

IMPORTANT UPDATES: Covid-19 and the Veterinary-Client-Patient-Relationship

For a veterinarian to practice medicine in the State of North Carolina they need to first establish a veterinary-client-patient-relationship (VCPR).

A VCPR is established only when a veterinarian examines an animal in person, and is maintained by regular veterinary visits as needed to monitor an animal's health. If a VCPR is established but a veterinarian does not regularly see the animal afterward, the VCPR is no longer valid and it would be illegal and unethical for a veterinarian to dispense or prescribe medications or recommend treatment without recently examining the patient.

A valid VCPR cannot be established online (virtually), via email, or over the phone. However, once a VCPR is established, it may be able to be maintained between medically necessary examinations via telephone or other methods; but it's up to the veterinarian's discretion to determine if this is appropriate and in the best interests of an animals' health.

A VCPR is present when all of the following requirements are met:

- The veterinarian has assumed responsibility for making clinical judgments regarding the health of the patient, and the client has agreed to follow the veterinarians' instructions.
- The veterinarian has sufficient knowledge of the patient to initiate at least a general or preliminary diagnosis of the patient's medical condition. This means the veterinarian is personally acquainted with the keeping and care of the patient by virtue of a timely and medically appropriate examination of the patient
- The veterinarian is readily available for follow-up evaluation or has arranged for the following: veterinary emergency coverage, and continuing care and treatment.
- The veterinarian provides oversight of treatment, compliance and outcome.
- Patient records are maintained.

What is a "timely and medically appropriate examination of the patient by the veterinarian"

This time frame can vary greatly due to the age of the animal and existing health conditions. This decision can be made by the VCPR-DVM with the best interests of the client and patient in mind. The following are examples:

- A young healthy animal may only need to be seen once a year to establish a VCPR. However, an older animal will require more frequent examinations to ensure their health status.
- An animal with existing health problems such as epilepsy, heart disease, renal disease, etc. will require more frequent examinations to maintain a valid VCPR.

Within an established VCPR - A veterinarian may remotely gather essential veterinary medical information from the animal owner or other caretaker; access the patient's medical records; and utilize patient information from a variety of sources (photos, videos, etc.).

Without an established VCPR - The veterinarian may provide general advice but must specifically stay clear of diagnosing, prognosing, or treating patients. Advice should not be specific to an individual

animal, diagnosis or treatment. In addition to being helpful, use the time to acquaint the caller with the value of your practice and services and try to schedule an appointment for the caller if the case is urgent, or if not, for a time after the crisis has eased.

Recommendations of the NCVMB in the face of the Covid-19 pandemic:

Staying open during the pandemic

Veterinary facilities have the right, as they always have, to determine their hours and the type of cases they see. This decision should be made in the current face of Covid-19 with the best interests and safety of the clients, your employees, and patients. Veterinary practices should consider deferring elective procedures to preserve medical supplies when circumstances call for that.

Conserving Personal Protective Equipment (PPEs)

Do your best to conserve PPEs by possibly limiting or eliminating elective services at your practice or, minimally, by being thoughtful about their value. [Other PPE conservation strategies include:](#)

- Use reusable gowns
- Use non-sterile gowns when there is a low risk of contamination
- Continue to use one facemask when transmission risk is low
- Use expired PPE materials around patients where transmission risk is low

Providing Curbside Care

Many practices are giving clients the option to call the practice once they arrive. When a DVM is ready, the staff calls the client and then goes to the parking lot to bring the animal inside, diagnose the patient, and then return the patient to the car along with appropriate discharge instructions and/or meds. Have your client care team invoice the client over the phone just as soon as the exam is over. This minimizes the risk of disease exposure to everyone involved.

Communicate your concerns about the possibility of exposure - for example:

"If you are concerned that you are infectious or have come in contact with someone who is infectious, call us, and we'll devise a plan to safely see your pet without risking anyone's health" and "In the very unlikely event that our team members have a cough or sneeze due to allergies or some other benign medical condition, they will wear a mask. We can also provide you a mask if you request it for your visit. All of our employees have been instructed to not come to work if they are showing signs of ANY flu-like illness and are being compensated for their lost time at work."

Please continue to stay up to date with the national recommendations from the government, CDC, AVMA and AAVSB.

For additional information and updates view the NCVMB's webpage at: <http://www.ncvmb.org/>

To view updates from the NCVMB and see a wide variety of information regarding the Covid-19 pandemic visit our Facebook page at: <https://www.facebook.com/NCVetMedicalBoard>