



POSITION STATEMENT

Veterinary Dentistry

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Related Topics:	supervision and delegation, record keeping
Legislative References:	<i>Veterinarians Act R.S.O. 1990</i> , 1(1), 11 (1), (5); O. Reg. 1093, Section 17(1), 18, 19(1), 20(1), 21(1); <i>Minimum Standards for Veterinary Facilities</i> , Title 1, Title 12, subdivision 1.
College Contact:	Registrar
Reference Materials:	CVMA Position Statement on Veterinary Dentistry; AVMA Position Statement on Veterinary Dentistry; CVO's Position Statement, "Release of Medical Information" (June 2007); CVO INFO Sheet, "Equine Dentistry in Ontario" (July 2003)

College publications contain practice parameters and standards which should be considered by all Ontario veterinarians in the care of their patients and in the practice of the profession. College publications are developed in consultation with the profession and describe current professional expectations. It is important to note that these College publications may be used by the College or other bodies in determining whether appropriate standards of practice and professional responsibilities have been maintained.

Purpose

This position statement confirms that the College defines veterinary dentistry as part of the scope of practice of veterinary medicine, as per the *Veterinarians Act*, and outlines College expectations and professional requirements for supervision and delegation, follow-up care, medical records, anesthesia, and equipment.

Scope

This position statement applies to all veterinarians who practice dentistry on animals in Ontario.

Background

The CVO has published decisions of the Executive and Complaints Committees regarding the practice of veterinary dentistry in issues of *Update* (see June 2006). This position statement formalizes these decisions and is consistent with the Position Statements on Veterinary Dentistry of the Canadian Veterinary Medical Association, the American Veterinary Medical Association, and the American Veterinary Dental College (AVDC).

Position Statement

General

Veterinary dentistry requires both diagnosis and treatment. Only veterinarians may practice veterinary dentistry in Ontario. However, they can be assisted by an appropriately trained auxiliary under the direct supervision¹ of a licensed veterinarian.

Veterinary dentistry includes provision of oral health care including but not limited to: the cleaning (other than simple brushing)², adjustment, filing (“floating”), extraction, or repair of animals’ teeth; and to medical treatment of and surgery performed on any part of the oral cavity. It requires extensive knowledge of anatomy, anesthesiology, pharmacology, physiology, pathology, radiology, neurology, medicine, and surgery, all of which is acquired during the course of veterinary training. Veterinary education also includes instruction on animal dentistry. Veterinarians are uniquely qualified to recognize and address complications and unexpected conditions or diseases that may arise during the course of or after examination and treatment. Veterinarians who perform dentistry are obligated to stay current with evolving professional standards and techniques.

Supervision and Delegation

Veterinarians may offer veterinary dentistry services themselves or delegate some of them to an auxiliary under direct supervision.

In order to maintain professional standards, the veterinarian must remain on the same premises in order to supervise the auxiliary properly. Only a licensed veterinarian may conduct the examination needed to make an assessment of the animal, develop a diagnosis, and formulate a treatment plan. An auxiliary may be directed to perform a procedure which is within the auxiliary’s abilities, but the veterinarian must re-examine the entire oral cavity of the animal to

¹ **Direct Supervision:** the member is on the same premises as the auxiliary but not necessarily within sight or hearing.

² From the June 2006 *Update* article, “What Constitutes the Practice of Veterinary Medicine?” p. 13.

ensure that the procedure was performed properly by the auxiliary.³ Anyone who provides veterinary dentistry services in Ontario without the direction and supervision of a veterinarian will be considered to be practicing veterinary medicine without a licence.

Dental extractions fall within the definition of major surgery. Only veterinarians are trained to the depth required to respond appropriately to complications or unexpected findings; therefore, in order to maintain professional standards only veterinarians may perform extraction procedures and auxiliaries may *not* perform extractions, even under supervision.⁴

Titles

The use by a layperson of the titles veterinary dentist, equine dentist, veterinary or equine dental technician, or any similar title is contrary to the *Veterinarians Act*. It is an offence for anyone who is not a licensed veterinarian to use a term, title, or description that may lead a member of the public to believe otherwise. Also, “dentist” and “dental surgeon” are protected titles in Ontario under the *Dentistry Act* and should not be used by a veterinarian.

VCPR

Veterinary dentistry, as per other areas of veterinary practice, requires a valid veterinarian-client-patient relationship. If an animal owner’s veterinarian does not provide dental services (as may be the case for some equine veterinarians), the owner may seek another veterinarian who does perform these services or ask for a referral from their primary-care veterinarian.

Informed Owner Consent

Dental procedures should not be performed on an animal without first obtaining informed consent from the owner or owner’s agent. Clients should be informed about the professional status of who will be performing the dental service. As part of informed consent, the owner should also be advised that unexpected findings often occur and that it is important to provide accurate contact information to the veterinarian in case consent for additional treatment is required during a procedure.

Medical Records

Members are advised that quality medical-dental care for animals requires clear and complete medical records. When an animal is referred for dental treatment to another member, communication and co-ordination between the primary-care veterinarian and that member is mandatory. Records, including relevant medical history, must be shared as appropriate between any veterinarian performing referral dentistry and the primary-care veterinarian. See the CVO Position Statement, “Release of Medical Information,” for detailed expectations.

Radiographs

As per the *Minimum Standards*, if radiographs are taken they must be permanently identified with: the veterinarian and/or facility name; animal identification; date; an indication of left side or right side; and if a sequential study, an indication of time. Capturing the information in the emulsion is the best way to record this, but dental radiographs are small and therefore clarification of the information is often required; use of film mounts, labels, fine-tipped markers, or sequential enumeration are acceptable methods.

³ From the CVO INFO Sheet, “Equine Dentistry in Ontario,” July 2003.

⁴ From the Summer 2001 *Update* article, “Auxiliaries in Companion Animal Practices,” p. 6, re: Council’s March 28, 2001, policy on restricting specific acts to veterinarians.

Follow-up Care

Any veterinarian performing dental procedures on an animal must remain available for consultation with the owner and for re-assessment of said animal on completion of the service for a reasonable period of time. The treating veterinarian needs to provide the client with the name of who to contact in the event of an emergency related to the dental procedure after such time has elapsed, and this should be coordinated beforehand. In the case where the treating veterinarian is not the primary-care veterinarian, the former must ensure that the latter is informed of the service performed, the outcome, and what procedures should be followed in case of emergency.

Anesthesia

The cleaning and scaling of the teeth of companion animals must be performed with general anesthesia with the use of an endotracheal tube with an inflated cuff in order to meet acceptable standards of practice for veterinarians in Ontario.

Equipment

See *Minimum Standards* for: Veterinary Facilities for Companion Animal Hospitals (Title 1); Remote Area Companion Animal Mobiles (Title 4.1); and Companion Animal Emergency Clinics (Title 5); and Specialty Animal Hospital: Dentistry (Title 12) in Appendix 1.

While the *Minimum Standards* for other practice categories (including equine) do not include specific specifications for dental equipment in treatment areas, the College expects that any veterinarian performing dentistry will use the appropriate equipment as per generally accepted standards of care, and that this equipment will be sterilized using appropriate means so as to prevent transmission of disease between animals.

APPENDIX 1 - *Relevant Legislation*

The *Veterinarians Act, 1989*, R.S.O. 1990, c.V.3 is the profession specific *Act* which governs the practice of veterinarians in Ontario. O. Reg. 1093 is the regulation under that *Act*. The *Minimum Standards for Veterinary Facilities in Ontario* are established by the Council of the CVO under the authority of the Regulation.

Section 1 of the *Veterinarians Act* states:

Interpretation

1. (1) In this Act,
“practice of veterinary medicine” includes the practice of dentistry, obstetrics including ova and embryo transfer, and surgery, in relation to an animal other than a human being;

Section 11 of the *Veterinarians Act* states:

Licence required

11. (1) No person shall engage in the practice of veterinary medicine or hold himself, herself or itself out as engaging in the practice of veterinary medicine unless the person is the holder of a licence. R.S.O. 1990, c. V.3, s. 11 (1).

Proof of practice

(5) For the purposes of this section, proof of the performance of one act in the practice of veterinary medicine on one occasion is sufficient to establish engaging in the practice of veterinary medicine. R.S.O. 1990, c. V.3, s. 11 (5).

O. Regulation 1093, Part II, states:

Practice Standards

17. (1) For the purposes of the Act, professional misconduct includes the following:

Regarding records:

27. Failing to make or retain the records required by this Regulation.

Regarding unauthorized practice:

30. Failing to direct or supervise, or inadequately directing or supervising, an auxiliary.
31. Permitting, counselling or assisting any person, other than a member, to practise, or to attempt to practise, veterinary medicine.
32. Permitting, advising or assisting any person, other than a member, to perform any act or function which should properly be performed by a member.

Regarding coordination of care:

40. Treating an animal receiving veterinary services from another member without notifying the other member and obtaining the relevant historical information as soon as practicable except if the treatment is done in accordance with subsection 33 (1.1).

41. Treating an animal receiving veterinary services from another member who did not refer the animal without advising the client that such uncoordinated veterinary services may place the animal at risk except if the treatment is done in accordance with subsection 33 (1.1).

Regarding accepted standards of practice and procedures:

18. A member shall exercise generally accepted standards of practice and procedures in the performance of veterinary services. R.R.O. 1990, Reg. 1093, s. 18

Regarding appropriate delegation and supervision:

1. In this Regulation,

“auxiliary” means a person involved in a member’s practice of veterinary medicine other than another member;

19. (1) A member is responsible for the conduct of his or her auxiliaries and for the suitability and quality of the performance of their acts. R.R.O. 1990, Reg. 1093, s. 19 (1).

(2) A member is guilty of professional misconduct if an auxiliary of the member does or omits to do anything that, if done or omitted by a member, would constitute professional misconduct. R.R.O. 1990, Reg. 1093, s. 19 (2).

- (3) A member properly supervises the performance of an auxiliary’s task if the member,
 - (a) is physically present on the premises when the task is performed, remains available for personal intervention if required and monitors the performance to determine that the task is properly carried out; or
 - (b) if absent on account of an emergency or otherwise temporarily absent and the performance of the task does not require a member’s attendance, has given general instructions for such an occasion and the member ascertains as soon as practicable after the task is performed that it was properly carried out. R.R.O. 1990, Reg. 1093, s. 19 (3).

(4) A member may direct an auxiliary who is suitably qualified by education or experience to perform, under the supervision of a member, the tasks traditionally assigned to auxiliaries including flushing and infusion procedures in the course of embryo transfers after appropriate assessment by a member. R.R.O. 1990, Reg. 1093, s. 19 (4).

Regarding follow-up care:

20. (1) A member is responsible for providing reasonably prompt services outside of regular practice hours if the services are medically necessary for animals that he or she has recently treated or that he or she treats regularly. R.R.O. 1990, Reg. 1093, s. 20 (1).

21. (1) A member who induces general anaesthesia in an animal or undertakes critical care of an animal is responsible for monitoring the recovery of the animal until its medical condition is stable and satisfactory. R.R.O. 1990, Reg. 1093, s. 21 (1).

The Minimum Standards for Veterinary Facilities in Ontario include the following:

TITLE 1. COMPANION ANIMAL HOSPITAL

8.3 The treatment area contains or has readily available within the facility,

1. electric hair clippers and a fine surgical blade or a razor for hair removal,
7. dental scaling instruments or devices,
8. elevators,
9. tooth extractors,

9.2 The anesthesia area contains or has readily available within the facility,

3. cuffed endotracheal tubes and tube adaptors appropriate to the tracheal sizes of reasonably expected animals,

10.3 The operating room contains,

9. all items sterilized in the facility display the date of sterilization and the name or initials of the person who carried out the sterilization,
11. all packs contain an internal sterility monitor.

10.6 The facility contains, outside the operating room, a steam sterilizer of sufficient size to sterilize the quantity of surgical packs necessary for the reasonably expected case load (a gas sterilizer may be present but it is not a substitute for the steam sterilizer).

TITLE 4.1 – REMOTE AREA COMPANION ANIMAL MOBILE

Part 11.0 Dentistry (Discretionary)

11.1 If the member provides dentistry from the remote unit, the remote unit contains, or has readily available from the mobile unit,

1. Dental scaling instruments or devices,
2. Dental elevators,
3. Tooth extractors,

TITLE 5 – COMPANION ANIMAL EMERGENCY CLINIC

4. a tray or container of fresh cold sterilization solution or sterilized packs containing at least one of each of,

7. dental scaling instruments or devices,
8. elevators,
9. tooth extractors,

TITLE 12. SPECIALTY ANIMAL HOSPITAL

Subdivision 1 – Dentistry

This subdivision of the title contains the qualifications, or minimum standards, for the accreditation of a veterinary facility as a specialty animal hospital for the specialty of dentistry. See <http://www.cvo.org/uploadattachments/Minimumstandardsaugust2007.pdf> for the full text of the subdivision.