

North Carolina Veterinary Medical Board

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Regulatory Bulletin

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Rules Regarding Veterinary Technicians and Veterinary Employees.

90-187.6. Veterinary technicians and veterinary employees.

(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. **Neither the employee nor the veterinary technician may perform any act producing an irreversible change in the animal.** An employee, other than a

veterinary technician, intern, or preceptee, may, under the direct supervision of a veterinarian, perform duties including collection of specimen; testing for intestinal parasites; collecting blood; testing for heartworms and conducting other laboratory tests; taking radiographs; and cleaning and polishing teeth, provided that the employee has had sufficient on-the-job training by a veterinarian to perform these specified duties in a competent manner.

Extraction of Teeth

As noted in the rule listed above, a registered technician and veterinary assistant (with sufficient training) may clean and polish teeth. The extraction of teeth represents an “act producing an irreversible change in the animal” and as such, may not be performed by anyone other than a licensed Veterinarian.



DEA Requirements



According to federal regulations, all Drug Enforcement Administration (DEA) applicants and registrants shall meet the following recordkeeping requirements:

- 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 separate 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; 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);

For more information:

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

Top Ten Most Frequent NC Radiology Violations

Information from the NC Radiology Compliance Branch

- 1) The facility Written Radiation Protection program was not available or not adequate.
- 2) Not maintaining the appropriate records (Notice of Registration (NOR), Plan Review, Report of Assembly (FDA 2579), Letter of Acknowledgement (LOA), Post room survey, and annual review of Written Safety program).
- 3) Personnel monitoring equipment has not been supplied and/or used by all occupationally exposed personnel.
- 4) The registrant failed to update the information contained in the application for registration or notice of registration no longer accurate.
- 5) The registrant failed to annually review the Written Radiation Protection program.
- 6) The registrant failed to have a copy of the "North Carolina Regulations For Protection Against Radiation" at the facility.
- 7) The registrant failed to provide a working technique chart for each diagnostic X-ray system.
- 8) There has not been an area radiation survey done within 30 days following initial operation of equipment.
- 9) Service Provider failed to submit records showing receipt, transfer, and/or disposal of radiation sources.
- 10) Annual registration fees not submitted.

<http://www.ncradiation.net/>

Veterinary Practitioners' Guide to DEA Security Requirements

According to federal regulations, all Drug Enforcement Administration (DEA) applicants and registrants shall provide effective controls and procedures to guard against thefts and diversion of controlled substances.

Practitioners should consider the following factors when evaluating their controlled substance security:

- The location of the facility;
- The type of building and office construction;
- The type of storage medium (safe, vault, or steel cabinet);
- Use of an effective alarm or detective system;
- Availability of police or security personnel;
- The quantity of the controlled substance handled;
- The number of employees, customers and/or patients who may have access to controlled substances; and
- Procedures for handling guests, visitors, and nonemployee service personnel.

Controlled substances must be stored in a securely locked, substantially constructed cabinet. If your facility's controlled substance security is found on inspection to be inadequate, a DEA investigator can require additional security measures.

Violations

Top 6 NCVMB Facility Violations in 2016

1. All controlled substances shall be stored, maintained, administered, dispensed and prescribed in compliance with federal and state laws, rules and regulations .0207 (b) 11
2. Emergency drugs shall be readily available to the surgery area .0207 (b) 9
3. No dosimetry report available .0207 (b) 13
4. If either hospitalization or radiology services are not available in the facility, the veterinarian(s) in charge of the facility shall have a written agreement with a local clinic or hospital for the provision of these services. .0208 (d)
5. Surgery shall be performed in a room designated and reserved for surgery .0207 (b) 9
6. There shall be available for surgery sterilized instruments, gowns, towels, drapes, gloves, caps and masks .0207 (b) 9

Your Medical Records and Client Financial Constraints

In clinical practice, veterinarians are very frequently limited in both diagnostic and treatment options by the owner's ability or willingness to pay for those services. When care of the animal is constrained and the animal does not do well, the owner may seek to blame the veterinarian. This may take the form of a complaint to the Board, particularly if the animal dies or subsequently needs to be euthanized.

How can this type of scenario be avoided to limit the likelihood of an unwarranted complaint to the Board? Excellent client communication is the best preventive and defensive practice, albeit time consuming. Options for payment, diagnosis and treatment should be clearly explained, seeking acknowledgement by the owner that she or he understands. *Those conversations, phone calls and/or emails should be documented in the medical record*, and/or on a consent form if a procedure or treatment is recommended but not elected by the owner.

These entries should include the owner's conversations with staff. If there is a concern that the owner may become contentious, any witness to such conversation should be noted. Board members reviewing a complaint can more quickly discern what transpired within the veterinarian-client patient relationship when client communications are well documented in the medical record.

Referral should be offered, and documented in the records, if the veterinarian believes more effective diagnostic or treatment options are available, even if the client opts to decline.

If the owner declines treatment and the animal is clearly suffering, a conversation about humane euthanasia or surrender to a humane society should occur and be noted in the record. In some circumstances, an owner may be able to make a more humane decision for the animal after speaking with a veterinarian or a veterinary technician.

Help for Impaired Veterinarians or Technicians North Carolina Veterinary Health Program

Veterinary medicine is a stressful profession that creates higher rates of depression and suicide than the general population and many categories of medical professionals. Stress, as well as other personal issues such as chronic pain, may lead a veterinarian or technician to become impaired as a result of excessive alcohol consumption and/or excessive use of opioid pain medications.

The NCVHP identifies and assists troubled veterinarians and technicians before they endanger animals or themselves. Successful intervention may help prevent drastic consequences such as loss of license or registration.

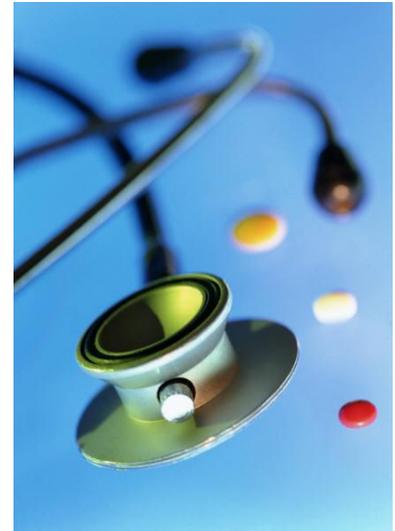
Reluctance to report an impaired colleague is understandable but does not support a positive professional outcome. The option to confidentially report a colleague to a program designed to support and monitor impaired him or her increases the likelihood of positive resolution in veterinarians and technicians.

If you know or suspect that a veterinarian or technician is impaired, third party referral to NC Veterinary Health Program is available. The process is simple, confidential, and the reporter can remain anonymous.

If you have questions or concerns about the referral,

please call to confidentially discuss your concerns. The NCVHP phone number is 877-588-8089.

www.ncvethealth.org



DEA requirement for employees who have access to controlled substances

The registrant shall not employ, as an agent or employee who has access to controlled substances, any person who has been convicted of a felony offense relating to controlled substances or who, at any time, had an application for registration with the DEA denied, had a DEA registration revoked or has surrendered a DEA registration for cause.

It is, therefore, assumed that the following questions will become a part of an employer's comprehensive employee screening program:

Question. Within the past five years, have you been convicted of a felony, or within the past two years, of any misdemeanor or are you presently formally charged with committing a criminal offense? (Do not include any traffic violations, juvenile offenses or military convictions, except by general court-martial.) If the answer is yes, furnish details of conviction, offense, location, date and sentence.

Question. In the past three years, have you ever knowingly used any narcotics, amphetamines or barbiturates, other than those prescribed to you by a physician? If the answer is yes, furnish details.

https://www.deadiversion.usdoj.gov/21cfr/cfr/1301/1301_76.htm