FVE position and recommendations on the use of telemedicine

Introduction

This paper presents an overview of veterinary telemedicine together with recommendations to the Veterinary Regulatory Bodies for supporting advantages of telemedicine whilst preventing or mitigating risks that telemedicine will affect the quality of the services provided or the independent position of the veterinarian.

Telemedicine is a tool to support veterinarians. It can complement other methods to do a consultation or to make a diagnosis. Telemedicine is not meant to replace veterinarians. Whatever tools are used, veterinarians are always personally and fully responsible for the professional services they provide. FVE believes that physical consultation and examination plus prescription & dispensing of veterinary medicines to animals are preferable over electronic ways.

The veterinary profession is one of the liberal professions. The word ‘liberal’ refers to the professionally independent position veterinarians shall maintain in the exercise of veterinary medicine. The words ‘profession’ is connected with the promise or oath that is made when new graduates are ‘professed’ and licensed to practise. In the EU legislation, liberal professions are defined as those practised based on relevant professional qualifications, in a personal, responsible and professionally independent capacity, by those providing intellectual and conceptual services in the interest of the client and the public.

To protect the client and the public, and of course the animals, against sub-standard veterinary services, competent authorities regulate veterinary medicine. Only persons who have the necessary qualifications and keep up to relevant scientific, professional and ethical standards are licensed. Setting, maintaining and enforcing the standards is done by the competent authority directly or, as in most countries, delegated to the autonomous national Veterinary Statutory Bodies. Transparency is assured by a register of suitably qualified veterinarians.

Whenever new tools and technologies become available for veterinarians, it is important to assure that these tools and technologies will be beneficial to the veterinary profession and do not negatively affect the way veterinarians deliver their services in a qualified, independent and responsible way. A special case is the ongoing advancement of telemedicine. Telemedicine covers interactions between clients and patients with veterinarians (e.g. remote consulting, remote diagnosis, remote prescription of medicines), between veterinarians themselves or with other experts (third-party generated medical data).
Telemedicine

Veterinarians have been exchanging information with clients and colleagues, by means other than face to face interaction, for decades. Telephone, email and broadcast communications have long been considered acceptable means to facilitate veterinary consultations. Recent advancements in Information and communications technology (ICT) and increasing internet access by both the general population and professionals have revolutionized the provision of services, including healthcare. ICTs have been one of the main drivers towards the development of telemedicine. The digital revolution has rapidly enabled the remote exchange of high-quality clinical data, including video and pictures, to facilitate diagnoses, treatments and the provision of expert advice.

There is no universally accepted definition of veterinary telemedicine. The FVE veterinary statutory bodies working group has agreed to define veterinary telemedicine as the exchange and use of animals’ health information through technological platforms between a veterinarian and a recipient (client, veterinarian or other health professionals) in the context of a veterinarian-client-patient relationship (VCPR). A VCPR is normally the physical interaction among veterinarians, their clients and their patients, for the benefit of the patients. In the case of second opinion consultations and referrals, the VCPR shall be established by the referring veterinarian and the client.

Veterinary telemedicine uses ICTs to transcend geographical barriers and increase access to health services. This allows veterinarians to exchange data and information more effectively. It also allows clients to approach their veterinarian from a remote place when seeking advice. Furthermore, clients may have the chance to readily approach different professionals, establish comparisons and choose accordingly.

For these reasons, to avoid the misuse of telemedicine and reduce the asymmetry of information, veterinarians should be bound by ethical and legal obligations in the use of telemedicine. The nature of the information, the actions, the conclusions or recommendations that may follow are crucial for the animal, the animal owner and the veterinarian.

FVE recognizes that veterinary telemedicine is made by 4 pillars:

1. Remote consulting
2. Remote diagnosis
3. Remote prescribing
4. Third-party generated medical data

1. Remote consulting implies the exchange of advice or referral from the veterinarian to the animal owner or a colleague. Such advice or referral should be based on mutual trust and the adequate quality of the exchanged information.

- FVE recommends regulatory bodies to define those cases where remote consulting can be performed primarily where there is the urgent need of care, need for expert advice (second opinion and
referral case) or to overcome geographical barriers in the best interest of the animals.

2. **Remote diagnosis** implies the capacity by a veterinarian to make a visual examination and then a diagnosis via electronic tools (e.g. smartphone, laptop).

- FVE recommends regulatory bodies to define those cases where a remote diagnosis can be performed primarily whereby the responsible veterinarian (first opinion or second opinion referral case) can determine whether a further physical examination of the animal is necessary.

3. **Remote prescribing** implies the digital prescription of a drug following the performance of remote diagnosis.

- FVE recommends regulatory bodies to define those cases where remote prescribing can be performed primarily when the veterinarian has a well-recorded and established professional-client-patient relationship.

In the case of production animal practice, and to avoid misuse of prescriptions and potential misuse of drugs (e.g. antibiotics), FVE recommends that National Veterinary Authorities ensure regular on-farm visits of veterinarians, implementation of electronic prescribing with a limited validity of prescriptions, implementation and enforcement of official pharmacovigilance/surveillance and prescription/disposal tracking systems of drugs in the country.

4. **Third-party generated medical data** implies the exchange of biometric data often through electronic wearable devices that are capable of monitoring biometric parameters or administer drugs.

- FVE recommends that regulatory bodies consider how and under what circumstances these data can be used (e.g. quality and confidentiality aspects). Such data should be stored in compliance with current rules on data protection, privacy and professional confidentiality. Record keeping of such data should be under the responsibility of the veterinarian.

FVE recognizes the importance of digital tools in providing good quality services. By applying an ethical approach to digital innovation, the responsible use of digital devices in exchanging medical data, information and advice are crucial to the development of society and the veterinary profession.

FVE recommends its members to allow the use of telemedicine in the context of a veterinarian-client-patient relationship (VCPR) by setting up standard operating procedures, codes of conduct and proportionate regulation that respects the mission of veterinarians in promoting animal health, animal welfare, public health and the protection of the environment through the provision of high-quality services.