Case Study: VCPR and Beekeeping in Ontario



VCPR Case Study



The following case study reviews the establishment and maintenance of a valid Veterinarian-Client-Patient Relationship (**VCPR**) between a veterinarian and an Ontario beekeeper. Bullet points are provided throughout the case study highlight key actions and discussion points essential to this process.

Case Outline

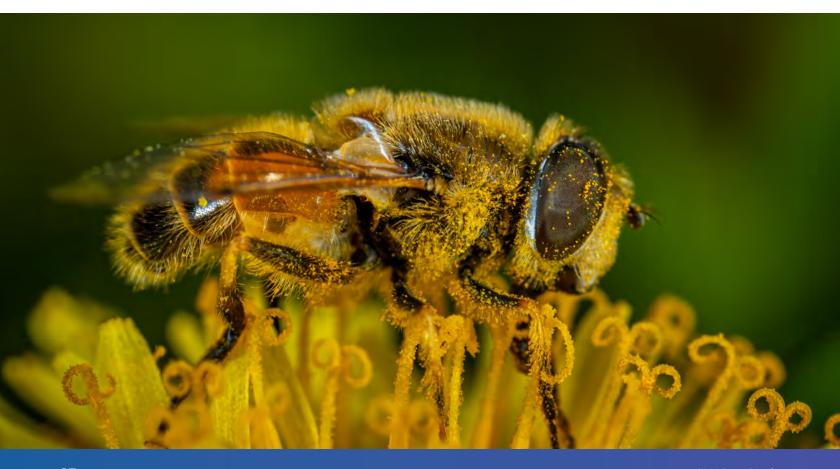
Wendy Nogard is an experienced beekeeper who has been maintaining her own bee yard for many years. She has managed outbreaks of varroa mites in her colonies, and recently has seen variable overwinter losses, like many beekeepers in Ontario. She also treats her colonies twice a year with oxytetracycline in order to prevent American Foulbrood from infecting her colonies, as she knows there have been affected yards in her region. Wendy periodically has discussions with fellow beekeepers and industry experts at the University of Guelph about different management strategies and how to keep her bees healthy, but she has always purchased her supplies and medications from her local apiary supply store (a licensed Livestock Medicine Outlet). Being active in the provincial beekeeper association, she knows that medically important antimicrobials are only available by veterinary prescription as of December 1st, 2018, but she has never worked with a veterinarian before.

Wendy knows that if beekeepers can only obtain medically important antimicrobials through their veterinarian, more veterinarians are going to need to get involved in apiculture in Ontario. Wendy has kept tabs on the most recent initiative by the Ontario Beekeepers' Association (**OBA**) to provide training for private veterinarians on basic apiculture principles. The College of Veterinarians of Ontario also began keeping a list on their website of veterinarians who are interested in working with bees and beekeepers. Using this list, Wendy was able to find such a veterinarian in her region - Dr. Sara Malvo.

Dr. Malvo is a practicing small animal veterinarian who has always had an interest in insects. Her undergraduate degree was in zoology, and when she heard that veterinarians would have the opportunity to work more with apiculturists, she jumped at the chance to learn more.

• While bees are considered a food animal, bee medicine can be practiced from any type of accredited veterinary facility by a veterinarian who has received training in bee health.

Wendy called Dr. Malvo about the possibility of obtaining prescriptions for the necessary antimicrobials needed for treating her colonies. Dr. Malvo noted that in order for her to prescribe and dispense medications, or offer any veterinary services, they must first establish a valid veterinary-client-patient relationship (**VCPR**).





• Dr. Malvo has made Wendy aware of the need to establish a VCPR prior to recommending and/or providing treatment or veterinary services (including the prescribing, dispensing, or administering of drugs) for any animal, group of animals, herd, or colony.

Wendy and Dr. Malvo then have a conversation regarding the services Wendy wants and those that Dr. Malvo can provide, including emergency services and prescriptions, and that these services need to comply with professional practice standards for veterinarians. Although there are few, if any, medical emergencies in apiculture that require immediate treatment, emergency services would also cover unexpected mortality or disease issues that may need to be addressed outside of regularly scheduled communications.

- Dr. Malvo has:
 - Reached an agreement with Wendy as to the scope of the services to be provided.
 - Advised Wendy that services will only be provided in accordance with the standards of practice of the profession.

Wendy agrees with the scope of services discussed and agrees to work with Dr. Malvo as her veterinarian. Wendy also provides her with some key information about her bee yard, including her provincial bee yard registration number, and the approximate number of colonies she has (realizing that this will fluctuate over and between seasons).

• Dr. Malvo has been retained by Wendy (the client).

A couple of weeks later it's late winter, and Wendy calls again to speak to Dr. Malvo regarding American Foulbrood (**AFB**) (Paenibacillus larvae) prevention in her colonies. During the production season, Wendy checks her colonies regularly for signs of AFB, including dead, off-colored (coffee-brown) larvae in capped cells, and irregular brood patterns. She is fortunate to have avoided infection of any of her colonies with AFB, as she knows other beekeepers who have had to burn hives and equipment and quarantine other colonies as a result of this disease. Wendy would like to treat her colonies in the spring with oxytetracycline to help prevent AFB.

Dr. Malvo confirms that Wendy uses appropriate management practices to minimize the introduction of AFB into her yard. She also discussed with Wendy the steps that will need to be taken if she does detect any signs of AFB in her colonies, including submitting dead larvae to the diagnostic lab for confirmation of the disease, and informing the provincial apiarist of any suspicions of AFB. Dr. Malvo then agrees that preventative treatment for AFB in Wendy's area in the spring and fall is prudent. She discusses with Wendy exactly how and when the treatment will be applied as part of a standard operating procedure. If there is a need to use the drugs in at some other time or in some other manner, Wendy will call Dr. Malvo to discuss it first.

Dr. Malvo wishes to prescribe oxytetracycline for Wendy's colonies; however, she practices 3 hours away and is unable to visit the premises. Under new exemptions to the VCPR practice standard for apiculture, Dr. Malvo can nonetheless prescribe antibiotics for Wendy's colonies.

• Recently, the College of Veterinarians of Ontario established an exemption to the requirement for physical exams or regular visits to the apiary, as neither of these requirements are considered essential to the sound practice of apiary medicine.

Before providing the prescription, Dr. Malvo fulfilled all of the following requirements:

- 1. Confirm Wendy's provincial bee yard registration number;
- 2. Confirm the number of colonies that require treatment;
- 3. Discuss and confirm Wendy's production management practices;
- 4. Discuss and establish standard operating procedures for antimicrobial use in dieases requiring treatment, such as AFB;
- 5. Be available to Wendy in case of an adverse reaction.

Dr. Malvo also informs Wendy of the potential side-effects of oxytetracycline in bees, and reiterates that the treatment is strictly preventative – once a colony shows signs of AFB it cannot be salvaged, and the colony and equipment must be burned to prevent spread to other colonies in her yard and in other yards. Wendy understands this and appreciates Dr. Malvo's thoroughness and agrees to the treatment regimen.

Dr. Malvo has obtained Wendy's informed consent for managing AFB in her operation

Because Dr. Malvo's clinic is so far from Wendy's yard, rather than drive to the clinic to pick up the medication, Dr. Malvo arranges to have it couriered from the clinic directly to Wendy's location.

