

**The College
of Veterinarians of Ontario**

Position Statement

Conducting Programs for the Implantation of Electronic Identification Devices (EID) in Companion Animals

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Conducting Programs for the Implantation of Electronic Identification Devices (EID) in Companion Animals

Approved by Council:	January 18, 2006
Publication Date:	<i>Update</i> March 2006, Website February 2006
To Be Reviewed by:	January 2008
Key Words:	Electronic Identification Device (EID), companion animals, microchip, implantation
Related Topics:	accreditation exemption, fee advertising, medical records, supervision of auxiliaries
Legislative References:	<u><i>Veterinarians Act RSO, 1990, Chapter V.3, S. 15</i></u> Ont. Regulation 1093, ss. 36.-(1), ss. 22.-(1)
College Contact:	Accreditation Coordinator, Deputy Registrar or Registrar
Reference Materials:	

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Purpose

This position statement was developed to describe for members the circumstances under which they might conduct/sponsor programs for the implantation of electronic identification devices (EID) in companion animals from an unaccredited facility.

Scope

This position statement will apply to members wishing to sponsor EID implantation programs either on their own or further to a request from an outside agency.

Relevant Legislation

Act

The *Veterinarians Act* R.S.O. 1990, Chapter V.3 is the profession specific Act which governs the practice of veterinarians in Ontario.

Certificate of Accreditation Required

Section 15 of the Act describes the requirement for a certificate of accreditation:

No person shall establish or operate a veterinary facility except under and in accordance with a certificate of accreditation.

Regulation

Ontario Regulation 1093 is the regulation made under the Veterinarians Act.

Advertising Fees

Subsection 36.-(1) of Ontario Regulation 1093 describes the parameters for the advertising of professional services and requires that the communication:

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

Medical Records

Subsection 22.-(1) of Ontario Regulation 1093 describes the required elements of the companion animal medical record, which must contain the following information:

1. Patient identification, including species, age and sex.
2. The client's name, address and telephone numbers.
3. If the client is likely to be absent from his or her address while the animal is confined with the member, the name, address and telephone number of a person to be contacted in case of an emergency.
4. Date of each time that the member sees the animal.
5. A history of the animal's health, including a record of vaccinations.
6. The animal's current weight.
7. Particulars of each assessment, including any laboratory investigations, performed or ordered by the member and the results of each assessment.
8. A note of any professional advice given regarding the animal and an indication of when and to whom such advice was given if other than to the client.
9. All medical or surgical treatments and procedures used, dispensed, prescribed or performed by or at the direction of the member, including the name, strength, dose and quantity of any drugs.
- 9.1 One of the following with respect to each surgical treatment:
 - i. The written consent to the surgical treatment signed by or on behalf of the owner of the animal.
 - ii. A note that the owner of the animal or a person on the owner's behalf consented orally to the surgical treatment, and the reason why the consent was not in writing.
 - iii. A note that neither the owner of the animal nor anyone on the owner's behalf was available to consent to the surgical treatment, and the reason why, in the member's opinion, it was medically advisable to conduct the surgical treatment.
10. A copy of all reports prepared by the member in respect of the animal.
11. A final assessment of the animal.
12. The fees and charges, showing separately those for drugs and those for advice or other services.
13. Any additional records required by this Regulation.

College Position

The procedure of implanting an electronic identification device in a companion animal constitutes the practice of veterinary medicine.

Members sponsoring a CVO approved EID program may be exempted from the following legislative requirements:

- a) The requirement to perform veterinary procedures from an accredited facility.
- b) The requirements for maintaining complete medical records.
- c) The restrictions on fee advertising.

Advertising

Members sponsoring an EID program may advertise the location, date and time of the program, the names of participating members and the cost of the implantation. The College will hold the sponsoring member responsible for the content of all advertising.

Accreditation

The EID implantations need not be performed in an accredited veterinary facility.

Medical Records

The medical records required shall be maintained in a systematic manner by the members organizing the program and may be limited to:

1. A reasonable identification of the implanted animal;
2. The owner's name, address and telephone numbers; and
3. The date and fact of implantation.

Members wishing to sponsor an EID program must ensure that:

- A. An application has been made to and approved by the College 14 days prior to the scheduled date of the program. (See Appendix A for sample Program Authorization Form)

- B. The EID is implanted by a member or their supervised auxiliary. An auxiliary is properly supervised for the purposes of EID implantation, if the member is on the premises and within sight or hearing of the auxiliary throughout the program.
- C. The custodian of each implanted animal is provided with an EID certificate signed by the member following the procedure.
- D. All professional fees collected as part of the program must be paid directly to the veterinarian sponsoring the program. If that individual is someone other than the member performing the procedure, the member performing the procedure must be paid by the sponsoring member. None of this precludes the donation of any or all of the proceeds collected to a third party.
- E. The EID product conforms to International Organization for Standardization (ISO) standards.

APPENDIX A – PROGRAM AUTHORIZATION FORM

COLLEGE OF VETERINARIANS OF ONTARIO
ELECTRONIC IDENTIFICATION DEVICES (EID)
PROGRAM AUTHORIZATION FORM

Sponsoring Member's Name:

Sponsoring Member's Address:

Phone: _____ Fax: _____

I hereby apply to sponsor a program to perform the implantation of Electronic Identification Devices at the following location(s)

on the following date(s):

at the following time(s):

I am a licensed member of the College of Veterinarians of Ontario and agree to abide by the College's policy on Electronic Identification Programs, a copy of which I have received and read in full.

Signed:

Member of the College of Veterinarians of Ontario

Date: _____

Date received: _____

Authorized by: _____

Confirmation sent by: _____

Return this form to:

College of Veterinarians of Ontario, 2106 Gordon Street, Guelph, ON N1L1G6.

Tel: (519) 824-5600, (800) 424-2856 Fax: (519) 824-6497, (888) 662-9479