Date of inspection: _____

Certified individual being inspected: _____

Address: _____

_____

IETS freeze code #: _____

Person(s) doing the inspection: _____

Certification Inspection Checklist:

	YES	NO
Recordkeeping:		
Are records kept for the required 6 years?	___	___
Is there an organized record keeping system in place to maintain an accurate inventory of embryos from the time of collection until they leave the control of the practitioner?	___	___
Do AB/AC/ABC forms contain?		
Full registered name and number of dam and sire	___	___
Recipients identified to meet breed association requirement:	___	___
Grade and Stage of all embryos listed	___	___
Protocol in place for ABC forms to be provided to client and breed association	___	___
Are forms legible and complete ?	___	___

Labeling:

Straws Labels:

Are straw labels complete and legible? ___ ___

Do straw labels contain?

- Straw number- With "DT" if direct transfer ___ ___
- IETS freeze code ___ ___
- Breed and registration name of donor dam ___ ___
- Common name of donor dam ___ ___
- Breed and registration number of sire ___ ___
- Barn name of sire. (Recommended/not required) ___ ___
- Embryo stage and grade listed. (Recommended/not required) ___ ___
- Date in proper form-yr./mo./da ___ ___

Straws:

Proper color - yellow for DT, etc. ___ ___

Handwritten ____ (or) Printer generated _____

Cane top / Cane side / Goblet:

Does cane top contain?

- IETS freeze code. ___ ___
- Unique cane number. ___ ___

Do cane side label contains?

- IETS Freeze Code. ___ ___
- Barn name of donor dam. ___ ___

Do goblet label contains?

- IETS freeze code. ___ ___
- Full registration name and number of the dam. ___ ___

Full registration name and number of the sire: ___ ___

Date in proper format (YR/MO/DA; i.e. – 16SE28) ___ ___

Are cane side and goblet labels legible and complete? ___ ___

Handwritten ____ or Printer generated ____

Embryo recovery:

Did the individual doing the collection meet the standards expected of a certified individual? ___ ___

Did the equipment used in collection and processing meet standards expected from a certified individual? ___ ___

Embryo identification and grading:

Did embryo handling procedures meet certification standards? ___ ___

Did you agree with stage and quality assigned to embryos? ___ ___

Embryo Washing;

During an actual procedure and/or following a discussion and demonstration of a washing procedure, did the certified individual have a protocol that meets IETS standards with regard to?

1:100 dilution ___ ___

50X or > magnification ___ ___

Trypsin washing ___ ___

Embryo Freezing:

During an actual procedure, did the certified Individual have or demonstrate:

Adequate equipment to freeze embryos ___ ___

Adequate knowledge of freezing process and procedure ___ ___

There are additional areas that could be discussed, even though they are not officially part of the certification requirements. Both members of the verification team could benefit from the discussion, adding to the CE benefits of this program. The following are just a few suggestions of many potential topics that could be of value:

Is media storage adequate to insure the media maintains its quality until it is used? What steps are taken in very hot or very cold environments to minimize the negative effect on the embryo during all different parts of the collection and processing procedure? When working in other less than ideal

environments, what steps are taken to minimize the negative effects? What quality control procedures are in place the practice? What forms are used to give instruction to the client or their employees? Animal welfare, biosecurity, and drug safety issues are other area that could be addressed. These are just a few examples of many potential areas that have value for discussion.

Inspection type: (Check one)

_____ Inspection during year following initial certification.

_____ Randomly selected, certified individual.

_____ Non-compliance type.

Following the inspection, in the opinion of the inspector, the certified individual being inspected: (check one)

_____ meets at least the minimal requirements for certification.

_____ had one or more areas where he/she didn't meet certification standards, but after discussion, all areas of concern have been adequately addressed, corrected measures are to be made and no further action is needed.

_____ needs a re-inspection within the next year to verify that all areas of concern are properly addressed and corrected.

_____ has one or more areas of concern where major deficiencies have been found and, as per procedures set forth in the guidelines, will be referred to the Certification Committee and/or Board for further review.

Notes and Comments:

_____
_____
_____
_____
_____
_____

Signature :_____(Inspected Individual)

Signature :_____(AETA Inspector)

Date: _____