

**Army Regulation 40-905
SECNAVINST 6401.1B
AFI 48-131**

Medical Services

Veterinary Health Services

**Headquarters
Departments of the Army,
the Navy, and
the Air Force
Washington, DC
29 August 2006**

UNCLASSIFIED

SUMMARY of CHANGE

AR 40-905/SECNAVINST 6401.1B/AFI 48-131
Veterinary Health Services

This major revision, dated 29 August 2006--

- o Reaffirms the role of the U.S. Army as the Executive Agent for the Department of Defense Veterinary Services for the Secretary of the Army, in accordance with Department of Defense Directive 6400.4, dated August 22, 2003, subject: Department of Defense Veterinary Services Program (para 2-1a).
- o Defines the installation commander's responsibility for the capture, impoundment, disposal, and control of privately owned and stray animals on military installations (para 2-3f).
- o Updates guidance on the Human-Animal Bond Program as an essential function of the Army Veterinary Service mission to support the military community (paras 2-5b(4), 2-5b(9), and 4-2f).
- o Defines authorized veterinary services for Department of Defense, Government-owned (non-Department of Defense), nonappropriated fund instrumentality-owned, and privately owned animals (chap 3).
- o Changes fee schedule for service/assistance animals and Animals In the Military Helping Individuals from cost reimbursable to same rate as privately owned animals (para 3-4f).
- o Provides guidance for veterinary support to animals provided by contractor or concession (para 3-5).
- o Updates measures for the control of rabies and other animal diseases and conditions (chap 4).
- o Provides guidance for animal care and sanitation in, and veterinary support to, Child Development Centers and Individual Family Child Care homes (para 4-1a(3)).
- o Updates guidance for Department of Defense veterinary treatment facility programs to prevent disease and injury (para 4-2a).
- o Provides guidance on diagnostic laboratory services available at the U.S. Army Department of Defense Food Analysis and Diagnostic Laboratory and on forms to be used when submitting specimens or samples to the laboratory (para 4-2h).
- o Provides guidance on procedures for pre-purchase physical examinations of prospective Department of Defense-owned horses (para 5-1b(2)).

- Updates guidance on procedures for periodic physical examinations of Department of Defense owned animals (para 5-1c).
- Updates guidance on Veterinary Corps officer responsibilities upon the death or euthanasia of Department of Defense owned animals (para 5-2).
- Provides guidance on adoption of retired military working dogs (para 5-3).
- Redefines guidance on the fiscal administration of Veterinary Service appropriated fund and nonappropriated fund activities (chap 6).
- Prescribes the following new form: DA Form 7593, Department of Defense Military Working Dog Veterinary Service Referral Information Form (para 6-1a(3)(b)).
- Redefines guidance on preparation of required medical records for Department of Defense owned, other Government-owned (non-Department of Defense), and privately owned animals (para 6-5).
- Replaces the use of DD Form 2344 (Veterinary Treatment Record) with Air Force Form 2110A (Health Record) for military working dogs only (para 6-5a(1)(a)).

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Effective 29 September 2006

Medical Services

Veterinary Health Services

By Order of the Secretary of the Army, Navy, and Air Force:

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History. This publication is a major revision.

Summary. This regulation prescribes policies, responsibilities, and procedures for the provision of veterinary health services; to include the complete veterinary medical care for all DOD-owned, Government-owned animals and the prevention and control of zoonotic diseases throughout all components of the Department of Defense in time of peace, war, or operations other than war.

Applicability. This regulation applies to the Active Army, the Army National Guard/Army National Guard of the United States, and the U.S. Army Reserve, unless otherwise stated. This regulation applies to the Navy, Air Force, and Marine Corps; and the U.S. Navy, Air Force, and Marine Corps Reserve. During mobilization, the proponent may modify chapters and policies contained in this regulation.

Proponent and exception authority. The proponent of this regulation is the Army Surgeon General. The Surgeon General has the authority to approve exceptions to this regulation that are consistent with controlling law and regulations. The Surgeon General may delegate this

approval authority, in writing, to a division chief within the proponent agency or its direct reporting unit or field operating agency, in the grade of colonel or the civilian equivalent. Activities may request a waiver to this regulation by providing justification that includes a full analysis of the expected benefits and must include formal review by the activity's senior legal officer. All waiver requests will be endorsed by the commander or senior leader of the requesting activity and forwarded through their higher headquarters to the policy proponent. Refer to AR 25-30 for specific guidance.

Army management control process. This regulation contains management control provisions in accordance with AR 11-2 and contains a checklist for assessing management controls (see app B).

Supplementation. Supplementation of this regulation and establishment of command and local forms are prohibited without prior approval from the Office of the Surgeon General. If supplements are issued, major Service commands will furnish one copy to the Surgeon General (DASG-DODVSA), 5109 Leesburg Pike, Falls Church, VA 22041-3258. Other

commands will furnish one copy of each to the next higher headquarters.

Suggested improvements. Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) directly to DODVSA, 5109 Leesburg Pike, Falls Church, VA 22041-3258. Navy users should send comments and recommendations through normal channels to the Chief, Bureau of Medicine and Surgery (BUMED-24), Navy Department, 2300 E Street NW, Washington, DC 20372-5300.

Distribution. Army: This publication is available in electronic media only and is intended for command level B for the Active Army; command level C for the Army National Guard/Army National Guard of the United States; and command level D for the U.S. Army Reserve. Navy: Electronic media only. Air Force: F. USMC: PCN 10202060100.

*This regulation supersedes AR 40-905/SECNAVINST 6401.1A/AFI 48-131, 16 August 1994.

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Chapter 1 Introduction

1–1. Purpose

This regulation prescribes policies, responsibilities, and procedures for the provision of veterinary health services. The veterinary health objectives of the Army Veterinary Service are to—

- a.* Respond to the veterinary service requirements of all components of the Department of Defense (DOD) in time of peace, war, or operations other than war.
- b.* Provide complete veterinary medical care for all DOD-owned animals.
- c.* Provide complete care to other Government-owned (non-DOD) animals, on a reimbursable basis, as resources permit. A memorandum of understanding (MOU) between the supported Government agency and the U.S. Army Veterinary Command (VETCOM) or the overseas Major Army Command (MACOM) Veterinarian outside of VETCOM's area of responsibility (AOR) should be established.
- d.* Provide for prevention and control of zoonotic diseases (that is, those transmissible under natural conditions from vertebrate animals to humans).
- e.* Provide professional support to training programs and research protocols involving animal models.
- f.* Provide for humane medical treatment, care, use, and handling of animals.
- g.* Provide emergency medical treatment of privately owned animals and medical care with the emphasis on veterinary preventive medicine and diseases that present a community health threat.
- h.* Support the health of the military community through the Human-Animal Bond (HAB) Program and other programs.

1–2. References

Required and related publications and prescribed and referenced forms are listed in appendix A.

1–3. Explanation of abbreviations and terms

Abbreviations and special terms used in this regulation are explained in the glossary.

Chapter 2 General Responsibilities and Functions

2–1. Principal officials of Department of Defense agencies and the services

Principal officials of DOD agencies and the services will—

- a.* Use the Army Veterinary Service as provided by Department of Defense Directive 6400.4, dated August 22, 2003, subject: DOD Veterinary Services Program.
- b.* Coordinate peacetime and mobilization requirements for veterinary services in a timely manner.

2–2. The Director, Department of Defense Veterinary Service Activity

The Director, Department of Defense Veterinary Service Activity (DODVSA) will—

- a.* Act on behalf of the Secretary of the Army and the Surgeons General as the DOD Executive Agent for Veterinary Services.
- b.* Ensure uniform provision of veterinary services throughout the DOD.
- c.* Advise the Military Police or Security Forces and other DOD elements on the veterinary medical aspects of the Military Working Dog (MWD) Program and other programs using DOD-owned animals. This will include advice on the following subjects:
 - (1) Health.
 - (2) Physical standards.
 - (3) Behavioral standards.
 - (4) Training methods.
 - (5) Training standards.
 - (6) Nutrition.
 - (7) Housing.
 - (8) Research.
 - (9) Procurement.
 - (10) Acceptance policies.
 - (11) Shipping and transport.

(12) Medical Evacuation (MEDEVAC).

2-3. Commanders of major Department of Defense commands and installations

Commanders of major DOD commands and installations will support and give command emphasis to programs that—

- a.* Effectively prevent and control diseases and conditions of animals that are common to humans and to wild and domestic animals.
- b.* Control and prevent animal diseases and conditions of environmental, community, or economic significance.
- c.* Protect and maintain the health and welfare of DOD-owned and Government-owned (non-DOD) animals.
- d.* Ensure humane care and use of animals.
- e.* Promote the concept of responsible animal ownership as an integral element of health and well-being within the command.
- f.* Control privately owned and stray animals at large on military installations through capture, impoundment, disposal, or other physical means. If adequate military facilities are not available, the installation commander will arrange for off-installation facilities and will be responsible for any costs incurred.
- g.* Promote and support Human Animal Bond programs.
- h.* Publicize, at least quarterly, the installation policy on confinement and disposition of stray and inadequately controlled privately owned animals.

2-4. Department of Defense installation Director of Health Services

Department of Defense installation Director of Health Services (DHS) will—

- a.* Inform and advise installation commanders regarding animal diseases and conditions that can affect the health or welfare of the military community.
- b.* Ensure that pre-exposure rabies prophylaxis will be made available to all personnel with occupational rabies exposure risk, in keeping with current recommendations published annually by the Public Health Service Advisory Committee on Immunization Practices. If results of rabies antibody titers are provided, they should be entered immediately into the individual's permanent medical record.
- c.* Provide logistics support to the installation veterinary service. This support includes budgeting for, programming, and planning maintenance, repair, and replacement of veterinary medical facilities.

2-5. Veterinary Corps officers

Veterinary Corps officers (VCOs) are graduates of American Veterinary Medical Association (AVMA)-accredited schools of veterinary medicine or graduates of foreign veterinary schools, and maintain licensure or certification according to AR 40-68, chapter 4. VCOs serve as special staff officers/advisors to installation commanders, senior installation/command medical officers, and commanders of veterinary units.

- a.* Veterinary Corps officers at all levels will—
 - (1) Provide DOD-owned animal support in accordance with paragraph 5-1.
 - (2) Help prevent and control animal diseases and conditions by performing the duties listed in chapter 4.
 - (3) Provide food hygiene and safety inspection responsibilities in accordance with AR 40-657/NAVSUPINST 4355.4F/MCO P 10110.31G, paragraph 1-4. On USAF installations, Public Health personnel perform these activities in accordance with AFI 48-116, Food Safety Program.
 - (4) Maintain current awareness of DOD directives and other publications that pertain to the provision of veterinary services.
- b.* The installation veterinarian will—
 - (1) Coordinate the provision of veterinary services in support of all DOD component installations, satellite installations, and operating locations within the geographic area of responsibility.
 - (2) Be responsible for reports and records prescribed for use by the Army Veterinary Service or specific Veterinary Commands.
 - (3) Review pertinent installation communications and give special attention to veterinary services terminology, topics, issues, and problem descriptions.
 - (4) Ensure that training is provided for appropriate personnel in veterinary public health, zoonotic and other animal diseases, emergency animal first aid, nuclear, biological, and chemical (NBC) protective measures for animals, benefits of HAB programs, and animal care procedures. He or she will also advise and assist in training programs pertaining to emergency medical care and the significance of animal diseases to human health and the environment.
 - (5) Ensure that the Veterinary Service inspects foods intended for animal consumption for wholesomeness and, when requested, for other contract requirements.
 - (6) Ensure maintenance of liaison with civilian health agencies in matters pertaining to animal health, veterinary public health, and zoonotic disease surveillance.
 - (7) Ensure coordination of wild animal survey programs on military installations with State, Federal, and foreign

government programs and agencies. Installation medical personnel will be notified when surveys demonstrate a potential public health impact.

(8) Review invitation for bids on contracts for the collection or disposal of animal or animal biological wastes, animal apprehension services, or other veterinary requirements. The following subjects must be included in the contracts: sanitation of equipment, humane animal care, and protection of the environment and military and animal populations.

(9) Support HAB programs, as resources permit.

Chapter 3

Authorized Veterinary Health Services

3-1. Department of Defense owned animals

a. The following categories of animals are considered DOD-owned:

- (1) Military Working Dogs (MWDs).
- (2) Military Working Horses (MWHs) (those not managed by a nonappropriated fund instrumentality (NAFI)).
- (3) Marine Mammals (U.S. Navy).
- (4) Authorized unit mascots.
- (5) Stray animals on military installations (for the first 3 working days).
- (6) Health Assistance Animals in the Military (HAAM) animals (while enrolled in a HAAM training program).
- (7) Animals used in biomedical research, education, training, and testing.
- (8) Wild animals (buffalo, deer, and so forth) in confinement on military installations.

b. Complete veterinary medical and surgical service is authorized for DOD-owned animals. DOD-owned animals will receive priority of care over Government-owned (non-DOD) animals, nonappropriated fund (NAF) animals, and privately owned animals. The veterinarian will designate an appropriate time for routine examination of these animals.

c. Mascots (one per company-sized unit) established by unit orders, signed by an officer in the rank of LTC or higher, will be afforded the same rights, privileges, support services, and health surveillance as other DOD-owned animals.

d. Animals owned by the Government for use as HAAM are entitled to the same veterinary medical/surgical care as provided for other DOD-owned animals. Included in this category are Animals In the Military Helping Individuals (AIM HI) animals, from the time they are officially transferred to the Government to the time that they graduate and/or are otherwise removed from one of the AIM HI programs. At that time, ownership is transferred to the qualified recipient. From then on, veterinary care is as described in paragraph 3-4.

3-2. Government-owned (non-Department of Defense) animals

Animals owned by non-DOD government agencies may receive veterinary services in accordance with the provisions of agreements (Memorandums Of Understanding (MOUs)/Memorandums Of Agreement (MOAs) between those agencies and VETCOM.

3-3. Nonappropriated animals

Animals used to generate funds for NAFIs, including NAF-managed, and DOD-owned horses, will be provided preventive medical care as resources allow, on a reimbursable basis. Complete veterinary medical and surgical care may be provided on a reimbursable basis, as time, expertise, and resources allow.

3-4. Privately owned animals

a. The Commander, VETCOM or the overseas MACOM veterinarian outside of VETCOM's area of responsibility will establish the extent to which veterinary services are authorized for animals owned by personnel authorized DOD medical care; that is, those persons enrolled in the Defense Enrollment/Eligibility Reporting System (DEERS). Unless otherwise specified, authorized veterinary services will be the same for personnel living off the installation as for those living on the installation, and for both active-duty and retired personnel.

b. Animals owned by personnel authorized DOD medical care may be examined, have diagnostic tests performed, be immunized, and receive treatment for the prevention and control of diseases or conditions which may be transmissible to humans or animals, or those diseases or conditions which may constitute community health problems or are of significant public interest. Priority should be on preventive veterinary care.

c. Army VCOs will follow the guidelines for the use and distribution of veterinary prescription drugs and prescription diets as approved by the AVMA House of Delegates in 1997.

(1) Veterinary prescription drugs and prescription diets are to be used or prescribed only within the context of a valid veterinarian-client-patient relationship (VCPR). Filling of prescriptions without a valid VCPR is not authorized. The Army Veterinary Service may be considered as one "corporate" veterinary practice. A valid VCPR may be

interpreted as one between an authorized client/patient and any Army VCO or NAF veterinarian within the Army Veterinary Service "corporate" veterinary practice. A valid VCPR exists if the animal has been seen at a military veterinary treatment facility (VTF) within the past 12 months. A VCPR exists when all of the following conditions have been met:

(a) The veterinarian has assumed the responsibility for making clinical judgments regarding the health of the animal(s) and the need for medical treatment, and the client has agreed to follow the veterinarian's instructions.

(b) The veterinarian has sufficient knowledge of the animal(s) to initiate at least a general or preliminary diagnosis of the medical condition of the animal(s). This means that the veterinarian has recently seen, and is personally acquainted with, the keeping and care of the animal(s) by virtue of an examination of the animal(s) or by medically appropriate and timely visits to the premises where the animal(s) are kept.

(c) The veterinarian is readily available for follow-up evaluation, or has arranged for emergency coverage, in the event of adverse reactions or failure of the treatment regimen.

(2) Veterinary prescription drugs must be properly labeled before being dispensed.

(3) Appropriate dispensing and treatment records must be maintained, and veterinary prescription drugs should be dispensed only in quantities required for the treatment of the animal(s) for which the drugs are dispensed.

(4) Veterinary prescription drugs should be appropriately handled and stored.

(5) Dispensing of veterinary prescription drugs and prescription diets will be limited, in the continental United States (CONUS), to those required in providing authorized services, as described in paragraph 3-4b.

d. Veterinary Corps officers may perform emergency procedures required to prevent undue suffering or to save the life or limb of animals, prior to referring such cases to a civilian practitioner.

e. Except when an animal is abandoned by its owner, or when the veterinarian acts to prevent undue suffering, or when human health is involved (for example, a rabies suspect), euthanasia of privately owned animals is authorized only after written approval for this action is obtained from the animal owner as documented by a completed DD Form 1745 (Animal Euthanasia). Euthanasia will be accomplished in a humane manner, using approved drugs and techniques as described in the current report of the AVMA panel on euthanasia.

f. Service/Assistance animals owned by, and essential to, the improved function of a military family member enrolled in any of the Services' Exceptional Family Member Programs (EFMP), or those animals belonging to veterans entitled to animals trained in the DOD AIM HI program or its civilian equivalent training organization, may be provided the same medical/surgical care as provided for DOD-owned animals. These animals include guide dogs for the blind, hearing dogs, and other assistance animals for the physically-impaired that have been trained and certified by an approved organization. However, these animals will be provided such care only as time and resources permit, and charges for supplies and services will be at the same fee schedule as for privately owned animals.

g. Those veterinary procedures commonly recognized by the veterinary profession as cosmetic or elective surgery, to include surgical neutering, will not be performed in the United States or U.S. Territories, except as part of an authorized population control program or command-directed surgical proficiency program.

h. The Veterinary Service may provide consultation and facility inspections for NAF boarding facilities for privately owned animals, but will not be assigned operational responsibility. NAF boarding facilities will not be co-located with Veterinary Treatment Facilities (VTFs).

i. Veterinary services will not be provided in support of commercial operations that breed or raise animals for sale or profit.

j. When extenuating circumstances exist, request for waiver to the provisions of this paragraph will be submitted through command channels to Commander, U.S. Army Veterinary Command (VETCOM), 2050 Worth Road, Suite 5, Fort Sam Houston, TX 78234-6005, or the overseas MACOM veterinarian outside of VETCOM's area of responsibility, as appropriate, with information copies furnished to Headquarters of the Department of the Army (HQDA) Department of Defense Veterinary Service Activity (DODVSA), 5109 Leesburg Pike, Falls Church, VA 22041-3258. All waivers granted will be reevaluated and renewed, if appropriate, at least every 2 years.

3-5. Contractor animals

Animals provided by contractor or concession normally are not eligible for military veterinary services. The exception to this pertains to contractor animals supporting a contingency in a theater of operations where military veterinary assets are already available.

a. Emergency veterinary procedures required to prevent undue suffering or to save the life or limb of contractor animals may be provided by military veterinarians, on a reimbursable basis, as time and resources permit, before referral of such cases to a civilian practitioner for followup care.

b. If applicable, and included in the provisions of the contract, non-emergency veterinary services may be provided to contractor animals in the theater of operations, on a reimbursable and space available basis, within the capabilities of the deployed veterinary unit.

c. Payment for civilian veterinary medical care (emergency and non-emergency) of contractor animals in the theater of operations remains the responsibility of the contractor.

3-6. Civilian veterinary medical care

Civilian veterinary medical care for DOD-owned animals is authorized by AR 40-3, paragraph 15-.4 and AR 40-330, paragraph 2-8 when a military veterinarian is not available, or when requirements for veterinary medical care exceed the capability of the supporting facility. This includes the pre-purchase examination of prospective MWDs and MWHs. Veterinary care that is approved by HQDA and is provided within the purview of AR 40-1 will be funded by Army appropriated funds. Policy for non-emergency care will be set by the Commander, VETCOM or the overseas MACOM veterinarian outside of VETCOM's area of responsibility.

Chapter 4 Injury and Disease Prevention and Control

4-1. Measures for preventing injury and disease

a. Veterinarians will ensure the investigation of animal and zoonotic diseases and recommend measures for prevention and control. This activity includes—

(1) Maintaining liaison with local, State, Federal, or Host Nation health authorities and evaluating animal disease infestations and infections in areas near or on military installations.

(2) Examining privately owned, wild, or other animals maintained on, or introduced onto, military installations, and advising on control and handling. If a serious communicable disease is discovered, the infected animals may be treated, quarantined, or euthanized, as appropriate.

(3) Child Development Centers (CDC) with mammals, birds, and/or other caged animals will be inspected monthly by a VCO or designee. A veterinarian will conduct the inspection not less than annually. AR 608-10, paragraph 4-34c outlines inspection requirements. Emphasis will be on ensuring that animals are free of disease, immunized as appropriate, sanitarily maintained, and that they are receiving adequate nutrition and humane care. Individual Family Child Care (FCC) homes will only receive veterinary inspections if specifically requested by the FCC director. Animals, other than fish, in FCC homes require a yearly health certificate; current vaccinations and vaccination certificates are required for appropriate species. The CDC and individual FCC homes are responsible for scheduling appointments and paying for these services. For issues involving determination of acceptable animal temperament (AR 608-10, appendix C), the FCC director may request VCO assistance in determining acceptable temperament of pets in FCC homes. The CDC or FCC director may also request VCO assistance in assessing the potential health risks posed by specific species of animals that may be kept in the CDC or FCC homes.

(4) Coordinating with the installation engineer or public works center to control vectors capable of transmitting animal diseases, as prescribed in AR 200-5, OPNAVINST 6250.4B, and AFI 32-1053; and for disposal of dead animals found on the installation, as prescribed in this regulation, paragraph 4-2*b*.

(5) Establishing procedures to ensure that animals will not be disposed of without coordination with the installation veterinarian or his or her designated representative, on those installations where a formal disease control program is ongoing (for example, sylvatic plague).

(6) Providing professional support for the care and disposition of animals impounded or quarantined. For stray animal facilities on military installations, the Veterinary Service will provide professional support limited to establishing and maintaining a preventive medicine program and supportive medical care and facility inspection.

(7) Providing a euthanasia service for stray animals, or assisting in administration of an approved adoption program, in order to assist in control of animal diseases and stray animal populations.

(8) Conducting animal disease surveys after protocol approval is received from VETCOM or the overseas MACOM veterinarian outside of VETCOM's area of responsibility.

(9) Maintaining coordination with State, county, host country, and other wildlife agencies.

b. The Veterinary Services representative will ensure the inspection and oversight of animal care conditions for sanitary and humane practices. This includes—

(1) Frequent observation of DOD-owned and other Government-owned (non-DOD) animals residing on a military installation. The purpose of such observation is to detect early signs of disease, the presence of injuries, and signs of inadequate management or diet. These inspections should also include an examination of feeding, weight, and training records. Observation of Government-owned (non-DOD) animals that do not reside on a military installation will be performed as time and resources permit.

(2) Inspections of kennels, runs, stables, corrals, and other animal facilities on Government installations, using part 3.3, title 9, Code of Federal Regulations (9 CFR 3.3) and other applicable references as guidelines. The evaluation will determine adequacy of animal husbandry practices and will evaluate construction, maintenance, and sanitation to prevent disease, injury, or adverse effects on the welfare of animals. The frequency of inspections by a veterinarian will be not less than quarterly. More frequent courtesy visits are encouraged. A copy of a completed DD Form 2342 (Animal Facility Sanitation Checklist) will be furnished to the individual responsible for the facilities inspected (Army Records Information Management System (ARIMS) Record No. 40-905*a*).

c. When facilities permit, MWDs will be admitted to the VTF through an entrance located separately from that used by privately owned animals. This provision will be considered in new construction programs. Each DOD-owned or other Government-owned (non-DOD) animal will be presented to the veterinarian by its handler or caretaker, who will retain control of the animal unless specifically released by the veterinarian.

d. Upon arrival, all equines being stabled on a military installation will receive a health examination by a veterinarian. The installation health certificate, immunization, and quarantine requirements will be established by the installation veterinarian through an installation-approved regulation or policy. Requirements will not be less than those needed to comply with laws and regulations of States and countries where the installation is located. All equines will comply with these established requirements prior to entry, and once stabled, on the installation.

e. All DOD-owned, other Government-owned, and NAFI-owned equines in CONUS will be tested for equine infectious anemia (that is, Coggins tested) at least annually. Privately owned equines stabled in the same facility as DOD-owned, other Government-owned, or NAFI-owned equines will be tested at the same frequency. Serum samples may be sent to the DOD Food Analysis and Diagnostic Laboratory at Fort Sam Houston, TX for testing. The current edition of the U.S. Department of Agriculture (USDA) Veterinary Services (VS) Form 1011 (Equine Infectious Anemia Laboratory Test Report) will be used as the test request form. Veterinary Service Form 1011 may be obtained from the State veterinarian in the State where the installation is located. Requirements for outside the continental United States (OCONUS) will comply with local policies and foreign country regulations. Veterinarians will be prepared to provide detailed information on equine infectious anemia to the installation commander and to assist in developing a local regulation or policy concerning testing, quarantine, movement, and final disposition of reactor equines.

f. The installation Veterinary Service representative will coordinate the maintenance of a local regulation or directive that provides minimum standards for animal welfare and control, including disposition of animal abuse or neglect complaints and stray and wild animal control programs. A local housing regulation should establish the maximum number of animals allowed in base/post housing; any restrictions on types of animals allowed in base/post housing; and policy for animals in barracks/dormitories.

g. The Veterinary Service representative will assist the installation commander in formulating policy and recommending control measures to comply with State, Federal, and foreign government quarantine laws pertaining to the movement or control of animals and animal diseases. AR 40-12/SECNAVINST 6210.2A/AFR 161-4, section 22(i) implements quarantine policies and procedures of the U.S. Public Health Service and the USDA in military programs.

h. Installation commanders will establish guidelines for the disposition of animals against which substantiated bite or repeated nuisance complaints have been made. The installation Veterinary Service representative will provide specific guidance in each case.

4-2. Community health care support

a. *Veterinary Treatment Facility program.* The installation veterinarian will provide professional guidance and support at each military installation to help prevent and control those animal diseases or conditions that may be transmissible to humans or animals, or that may constitute a community health problem. Control measures may include, but are not limited to—

- (1) Surveys for the detection of disease in domestic and wild animals, as indicated.
- (2) Confinement of stray animals.
- (3) Physical examinations.
- (4) Diagnostic tests and examinations.
- (5) Immunization of susceptible animals.
- (6) Chemoprophylaxis.
- (7) Treatment.
- (8) Restriction of the movement of animals.
- (9) Isolation of animals.
- (10) Eradication of diseased animals, disease reservoirs, and disease vectors.
- (11) Environmental sanitation. (On Navy and Marine Corps installations, environmental sanitation is the responsibility of the Navy Medical Department.)
- (12) Zoonotic disease referral procedures with the military treatment facility (MTF).
- (13) Stray animal population control services.
- (14) Continuing education and public information programs.
- (15) Development and maintenance, in conjunction with responsible installation agencies, of an installation regulation or directive for veterinary preventive medicine and animal health care, encompassing items in this paragraph.

b. *Disposition of dead animals.*

(1) The disposition of dead animals found on a military installation is an installation engineering directorate responsibility and is accomplished according to local policy and directives. Federal, State, and local health hazard standards, including environmental restrictions regarding animal disposal, will be the minimum standards.

(2) The disposition of dead privately owned animals is the responsibility of the animal owner. Owners who have questions regarding animal disposition policies or procedures should contact the VTF for advice.

(3) The disposition of DOD-owned and euthanized stray animals is the responsibility of the installation commander, who will provide resources to accomplish disposal in compliance with Federal, State, and local standards.

c. Rabies control.

(1) The installation commander will provide an adequate number of kennels to meet local needs for quarantine and observation of suspected rabid animals. Construction of such kennels will conform to part 3.3, title 9, Code of Federal Regulations (9 CFR 3.3). In addition, provisions must be made for physical separation of suspected rabid animals from other animals. The installation VCO will ensure that local regulations prescribe procedures for animal confinement facility operations. The use of MWD kennels for privately owned or stray animals is prohibited. When adequate facilities are not available, civilian facilities will be used; the installation VCO should assist with coordination, but the installation is financially responsible.

(2) The installation VCO will manage all facets of the Animal Rabies Control Program, except apprehension and collection of animals, including, but not limited to—

- (a) Development of applicable directives.
- (b) Registration of animals.
- (c) Immunizations.
- (d) Professional support to the rabies suspect quarantine facility.
- (e) Professional support to the stray animal confinement facility.
- (f) Training of support personnel.
- (g) Public education.

(3) All dogs, cats, and ferrets maintained on military installations will be routinely immunized against rabies. All horses maintained on military installations in rabies-endemic areas will be immunized against rabies. Immunization will be according to the latest edition of “Compendium of Animal Rabies Prevention and Control” prepared by the National Association of State Public Health Veterinarians (NASPHV). In addition, compliance with the rabies vaccination laws and regulations of States, Territories, and foreign countries is mandatory.

(4) Dogs, cats, and other privately owned or stray animals will not be permitted to run at large on military reservations. Hunting dogs in a designated hunting area are exempt. The installation commander ensures that free-roaming domestic animals are collected as often as necessary for confinement. Stray animals will be confined for a minimum of 3 working days (more if required by local or state regulations) to provide owners sufficient time to reclaim the animals. A longer confinement period may be warranted and is authorized to allow for maximum adoption opportunity for stray animals. This additional time will be at NAF expense. After this time, the animal(s) may be euthanized or disposed of according to local regulations. The installation veterinarian ensures that the installation confinement and disposition policy is published at least quarterly in a media source distributed to the military.

(5) The DHS, or the DHS representative, will notify the veterinarian of all persons presented for animal bites or scratches. Department of Defense Form 2341 (Report of Animal Bite–Potential Rabies Exposure) will be used on military installations to report whenever a patient is treated for an animal bite or scratch and to document the case management. A legible copy of the completed form will be placed in the patient’s medical treatment record (see AR 40–66, chapter 5). The Veterinary Service will coordinate with the animal owner and local authorities to have the involved animal appropriately quarantined and will record observations and disposition of the animal on DD Form 2341. Paragraph *d*, below, provides guidance for management of animal bites on installations without an assigned VCO. Army Regulation 40–5, para 4–5 provides guidance on Army installations. NAVMEDCOMINST 6220.4, para 4.b provides guidance for the Navy and Marine Corps ashore and afloat.

(a) Department of Defense owned animals, Government-owned (non-DOD) animals, or privately owned dogs, cats, and ferrets will be confined under observation by order of the responsible VCO until definite signs of rabies develop or until the animal has been retained in confinement for 10 days from time of incident. Animals showing no clinical signs of rabies may be released from confinement after 10 days from the time of the incident. Animals developing signs of rabies during the 10-day observation period will be euthanized and appropriate specimens submitted for laboratory examination to the VETCOM Food Analysis and Diagnostic Laboratory, Fort Sam Houston, TX, or another reliable laboratory, if appropriate. The VCO may authorize home confinement on or off the installation if local ordinances permit. Department of Defense Form 2623 (Animal Home Quarantine) will be used to document authorization for home quarantine. The DD Form 2623 will be maintained in the animal’s medical record. The animal will be examined by the VCO or the designated representative at the end of the quarantine period. For installations with attending veterinary support, the attending veterinarian and the DHS will develop procedures for observation of rabies suspects.

(b) Wild animals and unowned dogs, cats, and ferrets will be euthanized immediately and appropriate specimens submitted for laboratory examination if human or animal exposure has justified initiation of anti-rabies treatment.

(6) Dogs, cats, and ferrets not immunized against rabies, which have been exposed to another animal known, or reasonably suspected, to be rabid, should be destroyed immediately. If the owner is unwilling to have this done, the exposed animal will be quarantined and/or provided post-exposure rabies prophylaxis in accordance with the current Compendium of Animal Rabies Prevention and Control published by the National Association of State Public Health

Veterinarians (NASPHV) on an annual basis. All quarantine and immunization costs incurred will be at the expense of the animal owner. Owners may be required to purchase isolation services from a civilian facility if military facilities or manpower are not adequate, as determined by the responsible VCO. The Commander, VETCOM or the overseas MACOM veterinarian outside of VETCOM's area of responsibility may grant exceptions if State, Territory, or foreign nation laws provide for alternate disposition of such animals.

(7) A dog, cat, or ferret that has been exposed to rabies but which has a current rabies immunization should be re-immunized immediately, then restrained by leashing and confinement and observed for at least 45 days, or handled according to host country regulations.

(8) Periodic training in safe animal handling techniques will be provided by the installation VCO for all personnel having an occupational rabies exposure risk.

(9) Only rabies specimens from mammals involved in human exposure, surveillance animals, or animals collected in an epidemiological study will be submitted for laboratory diagnosis. Shipments of rabies specimens in CONUS will be made to the DOD Food Analysis and Diagnostic Laboratory, Fort Sam Houston, TX, or another reliable laboratory, if appropriate. Shipments will be according to U.S. Army Medical Command/VETCOM procedures. The telephone number of the receiving laboratory must appear on the address label. OCONUS shipments will be made according to locally accepted procedures. A fully completed DD Form 2620 (Request For and Report of Laboratory Examination for Rabies) will accompany rabies specimens submitted for laboratory diagnosis.

(10) In order to implement a more meaningful and manageable rabies vaccination program of dogs, cats, and ferrets in the United States, the NASPHV recommends that all such animals should be identified (examples are, metal or plastic tags, microchips, and so forth) to allow for verification of rabies vaccination status. Use by DOD is mandatory. This will aid the administration of installation, local, State, national, and international procedures. The current edition of "Compendium of Animal Rabies Prevention and Control" will be utilized in establishing installation vaccination programs that comply with this regulation.

d. Standing operating procedure for installations without an assigned VCO. On those installations where paragraph c(5) above, does not apply because of remote assignment of the responsible Army VCO, the preventive medicine officer and the attending VCO will develop together, for DHS approval, a standing operating procedure for the installation rabies control program.

e. Animal immunization programs.

(1) The installation programs for immunizing against animal diseases other than rabies will be based on ethical, state-of-the-art practices, and will be governed by applicable Federal, State or foreign government rules and regulations.

(2) Immunizing agents, drugs, and biologicals will be administered only by a veterinarian or under the supervision of a veterinarian by personnel trained as veterinary animal care specialists.

f. Human-Animal Bond programs.

(1) The installation VCO and staff, in liaison with other health care professionals, will support HAB programs in an effort to improve community, family, and individual health.

(2) Veterinary Corps officers will assist in promoting a more complete understanding of the role of animals in the lives of the military individual, family, and community. They will further assist in the dissemination of this information to the military individual, family, and community, as well as to commanders and other health care professionals.

(3) Veterinary personnel will be alert to possible situations where the use of animals in therapy will be beneficial and will encourage this when indicated. Although animals should not always be considered as cures, animal-assisted programs have proven value as adjunctive therapy to existing treatment regimens. The veterinarian will maintain liaison with the MTF in order to facilitate program development.

(4) The veterinarian will ensure that all certified military therapy animals, HAAM, and AIM HI animals that are used in officially-sanctioned HAB programs are selected and maintained at an appropriate level of physical and behavioral acceptability according to Technical Bulletin Medical 4 (TB MED 4), appendix F.

(a) Physical criteria:

1. Size should be acceptable for the intended purpose.
2. Skin should be free from fleas, ticks, lice, mites, and dermatitis.
3. Teeth should be clean; the oral cavity should be healthy.
4. All immunizations must be current. The responsible VCO will inform volunteer pet owners of the vaccinations required for the species of pet being considered.
5. Fecal examination must be performed annually to demonstrate that the animal is free from intestinal parasites.
6. Biennial heartworm check must be negative and animal must be on a heartworm preventative as recommended for local area.
7. Animal should be free from any other medical problems (diarrhea, oculo-nasal discharge, and so forth).
8. Other tests will be performed as indicated for the particular program.

(b) Behavioral characteristics:

1. Obedient.

2. Friendly.
3. Nonaggressive.

(5) Veterinary personnel will function as a part of the military human health care team by being sensitive and responsive to the human needs of clients, staff, animal handlers, and others, as indicated. Subsequent referrals to the MTF or other agencies will be made as appropriate.

g. Professional liaison.

(1) Mutual cooperation between civilian and military practitioners is strongly encouraged. Veterinary Corps officers will keep in close contact with both civilian practitioners and associations. Participation of Army Veterinary Service personnel in local and State veterinary activities such as associations, immunization campaigns, fairs, epizootic control programs, public relations functions, and so forth, in a professionally complementary manner is authorized and encouraged.

(2) Army veterinarians are also authorized to assist, upon request of the local veterinary association or other appropriate civilian authority, in the prevention and control of diseases, conditions, or related public health situations which are of a nature that exceed the combined efforts of the local practitioners.

(3) Referrals of privately owned animals will not be made to specific individuals or facilities or to select subgroups. Military veterinarians may accept referrals for authorized procedures after personal verification with the referring civilian veterinarian.

(4) Referrals of MWDs, MWHs, and other Government-owned animals may be made to a specific specialist or facility that has the equipment and expertise to properly handle the case.

(5) In the event clarification is needed on the operation of a particular VTF, the president of the local veterinary association should first contact the local military installation veterinarian and his or her commander. If further clarification is needed, the AVMA will be contacted.

(6) All activities involving participation with non-Federal entities must be conducted in accordance with DOD 5500.7-R, Joint Ethics Regulation (JER), chapter 3.

h. Diagnostic laboratory services.

(1) The DOD Food Analysis and Diagnostic Laboratory, Fort Sam Houston, TX, 78234 conducts diagnostic laboratory and consultant services in the fields of veterinary microbiology, and clinical and anatomical pathology for the diagnosis, control, and treatment of diseases occurring among publicly owned and privately owned animals. Concerning the latter group of animals, diagnostic laboratory support will be limited to those diseases which may adversely affect the military community and the contiguous civilian population through transmission. The laboratory may conduct epidemiological and serological surveys and research of such diseases.

(2) The laboratory request forms shown below will be used when submitting the following classes of specimens or samples to the DOD Food Analysis and Diagnostic Laboratory:

(a) Clinical specimens: Applicable Standard Forms (SFs) 546 through 557 (Chemistry I, Chemistry II, Chemistry III (Urine), Hematology, Urinalysis, Serology, Parasitology, Microbiology I, Microbiology II, and Miscellaneous).

(b) Tissue for histopathology: SF 515 (Medical Record-Tissue Examination).

(c) Rabies specimens: DD Form 2620 or overseas command form.

Chapter 5

Department of Defense-owned and Government-owned (non-Department of Defense) Animal Program

5-1. Duties of the veterinarian

a. Veterinarians supporting installations to which MWDs are assigned, or where other DOD-owned or other Government-owned (non-DOD) animals are present, will—

(1) Provide complete veterinary medical and surgical care for DOD-owned and Government-owned (non-DOD) animals. DOD-owned animals will receive priority of care over Government-owned (non-DOD), privately owned, and NAF animals, except for emergent situations.

(2) Advise personnel in charge on veterinary medical aspects of animal procurement and training and assist in developing humane training methods and standards.

(3) Instruct handlers and supervisors on the health, care, and management of MWDs and other DOD-owned and Government-owned (non-DOD) animals. Instruction will include emergency first aid procedures and NBC protective measures for animals. Training of handlers will be conducted by Veterinary Service personnel upon initial assignment of the handlers, and at least annually. More frequent training of handlers is recommended, but not required.

(4) Advise the installation chief of Military Police or Security Forces and the Naval Criminal Investigative Service and other MWD-using activities on all matters pertaining to the health and care of MWDs, and advise appropriate agencies about the veterinary medical aspects of support to other DOD-owned and Government-owned (non-DOD) animals.

(5) Maintain veterinary medical records of MWDs and other DOD-owned and Government-owned (non-DOD) animals.

(6) Develop and conduct a veterinary preventive medicine program for all DOD-owned and Government-owned (non-DOD) animals on the installation.

(7) Conduct visits to make sure that feeding, housing, veterinary medical care, and animal husbandry are adequate; that humane standards of housing, handling, and use are maintained; and that medical records are properly maintained.

(8) Conduct sanitary inspections of MWD kennels, animal stables, cages, pastures, enclosures, and other related support facilities, on at least a quarterly basis. More frequent courtesy visits are encouraged.

(9) Provide veterinary support for biomedical research, education, training and testing, to include review of animal models, research protocols, facility sanitation inspections and veterinary care, according to AR 40-33/SECNAVINST 3900.38C/AFMAN 40-401(1)/DARPAINST 18/USUHSINST 3203, The Care and Use of Laboratory Animals in DOD Programs, DOD Directive 3216.1, Use of Laboratory Animals in DOD Programs, and the Animal Welfare Act (7 USC 2131-2156).

(10) Review and approve any plans for new construction or modification of existing kennels, stables, cages, pastures, enclosures, or other animal support and holding facilities.

(11) Perform physical examinations and evaluation of DOD-owned and Government-owned (non-DOD) animals before shipment, upon receipt, when declared excess, and at least every 6 months. Department of Defense Form 1829 (Record of Military Dog Physical Examination) will be used for documentation of semiannual physical examinations of MWDs and when MWDs are declared excess. It is not necessary to use a DD Form 1829 in conjunction with permanent change of station or temporary duty if one has been completed within the previous 90 days. Significant deviations from normal health and well-being of MWDs will be annotated on DD Form 2619 (Military Working Dog Master Problem List). The DD Form 2619 will be routinely reviewed and efforts made to resolve those medical problems when possible.

(12) Conduct disease surveillance programs for DOD-owned and Government-owned (non-DOD) animals and coordinate as necessary with the Army Veterinary Corps specialty advisors on laboratory service, MWDs, and equine medicine.

b. Pre-purchase examination of prospective DOD-owned and Government-owned (non-DOD) animals is as follows:

(1) Military Working Dog pre-purchase physical examinations will be conducted at the request of the procuring agency. Results of examination will be recorded on Lackland TC Form 126 (Veterinary Examination of Dog Offered for Donation or Sale to Government), which is provided to the owner of prospective MWDs at locations other than Lackland Air Force Base (AFB) by the procuring agency. Veterinarians assigned to installations with VTFs will examine prospective MWDs at no expense to the owner. Any vaccines or medications necessary to prepare the animal for shipment will be at Government (Appropriated Fund) expense. If an animal is owned by an individual not otherwise eligible to use VTF services, the VTF records will indicate, "These services were provided for a prospective MWD, in accordance with AR 40-905/SECNAVINST 6401.1B/AFI 48-131."

(2) Pre-purchase physical examinations for prospective DOD-owned horses (appropriated fund) will be performed by the installation veterinarian and will consist of a comprehensive physical examination, to include lameness evaluation and neurologic assessment. Testing for equine infectious anemia must be within the last 60 days and the individual responsible for the animal prior to transfer of ownership will produce appropriate documentation of such testing. The insertion of an identifying microchip is recommended at the time of pre-purchase examination. A complete blood count, fibrinogen, and equine serum chemistry evaluation are recommended. Other serologic testing or drug testing will be at the discretion of the examining VCO. The need for radiographs of bones and joints will be at the discretion of the examining VCO, based on history, physical examination, and intended use of the horse. Cost of vaccinations, health certificates, and any other treatments intended to prepare purchased horses for shipping will be at Government (Appropriated Fund) expense. Pre-purchase examinations for NAF horses and Appropriated Fund-purchased NAFI horses will be conducted only as time permits and completely at NAFI expense. Pre-purchase health requirements for these horses will be determined and set by the installation veterinarian.

c. Physical examinations of DOD-owned and Government-owned (non-DOD) animals will be performed at a frequency determined by the VCO, except that physical examinations of MWDs will be performed—

(1) Within 72 hours of arrival at a station, following either procurement or transfer.

(2) At least every 6 months. This semiannual comprehensive physical examination will include:

(a) Examination for canine heartworms (appropriate screening test for antigen) and intestinal parasites, if not done within the past year.

(b) Complete blood count, serum chemistries, and urinalysis, if not done within the past year.

(c) Dental examination and, if indicated, oral hygiene procedures.

(d) A routine pelvic radiograph (ventrodorsal (VD) view of the pelvis, with femurs) and lateral view of the lumbosacral junction every 2 years, unless other or more frequent radiographs are clinically indicated.

(e) Immunizations, as required in accordance with chapter 5-4 above.

(f) Annual testing for infectious diseases, as directed by the Department of Defense Military Working Dog Veterinary Service (DODMWDVS).

(g) Annual serology and/or other tissue sampling as directed by DODMWDVS.

(3) Prior to movement to a new station. Prior to physical examination, the VCO will ascertain the possible special requirements of the using agency; for example, AR 190–12, paragraph 4–1 and AFI 31–202, chapter 7.1 prescribe requirements for MWDs under supervision of the U.S. Army Military Police and USAF Security Forces, respectively. The veterinarian will provide technical guidance to commanders responsible for shipment of MWDs and advise them on compliance with provisions of Federal, State, Territorial, and foreign government regulations and AR 40–12/SECNAVINST 6210.2A/AFR 161–4, section III, para 22(i) related to movement of animals. The following will be performed prior to shipment:

(a) A physical examination will be conducted not more than 10 days prior to shipment, according to paragraphs (2)(a) through (e) above.

(b) Unless prohibited by the receiving state or country, each dog will receive appropriate immunizations, consisting of rabies, canine distemper, canine adenovirus–2, canine parvovirus, and leptospirosis, if not done within the past 6 months. Immunizations against other canine diseases may be considered in special circumstances, but should be limited to those to which the MWD has a reasonable likelihood of exposure.

(c) Treatment to eliminate external and internal parasites will be given if required.

(d) The responsible VCO will issue DD Form 2209 (Veterinary Health Certificate) and/or DD Form 2621 (Veterinary Vaccination and Trilingual Health Certificate) not more than 10 days prior to shipment. For shipment to European Union countries the Veterinary certificate for domestic dogs, cats and ferrets entering the European community for noncommercial movements (regulation (ec) no 998/2003) will be issued. These forms are used in relation to interstate or overseas shipment of an animal.

(4) When a MWD is declared excess by the accountable unit, the examining VCO will provide a copy of DD Form 1829, which includes a synopsis of the MWD's medical history, to the accountable unit to accompany the excess report.

5–2. Death or euthanasia of Department of Defense-owned animals

a. Death of a MWD. The kennel master will notify the local VCO upon the death of a MWD. The VCO will then notify the first field grade VCO in his or her chain of command. As soon as possible after the death of a MWD, the veterinarian will prepare, sign, and submit to the responsible officer in the owning police/security unit a DD Form 1743 (Death Certificate of Military Dog), setting forth fully a tentative diagnosis and summary of medical problems leading to death or euthanasia. The same summary, associated clinical findings, and tentative diagnosis will be recorded in the MWD medical record on an SF 600 (Health Record–Chronological Record of Medical Care).

b. Euthanasia.

(1) *Emergent.* When a DOD-owned animal (including MWDs) is diagnosed with a medical condition that constitutes an immediate threat to life or limb, euthanasia may be performed to prevent undue suffering. In emergent circumstances, the VCO has decision-making authority. (See AFJI 23–224/AR 700–81/OPNAVINST 10570.1/MCO 10570.1A.)

(2) *Non-emergent.* Veterinary Corps officers do not have authority to order non-emergent euthanasia. The Senior Veterinary Commander/Officer in Charge in VETCOM, Korea, Europe, and Southwest Asia will establish consultative procedures and designate a VCO or VCOs to serve as consultants for the other VCOs within the command. These consultants will assist in the establishment of diagnosis, determination of fitness for duty, and recommendations on adoption or euthanasia for dogs deemed no longer fit for duty for non-emergent reasons or conditions. Veterinary Corps officers will coordinate with this command-designated consultant prior to making recommendations to the unit commander of the assigned MWD for either euthanasia or adoption (see paragraph 5–3). The Commander of the unit to which the MWD is assigned is the decision-making authority for the final disposition of the animal, and will provide the attending VCO this decision in writing.

(3) *Documentation.* Euthanasia of any animal will be accomplished in a humane manner, using approved drugs and techniques. The date, reason for euthanasia, method of euthanasia, and name and quantity of drugs used will be recorded in the final entry of the SF 600.

c. Necropsy.

(1) The installation VCO will perform a complete necropsy, in accordance with TB MED 283, on all MWDs that die or are euthanized. Necropsy results will be entered on DD Form 1626 (Veterinary Necropsy Report), and the original DD Form 1626 will be filed in the MWD's medical record.

(2) Necropsy of other DOD-owned and Government-owned (non-DOD) animals will be at the discretion of the installation commander and the attending veterinarian.

d. Disposition of deceased animals.

(1) Deceased DOD-owned and Government-owned (non-DOD) animals will be disposed of in accordance with local, State, and Federal regulations.

(2) Experimental animals, laboratory tissue specimens, and infectious wastes incident to laboratory operations will be disposed of as stated in AR 40–5, NAVFAC MO–213, TM 5–634, OSHA 3127, and State, Federal and foreign government medical waste laws and regulations.

e. Disposition of MWD records. Following adoption or necropsy of an MWD:

(1) The original complete medical record and any supporting radiographs will be forwarded to the DOD Military Working Dog Veterinary Service, Central Records Repository, 1219 Knight Street, Lackland Air Force Base, TX 78236-5631. Copies of DD Form 1743 and DD Form 1626 will be forwarded with the medical record of the deceased MWD.

(2) A copy of the DD Form 1626, DD Form 1743, and DD Form 2619 will be forwarded, with tissue specimens, to the Armed Forces Institute of Pathology (AFIP), Department of Veterinary Pathology, 14th Street and Alaska Avenue NW, Washington, DC 20306.

5-3. Adoption of military working dogs

Chapter 153, title 10, Section 2583, United States Code (10 USC 2583) permits the adoption of MWDs at the end of the dog's useful working life or when the dog is otherwise excess to the needs of the DOD. The decision as to whether a particular MWD is suitable for adoption will be made by the commander of the last unit to which the dog is assigned before being declared excess. The unit commander will consider the medical recommendations of the supporting VCO in making the decision regarding a particular dog's adoptability. Military working dogs may be adopted by law enforcement agencies, former handlers of these dogs, and other persons capable of humanely caring for these dogs. Procedures for adoption of MWDs will be in accordance with policy established by the DOD Executive Agent for the MWD Program. At the time of transfer, the adopting agency/individual assumes full responsibility for all future expenses related to veterinary care of an adopted MWD. New owners of adopted MWDs will also assume liability for all future acts of the adopted MWD. Once the adoption process is complete, the original MWD medical record and radiographs will be mailed to the DODMWDVS. The adopting agency/individual will receive copies of the following forms from the MWD medical record:

a. SF 600, containing a summary of the MWD's current medical condition and all medications currently being administered (dosage, frequency, duration, and so forth). The final entry will state "MWD adopted to (name, address, phone number)."

b. DD Form 1829 (Final semiannual physical examination completed at the time of adoption).

c. DD Form 1741 (Military Working Dog Immunization Record).

d. DD Form 2619 (Military Working Dog Master Problem List).

e. DD Form 2209 (Veterinary Health Certificate).

5-4. Immunizations

a. Immunization of MWDs, DOD-owned and Government-owned (non-DOD) canines.

(1) *Rabies.* Animals that are in a deployable status will be immunized annually. For all others, immunization will be in accordance with the latest edition of "Compendium of Animal Rabies Prevention and Control" prepared by the NASPHV, but not less frequent than once yearly. See paragraph 4-2c for implementation of the rabies control program. In addition, compliance with the rabies vaccination laws and regulations of States, Territories, and foreign countries is mandatory.

(2) *Other immunizations.* Annual immunizations will include canine distemper, adenovirus (type 2), canine parvovirus, and leptospirosis. Additional immunizations may be given when needed to prevent an epizootic, or when recommended by the Director, DODMWDVS.

(3) *Recording of immunizations.* Immunizations will be recorded on DD Form 1741.

b. Other species. Immunization of non-canine animal species will be according to accepted standard of practice relative to the species and the risk of exposure.

5-5. Diet and weight management

a. Military Working Dogs.

(1) *Weight.* An ideal weight range (5 pound range) for each MWD will be established by an Army VCO. Dogs will be fed accordingly to maintain weight within this designated range. Military Working Dogs will be weighed at least monthly and the weight recorded appropriately in the medical record. The ideal weight is determined by individual MWD body conformation such that the ribs and pelvic bones are palpable with slight fat cover and with a slight abdominal tuck and waistline when viewed from the side and above. The diet will be increased or decreased to maintain weight in the ideal weight range.

(2) *Diet.* MWDs will be fed a standard diet that conforms to the specifications regarding metabolizable energy, digestibility, nutritional characteristics, and formulation, as determined by the U.S. Army Veterinary Service and the Director, DODMWDVS. The standard diet to be fed to all MWDs is a commercial product available through the Federal Supply System. The specific amount and type of food provided to each MWD will be specified by the attending VCO and recorded monthly in the medical record.

(3) *Special diets.* Food other than the above standard diet may be fed to individual MWDs only if prescribed by the attending Army VCO, on a case by case basis.

b. Military Working Horses.

(1) *Weight.* An ideal weight range or body condition score for each MWH will be established by an Army VCO. Horses will be weighed, weight taped, or body condition scored at least quarterly and the information recorded appropriately in the medical record.

(2) *Diet.* Military Working Horses will be fed a diet that meets each animal's nutritional needs to maintain health and weight within the desired range.

Chapter 6

Fiscal Management and General Administrative Procedures

6-1. Fiscal management

The Government provides resources for the care and treatment of DOD-owned, other Government-owned (non-DOD), and NAFI-owned animals, and for the protection of the military community from zoonotic and other animal diseases and conditions.

a. Department of Defense-owned animals. The Defense Health Program (DHP) will provide appropriated fund support for drugs, supplies, and equipment for the treatment of DOD-owned animals, to include unit mascots, as defined in paragraph 3-1c. Army Veterinary Service man-hours will be provided without charge or reimbursement.

(1) Veterinary Health Program costs for all operating budget requirements in support of DOD-owned animals, to include unit mascots, will be included in the DHP operating budget. These requirements include costs for items such as equipment, operational temporary duty, vehicle maintenance, fuel costs, facilities, and communications necessary to provide the appropriate medical care.

(2) When NAF supplies, drugs, biologicals, or manpower are utilized for DOD-owned animals, to include unit mascots, procurement will be made at cost, not less than quarterly, through DHP appropriated funds.

(3) Civilian veterinary medical care for DOD-owned animals, to include unit mascots, is authorized in emergencies when an Army veterinarian is not available or when the necessary care is beyond the capabilities of the local VTF and it is not possible or practical from another VTF. The attending Army VCO is responsible for procedures to be used to obtain civilian veterinary care in emergencies. Defense Health Program funds will be used for reimbursement for services provided by the civilian veterinarian. When expertise, facilities, or equipment are not available to handle a non-emergent case, MWDs must be referred to the Department of Defense Military Working Dog Veterinary Service (DODMWDVS), 1219 Knight Street, Lackland AFB, TX 78236-5631, or OCONUS veterinary MWD referral facility for treatment if prior approval is given by the referral facility.

(a) The parent unit to which the dog is assigned provides funds to transport the dog to and from Lackland AFB or the OCONUS veterinary MWD referral facility.

(b) When referring MWDs for treatment at the DODMWDVS, use DA Form 7593 (Department of Defense Military Working Dog Veterinary Service Referral Information Form).

b. Government-owned (non-DOD) animals.

(1) Payment for nonappropriated fund (NAF) procured supplies, drugs, or biologicals used in support of Government-owned (non-DOD) animals will be made, at cost, by the Government agency owning the animals.

(2) Civilian veterinary care (paragraph 3-6) may be provided to Government-owned (non-DOD) animals and will be at the supported agency's expense.

c. Nonappropriated fund instrumentality owned and nonappropriated fund instrumentality animals.

(1) Any animal used for the purpose of generating nonappropriated funds will be considered nonappropriated fund instrumentality.

(2) Payment for NAF-procured supplies, drugs, or biologicals used in support of nonappropriated fund instrumentality animals will be made by the nonappropriated fund instrumentality owning the animals.

(3) Civilian veterinary care (paragraph 3-6) may be provided to nonappropriated fund instrumentality animals and will be at nonappropriated fund instrumentality expense.

d. Privately owned animals.

(1) When animal owners who are authorized DOD medical care receive a direct benefit from the VTF, they will be charged for the items provided or utilized.

(2) Drugs, biologicals, and expendable supplies used for privately owned animals must be provided at no cost to the Government.

(3) For the purpose of administering the funds collected, Veterinary Service NAFs will be operated as non-MWR Supplemental Mission NAFs, according to applicable NAF regulations and directives. Other Services may utilize the Army NAF, or maintain their own installation NAF to support the fiscal management of the VTF. For non-Army NAFs, NAF accounting procedures of the other Services and local installation requirements will be followed. The NAF is to be operated as a nonprofit, self-supporting activity. The NAF is established only for the fiscal administration of the VTF; operational policy, to include ultimate fiscal decisions, resides with the installation veterinarian.

(4) Fees and charges for the treatment of privately owned animals will be set by the VCO in charge of the VTF and

reviewed by the installation NAF council. Problems will be addressed through the veterinary chain of command. Uniform prices may be established for some fees by the Commander, VETCOM or the overseas MACOM veterinarian outside of VETCOM's area of responsibility. Unless approved by the Commander, VETCOM or the overseas MACOM veterinarian outside of VETCOM's area of responsibility, administrative or professional fees will not be charged. A majority of the profits generated through the treatment of privately owned animals will be used to enhance and improve the service, equipment, and condition of the VTF. Price determination will not be based on profitability but on factors to compensate for the following:

- (a) Shipping.
 - (b) Breakage.
 - (c) Deterioration of drugs, biologicals, and supplies.
 - (d) Cost of furnishings.
 - (e) The improvement of facilities.
 - (f) Salaries of required NAF civilian VTF-support personnel, including administrative staff and NAF contract veterinarians.
 - (g) Equipment necessary to keep abreast of current state-of-the-art practices and associated expenses.
- (5) In accordance with public law (1986 Department of Defense Authorization Act, Public Law-99-145, Section 685), a user fee will be charged for each transaction at the VTF. The fee will be paid, by the NAFI, to the U.S. Treasury, in accordance with section 3302, title 31, United States Code (31 USC 3302).

6-2. Supply procedures

a. All initial procurement of nonexpendable or durable medical materiel needed to support the VTF may be programmed and obtained with appropriated funds or nonappropriated funds. Replacement due to fair wear and tear may be either from appropriated or nonappropriated funds.

b. All expendable medical materiel needed to examine and treat DOD-owned and other Government-owned (non-DOD) animals will normally be acquired with appropriated funds from medical supply or by the cognizant contracting office according to applicable procurement laws and regulations, including the Federal Acquisition Regulation (FAR) and the Army FAR supplement. This materiel may be acquired from the private animal care operations of the installation Veterinary Service when there are organizational or functional reasons for having medical materiel furnished by other than an appropriated fund source, as in situations where only a NAFI can provide the materiel. (See table 6-1, Function: Drugs, biologicals, and supplies for an example.) NAFIs owning animals will reimburse the Veterinary Service NAFI at cost for NAF supplies used.

c. Expendable medical materiel needed to examine and treat privately owned or Government-owned animals may be procured from commercial sources through the NAF. Controlled substances and other expendable medical materiel for use in the VTF may be processed through the MTF medical supply. In this case, an appropriate reimbursement system will be established.

Table 6-1
Fiscal administration of the DOD veterinary treatment facility

Function: Construction and modification of facilities.

Appropriated Funds: Utilize.

Veterinary Service NAF: May supplement appropriated funds according to AR 215-1, chapter 4.

Function: Maintenance and repair of facilities.

Appropriated Funds: Utilize.

Veterinary Service NAF: May supplement appropriated funds according to AR 215-1, chapter 4.

Function: Utilities.

Appropriated Funds: Utilize.

Veterinary Service NAF: Not authorized.

Function: Purchase, maintenance, and repair of equipment.

Appropriated Funds: Utilize.

Veterinary Service NAF: May supplement appropriated funds according to AR 215-1, chapter 4.

Function: Custodial services.

Appropriated Funds: Utilize.

Veterinary Service NAF: May supplement appropriated funds according to AR 215-1, chapter 4.

Table 6-1
Fiscal administration of the DOD veterinary treatment facility—Continued

Function: Civilian administrative personnel.

Appropriated Funds: Appropriated funds will be used when workload requirements justify only one civilian associated primarily with mission requirements not directly benefiting individual animal owners.

Veterinary Service NAF: The Veterinary Service NAFI will be used when administrative personnel are associated with NAF services primarily of direct benefit to animal owners; such as, completing vaccination and health certificates, collecting fees, working as a receptionist or appointment clerk, maintaining health records, or employed in NAFI administration and other services for which the NAFI receives remuneration.

Function: Veterinary Professional Personnel.

Appropriated Funds: Appropriated funds may be used when workload requirements justify a veterinarian and/or animal technician associated primarily with mission requirements not directly benefiting individual animal owners.

Veterinary Service NAF: The Veterinary Service NAFI will be used when veterinary professional personnel (Doctors of Veterinary Medicine or animal care technicians) are associated with NAF services primarily of direct benefit to privately owned animals and their owners.

Function: Drugs, biologicals, and supplies.

Appropriated Funds: Utilize for DOD-owned and other Government-owned (non-DOD) animals. Funds may also be used for the treatment of privately owned animals in overseas locations when veterinary supplies cannot be readily obtained from commercial sources.

Veterinary Service NAF: Utilize for the treatment of privately owned animals. These Veterinary Service NAFI-purchased items may be used for the treatment of DOD-owned and other Government-owned (non-DOD) animals when the number of DOD-owned and other Government-owned (non-DOD) animals makes it impractical to keep two separate inventories. Purchase for DOD-owned and other Government-owned (non-DOD) animals will be made with DHP Appropriated Funds, by locally determined procedures for the actual cost of the materials used.

Function: Confinement services for strays: Euthanized after 3 working days of confinement.

Appropriated Funds: Financial responsibility of DHP appropriated funds if confinement is performed in a Veterinary Service NAF facility. If confinement is performed in any other type of facility, the installation is responsible for funding in accordance with paragraph 2-3f above.

Veterinary Service NAF: If confinement is performed in a Veterinary Service NAF facility, DHP appropriated funds will purchase impoundment services from the Veterinary Service NAFI on the basis of \$3.00 to \$5.00 per animal impoundment day. If justified, the VETCOM Regional Veterinary Command Commander or the overseas MACOM veterinarian outside of VETCOM's area of responsibility may approve different reimbursement rates based on actual NAF expenditure history.

Function: Confinement services for strays: Adopted after 3 working days of confinement.

Appropriated Funds: Financial responsibility of DHP appropriated funds if confinement is performed in a Veterinary Service NAF facility. If confinement is performed in any other type of facility, the installation is responsible for funding in accordance with paragraph 2-3f above.

Veterinary Service NAF: If confinement is performed in a Veterinary Service NAF facility, DHP appropriated funds will purchase services from the Veterinary Service NAFI on the basis of \$3.00 to \$5.00 per animal impoundment day until the animal is adopted, for up to 3 working days. If justified, the VETCOM Regional Veterinary Command (RVC) Commander or the overseas MACOM veterinarian outside of VETCOM's AOR may approve different reimbursement rates based on actual NAF expenditure history. Adopting owner will have responsibility for all expenses after adoption. The NAF will assume responsibility after 3 working days, prior to adoption.

Function: Confinement services for strays: Owned animals picked up and confined as strays.

Appropriated Funds: Not applicable.

Veterinary Service NAF: Owner is responsible for all costs.

Function: Rabies suspects of animal owners residing on a military installation.

Appropriated Funds: Confinement days in Government facilities are the financial responsibility of DHP appropriated funds.

Veterinary Service NAF: DHP appropriated funds will purchase quarantine services from the Veterinary Services NAFI on the basis of \$3.00 to \$5.00 per animal quarantine day. If justified, the VETCOM RVC Commander or the overseas MACOM veterinarian outside of VETCOM's AOR may approve different reimbursement rates based on actual NAF expenditure history. If a Government quarantine facility is not available, the animal owner is responsible for all costs.

Function: Rabies suspects of animal owners residing off the installation.

Appropriated Funds: Confinement days in Government facilities are the financial responsibility of DHP appropriated funds, when the owner is authorized DOD medical care.

Veterinary Service NAF: DHP appropriated funds will purchase quarantine services from the Veterinary Services NAFI on the basis of \$3.00 to \$5.00 per animal quarantine day. If justified, the VETCOM RVC Commander or the overseas MACOM veterinarian outside of VETCOM's area of responsibility may approve different reimbursement rates based on actual NAF expenditure history. If a Government quarantine facility is not available, the animal owner is responsible for all costs.

Function: NAFI-owned and NAFI-managed animals.

Appropriated Funds: No charge will be made for the professional services of the military Veterinary Service personnel.

Veterinary Service NAF: NAFI reimburses Veterinary Services NAFI for the cost of all drugs, biologicals, and medical supplies used in the treatment of NAFI-owned animals.

6-3. Nonappropriated funds on Department of Defense installations

The NAF will be established as a Veterinary Service fund under the NAF system for fiscal management of the VTF as authorized by proper command. Annex accounts may be established for other installations. The VTF may use DA Form 1992 (Nonappropriated Fund Receipt Voucher) or equivalent (Installation NAF Veterinary Receipts) to record NAF receipts when cash registers or computers are not used. Veterinary Treatment Facility functions are an integral part of the medical mission. The VTF will not be considered a morale, welfare, or recreation (MWR) activity, (or Air Force Services facility) and operational control, to include fiscal decisions, will be by the responsible VCO. Use of DHP appropriated funds or NAF monies will be as directed in table 6-1.

6-4. Controlled substances

a. Controlled substances are drugs so designated by the Drug Enforcement Administration (DEA). Only veterinary facilities located in a State as defined by the DEA will be registered by the DEA. A State is any State, territory, possession of the United States, the District of Columbia, the Commonwealth of Puerto Rico, and the Trust Territory of the Pacific Islands.

b. Veterinary facilities that do not purchase controlled substances from commercial sources, or those that are located outside of a State, will not be registered by the DEA. In these areas, controlled substances may be procured in accordance with AR 40-61, section 3-24.

c. Management and accountability of controlled items on Army installations will be according to AR 40-3 (app B), AR 40-61, section IX and DOD 7000.14-R, Vol. 13; on Air Force installations, AFI 44-102, section 1.32 and AFI 37-138, section 2.1; and on Navy and Marine Corps installations, NAVMED P-117, chapter 21. All personnel involved in the management and utilization of controlled items are responsible for assuring compliance with the procedures set forth in the appropriate regulations. Compliance will be assessed during management control evaluations.

(1) Department of the Army Form 3949 (Controlled Substances Record) or equivalent will be used to record receipts, issues, and inventories of controlled drugs. On the DA Form 3949, enter the DOD-owned or other Government-owned (non-DOD) animal's name and number in the column titled "Name and Patient." For privately owned animals, record the name of the owner and the animal's name in this column.

(2) If separate supply accounts are maintained for the NAFI and for DOD-owned or other Government-owned (non-DOD) animals, a separate DA Form 3949 will be maintained for each account.

(3) Animal medical records will reflect utilization rates to support the DA Form 3949 entries.

d. The installation VCO will ensure that narcotics, dangerous drugs, and other controlled substances are safeguarded at each VTF, in accordance with the references in c. above. The installation VCO will request the Military Police or Security Forces to conduct physical security surveys and inspections of locations where narcotics, dangerous drugs, and controlled substances are stored. The surveys will be according to security regulations of the Service controlling the installation.

e. Excessive quantities of narcotics, dangerous drugs, and controlled substances will not be maintained by the VTF. Disposition will be made in the presence of a disinterested inventory officer, according to local policy and existing directives.

6-5. Veterinary medical records

a. *Department of Defense owned and other Government-owned (non-DOD) animals.* Veterinary medical records (ARIMS Record number 40-905e) will be initiated by the time an animal is accepted by the DOD/Government and must accompany the animal on all changes of station and military deployments. U.S. Army veterinarians are responsible for information pertaining to the medical records of DOD-owned and other Government-owned (non-DOD) animals. Only veterinary personnel may make or direct entries in veterinary medical records.

(1) *Military Working Dog medical records.* The VCO will ensure that animal medical records are current, accurate, and complete. Only a licensed veterinarian may direct entries concerning medical treatment. Veterinary medical records for MWDs, together with the administrative records, constitute the permanent record file for each MWD. When an MWD is procured, the permanent record file will be initiated by the DODMWDVS, as prescribed by AFJI 23-224/AR 700-81/OPNAVINST 10570.1/MCO 10570.1, para 3. Contents of the records of MWDs must be arranged according to instructions of the DOD Military Working Dog Veterinary Service, 1219 Knight Street, Lackland AFB, TX 78236-5631. The forms listed below constitute the MWD's veterinary medical record.

(a) Air Force (AF) Form 2110A (Health Record) is the MWD health folder. It is prepared by the DODMWDVS and is issued with the MWD. A photograph of the MWD will be attached to the inside rear cover of the record jacket. This will be accomplished at the DODMWDVS. Forms will be placed in the MWD medical record according to DODMWDVS instructions. The VCO is responsible for the folder content and maintenance.

(b) Lackland TC Form 126 or equivalent is prepared by a veterinarian who examines the dog prior to shipment to Lackland AFB for procurement. This form, together with specifications and general requirements for dogs offered for donation or sale to the U.S. Government, is provided to dog owners upon application to the DODMWDVS. The Lackland TC Form 126 will not be in records of dogs that are originally examined at Lackland AFB. Lackland TC

Form 126 is stocked and issued by the DOD Military Working Dog Veterinary Service, 1219 Knight Street, Lackland AFB, TX 78236-5631.

(c) Wilford Hall Medical Center (WHMC) Form 3381 (Military Working Dog Procurement Physical Examination) is used to record the initial examination physical performed by the DODMWDVS at procurement.

(d) Department of Defense Form 1829 is used to record the results of physical examinations accomplished on MWDs. Make all entries in ink, legible, brief, and concise, but with complete medical accuracy. Use section 36 to outline the medical history. Make a statement of fitness for duty in the summary. The examining veterinarian will sign the form.

(e) Department of Defense Form 2619 is used to list significant health problems or other unusual conditions of MWDs.

(f) Standard Form 600 constitutes the basic detailed chronological record of the MWD's medical history. Make entries of all medical care for an MWD on this form using the problem-oriented medical record (POMR) approach. Make entries in ink or type. Every entry must be legible. When initiating a clinical record, complete all patient and facility data. Date each entry and identify the veterinarian's organizational address. (Use a rubber stamp if available.) There is no need to repeat address identification on additional entries on the same page unless the sequence was interrupted by treatment at another facility. Make POMR entries in the chief complaint, subjective data, objective data, assessment and plan format (SOAP). All entries must be signed. A military member will add rank and branch or military occupational specialty (MOS); a civilian will add title or certification. Rubber-stamped signatures will not be used in place of written signatures or initials. Block stamps or the equivalent legibly printed information is required to identify the health care provider. Block stamps for military members will contain printed name, rank, and branch or MOS; block stamps for civilians will contain printed name and title or certification. To correct an entry, a single line will be drawn through the incorrect information so that the information remains readable. The new information is then added, and the entry is dated and signed by the person making the correction. Completed forms are transferred to the inner side of the front cover of the animal health record.

(g) Department of Defense Form 1741 serves as the official record for all immunizations given to an MWD. Immunizations recorded on this form are not required to be entered on SF 600. The DD Form 1741 will be filed in the MWD medical record in accordance with DODMWDVS instructions.

(h) Department of Defense Form 1626 will be prepared and distributed as required by TB MED 283.

(i) Department of Defense Form 2209 will be prepared when a MWD is moved or shipped from one installation or command to another, shipped interstate, or shipped to a foreign country. In addition to copies of the certificate that may be required to comply with Federal, State, and foreign requirements for the interstate or international shipment of MWDs, a copy will be provided to the MWD's handler to accompany the shipment and a copy will be placed in the MWD's health record. For shipment to European Union countries the Veterinary certificate for domestic dogs, cats and ferrets entering the European community for noncommercial movements (regulation (ec) no 998/2003) will be issued .

(j) Department of Defense Form 1743 is used to close out accountability for MWDs. The DD Form 1743 will be signed by a VCO and incorporated into the MWD medical record before the record is forwarded to the DODMWDVS.

(2) *Additional forms.*

(a) Medical standard forms (SFs) listed in AR 40-66, figure 5-1, are authorized for use by VTFs for DOD-owned and other Government-owned (non-DOD) animals.

(b) Table 6-2 lists the SFs and optional forms (OFs) used to record medical information about MWDs.

(c) Laboratory forms SF 515, SF 516 (Medical Record-Operation Report), and SF 519B (Radiologic Consultation Request Report) should be typewritten when possible.

(d) Department of Defense Form 2344 (Veterinary Treatment Record) will continue to be used as the health folder for DOD-owned and other Government-owned (non-DOD) animals other than MWDs.

(3) *Disposition of records.* Upon death of a MWD, the complete medical record and all radiographs will be sent to the DOD Military Working Dog Veterinary Service, Central Records Repository, 1219 Knight Street, Lackland AFB, TX 78236-5631.

b. *Privately owned animals.* Veterinary medical records (ARIMS Record No. 40-905d) will be initiated at the time of privately owned animal registration or at the time of the first VTF visit. U.S. Army veterinarians are responsible for information within the medical records of privately owned animals. Computer records are acceptable and are outlined in AR 25-400-2, chapter 3-1.

(1) *Health records.* The forms listed below constitute the health records of privately owned animals.

(a) Department of Defense Form 2344 will be used as the privately owned animal medical record holder.

(b) Department of Defense Form 2208 (Rabies Vaccination Certificate) will be prepared for each animal immunized against rabies. The original copy will be furnished to the owner. A duplicate copy will be maintained by the veterinarian. Constant block information may be preprinted or pre-stamped. Additional copies may be made and distributed as required. NASPHV Form 51 (Rabies Vaccination Certificate) may be used in place of the DD Form 2208, if the DD Form is not available. Computer-generated Rabies Vaccination Certificates may be used in place of DD Form 2208, if all information required by the DD Form 2208 is present. Government forms (for example; DD

Form 2208, NASPHV Form 51) may be required for certain OCONUS destinations that might not accept computer-generated certificates.

(c) Department of Defense Form 1745 will be prepared when an owner requests euthanasia of a privately owned animal.

(d) Department of Defense Form 2209 or DD Form 2621, as appropriate, will be prepared at the request of the owner to enable interstate and international shipment. For shipment to European Union countries the Veterinary certificate for domestic dogs, cats and ferrets entering the European community for noncommercial movements (regulation (ec) no 998/2003) will be issued. Four copies usually are required; one for the owner, one to accompany the animal, one for the regulatory official in the destination State or country, and one for the VTF files. Veterinary Corps officers and NAF veterinarians working in a VTF are considered accredited by the USDA and may sign health certificates for DOD-owned, other Government-owned (non-DOD), NAF-owned, and privately owned animals. Some countries may still require federal (USDA) endorsement of a health certificate. This requires a signature by the federal official in the state where the health certificate is being issued.

(e) Department of Defense Form 2343 (Veterinary Health Record) will be used as a cover page to provide a master problem list and other essential information, such as animal data, immunization data, or laboratory procedures.

(f) Department of Defense Form 2623 is used by the VCO to authorize home confinement of a privately owned rabies suspect animal.

(g) Department of Defense Form 2622 (Animal Release) will be completed when a privately owned animal is being kept at the VTF for medical treatment as a temporary responsibility of the veterinarian. The DD Form 2622 will be filed in the animal's record.

(h) Standard Form 600 is used to record all medical care for privately owned animals. All entries will be signed. Use the POMR approach when appropriate.

(2) Additional forms. Use of medical SFs for privately owned animals is authorized. See table 6-2 for SFs and OFs that may be used to record medical information for privately owned animals. (Computer generated forms are acceptable.)

Table 6-2
Standard form and optional form number, title, and instructions for recording of animal medical information.

Optional or standard form: OF 522

Record: (Medical Record-Request for Administration of Anesthesia and for Performance of Operations and Other Procedures). Use as applicable.

NSN: N/A

Optional or standard form: SF 515

Record: (Medical Record-Tissue Examination). Use as applicable.

NSN: N/A

Optional or standard form: SF 516

Record: (Medical Record-Operation Report). Use as applicable.

NSN: 7540-00-634-4156

Optional or standard form: SF 519-B

Record: (Radiological Consultation Request Report.) Use as applicable.

NSN: 7540-00-634-4160

Optional or standard form: SF 545

Record: (Laboratory Report Display). Display various laboratory reports.

NSN: 7540-00-181-8362

Optional or standard form: SF 546

Record: (Chemistry I). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8358

Optional or standard form: SF 547

Record: (Chemistry II). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8352

Optional or standard form: SF 548

Record: (Chemistry III (Urine)). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8353

Table 6-2
Standard form and optional form number, title, and instructions for recording of animal medical information.—Continued

Optional or standard form: SF 549

Record: (Hematology). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8354

Optional or standard form: SF 550

Record: (Urinalysis). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8355

Optional or standard form: SF 551

Record: (Serology). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8357

Optional or standard form: SF 552

Record: (Parasitology). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8350

Optional or standard form: SF 553

Record: (Microbiology I). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8351

Optional or standard form: SF 554

Record: (Microbiology II). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8349

Optional or standard form: SF 557

Record: (Miscellaneous). Use as applicable; attach to SF 545.

NSN: 7540-00-181-8344

Optional or standard form: SF 600

Record: (Health Record—Chronological Record of Medical Care). Use as applicable.

NSN: N/A.

6-6. Posting of warning signs

a. Warning signs will be posted, if applicable, on exterior fencing and MWD kennel runs and exercise areas. These signs will be placed so that personnel approaching the area from any direction will be able to read the signs at least 50 feet before reaching the runs. Signs will have the following words: OFF LIMITS, DANGER, MILITARY WORKING DOG AREA.

b. A warning sign will be posted on the entrance of each kennel and cage used to quarantine rabies suspects, with the following words: OFF LIMITS, DANGER, RABIES SUSPECT.

c. A warning sign with the following words will be posted at the VTF entrance used for MWDs: OFF LIMITS, DANGER, MILITARY WORKING DOG ENTRANCE.

d. A warning sign with the following words will be posted on exterior walls and fencing of stables and exercise areas used for quarantine of equines upon their arrival at military installations: OFF LIMITS, QUARANTINE AREA.

e. Prior to construction, placement, or replacement of the above signs, coordination of sign requirements will be conducted with the installation office having responsibility for signage.

f. In other than English-speaking countries, these signs will be bilingual, using the native language of the host nation, as well as English.

6-7. Professional civilian employment

a. Veterinary Corps Officers may engage in civilian employment in accordance with provisions of AR 40-1, section 1-8.

b. A VCO may take part in any no-fee consultation with a civilian practitioner if—

- (1) The consultation does not interfere with his or her official duties.
- (2) The consultation is requested by the civilian practitioner.
- (3) The VCO's supervisor concurs.

Appendix A References

Army publications are available at www.apd.army.mil. DOD publications are available at www.dtic.mil/whs/directives; Air Force publications are available at AFPAMubs.hq.af.mil; Navy publications are available at neds.daps.dla.mil, <http://navymedicine.med.navy.mil>.

Section I Required Publications

AR 25-400-2

The Army Records Information Management System (ARIMS). (Cited in para 4-1b(2).)

AR 40-1

Composition, Mission, and Functions of the Army Medical Department. (Cited in paras 3-6, 6-7a.)

AR 40-3

Medical, Dental, and Veterinary Care. (Cited in paras 3-6, 6-4c.)

AR 40-5

Preventive Medicine. (Cited in paras 4-2c(5), 5-2d(2).)

AR 40-12/SECNAVINST 6210.2A/AFR 161-4

Quarantine Regulations of the Armed Forces. (Cited in paras 4-1g, 5-1c(3).)

AR 40-33/SECNAVINST 3900.38C/AFMAN 40-401(I)/DARPAINST 18/USUHSINST 3203

The Care and Use of Laboratory Animals in DOD Programs. (Cited in para 5-1a(9).)

AR 40-61

Medical Logistics Policies and Procedures. (Cited in paras 6-4b, 6-4c.)

AR 40-66

Medical Record Administration and Health Care Documentation. (Cited in paras 4-2c(5), 6-5a(1)(f), 6-5a(2)(a).)

AR 40-68

Clinical Quality Management. (Cited in para 2-5.)

AR 40-330

Rate Codes, Expense and Performance Reporting Systems, Centralized Billing, and Medical Services Accounts. (Cited in para 3-6.)

AR 40-657/NAVSUPINST 4355.4F/MCO P 10110.31G

Veterinary/Medical Food Inspection Safety, Quality Assurance, and Laboratory Service. (Cited in para 2-5a(3).)

AR 190-12

Military Police Working Dogs. (Cited in paras 5-1c(3), 5-2b(2).)

AR 200-5

Pest Management. (Cited in para 4-1a(4).)

AR 608-10

Child Development Services. (Cited in para 4-1(3).)

AR 608-10

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TB MED 4

DOD Human-Animal Bond Principles and Guidelines. (Cited in para 4-2f(4).)

TB MED 283

Veterinary Necropsy Protocol for Military Working Dogs. (Cited in paras 5-2c(1), 6-5a(1)(h).)

AFI 31-202

Military Working Dog Program. (Cited in paras 5-1c(3), 5-2b(2).)

AFI 32-1053

Pest Management Program. (Cited in para 4-1a(4).)

AFI 37-138

Records Disposition-Procedures and Responsibilities. (Cited in para 6-4c.)

AFI 44-102

Community Health Management. (Cited in para 6-4c.)

AFJI 23-224/AR 700-81/OPNAVINST 5585.3/MCO 10570.1A

DOD Military Working Dog Program. (Cited in paras 5-2c(1), 6-5a(1).)

NAVFAC MO-213/TM 5-634

Solid Waste management.

NAVMED P-117

Manual of the Medical Department. (Cited in para 6-4c.) (Available at <http://nmo.med.navy.mil>.)

NAVMEDCOMINST 6220.4

Rabies Prevention and Control. (Cited in para 4-2c(5).) (Available at www.nehc.med.navy.mil.)

OPNAVINST 6250.4B

Pest Management Programs. (Cited in para 4-1a(4).) (Available at <http://neds.daps.dla.mil/directives>.)

DOD Directive 3216.1

Use of Animals in DOD Programs. (Cited in para 5-1a(9).)

DOD Directive 6400.4

DOD Veterinary Services Program. (Cited in para 2-1a.)

DOD 7000.14-R, Vol. 13

DOD Financial Management Regulations. (Cited in para 6-4c.)

Compendium of Animal Rabies Prevention and Control

This publication may be obtained from the National Association of State Public Health Veterinarians Inc. (NASPHV), ATTN: Suzanne R. Jenkins, VMD, MPH, Virginia Department of Health, Office of Epidemiology, P.O. Box 2448, Room 113, Richmond, VA 23218, or see <http://www.cdc.gov>. (Cited in paras 4-2c(3), 4-2c(11)(b), 5-4a.)

Section II

Related Publications

A related publication is additional information. The user does not have to read it to understand this publication. U.S. Code material is available at www.gpoaccess.gov/uscode.

AR 40-4

Army Medical Department Facilities/Activities

AR 190-51

Security of Unclassified Army Property (Sensitive and Nonsensitive)

FM 8-9/NAVMED P-5059/AFJMAN 44-151VIV2V3

NATO Handbook on the Medical Aspects of NBC Defensive Operations

FM 8-285/NAVMED P-5041/AFMAN 160-12/AFJMAN 44-149/FMFM 11-11

Treatment of Chemical Agent Casualties and Conventional Military Chemical Injuries

AFI 40-116

Food Safety Program. (Available at www.e-publishing.af.mil.)

NAVMED P-5010

Manual of Naval Preventive Medicine. (Available at <https://nmo.med.navy.mil>.)

DOD 5500.7-R

Joint Ethics Regulation

FAR

Federal Acquisition Regulation. (Available online at <http://web1.deskbook.osd.mil>.)

OSHA 3127

OSHA Bloodborne Pathogens Standard. (Copies of this publication are available from the Superintendent of Documents, Government Printing Office, Washington DC 20402 or from www.osha.gov.)

7 USC 2131-2156 (chap 54)

Transportation, Sale, and Handling of Certain Animals (Animal Welfare Act)

10 USC 2583

Military Working Dogs: Transfer and Adoption at End of Useful Working Life

Guide for the Care and Use of Laboratory Animals

(Copies of this publication may be obtained from the National Academy Press, 2101 Constitution Avenue NW, Washington DC, 20418 or from www.nap.edu/readingroom/books/abrats/.)

Section III**Prescribed Forms**

Except where otherwise indicated below, the following forms are available as follows: DA Forms are available on the APD Web site (www.apd.army.mil); DD Forms are available at www.dtic.mil); Standard Forms (SF) and Optional Forms (OF) are available at www.gsa.gov/webforms.nsf. Army personnel stationed on Marine Corps and Navy bases may obtain DA and DD forms through their local Army District Veterinary Command.

AF Form 2110A

Health Record. (Prescribed in para 6-5a(1)(a).)

DA Form 7593

Department of Defense Military Working Dog Veterinary Service Referral Information Form. (Prescribed in para 6-1a(3)(b).)

DD Form 1626

Veterinary Necropsy Report. (Prescribed in paras 5-2c(1), 5-2e(1), 5-2e(2), 6-5a(1)(h).)

DD Form 1741

Military Working Dog Immunization Record. (Prescribed in paras 5-3a(2), 5-4a(3), 6-5a(1)(j).)

DD Form 1743

Death Certificate of Military Dog. (Prescribed in paras 5-2a, 5-2e(1), 6-5a(1)(i), 6-5a(1)(j).)

DD Form 1745

Animal Euthanasia. (Prescribed in paras 3-4e, 6-5b(1)(c).)

DD Form 1829

Record of Military Dog Physical Examination. (Prescribed in paras 5-1a(11), 5-1c(4), 5-3a(2), 6-5a(1)(d).)

DD Form 2208

Rabies Vaccination Certificate. (Prescribed in para 6-5b(1)(b).)

DD Form 2209

Veterinary Health Certificate. (Prescribed in paras 5-1c(3)(d), 5-3a(5), 6-5a(1)(i), 6-5b(1)(d).)

DD Form 2341

Report of Animal Bite—Potential Rabies Exposure. (Prescribed in para 4-2c(5).)

DD Form 2342

Animal Facility Sanitation Checklist. (Prescribed in para 4-1b(2).)

DD Form 2343

Veterinary Health Record. (Prescribed in para 6-5b(1)(e).)

DD Form 2344

Veterinary Treatment Record. (This form is available through normal ordering procedures.) (Prescribed in paras 6-5a(2)(d), 6-5b(1)(a).)

DD Form 2619

Military Working Dog Master Problem List. (Prescribed in paras 5-1a(11), 5-3a(4), 6-5a(1)(e).)

DD Form 2620

Request for and Report of Laboratory Examination for Rabies. (Prescribed in paras 4-2c(9), 4-2h(2)(c).)

DD Form 2621

Veterinary Vaccination and Trilingual Health Certificate. (Prescribed in paras 5-1c(3)(d), 6-5b(1)(d).)

DD Form 2622

Animal Release. (Prescribed in para 6-5b(1)(g).)

DD Form 2623

Animal Home Quarantine. (Prescribed in paras 4-2c(5)(a), 6-5b(1)(f).)

Lackland TC Form 126

Veterinary Examination of Dog Offered for Donation or Sale to Government. (This form is stocked and issued by the DOD Military Working Dog Veterinary Service, DODMWDVS/LGRMP, 1219 Knight Street, Lackland AFB, TX 78236-5631.) (Prescribed in paras 5-1b(1), 6-5a(1)(b).)

USDA VS Form 1011

Equine Infectious Anemia Laboratory Test Report. (This form may be obtained from the State veterinarian within CONUS where the installation is located.) (Prescribed in para 4-1e.)

Section IV

Referenced Forms

DA Form 1992

Nonappropriated Fund Receipt Voucher (Installation NAF Veterinary Receipts)

DA Form 2028

Recommended Changes to Publications and Blank Forms

DA Form 3949

Controlled Substances Record

NASPHV Form 51

Rabies Vaccination Certificate. (This form may be obtained from vaccine manufacturers. Computer-generated forms containing the same information are acceptable.)

OF 522

Medical Record—Request for Administration of Anesthesia and for Performance of Operations and Other Procedures

SF 515

Medical Record—Tissue Examination

SF 516

Medical Record—Operation Report

SF 519-B

Radiologic Consultation Request Report

SF 545

Laboratory Report Display

SF 546

Chemistry I

SF 547

Chemistry II

SF 548

Chemistry III (Urine)

SF 549

Hematology

SF 550

Urinalysis

SF 551

Serology

SF 552

Parasitology

SF 553

Microbiology I

SF 554

Microbiology II

SF 557

Miscellaneous

SF 600

Health Record—Chronological Record of Medical Care

WHMC Form 3381

Military Working Dog Procurement Physical Examination (This form is stocked and issued by the DOD Military Working Dog Veterinary Service, DODMWDVS/LGRMP, 1219 Knight Street, Lackland AFB, TX 78236-5631.)

**Appendix B
Management Control Evaluation Checklist**

B-1. Functions

The function covered by this checklist is the administration of Veterinary Health Services.

B-2. Purpose

Veterinary commanders and senior worldwide Command veterinarians are the cornerstones of the management control process. The management control process is directed to stimulate individual motivation. Self-evaluation plans will be developed to reflect the critical tasks and objectives to accomplish the key management controls. These self-evaluation plans will serve as an operating menu for lowest level supervisors and workers. The purpose of this checklist is to assist veterinary commanders and senior Command veterinarians in evaluating their key management controls. It is not intended to cover all controls.

B-3. Instructions

The level and quality of compliance with the key management controls will be assured and reinforced through

command evaluation, training, and assistance visits. Answers must be based on the actual *testing* of management controls such as document analysis, direct observation, sampling, simulation. Answers that indicate deficiencies must be explained and corrective action indicated in supporting documentation. RVC Commanders and applicable Command veterinarians will evaluate key management controls at least annually. Certification that this evaluation has been conducted must be accomplished on DA Form 11-2-R (Management Control Evaluation Certification Statement).

B-4. Test Questions

- a. Are all facets, appropriated and nonappropriated, of the VTF operation under the control of the responsible Army VCO?
- b. Is complete veterinary medical, surgical care of DOD-owned and other Government-owned (non-DOD) animals available?
- c. Are authorized services for NAF-owned animals available?
- d. Are authorized services for privately owned animals available?
- e. In the absence of the military veterinarian, is civilian veterinary medical care for DOD-owned and other Government-owned (non-DOD) animals available?
- f. Are veterinary programs and provision of community health support for zoonoses control in place?
- g. Has handler training and sanitation, and husbandry guidance for DOD-owned and other Government-owned (non-DOD) animals been provided?
- h. Have proper procedures been used for the safeguard and administration of controlled substances?
- i. Have proper veterinary medical records been maintained for all animals?
- j. Have procedures for DOD, service, and MWR administrative, equipment, and supply control been accomplished?
- k. Have proper procedures been implemented for monetary receipt, disbursement, and control transactions?
- l. Have safeguard and control procedures been used during all operations that include any biohazard?
- m. Has the stray animal control program been properly conducted?

B-5. Supersession

This checklist replaces the checklist for Veterinary Health Services previously published in AR 40-905/SEC-NAVINST6401.1A/AFI 48-131, dated 16 August 1994.

B-6. Comments

Help make this a better tool for evaluating management controls. Submit comments to DODVSA/OTSG, 5109 Leesburg Pike, Falls Church, VA 22041.

Glossary

Section I Abbreviations

AF

Air Force

AFB

Air Force Base

AFI

Air Force instruction

AFIP

Armed Forces Institute of Pathology

AFMAN

Air Force manual

AFPAM

Air Force pamphlet

AFR

Air Force regulation

ARIMS

Army Records Information Management System

AIM HI

Animals in the Military Helping Individuals

AO

Area of operations

AOR

Area of responsibility

AVMA

American Veterinary Medical Association

BUMEDINST

Bureau of Medicine and Surgery Instruction

CDC

Child Development Center (also, Centers for Disease Control)

CFR

Code of Federal Regulations

CONUS

continental United States

DA

Department of the Army

DA Pam

Department of the Army Pamphlet

DARPAINST

Defense Advanced Research Projects Agency Instruction

DD Form

Department of Defense Form

DEA

Drug Enforcement Administration

DEERS

Defense Enrollment/Eligibility Reporting System

DHP

Defense Health Program

DHS

Director of Health Services

DNAINST

Defense Nuclear Agency Instruction

DOD

Department of Defense

DODMWDVS

Department of Defense Military Working Dog Veterinary Service

DODVSA

Department of Defense Veterinary Service Activity

EFMP

Exceptional Family Member Program

FAR

Federal Acquisition Regulation

FCC

Family Child Care

FM

field manual

HAAM

Health Assistance Animal in the Military

HAB

human-animal bond

HQDA

Headquarters, Department of the Army

MACOM

major Army command

MCO

Marine Corps Order

MEDEVAC

medical evacuation

MOA

memorandum of agreement

MOS

military occupational specialty

MOU

memorandum of understanding

MTF

military treatment facility

MWD

military working dog

MWH

military working horse

NAF

nonappropriated fund

NAFI

nonappropriated fund instrumentality

NASPHV

National Association of State Public Health Veterinarians, Inc.

NAVFACMO

Naval Facilities Engineering Command Publication

NAVMED

naval medicine

NAVMEDCOMINST

Navy Medical Command instruction

NBC

nuclear, biological, and chemical

OCONUS

outside continental United States

OPNAVINST

Navy operations instruction

POMR

problem-oriented medical record

RVC

Regional Veterinary Command

SECNAVINST

Secretary of the Navy instruction

SF

Standard Form

SOAP

Subjective data, objective data, assessment, plan

TB MED

technical bulletin, medical

TM
technical manual

USAF
U.S. Air Force

USDA
U.S. Department of Agriculture

USUHSINST
Uniformed Services University of the Health Sciences instruction

VCO
Veterinary Corps officer

VCPR
veterinarian/client/patient relationship

VETCOM
U.S. Army Veterinary Command

VS
Veterinary Service

VTF
veterinary treatment facility

WHMC
Wilford Hall Medical Center

Section II

Terms

Animals in the Military Helping Individuals (AIM HI)

Department of Defense Human-Animal Bond Program involving the training of specialty animals to assist qualified "Exceptional Family Members" or qualified Veterans with special needs.

Army Veterinary Service

An integral part of the Army Medical Department, composed of Veterinary Corps officers, warrant officers, enlisted personnel, and civilian personnel assigned to accomplish the mission.

Attending veterinary service

Veterinary support that is made officially available on a scheduled or on-call basis to an installation or activity to which Veterinary Service personnel are not permanently assigned. The services of a VCO must be available to the commander for each installation. If a VCO is not available or routine attending service cannot be provided from command resources, assistance may be requested by contacting HQDA (DODVSA). A VCO may be assigned duty as the attending veterinarian for other Air Force, Army, Navy, or Marine Corps installations. When Veterinary Service personnel are to be stationed at an attending site, the personnel should be assigned to the geographically responsible Army veterinary unit with "duty at" the attending site. Installations with large privately owned and/or DOD-owned or other Government-owned (non-DOD) animal populations may have an animal care specialist assigned to provide emergency and other care within his or her capabilities.

Coggins Test

A blood test (agar gel immunodiffusion) for equine infectious anemia, a fatal, encephalomyelitic disease of horses, for which there is no treatment.

DOD-owned animal

A Government-owned animal, specifically those owned and maintained by one of the DOD military services (Army, Air Force, Navy, Marine Corps). Unit mascots, on approved orders, are DOD-owned animals. Stray animals are considered DOD-owned animals until disposition is made; that is, until euthanized, adopted, or released to civil

authorities. Complete veterinary medical and surgical service is authorized for DOD-owned animals. DOD-owned animals will receive priority of care over other Government-owned (non-DOD) and privately owned animals.

Government-owned (non-DOD) animal

An animal that is owned, maintained, or managed by a Federal agency or activity other than one of the DOD military services.

Health Assistance Animal in the Military

A DOD-owned animal that has been procured for use in an official DOD related Human-Animal Bond Program.

Human-Animal Bond Program

A program involving the attachment between people and their animals, their interactions, and the significance of the bond in mental, social, and physical health.

Installation veterinarian

Veterinarian who coordinates the veterinary services at an installation.

NAFI-managed animal

A DOD-owned or Government-owned (non-DOD) animal that is maintained by a Non-Appropriated Fund Instrumentality (NAFI) and is utilized by that NAFI to generate NAF funds. As per paragraph 6-1a, any animal used for the purpose of generating NAF funds (that is, NAFI-managed) will be considered NAFI-owned.

NAFI-owned animal

An animal owned and maintained by a Nonappropriated Fund Instrumentality. For NAFI-owned animals, reimbursement for expendable medical items will be according to table 6-1.

Personnel authorized DOD medical care

Those persons enrolled in the Defense Enrollment/Eligibility Reporting System (DEERS).

Privately owned animal

An animal owned and maintained by an individual owner. This includes stray animals claimed by their owners.

SOAP format

Format for entering information on the SF 600 (Health Record–Chronological Record of Medical Care) using the problem-oriented medical record (POMR) approach, including subjective data, objective data, assessment, and plan.

Veterinary Corps officer

Commissioned officer in the Army Veterinary Corps.

Veterinary public health

The application of the art and science of veterinary medicine to the prevention of diseases and conditions, protection of life, and promotion of the health and well-being of man and animals in a community.

Veterinary treatment facility

A facility utilized for an animal disease prevention and control program by the U.S. Army Veterinary Service. The VTF serves as the operational base for the veterinary community health mission, rabies control program, stray impoundment program, health care support of animals, administrative support of the programs, and associated functions.

Zoonosis

An infection or infectious disease transmissible under natural conditions from vertebrate animals to man. It may be enzootic or epizootic.

Section III

Special Abbreviations and Terms

This section contains no entries.

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