## **Bush House Veterinary Group**

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# Advice on 'Under Our Care' Guidance

As you may know the current guidance on how we prescribe prescription only medicine is changing.

### What is the current guidance?

To prescribe a POM-V a physical examination is required to be carried out by a veterinary surgeon to establish that an animal is under their care. The guidance states that animals should be "seen" immediately prior to prescribing or "recently or often enough for the veterinary surgeon to have personal knowledge" of the animal or herd. A veterinary surgeon cannot usually have an animal under their care if there has been no physical examination and they should not prescribe POM-Vs via the internet alone. Remote prescribing is therefore allowed under our current guidance but only where the animal is already under the veterinary surgeon's care (for our practice this is usually for repeat prescriptions).

## What is the new guidance?

It will no longer be a requirement for veterinary surgeons to conduct a PHYSICAL EXAM before prescribing POM-Vs. Instead they will be allowed to conduct clinical assessments remotely and will be able to use their own judgement to decide if they have enough information to prescribe safely and effectively. This is not just for repeat prescriptions but also for new conditions.

#### What does clinical assessment mean?

This can be performed in-person or remotely. Whether or not a physical examination is necessary is a matter for the veterinary surgeon's judgement and should include consideration of:

- The actual condition treated and associated risks e.g if this is possibly a closed pyometra it will need a physical exam or if it is an entire female the signalment may require pyometra to be ruled out.
- The nature of the medication being prescribed including any side effects e.g. If wanting to assess a dog in congestive heart failure to see if medication doses are needed to be changed. A full chest auscultation would be needed for this.
- When the animal or premises was last physically examined by a veterinary surgeon e.g. an animal on nsaids that needs a repeat and was seen a month ago with no side effects noted would not necessarily need an exam.
- Whether there is access to the animal's previous history e.g. if a nsaid is wanting to be used it is good to check whether there has been any side effects previously or if concurrent meds have been used e.g. preds that may cause a problem if used at the same time.
- The experience and reliability of the animal owner e.g. if the owner very rarely comes in and is out of date with their vaccine but wanting medication are they a reliable owner? Or if the owner is vague/ unclear when taking a history.

- Whether the animal is known to the veterinary surgeon and whether there is an existing relationship with the client or animal owner.
- The overall state of the animal's health e.g. if the animal is in very poor condition and the quality of life is being questioned a physical exam is more appropriate.
- The impact of any prescription made without physical examination on the ability to gather subsequent diagnostic information e.g. steroids or antibiotics may impact potential future diagnostics.
- Conditions relating to certain organs e.g. eyes were marked blepharospasm/hyperaemia may require a clinical exam to rule out an ulcer.

## When is a physical examination paramount?

- 1. Prescribing antimicrobials (if no physical exam is performed a vet should be prepared to justify their decision in the clinical notes).
- 2. Prescribing controlled drugs (if no physical exam is performed the vet needs to justify their decision in the clinical notes).
- 3. Where notifiable diseases are suspected.
- 4. Where there is concern over a potential severe, life threatening disease e.g. pyometra or urethral obstruction.

## Provision for 24/7 follow-up if a physical exam is not performed.

If a POM-V is prescribed with no physical exam, veterinary surgeons must ensure that a 24/7 follow-up service involving physical examination is immediately available if needed.

## When does the new guidance start?

From 1st September 2023

#### When will the new guidance be reviewed?

12 months from implementation so September 2024

What does this mean for our practice? You may be required to have additional or less reviews for certain medications but this will be solely down to the vet's discretion based on their professional judgment.

- There may be an increase in limited service providers however Bush House Vets will not sign agreements with remote vets as we provide a full independent service to our clients with 24/7 emergency care.
- A client may read on-line that they can ask for prescription medications without a physical examination. We tried this in covid and it didn't work we had no accurate weights, diagnoses were missed and our clients did not like it. Our vets are not happy to do this so for now we will not be doing this. Our repeat prescription service will continue as normal with the interval required between exams assessed on a case by case basis.
- When booking in appointments or taking a history remember to ensure you have the full medication history on file in case of previous remote prescribing and if on any current medication.
- If you are in a situation where you are not happy that the animal you are seeing was given the correct advice or medication in their "clinical assessment" please let one of the Partners know with all the details of the case so it can be reported to the RCVS e.g. given antimicrobials without sufficient justification (reporting@rcvs.org.uk)