



FVE position and recommendations on the use of telemedicine

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Introduction

This paper presents an overview of veterinary telemedicine together with recommendations to the Veterinary Regulatory Bodies for supporting the 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 an important support tool for veterinarians to deliver services to society. Whatever tools are used, veterinarians should be able to use their professional judgment and are always personally and fully responsible for the professional services they provide. FVE is of the opinion that physical consultation with examination, prescribing, and dispensing of veterinary medicines to animals are preferable over electronic ways.

The national Code of Conduct, all national regulations on telemedicine and veterinary prescription rules and other appropriate national legislation should always prevail.

The veterinary profession is a [liberal profession](#). The word 'liberal' refers to the professionally independent position veterinarians shall maintain in the exercise of veterinary medicine. The word 'profession' is connected with the promise or oath that is made when new graduates are 'professed' and licensed to practice. In the EU legislation, liberal professions are defined as those who practice 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.¹

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-date relevant scientific, professional, and ethical standards are licensed. Licensing, setting, maintaining, and enforcing the standards for the profession 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 ensure 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

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¹ <https://fve.org/publications/charter-for-liberal-professions/>

advancement of new technologies and artificial intelligence (AI) which could complement telemedicine. Telemedicine covers remote interactions between veterinarians and clients and patients (e.g. remote examination, remote consulting, remote (official) inspections, 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 other communication methods have long been considered acceptable means to facilitate and enhance veterinary consultations. Recent advancements in Information and Communications Technology (ICT), the increasing internet access by both the general population and professionals along with the incoming of new emerging digital tools (e.g. AI) have revolutionized the provision of services, including healthcare. ICTs have been one of the main drivers of 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.

In 2020, the FVE Veterinary Statutory Bodies (VSB) working group defined veterinary telemedicine (VTM) as the exchange and use of animals' health and welfare 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). The working group considers that a VCPR is normally the physical interaction among veterinarians, their clients and their patients, for the benefit of the patients.

The veterinarian-client-patient relationship (VCPR) is the interaction among veterinarians, their clients and their patients. The VCPR is initiated when the veterinarian formally agrees to take responsibility for the healthcare of an animal and implies a suitable level of knowledge by the veterinarian of the animal(s), their history and environment to enable the safe and informed delivery of veterinary services in the interest of animal health and welfare, public health and the environment.

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 and new technological advancements 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 or any veterinarian from a remote place when seeking advice. Furthermore, clients may have the chance to readily approach different professionals, establish comparisons, and choose accordingly.

By acknowledging the European Coordinating Committee on Veterinary Training [report](#) on the potential opportunities and risks following the use and overreliance on digital technologies and artificial intelligence, 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, and 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. Such advice or referral should be based on mutual trust and the adequate quality of the exchanged information.

- FVE recommends that regulatory bodies consider defining those cases where remote consulting can be performed primarily by the veterinarian whereby he/she can determine whether a further physical examination of the animal or group of animals is necessary or to overcome geographical barriers in the best interest of the animal(s)

2. **Remote diagnosis** implies the capacity of a veterinarian to make a remote visual examination and then a diagnosis via electronic tools

- To diagnose and/or prescribe a treatment plan a proper veterinary assessment based on first-hand knowledge of the historical and current risks to the health of the animal(s) is necessary. Relevant information includes records of management and health history along with results of ancillary tests, postmortems, epidemiological investigations along any other information deemed necessary. FVE therefore recommends that regulatory bodies consider defining those cases where a remote diagnosis can be performed by a responsible veterinarian (first opinion or second opinion referral case) and who can determine whether a further physical examination of the animal is necessary.
- Follow-up treatments and check-ups, should preferably be performed by physical meetings and examinations up to veterinary judgment. FVE recommends that regulatory bodies consider defining those cases where remote consulting for follow-up and check-ups would be allowed.

3. **Remote prescribing** implies the digital prescription of veterinary medicine which can follow the performance of remote diagnosis.

- FVE recommends that regulatory bodies define under which conditions and what type of veterinary medicines can be prescribed remotely. Remote prescribing can only be performed by a veterinarian who has a well-recorded and established professional-client-patient relationship (VCPR).

To avoid misuse of prescriptions and potential misuse of veterinary medicines (e.g., antimicrobials, anesthetics) across the veterinary sector, FVE suggests that National Veterinary Authorities ensure regular on-farm visits by veterinarians (e.g. according to Art 25 of the Animal Health Law), implementation of electronic prescribing with a limited validity of prescriptions, and implementation and enforcement of official pharmacovigilance/surveillance and prescription/disposal tracking systems of veterinary medicines in the country.

4. **Third-party medical data** implies the exchange of biometric data often generated through electronic wearable devices that are capable of monitoring biometric parameters or administering medicinal products.
 - FVE recommends that regulatory bodies consider how and under what circumstances these data can be generated, used and stored (e.g., quality and confidentiality aspects). Such data should be stored in compliance with National rules on data protection, privacy, and professional confidentiality. Record keeping of such data should be under the responsibility of the veterinarian.

As during ordinary physical consultations, veterinarians should be careful of acts on misuse of service and suspected breaches of animal welfare legislation. Especially during video consultations, neglect and abuse of animals may be suspected, and must be thoroughly considered.

FVE recognizes the importance of current and emerging 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 is crucial to the development of society and the veterinary profession.

FVE recommends its members consider the use of telemedicine in the context of a veterinarian-client-patient relationship (VCPR) by setting up standard operating procedures (SOP), 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.

