

# COLORADO STATE BOARD OF VETERINARY MEDICINE POLICIES & GUIDELINES



## TABLE OF CONTENTS

<b>TABLE OF CONTENTS .....</b>	<b>1</b>
<b>Board Policy Regarding Lapsed Licenses.....</b>	<b>2</b>
<b>Board Policy Regarding Impaired Veterinarians.....</b>	<b>3</b>
<b>Process for Handling Initial Decisions Rendered by an Administrative Law Judge (ALJ) .....</b>	<b>4</b>
<b>Process for Handling Complaints Involving State Board of Veterinary Medicine (“Board”) Members.....</b>	<b>5</b>
<b>Medical Records.....</b>	<b>6</b>
<b>Individual Animal Patients ** .....</b>	<b>6</b>
<b>A Herd, A Flock. A Litter .....</b>	<b>6</b>
<b>Board Guideline Regarding Prescription Medications .....</b>	<b>8</b>
<b>Board Guideline Regarding Informed Consent.....</b>	<b>9</b>
<b>Board Guideline Regarding Costs of Treatment .....</b>	<b>12</b>
<b>Providers of internet-based education .....</b>	<b>15</b>
<b>Method of delivery of internet based education.....</b>	<b>15</b>
<b>Verification of attendance and credit for internet-based education .....</b>	<b>15</b>

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## **POLICIES**

### **Board Policy Regarding Lapsed Licenses**

Veterinarians are permitted a six month grace period after the October 31<sup>st</sup> expiration date in which they may renew their license without penalty by the Board. After the six month grace period (beginning May 1<sup>st</sup>), the Board may consider discipline against the licensee for violation of the Veterinary Practice Act.

## **Board Policy Regarding Impaired Veterinarians**

Veterinarians with substance abuse problems are in violation of statute 12-64-111 (1)(v), C.R.S.

Once the Board has received evidence of impairment, Board action will be taken at the next regularly scheduled meeting or a special meeting will be called if deemed necessary. The type and timing of such meeting is at the discretion of the Board administrator.

The Board may take the following action in a substance abuse matter where appropriate:

1. Suspension of License  
Type of suspensory action (summary or regular) is based on timing and case details
2. Establishment of Stipulation To Include But Not Limited To:
  - a. Enrollment in a Board approved treatment program. Details of treatment protocol and duration of the contract will be case sensitive.
  - b. An acceptable plan for employment or an allowable practice agreement, which will be case sensitive. The Board will determine allowable practice parameters; such as the Board will provide appropriate limitations, supervision and other details that will ensure safety to practice, if practice is allowed.
  - c. A Board approved practice monitor and/or supervisor as needed with details to be case sensitive.
  - d. The appropriate probationary period.
  - e. Other discipline as appropriate or necessary, i.e. monetary fine, CE requirement, etc.
3. Periodic Re-evaluation  
Based on:
  - a. Treatment program/entity reports
  - b. Practice monitor/supervisor reports
4. Alter Stipulation  
Alteration of the stipulation will be determined by the nature of the request or violation.
5. Suspension Discharge When:
  - a. The Board is assured that the treatment program is ongoing and successful.
  - b. Practice/employee agreement is Board approved and in place.
  - c. Practice monitor and/or supervisor is/are Board approved, in place, and indicate the licensee is safe to practice.
6. Return of Unencumbered License  
Veterinarian must apply to the Board in writing once all stipulated requirements are satisfactorily met. Said request will be considered at the next regular meeting following the receipt in the Board office of application for release.

## **Process for Handling Initial Decisions Rendered by an Administrative Law Judge (ALJ)**

**August 31, 2011**

To provide a written Board Procedural Order Regarding Review of Initial Decision to parties involved in a case or cases before the Board, which initiates review of the Initial Decision on the Board's own motion, provides general filing requirements, provides applicable deadlines and procedures, and covers ex parte communications and additional relevant information for the parties.

**POLICY:** It is the policy of the State Board of Veterinary Medicine that any Initial Decision of an Administrative Law Judge (ALJ) from the Office of Administrative Courts (OAC) will be appropriately served with the approved Board Procedural Order Regarding Review of Initial Decision ("Order") upon parties involved in a case or cases before the Board.

The Board delegates authority to the Program Director or his/her designee to issue procedural orders for the Board and to rule upon motions, including but not limited to requests for extensions of time for good cause.

The Board further delegates authority to the Section Director and the prosecuting attorney to determine whether or not to file exceptions on behalf of the Board.

## **Process for Handling Complaints Involving State Board of Veterinary Medicine (“Board”) Members**

**June 15, 2011**

To provide written notice regarding the process by which specific types of complaints against current veterinarian Board members, veterinarians who have served on the Board within the past 5 years, or veterinarians who have an ongoing formal relationship with the Board, will be handled. The purpose of this policy is to assure the integrity of the disciplinary process and prevent any appearance of bias or preferential treatment.

**POLICY:** It is the policy of the State Board of Veterinary Medicine that any signed complaint received by the Board against a veterinarian who is currently serving as a Board member or one who has served on the Board within the past 5 years, or a veterinarian who has an ongoing formal relationship with the Board, will be handled as follows if the complaint alleges:

1. A violation of the Veterinary Practice Act - the complaint will be sent to the Office of Investigations within the Division of Registrations for processing; or
2. Substandard practice – the Office of Investigations will process the complaint and also have the case reviewed by an independent veterinarian consultant selected by the Office of Investigations.

Upon completion of the investigation, the report of investigations will be referred back to the Board for review, discussion, and appropriate action.

## **GUIDELINES**

### **EDUCATIONAL BULLETIN REGARDING RECORDKEEPING**

**12/6/01**

#### **Medical Records**

Colorado law states that veterinarians must keep animal patient records on animals with which they have a client-patient relationship that justify the assessment, diagnosis, and treatment administered or prescribed. In addition, such records must be legible, written, printed, or prepared electronically as unalterable documents. Records must be prepared in a manner such that any subsequent evaluation of the same animal patient record would yield comprehensive medical, patient, and veterinarian identifying information.

At various times throughout the year, veterinarians inquire about the Board's expectations regarding medical record keeping. The following information is intended to provide some specificity and guidance from the Board about record keeping standards. The Board will not be using the below listed items in a regulatory fashion. This information is provided as a convenience for licensees. The Board believes, however, that if a practicing veterinarian recorded information in his records similar to that listed below, he could most likely rest assured that his records met the intent and substance of the law. In other words, in most cases the records would meet generally accepted standards of veterinary practice.

#### **Individual Animal Patients \*\***

1. Name or initials of the veterinarian responsible for entries
2. Name, address and phone number of the animal's owner or person presenting the animal for treatment
3. Name, age, species, breed and color of the animal
4. Dates and times of examination, treatment and custody of the animal
5. Medical history information, including vaccinations
6. Presenting complaint
7. Physical assessment information
8. Treatment and intended treatment plan with attendant prognosis
9. Differential diagnosis and final diagnosis if available
10. Surgical procedures completed, including name of surgeon, summary of procedure noting abnormalities/complications, anesthetic/sedative agents used, route of administration, strength
11. All medications and treatments prescribed and dispensed, including strength, quantity, and frequency
12. All clinical laboratory reports, imaging records, or consultation treatment/reports
13. Case progress notes including status, prognosis and disposition
14. Consent forms
15. Documentation of all forms of communication including services declined

#### **A Herd, A Flock. A Litter**

1. Name of veterinarian
2. Name, address and phone number of the owner of the animals
3. Species, breed type or flock identification and number of animals seen
4. Individual animal identification where individual treatment was rendered
5. Type of call
6. Assessment information, including diagnosis or condition, status and prognosis
7. Advice and treatment given
8. Prescriptions given and drugs dispensed, including amount, route and frequency per animal
9. Number of animals treated and dates

**\*\* for the purposes of this guideline, the word "animal" encompasses birds**

### **Board Guideline Regarding Vaccinations**

The Colorado State Board of Veterinary Medicine believes that appropriate vaccinations are one important aspect of preventative health care for pet animals. However, vaccinations can involve some risk to the animal. Therefore, the selection and administration of vaccinations should be specifically tailored to each animal seen and should be undertaken with care by the veterinarian. The animal's lifestyle should also be taken into account, his geographic location within the state, and its particular health problems and corresponding risks should be evaluated. The veterinarian must also ensure that the vaccinations given comply with state and local laws.

The Board encourages practitioners to communicate with the pet's owner regarding what selections of vaccinations have been made and why, the risks inherent in these choices and the potential outcomes of these selections. The use of an informed consent form may document these conversations and serve as a reminder to both parties of what occurred.

### **Board Guideline Regarding Prescription Medications**

The Colorado State Board of Veterinary Medicine believes that the appropriate prescribing, dispensing, and administration of prescription and other medications is a crucial element in the treatment of animal patients. Veterinarians should only prescribe medications for animals with which they have a veterinary-client-patient relationship. Veterinarians may dispense medications for the animals under their care. Should a client ask for a written prescription for an animal being seen by a veterinarian, the veterinarian should supply that written prescription, as it is a part of the animal's medical record, and the owner has a right to that record pursuant to C.R.S. 12-64-120 (2003). However, at any time, if supplying the prescription would compromise or risk the animal's health, the veterinarian should decline to provide it and inform the owner what is required in order to address the animal's health concerns.

Internet pharmacy sale of prescription medications is legal if the veterinarian involved has a valid client patient relationship with the animal for which he is supplying the medications. In addition, he must have prescribed an appropriate medication for that animal, which is always the case whether by internet or other means. Veterinarians are authorized providers under the law and may procure, store, and dispense whatever medications they prescribe for their patients. Whether or not internet business constitutes a "pharmacy" under state law is an issue for the Colorado State Board of Pharmacy to determine.

The sale of nonprescription drugs in Colorado is largely unregulated. Internet pharmacy sale of such medications is legal, as is sales of these medications in any animal supply store.

### **Board Guideline Regarding Informed Consent**

The Colorado State Board of Veterinary Medicine believes it is good medical practice to communicate thoroughly with the client of the animal patient under care. This would include informing the client of the assessment to be undertaken, the diagnosis when reached, the recommended treatment plan, and the potential risks and common complications of any treatment or procedures to be undertaken during the veterinary process. Two examples of adequate informed consent documents are attached to this guideline for veterinarian review and use.



## Sample – CONSENT FORM FOR DENTAL CLEANING AND PERIODONTAL TREATMENT

Pet's Name \_\_\_\_\_ Client's Name \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Please Print Please Print

**Dentistry to be performed:** \_\_\_\_\_

**Some of the more common potential complications are:**

- One or more infected teeth may be detected during procedures, x-rays, dental treatment, and extractions will routinely be performed, if indicated. Once tooth-supporting bone is lost, it is lost forever. Periodontal treatment will not guarantee good oral health of the patient that has a chronic disease and requires constant management.
- It is not unusual for gums to bleed for a short while following treatment. Please call our office if you are concerned.
- This estimate does not include a cost for extracted teeth. On the next page, please indicate your level of desired service.

**Alternative treatments discussed:**

**Owner Responsibility:**

I understand that home care administered by myself or designated family or friend may be required to achieve best overall success. It is my responsibility to notify **CLINIC NAME** before altering their recommendations. I understand that changes, supplementation or alteration of prescriptions may result in undesirable and possibly hazardous side effects or complications.

**Hospital and Procedural Information:**

- **Preparation:** If oral surgery is to be performed, the hair surrounding the surgical area will be clipped and scrubbed with an antiseptic. We follow sterile procedure (surgical preparation, surgical packs and appropriate surgical attire).
- **Anesthesia:** Pre-surgical blood tests and physical examination will enable us to assess and minimize the risk of anesthesia to your pet.
- **Monitoring:** We minimize anesthetic risk by monitoring heart rate and rhythm, respiration rate and quality, blood pressure, oxygenation and depth of anesthesia during the procedure.
- **Catheterization:** For sterility, **unless declined at the end of this form, hair will be shaved over a vein on the leg** so that an intravenous catheter can be placed to provide us with an easy route to administer medications and fluids (which support kidney function and blood pressure) during the procedure.
- **Pain Management:** We will proactively manage pain associated with any procedure by administering appropriate pain management medications. As with any drug, side effects may be associated with the administration.

**Risk Management:**

• **Expected chance of survival of procedure:**

Excellent     Very Good     Good     Cautiously Optimistic     Fair     Poor     Grave

• **Prognosis – Expected chance for long-term success of procedure:**

Excellent     Very Good     Good     Cautiously Optimistic     Fair     Poor

If marked **other** than **Excellent**, it is because:

(continued on next page)

**Authorization:**

**Extent of Dental Services Desired (PLEASE CHECK ONE)**

I understand additional treatment may incur increased expense. If, during the procedure, any unforeseen dental procedures become necessary and desirable in the veterinarian's professional judgment:

- I prefer that you proceed with all necessary dental procedures, including extraction of teeth.
- I prefer to be called before any additional procedures, other than emergencies, are performed. If I cannot be reached, I authorize you to proceed with all necessary dental procedures.
- If I cannot be reached by phone, I do not authorize any unforeseen dental procedures.

I  do  do not (*check one*) give permission for shaving hair for the intravenous catheter.

- A written estimate of fees has been offered, but I request not to receive one before procedure.

► Photographs may be taken of your pet's procedure and used, anonymously, for educational purposes.

**I HAVE READ AND FULLY UNDERSTAND THIS DENTAL TREATMENT/ORAL SURGERY AND ANESTHESIA CONSENT FORM.**

I authorize anesthesia and dentistry/oral surgery for my pet, as described above. The nature and risks of this procedure have been explained to me. I understand that some risks always exist with anesthesia and/or surgery, and I am encouraged to discuss any concerns I have about those risks with my veterinarian before the procedure(s) is/are initiated. Additionally, I authorize **CLINIC NAME** to perform any diagnostic, treatment or surgical procedures as deemed necessary for medical or surgical complications or otherwise unforeseen circumstances. While **CLINIC NAME** provides the highest quality of anesthesia monitoring and surgical services, I understand that there are rare complications associated with any anesthetic or surgical procedure. I fully understand these risks and understand that the veterinarians and hospital staff will try to minimize such risks. I will not hold **CLINIC NAME**, the veterinarians or any staff member liable for any complications that may arise.

No warranty or guarantee has been given to me as to the results or cure afforded by these treatments or procedures. **CLINIC NAME** treats cases based on evidence-based medicine. My signature on this consent form indicates that any questions have been answered to my satisfaction.

\_\_\_\_\_  
Signature of pet owner or agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent or legal guardians, if pet Owner/agent is less than 18 years of age

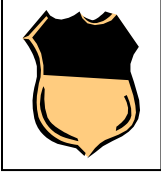
\_\_\_\_\_  
Date

Phone Numbers where I can be reached today:

(1) Residence	( )	-	_____	-	_____
(2) Office	( )	-	_____	-	_____
(3) Cell	( )	-	_____	-	_____

**Board Guideline Regarding Costs of Treatment**

The Colorado State Board of Veterinary Medicine advises that it is good practice to provide a written estimate of costs to the client prior to providing services.



**Sample - ESTIMATE OF COSTS CONSENT FORM**

I understand that an estimate of fees, within a 20% range, for the agreed upon veterinary care has been or will be provided and that I am encouraged to discuss all fees related to such care before services are rendered. I assume financial responsibility for the fees and will pay by cash, credit card, or check at the time my pet is discharged. If I cannot pay in full at the time of service, I must notify *CLINIC NAME* prior to treatment. A monthly service charge of 2% will be applied to any unpaid balance. As the person responsible for this pet, I will be responsible for all attorney fees and collection costs should steps be necessary.

\_\_\_\_\_  
Signature of pet owner or agent

\_\_\_\_\_  
Date

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*Evaluation and approval of requested continuing education credit is the duty of the Secretary of the Colorado Board of Veterinary Medicine with final approval subject to the Board's decision. Such responsibility shall be carried out in accordance with and fulfillment of CRS 12-64-110 (2) (a) (4)(a)(b)(c) and 12-64-110.5 (1).*

### **CRITERIA FOR CONTINUING EDUCATION REQUEST APPROVAL – 10/4/2001**

The criteria used for this evaluation and pre-approval are that the material presented will enhance the professional knowledge of the licensed veterinarian in the field of veterinary medicine and be of benefit to the consumer of veterinary services provided by that veterinarian.

- 1) Application for continuing education program approval should include:
  - a. Name of sponsoring organization or person
  - b. Title, date(s), and location of meeting
  - c. Information for each presentation for which approval is sought within a meeting:
    - 1] Presentation title
    - 2] Presentation format
    - 3] Length of presentation
    - 4] Name and qualification(s) of presenter
    - 5] Intended audience and intent of content
- 2) Content of subject material
  - a. Scientific based: At least 26 of the 32 required hours every two-year period.
  - b. Management based: Total acceptable hours shall be up to 6 of 32 for every two- year period.
    - Examples of acceptable management hours:
      - Staff utilization*
      - Developing a better radiology/surgery/clinical pathology department*
      - Improving the efficiency of your practice*
      - Providing more and better client services*
    - Examples of unacceptable management hours:
      - How to sell your practice*
      - How much to pay your employees/associates*
      - Should your practice be a proprietorship or a corporation?*
      - Estate planning*
      - Tax workshops*
- 3) Qualifications of a presenter
  - a. Presenter to possess knowledge of the topic such that it will add significantly to the professional knowledge of the anticipated licensed veterinary audience/registrants.
  - b. RACE approved presenters will be automatically approved by CBVM, although this credential is not required by CBVM.
- 4) Method of Delivery
  - a. Didactic lecture or interactive presentation
  - b. Wet or dry laboratory
  - c. Demonstration
  - d. Interactive electronic presentation with documented, unalterable proof of said interaction with the veterinarian will be approved if CBVM criteria are met.
- 5) Contact Time

Typically one hour of credit will be awarded per 45-60 minutes of continuing education delivered.
- 6) Continuing Education Exclusions
  - a. Some applications will not be awarded continuing education credit. They include, but are not be limited to:
    - 1) A presenter shall not be awarded continuing education credit for his/her own presentation.
    - 2) Hours, in general, spent in pursuing further formal university training, such as an internship or residency or an alternate pathway program for AVMA applicants in pursuit of board certification will not be allowed. Specific continuing education programs within these programs, however, may count toward Colorado-approved continuing education credit.

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## **CRITERIA FOR INTERNET CONTINUING EDUCATION REQUEST APPROVAL - 6/3/2004**

The basic criteria applicable to CE programs is that the material presented will enhance the professional knowledge of the licensed veterinarian in the field of veterinary medicine and be of benefit to the consumer of veterinary services.

It is each veterinarian's responsibility to make certain that credit he or she claims for a course is valid and that the course is delivered by an approved provider. CBVM accepts RACE approved credit assignments, but in the absence of RACE approval reserves the right to deny credit for any course that does not provide an education commensurate with the course credit hours listed by the provider. If audited, the veterinarian must provide CBVM with proof of valid continuing education that meets Board approval. Deficiencies in approved continuing education may result in disciplinary action by the Board. Attendance of internet courses must be verifiable by the course program administrator or credit will be denied. Veterinarians are advised not to rely on course titles that include names of certain "Colleges" or "Universities" or those that contain promises of a diploma or certification. If the course is not accepted by CBVM, credit will be denied. Veterinarians are advised to plan ahead. If course credibility is in question, it is therefore best to investigate the Board's position before registration and the incurring of expense. Board determinations about credit can take months.

CE approval for internet/distance courses:

### **Providers of internet-based education**

1. RACE approved internet education providers
  - a. Example: Veterinary Information Network: Dr. Paul Pion
2. Educational programs for which the guidelines have been submitted to CBVM and have received approval for CE credit.
  - a. Example: Colorado State University: Dr. Tony Knight

### **Method of delivery of internet based education**

1. Instructors to be AVMA board certified specialists or otherwise recognized as expert in the topic of the course. These instructors must be available to answer questions interactively or on a message board after the day of instruction, ensuring that meaningful education is delivered understandably to the participant. Presentations must include all of the following components:
  - a. PowerPoint or other programs of similarly effective format.
  - b. Question and answer interactive sessions that may include auxiliary charts, photographs, illustrations and other educational visual enhancements.
  - c. Online library and/or message boards must be available to accommodate in depth expansion of course material.

### **Verification of attendance and credit for internet-based education**

1. The provider of the course must keep records for five (5) years verifying that the registrant has:
  - a. Read no less than 50% of the material presented.
  - b. Documented completion of the entire course.
  - c. Been sent, via email, fax or hardcopy a certificate of completion amounting to 1.0 hour of continuing education credit per real-time course hour.
  - d. In the absence of 100% real-time hours, documentation that the participant utilized an administrator-acceptable alternative educational method that is equal in value to the deficient real-time hours. Acceptable alternative educational material:
    - i. Verified interactive sessions with the instructor.
    - ii. Log-on time on a message board or in an internet library on the course topic.
  - e. A quiz may or may not be given at the conclusion of the course, but documentation of attendance of the complete course is mandatory.