

North Carolina Veterinary Medical Board

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What is a Veterinary-Client-Patient Relationship?

90-181. Definitions

(7a) "Veterinarian-client-patient relationship" means that:

- a. The veterinarian has assumed the responsibility for making medical judgments regarding the health of the animal and the need for medical treatment, and the client (owner or other caretaker) has agreed to follow the instruction of the veterinarian.
- b. There is sufficient knowledge of the animal by the veterinarian to initiate at least a general or preliminary diagnosis of the medical condition of

the animal. This means that the veterinarian has recently seen and is personally acquainted with the keeping and care of the animal by virtue of an examination of the animal, or by medically appropriate and timely visits to the premises where the animal is kept.

- c. The practicing veterinarian is readily available or provides for follow-up in case of adverse reactions or failure of the regimen of therapy.

Veterinary Technicians vs. Employee/Assistant

As noted in 90-187.6 (c) "an employee under the supervision of a veterinarian may perform such duties as are required in the physical care of animals and in carrying out medical orders as prescribed by the veterinarian, requiring an understanding of animal science but not requiring the professional services as set forth in G.S. 90-181(6)a. **In addition, a veterinary technician may assist veterinarians in diagnosis, laboratory analysis, anesthesia, and surgical procedures.**"



DEA Requirements



The following question and answer is from the AVMA's "Veterinary Medicine Mobility Act (VMMA): FAQs for Veterinarians"

Q: *Can I now legally store my controlled substances permanently in my vehicle's storage unit?*

A: No. The VMMA only legalizes the transport and use of controlled substances away from the clinic. *It does not legalize the permanent storage of controlled substances in a truck or other vehicle. Inventory of controlled substances and records must be maintained at the registrant's principle place of business.*

However, in AVMA's conversations with members of Congress during development of this legislation, we made it very clear that veterinarians must sometimes store controlled substances securely in their vehicle during the course of practice. We will continue to advocate for increased flexibility, if or when the DEA speaks to its expectations for storage of controlled substance within a registrant's vehicle.

Veterinary Practitioners' Guide to DEA Recordkeeping

<http://www.deadiversion.usdoj.gov/pubs/manuals/pract/section4.htm>.

- Your records must show the flow of controlled substance into and out of the practice – including any time a controlled substance is acquired, dispensed, administered, distributed, stolen, lost, disposed of and inventoried;
- You must keep two physically separated files – one for Schedule II substances, and one for Schedule III-V substances (the files can be stored together);
- Your controlled substance records must be readily retrievable;
- You must store all copies of [DEA Form 222](#)* (the form used for ordering Schedule I and II controlled substances; see [example form](#) created by Midwest Veterinary Supply) in a substantially constructed, securely locked cabinet and you must immediately report to the DEA any change in a copy (or copies) of the form's status (used/unused, lost, stolen);
- You may issue prescriptions for controlled substances in writing, verbally, or electronically (using systems meeting DEA criteria), or by fax (note that a paper prescription is needed before any pharmacy can dispense a Schedule II substance). Prescriptions must include the following:
 - Date;
 - Signature of registrant;
 - DEA registration number;
 - Patient's name/address;
 - Practitioner's name/address;
 - Drug name, strength, dosage form and quantity;
 - Directions for use (frequency and route of administration); and
 - Number (if any) of refills authorized
 - Note that Schedule II drugs cannot be refilled.
 - Note that state law may restrict the ability to refill or the number of refills.
- You may transfer controlled substances to another DEA registrant but all transfers must be recorded and cannot comprise more than 5% of all the dosage units you distribute and dispense;
- You must report thefts or significant losses within one business day to the DEA, the state controlled substance authority, and local police. The occurrence must be recorded on [DEA Form 106](#);
 - Find your local DEA office
 - Find your state's controlled substance authority
- You must record controlled substance spills on [DEA Form 41](#) and keep the form on file at your facility;
- Although federal regulations require that the records be kept for at least two years, your state may require a longer time period. Check your state's controlled substance authority for the time period required (**NC requires three years**);
- Per DEA rules (check your state rules for additional requirements), you must perform a biennial (every other year) inventory which must be recorded in writing. The written inventory record must include the following:
 - Date;
 - Time of day the inventory was performed;
 - Each finished form (e.g., 100-milligram tablet);
 - Number of dosage units for each finished form. An exact count of Schedule II drugs is required; an estimate is generally satisfactory for Schedule III-V (unless the container holds >1000 dosage units);
 - Number of bottles;
 - Disposition of the controlled substances.

Veterinary Guide to Better Client Communication

The combination of good communications and excellent recordkeeping, in addition to making you a better veterinarian or technician, serves to prevent owner complaints to the NCVMB.

The following information, courtesy of DVM360 (<http://veterinarybusiness.dvm360.com/master-veterinary-procedure-client-communication?id=&pageID=1&sk=&date>) is an excellent guide in polishing your skills. Part two of this four point guide will be in the September 2017 issue of the Veterinary Bulletin.

Start thinking of client communication as a procedure. Since you speak with almost every pet owner who comes into the practice, it's actually the most common procedure you perform. And like with any procedure, you can improve your skills with practice. So stop thinking you're either a strong communicator or you're not. The following tips will help you become an expert in four key client communication skills—even if you're one of those veterinarians who prefers talking to pets rather than people.

1. WATCH WHAT THEY'RE SAYING

A large part of all communication is nonverbal—and unintentional. Your clients' unconscious body language is akin to a poker player's "tell." If you know how to read these nonverbal cues, you can tell what a client is thinking or feeling. Case in point: How do you know when someone's angry? Usually it's because that person talks louder and changes her posture, not because she says, "I'm so mad!"

Often clients' nonverbal communication actually contradicts what they're saying. And body language doesn't lie. How many times have you asked clients if they understand, only to hear a soft "yes" in response while the client makes no eye contact? Nonverbal cues like this are signs that your clients really don't understand. Paying attention to a client's tone of voice, facial expression, and posture will allow you to clarify the situation before a critical misunderstanding occurs.

2. WALK IN THEIR SHOES

Feeling empathy is another key part of building rapport with clients. But it's not enough to imagine what a pet owner is feeling. You must *show* that you empathize or the client won't know you understand. Here are three ways you can exhibit your empathy:

See clients. Pet owners want to know that you view them as individuals rather than faceless customers. So let them know you appreciate their uniqueness by commenting on something unrelated to their pet's medical concerns. For example, ask clients who wear T-shirts emblazoned with a sports logo how their team is doing.

Clients also want you to notice the emotions they're experiencing about their pet's health issues. A good way to let them know you're tuned in is to state what you see: "You seem worried," or "You look nervous." While these statements might seem awkward or obvious, they allow clients to know that you recognize their feelings. Clients greatly appreciate these expressions. Empathetic statements end up helping you too, because they improve the bond between you and your clients. Also, a statement as simple as, "I can see this is difficult for you," can help ground a client in the midst of a difficult discussion. Acknowledging the tough emotional situation, such as a cancer diagnosis, may allow the client to refocus on the medical conversation.

You also show empathy in nonverbal ways by using gestures and an appropriate speaking tone and rate. For example, speak more quietly and slowly in times of sadness. And hand a box of tissues to any client who begins to sniffle. It's a wonderful way to show empathy.

Hear clients. Showing clients you're listening to and understanding them is another important aspect of exhibiting empathy. To improve your empathetic listening, think of the hearing-responding process as breathing. First, listen and take in what clients are saying (inhale). Then, show appreciation and understanding of their experience (exhale). Use both verbal and nonverbal methods to illustrate your understanding. Reflective listening, discussed in tip No. 4 below, covers the verbal side. Nonverbal reactions include appropriate facial expressions, nodding, making eye contact, leaning in toward the client, and so on.

Accept clients. People inherently want to be accepted. When pet owners don't feel judged, they're more likely to be honest with you, voice their concerns, and ask questions they may have otherwise been too embarrassed to mention. Showing clients you accept them also will help them see you as supportive rather than adversarial when working through difficult problems. There are three types of statements you can make to help clients feel accepted:

1. Nonjudgmental statements. Example: "You were placed in a very difficult situation."

2. Normalizing statements. Example: "It's so common for pet owners to miss these masses until they get very large."

3. Self-disclosing statements. Example: "You're not alone—my cat has behavioral issues, too."

Intentionally making these types of statements takes a conscious effort, but doing so can significantly improve the bonds you've developed with clients.

NCVMB .0207 MINIMUM FACILITY AND PRACTICE STANDARDS

(12) Recordkeeping

(A) Every veterinarian shall keep written records or records stored via computer/word processing and easily retrievable of the animals treated. These records shall include but not be limited to pertinent medical data such as dates and type of vaccinations and all medical and surgical procedures on a daily basis, radiographs and laboratory data.

(B) Records shall be kept for a period of three years following the last office visit or discharge of such animal from a veterinary facility.

(C) Records shall be maintained by individual animal for companion pet animals examined or treated.

(D) The recordkeeping requirement shall not apply to the treatment of economic animals except as provided in Paragraph (11)(C) of this Rule.