



# Veterinary Surgeons' Board



## Veterinary Clinical Record keeping Guidelines

### PREAMBLE

Regulation 30 of the *Veterinary Surgeons Regulations 1979* (see below) sets out the basic requirements for a veterinary clinical record. However professional standards must be adhered to in the delivery of all veterinary services and the responsibility for setting those standards rests with the Veterinary Surgeons' Board (Board).

These Guidelines describe the standard of practice expected by the Board to be observed by veterinary surgeons in Western Australia.

### APPLICATION

These Guidelines apply from and including 14 August 2018.

These Guidelines may be superseded by subsequent versions. To ascertain whether this version has been superseded, view the current version on the Board's website at [www.vsbwa.org.au](http://www.vsbwa.org.au)

It is the responsibility of veterinary surgeons to be conversant with the current version of these Guidelines.

### GUIDELINES

Veterinary clinical records are an essential tool in the practice of veterinary medicine and surgery. The records should contain the justification for patient care including differential diagnoses, and serve as a means of communication between members of staff, and with others who may be consulted or to whom a case may be referred. For both clinical and legal purposes, they provide documentary evidence of the patient's ownership status, health status, care and treatment. They serve as a basis of review, study and evaluation of veterinary care rendered to the patient by the practice.

All practising veterinary surgeons are professionally obligated to ensure they maintain appropriate clinical records. This obligation is not restricted to those instances in which scheduled drugs are prescribed or dispensed as detailed in regulation 30 of the *Veterinary Surgeons Regulations 1979*, but applies to all professional services provided by veterinary surgeons to their clients.

### Regulation 30 Clinical record of supply or prescription of scheduled drug

- (1) A registered veterinary surgeon who supplies or prescribes a scheduled drug must make a clinical record of the supply or prescription.
  - (a) A clinical record required under subregulation (1) must include –
  - (b) the name and address of the owner of the animal; and
  - (c) sufficient details to identify the animal; and
  - (d) the clinical history of the animal including the results of any examination of, or diagnostic tests carried out on, the animal; and
  - (e) the name of the poison; and
  - (f) the quantity of the poison supplied or prescribed.

(2) The registered veterinary surgeon must keep the clinical record for a period of 7 years.

While not prescribed in the Act the Board is of the view that the following additional information must be included in clinical records:

- (1) the date of the consultation;
- (2) the date the clinical record is generated if it is not the same as the date of the consultation; and
- (3) the dose rate for the poisons supplied or prescribed and the duration of treatment for each poison.

Veterinary surgeons dispensing medications for food animals should note their additional obligations under the *Veterinary Chemical Control and Animal Feeding Stuffs Act 1976*. Failure to comply with these requirements may result in disciplinary action by the Board.

In cases where schedule 8 (S8) drugs are administered or prescribed, the veterinary surgeon must ensure they comply with the requirements for recording the supply of the drugs in the practice S8 register as required under the *Medicines and Poisons Act 2014*. Failure to comply with these requirements or the making of entries which do not accurately reflect the use of the S8 drugs is regarded as unacceptable by the Board, and may result in legal action by the Health Department and/or disciplinary action by the Board.

## Discussion

Irrespective of the species or number of animals treated, complete, well documented records provide evidence of practice protocols and treatments. Good record keeping is essential to provide evidence of continuity of treatment between veterinary surgeons in situations where more than one veterinary surgeon attends to a case. Where S8 drugs are administered or prescribed, the production of good clinical records and accurate maintenance of the S8 registers demonstrates compliance with the *Medicines and Poisons Act 2014*. Clinical records should be able to stand alone in the event of an inquiry and be sufficient to justify the treatment and management of the particular case.

When investigating a complaint, the Registrar will request veterinary surgeons involved to provide the clinical records of the case. Poor or non-existent clinical records may leave a veterinary surgeon legally vulnerable.

The Board believes that the keeping of adequate clinical records is an essential component of professional conduct in contemporary veterinary practice. As a consequence, the failure to keep adequate and appropriate clinical records may result in the Board instituting disciplinary action against veterinary surgeons who have failed to maintain appropriate clinical records.

Veterinary surgeons should note that the Department of Health, in administering the *Medicines and Poisons Act 2014*, routinely checks purchases of restricted medications. If atypical quantities of medications or a change in purchase behaviour is detected, the Department of Health may approach a practice to inspect the records of the purchase of those medications or conduct an audit of all medications. The Department of Health may also ask the Registrar to investigate a practice for possible breaches of the *Veterinary Surgeons Act 1960*.

## Synopsis

Clinical records should be:

- accurate and complete;
- recorded at the time of, or as soon as possible following the provision of the veterinary service which includes but is not limited to consultations, provision of advice, examinations, surgical procedures and diagnostic examinations etc.;
- of sufficient detail to demonstrate the veterinary surgeon's assessment of, and treatment of a patient;

- in sufficient detail to enable a continuity of clinical assessment and treatment of a patient by another veterinary surgeon in the practice or if the animal is referred; and
- in compliance with relevant legislation.

Other points in regard to clinical records include:

- Annotations or amendments to clinical records:
  - For hand written records, any subsequent annotations or entries, must include the date and the time of the annotation and be initialled by the veterinary surgeon.
  - For computer based records, subsequent annotations must be made as a separate record rather than amending the original clinical record.
- When a patient transfers to another veterinary surgeon, the primary veterinary surgeon should, when asked by a client, make available either a copy of the entire original medical record or a summary sufficient in detail to enable appropriate ongoing care of the case.
- This should, where appropriate, include other resources such as laboratory results and images.
- Clinical records provided to the Board should be provided in their entirety.
- Computer based records - it is essential that adequate backups of the data are kept. The backup must be made at least daily, and copies should be kept at a secure off site location.

## **DISCLAIMER**

This document (printed, electronic or any other medium) cannot be regarded as legal advice.

Although all care has been taken in preparing these Guidelines they do not replace advice specific to the reader's circumstances. Where necessary, advice must be sought from competent legal practitioners. Neither the authors nor the Veterinary Surgeons' Board of Western Australia accept or undertake any duty of care relating to any part of these Guidelines.