



THE COLLEGE OF
VETERINARIANS
OF ONTARIO

UPDATE

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March 2012

COMING EVENTS

Medical Records Webinars

March 15 & April 24

Medical Records Workshops

Workshops are being held this spring in Lindsay, New Liskeard and Stratford.

details found on page 6

INSIDE:

Request for Comments on Proposed By-Law changes

Members are invited to comment on proposed amendments to the CVO by-laws. Proposed changes deal with establishment of an Internal Audit Committee and a Strategic Planning Committee and also remuneration for travel for councillors and committee members.

read more on page 10

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CVO hosts "Meet and Greet" at OVC

Graduating Silver Foxes get acquainted with College

Council members and staff from the College of Veterinarians of Ontario visited the Ontario Veterinary College in February to share an evening with members of the graduating class of 2012.

Approximately 60 students took the opportunity to get acquainted with the CVO and learn about licensing requirements and various programs provided to CVO members.

Students were provided with an information package detailing their roles and responsibilities as members of the self-regulated veterinary profession in Ontario.

The evening included welcoming remarks from CVO President Dr. Ken Bridge and Registrar Ms. Jan Robinson.

Students mingled with councillors and staff to complete their "passport" questionnaires based on the clues provided.

The College of Veterinarians of Ontario looks forward to welcoming the Silver Foxes as members upon graduation.



CVO President Dr. Ken Bridge presented gift cards to draw winners. (l-r) Kurtis Tubby, Jaclyn Ocopnick, Robyn Thompson, Jennifer Effendi and Terra Wakeford.



CVO Registrar Jan Robinson talks to OVC's Dr. Olenka Batruch.



CVO Council members Dr. Nina Szpakowski, Dr. Bridge and Dr. Kennedy chat with OVC's Dr. Kerry Lissemore.



CVO Vice-President Dr. Szpakowski helps students complete their questionnaires.

Continuing work on Quality Assurance

*It's always better to arrive together,
than to be driven anywhere"*

Honourable Ted McMeekin
Minister of Agriculture, Food and Rural Affairs
November 18, 2011



Dr. Ken Bridge
CVO President

Every once and in a while someone makes such an obvious but inherently wise statement that it makes you stop and think. At a recent "Meet and Greet" reception sponsored by the Ontario Ministry of Agriculture, Food and Rural Affairs (OMAFRA), our provincial Minister of Agriculture made the above statement.

The timing could not have been more appropriate, coming just a day after the CVO's Annual General Meeting and Members' Forum, which featured the topic, "The Future of Quality Assurance" for our profession.

Although the Forum speakers were from three different human health fields and approached Quality Assurance from slightly different perspectives, the overall message was clear.

Quality Assurance programs assist in convincing the public of practitioners' competence but -- just as importantly -- they raise standards for practitioners and the profession as a whole, and may lead to a reduced need for the complaints and discipline processes.

Those of us practicing veterinary medicine in the livestock sector have become acquainted with the Quality Assurance programs initiated a few years ago (ie. Canadian Quality Assurance in Swine, Quality Starts

Here in Beef) and more recently the CQM (Canadian Quality Milk) program on dairy farms. In the non-veterinary public sector, most recognize the concepts of the ISO 9000, and similar programs.

We have become comfortable with reporting our CE hours on our registration forms, and this has been achieved over the last five years.

More recently, the Continuing Professional Development (CPD) project has come on stream, and those members that have taken the workshops have voiced overall approval.

Similarly the livestock commodity groups have built their QA programs so that producers indicate what they will do; do what they say they will do; and then document what was done "for proof".

Since the agri-food industry recently surpassed the auto industry as Ontario's top GDP income generator, no one can argue that QA is not necessary to maintain and grow agricultural markets, both domestic and abroad.

Keeping in mind that all veterinary stakeholder partners agree that a QA program is in everyone's best interest-- and remembering our agriculture minister's sage advice -- the task before us now becomes building a "top drawer" QA program

that is understood, accepted and adopted by CVO's membership.

The QA committee has built a framework for the program based on information garnered from other health professions and in consultation with hundreds of our members over the past four years. The College realizes that further dialogue with our veterinary stakeholder partners is essential for the future success of the endeavour.

To this end, CVO is committed to providing step-by- step communication to members and stakeholders through travelling workshops, webinars, *Update*, etc. with the ultimate goal of proving to members and the public that the program that will be is better than the program that was.

This will not happen overnight, but it will happen. "Remember, we're all in this together" -- Red Green

Hiring New Staff?

If you are planning to hire a new Ontario Veterinary College graduate this year, please remember all veterinarians must be licensed with the CVO. The earliest date a new graduate can be licensed to practice in Ontario is early in May 2012.

To ensure the veterinarian you plan to hire is licensed with the CVO, please check with the CVO office. If you have any questions, please contact Ms. Pree Tyagi, Administrator - Registration, at the CVO office.

ptyagi@cvo.org
1-800-424-2856 ext. 2228

Frequently Asked Questions

For answers to questions concerning regulations or other topics relevant to the practice of veterinary medicine, you are encouraged to visit the Frequently Asked Questions (FAQs) section of the College's website at www.cvo.org.

Some of the posted FAQs include questions on advertising, continuing professional development, dispensing, licensing, medical records, practice advice, professional corporation and many other topics of interest. The FAQ section can be found under the Practice Guidance tab.

There is a form on the FAQ page to request a response or information on an issue that is not listed.

<http://www.cvo.org/faq.cfm>

EHV-1 confirmed in southern Ontario

The Ontario Ministry of Agriculture, Food and Rural Affairs (OMAFRA) has been notified of a confirmed case of Equine Herpes Myeloencephalopathy (EHM), caused by equine herpes virus 1 (EHV-1), in southern Ontario. A blood sample from a horse with severe neurological signs tested positive for EHV-1 in January. The horse was euthanized. On a second farm in the same area, a horse with similar signs was euthanized in December 2011. Samples were not collected from that horse.

Current EHV vaccines may reduce viral shedding but are not protective against the neurological form of the disease. Implementing routine biosecurity practices is the best way to minimize the spread of this disease.

Providing Veterinary Services to Employer's Animals

At its November meeting, Council discussed a Policy Issue Review Form, "Veterinarians Working on Animals Owned by their Employers". Council decided all veterinary facilities where veterinarians are employed to practice veterinary medicine in Ontario must be accredited. Members with questions about the status of their workplaces are encouraged to contact the CVO's Policy Manager Karen Smythe at ksmythe@cvo.org.

Update is the official publication of the College of Veterinarians of Ontario, informing members on regulatory issues, with the expectation that members will govern themselves accordingly. *Update* is charged with the responsibility of providing comprehensive, accurate and defensible information.

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CVO News ~ Council Highlights

Council Meeting: February 1, 2012

Policy

After-Hours Care and Access to Emergency Services www.cvo.org/uploadattachments/Afterhourscare.pdf

Council reviewed and accepted the revised Position Statement, "After Hours Care and Access to Emergency Services." Through the Position Statement, members are encouraged to cooperate with colleagues by establishing an agreement in advance, such that a reasonable level of service will be made available to each other's clients when their animal(s) are in need of veterinary medical attention at times when their own veterinarian is not available. The Position Statement will be reviewed in five years.

Scope of Practice in Equine Medicine

Council considered the Policy Issue Review Form examining concerns that individuals are practicing veterinary medicine without a licence on racehorses at racetracks in Ontario. Council decided to create a Position Statement on the issue to interpret Section 11(2)(b) of the *Veterinarians Act*, which provides exemptions from the requirement to hold a licence to practice for individuals who fit into specific categories, including some employees and animal owners.

Medically Unnecessary Veterinary Surgery (Cosmetic Surgery)

Council considered and accepted, in principle, the draft Guidelines. Staff was directed to make changes to one of the Appendices which will be reviewed at a future Council meeting.

Advertising

Council reviewed the draft Advisory Statement, "Advertising" and directed staff to amend the document and return it to Council.

Quality Assurance: Members' Forum Report

Council considered a report summarizing the results of "The Future of CVO's Quality Assurance Program," which was the basis for the 2011 Members' Forum event. Council directed staff to work on a communication strategy, for the Quality Assurance Program, which would include a member survey as one component.

Ontario Regulation 1093 amendments

Council reviewed and accepted proposed amendments to Ontario Regulation 1093. Staff was directed to submit the proposed amendments to the Ontario Ministry of Agriculture, Food and Rural Affairs.

Stipend for preparation time

Council reviewed information from other regulatory bodies regarding their approach to compensating Councillors for Committee preparation time. Council directed staff to provide further information and return the matter to a future Council meeting.

Council ratified the Executive Committee motion to change the Council Manual Policy in order that Complaints Committee members may claim an additional half-day per diem for reasons writing.

Appointments

Council ratified the Executive Committee motions:

- Dr. Michele Dutnall and Dr. James Walker were removed from the Discipline Committee, effective immediately
- Dr. Bryan Kennedy was appointed to the Quality Assurance Committee
- Ms. Denise Dietrich was appointed to the Executive Committee

Dr. Liz Saul was appointed to the Complaints Committee to replace Dr. Michael Mogavero who is no longer on the Committee.

Budget - Council reviewed and accepted the first-quarter budget variance report.

2012 Meetings - Council directed staff to explore options for holding the Members' Forum and Annual General Meeting in January 2013, instead of November 2012.

**Upcoming Council Meetings
Spring 2012**

March 21 June 6

Council meetings are open to the public and are held at the CVO office at 2106 Gordon Street, Guelph.

CVO News ~ Current Regulatory Consultations

Consultations with the profession, the public, and other stakeholders are an important part of the CVO's policy development and review process. Your input is important and every comment submitted during policy consultations is considered by Council. The "policies" published by the CVO comprise Guidelines and Position Statements, as well as advisories, information sheets, and articles appearing in Update.

For complete information, see "Regulatory Consultations" at www.cvo.org.

Medical Records for Companion Animals Guideline

Deadline for Submissions: May 11, 2012.

Background: The guideline was developed in 2007 to detail the College's expectations for medical records retained for companion animals. The document is intended to reflect generally accepted professional expectations for preparation of companion animal medical records. The document aims to promote record-keeping that is organized, logical, and self-explanatory.

The document is structured on the section in Reg. 1093 that specifies what is legally required in a medical record. It then explains in further detail how the College interprets each point, and thereby what the profession as a whole expects will be included in a medical record. Since its publication, there may be additional items that veterinarians think should be included in the document. Suggestions on improving and enhancing it are welcome.

Deficiencies Noted During the Inspection of New Facilities

Position Statement

Deadline for Submissions: May 11, 2012.

Background: This document helps members who wish to open a new facility to understand the requirements in the Minimum Standards for Veterinary Facilities in Ontario (MSVFO) and relevant legislation before they undergo an inspection as part of the Accreditation process.

The Position Statement sets out the process that the College follows for advising the member about any deficiencies (required items that are not present on site) found by the CVO Inspector, as well as the member's options either to correct the deficiency or submit a request for an exemption to the requirement. The College is interested in knowing whether the explanation of the process in this document is helpful to members applying for an accreditation inspection.

YOUR FEEDBACK IS IMPORTANT!

The following questions may be used as a guide for making your submission:

- Does the policy provide useful guidance, and clearly establish the relevant expectation or requirement that Ontario veterinarians should or must meet, to protect the public interest?
- Is the policy document consistent with the CVO's mandate as a veterinary medical regulatory body?
- Do you have any specific comments to make about the content of the document?
- Are there any issues not included in the current publication that should be addressed?
- Do you have any specific suggestions for making edits or amendments to improve the clarity of the document? (please provide rationale for any suggestions).

Please forward your comments to: consultations@cvo.org.

If you have any questions, please contact:

Ms. Karen Smythe
Policy and Quality Assurance Manager
519-824-5600 or 1-800-424-2856

If you prefer, forward your comments by mail or fax to the College.

UPCOMING WORKSHOPS

MEDICAL RECORDS WORKSHOPS

Date	Location
March 28, 2012	Lindsay
April 12, 2012	New Liskeard
April 18, 2012	Stratford

COMMUNICATIONS WORKSHOPS

March 29, 2012	Niagara Falls
April 19, 2012	Ottawa
April 26, 2012	Windsor

UPCOMING WEBINARS

The Medical Records workshop is available through a webinar format in an interactive, on-line training session.

Upcoming Medical Records Webinars are:

March 15, 2012

April 24, 2012

Workshop/Webinar Registration

To participate in a webinar or attend a free workshop, please register with:

Ashley Coles

acoles@cvo.org or 1-800-424-2856 ext. 2234

Register early to ensure a space will be available for you!

Becoming accessible

Accessibility Standard for Customer Service in effect now

As of January 1, 2012, all organizations in Ontario with one or more employees providing goods or services to the public must comply with the Accessible Customer Service standard.

Accessible customer service means more than installing ramps or automatic door openers. It's about understanding that people with disabilities may have different needs.

Ask yourself "How can I best help my clients?" and implement the changes to how you serve customers with disabilities.

FOR FURTHER INFORMATION, VISIT:
www.ontario.ca/AccessON to learn about changes that apply to business and access tools and guides
 Ministry of Community and Social Services
www.ontario.ca/community

To provide accessible customer service, organizations with **less than 20 employees** need to:

STEP 1:

Create and put a plan in place that:

- ✓ considers a person's disability when communicating with them
- ✓ allows assistive devices in your workplace, such as wheelchairs, walkers and oxygen tanks
- ✓ allows service animals
- ✓ welcomes support persons
- ✓ lets customers know when accessible services aren't available
- ✓ invites customers to provide feedback

STEP 2:

Train staff on accessible customer service.

Organizations with **more than 20 employees** are required to create and put a plan in place, train staff and also to:

- Put the plan in writing.
- Report progress online.

DISCOUNTED FEES QUESTION:

A local animal shelter has asked me to provide discounted spay/neuter services for animals they want to adopt out. They have a Registered Veterinary Technician on staff and have asked that I not conduct physical examinations of animals prior to surgery, in order to reduce my costs and pass the savings on to them. Can I do this?

ANSWER:

Your willingness to assist the local shelter is admirable. However, your first responsibility is to the animal, not to the shelter. Failure to conduct an appropriate assessment is unprofessional. You should provide the same level of service for a shelter animal as you would for a regular client's animal.

With informed consent, clients (including shelters) may choose to forego pre-anesthetic blood workups, but at a minimum you should be conducting the same pre-surgical examination that you would for any other animal.

OXYGEN MASKS FOR ANIMALS:

Our local fire department has asked us to donate an oxygen mask for use on animals. Are they allowed to do this?

ANSWER:

Stories regularly appear in the media where emergency personnel respond to a fire or accident and find that the people involved are not personally injured, but their pets may require attention.

In those cases, emergency personnel can and have undertaken to provide first aid to the animal, which could include treatment for smoke inhalation, immobilization of injuries, or treatment for shock.

As in the case of an injury to a person, the intent is to stabilize the patient until it can be safely transported to the hospital for treatment.

Any individual can assist an animal in an emergency, and if that individual has skills or training beyond that which an ordinary person may have, then there should be no barrier to that individual using such expertise.

The *Veterinarians Act* contains a specific exemption with respect to a non-veterinarian "rendering first aid or temporary assistance in an emergency without fee". Things like pet oxygen masks can help facilitate

emergency treatment. Some emergency personnel have even approached veterinarians for additional training to help them assist animals, when necessary.

As stated in the legislation, this is done without a fee and of their own volition, when their skills in treating people are not in immediate need. Operation of a business offering such a service, however, would be contrary to the law.

The Ontario Veterinary Medical Association (OVMA) coordinates the sale and distribution of pet oxygen masks, as part of the Farley Foundation. OVMA's Pet Oxygen Mask program has been running since 2007. In exchange for the veterinary clinic making a donation to the Farley Foundation, Invisible Fence Brand donates a pet oxygen mask to their local fire department.

Veterinary clinics interested in participating in the program may contact Julia Hayes at 1.800.670.1702, ext. 25 or jhayes@ovma.org.

CPD Cycle Program Report

Members report CPD hours for 2011



Karen Smythe
QA Program Manager

The 2011 CPD Cycle ended on October 31, 2011, and members submitted their CPD Summary Sheets—which is Step 3 of the Cycle—with their annual licence renewal forms.

In 2011, veterinarians in Ontario continued to engage in activities that support their continuing professional development or CPD and lifelong learning.

All 2011 submissions have now been tabulated. Ontario’s veterinarians are completing much more than the recommended 50 hours of CPD each year. The average hours reported for the past four Cycles is included below:

	2008	2009	2010	2011
All licensed members	143 hrs	155 hrs	166 hrs	164 hrs
Graduated in last five years	192	223	223	208
In clinical practice	131	134	148	145
In non-clinical practice	219	235	245	251
Licensed but inactive	40	66	66	108

CPD is defined as

The process through which licensed veterinarians maintain and enhance their postgraduate level of knowledge, skills, and judgment, and thereby maintain professional standards of practice and individual competence. CPD includes both organized, structured learning events and self-directed, unstructured learning activities that directly impact the practice of veterinary medicine.

See Position Statement - “Quality Assurance for Members”

The CVO’s CPD Cycle program is flexible and veterinarian-centred. Unlike some regulatory jurisdictions that set limits on types of learning that “count” towards veterinarians’ CE requirements, the CVO has taken a progressive approach that gives members the ability to choose activities appropriate to their unique scope of practice and individual circumstances.

The CVO’s CPD Cycle was designed to be self-directed, and any activity undertaken to further one’s knowledge and/or skills to maintain and enhance professional competency “counts” as CPD.

CPD Cycle Portal

Most 2011 Summary Sheets were submitted to the CVO using the paper CPD Summary Sheet, though close to 100 veterinarians chose to submit their data via the CPD Portal even before it had been officially launched to the full membership!

A webinar on February 8, 2012, provided a demonstration to 30 members interested in learning how to use the Portal tool.

The Portal guides members through each step of the CPD Cycle, and it calculates your Summary Sheet totals automatically.

Look for the Portal icon on the QA tab and also on the CVO’s homepage. There is an instruction guide posted under the icon, as well.

Questions should be directed to:

Karen Smythe
ksmythe@cvo.org 519-824-5600 ext 2237



Online Learning Module supports CPD

For those who prefer using either Word or Excel to track their CPD Activities, there are other options. The Excel version of the CPD Activity Log, for instance, is also available on the QA tab of CVO’s website, if that is your preference.



The CPD Cycle works for you by supporting your efforts to:

1. assess your learning needs;
2. track your activities;
3. reflect on their impact on your practice; and
4. retain relevant information for your future reference.

For more information—just click on the link to “CPD Online Learning Module” on the QA page of the website, and follow the instructions.



Here is what 96 percent of veterinarians who most recently completed the Online Learning Module said:

- *It reinforced my understanding of the importance of demonstrating professional reflection during the CPD Cycle*
- *It explained the need for CPD documentation to be retained in such a way as to be peer reviewable*
- *It helped me see how I can identify CPD opportunities that are relevant to my practice needs*
- *It reminded me that setting specific objectives helps to focus what I choose to learn in an environment where resources and time are limited*

“This module helped me immensely to understand how to fill out the CPD forms.”

“The module is very thorough, and gives the practitioner all the support necessary to maximize our CPD.”

**TIME SENSITIVE
Invitation to Comment
on changes by May 11, 2012**

Re: Part 5. COMMITTEES

(underlined words are additions and strike-throughs are deletions)

Purpose

As per the CVO's by-laws, the definition of "committee" means a committee established by the Act or section 23 of the by-laws. It is Council's decision to activate any committees which would be of assistance for each upcoming year, in addition to those established by the Act. Two committees are currently active, Internal Audit and Strategic Planning, but are not currently included in the By-Laws. For this reason, Council proposes the following additions in Part 5. of the By-Laws.

Internal Audit Committee

- 28.2.-(1) The internal audit committee shall be composed of the second vice president, an elected member of council and one member of council appointed by the Lieutenant Governor in Council.
- (2) The internal audit committee shall:
 - (a) conduct a direct inspection of the college's operations by requesting relevant documentation and information from the staff; and
 - (b) report the results of the inspection to council in the first quarter of each business year.
- (3) The internal audit committee shall:
 - (a) maintain and update a list of documents and other information that it will review every 4 years;
 - (b) review approximately 25 percent of the documents and other information on the list every year;
 - (c) not remove any documents or other information from the college's building; and
 - (d) give staff adequate time to collect and present the documents and other information.

Strategic Planning Committee

- 28.3.-(1) The strategic planning committee shall be composed of the president, the vice president and one member of council appointed by the Lieutenant Governor in Council.
- (2) The strategic planning committee shall:
 - (a) review the college's Strategic Plan;
 - (b) formulate any suggestions for changes to the Strategic Plan, and be responsible for the execution of the planning exercise; and
 - (c) report to council any suggestions for changes to the Strategic Plan.

Part 6. FINANCE - Remuneration

Purpose

CVO by-law 33.-(4) (b) specifies the amount paid per kilometre for travel by automobile for Councillors and members of committees. In light of rising transportation costs, the Council proposes that the amount paid per kilometre for travel by automobile be increased as follows:

- (4) The amount payable for expenses incurred by councillors and members of committees in the conduct of the council's or committee's business is,
 - (b) for travel by automobile, ~~40~~ 45 cents per kilometre actually travelled, but payment may be made only once for each trip regardless of the number of passengers and the payment may not exceed the amount which would have been payable if the driver had reasonably been able to travel by common air carrier and had done so, and

PROCESS: Members have 60 days to comment on the proposed amendments. Please forward comments to Beth Ready (bready@cvo.org) by **May 11, 2012**. Comments will be reported to Council at its June meeting and decisions will be made on the proposed by-law change.

OVC hosts events for students, community

Happy New Year!

The New Year has arrived fast here at the Ontario Veterinary College (OVC)! There are lots of exciting things planned at OVC for 2012.

The new OVC Challenge Cup trophy created by Dr. Brad Hanna was unveiled at the Frosty Mug hockey game on January 20, 2012 at the Sleeman Centre in recognition of OVC's 150th Anniversary. The 82nd OVC Challenge Cup runs in March 2012, with the finals on March 30, 2012.

Dr. Cate Dewey and Dean Elizabeth Stone are pleased to host the Global Development Symposium which will be held from May 6 to 9, 2012. The symposium focuses on the critical link between human and animal health.

The CVO hosted a "Meet and Greet" with the Silver Foxes, this year's graduating class, on February 1, 2012. The CVO will also be present at OVC's Annual Industry Day; this event is a great opportunity for student veterinarians to become acquainted with business and industry representatives as well to familiarize themselves with the products and services available to them upon graduation.

OVC was proud to host the 25th annual Students of the Canadian



**Melissa Marshman
CVO Student
Representative**

Veterinary Medical Association (SCVMA) Symposium from January 11-15, 2012. OVC welcomed student veterinarians from all five Canadian veterinary schools. The days were filled with lectures, wet labs, clinical presentations and social events, including a wrap-up banquet at Guelph Lake. OVC last hosted the Symposium in 2008. The Symposium marked the first major event on the calendar for the OVC's 150th anniversary celebrations in 2012.

Global Vets 2012 is pleased to announce that the registration for the OVC's 3rd Annual Mini Vet school

is now open! This four-week lecture series runs on Thursday evenings in March beginning March 1, 2012.

This event features different aspects of veterinary medicine and animal science. Topics will touch on small and large animals, as well as specialties such as neurology, cardiology, wildlife rehabilitation and zoo animal medicine.

The Mini Vet school is open to the public and is suitable for all ages. All funds raised will help OVC Phase Two student veterinarians to participate in veterinary relief work in developing regions of the world in summer 2012.

College Royal is quickly approaching and OVC is already busy prepping activities for the College Royal Open House. This is a fun-filled family weekend running March 17-18, 2012. OVC features a petting zoo, teddy bear surgery as well as numerous displays and games.

OVC's 150th celebrations continue with the Guelph Civic Museum hosting a special exhibit on veterinary medicine beginning in March.

As well, "Doors Open Guelph" on April 28, 2012 will include tours through Hill's Pet Nutrition Primary Healthcare Centre and the new Animal Cancer Centre.

All the best in the New Year!

Confidential Ontario Toll-free Line:

1-800-851-6606

www.phpoma.org

The Professionals Health Program is a free, confidential service. The PHP provides prompt advice and support.

Complaints Case Study

Veterinarians responsible for providing prompt service

COMPLAINT SUMMARY

The member examined a racehorse and found the horse had a rapid heart rate and increased respiratory rate. The horse's mucus membranes were purple and it was sweating profusely. The horse was treated with intravenous fluids and injected with Flumethazone. The horse did not respond to treatment and was euthanized. The horse's body was sent for a post mortem as per Ontario Racing Commission (ORC) rules.

The member returned to the farm four days later to see other horses and examined a horse showing signs similar to the deceased horse. The member's examination revealed the horse had a delayed capillary refill time, a slightly elevated heart rate and diarrhea. The horse was treated with Flumethazone and in 30 minutes its vital signs had returned to normal. The member re-checked the horse later and found it had returned to normal but seemed to be dehydrated. The member left intravenous fluids to be administered by the caregiver.

An hour later, the horse began to sweat and his respiratory rate increased. The caregiver was unable to reach the member. Later, the horse had a seizure and died. The horse's body was sent for a post mortem as per ORC rules.

The necropsies of both horses indicated the deaths were caused by endotoxic shock from a bacterial infection. An ORC investigation determined the bacteria came from vitamin electrolyte jugs that had been administered to the horses.

ALLEGATIONS

The complainants alleged the member behaved in an unethical and unprofessional manner. Of concern, the member told the ORC the horse that was euthanized had been poisoned and did not have colic, as s/he initially told the complainants. Also, the member was unavailable for emergency care for the second horse, resulting in the horse struggling through seizures and dying. Although not in attendance, the member reported observations on the second horse to the ORC.

Further, if the member was correct in the poisoning diagnosis, the complainants wonder why s/he left the second horse knowing it could require treatment. Had the member mentioned poison as a cause of the first horse's symptoms, the caretakers would have stopped intravenous vitamin administration. The complainants wondered why the member failed to share information with them concerning the diagnosis.

DECISION

The Complaints Committee decided the nature of the allegations made against the member did not warrant a Discipline hearing.

The Complaints Committee advised the member of the concerns regarding the importance of providing professional services to clients after regular business hours.

REASONS FOR DECISION

The Committee received conflicting statements from the ORC investigators, the ORC veterinarian and the member. The committee has no way of knowing what was said between the member and the ORC investigators regarding the issue of the euthanized horse being poisoned and could not resolve this issue.

Veterinarians must provide reasonable prompt services outside regular practice hours if the services are medically necessary for animals the member treats regularly or has treated recently. The Committee understands a practitioner may have difficulty finding another practitioner to do on call when time off is required. However, it is the member's responsibility to ensure a veterinarian is available to provide emergency care to clients. The member is cautioned to ensure this situation does not recur.

The member's medical records confirmed the member did examine and treat the second horse. The member advised the ORC investigators that s/he was not present when the horse started to seizure or when it died.

The member said s/he was referring to endotoxemia, not poisoning, when discussing the possible causes of the horses' clinical signs and resulting deaths. Endotoxemia is the result of toxins produced by bacteria entering the blood stream. The Committee resolved the member had no way of knowing the source of the bacteria was the vitamin electrolyte jugs that were administered to the horses as this information was not available until after the ORC investigation.

The Committee was not presented with any evidence to support the claim the member withheld any information from the farm owners or purposefully provided the ORC with damaging information.

MUTUAL ACKNOWLEDGEMENT & UNDERTAKING

The following Mutual Acknowledgement and Undertaking was made between the College of Veterinarians of Ontario and a member of the College.

An abbreviated version of the agreement follows:

I, a member of the CVO,

1) undertake that I have fully disclosed to the College of Veterinarians of Ontario my conduct with respect to submitting rewritten medical records in response to a Complaints Committee investigation, and borrowing medical equipment for the purposes of complying with the *Minimum Standards for Veterinary Facilities in Ontario*,

2) acknowledge that my conduct contravened subsections 17.(1) 1., 2., 38., 38.1 and 44. of Ontario Regulation 1093 under the *Veterinarians Act*, which states:

17.1 For the purposes of the Act, professional misconduct includes the following:

1. *An act or omission inconsistent with the act or this Regulation.*
2. *Failing to maintain the standard of practice of the profession.*
38. *Failing to reply appropriately or within a reasonable time to a written inquiry received from the College.*
- 38.1 *Providing false or misleading information to the College.*
44. *An act or omission relevant to the practice of veterinary medicine that, having regard to the circumstances, would be regarded by members as disgraceful, dishonourable or unprofessional.*

3) undertake that I will henceforth obey subsections 17.(1) 1., 2., 38., 38.1 and 44. of Ontario Regulation 1093 under the *Veterinarians Act*,

4) undertake that I will participate in a course or workshop, within six months of signing this Undertaking, which addresses veterinary medical ethics. The course/workshop is to be approved by the Registrar prior to my enrolling and participation,

5) acknowledge that I will pay all costs associated with my participation in the above noted course/workshop and,

6) acknowledge that I have obtained independent legal advice before signing this document.

The COLLEGE OF VETERINARIANS OF ONTARIO, through its Registrar,

1) undertakes not to prosecute any allegations of professional misconduct against the member in respect of the conduct described in paragraph 1.(1) of this document which occurred before the date of this undertaking unless the member breaches this undertaking.

2) has indicated to the member that it will view any breach of this undertaking as professional misconduct.

3) has indicated to the member that it will publish this undertaking in the College's newsletter, *Update*, without his/her name or the name of his/her facility.

In "Case Studies," Update presents a summary of the outcomes of complaints, Mutual Acknowledgement and Undertakings, and reported matters investigated by the College that are considered to be public knowledge. "Case Studies" are intended to be informative and educational, giving members the opportunity to review situations that highlight their responsibility to uphold professional standards and the College's responsibility to respond to issues that come to its attention. The Complaints Committee considers and investigates complaints made by the public or members of the College regarding the conduct of a member or former member of the College (Veterinarians Act R.S.O. 1990, Chapter V.3). The Complaints Committee is composed of up to nine members of the College (all of whom are practising veterinarians) and one non-veterinarian appointed to the Council of the College by the provincial government.

Summary of Discipline Committee Hearing

Dr. Michele St. Pierre

ALLEGATIONS OF PROFESSIONAL MISCONDUCT

- removed part of the pancreas when the surgery was to remove the ferret's adrenal gland
- failed to respond adequately to the client's concerns about adrenal surgeries performed on two ferrets
- diagnosed and prescribed treatment for heart disease in four ferrets on the basis of lateral radiographs which were an insufficient basis for the treatment
- maintained office records regarding two ferrets that differed from those sent to another animal hospital

BRIEF SUMMARY

The member performed what should have been an adrenalectomy on a ferret. Instead of removing the adrenal gland, the member removed part of a ferret's pancreas.

The client attempted to contact the member to discuss concerns about the adrenal surgeries the member had performed on two of the client's ferrets. The member failed to respond appropriately to the client's inquiries.

The member diagnosed heart disease and prescribed treatment

for four of the client's ferrets on the basis of lateral radiographs. Lateral radiographs were an insufficient basis on which to make such a diagnosis and recommend treatment.

The member's medical record for one ferret contained information that was not included in the copy previously sent to another veterinary facility.

The member's medical records provided to another veterinary facility for another ferret do not note whether the ferret's episode of weakness was unique or recurring. However, the member's own records state the ferret had recurring episodes of weakness.

DECISION

The member pleaded guilty and was found guilty with respect to the allegations. The College and the member had negotiated an Agreed Statement of Facts, including an admission of professional misconduct.

PENALTY

- Reprimand
- Suspension of the member's licence to practice veterinary medicine for four months. One month would be remitted if the member completed a research paper addressing the findings of professional misconduct and one month would be remitted if the member completed a medical records course or workshop.

- The member is prohibited from treating ferrets until completion of a course addressing the proper care and treatment of ferrets.
- The member will pay costs to the College of \$5,000.
- Pursuant to legislation, this matter is published including the member's name.

PANEL'S REASONING

- The penalty sends a strong message to members of the profession about the importance of appropriate treatment, client communication and medical records.
- The publication of this penalty should remind members that veterinarians must communicate findings and recommendations to clients and maintain adequate records in regard to subjective reports received from clients. Documentation should occur as soon as possible after the activity.
- The Panel concurred the penalty has a strong focus on rehabilitation and that safeguards are in place regarding the future care of ferrets.

Discipline Hearings: The Veterinarians Act, section 31.-(1) states, "where the Discipline Committee finds a member or former member of the College guilty of professional misconduct or serious neglect, the registrar shall publish the findings ..." The name of the members may be included depending on the decision of the Discipline Committee panel. Information identifying witnesses/clients is always removed.

Summary of Discipline Committee Hearing

Dr. Emmanuel Aziz

ALLEGATIONS OF PROFESSIONAL MISCONDUCT

- failed to obtain informed consent for laryngeal surgery after performing a ovariohysterectomy
- performed a laryngeal surgery when it was inappropriate
- failed to administer proper sedatives or analgesics which caused/contributed to complications leading to the cat's death
- failed to return a call when the client's son called to report on changes in the cat's condition

BRIEF SUMMARY

The member saw a six-month-old cat for an ovariohysterectomy, removal of front claws, six-month vaccinations and a fecal check. Following surgery, the member's auxiliary told the client the cat collapsed and stopped breathing when they tried to remove the endotracheal tube so the tube was reinserted and the cat had to remain in the hospital.

The member advised the client the tube could remain in place to see if the cat improved. The client agreed but would not consent to placing the cat on life support.

The member performed a laryngectomy in an attempt to save the cat's life.

The next day the member's auxiliary advised the client the cat was

breathing on her own, eating and drinking. The client was told the cat could go home the next day. The client was told the cat's larynx was removed.

The client noted the cat's eyes were dilated, she was breathing heavily and she was lethargic. The member's auxiliary advised the client the cat was on pain medication but would be fine.

At home, the cat could not walk, eat or drink. The client's son called the member's office and was told the member would return the call that day. The member did not return the call. The cat died the next morning.

The client took the cat's remains to the member's office. The member refunded the client's fees, except for the cremation costs.

DECISION

The member pleaded guilty and was found guilty with respect to the allegations. The College and the member had negotiated an Agreed Statement of Facts, including an admission of professional misconduct.

PENALTY

- Reprimand
- Suspension of the member's licence to practice veterinary medicine for three months. One month would be remitted if the member completes a CVO communications workshop and a medical records workshop.

- Completion of a research paper setting out what the member learned from attending an anaesthetics workshop.
- The member will pay the costs to the College of \$3,000.
- Pursuant to legislation, this matter is published including the member's name.

PANEL'S REASONING

- The member should not have performed the laryngeal surgery on the cat as it was inappropriate and not necessary. The member also performed two surgical procedures without administering proper sedatives and analgesics.

- The panel found there was no clear indication in the clinical records the member obtained consent for the laryngectomy. As well, the same records verified the member did not return the call from the client's son.

- A case review was completed and concluded the laryngeal surgery was inappropriate and the administration of sedatives and analgesics was improper.

- The penalty sends a strong message to members about the importance of informed consent, appropriate treatment and professional communication.

Summary of Discipline Committee Hearing

Dr. Ashish Prajapati

ALLEGATIONS OF PROFESSIONAL MISCONDUCT

- failed to explain the necessity of x-rays
- failed to discuss with client acute kidney disease or diabetes as possible diagnoses
- failed to provide or recommend pain management
- failed to suggest referral for specialized care
- failed to perform tests before ordering/administering insulin
- Insulin was inappropriate without a diagnosis of diabetes
- failed to obtain consent to order/administer insulin
- failed to maintain proper records

BRIEF SUMMARY

A cat, examined by the member, had a history of lethargy, and urinary dysfunction. The member diagnosed a urinary tract infection and possible urinary obstruction.

The member recommended hospitalization, including catheterization.

The member recommended x-rays but upon discussing the issue, the client declined the x-rays and the member told the client x-rays were not necessary at that time.

The client was advised later in the day the cat was improving and passing urine through the catheter.

The next day, a staff veterinarian advised the client the cat's bladder was found blocked that morning and the catheter had been replaced.

The client visited the clinic the next day and was told by the member the cat was improving and could likely be discharged the next day. The member's records do not mention the visit but indicate the cat was sluggish and hypothermic. Blood work indicated the cat's glucose was high.

The member ordered and administered insulin subcutaneously.

The next day, another staff veterinarian called the client and advised her the cat had died.

DECISION

The member pleaded guilty and was found guilty with respect to the allegations. The College and the member had negotiated an Agreed Statement of Facts, including an admission of professional misconduct.

PENALTY

- Reprimand
- Suspension of the member's licence to practice veterinary medicine for two months. One month would be remitted if the member completes a research paper addressing the findings of professional misconduct and completes a medical records course.
- The member will pay the costs to the College of \$3,000.
- Pursuant to legislation, this matter is published including the member's name.

PANEL'S REASONING

The member should have adequately explained to the client the necessity of x-rays.

Although the member explained the kidney problem to the client and reviewed the blood and urine test results, the member failed to discuss acute kidney failure or diabetes as possible diagnoses. The member should have suggested a referral for specialized care.

The member failed to maintain proper medical records. Medical records did not contain sufficient or any information concerning:

- the level of care the cat received on his first day of hospitalization;
- who cared for the cat each day of the hospitalization;
- who was responsible for the entries in the records;
- diagnostic, treatment and surgical options given to the client;
- communication with the client;
- estimates for surgical or medical treatments or diagnostic testing;
- the type of insulin considered
- advice discussed with the client concerning acute kidney failure or diabetes;
- how the cat was unblocked; and
- care that was given by the member's auxiliaries.

The member failed to maintain adequate medical records pertaining to the hospital cage card.

The penalty sends a strong message to the member about the importance of appropriate treatment, professional communication and the maintenance of proper medical records.

The College welcomed the following new registrants between November 22, 2011 and February 8, 2012. Licence types are as follows: G=General GNR=General Non Resident E=Educational R=Restricted A=Academic PGR=Postgraduate and Resident Licence PS=Public Service

Dr. Muhammad Afzal	G	Dr. Sangmin Kim	G
Dr. Marc Bruyninx	G	Dr. April Mathur	G
Dr. Youn Joo Cho	G	Dr. Gobriel Safwat	G
Dr. Ardeshir Elahi-Mollod-Aval	G	Dr. Zakaria Saleh	G
Dr. Celine Gilbert	G	Dr. Elise Tatone	G
Dr. Khaled Gohari	E	Dr. Stephanie Thomson	G
Dr. Rebeca Goldman	G	Dr. Adronie Verbrugghe	A
Dr. Mohaned Hoba	PGR	Dr. Michelle Van Lienden	G

The following veterinarians were granted Emeritus Status:

Dr. Harold Arbuckle	Dr. Pasko Pavkovic
Dr. Peter Cairns	Dr. Terry Taylor
Dr. Morton Caplan	Dr. Gilbert Van Der Spank
Dr. Benson Elgin	Dr. Milford Wain
Dr. Orland Green	Dr. James Walker
Dr. John McDermott	Dr. David Waltner-Toews

The following veterinarians are no longer licensed in Ontario:

Dr. Jane Armstrong	Dr. Julie Gordon	Dr. Jennifer McConnell
Dr. Daniel Ayim	Dr. Lee Grant	Dr. Simon Otto
Dr. Agnes Baer	Dr. Giles Gratton	Dr. Suppiah Path Manathan
Dr. Martin Baer	Dr. David Hart	Dr. Rachel Purvis
Dr. Richard Bongard	Dr. Emily Hines	Dr. Fred Rhoads
Dr. Yves Bouvier	Dr. John Huigenbos	Dr. Spencer Russell
Dr. Nadia Bunko	Dr. Sinder Jhajj	Dr. Navdeep Sandhu
Dr. Stacy Chartrand	Dr. Glenn Johnston	Dr. Joe Smith
Dr. Brian Crawley	Dr. Behrouz Khashayar	Dr. Alex Strong
Dr. Shammi Dhawan	Dr. Lindsey Kurach	Dr. Francisco Teixeira Neto
Dr. Satnam Dhothar	Dr. Karen Larsen	Dr. David Thorne
Dr. David Fowler	Dr. Tina Latour	Dr. Marius Vasilescu
Dr. Jennifer Fowlie	Dr. Bryanne Leuenberger	Dr. Ashley Whitehead
Dr. Jon Francis	Dr. Margaret Lisson	Dr. Martha Winhall
Dr. Jeremy Frederick	Dr. Karl Mathis	Dr. Ryan Wolker
Dr. Emad Girgis	Dr. Melanie Mercer	

CVO ~ Register Updates

New and closed corporations:

New Corporations

Animal Health Services Professional Corporation
 Beaulieu Veterinary Professional Corporation
 Bridge West Animal Hospital Professional Corporation
 Buschbeck/Clark/Foot Veterinary Professional Corporation
 Central Toronto Veterinary Referral Clinic Professional Corporation
 Chaudhary & Momi Veterinary Professional Corporation
 Collins Bay Animal Hospital Professional Corporation
 Cote Veterinary Professional Corporation
 Daniel Watkin Veterinary Professional Corporation
 Dr. H.J. Ceelen Veterinary Professional Corporation
 Dr. Ihsan Ullah Veterinary Professional Corporation
 Dr. Jessica Sherwin Veterinary Professional Corporation
 Dr. John Donovan Veterinary Professional Corporation
 Dr. S. Waisglass Veterinary Dermatology Professional Corporation
 E.J. Salkeld Veterinary Professional Corporation
 Gray-Freeman Veterinary Professional Corporation
 Greenwich Veterinary Professional Corporation
 Harrower-Billett Veterinary Professional Corporation
 Hawkesbury & Glengarry Veterinary Professional Corporation
 James Dundas Veterinary Surgery Professional Corporation

J. Ellis Veterinary Professional Corporation
 Joshua Creek Animal Hospital Professional Corporation
 Knoepfli Veterinary Professional Corporation
 Landry Veterinary Professional Corporation
 Lennox Animal Hospital Professional Corporation
 Luckwaldt Veterinary Professional Corporation
 Malik Veterinary Professional Corporation
 Martindale Animal Clinic Professional Corporation
 McLeod Road Animal Clinic Professional Corporation
 Mitchell Animal Hospital Professional Corporation
 Ostrowski Veterinary Professional Corporation
 Ottawa & Bells Corners Veterinary Professional Corporation
 Pulczer Veterinary Professional Corporation
 South Tower Animal Hospital Professional Corporation
 Thatcher Veterinary Dental Professional Corporation
 Townline Animal Hospital Professional Corporation
 Val Caron Animal Hospital Professional Corporation

Closed Corporations

Dr. Arvo Artna Professional Corporation
 Gerald Gyorffy Professional Corporation
 Julie Yager Professional Corporation
 Port Colborne Animal Hospital Professional Corporation
 Rachel Dawson Professional Corporation

The following is a list of new, relocated and closed veterinary facilities:

New Facilities

Amberlea Animal Hospital, Pickering
 Bains Veterinary House Call Services, Brampton
 Balfour Animal Hospital, Fenwick
 Cat Hospital of Brampton, Brampton
 Central Niagara Animal Hospital, Niagara Falls
 Central Toronto Veterinary Referral Clinic, Toronto
 Claire Place Mobile Veterinary Services, Manotick
 Harbourfront Animal Hospital, Toronto
 Honeywood and Warder Veterinary Services, Barrie
 King Road Animal Hospital, Richmond Hill
 Land O'Lakes Veterinary Services, Northbrook
 Niagara Falls Humane Society Spay-Neuter Clinic, Niagara Falls
 Wonderland Animal Hospital, London

Relocated Facilities

Buck Animal Hospital, Waterloo
 Dr. Jayne Harvey-Micay, Nobleton
 Dr. Kafai Veterinary Hospital, Thornhill
 Dufferin Queen Animal Hospital, Toronto
 Maple Gate Veterinary Mobile Services, Mississauga
 Nobleton Veterinary Clinic, Nobleton
 Potter Veterinary Services, Schomberg
 Tara Veterinary Services, Tara
 Toronto Animal Services North Spay/Neuter Clinic, Toronto

Closed Facilities

Kennedy Mobile Veterinary Services
 Northern Veterinary Services
 West End Equine Veterinary Services
 Woodland Pet Hospital

Communications Survey

Members are encouraged to complete the following survey which will be used to evaluate the College's outreach activities and determine future communications priorities. The survey may be completed online - please do not complete the survey more than once. Thank you for your contribution.

Return completed surveys by May 1, 2012 to:

Kim Huson
 College of Veterinarians of Ontario
 2106 Gordon Street, Guelph, Ontario N1L 1G6

To complete the survey on-line, please link to:
<http://www.surveymonkey.com/s/JGMWSXN>

1. My primary practice area is: (select one)

- Companion Animal Equine Industry
 Large Animal Academic Specialty
 Mixed Animal Regulatory Other (specify) _____

2. How many years have you worked in the veterinary profession in Ontario? _____

3. Have you ever initiated contact with the College of Veterinarians?

- yes
 no

4. If yes, how did you contact the College?

- in person by phone by e-mail by letter fax

5. How often do you contact the College?

- never weekly monthly annually

6. When you contact the College, it is concerning:

	Always	Most often	Occasionally	Never
Licensure				
Accreditation				
Advertising				
Practice Guidance				
Quality Assurance				
Complaints/Discipline				
Other (specify)				

[Update - CVO's quarterly newsletter](#)

7. Do you read Update?

- yes
 no

8. If yes, what sections of Update do you read?

	Always	Sometimes	Never		Always	Sometimes	Never
Council Highlights				President's Message			
INBOX Issues				Policy News			
Quality Assurance Program News				Complaints Discipline Cases			

9. How do you prefer to receive news from the College of Veterinarians?

- a mailed, printed version of Update, provided quarterly both - printed and electronic versions of Update
 an electronic version of Update, provided monthly I do not wish to receive news from the College

continued on back page

Communications Survey

continued from page 19

9. How can Update be changed to better serve you?

eUpdate - CVO electronic newsletter

10. Do you read eUpdate?

- always
 sometimes
 never heard of it
 I don't have email.

11. How can eUpdate be changed to better serve you?

CVO Website www.cvo.org

12. Have you visited the College's website at www.cvo.org?

- Yes
 No
 I don't use the internet.

13. Content/Function of the CVO website:

	Always	Often	Occasionally	Never
I find what I'm looking for at www.cvo.org .				
I find the CVO website is easy to use.				

General

14. The CVO's communications to members and the public should be provided through the following formats:

	Strongly Agree	Agree	Neither Agree/Disagree	Disagree	Strongly Disagree
Mailed Newsletter					
Electronic Newsletter					
Website www.cvo.org					
E-mail Messages					
Social Media - Facebook					
Social Media - Twitter					
Social Media - Other _____					
Media Stories					
Attending workshops/meetings					
Podcasts					
Webinars & Webcasts					
Private Intranet for Members Only					
Advertising					

Thank you for participating! Please return the Survey to the College - address provided on page 19.

