



Veterinary Surgeons' Board



FROM THE REGISTRAR

By now you should have received an email with your renewal notice for 2021. If you haven't received the email you can login to your account on the Board [website](#) for your renewal details. Your username is the email address you originally registered with the Board (unless you have changed it).

It is hard to believe that we are coming to the end of the year already. And what a year it has been! We are very fortunate in WA that we seem to have so far escaped the worst of the actual pandemic.

For many of us it is going to be a Christmas with close family members missing as it seems unlikely that the WA hard border will be eased before next year. If you need support during this time so please consider taking up the Board's offer of paying for two counselling sessions to help you through it. All you need to do, to take up the offer, is to contact the Board office by email or phone.

Other than the renewal reminder this newsletter has some important alerts and an update on the scheduling of Pentobarbitone as well as the opportunity to serve on the Animal Ethics Committee at Edith Cowan University.



As always, feedback, suggestions and comments are very welcome.

Dr Sue Godkin
Registrar

RENEWALS OF REGISTRATION AND APPROVALS FOR 2021

The [Board website](#) facility for paying your renewals for registration as a veterinary surgeon, approval as a veterinary nurse or authorisation as a trainee veterinary nurse online for 2021 is now active. If you have changed your email address please ensure that you log in to your account and update your contact details as all communication regarding renewals will be by email.

The absolute deadline for payment of renewal fees is midnight 31 December 2020.

If you do not pay by this date your name will be removed from the Register on 1 January 2021 and you will not be able to legally work as a veterinary surgeon, veterinary nurse or trainee veterinary nurse in Western Australia.

The Boards' office shuts down from midday on Thursday 24 December 2020 to 8.30am Monday 4 January 2021. During this period you may still pay using the online facility on the Board website, up until midnight on 31 December 2020.

SCHEDULING OF PENTOBARBITAL

The Department of Health WA, has provided the following update on the scheduling of Pentobarbital.

Pentobarbital, was considered at the March 2020 meeting of the Joint Advisory Committee on Medicines and Chemical Scheduling. The original proposal had been to move to Schedule 8.

The public notice of the Scheduling Delegate's final decisions relating to matters discussed at the March 2020 meeting were published on 24 August 2020 and can be found [here](#). There is more detail in the interim decisions located [here](#).

Appendix D of the Poisons Standard by reference is not adopted in Western Australia, primarily because the way many of the requirements of Appendix D are written are not specific enough to be adopted directly. Instead, corresponding specific changes to the *Medicines and Poisons Regulations 2016* are required to bring the requirements of Appendix D into WA law.

However, in this case, the current requirements of the *Medicines and Poisons Regulations 2016* for storage of Schedule 4 medicines at a veterinary surgeon's 'usual place of practice' already mean that storage of pentobarbitone injection essentially meets this requirement. All S4 drugs must be stored in a container, cabinet or room that is kept locked and accessible only to a veterinary surgeon or veterinary nurse.

The only situation where a 'locked container' is not explicitly specified is when a veterinary surgeon is attending patients elsewhere – in that case the *Medicines and Poisons Regulations 2016* require that the vet be in the possession of the S4 drug at all times and take reasonable steps to protect the drug from being lost or stolen.

There is some variation between states and territories in relation to the storage requirements for Schedule 4 drugs.

Regardless, we would certainly not discourage veterinary surgeons from storing pentobarbitone separately and with greater security to other Schedule 4 drugs.



"BLACK MARKET CAT DRUGS STUDIED AS COVID-19 TREATMENT"

The Australian Pesticides and Veterinary Medicines Authority (APVMA) has recently become aware of media reporting ([Black market cat drugs studied as COVID-19 treatment, 31 August 2020, The Age](#)), in relation to the unregistered compounds known as GS-441524 and GC376. These compounds which are being used to treat cases of feline infectious peritonitis, are not approved for use by the APVMA. No manufacturing facilities are licenced by

the APVMA to produce these compounds for use in animals.

Cat owners seeking unregistered products to treat their pets may result in unsafe or ineffective veterinary chemical products being supplied. This poses a risk to pets.

Registered veterinarians may apply for [consent to import](#) when they have examined an animal that is under their direct care and, as the treating veterinarian, considers the use of an unregistered veterinary product is indicated over the use of an available registered product. Veterinarians remain responsible for complying with the relevant laws in their State or Territory.

The APVMA is an administering authority for the consent to import, although other importation approvals may be required depending on the product. The appropriate form can be downloaded from the [APVMA website](#) and submitted via email to enquiries@apvma.gov.au.

The unlawful importation of unregistered veterinary chemicals is an offence which can be subject to fines between

\$1,998 and \$166,500, as well as civil or criminal penalties.

The APVMA works with a number of agencies and regulators, including the Australian Border Force, to detect importation of unregistered veterinary products. Where veterinarians commit suspected offences the APVMA will notify the appropriate Board and may take further enforcement action.

Further information about [importing](#) veterinary chemical products and the APVMA's [compliance](#) responsibilities is available on the APVMA website. Any enquiries about import consent for veterinary products can be directed to the APVMA Case Management and Administration Unit on +61 2 6770 2300 or enquiries@apvma.gov.au

BIOSECURITY ALERT - AFRICAN HORSE SICKNESS

A message from Dr Mark Schipp, Chief Veterinary Officer (Australia)

I am writing to draw your attention to the concerning and dynamic regional African horse sickness situation. As you may be aware, Malaysia recently reported an outbreak of African Horse Sickness (AHS). This follows the detection of AHS in Thailand earlier this year.

Regional spread of this significant and severe horse disease, which is exotic to Australia, is to be expected. The recent detection, unfortunately, serves as an important reminder of our need to be prepared for the increasing threat within our region. I have attached a summary [here](#) of the disease and the current situation, and welcome your comments (to Ariella Hayek) on this as well.

The Department of Agriculture, Water and the Environment continues to monitor and assess the situation. I encourage

you all to also reflect on the situation and undertake relevant activities, including participating in the review of the AUSVETPLAN disease strategy through Animal Health Australia.

ANIMAL ETHICS COMMITTEE VACANCY

Edith Cowan University's Animal Ethics Committee is currently seeking a person with qualifications in veterinary science to join their Animal Ethics Committee as a Category A Veterinarian member pro bono. The Animal Ethics Committee is responsible for the ethical review and approval of all research and teaching activities involving animals at the University, and operates to ensure that all such activities are conducted in compliance with the Australian code for the care and use of animals for scientific purposes (2013), and in a scientific and ethical manner, with the welfare of the animals involved as their focus. The position is based in Perth or online and applicants must hold qualifications in veterinary science that are recognised for registration as a veterinary surgeon in Australia.

Interested applicants are encouraged to contact the Chair of the Edith Cowan University Animal Ethics Committee, Associate Professor Annette Koenders at a.koenders@ecu.edu.au

ADVICE TO VETERINARIANS REGARDING THE BIODIVERSITY CONSERVATION ACT AND TREATMENT OF WILDLIFE

By Simone Vitali and Ryan Parker, Department of Biodiversity, Conservation and Wildlife.

Veterinarians in WA are often called upon to provide treatment and care for wildlife. These cases can often present



uncertainties for veterinarians in terms of making decisions in the best welfare interests of the animal. This article is intended to provide some guidance to veterinarians on the custodianship and management of wildlife cases in WA.

The Department of Biodiversity, Conservation and Attractions (DBCA) recognises and values the role that veterinarians play in the rehabilitation of wildlife. DBCA has a statutory responsibility for the conservation and protection of wildlife under the *Biodiversity Conservation Act 2016* (“the Act”) and associated regulations. Under this legislation it is an offence to ‘take’, ‘disturb’ or ‘possess’ wildlife without lawful authority. However, this does not prohibit the unlicensed temporary care of injured or abandoned wildlife for up to 72hrs.

In deciding on veterinary management of a wildlife case, veterinarians should consider:

- the welfare of the individual, and
- the prospects of the animal returning to fitness and being able to be returned to the wild.

There may be circumstances when there is treatment available that may save the animal’s life, but will render the animal unlikely to survive in the wild. The Department does not generally support this approach as it is often in conflict with the ultimate welfare and quality of life of a wild animal. Such actions may also be at odds with the Act, which only allows for ‘temporarily caring for injured fauna or abandoned fauna’ with the intent to return it to the wild.

Decisions about veterinary management of wildlife should also take into account their wild status and species-specific responses to disease and treatment, which are potentially very different from domestic animals. In electing to undertake medical and surgical intervention with wildlife, the veterinarian should consider the welfare impacts of confinement and human interaction, given the non-domestic status of the patient. Veterinarians should refer to veterinary knowledge of the species in question to determine what sort of veterinary intervention might be appropriate.

In some instances, there may be significant pressure brought to bear on veterinarians to “save the life” of an individual wild animal, regardless of its release prospects, because a client or rehabilitator is prepared to provide care to the

animal in a captive situation for the rest of its life. These assurances may be at variance with the welfare prospects of the individual, its conservation value, or the resources available to ensure high quality lifelong care. The principle of rehabilitation is for the animal to remain in care for the minimum length of time necessary to achieve return to health, and to enable it to be released fully fit back into the wild. It is an offence for a wildlife rehabilitator (or any person) to possess native fauna if it cannot be released back into the wild. In some circumstances the Department will issue authority for fauna brought into care for rehabilitation to remain in captivity under a different licence, but only in circumstances where there is an education or conservation benefit and where that transfer to an appropriate license is facilitated by the Department. In very few instances individual wild fauna of threatened species which are unfit for release may be suitable to contribute to a breeding program, or to achieve education and advocacy outcomes in captivity.

Transfer of animals to appropriate licensees where they cannot be released to the wild is not appropriate for an animal that is unable to have an acceptable quality of life in captivity. It is also not the role of the veterinarian or the wildlife rehabilitator to make this decision without direct consultation with, and authority from, the Department. Accordingly DBCA asks veterinarians to support the general principle of euthanasing such cases rather than promoting derelict captive wild individuals.

The following documents are available online and provide further direction for making decisions about rehabilitation of wildlife:

[Code of Practice for Wildlife Rehabilitation in Western Australia](#)

[Wildlife Rehabilitation Standards and Guidelines - making decisions on the fate of rehabilitated fauna](#)

[Wildlife Rehabilitation Standards and Guidelines - Management of rehabilitated wildlife that cannot be released into the wild](#)

Veterinary personnel seeking advice regarding legalities, release or possible rehoming of wildlife, especially Threatened or Specially Protected Fauna, should contact the DBCA Duty Wildlife Officer

(wildlife.protection@dbca.wa.gov.au), or your local DBCA office.

UPDATED BOARD GUIDELINES

The following guidelines have recently been updated

- [Guide for registered veterinary surgeons to respond to an investigation of a complaint](#)
- [Guidelines for the authorisation to carry out certain acts of equine dentistry under the direction of a veterinary surgeon](#)

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