

Veterinary Telemedicine and the VCPR in California: In-Person Patient Exams Required

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Web sites and apps continue to pop up that offer technology-based online platforms to connect veterinarians to new or existing clients. California veterinarians should be aware of state veterinary telemedicine laws when considering incorporating such services into their practices.

For several years, the California Veterinary Medical Board (VMB) has extensively researched and discussed the application of telemedicine in the veterinary profession. On January 1, 2020, the VMB amended the California Veterinary Medicine Practice Act in Title 16, Section 2032.1(e-f)* – The Veterinarian-Client-Patient Relationship (VCPR), to address telemedicine. The additions define the term “telemedicine” and state that it may only be utilized within the context of a valid VCPR. They specifically state that a VCPR cannot be established solely by telephonic or electronic means, which clarifies the VCPR requirement of an in-person physical examination of the animal patient prior to commencing any treatment. The regulations provide a narrow exemption in which telemedicine may be used in emergency situations without a VCPR.

Existing VCPR language states that it is unprofessional conduct for a veterinarian to practice any aspect of medicine on an animal patient without first establishing a VCPR, except for instances when the patient is a wild animal or the owner is unknown. It then outlines what a veterinarian must do to meet legal requirements for a VCPR to be valid. A common misconception among veterinarians is that a VCPR is established once annually, with a

yearly or annual exam. However, the regulations indicate that a VCPR must be established for each diagnosis made and treatment provided. For example, a veterinarian who examines, diagnoses, and treats an ear infection must establish a VCPR for that given condition. If the same animal comes in a month later with a lameness, the VCPR for the ear infection cannot be used to provide medication or other treatment for the lameness. Rather, the veterinarian must repeat the steps outlined in 2032.1(b) to establish another VCPR(s) to treat the lameness.

The only reference in the VCPR language to “one year” is in section (c) relating to the prescription of drugs. That section states that a drug shall not be prescribed for a duration inconsistent with the medical condition of the animal(s) or type of drug prescribed, and for not longer than one year from the date that the veterinarian examined the animal(s) and established a VCPR for the condition being treated.

Essentially, minimum standards set forth in California law require a veterinarian to physically examine that animal patient [as required in 2032.1(b)(2)] to establish a valid VCPR prior to doing anything to or for it, including incorporating telemedicine as a method of case management. A veterinarian must establish a VCPR for each individual condition being managed in an animal patient. Within each VCPR, there are limitations to how long medications may be prescribed without re-examining the animal, and stipulations to how telemedicine may be incorporated into case management. ■

§ 2032.1. Veterinarian-Client-Patient Relationship.

(a) It is unprofessional conduct for a veterinarian to administer, prescribe, dispense or furnish a drug, medicine, appliance, or treatment of whatever nature for the prevention, cure, or relief of a wound, fracture or bodily injury or disease of an animal without having first established a veterinarian-client-patient relationship with the animal patient or patients and the client, except where the patient is a wild animal or the owner is unknown.

(b) A veterinarian-client-patient relationship shall be established by the following:

(1) The client has authorized the veterinarian to assume responsibility for making medical judgments regarding the health of the animal, including the need for medical treatment,

(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 is personally acquainted with the care of the animal(s) by virtue of an examination of the animal or by medically appropriate and timely visits to the premises where the animals are kept, and

(3) The veterinarian has assumed responsibility for making medical judgments regarding the health of the animal and has communicated with the client a course of treatment appropriate to the circumstance.

(c) A drug shall not be prescribed for a duration inconsistent with the medical condition of the animal(s) or type of drug prescribed. The veterinarian shall not prescribe a drug for a duration longer than one year from the date the veterinarian examined the animal(s) and prescribed the drug.

(d) As used herein, “drug” shall mean any controlled substance, as defined by Section 4021 of the code, and any dangerous drug, as defined by Section 4022 of the code.

**(e) No person may practice veterinary medicine in this state except within the context of a veterinarian-client-patient relationship or as otherwise permitted by law. A veterinarian-client-patient relationship cannot be established solely by telephonic or electronic means.*

**(f) Telemedicine shall be conducted within an existing veterinarian-client-patient relationship, with the exception for advice given in an “emergency,” as defined under section 4840.5 of the code, until that patient(s) can be seen by or transported to a veterinarian. For purposes of this section, “telemedicine” shall mean the mode of delivering animal health care services via communication technologies to facilitate consultation, treatment, and care management of the patient.*

*Additions to § 2032.1. Veterinarian-Client-Patient Relationship.