





## UPDATE ON REVIEW OF BOARD GUIDELINES

The Board sincerely thanks the many veterinary practitioners and other stakeholders in the veterinary profession who gave feedback on Vetboard Victoria's proposed guidelines about appropriate standards of veterinary practice and veterinary facilities.

In total, we received 178 submissions on the proposed guidelines.

The consultation closed on 30 November, and we have begun analysing and considering all feedback.

Finalised guidelines and a report on the consultation process will be issued in 2020.

The proposed guidelines can be viewed at <https://engage.vic.gov.au/vetboard-victoria-guidelines-review>

## OFFENCES UNDER THE VETERINARY PRACTICE ACT 1997

In the light of the recent convictions under sections 57 and 59 of the *Veterinary Practice Act 1997* (the VPA) reported in this newsletter, it is an appropriate time for a refresher on the relevant offences in the VPA.

From time to time, Vetboard Victoria is alerted to claims made on websites or in other media about persons working in the veterinary field who are not registered as veterinary practitioners and/or not endorsed as veterinary specialists in Victoria.

In summary, under the VPA a person must not make claims about having general or specialist registration if they are not registered as a veterinary practitioner or veterinary specialist in Victoria; and other people must not hold out such persons as being registered.

### Claims as to registration (s57)

A person who is not a registered veterinary practitioner must not:

- claim to be qualified to practise as a veterinary practitioner
- carry out any act that is required to be carried out by a registered veterinary practitioner by or under an Act
- take or use the title of registered veterinary practitioner or any other title calculated to induce a belief that the person is registered under the VPA, or
- claim to be registered or hold themselves out as being registered under the VPA.

### Claims as to specialist registration (s57)

If a person is not a registered veterinary practitioner whose registration has been endorsed by the Board to the effect that they are a veterinary specialist (or a specialist in a particular branch of veterinary surgery or veterinary medicine), they must not:

- claim to be qualified to practise as a veterinary specialist (or a veterinary specialist in a particular branch of veterinary medicine or surgery)

- claim to be qualified to practise as a veterinary specialist (or a veterinary specialist in a particular branch of veterinary medicine or surgery)
- take or use the title of registered specialist (or a registered specialist in a particular branch of veterinary medicine or surgery) or any other title calculated to induce a belief that the person has an endorsement as a veterinary specialist (or an endorsement that the person is a veterinary specialist in a particular branch of veterinary medicine or surgery).

### Holding another person out as registered under the VPA (s57)

Under section 57(6) of the *Veterinary Practice Act*, a person must not hold out another person as being registered under the VPA, if the person ought reasonably to know that the other person is not so registered.

### Other offences

Other offences in Part 5 of the VPA include offences about the manner in which a veterinary practice or veterinary services is advertised, fraudulent registration and forgery of documents and offences about directing or inciting unprofessional conduct.

You can download and read [the \*Veterinary Practice Act 1997\* here](#) (PDF).

## NEW SPECIALISTS IN VICTORIA

Congratulations to recently endorsed specialists:

- Dr Katrina Garrett (Veterinary Radiology – Diagnostic Imaging)
- Dr Marnie Ford (Veterinary Ophthalmology)

The Board's [Search for a Vet feature](#) includes the specific details of a specialist endorsement next to the name of the veterinary specialist, e.g.

*Endorsed in:*

Veterinary Radiology (Diagnostic Imaging)

## FAQS FROM VETERINARY PRACTITIONERS

### Q Where can I store euthanasia drugs?

Most euthanasia drugs are barbiturates, which are classified as Schedule 4 poisons in the Australian Standard for Uniform Scheduling of Medicines and Poisons (SUSMP). Schedule 4 poisons must be stored in a lockable storage facility, e.g. a cupboard, drawer, fridge, filing cabinet or room.

However, given the potential for misuse of euthanasia drugs, many practitioners store them with their Schedule 8 poisons, which have tighter storage requirements. Under Regulation 74 of the *Drugs, Poisons and Controlled Substances Regulations 2017*, Schedule 8 poisons must be stored in a **locked facility, fixed to the floor or wall, which provides no less security than a (10 mm thick) mild steel drug cabinet.**

Schedule 8 poisons cannot be stored with any other medications except for those classified as drugs of dependence in Schedule 11 of the *Drugs, Poisons and Controlled Substances Act 1981*.

As barbiturates are also classified as Schedule 11 drugs of dependence (in addition to being Schedule 4 poisons), they can be lawfully stored with Schedule 8 poisons.

The Board holds the view that it is best practice to store euthanasia drugs with Schedule 8 poisons, or to store them as if they were Schedule 8 poisons.

The Board notes that access to euthanasia drugs by veterinary practitioners (and by veterinary nurses in certain circumstances) is permissible under the Regulations, and as such the potential for misuse will always exist. However, tighter controls may reduce the risk of unlawful use, or of unauthorised access by non-veterinary staff and members of the public.

### Q How can I record my CPD?

Vetboard Victoria's Guideline 13 on Continuing Professional Development (CPD) requires veterinary practitioners to retain documented evidence of Continuing Professional Development activities for a minimum of three (3) years. At registration renewal time, you will be asked if you have kept up with your CPD requirements.

You can download a CPD record form from the Board's website at [www.vetboard.vic.gov.au](http://www.vetboard.vic.gov.au) > Vets > [Forms](#)

### Q Do I need to get an individual radiation use licence if my practice has a practice management radiation licence?

Yes, you do need an individual radiation use licence. A practice management licence only gives a veterinary **business** the right to operate and have radiation equipment/sources on the premises. Management licences do not encompass **individual** use of radiation equipment/sources in Victoria.

**If you are a practising in Victoria, you must have an individual use licence to use radiation equipment or sources** (including veterinary general X-ray units, veterinary fluoroscopic X-ray units, veterinary computed tomography X-ray units and/or unsealed radioactive material used in veterinary nuclear medicine).

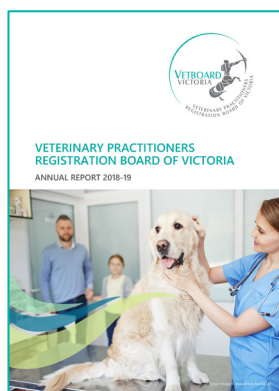
Use licences can be obtained from the Department of Health and Human Services at <https://www2.health.vic.gov.au/public-health/radiation/licensing/use-licences-employees/sector-specific-information/veterinary/surgeons>

## VETBOARD VICTORIA 2018-19 ANNUAL REPORT

The Veterinary Practitioners Registration Board of Victoria's annual report was presented to the Legislative Council of the Parliament of Victoria on 17 October 2019.

The report contains an overview of the Board's operations and finances for the 2018-2019 financial year.

At 30 June 2019, there were 3,509 veterinary practitioners on the Register of Veterinary Practitioners, an increase of 4.7% on the previous year.



During the year, the Board granted general, specific or specialist registration to more than 388 veterinary practitioners and managed the registration renewal of over 3,300 practitioners.

Vetboard Victoria's 9-member Board oversaw 129 investigations, 18 disciplinary hearings and 3 prosecutions.

In 2018-19, the Board's focus was on implementing improvement tasks and objectives set out in Vetboard Victoria's 2019-2022 Corporate Plan and the Minister for Agriculture's Statement of Expectations (SOE) for improving the administration and enforcement of the Board's core regulatory functions.

[View Vetboard Victoria's 2018-19 Annual Report](#)

## LEGISLATIVE CHANGES AFFECTING VETERINARY PRACTITIONERS

Effective 1 February 2020 there will be changes to legislation affecting veterinary practitioners. These changes were enacted by the Parliament of Victoria through the *Primary Industries Legislation Amendment Act 2019*.

### CHANGES TO VETERINARY PRACTICE ACT 1997

Several amendments to the *Veterinary Practice Act 1997* (VPA) will take effect from February 2020, including:

- introduction of a 45-day time limit on making a request for the Board to hold a formal hearing to review the findings and determinations of an informal hearing. The person who was the subject of the informal hearing must make this request.
- an increase from \$2,000 to \$10,000 in the monetary penalty that a formal hearing panel can impose on a veterinary practitioner found to have engaged in unprofessional conduct of a serious nature. This increase brings the penalty in line with amounts imposed in other Australian jurisdictions.

### CHANGES TO DISEASE TESTING LEGISLATION

Early recognition of a serious or exotic animal disease is one of the most important factors influencing the chance of controlling the disease and reducing its economic and social impact on the whole community.

If you know or have reason to suspect that a notifiable disease is present in an animal, then as a veterinary practitioner who is dealing with the animal you must notify Agriculture Victoria of the suspicion of the disease and you must submit specific information with samples and specimens submitted for testing.

#### Increased penalty for not supplying information with tests submitted for disease testing

When submitting samples from any animal to a veterinary laboratory for testing for a notifiable disease, you are required to both notify Agriculture Victoria and to provide certain critical details to the laboratory undertaking the testing.

Agriculture Victoria expends considerable time contacting practitioners for details which should have been supplied with submissions to veterinary laboratories. It is crucial to provide all details so quick action can be taken to control significant diseases detected in companion or farm animals.

Penalties already apply for not supplying all required information. To reflect the risk posed by delays in providing information, from February 2020 the

**REMINDER:** New Prevention of Cruelty to Animals Regulations 2019 commenced 14 December 2019 – [see changes at Engage Victoria](#)

- Changes to the offences relating to advertising of veterinary practices or veterinary services so that advertising in a manner that is false, misleading or deceptive is an offence, regardless of whether or not the advertisement was intended to be false, misleading or deceptive.
- a framework to provide the Vetboard Victoria with more enforcement options for offences against the *Veterinary Practice Act 1997*. In the future, the Board will be able to issue official warning letters and infringement notices for certain offences. An implementation date is yet to be determined but will be clearly communicated well ahead of time.

maximum penalty for not supplying required information with samples or specimens submitted to veterinary diagnostic laboratories will increase from \$1,652 to approximately \$4,956.

Agriculture Victoria will also have more tools to ensure compliance with requirements around notification and testing of significant diseases, including being able to issue official warning letters and \$330 infringement notices.

### MORE DISEASE REPORTING INFO

Read more about legislated reporting and testing requirements on Vetboard Victoria's website > [Agriculture Victoria News and Resources](#).

See types and lists of notifiable diseases, reporting timeframes and notification forms at <http://agriculture.vic.gov.au/agriculture/pests-diseases-and-weeds/animal-diseases/notifiable-diseases>

**Question?** Call 136 186 to talk to AgVic Veterinary/Animal Health Officers located throughout Victoria

**Urgent issue?** Call the **Disease Watch Hotline** 24 hours/day, 365 days on 1800 675 888

#### Relevant legislation and regulations:

- *Livestock Disease Control Act 1994*
- *Livestock Disease Control Regulations 2017*

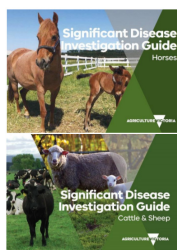
## AFRICAN SWINE FEVER CONTINUING TO MOVE SOUTH

On 26 September 2019, African swine fever (ASF) was confirmed in the Dili Municipality of Timor Leste (or East Timor), approximately 650 kilometres north-west of Darwin across the Timor sea. This represents the closest outbreak of this exotic swine disease to Australia since the first diagnosis in China in August 2018.

Read about African Swine Fever and what you and your clients can do to prevent the spread to Australia of this severe viral disease on Vetboard Victoria's website > [Agriculture Victoria news and resources](#).

## DISEASE INVESTIGATION GUIDES

Agriculture Victoria has produced a set of cattle and sheep and horse Significant Disease Investigation (SDI) Guides based on the Northern Australian Quarantine Surveillance Significant Disease Investigation Field Guide. The free hard-copy booklets have been produced to help veterinary practitioners recognise emergency animal diseases and understand investigation and sample collection and submission procedures.



To order copies of the guides, email Pritishna Chand at [prishna.chand@agriculture.vic.gov.au](mailto:prishna.chand@agriculture.vic.gov.au).

The Commonwealth Department of Agriculture and CSIRO's Australian Animal Health Laboratory have also produced a guide to help vets identify important emergency animal diseases in the field. You can download this from the [National pest and disease outbreaks](#) website.

## LEAD EXPOSURE AND POISONING IN LIVESTOCK

With dry seasonal conditions leading to tendency to graze areas of the farm that would otherwise be free of stock, it is a good time to remember the risk of lead poisoning

Preventing lead residues in livestock products protects human health and Victoria's ongoing access to international markets. Lead is highly toxic to livestock and humans and may cause sudden death in livestock. All animals that have been exposed to lead sources must be managed to ensure that animal products for human consumption or export do not contain lead residues.

**AGRICULTURE VICTORIA HOTLINE**  
Call 1800 675 888 to report suspected emergency diseases. This hotline is staffed by vets 24 hours a day, 365 days a year.

## TSE AND SDI PAPERWORK

A reminder to all Victorian vets submitting samples to the national [Transmissible Spongiform Encephalopathy \(TSE\) Surveillance Project](#) and national [Significant Disease Investigation \(SDI\) Program](#): if you (and your client) wish to receive the available incentive payments, please submit compensation paperwork to Agriculture Victoria within 3 months of finalising laboratory testing or you may not be paid. Compensation documents can be downloaded from the pages linked above.

## DOWNLOAD NOTIFY NOW!

**Notify Now** is a free disease notification app available from the App Store and Google Play. Vets can use the app to make instant notifications to Agriculture Victoria. Users can include high quality geo-located photos of affected animals, owner details and Property Identification Codes in their notifications.



Notifiable diseases include serious endemic diseases such as anthrax as well as exotic diseases such as African Swine Fever, Bluetongue Virus, and Foot And Mouth Disease. For some of these diseases, Agriculture Victoria must be notified immediately, others within 12 hours or within seven days.

↓ Search for  
'Notify Now' in  
App Store or  
Google Play

Read more about how livestock are exposed to lead, clinical signs of lead poisoning, testing of livestock



following exposure, and what happens to livestock when lead poisoning is confirmed on Vetboard Victoria's website > [Agriculture Victoria news and resources](#).



## ANTIMICROBIAL RESISTANCE – AN ISSUE FOR ALL VETERINARIANS FROM THE AUSTRALIAN GOVERNMENT DEPARTMENT OF AGRICULTURE

### Why should you be concerned about antimicrobial resistance?

Antimicrobial resistance (AMR) has been identified as a critical global issue, with the World Health Organization (WHO) describing it as an 'urgent global health priority'. At least 700,000 people currently die of resistant infections every year globally, and it is estimated that by 2050 up to 10 million lives a year may be lost to AMR, exceeding the 8.2 million lives a year currently lost to cancer. In April 2019, a United Nations Ad hoc Interagency Coordination Group on AMR took this sentiment further and stated that there is no time to wait, as AMR will have a disastrous impact within a generation unless the world acts urgently.

Antimicrobial use is considered the single most important factor leading to resistance. Resistance is increasing at a pace that far exceeds our capacity to develop new antimicrobials, with very few products brought to the market in recent years.

Inappropriate and unrestrained use of antimicrobials in human and animal health globally exerts a strong selection pressure on microbial populations to evolve resistant traits. As a result, antimicrobials have become less effective over time. Resistant organisms are also able to spread between humans, animals and the environment. Globalisation and international travel help facilitate its spread between countries.



Given the scale and importance of the AMR problem, the international response has seen several major human and animal health bodies, including the WHO, the World Organisation for Animal Health (acronym OIE) and the Food and Agriculture Organization of the United Nations (FAO) work together to develop global strategies to combat AMR. The [FAO/OIE/WHO Tripartite Collaboration on AMR](#) has recently published a [Monitoring and Evaluation Framework](#) to help monitor national and global progress under the WHO's [Global Action Plan on AMR](#).

### Australia's response to AMR

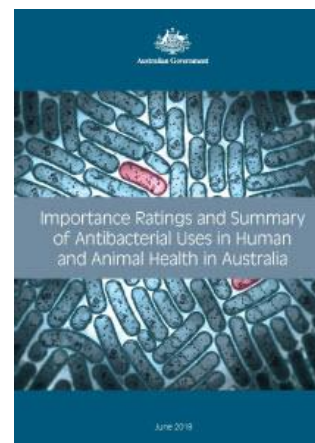
Nationally, the Department of Agriculture (the department) has been working with governments, non-government organisations, professional bodies (such as the Australian Veterinary Association and universities), research organisations, and our human health counterparts, to implement Australia's First [National AMR Strategy 2015-2019](#) and associated [Implementation Plan](#). The current strategy expires at the end of this year, and Australia's National Antimicrobial Resistance Strategy – 2020 and Beyond (the next national AMR strategy) will continue its 'One Health' approach through the inclusion of the environment alongside human and animal health. It will also expand the focus from antibiotic resistance to include antifungals, antiparasitics and antivirals.

In mid-2018, the Australian Government also released an update of the

#### [Importance Ratings and Summary of Antibacterial Uses in Human and Animal Health in Australia](#)

(Antibacterial Importance Ratings).

This document provides information and guidance to inform decision making about the registration and use of antibacterial medicines in Australia for human and animal health professionals.



### How is Australian animal health performing?

From an animal health perspective, the risk of the development of AMR from animals in Australia is considered to be low due to factors such as strict regulation on registration, low levels of antimicrobial use in food-producing animals, high levels of biosecurity, and extensive farming systems that do not favour bacterial disease.

AMR surveillance undertaken to date in food-producing animals through ad hoc studies generally supports this view, noting that there are some areas for improvement.

Continued next page...

## Antimicrobial resistance: an issue for all veterinarians continued...

### Combating AMR – the role of the veterinarian

With the expected release of the next national AMR strategy early next year, it is a timely reminder to reflect on the significant role that we, as veterinarians, play in limiting and minimising the spread of AMR.

As veterinarians, our prescribing rights come with significant responsibilities. Following are some of the things prescribing veterinarians can do to help minimise the spread of AMR:

1. **Pause and consider each antimicrobial prescription: can you use a lower rating or narrow spectrum antimicrobial? Veterinarians need to familiarise themselves with the [Australian Antibacterial Importance Ratings](#) to help with these decisions.**
2. **Talk to clients about ways to minimise the use of antimicrobials, including the use of vaccinations to prevent and control infection.**
3. **Promote and apply best practice biosecurity and hygiene measures.**
4. **Use published therapeutic guidelines, where available.**

To help make optimal decisions when prescribing antibiotics, an online package about effective antimicrobial stewardship (AMS) practices is available.



Developed by the  
Veterinary Schools of  
Australia and  
New Zealand and  
funded by the  
Australian  
Government, this

practical online resource is available nationally to all veterinarians at [www.vetams.org](http://www.vetams.org). Additional modules are being developed by the University of Sydney and Charles Sturt University with further Australian Government funding.

Fighting AMR is the Australian Veterinary Association's strategic priority and they have developed [AVA AMR factsheets and resources](#) about best-practice antibiotic prescribing and infection prevention and control practices to help clinical veterinarians in their day-to-day use of antimicrobials.

Australian Pork Limited has recently published [AMS factsheets](#) for pig producers, and Meat and Livestock Australia has developed an [online AMS program](#) for cattle feedlot staff.

The food-producing animal industries are also developing an Animal Industry AMS Research, Development and Extension Strategy to allow industries to identify and collaborate on cross-sectoral AMS priorities.

### AMR and veterinarians – final thoughts

Antimicrobial resistance is a significant global health priority driven by inappropriate use of antimicrobials in human and animal health, and agriculture.

The veterinary and medical professions need to work together to ensure a combined, global effort towards preserving the effectiveness of important antimicrobials for the necessity of human health (your health), and animal health and welfare.

Veterinarians are an integral part of the solution to safeguarding the efficacy of antimicrobials. Your commitment has minimised spread of AMR to date, but we need you to continue your contribution towards collective national efforts in preserving the effectiveness of antimicrobials for all of us, and the animals in our care.

## AGRICULTURE VICTORIA RESOURCES ON AMR

In 2019, Agriculture Victoria attended over 20 animal health conferences and events in Australia to help raise awareness of antimicrobial resistance. At these events, staff promoted and distributed prescribing and other resources on antimicrobial resistances developed in collaboration with the University of Melbourne.

Read more about Agriculture Victoria's initiatives and find links to resources on Vetboard Victoria's website > [Agriculture Victoria news and resources](#).

Join the global conversation, help spread the message and play your part by prescribing appropriately to prevent antimicrobial resistance.





## GUIDANCE FOR NEW VETERINARY PRACTITIONERS

Congratulations to all graduates on achieving your qualifications in veterinary science or veterinary medicine, and a warm welcome to the Victorian veterinary practitioner community.

The Board is conscious that some graduate veterinary practitioners have already started work, and that many will start practising during the New Year. A number of graduates have moved from other States in order to take up positions in Victoria.

At this time of year, veterinary practices can be short-staffed, so it is understandable that graduates are in demand.

Vetboard Victoria's message to all graduates joining the veterinary profession is that you should be careful to work within your limitations and always seek support from senior colleagues if you are not sure about treating a patient. Be sure also to consult the many resources available to you, including:

- [The Board's Guidelines](#)
- The [Veterinary Practice Act 1997](#), and other laws relating to veterinary practice including the *Drugs, Poisons and Controlled Substances Act 1981*
- The [Office of Medicines and Poisons Regulation](#) within the Victorian Department of Health and Human Services.

- [Agriculture Victoria](#), with resources on:
  - [Animal health and welfare](#)
  - [Livestock care](#)
  - [Pet care](#)
  - [Resources for fighting antimicrobial resistance](#)
  - [Emergencies](#) and [biosecurity](#) (including [notifiable diseases](#)).
- The [Australian Veterinary Association's policies](#), which include policies on the use of veterinary medicines; surgical, medical and other veterinary procedures; euthanasia; and separate policies on companion, production, and other animals.

### DECEMBER 2019 GRADUATE NUMBERS

So far in December 2019, 78 graduates have registered in Victoria:

- 3 University of Adelaide graduates (SA)
- 1 Massey University graduate (New Zealand)
- 3 Murdoch University graduates (WA)
- 68 University of Melbourne graduates (VIC), and
- 3 University of Queensland graduates.

More graduates will be registering with Vetboard Victoria later this month and in January 2020.

## REQUEST FOR FEEDBACK ON RECENT VETERINARY GRADUATES FROM THE UNIVERSITY OF MELBOURNE VETERINARY SCHOOL

The Melbourne Veterinary School graduated 107 new veterinarians in December, many of whom will become the newest employees and colleagues of Victorian veterinary practitioners.

The Class of 2019 are the first cohort to experience the new tracked curriculum in the Doctor of Veterinary Medicine. They have diverse career interests and aspirations, and we look forward to seeing how they leave their mark on the profession.

This year the Veterinary School has been busy refining the curriculum to ensure that we continue to produce graduates who are optimally prepared for employment. We gratefully acknowledge the contribution of Victorian veterinarians who have

supervised Melbourne veterinary students during their extramural placements.

**The Veterinary School is seeking feedback from Victorian veterinary practitioners who have recently employed our graduates.** This feedback will inform future improvements to the veterinary curriculum.

If you have employed a University of Melbourne new veterinary graduate since 2015, we invite you to participate in the [Melbourne Veterinary School graduate employer survey](#).

The survey has been approved by the University of Melbourne Human Ethics Committee (ID: 1750155.4)

## MORNING TEA WITH DR NEMEC, REGISTERED 1954



**Dr Richard Nemec [V357], seated, with Interim General Manager Janet Hopkins and Board President Ted Whitem**

Earlier this month, Board President Professor Ted Whitem and Interim General Manager Janet Hopkins had morning tea with Dr Richard Nemec, who was granted registration to practise veterinary surgery within the state of Victoria on 6 October 1954.

Dr Nemec is one of the six veterinary practitioners still on the Register of Veterinary Practitioners who registered in Victoria in the 1950s, and the Board's records indicate that that he is the first person to have registered with the Board in that select group!

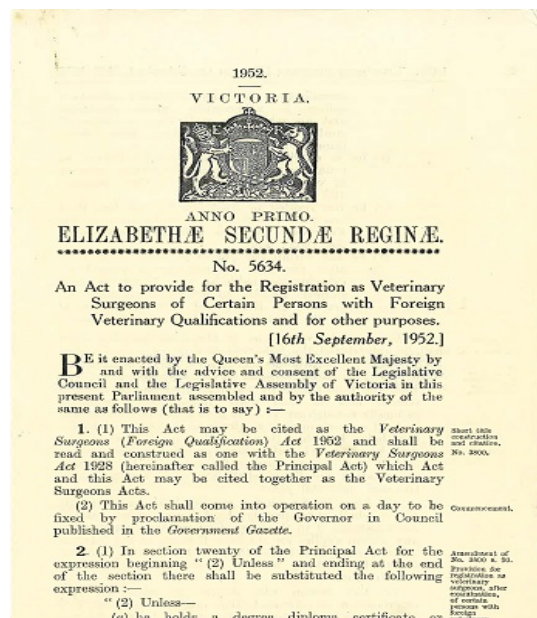
Dr Nemec shared with us his very strong memories of his early days as a veterinary practitioner in Melbourne.

Encouraged by an uncle to study for a veterinary degree in post-war Italy, he migrated to Australia with his family soon after graduating from the University of Milan in 1950.

As a foreign veterinary graduate, he could not at first work as a veterinarian, so he obtained a position with the Victorian Department of Agriculture as a Field Officer attached to the Animal Husbandry Research Centre in Werribee. Dr Nemec's letter of offer for this position states, *'A single room is available for you in the staff quarters of this Farm. A charge of approximately £3/2/- per week is made for meals, and your room will be provided with bed, mattress and pillow, leaving you to provide your own blankets, bed linen and so on.'*

In 1952, the State of Victoria passed *An Act to provide for the Registration as Veterinary Surgeons of Certain Persons with Foreign Veterinary Qualifications and for other purposes*. Registration under this Act was conditional on applicants passing an examination held by the Veterinary Board of Victoria.

Instructions to persons enrolled in the exam included that examinees were *'at liberty to bring [their] own English dictionary, as one will not be supplied. It will be necessary for you to submit the dictionary to the supervisor for scrutiny before each examination.'* Dr Nemec was the first examinee to successfully sit that exam in the 1954 year.



Subsequently the Board granted Dr Nemec registration (his certificate signed by President Philip Kelynack and Members Harold Albiston and Armagh Grayson), and he began looking for work as a veterinary practitioner.

One of the first things he did was to write to the Lort Smith hospital, which had been operating in North Melbourne since 1936. About 6 months after writing his letter, he got a telegram from Mrs Lort-Smith herself, *'RING ME IMMEDIATELY!'*

He presented himself at the house of Mrs Lort-Smith, who judged him suitable for employment and offered him a position working at the hospital.

Dr Nemec worked at the Lort Smith for over 4 years. He recalls the building as it was then, double-storey with a caretaker living at the top. He also remembers some of the instrumental figures in the Animal Welfare League of Victoria and at the hospital. In addition to Mrs Lort-Smith, *'closest to royalty in the field'*, he remembers receiving Christmas cards from Lady Brookes (whose husband was tennis champion Sir Norman Brookes) and giving reports to Board members and fundraisers including Lady Lyle, Mrs MacKinnon and Mrs Officer (*'who turned up in her furs'...*). **Continued next page...**

## Morning tea with Dr Nemec continued...

With fellow veterinarian Dr Gunther Morath, Dr Nemec staffed the first ever night clinic at the Lort-Smith running two nights a week from 6.30 to 8pm. *'At the time', he says, 'a night clinic was a novel idea' and it had some detractors.*

Overall, says Dr Nemec, *'Working at the Lort Smith was priceless. You got all the experience under the sun.'*

Eventually Dr Nemec left the Lort Smith to start his own veterinary practice in Brunswick, the Brunswick Veterinary Clinic then later the Hawthorn Veterinary Clinic.

Many of Dr Nemec's first patients at his practice were referrals from the Lort Smith, which at the time only treated sick and injured animals and referred animals elsewhere for vaccinations, desexing surgery and preventative health care.

Another source of patients was Sister Mary Fabian Elliott, founder of St Vincent's Private Hospital. *'In her spare time,' says Dr Nemec, 'Sister Fabian was known to wander the streets and lanes of Fitzroy, feeding stray cats.'*

*'Sr Fabian took me under her wing in some way. She bred Burmese and Siamese cats in a cattery on the rooftop of the maternity wing (next to the air conditioning ducts!!). When she gave the kittens away, she would advise the new owners to take the cats to me if they got sick.'*

When he was starting out in practice, Dr Nemec says, *'you could count the number of private veterinary clinics catering to companion animals on one hand.'*

*'There was Margaret Goodwin, who founded a practice in Ringwood on the main road in a beautiful strategic position.'*

*'...and Ann Froude Flashman, who in the late 50s and 60s had the only practice in Melbourne that would hospitalise distemper cases in an isolation ward with special-built kennels in the basement of her house.'*

Dr Nemec eventually retired from practice in 2011 after 55 years working as a veterinary practitioner, and he now holds honorary non-practising registration.

As we listened to Dr Nemec's stories, the high-rises outside the window seemed to disappear and we were transported to the wider slower streets of last century Melbourne.

Meeting Dr Nemec reinforced how much there is to learn from and share with registrants, both looking back to the past and forward to the future. The Board hopes to host similar occasions with other registrants in the future.

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**All the very best for the season from all at Vetboard Victoria.  
Our office will close at midday 24 December and will reopen at 9am on 2 January 2020.**