

NYS Veterinary Client Patient Relationship (VCPR) Review Subcommittee

NYS BVM VCPR Subcommittee:

Meg Thompson

Doug Aspros

Paul Zoyhowski

Stephen Boese

Sue Wyelegala, NYSVMS representative

Alexandra van der Woerd

Justification for NYS VCPR Guidance Review:

The pandemic brought telemedicine use into veterinary practice beyond teleradiology and teleconsulting. The emergency VCPR suspensions allowed many general and specialty practices to test the technology, client interest, appropriate use, and workflows. At the same time, broader discussion on consumer value, care access, and valid doctor-client-patient relationship review took place in both veterinary and human medicine. Routine use in human medicine skyrocketed during the pandemic and persisted post-pandemic. In veterinary medicine, adoption was lower but additionally concern about VCPR definition slowed use and caused reversion to previous in-person workflows. Consumer demand, the evolving understanding of best practices in virtual care and improvements in access to care were not considered. Review by this subcommittee was undertaken to consider the impact of modification of VCPR in New York on veterinarians, patients, clients and underserved populations across species.

Background:

6/29/2022 – Introductory Review of VCPR

7/31/2022 – Cross-Industry Forum on VCPR and Telemedicine at AVMA convention – Doug Aspros

8/10/2022 – VCPR Subcommittee Discussion

9/15/2022 – VCPR Subcommittee Discussion

9/16/2022 – Large Animal / Federal Implications Discussion with Dr. Joni Schefftel, Minnesota State Veterinarian – Meg Thompson <https://www.avma.org/news/fda-resume-enforcement-all-federal-vcpr-requirements-veterinary-telemedicine>

9/30/2022 – BVM Meeting – Update on Progress

10/6/2022 – Jan Robinson presentation, Ontario (note also available from external group)

Attendees: Sue Wyelegala, Paul Zoyhofski, Stephen Boese

Speaker: Jan Robinson – regulatory administration for 30 years, 11 years in veterinary medicine

Key Points:

- Ontario organization has unified regulatory/association functions
- 2300 facilities, 6300 veterinarians
 - o Facilities are accredited by organization.
- Three key parts to VCPR
 - o Recent or sufficient experience to be decision maker
 - o Expectation to provide continuity of care
 - o VCPR established based on:
 - Vet retained by client
 - Agreed to scope of services
- Telehealth never sufficient for new condition/new animal for controls
- Known animal/known client/known condition can prescribe controls

12/16/2022 – Post Jan Robinson / Pre-Board meeting discussion

Key Points:

- NYSVMS is in alignment with current AVMA coalition statement on VCPR
- VIC – keep veterinarians guiding profession development, not private equity

1/27/2023 – BVM, plan is to present draft proposal at next BVM meeting

2/24/2023 – Draft review

PROPOSED INITIAL REVISION OF 5.11 GUIDANCE

A VCPR exists when ~~all~~ of the following are satisfied:

A. The veterinarian has assumed the responsibility for making medical judgments regarding the health of the patient with the assent of the owner of the animal or their duly authorized agent.

B. The veterinarian has sufficient knowledge of the patient to initiate at least a general or preliminary diagnosis of the medical condition of the patient. ~~This means that the veterinarian is personally acquainted with the keeping and care of the patient by virtue of:~~

~~i. a timely examination of the patient by the veterinarian, or~~

~~ii. medically appropriate and timely visits by the veterinarian to the operation where the patient is managed, or~~

~~iii. medically appropriate and timely visits by the patient to the veterinary facility where the veterinarian is working.~~

C. The veterinarian is readily available for an in-person follow-up evaluation and oversight of

treatment and outcomes, or has arranged for [contracted for] appropriate continuing care and treatment.

D. Prescriptions written under a virtual VCPR must be for under 30 days of medication and cannot be refilled.

E. Patient records are maintained.

Topics to be considered for future discussion.

- Expansion of role of LVTs
 - o VCPR
 - <https://www.nwaonline.com/news/2023/feb/13/bill-would-allow-veterinarian-technician/>
 - <https://www.aaha.org/publications/newstat/articles/2023-2/can-expanding-the-rvt-role-improve-access-to-care/>
 - o LVT versus paraprofessional
- Impact of Federal OTC anti-microbial rules
 - o https://www.avma.org/resources-tools/one-health/antimicrobial-use-and-antimicrobial-resistance/over-counter-antimicrobials-changing-prescription-only?utm_source=delivra&utm_medium=email&utm_campaign=Vitals%20-%20Feb%202023&utm_id=4882390&utm_term=OTC+antimicrobials+changing+to+prescription-only+&dlv-emuid=5814eae7-2478-4ed6-9904-99d4d5632bb1&dlv-mlid=4882390