance to the law/rules/regulations of the local bodies of the State Government or State Government.

2.The major infrastructure and components of a Super Speciality Hospital for small animals shall be as listed below. Each component shall have adequate space as per the units of the components, workload and location Grade of the city and type (i.e. Grade A/B/C/D) of such city.

Section	Components (Activities)
Section-A	<ol style="list-style-type: none"> 1.Reception 2.Patient/Animal & Client waiting area 3.Casualty/Emergency Section 4. Weighing scale with platform for small canines and Baby weighing scale for puppies/felines etc., 5.Pharmacy 6.Garage for Mobile Clinical unit/animal ambulance 7.Parking facilities
Section-B	<ol style="list-style-type: none"> 1.Administration Office 2. Admission -Record room and Central Server 3. Office of Doctors 4. Out-patient facility 5.Minor surgical unit 6. Injection/Infusion Rooms 7. Store 8. Library-cum-conference room
Section-C	<ol style="list-style-type: none"> 1. Diagnostic laboratory Unit (Bio chemical lab/Bacteriology

	lab/Virology lab/feed analytical lab/pathology & parasitology lab) 2. Epidemiological data processing unit.
Section-D	1.Digital X-ray Unit, Mobile X-ray unit, C arm 2.Ultrasound scanning unit, Colour Doppler unit, Echo Unit, E.C.G. Unit 3.CT scanning unit 4.MRI (optional) 5.Laser therapy unit 6.Dialysis unit 7.Physiotherapy unit 8.Dental unit 9.Ophthalmology unit
Section-E	1.Two Operation theatres with ancillary 2.Obstetrical room 3.I.C.U./Critical Care Unit
Section-F	1.Post-operative care rooms
INDOOR UNIT	
Section-G	1.In-patient Wards with seating arrangement to clients 2. Conveniences
SUPPORTING FACILITIES/DISPOSAL SYSTEMS	
Section-I	1.Isolation wards
Section -J	1.Sewarage Treatment Plant 2.Disposal of medicinal wastes, animal waste, biomaterial waste as per the norms of the State/ Central Government
Section-K	1. Central Oxygen Facility 2.Round the clock Supply of Water, Light 3.Laundry & Sterilizer 4.Maintenance Section 5.Cafeteria

C.EQUIPMENT:

1.The actual requirement and type of equipment, drugs, chemicals and consumables may be decided as per the design and field of services to be provided by a Super Speciality Hospital for small animals.

2.A Super Speciality Hospital for Small animals must have following equipment/instruments/tools/ accessories etc., Section-wise:

Section	Minimum Equipment/units/instruments/ accessories/tools etc., required at different components
Section-A	1.Reception: Computers and peripherals with internet connectivity and relevant software for animal/client/Hospital management.

	<p>2.Patient/Animal & Client waiting area i.Adequate seating area for clients along with their animals 3.Casualty/Emergency Section: (i). Emergency crash cart-one with all essentials (ii). Small animal Stretchers-four (iii). Oxygen delivery unit-at two points (iv). Pulse Oximeter-one (iv). Ventilator assistance-one (v). Endotracheal tubes-two (vi). All other equipment required in emergencies</p> <p>4.Weighing scale with platform and Baby weighing digital machine</p> <p>5.Garage: (i).Mobile Clinical unit</p>
Section-B	<p>1.Administration Office: (i). Adequate furniture & seating arrangement for the staff (ii). Adequate storage space for keeping the files of office 2.Admission-Record room and Central Server: (i). Computers & peripherals with relevant software for managing the records in electronic form (ii). Adequate furniture to keep & maintain physical records</p> <p>4.Office of Doctors: (i). Adequate furniture & seating arrangement for Registered Veterinary Pracitioners</p> <p>4. Out-Patient Department: Computers and peripherals with internet connectivity and relevant software for animal/client/Hospital management.</p> <p>(i). One table for every 10 small animal attendance. (ii). Thermometers-Four (iii). Stethoscope-Three (iv). Ophthalmoscope-one (v). Electronic Otoscope -one (vi). Laryngoscope-two (vii).Veterinary BP apparatus-one (viii). Revolving stools-Eight (ix). Specimen collection containers and vacutainers (as per need) (x). Percussion hammer-one (xi). Urinary Catheters- (as per need) (xii).Veterinary electric Hair clipper-one (xiii). Battery operated Veterinary Hair clipper-one</p>

	<p>(xiv). Infrared lamp-one (xv). Stomach tube-one (xvi). Examination lamp-two (xvii). Dressing drum (small)-two (xviii). I.V. drip stands-five (xix). Sterilizer-one (xx). Syringes, IV drip sets, IV cannulas, scalp veins (as per need) (xxi). Instrument trolley- four (xxii). Essential equipment/containers/bags for wastes & sharps disposal (as per need)</p> <p>5.Minor surgical unit (i). Adjustable stainless steel top wet tables-two (ii). Instrument sets-four (iii).Dressing drums (small)-two</p> <p>6. Injection/Infusion Rooms (i). I.V.drip stands-eight (ii). Syringes, IV drip sets, IV cannulas, scalp veins (as per need)</p> <p>7. Store i.Required number of racks/storage cabinets</p> <p>8. Library-cum-conference room (i). Basic Text books in all branches of Veterinary Science (ii). Specialized & super specialized books in all branches of Veterinary Science (iii).Current journals related to veterinary practice-at least five (iv).Computer and peripherals with internet connection for e-books (v). Audio visual aids (vi).Projector (vii). Video conferencing equipment</p>
Section-C	<p>Diagnostic laboratory Unit (Bio chemical lab/Bacteriology lab/Virology lab/pathology & parasitology lab)</p> <p>1.All the equipment required for conducting following tests: (i) Urine – complete urine exam (ii) Faecal sample – Parasitic/protozoal exam (iii) Blood sample- Protozoa, microfilaria, Haematology, CBP (iv) Biochemical tests-LFT, KFT, Blood sugar, Thyroid profile, serum electrolytes etc., (v) Skin scrapping – microscopic ecto parasites</p>

	<p>(vi) Microbial culture and sensitivity. (Saliva, urine, pus, uterine discharge/any discharges etc.)</p> <p>(vii).Histology or Histopathology of the tissues/biopsy material</p> <p>(viii).Assessing the antibody titres</p> <p>(ix) Detection of infectious diseases Leptospirosis, Canine Distemper etc., by following accurate diagnostic procedures like ELISA/PCR/other methods</p> <p>(x). Food analysis for Type of toxins and their levels</p> <p>(xi). Water analysis for hardness, bacterial load, type of toxin & levels etc.,</p> <p>2..Adequate furniture and aids for Epidemiological data processing unit.</p> <p>3.Computers and peripherals with internet connectivity and relevant software for Laboratory management.</p>
Section-D	<p>i. Digital X-ray Unit-one</p> <p>ii. Mobile X-ray unit-one</p> <p>iii. C arm-one</p> <p>iv. Ultrasound scanning Unit-one</p> <p>v. Colour Doppler unit-one</p> <p>vi. Echo unit-one</p> <p>vii. ECG unit-one</p> <p>viii.CT scan unit-one</p> <p>ix. MRI-one (optional)</p> <p>x. Laser therapy unit-one</p> <p>xi. Dialysis unit-one</p> <p>xii. Physiotherapy Unit-one</p> <p>xiii.Dental unit-one</p> <p>xiv. Ophthalmology unit</p>
Section-E	<p>1.two operation theatre with ancillary table/Mayo table -two</p> <p>ii. Shadowless lamp with stand-two</p> <p>iii.Instrument trolleys-four</p> <p>iv.Drums for autoclaving-four</p> <p>v.Instrument sets-six</p> <p>vi.Cautery apparatus-two</p> <p>vii.Suction pump-two</p> <p>viii.Multipara vitals monitor-two</p> <p>ix.Gaseous anaesthesia unit-two</p> <p>x.Endotracheal tubes-four</p> <p>xi.Oxygen supply units-two</p> <p>xii.Back-up generator-one</p> <p>xiii.Sterilized/disposable hand gloves, surgical caps and facemasks-</p> <p>i. i.Operation</p>

	(as per need) xiv.IV Drip stand-two xv.Laparoscopic unit-one xvi.Ventilator Assistance-one 2.Obstetrical room i.Whelping set-two ii Proper Bedding iii.IV drip stands-two iv.All the disposables required
Section-F	1.Post-operative care room (i). Required number of tables and I.V.drip stands (ii).Client seating arrangement (iii).Essential disposables
Section-G	1.In-patient Wards (i). Required number of tables and I.V.drip stands (ii).Client seating arrangement (iii).Essential disposables
Section-H	1.Isolation wards (i). Required number of tables/rooms and I.V.drip stands (ii).Essential disposables
Section -I	1.Sewarage Treatment Plant unit 2.Required containers/bags for disposal of medicinal wastes, animal waste, biomaterial waste as per the norms of the State/ Central Government
Section-J	1. Central Oxygen Facility unit 2.Machinery/power generator for round the clock Supply of Water, Light 3.Laundry equipment 4. Sterilizer

D.DRUGS, CHEMICALS AND CONSUMABLES :

Essential drugs, chemicals and consumables needs to be provided as per the requirement made by the In-charge of the Super Special Hospital for small animals based on the patient attendance, in-patient services, super-specialization services provided etc.,

E.MANPOWER:

Super Speciality Hospital for small animals shall have the following personnel in position:

- i. One Registered Veterinary Practitioner and who possess a minimum professional standing of 12 years with M.V.Sc., and Phd or equivalent doctoral qualification in any one of the fields of Veterinary Medicine,

- Surgery, Gynaecology or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology, who shall be the over all in-charge of the Hospital.
- ii. One Registered Veterinary practitioner and who possess a minimum professional standing of 10 years with M.V.Sc., and Phd or equivalent doctoral qualification in the field of Veterinary Medicine or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
 - iii. One Registered Veterinary practitioner and who possess a minimum professional standing of 8 years with M.V.Sc., qualification in the field of Veterinary Medicine or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
 - iv. One Registered Veterinary practitioner and who possess a minimum professional standing of 10 years with M.V.Sc., and Phd or equivalent doctoral qualification in the field of Veterinary Surgery or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/ Veterinary Gynaecology/Reproductive technology.
 - v. One Registered Veterinary practitioner and who possess a minimum professional standing of 8 years with M.V.Sc., qualification in the field of Veterinary Surgery or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
 - vi. One Registered Veterinary practitioner and who possess a minimum professional standing of 10 years with M.V.Sc., and Phd or equivalent doctoral qualification in the field of Veterinary Gynaecology or who possesses a minimum professional standing of 20 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
 - vii. One Registered Veterinary practitioner and who possess a minimum professional standing of 8 years with M.V.Sc., qualification course in the field of Veterinary Gynaecology or who possesses a minimum professional standing of 14 years in clinical practice in Veterinary Medicine/Veterinary Surgery/Veterinary Gynaecology/Reproductive technology.
 - viii. One Registered Veterinary Practitioner and who possess a minimum professional standing of 10 years with M.V.Sc., and Phd or equivalent doctoral qualification in the field of Veterinary Microbiology or Veterinary Pathology or Veterinary Parasitology or Veterinary Public Health or who possesses a minimum professional standing of 20 years in Laboratory/clinical practice for Disease diagnosis laboratory and Epidemiological data processing unit.

Besides this there shall be the following para Veterinary and supporting staff :

1. Office staff as per the norms of the State/institution

2. Para Veterinary staff - seven
3. Laboratory technician cum Radiographer-one
4. Operation Theatre Technicians-two
5. Pharmacist-one
6. Peon cum Lab attendant-one
7. In-patient ward attendants-two
8. Ambulance driver-one
9. Record keeper & Store keeper-one
10. Sweeper cum attendant-three
11. Peon-three
12. Electrician cum maintenance mechanic-one

XXIII. ANIMAL DISEASE DIAGNOSTIC CENTER

A. FUNCTIONS:

Animal Disease Center may be an integral part of any Veterinary Institution or an individual entity established by any individual/agency/Non-Governmental Organization/State or Central Government/any Government agency.

1. It shall conduct following tests:
 - (i) Urine – complete urine exam
 - (ii) Faecal sample – Parasitic/protozoal exam
 - (iii) Blood sample- Protozoa, microfilaria, Haematology, CBP
 - (iv) Biochemical tests-LFT, KFT, Blood sugar, Thyroid profile, serum electrolytes etc.,
 - (v) Skin scrapping – microscopic ecto parasites
 - (vi) Milk - CMT, culture and sensitivity
 - (vii). Somatic cell count in Milk
 - (viii) Microbial culture and sensitivity. (Saliva, urine, pus, uterine discharge/any discharges etc.)
 - (x).Assessing the antibody titres
 - (xi).Isolation and sero-typing of Bacteria
 - (xii) Detection of infectious diseases like Brucellosis, TB, Anthrax, Pasteurellosis, PPR, FMD, Blue Tongue etc., by suitable diagnostic procedures for accuracy.
 - (xiv). X-ray
 - (xiii). Ultra sound scanning
 - (xiv).ECG
 - (xiii). Feed and Fodder analysis Dry matter, Moisture, Energy, Crude protein, TDN, Macro Mineral composition, fungi, bacterial load etc.,
 - (xiv). Water analysis for hardness, bacterial load etc.,

1. It shall have Epidemiological data processing unit for analysing the disease profile data of the patients disease-wise, system-wise, area-wise etc.,

B. INFRASTRUCTURE - LOCATION AND STRUCTURE:

Animal Disease Diagnostic Center shall have adequate constructed space for:

1. Diagnostic laboratory Unit (Bio chemical lab/Bacteriology lab/Virology lab/feed analytical lab/pathology & parasitology lab)

2. Digital X-ray Unit
3. Ultrasound scanning unit and E.C.G Unit
4. Epidemiological data processing unit.

C.EQUIPMENT:

1.The actual requirement and type of equipment, chemicals and consumables may be decided as per the design and type of tests to be conducted by the Animal Disease Diagnostic Center.

2.Animal Disease Center must have standard equipment/ instruments/tools/ accessories etc., for conducting following tests:

- (i) Urine – complete urine exam
- (ii) Faecal sample – Parasitic/protozoal exam
- (iii) Blood sample- Protozoa, microfilaria, Haematology, CBP
- (iv) Biochemical tests-LFT, KFT, Blood sugar, Thyroid profile, serum electrolytes etc.,
- (v) Skin scrapping – microscopic ecto parasites
- (vi) Milk - CMT, culture and sensitivity
- (vii). Somatic cell count in Milk
- (viii) Microbial culture and sensitivity. (Saliva, urine, pus, uterine discharge/any discharges etc.)
- (ix).Assessing the antibody titres
- (x).Isolation and sero-typing of Bacteria
- (xi) Detection of infectious diseases like Brucellosis, TB, Anthrax, Pasteurellosis, PPR, FMD, Blue Tongue etc., by suitable diagnostic procedures for accuracy.
- (xii). Feed and Fodder analysis Dry matter, Moisture, Energy, Crude protein, TDN, Macro Mineral composition, fungi, bacterial load etc.,
- (xiii). Water analysis for hardness, bacterial load etc.,
- (xiv). Digital X-ray
- (xv). Ultra sound scanning
- (xvi).ECG

3.Adequate furniture and aids for Epidemiological data processing unit.

4.Computers and peripherals with internet connectivity and relevant software for Laboratory management.

D.DRUGS, CHEMICALS AND CONSUMABLES :

Essential drugs, chemicals and consumables needs to be provided as per the requirement made by the In-charge of the Center based on the type of samples received.

E.MANPOWER:

Animal Disease Diagnostic Center shall have the following personnel in position:

- a). One Registered Veterinary Practitioner and who possess a minimum professional standing of 8 years with M.V.Sc., qualification in the field of Veterinary Microbiology or Veterinary Pathology or Veterinary Parasitology

or Veterinary Public Health or who possesses a minimum professional standing of 14 years in Laboratory/clinical practice.

- b). Trained lab technicians-two
- c). Peon cum assistant –one
- d). Sweeper cum Safaiwala-one

XXIV. ANIMAL DISEASE DIAGNOSTIC LABORATORY

A.FUNCTIONS:

Animal Disease laboratory may be an integral part of any Veterinary Institution or an individual entity established by any individual/agency/Non-Governmental Organization/State or Central Government/any Government agency.

1.It shall conduct following tests:

- (i) Urine – complete urine exam
- (ii) Faecal sample – Parasitic/protozoal exam
- (iii) Blood sample- Protozoa, microfilaria, Haematology, CBP
- (iv) Biochemical tests-LFT, KFT, Blood sugar, Thyroid profile, serum electrolytes etc.,
- (v) Skin scrapping – microscopic ecto parasites
- (vi) Milk - CMT, culture and sensitivity
- (vii). Somatic cell count in Milk
- (viii) Microbial culture and sensitivity. (Saliva, urine, pus, uterine discharge/any discharges etc.)
- (ix).Histology or Histopathology of the tissues/biopsy material
- (x).Assessing the antibody titres
- (xi).Assessing antigen titres
- (xi) Isolation and sero-typing of bacteria
- (xii) Detection of infectious diseases like TB, Anthrax, Pasteurellosis, PPR, Brucellosis, IBR,FMD, FMD DIVA, Blue Tongue , Pox etc., by following accurate diagnostic procedures like ELISA/PCR/other methods
- (xiii). Feed and Fodder analysis Dry matter, Moisture, Energy, Crude protein, TDN, ADF & NDF, Macro & Trace Mineral composition, Type of toxins & levels, fungus, bacterial load etc.,
- (xiv). Water analysis for hardness, bacterial load, type of toxin & levels etc.,
- (xv).X-ray
- (xvi).Ultra sound scanning
- (xv). Doppler test
- (xvi).CT Scanning
- (xvii).MRI scanning (optional)

1. It shall have a Epidemiological data processing unit for analysing the disease profile data of the patients disease-wise, system-wise, area-wise etc.,

B.INFRASTRUCTURE - LOCATION AND STRUCTURE:

Animal Disease Diagnostic Laboratory adequate constructed space for:

1. Diagnostic laboratory Unit (Bio chemical lab/Bacteriology lab/Virology lab/feed analytical lab/pathology & parasitology lab)

2. Digital X-ray Unit, Mobile X-ray unit, C arm
3. Ultrasound scanning unit, Colour Doppler unit
4. ECG unit, Echo Unit
5. CT scanning unit
6. MRI scanning unit (optional)

C.EQUIPMENT:

1.The actual requirement and type of equipment, chemicals and consumables may be decided as per the design and type of tests to be conducted by a Animal Disease Diagnostic Laboratory.

2.Animal Disease Diagnostic Laboratory must have standard equipment/ instruments/tools/ accessories etc., for conducting following tests:

- (i) Urine – complete urine exam
- (ii) Faecal sample – Parasitic/protozoal exam
- (iii) Blood sample- Protozoa, microfilaria, Haematology, CBP
- (iv) Biochemical tests-LFT, KFT, Blood sugar, Thyroid profile, serum electrolytes etc.,
- (v) Skin scrapping – microscopic ecto parasites
- (vi) Milk - CMT, culture and sensitivity
- (vii). Somatic cell count in Milk
- (viii) Microbial culture and sensitivity. (Saliva, urine, pus, uterine discharge/any discharges etc.)
- (ix).Histology or Histopathology of the tissues/biopsy material
- (x).Assessing the antibody titres
- (xi).Assessing antigen titres
- (xi) Isolation and sero-typing of bacteria
- (xii) Detection of infectious diseases like TB, Anthrax, Pasteurellosis, PPR, Brucellosis, IBR,FMD, FMD DIVA, Blue Tongue , Pox etc., by following accurate diagnostic procedures like ELISA/PCR/other methods
- (xiii). Feed and Fodder analysis Dry matter, Moisture, Energy, Crude protein, TDN, ADF & NDF, Macro & Trace Mineral composition, Type of toxins & levels, fungus, bacterial load etc.,
- (xiv). Water analysis for hardness, bacterial load, type of toxin & levels etc.,
- (xv).Digital X-ray Unit-one
- (xvi).Mobile X-ray unit-one
- (xvii).C arm-one
- (xviii).Ultrasound scanning Unit-one
- (xix).Colour Doppler unit-one
- (xx).Echo unit-one
- (xxi).ECG unit-one
- (xxii).CT scan unit-one
- (xxiii).MRI-one (optional)

3.Adequate furniture and aids for Epidemiological data processing unit.

4.Computers and peripherals with internet connectivity and relevant software for Laboratory management.

D.DRUGS, CHEMICALS AND CONSUMABLES:

Essential drugs, chemicals and consumables needs to be provided as per the requirement made by the In-charge of the Super Special Veterinary Hospital based on the patient attendance, in-patient services, super-specialization services provided etc.,

E.MANPOWER:

Animal Disease Diagnostic Laboratory shall have the following personnel in position:

- a). One Registered Veterinary Practitioner and who possess a minimum professional standing of 10 years with M.V.Sc., along with super specialization qualification in the field of Veterinary Microbiology or Veterinary Pathology or Veterinary Parasitology or Veterinary Public Health or who possesses a minimum professional standing of 20 years in Laboratory/clinical practice.
- b). One Registered Veterinary Practitioner with M.V.Sc., qualification in the field of Veterinary Microbiology or Veterinary Pathology or Veterinary Parasitology or Veterinary Public Health or who possesses a minimum professional standing of 14 years in Laboratory/clinical practice.
- c). Trained lab technicians-four
- d). Peon cum assistant –one
- e). Sweeper cum Safaiwala-one

XXV. EMERGENCY MOBILE VETERINARY SERVICE UNIT

'Emergency Mobile Veterinary Services' are to be provided by the State/UT Government through a central call-center with a toll free number for addressing the emergencies in animal health either by providing on site aid to the animal or lifting the animal from the site to nearest Veterinary Hospital/Veterinary Polyclinic/Super Speciality Veterinary Hospital for relief of the animal, as the case may be, under the supervision of a registered Veterinary Practitioner. State/UT Government shall establish a call center with relevant software, personnel, toll free number and mobile Veterinary Service Units for the purpose.

A.FUNCTIONS:

- i.cater the emergency health care of animals round the clock.
- ii.will provide treatment for medical/surgical/gynaecological emergencies after thorough examination of the patient and the diagnosis by the Registered Veterinary Practitioner.
 - d. will perform appropriate tests on the spot for the diagnosis, if required.
 - e. will provide emergency first aid before referring and shifting to the nearby Veterinary Hospital or Veterinary Polyclinic or Super Speciality Veterinary Hospital, if the patient requires further assistance.

B.INFRASTRUCTURE - LOCATION AND STRUCTURE:

Adequate space for establishing a call-center at a suitable place.

C.EQUIPMENT:

1. Adequate furniture and required number of computers & peripherals with required software and the supporting devices for making the call center operational.
2. Required number of Mobile Ambulatory vans (specifically fabricated for the purpose) a suitable hydraulic platform for lifting the large animal
3. Each Mobile Ambulatory van shall be provided with the following equipment for providing emergency on-site aid to the animals:
 1. Thermometer-two
 2. Stethoscope-one
 3. Veterinary BP apparatus-one
 4. Specimen collection containers and vacutainers (as per need)
 5. Lateral flow kits for common diseases (as per need)
 6. Glass ware (as per need)
 7. Eye speculum-one
 8. Vaginal speculum-one
 9. Percussion hammer-one
 10. Urinary catheters (as per need)
 11. Battery operated Veterinary Hair clipper-one
 12. Trocar & cannula for large ruminants-one
 13. Trocar & cannula for small ruminants-one
 14. Endotracheal tube-two
 15. Probang/stomach tubes-two
 16. Ambu's respirator-one
 17. Suction pump-one
 18. Restraining devices for large & small ruminants, dogs, cats, birds etc., (as per need)
 19. Instrument trolley-one
 20. Surgical instrument set for minor surgical procedures-one
 21. Dressing drum (large)-one
 22. Mini Oxygen delivery unit
 23. Sterilized hand gloves, surgical caps and facemasks- (as per need)
 24. Rectal examination gloves (as per need)
 25. Gum Boots-two pairs
 26. Dystocia set-one
 27. Ready to use diagnostic kits
 28. Emergency drug kit-one
 29. I.V. drip stands-one
 30. Syringes, IV drip sets, IV cannulas, scalp veins (as per need)
 31. Focus light for improved visibility for examination of the Patient
 32. White Aprons, Navy Blue aprons (as per need)
 33. Essential containers/bags for wastes & sharps disposal (as per need)

D.DRUGS, CHEMICALS AND CONSUMABLES:

Essential drugs, chemicals and consumables needs to be provided as per the requirement.

E.MANPOWER:

- a) Registered Veterinary Practitioner at the basic level designation (by whatever name called) in the A.H. Department will be the in charge of the Mobile Veterinary Service Unit.
- b) One trained para veterinary personnel (by whatever name called)
- c) Adequate number of personnel to monitor and operate Call-center.

@@@@