

## GUIDELINE 15

### INTER-PRACTITIONER COMMUNICATIONS

Registered veterinary practitioners should ensure they are familiar with the contents of this Guideline. The Board considers this Guideline to be the minimum standard expected from a registered veterinary practitioner exercising reasonable skill and care in the course of providing treatment to animals.

Practitioners should read this Guideline in conjunction with the Definitions listed in the introductory pages.

#### 15 PREAMBLE

The community needs to be able to trust the veterinary profession if the relationship between the members of the public and the veterinary profession is to be successful. Hence it is important that practitioners preserve the integrity of the profession by ensuring that personal differences and competitive forces do not erode inter-practitioner relationships. This is not just a matter of professional ethics. Failure to maintain adequate information transferral between treating practitioners can jeopardise the well being of animals under veterinary care.

#### 15.1 EFFECTIVE COMMUNICATIONS

Good veterinary practice relies on effective communication between veterinary practitioners.

15.1.1 If effective communications have not been met, particularly if there is evidence that practitioners have been deliberately obstructionist in releasing information about particular cases or are seeking a competitive advantage, it may be considered by the Board to constitute unprofessional conduct.

#### 15.2 ALTERNATIVE OPINIONS

Clients are entitled to seek alternative professional opinions about cases already attended to by a veterinary practitioner.

15.2.1 When an animal is under treatment, it is reasonable, although not necessary in every case, to contact the original practitioner to determine what treatments have been provided. *This information can only be released with the express consent of the client involved.* Ideally this should be a written authorisation, however circumstances may dictate that the client makes contact by other means to request the release of case records to another practitioner.

15.2.2 It is important that clients are advised of possible complications or adverse reactions if they are reluctant to authorise the release of prior medical records before proceeding with additional or altered treatment regimes.

### 15.3 **PROMPT RELEASE OF RECORDS**

Where a client has authorised and requested the release of medical records (this may include case notes, computer printouts, pathology results or medical imaging results), it is expected that these are provided to the alternative practitioner without undue delay.

15.3.1 This information transferral may be in one of many forms- phone discussion, post or facsimile or electronically.

15.3.2 Protocol concerning the recording and release of veterinary medical records is already covered under Guideline 11.

### 15.4 **DIFFERING PROFESSIONAL OPINIONS**

In the circumstances where a practitioner is concerned about treatment or advice provided previously by another practitioner, the practitioner should, with the owner's permission, seek to discuss the matter with that practitioner, and must refrain from making critical or disparaging comments to the client. This applies even if a difference of professional opinion between the practitioners remains unresolved.

### 15.5 **COMMUNICATION WITH REFERRAL OR VETERINARY SPECIALISTS**

Referral veterinary practitioners have a responsibility to maintain communication with the original practitioner during treatment of the case. Refer to Guideline 14.

### 15.6 **WHEN AN ANIMAL / HERD IS BEING TREATED BY MORE THAN ONE REGISTERED VETERINARY PRACTITIONER**

Where more than one registered veterinary practitioner is treating a herd, there must be communication between each of the registered veterinary practitioners to ensure that the herd health and treatment knowledge of the regular responsible registered veterinary practitioner is not compromised.

### 15.7 **UNSCHEDULED APPOINTMENTS**

Where a person presents an animal at a practice holding a mistaken belief that they have an appointment at that practice, the practice should attempt to establish whether or not an appointment has been made at another practice. If this is the case, the person should be given the opportunity to decide which clinic provides the service to the animal.

**15.8 SEEKING OR GIVING TELEPHONE ADVICE**

- 15.8.1** When seeking advice, the patient must not be identified without:
- a) owner knowledge and consent;
  - b) the practitioner being consulted having agreed to accept the patient for referral or a second opinion; and
  - c) a comprehensive case history being supplied in a timely manner.
- 15.8.2** It is appropriate, with owner knowledge and consent, for a veterinary practitioner to seek telephone advice from another practitioner as to whether a particular patient is an appropriate case for referral.
- 15.8.3** Where appropriate, case histories and advice given should be documented in writing to minimise the possibility of misunderstanding.
- 15.8.4** Veterinary practitioners should not advise owners that they have *"consulted with a specialist"* unless they are referring to a registered veterinary specialist.