

COUNCIL GUIDELINE FOR CONSULTATION/REFERRAL  
OR  
OWNER INITIATED SECOND OPINION

**GUIDING PRINCIPLES**

*The Veterinary Profession General Regulation sets out in Part 3 (Ethics and Advertising) a number of statements which provide clear guidance to veterinarians providing consultative/referral services, or a second opinion.*

- Section 16** Every registered veterinarian, registered veterinary technologist, permit holder student and other member of the Association
- (h) Should assist in maintaining the integrity of the profession and participate in the activities of the profession, and
  - (i) Should maintain conduct characterized by courtesy and good faith, with a mutual interchange of counsel and assistance.
- Section 18** No member shall belittle or injure the professional standing of another member of the profession or publicly criticize the character of another member's professional acts.
- Section 22** When a registered veterinarian is consulted by another registered veterinarian and in the course of that consultation discusses the matter with a client, the registered veterinarian shall do so in such a way as to avoid criticizing the other registered veterinarian.
- Section 24** Consultation shall be conducted in such a spirit of professional cooperation between consultant and attendant registered veterinarian as to assure the confidence of the client in veterinary medicine.
- Section 25** A consulting registered veterinarian shall not revisit the patient or client or communicate directly with the client without the knowledge of the attending registered veterinarian.
- Section 26** In no instance and under no circumstances shall a consulting registered veterinarian take charge of a case or problem without consulting with the attending veterinarian and obtaining the consent of the owner of the animal.

Veterinarians should conduct themselves professionally and ethically in accordance with the General Regulation and Council Guidelines with respect to second opinions, consultations, and referrals, and promote collegiality. Communication in a professional manner between the client, the initial attending veterinarian, and the consulting/referring veterinarians is the essence of the above tenets and violation of any one of those tenets may constitute unprofessional conduct.

**DEFINITIONS**

**Initial Attending Veterinarian** - a client selected veterinarian or veterinarians from a Veterinary Practice Entity (VPE) that have undertaken the initial or primary veterinary medicine examination, diagnosis and treatment of an animal.

**Subsequent Attending Veterinarian** - a client selected veterinarian or veterinarians from a VPE that examines a patient for a client that was previously seen by another attending veterinarian at another VPE (regarding the same condition or problem). The subsequent attending veterinarian becomes an attending veterinarian until the client chooses otherwise.

**Second Opinion** - a choice exercised by a client to visit a veterinarian other than the one previously used in order to get more information or to hear a differing point of view, with respect to the diagnosis and/or treatment of his/her animal(s). The veterinarian providing the second opinion assumes responsibility for the case unless the client returns for treatment or further action to the initial attending veterinarian.

**Specialist** – a veterinarian or veterinary technologist approved for registration as a specialist in accordance with ABVMA Policy on Recognition of Veterinary and Veterinary Technology Specialties

**Consulting Veterinarian** - a veterinarian or veterinarians within a VPE with additional qualifications, expertise and/or equipment who agrees to accept responsibility for the management of care for the animal(s), or provide specific diagnostics or treatment to animals under the care of the initial attending veterinarian. This is at the request of the initial attending veterinarian with permission and consent of the animal's owner. The expectation is that care of the animal(s) will remain with the initial attending veterinarian.

**Referral Veterinarian** - a veterinarian or veterinarians within a VPE that accept cases (for reasons such as availability, additional qualifications, expertise and/or equipment) and agrees to become the subsequent attending veterinarian, and accept responsibility for the management, care, and/or treatment of the animal(s), previously under the care of the initial attending veterinarian, at the request of the initial attending veterinarian with permission and consent of the animal's owner. The expectation is that the care of the animal(s) will return to the initial attending veterinarian once the referral veterinarians are finished their specific contributions to the case.

**Consultation/Referral** - occurs when the initial attending veterinarian (*referring veterinarian*) recognizes the need for advanced diagnostics, treatment or care and makes that recommendation to the owner. Consultation with, and referral to, more specialized colleagues is an essential part of patient care.

**Referral Practice** – A VPE in which a significant portion of the business is accepting referrals from other VPEs or veterinarians. A referral practice does not accept appointments directly from the public and engages in veterinary medicine by accepting referral appointments from other VPEs and veterinarians.

**Specialty Practice** – A VPE whose primary purpose is to provide one or more specialty services by veterinarians approved for registration as specialists by the ABVMA. Specialist(s) are expected to be working at the practice on a daily basis. The VPE may employ non-specialists in the practice.

## **RECOMMENDED PROTOCOL FOR SECOND OPINIONS**

In the event that a client seeks a second opinion, with or without the knowledge of the initial attending veterinarian, the following protocol should be followed:

1. Appropriate permissions should be obtained from the client to facilitate collaboration and communication between both veterinarians as early as possible in the case. Permission from the client must be provided to the

initial attending veterinarian before records can be released to the second opinion veterinarian. It is considered a professional courtesy for the second opinion veterinarian to inform the initial attending veterinarian that they are seeing the case, after obtaining owner consent.

2. It is the duty of every veterinarian to perform any procedure with confidence in their ability and within the limits of their skill and knowledge such that the outcome will be in the best interest of the patient. When such confidence, skills or knowledge is in question then the initial attending veterinarian has a duty to inform the client that a referral to another registered veterinarian, such as a specialist, may be in the best interest of the patient. This should subsequently be noted in the records if the client declines the referral in favour of the initial attending veterinarian performing the procedure.
3. If the client requests that the initial attending veterinarian not be contacted, the subsequent veterinarian assumes responsibility for the care of the animal(s) as the current attending veterinarian, and must not contact the initial attending veterinarian.
4. All communication should be between veterinarians, not support staff, in all but the simplest of cases where meticulous records are provided.
5. If the subsequent attending veterinarian is concerned regarding the conduct or skill of the initial attending veterinarian, then he/she should:
  - a) Initially communicate those concerns directly to the initial attending veterinarian.
  - b) If those concern(s) are significant and not alleviated after communication with the initial attending veterinarian, then he/she may verbally communicate the concern(s) to the ABVMA Complaints Director.
6. If the client is concerned about the conduct or skill of the initial attending veterinarian, they should be encouraged by the subsequent attending veterinarian to:
  - a) Contact the initial attending veterinarian to express their concerns.
  - b) If the client remains concerned and wishes to proceed further, they may be advised to phone the ABVMA to discuss the matter with the Complaints Director.
7. **Declining a Client** - declining to examine or treat an animal, and subsequently sending the client elsewhere is not a referral. Referrals only follow an initial examination, workup and/or treatment of a patient by the initial attending veterinarian. Reasons for declining a client may include:
  - a) the client asking for service that is outside the scope or species of the VPE
  - b) human resources not available at the VPE to provide the service
  - c) previous history with the client
  - d) the VPE has documented the official termination of a client
8. No report from the second opinion veterinarian is required to be sent to the initial attending veterinarian but is allowed with permission from the client.

9. In the situation where there are several veterinarians/VPEs involved, the same process applies.

## **RECOMMENDED PROTOCOL FOR CONSULTATION / REFERRALS**

1. Referral of a case to a consulting/referral veterinarian must be a joint decision between the attending veterinarian, and an animal's owner. The animal's owner **must** consent to seeking consultation or having the animal referred. The attending veterinarian should always attempt to satisfy a client's request for referral.
2. The attending veterinarian makes the initial contact with the consulting/referral veterinarian, and provides the relevant medical information regarding the matter.
3. The consulting/referral veterinarian may choose to accept or decline the case from the initial attending veterinarian, based on the assessment of the case information provided.
4. All relevant information and records are to be transferred to the consulting/referral veterinarian in a timely fashion.
5. Direct communication by the consulting/referral veterinarian to the initial attending veterinarian should be made on a timely and regular basis with respect to the progress and outcome of the case. Other services or treatments required by the patient not related to the cause for consultation/referral should be communicated to the owner and initial attending veterinarian.
6. At the conclusion or resolution of the case, a written report is to be sent to the initial attending veterinarian to facilitate follow-up care in a timely manner.
7. A consulting/referral veterinarian shall revisit the patient for an unrelated problem only in collaboration with the initial attending veterinarian.

## **CLARIFICATION EXAMPLES AND COMMENTARY**

1. An owner is concerned regarding the treatment of the skin condition of her dog. She is fond of her current veterinarian, Dr. A, but has heard that Dr. X "specializes" in dog skin problems. She books an appointment at Dr. X's clinic, and takes her dog to see Dr. X. Dr. X examines the dog, and assures the owner that the current diagnosis and treatment is, in her opinion correct, the owner then resumes using Dr. A for her dog's health care.

*In this scenario, Dr. X is providing a client requested second opinion. Dr. X is expected to contact Dr. A as a courtesy, unless the owner requests her not to do so. (Dr. X cannot make contact with Dr. A regarding this case without the owner's permission.) If the owner had decided to remain as a client with Dr. X, the owner would have to provide written instructions to Dr. A to forward her dog's records to Dr. X.*

2. A 12-year-old Lab is diagnosed at ABC Clinic with a liver problem. Dr. B recommends to the owner that they arrange to have Dr. T attend ABC Clinic to perform an ultrasound of the dog's liver. This occurs, and a diagnosis is made by Dr. T that requires the dog to undergo surgery. The owner is informed, and it is recommended by

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Dr. B that the dog be taken to Dr. G at DEF Specialty Surgical Clinic for the surgery. The owner agrees, the dog is transferred, the surgery is performed, and the dog returns to ABC Clinic for post-surgical aftercare and checkups.

*In this scenario, Dr. T has provided **consultative services** to Dr. B at ABC Clinic. Dr. T never assumes responsibility for the case, and is only providing a **diagnostic service**. The dog is then **referred** to Dr. G, where Dr. G provides a **specialty service** for the dog as the **referral** and **specialist** veterinarian. While at GEF Specialty Clinic, Dr. G assumes responsibility for the case as the current attending veterinarian, but care reverts back to Dr. B at ABC clinic as the initial attending veterinarian when Dr. G's involvement in the case is over. Permission must be obtained from the owner for both the consultation with Dr. T and the referral to Dr. G. In both cases, care returns to the initial attending veterinarian. There is an expectation that the referral veterinarian send a report to the referring veterinarian.*

3. A horse owner contacts HIJ Equine Clinic, his regular care clinic, because his prized Quarter Horse stallion is colicing badly. He is informed that all of the veterinarians are unavailable at the moment, and that no one can see the horse for at least 4 hours. He is told that the colic sounds very serious and that he should contact TEG Equine Surgical Centre immediately and take the horse there.

*In this scenario, the client is declined service, and is appropriately directed elsewhere. This is **not** a referral. The veterinarian at TEG Equine Surgical Centre would become the initial attending veterinarian upon examination of the horse. If a veterinarian had been available to examine the stallion at HIJ Equine Clinic, and then contacted TEG Equine Surgical Centre to send the stallion there for surgery, then this would be a referral.*

4. A dairy farmer has become disgruntled with the veterinary services of Dr. M. He contacts Dr. V to conduct his next herd health visit, and is very impressed with Dr. V, and requests that Dr. V continue with regular monthly herd health visits. The dairy farmer calls Dr. M and informs him that his services are no longer required, and sends Dr. M a letter requesting that he please forward all of his dairy herd's medical records to Dr. V.

*In this case, Dr. M is obliged to transfer the records for the dairy to Dr. V within a timely manner. Dr. M has no grounds not to do so, even if there happens to be outstanding financial or other issues. Dr. V is not obligated to contact Dr. M. but may wish to do so as a professional courtesy.*

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