

Wildlife Rehabilitation Principal Veterinarian Agreement

All Washington Wildlife Rehabilitators are required to have a Principal Veterinarian who oversees veterinary care and to submit this agreement to the WDFW Wildlife Rehabilitation Manager with their permit application.

APPLICANT Complete Sections 1. & 2.					
1. APPLICANT AND FACILITY INFORMATION					
Applicant Name (Last)	(First)		(M.I.)		
Facility Name					
Facility Address	City	State	Zip		
2. REHABILITATOR RESPONSIBILITIES					
The wildlife rehabilitator agrees to the following: (please initial each statement)					
The Principal Veterinarian's (PV) schedule of availability or other pre-determined times for the PV to see					
wildlife patients.					
Will provide sufficient information regarding the animals being treated so that the veterinarian can make					
informed decisions.					
Follow the PV's instructions regarding medication use and treatment prescribed or discuss alternatives					
with the PV before altering said medications and treatments.					
Using or administering drugs contrary to the PV's instructions, is a violation of the agreement, and the					
veterinarian may choose to terminate it.					

PRINCIPAL VETERINARIAN Complete Sections 3. - 6.

3. PRINCIPAL VETERINARIAN INFORMATION				
Veterinarian Name:				
Hospital/Clinic Name:				
Hospital/Clinic Address:				
Phone:	Email:			
Veterinary License Number:				
4. VETERINARIAN RESPONSIBILITIES				
The veterinarian agrees to the following: (please initial each statement)				
Act as Principal Veterinarian, assisting the licensed Wildlife Rehabilitator by providing appropriate diagnostics				
and treatments to all cases requiring medical care, and providing follow-up when necessary.				
Lawfully provide prescription medication, euthanasia solution, and immobilization drugs as per DEA and Board				
of Pharmacy laws and regulations.				
Humanely euthanize as soon as possible wildlife patients suffering and unlikely to recover.				
Refuse to provide wildlife care that impairs the successful release of animals back to the wild				

5. VETERINARY SERVICES INFORMATION

Types of services you are willing to provide: (check all that apply)

Physical Exam	Initial Diagnosis	
Initial Stabilization	Reportable Disease Diagnosis (Required)	
Prescription Drugs	Dispensing Medication	
Agree to arrange for Controlled Drugs (Required if controlled drugs are to be administered)	Euthanasia	
Administering Medication	Follow-up Exams	
Radiology	Lab Work	
Surgery (<i>Required</i> if surgery is anticipated)	Fracture Stabilization	
Rehabilitation Facility Site Visits	Necropsy	
Carcass Disposal	Training	

6. Wildlife species you are not willing to handle, assist with, or provide services for:

Discussion Points for establishing a contract with your principal veterinarian for your Washington State Wildlife Rehabilitation Permit. *Please place a check mark next to the item when finished discussing.*

 Goods and materials your veterinarian is willing to provide. 	Goods and materials your veterinarian is willing to provide pro bono.	
 Estimated or approximate amount of time and hours that your veterinarian might be available. 	 Procedures and services* your veterinarian is willing to perform (radiographs, hematology, fracture management, surgery, lab work, etc.) and costs to you, if any. 	
 Wildlife species your veterinarian will and will not handle. 	 Wildlife species for which your veterinarian has sufficient medical and care knowledge, or feels comfortable and capable providing care for. 	
7. Types of phone consultation.	8. Willingness to come to your facility.	
9. Arrangements for bringing wildlife to the clinic or not (appointment only, emergency, midnight calls, etc.).	 How wildlife should be brought into the clinic (back door, after hours only, etc wildlife should not be brought through the public front door if possible). 	
11. Housing facilities for wildlife at the clinic to minimize stress (noise, foot traffic, proximity to predators, etc.); and contact with domestics.	12. Follow-up care protocols, record keeping and communications.	
13. Protocols and agreements on euthanasia and carcass disposal. Agree in advance on a process of making euthanasia decisions together.	14. A veterinarian must diagnose and provide treatment protocol for all Reportable Diseases (this list is provided to the Wildlife Rehabilitator).	

- Any licensed veterinarian may render emergency care and treatment to sick or injured wildlife, but any such wildlife shall be transferred to a licensed rehabilitator within 24 48 hours.
- Any licensed veterinarian may euthanize injured wildlife if no other reasonable action would be humane or effective.
- Any licensed veterinarian euthanizing wildlife using chemical agents must provide for appropriate burial, incineration, or other lawful disposition.

Signatures

I agree to act as Principal Veterinarian in assisting the licensed Wildlife Rehabilitator to provide those services as indicated in sections 4 and 5, and that we have a mutual understanding of the division of responsibilities for providing medical care and rehabilitative care of wildlife.

Principal Veterinarian Signature ______ Date _____

I agree, as Wildlife Rehabilitator, to abide by the responsibilities indicated in Section 2, that I have discussed with the Principal Veterinarian the Discussion Points indicated above, and that we have a mutual understanding of the division of responsibilities for providing medical care and rehabilitative care of wildlife.

Applicant/Wildlife Rehabilitator Signature _____ Date _____ Date _____

This agreement does NOT authorize the Principal Veterinarian to act as a licensed wildlife rehabilitator. Unless a veterinarian holds a WDFW Wildlife Rehabilitation Permit, wildlife must be transferred to a wildlife rehabilitator upon stabilization. A Principal Veterinarian is not required to provide any services, supplies, or medications pro bono but may elect to do so. Those signing this agreement must abide by the laws and regulations governing the practice of veterinary medicine and wildlife rehabilitation in Washington State.

Return completed permit application too:

wildliferehabilitation@dfw.wa.gov or Wildlife Rehabilitation Manager Washington Department of Fish and Wildlife PO Box 43200

Olympia, WA 98504--3200