

TITLE 16 OCCUPATIONAL AND PROFESSIONAL LICENSING
CHAPTER 25 VETERINARY MEDICINE PRACTITIONERS
PART 9 MINIMUM STANDARDS

16.25.9.1 ISSUING AGENCY: New Mexico Board of Veterinary Medicine.
[16.25.9.1 NMAC - Rp 16.25.9.1 NMAC, 01-17-2014]

16.25.9.2 SCOPE: Applies to all veterinary facilities operating in the state of New Mexico where the practice of veterinary medicine regularly occurs. NMSA 1978, Section 61-14-2(B).
[16.25.9.2 NMAC - Rp 16.25.9.2 NMAC, 01-17-2014]

16.25.9.3 STATUTORY AUTHORITY: NMSA 1978, Section 61-14-5(F) and (J); Section 61-14-13.
[16.25.9.3 NMAC - Rp 16.25.9.3 NMAC, 01-17-2014]

16.25.9.4 DURATION: Permanent.
[16.25.9.4 NMAC - Rp 16.25.9.4 NMAC, 01-17-2014]

16.25.9.5 EFFECTIVE DATE: 01-17-2014 unless a later date is cited at the end of a section.
[16.25.9.5 NMAC - Rp 16.25.9.5 NMAC, 01-17-2014]

16.25.9.6 OBJECTIVE: To govern minimum standards for the practice of veterinary medicine.
[16.25.9.6 NMAC - Rp 16.25.9.6 NMAC, 01-17-2014]

16.25.9.7 DEFINITIONS: [RESERVED]
[16.25.9.7 NMAC - Rp 16.25.9.7 NMAC, 01-17-2014]

16.25.9.8 GENERAL STANDARDS:

- A. The delivery of veterinary care shall be provided in a competent and humane manner.
- B. Veterinary medicine shall be performed in a manner compatible with current veterinary medical practice.
- C. A valid veterinarian-client-patient relationship (VCPR) must be established when delivering veterinary care. See VCPR as defined by the New Mexico Veterinary Practice Act 61-14-2-J (1), (2), (3), and (4).
 - (1) A VCPR cannot be established by telephonic, computer, internet or other electronic communications; however, a New Mexico-licensed veterinarian may provide or arrange for consulting services for their clients using the described electronic communication methods.
 - (2) The veterinarian writing a veterinary food directive (VFD) order for premises in New Mexico must be a New Mexico-licensed veterinarian and present on the premises within the six (6) months preceding the issuance of the order. All elements of the federal rules to issue a VFD order must be met and the issuing veterinarian must provide supporting documentation of the visit to the premises including medical records within fourteen (14) days of a request from the board to provide such documentation.
- D. The board of veterinary medicine shall require periodic inspections of all veterinary facilities to monitor compliance with these standards.
 - (1) Standards depend upon the nature, scope, and limitations of the practice as defined by the practice manager and approved by the board. However, in no case shall standards of cleanliness, hygiene, and sanitation be violated.
 - (2) Inspections shall be conducted by the facility inspector designated by the board.
 - (3) Facilities are subject to inspection at any time during the facility's normal hours of business.

[16.25.9.8 NMAC - Rp 16.25.9.8 NMAC, 01-17-2014; A, 05-08-2016]

16.25.9.9 PREMISES - GENERAL REQUIREMENTS:

- A. All premises where veterinary medicine including its various branches is being practiced and all instruments, equipment, apparatus, and apparel used in connection with those practices, shall be kept clean and sanitary and shall conform to the standards specified for different types of facilities.

B. 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.

C. Every veterinary facility shall maintain the following:

- (1) A sanitary environment to include the proper routine disposal of waste material, proper sterilization or sanitation of all equipment used in diagnosis or treatment, and adequate storage to provide a neat and orderly appearance;
- (2) An adequate library of textbooks, journals or other current veterinary reference materials, readily available on the premises or available through electronic access;
- (3) Proper storage and environmental control for all medicines and biologics based on the manufacturer's recommendations;
- (4) Properly maintained records; and
- (5) Legally accessible methods for the disposal of deceased animals and infectious waste.

[16.25.9.9 NMAC - Rp 16.25.9.9 NMAC, 01-17-2014]

16.25.9.10 PREMISES - FIXED VETERINARY FACILITIES:

A. When premises are closed, an answering machine or answering service shall be used to notify the public when the veterinary premises will re-open and where pre-arranged after hours veterinary care is available.

B. All fixed premises shall conform to or possess the following:

- (1) Exterior:
 - (a) a legible sign;
 - (b) facility clean and in good repair; and
 - (c) grounds clean and maintained.
- (2) Interior:
 - (a) indoor lighting for halls, wards, reception areas, examination, treatment, and surgery rooms that is adequate for the intended purposes;
 - (b) a reception room and office, or a combination of the two;
 - (c) an examination room separate from other areas of the facility and of sufficient size to accommodate the appropriate hospital personnel;
 - (d) table tops, counter tops, and floors made of materials suitable for regular disinfection and cleaning;
 - (e) facility license conspicuously displayed; and
 - (f) veterinarians' licenses and veterinary technicians' licenses conspicuously displayed.

C. A veterinary facility where animals are housed or retained for treatment shall additionally contain the following:

- (1) compartments of sufficient size and construction to maintain animals in a comfortable, safe, and sanitary manner;
- (2) exercise runs or a means for providing exercise of sufficient construction to maintain animals in a safe, clean and sanitary manner;
- (3) effective separation of known or suspected contagious animals;
- (4) maintenance of temperature and ventilation to ensure the comfort of patients;
- (5) an animal identification system;
- (6) fire precautions that meet the requirements of local and state fire prevention codes; and
- (7) if there are no personnel on the premises during any time an animal is left at the veterinary facility, prior written or verbal notice must be given to the client.

D. Full service veterinary facilities shall additionally conform to or possess the following:

- (1) a surgery room separate and distinct from all other rooms and reserved for aseptic surgical procedures requiring aseptic preparation;
- (2) the capability to render diagnostic radiological services, either the premises or through outside sources; and
- (3) the capability to provide clinical pathology and histopathology diagnostic laboratory services, either on the premises or through outside sources.

[16.25.9.10 NMAC - Rp, 16.25.9.10 NMAC, 01-17-2014]

16.25.9.11 PREMISES - MOBILE VETERINARY FACILITIES:

A. Small animals. A small animal mobile veterinary facility shall conform to or possess the following:

- (1) hot and cold water;
- (2) a 110-volt power source for diagnostic equipment;
- (3) a collection receptacle for proper disposal of waste material;
- (4) lighting adequate for the procedures to be performed;
- (5) table tops and counter tops which can be cleaned and disinfected;
- (6) floor coverings which can be cleaned and disinfected;
- (7) compartments to transport or hold animals;
- (8) indoor lighting for halls, wards, reception areas, examination and surgery rooms that is adequate for the intended purposes;
- (9) An examination room separate from other areas of the facility which shall be of sufficient size to accommodate appropriate hospital personnel unless only one client is in the mobile unit at one time;
- (10) fire precautions that meet the requirements of local and state fire prevention codes;
- (11) temperature and ventilation controls adequate to ensure the comfort of patients;
- (12) if surgical services are offered, a room separate and distinct from other rooms reserved for aseptic surgical procedures;
- (13) the capability to render diagnostic radiological services either in the mobile veterinary unit or through other outside services;
- (14) the capability to provide clinical pathology and histopathology diagnostic laboratory services, either in the mobile veterinary unit or through other outside services;
- (15) ability and equipment to provide immediate emergency care at a level commensurate with the specific veterinary medical services provided;
- (16) provide after-hours emergency service, either by staff veterinarians or by pre-arranged referral to another veterinarian within a reasonable distance. Referral must be acknowledged and agreed upon by both the referring and referred veterinarians;
- (17) in all types of mobile veterinary practice adherence to minimum standards of practice and the existence of a veterinarian-client-patient relationship; and
- (18) proper instrumentation and sterilization maintained in the vehicle to accommodate those services which the veterinarian maintains he is capable of providing.

B. Large animals. A large animal mobile veterinary facility shall conform to or provide the following:

- (1) maintenance of facility in a clean and sanitary fashion; and
- (2) items of equipment necessary for the veterinarian to perform physical examinations, surgical procedures and medical treatments consistent with the standards of the profession and the type of veterinary services being rendered. Standard items equipping the unit should include but not be limited to the following:
 - (a) if aseptic surgery is to be performed: sterile surgical instruments, suturing materials, syringes, and needles;
 - (b) protective clothing, rubber or disposable boots and a means to clean them between each visit to each premises;
 - (c) current and properly stored pharmaceuticals and biologics as per manufacturer's label; and
 - (d) a means of cold sterilization.
- (3) The capability to render diagnostic radiological services, either through the mobile veterinary unit or through other outside services.
- (4) The capability to provide clinical pathology and histopathology diagnostic laboratory services, either through the mobile veterinary unit or through other outside services.

C. In all types of mobile veterinary practice, minimum standards of practice must be adhered to and a veterinarian-client-patient relationship must exist.

[16.25.9.11 NMAC - Rp 16.25.9.11 NMAC, 01-17-2014]

16.25.9.12 PREMISES - EMERGENCY CLINICS:

A. Emergency clinics are facilities which advertise or otherwise purport to provide veterinary medical services when these services are not normally available through other facilities. Nothing contained in this rule is intended to prohibit any licensed facility from providing services of an emergency nature.

B. The minimum staffing requirements for an emergency facility shall include a licensed veterinarian on the premises at all times during the posted hours of operation.

C. Advertisements shall clearly state:

- (1) a licensed veterinarian is on the premises during the posted emergency hours;
- (2) the hours the facility will provide emergency services; and
- (3) the address and telephone number of the facility.

D. In addition to the equipment for veterinary hospitals and clinics, all emergency facilities shall have the equipment necessary to perform standard emergency medical procedures including but not limited to:

- (1) the capability to render timely diagnostic radiological services on premises;
- (2) the capacity to render timely laboratory services on premises; and
- (3) the ability to provide diagnostic cardiac monitoring.

E. Emergency clinics shall meet the same standards as fixed veterinary premises.

[16.25.9.12 NMAC - Rp 16.25.9.12 NMAC, 01-17-2014]

16.25.9.13 PREMISES - NON-FULL SERVICE FACILITIES:

A. Referral, specialty and other facilities in which the services provided are limited in scope shall:

- (1) identify the name of the primary veterinarian on each patient's medical record; and
- (2) possess all necessary instruments, equipment and apparatus essential to the services

rendered.

B. Non-full service facilities shall meet the same standards as fixed veterinary premises.

[16.25.9.13 NMAC - Rp, 16.25.9.13 NMAC, 01-17-2014]

16.25.9.14 PREMISES - FOOD ANIMAL FACILITIES: Veterinary premises where food animal medicine is practiced shall have a reception room and office or a combination of the two. The premises shall contain the following:

- A. facilities for cleaning and sterilizing instruments and equipment;
- B. telephone and answering services;
- C. record keeping system;
- D. facilities for proper storage of pharmaceuticals and biologics;
- E. holding pens;
- F. capability for providing restraint; and
- G. a sanitizable area for clean surgery.

[16.25.9.14 NMAC - Rp 16.25.9.14 NMAC, 01-17-2014]

16.25.9.15 RADIOLOGICAL SERVICES:

A. Full service veterinary practices must have the capacity to render adequate diagnostic radiological services either in the facility or through an agreement to provide these services through another facility.

B. All exposed radiographs shall be the property of the veterinary facility that originally ordered them to be prepared and shall be stored where easily maintained and accessible by that facility for a period of three years.

C. All radiographs shall have a permanent, legible identification and shall include the following information:

- (1) the hospital, clinic or veterinarian name;
- (2) the location, city and state of the facility;
- (3) client identification;
- (4) patient identification;
- (5) the date the radiograph was taken; and
- (6) anatomical orientation, left or right, as indicated.

D. Radiographs shall be temporarily released in a timely manner to another veterinarian who has the authorization of the owner or agent or directly to the owner or agent. Return of said radiographs to the originating veterinarian shall also be accomplished in a timely manner. Transfer of radiographs shall be documented in the medical record.

E. If radiographs are transferred permanently, the transfer shall be documented in the medical record.

F. Radiographs originating at an emergency hospital shall become the property of the next attending veterinary facility upon receipt of the radiographs. Transfer of radiographs shall be documented in the medical record.

G. Pursuant to the state of New Mexico Environmental Protection Act, 20.3.6 NMAC, each facility shall maintain an x-ray log containing the examinations and the dates the examinations were performed. The log shall indicate when techniques for procedures vary from those specified in Subparagraph (c), Paragraph (1), Subsection A of 20.3.6.602 NMAC.

[16.25.9.15 NMAC - Rp 16.25.9.15 NMAC, 01-17-2014]

16.25.9.16 LABORATORY SERVICES AND EQUIPMENT:

A. Clinical pathology and histopathology diagnostic laboratory services must be readily available within the veterinary facility or through outside services.

B. Laboratory data is the property of the veterinary facility that originally ordered it to be prepared.

C. A copy of laboratory data shall be released in a timely manner to another veterinarian who has the authorization of the owner or agent or directly to the owner or agent.

D. A laboratory must be equipped with a microscope and a centrifuge.

[16.25.9.16 NMAC - Rp 16.25.9.16 NMAC, 01-17-2014]

16.25.9.17 PHARMACEUTICAL SERVICES:

A. No legend or controlled drug shall be prescribed, dispensed or administered without the establishment of a veterinarian-client-patient relationship.

B. All legend drugs shall be stored in a secure manner limiting public accessibility.

C. No expired drug or biologic shall be administered or dispensed.

D. All expired drugs or biologics shall be stored away from the working pharmacy while awaiting disposal.

E. All drugs and biologics shall be maintained, administered, dispensed and prescribed in compliance with state and federal laws.

F. Unless otherwise requested by the owner, and noted in the medical record, all repackaged legend and dangerous drugs shall be dispensed in safety closure containers.

G. All drugs shall be labeled with:

(1) name, address, and phone number of the facility;

(2) client's name;

(3) patient's name;

(4) date dispensed;

(5) name and strength of drug;

(6) directions for use;

(7) quantity dispensed;

(8) expiration date of drug;

(9) name of prescribing veterinarian; and

(10) the words "for veterinary use only" and "keep out of reach of children."

H. Veterinarians shall honor client requests to dispense a drug(s) or provide a written prescription for a drug(s) that has been determined by the veterinarian to be appropriate for the patient.

[16.25.9.17 NMAC - Rp 16.25.9.17 NMAC, 01-17-2014]

16.25.9.18 SURGICAL SERVICES:

A. Aseptic surgery means a procedure that is performed under sterile conditions.

(1) Sterile surgery shall be defined as procedures in which aseptic technique is practiced in patient preparation, instrumentation and surgical attire.

(2) Clean surgery means the performance of a surgical operation for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

B. The surgeon is responsible for the surgical case until it is completed and there is adequate recovery of the patient from anesthesia.

C. Surgery room.

(1) A room shall be designated for aseptic procedures only, in which no other uses are permitted;

(2) The room shall be well lighted and have available an operational viewing device for reviewing radiographs;

- (3) The floors, tabletops, and countertops of the surgery room shall be of a material suitable for disinfection and cleaning and shall be cleaned and disinfected regularly;
- (4) Storage in the surgery room is limited to surgically related items only; and
- (5) Nothing in this section shall preclude the performance of emergency aseptic surgical procedures in another room when the room designated for that purpose is occupied.

D. Instruments and equipment.

- (1) Instruments and equipment shall be:
 - (a) adequate for the type of surgical service provided; and
 - (b) sterilized by a method acceptable for the type of surgery for which they shall be used.
- (2) In any sterile surgical procedure, a separate sterile pack and gloves shall be used for each animal;
- (3) All instruments, packs and equipment that have been sterilized shall have an indicator that reacts to and verifies sterilization within one year; and
- (4) Suture material shall not be used beyond the manufacturer's expiration date.

E. Surgical attire.

- (1) Each member of the surgical team shall wear an appropriate sanitary cap and sanitary mask which covers his hair, mouth, nose and any facial hair, except for eyebrows and eyelashes;
- (2) All members of the surgical team who will be handling sterile instruments or touching the surgical site shall wear sterilized surgical gowns with long sleeves and sterilized gloves;
- (3) Ancillary personnel in the surgery room shall wear clean clothing;
- (4) Ancillary personnel in immediate proximity to the sterile field shall wear sanitary cap and mask; and
- (5) When performing "clean surgery", the instruments used to perform such surgery shall have been properly sterilized or disinfected and the surgeon and ancillary personnel shall wear clean clothing as appropriate.

F. Anesthesia.

- (1) General anesthesia is a condition caused by the administration of a drug or combination of drugs sufficient to produce a state of unconsciousness or dissociation and blocked response to a given pain or alarming stimulus.
- (2) Administration of appropriate and humane methods of anesthesia, analgesia and sedation to minimize pain and distress during any procedures and shall comply with the following standards:
 - (a) with the exception of feral or dangerous animals, every animal shall be given a physical examination within two weeks prior to the administration of an anesthetic;
 - (b) the animal under general anesthesia shall be under continuous observation until, at minimum, the swallowing reflex has returned and shall not be released to the client until the animal demonstrates a righting reflex. This shall not preclude direct transfer of an animal under anesthesia to a suitable facility for referred observation;
 - (c) provide a method of respiratory monitoring that may include observation of the animal's chest movement or observing the rebreathing bag or respirometer;
 - (d) provide a method of cardiac monitoring that may include the use of stethoscope or electrocardiographic monitor;
 - (e) clean endotracheal tubes of assorted sizes shall be readily available;
 - (f) oxygen equipment shall be available at all times;
 - (g) anesthetic equipment will be maintained in proper working condition; and
 - (h) effective means shall be provided for exhausting waste gasses from hospital areas in which inhalation anesthesia is used.

[16.25.9.18 NMAC - Rp 16.25.9.18 NMAC, 01-17-2014; A, 05-08-2016]

16.25.9.19 DENTAL SERVICES:

- A. Dental operation or procedure is the application or use of any instrument or device to any portion of an animal's tooth, gum or related tissue for the prevention, cure or relief of any wound, fracture, injury, disease or other condition of an animal's tooth, gum or related tissue. Dental operations or procedures shall be performed only by licensed veterinarians except for those preventive veterinary dental procedures as specified below.

B. Preventive veterinary dental procedures including but not limited to the removal of calculus, soft deposits, plaque and stains; the smoothing, filing, polishing of tooth surfaces, or floating or dressing of equine teeth, shall be performed only by licensed veterinarians or under the direct supervision of a licensed veterinarian.

C. Preventive veterinary dental procedures including but not limited to the removal of calculus by either manual or ultrasonic rescaling shall be done in a location specifically designated for such procedures or in a treatment area.

D. This rule does not prohibit any person from utilizing cotton swabs, gauze, dental floss, dentifrice, toothbrushes or similar items to clean an animal's teeth.

[16.25.9.19 NMAC - Rp 16.25.9.19 NMAC, 01-17-2014]

16.25.9.20 DIRECT SUPERVISION OF NON-VETERINARIANS: Non-licensed individuals are prohibited from practicing veterinary medicine which includes but is not limited to chiropractic, physical therapy, acupuncture, acupressure, homeopathy, therapeutic massage, dentistry, embryo transfer or any other related services on animals as defined in NMSA 1978, Section 61-14-2(B)(1), except under the direct supervision of a New Mexico-licensed veterinarian. Direct supervision includes the following:

A. the licensed veterinarian must have established a valid veterinarian-client-patient relationship;

B. the treatment must be performed on the order of a licensed veterinarian;

C. the licensed veterinarian must be on the premises and readily available;

D. the licensed veterinarian must assume liability for the quality of any treatment performed; and

E. the fee for services rendered shall be paid to the licensed veterinarian or licensed facility.

[16.25.9.20 NMAC - Rp 16.25.9.20 NMAC, 01-17-2014]

16.25.9.21 RECORD KEEPING:

A. Every veterinarian involved in a veterinarian-client-patient relationship performing any service requiring a license to work on any animal or group of animals in his custody or in the custody of a veterinary facility, shall prepare a legible individual or group animal and client record concerning the animal(s) which shall contain the following information:

(1) name, address, and phone number of the animal's owner or agent; and

(2) name or identity of animal(s), including species, breed, age, sex, weight, and color where appropriate

(3) 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 and amounts administered, dispensed or prescribed and frequency of use as well as method of administration including those medications used for sedation, induction and maintenance of anesthesia;

(d) data and interpretation(s) of diagnostic procedures including but not limited to radiographs, laboratory, ultrasound and ECG;

(e) a diagnosis or tentative diagnosis;

(f) when pertinent, a prognosis;

(g) progress notes and disposition of the case;

(h) beginning and ending dates of custody of the animal with daily notations;

(i) in the case of vaccination clinics, a certificate including the information required by Subsections (1) and (2) above may serve as the medical record;

(j) name or initials of the veterinarian responsible for entries; and

(k) name or initials of all ancillary and authorized individuals responsible for entries.

(4) 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 for surgical procedures that include a description of the procedure, surgical findings when pertinent and response to or recovery from anesthesia shall contain the requirements listed in Subsection (3) above.

B. Record storage.

(1) All records shall be the property of the veterinary facility or practice that created such records and shall be kept where easily accessible for a minimum of four years after the animal's last visit.

(2) Upon closure of a facility or practice, notice must be published twice in the local newspaper announcing where records can be obtained for 90 days.

(3) Copies of records and radiographs or a summary of records will be made available within 10 working days upon the client's written request.

C. Controlled substances.

(1) A separate log shall be maintained on each controlled substance and shall contain the following information:

- (a) date and time of administering or date of dispensing;
- (b) name of owner or agent;
- (c) name or identification of animal;
- (d) amount dispensed or administered;
- (e) balance remaining; and
- (f) authorizing veterinarian and identification of authorized individual dispensing or administering the controlled substance.

(2) For each controlled substance, there shall be an annual inventory that includes:

- (a) the date of inventory, May 1 annually, unless prior written notice is submitted to the appropriate agency by the licensee manager;
- (b) a physical count identifying the quantity of each controlled substance on hand on the date of inventory;
- (c) the "balance remaining" from the individual controlled substance log;
- (d) the discrepancy between (b) and (c); and
- (e) the percent the annual use (d) represents.

(3) All New Mexico board of pharmacy, New Mexico Controlled Substances Act, federal drug enforcement administration (DEA) and federal food and drug administration requirements shall be complied with, including but not limited to the following:

(a) controlled substances must be kept securely locked in a closet, safe or fixed cabinet;

(b) access to the controlled substance storage area should be restricted to the absolute minimum number of employees;

(c) the recommendation that controlled substances stock is kept to a minimum. Should it be necessary to have a substantial quantity of controlled substances stored in the office or facility, the DEA encourages having security which exceeds the minimum requirements such as a safe and alarm system;

(d) the reporting of lost or stolen controlled substances to the appropriate agency;

(e) the disposal of controlled substances through a DEA licensed disposer; and

(f) the DEA and NMCS licenses shall be kept where easily accessible in the pharmacy area but not in public view.

D. Computer records.

(1) There shall be reasonable security of a facility's computer(s) with access limited to authorized individuals only.

(2) A daily and cumulative monthly back-up on a separate disk, magnetic tape or other acceptable device or method shall be made.

[16.25.9.21 NMAC - Rp 16.25.9.21 NMAC, 01-17-2014]

16.25.9.22 MANAGEMENT OF WASTE:

A. A licensed veterinarian shall oversee the handling, treatment and disposition of infectious waste including but not limited to carcasses, anatomical body parts, excretions, blood soiled articles or bedding that are generated from an animal that the licensed veterinarian knows or has reason to suspect has a disease that is capable of being transmitted to humans as provided under this section:

(1) all infectious waste will be sterilized or disinfected by heat, steam, chemical disinfection, radiation or desiccation; and

(2) infectious waste held for disposal shall be collected in sanitary leak resistant bags clearly labeled for biohazard disposal. The bag shall contain the gloves worn while collecting the waste and those used in treatment and post-mortem examinations of suspect animals.

B. All sharps shall be disposed of in appropriately labeled sharps containers. Such containers shall be rigid sided, solidly sealed containers that are highly resistant to puncture. These containers shall be incinerated or disposed of in an environmentally safe manner by a duly licensed disposer, an approved medical sharps incineration facility or shall be disposed of in such a way as to render the sharps harmless. This disposal shall not apply to infectious waste sharps contained in a puncture resistant container which should be disposed of as described in

infectious waste disposal. Due to the small volume of sharps generated in a veterinary clinic, transportation of the filled, sealed containers shall not be mandated by nor limited to commercial haulers.

C. Drug disposal.

(1) When feasible, unused or outdated drugs shall be returned to the manufacturer for disposal in accordance with the policies and procedures of the manufacturer.

(2) All scheduled controlled substances which cannot be returned to the manufacturer shall be disposed of at one of the approved controlled drug disposers as approved by the board of pharmacy. A list of these disposers will be provided by the board of pharmacy.

(3) Drugs which do not pose a problem for environmental hazard or are not controlled drugs may be disposed of in a sanitary, non-offensive manner by means of regular solid waste disposal methods.

D. A licensed veterinarian shall oversee the handling of waste materials that are generated from an animal that does not have a disease transmissible to humans or suspected of being contaminated with an agent capable of infecting humans as provided under this section:

(1) Animal carcasses.

(a) An animal carcass shall be disposed of promptly by release to owner, burial, cremation, incineration, commercial rendering or if permitted by local ordinance, placed in a public landfill.

(b) If prompt disposal of an animal carcass is not possible, it shall be contained in a freezer or stored in a sanitary, non-offensive manner until such time as it can be disposed of as provided in (1)(a) above.

(c) All remains stored at a veterinary clinic shall be duly identified with the case number or the owner's name and the name of the animal to prevent improper final disposal.

(2) Tissues, specimens, bedding, animal waste and extraneous materials, not suspected of harboring pathogens infectious to humans shall be disposed of by approved city or county disposal methods.

E. In the event of the occurrence of a suspected foreign animal disease or disease of potential concern to state or national security, the licensed veterinarian will immediately contact the state department of agriculture, the U. S. department of agriculture and other departments that have jurisdiction over such an occurrence. The licensed veterinarian shall oversee the handling of all tissues, laboratory samples and biomedical waste associated with such cases in accordance with the recommendations made by the department of agriculture and other departments and agencies which are deemed necessary and appropriate in such cases.

[16.25.9.22 NMAC – Rp, 16.25.9.22 NMAC, 01-17-2014]

HISTORY OF 16.25.9 NMAC:

Pre-NMAC History:

BVE 88-7, Rules Governing Minimum Standards for the Practice of Veterinary Medicine, 10-14-88.

BVE 92-8, Rules Governing Minimum Standards for the Practice of Veterinary Medicine, 5-22-92.

BVE 93-8, Rules Governing Minimum Standards for the Practice of Veterinary Medicine, 6-3-93.

History of Repealed Material:

16 NMAC 25.9, Minimum Standards - Repealed, 9-1-00.

16.25.9 NMAC, Minimum Standards - Repealed, 6-7-02.

16.25.9 NMAC, Minimum Standards - Repealed effective 01-17-14.