DRAFT—PRINCIPLES OF VETERINARY MEDICAL ETHICS OF THE AVMA

(Bold print states the Principles, standard print explains or clarifies the Principle to which it applies)

I. INTRODUCTION

A. Veterinarians are members of a scholarly profession who have earned academic degrees from comprehensive universities or similar educational institutions. Veterinarians practice the profession of veterinary medicine in a variety of situations and circumstances.

B. Exemplary professional conduct upholds the dignity of the veterinary profession. All veterinarians are expected to adhere to a progressive code of ethical conduct known as the Principles of Veterinary Medical Ethics (the Principles). The basis of the Principles is the Golden Rule. Veterinarians should accept this rule as a guide to their general conduct, and abide by the Principles. They should conduct their professional and personal affairs in an ethical manner. Professional veterinary associations should adopt the Principles or a similar code as a guide for their activities.

C. Professional organizations may establish ethics, grievance, or peer review committees to address ethical issues. Where such committees exist, the AVMA Peer Review Procedure Manual (Grievance Resolution) may be useful. Local and state veterinary associations should also include discussions of ethical issues in their continuing education programs.

1. Complaints about behavior that may violate the Principles should be addressed in an appropriate and timely manner. Such questions should be considered initially by ethics, grievance, or peer review committees of local or state veterinary associations, when they exist, and/or when appropriate, state veterinary medical boards. Members of local and state committees are familiar with local customs and circumstances, and those committees are in the best position to confer with all parties involved.

The Judicial Council may address complaints, prior to, concurrent with, or subsequent to review at the state or local level, as it deems appropriate.

2. All veterinarians in local or state associations and jurisdictions have a responsibility to regulate and guide the professional conduct of their members.

3. Colleges of veterinary medicine should stress the teaching of ethical and value issues as part of the professional veterinary curriculum for all veterinary students.

4. The National Board of Veterinary Medical Examiners is encouraged to prepare and include questions regarding professional ethics in the National Board Examination.

D. The AVMA Judicial Council is charged to advise on all questions relating to interpretation of the Bylaws, all questions of veterinary medical ethics, and other rules of the Association. The Judicial Council should review the Principles periodically to ensure that they remain complete and up to date.
II. PROFESSIONAL BEHAVIOR

A. Veterinarians should first consider the needs of the patient: to relieve disease, suffering, or disability while minimizing pain or fear.

B. Veterinarians should obey all laws of the jurisdictions in which they reside and practice veterinary medicine. Veterinarians should be honest and fair in their relations with others, and they should not engage in fraud, misrepresentation, or deceit.
   1. Veterinarians should report illegal practices and activities to the proper authorities.
   2. The AVMA Judicial Council may choose to report alleged infractions by nonmembers of the AVMA to the appropriate agencies.
   3. Veterinarians should use only the title of the professional degree that was awarded by the school of veterinary medicine where the degree was earned. All veterinarians may use the courtesy titles Doctor or Veterinarian. Veterinarians who were awarded a degree other than DVM or VMD should refer to the AVMA Directory for information on the appropriate titles and degrees.

C. It is unethical for veterinarians to identify themselves as members of an AVMA recognized specialty organization if such certification has not been awarded and maintained.

D. It is unethical to place professional knowledge, credentials, or services at the disposal of any nonprofessional organization, group, or individual to promote or lend credibility to the illegal practice of veterinary medicine.

E. Veterinarians may choose whom they will serve. Both the veterinarians and the client have the right to establish or decline a Veterinarian-Client-Patient Relationship (See Section III) and to decide on treatment. The decision to accept or decline treatment and related cost should be based on adequate discussion of clinical findings, diagnostic techniques, treatment, likely outcome, estimated cost, and reasonable assurance of payment. Once the veterinarians and the client have agreed, and the veterinarians have begun patient care, they may not neglect their patient and must continue to provide professional services related to that injury or illness within the previously agreed limits. As subsequent needs and costs for patient care are identified, the veterinarians and client must confer and reach agreement on the continued care and responsibility for fees. If the informed client declines further care or declines to assume responsibility for the fees, the VCPR may be terminated by either party.

F. In emergencies, veterinarians have an ethical responsibility to provide essential services for animals when necessary to save life or relieve suffering, subsequent to client agreement. Such emergency care may be
limited to euthanasia to relieve suffering, or to stabilization of the patient for transport to another source of animal care.

1. When veterinarians cannot be available to provide services, they should arrange with their colleagues to assure that emergency services are available and provide readily accessible information to assist clients in obtaining emergency services, consistent with the needs of the locality.

2. Veterinarians who believe that they haven’t the experience or equipment to manage and treat certain emergencies in the best manner, should advise the client that more qualified or specialized services are available elsewhere and offer to expedite referral to those services.

3. Veterinarians who provide emergency services should send patients and continuation of care information back to the original veterinarians and/or other veterinarians of the owners’ choice, as soon as practical.

G. Regardless of practice ownership, the interests of the patient, client, and public require that all decisions that affect diagnosis, care, and treatment of patients are made by veterinarians.

H. Veterinarians should strive to enhance their image with respect to their colleagues, clients, other health professionals, and the general public. Veterinarians should be honest, fair, courteous, considerate, and compassionate. Veterinarians should present a professional appearance and follow acceptable professional procedures using current professional and scientific knowledge.

I. Veterinarians should not slander, or injure the professional standing or reputation of other veterinarians in a false or misleading manner.

J. Veterinarians should strive to improve their veterinary knowledge and skills, and they are encouraged to collaborate with other professionals in the quest for knowledge and professional development.

K. The responsibilities of the veterinary profession extend beyond individual patients and clients to society in general. Veterinarians are encouraged to make their knowledge available to their communities and to provide their services for activities that protect public health.

L. Veterinarians and their associates should protect the personal privacy of patients and clients. Veterinarians should not reveal confidences unless required to by law or unless it becomes necessary to protect the health and welfare of other individuals or animals.

M. A veterinarian having supervisory authority over another veterinarian should make reasonable efforts to ensure that the other veterinarian conforms to the Principles.

A veterinarian may be responsible for another veterinarian’s violation of the Principles if the veterinarian orders or, with
knowledge of the specific conduct, approves the conduct involved; or if the veterinarian has supervisory authority over another veterinarian, and knows of the conduct at a time when its consequences can be avoided or mitigated, but fails to take reasonable remedial action.

M-N. Veterinarians who are impaired should not act in the capacity as a veterinarian and by alcohol or other substances should seek assistance from qualified organizations or individuals.

1. “Impaired” means a veterinarian who is unable to perform his or her duties in veterinary medicine with reasonable skill and safety because of a physical or mental disability including deterioration of mental capacity, loss of motor skills, or abuse of drugs or alcohol.

2. Colleagues of impaired veterinarians should encourage those individuals to seek assistance and to overcome their disabilities.

III. THE VETERINARIAN-CLIENT-PATIENT RELATIONSHIP

A. The veterinarian-client-patient relationship (VCPR) is the basis for interaction among veterinarians, their clients, and their patients. A VCPR exists when all of the following conditions have been met:

1. The veterinarian has assumed responsibility for making clinical judgments regarding the health of the animal(s) and the need for medical treatment, and the client has agreed to follow the veterinarians instructions.

2. The veterinarian has sufficient knowledge of the animal(s) to initiate at least a general or preliminary diagnosis of the medical condition of the animal(s). This means that the veterinarian has recently seen and is personally acquainted with the keeping and care of the animal(s) by virtue of an examination of the animal(s), or by medically appropriate and timely visits to the premises where the animal(s) are kept.

3. The veterinarian is readily available, or has arranged for emergency coverage, for follow-up evaluation in the event of adverse reactions or the failure of the treatment regimen.

B. When a VCPR exists, veterinarians must maintain medical records (See section VIII).

C. Dispensing or prescribing a prescription product requires a VCPR

1. Veterinarians should honor a clients request for a prescription in lieu of dispensing.

2. Without a VCPR, veterinarians merchandising or use of veterinary prescription drugs or their extra-label use of any pharmaceutical is unethical and is illegal under federal law.

D. Veterinarians may terminate a VCPR under certain conditions, and they have an ethical obligation to use courtesy and tact in doing so.

1. If there is no ongoing medical condition,
veterinarians may terminate a VCPR by notifying the client that they no longer wish to serve that patient and client.

2. If there is an ongoing medical or surgical condition, the patient should be referred to another veterinarian for diagnosis, care, and treatment. The former attending veterinarian should continue to provide care, as needed, during the transition.

E. Clients may terminate the VCPR at any time.

IV. ATTENDING, CONSULTING AND REFERRING

A. An attending veterinarian is a veterinarian (or a group of veterinarians) who assumes responsibility for primary care of a patient. A VCPR is established with the attending veterinarian.

1. Attending veterinarians are entitled to charge a fee for their professional services.

2. When appropriate, attending veterinarians are encouraged to seek assistance in the form of consultations and referrals. A decision to consult or refer is made jointly by the attending veterinarian and the client. Attending veterinarians should honor clients’ requests for referral.

3. When a consultation occurs, the attending veterinarian continues to be primarily responsible for the case.

B. A consulting veterinarian is a veterinarian (or group of veterinarians) who agrees to advise an attending veterinarian on the care and management of a case. The VCPR remains the responsibility of the attending veterinarian.

1. Consulting veterinarians may or may not charge fees for service. When such fees are charged, they are usually collected from the client by the attending veterinarian.

2. Consulting veterinarians should communicate their findings and opinions directly to the attending veterinarians.

3. Consulting veterinarians should revisit the patients or communicate with the clients in collaboration with the attending veterinarians.

4. Consultations usually involve the exchange of information or interpretation of test results. However, it may be appropriate or necessary for consultants to examine patients. When advanced or invasive techniques are required to gather information or substantiate diagnoses, attending veterinarians may refer the patients. A new VCPR is established with the veterinarian to whom a case is referred.

C. Referral is the transfer of responsibility of diagnosis and treatment from a referring veterinarian to a receiving veterinarian. A referring veterinarian is the veterinarian (or group of veterinarians) who is the attending veterinarian at the time of referral. The referring veterinarian or a receiving veterinarian is a veterinarian (or group of veterinarians) to
who a patient is referred and who agrees to provide requested veterinary services. A new VCPR is established with the receiving veterinarian. The referring and referral receiving veterinarians must communicate.

1. Attending veterinarians should honor clients requests for referral.

2. Referral veterinarians may choose to accept or decline clients and patients from attending veterinarians.

3. Patients are usually referred because of specific medical problems or services. Referral veterinarians should provide services or treatments relative to the referred conditions, and they should communicate with the referring veterinarians and clients if other services or treatments are required.

1. The referring veterinarian should provide the receiving veterinarian with all the appropriate information pertinent to the case before or at the time of the receiving veterinarian’s first contact with the patient or the client.

2. When the referred patient has been examined, the receiving veterinarian should promptly inform the referring veterinarian. Information provided should include diagnosis, proposed treatment, and other recommendations.

3. The receiving veterinarian should provide only those services or treatments necessary to address the condition for which the patient was referred and should consult the referring veterinarian if other services or treatments are indicated.

4. Upon discharge of the patient, the receiving veterinarian should give the referring veterinarian a written report, advising the referring veterinarian as to continuing care of the patient or termination of the case. A detailed and complete written report should follow as soon as possible.

5. The receiving veterinarian should advise the client to contact the referring veterinarian for the continuing care of the patient. If the client chooses continuing patient care from a veterinarian other than the referring veterinarian, the receiving veterinarian should release a copy of the medical records to the veterinarian of the client’s choice.

D. When a client seeks professional services or opinions from a different veterinarian without a referral, a new VCPR is established with the new attending veterinarian. When contacted, the veterinarian who was formerly involved in the diagnosis, care, and treatment of the patient should communicate with the new attending veterinarian as if the patient and client had been referred.

1. With the client’s consent, the new attending veterinarian should contact the former veterinarian to learn the original diagnosis, care, and treatment and clarify
any issues before proceeding with a new treatment plan.

2. If there is evidence that the actions of the former attending veterinarian have clearly and significantly endangered the health or safety of the patient, the new attending veterinarian has a responsibility to report the matter to the appropriate authorities of the local and state association or professional regulatory agency.

V. INFLUENCES ON JUDGEMENT
A. The choice of treatments or animal care should not be influenced by considerations other than the needs of the patient, the welfare of the client, and the safety of the public.

B. Veterinarians should not allow their medical judgment to be influenced by agreements by which they stand to profit through referring clients to other providers of services or products.

C. The medical judgments of veterinarians should not be influenced by contracts or agreements made by their associations or societies.

D. When conferences, meetings, or lectures are sponsored by outside entities, the organization that presents the program, not the funding sponsor, shall have control of the contents and speakers.

E. Veterinarians should disclose to clients potential conflicts of interest.

VI. THERAPIES
A. Attending veterinarians are responsible for choosing the treatment regimens for their patients. It is the attending veterinarians responsibility to inform the client of the expected results and costs, and the related risks of each treatment regimen.

B. It is unethical for veterinarians to prescribe or dispense prescription products in the absence of a VCPR.

C. It is unethical for veterinarians to promote, sell, prescribe, dispense, or use secret remedies or any other product for which they do not know the ingredients.

D. It is unethical for veterinarians to use or permit the use of their names, signatures, or professional status in connection with the resale of ethical products in a manner which violates those directions or conditions specified by the manufacturer to ensure the safe and efficacious use of the product.

VII. GENETIC DEFECTS
A. Performance of surgical or other procedures in all species for the purpose of concealing genetic defects in animals to be shown, raced, bred, or sold, as breeding animals is unethical. However, should the health or welfare of the individual patient require correction of such genetic defects, it is recommended that the patient be rendered incapable of reproduction.
VIII. MEDICAL RECORDS
A. Veterinary medical records are an integral part of veterinary care. The records must comply with the standards established by state and federal law.

B. Medical Records are the property of the practice and the practice owner. The original records must be retained by the practice for the period required by statute.

C. Ethically, the information within veterinary medical records is considered privileged and confidential. It must not be released except as required or allowed by law, by court order or by consent of the owner of the patient.

D. Veterinarians are obligated to provide copies or summaries of medical records when requested by the client. Veterinarians should secure a written release to document that request.

E. Without the express permission of the practice owner, it is unethical for a veterinarian to remove, copy, or use the medical records or any part of any record.

IX. FEES AND REMUNERATION
A. Veterinarians are entitled to charge fees for their professional services.

B. It is unethical for veterinarians to engage in fee-splitting. Fee-splitting is defined as payment by a referring veterinarian of part of their fee to the attending veterinarian who has not rendered professional services. Under this definition, the use of consultants, laboratory services, and online pharmacies does not constitute fee-splitting.

C. Regardless of the fees that are charged or received, the quality of service must be maintained at the usual professional standard.

D. It is unethical for a group or association of veterinarians to take any action which coerces, pressures, or achieves agreement among veterinarians to conform to a fee schedule or fixed fees.

X. ADVERTISING
A. Without written permission from the AVMA Executive Board, no member or employee of the American Veterinary Medical Association (AVMA) shall use the AVMA name or logo in connection with the promotion or advertising of any commercial product or service.

B. Advertising by veterinarians is ethical when there are no false, deceptive, or misleading statements or claims. A false, deceptive, or misleading statement or claim is one which communicates false information or is intended, through a material omission, to leave a false impression.

C. Testimonials or endorsements are advertising, and they should comply with the guidelines for advertising. In addition, testimonials and endorsements of professional products or services by veterinarians are considered unethical unless they comply with the following:
   1. The endorser must be a bonafide user of the product or service.
2. There must be adequate substantiation that the results obtained by the endorser are representative of what veterinarians may expect in actual conditions of use.

3. Any financial, business, or other relationship between the endorser and the seller of a product or service must be fully disclosed.

4. When reprints of scientific articles are used with advertising, the reprints must remain unchanged, and be presented in their entirety.

D. The principles that apply to advertising, testimonials, and endorsements also apply to veterinarians communications with their clients.

E. Veterinarians may permit the use of their names by commercial enterprises (e.g. pet shops, kennels, farms, feedlots) so that the enterprises can advertise under veterinary supervision, only if they provide such supervision.

XI. EUTHANASIA
Humane euthanasia of animals is an ethical veterinary procedure.

XII. GLOSSARY
1. PHARMACEUTICAL PRODUCTS
Several of the following terms are used to describe veterinary pharmaceutical products. Some have legal status, others do not. Although not all of the terms are used in the Principles, we have listed them here for clarification of meaning and to avoid confusion.
A. Ethical Product: A product for which the manufacturer has voluntarily limited the sale to veterinarians as a marketing decision. Such products are often given a different product name and are packaged differently than products that are sold directly to consumers. “Ethical products” are sold only to veterinarians as a condition of sale that is specified in a sales agreement or on the product label.

B. Legend Drug: A synonymous term for a veterinary prescription drug. The name refers to the statement (legend) that is required on the label (see veterinary prescription drug below).

C. Over the Counter (OTC) Drug: Any drug that can be labeled with adequate direction to enable it to be used safely and properly by a consumer who is not a medical professional.

D. Prescription Drug: A drug that cannot be labeled with adequate direction to enable its safe and proper use by non-professionals.

E. Veterinary Prescription Drug: A drug that is restricted by federal law to use by or on the order of a licensed veterinarian, according to section 503(f) of the federal Food, Drug, and Cosmetic Act. The law requires that such drugs be labeled with the statement: “Caution, federal law restricts this drug to use by or on the order of a licensed veterinarian.”
2. **DISPENSING, PRESCRIBING, MARKETING AND MERCHANDISING**
   A. *Dispensing* is the direct distribution of products by veterinarians to clients for use on their animals.

   B. *Prescribing* is the transmitting of an order authorizing a licensed pharmacist or equivalent to prepare and dispense specified pharmaceuticals to be used in or on animals in the dosage and in the manner directed by a veterinarian.

   C. *Marketing* is promoting and encouraging animal owners to improve animal health and welfare by using veterinary care, services, and products.

   D. *Merchandising* is the buying and selling of products or services.

3. **ADVERTISING AND TESTIMONIALS**
   A. *Advertising* is defined as communication that is designed to inform the public about the availability, nature, or price of products or services or to influence clients to use certain products or services.

   B. *Testimonials or endorsements* are statements that are intended to influence attitudes regarding the purchase or use of products or services.