



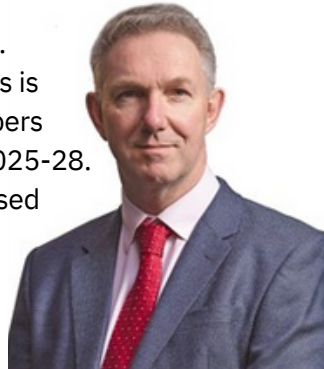
PRESIDENT'S MESSAGE

Welcome to your newsletter.

The year is well underway, as is recruitment for Board members and approved persons for 2025-28.

Thank you to all who expressed interest in these positions.

Minister Ros Spence is expected to make her recommendations to



Governor-in-Council in the next 6-8 weeks, and the 10th Veterinary Board will be announced in June.

In the meantime, we invite Victorian vets to a webinar on **Tuesday, 11 March (7-8PM)**. At this online session, we will provide an update on the Board's work since we held workshops with the profession in September 2023. Register here: [Vetboard Victoria Update](#).

You are also invited to participate in Agriculture Victoria's consultation on two proposed changes to biosecurity legislation (see page 6). The closure date is **Friday, 28 February**.

In this issue, we present a summary of complaints in the October to December 2024 quarter. Board guidance arising from complaints considered recently includes: an item on cross-cultural communication; what to consider before discussing cases with peers on social media; equine veterinary medical records; and more on snake bite cases.

Following consultation, Victoria's first state-wide 10-year cat management strategy was launched in January 2025.

You may have seen recent news on avian influenza outbreaks in regional Victoria near Euroa. Please read Agriculture Victoria's alerts and updates on emergency animal diseases in this newsletter and [online to keep up to date](#) with developments in this potentially fast-moving situation.

Dr John Harte
President

REGISTER FOR BOARD WEBINAR

Subject: Update on Board work, Q&A

Time & Date: 7pm, Tuesday 11 March 2025

Venue: Zoom meeting

Register here: [Vetboard Victoria Update](#)

Log on and learn what's happened since we consulted you in September 2023.

We'll cover what we heard from Victorian vets and others and what we've committed to doing via our strategic plan. You'll also be able to ask questions.

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COMPLAINTS OVERVIEW DECEMBER 2024 QUARTER

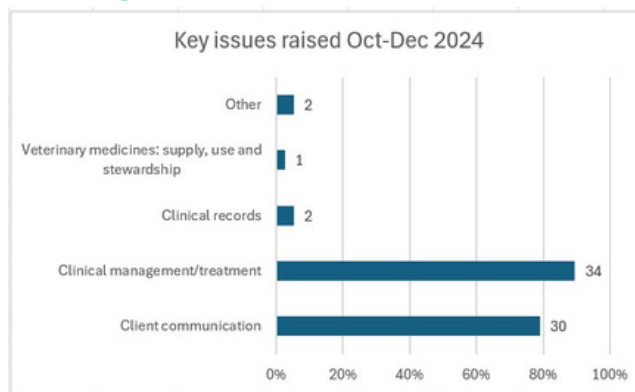
In the period October to December 2024, the Board received 60 preliminary enquiries about the conduct of veterinary practitioners.

In the same period, 38 written complaints were submitted to and considered by the Board. The main issues raised in these complaints were clinical management of the animal (89%), client communication (79%), and veterinary medical records (2%). Other issues raised included supervision of a veterinary practitioner and veterinary medicines.

After assessing these 38 complaints, the Board determined that:

- 23 complaints were lacking in substance and should not proceed further
- 15 complaints were to be investigated
- 2 additional vets involved with 2 of the complaints would be subject to investigation.

During the reporting period, 29 investigations of complaints received in previous periods were finalised. Of these, 10 were finalised with no further action; 12 were finalised with an educative letter; and 3 were finalised with an undertaking. One was referred to a formal hearing and 3 were referred to an informal hearing.



The breakdown of issues raised in this quarter was very similar to the breakdown last quarter.



Compared with last quarter, fewer complaints were delegated for preliminary investigation this reporting period.

CROSS-CULTURAL COMMUNICATION WITH CLIENTS

The Board has recently considered multiple complaints in which a complicating factor was English not being the client's primary spoken language. Our investigations indicated that the client may not have understood the options presented by their veterinary practitioner well enough to be able to give informed consent to treatment or understand care instructions.

Victorians speak over 290 languages and dialects - 27% of us speak a language other than English at home ([VicHealth](#)). The [ABS reports](#) up to 3.4% of Australians do not speak English well or at all.

With Australians having one of the highest rates of pet ownership in the world, along with our increasingly diverse backgrounds, it is also likely your clients will have attitudes, beliefs, values and behaviours which differ from yours.

There is a diversity of 'cultural norms around animals, and animal use, as a source of companionship, food, entertainment and/or religious/cultural significance'.

Professor Jaime Gongora of Sydney University observes, 'Cultural perspectives on animals and differences in communication, consultation and engagement protocols can influence relationships, impacting animal health [and] welfare...'

Something that may be obvious to you may not be something your client would think about. Clients have different ways of showing agreement. People express grief and other emotions differently. They may have different perceptions and understandings of care, euthanasia, de-sexing and other veterinary procedures.

Continued next page .../

CROSS-CULTURAL COMMUNICATION WITH CLIENTS continued

Making efforts to consider cultural and linguistic differences can help you to communicate effectively and build trust in your relationships with your clients. Where there is trust, a client may make greater efforts to understand and follow care instructions - enhancing animal health outcomes. While initially taking more time, investing in communicating effectively may reduce complaints to your practice and the Board arising from miscommunication, and ultimately generally enhance the reputation of your practice.

Here are some suggestions to effectively communicate with culturally and linguistically different clients:

- Think about this particular client and what will help you to communicate information to them: what language do they speak at home and what is their cultural background? Are you going to be discussing complex issues with them or any veterinary procedures that may raise ethical concerns? Can the client bring someone with them who understands English better? Would using a translation technology help, bearing in mind that these may help you to translate words but not technical or cultural concepts? Will you need a longer consultation time?
- Demonstrate sensitivity and empathy and be non-judgemental.
- Avoid making assumptions, but focus on gaining an understanding and then to be understood.
- Be straightforward and clear but cover everything necessary. Consider non-verbal cues and the use of demonstrations to assist in understanding.
- Pause frequently and sense check: allow space for questions and answers and clarification. Get the client to repeat back to you what you said if necessary to check understanding.
- Supplement verbal explanations with written or visual information. Written care instructions, cost estimates for procedures and instructions for multiple medications may all help the owner to understand clearly. Consider getting commonly shared information professionally translated into other languages widely spoken in your area.

- It may help to delay the signing of consent information to give a client plenty of time to read and think about what they are being asked to sign and ask any questions before signing.
- Consider seeking assistance from those who speak languages commonly spoken in your practice's area and share clients' cultural backgrounds.
- Encourage your staff to explore the demographic make-up of their local area, undertake cultural competence training and consider ways to create inclusive experiences for veterinary clients.
- Get involved in Cultural Diversity Week events occurring across Victoria from 17-23 March 2025 (or host an event), and/or complete the [Workplace Cultural Diversity Tool](#) with your team. [Cultural Diversity Week: 17 - 23 March 2025 | multiculturalcommission.vic.gov.au](#)

MORE INFORMATION

- [Board Guideline - Behaviours and principles of professional conduct: 3.1](#) - A veterinary practitioner has due regard for the welfare, beliefs, perceptions, customs and cultural heritage of animal owners, veterinary team members and professional peers.
- [Board Guideline 4 – Communication between veterinary practitioner and owner or professional peers: 4.4](#) - A veterinary practitioner takes reasonable steps to ensure communication about the provision of veterinary services is clear, and understood by the owner and other individuals involved in the care of the animal.
- AVBC competency 25 - Communicate effectively with clients ... using language appropriate to the audience and context.
- [Cultural competence is everyone's business: Embedding cultural competence in curriculum frameworks to advance veterinary education](#), Gongora et al, Journal of Veterinary Medical Education (JVME), Vol.50 No.1 2022

Improving our cultural competence

The Board's communication plans include reviewing our website and processes to increase our accessibility to diverse public and veterinary communities.

PEER DISCUSSION OF CASES ON SOCIAL MEDIA

Having seen a few recent case discussions on social media, the Board provides some guidance on this topic.

While the Board recognises the value in veterinary practitioners using social media to engage and share experiences with other veterinary practitioners (particularly for rural practitioners), you should exercise great care when discussing a case with peers on social media.

You are responsible for delivering veterinary services to an animal under your care and the exercise of your professional judgement in relation to its treatment. You cannot make a professional diagnostic or treatment decision solely based on peer discussion. Your decisions must be based on all the information available to you including examination of the animal, the animal's full clinical history (or as much as obtained from the owner and/or recorded in the veterinary medical record), any diagnostics and additional research.

At the same time, you are expected to 'recognise the limitations of [your] knowledge, skills and resources, consult with colleagues as needed, and identify situations in which referral is warranted' (AVBC Day One Competency #34), so there will be times when you may need to engage with professional peers to supplement your clinical decision-making.

Points to remember before supplementing the information you have with any discussion with peers, especially on social media, are:

- The veterinary practitioner-owner-relationship involves you. The animal is under your care, and you will likely not be able to share all the information you have access to on social media for privacy and confidentiality reasons (see discussion and references in the next column).
- Be professional in your interactions. While social media interactions are often more casual, you are expected to adhere to the behaviours and principles of professional conduct in the Board's guidelines.
- Participants in the discussion will have varying experience, biases and, potentially, conflicts of interest.

- Some peer groups may be more knowledgeable and experienced than others, e.g. an AVA special interest group or ANZCVS chapter on Facebook.
- Consultation with peers online is not the same as a professional referral to another veterinary practitioner or veterinary specialist. Consider if referral is a more appropriate way to assist with clinical management of your patient.
- You may not be able to control or moderate who sees your discussion. Even discussions restricted to peer groups may potentially be accessed by members of the public.

Importantly, there are confidentiality and privacy considerations to consider before you disclose and discuss information about a client and/or their animal. You should not disclose information which could lead to a client being identified on social media (even in a closed peer group) unless they give their explicit consent for you to do so.

Keep in mind that even if you think you have de-identified information, it may be possible to identify an animal's owner if you are known to work in a specific location, if a discussion is on a local Facebook group page or where information from other sources may be collated.

MORE INFORMATION

The following information may help you to generally consider privacy and other issues relating to social media (noting that some are from different jurisdictions and sectors):

- [Social media, online networking and public life - RCVS](#)
- Human medicine - [Social media guidance \(AHPRA\)](#) and [Guide to social media and medical professionalism \(AMA\)](#)

Relevant guidance:

- [Board Guideline - Expected behaviours and principles of professional conduct](#)
- [Guideline 4 - Communication between veterinary practitioner and owner or professional peers](#)
- [Guideline 16 – Referrals between veterinary practitioners](#)
- [Day One Competencies - AVBC](#)

EQUINE VETERINARY MEDICAL RECORDS

The Board has noted recent complaints about veterinary practitioners who practise in equine veterinary medicine or surgery where the relevant veterinary medical records fell short of the required standards.

Board [Guideline 7 – Veterinary medical records](#) outlines specific requirements on the timeliness of making records and the content of a record. These requirements apply to all practices including ambulatory (mobile), off-site practice and practising in a clinic or hospital premises.

Complete and legible records of consultations, decision-making, services delivered and veterinary medicines prescribed and supplied are important wherever a veterinary service may be delivered.

The Australasian Veterinary Boards Council's (AVBC's) Day One Competencies require veterinary practitioners to maintain accurate, consistent, and contemporaneous records in a clinic database, which allows for case transfer and protects client privacy. The AVBC's guidance for new graduates on this competency is that 'patient records should be sufficiently clear that they can be referred to by others and (if written by hand) be legible. Professional terminology should be used, avoiding idiosyncratic abbreviations or jargon'.

Further, the code of conduct in Australian Veterinary Association's policy [Provision of optimum veterinary services to the horse racing industry](#) says, 'Veterinarians involved in the horse racing industry...should keep detailed, professional, objective and timely clinical records of all examinations, advice and treatments.'

The Board recognises that vets are not sitting in front of a computer when they are out in the field, but increasingly there are ways to easily record the results of examinations, discussions and treatment in the field. For example, it is possible to make voice notes using a mobile phone, then later complete a record based on those notes.

Your documentation should show how you exercised your professional judgement when conducting an examination and interpreting results in the field.

Clear and accurate veterinary medical records are essential for the continuing good care of an animal and keeping the public safe.

The test of a good record is if any other practitioner could take on the treatment of an animal with a complete understanding of your inquiries, decisions made and the services and medications provided. In the case of a complaint, the Board wants to understand your approach and why you made your clinical decisions. Contemporaneous medical records are the first step in providing that context and gaining that understanding.

MORE INFORMATION

- [Guideline 7 – Veterinary medical records](#)
- 'Veterinary medical records guidance', page 4, [Vetboard Victoria newsletter, August 2024](#)
- [Provision of optimum veterinary services to the horse racing industry](#) – Australian Veterinary Association
- [Day One Competencies](#) - AVBC

SNAKE BITE CONCERNS

Since publishing the alert about snake bite cases in our [December 2024 newsletter](#), the Board has received several preliminary queries about animals who either died or required an extensive and expensive stay in hospital after being bitten by a snake.

Animal owners who contacted the Board alleged that a snake bite diagnosis was considerably delayed or not made at all by a vet initially due to:

- non-veterinary staff undertaking triage
- vets/clinic staff not considering neurological and other symptoms as possible symptoms of snake bite
- vets not ordering or undertaking tests.

The Board again reminds vets of the importance of rapidly diagnosing snake bite and ensuring appropriate clinical management of animals in such cases. We recommend you: know your local conditions; focus on the patient and look for signs of envenomation; communicate clearly and appropriately with clients; and be ready to provide care or refer a patient.

HAVE YOUR SAY: STRENGTHENING VICTORIA'S BIOSECURITY LAWS

Biosecurity is everyone's responsibility. Whether you're a veterinarian, livestock owner, farmer, or part of the broader community, your actions help protect Victoria from pests and diseases. Simple steps - like following farm biosecurity plans, respecting signage, and keeping property records up to date - make a real difference.

Agriculture Victoria is strengthening biosecurity protections and wants your input on 2 key legislative reform proposals currently open for feedback through Engage Victoria:

1. Introducing a General Biosecurity Duty

This proposal establishes a shared responsibility framework, requiring everyone to identify and manage biosecurity risks within their activities.

Rather than a one-size-fits-all approach, it would empower individuals, businesses, and government to take practical, proportionate steps to prevent and respond to biosecurity threats.

2. Improving Livestock Property Identification Code (PIC) Data

Accurate and up-to-date PIC information is essential for tracking livestock, responding to disease outbreaks like avian influenza, and managing natural disasters such as bushfires and floods.

Proposed changes would require mandatory updates to PIC records, ensuring better data quality and stronger emergency preparedness for all livestock owners, including mixed-species and small-scale producers.

These reforms are a critical step forward in protecting Victoria's agriculture and environment. Now is the time to have your say and help shape the future of biosecurity in Victoria.

Submissions close 11:59pm, Friday 28 February 2025.

HAVE YOUR SAY ON BIOSECURITY AT ENGAGE VICTORIA BY 28 FEBRUARY:

<https://engage.vic.gov.au/strengthening-biosecurity-legislation>

Your voice matters - let's work together to build a stronger, more resilient biosecurity system for Victoria.

VICTORIA'S FIRST STATEWIDE CAT MANAGEMENT STRATEGY

In January 2025, the Victorian Government released its first statewide Cat Management Strategy, a comprehensive 10-year plan designed to enhance cat management across the state.

The strategy aims to improve the wellbeing of domestic cats while also protecting Victoria's unique wildlife. While cats are valued companion animals, the strategy also addresses the challenges posed by growing cat populations, such as their impact on wildlife and the increasing strain on councils and animal shelters.

Developed through extensive research, expert advice, and consultation with a broad range of stakeholders, including vets, councils, animal welfare organisations, and cat owners, the strategy outlines 7 key themes and 24 actions.

The 7 themes outlined in the strategy are:

1. Promoting cat welfare and responsible cat ownership
2. Increasing desexing rates
3. Expanding cat containment
4. Reducing the impacts of semi-owned and unowned cats
5. Managing feral cat populations
6. Improving collaboration and information sharing
7. Strengthening laws and processes.

The strategy emphasises a shared responsibility for cat management among all levels of government, community members, and relevant organisations. It seeks to foster a culture of responsible cat ownership that safeguards both animal welfare and the environment.

Animal Welfare Victoria thanks all the veterinarians who shared their invaluable feedback during the strategy's development. Your expertise and insights were instrumental in shaping the final strategy.

For more details and to read the full 10-year strategy, visit: [Victorian Cat Management Strategy](#).

UPDATES FROM DEPARTMENT OF ENERGY, ENVIRONMENT & CLIMATE CHANGE (AGRICULTURE VICTORIA, ANIMAL WELFARE VICTORIA, WILDLIFE)

BIOSECURITY ALERT: CONFIRMED HPAI H7 IN VICTORIAN POULTRY FARMS IN 2025

High pathogenicity avian influenza (HPAI) H7N8 virus was confirmed as the cause of death of layer hens on a free-range commercial poultry property near Euroa on 8 February 2025. Another closely located farm within the same enterprise was confirmed as infected with HPAI H7N8 on 13 February 2025. [Vetboard note: infections detected at a third property were reported in an Agriculture Victoria media release on 20 February.]

The affected farms have been quarantined, and movement controls are in place in surrounding areas to prohibit the movement of poultry and birds as well as poultry products and fomites to minimise the risk of disease spread. Stamping out the disease on these properties has commenced, with destruction and disposal work completed on the first farm. Poultry, other domestic birds and wild birds in the area will be closely monitored for any additional cases.

A housing requirement has been introduced for bird owners with 50 birds or more in the restricted area to confine birds to prevent contact between wild birds and poultry.

The business acted quickly to identify infection within the flock and put in place a voluntary quarantine before the confirmatory diagnosis. It is now working closely with Agriculture Victoria officers to contain the outbreak.

This incident highlights the importance of early reporting and the need to consider HPAI as a

differential diagnosis whenever sudden onset and progression of illness with respiratory signs, or sudden death, occurs in a flock or group of birds.

Avian influenza is a notifiable disease, and any suspect or confirmed cases must be reported to Agriculture Victoria on the all-hours Emergency Animal Disease hotline 1800 675 888.

More information

- [Avian influenza \(bird flu\) factsheet](#) - AgVic
- [Current situation – HPAI Victoria](#) - AgVic
- Public health: [Avian influenza \(bird flu\)](#) - Victorian Department of Health

WILDLIFE DISEASE REPORTING

DEECA has introduced a new online form for reporting sick or dead wild birds and other wildlife species to help monitor new avian influenza strains. This augments avian influenza surveillance in light of H5N1.

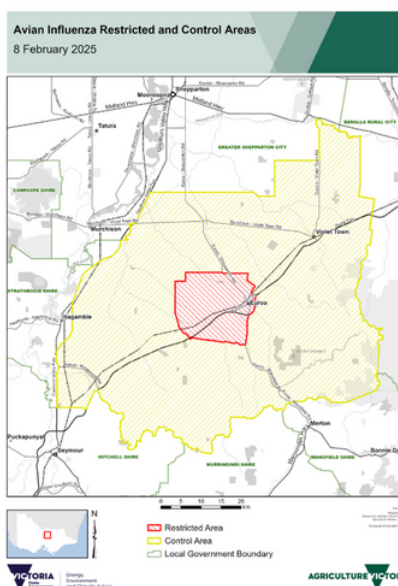
If you or members of the public find sick or dead wild birds or wildlife with signs of avian influenza, then:

- AVOID contact with sick or dead wild birds or wildlife and their environment
- RECORD what you see, include photos where possible
- REPORT to DEECA using this form or calling 131 186.

Quick guide when to report sick or dead wild birds and other wildlife:

- clusters of 5 or more sick or dead wild birds of any species, anywhere in Victoria
- sick or dead penguin or pelican
- sick or dead bird of prey, such as hawks, owls, eagles
- sick or dead black swan, or
- sick or dead marine mammal, such as seals, sea lions or dolphins.

Other animals: to report sick or dead livestock, commercial poultry or pets, please call the Emergency Animal Disease Hotline immediately on 1800 675 888.



EMERGENCY ANIMAL DISEASE PREPAREDNESS PROGRAM UPDATE

Agriculture Victoria established its Emergency Animal Disease (EAD) Preparedness Program in 2022 in response to the heightened risk of an EAD outbreak in Australia. The initial goal of this project was to boost Victoria's capability and capacity to detect, diagnose, respond and recover from EADs such as foot-mouth-disease (FMD) and lumpy skin disease due to the increased risk of an incursion of those diseases into Australia. The EAD Preparedness Program now has an increased focus to prepare for a high pathogenicity avian influenza (HPAI) strain H5N1 outbreak - currently Victoria's highest risk EAD.

HPAI H5N1 has been spreading globally since 2021. It was discovered in Antarctica in February 2024 leaving Oceania as the only unaffected region. Outbreaks of H5N1 overseas have led to extensive losses of poultry, wild birds, seals, sealions and some terrestrial mammal species, including pigs, goats and dairy cattle in the United States. To ensure Victoria is suitably prepared to lead an effective, coordinated and appropriate response, extensive work is underway across the Department of Energy, Environment and Climate Action (DEECA) as well as all levels of government.

Given the significant impacts an outbreak of H5N1 could have on wildlife, there is a focus on how Victoria will respond to an outbreak in wildlife.

Some of the work completed so far includes the development of policies and procedures to identifying high risk wildlife species and locations and possible interventions and response options to these including the conditions for volunteer deployment, policies on the management of sick wildlife, and approaches to public land access during a response.

Recognising this growing threat, the Australian government is investing more than \$100 million into enhancing national preparedness and response capability. This funding will strengthen surveillance, preparedness and response capability and mitigate the impacts of a potential H5 bird flu outbreak on Australian agriculture, environment and human health.

\$12 million of these funds have been allocated to state and territory jurisdictions to purchase specialist equipment to improve surveillance, detection, diagnosis and response in the event of a HPAI outbreak. Victoria has \$1.74 million of this amount to increase its capacity in these areas. Victoria has also been offered \$300,000 via the Environment Protection and Biodiversity Conservation Planning funding stream for foundation planning activities for potential on ground activities to protect threatened species habitat.

Victoria's 2024 H7N3 and H7N9 HPAI outbreaks benefited from recent enhancements made through the EAD preparedness program including:

- 2 new mobile command centres providing remote operational capability
- new mobile truck washes and decontamination units
- a new mobile laboratory van enabling safe collection and management of samples in the field
- online movement permits allowing essential animal and product movement during an outbreak
- more streamlined response operations and enhanced collaboration across departments and agencies due to the development of strategic and operational plans such as the State EAD Response Plan, the updated Biosecurity Sub-Plan under the State Emergency Management Plan, and a range of procedures and EAD training packages

UPCOMING SURVEY

Agriculture Victoria will soon be seeking your help to evaluate the surveillance capabilities of private veterinarians and the current Significant Disease Investigation program. The aim of the evaluation is to identify and deliver new initiatives, tools, or program changes to improve private vets' surveillance capabilities. Participants from a range of veterinary practice types will be sought - including from rural, regional, peri-urban, telehealth and consultancy services. Look out for an invitation soon.

Congratulations to the veterinary practitioners newly endorsed as specialists from January 2025:

- Dr Tania Banks, Specialist in Small Animal Surgery
- Dr Josephine Hale, Veterinary Sports Medicine and Rehabilitation (Equine)
- Dr Yushun Ishikawa, Specialist in Veterinary Anaesthesia & Analgesia
- Dr Luke Johnston, Specialist in Small Animal Medicine
- Dr Cristina Rosales, Specialist in Equine Medicine

CALL FOR PARTICIPANTS:

Understanding traumatic experiences among Australian veterinary professionals

You are invited to take part in a research project aimed at understanding the lived experiences of Australian veterinary professionals who have encountered occupational traumatic experiences.

Veterinary professionals in Australia, including veterinarians, veterinary nurses, and technicians, experience some of the highest rates of suicide and mental health challenges. Although their work often exposes them to stressful and traumatic events, the prevalence and impact of post-traumatic stress disorder (PTSD) in this population remain underexplored, particularly in Australia.

This aim of this study is to explore the lived experiences of trauma among Australian veterinary professionals. The findings will contribute to a better understanding of their mental health needs, including the development of more inclusive and accurate diagnostic screening tools and tailored mental health interventions, ultimately helping to mitigate negative mental health outcomes within the profession.

The study is being undertaken by Psychology Honours student Joyce Lau, supervised by Dr Danielle Mathersul and Professor Charles Young. The study has been approved by the Murdoch University Human Research Ethics Committee (Approval 2025/023).

What's involved?: 15 minute questionnaire, 1 hour interview and 15-minute follow-up interviews

Ethics approval: Murdoch University Human Research Ethics Committee Approval 2025/023

LINK TO QUESTIONNAIRE > [Understanding traumatic experiences among Australian veterinary professionals](#)

EMERGENCY ANIMAL DISEASE (EAD) CONTACTS, UPDATES & TRAINING

- Notify all suspected EAD cases to the Emergency Animal Disease Watch Hotline on **1800 675 888**
- Report sick or dead *wild* birds and other wildlife species by [using this form](#) or calling 131 186
- Prepare for [H5N1 avian influenza](#) - Victorian Chief Veterinary Officer
- Updated Feb 2025: [Japanese Encephalitis \(JE\) current situation](#) - watch out for cases of pig reproductive failure and horse neurological conditions.
- Read [how local vets can help in Emergency Animal Disease outbreaks](#) - Department of Agriculture, Fisheries and Forestry (DAFF)
- [Training opportunities for vets](#) in emergency animal disease, poultry diseases, anthrax - Agriculture Victoria
- [National biosecurity training hub](#)
- Subscribe to EAD updates [VetWatch newsletter](#) (Victorian CVO) and [Biosecurity Matters](#) (DAFF).

REGISTRATION HOUSEKEEPING

When to register in Victoria

Vets cannot renew their registration in another State or Territory if they have moved here and their permanent place of residence is now Victoria (section 4(1A) *Veterinary Practice Act 1997* (VPA)). Vets originally from NSW, the NT and WA must apply by 10 June to be registered on 1 July 2025. Vets from SA and the ACT must register immediately after moving to Victoria. Vets from Queensland should register in early December. Employers: please verify staff registration status.

Application forms: [General registration](#) or [Re-registration](#)

Update your address and other details

Registered veterinary practitioners must notify the Board of any change of register address (s19 VPA) within 28 days of any change via www.vetboard.vic.gov.au/myaccount.

SUPPORT AND INFORMATION FOR VETERINARY PRACTITIONERS

VETBOARD VICTORIA RESOURCES

- [Videos and factsheets about veterinary boards, how they handle complaints and how you can respond to or prevent complaints](#)
- [Download proof of registration or update your contact details via My Account](#)
- [Registration](#)
- [Complaints](#)
- [Guidelines for appropriate standards of veterinary practice and veterinary facilities](#)
- [Veterinary Practice Act 1997](#)
- [Other laws relating to veterinary practice including Drugs, Poisons and Controlled Substances Act 1981](#)
- [About the Board and Board members](#)
- [Annual reports](#)

MEDICINES, MICROCHIPPING, RADIATION

Medicines & Poisons Regulation (MPR)

Branch, Victorian Department of Health

- [Medicines and Poisons Regulation](#)
- [Legislative requirements for vets](#)
- [Factsheet – Key requirements for vets](#)
- [MPR Enquiry form](#)

Prescribing guidelines and resources:

- [AMR Vet Collective antimicrobial guidelines](#)

Microchipping

- [Authorised implanter course for veterinarians](#) - Victorian Division AVA
- [Greyhound Microchip Registry 8329 1139](#)

Radiation Safety Unit, Vic Health:

- [Individual use licences](#)
- [Management licences](#)

COVID-19 INFORMATION

- National hotline: **1800 020 080**
- [COVIDSafe Plan](#)

Disclaimer: Some links in this newsletter direct you to the websites of third-party organisations which are responsible for and/or may be able to assist you with the item's subject matter. The Veterinary Practitioners Registration Board of Victoria has no control over and is not responsible or liable for the content of any third-party website.

SUPPORT FOR VETS

- **Australian Veterinary Association:** [telephone counselling service 1300 687 327](#) **both** for AVA members **and** the vet professionals who work for them
- **AVA THRIVE** [veterinary wellness portal](#)
- **Lifeline** 13 1114 & [Get help](#)
- **Beyond Blue:** 1800 512 348 & [Get mental health support](#)
- **SANE** 1800 187 263 & [SANE services](#)
- **1800RESPECT** 1800 737 732 & [website](#)
- **Mensline Australia** 1300 789 978 & [website](#) (delivered by Lifeline)
- **Head to Health** [Australian Gov resources](#)
- **Mental health support** [Victorian Gov resources](#)

AGRICULTURE VICTORIA INFORMATION

Emergency Disease Hotline

- 1800 675 888 to report suspected emergency diseases - staffed by vets 24 hours a day, 365 days a year.

Local animal health staff

- Call 136 186 to get in touch with Agriculture Victoria District Veterinary Officers and Animal Health Officers located throughout Victoria.

Avian flu

- EAD hotline 1800 675 888

General contacts

- Customer service line 136 186
- Email biosecurity queries or feedback to animal.biosecurity@agriculture.vic.gov.au
- Email animal welfare queries to pet.welfare@agriculture.vic.gov.au

General information

- www.agriculture.vic.gov.au
- [Biosecurity and animal diseases](#)
- [National biosecurity training hub](#)
- [VetWatch newsletter](#) – information about animal disease surveillance
- [Antibiotic resistant infections and information for veterinarians and veterinary staff](#)
- [Animal Welfare Victoria](#)
- [Livestock and animals](#)
- [Pet care](#)