



CODE OF PROFESSIONAL CONDUCT FOR VETERINARY SURGEONS

Section 1. INTRODUCTION

The Code will be used in the assessment of allegations of misconduct made against individual veterinary surgeons. It provides a framework of principles and professional and ethical standards. **Non-Compliance with any aspect of the Code will be considered unprofessional conduct.**

Persons registered with the Veterinary Surgeons Board of South Australia are expected to abide by the following basic principles when carrying out their professional duties:

- ❖ *The primary concern of the profession is for the welfare of the animals.*
- ❖ *All work performed by veterinary surgeons is to a standard of competence acceptable to their peers.*
- ❖ *Veterinary surgeons, individually, act to promote cohesion within the profession and the trust of the profession by the general public.*
- ❖ *No personal advantage is sought to the detriment of a professional colleague.*

Section 2. GUIDELINES FOR PROFESSIONAL CONDUCT

- a. Veterinary surgeons have a special duty towards animal welfare and to alleviate animal suffering. They must be conversant with the provisions of the *Animal Welfare Act 1985* and its Regulations and any codes of animal welfare relevant to their fields of endeavour.
- b. Veterinary surgeons must communicate effectively and treat all with whom they come into contact with respect, consideration, courtesy and openness.
- c. Veterinary surgeons must conduct themselves in a manner that will maintain or enhance the reputation of the profession. (Veterinary surgeons are reminded that registration can be suspended if their performance is affected because of any mental or physical disability or condition).
- d. Veterinary surgeons should not show disrespect for colleagues. They should uphold a working environment in which colleagues can freely exchange information to the benefit of patients, and society in general.
- e. Veterinary surgeons must be conversant with and abide by all statutory requirements affecting them individually in their various professional roles and take every reasonable step to ensure their observance by others.
- f. Veterinary surgeons must keep abreast of knowledge and skills in their field of endeavour and accept the obligation to continue their education and so further their professional knowledge and competence.
- g. Except in an emergency where immediate relief of suffering is paramount, veterinary surgeons have a duty to operate only in fields in which they are competent to do so unless supervised by a colleague with competence in the field.

Section 3. GENERAL GUIDELINES

1. General Practise

- a. A veterinary surgeon must not practise veterinary surgery in a manner that would be likely to bring the practice of veterinary surgery into disrepute.
- b. A veterinary surgeon must not assume a name or description that would be taken by a reasonable person as meaning that the veterinary surgeon holds a qualification, or has experience in, veterinary science, surgery, or medicine unless the veterinary surgeon actually holds that qualification or has that experience.
- c. Sub rule (b) does not prevent a veterinary surgeon who is not the holder of a doctorate from assuming the title “Doctor.”
- d. A veterinary surgeon who gives a public speech relating to the practise of veterinary surgery or publishes, by newspaper, radio or television, a report or notice relating to the practice of veterinary surgery must ensure that the speech, report, or notice –
 - i. is not false or misleading.
 - ii. does not compare the competence of any veterinary surgeon with that of any other.
 - iii. is not vulgar or sensational; and
 - iv. would not tend to bring the practise of veterinary surgery into disrepute.In this rule – “**newspaper**” includes magazine, journal, or any other written publication.
- e. A veterinary surgeon who operates or participates in a veterinary science practice must not enter into a contract or arrangement under which a publisher or distributor of a directory or other publication includes, or agrees to include, in the directory or publication an entry that advertises or promotes that practice to the exclusion of any other veterinary science practice.
- f. A veterinary surgeon must ensure that, at all times during which premises from which the veterinary surgeon provides veterinary treatment are unattended—
 - i. telephone enquiries directed to the premises are redirected in such a manner that they may be taken by a veterinary surgeon or answered by recorded message specifying a telephone number by which a veterinary surgeon may be contacted; and
 - ii. there is displayed at or near the entrance to the premises a sign, illuminated during hours of darkness, specifying the name of a veterinary surgeon and the telephone number at which the veterinary surgeon may be contacted.
- g. A veterinary surgeon must not practise veterinary surgery in a name other than the person’s own name or a name approved by the Board.
- h. Despite rule (g), if a veterinary surgeon was a practising veterinary surgeon at the time of his or her death, the practice may be carried on in the name of the deceased person by another veterinary surgeon for a period not exceeding 12 months from the date of death.

2. Animal Welfare

- a. A veterinary surgeon must at all times consider the welfare of animals when practising veterinary science.
- b. A veterinary surgeon who has accepted responsibility for the care of an animal should ensure that the animal is not abandoned unless there is a good reason to do so and unless the welfare of the animal is safeguarded.
- c. A veterinary surgeon who provides veterinary services directly to the public should not, without good reason, refuse to provide relief of pain or suffering of an animal. Relief may be confined to emergency treatment only or immediate referral to another veterinary surgeon.
- d. Any animal having an invasive procedure performed should be administered an appropriate level of pain relief, that is effective for a reasonable length of time, as part of routine practice.

3. Correction of Genetic Defects

- a. It is unethical for a veterinary surgeon to perform a surgical operation on, or to provide medical treatment for, an animal if the primary purpose of the operation or treatment is to conceal the animal's true genetic status to enhance its value for sale, breeding or showing in competition.
- b. A veterinary surgeon who becomes aware that an animal belonging to a client is suffering from a defect or disease that is known to be inheritable must inform the client of the defect or disease and its implications for breeding programs.
- c. It is not unethical for a veterinary surgeon to perform a surgical operation for the correction of an inheritable defect or to provide medical treatment for an inheritable disease, but only if the primary purpose of the operation or treatment is to relieve or prevent pain or discomfort to the animal.

4. Proscribed Procedures

- a. The following procedures may only be carried out by veterinary surgeons for genuine therapeutic purposes and records must substantiate this:
 - i. declawing of cats,
 - ii. tail docking of dogs, horses, or cattle,
 - iii. ear cropping of dogs.
- b. Bark reduction must only be carried out for therapeutic or prophylactic reasons, or as an alternative to euthanasia for a dog that barks persistently. It should not be carried out as a substitute for the proper management and training of a dog. Veterinary surgeons requested to perform bark reduction must be convinced that the owner has made all reasonable attempts to modify the dog's behaviour by alternative and humane means.

(See Appendix I of the Handbook for the Code of Practice for Debarking and a sample statutory declaration that could be used to assist the veterinary surgeon in ensuring that the owners fully understand the legal ramifications of the procedure.)

5. Professional Practice

- a. A veterinary surgeon should, always, diligently maintain knowledge of current standards of veterinary science.
- b. Professional procedures should always be carried out in accordance with current standards of veterinary science.
- c. **Informed Decisions**
Except in the case of an emergency, a veterinary surgeon should not undertake any veterinary procedure on an animal without ensuring that the owner or person in charge of the animal is made aware of the likely extent and outcome of the procedure and of its probable cost and any ongoing costs. An example of an emergency is a circumstance in which there is an immediate threat to the life of the animal concerned.
- d. **Referrals**
A veterinary surgeon should refer a client to an appropriately qualified veterinary surgeon whenever a second opinion or a referral is desirable.
- e. A veterinary surgeon should not refuse a request by a client for a referral or second opinion.
- f. A veterinary surgeon to whom a client of another veterinary surgeon is referred or who is asked to provide a second opinion for such a client should act in the best interests of that client and the animal concerned.
- g. A veterinary surgeon who has previously treated an animal must, when asked by another veterinary surgeon who has taken over treatment of the animal, provide all relevant details of the clinical history directly to the other veterinary surgeon.
- h. A veterinary surgeon to whom another veterinary surgeon has referred an animal for treatment, or a second opinion should return all documents and other articles provided by the other veterinary surgeon when the animal is finally discharged or is referred back to the other veterinary surgeon.
- i. **Vicarious Liability**
A veterinary surgeon responsible for the professional supervision of lay staff must ensure that the staff carry out their duties effectively and in compliance with relevant legislation.
- j. A veterinary surgeon should ensure that:
 - i. support staff treat as confidential and refrain from divulging any information relating to clients or their animals acquired during the course of their employment, and
 - ii. support staff, having in an emergency given first aid to an animal for the purpose of saving life or relieving pain, report, and hand over the case to the veterinary surgeon or another veterinary surgeon at the earliest opportunity, and
 - iii. information relating to a client or a client's animal obtained in the course of examining or treating the animal is not divulged, except when referring the animal to another veterinary surgeon for treatment or a second opinion or with the consent of the client.
- k. **Certification**
When a veterinary surgeon provides a certificate, it must be prepared with care and accuracy be legible, bear the date of examination or procedure carried out, what the certificate actually

attests to, the date of issue of the certificate, and the name, address, and signature of the issuing veterinary surgeon.

A veterinary surgeon should not sign a certificate relating to the performance of a veterinary service unless:

- i. the certificate is accurately completed to the best of the veterinary surgeon's knowledge, and
- ii. the veterinary surgeon has personally performed or supervised the performance of the service.

l. Record Keeping

Veterinary surgeons must maintain adequate records of treatment carried out. As soon as practicable after treating an animal or consulting with a client, a veterinary surgeon should ensure that a detailed record of the treatment or consultation is made. The record should include a description of the problem, differential diagnoses, treatment carried out, any x-ray film, radiograph or ultrasound image relating to the treatment of an animal. The veterinary surgeon should ensure that the record is kept in safe custody for at least 2 years after the relevant treatment or consultation.

Records of any case should be of such detail that any veterinary surgeon could take over management of the case at any time. Records should be sufficient to stand alone to justify treatment and procedure.

m. Consent Forms

The use of consent forms is strongly recommended.

6. Drugs, antibiotics and other chemical or biological substances

- a. A veterinary surgeon must ensure that conditions imposed by other legislation (such as the *Controlled Substances Act 1984*) relating to dispensing, handling or storing restricted or dangerous drugs are strictly complied with.
- b. A veterinary surgeon is responsible for ensuring that clients are aware of the need to comply with the withholding periods recommended for the administration of antibiotic and other drugs to food producing animals or to animals used in a sport that has rules about the use of chemical substances.
- c. A veterinary surgeon may only dispense controlled substances to a *bona fide* client, that is, the animal/herd owned by the client must be under their care; the animal/herd must have been seen for the purposes of diagnosis, or the premises on which the animal/herd is kept visited recently enough to have an accurate picture sufficient to enable accurate diagnosis, and the treatment must be recorded.
- d. It is recommended that if a drug is supplied to the client for use when a veterinary surgeon is not present the client signs an 'Acknowledgement of Risk & Responsibility' form to bring to their attention the potential for adverse reaction. (*Refer to the Handbook for sample copy*).



7. Legislative Responsibilities

To ensure that a veterinary surgeon can practise veterinary science in a safe and competent manner, the veterinary surgeon must acquire and maintain a sufficient knowledge of all laws that affect the practice of veterinary science, including:

- i. laws regulating the supply, dispensing and storage of poisons and therapeutic substances.
- ii. laws regulating and controlling the use, keeping and disposal of radioactive substances and radioactive apparatus for therapeutic purposes; and
- iii. laws relating to continuing professional development and recency of practice.

8. Special Interest Areas

Before undertaking practice in a special interest area of veterinary science with which the veterinary surgeon is not familiar, a veterinary surgeon should ensure that he or she has the knowledge and competence necessary to practise in that area.

Last Updated September 2024 to include updated legislation and contact details.