



Practice Facility Annual Declaration Form

Date

The Designated Registrant is responsible for submitting the Annual Declaration form for the previous year by January 31st of the following year. The accompanying Self-Assessment Form¹ that assesses the previous year must also be completed and kept in the facility to be available upon request. In the event of a Facility Inspection, the Declaration Form and Self-Assessment Form must be submitted to the CVBC office for review by the inspector. In the case of a new facility or addition of new scopes of practice, please fill out the forms as they relate to the anticipated services.

FACILITY INFORMATION

Name		Email Address	
Street Address		Phone Number	
Mailing Address (if different)	Same as Street Address	Website	
Controlled Drug Shipment (if different)	Same as Street Address	Facility Owner and Contact	
Designated Registrant		Other Veterinarians (including part-time and contract)	
Number of RVTs		Number of Other Employees	

¹ See also [Self-Assessments – College of Veterinarians of BC \(cvbc.ca\)](https://www.cvbc.ca/self-assessments)



Practice Facility Annual Declaration Form

CVBC by-law 3.2 mandates an online registry of all accredited practice facilities be maintained by the Registrar. For the Facility Registry, publication of the street address is optional. The default setting is to not list the street address unless given permission by the DR to do so.

Please choose one of the following for your facility's publication:

I would like to have all my practice facility's business information listed.

I do not want to list the street address of my practice facility.

At times, veterinary distributors will contact the CVBC to confirm the accredited address of a facility. Please mark below if you agree to us sharing that information with them.

Yes, you may share my address with a veterinary distributor/pharmacy.

No, do not share my information without contacting me first.

Please note: Not all information required by veterinary distributors for shipment of supplies and pharmaceuticals to practice facilities is available on the public online registry. To assist practice facilities, CVBC shares information regarding facility address, designated registrant information, and confirms the facility's accreditation status with AVP, Summit, WDDC and CDMV. Please advise the CVBC at facilities@cvbc.ca if you do not consent to the CVBC sharing this information with veterinary distributors.

GEOGRAPHIC LOCATION ²

Please fill in the [physical location](#) of your Facility (not the areas covered, please check one box).

BRITISH COLUMBIA REGIONAL DISTRICT

Multiple selections are possible:

Or, Mobile with Home base outside of BC
(describe)

² For more details, see [Regional District Illustrative Maps - Province of British Columbia \(gov.bc.ca\)](#)



FACILITY TYPE

Fill in all Facility Type categories that apply to the practice. See Appendix for description of terms.

FACILITY CATEGORY	DETAILS
Fixed/Self-standing	
Ambulatory/Mobile	Public office Non-public office Practice includes both ambulatory and self-standing hospital facilities Other (describe)
Emergency	
Consulting Practice	
Philanthropic	
Specialist (Board Certification)	List the specialities:



ANIMAL SPECIES

Fill in all categories/species seen by the practice.

CATEGORY	SPECIES												
Companion animal	<table border="0"> <tr> <td>Dogs</td> <td>Pet ferrets</td> </tr> <tr> <td>Cats</td> <td>Pet fish/amphibians</td> </tr> <tr> <td>Pocket pets</td> <td>Small exotic species</td> </tr> <tr> <td>Pet birds</td> <td>Large animal companions except equine</td> </tr> <tr> <td>Pet rabbits</td> <td>Other (describe)</td> </tr> </table>	Dogs	Pet ferrets	Cats	Pet fish/amphibians	Pocket pets	Small exotic species	Pet birds	Large animal companions except equine	Pet rabbits	Other (describe)		
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Cats	Pet fish/amphibians												
Pocket pets	Small exotic species												
Pet birds	Large animal companions except equine												
Pet rabbits	Other (describe)												
Equine	<table border="0"> <tr> <td>Horses</td> </tr> <tr> <td>Donkeys</td> </tr> <tr> <td>Mules</td> </tr> <tr> <td>Other (describe)</td> </tr> </table>	Horses	Donkeys	Mules	Other (describe)								
Horses													
Donkeys													
Mules													
Other (describe)													
Large animal	<table border="0"> <tr> <td>Alpacas</td> <td>Elk</td> </tr> <tr> <td>Beef cattle</td> <td>Goats</td> </tr> <tr> <td>Camels</td> <td>Llamas</td> </tr> <tr> <td>Pet birds</td> <td>Sheep</td> </tr> <tr> <td>Dairy Cows</td> <td>Swine</td> </tr> <tr> <td>Deer</td> <td>Other (describe)</td> </tr> </table>	Alpacas	Elk	Beef cattle	Goats	Camels	Llamas	Pet birds	Sheep	Dairy Cows	Swine	Deer	Other (describe)
Alpacas	Elk												
Beef cattle	Goats												
Camels	Llamas												
Pet birds	Sheep												
Dairy Cows	Swine												
Deer	Other (describe)												



ANIMAL SPECIES

Fill in all categories/species seen by the practice.

CATEGORY	SPECIES
Other animals	Poultry Aquaculture species Honey bees Wildlife species Other avian species Other aquatic animal species Other terrestrial animal species Other (describe)



VETERINARY SERVICES

Please fill in all Veterinary Services categories that apply to your practice. See Appendix for description of terms.

CATEGORY	SUBTYPE
Physical examination of the patient	
Patient treatments	
Medical procedures	
Preparation, packaging and/or processing biological samples	
Obtaining images of diagnostic quality	Main X-ray Dental X-ray Endoscopy Fluoroscopy MRI CT Scan Particle Accelerator Ultrasound Nuclear Medicine
Storage, handling and dispensing of drugs and biologicals	General Pharmacy Controlled drugs Radioisotopes Chemotherapeutic agents
Anesthetic procedures	
Surgical procedures	Minor (laceration, small lumps, etc.) Spay/Neuter General Orthopedic
Dental procedures	General Dental Procedures Advanced Dental Procedures



CATEGORY	SUBTYPE
Emergency services <i>(only check if accredited as per Section 13 of Schedule D)</i>	
Ambulatory/Mobile	House call Farm call Mobile clinic Mobile – euthanasia only Other (describe)
Patient confinement and accommodation	Out patient only Overnight Boarding
Complementary/ alternative/ integrative medicine	Acupuncture Chiropractic Homeopathy Laser Rehabilitation TCM Other (describe)
Telemedicine <i>(See CVBC Guidelines Telemedicine)</i>	
Population Medicine	Herd Flock Shelter Breeder Aquaculture Apiculture Aviary Wildlife Other (describe)
Other (describe)	



DECLARATION STATEMENT

I, _____ (please type your name), the Designated Registrant of the above-named practice hereby sign this undertaking declaring that I have read and understood my duties under section 3.6 of Part 3 of the CVBC Bylaws³, and without limiting the generality of section 3.6, I understand that:

1. The form above has been filled out to the best of my knowledge and in an accurate manner.
2. I will promptly notify the CVBC of any of the following noted in Part 3.6(9), those being a substantial(a) change in the scope of practice of the facility, a significant(b) or material renovation, a change of address or location, a change in Designated Registrant, a closure, a significant loss of controlled drugs or records, and/or a change of ownership.
3. I understand anything reported under 3.6(9) may be conveyed to the PFAC for review, and an inspection may be directed as per 3.18(1).

Designated Registrant's Signature:

a. Substantial: One that leads to additional Accreditation Standards and/or related PPS being applicable. This would include, but is not limited to, the addition of veterinary service categories as per Standard 1, the request to order controlled drugs when not previously accredited for such, the addition of a new species group to the services offered, or the addition of major imaging equipment (other than endoscopy and ultrasound).

b. Significant: A significant or material renovation would be structural alterations that change the existing floor plan or expand the space, with or without a change to scope of practice, ie. Additions or subtractions of walls, add-on structure to an existing facility, addition of a fixed facility to previously mobile only facility. Painting and changes to fixtures would not be considered significant.

³ By Laws Part 3 [Accreditation and Naming](#)



APPENDIX - TERMS RELATED TO SCOPE OF PRACTICE

Introduction

[Bylaws Part 3](#) and [Schedule D](#) describe facilities and scope of practice. This Appendix presents the revised terminology for “Facility Type” and “Veterinary Services” to assist the Designated registrants with the revised Declaration Form.

Questions or comments may be directed to the CVBC Facilities department at facilities@cvbc.ca. Detailed definitions are on the CVBC website here.

FACILITY TYPE

Schedule D defines several “facility types”:

- Self-standing facility: “Non-ambulatory facility within, on or from which veterinary medicine is conducted.”
- Ambulatory facility: “Any vehicle in, on or from which veterinary services are provided, and includes the permanent base of operations.”
- Primary Care facility: “A facility owned and/or operated by a registrant from which a patient may be referred for emergency treatment.”
- Emergency Facility: “A veterinary medical facility whose primary function is receiving, treating and monitoring of emergency patients during specified hours of operation, with a veterinarian and sufficient staff in attendance at all hours of operation and sufficient instrumentation, medications, and supplies available to provide appropriate care.”
- Specialist Facility: “Facility owned and/or operated by a Specialty Private Practice member to which a patient may be referred for treatment.”
- Tertiary Care Facility: “A Center, e.g. of a specialty critical care practice.”

By Laws Part 3 defines two special cases of practice categories:

- Consulting Practice: “consulting practice” means a veterinary practice in which a registrant provides veterinary services to other registrants or practice facilities, including online, and does not have its own premise, structure, vehicle or facility.
- Philanthropic practice: “philanthropic practice” means the humanitarian provision of veterinary services... Part 3 describes the process for “Philanthropic accreditation” of a facility.

⁴ See also [Self-Assessments – College of Veterinarians of BC \(cvbc.ca\)](#)



The following Facility Type categories have been added/updated:

- A subcategory for practices that encompass both ambulatory and self-standing hospital facilities: “Where the practice includes both ambulatory and self-standing hospital facilities, equipment and supplies may be shared between the fixed and ambulatory practices so long as patient needs are met in a timely manner, including emergencies, and standards for both fixed and ambulatory facilities are met.”
- Subcategories for type of office associated with an ambulatory/mobile practice. These include: a public office which the public can access to pick up medications or drop off diagnostic samples; and a non-public office for administration where no clients are seen.
- Category for Veterinary Specialists’ disciplines and species specialization under the Specialists Facilities. An increasingly diverse range of boarded Veterinary Specialists are practicing in BC.

VETERINARY SERVICES

Schedule D describes veterinary services: “...veterinary services which may include but are not limited to:

- Physical examination of the patient.
- Patient treatments.
- Medical procedures.
- Preparation, packaging and/or processing biological samples.
- Obtaining images of diagnostic quality.
- Storage, handling and dispensing of drugs and biologicals.
- Anesthetic procedures.
- Surgical procedures.
- Dental procedures.
- Emergency services.
- Ambulatory services.
- Patient confinement and accommodation.

Various procedures are further defined and/or detailed in Schedule D (e.g., dental procedures and complementary and integrative medicine) The following Veterinary Service categories have been added/updated:

- Complementary or alternative medicine: “A group of treatments or therapeutic options that lie outside the mainstream of conventional medicine.” These could also include Integrative Medicine: “The diagnosis and treatment involving the combination of complementary and conventional medicine.”
- Mobile clinic (under the category “Ambulatory services”): “A temporary, non accredited, third party hosted location to which clients come to meet with the registrant for veterinary services.”
- Mobile-euthanasia only (under “Ambulatory services”): “A limited scope mobile service with focus on security of control drugs and proper care of remains.”



- Telemedicine services
- Population Medicine: “includes but is not limited to herd health, shelter medicine, wildlife, small animal breeders’ animals, aquaculture and apiculture”
- Other (describe) services: to capture unanticipated and/or future veterinary services.