



Euthanasia Guidelines

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Purpose and Scope

The purpose of this document is to assist veterinarians in decision-making surrounding the euthanasia of animals. “Veterinarian” refers to a veterinarian licensed by the CVBC to practise veterinary medicine in British Columbia (ie. a “registrant”). These guidelines apply to all CVBC registrants who perform or oversee the performance of euthanasia of any animal.

A. Guiding Principles

Veterinarians have several, sometimes competing, responsibilities which they must consider, including:

- a. to ensure the welfare of the animals under their care.
- b. to individual owners to provide guidance and offer alternatives to euthanasia where appropriate.
- c. to the humane community to ensure that euthanasia protocols for shelters, pounds and other institutions in which veterinarians provide euthanasia services are appropriately designed and that the protocols have been followed.
- d. to the public to act in accordance with society’s current values surrounding euthanasia, and to ensure the public’s safety from fractious animals or from those with potentially dangerous zoonotic illnesses.
- e. to weigh their own personal ethical beliefs with their professional responsibilities.

Veterinarians have professional autonomy and are not obligated to perform euthanasia at the direction of an owner or institution.

Before consenting to perform euthanasia, refusing to perform euthanasia, or recommending euthanasia, veterinarians should consider using the decision-making tool in Appendix I.

B. Veterinarian Responsibilities to Client and Patient

1. Establish or Renew VCPR:

- a. All veterinary services (including euthanasia) must only be provided within a valid Veterinarian-Client-Patient Relationship (see the *Professional Practice Standard: Veterinarian-Client-Patient Relationship (VCPR)*)
- b. The first appointment for client-requested euthanasia, should be framed as a consultation or quality of life appointment:
 - obtain a history and understand why an owner or agent is requesting euthanasia (i.e. medical or behavioral problem or change in family circumstances).
 - examine the animal (unless recently done) or understand how the owner/agent manages a facility (e.g. shelter).
 - ensure that owners or agents understand the alternatives to euthanasia (i.e. medical treatment options, behavioral modification, rehoming, or referring to a rescue or shelter).

2. Client Communication

Proper informed consent includes explaining the procedure being recommended, so that the client understands what to expect during and after the act. Animal euthanasia can be a highly stressful and emotional event for the owner, making clear communication critical to avoid misunderstandings. Discussion points should include:

- a. to clearly communicate reasons for recommending euthanasia, with sensitivity and compassion, and to document their reasons in the medical record;
- b. The physical process of how the euthanasia will be performed and the possible physiologic responses of the animal (including occasional unusual reactions);
- c. The length of time the process will take;
- d. Possible after-effects/involuntary physical responses of the body; and
- e. Whether or not the client wishes to be present during the procedure.

3. Acquiring Informed Consent:

Veterinarians must ensure that they obtained informed consent of the owner or agent, and that this consent has been appropriately documented in the medical record. This discussion should not be delegated to staff, in order to avoid potential miscommunications.

The veterinarian should document efforts to determine that the client is, in fact, the owner or agent. Where the owner is unknown (e.g. new client) or when a previously unknown family member of the owner presents a pet for euthanasia, particularly if the animal appears well enough for other options, caution is in order.

- a. Preferably, animal owners/agents should sign a written consent form giving the veterinarian permission to perform euthanasia. See Appendix II for a sample form.

- b. If consent must be given verbally (via telephone or in person), it must be clearly documented in the medical record. It is wise to have another party witness and document a verbal consent for euthanasia.
- c. Animal owners or agents must be competent to provide informed consent, not under the influence of alcohol or other substances. The veterinarian must use his or her best judgment to evaluate the circumstances.

4. Provision of Contracted Services

A client's consent for euthanasia and disposal of remains is not a relinquishment of ownership. The veterinarian must provide the agreed-upon service. Keeping and treating the animal, rehoming the animal, or even performing a necropsy without the client's formal consent are not appropriate.

5. Delegation and Supervision

Veterinarians cannot delegate the acts of patient assessment, treatment decisions, prognosis or diagnosis. These limitations on delegation apply to the act of euthanasia as well.

- a. The veterinarian is ultimately responsible to both the client and the animal, even when delegating euthanasia to a non-veterinarian.
- b. Non-veterinarian staff may carry out euthanasia under the direct supervision of a veterinarian, if they are adequately trained.
- c. "Direct Supervision" means that the veterinarian is on-site and sufficiently nearby the non-veterinarian staff member(s) to consult with the staff and provide assistance if needed. The exemption to this is for animals used in research under the direction of the Canadian Council on Animal Care.
- d. An animal may not be left or moved until death is confirmed by the veterinarian.
- e. The confirmation of death is the veterinarian's responsibility.

C. Performing Euthanasia

The act of euthanasia may be accomplished via a number of humane and scientifically-accepted methods. The method chosen should always be rapid, minimize pain, and cause the least possible anxiety and distress to the animal and the client. The methods of euthanasia that fit these criteria will be species-specific. Veterinarians should refer to those guidelines published by the American Veterinary Medical Association (AVMA)¹ and the Canadian Council on Animal Care (CCAC)².

1. Euthanasia should take place as soon as possible after the animal has arrived on-site and consent has been obtained, to avoid unnecessary anxiety and distress for the patient. Where the animal is in discomfort or pain, euthanasia should be performed without delay.
2. Animal handling should be done in a manner to minimize pain, fear and anxiety. When possible, and where appropriate given the animal species, a sedative, tranquilizer or other pharmaceutical should be used to reduce anxiety and minimize handling.

¹ www.avma.org/kb/policies/documents/euthanasia

² <http://www.ccac.ca/Documents/Standards/Guidelines/Euthanasia.pdf>

3. The preferred method for most companion animal and equine euthanasia is intravenous barbiturate, administered alone or following sedation or general anesthesia, as described in the AVMA guidelines.
4. The animal must be assessed for sensibility immediately after application. If necessary, the euthanasia method must be re-applied, or an alternate method applied.
5. In some cases, it is recommended to apply a second method to ensure death prior to disposal of the animal. For example, captive bolt euthanasia of cattle should be followed by another physical form of euthanasia such as exsanguination.
6. A veterinarian must confirm death of the animal without delay and this must not be delegated to a non-registrant.

D. Medical Records

1. The patient's medical records must contain exam/assessment notes, the consent form or documented consent, details about methods of euthanasia, and client instructions for the disposal of the animal.
2. **Controlled Drugs:** Only licensed veterinarians are authorized to possess controlled substances used for euthanasia. Veterinarians must maintain a controlled drug dispensing log that accurately reflects the details of each administration/dispensing of a controlled drug to a specific patient.

E. Special Circumstances Surrounding Euthanasia

1. Animals in Critical Distress:
 - a. "Critical Distress" is defined in the *Prevention of Cruelty to Animals (PCA) Act* as "distress in an animal of such a nature that
 - a) Immediate veterinary treatment cannot prolong the animal's life, or
 - b) Prolonging the animal's life would result in the animal suffering unduly."
 - b. Licensed veterinarians have the authority to euthanize an animal that they deem to be in critical distress, whether owned or un-owned, without authorization from the owner of the BC SPCA.
 - c. When presented with an un-owned or stray, unknown animal in critical distress, veterinarians *may* contact the BC SPCA cruelty hotline (1-855-622-7722) for advice, but have no obligation to do so. If the animal is suffering with little or no chance of recovery, veterinarians should proceed with euthanasia.
 - d. When presented with an animal in critical distress and the owner of the animal is known, all reasonable efforts must be made to contact the owner. In the interim, veterinarians must provide necessary supportive care, including pain management and relief of anxiety. The animal owner must be given a reasonable amount of time to respond and, if the owner is not responding, then the veterinarian should proceed with euthanasia if warranted.

2. Owner Refusal to Authorize Euthanasia:

- a. If the owner or agent refuses to follow the veterinarian's advice to either euthanize or treat, and the owner/agent does not intend to seek veterinary care elsewhere, then the veterinarian may have a duty to report his or her concerns to the BC SPCA. The timing of reporting will depend on whether the animal is suffering. See Appendix V for the *PCA Act* excerpt, and the CVBC's *Position Statement: Duty to Report Animal Abuse or Neglect*.
- b. If the owner or agent refuses to follow the veterinarian's recommendation to euthanize, and public safety is at risk (e.g. dangerous dogs), the veterinarian must advise the clients of compliance with municipal dangerous dog legislation.

3. Veterinarian Refusal to Euthanize:

- a. Veterinarians must consider the consequences of refusing to euthanize an animal, particularly when an ill or injured animal is hospitalized and would require transfer for treatment or euthanasia.
- b. Veterinarians declining to perform euthanasia but agreeing to take control of the animal should seek written authorization from the owner/agent for relinquishment. See Appendix IV for a sample relinquishment form.
- c. Veterinarians refusing to perform euthanasia may refer the owner to another veterinarian whom they believe will likely proceed or otherwise assist. If the animal is unlikely to be seen by another veterinarian and may come to harm at the hands of the owner, the veterinarian must consider reporting his or her concerns to the BC SPCA.

4. Animals Dropped Off for Euthanasia Without Discussion:

Owners or agents should not be permitted to drop off an animal for euthanasia unless previously, recently arranged via a VCPR and informed consent.

5. Euthanasia in Shelter Settings:

Not all shelters and pounds have the same protocols in place as the BC SPCA. Veterinarians who are contracted to euthanize animals for a shelter must confirm that the shelter is authorized by the municipality to euthanize animals, to know the shelter's protocol, and confirm that the protocol is followed.

6. Wild Animals:

Veterinarians may occasionally be presented with injured or orphaned wild animals. Veterinarians are permitted to euthanize wild animals for humane reasons, but must check with the Ministry of Environment & Climate Change Strategy whether special considerations exist for some species, and whether the Ministry wishes to pursue treatment or may want to recover the animal remains. See Appendix VI for more information.

F. Practice Policies

Practices should have written protocols to assist veterinarians and veterinary staff, including the following procedures:

1. Documenting veterinarian-obtained consent, using a standard consent form template.
 - a) Only veterinarians can obtain owner consent to euthanize an animal, not technical staff and/or receptionists.
 - b) If a consent form is not signed, verbal consent must be documented in detail.
2. Handling animals in critical distress.
3. Handling critically-injured wildlife.
4. Defining staff responsibilities in each aspect of the euthanasia process.
5. Ensuring owner privacy, and to prepare owners for the process.
6. Disposing of animal remains and animals' possessions (e.g. collars, bedding, etc.).
7. Returning of ashes/remains where appropriate.
8. Herd/Flock/Pack health euthanasia policies.
9. Ensuring that animal owners/managers are able to evaluate the need for euthanasia and are aware of appropriate methods for euthanasia in that species.

G. Disposal of Remains

1. Disposal of animal remains must be done in accordance with local and provincial government regulation. Applicable provincial regulations are the *Environmental Management Act*³, the *Public Health Act*⁴ and the *Wildlife Act*⁵.
2. If the veterinarian disposes of the animal remains, he or she must follow the relevant provincial and municipal bylaws or other legal requirements.
3. Veterinarians may contract with private cremation businesses. The veterinarian must ensure the service provided is legitimate to avoid liability.
4. Veterinarians must be aware of municipal by-laws that will dictate whether burial or composting of animals is permitted by owners in the municipality where they live or where they plan to bury an animal. Owners must be informed of potential problems associated with burying animals euthanized by pharmaceutical agents (i.e. barbiturate poisoning of raptors and scavengers).

³ http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/03053_00

⁴ http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_08028_01

⁵ http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_96488_01

H. Euthanasia of Farm Animals

As with other species, the method of euthanasia must be humane and the basis for this would be the most recently published version of the AVMA Guidelines for the Euthanasia of Animals.

<https://www.avma.org/sites/default/files/2020-01/2020-Euthanasia-Final-1-17-20.pdf>

Veterinarians must be aware of the method of disposal of the animal after euthanasia to be able to recommend the appropriate method. The use of barbiturates in farm animals is rarely appropriate unless the animal is going for necropsy or incineration. Contamination of the environment through a carcass euthanized by barbiturates causing spill over to scavenging birds and mammals is illegal.

Guidelines for euthanasia are available for all farm animal species within the National Farm Animal Care Council (<https://www.nfacc.ca/>) Codes of Practice. These are directed to owners but mention licensed veterinarians within the requirements for euthanasia. All provinces in Canada, including BC require that those persons responsible for farm animals comply with the requirements of the Codes of Practice.

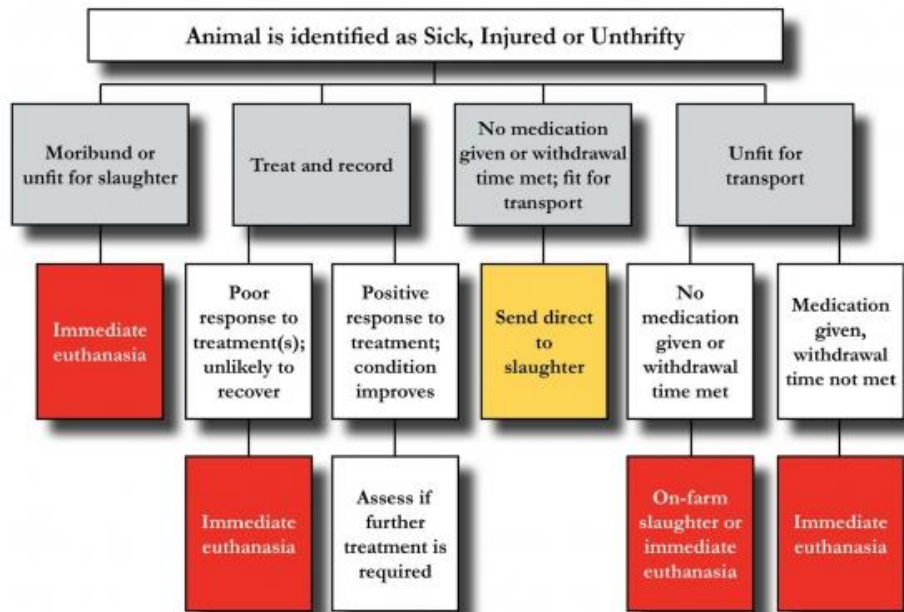
In most cases the euthanasia and culling of farm animals is done by the owner or a person delegated by the owner to be responsible for the animal. In most, but not all current Codes of Practice there is requirement like the following wording:

In consultation with a licensed veterinarian, an on-farm written euthanasia plan to facilitate timely on-farm euthanasia must be developed and followed.

The focus in most of the Codes of Practice is to insure an appropriate and timely euthanasia carried out by a trained individual according to a plan developed in conjunction with a licensed veterinarian to prevent or minimizes pain and distress. Euthanasia is considered necessary when an animal is not responding favorably to treatment and medical care to alleviate pain and suffering is not feasible or there is no reasonable prospect for recovery. Veterinarians must be prepared to support clients developing and reaching those end points through the development of farm-based plans. Veterinarians should be aware of the requirements for each species that must be supported based on the Codes in this area.



Sample Euthanasia Decision Tree



Examples of questions to guide decision-making on whether to treat or euthanize an animal:

- Will the animal endure a painful and lengthy recovery?
- Will the animal be likely to return to normal function post recovery?
- Can the required care be provided during the convalescence period?
- Is the animal likely to suffer chronic pain or immobility following recovery?
- Will weather extremes create inhumane conditions for the animal during and/or after recovery?

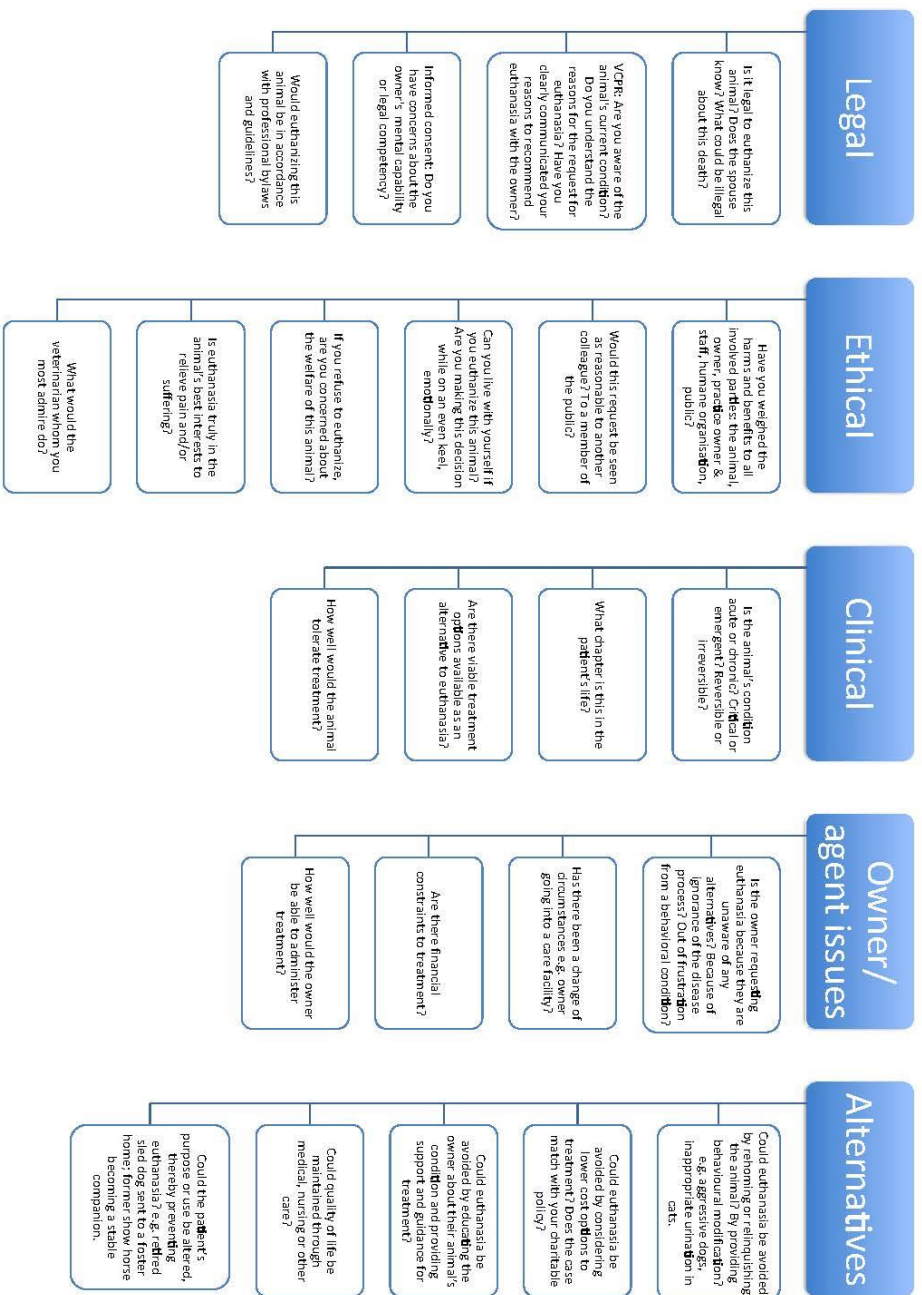
Previous Version

May 2015, September 2018

Appendices

- I. Euthanasia Decision Making Tool
- II. Euthanasia Consent Form
- III. BC SPCA Critical Distress Protocol
- IV. Relinquishment Consent Form
- V. Prevention of Cruelty to Animals Act Excerpt, and CVBC's Position Statement on Duty to Report Animal Abuse or Neglect
- VI. Euthanasia of Wild Animals

Elements of Euthanasia: Decision Making



Appendix II: Euthanasia Consent Sample Form

(Veterinary Hospital Name and Address)

Authorization for Euthanasia and/or Care of Remains

Owner/Agent Name:	Address:
Telephone:	E-mail:
Patient Name:	
Species:	Sex:
Breed:	DOB:

I am the owner, or duly authorized agent, for the above-mentioned animal.

I hereby authorize an agent of the VETERINARY HOSPITAL NAME to euthanize the above patient, forever releasing the VETERINARY HOSPITAL NAME and its staff from any and all liability for performing said euthanasia.

I also hereby grant the release of my pet to the PET CREMATORIUM NAME. I have read the options below and agree with its terms of service. My signature below authorizes ANIMAL HOSPITAL NAME and the PET CREMATORIUM NAME to carry out my cremation wishes. I further agree that I will indemnify and hold harmless the ANIMAL HOSPITAL NAME and the PET CREMATORIUM NAME, their officers and employees from any and all liability, cost, expenses or claims resulting from this authorization and subsequent disposition.

Please indicate your decision for care of remains by initialing below:

- Private Cremation: I understand that my pet will be cremated privately. (Ashes will be returned to the hospital in X-X days for pickup by owner). I understand that due to the nature of the cremation process, any valuable material will either be destroyed or not recovered.
- Communal Cremation: I understand that my pet will become part of a group cremation and that these remains cannot be returned to me (i.e. no ashes are returned). I understand that due to the nature of the cremation process, any valuable material will either be destroyed or not recovered.
- Return remains for personal disposition/burial.
- Please hold remains pending a decision. If I have not informed ANIMAL HOSPITAL NAME of our decision within X days, I authorize communal cremation and I am responsible for payment of this service.

Name (please print):	Signature:
Date:	
Witness Name (please print):	Witness Signature:

Learning the cause of death of your pet can be of great help in relieving the suffering of other pets, as well as contributing to our understanding of health and disease. Please consult the staff for more information on post-mortem examinations (autopsy).

Appendix III: BC SPCA Critical Distress Protocol

BCSPCA CRITICAL DISTRESS ASSESSMENT FORM

(for the purpose of carrying out the provisions of section 12 of the *Prevention of Cruelty to Animals Act*)

Animal Identification

Species: _____ Breed _____ Tattoo/ID: _____ Owner: _____

Sex: _____ Colour: _____ App. Age: _____ App. Weight: _____

Location where animal found or apprehended: _____

_____ Date/Time of exam: _____

Clinical Findings

T: _____ HR: _____ P: _____ RR: _____ CRT: _____ MM Colour: _____

Level of Consciousness: (see scale on reverse) _____

Level of suffering: (see scale on reverse) _____ Other Stress Factors: _____

Systems (describe physical findings/observation)

	Abnormal	Normal	Not Examined		Abnormal	Normal	Not Examined
[1] Neural	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[2] Respiratory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[3] Cardiovascular	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[4] GIT/Abdominal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[5] Genitourinary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[6] Skeletal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[7] Skin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[8] Eyes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[9] Others (specify)							

Recommendation: _____

Date/Time Recommendation given: _____ FAX / PHONE

Veterinarian: _____ Special Constable: _____ Witness: _____

Critical Decision Protocol

- 1) Is the animal suffering? (> or = 2 on the suffering scale)
Yes - go to 2 No - go to 6
- 2) Is treatment to reduce suffering to level 1 or below available and practical?
Yes - go to 3 No - go to 5
- 3) What is the prognosis for survival?
Good/fair (>25%) - go to 4 Poor (<25%) - go to 7
- 4) Will there be further exposure to suffering (as defined in 1) in the short term?
Yes - go to 5 No - go to 6
- 5) Is the suffering assessed to be Level 3?
Yes - go to 7 No - go to 6
- 6) Treat to relieve suffering if necessary and practical - **Euthanasia not recommended**
- 7) Treat to relieve suffering if available and practical - **Recommend Euthanasia**

Suffering Scale: (Levels 0 to 3)

0 Not suffering:

No apparent painful responses observed. Animal is acting within normally expected behavioural limits considering the species and situation. Physiologic data are normal, i.e. no evidence of tachycardia or tachypnea, pupil dilation, hyperthermia and other physical/physiological parameter that could not be attributed to the current environment.

1 Mild suffering:

Animal may show pain response by guarding an affected region, showing a mild limp or resisting palpation; very mild or no depression but will continue to pursue normal behaviour for the situation it is in; may show interest in eating and playing; may have mild tachycardia and tachypnea and, pupil dilation only observed when the painful focus is approached.

2 Moderate suffering:

Animal vocalizing discomfort (with or without contact); cannot settle easily, is restless or assumes an abnormal posture; avoid contact or aggressively resents contact with caregiver; cannot weight bear on affected area; severely guards or exhibits obvious pain response when affected area is palpated; tachypnea and tachycardia readily observable; and, pupil may be dilated upon being handled.

3 Severe suffering:

Animal is depressed and does not care about its surroundings or is exhibiting extreme flight response despite obvious severe injuries; unable to settle or is semi-comatose; exaggerated vocalizing constantly or intermittently without any provocation, not interested in the environment or interacting with caregiver or exhibits extreme avoidance response; void without attempting to move; Tachypnea and possibly dyspnea, tachycardia, pupil dilation, trembling or shivering; sweating in equine species; and, hyperesthesia and/or hyperalgesia, hyperthermia relating to tissue damage.

Consciousness Scale:

- A** Alert and responsive, interested in the environment.
- D** Depressed, not interested in the environment but readily respond to stimuli.
- S** Semi-comatose. Shows awareness to stimuli with no responses or weak responses.
- C** Comatose. No voluntary or involuntary responses to stimuli

Appendix IV: Relinquishment Consent Sample Form

(Veterinary Hospital Name and Address)

Authorization to Surrender Animal

	Person ID:
	Receipt:
	Receipt Date:
Agent/Owner Details	
Person Name:	
Person Address:	
Home Phone:	
Identification Type:	

Animal Detail						
Animal ID	Type	Breed	Mixed	Colour (1)	Colour (2)	Gender

I, the undersigned, being the owner, or having control of the animal described within and assuming all responsibility and releasing the VETERINARY HOSPITAL NAME of all risk and damage which may arise from whatever cause, do hereby surrender the said animal to the VETERINARY HOSPITAL NAME and its representatives. I also hereby agree to indemnify and save the VETERINARY HOSPITAL NAME harmless from all claims, actions or demands which may be made against it by anyone claiming to be the owner of said animal or otherwise. Persons surrendering the animal(s) are advised ownership is transferred to the VETERINARY HOSPITAL NAME and no information regarding animals will be released to previous owners.

Owner/Agent (Print Name):
Date:
Signature:
Witness Name (Print Name):
Witness Signature:

Appendix V: Provincial Cruelty to Animals Act Excerpt

(RSBC 1996) CHAPTER 372 Current to December 20, 2017

Relieving Critical Distress in Animals

- 12 (1) In this section, “**critical distress**” means distress in an animal of such a nature that
- (a) immediate veterinary treatment cannot prolong the animal’s life, or
 - (b) prolonging the animal’s life would result in the animal suffering unduly.
- (2) If, in the opinion of
- (a) a registered veterinarian, or
 - (b) an authorized agent, if a registered veterinarian is not readily available,
- an animal is in critical distress, the authorized agent may destroy the animal or have the animal destroyed.

Duty to Report Distress

- 22.1 A registered veterinarian who believes on reasonable grounds that a person responsible for an animal is, or is likely, causing or permitting the animal to be in distress in contravention of this Act must promptly report, to the best of the registered veterinarian’s knowledge and belief, all of the following information to an authorized agent:
- (a) the reason for believing that an animal is in distress;
 - (b) sufficient information to contact the person responsible for the animal, including the person’s name and address;
 - (c) sufficient information to identify the animal.

Immunity for Persons Who Report

- 25.2 (1) Subject to subsection (2), no legal proceeding for damages lies or may be commenced or maintained against a registered veterinarian because of anything done or omitted
- (a) in relation to the destruction of an animal under section 12(2), or
 - (b) in the making of a report as required under section 22.1.
- (2) Subsection (1) does not apply to a registered veterinarian in relation to anything done or omitted in bad faith.



College of Veterinarians of British Columbia

Position Statement: Duty to Report Animal Abuse or Neglect

Published October 2017 (Revised December 2017)

The welfare of animals is a veterinarian's primary concern. If animals are not brought to veterinarians for assessment and treatment, then veterinarians cannot fulfill their part in promoting animal welfare.

Veterinarians are required to report animal abuse, cruelty and distress. Certain circumstances give rise to the duty to report. These circumstances are dictated not only by the PCAA, the *Veterinarians Act* and the CVBC Bylaws, but also by measured analysis and professional judgment. It is the role of the CVBC to provide guidance, to promote public confidence that veterinarians are qualified to provide medical assistance and to assess the necessity of reporting.

Some clients may refuse reasonable recommendations for treatment. If the veterinarian believes the refusal may lead to animal distress, the veterinarian should encourage the client to seek a second opinion, take time to absorb the advice, or to explore humane alternatives. PCAA reports are not required where clients seek unnecessary cosmetic alterations. They may be informed that they are in the wrong jurisdiction for those services.

The relationship of trust between a veterinarian and a client is important to the welfare of the animal and the client's other or future animals. When exercising judgment about reasonable grounds to make a report, the veterinarian must assess the information for clarity or ambiguity.

Factors to consider include:

- a new or ongoing veterinary client patient relationship
- severity of injury,
- origin of the animal's condition,
- remorse and willingness to agree to treatment.

Each scenario requires objectively assessing the available information. Making or threatening a report based on unreliable information can lead to negative outcomes for the injured animal. A PCAA report may be devastating to all involved, the client, the veterinarian, and their respective families and animals.

The authority to authorize and initiate prosecutions for animal abuse or cruelty rests solely with the Ministry of the Attorney General. Not all PCAA reports result in prosecutions. In BC, there is a defense for a PCAA report made in good faith but there is no immunity from civil litigation.

Veterinarians who report risk the possibility of litigation, regulatory complaint investigations, negative publicity and other adverse results.

Different considerations may apply for veterinarians in public practice, where a vast number of animals and consumers are potentially affected.

Animal welfare is a top priority to the veterinary community. Usually the most effective method available to veterinarians for preventing or arresting distress is to treat their patients and educate their clients. Without clear evidence of current or imminent animal distress requiring a PCAA report, it is best to proceed with reason and caution. This approach does not preclude a report after the veterinarian has sought advice, or where changes in the situation or information warrant it.

Veterinarians may contact the CVBC or seek independent legal advice.

Legislative Authority

Veterinarians Act

Protection of Cruelty to Animals Act

Criminal Code of Canada

Protection of Personal Information Act

CVBC Bylaws

Appendix VI: Euthanasia of Wild Animals

Ministry of the Environment - Wild Animal Euthanasia by Veterinarians:

Veterinarians may be requested to examine, treat and/or euthanize injured, sick or orphaned wild animals native to British Columbia (BC). Wild animals may be presented by government staff (biologists or Conservation Officers), wildlife rehabilitation facilities, municipal animal control or animal welfare organizations as well as the public. In some cases the treatment of traumatic injuries or other conditions can be initiated and the animals transferred as soon as possible to a permitted wildlife rehabilitator for long term care. However, there are limitations to what is possible, practical and humane for wild animal care due to their often limited ability to tolerate the stresses of capture, treatment and captivity. For some wild animals immediate euthanasia is not only the most humane option but the safest procedure for animal and humans. Under the BC Wildlife Act, any possession of any wildlife species requires a permit. However for situations that involve the emergency treatment or euthanasia of wild animals, BC wildlife management authorities (BC Ministries of Environment (MOE) and Forests, Lands and Natural Resources Operations (FLNRO)) recognize and respect the professional judgment of veterinarians and are highly appreciative of the veterinary community, their interest, compassion and cooperation in caring for BC's wildlife. Since there is no current mechanism for emergency access to wildlife permits, the Province will not be requiring permits for this purpose at this time. Veterinarians are requested to apply their professional judgment for short-term emergency treatment, or euthanasia, on wild animals. However, veterinarians are requested to keep records with the following data on site for all wild animals treated and held short term or euthanized:

- Species
- Age estimate (juvenile, adult)
- Sex, if obvious
- Condition (e.g. wing fracture, head trauma, respiratory distress)
- Animal fate (e.g. treated and transferred immediately to wildlife rehabilitator; treated, held 24-72 hours and transferred to wildlife rehabilitator; euthanized)

The appropriate method of euthanasia varies with the species; guidelines specific for species groups can be referred to online or contact the Provincial Wildlife Veterinarian for details.

If the species is considered a species “of concern” or “at risk” wildlife managers ask that the appropriate regional office is notified of the wild animal and its condition as soon as possible. For most species their identification and conservation status can be assessed at the following website <http://www.env.gov.bc.ca/atrisk/toolintro.html>. For example, if a veterinarian on Vancouver Island is presented with a live or dead Vancouver Island marmot (a species at risk) they should immediately contact the FLNRO regional office in Nanaimo at 250 751-3100. Some species are extremely common, such as robins or crows, or are non-native such as starlings or Eastern grey squirrels. These species are not considered of conservation priority and do not require any notification.

Unusual or unexpected illnesses or mortalities are of interest to the BC Wildlife Health Program and collaborators for human, wild and domestic animal disease surveillance. Selected wild animal cases may be submitted to the Ministry of Agriculture Animal Health Centre and other laboratories when necessary for diagnostic testing, but require prior approval by the Provincial Wildlife Veterinarian. See the Wildlife Health Program website for further information on wildlife health and how to contact the Provincial Wildlife Veterinarian at <http://www.env.gov.bc.ca/wld/wldhealth/>.

Euthanized wild animals should be frozen and held for short periods of time but cannot be kept long term without a permit. Possession permits maybe available for some species, see: <http://www.env.gov.bc.ca/pasb/applications/#wildlifeact>. Some species have significant value for routine health testing or are required for other scientific, research or cultural (First Nation) values. These carcasses will be picked up by regional wildlife managers. For example, bald and golden eagle carcasses are used by many First Nations communities for ceremonial purposes and are distributed by regional offices. For these two species, please notify the local FLNRO regional office when carcasses are available.

If there are any further questions regarding specific wildlife species and their disposition please contact a regional FLNRO office.

For regional office contacts – see <http://www.env.gov.bc.ca/main/regions.html> and <http://www.env.gov.bc.ca/fw/offices.html>

To contact the Provincial Wildlife Veterinarian or the Wildlife Health Program – see <http://www.env.gov.bc.ca/wld/wldhealth/>.