



THE COLLEGE OF  
VETERINARIANS  
OF ONTARIO

# UPDATE

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[www.cvo.org](http://www.cvo.org)

Summer 2003

## Inside...

Councillor profiles . . .	3
Call for nominations . . .	4
Letters to the editor . . .	5
CVO award . . . . .	6
Council bulletin . . . . .	6/7
Proposed regulation amendments . . . . .	8/9
Medical record workshops . . . . .	10
Complaints case . . . . .	11/12
Discipline hearing . . . . .	13
Resource materials & Open Exchange . . . . .	14
New website . . . . .	15
In Memoriam . . . . .	16

## President's Message

*A progress report...*



*by Mark Spiegle, DVM  
CVO President*

The College of Veterinarians of Ontario is the licensing and regulatory body for veterinarians in the province, whose mandate is to protect the public. The council, with the assistance of our registrar, Dr. **Barbara Leslie**, is constantly involved in the decision making that affects individual veterinarians, as well as the animal-owning public – some relatively minor and some that affect the lives of people in a major way.

### Issues addressed

Over the past year, council has made decisions on issues ranging from helping members with substance abuse problems or psychiatric disorders, to consideration of the dispensing of T-61 by veterinarians to accredited wildlife technicians, for the humane euthanasia of distressed wildlife.

### New member assistance program

The Professionals Health Program (PHP) is operated by the Ontario Medical Association. Funded by CVO and promoted by the OVMA, the PHP offers Ontario veterinarians who suffer from substance abuse or psychiatric disorders prompt, professional and confidential treatment and monitoring of their problems. The program also provides continued support and advocacy for veterinarians. The successful rehabilitation rate of the PHP with the Ontario Medical Association is incredible and we hope and pray that the same will hold true for the veterinary profession.

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## President's Message...

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### **Ketamine policy**

The use of Ketamine in veterinary medicine is well established. The abuse of Ketamine (or Special K) by the general public is also well established. As of September 2002, CVO council passed a policy making it mandatory for veterinarians to store and use Ketamine similar to controlled or narcotic drugs. CVO continues to fulfil its mandate to protect the public by making it necessary for all veterinary practices in Ontario to keep Ketamine locked up and to maintain a dispensing log.

### **T-61 and wildlife technicians**

Wildlife technicians, whose job it is to ensure that wildlife that cannot be rehabilitated and released into the wild do not suffer, are not legally able to acquire T-61 from prescribing veterinarians. In the future, if the regulation passed by council is approved by Cabinet, the pain and suffering of these animals can be alleviated in a humane fashion with the legal use of T-61.

### **Proposed regulation amendment**

Recently, council passed a proposed regulation amendment that would allow members to refer samples to incorporated non-professional services in their veterinary practice, with certain safeguards to protect the public against the potential conflict of interest. This proposed regulation change has been submitted to the Ontario Ministry of Agriculture and Food (OMAF) and awaits legislative approval before becoming law.

### **Antimicrobial resistance**

The issue of antimicrobial resistance continues to be a major issue for veterinarians and the public.

The CVO supports the findings of the Advisory Committee on *Animal Uses of Antimicrobials and Impact on Resistance and Human Health to Health Canada*. We have stated to the Ontario Minister of Agriculture and Food, that the dispensing of medications to farms in Ontario is best handled by trained professionals such as veterinarians, or pharmacists on the prescription of a veterinarian, and should not be available to the public through Livestock Medicines Outlets.

This is an ongoing issue that will not be easily resolved, but the CVO will continue to monitor the situation and will continue to respond to ensure that the public is protected. CVO is very supportive of the Livestock Medicines Education Certification program and believes that this program should continue even in the event that drugs are available by prescription only.

### **Internet practices**

The practice of veterinary medicine over the Internet is a growing concern in Ontario. Telepractice is an issue that affects most health care professions. Dr. Alec Martin, deputy registrar of the CVO, has registered the College as an interested stakeholder with the National Initiative for Telehealth (NIFTE), which will investigate telepractice and report its findings to all stakeholders.

The CVO council consists of a group of dedicated, motivated individuals who have accomplished many important tasks over the past year to fulfil its mandate to protect the public. □

### **AIM for EXCELLENCE**

The CVO Peer Review of Medical Records Program provides you with peer feedback in a voluntary, proactive environment where YOU retain control over change. This free member service program is available to all members either individually or as a practice group. Join the practices that have taken advantage of this opportunity!

For more information contact:

Dr. Ed Empringham, Director of Professional Enhancement and Member Communications

519-824-5600 or toll free 1-800-424-2856

[empring@cvo.org](mailto:empring@cvo.org)

### Dr. Alma Conn - Constituency 5



*Dr. Alma Conn*

Following graduation, Alma Conn moved to Saskatchewan where she worked in a large animal practice and embryo transplant center. From 1976 to 1980, she worked part-time at the Kincardine Veterinary Clinic. From 1981 to April 2003, Dr. Conn practiced at Blyth Veterinary Services.

She served as a trustee for eight years and as chair for one year for the Bruce County Board of Education.

Dr. Conn is a member of the Grey-Bruce Veterinary Association and is currently serving a three-year term on the board of the Agricultural Research Institute of Ontario.

She is married and has three children.

This is Dr. Conn's fourth year on council. She is serving as second vice-president and as a member of the Discipline Committee. □

### Dr. Steven Stewart - Constituency 1



*Dr. Steven Stewart*

Steven Stewart graduated from OAC, Animal Science Major, in 1970. Following graduation from OVC in 1974, he was employed for one year in a companion animal practice in London. He then joined a mixed animal practice in Talbotville.

The three-man partnership established the Talbot Animal Clinic in 1976, where Steve continues to practice today.

He is a member of the London Veterinary Association, CVMA and OVMA.

This is Dr. Stewart's fifth year on council. He is serving as chair of the Complaints Committee. □

## It's Election Time!

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On October 7, 2003, the College of Veterinarians of Ontario will hold elections in three constituencies.

### Constituency 2:

Elgin/Haldimand Norfolk/Brant/Hamilton -Wentworth and Niagara

### Constituency 8:

Renfrew/Lennox Addington/Frontenac/Lanark/Ottawa-Carlton/Russell/Prescott/Leeds/Grenville/Dundas/Stormont and Glengarry

### Constituency 11:

Durham/Victoria/Peterborough/Hastings/Northumberland and Prince Edward

Dr. Nancy Griffith (2) and Dr. Ann Bissett-Strahl (11) are eligible for re-election, as they have each served one three-year term. Dr. Bryan Kennedy is not eligible for re-election as he has served two three-year terms.

Elections will not be held in Constituency 7 and 10, as Dr. Melody Mason and Dr. Mark Spiegle have served on the Executive Committee for the year immediately preceding this election (By-law 4.-(4)).

CVO councillors have interesting and wide-ranging responsibilities.

Each year, councillors attend approximately six council meetings, make policy decisions affecting the practice of veterinary medicine, and discuss other matters as they pertain to the legislation of the profession. Council meetings usually run for a full day and take place at the CVO office in Guelph.

Councillors must serve either as a chair or member of a CVO committee. Depending on the nature of the work handled by these committees, meetings will be held between two and 10 times each year. Councillors can serve on the Complaints, Discipline, Registration, Executive, and/or Accreditation committees.

CVO encourages councillors to attend the Annual General Meeting, regional association meetings, and special interest group meetings within their constituencies.

If you are interested in serving the public at CVO, you must submit a nomination by **September 2, 2003**. The CVO will distribute nomination forms and the notice of election to members in each constituency by July 25, 2003. Elections will be held on October 7, 2003.

For more information, contact **Mary Wyness**, assistant coordinator, at 519-824-5600, toll free at 1-800-424-2856 or email [mwyness@cvo.org](mailto:mwyness@cvo.org). □

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## Call for Nominations for CVO Public Award

Do you know someone who deserves the CVO Public Award?

This award may be given annually to "recognize a citizen for his or her contribution to the veterinary profession and/or animal care or service." (CVO Strategic Plan "Meeting The Challenge.")

The purpose of this award is to recognize the contributions of a non-veterinarian partner to animal health or the veterinary profession.

This award will be given for the fifth time in November of 2003.

Previous recipients include **Mr. Charles Gracey** (1999), **Mrs. Peggy Knapp** (2000), **Mr. Fred Milton** (2001) and **Mr. John Core** (2002).

### Submit Your Nomination

If you would like to nominate someone for this award, please contact **Christine Simpson** for a nomination form: College of Veterinarians of Ontario, 2106 Gordon Street, Guelph, Ontario N1L 1G6, Phone: 519-824-5600 – 1-800-424-2856; Fax: 519-824-6497 – 1-888-662-9479; email: [csimpson@cvo.org](mailto:csimpson@cvo.org).

Nominations are due by **September 5, 2003**. □

## Letters to the Editor

*Update* welcomes and encourages letters from members, signed by the author. The CVO reserves the right to edit letters for style, clarity, and length, and may decline to publish letters. Please write to the editor, *Update*, College of Veterinarians of Ontario, 2106 Gordon Street, Guelph, Ontario N1L 1G6 or fax (519) 824-6497, toll free fax in Ontario: 1-888-662-9479.

✉ Dear CVO:

Re: Complaints Case – *Update* Vol. 19 No. 2 (Spring 2003) – Misapplication of the Council Policy on Abandoned Animals.

I was pleased to see that the committee found the veterinarian to have not met the standards of the profession, however, I was taken aback that a 'review of the records' could in fact indicate that the surgery was performed properly.

In my opinion, the only reason for the incision to have herniated is that in fact the surgery was NOT performed properly. This cannot be substantiated by any written records, one way or the other.

Regardless of the fact that there is indeed justification for a charge for professional services to repair a 'wound breakdown', I think it should be a source of professional pride to ensure that an elective surgically created wound is repaired at minimal or no cost to the client. It is also a huge opportunity to create a positive PR event for that patient and client and to demonstrate that we are a 'caring' profession.

It was despicable to hold that patient for ransom after repairing an incompetent job.

**M.A. (Tony) Bernard, D.V.M.**  
*Ottawa, ON*

✉ Dear CVO:

The suggestions made by Dr. Empringham in the Spring 2003 issue of *Update* concerning computerized medical records and a "single entry of data" are impractical.

Many practitioners "write notes" throughout the consultation/diagnostic process, thus building a medical record as they go. It is unreasonable to expect that we should make our way to a keyboard every time we wish to add a notation to the medical record. The alternative (not taking notes and typing the complete record later from memory) hardly promotes accuracy. Additionally, for those who write faster than they type, suggesting that handwritten notes be eliminated is unrealistic. When it comes to transcribing a handwritten record, a third-party typist allows for better use of the veterinarian's time.

Obviously, some form of quality assurance is necessary, but the CVO cannot possibly expect that a veterinarian be on hand to review each record upon its completion so that it may be corrected prior to being "closed" and the next record transcribed. Ever since computerization has been possible, the CVO has been wary of storing patient medical records on computers. Having the ability to go in and correct typing errors apparently creates a huge potential for abuse.

Given that such corrections would be "seamless", the unscrupulous practitioner could rewrite entire records to cover their tracks in cases where they have provided substandard care. Hence the concept of "closing" or locking a record, making it impossible to go back and correct errors in typing. Given that we are in an age where medical records are being faxed back and forth between practices on a daily basis, I would think that the concept of a legible record is one that should be embraced and encouraged.

It is time that the CVO take a serious look at the concerns regarding computerized medical records and develop practical strategies to alleviate those concerns. The primary goals should be accurate, easily accessible and legible medical records. Third-party typists are unavoidable and a reasonable method to allow follow-up corrections to their work is essential.

Practitioners who strive to maintain computerized medical records should not be penalized or restricted by a system that a small minority could abuse.

**John Scarlett, D.V.M.**  
*Gloucester, ON*

### College of Veterinarians of Ontario Award



*Alec Smith*

The College of Veterinarians of Ontario Award was presented by Dr. **Mark Spiegle**, CVO president, at the Ontario Veterinary College, University of Guelph Combined Graduate and In-course Awards Ceremony held on March 19, 2003.

The recipient of the award was **Alec Smith**. Alec was not able to attend the presentation but forwarded the following message:

*Dr. Spiegle, staff and members of the CVO, I would like to thank you a great deal for honouring me with the*

*College of Veterinarians of Ontario Award. I have always enjoyed helping organize class and school activities and believe it is an important part of life at OVC. It allows you to interact with your classmates, the classes around you, the OVC community and members of the profession and industry.*

*I hope that this award continues to honour individuals that have become involved in the OVC and the university community so that it may encourage others to do the same as they move through their years at OVC.*

*I hope to continue to be involved as I become a practicing member of the profession. Again, thank you kindly for this award.*

*Sincerely,  
Alec Smith*

Dr. Smith is practicing in Thunder Bay.

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## Council Bulletin

### Council Meeting: June 4, 2003

- Received a report from the CVO representative, Dr. **Phil Garriock**, to the Livestock Medicines Advisory Committee.
- Received a report from the Task Force on Delegated Acts and Informed Consent to be considered further at the September 17, 2003 meeting.
- Struck a Quality Assurance Committee comprising Dr. **Deji Odetoyinbo**, chair; and Drs. **Nasim Gulamhusein**, and **Cheryl Yuill**, members.
- Received a report from Dr. **Bryan Kennedy** on his attendance on behalf of the College at a meeting of Health Canada Veterinary Drugs Directorate and Stakeholders held in Ottawa May 22 and 23, 2003.
- Approved the removal of the requirements concerning biological, pathological and hazardous wastes disposal from the *Minimum Standards for Veterinary Facilities in Ontario*
- Authorized the drafting of an amendment to Ontario Regulation 1093 that would make the failure to dispose of hazardous wastes professional misconduct, as defined in the *Environmental Protection Act*, in accordance with the requirements of that Act.
- Appointed Dr. **Bryan Kennedy** to attend the Canadian Animal Health Institute National Task Force on Non-Approved Drug Use with observer status.
- Appointed three members to serve on the Complaints Committee – Dr. **David Brown**, effective immediately; Dr. **Tim Arthur**, effective January 7, 2004; and Dr. **David Desmond**, effective April 15, 2004. *Continued on next page...*

## Council Bulletin...

- Adopted a new protocol for recruiting and selecting committee members. The complete protocol is posted on [www.cvo.org](http://www.cvo.org) or can be obtained by calling the CVO office.
- Received a report from the Strategic Planning Committee and hired a facilitator to assist in the drafting of a new council strategic plan.
- Received information from Dr. **Jim Clark** on whether CVO needs a protocol in place to permit veterinarians, who are not licensed, to practice in Ontario, in the event of an emergency situation involving a foreign animal disease outbreak. Council directed staff to investigate the issues involved.
- Passed the following policies:
  - amendment to the Coupons or Rebate Policy
  - amendments to the Guidelines for Dispensing to Free-Ranging Wildlife
 The complete policies are posted on [www.cvo.org](http://www.cvo.org) or can be obtained by calling the CVO office.
- Approved the following proposed amendments to Ontario Regulation 1093.
  - Subsection 33.(2) – Dispensing T-61
  - Clause 17.(1) 40 and 41, subsection 20.(2), section 26, and subsection 33.(3) – Professional Misconduct – Veterinarian acting as agent of Dispensing Veterinarian
  - 43.(4)(b) – Conflict of Interest – members practicing veterinary medicine as employee of a public, non-profit University or College
 The complete amendments are posted on [www.cvo.org](http://www.cvo.org) or can be obtained by calling the CVO office.
- Approved amendment to By-laws to be presented for ratification at the 2002/2003 Annual General Meeting or by mail ballot.
  - Quorum for AGM – amendment to By-law 21.(1) (*deletion struck through and amendment underlined and bold*) 21.(1) Any **35** ten members in good standing is a quorum for a general meeting. □

### Does Your Practice Meet Occupational Health and Safety Act Requirements?

If you're not sure, information is available to you from the website ([www.gov.on.ca](http://www.gov.on.ca)) or you can call toll free (1-800-268-8013) to obtain the following documents:

1. A Guide to the Occupational Health and Safety Act
2. A Guide for Joint Health and Safety Committees and Representatives in the Workplace

### Privacy Legislation: Getting ready for January 2004

The Federation of Health Regulatory Colleges of Ontario is sponsoring a seminar dealing with this issue, on October 8, 2003. The seminar is being presented by *Richard Steinecke* and *Julie Maciura*, who will explain the legislation. It will be broadcast live by satellite to seven locations throughout Ontario.

Registration information is provided in the seminar brochure enclosed with this edition of *Update* and is posted on the CVO website.

### Professionals Health Program

In addition to substance abuse issues, the Professionals Health Program has expanded its services to include psychiatric and behavioural disorders.

**Confidential toll free line:  
1-800-851-6606**

# Proposed Regulation Amendments

## Incorporation of Non-Professional Services

### Background explanation for proposed regulation amendment

Currently self-referral to a related corporation is prohibited by clause 42.(2)(b) of the existing conflict of interest regulations. The College is exploring whether such self-referral might be permitted in circumstances where proper disclosure is made to the client and where appropriate safeguards are put in place to deal with concerns about client choice, over-utilization and lack of professional accountability.

Most of these requirements can be complied with by providing a sheet of paper to the client providing the required information and ensuring that the client understands the information.

At the same time it was thought appropriate to clarify that the referral to a partner or to another practice in which the member is a partner is not intended to be captured by the general prohibition against receiving a benefit for a referral or transfer.

Unlike the self-referral to another corporation or business provision, this latter clarification does not change the law, but simply helps interpret the phrase "to any other person".

Set out in the next column and opposite page are the existing ss. 42.(2) and 42.(3) of the conflict of interest regulations. There is a minor change to clause 42.(3)(a), which is underlined, to recognize association and employment agreements in which there is a sharing of fees. Subsection 42.(4), which is underlined, is new.

### Proposed Amendment:

42.(2) A member has a conflict of interest where the member, or a related person, or an employee or employer of the member, directly or indirectly,

(a) enters into any agreement, including a lease of premises, under which any amount payable by or to a member or a related person is related to the amount of fees charged by the member; or

(b) receives, makes or confers a fee, credit or other benefit by reason of the referral or transfer of an animal or a specimen from or to any other person.

(3) Clause (2)(a) does not prevent a member,

(a) from entering into a partnership association or employment agreement with another member under which the drawings, interest or remuneration of the partners, associates or employee is related to the amount of fees charged by them; or

(b) from entering into an agreement with another member to form a professional corporation, under which the drawings, interest or remuneration of the members is related to the amount of fees charged by them.

(4) Clause (2)(b) does not prevent a member,

(a) from the referral or transfer of an animal or a specimen to another veterinarian who is a partner, associate, employer or employee of the member,

(i) in the same facility as the member or,

(ii) if in a different facility, where the member explains in writing to the client the member's relationship with the other veterinarian;

(b) from the referral or transfer of an animal or a specimen to a corporation or other business entity in which the member receives a benefit by reason only that the member or a related person has an interest in that corporation or other business entity, so long as the following criteria are met:

(i) the member explains in writing to the client the member's or related person's interest in the corporation or other business entity,

(ii) the member explains in writing to the client that if the client chooses another provider, that client's choice will not affect the ability of the client to obtain services from the member unless that choice would result in uncoordinated care to the animal,

(iii) in the case of laboratory testing or radiological or other technical procedures, the member explains in writing that he or she is professionally responsible for the quality of the testing or technical procedures performed, and

(iv) the member provides to the College upon request documents demonstrating that the above requirements have been and are being met.

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## Proposed Regulation Amendments

### *Incorporation of non-professional services...*

In addition, in order to deal with the indication for services in general, the professional misconduct provision is amended by adding the following:

17.(1) 7.1 Recommending, referring, ordering or requisitioning laboratory tests, technical procedures or professional services that are not reasonably useful or needed. □

### **Confidentiality of client information**

#### **Proposed Amendment**

That the Council of the College of Veterinarians of Ontario approves the following proposed revision to paragraph 17.(1) 6. or O. Reg. 1093 (revision underlined):

17.(1) 6. Revealing information about a client or concerning an animal, or any professional service

performed for an animal, to any person other than the client or another member treating the animal except,

- i. with the consent of the client,
- ii. when required to do so by law,
- iii. to prevent, or contribute information for the treatment of, a disease or physical injury of a person,
- iv. when it appears that the animal has been abused, or
- v. for the purpose of identifying, locating or notifying the apparent owner of the animal, protecting the rights of the apparent owner or enforcing applicable laws in respect of the animal, where it appears that the animal is not owned by the person presenting it for treatment. □

## CVO/OVMA Liaison Meeting



*Pictured above: Back row (from left): Mr. Mike Johnston, Dr. Ken Bridge, Dr. Reg Reed, Dr. Andrea Chapin, Dr. Richard Healey, Dr. Tim Zaharchuk, and Dr. Mark Spiegle. Front row (from left): Mr. Doug Raven, Dr. David Funston, Dr. Alma Conn, Dr. Melody Mason, Dr. Cheryl Yuill, and Dr. Barbara Leslie.*

On May 15, 2003 CVO hosted the semi-annual CVO/OVMA Liaison Meeting. The Liaison Meeting included the executive of each organization and senior staff. Meetings are hosted alternately by CVO and OVMA. □

## Medical Record Workshops

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*Medical Record Workshop participants*

The CVO Professional Enhancement Program held a series of 13 Medical Record Workshops throughout the province between late January and early May 2003. This new venture was well received by the membership, and additional workshops were booked following the announcement of the initial meetings. Over 270 veterinarians and their practice care team members participated in the workshops.

The workshops, delivered in a participative style, drew on the results of the initial two years of the Peer Review of Medical Record Program, to provide examples of issues requiring solutions. In true workshop style, many of the solutions came from the participants. In some cases, more than one solution was discussed.

The workshops demonstrated the value of the use of protocols and templates to maximize record value while minimizing input requirements. The workshops also recognized the important role that the various members of the animal care team play in medical records.

In addition to the importance of medical records to animal care, the importance of medical records in practice management was demonstrated.

The positive, enthusiastic response of participants to the workshops has encouraged a continuation of this approach in the next fiscal year. □

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## Don't Forget to Submit Your Special Program Applications!

The College has implemented policies with respect to the special activities of Rabies Clinics, Microchipping (EID) Clinics, Congenital Deafness Evaluation Programs, and Ophthalmic and/or Cardiac Evaluation Programs.

Members are reminded of their responsibility to submit applications for any of these programs at least two weeks in advance of any planned clinics. Approval will not be provided for any program where the application is received less than two weeks before the program.

College staff are usually able to return the approval for these clinics within a few days.

Remember, in the case of Rabies or Microchipping

Clinics, it is the responsibility of the veterinarian who is organizing the clinic to notify all other clinics in the area, to give them an opportunity to participate.

**In addition, for the Rabies, Deafness and Ophthalmic/Cardiac programs, the payment for the procedure or evaluation must be made to the veterinarian who is responsible for the program. If the veterinarian wishes to donate the proceeds to another organization, that is permissible, provided that the veterinarian receives the payment initially.**

Copies of all of these policies, and the application forms, can be found at [www.cvo.org](http://www.cvo.org), or obtained by calling (519) 824-5600, or toll-free, 1-800-424-2856. □

### ***Acknowledge your mistake, and you may prevent a complaint...***

The College receives many calls from members of the public because their animal has experienced an unintended outcome, and they believe the veterinarian has failed to adequately acknowledge, explain or apologize for the situation. In many cases, the unintended outcome does not occur as a result of any improper professional conduct or care.

The following case, however, which was recently presented before the Complaints Committee, concerns a tragic outcome as a result of a medical error, and describes how the veterinarian involved responded to the situation.

#### **Case Example**

One morning, Mrs. Owner noted that Sydney, her 6-year-old Labrador Retriever was not himself and appeared in pain. She presented him to her regular veterinarian, Dr. Surgeon, who performed blood work, x-rays, and abdominal ultrasound. Following the ultrasound, Dr. Surgeon informed Mrs. Owner that Sydney required immediate exploratory surgery for a possible splenic torsion, to which Mrs. Owner consented.

At surgery, Dr. Surgeon did not find a splenic torsion, but noted a section of small intestine that appeared inflamed. No biopsies were taken, and the abdomen was closed. Dr. Surgeon notified Mrs. Owner of his findings, and transferred Sydney's care to his associate, Dr. C.

Over the next two days, Sydney became progressively more painful, but Dr. C was unable to source his pain. The following day, Dr. C referred Sydney to a third facility for a spinal tap to rule out possible meningitis. Based on data from a physical examination and diagnostic work-up, the referral clinician advised that Sydney undergo immediate surgical re-exploration of the abdomen. Mrs. Owner declined, and Sydney was euthanized.

A post mortem examination performed at the referral facility revealed a fibrinous peritonitis caused by a gauze square foreign body. The pathologist aged the

lesions to be 48-72 hours old, consistent with the time of the exploratory surgery performed by Dr. Surgeon. There were no lesions found grossly or histologically to explain the cause of the abdominal pain for which Sydney was originally presented.

Before notifying Mrs. Owner, the referral clinician contacted Dr. Surgeon and gave him the opportunity to contact Mrs. Owner first and inform her of the findings himself. Dr. Surgeon declined, and informed the referral clinician that since he was currently involved, he should be the one to apprise Mrs. Owner. The referral clinician subsequently contacted Mrs. Owner.

Dr. Surgeon did not contact Mrs. Owner. Two weeks later, Mrs. Owner wrote him a letter demanding what restitution he intended to provide. Dr. Surgeon sent Mrs. Owner a response stating only that he "was sorry for all that had happened" and expressing sympathy for the loss of the dog. Dr. Surgeon did enclose a cheque to reimburse Mrs. Owner for the expenses incurred at both his hospital and the referral facility, and for the cost of a new puppy.

Mrs. Owner called Dr. Surgeon requesting an explanation of what happened, and Dr. Surgeon informed her that there was nothing further he could do for her. Mrs. Owner subsequently filed a complaint to the College, alleging that Dr. Surgeon performed an improper surgical procedure which led to the death of her dog, he subsequently avoided communicating with her, and he failed to offer an adequate explanation as to what occurred during the surgery.

Mrs. Owner commented to the College that her "main complaint has to do with the treatment of Sydney and the subsequent 'avoidance' I got from Dr. Surgeon. My calls were not returned; there was no discussion or offer of what went wrong and why. I would have expected at the least, some empathy, assistance with the grievance of our family and, yes, Dr. Surgeon admitting that he 'screwed up.'"

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## Complaints Case

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The Complaints Committee was concerned that the conduct of Dr. Surgeon may not have met the acceptable professional standards because of his surgical error in leaving the gauze square in the dog's abdomen, because he failed to adequately acknowledge his error to Mrs. Owner, and because he failed to communicate with her in a timely manner regarding the error. Dr. Surgeon was required to appear before the committee and receive oral advice in respect of his conduct.

### Trusted caregivers

Veterinarians are highly trained and trusted caregivers, working in practices, which function on the foundation of a strong veterinarian/client/patient relationship. When a veterinarian becomes silent after an unintended outcome, especially when the animal is harmed, the "trusted caregiver" may become an adversary in the eyes of the client, and there is a breakdown in the professional relationship. Unintended outcomes can take many forms, such as an animal being inadvertently cut by a groomer, a medication error, a patient being discharged from the hospital soiled with urine or feces, an anaesthetic death, and countless others.

### CVO staff available for advice

The following suggestions are offered to assist veterinarians in dealing with a difficult situation professionally. They have been adapted from similar articles appearing in the professional publications of the College of Optometrists of Ontario and the Royal College of Dental Surgeons of Ontario.

It is also important to note that CVO staff members are readily available to advise veterinarians who find themselves in a difficult professional situation, and that a consultation with a representative of the insurance company providing professional liability coverage may be warranted in some cases (although one's professional obligation must come first).

1. **Assess:** Take some time to think about what has happened, and its implications. This will prepare you to discuss the situation with the client in a calm and organized manner, and also allow you to thoughtfully consider the most appropriate course of action. When

Dr. Surgeon was informed by the referral clinician of the gauze square found in the dog's abdomen at post mortem, he should have realized that he made a surgical error that caused serious harm to his patient, and as a result, the owners elected to euthanize their dog.

2. **Acknowledge:** Be honest and forthright. In the case above, Dr. Surgeon should have taken the opportunity offered to him by the referral clinician and contacted Mrs. Owner to report the post mortem findings. It is important that the veterinarian initiates the contact with the client, if this is feasible. Otherwise, the client may perceive that the veterinarian is avoiding him or her, leading to a loss of trust.

3. **Explain:** A frank explanation will assist in fostering the relationship of trust between the veterinarian and the client. The explanation should be factual and in plain language. It need not assign blame or fault. Rather, it should focus on what happened so that the client can remain informed. In the course of your explanation, it is important to show the client that you care and are concerned. A frequent issue raised by complainants is that they found the veterinarian to be uncaring, callous or lacking in compassion. Make sure that the client understands what you have explained.

4. **Apologize:** An apology can be a powerful tool in fending off a complaint. In cases involving the death of an animal, complainants frequently allege that the veterinarian has shown no remorse for the situation. Tell the client that you are sorry for what has occurred. A prompt and sensitive statement of regret and condolences may be helpful and need not involve an admission of liability or fault.

5. **Document:** Document the substance of all discussions related to the case in the medical records. If you have acknowledged, explained, and apologized, ensure that this is well documented. Even if the client goes on to file a complaint, it is often advantageous for the veterinarian to be able to substantiate that he/she made a genuine effort to manage the difficult situation with professionalism. □

## Summary of Recent Discipline Committee Hearing

### Discipline Hearings

The *Veterinarians Act*, section 31.-(1) "Where the Discipline Committee finds a member or former member of the College guilty of professional misconduct or serious neglect, the registrar shall publish the finding..." the name of the member who is subject of the hearing may, or may not, be included depending on the decision of the Discipline Committee panel. Information revealing the names of the witnesses and clients has been removed.

Decisions may be obtained, in full, by contacting **Rose Robinson**, coordinator for Complaints and Discipline, at 519-824-5600 or toll free at 1-800-424-2856, or be email at [robinso@cvo.org](mailto:robinso@cvo.org).

#### Dr. Blaine Kennedy (*Jerseyville, Ontario*)

On May 23, 2003 the Discipline Committee met to hear and consider allegations of professional misconduct against Dr. Blaine Kennedy.

Dr. Kennedy pleaded guilty to the following allegations:

- Dr. Kennedy failed to establish or maintain a veterinarian/client/patient relationship when he wrote prescriptions for narcotics for horses while being aware that the prescriptions were not for use in horses but rather for human use.
- Dr. Kennedy failed to maintain proper medical records.
- Dr. Kennedy breached a mutual acknowledgment and undertaking previously entered into with the College.

#### Decision:

The Discipline Committee accepted Dr. Kennedy's

guilty plea and the following joint submission as to penalty:

- That Dr. Kennedy be reprimanded by the Discipline Committee.
- That Dr. Kennedy's license to practice veterinary medicine be suspended for a period of 15 months commencing June 30, 2003.
- That following the suspension, conditions will be placed indefinitely on his license in that Dr. Kennedy shall not be permitted to prescribe, administer, dispense or in any other respect deal with "controlled drugs" within in the meaning of Schedule G under the *Drug and Pharmacies Regulation Act* (with the exception of thiobarbiturates for the purposes of euthanasia), or "narcotics" within the meaning of Schedule N under the *Drug and Pharmacies Regulation Act* (with the exception of benzimidazoles used in anthelmintic preparations)).
- That, upon completion of the suspension, Dr. Kennedy's practice shall be monitored one day per month by an individual selected by the registrar, who shall report monthly to the registrar.
- That Dr. Kennedy pay \$5,000.00 toward the College's costs in this matter. □

### CVO e-news

Thanks to everyone who submitted a name for the CVO electronic newsletter. The newsletter will be called **CVO e-news**.

To sign up for the electronic newsletter go to the CVO web site at [www.cvo.org](http://www.cvo.org).

## Member Resource Materials

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### [www.cvo.org](http://www.cvo.org) - CVO member resource centre

- ▶ downloadable forms and information on "CVO Forms"
- ▶ policies and applications for rabies and other programs
- ▶ INFO SHEETS, *Update*, electronic newsletter
- ▶ links to sites important to veterinarians
- ▶ registration, accreditation, incorporation information
- ▶ practice/member directory
- ▶ Professionals Health Program, Professional Enhancement Program

### **Practice Kits** (new facilities, change of ownership, change of location)

If you are thinking of opening a new facility whether it is for a new hospital, office or mobile, or making ownership or location changes, the CVO has resource kits which explain what is involved.

### **Complaints/Discipline Information Videos**

The CVO has Complaints Process and Discipline Hearing information videos available at no charge. You may wish to view these for your own information or view them at a regional or group meeting.

### **Brochures**

- ▶ Regulation of the Veterinary Profession in Ontario
- ▶ Your Veterinarian: A Medical Professional
- ▶ The Complaints Process and
- ▶ Aim For Excellence (Peer Review of Medical Records)

If you are interested in any of the materials CVO has available, please visit the website or contact the office by phone, fax or email and we will be happy to forward them to you. In addition, staff are available to assist with unique needs. □

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## Open Exchange



"**Open Exchange**" is a CVO initiative to meet with the membership and have open dialogue. The initial **Open Exchange** was held in Ottawa on March 5, 2003. Although attendance was reduced by a severe snow storm, those who attended participated in an open discussion on topics impacting Ontario veterinarians.

CVO staff, Dr. **Barbara Leslie**, Dr. **Ed Empringham** and Ms. **Beth Ready**, attended on behalf of CVO. Dr. Leslie and Dr. Empringham provided information on the topics selected by those attending. The agenda was modified at the meeting to include topics under discussion at the current CVO council meeting.

The meeting ran from 3 p.m. to 8 p.m. and included dinner. Discussion was open and demonstrated the clear interest of members in the regulation of their profession. □

An **Open Exchange** meeting will be held in **Toronto** on **September 24, 2003** at the Holiday Inn, Yorkdale.

Invitations will be sent to all members in the Toronto and surrounding area, although all members are welcome. When registering, members will be asked to select topics which they would like to see included in the agenda. The registration form is also available on the CVO website ([www.cvo.org](http://www.cvo.org)) under News Items. Registration is limited.

## New Look for Website

### www.cvo.org

The College of Veterinarians of Ontario is pleased to announce the launch of its redesigned website. The site offers veterinarians and the public improved access to information about the regulation of veterinary medicine in Ontario ([www.cvo.org](http://www.cvo.org)).

The extensive use of documents in PDF allows the user to download forms, newsletters, and INFO

SHEETS easily and quickly. The links page is being developed as an important resource for veterinarians.

The site will be maintained by CVO staff, ensuring the currency of posted information. Council and committees will have access to a restricted area for CVO business. □

July 8, 2003

**CVO** THE COLLEGE OF VETERINARIANS OF ONTARIO  
"Regulating the Ontario veterinary profession in the public interest"

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*Welcome to the*  
**College of Veterinarians**  
*of Ontario*

The College of Veterinarians of Ontario (CVO) regulates the practice of veterinary medicine in Ontario to protect the public interest. The CVO is not a school or university. The CVO licenses veterinarians, inspects and accredits veterinary facilities and investigates complaints against veterinarians.

**@ Sign-up for Electronic Newsletter**  
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**News Items**

**17-06-2003**  
Policy and Proposed Legislative Changes  
Policies and proposed regulation and by-law amendments (June 4, 2003).  
[More...](#)

**10-06-2003**  
It's Election Time!  
On October 7th, the CVO will hold elections in three constituencies.  
[More...](#)

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## In Memoriam

The council and staff of the CVO were saddened to learn of the following deaths. We extend our sincere sympathy to their families and friends. In memory of deceased members, the CVO contributes an annual grant to the Ontario Veterinary College Alumni Trust.

**Arnott, James Roswell (Ros)** (OVC 1955) – Dr. Arnott passed away on March 8, 2003. He owned a veterinary hospital in Brampton, Ontario. Dr. Arnott resigned in 1991 to pursue farming. He is survived by a dear friend, Muriel, four children and eight grandchildren. □



**Dr. John Stanley Clark** (OVC 1941) Dr. Clark passed away on May 17, 2003. After graduation, Dr. Clark practiced large and small animal medicine in Forest, Ontario. In 1950, he joined the federal Department of Agriculture where he worked until his retirement in 1984. Dr. Clark held Emeritus Status with the College. He is survived by his wife Helen, five children, eleven grandchildren, and seven great-grandchildren. □

**McLean, William J.** (OVC 1955) – Dr. McLean passed away on May 1, 2003. After graduation, Dr. McLean practiced for a year, and then entered the Western Ontario School of Medicine. He graduated with his M.D. degree in 1960. Dr. McLean received his specialty degree in Ear, Nose and Throat medicine in 1965 and practiced in Kitchener-Waterloo until February 2003. He is survived by his wife Emily, four children and five grandchildren. □

**Meads, Emerson Blake (Jeff)** (OVC 1951) – Dr. Meads passed away on May 29, 2003. He spent most of his career working for the Ontario Ministry of Agriculture and Food, Veterinary Services Laboratory, in Kemptonville and Guelph. Dr. Meads held Emeritus Status with the College. He is survived by his wife Margot, three children and four grandchildren. □

**Silver, Jeffrey Neil** (OVC 1973) – Dr. Silver passed away on April 21, 2003. After graduation he practiced at the Leslie Animal Clinic and started the Bayview Village Veterinary Clinic.

Jeff left private practice in 1989 and became manager of the Veterinary Emergency Clinic (VEC) of which he had been one of the founding members. At this time he also maintained a mobile surgical practice. The VEC grew from one to two locations and in 2000, the partnership opened a referral and critical care center in Toronto.

Jeff was involved with the Ontario Veterinary Association, serving as a councillor and as chair of the Complaints Committee.

He is survived by his wife Mary Anne, two children, Stephanie and Kevin and a stepson, Darren. □

*Update*, the official publication of the College of Veterinarians of Ontario, is the principle means of communication between the College and its members. It is the primary means of informing the membership on regulatory issues, with the expectation that members will govern themselves accordingly. *Update* is charged with the responsibility of providing comprehensive, accurate and defensible information.

Deadline for the Fall 2003 edition of *Update* is **September 19**. Send in your submissions to the editor c/o CVO, 2106 Gordon Street, Guelph, Ontario N1L 1G6.

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