

- CVBC Position Statement – Telemedicine in the Face of COVID-19

As of March 24, 2020

The College recently advised its registrants that it recognizes the challenges that veterinarians (= CVBC-registered veterinarians) are and will be facing for the foreseeable future during this public health crisis. There has been a response from BC veterinarians looking for a clearer explanation of what actions would be acceptable in a **telemedicine** context.

As social isolation and social distancing requirements are implemented and have an increasing impact on the ability of veterinarians to continue to provide care to patients and services to clients, telemedicine will become an important tool to enable continuity of care during the COVID-10 pandemic.

The following statements regarding telemedicine are intended to apply to the practice of veterinary medicine in British Columbia only until the government announces the end of the COVID-19 pandemic.

- Veterinary services should preferably be provided where a valid Veterinarian-Client-Patient Relationship (VCPR) is already in place with the veterinarian's accredited practice facility (through previous physical examinations and/or premise visits, as with herd/flock practice).
- But as the pandemic progresses, further strains will be placed on existing practice resources and even more accommodations will need to be made to adapt to increasing restrictions on human movement and contact in the interest of social distancing and self-isolation. This will require even further flexibility by veterinarians and by the CVBC, as veterinarians may find themselves in situations where it is not possible nor in the best interest of the animal or the public to strictly abide by the CVBC's standards.
- Veterinarians may be faced with animals in need of care with whom there is no pre-existing VCPR.
- In all interactions, a veterinarian should use his/her professional judgement:
 - To determine whether he/she has an appropriate amount of knowledge of the patient in order to make a presumptive or tentative diagnosis and to direct treatment (including prescribing)
 - Knowledge of the patient could be the product of:
 - information already known from previous examinations and/or via medical records from (and/or direct communications with) a previous/regular veterinarian, and
 - new information gathered through careful inquiry and history of the owner about the current status of the patient, and possibly supported by the use of technology (photos, recorded video, live-stream video-conferencing, etc)
 - To issue a short-term prescription for cases in which a chronic condition has been previously diagnosed and the animal is stable. This includes situations in which an examination and/or diagnostic testing may normally be required (under ordinary circumstances)

- The CVBC expects and trusts its veterinarians to use their professional discretion to always make choices that are in the best interests of:
 - the health and welfare of their patients,
 - o public health, and
 - \circ safety of the food supply.

It is expected that <u>all reasonable steps</u> will be taken to prevent harm to patients, and to the public in general, when:

- o deciding whether to provide services, and
- reaching conclusions about the patient's condition, providing advice and prescribing treatment.
 - In all cases where veterinarians are prescribing treatment, the veterinarian must critically assess the information available to determine the <u>medical need</u> for the drug and to assess the relative risks to the patient
- The CVBC will always consider the individual circumstances and situational context if a complaint is received against a registrant related to events during this COVID-19 pandemic. In the current emergent situation, failure to meet the expected professional standards may not give rise to a finding of unprofessional conduct if a registrant demonstrates that he/she took all reasonable actions in the circumstances in service to patients and clients.

Basic principles of veterinary practice should not be abandoned during these times, including:

- o Only CVBC registrants may practice veterinary medicine in British Columbia
- Veterinary services need to be provided in affiliation with an accredited practice facility (a client/patient record needs to ultimately be associated with an established facility, even if the veterinarian is providing telemedicine services away from the facility)
- Maintenance of medical records to document findings and presumptive assessments, communications, treatment prescribed, and advice given
- Informed consent which should include disclosure of limitations of telemedicine and possible risks that arise when assessments and treatment decisions are made with insufficient information
- Recognizing the limits of what can safely be accomplished via telemedicine and identifying when to advise a client to seek direct care at a facility that is continuing to provide emergency services