#### 2012 ABVS Meeting Notes

March issue of JAVMA will have article on a checklist for good practice approach for preventive care for companion animals – find this for Bruce

Changes were made to the ABVS Operating Procedures

Include a copy of the newly drafted expectations for ABVS representatives (see below). Advise the ACPV that a new representative to this group will need to be identified next year to be submitted for consideration to the ABVS. I was unable to find any process for this in the Policies and Procedures Manual.

Dates for 2013 and 2014 were set.

2013 - 2/22&23

2014 - 2/21&22

AVMA Bylaws change:

Article 2 Membership, Section 3 ii

Section 3. Membership Categories. The Association shall have three (3) categories of membership as follows:

#### a. Voting.

- 1. Voting membership may be granted to any individual who has earned a professional degree in veterinary medicine from a school or college of veterinary medicine and has met membership qualifications and application requirements as specified in Article II, Sections 1 and 2, and is:
  - i. A member in good standing of a veterinary organization represented in the House of Delegates; or
  - ii. A diplomate in good standing of an AVMA/American Board of Veterinary Specialties (ABVS recognized veterinary specialty organization; or
  - iii. Endorsed by at least two (2) voting members of the Association; or
  - iv. A graduating student who has been certified to be a member in good standing of an organization represented in the Student AVMA House of Delegates.
- Voting members may be granted Honor Roll status entitling them to such benefits as the Executive Board, or its designee(s), shall determine provided that they have:
  - i. Reached the age of seventy (70) and maintained membership in the Association for a total of forty (40) years; or
  - ii. Reached the age of seventy-two (72) and have maintained continuous membership in the Association since graduating from a school or college of veterinary medicine.
- b. **Associate.** Associate membership may be granted to any individual who (i) has earned a professional degree in veterinary medicine from a school or college of veterinary medicine; (ii) is a legal resident of a country other than the United States; (iii) has met membership qualifications and application requirements as specified in Article II, Sections 1 and 2, and is:
  - A member in good standing in the national veterinary medical association of the country in which such individual resides; or
  - 2. Endorsed by at least two (2) voting members of the Association in good standing.
- C. Affiliate. Affiliate membership may be granted to any individual who (i) does not otherwise qualify for membership as a voting or associate member; (ii) is either a citizen or permanent resident of the United States of America or Canada; (iii) has met membership qualifications and application requirements as specified in Article II, Sections 1 and 2; and (iv) does one of the following:
  - 1. Teaches veterinary medicine or the sciences allied to veterinary medicine; or
  - 2. Engages in veterinary research.

20) "Veterinarian-client-patient relationship" means that all of the following are required:

- a) The veterinarian has assumed the responsibility for making <u>medical clinical</u> judgments regarding the health of the <u>patient animal and the need for medical treatment</u>, and the client has agreed to follow the veterinarian's instructions.
- b) The veterinarian has sufficient knowledge of the <u>patientanimal</u> to initiate at least a general or preliminary diagnosis of the medical condition of the <u>patientanimal</u>. This means that the veterinarian <u>has recently seen and</u> is personally acquainted with the keeping and care of the <u>patientanimal either</u> by virtue of:
- i. an timely examination of the patientanimal, by the veterinarian, or
  ii. by medically appropriate and timely visits by the veterinarian to the
  operationpremises where the patient is managedanimal are kept, or
  iii. review of patient records of such examinations and visits to provide
  continuing care as described in subsection c-ii.
- c) The veterinarian is readily available or has arranged for emergency coverage for followup evaluation or has arranged for either of the following: in the event of adverse reactions or the failure of the treatment regimen.
  - i. veterinary emergency coverage;
  - ii. continuing care and treatment.
- d) The veterinarian maintains patient records.

Commentary to Section 2—The definition of "veterinarian-client-patient relationship" (VCPR) in subsection 202 was is unchanged in 2012, and is now different from that established jointly by the AVMA and the United States Food and Drug Administration and embodied in federal regulation 21 CFR 530.3(i) relating to extra-label drug use.

In 2012, subsection 14 was revised to define "patient" as "an animal or group of animals." Therefore, the definition of VCPR can be applied to individual animals as well as a group or groups of animals within an operation (production system).

The AVMA recognizes that individual states may wish to more clearly define specific terms within theis definition of VCPR. For example, a state regulatory board may wish to include a specific time period (eg, no less frequent than 6 or 12 months) to better delineate the termphrase "timelyrecently seen." relating to examinations and visits. The term "timely" should be considered in light of the nature and circumstances of the patient (eg, species, condition or disease, or operation).

In 2012, subsection 20-b-iii was added to allow another veterinarian to provide continuing care and treatment of patients, if all other conditions are met, while the attending practitioner is temporarily unavailable.

<u>In 2012, subsection 20-d was added to state that patient records must be maintained to establish a VCPR.</u>

States may also wish to further specify that when establishing a VCPR in the case of large production enterprises, operations, "sufficient knowledge" can be supplemented by means of:

- 1. examination of health, laboratory, or production records; or
- 2. consultation with owners, caretakers or supervisory staff regarding a

health management program for the patient; or

3. information regarding the local epidemiology of diseases for the appropriate species.

a VCPR means that a veterinarian has recently seen and is personally acquainted with the keeping and care of *representative animals* and *associated husbandry practices*.

# Section 5 – Veterinarian-Client-Patient Relationship Requirement

- 1) No person may practice veterinary medicine in the state except within the context of a veterinarian-client-patient relationship.
- 2) A veterinarian-client-patient relationship cannot be established solely by telephonic or other electronic means except to meet the sufficient knowledge requirements in section 2-20-b-iii and continuing care requirements in section 2-20-c-ii.

COMMENTARY TO SECTION 5—This section, which was added in 2003, emphasizes not only that veterinary medicine must be practiced within the context of a veterinarian-client-patient relationship (VCPR), but also emphasizes that because a VCPR requires the veterinarian to obtain sufficient knowledge of thoroughly examine the patientanimal, it cannot be adequately established solely by telephonic or other electronic means (ie, via telemedicine) alone. This section does not prohibit a veterinarian from using telephonic or other electronic means when providing continuing care and treatment of patients while an attending practitioner is temporarily unavailable, as described in section 2, subsection 20.

However, oonce established, a VCPR may be able to be maintained between medically necessary examinations or visits via telephone or other types of consultations.

# **RESPONSIBILITIES OF AN ABVS MEMBER**

# Description

An ABVS member represents their recognized veterinary specialty organization (RVSO), and is a full voting member of the ABVS. A member's term of service is four years and can be renewed for additional four-year terms at the discretion of their RVSO. They are responsible for communicating ABVS policies and activities to their RVSO such as preparation of five-year and annual reports, and concerns and questions raised by the review of these reports.

## **Time Commitments**

Time commitments include participation in one (1½ to 2 day) meeting per year at the AVMA office building in Schaumburg, Illinois, and conference calls and e-mail communications as necessary. In addition, ABVS members are expected to:

- Serve on one or more committees of the ABVS.
- Serve as a reviewer of annual and/or five-year reports.

- Serve as a reviewer of petitions for proposed new specialty organizations, specialties, and/or subspecialties
- Serve as a liaison to developing new specialty organizations, specialties, and/or subspecialties.

# **Committee Responsibilities**

ABVS members are expected to serve on one or more committees. Standing committees of the ABVS include:

- Executive Committee
- Committee on Development of New Specialties
- Postgraduate Program Evaluation Committee
- Nominating Committee
- Policies and Procedures Committee
- Annual Report Review Committee

In addition, ad hoc committees are created as needed.

Membership on the Executive Committee is voluntary and those wishing to serve on this committee must be nominated then elected by the ABVS.

Members on the other committees are appointed by the ABVS Chair with advisement from the Executive Committee. Upon appointment, if a member feels they cannot make the time commitment to serve on a committee they should inform the ABVS Chair and staff as soon as possible so a replacement can be made.

Responsibilities required by each individual committee include:

# **Executive Committee**

- Meets annually in the late fall after receipt of annual reports, five-year in-depth reports, and petitions. Other business is conducted by conference call, email, or other correspondence.
- Reviews Policy and Procedures.
- Develops recommendations for ABVS review.
- Serves as long-range planning committee.
- Develops the agenda for the annual meeting.
- Executive Committee members also serve on the CDNS.
- Reviews the merits of complaints and makes a recommendation to the chair of the ABVS to accept or reject requests for mediation.
- Addresses other matters referred to it by the ABVS, the Council on Education, the chair of the ABVS or staff.

## **Nominating Committee**

- Business conducted by conference call, email, or other correspondence.
- Submits a slate of officers to the chair for review at the Executive Committee meeting prior to consideration and approval by the full ABVS at the annual meeting.

#### **Policies and Procedures Committee**

- Business conducted by conference call, email, or other correspondence.
- Evaluates the Policies and Procedures of the ABVS for their applicability to current ABVS processes.
- Suggests changes or amendments to the P&P to the EC.
- Drafts proposed changes to the P&P as directed by the EC or the ABVS.

# **Committee on Development of New Specialties**

- May meet annually at the time of the EC meeting. Other business conducted by conference call, email, or other correspondence.
- Receives and reviews new petitions and advises the Chair on assignment of liaisons to assist prospective veterinary specialty organizations with the recognition process.
- Solicits opinion and views about the proposed veterinary specialty organization.
- Collates information for action at the next committee meeting.
- Annually evaluates petitions from prospective veterinary specialty organizations as to their appropriateness for submission to the ABVS for action. When it is deemed by the CDNS that a petition is in order and the petitioning organization has fulfilled the current concepts for standards and prerequisites for an emerging organization, the petition will be submitted to the EC for assignment of reviewers and inclusion in the ABVS agenda.
- Reviews the interim report for every provisionally recognized veterinary specialty organization. The committee shall prepare a recommendation, including a motion on the status and future development of each college, which is due at the AVMA on February 1.
- Review and evaluate petitions for full recognition from provisionally recognized veterinary specialty organizations making appropriate recommendations to the EC for further action on the petition and actions required by the veterinary specialty organization.

# **Postgraduate Program Evaluation Committee**

- Business conducted by conference call, email, or other correspondence.
- Considers matters as directed by the EC or the ABVS, such as residency training programs, other approved pathway standards and clinical experience evaluation criteria.
- Develop protocols for recertification.
- Report recommendations to the EC and the ABVS.

## **Annual Report Review Committee**

- Business conducted by conference call, email, or other correspondence.
- Reviews the annual reports of fully recognized specialty organizations and presents its findings at the annual ABVS meeting.

## **Five Year In-Depth and Annual reports**

Each RVSO is required to submit a Five-year In-Depth report and an Annual Report. Responsibility for preparing these reports is determined by the RVSO; you may be required to prepare these reports. If your RVSO assigns the preparation of the report to someone other than its ABVS representative, then you will be responsible for communicating all instructions and material concerning the preparation of the report to that person.

After a report has been reviewed, the reviewers' comments will be sent to you. It will be your responsibility to address these comments or forward them to the appropriate person in your RVSO.