



NEWSLETTER

Summer Issue November 2009

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REGISTRAR'S REFLECTIONS

It is hard to believe that it is the end of yet another year and that Christmas is almost upon us again. Amongst the hectic activity of the silly season don't forget to pause long enough to fill in your registration renewal forms and send off your fees.

One of the office's least favourite New Year tasks is the removal of names from the Register of veterinary surgeons who have forgotten to renew their registration and really did want to keep practising. It takes the tinsel off all that good seasonal cheer and results in additional costs to re-register.

At the end of November I travelled up to Geraldton for a continuing education seminar arranged by the AVA for the local veterinary surgeons. It was encouraging to see so many veterinary surgeons and some veterinary nurses make the effort to attend with some even travelling from as far away as Karratha and Carnarvon. In all twenty four attended a dinner at the African Reef Resort followed by an informative talk by Dr Zoe Lenard on 'Imaging the head' and discussion sessions afterwards.

The authorising of lay persons to perform equine dentistry and to perform pregnancy testing in cattle was the subject of a number of questions I was asked and produced much lively discussion. The obligations of veterinary surgeons when prescribing scheduled drugs was also a topic which generated much interest.

Judging by the discussions in Geraldton, the authorising of persons to perform acts of veterinary surgery is a subject of great interest to veterinary surgeons, especially the ones in rural areas.

The Board has recently amended its guidelines for the authorisation of persons to perform equine dentistry and is seeking comments from interested parties until 31 January 2010. I urge all of you with strong views on this matter to forward a written submission so the Board can consider your views before the guidelines are finalised. The draft guidelines are available on the Board's website or by contacting the Board office.

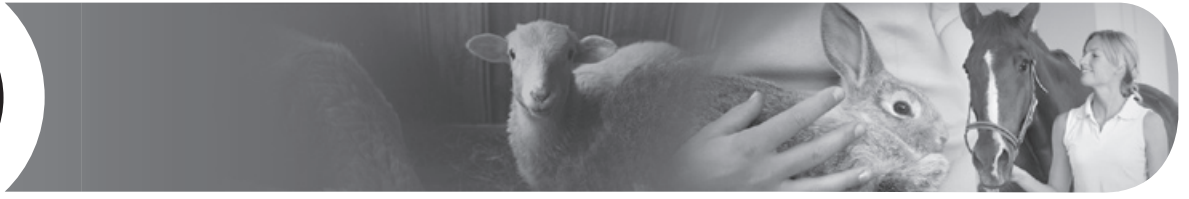
In this issue there is an analysis of the complaints received by the Board, including species of the animals involved and some statistics on the veterinary surgeons who are the subject of complaints. While the numbers involved may not be statistically significant, it is interesting to note that the majority of veterinary surgeons who are the subject of formal complaints received by the Board are male and have graduated more than ten years ago. The most common species involved is the dog.

Later in this issue are details of a process of assessment and inspection of premises that has been developed by the Board to ensure that they meet the standard required by legislation. If you have any questions about this process please contact me and I will be happy to discuss it with you.

In this issue, there is also information on drug prescribing issues, after hours advertising, a new protocol for microchipping by veterinary nurses, the obligation to provide a veterinary service, a case study on a complaint before the Board, and much more that I hope you will find interesting and useful.

Enjoy this newsletter, have a wonderful festive season and don't forget to send those renewals in!





ELECTION RESULTS

Voting for the two new elected Board members closed at noon on 23 September 2009. Votes were received from 402 veterinary surgeons for the two elected members of the Board for the term 1 January 2010 to 31 December 2012.

The Registrar declared the two candidates who obtained the highest number of votes, Dr David Marshall and Dr Rachel Stone, to be elected.

The votes were:

Dr David Marshall	286
Dr Rachel Stone	197
Dr David Mundy	177
Dr Bruce Moore	103
Dr Steve Metcalfe	41

The members and deputy members of the Board for the term of office from 1 January 2010 to 31 December 2012 are:

Dr Tony Higgs (Chief Veterinary Officer)
deputy TBA

Dr David Marshall (elected member)
deputy Dr Peter Buckman

Dr Rachel Stone (elected member)
deputy Dr Sue Beetson

Dr Peter Punch (AVA nominee)
deputy Dr David Neck

Ms Fiona Calley (ministerial appointee)
deputy Ms Sarah Harrison

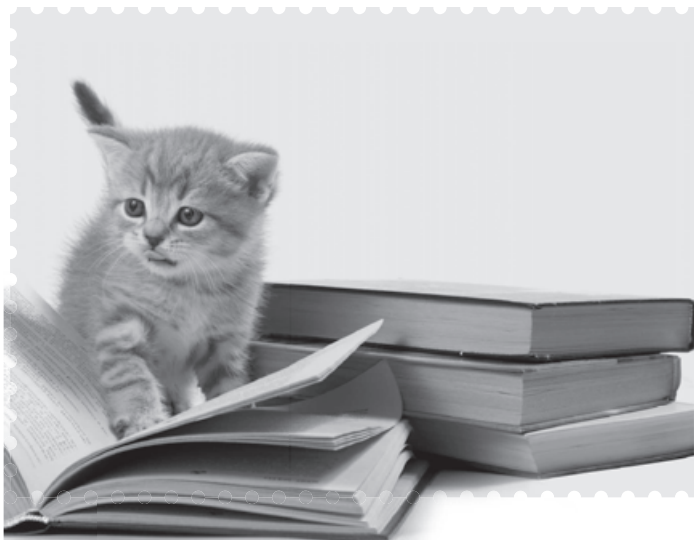
The Board extends a special welcome to Dr Tony Higgs and Dr Rachel Stone who are serving as members for the first time.

Four members of the past Board are retiring. However, the Board will continue to benefit from their experience and knowledge as they have agreed to serve as deputy Board members. They are Dr Peter Buckman, Dr Sue Beetson, Dr David Neck and Ms Sarah Harrison. The Board thanks them for their ongoing support and input.

SEASONS GREETINGS...

The Board members and staff of the Veterinary Surgeons' Board of Western Australia would like to wish everyone the very best for the festive season and a happy, healthy and prosperous New Year.

The Board's office will be closed from 4 pm Thursday 24 December 2009 until 8:30 am Monday 4 January 2010.



NEW FEES

In October 2009 the Minister for Agriculture and Food approved a new scale of fees. Details of the new fees are on the Board's website.

By now you will have received your renewal fee notices for 2010 for registration as a veterinary surgeon or veterinary nurse with the new fees. The fees are in line with the consumer price index which was in the order of 5% for 2008. The last fee increase was in 2006.





REGISTRATION RENEWALS

By now all registered veterinary surgeons and veterinary nurses and body corporates would have received their renewal reminders.

The ABSOLUTE deadline for payment of your registration is 31 December 2009.

As of 1 January 2010 veterinary surgeons, veterinary nurses and body corporates that have not renewed their registration will have their names removed from the Register.

If your name is removed from the Register you will not be able to legally work as a veterinary surgeon or nurse in Western Australia. To have your name restored to the register you will have to pay a fee of \$110 for veterinary surgeons and \$20 for nurses as well as the yearly renewal fee.

Each year the Board receives all sorts of excuses and requests from people whose registrations have lapsed through non payment, for the fee to be restored to the Register to be waived. Last year the Board received an

indignant phone call from a veterinary surgeon as his grandmother who usually pays his registration fee had forgotten and she was severely stressed because the Board was insisting on an application fee being paid before his name could be restored to the Register.

Please save your grandmothers, significant others, sisters, brothers, bosses, employees, cousins once removed and accountants from any emotional trauma and ensure you check that your registration is renewed. The bottom line is that you as a veterinary surgeon or nurse are responsible for this, not your support persons.

The Board is under no obligation to send a reminder but does so as a courtesy. If you do not provide your current address, as you are required to do under the Act, you will not receive your reminder.

Mark the date in your diary, or even better pay early and don't be one of the hundred or so veterinary surgeons or nurses each year that are removed from the Register for non payment.

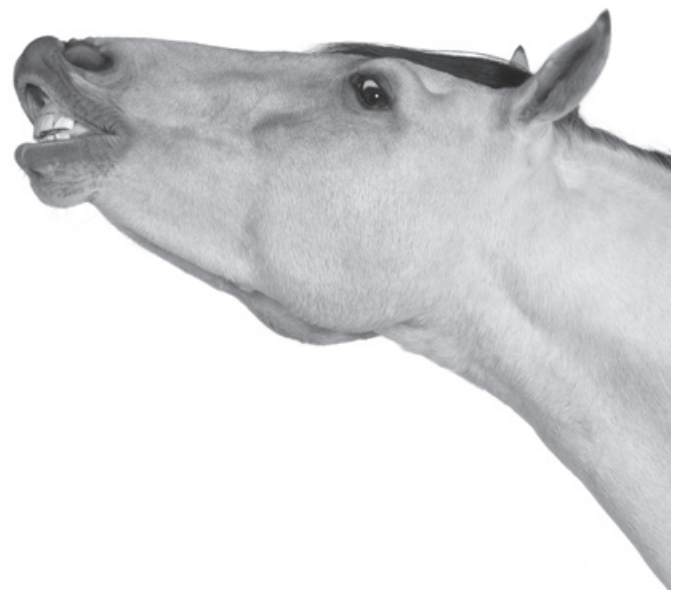
EQUINE DENTISTRY GUIDELINES OPEN FOR COMMENT

The Veterinary Surgeons' Board (Board) has revised the guidelines for the authorisation of a lay person to carry out certain acts of equine dentistry in Western Australia under the direction of a registered veterinary surgeon.

The Board is inviting comment from veterinary surgeons, authorised persons and other interested parties until 31 January 2010.

No comments will be considered after this date.

For a copy of the guidelines visit the Board's website at <http://www.vsbwa.org.au>





FORMAL COMPLAINTS RECEIVED BY THE BOARD 2008/09

Below is a summary of the formal complaints received by the Board last financial year and their outcomes.

New and Finalised Complaints 1 July 2008 to 30 June 2009

Month	New Complaint	Finalised	Other
July 2008	6	3	
August 2008	5	0	
Sept 2008	1	6	
Oct 2008	4	2	
Nov 2008	3	2	1 not in the Board's jurisdiction
Dec 2008	4	3	
Jan 2009	3	4	
Feb 2009	4	2	
March 2009	2	3	
April 2009	1	2	
May 2009	0	0	
June 2009	0	3	
Total	33	30	

Complaints Analysis

Twenty four complaints against single veterinary surgeons were analysed and the following information compiled:

Gender of veterinary surgeons

Gender	No of Complaints
Male	18
Female	6

Species of animal involved

Species	No of Complaints
Dog	12
Cat	3
More than one species	3
Horses	3
Rabbit	1
None*	2

*Complaints related to statutory matters other than the treatment of animals.

Complaint originated from

Complainant	No of Complaints
Client	15
Veterinary surgeon	6
Board	3

Years since veterinary surgeon graduated

Years since graduation	No of Complaints
0-5	0
5-10	2
10-15	9
15-20	3
20-25	3
25-35	4
35+	3

Two complaints referred to the SAT

The Board lodged two complaints of unprofessional conduct with the SAT. The complaints were not finalised by the end of the financial year.

A veterinary surgeon lodged an appeal in the previous financial period with the SAT regarding a registration matter. The matter was resolved in this reporting period with the veterinary surgeon withdrawing his application to the SAT. The veterinary surgeon agreed to abide by an undertaking which specified supervisory conditions to apply to his registration for a period of two years.

Complaints not proceeding to the SAT

In 23 complaints against veterinary surgeons, the Board determined that the evidence did not warrant the Board making a complaint of unprofessional conduct to the SAT.

In some instances, the Board suggested that the veterinary surgeons examine their communication or other practice protocols, or drew the veterinary surgeon's attention to Board guidelines and protocols or sections of the Act or Regulations.

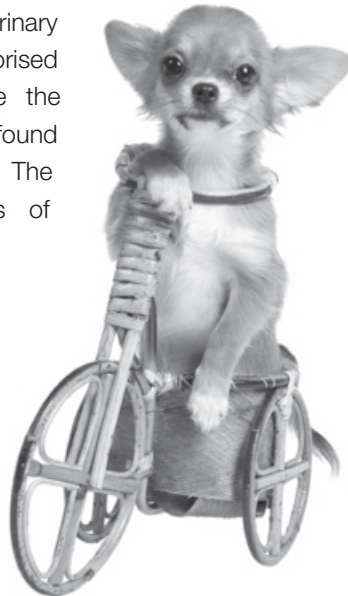


Complaints about unregistered persons

The Board dealt with eleven allegations of unregistered persons performing acts of veterinary surgery.

The Board reminded nine veterinary surgeons of their legal obligation to maintain registration after the Board had received information that the veterinary surgeon had been practising veterinary surgery for a short period after their registration had lapsed.

The Board prosecuted one person in the Magistrates Court for pregnancy testing cattle when they were not a registered veterinary surgeon or a person authorised by the Board to undertake the procedure. That person was found guilty and was fined \$1000. The Board was awarded costs of \$1500.



REFUSING TO PROVIDE A VETERINARY SERVICE

The Board receives a number of enquiries from both veterinary surgeons and the public as to whether a veterinary surgeon is obliged to treat an animal and if they are obliged, under what circumstances.

When dealing with this issue the Board considers that the welfare of the animal is of prime importance. However, veterinary surgeons are not obliged to accept new clients, continue to provide services to existing clients, or provide a requested treatment, providing animal welfare considerations are met.

If any animal is presented in distress, emergency relief must be provided, or the offer of euthanasia made.

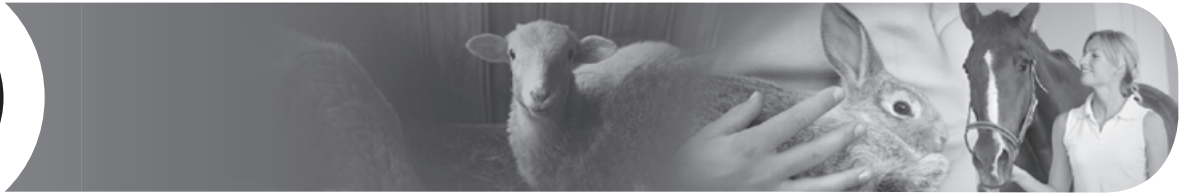
The Board suggests that if a veterinary surgeon does not wish to provide veterinary services to a client, they formally notify the client in writing that they will not be providing them with veterinary services.

NEW AVA POLICY ON VACCINATIONS

The Australian Veterinary Association has released a new policy on the vaccination of cats and dogs.

The new policy, information for veterinary surgeons and resources for pet owners can be found at www.ava.com.au.





WHAT THE BOARD HAS BEEN UP TO

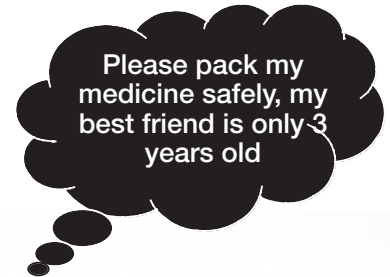
<p>The Registrar and the Chair Dr Peter Punch attended a meeting with representatives from the Pastoralists and Graziers Association to discuss guidelines for the authorisation of persons to perform pregnancy testing in cattle.</p>	<p>In May 2009, the Chair and the Registrar attended the Annual General Meeting (AGM) of the Australasian Veterinary Boards Council (AVBC). Dr Peter Punch was elected Chair of the AVBC at that meeting.</p>	<p>The Registrar met with Dr Jeni Hood of the Animal Welfare Unit, the Chief Inspector of the RSPCA and the President of the Western Australian Division of the AVA to discuss animal welfare issues.</p>
<p>The Registrar participated in a workshop for new veterinary graduates and presented a scenario on how to respond to a complaint.</p>	<p>Dr Tim Mather served as the Board's representative on the RSPCA Board.</p>	<p>The Registrar attended a meeting of veterinary board Registrars held in Darwin immediately prior to the AGM of the AVBC.</p>
<p>Dr Sue Beetson and Dr David Neck served as the Board's representatives on the Poisons Advisory Committee.</p>	<p>The Board regularly sent email updates on relevant matters such as disease outbreaks to all veterinary surgeons on the Register who had provided email addresses. This information was also posted on the Board's website.</p>	<p>The Registrar presented a lecture to final year veterinary students at Murdoch University on the Veterinary Surgeons Act and Regulations.</p>
<p>Representatives of the Australian Veterinary Association (AVA) and members of the VSB met regularly during the year.</p>	<p>The Registrar and the Vice Chair Dr Peter Buckman met with representatives from the RSPCA to discuss issues of mutual interest.</p>	<p>The Board's Chair attended an Accountability, Governance and Ethical Decision Making Forum for Board Chairs run by the Office of Public Sector Standards.</p>





PACKAGING OF POISONS AND POISONS PERMITS

The Board regularly receives enquiries from veterinary surgeons regarding these two issues. The following information is provided for clarification.



Packaging Of Drugs

The Poisons Regulations 1965 specify which containers are permitted as containers for scheduled drugs (see Regulation 19AA below). Veterinary surgeons should also take note of drug manufacturers' recommendations such as the use of opaque containers when dispensing scheduled drugs. In addition, animal owners should be informed of the proper storage of scheduled drugs dispensed to them.

Regulation 19AA. Certain containers prohibited

- (1) An immediate container on which the name of any poison is embossed or otherwise permanently marked shall not be used except to contain that poison.
- (2) A paper or plastic bag or envelope, or a cardboard box shall not be used as a container for a Schedule 2, 3, 4, 8 or 9 poison whether dispensed or not, unless the poison is also presented to the purchaser in foil or in individually sealed, measured amounts, commonly described as strip packaging, or unless the container is approved by the CEO.
- (3) A paper bag shall not be used as the sole container of any poison unless it has been approved by the CEO.



Poisons Permits

Many veterinary surgeons are not aware that if there is more than one veterinary surgeon working in a practice then a Poisons Permit is required.

- If you have another vet or vets in your practice using the practice's drugs, you need a Poisons Permit.
- No drugs can be stored in any facility that is either not registered as a veterinary premise or licensed under the Poisons Act 1964. If drugs are being delivered or stored in any non Board registered facility, you need a Poisons license, otherwise that storage is illegal.

For more information contact the Department of Health on 9222 4222.

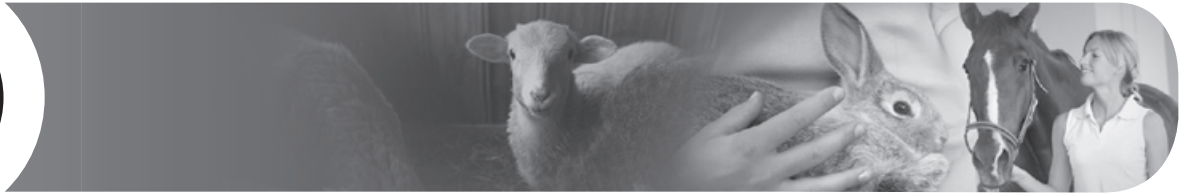


Prohibited Containers



Approved Containers





SELF ASSESSMENT QUESTIONNAIRES AND INSPECTIONS OF VETERINARY CLINICS AND VETERINARY HOSPITALS

Under the Veterinary Surgeons Act 1960 (Act), the Board must not register premises as veterinary clinics or veterinary hospitals unless the Board is satisfied that the premises are suitable for the purpose for which they are registered.

The Board has developed a process of assessment and inspection that includes:

1. a self assessment questionnaire to be completed by the owner or manager of a selection of registered veterinary clinics or veterinary hospitals
2. the inspection of premises when registering premises for the first time as a veterinary clinic or veterinary hospital
3. the inspection of a selection of registered veterinary clinics and veterinary hospitals.

The self assessment questionnaires are designed to assist owners to assess the physical standards of their veterinary clinic or veterinary hospital and assist the Board in its assessment as to whether or not the premise meets the requirements of the Act.

The Board will post self assessment questionnaires to approximately fifty veterinary practice managers each year. It is planned that all practices will receive a questionnaire within the next five years.

The questionnaires are designed to inform practice owners of the requirements for veterinary clinics and veterinary hospitals and assist them in upgrading their premises where required. They will provide a more cost effective means for the self audit and Board audit of a larger number of premises than is achievable solely by inspection.

The Registrar and the Board's Inspector will be available to assist with queries about the questionnaires or what is required for a veterinary clinic or veterinary hospital to comply with the Act.

In the event that the questionnaire returned to the Board identifies deficiencies in the veterinary clinic or hospital, the Board's office will contact the practice owner or manager to rectify any problem areas.

Inspection of newly registered veterinary clinics and veterinary hospitals

The owner or manager of new veterinary clinics and veterinary hospitals must provide sufficient information to the Registrar to qualify their premises for registration prior to the practice commencing business.

Within six months, the Registrar or the Board's inspector will visit and inspect the premises.

In the event that a veterinary clinic or veterinary hospital premise and/or facilities are assessed to be unsatisfactory, the Board may:

1. counsel the owner or manager in regard to their obligations under the Act, and the upgrade to their veterinary clinic or hospital that the Board considers to be necessary. The premise will be reinspected within three to six months
2. cancel the registration of the veterinary clinic or hospital, noting that it is an offence to conduct veterinary practice from unregistered premises
3. charge the owner or veterinary manager of the veterinary clinic or hospital with unprofessional conduct for failing to maintain their premise at a satisfactory standard.

At all times, the Board would prefer a conciliatory rather than punitive approach to the maintenance of premise standards.

Inspection of established veterinary clinics and veterinary hospitals

The Board has planned for a minimum of twenty veterinary clinics and veterinary hospitals to be inspected in each calendar year.

The clinics and hospitals will be selected for inspection on the basis that they:

- are in close proximity to a new premise being inspected





- are the subject of a query or complaint regarding the standard of the premise
- have failed to complete a self assessment form when requested
- are chosen at random
- have requested an inspection
- any further reason determined by the Registrar or the Board.

The Act requires the owner of a veterinary clinic or veterinary hospital to make the premise available for inspection by a person appointed by the Board.

In most cases, the veterinary clinics and veterinary hospitals inspected have been of a high standard.

The Board has received feedback that practice owners or managers have found the information provided by the Registrar or the Board's Inspector to be helpful and productive.

If you require further information on the self assessment questionnaires or the inspection of veterinary clinics and veterinary hospitals please contact the Registrar on 9367-4674 or email: admin@vsbwa.org.au

COOK OFF

US politician Nancy Pelosi was reported as meeting a famed psychiatrist at an academic function and in the course of the usual pleasantries asked the good doctor if there was a way to detect a mental deficiency in someone who appeared normal.

"Nothing is easier," he replied. "You ask a simple question which anyone should answer with no trouble and see if the person hesitates."

"What sort of question?" Ms Pelosi asked.

"Well, you might ask, 'Captain Cook made three trips around the world and died during one of them. Which one?'"

Ms Pelosi is said to have thought for a moment then replied with a shy laugh, "You wouldn't have another example would you? I don't know much about history."

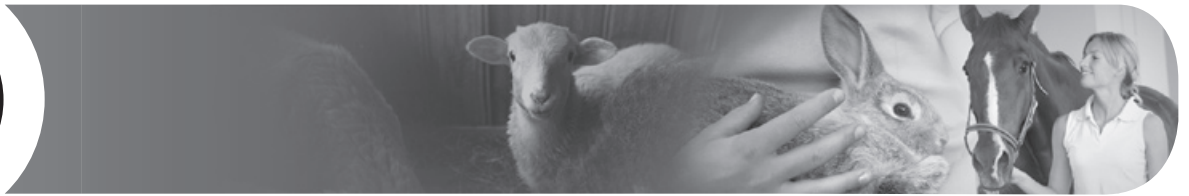


UNAUTHORISED PREGNANCY TESTER PROSECUTED BY THE BOARD

The Board has recently prosecuted a person in the Magistrates Court for pregnancy testing cattle when they were not a registered veterinary surgeon or a person authorised by the Board to undertake the procedure. That person was found guilty and was fined \$1000. The Board was awarded costs of \$1500.

Under the Act and Regulations, pregnancy testing in cattle is an act of veterinary surgery. Only registered veterinary surgeons or persons authorised by the Board under Regulation 47 may perform pregnancy testing in cattle.





VETERINARY CHEMICAL CONTROL OF USE LEGISLATION

The Board has received a number of queries from veterinary surgeons regarding their obligations under the Veterinary Chemical Control and Animal Feeding Stuffs Act and Regulations. Dr Kirsty Moynihan of the Department of Agriculture and Food WA has provided the following information to assist veterinary surgeons in understanding their obligations.

Essential controls on veterinary chemical use in animals other than companion animals are legally underpinned in the Veterinary Chemical Control and Animal Feeding Stuffs Act 1976 and the Veterinary Chemical Control and Animal Feeding Stuffs Regulations 2006.

This legislation provides for the safe use of veterinary chemicals so they do not contribute to the development of antibiotic resistance, residues, and are not prejudicial to trade.

Controls under this legislation apply to veterinary surgeons, animal owners, managers and carers. Companion animal treatments are exempt from this legislation.

The registration of veterinary chemicals for sale and supply in Australia is a national responsibility managed by the Australian Pesticides and Veterinary Medicine Authority (APVMA – www.apvma.gov.au). As part of the national registration process, veterinary chemicals are assessed for safety in relation to consumers, users, animals, environment and trade. Evaluations for registration are based on the products being used in accordance with the label directions.

State and Territory Governments have responsibility for controls over the manner in which those chemicals are used, for enforcing label directions, and for establishing the limits within which registered products can be used “off-label”. All States and Territories have agreed to use the nationally consistent controls, summarised below:

Controls on veterinary chemical use by veterinary surgeons

1. Veterinary surgeons can treat, or recommend that animal carers treat, any animal, or animal group, with a registered product “off-label” (change of species, dose rates etc, including higher doses), with the following restrictions:

- Off label treatment of a “trade species” is only permitted if the product is already registered for a “major trade species” or the medication is a defined low risk chemical. Cattle, sheep, pigs, chickens and bees are the only animals defined as major trade species.
- Off label treatment using other registered products, unregistered products, human pharmaceuticals or products in contravention of a “restraints” heading will only be permitted in single animals.

Veterinary surgeons may use, or recommend the use of, unregistered low risk chemicals, in emergency situations, where a registered equivalent is not immediately available. Low risk chemicals are currently defined in the legislation as bicarbonate soda or common salt.

In the case of treatment of major trade species, animals being treated must be fully identified.

Veterinary surgeons may supply and/or prescribe products to effect these off label treatments.

2. Veterinary surgeons must supply written instructions regarding directions for use and withholding periods (WHP) for all treatments or proposed treatments other than treatment with a registered veterinary chemical product used in accordance with the label directions. A copy must also be provided to the person responsible for the animals. Both the veterinary surgeon and the person responsible for the care of the animal must keep their copy for 3 years. The information to be provided in this written statement must include:

- (a) the name of the person to whom the veterinary chemical product is prescribed, supplied or recommended, and
- (b) the name and address of the owner of the animals (if different from above); and
- (c) the identity of the animals to be treated (including the species, the location and sufficient identifiers); and
- (d) the amount of the product supplied; and
- (e) the dosage; and





- (f) the frequency of the dosage; and
 - (g) the treatment period; and
 - (h) the manner of administration; and
 - (i) whether or not there is a withholding period applicable to the administration of the product and, if there is, the length of that period.
3. Veterinary surgeons are liable for any violative residues that occur if the information they provide is incorrect.

4. Veterinary surgeons cannot treat animals parenterally (by injection) with products labelled only for oral or topical use, or use any agricultural chemical product for animal treatment.

For further information, contact Dr Kirsty Moynihan on **9368 3349** or by Email on Kirsty.Moynihan@agric.wa.gov.au

HORSE CASTRATION - CASE STUDY

A 2 year old thoroughbred colt was presented to a veterinary surgeon for castration. The surgery, which was performed under a general anaesthetic, was uneventful. However the colt developed swelling around the surgical site and the veterinary surgeon recommended to the owners that the horse should stay at the veterinary hospital overnight.

The following morning the testicular artery bled profusely when the veterinary surgeon attempted to remove a blood clot from the scrotum. Attempts to ligate the artery in the conscious horse were not successful due to the horse becoming agitated and uncooperative.

The veterinary surgeon anaesthetised the horse to ligate the testicular artery and prevent further haemorrhage. While this procedure was being performed the owners arrived to visit the horse and were informed of what had occurred.

The owners complained to the Board that the veterinary surgeon had not sought their permission prior to anaesthetising the horse to ligate the testicular artery, and that they had not been fully informed of the colt's status and problems while he was under the veterinary surgeon's care.

Discussion

Having considered the evidence from the complainant and the veterinary surgeon, the Board formed the view that:

- there was no prior indication that there would be life threatening haemorrhage
- the veterinary surgeon considered the haemorrhage to be a life threatening emergency and that the action he took was necessary to to save the animal's life
- in the emergency, there was not time to locate and contact the owners before treating the colt and to delay treatment would have endangered the animal's life
- there is implied consent when a client leaves an animal with a veterinary surgeon, that if a life threatening situation develops, the veterinary surgeon is entitled to take immediate action to save the animal's life
- the evidence did not sustain a complaint of unprofessional conduct and that the Board would not refer the matter to the SAT.

The Board was of the view that while there is implied consent in such a situation, it may be prudent for veterinary surgeons to include in their standard consent forms consent to take emergency response action if a life threatening emergency occurs and there is insufficient time to seek the consent of the owner prior to implementing an emergency response.



RADIATION PROTECTION IN VETERINARY MEDICINE

The Australian Radiation Protection and Nuclear Safety Agency (ARPANSA) recently released its new Code of Practice for Radiation Protection in Veterinary Medicine 2009 and associated Safety Guide.

The Code establishes requirements for adoption by Commonwealth, State and Territory jurisdictions.

Copies of the guide may be obtained at

<http://www.arpansa.gov.au/publications/codes/rps17.cfm>

VETERINARY NURSES AND MICROCHIPPING

The Board has released a new policy for veterinary nurses undertaking microchipping procedures in animals.

Under the policy registered veterinary nurses can undertake microchipping procedures on animals under the personal supervision of a registered veterinary surgeon.

The veterinary surgeon providing personal supervision of the veterinary nurse must certify the number on the microchip and sign the microchipping verification certificate and supporting documentation.

The full policy is on the Board's website or is available from the Board office on request.

THE VETERINARY SURGEONS' BOARD OF WA

MEMBERS OF THE BOARD

Dr P Punch Chairman & Appointed Member

Dr P Buckman CVO, Animal Health, Dept of Agriculture and Food

Dr D Neck AVA nominee **Dr S Beetson** Elected Member

Ms Sarah Harrison Ministerial Appointment

HOW TO CONTACT US

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Telephone: (08) 9367 4674 **Facsimile:** (08) 9367 1295

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Contributions submitted to WA Veterinary Surgeons' Board which have been included in this Newsletter represent independent viewpoints and do not necessarily reflect the opinion of the Board.

