

Telemedicine in Iowa during COVID 19 Crisis

During the COVID 19 crisis the AVMA is recommending veterinary hospitals limit in-person exams. Many veterinarians are looking for alternative ways to practice medicine while keeping themselves, their clients and their staff safe. Telemedicine can be used to help assess an animal's condition and needs in some cases.

In March the FDA issued guidance (<https://www.fda.gov/media/136319/download>), for immediate implementation, that **temporarily** suspends the enforcement of certain aspects of the federal veterinarian-client-patient-relationship (VCPR) requirements. Those federal requirements apply to extra-label drug use (ELDU), and the issuing of veterinary feed directives (VFD). **The guidance acknowledges individual state VCPR requirements that may continue to exist**, acknowledges current federal VCPR requirements related to in-person examinations or premises visits, and indicates suspension of requirements outlined in guidance are temporary measures during the COVID-19 outbreak.

New Proposed Temporary VCPR Guidelines from IBVM:

The Iowa Board of Veterinary Medicine met on Thursday, March 26 and discussed telemedicine and the VCPR requirements for Iowa veterinarians during the COVID-19 crisis. Although the IVMA has not been given official documentation on the subject, it was discussed at the meeting to temporarily suspend enforcement of the prohibitions on creating a VCPR solely by telephonic or electronic means for companion animals. During this temporary COVID crisis, veterinarians should use their best judgements to establish a VCPR either electronically or telephonically for companion animals when necessary. The temporary changes do not include livestock. The Board plans to review the new guidelines each month to determine if they should continue. When the IVMA gets official word from the IBVM on these changes we will communicate them with our members.

Prior to these temporary changes, the Iowa Administrative Code 811 Chapter 12 defines a valid VCPR:

CHAPTER 12

STANDARDS OF PRACTICE

[Prior to 2/8/89, Veterinary Medicine, Board of [842] Ch 9]

811—12.1(169) Veterinarian/client/patient relationships.

811—12.1(169) Veterinarian/client/patient relationships. 12.1(1) The board shall determine, on a case-by-case basis, if a valid veterinarian/client/patient relationship exists. This relationship shall be deemed to exist when all of the following criteria have been met:

a. The licensed veterinarian has assumed the responsibility for making medical judgments regarding the health of the patient and the need for medical treatment, and the client has agreed to follow the instructions of the licensed veterinarian;

b. The licensed veterinarian has sufficient knowledge of the patient to initiate at least a general or preliminary diagnosis of the medical condition of the patient. Sufficient knowledge means that the licensed veterinarian has recently seen or is personally acquainted with the care of the patient by virtue of an examination of the patient or by medically appropriate and timely visits to the premises where the patient is kept; and

c. The licensed veterinarian is readily available or provides for follow-up in case of adverse reactions or failure of the regimen of therapy.

12.1(2) A valid veterinarian/client/patient relationship cannot be established by contact solely based on a telephonic or electronic communication.

12.1(3) Both the licensed veterinarian and the client have the right to establish or decline a valid veterinarian/client/patient relationship. Once the licensed veterinarian and the client have agreed and entered into a relationship, and the licensed veterinarian has begun patient care, the licensed veterinarian may not neglect the patient and must continue to provide professional services related to the patient's injury or illness within the previously agreed limits. As subsequent needs and costs for patient care are identified, the licensed veterinarian and the client must confer and reach agreement on the continued care and responsibility for fees. If the informed client declines future care or declines to assume responsibility for the fees, the relationship may be terminated by either party.

12.1(4) If no ongoing medical condition exists, a licensed veterinarian may terminate a valid veterinarian/client/patient relationship by notifying the client that the licensed veterinarian no longer wishes to serve that patient and client. However, if an ongoing medical or surgical condition exists, the patient should be referred to another licensed veterinarian for diagnosis, care, and treatment and the former attending licensed veterinarian should continue to provide care as needed during the transition.

12.1(5) Concerns about licensed veterinarian or staff safety may result in immediate termination of the veterinarian/client/patient relationship.

[ARC 1465C, IAB 5/28/14, effective 7/2/14]

The Iowa Rule can be found at: <https://www.legis.iowa.gov/docs/aco/agency/811.pdf>

If you have questions, feel free to call the IVMA office at 515-965-9237.