



# VET REGISTER

THE NEWSLETTER OF THE VETERINARY SURGEONS BOARD OF QUEENSLAND  
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## Proposal to Introduce VETERINARY SURGEONS REGULATION 2002

A new *Veterinary Surgeons Regulation 2002* is being developed to replace the existing 1991 Regulation which is made under the provisions of the *Veterinary Surgeons Act 1936* and is due to expire on 31 August 2002.

The proposal is that the new regulation will carry forward all of the existing provisions amended as follows:

- (a) the list of procedures excluded as acts of veterinary science for the purposes of the Act will recognise the Willis dropped ovary spay method as the only method of cattle spaying excluded from veterinary science. Currently all methods of cattle spaying are excluded;
- (b) the schedule of fees will allow for full cost recovery in administering the legislation and will introduce a fee for veterinary premises approval applications; and
- (c) a new provision will be included to oblige veterinary surgeons to keep a record of their continuing veterinary education so as to enable demonstration of competence if required in the course of complaint resolution enquiries by the Board. Introduction of the provision should not be interpreted as the imposition of any mandatory obligation on veterinary surgeons to undertake post-graduate veterinary education.

A **Regulatory Impact Statement (RIS)** has been prepared which addresses the costs and benefits of restricting cattle spaying by persons other than registered veterinary surgeons to the Willis dropped ovary spay method, that is, when the spaying is performed for fee or reward.

The RIS also addresses the proposal to amend the schedule of fees prescribed under the Act. The RIS does not address the proposal to include a requirement for recording of continuing education undertaken as there is no appreciable cost involved.

Distribution of the RIS to stakeholders represents the final stage of consultation on the two proposals.

**Veterinarians are invited to make submissions on the proposals.** A copy of the RIS is enclosed.

Written submissions should be forwarded to the Veterinary Surgeons Board so as to be received by **5pm on 5 August 2002.**

## Notice of significant amendments to legislation

Significant amendments made to the *Veterinary Surgeons Act 1936* in December 2001 changed the law in respect to ownership of veterinary practices, advertising by veterinary surgeons, regulation of veterinary premises and use of the courtesy title 'Dr' by veterinary surgeons.

Details of the amendments were provided to all registered veterinary surgeons in December 2001.

Please contact the Board if you did not receive a copy of the information document or require a further copy.

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Enclosed is an information handout on the responsibilities of veterinary surgeons to the newly enacted animal welfare legislation. It addresses the duty of care a veterinarian has to animals and under what circumstances certain procedures can be performed.

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## Regulating the standard of Veterinary Premises

The December 2001 amendment to the Veterinary Surgeons Act 1936 which removed the previous provisions restricting ownership of veterinary practices to registered veterinary surgeons necessitated providing the Veterinary Surgeons Board with wider powers to regulate the standard of veterinary premises. Veterinary premises are those designated by name indicating the conduct of veterinary practice thereat.

As before, the approval of the Board is required before any person or corporation can conduct a veterinary practice from veterinary premises. The Board has the power to approve or refuse any application and can now impose conditions, or amend, suspend or cancel an approval on reasonable grounds (Part 4A Veterinary Surgeons Act 1936). Approval notices in the name of the owner are now issued for all approved premises.

On the sale of any veterinary practice Board approval for the veterinary premises will not be transferred to a new owner without the purchaser notifying the Board that in their opinion the premises meet the required minimum standards which apply at that time. If approval is not transferred, the purchaser will not be able to practice from the premises and will be required to submit a new application for consideration in that person's name.

This allows the purchaser of a practice the ability to demand that premises meet required standards as a condition of sale.

**Guidelines for obtaining Board approval for veterinary premises and actioning transfer of approval on sale of veterinary premises are enclosed.** It is recommended that all practising veterinary surgeons and would be practitioners retain the information for future reference.

## Information Privacy

A *Privacy Regime* for the Queensland Public Sector has been introduced. The objective is to establish a framework for the responsible collection, storage, use and disclosure of personal information in the Public Sector. All Queensland Government agencies including the

Veterinary Surgeons Board are required to comply with the new privacy standards.

Please note that information privacy is not a law. The requirement for agencies to comply with information standards is administratively based. Consequently where the information standard conflicts with a legislative requirement (such as the *Freedom of Information Act*), the legislation will supersede the information standard.

To comply with the information standard the Board was required to develop a privacy plan documenting the type of personal information held, the information retention period and access to information details.

The plan requires all registered veterinary surgeons to be notified of its existence and for the plan to be published on the Board's website when it is established in the coming months. In the meantime, a copy of the privacy plan can be obtained by contacting the Board office.

## PUBLIC LIABILITY AND PERSONAL ACCIDENT INSURANCE – VETERINARY SCIENCE STUDENT WORK EXPERIENCE

The University of Queensland has advised the following:

The University of Queensland holds a Public Liability policy with the Australian and New Zealand Universities Protection and Indemnity Foundation (Unimutual) (Limit of liability \$10M).

This cover extends to any student of the University whilst engaged on a work experience or community placement programme whilst under the direction or control of an entity other than the University or an Affiliated Body provided that:

- (i) such student is not employed by that entity and does not receive remuneration in respect of her or his participation in the work experience or community placement program;
- (ii) the work experience or community placement program is relevant to the students' course of study and participation in the program has been endorsed by the University.

The University also provides personal accident insurance cover to students in Years 2 to 5 of the Bachelor of Veterinary Science. This policy provides death and capital benefits cover with

varying limits up to \$100,000. The benefits are available to students should they be injured whilst

participating in activities related to their studies or research.

## ***THE HEALTH (DRUGS AND POISONS) REGULATION 1996***

### **QUESTIONS AND ANSWERS**

The Board acts as a conduit in providing information on the legal responsibilities of veterinary surgeons under the *Health (Drugs and Poisons) Regulation 1996*.

All registered veterinary surgeons should have a copy of the booklet '**What Veterinary Surgeons Need to Know**' published and distributed by Queensland Health in February 2001 which addresses all provisions of the drugs and poisons legislation as it applies to the veterinary profession. Further copies are available from the Veterinary Surgeons Board.

A number of enquiries on the requirements of the legislation have been made to the Board since the last edition of 'Vet Register' and are summarised below.

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**Q.** People approach veterinarians to prescribe drugs for animals not seen or examined by the veterinary surgeon. Examples are rural property owners wanting medications or drugs for production animals, breeders wanting antibiotics to administer to their kennel population, trainers wanting medications including anabolic steroids for general use on performance animals.

If the vet speaks to the person and is satisfied there is an need for the medication, can the veterinary surgeon sell the medication to the person?

**NO** - Veterinary surgeons are authorised persons under the legislation only to the extent necessary to practise veterinary science *ie* the veterinary surgeon has to be reasonably satisfied that the animal needs the drug for veterinary treatment and in order to satisfy this, the animal must be under the care of the veterinary surgeon.

Under the care is defined as:

a) The veterinary surgeon must have been given responsibility for the health of the

animal or herd in question by the owner or the owner's agent;

b) That responsibility must be real and not nominal;

c) The animal or herd must have been seen immediately before prescription and supply or **recently enough or often enough** for the veterinary surgeon to have personal knowledge of the condition of the animal or current health status of the herd or flock to make a diagnosis and prescribe;

d) The veterinary surgeon must maintain clinical records of that herd, flock or individual animal.

What amounts to 'recently enough' is a matter for the professional judgement of the veterinary surgeon in the individual case but the quantity of the scheduled substance dispensed should not exceed the amount needed to prevent or competently treat the condition in the individual animal or herd. Opportunity for owners to utilise the dispensed substance on other animals not under the veterinary surgeon's care or to store drugs until past their use-by date should be minimised. The quantity dispensed must be recorded and reflect correct dosage for the condition of the animal/herd being treated.

**NB:** A veterinary surgeon's authority in relation to scheduled substances can be suspended or cancelled if considered necessary due to breaches of the legislation.

**Q.** Are there additional restrictions imposed for dispensing of scheduled injectable anabolic steroids?

**YES** – The Board at the request of Queensland Health and with encouragement from the racing authorities has adopted the policy that all injectable anabolic steroids should be administered solely by the treating veterinary

surgeon, or if by the person in charge of the animal, in the presence and under the direct supervision of the veterinary surgeon.

While this requirement is policy based rather than law, the meaning of professional misconduct in the *Veterinary Surgeons Act 1936* is not limited and proceedings could be initiated against veterinary surgeons dispensing injectable anabolic steroids otherwise than in accordance with the policy.

If there are circumstances other than convenience to the veterinary surgeon or owner that make it impractical for the veterinary surgeon to administer the drug him/herself, comprehensive records similar to those required to be kept for controlled drugs (S8) should be maintained in a dedicated book or database.

**Non-injectable** anabolics must be dispensed in accordance with the provisions which apply to all scheduled drugs.

**Q.** What are the provisions for off-label use of drugs?

A person must not, without an approval, dispense, prescribe, sell, use or administer for human therapeutic use a scheduled drug or poison labelled, manufactured, packed or prepared for use for animal treatment.

The regulation is silent on the use for animal therapeutic reasons of a scheduled drug or poison manufactured for use for human treatment.

**Q.** No limitations are now imposed by the Veterinary Surgeons Act 1936 on advertising by veterinary surgeons. Does this allow a veterinary surgeon to advertise the price of scheduled drugs?

**NO** - The Health legislation prohibits the advertising of a substance that is or contains a scheduled drug, whether or not the drug is named in the advertisement.

**Q.** Can scheduled drugs be dispensed for use in dart guns for herd management and animal capture purposes?

**NO** - A person who is not authorised may apply to the chief health officer for a written authority to possess and administer scheduled drugs.

Applications based on herd management needs are not supported by either Queensland Health or the Veterinary Surgeons Board. Approvals are however regularly issued to individual local government employees who have been given suitable training by a veterinary surgeon for administration of euthanasia agents to animals held by the local authority.

Veterinary surgeons should not provide scheduled drugs for such purposes to any person who does not produce a written approval from the chief health officer.

**Q.** What are the requirements for storage of controlled drugs?

Controlled drugs must be kept in a receptacle of prescribed specifications and anchored to the floor or wall as prescribed or in another place that an inspector considers is at least as secure. The receptacle is commonly a safe which in the case of an older style large heavy model may not have to be anchored.

The receptacle must always be locked and the veterinary surgeon must personally possess the key or combination. If the drug is in the possession of the veterinary surgeon while in the field it must be kept in a secure place under his/her personal control.

**Q.** What are the labelling requirements when dispensing individual doses of schedule 5 products such as flea treatment and heartworm preventative products?

Veterinary surgeons may split these products into individual doses for supply to customers. However the individual dose must be labelled to the same extent as is the primary pack when dispensed in total. This is to ensure that the product is always identifiable by the holder as an animal treatment only and there are instructions for use.

**Q.** Can out of date drugs be dispensed in any circumstance?

**NO** – It is an offence for a person to use a scheduled drug in a way that endangers the life or safety of an animal. It is also deemed to be professional misconduct under the *Veterinary Surgeons Act 1936*



