

Model Member Survey: Reporting Illegal Practice

This model is adapted from a survey developed by California Veterinary Medical Association in November 2010. The CVMA received over 1500 responses, with close to 1200 reporting that they were aware of unlicensed activity.

The introductory material relates to California law and may not be consistent with your state's practice act and regulations. Be sure to change this text to reflect the laws of your state.

Dear _VMA member:

The _____ Veterinary Medical Association is launching a campaign against the illegal practice of veterinary medicine. While we have worked on this problem for many years, the illegal practice of veterinary medicine continues to grow.

There are many parts to this ambitious project and your input is very important. Enclosed is a survey that will give us valuable information on what is happening in your community in relation to illegal practice.

Some points of information to help you understand what constitutes “illegal practice”:

- The practice of veterinary medicine is defined in _____ under Section _____. It reads: _____

- Aside from the exceptions outlined in Section _____, an unlicensed person must be under the direct or indirect supervision of a veterinarian when performing veterinary tasks as outlined in Section _____. All other procedures in Section _____ may only be performed by a veterinarian.
- A veterinarian may only make a referral to another veterinarian. There are no provisions under _____ law allowing for referral by a veterinarian to anyone else, including persons licensed in another health care profession.

The information you provide is critical to our campaign. This data will assist us in working with the State Veterinary Medical Board to address the many issues related to unlicensed practice. Thank you in advance for your participation.

_VMA Illegal Practice Survey

Note: You may take this survey online at www._____, fax it to _____ or mail it in the enclosed postage-paid envelope.

1. Are you aware of the illegal practice of veterinary medicine in your area?

Yes No

2. If yes, what type are you seeing?

a. Small Animal: Acupuncture Anesthesia-free teeth cleaning Animal physical rehabilitation Chiropractic Vaccinations Other

b. Food Animal:

Animal physical rehabilitation Chiropractic Embryo transfer Pregnancy checks Other

c. Equine:

Animal physical rehabilitation Chiropractic Teeth Floating Other

3. How have you heard about these illegal practices?

Clients Newspaper Ads Online Ads Flyers Other

4. Where is the Illegal practice occurring:

Boarding facility Breeder Feed Store Grooming facility Layperson's home Pet Store Traveling/mobile layperson Other

5. Have you had a client relay a negative experience with an unlicensed layperson providing veterinary services?

Yes No

6. Was there an indication that the unlicensed layperson was diagnosing and treating?

Yes No

7. Have you treated patients that have been injured by an unlicensed layperson?

Yes No

8. If so, what types of injuries have you seen?

9. What city do you reside in? _____

10. Could the _VMA contact you for more information regarding your experiences with the illegal practice of veterinary medicine?

Yes No

Name: _____ Member number: _____

Phone number: _____

Email: _____

11. Additional comments:
