

## 19. STANDARDS OF VETERINARY FACILITIES

19.1 The facilities in which the practice of clinical veterinary medicine is conducted shall:

- (a) be of good construction and permanent in nature; the facility and grounds shall be neat, clean and in good repair and the facility shall be adequately heated, lighted, ventilated and screened; emergency lighting, clearly marked emergency exits and fire extinguishers shall be available;
- (b) Have any signs and letterhead conforming to ethical standards;
- (c) Carry fire, liability and malpractice insurance;
- (d) Have adequate parking facilities adjacent to the facilities for the convenience of clients
- (e) Be directed and supervised by a licensed veterinarian
- (f) Have associated with the practice of clinical veterinary medicine, a number of professional and lay personnel adequate for the care of patients, and;
  - (i) All such personnel shall be attired in clean and neat garments and shall present a neat appearance
  - (ii) Lay personnel of a practice of clinical veterinary medicine shall not decide the course of treatment for any patient;
  - (iii) All personnel shall be informed of potential health hazards involved with veterinary practice such as potential health hazards associated with radiology, anesthesia, dentistry, biological, hormones, and zoonotic diseases.
- (g) Have adequate storage facilities for equipment and supplies.
- (h) Have adequate facilities for the storage, safekeeping and preparation of drugs in accordance with Federal and Provincial laws, and practice certain procedures including:
  - (i) Labeling drugs being dispensed with the name of the hospital or Doctor, the date, the name of the patient and owner, the name, quantity, strength and DIN of the drug of the drug and the Instructions for use, and
  - (ii) Under normal circumstances, dispensing drugs in child-proof containers,
  - (iii) Narcotics and control drugs must be kept in a locked cabinet of adequate design and construction to assure the reasonable security of the drugs contained therein.
- (i) Have a library which includes:
  - (i) Current reference texts and professional journals which reflects the scope of practice of the facility;
  - (ii) A current edition of the Prince Edward Island Veterinary Medical Association Act and Bylaws;
  - (iii) A recent edition of A Compendium of Pharmaceuticals and Specialties (Canadian edition);
  - (iv) A copy of the (Canada) Narcotic Control Act, Schedule and Narcotic Control Regulations;
  - (v) A copy of Schedule F and G, of the (Canada) Food and Drug Act;
  - (vi) A copy of the current Prince Edward Island Pharmacy Act
- (j) The facility,

- (i) is self-contained,
- (ii) has a separate and distinct entrance directly from the street or, if the facility is in a building containing more than the facility, directly from a common lobby, hallway or mall.
- (k) the facility has, and appears to have, the practice of veterinary medicine as its primary purpose.
- (l) the facility is not, and does not appear to be, associated with or operated in connection with another enterprise.
  - (i) Standards (l) and (m) do not prohibit the providing of ancillary services in the facility which are incidental and subordinate to the professional services provided in the facility.
- (m) the facility is not located in, and has no direct public access to, a commercial establishment,
  - (i) where animals are bought or sold,
  - (ii) providing animal food or other goods or services used principally by, with or for animals.

Records

19.2 Client and patient records shall be kept by each licensee and shall be retained and shall include:

- (a) client's name, address and telephone number, if any;
- (b) identification of patient;
- (c) history of patient;
- (d) diagnostic tests used and results;
- (e) diagnosis and prognosis;<sup>18</sup>
- (f) treatment.

19.3 The records required under this section shall be:

- (a) legibly written or typewritten;
- (b) kept in a systematic manner;
- (c) each entry shall be identified with the initials or code of the veterinarian responsible for the procedure;
- (d) records required in this section may be maintained in any electronic medium that provides a visual display of recorded information if;
  - (i) the recorded information is able to be printed promptly and
  - (ii) any changes in the recorded information are clearly indicated or marked as changes
- (e) records shall be maintained by a licensee for a minimum of five years from the date of the last entry in such records.

19.4 LARGE ANIMAL RECORDS MANAGEMENT.

19.4.1 Regulation states that the records shall be:

- (a) Legibly written or type written
  - (i) So that the record can be read and interpreted to avoid misunderstanding (s) which may be detrimental to the animal or group

- (ii) Changes should be made by a single line through the content or similar technique to ensure legibility. All changes should be initialed and dated.

(b) Records should be kept in a systematic manner

- (i) The record may include photographs, logs relating to the storage location of digital media (video, pictures, ultrasound, radiographs), laboratory data, communications (correspondence, phone logs), laboratory data, certificates, estimates, waivers, protocols, consent forms, and surgical/anesthetic monitoring sheets.
- (ii) The record must contain patient identification (age, breed, sex) and client information which includes name, phone/cell number, address, and alternate contact.
- (iii) Each entry in the record is to be dated.
- (iv) Identified after each entry in the record should be the name, signature or initials of the veterinarian responsible for the entry. Entries made by non-veterinary staff should be recorded with the name or initials of the employee.
- (v) Records must be retained for a period of at least five years from the time of the last entry.

(c) Electronic records

- (i) It is the responsibility of the member to ensure that all legal requirements and professional expectations for record keeping are met, regardless of the system selected for creation storage and management.
- (ii) If electronic records are utilized, it is the responsibility of the member to ensure that adequate security provisions are in place.

(d) Itemized minimum requirements

- (i) Individual or herd/stable identification (including breed and sex where applicable)

- (ii) If individual advice is given the name, tattoo, ear tag number, color, or other distinguishing features of the animal should be recorded.
- (iii) The client's name, phone/cell number, address, and alternate contact.
- (iv) Date of each service.
- (v) A history of the presenting complaint.
- (vi) The relevant information regarding the particular assessment, investigation (including laboratory tests and results), and treatments prescribed.
- (vii) A note of any professional advice regarding the individual or herd, as well as an indication as to whom the advice was given if other than the owner.
- (viii) A complete record of all written prescriptions and drugs that the member has prescribed and/or dispensed.
- (ix) A copy of any report prepared by the member in respect to the individual or herd.
- (x) The withholding time of respective drugs prescribed or dispensed.

#### 19.4.2 Surgical and anesthetic logs

- (a) The following must be entered into the surgical log alone or in combination with the surgical log for each surgery performed.
  - (i) The date of the procedure.
  - (ii) The identification of the client.
  - (iii) The age, breed, sex, estimated weight, and identity of the patient.
  - (iv) Name dose and route of all anesthetic agents, antibiotics, and other pharmaceuticals.
  - (v) The nature of each procedure.
  - (vi) Pre- and post-anesthetic condition.
  - (vii) Any special circumstances relating to the procedure itself or where it was performed.

#### 19.4.3 Drug prescription

(a) A member who prescribes a drug shall make a written record showing,

- (i) The name and address of the owner of the animal or group of animals for whom the drug is prescribed.
- (ii) The name, strength and quantity of the drug prescribed.
- (iii) The directions for use.
- (iv) The date the drug is prescribed.

#### 19.4.4 Controlled substances

(a) A member who dispenses a controlled substance shall keep a controlled substance register in which the following is entered,

- (i) The date of dispensing.
- (ii) The name of the owner and animal for which the drug was dispensed.
- (iii) The name, strength, and quantity given.
- (iv) The balance at hand of the respective drug.

#### 19.4.5 Withholding time

(a) A member who dispenses any drug to an animal intended for use in food production shall record the following in the animal or herds individual record,

- (i) The name, dose, and strength of the drug being prescribed.
- (ii) The name of the owner and animal/group for which the drug was prescribed.
- (iii) The container the drug is allotted in shall be labeled with the following:
  - (a) The name of the drug
  - (b) The drug's DIN
  - (c) The concentration of the drug
  - (d) The expiry date

- (iv) The published withdrawal time for any approved drug prescribed.
- (v) The established withdrawal time for unapproved drugs deemed essential for use in the patient. If no withdrawal time is established, the practitioner shall record a mandatory 6 month withdrawal time and advise the owner that the withdrawal time may be substantially longer than the recommended time (the mechanism for this is still being worked out by the CFIA).
- (vi) The name of any drug prohibited for use in food producing equines (see Annex 1)

#### 19.4.6 Disclaimer

- (a) Any member who examines a horse is advised to provide a disclaimer related to the scope of the examination of the animal in question (see examples below)
  - (i) I hereby certify that I have examined the above described horse on this day and found no significant signs of disease, injury or physical abnormalities, except for those recorded.
  - (ii) This examination is intended to assist the prospective buyer. Should the buyer wish to obtain warranty covering matters such as exact height/age, freedom from vices, **the non-administration of drugs** prior to the examination, the horse's breeding performance record or the horse's continued soundness, the buyer should seek such warranty from the seller as these matters are not the responsibility of the veterinarian.

Clinic or  
hospital basic facility

- #### 19.5 When facilities are used for the examination, treatment or hospitalization of animals:
- (a) all floors of the animal hospitalization area shall be of water-impervious material, and shall be well drained.
  - (b) all interior walls of the facilities shall be tiled, enameled or painted so that they can be easily cleaned.
  - (c) all working surfaces of the facilities shall be of such construction as to permit disinfection and proper cleanliness.
  - (d) facilities should be clean at all times.
  - (e) refuse shall be stored in closed containers at the facilities and not be allowed to accumulate unduly.
  - (f) equipment and space for biopsies and necropsies shall be available in the facilities and be used routinely, where such procedures are indicated.

- (g) parenteral fluids shall be available in the facilities. (h) hospitalized animals shall be seen at the facilities by a professional staff member at least twice daily.
- (i) hospitalized animals shall be fed at the facilities an adequate diet.
- (j) an area shall be provided at the hospital facility where hospitalized animals may be exercised daily if indicated.
- (k) in-patients shall be bathed or groomed at the facilities as frequently as need be.
- (l) patients shall be kept under regular observation at the hospital facilities by lay staff during the working day.
- (m) hospitalized patients and hospital premises shall be checked as required at night.
- (n) the following basic equipment shall be available in large-

Clinic or hospital basic equipment

Animal or small-animal facilities.

- (i) otoscope, ophthalmoscope, stethoscope and thermometer;
- (ii) biologics refrigerator;
- (iii) a working steam sterilizer of sufficient size for syringes, instruments, surgical packs, etc. must be present in the facility. A gas sterilizer may be present, but it is not a substitute for the steam sterilizer.
- (iv) Sterilized materials must be labeled with the date of sterilization and the name or initials of the person who performed the sterilization.
- (v) X-ray and other laboratory facilities shall be readily available if they do not exist on the premises.

Surgical equipment

- (o) adequate surgical equipment shall be available in large and small-animal hospital facilities in order to properly perform the procedures that are being done at the hospital in a separate and distinct area exclusively for surgery.
- (p) surgical procedures shall be carried out by approved aseptic techniques.

Aseptic techniques

Small animal facility

19.6 The following separate rooms shall be provided in facilities used in a small-animal practice:

- (a) examination and treatment room;
- (b) surgery room;
- (c) hospitalization facilities with individual animal housing units,
- (d) waiting room for the convenience of patients; and
- (e) isolation facilities.

Ambulatory practice

19.7 Certain minimum standards shall be observed in all vehicles Associated with a veterinary facility:

- (a) all vehicles and equipment associated with facilities shall be clean, neat, and in good repair;
- (b) clean coveralls or other outer garments shall be available for each call outside the hospital;
- (c) footwear shall be cleaned and disinfected after each professional call;

- (d) syringes, instruments, intravenous apparatus and parenteral medication shall be sterile or sterilized for each procedure;
- (e) obstetrical sleeves should be used for all rectal and vaginal procedures;
- (f) adequate refrigeration is required in the vehicles;
- (g) X-ray and other laboratory facilities shall be readily available if they do not exist on the premises;
- (h) adequate equipment shall be available in order to properly perform procedures that are being done;

Anesthetic 19.8 In every hospital certain minimum anesthetic equipment shall be readily available and certain procedures shall be practiced including:

- (a) the maintenance of an anesthetic log for all general anesthetic procedures containing client and patient identification, pre-anesthetics and anesthetics used, procedures performed and remarks;
- (b) all necessary equipment and materials to administer pre-anesthetic, local anesthetic, injectable general anesthetic and gaseous anesthetic including a gaseous anesthetic machine, oxygen supply and endotracheal tubes;
- (c) a respiratory or cardiac monitor;
- (d) equipment to prevent and alleviate hypothermia during and post surgery;
- (e) a gas scavenger system to remove waste gas;
- (f) specific narcotic antagonists for narcotics on the premises.

Radiology 19.9 In every hospital certain minimum radiology equipment shall be readily available and certain procedures shall be practiced including:

- (a) the maintenance of a radiographic log that contains owner and patient identification and exposure parameters;
- (b) equipment and facilities meeting all provincial and federal standards and adequate to produce diagnostic radiographs;
- (c) protective equipment including;
  - (i) a collimator
  - (ii) at least two protective aprons (minimum 0.5 lead equivalent) long enough to cover the wearer's knees;
  - (iii) at least two pairs of gloves or mitts (minimum 0.5 lead equivalent) with cuffs;
  - (iv) monitoring badges from the Radiation Protection Division, Health and Welfare Canada for all persons working in the area of radiology;
  - (v) the permanent marking of all radiographs with the clinic name, date and patient identification
  - (vi) at least two thyroid protectors.

19.10 Laboratory

- (a) The facility contains,
  - (i) functioning microscope, microscope slides and cover slips,



- (ii) centrifuge and centrifuge tubes,
- (iii) microhematocrit centrifuge, microhematocrit capillary tubes and tube sealant,
- (iv) refractometer,
- (v) urinalysis test strip or tablet reagents, or both,
- (vi) staining solutions and chemicals for blood, urine and cytology examinations,
- (vii) forms or other method for recording laboratory test results
- (viii)

The centrifuges required by items (ii) and (iii) maybe the same if the machine is suitable for both types of functions.

- (b) The following investigation procedures can be performed within the facility or there is evidence of an arrangement that such procedures are performed by a diagnostic laboratory or there is a suitable combination for the performance of such procedures,
  - (i) hematology,
  - (ii) biochemistry,
  - (iii) immunology,
  - (iv) cytology,
  - (v) microbiology,
  - (vi) histopathology,
  - (vii) parasitology.

## 20. INSPECTION

Supervision & certification of standards

20.1 The Licensing Board shall oversee, and upon request certify that The standards of each practice are being observed by veterinarians engaged in the practice of clinical veterinary medicine.

Submission to inspection

20.2 For the purpose of certification and enforcement of these bylaws, All licensees having premises where veterinary practice is performed shall submit, upon notification, to an inspection by the Licensing Board representatives.

Inspection, frequency

20.3 Inspections shall be performed at least once every 3 years or more frequently as deemed necessary by the Licensing Board.

Inspection fee

20.4 An inspection fee to cover the costs of each inspection may be levied by the Association and is payable by the person so levied.

## 21. DISCIPLINE AND COMPLAINT PROCEDURE

Jurisdiction of Council

21.1 The Council has jurisdiction to discipline members of the Association, subject to Section 9 of the Act.

Jurisdiction of Licensing Board

21.2 The Licensing Board has jurisdiction to discipline licensees subject to Section 6) of the Act.

Complaints

21.3 Council has jurisdiction to investigate complaints.

Complaints committee

- 21.4 (a) Complaints Committee, chaired by the Registrar, will be established as a Committee of Council.
- (b) Council shall appoint five members to the Committee one of whom shall be a non-veterinarian; and the rest are from amongst the members of the PEIVMA. Other than the

Registrar, Council members may not serve on the Complaints Committee.

- (c) The Quorum for the Complaints Committee is set at three members independent of the chairperson.
- (d) Members of the Committee shall hold office until their successors are appointed or until any hearings which are in process are completed.
- (e) The Council may, at any time, remove any member of the Committee or appoint a new or additional member.

Eligibility to file a complaint

21.5 The following persons are eligible to file a complaint with the council:

- (a) any applicant for registration or license;
- (b) any person registered under the Act; and
- (c) any person who is or was a client of a member of the Association who wishes to complain about the services, fees, or professional activities of a member of the Association, but only if such services, fees or professional activities affected such client directly and personally.

Filing a complaint

21.6 Any person eligible to make a complaint may file a complaint respecting an action, inaction, decision or policy of the Licensing Board, the Council or any officer, official or member of the Association.

Form of a complaint

21.7 Every complainant shall file a complaint on a form prescribed by the Council setting forth therein such information as is requested on the form and shall file the completed form with the Registrar of the Association.

Mediation by Registrar

21.8 The Registrar, upon receipt of a written complaint against a member signed by one or more persons, shall attempt to mediate the complaint immediately, if possible.

- 21.8 (a) The Registrar, upon receipt of a written complaint against a member or former member signed by one or more persons shall attempt to mediate the complaint immediately with the complainant, if possible;
- (b) If the Registrar is in conflict or named in the complaint he will notify Council, who will then appoint a member who is not on Council to oversee the complaint.

Preliminary investigation by Committee

21.9 If, in the opinion of the Registrar, the mediation attempt is unlikely to be successful, the Registrar will refer the complaint within ten (10) working days of notice of the initial complaint to the Complaints Committee which will conduct a preliminary investigation.

Notification of Preliminary Investigation

21.10 When a preliminary investigation is to be made, the Registrar shall give notice in writing, by registered mail, to the member who is subject of the complaint, and any other members named in the complaint, and such notice shall include a copy of the complaint.

Representation by subject of complaint

21.11 The subject of the complaint will be given 30 days following receipt of the notice of the preliminary investigation, in which to submit in writing to the Committee, any explanations or

representations the subject of the complaint may wish to make concerning the matter.

Powers of complaint Committee

- 21.12 (a) The Committee may proceed with the investigation if the subject of the complaint fails to respond within the time specified by the Committee.
- (b) The Committee may make such inquiries as it deems necessary in order that it is able to conduct a thorough investigation into the allegations.
- (c) The Committee will examine, or make every reasonable attempt to examine, all records, and other documents related to the complaint in a timely fashion.
- (d) The Committee may attempt mediation.

Termination of Investigation

- 21.13 The Complaints Committee may terminate an investigation at any time if it is of the opinion that
- (a) the complaint is frivolous or vexatious, or
- (b) there is insufficient evidence of unskilled practice of the profession or unprofessional conduct.

Notice of Termination

- 21.14 On terminating an investigation, the Complaint Committee shall Direct the Registrar to serve on the subject of the complaint and on the complainant, if any, a notice that the investigation has been terminated.

- 21.14 (a) On terminating an investigation, the Complaint Committee shall direct the Registrar to serve on the subject(s) of the complaint and on the complainant, if any, a notice that the investigation has been terminated within ten (10) working days of the decision, by registered mail.
- (b) Further, in every case of a decision under subsection 21.14 (a), the notice thereof to the member(s) and the complainant must include:
- (i) the reason for the decision; and
- (ii) instructions on the right, and how to apply, for a review of the decision.

Appeal by Complainant

- 21.15 A complainant who is served with a notice under subsection (21.14) may, Secretary Treasurer of the PEIVMA within 30 days of receipt of the notice under subsection (21.14) appeal that decision to the Council.

Decision on Appeal

- 21.16 On an appeal under section (21.15) or referral of a complaint by the Complaint's Committee, the Council shall determine whether:
- (a) the complaint is frivolous or vexatious, or
- (b) there is insufficient evidence of unskilled practice of the profession or unprofessional conduct, or
- (c) the complaint shall proceed to a hearing of Council.

Referral of Complaint

- 21.17 If the Committee, or Council after an appeal, determines that there is cause for a hearing, the Committee will refer the complaint, on the prescribed form, to the Secretary-Treasurer of the Association.

Notice of Hearing

- 21.18 Upon referral of the complaint by the Complaints Committee, the Secretary-Treasurer shall notify the President of the complaint and shall within fourteen days of receipt by the Secretary-Treasurer notify the subject of the complaint and complainant of the time and place of the hearing.

Hearing Date	21.19	The President shall prescribe a date for a hearing to review the complaint; the hearing shall be held within thirty days of the referral of the complaint by the Complaints Committee.
Right to be heard	21.20	The complainant may attend the hearing in person with or without counsel at the complainant's expense and may call witnesses such persons as he may deem advisable for the purpose of supporting his cause, and any member of the Association who is the subject of a complaint shall be given notice of the hearing and may appear in person with or without counsel at the member's expense, and may call as witnesses such persons as he may deem advisable for the purpose of protecting or defending himself in relation to the complaint.
Representation of Council	21.21	The Council may be represented at any hearing by counsel and may call as its witnesses any persons whom it thinks could assist in determining the truth of any allegation, or otherwise assist in reviewing the complaint on its merits.
	21.22	The Council shall within thirty days from the date of its hearing on a complaint render a decision on such complaint and shall notify the complainant and such other persons as the Council may deem advisable of the decision.
Reprimand	21.23	The Council may reprimand any member of the Association who as a result of a hearing under this section appears to have justified the reprimand; the Council may publish in the Association minutes a record of the reprimand and its reasons therefore.
Discipline for unethical practices	21.24	The Council may discipline any member of the Association after a hearing under this section for unethical practices as determined under the "Rules of Professional Ethics" prescribed by the bylaws.
Powers of Council if charge proven	21.25	<p>If a charge set forth in a complaint is proven, the Council may in addition to, or as an alternative to 21.24:</p> <ul style="list-style-type: none"> <li>(a) restrict the privileges of the member for such a period as they see fit;</li> <li>(b) suspend the member's registration in the Association for such period as they see fit; or</li> <li>(c) remove his name from the register of the Association for such a period as they see fit;</li> <li>(d) require a member to undertake remedial action such as retraining courses or compulsory competency evaluations for such a period as they see fit;</li> <li>(e) require the member to practice under the supervision of a designated member for such a period as they see fit;</li> <li>(f) report the name and details of the discipline action to any relevant discipline database of which PEI Veterinary Medical Association is a member.</li> <li>(g) direct the Registrar to notify the current employer or partners of the member, and such other members who work with the member, if deemed necessary by Council.</li> </ul>
Reinstatement after payment of fees	21.26	A member whose name has been removed from the register for non-payment of fees may make application for reinstatement in writing to the Registrar subject to a reinstatement penalty as set

by council and after paying to the Secretary-Treasurer all arrears of fees due to the Association; such person may, at the discretion of the Council, be reinstated to the registration of the Association after such payment and his name entered in the register.

## 22. CEASING OF PRACTICE

22.1 Where a member of the Association ceases to practice in the province, he shall forthwith notify the Registrar that he has ceased to practice.

## 23. PROSECUTIONS

23.1 The Association shall commence all prosecutions for violations of the Act or these bylaws.

Amend Bylaws

## 24. AMEND BYLAWS

24.1 Any member desiring the Council to amend these bylaws must give written notice of such proposed amendments to the Secretary-Treasurer at least six weeks prior to the first general meeting of the fiscal year, and the Council shall cause the proposed amendment to be considered at that general meeting

Decision on a complaint

## 25. RULES OF PROFESSIONAL ETHICS

Preamble

25.1 The honour and dignity of the veterinary medical profession lies in its obedience to a just and reasonable code of ethics set forth herein as a guide to the members. The object of this code, however, is more far-reaching for exemplary professional conduct not only to uphold honour and dignity, but also enlarges our sphere of usefulness, exalts our social standards and promotes the science we cultivate. Briefly stated, our "Code of Professional Ethics" is the foundation of the individual and collective efforts of veterinarians. It is based on Canadian Veterinary Oath taken at time of graduation and on the Golden Rule: As a member of the veterinary medical profession, I solemnly swear that I will use my scientific knowledge and skills for the benefit of society. I will strive to promote animal health and welfare, relieve animal suffering, protect the health of the public and environment, and advance comparative medical knowledge. I will practise my profession conscientiously, with dignity, and in keeping with the principles of veterinary medical ethics. I will strive continuously to improve my professional knowledge and competence and to maintain the highest professional and ethical standards of myself and the profession. CVMA 2004

25.1.2 The veterinarian should first of all be a good citizen and a leader in movements to advance community welfare; he should commit no act that will reflect unfavourably upon the worthiness of his profession.

Conduct of a gentleman

25.1.3 Conduct characterizing the personal behaviour of a person to deport themselves in accordance with the spirit of the profession shall be the conduct required of a member.

Deportment

25.1.4 It is a solemn duty of all members of the Association to deport themselves in accordance with the spirit of this code.

25.1.5 Veterinarians by virtue of their education, experience and in the context of a veterinarian/client/patient relationship, are in a position to observe occasions of animal abuse and/or neglect. Veterinarians have a moral obligation to report suspected cases of abuse and/or neglect to the appropriate humane agencies as outlined on the PEIVMA website under 'abuse reporting'.

Code not exhaustive

25.1.6 This code is not intended to cover the entire field of veterinary medical ethics. Professional life is too complex to classify into a set of rules, one's duties and obligations to his clients, colleagues, and fellow citizens.

#### 25.1.7 VETERINARIAN/CLIENT/PATIENT/RELATIONSHIP

25.1.7.1 An appropriate veterinarian/client/patient/relationship exists when: (a) the veterinarian has assumed the responsibility for making medical judgments regarding the health of the animal(s) and the need for medical treatment, and the client (owner or caretaker) has agreed to follow the instructions of the veterinarian; and when (b) there is sufficient knowledge of the animal(s) by the veterinarian to initiate a general or preliminary diagnosis of the medical condition of the animal(s) by virtue of examination of the animal(s) and/or by medically appropriate and timely visit(s) to the premises within the previous 12-month period; and when (c) the practising veterinarian is readily available for follow up in case of adverse reactions or failure of the regimen of therapy.

25.1.7.2 Prior to the dispensing of prescription drugs a veterinarian/client/patient relationship must be recognized, (as defined through points 25.1.7.1.(a)-(c).

#### 25.2 PROFESSIONAL CONDUCT

Use of degree to which not entitled

25.2.1 No member shall use a college or university degree to which he is not entitled or any degree or title granted by an institution declared unworthy by contemporary institutions of its class.

Berating professional standing of another

25.2.2 No member shall belittle or injure the professional standing of another member of the profession or unnecessarily condemn the character of his professional acts.

Adherence to the law

25.2.3 Members shall comply with the law governing their obligations to their clients and shall obey without fault the official public regulations and laws governing their acts.

False certificates of health

25.2.4 The issuing of false certificates of health on public documents and careless compliance with official regulations that the veterinarian is entrusted to enforce are deemed violations of professional honesty.

Accepting fee from seller when acting for buyer

25.2.5 When employed by the buyer to inspect an animal soundness, it is unethical to accept a fee from the seller; the acceptance of such a fee is prima facie evidence of fraud. On the other hand, it is deemed unethical to criticize unfairly an animal about to be sold. The veterinarian's duty in this connection is to be a just and honest referee.

Assisting laymen to diagnose, etc.

25.2.6 No member shall willfully place his professional knowledge, attainments, or services at the disposal of any lay body, organization, group or individual by whatever name called, or however organized, for the purpose of encouraging unqualified groups and individuals to diagnose and prescribe for the ailments and diseases of animals. Such conduct is especially reprehensible when it is done to promote commercial interest and monetary gain. Such deportment is beneath the dignity of professional ethics and practice; it can be harmful to both the welfare of the animal-owning public and the veterinary profession; it violates principles of human or public functionaries.

Cosmetic surgery

25.2.7 It is considered unprofessional conduct for a veterinarian in Prince Edward Island to perform cosmetic surgery on any animal. Cosmetic surgery is defined as non-therapeutic surgical procedures (i.e. of no medical benefit) which are performed purely to alter the appearance of an animal. Surgery performed due to injury or for reasons of animal health is not considered to be cosmetic surgery.

The following are examples of cosmetic surgery:

- (a) Tail docking in the canine, equine and bovine species
- (b) Tail nicking and setting in the equine species
- (c) Ear cropping in the canine species.

## 25.4 EMERGENCY SERVICE

25.4.1 When called in an emergency as a substitute for a fellow practitioner in his absence, it is the veterinarian's duty to render the necessary service and then turn the patient over to his colleague upon his return.

Radical changes in treatment

25.4.2 In making emergency calls upon a patient already under treatment, it is unethical to institute radical changes in the

treatment previously prescribed in such a way as to attract unusual attention.

Advice by consultant limited

25.4.3 When in the course of his authorized official duty, it is necessary for a veterinarian to render service in the field of another veterinarian, it will be considered unethical to offer free or compensated service or advice other than that which comes strictly within the scope of his official duty.

## 25.5 HOLDING OUT

25.5.1 (a) No member shall publish, display, distribute or use, or permit, directly or indirectly, the publication, display, distribution or use of any advertisement, announcement or similar form of communication related to the member's professional services or ancillary services or to a member's association with or employment by, any person, except as permitted by Part 25.5.

(b) In this Part, "ancillary services" means boarding, grooming, funeral services and sales of foods, supplies and other goods and services used by or with animals that is provided by a member whether as part of, or separately from, his or her practice of veterinary medicine.

25.5.2(1) Except as provided in Part 25.5, a member may communicate factual, accurate and verifiable information that a reasonable person would consider relevant in the choice of a veterinarian (including the availability of ancillary services) that:

(a) is not false, misleading or deceptive by the inclusion or omission of any information;

(b) is readily comprehensible, dignified and in good taste;

(c) contains no testimonial or comparative statements;

(d) contains no information in respect of a fee or price; and

(e) contains no reference to a specific drug, appliance or equipment.

(2) Despite clause 25.5.2(1)(d), a member may display or distribute within the veterinary facility where he or she practices a fee schedule stating the fee for some or all professional services (or ancillary services) or an explanation of the basis for the calculation of such fees, or both.

(3) The location and size of a displayed fee schedule permitted by subsection (2) shall be such that it cannot be read by a person outside the veterinary facility.

25.5.3 (1) A member shall not cause or permit, directly or indirectly, his or her name to appear in any communication offering to the public any product or service other than the member's professional services and ancillary services.

(2) A member shall not be associated with the advertising or promotion of any product or service other than the member's professional services and ancillary services.



- (3) Despite subsections (1) and (2), a member may be associated with the advertising of a product or service and permit his or her name to appear in a communication offering to the public a product or service in a printed publication intended to be read principally by veterinarians.
- 25.5.4. A member shall not participate directly or indirectly in a system in which another person steers or recommends clients to a member for a professional service or an ancillary service.
- 25.5.5 A member shall not contact or communicate with, or attempt to contact or communicate with, any person in order to solicit patronage of professional services or ancillary services.
- 25.5.6 (1) Despite Section 25.5.5, a member may:
- (a) send written communications, consistent with Section 25.5.1(a), generally to persons not known to need professional services or ancillary services but who might in general find the availability of such services useful
  - (b) distribute to his or her regular clients general information about animal health, preventive medicine and recent developments in veterinary medicine; and
  - (c) inform his or her regular clients, in writing or by telephone, about health maintenance procedures that are due to be carried out, including a due date for immunization.
- (2) For the purposes of subsection (1):
- (a) a person is a regular client of a member if:
    - (i) the person uses the professional services of the member regularly and with reasonable frequency; and
    - (ii) the person has not requested the transfer the records for the person's animal to another member;
  - (b) a person who uses the professional services of a member who is in the employment of another member shall be deemed to be a client only of the employer member.
- (3) A communication authorized by clause (1) (a) shall be clearly and prominently marked "advertisement" on each page.
- 25.5.7 (1) The name used by a member in the practice of veterinary medicine shall be the same as the name in which the member is entered in the register.
- (2) A member may name the veterinary facility in which he or she carries on an independent or private practice of veterinary medicine with a designation approved by the Council.
- (3) The designation under subsection (2) shall contain:

- (a) a geographical reference appropriate to the location of the facility or the surname of a member who is or was associated with the practice;
- (4) The Council shall not approve the designation if it is of the opinion that the proposed designation:
  - (a) is inconsistent with subsection (3);
  - (b) is improper or unfitting; or
  - (c) may tend to be confused with the designation of another veterinary facility.

#### 25.5.8 Letterhead and signs

Letterhead

25.5.8.1 (a) subject to subsection (b) the letterhead of a member should be modest, announcing at most, name, title, address, telephone number, office hours, and a preference for a specified species;

Announcement of limited practice

(b) if a member has a limited license the member may announce on his or her cards or letterhead that the practice is so limited, but such cards and letterhead must also indicate that he or she is a member of the veterinary profession and thus distinguish him or her from groups of irregular practitioners who are not eligible to membership in the Association;

Display signs on facilities

(c) If a member is also a member of a professional veterinary group, such designation may be designated on the letterhead and cards of the member.

#### 25.6 TESTIMONIALS and GUARANTEES

Testimonials

25.6.1 Members of the Association shall not write testimonials as to the virtue of proprietary remedies or foods except to report the results of properly controlled experiments or clinical studies; such reports shall only be given publicly through a veterinary journal or at a meeting of a veterinary association.

Guarantees

25.6.2 It is unethical to guarantee a cure.

Attracting public attention

25.6.3 Members of the Association shall avoid the impropriety of employing questionable methods to attract public attention or boast of possessing superior knowledge or skill in the treatment of any disease.

25.6.4 Where a corporation in which a member or the spouse of a member holds shares, or by which a member is employed, contravenes the provisions of s. 25.5 of these Bylaws, such contravention may be considered by the Association as unethical conduct on the part of the member who holds or whose spouse holds such shares or who is so employed by the corporation.

#### 25.7 ILLEGAL PRACTICES

Illegal practices, aiding

25.7.1 It is unprofessional to aid in illegal practices of others.

Assisting in illegal conduct

25.7.2 Members of the Association shall not encourage or assist any person to practice anywhere in violation of the laws governing the practice of veterinary medicine.

Reporting illegal practices

25.7.3 It is the duty of members of the Association to report illegal practices to the proper authorities and the Council of the Association.

Pharmacists

25.8 Licensed pharmacists should be recognized by members of the veterinary profession and their services should be utilized; but any pharmacist, unless he is also qualified as a veterinarian, who assumes to diagnose and prescribe for such animals or for the handling of contagious and infectious diseases of animal, should be denied such recognition and support, since his activities may be viewed as prejudicial to the public interest, contrary to laws governing veterinary medical practice, and in violation of provincial and federal laws made and provided for the control of animal diseases.

Use of Association's endorsement

25.9 No member or employee of the PEI Veterinary Medical Association shall use the name of the Association in connection with the promotion or advertising of any commercial produce or commercial service or in any way that would imply Veterinary Medical Association endorsement of such a product or service without written permission from the Council.

## 26. CONFLICT OF INTEREST

- 26.1 (a) In this Part, "related person" means a person connected with a member by blood relationship, marriage or adoption, and
- (i) persons are connected by blood relationship if one is the child or other descendent of the other or one is the brother or sister of the other;
  - (ii) persons are connected by marriage if one is married to the other or to a person who is connected by blood relationship to the other; and
  - (iii) persons are connected by adoption if one has been adopted, either legally or in fact, as the child of the other or as the child of a person who is so connected by blood relationship, except as a brother or sister, to the other.
- (b) A member has a conflict of interest where the member, or a related person, or an employee or employer of the member, directly or indirectly,
- (i) enters into any agreement, including a lease of premises, under which any amount payable by or to a member or a related person is related to the amount of fees charged by the member; or
  - (ii) receives, makes or confers a fee, credit or other benefit by reason of the referral or transfer of an animal or a specimen from or to any other person.

- (c) Despite clause (2)(a), a member may enter into a partnership agreement with another member under which the drawings, interest or remuneration of the partners is related to the amount of fees charged by them.
- 26.2
- (a) In this section:
    - "employee" includes an agent;
    - "employer" includes a principal.
  - (b) A member has a conflict of interest who performs a veterinary service in the course of employment by any person, other than another member, except a service provided to the member's employer or in accordance with subsection (d).
  - (c) For the purposes of the exceptions set out in subsection (b):
    - (i) a member who performs a veterinary service for an animal shall be deemed to perform the service to the owner of the animal which received the service; and
  - (d) A member will not be in a conflict of interest only by virtue of the fact that he or she practises veterinary medicine as:
    - (i) an employee of the Crown in right of Canada or of Prince Edward Island or an agency of the Crown;
    - (ii) an employee of the Atlantic Veterinary College of the University of Prince Edward Island;
    - (iii) an employee of an individual, partnership or corporation selling food or drug products for use in food producing animals if, in the course of the employment:
      - (a) the member performs professional services related only to the employer's products and only for an established customer of the employer and at the customer's farm or similar establishment, and
      - (b) the member takes all reasonable steps to notify the normally attending veterinarian of the member's proposed visit and the reasons for it so that the normally attending veterinarian can discuss the matter with his or her client, and, if desirable, arrange to meet the member before or at the visit;
    - (iv) an employee of the personal representative of a deceased member or the guardian of an impaired member for a reasonable period of time after the member's death or the commencement of the member's impairment to settle matters.
- 26.3
- (a) A member has a conflict of interest if the member or a partner or associate of the member:
    - (i) inspects or assesses an animal on behalf of both the seller and the buyer of the animal; or
    - (ii) being regularly engaged by the seller or buyer of an

animal, inspects or assess an animal on behalf of the other party to a sale.

- (b) Despite subsection (a), a member, or a partner or associate of the member, may inspect or assess an animal on behalf of both the buyer and the seller of the animal or, where one or more of them are regularly engaged by the seller or buyer of an animal, any of them may inspect or assess an animal on behalf of the other party to a sale if, before accepting engagement by the second party, he or she:
  - (i) informs both parties of the conflict of interest and of the circumstances giving rise to it;
  - (ii) informs both parties that no information received by the member, or a partner or associate of the member, in connection with the transaction can be treated as confidential so far as the other party is concerned; and
  - (iii) after informing the parties under clauses (i) and (ii), obtains the consent of both parties to inspect or assess the animal on behalf of both of them, which shall be in writing unless it is impracticable to obtain the consent in written form.

26.4 A member found to be in a conflict of interest under the provisions of these Bylaws or who acts in contravention of these Bylaws may be considered by the Association to be guilty of improper and unprofessional conduct.