



Name

Qualification

Address

Contact Phone Number

Date (DD-MM-YY)

To Companion Animals New Zealand,

I _____ hereby confirm that _____ has demonstrated competency in microchip implantation, and I support their application for approved implanter status with Companion Animals New Zealand.

I can confirm that I have observed _____ competently achieve all the tasks outlined in the table below on the following dates (DD-MM-YY):

Microchip implantation one:

Microchip implantation two:

*Please confirm that, **at the time of your observation**, you were satisfied that the above applicant understands the*

- *microchip procedure*
- *microchip related legislation and*
- *need to uphold the welfare of the animal receiving the microchip*

by marking the following boxes appropriately.

The applicant successfully and safely completed the following tasks:	Competent	Not Yet Competent
The applicant independently, and successfully, implanted a minimum of 2 microchips.		

The applicant ensures the microchip to be implanted is compliant with legislation, is correctly packaged, comes with three self-adhesive bar codes, and is not expired		
The applicant is knowledgeable of the standardised location for microchip implantations in the species being implanted.		
General health and safety is attended to during the implantation procedure, including H&S relating to self, others, equipment used and animals.		
Appropriate handling and restraint of the animals receiving microchip implants was demonstrated.		
The applicant assessed the health status of the animal before inserting the microchip.		
The applicant scanned the microchips before implantation to ensure <ul style="list-style-type: none"> • it is working correctly • the barcodes matched 		
The applicant scanned that animal before implantation of the microchip to ensure that the animal does not have an existing, functioning microchip.		
The applicant correctly <ul style="list-style-type: none"> • identified the implant site • formed a tent shape with the animal's skin • inserted the needle at an oblique angle with bevel facing up before depressing the plunger. 		
The applicant correctly removed the implanter device whilst ensuring the microchip remained into the animal and then disposed of the device safely and appropriately.		
The applicant scanned the animal after the implantation to ensure that the microchip is working.		
The applicant understands the aftercare requirements, including monitoring for adverse signs.		
The applicant understands the requirements for registration on the National Dog Database (NDD) and the New Zealand Companion Animal Register (NZCAR).		
The applicant has shown that they have access to a quality microchip scanner so they can scan all microchips they implant in the future		

Please add any additional information you feel is relevant to the individual's application here

I _____ hereby declare that at the time that the microchip insertions were demonstrated to me, I deemed the applicant competent and I support their application for implanter registration on the New Zealand Companion Animal Register.

Signature:

Date:

Please return this completed form to office@animalregister.co.nz