Guidance for veterinary practices in providing essential veterinary care during the Covid-19 pandemic

Veterinary practices provide essential services, vital to ensure safe food production and safeguard animal welfare.

This guidance (previously issued in April 2020) is being reissued in October 2020 to support the veterinary professions to provide essential veterinary care during some local, regional, and national lockdowns during the second wave of Covid-19. For example, the two-week firebreak lockdown announced on 19 October by the First Minister of Wales.

During lockdowns veterinary professionals can continue to work in line with national and local government advice to businesses. In some circumstances it may be appropriate to only provide in-person services that are needed to maintain the food supply chain, or which are essential for animal health and welfare or public health, including to relieve pain and suffering.

Veterinary services must also be provided in a manner that supports social distancing, including avoiding all unnecessary in-person contact with clients, maintaining a safe physical distance, and ensuring that animals are only seen face-to-face where necessary.

Please note: this advice is intended as guidance only and decisions should be made on a case by case basis. It is not an exhaustive list and veterinary practices may vary in their approach due to individual circumstances. Individual veterinary surgeons must also exercise their own clinical judgement in assessing cases and with regard to the veterinary declaration.

This guidance is supplementary to the RCVS guidance and flowchart “Can I do it?” available via www.rcvs.org.uk/coronavirus

Due to differences in rules or approach between the four nations of the UK and between different local authorities, vets should be mindful of their own local situation and refer to the relevant government website for more information: GOV.UK; Scottish Government; Welsh Government; Northern Ireland Executive. For updated information please also see the FAQs in the BVA Coronavirus Information Hub.

Principles

The principles on which this guidance has been written are:

1. Slowing the spread of Covid-19 remains the top priority for everyone. Public health, including the safety of veterinary team members and clients, remains paramount.
2. There is a reputational risk for the profession if it is not seen to be doing everything it can to play its part in the control of Covid-19.
3. If work can be done remotely, it should be.
4. In-person work should only go ahead if there is a real, and not nominal, animal welfare justification taking into account the timeframe of the lockdown.
5. If in-person work does go ahead, it should be done practising social distancing and good biosecurity, including appropriate PPE.
6. All work carried out should be done mindful of prudent use of resources.

**General guidance on social distancing**

There are some general principles that should be adopted across the veterinary sector:

- There should be **no unnecessary client contact**. You should:
  - Clarify client’s medical status with regard to Covid-19
  - Obtain histories over the phone
  - Use technology to triage and consult wherever possible
  - Consider remote prescribing in line with RCVS guidance
  - Obtain payment over the phone
  - Ensure contact-free collection of medication is in place, with a specific, secure collection time and place organised in advance
  - Post medication if appropriate following Post Office guidance and, where applicable, following RCVS controlled drugs guidance

- All staff that can work from home should work from home. This could include:
  - Administrative staff
  - Vets and nurses carrying out triage and remote consultations from home, if appropriate, referring to skeleton staff at a physical premises only if absolutely necessary

- Follow all hand hygiene and biosecurity measures and thoroughly clean all equipment after each use
- Follow RCVS Knowledge PPE advice – view and download all their resources here
- Follow strict social distancing measures between veterinary team members and only work outside them if there is a real, and not nominal, animal health and welfare justification. Risks should be mitigated as much as possible.
- Follow strict social distancing measures with clients at all times and be prepared to refuse to continue if animal owners do not follow the official advice
- Where social distancing from clients could result in a risk to health and safety in handling large or dangerous animals, veterinary team members should work together to mitigate the risks (in order to minimise your contact with a number of different people)
- Continue to deliver emergency treatment, including euthanasia, of wildlife in accordance with your normal practice, as long as it can be done safety under social distancing rules

In the event of a practice closing completely due to Covid-19, we urge practices to redistribute their PPE and consider controlled drugs security. In addition, we urge neighbouring practices to work together to ensure full geographical cover for emergency veterinary services. We are asking practices, at these difficult times, to put aside commercial interests to support one another, and ensure that on returning to normal provision clients are retained by their original practices. This includes where neighbouring practices are in different levels of lockdown.
Sector-specific advice

Please note: this advice is intended as guidance only and decisions should be made on a case by case basis based on the timeframe of the specific lockdown. It is not an exhaustive list and veterinary practices may vary in their approach due to individual circumstances.

Small animal

- Advise owners coming into the practice (eg for a euthanasia) on what to expect, including that it may look and feel very different to normal due to social distancing and the use of PPE

- There should be as few people working in the practice as possible, maintaining appropriate physical distances as much as possible. This means:
  - Splitting workforce into smaller teams when possible to minimise overall contacts
  - Staggering breaks between teams in case one team needs to isolate

- If you are requested to assist with an animal from an infected household, follow RCVS advice and APHA advice. There is no expectation on vets and nurses to undertake home visits to an infected household unless: it is essential for animal welfare; the risk can be adequately controlled (for example the animal placed outside the home upon the veterinary surgeon’s arrival); appropriate PPE is worn; and there is no other way the animal can be brought to the practice.

Small animal examples – please read in the context of this document as a whole

Please note: the list below is not exhaustive but is intended as guidance only. All vets should continue to use their professional judgement and risk assess individual cases, keeping clear clinical notes and taking into account the timeframe of the lockdown.

<table>
<thead>
<tr>
<th>Suspend/Delay</th>
<th>Remotely assess in the first instance</th>
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<tbody>
<tr>
<td>Adult cat vaccinations (unless &gt;15 months since last vaccine)</td>
<td>Neutering – assess domestic situation relating to population control/socialisation need and consider chemical options if appropriate</td>
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<tr>
<td>Kennel Cough vaccinations</td>
<td>Mild trauma, eg nail pulls</td>
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<td>Non-essential consults, such as routine nail clips, weight clinics, puppy parties, mid-year health checks</td>
<td>Skin issues, including flea allergic dermatitis</td>
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<td>Routine reproductive work eg artificial insemination</td>
<td>Anal glands/scooting</td>
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<tr>
<td>Post-op checks</td>
<td>Post-op checks</td>
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<tr>
<td>Repeat medication checks, if stable</td>
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<tr>
<td>Vomiting/diarrhoea in a well animal</td>
<td>Dental complaints</td>
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<td>Dental complaints</td>
<td>Lumps</td>
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<td>Lumps</td>
<td>Wounds</td>
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</tbody>
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- Non-acute lameness
- Eye complaints
- Anorexia
- Vaginal discharge
- Non-specific lethargy

**Go ahead, but only if the vet is satisfied there is a real animal health/welfare need during the timeframe of the lockdown and risks to your team and the public can be mitigated**

- Any of the above deemed necessary following remote triage or consultation
- Primary vaccination courses (including 1st year booster)
- Leptospirosis vaccination (following risk assessment; administer additional core components if due at the same time)
- Rabbit vaccinations
- Rabies vaccinations (if required for certification reasons)
- Rabbit neutering
- Dispensing flea and worming treatments (in line with RCVS and [VMD guidance](#))
- Microchipping (if animal is already in the practice for an essential service)
- Severe trauma, eg RTA
- Seizures
- Jaundice
- Pallor
- Significant weakness or collapse
- Cough >one-week duration
- Difficulty breathing
- Dystocia
- Acute severe lameness
- Abdominal swelling
- Significant bleeding
- Retching
- Toxin ingestion (if phone/video triaged as significant)
- Struggling to urinate or defecate
- Excessive urination or thirst
- GI signs (vomiting and/or diarrhoea) with significant mental depression
- Ongoing treatment and monitoring of Addison’s patients
- Monitoring of unstable diabetics
- Flystrike
- Ileus (small mammals)
- Euthanasia

**Equine**

- Call ahead to make sure your client understands the social distancing measures you will be putting in place and knows what to expect
- Maintain a physical distance of 2m at all times from other people and use appropriate PPE
- Wear clean, disinfected protective clothing and wear gloves at all times, change these regularly and do not touch your face
Consider sedating animals needing treatment or investigation where appropriate, especially if this helps maintain the 2m physical distance from the handler.

In cases where clients are self-isolating or confirmed to have Covid-19 they should not be involved in the visit at all. Consider taking a second member of practice staff to assist for safety. If two members of staff must travel to a site, consider travelling in separate vehicles.

Where possible, contact with the client should be by telephone only. Where face to face interaction is required then this should only be with one person per visit.

Cleanse all door handles and other surfaces in your car on leaving the yard.

**Equine examples** – please read in the context of this document as a whole

**Please note**: the list below is not exhaustive but is intended as guidance only. All vets should continue to use their professional judgement and risk assess individual cases, keeping clear clinical notes and taking into account the timeframe of the lockdown.

**Suspend/Delay**

- Pre-purchase examinations
- Routine dental work
- Stallion licensing
- Routine health checks
- Riding school inspections
- Radiography for sales or survey studies
- Routine fertility work
- Poor performance investigations
- Joint medication

**Remotely assess in the first instance**

- Castration (following a risk assessment of the individual animal)
- Repeat medication checks, if stable
- Mild trauma
- Skin issues
- Lumps
- Wounds
- Sarcoids or other skin tumours
- Nasal discharge/cough
- Inappetence

**Go ahead, but only if the vet is satisfied there is a real animal health/welfare need during the timeframe of the lock down and risks to your team and the public can be mitigated**

- Any of the above deemed necessary following remote triage or consultation
- Vaccinations (in accordance with governing body rules and following a risk assessment of the individual animal)
- Reproduction work where mare is already in foal (following a risk assessment of the individual animal)
- Quidding
- Painful facial, jaw or limb swelling
- Eye complaints
- Severe trauma/haemorrhage
• Difficulty breathing
• Severe acute lameness/laminitis
• Colic
• Acute diarrhoea
• Acute ataxia/neurological conditions
• Dystocia and post-partum problems (including retained foetal membranes)
• Sickness/lameness in foal
• Euthanasia

Farm animal

• Call ahead to make sure your client understands the social distancing measures you will be putting in place and knows what to expect
• Maintain a physical distance of 2m at all times from other people and use appropriate PPE
• In cases where clients are self-isolating or confirmed to have Covid-19 they should not be involved in the visit at all. If there are no other farm staff available, consider taking a second member of practice staff to assist. We would discourage lone working in any farm environment. If two members of staff must travel to a site, consider travelling in separate vehicles
• Wear clean, disinfected protective clothing
• Wear gloves at all times, change these regularly and do not touch your face
• Where possible, contact with the client should be by telephone only. Where face to face interaction is required then this should only be with one person per visit
• Do not enter the farmhouse or any other residential area for any reason and do not accept any drinks or food
• Cleanse all door handles and relevant surfaces in your car regularly and on leaving the farm
• Follow the most up to date government advice re statutory surveillance and bovine TB testing from APHA Gateway covering Great Britain and DAERA in Northern Ireland (inc the TB testing Q&A)

Farm animal examples – please read in the context of this document as a whole

Please note: the list below is not exhaustive but is intended as guidance only. All vets should continue to use their professional judgement and risk assess individual cases, keeping clear clinical notes and taking into account the timeframe of the lockdown.

Suspend/Delay

• Any work which does not: directly impact on maintaining the food chain; have a real animal welfare justification; or is required in accordance with latest government advice on statutory surveillance and TB testing

Remotely assess in the first instance

• Mild trauma
• Down animal
• Pneumonia outbreaks
• Increased cell counts or mastitis issues – this could be covered by data analysis, remote video viewings and utilising the ongoing lab services
• Post-op checks
• Scouring youngstock – sample collection may be appropriate

Go ahead, but only if the vet is satisfied there is a real animal health/welfare need during the timeframe of the lockdown and risks to your team and the public can be mitigated

• Surgical cases, such as LDA
• Fertility work, where it may be carried out safely, to maintain the food chain
• Statutory disease surveillance and TB testing where it can be carried out safely (check latest government advice)
• Emergency slaughter
• Severe trauma
• Difficulty breathing
• Prolapse
• Sick or anorexic animals
• Suspected hypomagnesaemia
• Dystocia

For the latest updates please visit: [www.bva.co.uk/coronavirus](http://www.bva.co.uk/coronavirus)

And for additional species-specific advice please visit relevant veterinary associations’ websites