



THE COLLEGE OF
VETERINARIANS
OF ONTARIO

UPDATE

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A Map to the Future:

CVO Strategic Plan 2004 and Beyond

“Complete public trust through professional excellence”

This is the new *Vision* for CVO, the “clear mental picture of a preferable future” that will guide the organization, motivate those within CVO and beyond.

“To protect the public by regulating and enhancing the veterinary profession in Ontario”

This new *Mission Statement* for CVO defines what will be done to fulfil the *Vision*. All of CVO’s activities will be supportive of the *Mission*. It will serve as a filter through which every opportunity and action will be considered, in order to ensure that CVO will use all of its resources to achieve the *Mission* and ultimately the *Vision*.

*Integrity
Transparency*

*Equity
Responsiveness*

These are the essential *Core Values*, “the principles by which we live.” There were others which could be added to the list: proactive, respectful, responsible, accountable, understanding.....too many to list in a strategic plan.

*Government Relations
Quality Assurance
Public and Member Communication and Education*

These *Key Result Areas* are where CVO will focus its greatest energy. They represent the greatest potential to advance the *Mission*. *Indicators of Progress/Success* have been established which will allow CVO to effectively monitor the *Key Result Areas*.

Council, with the assistance and input of CVO staff and a facilitator, created and then adopted this *Strategic Plan* with great enthusiasm and support! CVO staff will now work with the facilitator to create an operational plan and monitoring/reporting system to ensure that the *Strategic Plan* is kept up-to-date as current *Key Result Areas* are achieved, and new ones are adopted.

by *Melody Mason, D.V.M.*
President



New President

Dr. **Melody Mason**, CVO president for 2003/2004 is wearing the CVO President's Chain of Office, which Dr. **Mark Spiegle** passed to her after her election as president at the council meeting in November.

Dr. Mason graduated from the Ontario Veterinary College in 1978. After graduation she opened a mixed practice in Muskoka, with a hospital facility in Bracebridge and an out-patient office in Gravenhurst. She sold her practice in 1993, and now works as a locum practitioner.



Dr. Rod Davies displays his stained glass along with CVO President, Dr. Melody Mason (left), and CVO Registrar, Dr. Barbara Leslie.

The CVO recently received a stained glass replica of the CVO 125th anniversary crest from Dr. **Rod Davies**. The crest is hanging in the entry of the CVO building.

Rod has been working with stained glass for 30 years. He began by taking a night course with a friend and discovered it was a satisfying way to express his artistic side.

Thank you Dr. Rod Davies

Rod has created Tiffany lamps, flat-sided lamps and a few windows. Two of his special projects were replicas of the Ontario Veterinary College crest which he donated to the OVC Alumni Association for their fundraising activities.

Rod graduated from OVC in 1958 and joined the Lennox Animal Hospital in Toronto, which he purchased in 1964. He retired from practice in 1999 and is enjoying a busy retirement as a director of the OVC Alumni Association, creating new stained glass works, and participating in various community groups.

The CVO Council wishes to thank Rod for this generous donation and beautiful addition to the College.

Dr. Michele Dutnall - Constituency #8



Upon graduation from veterinary college in 1983, Dr. Dutnall worked in mixed practice for two years before opening Dundas Veterinary Services in Winchester with her husband, Dr. Willy Armstrong. For 19 years, she was managing partner as the practice expanded to include three hospitals, two offices, and ten veterinarians. She and her husband sold their practice in 2002.

Since then, Dr. Dutnall has worked part-time as a locum practitioner, and had more time to enjoy the family's three children, six horses, two dogs and five cats.

Mr. Doug Walper - Public Member



Mr. Walper was born and raised on a mixed farm in Huron County. He graduated from the University of Guelph with a B.Sc. (Agr.) in 1980. From 1982 to 1994 he worked part-time as a lecturer in the Agricultural Business Management Program at Centralia College of Agricultural Technology. In 1987, Mr. Walper graduated from the Canadian Institute of Financial Planning with the designation of Chartered Financial Planner. He is co-founder of a company providing management, accounting and income tax services to farmers.

Since 1985, he has been a member of the Ontario Institute of Agrologists and the Agricultural Institute of Canada. Doug resides in Grand Bend, Ontario with his wife Catherine.

2004 Student Soiree

Prize winners pose for a picture with the CVO president. Pictured from left to right: **Mark House, Sheila Cross, Dr. Melody Mason, Evelyn Sadu, and Betty Albright.** (Absent: **Linda Franchetto**)



Students enjoyed talking with Councillors and Staff while completing their “soiree passport.”



Students of the Ontario Veterinary College 2004 were hosted by the CVO Councillors and staff at the annual Student Soiree in the OVC cafeteria on January 28, 2004. Those attending mixed and mingled as the students completed their “passports” by identifying and meeting councillors and staff from the clues provided. The very animated and pleasant evening, which allowed the graduating students and councillors to become acquainted, was concluded with a draw for prizes.

Members' Forum



Dr. Melody Mason, CVO President, welcomes members to the meeting and introduced guest speaker, Mr. Richard Steinecke.

(Pictured below): attendees at the Members' Forum listen to Mr. Steinecke's presentation on "How the New Privacy Legislation Affects You and the Practice of Veterinary Medicine in Ontario."



Nearly 100 members and practice managers attended the very informative 2004 Members' Forum, held at the Ramada Conference Centre in Guelph on January 29, 2004. The presentation topic was "How the New Privacy Legislation Affects You and the Practice of Veterinary Medicine in Ontario." The presentation addressed the impact of the federal *Privacy of Personal Information and Electronic Documents Act* (PIPEDA) and provided direction to assist practices in achieving compliance. This legislation affects all commercial organizations, effective January 1, 2004.

The presenter, **Richard Steinecke** of Steinecke, Macuira and LeBlanc, developed the Guide and Checklists available on the CVO website. The Guide and Checklists are designed to assist practices in

achieving compliance with this legislation. Mr. Steinecke used his presentation to raise awareness of the legislation, highlight particular aspects of the legislation and to take participants through the Guide and Checklists.

Mr. Steinecke encouraged those present to review their practice against the Guide and the Checklists, and recommended that the practice assign a privacy officer and develop necessary documentation to comply with the legislation.

The Guide and Checklists, along with Mr. Steinecke's presentation are posted on the CVO website www.cvo.org.

Annual General Meeting



On January 29, 2004, 48 members attended the CVO Annual General Meeting held at the Ramada Hotel and Conference Centre in Guelph. Drs. **Susan McNabb** and **David Sandals** agreed to act as voting scrutineers.

President welcomes members

Dr. **Melody Mason**, president of CVO, welcomed members in attendance, introduced the new council for 2004, and explained the voting procedure.

Members reviewed and accepted the minutes from the previous annual general meeting and the 2002/2003 report of council as published in the annual report, which was distributed with the Winter 2003 edition of *Update*.

Dr. Mason presented the audited financial statements for the fiscal year ending September 30, 2003. The members approved these statements and approved the firm of BDO Dunwoody LLP, as auditors for the CVO for the fiscal year 2003/2004.

Members ratify by-law

By-law No. 11 was approved and ratified by the membership:

1.(1), 4.(4), 16.(1) (3) (4)

Succession planning provision

The purpose of this amendment is to clarify the succession planning provision. The provision is designed to ensure that the orderly succession of professional members in major leadership roles at the College is not disrupted by the election process.

14.(2), 15.(2), 15.(7) (11) (12), 24.(1) (9)

Electronic Voting

The purpose of these amendments is to permit CVO Council and committees to vote on matters without physically meeting.

21.(1)

Quorum for AGM

Council proposed that the quorum for the Annual General Meeting be reduced to ten members. The by-law was amended by the members to read twenty members.

Question period

Dr. Mason opened the floor to members to present any new business. No issues were raised.

Minute of silence

Dr. Mason read the names of those members of the college who passed away during 2002-2003, and asked members to pause for a moment of silence, in remembrance.

She then offered congratulations to the members of the college who were granted Emeritus Status in 2002-2003.

Dr. Mason declared the meeting adjourned.

Council Meeting: November 19, 2003

- Welcomed three newly appointed councillors: Dr. **Michele Dutnall**, Dr. **Arie Vreugdenhil** and Dr. **Rich Liddell**.
- Thanked Dr. **Rod Davies**, member Emeritus, for his donation of a handcrafted CVO Crest made of stained glass.
- Heard a presentation by Dr. **Rebecca Irwin**, coordinator of Health Canada's Antimicrobial Resistance Surveillance Unit, on the monitoring of antimicrobial use and antimicrobial resistance in Canadian agri-food and aquaculture sectors.
- Approved the Audited Financial Statements for 2002/2003.
- Discussed the reserve, which has been decreasing over time and received projection reports from the CVO accountant and bookkeeper. Approved a regulation amendment that would increase membership fees for the first time in 12 years. The increase was deemed necessary to maintain the reserve at a viable level for at least the next five years. The amount of the increase recommended is \$150 for all categories. The proposed amendment is posted on www.cvo.org or can be obtained by calling the CVO office.
- Elected the Executive Committee for 2003/2004.
- Appointed Statutory Committees and CVO Representatives for 2003/2004.
- Agreed that action is warranted to ensure quality assurance in veterinary diagnostic laboratories. Staff to research and report to Council for further discussion.
- Discussed the report of the Task Force on Delegated Acts and Informed Consent in Food Producing Animals and Equine. Staff to formulate draft guidelines for further review by Council.
- Received a report of the working group examining the necessity and feasibility of hiring in-house counsel. The group recommended that no further action be taken.
- Struck a Quality Assurance Working Group.
- Discussed self-regulation of Registered Veterinary Technicians (RVTs). Council agreed that while it could support the self-regulation of RVTs, it would not support the concept of a list of controlled acts since this was not considered to be in the public interest.
- Received a report from Dr. **Cheryl Yuill**, CVO Representative to the Professionals Health Program Advisory Committee.
- Received an update from Dr. **Barbara Leslie**, registrar, on the status of the *Red Tape Amendments* to the *Veterinarians Act*.

Council Meeting: January 28, 2004

- Returned draft *Position Statement on Deficiencies Noted during the Inspection of New Facilities* to the Accreditation Committee for further consideration.
- Received an update on discussions with regard to Quality Assurance in Veterinary Laboratories.
- Reviewed and amended a draft *Position Statement on Delegated Acts and Informed Consent - Food Animal and Equine* - to be circulated for consultation.
- Reviewed a draft *Position Statement on Licensure of Veterinarians* in the event of an emergency situation involving a foreign animal disease outbreak - to be circulated for consultation.

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Council Bulletins

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- Reviewed, amended and passed the *Strategic Plan - 2004 and Beyond*.
- Heard a presentation by **Brendan McKay**, Policy Adviser, Strategic Policy Coordination Unit, and **Tom Graham**, Legal Services, Ontario Ministry of Agriculture and Food regarding the proposed *Red Tape Amendments* to the *Veterinarians Act* and the proposed amendments to the regulation.
- Appointed Dr. **Rich Liddell** to report to Council on the *Prudent Management of Operations*, as required by the Board Governance Policies.
- Amended the budget to change the name of the Professional Enhancement Program to Quality Assurance Program. Professional enhancement is included in the Quality Assurance Program.

Visit our website at

www.cvo.org

NEW! On the CVO website under **Links** an additional site has been added to the Ministry of Natural Resources - <http://rabies.mnr.gov.on.ca> (Rabies Research and Development Unit Site).

You will also find other useful **Links** such as Canadian Colleges, Veterinary Organizations, Acts and Regulations and the Provincial Veterinary Associations.

NEW! **Strategic Plan
2004 and Beyond**

The CVO Strategic Plan is posted on the website under About CVO.

NEW! **Regulatory Consultation Documents**

Regulatory consultation documents are available for comment from the CVO website home page.

CVO e-news Have you signed up for the CVO electronic newsletter? To sign up go to the CVO home page at www.cvo.org.

Executive Committee for 2003/2004

(Front row, from left): Dr. Ed Doering, Dr. Melody Mason, Dr. Alma Conn. (Back row, from left): Dr. Mark Spiegle and Mr. Doug Walper.



Your CVO Council for 2003/2004



CVO Council 2003/2004: *(Front row, from left): Dr. James Clark, Dr. Melody Mason, Dr. Wendy Parker, Dr. Michele Dutnall, Dr. Alma Conn, Dr. Cheryl Yuill, Dr. Nasim Gulamhusein. (Second row, from left): Dr. Steve Stewart, Mr. T.G. Menen, Dr. Mark Spiegle, Dr. Arie (Harry) Vreugdenhil, Dr. Richard Liddell, Dr. Deji Odetoynbo, Mr. Doug Walper, and Dr. Ed Doering. (Missing from photo: Mr. Mike Johnston)*

Complaints Case

Does “Dentistry” Include Extractions?

In companion animal practice, the term “dentistry” is often used in medical records, in discussions with clients and on consent forms. However, when a client gives consent for “dentistry,” he or she may not have an adequate understanding of what the procedure may entail, as illustrated by the following case recently before the Complaints Committee.

Mrs. Owner presented her ten-year-old, male neutered Persian cat, Fluffy, to XYZ Animal Hospital for “dentistry.” Her regular veterinarian, Dr. X, had advised her on several occasions over the previous few years, usually in conjunction with annual vaccination visits, that Fluffy should have “dentistry.” At admission, another clinician, Dr. Y, performed a pre-anaesthetic examination of Fluffy in the presence of Mrs. Owner; however, she did not evaluate the condition of Fluffy’s teeth, or discuss any details of the planned procedure, because she noted from the medical records that Dr. X had spoken to Mrs. Owner on several occasions about the teeth, and on his advice, Mrs. Owner had made the appointment. Mrs. Owner signed the authorization form consenting to “Dentistry.” and Fluffy was admitted.

Dr. X performed Fluffy’s procedure. As Dr. X was in the process of removing the severe calculus that was present, several teeth “came out with the calculus” and others were so loose that they required very minimal effort to remove. A total of nine teeth were extracted. Dr. X scaled and polished the remaining

teeth, and Fluffy recovered from anaesthesia uneventfully.

Mrs. Owner returned to the clinic that evening to pick up her cat. When she was informed that nine extractions had been performed, she became upset. She indicated that she did not give consent for any extractions; rather, she believed she had consented to a dental examination and cleaning, and expected that if any extractions were required, she would have been contacted by Dr. X in advance of performing them. Dr. X refunded Mrs. Owner the fee charged for the extractions. Subsequently, Fluffy had difficulty eating and lost weight, and received treatment at another veterinary facility for his oral discomfort.

Mrs. Owner subsequently filed a complaint with the College alleging that:

Dr. X extracted nine of Fluffy’s teeth without her permission. As a result of this unauthorized procedure, Fluffy developed oral pain and required further treatment at great expense to Mrs. Owner.

Decision and Reasons:

Mrs. Owner submitted that her understanding of the term “dentistry” was that her cat would have an oral examination and a dental cleaning, but that she would be consulted before any extractions were performed.

In response, Dr. X submitted that the term “dentistry” in the context of companion animal practice

generally includes extractions, and in signing the authorization form consenting to “dentistry.” Mrs. Owner did give consent to the extractions. Dr. X further submitted that the teeth were so severely diseased that they could not have been saved in any event.

In its investigation, the Committee reviewed the medical records documenting evaluations of Fluffy’s oral health performed in the course of his vaccination visits. For a vaccination visit over two years prior to the procedure was a medical record entry stating: “Recommend dentistry . . . owner to consider dentistry.” At the visit one year later, the committee noted: “Moderate tartar, reddened gingivae. Recommend dentistry . . . Owner considering dentistry in the New Year.” One year later was the entry “severe tartar, requires extractions . . . owner will bring in for dentistry within a month.”

The Committee noted that Mrs. Owner made the appointment for Fluffy’s dental procedure approximately six months after that.

The Committee reviewed the authorization form signed by Mrs. Owner. This form was entitled “Medical/Surgical Authorization” and stated “I, Mrs. Owner, give permission to the veterinarians of the XYZ Animal Hospital to perform: Dentistry.” The form was dated the day of Fluffy’s dental procedure, and was signed by Mrs. Owner.

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Complaints Case

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The Committee further noted Dr. X's medical record documentation of the condition of the teeth at the time of the dental procedure, which included such entries as "many teeth loose" and "severe gum recession" and "all teeth very sensitive to touch."

In its deliberations, the Committee considered that the medical records documented that Mrs. Owner had been informed on several occasions that her cat required a dental procedure, and was informed of the progressing severity of the cat's condition. Accordingly, Mrs. Owner should have reasonably known that there was deterioration in her cat's oral health by the time she presented Fluffy for his dental procedure 2 1/2 years after the initial recommendation was made.

The committee further considered that it is often not possible to determine the viability of individual teeth until the calculus is removed. In this case, it was the removal of calculus that Mrs. Owner indicates she authorized. However, as Dr. X was in the course of performing the authorized procedure - the removal of the calculus - several diseased teeth came out. The committee considered that this was indicative of extensive destruction of the periodontal tissues, and that the only option for teeth diseased to this degree is extraction. To fail to remove the diseased teeth would be detrimental to the patient's oral and general health.

The committee lastly determined that the oral pain, inappetance and weight loss Fluffy experienced following his procedure were

unfortunate, but occurred as a result of the progressive periodontal disease which was left untreated for several years, and not because Dr. X acted improperly in removing the teeth.

The Committee accordingly found that Dr. X acted appropriately and in the best interests of his patient in extracting the diseased teeth. As such, the conduct of Dr. X met the standards expected of the profession.

Mrs. Owner did not agree with the Committee's decision, and appealed this case to the Health Professions Appeal and Review Board (HPARB).

"...Mrs. Owner believed she was consenting only to a dental cleaning and not extractions..."

HPARB - response

After its review of the case, HPARB confirmed the Committee's decision and included the following in its reasons for decision.

"The issue of communication is central in this matter. The Board can find no information in the Record that Mrs. Owner clearly understood when she consented to a "dentistry" procedure that her cat's teeth might spontaneously extract when Dr. X worked on eliminating

the tartar. The Board appreciates that the dental loss was unexpected and thus disturbing to Mrs. Owner. The clinicians might ensure in the future that before beginning a dental treatment, particularly one that is delayed, the animal's owner is prepared for such a result."

Discussion:

A critical factor leading to this complaint was Mrs. Owner's misunderstanding of the term "dentistry." Mrs. Owner believed she was consenting only to a dental cleaning and not extractions. Clients would be more accurately informed as to what a dental procedure involves if, rather than "dentistry," more specific descriptors of the planned procedure such as "dental scaling and polishing, possible extractions" are used in discussions with clients, on authorization forms, and also in medical records.

Ideally, the client should be informed in advance of the procedure if extractions are anticipated, and of any attendant risks or possible complications. If the condition of the teeth is not ascertainable because of the degree of calculus, or the animal will not permit an oral examination, it would be prudent to contact the client once the animal is anaesthetized and the oral examination has been completed. The client can then be informed more accurately as to what the dental procedure will entail, including possible risks and complications. The substance of any such discussions should then be documented in the medical record.

Letters to the Editor

Update welcomes and encourages letters from members, signed by the author. The CVO reserves the right to edit letters for style, clarity, and length, and may decline to publish letters. Please write to the editor, *Update*, College of Veterinarians of Ontario, 2106 Gordon Street, Guelph, Ontario N1L 1G6 or fax (519) 824-6497, toll free fax in Ontario (888) 662-9479.



Dear CVO:

This letter is in response to two recent letters to the editor in the Winter 2003 issue of *Update*. The letters printed in *Update* were in response to a presentation given by Canadian Animal Health Institute (CAHI) representatives to the CVO Council in September 2003. The letters reflect on only a portion of the discussion that occurred with the CVO and identify aspects of the profession's own self-interest. The veterinary community needs to be aware of recent events regarding the importation and use of active pharmaceutical ingredients (APIs) and compounding of drugs for animals to better understand the initiatives of the CAHI.

First and foremost, it needs to be made clear that CAHI is not opposed to compounding and believes it has a legitimate role in veterinary medicine. What CAHI and others are concerned about is that compounding is being used as a tool to bypass the Canadian regulatory process and is therefore compromising human and animal safety, quality assurance programs and exports of food animal products, and, indeed, initiative to develop new products.

Canadian law regarding the importation and use of bulk chemicals with pharmacological activity does not meet the standards of other developed countries in the world. Health Canada recognizes this as an issue and is trying to resolve the matter in cooperation with stakeholders. On September 12, 2003 representatives from Health Canada, the Canadian Veterinary Medical Association, the Ontario and Quebec Colleges of Veterinarians, the Canadian Food Inspection Agency and the Canadian Animal Health Institute met, as a task force, to initiate a strategy to resolve concerns regarding importation and use of bulk drugs and compounding. It was matters of

human and animal safety that drove the discussion that day. One outcome of the day was that the CVMA agreed to take the lead and work with Health Canada in preparing a set of standards or guidelines that could be used by both pharmacists and veterinarians when compounding animal drugs. A second meeting of the task force is to be held in February. At this meeting the draft guidelines and standards are to be discussed.

Lastly, while Canada is trying to resolve bulk drug and compounding concerns so too is the United States. The U.S. Food and Drug Administration released a Compliance Policy Guides Manual for Compounding of Drugs for Use in Animals in 2003 that describes the factors FDA will consider in exercising enforcement measures regarding compounding of animal drugs. The American Association of Equine Practitioners has also been engaged in this discussion as evidenced in the Equine Veterinary Education Journal, February 2002.

Importation and compounding of animal drugs is an important topic impacting government, pharmacists, veterinarians, animals and their owners and consumers of food animal products. It is important that we all be prepared to engage in this discussion to ensure safe use of animal drugs.

Jean Szkotnicki, *President*
CAHI, Guelph, Ontario

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Dear CVO:

Appointed by the Council of CVO, I have been an observer on the Importation and Compounding of Animal Drugs Task Force assembled as a result of a collective agreement between Health Canada and various stakeholders to formulate plans to reduce the apparent unrestricted entry of Active Pharmaceutical Ingredients (APIs) in Canada and the subsequent compounding of these APIs into drugs for animal use by owners, veterinarians and pharmacists. This letter is a brief summary of the thrust of the meetings.

There have been two meetings to date:

- On September 12, 2003, the pharmaceutical industry identified legislative loopholes and the associated risks. Health Canada stated a concern with the importation of unapproved drugs, compounding and the use of APIs on the safety of Canada's food supply and reiterated the steps that are being taken to deal with these concerns. The CVMA National Issues Committee undertook to draft a document outlining the current thrust of legislation and policy to be circulated to all provincial veterinary associations by the end of 2003.
- On February 5, 2004, federal representatives provided update reports on the three initiatives: closing the "own use" loophole; the control of API importation to legitimate channels only; and formulation of national guidelines for legitimate veterinary compounding. CVMA presented a

preliminary draft of principles for prescribing and dispensing. Following further refinement, these will be presented for consideration in the development of national guidelines. The Health Products and Food Branch Inspectorate provided contact information for their inspectors across Canada. This list is available through CVO. The Ontario region contact is:

Jean-Marc Charron
2301 Midland Avenue, 3rd Floor
Toronto, ON M1P 4R7
Ph: 416-973-1466 / Fax: 416-973-1954

The issues being addressed by this task force and the regulatory thrust of Health Canada are important for CVO to monitor as they affect the public interest and the CVO membership. CVO has taken a proactive position by accepting observer status on this task force.

Bryan Kennedy, D.V.M.
Chesterville, Ontario

Discipline Hearings

Summary of Recent Discipline Committee Hearings

Discipline Hearings

The *Veterinarians Act*, section 31.-(1) "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 finding..." the name of the member who is subject of the hearing may, or may not, be included depending on the decision of the Discipline Committee panel. Information revealing the names of the witnesses and clients has been removed.

Decisions may be obtained, in full, by contacting **Rose Robinson**, coordinator for Complaints and Discipline, at 519-824-5600 or toll free at 1-800-424-2856, or email rrobinso@cvo.org.

Dr. Jeffrey Snook

On October 2, 2003, the Discipline Committee met to hear and consider allegations of professional misconduct against Dr. Jeffrey Snook.

On or about September 1, 2002, and without prior notice, Dr. Snook resigned his membership in the College of Veterinarians of Ontario, and ceased practising veterinary medicine in Ontario. Dr. Snook had been served by a Notice of Hearing but did not appear nor did he choose to have representation appear on his behalf. The Discipline Committee proceeded with the hearing in his absence and the following allegations were considered:

- Dr. Snook failed to make adequate or any arrangements for the proper closing of his practice.
- Dr. Snook failed to maintain client records as required by the regulations by, among other things, failing to keep client records secure and failing to ensure that clients could obtain access to the files.
- Dr. Snook failed to dispose of biological and hazardous waste as required by the minimum standards of the College.
- Dr. Snook disposed of drugs, including controlled drugs and narcotics, in an inappropriate manner.

Decision:

The Discipline Committee found Dr. Snook to be guilty of professional misconduct and imposed the following penalty:

- A license suspension of two years
- A written reprimand placed in his file
- A \$1,000 fine
- Costs of \$12,000 awarded to the College

(Note: this penalty to be imposed should Dr. Snook ever decide to return to Canada to have his veterinary license renewed)

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Discipline Hearings

Dr. Terry Fried

On December 1, 2003 the Discipline Committee met to hear and consider allegations of professional misconduct against Dr. Terry Fried.

Dr. Fried pleaded guilty to allegations which were in direct violation of the following Regulations:

- conflict of interest
- disgraceful, dishonourable or unprofessional conduct
- failing to provide certificates or reports
- failing to make or retain records required by the Regulation
- falsifying a record regarding professional services
- signing or issuing a certificate or report that is false, misleading or otherwise improper
- signing or issuing a certificate or report without taking reasonable measures to ensure accuracy
- failing to reply appropriately to a written inquiry received from the College
- providing false or misleading information to the College
- conduct unbecoming

Decision:

The Committee accepted Dr. Fried's guilty plea and the following "Joint Submission as to Penalty" was imposed:

- Dr. Fried was reprimanded and the reprimand was entered in the College's register.
- Dr. Fried was ordered to pay the College costs in the amount of \$2,000.
- A summary of the matter is to be published in *Update*.

Dr. Alan Robinson

On January 9, 2004 the Discipline Committee met to hear and consider allegations of professional misconduct against Dr. Alan Robinson.

Dr. Robinson pleaded guilty to the following allegation:

- Dr. Robinson failed to comply with an Undertaking he entered into with the College and, after numerous assurances that he would comply, he failed to do so.

Decision:

The Discipline Committee accepted Dr. Robinson's guilty plea and imposed the following penalty:

- Dr. Robinson will receive a written reprimand which is to be recorded on the College register.
- Dr. Robinson is to comply with the Undertaking that he entered into with the College.
- Dr. Robinson shall pay costs to the College in the amount of \$250.
- A summary of this matter is to be published in the *CVO Update* which will include Dr. Robinson's name.

Professional Enhancement

Things I have noticed in my travels...

by **Ed Empringham, D.V.M.**

As the director of Professional Enhancement, I have the opportunity to visit many practices around the province. Many practices have innovative ideas or ingenious solutions to problems that many of us face. "Things I have noticed in my travels . . ." is my way of sharing these solutions and ideas amongst the membership.

The Master Problem list is one of the most valuable components of a medical record, but it is usually not used well, if at all, in practices that I visit.

I prefer to call the Master Problem List a Cumulative Patient Profile, which more fully describes how it is commonly used in veterinary medicine.

In veterinary medicine today, we have more case hand-offs than ever before. The Cumulative Patient Profile is a valuable communication tool that helps make medical records more useful.

A Cumulative Patient Profile can include information such as the client information, patient name and signalment, electronic identification, temperament, vaccination history, weight profile, x-ray file numbers, ongoing medications, special diets, surgical events, medical events and resolutions, etc. The information to be included can be customized to your own practice needs.

For veterinarians seeing a client/patient for the first time, the Cumulative Patient Profile provides a "quick look" at the patient with references to events they may wish to pursue more fully in the chronological record entries by using the event date as a quick reference. Locum practitioners particularly find the Cumulative Patient Profiles a useful tool when working in a variety of practices.

Some practices:

- Use colour to identify the gender and/or species to avoid errors when addressing the client about their animal.
- Include a brief series of abbreviations on the bottom of the page to improve transferability of information.
- Use highlighters to highlight certain information (be sure to test highlighters to ensure that the highlighted record is legible when faxed or copied).
- Designate a staff person to be responsible for records being complete, including the appropriate Cumulative Patient Profile entries, before filing the record.

What about electronic records? While the approach will be different for each computer system, it should be possible to extract summary information from the database in a report, provided the information required has been appropriately entered in a specific field in the computer record. This might be generated as a paper copy prior to the visit or be accessed by the veterinarian on an examination room computer prior to or during the appointment.

When using a Cumulative Patient Profile as part of the medical record, it is critical that it be completed consistently every time there is a reason for an entry. It is very important to have a practice policy on the use of this record component and a system of ensuring that the policy is followed.

Consider adding this valuable medical record component to your records as a way of improving the communication value of the record. In the veterinary profession, we are increasingly dealing with case hand-offs that require improved communication.

Avian Influenza Virus

February, 2004

by *David Alves, D.V.M.*
Provincial Veterinarian

Highly Pathogenic Avian Influenza (Eastern Asia)

During January 2004, many countries in Eastern Asia have been dealing with an outbreak of Highly Pathogenic Avian Influenza virus A/H5N1 in commercial poultry. The outbreak is believed to have started in late 2003 and has been spreading throughout the region. In addition to causing high morbidity and mortality in birds, this influenza strain has been causing illness and deaths in humans who come in contact with infected birds or their droppings and secretions.

The public health impact of this outbreak has drawn worldwide attention. Historically, H5N1 is the only Avian Influenza virus strain that has been able to cause severe human fatalities (Hong Kong 1997). H7N7 and H9N2 strains have also been linked to several cases of mild illness and one death. The H5N1 strain, however, is not only highly pathogenic and virulent, but has a propensity to combine genetic material with other influenza viruses, including human strains. The World Health Organization (WHO) is concerned that if the H5N1 virus combines with a human strain and acquires the ability to spread from person to person, a severe human influenza pandemic could result. So far, there has been no indication of person to person transmission.

The Ontario Animal Health Surveillance Network, through OMAF, the Animal Health Laboratory and CFIA (Ontario), continue to monitor these and other disease threats to the Ontario poultry industry. Expertise and advice are available from OMAF, AHL and CFIA veterinarians with respect to biosecurity, Foreign Animal Disease (FAD) emergence and diagnostic testing. Poultry producers, veterinarians and industry personnel should continue to observe strict biosecurity measures.

Important hazards such as Avian Influenza virus can be present in wild bird populations, and in imported pet birds. It is important to maintain strict biosecurity at all times, regardless of when and where outbreaks are being reported. Veterinarians, including those dealing with exotic or wild birds, should be vigilant for signs of Avian Influenza and other FADs, and submit appropriate samples from any suspected cases to the AHL for diagnosis. If HPAI is suspected, the local CFIA district veterinarian should be consulted.

Ontario Animal Health Surveillance Network

OMAF - Fergus

Phone: (519) 846-3407 / Fax: (519) 846-8101

Animal Health Laboratory - University of Guelph

Phone: (519) 823-8800 / Fax: (519) 821-8072

Our mission is to deliver surveillance as a partnership to help maintain animal and related public health in Ontario.

Thank-you

Dr. Mark Spiegle
College of Veterinarians of Ontario
2106 Gordon Street
Guelph, Ontario
N1L 1G6



December 6, 2003

Dear Mark,

I wanted to write and thank you for coming all this way to the CCVA's centennial conference and for speaking at the AGM. It is wonderful to have the personal contact with the CVO. The information and support that the CVO has for its members is fantastic and all veterinarians must realize how much work the CVO does for your profession, both provincially but also nationally.

I hope you enjoyed your stay in Ottawa and the conference. On behalf of all the CCVA directors thank you again for your time and support.

Yours truly,

Andrew M. Sparling, D.V.M.
CCVA President
Osgoode, Ontario

Regulatory Consultations

Regulatory Consultation Documents Available for Comment

The following draft position statements are being made available for comment. The CVO Council is seeking input on these from any interested parties prior to final consideration of the issues.

Position Statement on Licensure of Veterinarians in Emergency Situations

Position Statement on Delegating to Auxiliaries in Food Animal and Equine Practice

The full documents are available at www.cvo.org under "Regulatory Consultations" or can be obtained by calling the CVO office.

Please forward your comments by **April 14, 2004** to:

Office of the Registrar
College of Veterinarians of Ontario
2106 Gordon Street
Guelph, ON N1L 1G6
Email: consultation@cvo.org
Fax: 888-662-9479 or 519-824-6497

CVO "Open Exchange"

Open Exchange meetings are a CVO initiative to meet with the membership for open dialogue. The meetings allow veterinarians and CVO staff to exchange information and ideas. Two meetings have been held, one in Ottawa and another in Toronto.

While these meetings are open to all members, invitations are sent to members located in the constituencies where the meeting is being held.

Members are asked to pre-register and to select from a list of potential meeting topics. Those topics of interest to the group will be addressed. A very important part of the meeting is a portion set aside for member comments and questions.

The next **Open Exchange** meeting will be held in **London** on **March 31, 2004** at the Best Western Lamplighter Inn.

All members are welcome to attend. This is your opportunity to meet with CVO staff to discuss issues of importance.

If you would like a registration form, please contact the CVO office. The form is also available on the CVO website (www.cvo.org) under News Items. Registration is limited.

In Memoriam

The council and staff of the CVO were saddened to learn of the following deaths. We extend our sincere sympathy to their families and friends. In memory of deceased members, the CVO contributes an annual grant to the Ontario Veterinary College Alumni Trust.

Buck, C. Robert (Bob) (OVC 1946) - Dr. Buck passed away October 23, 2003. After graduation, Dr. Buck established himself in private practice in partnership with Dr. Joseph Johnson and then independently as the Buck Animal Hospital until 1975. He then joined the Ontario Veterinary College as a Liaison Officer for the College and helped with the creation and establishment of the College's first-ever externship program. Dr. Buck retired in 1987. He held Emeritus Status with the College. He is survived by his wife Trudy, four children and six grandchildren.

Simo, Csongor (Budapest 1970) - Dr. Simo passed away in November, 2003. Dr. Simo graduated from Budapest, Hungary and obtained a general licence in Ontario in 1986. Dr. Simo worked for the Canadian Food Inspection Agency for seventeen years. He is survived by his wife Eva, son Chris, daughter Gabriella and grandson, Armin.

Hiring A New Graduate?

To ensure that the veterinarian you plan to hire is licensed with the CVO, please check with the CVO office at

(519) 824-5600
toll free: 1-800-424-2856

or e-mail **Karen Gamble**
registration co-ordinator, at kgamble@cvo.org

OVC 2004 graduates will be eligible to practice mid-May

Professionals Health Program

Confidential toll free line:
1-800-851-6606

Update, the official publication of the College of Veterinarians of Ontario, is the principle means of communication between the College and its members. It is the primary means of informing the membership 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.

Deadline for the June 2004 edition of *Update* is May 5, 2004. Send in your submissions to the editor c/o CVO, 2106 Gordon Street, Guelph, Ontario N1L 1G6.

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