The newly appointed members of the second Veterinary Practitioners Board met on 10th July this year. I was elected President at that meeting which is a great honour. I am very grateful for the work done by the previous Board members, under the guidance of Dr Garth McGilvray, who had the task of interpreting the new legislation and setting up procedures and protocols that form the foundation of the Board’s ongoing activities. The smooth transfer of knowledge was assisted with three members continuing onto this Board. It’s still early days working with the new Act and systems are still evolving and being worked on. You will see in the member’s profiles the profession is represented by an exciting combination of knowledge and experience. There is no doubt it’s both challenging and immensely rewarding for veterinarians to put aside time to serve both the profession and the public in this role. Although I have spent ten years on the previous VSB I am able to see, on this Board, the immense value to the profession and the public of having non-veterinarians of the calibre of consumer representatives Angela Haynes and Christine White who contribute enormously to debate, deliberation and consultation.

The Board has many functions, all clearly set out in the Act Part 7 (79). The most obvious to veterinarians will be the registration issues and the complaints / disciplinary role but there are many other tasks. The Board is required to provide information to the profession relating to continuing education issues, developments in the field of veterinary science and disciplinary matters. For over 13 years the Board’s newsletter Boardtalk has been the main communication tool. Board members write about issues that we feel you will find helpful, informative and educational. Other contributors use Boardtalk to ensure important and relevant information reaches every registered veterinary practitioner in NSW. You need to read Boardtalk to ensure you are aware of current Board policies, as these are not static. Keen to assist the education of the up and coming veterinary practitioners, the Board sponsored the
President’s report continued

“Practitioner in Residence” with Mosman veterinary practitioner Dr Chris Mather working for 12 weeks with the students and staff at the University of Sydney Veterinary Hospital at the Camperdown campus. Another practitioner will be sponsored to join the education team at the Camden campus in 2010. With the introduction of the new Act, participation in continuing education (professional development) is required by all veterinary practitioners. This responsibility can’t be ignored because you are too busy or can’t find a locum or have poor internet connections. The new act took away choice and gave us all a responsibility we must fulfil. There are ways of doing the required work and we will have a section in each Boardtalk to assist those who are finding this difficult.

When you have a chance, please look up the Board’s web page at www.vpb.nsw.gov.au and mark it in your “favourites”. It has undergone quite a few changes this year and you will find it now even easier to navigate. It’s a great resource so please take a few minutes to check it out. Many of the previous editions of Boardtalk are there and can be easily searched by subject. It’s a great place to find the address of veterinarians and specialists. I would also encourage all veterinary practitioners to provide the Board with their email addresses when completing their annual return. This allows us to contact the profession quickly should the need arise. There is an excellent on going working relationship between the Board and the Department of Industry and Investment [the old DPI / Department of Ag]. The Board has been able to assist the Chief Veterinary Officer to contact practitioners quickly with urgent Biosecurity concerns in the past using the email addresses on our database.

Part of our role is to work with all the other Australian and New Zealand Boards in areas such as registration, legislation and education. The Australasian Veterinary Boards Council Ltd [AVBC] comprises of members [usually Board Presidents] from all state and territory Veterinary Boards of Australia, the Veterinary Council of New Zealand and the Australian Veterinary Association Ltd (AVA) and the New Zealand Veterinary Association Ltd (NZVA) are members of AVBC Inc. Its roles behind the scene are really instrumental in maintaining standards of veterinary practice across Australia and can be looked at in three main areas. The first involves accreditation of veterinary schools/assessment of foreign veterinary qualifications and providing uniformity of recognition of qualifications. The second area is providing advice on matters concerning the occupational regulation of veterinarians, including general and specialist registration. The third area is encouraging standardisation and quality assurance of veterinary services to the community in all jurisdictions. In your active lives in practice or industry, these roles understandably go unnoticed.

The Annual General Meeting was held this year in very warm Dubbo and gave the Board an opportunity to talk to local practitioners once the Annual Report was tabled. The Annual Report is also accessible on the website. Our thanks to the veterinary practitioners of the Central West Plains/ Slopes and to Dr Ben Bryant and other staff of the Western Plains Zoo for their hospitality.

On behalf of all Board members I would like to thank the staff of the office for their assistance to the Board, the profession and the public through out 2009. Our Registrar Glenn Lynch heads our hard working and gracious team of Mary, Des, Clare and Ashton. As Christmas is not far away, I would like to wish all veterinarians a holiday season filled with happiness and shared with cherished friends and family.

Ruth Thompson
President

Contact Details have changed for Veterinary Practitioners Board

📞 Phone : +61 2 8338 1177
📞 Fax : +61 2 8338 1077

1300 366 653

PO Box 6391, Alexandria NSW 2015
Suite 7.09
247 Coward Street
Mascot, 2020
From the Registrar’s Desk

New Board and New Office!

There is no correlation between the two however; the profession welcomes the appointments of five new Board members and specifically the Board nomination of Dr Ruth Thompson as President.

Details of all the members are contained in this edition of Board talk.

I look forward to working closely with the new Board and to build on the good work of the last Board. In particular I would like to thank Dr Garth McGilvray, Dr Vanessa Barrs, Dr Graeme Brown, Dr Tim Crisp and Mrs Margaret Francis for their diligent and conscientious input to the Board’s operations.

The Board’s current lease expires early in the New Year and we are excited about the move to new premises at 247 Coward Street Mascot. The expiry of the lease presented the Board with an opportunity to compare our current office with other offices in the area and we were pleasantly surprised to find that the space offered at Coward Street was appropriate for our needs and the rent is less than what we have been paying.

The new office is very close to Mascot railway station and the domestic airport in Sydney which allows for easy access for those visiting the office. If you are ever in town and want to pop in to visit us or talk to me about an issue, you are very welcome.

As you would expect (imagine moving house or the practice), the move has forced the staff to identify and sort every single document in the office – this has been made less difficult due to the guidelines of our approved ‘disposal authority’. A disposal authority is the name used by the Government authority ‘State Records NSW’ for the documented legal authority which identifies all the documents within our office and indicates how long to keep the document and what to do with the documents once they reach their expiry date. Examples of actions are: transport to State Archives, keep in our possession for various terms (3 to 10 years), keep supplementary records for various terms and destroy the document (usually by shredding by a contractor for this purpose).

Without the disposal authority we would be just guessing but the document provides us with a legal format to follow for this specific purpose.

If you own a practice – do you have a disposal authority? It’s not something that is uppermost in the mind until you run out of space or are moving – I’m happy to discuss this type of documented authority / process if you call me in the office.

Continuing Professional Development (CPD)

For those practitioners who have not achieved the minimum number of points as required in accordance with the agreed model, time is fast running out, as the 3 year cycle which the majority of practitioners are in, expires on 31 March 2010. Please see the CPD article in this Board talk.

Annual Audit

The staff have just come through our annual audit conducted by the NSW Audit Office and I’m pleased to report that we have again been given a clean bill of health in regards to our accounting systems. Des Lyttle, our Finance and Registrations Officer, controls our book keeping in MYOB and does a really good job – thanks Des.

Act Amendments

As you are probably aware, the government conducted the statutory review of the Veterinary Practice Act 2003 just recently and several amendments have been sought to improve the operation of administering the Act. The Board provided the government representative controlling the process with the list of known veterinary practitioner email for distribution of the proposed amendments, seeking consultation and submissions. The Board has the email addresses of more than 95% of NSW registered practitioners and emails went to all those who have provided one, as well as other stakeholders such as the NSW AVA and NSW Farmers to name a few.

More information regarding the Act amendments will be distributed as soon as they come to hand.

Whilst on the subject of addresses, if you have recently changed your address or email, could you please let us know as soon as possible so we can update our records accordingly. Email is becoming an increasingly useful form of communication when information needs to be distributed urgently – recent examples of this have been notices etc in regards to EI and Hendra virus.

Finally, as another year draws to an end, I would like to wish all the readers of Board talk a very happy and safe Christmas and a prosperous 2010.

Glenn Lynch
Registrar
Meet the NSW Veterinary Practitioners Board

Ruth Thompson graduated from the University of Sydney in 1976 following a BSc(Vet) in Clinical Pathology in 1975. Professional life started in small animal practice in Perth then as small animal clinician/medicine lecturer at Murdoch University. Gained Membership of the Australian College in Feline Medicine before moving back to a sheep and cattle property in country New South Wales and taking up broadcasting on ABC Regional Radio [Orange]. With veterinarian husband Howard, purchased the Blayney Veterinary Hospital in 1987 and has been working full time in the practice ever since. The practice now has 4 veterinarians and is 80% small animals.

Ruth has had a long-standing interest in working with and for the profession. AVA member since graduation, Secretary AVA Central West 90-95, NSW Divisional Committee 93-96, AVA Meritorious award 1993, AVA Representative on the National Office of Overseas Skills Recognition (NOOSR) 1993-1996; Member of the Administrative Decisions Tribunal [ADT] 1996–2009 and of course member of the NSW Board of Veterinary Surgeons 1996-2006. Other roles in the community include AVA Regional Veterinary Laboratory (Orange) Liaison Committee member 1990-1995; Member of the Blayney Shire Council Companion Animal Committee 2000-current; Member of Nestle Pet Care Animal Care and Ethics Committee 1992-current; Educational Partner Practice of the Year 2008 for the hospital’s role in hosting final year students from the University of Sydney.

Ruth’s children Julia and Robert would suggest the garden was Ruth’s hobby but it still waits for quieter times. Ruth is back onto the Board after three years, and is AVA nomination representing rural veterinarians.

Merran Govendir graduated from The University of Sydney with BVSc (Hons 1) in 1985. After graduation she worked in small animal practices in Sydney and attained Membership of the Australian College of Veterinary Science in Feline Medicine in 1994. She completed a PhD in aspects of canine endocrinology from The University of Sydney, 2001. During that time progressive academic positions included Registrar (1996) and Senior Registrar (1998) in Veterinary Anaesthesia, Lecturer in Veterinary Pharmacology (2001) in the Faculty of Medicine, followed by Lecturer in Veterinary Pharmacology (2002) for the Faculty of Veterinary Science and is currently Senior Lecturer in Veterinary Pharmacology. She completed a Masters degree in Higher Education in 2005 and in 2007 was awarded a HERDSA (Higher Education and Research Development Society of Australasia) Fellowship. In 2007 she was awarded a Vice Chancellors Award for Supporting the Student Experience and in 2009 she was awarded both a Vice Chancellors Award for Outstanding Teaching and an Australian Learning and Teaching Council (ALTC) Citation for ‘Outstanding Contributions to Student Learning’.

She is Associate Dean for Postgraduate Studies which involves overseeing all aspects of postgraduate research and coursework degrees for the Faculty and a member of the Faculty’s Executive Committee. Current academic duties involve teaching undergraduate veterinary pharmacology for the BVSc, supervision of students and research into the use of antimicrobial agents in companion animals and koalas, as well as conducting surveillance studies and monitoring the development of bacterial resistance in common bacterial pathogens. This is Merran’s second concurrent term on the NSW Veterinary Practitioners Board and is the representative from the Faculty of Veterinary Science, The University of Sydney.
Andrew Hansen is a graduate from the University of Sydney (1967) and apart from a period working in the United Kingdom, has spent his professional life in rural mixed practice in Orange NSW.

Retiring from his practice, Orange Veterinary Hospital, in 2005 he now divides his time between his Red deer herd on the slopes of Mt Canobolas, his family, and a number of veterinary related committees, including the NSW DI and I Orange AEC, NSW TAFE Animal Welfare Council and the Bovine Johnes Disease Technical Advisory Group. Andrew has been a member of the AVA since joining as a student in 1963 and has been an active member of the Central Western branch with many years in position of President.

He has had a long association with the deer farming industry and is currently a director of the Deer Industry Association of Australia. In 2000 he completed a MVSc research project on red deer reproduction.

Andrew and wife Judith, have three children and six grandchildren.

This is his second term on the VPB, this time as a ministerial appointment.

Angela Haynes is the Board's Urban Consumer Representative and is serving her second term. She has a love of animals in general and a keen interest in horses.

Angela currently has a horse with whom she enjoys trail riding. In the past she has competed in sports of endurance, hacking and dressage. She has a lifelong passion for horses and considers herself extremely fortunate to have owned several throughout her life. Angela shares her home with pet greyhound 'Honey' and cheeky cat 'Possum' (the cat is the boss of the dog!). Her father raced greyhounds when she was young and she is a huge fan of the breed, especially as companion animals.

In addition to representing consumers of veterinary products and services, Angela enhances the financial capabilities of the Board having a Bachelor of Commerce (Accounting) with a Law sub-major. She is also an Accountant with PricewaterhouseCoopers Sydney in their Corporate Advisory and Restructure team and is nearing completion of a Graduate Diploma of Accounting with the Institute of Chartered Accountants.

Angela is a mother of two boys Jackson and Harrison.

Prior to her role at PricewaterhouseCoopers Angela gained considerable commercial and business experience, especially in the cut flower and transport industries. From 1994 to 2001 she played a major role in the creation and development of a specialised transport company and for her efforts became a NSW finalist of the 2001 Telstra Business Women's Awards in the Young Business Women category.

Dr Debbie Neutze graduated from the University of Sydney in 1983. After spending her first year in practice at Forestville Veterinary Hospital she moved to Guildford Veterinary Hospital that had been the practice that she had taken her animals to since childhood. She became a partner in 1985 and alongside Dr Neil Hannan enjoyed working in small animal practice buying two further small animal practices, Great Western Animal Hospital and West Guildford Veterinary Hospital, over the ensuing 25 years. She sold her practices in 2008 with the intentions of enjoying a slower lifestyle but soon learnt that was not in her makeup.

Debbie has been active in the AVA for many years serving on the NSW Division committee and as AVA NSW President in 2006 and now works for the AVA as the Executive Office for the NSW Division and the Australian Veterinary Practice Management Association (AVPMA). Debbie is also a member on the AVA Conference Scientific Committee and the Biosecurity Guidelines Committee. She has recently chaired the AVA taskforce that was involved in negotiations on behalf of members in the Award Modernisation process. Debbie is justly proud of the veterinary profession, as seen in the fact that she has a son who is a veterinary student. She is the AVA nominee to the board representing urban practitioners.
James (Jim) Rodgers B.V.M.S., M.R.C.V.S., F.A.C.V.Sc, Registered Specialist in Equine Reproduction

Jim graduated as a Veterinary Surgeon from the University of Glasgow, Scotland in 1968. For the next eight years he practiced in England firstly in mixed practice being increasingly involved in both flat horse racing, national hunt and reproduction as well as sport and show horse work. He then moved on to pursue his chosen field of equine practice when he spent three years working for Day and Partners, now Greenwood Ellis, in Newmarket, England.

In 1976 he came to Australia and joined Morgan Howey & Frazer (now Scone Veterinary Hospital) of which he became a partner. However in 1990 he decided to establish his own practice, Rodger and Associates at Jerrys Plains after becoming a specialist in Equine Reproduction. A Fellow of the Australian College of Veterinary Surgeons by examination, he is a registered Specialist in Animal Reproduction (Equine). In 2008 he completed the Post Graduate Foundation of Sydney University (Centre for Veterinary Education) Distance Education Course in Equine Medicine. Jim has had a number of papers published and is currently writing a Distance Education in Equine Reproduction in conjunction with John Chopin to be used by the Centre of Veterinary Education.

He is a member and president of the Upper Hunter Valley Branch of the AVA as well as numerous committees and chapters.

Dr Mark Simpson is one of the new members of the board. He graduated from The University of Sydney in 1991, whereupon he worked in various practices in Lake Macquarie and the Hunter Valley. In 1995 he, and his wife Kate, established the Sugarloaf Animal Hospital on the south-western outskirts of Newcastle.

Mark has had a long standing interest in governance with experience in committees of Bankstown City Council, the management committee of The University of Sydney’s Sports Union, and since graduating Mark has been an active member of the local branch of the AVA. He is a founding member of the Unusual and Exotic Pets Special Interest Group of the AVA. While Mark has a general interest in the native flora and fauna of Australia, he has special interest in birds and reptiles, manifest both as an avid bird watcher, as well as his Membership of the Australian College of Veterinary Scientists’ Avian Health Chapter.

Beyond his professional interests, Mark loves spending time with Kate and his children, Renwick and Wilson. He is an incurable basketball tragic, and dreams of the halcyon days when he earned his university blue for the sport.

Mark is a Ministerial appointment to the Board.

Mrs Christine White recently joined the board as one of the two consumer representatives in July 2009, and brings a rural business perspective. Christine, with her husband Henry, owns and manages a commercial sheep breeding and cattle business at Coolah, central west New South Wales. She graduated from the University of Western Australia in 1989 with a Bachelor of Science (Agric) Hons, and is currently undertaking a Graduate Certificate in Rural Science (Ag Consulting) through the University of New England. Following graduation, Christine initially worked in research agronomy for Monsanto Australia Ltd, and after moving to the Coolah district conducted a consulting agronomy service with a rural merchandise business.

Christine has been actively engaged in industry and community groups. This includes facilitating a town hall redevelopment project with the Coolah District Development Group and Warrumbungle Shire Council, a regional committee member of the Sustainable Grazing Systems (central west NSW) program, a Northern Kondinin Overview Group board member, and an active member of Pony Club NSW Inc.

Christine’s academic background in scientific research and agronomy extension have encouraged her to pursue her interests in livestock management and sustainable agricultural practice. She enjoys raising her three children, breeding and training stock horses, and working in partnership with her husband in the family business. She continues to develop her governance, communication and strategic thinking skills through her current studies and business interests.
The answer to this simple question by a veterinary practitioner may be the touchstone upon which confusion and misunderstanding begin, and in some cases this can develop into a full-blown complaint to the Board. Attention to detail, clear and unambiguous communication, and adequate medical record keeping all have a role to play in ensuring no such problems arise.

There have been a number of enquiries and complaints from members of the general public to the Board recently where issues associated with the answer to this question have been critical. There are very specific sections of the Veterinary practitioners’ code of professional conduct (http://www.legislation.nsw.gov.au/maintop/view/inforce/subordleg+533+2006+cd+0+N) that indicate aspects of a veterinary practitioner’s responsibility in this circumstance, including section 2 (Welfare of animals must be considered), and sections 5 (Utilisation of skills of colleagues), 6 (Professional conduct), 7 (Informed consent), 8 (Availability to care for animal), and 9 (Referrals and second opinions). It is essential that all veterinary practitioners in NSW are familiar with the code of professional conduct, which is Schedule 2 of the Regulations that addend the Veterinary Practice Act 2003. The code is available under publications on the Board’s website.

It has long been a commonly accepted practice within the veterinary profession for animals to be hospitalised after hours, most often not fully supervised. There is no argument that many animals have benefited enormously from such hospitalisation. There is a vast range of medical and surgical conditions where after hours hospitalisation will play a key part in treatment or recovery. These range from simple convenience situations to critical care cases where movement of the animal may pose significant risk. There is no blanket rule as to what is right in cases of hospitalisation after a veterinary hospital is closed. Each case is affected by factors unique to that case, and several options may represent appropriate levels of care. The veterinary practitioners must make that judgement.

Clearly the Board is not seeking after hours supervision in all veterinary hospitals and recognises that even in quite large regional centres there may be no dedicated after hours or emergency veterinary hospital. It should be noted the complaints tend to arise when owners find there were options in major centres that they were not informed about.

The client has a right to be fully informed. You should consider discussing, when appropriate, the benefits that the specific form of after hours hospitalisation may provide to the animal and owner, the level of supervision that will or could be provided during hospitalisation, the various other options available, and the costs of these various options. It is the veterinarian’s responsibility to ensure the client’s right to be fully informed, is satisfied.

Options may include (but are not limited to):
(a) no supervision – animal left unattended;
(b) minimal supervision – scheduled supervised visits by veterinary or nursing staff during the hospitalisation period;
(c) constant supervision – veterinary or nursing staff to provide constant supervision throughout the hospitalisation period;
(d) referral to another facility e.g. an after hours emergency centre;
(e) owner taking the animal home to provide supervision.

Discussion and agreement to any of these options and the associated costs constitutes informed consent, and should be noted in the medical record. Once the client has been informed of the hospitalisation option(s) available to them at the practice, and has given their informed consent, the veterinary practitioner is responsible for ensuring the conditions of the chosen option are met. If for unforeseen reasons the chosen option can no longer be met, then a new round of communication and choice must be initiated. Please don’t assume that, “I thought the client knew that nobody would monitor the animal during the night”.

As veterinarians we are dealing with a more sophisticated and knowledgeable general public, with higher and higher expectations. The major consequence of this change is the imposition of higher standards of communication on veterinarians - a challenge our profession meets admirably in almost all circumstances!

“Who will look after my pet when you are closed?”
Report from the Board’s Complaints Committee

The Board has established a Complaints Committee and has delegated to that Committee the investigation and formulation of recommendations to the Board in relation to matters arising under Part 5 of the Act. The Complaints Committee comprises 3 members of the Board and may be augmented from time to time by other Board members and appropriate persons who are not members of the Board. The Committee makes recommendations to the Board and then the whole Board accepts or rejects the Complaints Committee reports and conclusions. The Board makes the decisions.

What are possible decisions by the Board in accordance with S 47 of the Act and what do these terms ‘mean’? The Board has the authority to;

• Dismiss the complaint with or without investigation if the Board was satisfied that the complaint was ‘frivolous or vexatious or otherwise lacking in merit’.

• Dismiss the complaint but may also issue a caution in respect of the matter complained of (the Board is seeking an amendment to this section of the legislation to change the word ‘caution’ to ‘recommendation’ when used in conjunction to dismiss the complaint).

• Issue a caution (as the word implies, it is a warning that the behaviour or matter complained of should not be repeated – basically the complaint was justified and the vet found to have had unsatisfactory professional conduct).

• Issue a reprimand (this is stronger than a caution – it’s a serious matter and an official rebuke and the vet found to have had unsatisfactory professional conduct).

• Refer the matter to the Administrative Decisions Tribunal (ADT) (professional misconduct of a sufficiently serious nature to justify the suspension or cancellation of a veterinary practitioner’s registration).

The Board has other provisions available to it such as imposing conditions on the registration, requiring the practitioner to undertake specific educational courses or require the practitioner to take advice in relation to the management of his or her practice.

The Board may also require the practitioner to pay for the costs of the investigation and or fine up to $5,000.

Recent complaints

Since the Complaints Committee’s report from last Boardtalk (April ’09), the Veterinary Practitioners Board has determined another fourteen (14) complaints against veterinarians after investigation by the complaints committee. There are an additional six cases presently under investigation.

Four (4) of the fourteen (14) concluded investigations resulted in the veterinary practitioners receiving cautions, or cautions and fines for unsatisfactory professional conduct; the other ten (10) complaints were dismissed by the Board.

Of the ten (10) dismissed complaints, one (1) was dismissed under section 46.1a of the Veterinary Practice Act as the Board was satisfied that this complaint was frivolous or vexatious or otherwise lacking in merit.

However for another dismissed complaint the Board exercised its right under section 46.5 to issue a caution to the veterinary practitioner against whom the complaint was made in respect of the matter complained of in order to alert the practitioner to fully comply with aspects of the Act, to minimise the occurrence of such a complaint arising against the practitioner in future.

When the Board’s Complaints Committee (CC) has reviewed all the documentation of the case and sees grounds for particularizing a complaint, the CC may issue a requirement for the veterinarian to be interviewed by the CC to further review the issues of the case.

Cases resulting in ‘cautions’ involved:

• For two separate cases, the Board concluded that the veterinarian in question should have discussed with the complainant the option to refer the patient with a life-threatening problem to another hospital that could offer overnight monitoring. In its deliberations, the Board took into account that an overnight monitoring facility was within reasonable geographical proximity - (caution).
• For another case, the Board decided that the veterinarian could have done more to diagnose the patient’s underlying condition. The patient subsequently died and the complainant requested an independent post-mortem examination. The cadaver was sent to another practice for the post-mortem examination, where the partner of the defending practitioner worked. The Board agreed that the complainant had the right to be told that the wife of the practitioner worked at the practice that performed the post-mortem examination. This case highlighted the subjective similarities of a perceived conflict of interest and a real conflict of interest – practitioners must be mindful of even perceived conflicts of interest when they are asked for independent referrals – (caution).

• For the other case the Board decided that the practitioners failed to note in the case records, a very significant observation in the patient’s radiographs that may have had some bearing on the differential diagnosis and approach to treatment – (caution).

Of the complaints that were dismissed, most originated from dissatisfied outcomes to treatment.

One complaint involved a complainant perceiving they were mislead as to the qualifications of a veterinarian, believing that hospital staff members had referred to a veterinarian as a ‘specialist’. Although this veterinarian regularly preformed certain procedures they had no specialist qualifications. From this case it is important that veterinary staff are instructed not to refer to a veterinarian as a specialist or having ‘specialised’ knowledge unless they are ‘the holder of specialist registration in that branch’.

The Radiation Advisory Council (RAC), is established under the Act, and advises the Minister for Climate Change and the Environment. The RAC also provides advice to DECCW on issues relating to licensing, registration and accreditation.

Areas of EPA’s responsibility concerning radiation control include:

* Licensing
* Registration
* Accreditation

How does it affect veterinary hospitals? Since 2002

[1] There has been compulsory registration of all radiographic and imaging equipment in veterinary hospitals [with regular inspections of the equipment required and production of compliance certificates] and

[2] licensing of the users of all diagnostic radiation equipment.

The Board has been notified that there are ongoing compliance checks being carried out at the moment by officers of the Department of Environment, Climate Change and Water.

They are inspecting veterinary hospitals across the state.

In one area of the state, a total of 17 practices were inspected and

• Seven unregistered apparatus were found
• 13 unlicensed veterinarians who may be using radiation equipment were found at seven premises.

If you are not sure of what to do, whether you need to have compliance inspections of your equipment, need to add another vet to your licensed users etc …it is best NOT to sit and wait for the inspector to arrive and find yourself receiving a penalty notice – be warned!.

Contact the Department at
PO Box A290, Sydney South, NSW 1232
Tel:(02) 9995 5000
Fax:(02) 9995 5999
www.environment.nsw.gov.au


Radioographic Equipment in your hospital?
Do you have the appropriate licences?


The EPA is part of the Department of Environment, Climate Change and Water (DECCW) and has certain regulatory powers which are performed on its behalf by DECCW. These include regulating the use of radioactive substances and radiation equipment in NSW.
Our faculty has just said farewell to the outgoing dean Professor Leo Jeffcott. We thank him for his outstanding leadership over the last five years as he steered the faculty in all aspects. A dean’s role is more than a full-time commitment, it is close to an ‘every waking hour’ commitment and Professor Jeffcott has been very effective in his role. His achievements are too numerous to list but just a few include overseeing the completion of many capital works such as extensive refurbishment of the Camden campuses’ facilities as well installation of new diagnostic imaging equipment at both Sydney and Camden Veterinary Teaching Hospitals. He has worked tirelessly to oversee responsible financial management of all sectors of the faculty. He has overseen the implementation of our second undergraduate degree the Bachelor of Animal Veterinary Bioscience which has seen our undergraduate student numbers double, overseen many new staff appointments and has been very approachable to both students and staff to assist them with their individual concerns. Professor Jeffcott has also worked to ensure that the students and staff integrate and assist community groups concerned with animal health and welfare and the veterinary profession and has always made himself available to assist the NSW Veterinary Practioners Board when required. During November the faculty welcomed the incoming Dean, Professor Rosanne Taylor. Professor Taylor has been a member of the faculty for a number of years and has particularly distinguished herself in the areas of excellence in ‘Teaching and Learning’ as well as in her research in aspects of neurophysiology.

Another initiative that I would like to bring your attention to, is that the Faculty has reviewed its admission requirements for the BVSc. The faculty requires all students seeking admission to this degree in 2010 to complete a ‘commitment statement’. This initiative is to ensure that all BVSc applicants (recent and non-recent school leavers, domestic and international students) demonstrate a firm and continuing commitment to the study of Veterinary Science. Evidence of such commitment could include work experience in veterinary practice or in primary animal production and membership of organisations such as WIRES. The document suggests a number of animal handling skills for a variety of veterinary species that the applicant should have performed or observed prior to commencing the degree. The commitment statement proforma is available for perusal at http://www.vetsci.usyd.edu.au/documents/faculty/2010_commitment.pdf. The faculty has also introduced a ‘Rural students entry scheme’ whereby rural students will be eligible for a BVSc place if they have completed an Australian Year 12 examination in the last two years, have no tertiary record, and have completed at least the last four years of secondary education at a rural school. Under this scheme, a limited number of places will be available to applicants whose ATAR (the new term for the ‘University Admissions Index’ [UAI] score) is not more than five points below the Main Round ATAR cut-off.

The faculty is in the process of planning for its centenary next year. The entire faculty is very excited about this and many events are in train that will involve many of our alumni to celebrate the faculty’s existence. Those of you familiar with the faculty will be pleased to know that our ‘iconic’ roundhouse is presently undergoing a ‘make-over’ as a centre-piece for next year’s celebrations. I walk past it every day and it is presentely covered in scaffolding. It looks like every roof and wall slate is being replaced in readiness for next year…..there is presently no place for the possums to hide. For those of you that are interested in the faculty’s 2010 celebratory events, keep an eye out for our ‘Ruminations’ or ‘Roundhouse’ publications which are usually circulated via email, or contact our Veterinary Science Foundation (VSF) office which is coordinating all centenary alumni events ph: 02 9351 8026 or vsf@vetsci.usyd.edu.au.

Merran Govendir
Senior Lecturer in Veterinary Pharmacology
Faculty of veterinary Science, The University of Sydney.
Responsibilities of Specialist Veterinarians

At this time in NSW there are currently 154 registered Specialist veterinary practitioners. There are 35 areas of specialty recognised and include Animal Behaviour, Avian Medicine, Canine Medicine, Equine Medicine, Cattle Management and Diseases, Equine Surgery, Feline Medicine, Laboratory Animal Medicine, Large Animal Surgery, Small Animal Surgery, Small Animal Medicine, Veterinary Anaesthesia, Veterinary Anaesthesia and Critical Care, Veterinary Cardiology and Veterinary Dentistry. All the specialty areas are listed at the AVBC site at www.avbc.asn.au. It is important specialists use their correct title as on their registration. For example those who are registered in the area of Small Animal Surgery or Small Animal Medicine must not use the more general term Small Animal Specialist.

One of the roles of specialists is to provide specialist opinions. Advice is sought by practitioners in difficult or unusual situations and it is normal, indeed advisable, that in such situations practitioners should seek advice. Specialists [or referral practices such as intensive care units, hospitals or surgical facilities] can provide extended services not within the scope of the general practitioner. The circumstances within which these referrals are made are carefully and strictly defined and can be found in the Australian Veterinary Association’s Code of Ethics and Complementary Guide to Professional Conduct.

Acceptance of referrals implies a responsibility and it is pertinent that specialists or veterinarians acting as referral veterinarians should be expected to comply with professional standards of conduct.

The referring veterinarian is asking the referral veterinarian to act on their behalf. It is therefore essential that the results of the examination or investigation be relayed to both the referring veterinarian and the animal owner or agent. Duplicate copies or emails assist this process but the information should be imparted in full and recorded.

Quoting the AVA’s code of Ethics and Conduct:

“In the case of a referral, the receiving veterinarian must be provided with all pertinent information on the case, preferably before the patient is delivered and should:

1. Inform the client that the animal would not be treated for any other ailment other than that involved in the referral, except in an emergency or with the consent of the attending veterinarian;

2. Report on all relevant findings promptly to the attending veterinarian. A verbal report such as a conversation or a telephone call can be misinterpreted, misconstrued or forgotten.

3. Upon discharging the patient, provide the attending veterinarian with a full report including advice on continuing care and advise the client to go back to that veterinarian for further advice.”

It is important that veterinarians, either as specialists or as facilities offering referral services such as hospitals, emergency services, or after-hours services maintain a professional standard communicating with the referring veterinarians. The public must feel confident that they are dealing with a co-coordinated body of professionals that together provide an integrated and comprehensive service.

Special Interest vs Specialist vs Particular Interest

Although the Australian Veterinary Association has “Special Interest Groups” as part of its structure and our own legislation uses the term “Special Interest Areas” in the Code of Conduct, veterinary practitioners who are not registered as specialists are NOT able to use the phrase “special interest”. There is no doubt this has caused us problems but the history is long and the debate long over and we certainly can’t turn the clock back …..

The legislation in NSW is very clear that no abbreviation or derivative of the word specialist can be used by non-specialist veterinary practitioners.

Veterinary Practice Act 2003 No 87
13 Offence to practise as specialist unless registered as specialist

(1) An individual must not represent himself or herself to be a specialist in a branch of veterinary science unless he or she is the holder of specialist registration in that branch.

Maximum penalty: 50 penalty units or imprisonment for 12 months, or both.

(2) Without limiting the ways in which a person can be considered to be represented as a specialist, a representation using any of the following titles, names or descriptions constitutes such a representation:
(a) the title or description “specialist” or any abbreviation or derivative of that word in connection with the person’s practice of veterinary science,

(b) any title, description, words or letters implying, or capable of being understood as implying, that the person is a specialist in a branch of veterinary science.

How do you advertise what you do? Perhaps you have a cat only practice and want to advertise that fact - well, no problem. A dermatology practice? Again there is no problem advertising you just see skin diseases. Remember though, it is natural for people to think “this practice only sees cats so they must be cat specialists” or “this vet has extra qualifications…a MACVSc (Feline Medicine) so this vet must be a cat specialist”. The public generally are not aware of what the extra training means and certainly can’t be expected to know the difference between MACVSc and FACVSc.

Remember all practice staff need to ensure there is no misunderstanding by the public as to the qualifications of those who are in the business.

Within general practice you may refer a client to a very capable yet non-specialist veterinarian. Ensure the client is not accidentally misled by any of the staff in the practice as to the qualifications or registration of the person accepting the referral.

What choices do you have if you want to encourage certain cases? “Particular interest in….” is a problem free phrase and frequently used and recommended by the Board.

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**MARCH 2010 isn’t far away - Continuing Professional Development Requirements**

*Section 33 of the Veterinary Practice Act 2003 requires NSW registered veterinarians to submit an annual return which includes continuing professional development activities. March 31st next year [2010] will mark the end of the 4th return period, however the Board did not record the points for the 1st year, which has provided practitioners and extra year to obtain their points. Therefore the end of the points recording cycle is 31 March 2010”. It is time now for veterinarians to assess if they will fulfill the minimum requirements. For veterinarians facing a possible shortfall there are just over 3 months remaining to complete further CPD needed.*

One of the objects of the *Veterinary Practice Act 2003* is to ensure that veterinary practitioners meet acceptable standards. To achieve this, the Board is required to ensure that registered practitioners remain competent to practice throughout their careers.

The Australasian Veterinary Boards Council and the Australian Veterinary Association (AVA) have agreed on the model for points scoring of CPD across the country and the minimum requirements. A comprehensive list of activities, points and validation of points is included in this Boardtalk and can also be accessed on the Veterinary Practitioners Board website [www.vpb.nsw.gov.au](http://www.vpb.nsw.gov.au).

The CPD requirement is based on a minimum of 60 points over a consecutive three year period, of which, at least 15 points must be structured points. The remaining 45 points may be unstructured points or more structured points.

If a veterinary practitioner fails to provide minimum points over a three year period the Board will ask the veterinary practitioner for reasons. The Board will also conduct random audits of CPD recording and validation.

There may be various, valid reasons why a practitioner failed to reach the minimum CPD points and each response will be considered independently. However, if the reason is not acceptable, the Board has the responsibility under Section 19 of the Act to place conditions on the practitioner’s registration.

There are two resources available to make recording points less onerous. Members of the AVA can elect to have the AVA’s VetEd service record their points or the VPB can supply a CPD diary. A downloadable Excel CPD diary is available on the VPB website [www.vpb.nsw.gov.au](http://www.vpb.nsw.gov.au). It is entirely up to the practitioner how they record their CPD points; any method is acceptable so long as the activity, designated points and validation are recorded and available for the preceding three years.

There are many ways to gain CPD points including conferences, seminars, reading relevant journals and small group learning. Below is a list of some of the continuing education opportunities available over the next 3 months.
Some of the options for CPD points between December and March 2010

Feb 1-3          Australian Poultry Science Symposium, Sydney NSW
Feb 5-7          AAVA Qld Division Annual Conference, Brisbane QLD
Feb 17-20        CVE Dermatology, Sydney NSW
Feb 22-26        Agricultural Health and Medicine short course, Hamilton VIC
Mar 12-14        AAVA NSW Division Annual Conference, Newcastle NSW
Mar 19-21        Equine Dentistry Wetlab, Wagga Wagga NSW
Mar 20-21        AAVA SA Division Annual Conference, Adelaide SA

Other courses overseas include

• Jan 28-31 Veterinary Practice Management Association Congress, Oxford, England
• Feb 22-26 2nd Eurasian Veterinary Conference, Langkawi, Malaysia
• Mar 21st 5th IDF Mastitis Conference, Christchurch, New Zealand

There are also the "On line" courses and you can access some of these by contacting

• Centre of Veterinary Education (previously Post Grad Foundation)  www.cve.edu.au
• International Veterinary Information Service. Free access to huge range of courses- online and face to face. Check out IVIS- www.ivs.org/contact
• Royal College Online courses  http://rvc.ac.uk/CPD/Courses
• Veterinary Information Network has great courses  www.vin.com
• AND Bayer has free short courses [ with AVA points]  found at www.bayeraccelerate.com.au

So many and varied ways for veterinarians to accumulated the required number of points by the end of March 2010.

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**Helpline for Veterinarians - DHAS (NSW)**

Dr Frank Doughty BVSc PhD
DHAS Management Committee

In early 1997 Dr Frank Doughty facilitated an arrangement with the Doctors’ Health Advisory Service (NSW) Inc. to provide confidential, personal and health assistance to all members of the veterinary profession in NSW. The Veterinary Practitioners Board of NSW fully supports this service and is contributing towards the funding on behalf of the veterinary profession.

The DHAS (NSW) was formed in 1981 and is an independent and confidential service offering advice to doctors, dentists and veterinarians and to medical, dental and veterinary students in need of help.

A dedicated telephone service is available 24 hours a day: (02) 9437 6552.

Calls come from practitioners themselves, their families, staff and professional colleagues.

Incoming calls are referred to one of the first call panel of senior medical practitioners, experienced in handling the health problems of colleagues and other health professionals. The caller might receive advice directly from this doctor or might be referred to one of our panel of specialists.

Extreme care is taken to maintain confidentiality. Once the caller enters into a formal doctor/patient relationship, whether with a first call panel doctor, a member of our specialist panel, or another medical practitioner, then the advisory role of the DHAS is completed – we are not a treatment service.

Calls generally relate to substance abuse (alcohol and other drugs), psychological or physical issues, financial difficulties, or a combination of these problems. Each caller’s problems are unique.
The DHAS (NSW) continues to be well-respected amongst professional colleagues and takes its rightful place as one of the leading health care advisory organisations in this state, if not Australia.

We aim to assist veterinarians to maintain full personal, professional and social capability. If this is possible, alternatives can be explored which enable veterinarians, with appropriate support and dignity, to function in their profession.

“Every doctor, dentist and vet should have their own GP.”

Helpline: (02) 9437 6552
- 24 hours -

Summary of Helpline usage by veterinarians over the past ten years:-

<table>
<thead>
<tr>
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<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctors/Dentists</td>
<td>148</td>
<td>135</td>
<td>173</td>
<td>117</td>
<td>90</td>
<td>88</td>
<td>85</td>
<td>91</td>
<td>80</td>
<td>129</td>
</tr>
<tr>
<td>Veterinarians</td>
<td>6</td>
<td>9</td>
<td>9</td>
<td>6</td>
<td>7</td>
<td>13</td>
<td>6</td>
<td>8</td>
<td>3</td>
<td>5</td>
</tr>
</tbody>
</table>

Breakdown of calls (5) from veterinarians 2008/2009:

<table>
<thead>
<tr>
<th>Age</th>
<th>Sex</th>
<th>Location</th>
<th>Referral</th>
<th>Problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unknown</td>
<td>Female</td>
<td>Urban</td>
<td>Self</td>
<td>Unknown/medical</td>
</tr>
<tr>
<td>60+</td>
<td>Female</td>
<td>Rural</td>
<td>Colleague</td>
<td>Work related stress/financial</td>
</tr>
<tr>
<td>50+</td>
<td>female</td>
<td>Urban</td>
<td>Self</td>
<td>Alcohol related</td>
</tr>
<tr>
<td>Unknown</td>
<td>Male</td>
<td>Rural</td>
<td>Self</td>
<td>Work related stress/ marital</td>
</tr>
<tr>
<td>Unknown</td>
<td>Male</td>
<td>Rural</td>
<td>Self</td>
<td>Requested professional advice</td>
</tr>
</tbody>
</table>

At the annual meeting of DHAS in August 2009, Dr Frank Doughty was re-elected to DHAS NSW Management Committee.

Dr Frank Doughty BVSc PhD
DHAS Management Committee

Confidential Help for Veterinarians

Independent and confidential service staffed by specially selected and trained medical practitioners who are able to offer personal and health assistance as well as referral to specialists. Veterinary practitioners / their families / their colleagues are able to make calls to the Help Line. Issues vary and all calls are unique but may involve depression, alcohol abuse, drug use, work related stress or marriage difficulties. This highly respected and leading health care advisory organization aims to assist veterinarians to maintain full personal, professional and social capability

The dedicated telephone service is available 24 hours a day.

(02) 9437 6552
Medicines Update

Lee G Cook
Veterinary Officer
Biological and Chemical Risk Management
Primary Industries, Department of Industry and Investment (I&I NSW)

New AVA vaccination guide lines for dogs and cats

At the May 2009 meeting of the Policy Advisory Council of the Australian Veterinary Association (AVA) an amended Small Animal Vaccination policy was agreed to and recommended to the AVA Board for ratification.

That Policy recognises changes to vaccination protocols for dogs and cats based on internationally accumulated evidence that annual booster vaccination is not necessary for most animals. As a result the AVA policy, as published on their website, now says:

“Vaccination protocols should be determined within a veterinarian–client–patient relationship, based on attributes such as duration of immunity of available vaccines and an individual animal’s requirements.

Every animal should be immunised and each individual animal only as frequently as necessary. Current scientific consensus recommends that adult cats and dogs should be vaccinated with core vaccines triennially where applicable.

Informed consent is important.

Core vaccines should be administered to all animals to protect them against severe, life-threatening diseases that have a global distribution.

Dogs: Canine distemper virus, canine adenovirus and canine parvovirus.

Cats: Feline parvovirus, feline calicivirus and feline herpesvirus.”

While this information has been provided to AVA members other practitioners may not be aware of this situation and the current professional recommendations. Advice for all practitioners is also available on the AVA web site.

Use of human products to treat animals

While there is some difference between States on this issue, in NSW practitioners are permitted to use and supply (or prescribe) registered human pharmaceuticals to treat companion animals including horses (i.e. not food producing species).

In some states this may only be done if there is no registered veterinary product available.

Technically such use will be off-label in most cases and so require informed consent. But since many human products are supplied without recommended dose rates or species indications, it would possibly not apply to those products. Practitioners will have to make their own decisions in such cases.

New Product under permit for endotoxaemia in horses

The AVPMA has issued Permit 11774 to allow registered veterinarians to obtain and use CEREBBEN, containing 4.5mg/ml purified hyperimmune caprine serum, in the treatment and prevention of enterotoxaemia in horses. The product is supplied by Daval (Australia) Pty Ltd 45 Stevedore Street, Williamstown, Victoria, 3016.

A copy of the permit is available from http://permits.apvma.gov.au/PER11774.PDF.

Ethylloestrenol (Oestrotain®) tablets for oestrus suppression in greyhounds

The Australian Pesticides and Veterinary Medicines Authority (APVMA) has issued a permit to allow Nature Vet Pty Ltd to market this unregistered product while no registered product is available.

Contact Nature Vet about supplies, and obtain a copy of the permit 11522 from the APVMA web site at http://permits.apvma.gov.au/PER11522.PDF.

The demand for this product has increased following the decision by racing authorities to screen for testosterone in racing greyhounds (and horses) and thus effectively ban its use for oestrus suppression. Recent reports indicate their testing is accurately differentiating natural hormone levels compared with those following low dose testosterone use.
Potential use of Halocur® (halofuginone as the lactate) to treat Theileriosis in cattle

Halocur, 500mg/L halofuginone, is registered for Cryptosporidium treatment in calves at 0.1mg/kg bodyweight. It has proven reasonably effective overseas in treating African/tropical T parva and T annulata and would appear to have broad effectiveness against Theileria spp.

The recommended dose rate for Theileria control is much higher at 1.2mg/kg, sometimes repeated at 24-48 hours in serious cases. Lesser doses (0.6mg/kg) have been shown to be much less effective.

The Australian supplier does not support its use for this purpose at these dose rates.

Also, little benefit has been reported following limited local use, since infection has only been identified at the later stages of the disease when treatment is relatively ineffective.

The main reason for interest in the product is that it is locally registered and can potentially be used off-label. Given the elimination half life is published as ~30 hours, even at a dose rate of 1.2mg/kg it is unlikely any residues would continue beyond the published ESI of 17 days, though a repeat dose would perhaps require a longer time.

I can provide further information from the literature if anyone is interested.

Biosecurity – who’s responsible?

Marilyn Evers,
Strategy Leader Animal Biosecurity,
Department of Industry & Investment NSW

Biosecurity in NSW is all about protecting the economy, community and environment from problems associated with pests, diseases, weeds and residues. For vets this mainly means dealing with disease and residue problems that might affect market access, production, human health and native wildlife. So which vets are responsible for biosecurity in NSW?

No surprises here – we all are!

The public animal health service (delivered by the partnership between Industry & Investment NSW and the Livestock Health and Pest Authorities) has a primary biosecurity role. But vets in all walks of life including private practice, research, teaching and livestock production are responsible for biosecurity, especially in the area of surveillance.

All registered vets in NSW should be aware of the diseases that they need to watch out for and report on. These are the notifiable diseases. Each of us has a legal responsibility to notify when we know or even suspect the presence of one of these diseases.

You can find detailed information about the notifiable diseases, including disease lists and susceptible species, at www.dpi.nsw.gov.au/agriculture/livestock/health/general/notifiable-animal-diseases-nsw

The same legal requirement to notify applies if any of us know or suspect a new disease. It also applies if a disease that we’re familiar with starts doing something it shouldn’t – like turning up in a different species or getting more aggressive. Theileriosis is a good example of a disease that isn’t on the list of notifiable diseases, but should be notified in these current cases where it appears to be misbehaving and causing unusual havoc.

Apart from direct surveillance, vets also play a vital role in educating livestock owners about biosecurity.

The ‘biosecurity starts on farm’ theme is widely used and often underpins state, national and international biosecurity programs. The theme
promotes to livestock owners and managers the ‘look and check’ bits of ‘look, check, call a vet’, combined with simple messages about secure boundaries, taking great care with introductions, minimising other unnecessary contacts and keeping their own livestock in good health.

As technical experts vets shouldn’t wait to be called. We should be using every opportunity to teach livestock owners about the importance of biosecurity and the benefits for both their individual enterprises and for their industry as a whole.

**New Government web page – information for vets**


The vet page provides technical information and links to useful biosecurity resources and sites. If there’s information that you’d like to see here, either contact Marilyn Evers (contact details below) or send an email to biosecurity@industry.nsw.gov.au

**Diagnostic samples – How? What? When? Where?**

One of the best resources on the ‘Information for vets’ page is the Vet Lab Manual. The Manual is a very user friendly publication produced by Industry and Investment’s laboratory staff and provides detailed information about how to sample for diseases of large livestock, poultry, cage and aviary birds, bees and fish:

- specimens to collect by disease/disorder,
- specimens to collect by discipline, eg haematology, virology, biochemistry, genetics,
- submission of specimens.


**Workshops on personal protection**

The vet page also provides guidance on dealing with zoonotic diseases such as hendra or anthrax.

The information on the page is backed up by a series of workshops being delivered by Industry and Investment staff through AVA branch meetings. These workshops are highly recommended for all vets, providing valuable guidance and practical experience on when and how to use personal protection equipment.

**So who’s responsible for biosecurity?**

When it comes to biosecurity each of us, as vets and professionals, has a responsibility and role to play, whether it’s protecting livestock industries, market access, native species or the health and safety of ourselves and other persons in our care.

For more information, contact the author or send an email to biosecurity@industry.nsw.gov.au

Marilyn Evers,
Strategy Leader Animal Biosecurity,
Department of Industry & Investment NSW
ph 4828 6631, mob 0428 268 668,
email marilyn.evers@industry.nsw.gov.au

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**1300 366 653**

New telephone number for Veterinary Practitioners Board

**1300 366 653**

You can use this number to contact the New South Wales Veterinary Practitioners Board from ANYWHERE within Australia for the cost of a local call.
Debarking dogs? - Did you know

Before you undertake any “debarking” procedures, the dog’s owner must supply you with, not 1, but 2 documents as described in the Prevention of Cruelty to Animals Act [2006]. These documents must be filed by you and available should you be requested by the Board’s Inspector or RSPCA Inspector.

7 Prescribed circumstances in which “debarking” is permitted

For the purposes of section 12 (2) of the Act, the prescribed circumstances in which a dog may be operated on for the purpose of preventing the dog from being able to bark are that the veterinary practitioner who performs the operation is, before doing so, provided with:

(a) a copy of an order issued under section 21 of the Companion Animals Act 1998 requiring the owner of the dog to prevent it from barking, and
(b) a statutory declaration by the owner of the dog to the effect that, unless the operation is performed, the owner would need to have the dog destroyed so as to comply with the order.

Prevention of Cruelty to Animals Act 1979 - Sect 12

Certain procedures not to be performed on animals

12 Certain procedures not to be performed on animals

(1) A person shall not:

(a) dock the tail of a horse, bull, ox, bullock, steer, cow, heifer, calf or dog,
(b) crop the ears of a dog,
(c) operate upon a dog for the purpose of preventing the dog from being able to bark,
(d) remove one or more of the claws of a cat,
(e) grind, trim or clip one or more teeth of a sheep,
(f) perform a clitoridectomy on a greyhound, or
(g) fire or hot iron brand the face of an animal.

Maximum penalty: 250 penalty units in the case of a corporation and 50 penalty units or imprisonment for 6 months, or both, in the case of an individual.

(2) A person is not guilty of an offence against this section if the court is satisfied that the procedure comprising the alleged offence was docking the tail of a dog, was performed by a veterinary practitioner and was in the interests of the dog’s welfare.

Who is a “Veterinary Practitioner”? 

The definition of a ‘Veterinary Practitioner’ in the Veterinary Practice Act is ‘a person who is registered under the Act’. To be registered means that the practitioner has paid the registration fee AND submitted the Annual Return [unless otherwise notified. Some honoraries are not required to submit a return]

A practitioner may remove himself or herself from the register OR the Board may remove a practitioner for

• Failure to pay the registration fee
• Or for failure to submit the Annual return
• Or for failure to pay registration fee and submit the Annual Return.

If a veterinary practitioner is not registered, they are no different to any non veterinary graduate and can not represent themselves as

1. A vet,
2. Veterinarian,
3. Veterinary surgeon,
4. Animal doctor,
5. Or any abbreviation or derivative of those words either alone or in connection with any other title or description’ (such as paraveterinarian for example).

6. NOR can they use ‘Another title, name or description that indicates, or is capable of being understood to indicate, or is calculated to lead a person to infer, that the person is a veterinary practitioner or is entitled to be registered as a veterinary practitioner.

Penalty for offence is $500 or imprisonment for 12 months or both.

Certification

For veterinarians the simple act of signing their name on a document has the greatest potential for error of all their professional activities. A certificate is essentially a “written statement of fact made with authority”. The authority coming from the veterinary practitioner’s professional status.

Veterinary Practice Regulation 2006
Schedule 2 – Veterinary practitioners code of professional conduct
(Clause 13)

17 Certification by veterinary practitioners

(1) A veterinary practitioner must not certify to any fact within his or her professional expertise or knowledge, or that a veterinary service has been provided, unless the veterinary practitioner has personal knowledge of the fact or has personally provided, or supervised the provision of, the veterinary service concerned.

(2) Any certification by a veterinary practitioner must contain such detail as is necessary to ensure that it is complete and accurate and that the meaning is clear.

A breach of Clause 17 of the Code of Conduct is declared Professional Misconduct. If found to be of a sufficiently serious nature a veterinarian’s registration may be suspended or cancelled.

* Some documents are not necessarily labelled “certificates” [for example: declarations, insurance claims, witness statements] but carry the same level of responsibility. If the facts are incorrect or misleading the professional integrity of the veterinarian is called into question. Many certificates require a veterinarian to sign for the reason of the trusted professionalism.

* Veterinary practitioners must not attest as to what should happen or may happen in the future but only to what has already happened.

* They must not recklessly confirm what other people have stated.

* Veterinary practitioners must only verify what they know to be true

* If an alleged identification mark is not legible at the time of inspection, no certificate should be issued until the animal has been re marked or otherwise adequately identified.

* Where there is no identification mark, the use of the animal’s name alone is inadequate. If possible identification should be made more certain by the owner inserting a declaration identifying the animal so that the veterinary practitioner can refer to it “as described”. Where micro chipping or tattooing has been done it should be referred to in any certificate of identification

* The owner’s name must ALWAYS be inserted [in the case for example of a litter of puppies this will be the name of the breeder or seller.]

* In the case of a cattle pregnancy status certificate the animals need individual identification. If you tested 40 head and they were pregnant but not individually identified then you are limited to writing a report with disclaimers about the lack of identification. These animals may be sold with a premium price paid based on your certificate .You are putting your reputation on the line and the vendor may have mixed up the animals and those you tested may not be those for sale. Who knows? If the cattle were not identified with NLIS tags or individual ear tags or AACV tail tags do not write a “pregnancy status certificate”.

* When writing reports/statements it is recommended you do not write “to whom it may concern”. Address the report to the person who requested it and there is less opportunity for the misuse of your report.

* Large animal veterinarians, in general, have more requests for certificates. Pregnancy testing, export work, mortality insurance etc. Veterinarians are greatly assisted by the AVA special interest groups who often print certificates and certainly are able to offer advise.

1. Equine Vets admin@eva.org.au or (02) 9431 080
2. Cattle Vets aacv@ava.com.au or (07) 3423 1799
3. ASAVA  www.asava.com.au (02) 9431 5090

REMEMBER

A certificate is essentially ‘a written statement of fact made with authority’ and the authority in this case comes from the veterinary practitioner’s professional status. If the facts are incorrect or misleading, the professional integrity of the veterinary practitioner is called into question.

What is a “Statement of Opinion”?

This is a document in which the statement includes ‘In my opinion’. These are often used in situations where the circumstances are not clear-cut or there are not recognized ways of supporting or confirming the statement.
For example one could certify that a vaccine was administered to the animal but it would be one’s opinion that the animal will develop protective antibodies in response to the vaccination. A veterinarian could certify that a dog is pregnant (by using manual palpation, ultrasound examination or radiographs late in pregnancy) but it would not be wise to certify the number of pups (unless late in pregnancy with radiographic support). However, he could state that in his/her opinion there is a minimum of ‘x’ puppies.

It may be prudent, if possible, in some situations such as a decision to euthanase a valuable animal on the grounds that under the circumstances the welfare of animal is best served by euthanasia, to have your opinion supported by having a second veterinarian examine the animal and also make a statement of opinion. However, it is well accepted that provided a veterinarian can show a proper examination occurred, and the range of treatments possible in the circumstances were considered; the suffering of an animal should not be prolonged unnecessarily and proceed to relieve the animal of suffering on the basis of their opinion at the time.