

<b>OVMEB BOARD MEETING PUBLIC SESSION</b>	<b>June 29-30, 2023</b>	<b>8:30 AM</b>
	<b>Zoom Conference:</b>	
	<a href="https://us06web.zoom.us/j/87442852702?pwd=akY2">https://us06web.zoom.us/j/87442852702?pwd=akY2</a>	
	<b>Meeting ID:</b> 874 4285 2702 <b>Passcode:</b> 0HhimH	
<b>Phone 971-673-0224 Fax 971-673-0226</b>		
<b>Board President: Emilio DeBess, DVM, MPH</b>		

**June 29-30, 2023, 8:30 AM**

**Convene Public Session**

1. **PUBLIC COMMENTS – For Items Not on the Agenda**  
(Comments must be limited to 3-5 minutes. Notify the Board office in advance if you wish to address the Board.)
2. **CONSENTAGENDA**
  - a. Today’s Agenda
  - b. June 14, 2023- Special Board Meeting
  - c. April 7, 2023- Public Board Meeting Minutes
3. **STATE VETERINARIAN UPDATE – Dr. Ryan Scholz, DVM, MPH**
4. **Importance of Xylazine in Veterinary Medicine- OVMA**
5. **ADMINISTRATIVE RULE HEARING REVIEW**
  - a. OAR 875-010-0026 Intern, Active and Inactive Licenses
6. **EXECUTIVE DIRECTOR REPORT – Peter J. Burns**
7. **DISCUSSION AND ACTIONITEMS**
  - a. **Practice Policies**
    - i. VCPR – Dr. DeBess
    - ii. Telerriage – Dr. DeBess
    - iii. CVT Applicant – Brooke and Bertina
    - iv. CVT Title Protection (to be covered on Friday, June 30<sup>th</sup> Public Session)
    - v. Renewals extension update – Brooke
    - vi. Delegated Authority – Joanna and Pete
    - vii. OAR 875-030-0050 Practice Limitations for Individuals not Certified as Veterinary Technicians- Brenda and Dr. Lamb
    - viii. OAR 875-040-0000 Certified Euthanasia Technicians- Brenda and Dr. Lamb

**8. EXECUTIVE SESSION:** The Oregon Veterinary Medical Examining Board will now go into Executive Session pursuant to ORS 192.660(2)(L), ORS 192.660(2)(f), ORS 192.660(2)(h), and 676.175(1) concerning discipline, litigation, and exempt public records. Representatives of the news media and designated staff will be allowed to attend the Executive Session. All other members of the audience are asked to leave the room. Representatives of the news media are specifically directed not to report on any of the deliberations during the Executive Session except to state the general subject of the session as previously announced. No decision will be made in Executive Session. At the end of the Executive Session, we will return to open session and welcome the audience back into the room.

**9. IN THE MATTERS OF (following ExecutiveSession)**

## **2. Consent Agenda**

<b>OVMEB BOARD MEETING PUBLIC SESSION</b>	<b>June 29-30, 2023</b>	<b>8:30 AM</b>
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**9. IN THE MATTERS OF (following ExecutiveSession)**

<b>OVMEB BOARD MEETING PUBLIC SESSION- SPECIAL MEETING</b>	<b>June 14, 2023,</b>	<b>12:00 PM</b>
	<b>Zoom Conference:</b> <a href="https://us06web.zoom.us/j/89653525065?pwd=QWhBOC9MU3pSRzd0TG">https://us06web.zoom.us/j/89653525065?pwd=QWhBOC9MU3pSRzd0TG</a>	
	<b>Meeting ID: 896 5352 5065</b> <b>Passcode: 4tNBsD</b>	
<b>Board President: Emilio DeBess, DVM, MPH Phone 971-673-0224 Fax 971-673-0226</b>		

<b>Board member Attendees:</b>	<b>Staff Attendees:</b>
Emilio DeBess, DVM, MPH, President	Peter J. Burns, Executive Director
Karen Pate, Public Member	Bertina Balajadia, Investigator
Allison Lamb, DVM	Brenda Biggs, Inspector
Natalie Mair-Williamson, CVT	Janine Holland, Investigator
	Joanna Tucker-Davis, AAG
<b>Public Attendees:</b> Several members of the public attended	

**Thursday, June 14, 2023, Public Session**

**12:00 PM Convene Public Session**

**1. EMERGENCY CASE REVIEW**

Action

The Board revied and discussed the case in executive session.

**2. VOTE ON CASE NO. 2023-0052**

Action

Emergency Suspension. DeBess moved; Ragan second. All in favor. Motion passed.

Adjourn meeting 06/14/2023. 12:48 pm.

Prepared by Brooke Walker; Administrative Assistant 06/14/2023.

Board and Commission Meeting Minutes Series documents the official proceedings of the board or commission meetings. Records may include agendas; minutes; meeting notices; items for board action; contested case hearings schedules; committee reports; exhibits; and related correspondence and documentation. Records may also include audio recordings of meetings used to prepare summaries. Retention: (a) Minutes: Permanent, transfer to State Archives after 10 years; (b) Audio recordings: 1 year after transcribed, destroy; (c) Other records: 5 years, destroy.

April 7, 2023, PUBLIC

<b>OVMEB BOARD MEETING PUBLIC SESSION</b>	<b>April 7, 2023,</b>	<b>8:30 AM</b>
	<b>Zoom Conference:</b> <a href="https://us06web.zoom.us/j/81414235846?pwd=QVExYXZUM1dXbGh">https://us06web.zoom.us/j/81414235846?pwd=QVExYXZUM1dXbGh</a> <b>Meeting ID:</b> 834 7153 4738 <b>Passcode:</b> P8etfJ	
<b>Board President: Emilio DeBess, DVM, MPH Phone 971-673-0224 Fax 971-673-0226</b>		

<b>Board member Attendees:</b>	<b>Staff Attendees:</b>
Emilio DeBess, DVM, MPH, President	Peter J. Burns, Executive Director
Karen Pate, Public Member	Brooke Walker, Administrative Assistant
Allison Lamb, DVM	Brenda Biggs, Inspector
Natalie Mair-Williamson, CVT	Janine Holland, Investigator
Brett, Hamilton, DVM	Joanna Tucker-Davis, AAG
Glenn Taylor, Public Member	
Ragan Borzcik, CVT	
<b>Public Attendees:</b> Several members of the public attended	

**Friday, April 7, 2023, Public Session 8:32 AM Convene**

**Public Session**

**1. PUBLIC COMMENTS** –None.

**2. CONSENT AGENDA** –

**a. Today’s Agenda** – Adopted.

**b. February 24, 2022, Public Board Meeting Minutes-** Adopted.

**c. February 02, 2022, Public Board Meeting Minutes-** Adopted.

**3. TELEMEDICINE AND VCPR – Oregon State Representative Vikki Breese**

**Iverson, House District 59**

**Discussion:** Can the OVMEB allow use of telemedicine to establish a VCPR for herds?

**Outcome:** Board members will talk about improving this topic. Overuse of antibiotics in veterinary medicine is a concern.

**4. STATE VETERINARIAN UPDATE – Dr. Ryan Scholz, DVM, MPH**

Inform

Routine update from Dr. Scholz. Dealing with Senate Bill 57 removing OTC antibiotics and a lot of outreach going on. The use of telemedicine in farm species and conversation regarding how the consultations will evolve moving forward. Rabid disease is suspected to still be around in Oregon; passive surveillance continues. It is present in the wild population, but stable east of the cascades. Reporting should be ongoing.

**5. EXECUTIVE DIRECTOR REPORT**– Report was received by the Board. Inform Burns provided a budget and staffing update. He will be attending AVVSB conference and will bring back report in June. Senate Bill 559 did not move forward in committee. No further updates currently.

**6. OVTAA Title Protection Proposal**

**Reason:** Sarah Harris: CVT and specialist is asking for change in practice act. Added language that protects and improves quality of care for CVT's.

**Outcome:** Further Discussion Required.

**7. DISCUSSION AND ACTION ITEMS**

**a. Practice Policies**

Inform/Action

**i. Request to Close a Case Summary Report**

**Issue:** Many cases with no jurisdiction or not substantiated.

**Discussion:** Discussion on the continuing education approval process. DeBess wanted to ensure the board was aware that he has been approving CE and discuss if the board would like him to continue doing so.

**Outcome:** DeBess will continue to approve CE. DeBess and Balajadia will work on a protocol to help standardize the process.

**ii. PAW Team VCPR request- Shrode**

**Issue:** Paw Team is requesting waiver from VCRP when sharing patients with Oregon Humane Society.

**Discussion:** Brianna: from Paw Team. There is a time delay in administering vaccine boosters due to a high volume of animals, Veterinarian scheduling and CVT shortage.

**Outcome:** Board will discuss further.

**iii. Teletriage- DeBess**

**Issue:** Can teletriage be used in Oregon?

**Discussion:** More companies are coming to Oregon and providing services. Do they need to be licensed in Oregon? Proposal has been submitted. Board will provide input to Pete so a decision can be made to move forward with rulemaking.

**Outcome:** Bring back to June Board Meeting.



**iv. RAC- DeBass**

**Issue:** Update to Board

**Discussion:** Talked about dentistry and CVT's and what a CVT can and can't do. Twelve people signed on to give review, six people responded to proposal.

**Outcome:** Further discussion needed.

**v. Inactive Rules**

**Issue:** Current inactive license rules conflict with statute.

**Discussion:** Must make the rule match the statute by adding the word, "actively." Move into rulemaking to match the rule and statute. Discussed further in Executive session.

**Outcome:** Vote needs to be taken into public session.

**vi. CVT Applicant**

**Issue:** Licensing question regarding schooling.

**Discussion:** Not enough information.

**Outcome:** Will bring back to board.

**8. EXECUTIVE SESSION**

**9. IN THE MATTERS OF** (following Executive Session)

**2021-0051:** Move to reject. DeBess moved; Taylor second. All in favor. Motion passed.

**2023-0048:** Deny application. Lamb moved; Mair-Williamson second. All in favor. Motion passed. Hamilton not present.

**2023-0014:** Move to close case. DeBess moved; Mair-Williamson second. All in favor. Motion passed. Hamilton not present.

**2022-0015A & b:** Move to close case. DeBess moved; Lamb second. All in favor. Motion passed. Hamilton not present.

**2022-0076:** Move to Close case. DeBess moved; Pate second. All in favor. Motion passed. Hamilton not present.

**2022-0091:** Move to close case. DeBess moved; Taylor second. All in favor. Motion passed. Hamilton not present.

**2022-0083 and 2022-0018:** Move to Issue a Notice of Disciplinary Action to impose a civil penalty of \$2,500. DeBess moved; Mair-Williamson second. All in favor. Motion passed. Hamilton not present.

**2021-0074A and B:** Move to close. DeBess moved; Mair-Williamson second. All in favor. Motion passed. Hamilton not present.

April 7, 2023, PUBLIC

Adjourn meeting 4/07/23 1:09 pm.

Prepared by Brooke Walker; Administrative Assistant 04/07/23.

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## **4. Importance of Xylazine in Veterinary Medicine**



May 15, 2023

Honorable Governor Tina Kotek  
Office of the Governor  
900 Court Street, Suite 254  
Salem, OR 97301-4047

Re: Importance of Xylazine in Veterinary Medicine

Dear Governor Kotek:

Veterinarians in Oregon recognize the threat of illicit xylazine and its increasing role in the drug epidemic, and we strongly support the recent actions of the FDA, DEA and Congress in the fight against the importation and use of illicit xylazine. We also applaud your efforts to help combat the opioid addiction crisis in Oregon through Senate Bill 1043.

We are reaching out to you because the chemical xylazine that has been found mixed with illicitly manufactured fentanyl and other narcotics in all 50 states **is not** the same essential medication used in veterinary medicine. This is an important distinction, as any executive order making xylazine a scheduled controlled substance would dramatically change the way veterinarians are able to care for their patients and would be an animal welfare and human safety issue.

Xylazine, which has been approved in the United States for veterinary use since 1972, is an important medication in large animal species, particularly horses and cattle, as well as some wildlife and laboratory animal species. In these species it is a very safe, effective, and relatively short-acting non-opioid drug that provides sedation and analgesia needed to perform certain medical evaluations, treatments, and procedures. This also helps make veterinary practice safer for veterinarians, technicians, producers, and animal owners when working with animals that can easily injure people (or themselves) during procedures, because of their size and typical behavior.

No form other than the injectable (liquid) xylazine is used in veterinary medicine. In contrast, the xylazine used to adulterate illicit drugs is a bulk powder (active pharmaceutical ingredient – API), and the source of this API (street name “Tranq”) is from illegal importation by sellers operating on the internet.<sup>1</sup> Injectable veterinary xylazine is a liquid, making it difficult to use as an adulterant. For example, the Illinois Department of Health stated in 2022 that there is no evidence that xylazine was being diverted from veterinary practice for use in illegal drug manufacture.<sup>2</sup>

In February 2023, the FDA took action to restrict the unlawful entry of illegally imported xylazine API to combat the “Tranq” supply chain.<sup>3</sup> The FDA recognizes that the xylazine being trafficked in communities across the United States comes from imported bulk ingredients, often from Chinese suppliers selling online, and is **not diverted from veterinary clinics**. This FDA action, strongly supported by the OVMA, places xylazine on the Import Alert “Red List.” Such placement now challenges the FDA to verify that imported xylazine is properly labeled, not adulterated, and is intended for legitimate use.

Additionally, the OVMA supports the “Combatting Illicit Xylazine Act H.R. 1839 / S. 993” introduced March 28, 2023, in the 118<sup>th</sup> Congress. <sup>4</sup> This bill, along with the FDA’s efforts, targets the supply chain of “Tranq,” while giving regulatory flexibility to FDA-approved veterinary xylazine. The federal legislation also contains harsher penalties for diversion than what currently exists in the Controlled Substances Act. The American Veterinary Medical Association also supports this legislation.

We believe that illicit drugs are a major public health threat and support efforts to eliminate illegal “Tranq.” However, placing additional burdens or restrictions on the legitimate veterinary use of xylazine will have minimal, if any, effect on this public health crisis; it would almost certainly eliminate a critical medication for our veterinary patients in Oregon.

There are currently only two manufacturers of xylazine for veterinary use in the United States. If it is scheduled as a controlled substance, there is a very real risk that it will cease to be available in Oregon because of the increased regulatory burden and costs for the manufacturers and distributors. Our understanding is that one of the manufacturers has already ceased making the product until there is more clarity and that one of the major distributors has stopped distributing it to states that have scheduled xylazine. This leaves one manufacturer currently providing product to the entire U.S. market.

It is our hope that you will support the thoughtfully conceived policies on the federal level and ensure that veterinarians in Oregon continue to have access to this important drug. Our concern is that restricting access to xylazine would have unintended consequences affecting veterinary practice, animal welfare, and human safety, without reducing drug overdoses and deaths in people.

Thank you, Governor Kotek, for your time and consideration. Please do not hesitate to contact us, if we can answer questions and concerns you might have.

Sincerely,

*Jill E. Parker*

Jill E. Parker, VMD, DACVS  
President, Oregon Veterinary Medical Association

cc. Joe Schnabel, R.Ph. Oregon Board of Pharmacy  
Emilio DeBess, DVM, MPH, Oregon Veterinary Medical Examining Board

1. The growing threat of xylazine and its mixture with illicit drugs. Accessed May 10, 2023. <https://www.dea.gov/documents/2022/2022-12/2022-12-21/growing-threat-xylazine-and-its-mixture-illicit-drugs>
2. Patchwork effort to curb illicit use of xylazine raises concerns - News - VIN. Accessed May 10, 2023. <https://news.vin.com/default.aspx?pid=210&id=11464312&useobjectypeid=10&fromVINNEWSASPX=1&f5=1>
3. FDA takes action to restrict unlawful import of xylazine: Agency aims to maintain availability for legitimate use in animals while preventing importation for illicit purposes. FDA News Release February 28, 2023. Accessed May 10, 2023. <https://www.fda.gov/news-events/press-announcements/fda-takes-action-restrict-unlawful-import-xylazine>
4. Combating Illicit Xylazine Act. H.R.1839 and S.993 118th Congress (2023-2024): Published March 28, 2023. Accessed May 10, 2023. <https://www.congress.gov/bill/118th-congress/house-bill/1839/text> and <https://www.congress.gov/bill/118th-congress/senate-bill/993?s=1&r=18>

# **5. Administrative Rules Hearing Review**

#### 875-010-0026 Intern, Active and Inactive Licenses

Upon approval of all required application materials, the applicant may then apply for an intern or active license to practice veterinary medicine in Oregon. License activation forms are available from the Board office or on its website.

(1) The intern or active license fee shall be \$150 annually.

(2) If the applicant has satisfactorily completed one year's experience in the United States or its territories or provinces, an active veterinary license will be issued and will expire on the next following December 31st. Licensee shall renew the license according to OAR 875-010-0065.

(3) If applicant has less than one year's experience, an Intern Permit (intern license) will be issued. The intern license will expire following the total number of days necessary to complete one year's practice experience, under supervision of an Oregon licensed veterinarian, pursuant to ORS 686.085 and OAR 875-010-0050:

(a) Upon completion of the internship, the intern may apply for an active license, pursuant to OAR 875-010-0065. Late

fees up to \$150 will apply for each month the application is late if the intern has continued to practice veterinary medicine in Oregon after expiration of the intern license;

(b) The supervising veterinarian shall complete an experience verification form attesting that the intern has satisfactorily completed the internship and the intern shall submit this form with the application for an active license.

(4) An inactive license may be issued to any applicant who does not meet Continuing Education requirements. Inactive licensees ~~shall not~~ may practice veterinary medicine in Oregon for up to 30 days. The inactive license fee shall be \$100 annually.

## **7. Discussion and Action Items**





and specifically the application process.

May 25-26: New Director Summit in Salem with representatives from the Governor's team. We discuss all things state administration and priorities and expectations from the Governor's Office.

June 6: OVMEB Chair and Director attended the Portland Veterinary Medical Association Board Meeting. Introduction and discussion of shared priorities and opportunities for continued collaboration and partnership.

June 21: OVMEB Board Chair, Director and Inspector participated in inspection training and tour of OHS' Community Veterinary Hospital.

**Board Member Appointment Update:**

OVMEB has one vacant veterinary position. We posted this on our website and sent an announcement to interested parties. Applications accepted until June 28<sup>th</sup>. Board Administrator/Stakeholder unofficial recommendations due to Governor's Advisor by July 10<sup>th</sup>. Governor's Advisor official recommendations to Exec Appts Team due by July 19<sup>th</sup>.

**Farewell and Recognition for OVMEB Inspector Brenda Biggs:**

Brenda has served the State of Oregon for over 13 years. She has served as the OVMEB Inspector for nearly 5 years. In that role, Brenda has been the most public-facing representative of the agency. We have regularly received positive feedback from our licensees as she ushers them through the inspection process. She has served as the agency's Rules Coordinator, deftly maneuvering the rules process, administering timely and important changes in rules that support the industry. Brenda is embarking on the much-deserved next adventure that is retirement. She will enjoy fishing her Dad's favorite fishing spots, spending time with family and taking her new RV out on the road. I would like to recognize Brenda's contributions to OVMEB and the State of Oregon. I would like to wish her all the best on her next adventure.

## Oregon State Veterinary Medical Examining Board

	<b>2019-21 Actuals</b>	<b>2021-23 Leg Approved Budget</b>	<b>2023-25 Governor's Budget</b>
General Fund	\$0	\$0	\$0
Lottery Funds	0	0	0
Other Funds	1,198,465	1,379,042	1,598,764
Federal Funds	0	0	0
Other Funds (Nonlimited)	0	0	0
Federal Funds (Nonlimited)	0	0	0
<b>Total Funds</b>	<b>\$1,198,465</b>	<b>\$1,379,042</b>	<b>\$1,598,764</b>
Positions	4	4	5
Full-time Equivalent	3.75	3.75	4.75

### OVERVIEW

The Oregon State Veterinary Medical Examining Board regulates the veterinary professions in Oregon through enforcement of the Veterinary Practice Act. The Governor appoints the eight-member board, consisting of five members licensed to practice veterinary medicine, surgery, and dentistry in Oregon, two public members, and one certified veterinary technician. The board investigates consumer complaints and takes appropriate remedial or disciplinary action. The board's programs ensure veterinary care conforms to medical standards and practices and is consistent with the best interests of the public and ensures animal euthanasia in public and private shelters is conducted humanely.

### GOVERNOR'S BUDGET

The Governor's budget for the Oregon State Veterinary Medical Examining Board is \$1.6 million total funds. This is a 15.9 percent increase from the 2021-23 Legislatively Approved Budget (LAB). The budget includes five positions, which reflects the increase of one position from the 2021-23 LAB. The Governor's budget supports existing services, including the licensure of over 4,500 licensees and 671 veterinary facilities, and supports an additional position to assist with the increased inspection and investigative workload.

### REVENUE SUMMARY

The board is funded solely by Other Funds revenue. Ninety-nine percent of the board's revenue is from application, examination, and license fees, while the remaining revenue is from the sale of license lists and collection of civil penalties.

## **7. Discussion and Action Items**

**From:** [DEBESS Emilio E](#)  
**To:** [BURNS Peter J \\* OVMEB](#)  
**Subject:** VCPR  
**Date:** Wednesday, April 19, 2023 12:42:14 PM  
**Attachments:** [image001.gif](#)

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(21) "Veterinary Client Patient Relationship (VCPR)":  
RED= remove

Except where the patient is a wild or feral animal, or its owner is unknown; a VCPR shall exist when the following conditions exist:

To establish a VCPR, the veterinarian must have sufficient knowledge of the animal to initiate at least a general or preliminary diagnosis of the medical condition of the animal and treatment. This means that the veterinarian has seen the animal within the last year and is personally acquainted with the care of the animal, by virtue of a physical examination or via telemedicine when a physical examination is not possible. **of the animal or by medically appropriate and timely visits to the premises where the animal is kept.**

Emilio

Input from Dr. Allison Lamb:

Current Language of 875-005-0005: Definitions:

(13) "Herd or Flock Animal": Animals, (four or more, of the same species), managed as a group, including, but not limited to, breeding, sale, show, food production, or racing. The veterinarian shall have the discretion to determine "herd or flock" status for provision of veterinary medical care and recordkeeping.

(21) "Veterinary Client Patient Relationship (VCPR)": Except where the patient is a wild or feral animal or its owner is unknown; a VCPR shall exist when the following conditions exist: The veterinarian must have sufficient knowledge of the animal to initiate at least a general or preliminary diagnosis of the medical condition of the animal. This means that the veterinarian has seen the animal within the last year and is personally acquainted with the care of the animal by virtue of a physical examination of the animal or by medically appropriate and timely visits to the premises where the animal is kept.

Proposed language

875-005-0005: Definitions:

(13) "Herd or Flock Animal": Animals, (four or more, of the same species), managed as a group, including, but not limited to, breeding, sale, show, food production, or racing. The veterinarian shall have the discretion to determine "herd or flock" status for provision of veterinary medical care and recordkeeping.

(21) "Veterinary Client Patient Relationship (VCPR)": ~~Except where the patient is a wild or feral animal or its owner is unknown; a~~ VCPR shall exist when the following conditions exist:

1. The veterinarian has provided a physical examination of the individual patient within the last year or has conducted physical examination of at least 5% of the animals housed on the premises where the animal is currently housed within the last month when the animal is considered a "herd or flock" animal.

2. When unsafe behavior prevents physical examination of wild, feral, and/or stray animals, documentation of such behavior is required in the medical records.

~~The veterinarian must have sufficient knowledge of the animal to initiate at least a general or preliminary diagnosis of the medical condition of the animal. This means that the veterinarian has seen the animal within the last year and is personally acquainted with the care of the animal by virtue of a physical examination of the animal or by medically appropriate and timely visits to the premises where the animal is kept.~~

**From:** [Glenn Kolb](#)  
**To:** [BURNS Peter J \\* OVMEB](#)  
**Cc:** [Emilio DeBess](#)  
**Subject:** Fw: VCPR  
**Date:** Tuesday, April 25, 2023 11:03:34 AM  
**Attachments:** [VCPR Federal Requirements.pdf](#)

---

And here is the attachment. Sorry about that. – Glenn

**From:** Glenn Kolb  
**Sent:** Tuesday, April 25, 2023 11:01 AM  
**To:** BURNS Peter J \* OVMEB  
**Cc:** Emilio DeBess  
**Subject:** VCPR

Hello Pete,

At your most recent meeting, Rep. Vikki Breese Iverson shared her thoughts about the VCPR and OVMEB's rule on telemedicine as it relates to the upcoming federal change coming on June 11 that prohibits access of antibiotics – for pets as well as for livestock – without a veterinary prescription. It appears that her wishes are for a “workaround” existing regulations – allowing the VCPR to be established without the hands-on physical exam of the animal or timely and appropriate visits to the location where the animal is kept.

OVMEB's current rule on VTM requires a physical exam of the animal to establish the VCPR, and this is consistent with federal requirements. The FDA does not allow the VCPR to be established electronically.

Attached is a summary – provided by the AVMA – of these requirements. And the federal VCPR applies to the following:

- Any use of an FDA-approved human drug in animals, including OTC human drugs that have been commonly accessed through feed/farm stores. This includes antibiotics such as penicillin and oxytetracycline.
- A veterinarian's authorization of the Veterinary Feed Directive.
- The use of compounded drugs by a veterinarian.

As you know, state law/regulations can be more but not less limiting than federal law. And this poses a challenge with the raised concern.

Best regards,

Glenn

Glenn M. Kolb, Executive Director

Oregon Veterinary Medical Association

1880 Lancaster Dr. NE, #118

Salem, OR 97305

800-235-3502

[www.oregonvma.org](http://www.oregonvma.org) / [glenn.kolb@oregonvma.org](mailto:glenn.kolb@oregonvma.org)



# Federal requirements for the veterinarian-client-patient relationship

## THE BASICS

The federal government regulates veterinary medicine and animal drugs very differently than it does human health care and drugs intended for human use. This is, in part, because veterinarians are key to maintaining a healthy, safe, and wholesome food supply and because they also play an important role in overseeing the judicious use of antimicrobials in animals. One important difference between human and veterinary medicine is that the U.S. Food and Drug Administration (FDA) has authority under the federal Food, Drug and Cosmetic Act (FDCA) over the **use** of animal drugs and human drugs by veterinarians, and the authority to define how a veterinarian-client-patient relationship (VCPR) is established for certain uses of animal and human drugs.<sup>1</sup> For these uses, FDA has authority to require the keeping of veterinary medical records and to access them at any reasonable time to verify and copy them.<sup>2</sup> Use of animal and human drugs by veterinarians that violates the federal VCPR parameters set forth in the FDCA and its implementing regulations results in the drug being statutorily deemed unsafe for the use and, if in animal feed, the feed is statutorily deemed adulterated.<sup>3</sup>

The USDA, which regulates veterinary biological products, also has promulgated rules defining a VCPR using the same language as the FDA.<sup>4</sup>

## APPLICATION OF THE FEDERAL VCPR

The federal VCPR applies to any use of an FDA-approved human drug in animals, including over-the-counter (OTC) human drugs.<sup>5</sup> It applies to any use of an FDA-approved animal drug in any manner that differs from its approved labeling (Extra Label Drug Use<sup>6</sup>), such as a different frequency of administration, different dose, different medical indication for its use, different route of administration, or use in a different species.<sup>7</sup> It also applies to the use of compounded drugs by veterinarians<sup>8</sup> and a veterinarian's authorization of a veterinary feed directive (VFD).<sup>9</sup> All of these are very common occurrences in the day-to-day practice of veterinary medicine.

Establishing the federal VCPR requires a physical examination of the animal or timely and medically appropriate visits to the premises where animals are kept. The FDA does **not** allow the VCPR to be **established** through electronic means.<sup>10</sup> FDA does allow the VCPR to be **maintained** electronically through telemedicine.<sup>11</sup> Veterinarians must comply with the federal VCPR in each of the circumstances in which it applies, irrespective of whether state law defines it differently.

The federal VCPR also applies in two important, but more limited, circumstances under USDA authorities. Veterinarians who manufacture biological products for use in their patients must do so within the context of the federal VCPR.<sup>12</sup> Veterinarians also must have established a federal VCPR when using prescription platform product biologics, which are a new category of biotechnology vaccines.<sup>13</sup>

*Continued on next page*

## CONFLICTING STATE AND FEDERAL VCPR DEFINITIONS AND TELEMEDICINE

- Conflicting state and federal VCPR definitions (e.g., states allowing the VCPR to be established electronically) would cause significant confusion. The FDA and USDA have used the same regulatory definition to avoid such confusion.
- Veterinarians must comply with the federal VCPR requirements where they apply, regardless whether state laws are more lax. Activities where the federal VCPR applies are extremely common in day-to-day veterinary practice.
- State law and regulations relating to the establishment of a VCPR that conflict with federal law would also cause telemedicine encounters to be frustrating for many veterinary clients. A veterinarian who has not already established a VCPR that complies with federal requirements (i.e., by conducting an in-person examination/visit) could not even recommend the use of an FDA-approved human OTC product for an animal without violating federal law.
- There are many valuable uses of telemedicine within the parameters of a federal VCPR.

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1. 21 USC 360b; 21 CFR Part 530
  2. 21 CFR 530.5
  3. 21 USC 360b(a)(1), (2), (4) & (5); 21 USC 342(a)
  4. 9 CFR 107.1(a)(1)
  5. 21 USC 360b(a)(5); 21 CFR 530.2; 21 CFR 530.3(a)
  6. <https://www.fda.gov/animal-veterinary/resources-you/ins-and-outs-extra-label-drug-use-animals-resource-veterinarians>
  7. 21 USC 360b(a)(4); 21 CFR 530.2; 21 CFR 530.3(a)
  8. <https://www.fda.gov/animal-veterinary/resources-you/ins-and-outs-extra-label-drug-use-animals-resource-veterinarians#compounding>; FDA Draft Guidance for Industry #256
  9. 21 CFR 558.6(b)
  10. FDA letter to the American Veterinary Medical Association, April 6, 2017 – “Therefore, for the purposes of the federal definition, a VCPR cannot be established solely through telemedicine (e.g., photos, videos, or other electronic means that do not involve examination of the animal(s) or timely visits to the premises).”; During the pandemic FDA announced they will **temporarily** suspend enforcement of the federal VCPR physical exam and premises visit requirements. <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/cvm-gfi-269-enforcement-policy-regarding-federal-vcpr-requirements-facilitate-veterinary>. In this announcement FDA reiterated that under normal circumstances - “Given that the Federal VCPR definition requires animal examination and/or medically appropriate and timely visits to the premises where the animal(s) are kept, the Federal VCPR definition cannot be met solely through telemedicine.”
  11. *Id.* “The regulations do not specifically address the use of telemedicine to maintain an established VCPR. However, based upon the language of the VCPR definition provided above, nothing would prohibit the use of telemedicine (e.g., use of photos, videos, or other electronic means that may be considered virtual) to allow the veterinarian to keep informed and able to make medical judgments regarding the health of the animal(s) and the need for medical treatment between periodic examinations of the animal(s) and/or timely visits to the premises where the animal(s) are being kept.”
  12. 9 CFR 107.1(a)
  13. USDA Veterinary Services Memorandum 800.214

# AVMA

## Teletriage

**Teletriage** is the safe, appropriate, and timely assessment and management (immediate referral to a veterinarian or not) of animal patients via electronic consultation with their owners. In assessing patient condition electronically, the assessor determines urgency and the need for immediate referral to a veterinarian, based on the owner's (or responsible party's) report of history and clinical signs, sometimes supplemented by visual (e.g., photographs, video) information. A diagnosis is not rendered.

The essence of teletriage is to make good and safe decisions regarding a patient's disposition (immediate referral to a veterinarian or not), under conditions of uncertainty and urgency.

<https://www.avma.org/resources-tools/animal-health-and-welfare/telehealth-telemedicine-veterinary-practice/veterinary-telehealth-basics>

Telehealth is the overarching term that encompasses all uses of technology to remotely gather and deliver health information, advice, education, and care. Telehealth can be divided into categories based on who is involved in the communication. For communication between veterinarians and animal owners there are two important categories that are distinguished by whether a VCPR has been established:

- Without a VCPR, telehealth includes the delivery of general advice, educational information, and teletriage (to support the care of animals in emergency situations)

### After-hours care

Clients want and expect 24/7 services, including veterinary care. Traditionally, access to after-hours care has meant that the client leaves a message with an answering service and waits for the veterinarian to call them back. Today's client generally expects more. Implementing **teletriage** services can help meet client expectations and patient needs, assist in scheduling with prioritization given to urgent cases, while also allowing veterinarians to better manage their work-life balance.

<https://www.avma.org/sites/default/files/2021-01/AVMA-Veterinary-Telehealth-Guidelines.pdf>

AAVSB

(h) "Teletriage" means the use of electronic technology or media, including interactive audio and/or video, to diagnose and treat a medical emergency as defined under section 4840.5 until the animal patient(s) can be transported to and /or seen by, a veterinarian.

<https://aavsbmemberservices.org/wp-content/uploads/2021/08/August-2021-Conventional-Report.pdf>

Georgia

Teletriage refers to the initial assessment of a patient to determine if a potentially life-threatening animal health situation is present and to make recommendations for either veterinary care or conservative management. An example of teletriage would be an animal poison control service. A valid VCPR is not required for teletriage. However, teletriage does not allow for the diagnosis or treatment of a patient.

<https://gvma.net/2021/08/02/presidents-column-telehealth-and-the-veterinary-profession/>

Arkansas

C. "Teletriage" means emergency animal care, including animal poison control services, for immediate, potentially life-threatening animal health situations (e.g., poison exposure mitigation, animal CPR instructions, other critical lifesaving treatment or advice).

<https://www.arkleg.state.ar.us/Calendars/Attachment?committee=040&agenda=5095&file=D.5.a+DOA+VMEB+Vet+Teleheath+and+Telemedicine+and+Act+130+of+2021.pdf>

Hawaii

e)A veterinarian may provide veterinary teleadvice or veterinary teletriage without the prior establishment of a veterinarian-client-patient relationship. An expert with a poison control agency who is not a veterinarian may provide veterinary teletriage.

Veterinary teletriage" means using electronic communication with a client, including through a poison control agency, to provide a timely assessment and decision as to whether to immediately refer a patient to a veterinarian for emergency or urgent care."

[https://www.capitol.hawaii.gov/sessions/Session2022/Testimony/SB2798\\_TESTIMONY\\_CPN\\_02-23-22\\_.PDF](https://www.capitol.hawaii.gov/sessions/Session2022/Testimony/SB2798_TESTIMONY_CPN_02-23-22_.PDF)

## California

### Teletriage

The legislative proposal would define “teletriage” to mean the use of electronic technology or media, including interactive audio and/or video, to diagnose and treat a medical emergency, as defined, until the animal patient(s) can be transported to, and/or seen by, a veterinarian. (Prop. BPC, § 4825.1, subd. (h).) This definition would expand the existing VCPR exemption in CCR, title 16, section 2032.1, subsection (f), which authorizes advice given in an emergency.

### Teletriage Services

The proposal would make clear to practitioners and consumers that teletriage cannot be used for treatment of non-life-threatening cases, but may be used in an emergency, as specified. (Prop. BPC, § 4826.3, subd. (a).) Currently, advice can be provided through telemedicine in an emergency without establishing a VCPR. (CCR, tit. 16, § 2032.1, subs.(f).) To benefit consumers by increasing access to critical veterinary care, the proposal would replace that provision and, using the emergency provisions under BPC section 4826.4, subdivision (a), would authorize a California-licensed veterinarian, without establishing a VCPR, to utilize teletriage to diagnose and treat the animal patient(s) until the animal patient(s) can be seen by, or transported to, a veterinarian. (Prop. BPC, § 4826.3, subd. (c)(1).) In addition, this proposal would authorize an RVT to use teletriage in an emergency (Prop. BPC, § 4826.3, subd. (c)(2)) and is consistent with the existing RVT lifesaving aid and treatment authority under BPC section 4840.5, which is clarified by CCR, title 16, section 2069 (page 9-10)

## Arizona

Teletriage means emergency animal care, including animal poison control services, for immediate, potentially life-threatening animal health situations (e.g., poison exposure mitigation, animal CPR instructions, other critical lifesaving treatment or advice).

Teletriage may be performed by a veterinarian or Certified Veterinary Technician (CVT) who is working under the supervision of a veterinarian without establishing a VCPR or obtaining Informed Consent to provide emergency, potentially life-saving telemedicine services. When determining whether to delegate such responsibility to a CVT, the veterinarian should consider the CVT’s knowledge, skills, and abilities.

[https://vetboard.az.gov/sites/default/files/media/AZ%20Veterinary%20Medical%20Board\\_Parameters%20and%20Requirements%20for%20Telemedicine%20-%20Exec.%20Order%202020-19\\_2.pdf](https://vetboard.az.gov/sites/default/files/media/AZ%20Veterinary%20Medical%20Board_Parameters%20and%20Requirements%20for%20Telemedicine%20-%20Exec.%20Order%202020-19_2.pdf)

## Maryland

Teletriage means emergency animal care for immediate, potentially life-threatening animal health situations, such as poison exposure mitigation, Animal CPR instructions, and other critical lifesaving treatment or advice. Teletriage may be performed by a veterinarian without establishing a VCPR or obtaining informed consent. Prescription medication may not be prescribed during teletriage without a valid VCPR. (page 18)

<https://mda.maryland.gov/vetboard/documents/Suggested-COMAR-Revisions.pdf>

## Veterinary teletriage or teleadvise

(Option 1) Veterinary teletriage or teleadvise/teleadvice means using electronic communication with a client ( poison control agency , animal CPR, other critical lifesaving treatment or advice ), to provide a timely assessment and decision as to whether to immediately refer a patient to a veterinarian for emergency or urgent care.

(Option 2) Teletriage or teleadvise/teleadvice means emergency animal care, including animal poison control services, for immediate, potentially life-threatening animal health situations (e.g. poison exposure mitigation; animal CPR instructions; other critical lifesaving treatment or advice).

A veterinarian or a CVT may provide veterinary teleadvise or veterinary teletriage without the prior establishment of a veterinarian-client-patient relationship (VCPR).

Teletriage does not include diagnosis or providing treatment. Diagnosis and treatment can only be delivered with a valid VCPR.

Teletriage services must be delivered by a DVM or a CVT who is working under the supervision of a veterinarian.

Person delivering teletriage must have a current veterinary or CVT license ( +/- Oregon license)

Person delivering teletriage must have an established protocol for making referrals to local emergency services

An expert with a poison control agency who is not a veterinarian may provide veterinary teletriage.

**From:** [Karen Pate](#)  
**To:** [BURNS Peter J \\* OVMEB](#)  
**Subject:** Re: OVMEB: Triage  
**Date:** Thursday, April 20, 2023 9:35:39 AM  
**Attachments:** [iii. Triage- DeBess-1.pdf](#)

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Hi Pete --

Back to you with a few minor comments (mostly picky grammar things. Old copy editor -- can't help myself.). I like option 2 with a tweak better, note explains why.

Best,  
Karen

On Wed, Apr 19, 2023 at 12:51 PM BURNS Peter J \* OVMEB  
<[Peter.J.BURNS@ovmeb.oregon.gov](mailto:Peter.J.BURNS@ovmeb.oregon.gov)> wrote:

|



**From:** [BURNS Peter J \\* OVMEB](#)  
**To:** [Allison Lamb](#)  
**Subject:** RE: [EXTERNAL] Fwd: OVMEB: Teletriage  
**Date:** Tuesday, May 2, 2023 2:59:00 PM

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**From:** Allison Lamb <[Allison\\_Lamb@washingtoncountyor.gov](mailto:Allison_Lamb@washingtoncountyor.gov)>  
**Sent:** Monday, May 1, 2023 4:26 PM  
**To:** BURNS Peter J \* OVMEB <[Peter.J.BURNS@ovmeh.oregon.gov](mailto:Peter.J.BURNS@ovmeh.oregon.gov)>  
**Subject:** RE: [EXTERNAL] Fwd: OVMEB: Teletriage

Hi Pete,

Thanks for the response. I don't have any personal feelings about where things need to go and I can certainly see how maybe addressing VCPR might also help before diving into telemedicine.

I guess when I think of things from an organization standpoint, having a rule to address the overarching Telehealth and defining what that is, and then breaking it down to telatriage and telemedicine seems like it might help keep things in one place for licensees. I can bring that up when we discuss the teletriage at a meeting.

I have attached my comments to the proposed wording for discussion.

Thanks,

**Allison Lamb**

ANIMAL SERVICES STAFF VETERINARIAN

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Animal Services and Bonnie Hays Animal Shelter  
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[Allison\\_Lamb@washingtoncountyor.gov](mailto:Allison_Lamb@washingtoncountyor.gov)

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**From:** BURNS Peter J \* OVMEB <[Peter.J.BURNS@ovmeh.oregon.gov](mailto:Peter.J.BURNS@ovmeh.oregon.gov)>  
**Sent:** Monday, May 1, 2023 12:52 PM  
**To:** Allison Lamb <[Allison\\_Lamb@washingtoncountyor.gov](mailto:Allison_Lamb@washingtoncountyor.gov)>  
**Subject:** RE: [EXTERNAL] Fwd: OVMEB: Teletriage

Greetings, Dr. Lamb.

Thanks for your involvement in this process.

It seems perhaps better if teletriage would be on its own or a subset of telemedicine, either way works.

Some states have included it in the title as telemedicine *and* teletriage. Some made teletriage its own rule.

As for the language about telemedicine. It seems we should first change the definition of VCPR in the general rules and then edit the rules of telemedicine based on the new definition of VCPR.

Thoughts on this?

Thanks,

Pete

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**From:** Allison Lamb <[Allison\\_Lamb@washingtoncountyor.gov](mailto:Allison_Lamb@washingtoncountyor.gov)>

**Sent:** Monday, May 1, 2023 8:33 AM

**To:** BURNS Peter J \* OVMEB <[Peter.J.BURNS@ovmeb.oregon.gov](mailto:Peter.J.BURNS@ovmeb.oregon.gov)>

**Subject:** FW: [EXTERNAL] Fwd: OVMEB: Teletriage

Hi Pete,

Sorry it has taken me a bit to dig into this proposed language. I hope to have time to really spend on it this week, and get you my comments by mid week. Before I really look at it, can you please tell me where we are thinking about putting this language in the rules? Will it be under definitions? Or will we be combining it with 875-015-0035? I'm just curious since 875-015-0035 addresses telemedicine not really teletriage, I'm not sure if it would be cleaner to open this rule up for revision and address telehealth as a broad subject and include both telemedicine and teletriage topics under this one rule.

If we do discuss 875-015-0035 in entirety and add teletriage to it, we may also have an opportunity to discuss how to address the topic from our our last meeting with rurall farmers having less access to needed antibiotics due to increased need for established VCPR. I might be suggesting that we bite off more than we can chew, but I do feel that looking at rules in entirety do help keep the rules from getting too confusion.

Let me know where we think we are going.

Thanks,

Allison

Proposed language for teletriage/teleadvice April 2023 – Allison Lamb comments  
Veterinary teletriage or teleadvise

(Option 1) Veterinary teletriage or teleadvise/teleadvice means using electronic communication with a client ( poison control agency , animal CPR, other critical lifesaving treatment or advice ), to provide a timely assessment and decision as to whether to immediately refer a patient to a veterinarian for emergency or urgent care.

*AL: I like this definition; however it is broad and I don't know if it captures all that we need to when addressing teletriage and telehealth*

(Option 2) Teletriage or teleadvise/teleadvice means emergency animal care. including animal poison control services, for immediate, potentially life-threatening animal health situations (e.g. poison exposure mitigation; animal CPR instructions; other critical lifesaving treatment or advice). A veterinarian or a CVT may provide veterinary teleadvise or veterinary teletriage without the prior establishment of a veterinarian-client-patient relationship (VCPR).

*AL: This option, although I like that it spells out more situations where teletriage is used which I feel is important, also leaves it open to VCPRs not being present. I worry that we get into a situation where one might claim that they are participating in teletriage when they are actually practicing telemedicine.*

Teletriage does not include diagnosis or providing treatment. Diagnosis and treatment can only be delivered with a valid VCPR. Teletriage services must be delivered by a DVM or a CVT who is working under the supervision of a veterinarian. Person delivering teletriage must have a current veterinary or CVT license ( +/- Oregon license) Person delivering teletriage must have an established protocol for making referrals to local emergency services An expert with a poison control agency who is not a veterinarian may provide veterinary teletriage.

*AL: Adding this additional language to the previous language helps to clarify who and when someone can deliver teletriage, but I think we need to do a better job saying when teletriage steps into telemedicine. Also in the first sentence it says "lifesaving treatment" but then in this paragraph says "not providing treatment." I think we need to be really clear with what we are saying/not saying in these rules.*

March 20,2023  
Oregon Veterinary Medical Board  
800 NE Oregon Street, Suite 407  
Portland, Oregon 97232  
971-673-0224  
[ovmeb.info@oregon.gov](mailto:ovmeb.info@oregon.gov)

To The Oregon Veterinary Medical Board,

I am writing to you regarding the transfer of my license from California. I had contacted your department back in November of 2022 regarding the application process and requirements for my RVT license issued in California to be reviewed and considered for licensure in Oregon as a CVT.

In December of 2022, I completed the 3 page application process. The application states in 1B under the requirement for a non AVMA-accredited school "you are eligible for licensure if you have been employed as a licensed or registered veterinary or animal health technician or instructor of veterinary technology for a minimum of four years." In 2018, I completed the Veterinary Technician Program and was Certified as a Veterinary Technician. I was employed while Certified for three years until the passing of the VTNE in May of 2021 with a score of 494. Since then I had been actively licensed and employed in California for a year. While I have not been actively licensed as an RVT in California for a continuous period of four years, I have been actively Certified after the completion of the 4 year Alternative Route Program and licensed for a combined period of 4 years.

At the time I submitted the application proof of CE was not yet required, however I have recently provided updated hours following California's requirement of 20 hours as opposed to Oregon's of 15 hours.

Under the Code 875-030-0010 section 4) a graduate of a veterinary school that is not AVMA-accredited may be eligible for licensure as a CVT if the individual a)provides notarized documentation of graduation [...] or it's equivalent... b)pass the examinations referred to in OAR 875-030-0020; the examinations referred being the VTNE and the Oregon State Test (JPE/RDT). I have provided proof of completion from the Santa Rosa Junior College Veterinary Technician Program as well as proof of Certification from the program. I have provided my VTNE score of 494 as well as my license number 14943. I am asking that the Oregon Veterinary Medical Board view my passing score from the VTNE along with satisfactorily meeting the other requirements that I may be provided the opportunity to take the Jurisprudence (JPE/RDT) state test. I understand that for these tests the passing score of at least 95 percent for the Oregon Veterinary Practice Act and 100 percent for the Regional Disease Test. I pursued being a RVT in California with the goal of earning a VTS certification in Dermatology. I wish to continue to show my dedication to the occupation as a vet tech as well as the field overall. I am committed to my own growth as a vet tech within the specialization. I was given the opportunity to work at Oregon Veterinary Referral Associates, a specialty hospital that specializes in Dermatology. An opportunity like this was not available to me while in California. I understand that I may face a similar situation of not graduating from an AVMA program when it comes to the Veterinary Technician Specialist Application, but I can't move forward with that process until I am properly licensed in the State I am practicing in. There is a shortage of RVTs/CVTs and overall skilled technicians, I've seen this in California and since living in Oregon. I come with knowledge, skills, and a license permitted by the passing of the same test given to those coming from an AVMA-accredited program. I am

asking that my skills not be limited, that I may be given the opportunity to practice as a CVT and take the JPE/RDT for the State I now live in.

Thank you for your time and consideration. I am happy to provide any additional documentation or information if needed.

**Sent:** Saturday, May 20, 2023 10:16 AM

**Cc:** INFO OVMEB \* OVMEB <[ovmeh.info@ovmeh.oregon.gov](mailto:ovmeh.info@ovmeh.oregon.gov)>

**Subject:** Re: Oregon Vet Board Application: Board Meeting

To the Board Members of the Oregon Veterinary Medical Board,  
I went through the Santa Rosa Junior College's Veterinary Technician Certification program. The program is part of the Agriculture and Natural Resources Department. Upon completion of the program, students have fulfilled the educational requirements to be eligible to take the RVT board exam through the Alternative Route.

The program consists of a 23-semester unit requirement and 24 months (4416 hours) of outside practical experience working for a California licensed veterinarian. The program is typically completed over 3 or 4 semesters. Upon completion of the program, students are expected to be able to demonstrate competency and a clear understanding of how to complete tasks in a small animal veterinary hospital setting as well as understand directions from a veterinarian and be able to communicate these to a client. The program covers core topics such as Veterinary Anatomy and Terminology, Small Animal Disease Recognition and Transmission Control, Small Animal Veterinary Assistance and Nursing, Veterinary Surgical and Dental Assistance, Small Animal Veterinary Anesthesia, Veterinary Pharmacology and Medical Calculations, and Veterinary Laboratory and Imaging Procedures.

The Anatomy and Terminology course covers the anatomy and physiology of all major body systems in small animals with a focus on the companion animal species (canine and feline) while also incorporating veterinary medical terminology. Commonly used veterinary diagnostics and treatments are incorporated throughout the course pertaining to organ or body structure or function.

The Small Animal Disease Recognition and Transmission Control course focuses on the diseases of the companion animal species (dogs and cats). Disease recognition as well as transmission control, hospital sanitization and sterilization procedures are covered. Zoonoses awareness and protection is emphasized. The microbiology of bacterial, viral, and fungal infections as well as their relevance to chemical disinfectant handling is discussed.

The Small Animal Veterinary Assistance and Nursing course includes instruction on all aspects of veterinary surgery and dentistry with emphasis on the role of the technician. All aspects of the surgical experience are covered including surgical instrumentation, suturing techniques, application of bandages, splints and casts, patient preparation, surgical nursing and assisting, intravenous catheter placement, common surgical procedures, pain assessment and patient recovery. Dental care of companion, laboratory and large animals will be discussed including disease progression, dental prophylaxis and extractions.

I also took the Veterinary Technician Review and Board Exam Preparation Course prior to taking the VTNE.

Thank you for taking the time to review my application for license transfer and please let me know if there's anything further I can provide. I look forward to hearing from you and the Veterinary Medical Board.



## A Query from an AAVSB Member Board

### Title Protection

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On May 23, 2023, Pete Burns, Executive Director for the Oregon Veterinary Medical Examining Board asked, “Does your jurisdiction have veterinary technician (i.e., CVT, RVT, LVT) title protections in place or plans to do so?”

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#### **Arizona [Victoria Whitmore]**

CVT is not protected; no plans at this time --- may be a future proposal.

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#### **Arkansas [Cara Tharp]**

Yes, please see copy of statute below. The section re: title protection is highlighted.

#### **17-101-306. Veterinary technician, veterinary technologist, and veterinary technician specialist – Certification.**

**(a)** A person shall not assist in the practice of veterinary medicine as a veterinary technician or veterinary technologist without first applying for and obtaining a certification from the Veterinary Medical Examining Board and having his or her employment with a licensed veterinarian registered with the Veterinary Medical Examining Board.

#### **(b)**

**(1)** An applicant for certification as a veterinary technician or veterinary technologist in this state may make written application to the Veterinary Medical Examining Board showing that he or she is:

**(A)** A citizen of the United States or an applicant for citizenship; and

**(B)** A person of moral integrity and acceptable ethical standards.

**(2)** The application for certification as a veterinary technician or veterinary technologist in the State of Arkansas shall be written, signed by the applicant, and submitted to the Veterinary Medical Examining Board at least thirty (30) days before the examination, including without limitation the information set forth in this subdivision (b)(2), and the application shall be accompanied by a nonrefundable application fee established by the Veterinary Medical Examining Board:

**(A)** A current photograph of the applicant;

#### **(B)**

**(i)** A copy of the applicant's diploma or its equivalent from a college-level program accredited by the American Veterinary Medical Association.

- (ii)** If the applicant has not graduated at the time of application, an affidavit from the program certifying the applicant's ability to graduate may be accepted with a copy of the diploma or its equivalent submitted upon availability;
- (C)** A certified copy of college transcripts;
- (D)** A passing score on the National Board Examination or Veterinary Technician National Examination, or future equivalent, reported through the American Association of Veterinary State Boards or its successor; and
- (E)** A letter of recommendation signed by a veterinarian who is licensed in this state or another state, territory, or district of the United States and notarized.
- (3)** This section does not prevent the Veterinary Medical Examining Board from issuing a certification by endorsement to an applicant who:
  - (A)** Holds a certification, or its equivalent, as a veterinary technician or veterinary technologist in another state, territory, or district of the United States;
  - (B)** Is not a respondent in any pending or unresolved board action in any state, territory, or district of the United States;
  - (C)** Has a passing score on the National Board Examination or Veterinary Technician National Examination, or its future equivalent, reported through the American Association of Veterinary State Boards or its successor;
  - (D)** Submits a completed application, including without limitation a letter of recommendation that is:
    - (i)** Signed by a veterinarian;
    - (ii)** Notarized by a notary public; and
    - (iii)** Accompanied by a nonrefundable application fee established by the Veterinary Medical Examining Board; and
  - (E)** Signs a statement attesting that he or she has read and understands this chapter and the rules adopted by the Veterinary Medical Examining Board governing the practice of veterinary medicine in Arkansas.
- (c)**
  - (1)** A veterinary technician or veterinary technologist shall annually register his or her employment with the Veterinary Medical Examining Board, stating:
    - (A)** His or her name and current address;
    - (B)** The name and office address of both his or her employer and the supervising licensed veterinarian; and
    - (C)** Any additional information required by the Veterinary Medical Examining Board.
  - (2)** Upon any change of employment as a veterinary technician or veterinary technologist, the certification is inactive until:
    - (A)** New employment as a veterinary technician or veterinary technologist has been obtained; and
    - (B)** The Veterinary Medical Examining Board has been notified in writing of the new employment.
- (d)**



**(1)** A veterinary technician or veterinary technologist shall perform veterinary technology under the direction, supervision, and responsibility of the licensed veterinarian with whom he or she is employed.

**(2)** Supervision of a veterinary technician or veterinary technologist may be direct supervision, indirect supervision, or immediate supervision.

**(3)** A veterinarian who utilizes indirect supervision of a veterinary technician or veterinary technologist shall:

**(A)** Retain control of and authority over the care of the animal; and

**(B)** Review all recordkeeping and notes documented by the veterinary technician or veterinary technologist on the charts regarding the care of the animal.

**(e)** The Veterinary Medical Examining Board shall promulgate rules to establish the appropriate level of supervision under which a veterinary technician or veterinary technologist can perform veterinary technology.

**(f)**

**(1)** A licensed veterinarian using, supervising, or employing a veterinary technician or veterinary technologist is individually responsible and liable for the performance of the acts and omissions delegated to the veterinary technician or veterinary technologist.

**(2)** This subsection does not relieve a veterinary technician or veterinary technologist of any responsibility and liability for any of his or her own acts and omissions.

**(g)** A licensed veterinarian shall not establish a separate office or clinic in a location other than his or her regular office and place the separate office or clinic under the control or supervision of a veterinary technician or veterinary technologist.

**(h)**

**(1)** This section does not prevent a licensed veterinarian from utilizing the services of an employee to perform services not requiring the skill and judgment of a veterinary technician, veterinary technologist, or veterinary technician specialist, if the services performed by the employee are under the direct personal supervision of a licensed veterinarian.

**(2)** An employee described under subdivision (h)(1) of this section shall not be identified as a “veterinary technician”, “animal technician”, “technician”, “veterinary technologist”, “animal technologist”, “technologist”, or “veterinary technician specialist”.

**(i)** A veterinary technician, veterinary technologist, or veterinary technician specialist shall not receive a fee or other compensation for veterinary services or veterinary technology services other than the salary or other compensation paid to the veterinary technician, veterinary technologist, or veterinary technician specialist by the veterinary clinic, veterinary practice, or veterinarian by which he or she is employed.

**(j)**

**(1)** The Veterinary Medical Examining Board may issue additional certifications for a veterinary technician specialist.

**(2)** For an applicant seeking certification as a veterinary technician specialist, the Veterinary Medical Examining Board may require an initial application, application fee as determined by the Veterinary Medical Examining Board, renewal application, renewal application fee as

determined by the Veterinary Medical Examining Board, and any other relevant information determined by the Veterinary Medical Examining Board.

---

### **California [Jessica Sieferman]**

Yes, California does.

#### **4839.5.**

No person shall use the title “registered veterinary technician” or “veterinary technician,” or any other words, letters, or symbols, including, but not limited to, the abbreviation “R.V.T.,” with the intent to represent that the person is authorized to act as a registered veterinary technician, unless that person meets the requirements of Section 4839.

*(Added by Stats. 2010, Ch. 538, Sec. 17. (AB 1980) Effective January 1, 2011.)*

Often with these types of cases, they’re also offering and/or providing veterinary medicine services without being a licensed veterinarians or RVT. In those cases, we also charge this:

#### **4826.**

A person practices veterinary medicine, surgery, and dentistry, and the various branches thereof, when the person does any one of the following:

(a) Represents oneself as engaged in the practice of veterinary medicine, veterinary surgery, or veterinary dentistry in any of its branches.

(b) Diagnoses or prescribes a drug, medicine, appliance, application, or treatment of whatever nature for the prevention, cure, or relief of a wound, fracture, bodily injury, or disease of animals.

(c) Administers a drug, medicine, appliance, application, or treatment of whatever nature for the prevention, cure, or relief of a wound, fracture, bodily injury, or disease of animals, except where the medicine, appliance, application, or treatment is administered by a registered veterinary technician or a veterinary assistant at the direction of and under the direct supervision of a licensed veterinarian subject to Article 2.5 (commencing with Section 4836) or where the drug, including, but not limited to, a drug that is a controlled substance, is administered by a registered veterinary technician or a veterinary assistant pursuant to Section 4836.1. However, no person, other than a licensed veterinarian, may induce anesthesia unless authorized by regulation of the board.

(d) Performs a surgical or dental operation upon an animal.

(e) Performs any manual procedure for the diagnosis of pregnancy, sterility, or infertility upon livestock or Equidae.

(f) Collects blood from an animal for the purpose of transferring or selling that blood and blood component products to a licensed veterinarian at a registered premises, except where the blood is collected by a registered veterinary technician or veterinary assistant at the

direction of, and under the direct supervision of, a licensed veterinarian subject to Article 2.5 (commencing with Section 4836) or where the blood is collected by a registered veterinary technician or a veterinary assistant pursuant to Section 4836.5. For purposes of this section, “blood and blood component products” has the same meaning as defined in Section 4920.

(g) Uses any words, letters, or titles in such connection or under such circumstances as to induce the belief that the person using them is engaged in the practice of veterinary medicine, veterinary surgery, or veterinary dentistry. This use shall be prima facie evidence of the intention to represent oneself as engaged in the practice of veterinary medicine, veterinary surgery, or veterinary dentistry.

*(Amended by Stats. 2021, Ch. 752, Sec. 1. (AB 1282) Effective January 1, 2022.)*

---

### **Georgia [Adrienne Price]**

The Georgia Veterinary Practice Act does protect the title of licensed veterinary technician and any abbreviations that would lead one to believe the person is licensed as such; however, it does not specifically protect the acronym LVT [O.C.G.A. § 43-50-45(b)]. It does give the Board authority to do so by rule.

As a result, the Rules Committee of the Board recently worked on amendments to the rules to reflect that the use of the acronym LVT is acceptable in documentation.

---

### **Louisiana [Jared Granier]**

We currently do not and I don't believe it is on the Board's radar for any short term action at this time.

---

### **Maryland [Nathan Boan]**

Maryland does not. There has been some discussion but no firm plans or efforts yet.

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### **Minnesota [Dr. Julia Wilson]**

Minnesota does not yet license veterinary technicians. The bill to do so made it all the way through the Senate but not the House. The bill language does include title protection. The proposed acronym will be LVT.

---

### **Mississippi [Nancy Christiansen]**

The Mississippi Board has been approached about adding some title protections for our CVTs. Nothing in place yet.

---

### **Nevada [Jennifer Pedigo]**

I think it would be best described general title protection in that we have a licensed veterinary technician (LVT) title that is an individual providing documentation of sufficient

education, training, and testing. Additionally, Nevada restricts the use of the title to those that are credentialed/licensed in the state.

You may have already seen this from NAVTA (<https://drive.google.com/file/d/1o2g1-WckMsfaigazgnz7YpKe1YP8k-y/view>) but it has a lot good information from various states. I believe the NAVTA task force looked at practice acts as of November 2021.

---

### **New Brunswick [Dr. Nicole Jewett]**

The NBVMA does have title protection for RVTs

---

### **New Hampshire [Traci Weber]**

The New Hampshire Board of Veterinary Medicine recently adopted rules to Certify Veterinary Technicians. You can see the rules located here; [Board of Veterinary Medicine Laws and Rules | NH Office of Professional Licensure and Certification](#) under Recently Adopted.

---

### **New York [Stephen Boese]**

Yes-in NYS. Section 6709 of the Education Law states, “Only a person licensed under sections sixty-seven hundred eleven and sixty-seven hundred eleven-a of this article or exempted from its provisions by section sixty-seven hundred twelve shall practice veterinary technology or use the title "veterinary technician".”

---

### **North Carolina [Dr. Tod Schadler]**

RVT title protection is in the process of being added to our Practice Act.

---

### **Ohio [Theresa Stir]**

Ohio recognizes the registered veterinary technician in statute.

<https://codes.ohio.gov/ohio-revised-code/section-4741.01>

<https://codes.ohio.gov/ohio-revised-code/section-4741.19> (see paragraph C)

---

### **Oklahoma [Cathy Kirkpatrick]**

We do have title protections in place - Statutory

## **VETERINARY TECHNICIAN**

### **§ 698.21 PERSON AUTHORIZED TO ACT AS VETERINARY TECHNICIAN - PERSON NOT CONSIDERED TO BE VETERINARY TECHNICIAN**

A. Individuals certified as veterinary technicians pursuant to the Oklahoma Veterinary Practice Act may use the terms registered veterinary technician, veterinary technician, or abbreviations such as CVT, RVT, and VT.

B. It shall be unlawful for any person to use any recognized title, abbreviation, or sign to indicate that such person is a registered veterinary technician, unless that person has been

certified as having met the qualifications provided for in the Oklahoma Veterinary Practice Act. Such use shall be prima facie evidence of the intention to represent oneself as a registered veterinary technician.

### **§ 698.26 UNAUTHORIZED PRACTICE OF VETERINARY MEDICINE - PENALTIES**

A. It is unlawful for a registered veterinary technician, veterinary technologist, nurse, veterinary assistant or other employee to diagnose animal diseases, prescribe medical or surgical treatment, or perform as a surgeon and such acts shall constitute the unlawful practice of veterinary medicine as prohibited in Section 698.18 of this title.

B. It is unlawful for any person to assume the title of registered veterinary technician, or the abbreviation RVT, or any other words, letters, signs, or figures that might induce a person to believe that the person using the name is a registered veterinary technician, when in fact such person is not certified.

---

### **Saskatchewan [Dr. Greg Parks]**

*The Veterinarians Act, 1987* in Saskatchewan states :

(4) No person, other than a member shall:

- (a) use the word “veterinarian” or “veterinary” in combination with any other name, title, description, letter, symbol or abbreviation that represents expressly or by implication that he is a member; or
- (b) represent or hold out, expressly or by implication, that he is:
  - (i) entitled to engage in the practice of veterinary medicine; or
  - (ii) a member.

(4.1) Clause (4)(a) does not prohibit a veterinary technologist from using the title veterinary technologist.

Additionally our *Act* defines a veterinary technologist as follows:

m) “**veterinary technologist**” means a person:

- (i) who holds a certificate or document indicating that he or she has completed a course of formal study or training approved by the association;
  - (ii) whose name has been entered by the registrar on the current register of veterinary technologists; and
  - (iii) who, under the direction or supervision of a member named by the association, is permitted to perform the technical procedures set out in the bylaws of the association.
- 

### **Tennessee [Lyndsey Boone]**

Here is a link to the TN Boards, Policy on Vet Tech Nomenclature

[https://www.tn.gov/content/dam/tn/health/healthprofboards/vet/2020.06.10\\_Veterinary\\_LV\\_MT\\_Nomenclature\\_Policy\\_FINAL.pdf](https://www.tn.gov/content/dam/tn/health/healthprofboards/vet/2020.06.10_Veterinary_LV_MT_Nomenclature_Policy_FINAL.pdf)

And then an excerpt directly from our Rules on title protection:

1730-03-.16 (5) Use of Titles - Only a person who possesses a valid, unsuspended and unrevoked, Board issued license to practice as a veterinary technician is authorized to use the

title “Veterinary Technician,” “Licensed Veterinary Technician” or “Technician,” and to practice as a veterinary technician.

<https://publications.tnsosfiles.com/rules/1730/1730-03.20140821.pdf>

---

**Texas [Brittany Sharkey]**

Texas has Licensed Veterinary Technicians that are licensed and regulated by the Board.

---

**Vermont [Aprille Morrison]**

The Vermont Board does not license or register veterinary technicians.

---

**Virginia [Leslie Knachel]**

I would not term the following as “title protection.” However, the regulations indicate that the term “veterinary technician” means the individual is licensed by the board.

The [Laws Governing Veterinary Medicine](#) state the following:

**§ 54.1-3805. License required.**

No person shall practice veterinary medicine or as a veterinary technician in this Commonwealth unless such person has been licensed by the Board.

**§ 54.1-3806. Licensed veterinary technicians.**

The Board may license a veterinary technician to perform acts relating to the treatment or the maintenance of the health of any animal under the immediate and direct supervision of a person licensed to practice veterinary medicine in the Commonwealth or a veterinarian who is employed by the United States or the Commonwealth while actually engaged in the performance of his official duties. No person licensed as a veterinary technician may perform surgery, diagnose, or prescribe medication for any animal.

The [Regulations Governing the Practice of Veterinary Medicine](#) state the following:

18VAC150-20-10. Definitions.

The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"Veterinary technician" means a person licensed by the board as required by § 54.1-3805 of the Code of Virginia.

---

**Wisconsin [Trish Holstein]**

WV has title protection for registered veterinary technicians.

**From:** [gparks@svma.sk.ca](mailto:gparks@svma.sk.ca)  
**To:** "Lainie Franklin"  
**Cc:** [BURNS Peter J \\* OVMEB](#)  
**Subject:** RE: Question from an AAVSB Member Board - Title Protection  
**Date:** Thursday, May 25, 2023 8:27:28 AM  
**Attachments:** [image001.png](#)

---

Good morning,

The Veterinarians Act , 1987 in Saskatchewan states :

(4) No person, other than a member shall:

- (a) use the word “veterinarian” or “veterinary” in combination with any other name, title, description, letter, symbol or abbreviation that represents expressly or by implication that he is a member; or
- (b) represent or hold out, expressly or by implication, that he is:
  - (i) entitled to engage in the practice of veterinary medicine; or
  - (ii) a member.

(4.1) Clause (4)(a) does not prohibit a veterinary technologist from using the title veterinary technologist.

Additionally our *Act* defines a veterinary technologist as follows:

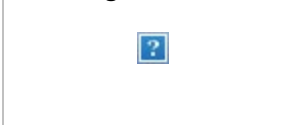
m) “**veterinary technologist**” means a person:

- (i) who holds a certificate or document indicating that he or she has completed a course of formal study or training approved by the association;
- (ii) whose name has been entered by the registrar on the current register of veterinary technologists; and
- (iii) who, under the direction or supervision of a member named by the association, is permitted to perform the technical procedures set out in the bylaws of the association.

Best,

Greg Parks DVM MPH MANZCVS  
Registrar and CEO  
Saskatchewan Veterinary Medical Association  
# 202-224 Pacific Avenue  
Saskatoon, SK S7K 1N9

SVMA logo



T 306 955 7863

[www.svma.sk.ca](http://www.svma.sk.ca)

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Your cooperation in this matter is appreciated.

---

**From:** Lainie Franklin <efranklin@aavsb.org>  
**Sent:** Tuesday, May 23, 2023 1:17 PM  
**To:** Lainie Franklin <efranklin@aavsb.org>  
**Cc:** peter.j.burns@ovmeb.oregon.gov  
**Subject:** Question from an AAVSB Member Board - Title Protection

Pete Burns, Executive Director for the Oregon Veterinary Medical Examining Board has a question for you.

Does your jurisdiction have veterinary technician (i.e., CVT, RVT, LVT) title protections in place or plans to do so?

Please take a moment and **reply to all**, with your response. Pete and I will receive the updates and I'll compile those soon.

Do you have a question for your fellow Executive Directors/Registrars? Just let me know!

*Lainie Franklin, MPA*

Member Services Concierge  
American Association of Veterinary State Boards  
12101 W. 110<sup>th</sup> Street, Suite 300  
Overland Park, KS 66210-3935  
Phone: 1.816.301.6855  
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Fax: 1.816.931.1604  
Web: [www.aavsb.org](http://www.aavsb.org)  
[Facebook: https://www.facebook.com/aavsb](https://www.facebook.com/aavsb)  
[Twitter: https://twitter.com/aavsb](https://twitter.com/aavsb)

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**From:** [Kerrie E. Shahan](#)  
**To:** [Lainie Franklin](#)  
**Cc:** [BURNS Peter J \\* OVMEB](#)  
**Subject:** FW: Compiled responses - Question from an AAVSB Member Board - Title Protection  
**Date:** Friday, June 9, 2023 10:55:11 AM  
**Attachments:** [20230523 Question from Oregon - Title Protection.pdf](#)

---

Aloha Lainie,

Sorry I'm late with my response. Hawaii does have title protection for veterinary technicians which is found in Hawaii Revised Statute chapter 472.

**HRS §472-2 Practice of veterinary technology; qualifications; registration required.**

(a) No person shall represent, announce, or advertise oneself, publicly or privately, as a veterinary technician or registered veterinary technician, or shall append the letters "RVT" or "VT" or affix any other words, letters, abbreviations, or insignia to the person's name indicating or implying that the person is engaged in the practice of veterinary technology, unless the person:

- (1) Registers the person's name and business address biennially with the department in a manner prescribed by the department; and
- (2) Meets the qualifications of section 472-3.

Mahalo,

**Kerrie Shahan** (she/her)

**Executive Officer**

Department of Commerce & Consumer Affairs  
Professional & Vocational Licensing Division  
*Hearing Aid Dealers and Fitters Program*  
*Veterinary Technician Program*  
*Board of Veterinary Medicine*  
*Board of Optometry*  
*Contractors Licensing Board*  
*Board of Barbering and Cosmetology*

Phone: 808-586-2705

Post: PO Box 3469, Honolulu, HI 96801

Web: <http://cca.hawaii.gov/pvl>

---

**From:** Lainie Franklin <[efranklin@aavsb.org](mailto:efranklin@aavsb.org)>

**Sent:** Friday, June 9, 2023 7:26 AM

**To:** Lainie Franklin <[efranklin@aavsb.org](mailto:efranklin@aavsb.org)>

**Cc:** [peter.j.burns@ovmeb.oregon.gov](mailto:peter.j.burns@ovmeb.oregon.gov)

**Subject:** [EXTERNAL] Compiled responses - Question from an AAVSB Member Board - Title Protection

**CAUTION:** This email originated from outside of Hawaii State Gov't / DCCA. Do not click links or open attachments unless you recognize the sender and are expecting the link or attachment.

Happy Friday!

Attached is the compiled document of responses to Pete Burns' question on Title Protection.

If you would like to add your response, please "reply to all" and I'll update the document soon.

Do you have a question for your fellow Executive Directors/Registrars? Just let me know!

*Lainie Franklin, MPA*

Member Services Concierge

American Association of Veterinary State Boards

12101 W. 110<sup>th</sup> Street, Suite 300

Overland Park, KS 66210-3935

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Facebook: <https://www.facebook.com/aavsb>

Twitter: <https://twitter.com/aavsb>

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March 30, 2023

To the members of the Oregon Veterinary Medical Examining Board:

This letter is to request board consideration for the addition of title protection for Veterinary Technicians in the state of Oregon. The veterinary technician profession has long been challenged by a lack of cohesion and standards in the United States. As a result, the title of “Veterinary Technician” is used inconsistently and, oftentimes, incorrectly, and suffers from a lack of clarity and understanding, both within the veterinary world and among consumers.

Title protection helps to establish professional credibility, safeguard the integrity of the profession, and ensure that only qualified individuals can provide specialized veterinary care. Title protection is crucial for Veterinary Technicians for several reasons.

First, it ensures that the public can trust the quality of care provided by these professionals. Title protection helps to ensure that those using the title 'Veterinary Technician' have met rigorous educational and examination requirements, guaranteeing a high standard of care.

Moreover, title protection helps to maintain the integrity of the profession. When people use the title 'Veterinary Technician' without having the proper qualifications, it undermines the work of those who have earned it and can lead to misrepresentation and confusion for the public.

In 2022, NAVTA completed a survey of current veterinary technicians that was conducted to learn about the profession’s feelings and experiences surrounding title protection for veterinary technicians. The survey was distributed to veterinary professionals through multiple modalities, including veterinary-specific social media sites, the NAVTA newsletter, and NAVTA member email, in which 3,775 responded.

Survey findings included two-thirds of Oregon respondents inaccurately believed that the state of Oregon already restricts the title “Veterinary Technician,” “licensed / registered / certified Veterinary Technician,” or “licensed veterinary medical technician” to those licensed through the state law. This indicates a general lack of understanding of the practice act as currently written and supports the need for additional clarifying language.

The OVTAA board strongly believes that creating title protection for Veterinary Technicians is necessary to improve the retention and engagement of CVTs in Oregon. Of equal importance, title protection is necessary to elevate the standard of care in veterinary medicine while providing the consistency which allows improved public understanding of this essential profession. We look forward to working with you on creating protection for Veterinary Technicians in the state of Oregon.

Respectfully,

*The OVTAA Board of Directors*

Sarah Harris CVT, VTS (ECC)

Tiah Schwartz CVT

Sarah Ostrin CVT, VTS (Phys. Rehab)

Rachel Beck CVT, PMP

Daniel Rost CVT

Chantal Farauo CVT, CVPP

Mel Lueck CVT

*Enclosed/attached-* Proposed language and supporting document- 2022 NAVTA Title Protection Survey Report and AVMA article for background.

**Proposed language:**

Only a person who possesses a valid, unsuspended, and unrevoked, Board-issued license to practice as a veterinary technician is authorized to use the title Veterinary Technician, Certified Veterinary Technician, Credentialed Veterinary Technician, Veterinary Technologist, Veterinary Technician Specialist, or abbreviations: VT, CVT, VTS, or Vet Tech.

Definition of Veterinary Technician Specialist: A person who holds a credential in good standing from a National Association of Veterinary Technicians in America approved academy.

**Violation:**

ORS 875-011-0010

(34) Making any statement, claim, or advertisement that the person is a veterinary specialist or board certified unless they are certified by an American Veterinary Medical Association- recognized Veterinary Specialty Organization or a National Association of Veterinary Technicians in America- recognized Veterinary Specialty Organization.

ORS 875-030-0045

(27) Making any statement, claim or advertisement that the person is a Veterinary Technician unless they are licensed by the state of Oregon, having met criteria as required in OAR 875-030-0010

Misrepresentation of oneself either to the employer or public, and/or misrepresentation of an employee to the public.

**Fee/Fines:**

An individual or employer misrepresenting a veterinary technician is a Class C misdemeanor or civil penalty by the Board.

[NAVTA Title Protection Survey Report](#)

[AVMA Article](#)

**From:** [Jennifer Pedigo](#)  
**To:** [Lainie Franklin](#)  
**Cc:** [BURNS Peter J \\* OVMEB](#)  
**Subject:** RE: Question from an AAVSB Member Board - Title Protection  
**Date:** Wednesday, May 24, 2023 8:44:07 AM

---

Good morning,

I think it would be best described general title protection in that we have a licensed veterinary technician (LVT) title that is an individual providing documentation of sufficient education, training, and testing. Additionally, Nevada restricts the use of the title to those that are credentialed/licensed in the state.

You may have already seen this from NAVTA (<https://drive.google.com/file/d/1o2g1-WckMsfpaigazgnz7YpKe1YP8k-y/view>) but it has a lot good information from various states. I believe the NAVTA task force looked at practice acts as of November 2021.

Best,

Jennifer Pedigo  
Executive Director  
State of Nevada Board of Veterinary Medical Examiners  
4600 Kietzke Ln. Suite O-265  
Reno, NV 89502  
Phone: (775) 688-1788  
Fax (775) 688-1808  
[vetbinfo@vetboard.nv.gov](mailto:vetbinfo@vetboard.nv.gov)

---

**From:** Lainie Franklin <[efranklin@aavsb.org](mailto:efranklin@aavsb.org)>  
**Sent:** Tuesday, May 23, 2023 12:17 PM  
**To:** Lainie Franklin <[efranklin@aavsb.org](mailto:efranklin@aavsb.org)>  
**Cc:** [peter.j.burns@ovmeb.oregon.gov](mailto:peter.j.burns@ovmeb.oregon.gov)  
**Subject:** Question from an AAVSB Member Board - Title Protection

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Does your jurisdiction have veterinary technician (i.e., CVT, RVT, LVT) title protections in place or plans to do so?

Please take a moment and **reply to all**, with your response. Pete and I will receive the updates and I'll compile those soon.

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*Lainie Franklin, MPA*

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## **OREGON VETERINARY MEDICAL EXAMINING BOARD DELEGATION OF AUTHORITY**

The following tasks and functions are delegated to the staff of the Oregon Veterinary Medical Examining Board, under the Executive Director's supervision, in accordance with ORS 686.240:

### **General:**

1. Executive Director is responsible for all administrative matters related to the operation of the board, the agency, and board staff.
2. Executive Director is responsible for all financial matters related to the operation of the board office except for approving the board's biennial operating budget.
3. Authorize Executive Director to exercise managerial oversight of board employees, accounting, and payroll.
4. Authorize staff to make reasonable efforts to collect all monies owed using appropriate practices in the management and collection of accounts receivable, to include debt collection procedures for all liquidated and delinquent accounts as outlined in ORS 293 and the Oregon Accounting Manual, Chapter 35.
5. Authorize staff to respond to public records request. (ORS 192)
6. Authorize staff to complete surveys.
7. Authorize Executive Director and authorized staff to respond to lawfully issued subpoenas.
8. Authorize staff to review and approve Continuing Education (CE).
9. Authorize staff to perform inspections.

### **Licensing:**

1. To review, process, and determine if an application is complete.
2. Review, process, and verify credentials related to license or registration type through primary source verification for all applications. Refer for investigation, as necessary.
3. Use publicly available databases to verify criminal history. If criminal history is found, ask applicant or licensee to provide arrest and court records.
4. Authorize staff to perform background checks using public available databases throughout the licensure cycle.
5. Review and process applications. Refer applications for investigation if a record or discipline is self-reported on the application, identified on the background check results, or identified on an inspection report.

**OREGON VETERINARY MEDICAL EXAMINING BOARD  
DELEGATION OF AUTHORITY**

6. Respond to requests regarding eligibility for examinations or licensure. Approve requests by the National Board of Veterinary Medical Examiners (NBVME) for examinations.
7. Send delinquent notices to licensees and registrants when applicable.
8. To issue a license or registration to applicants who satisfy all requirements.

**Compliance:**

1. Authorize staff to review, assess, and act on applicant's or licensee's/registrant's reported state, US Territory or federal disciplinary action.
2. Authorize staff to approve the issuance of a license for an applicant or licensee that discloses arrest(s) that have not led to a conviction and do not have a nexus to practice.
3. Authorize staff to review and close case for licensees that discloses conviction(s) that are not a felony and do not have a nexus to practice.
4. Authorize staff to review complaints and ensure that all complaints of alleged violations, are fully investigated and that necessary action is taken for board review.
5. Authorize Executive Director issue subpoenas.
6. Authorize staff to initiate a case for licensees that are non-compliant with order sanctions or failure to comply with staff requests.
7. Authorize staff to draft, review and issue Notices and Orders.
8. Authorize Executive Director to refer hearing requests to the Department of Justice General Counsel Division to initiate hearing process with the Office of Administrative Hearings.
9. Authorize Executive Director to execute default orders.
10. Authorize Executive Director to execute consent orders within parameters voted upon by Board.
11. Authorize Executive Director to respond to record requests for information from another government agency, pursuant to conditions of ORS 676.177.
12. All applicants, licensees, registrants, and unregistered or unlicensed activity that is not approved in this document, will be provided to the board for review.
13. Authorize staff to provide appropriate deadline extensions to requests.



875-030-0050

Practice Limitations for Individuals not Certified as Veterinary Technicians

- (1) Persons who are not licensed by this Board as CVTs may, under the supervision of a licensed veterinarian, perform all acts that a CVT may perform except:
- (2) Induce anesthesia, except to place an endotracheal tube to establish an airway in emergencies (OAR 875-030-0040(2)(b)(E));
- (3) Operate X-ray equipment unless the person has completed 20 hours training in radiograph safety (2)(b)(G) as required by the Oregon State Health Division (OAR 333);
- (4) Perform dental extractions (2)(e)(G);
- (5) Administer rabies vaccine (2)(e)(H); and
- (6) Perform any duties under indirect supervision as defined in OAR 875-005-0005(20)(c).

DIVISION 40  
CERTIFIED EUTHANASIA TECHNICIANS

875-040-0000

Certified Euthanasia Technicians (CETs)

(1) Only licensed veterinarians, Certified Euthanasia Technicians (CETs), and Certified Veterinary Technicians (CVTs) under the supervision of an Oregon licensed Veterinarian, may perform euthanasia or administer sodium pentobarbital. Under ORS 609.405, lethal injection of sodium pentobarbital or other substance(s) approved by the Oregon State Veterinary Medical Examining Board are the only approved methods for the euthanasia of injured, sick, homeless domestic pets and other animals by an animal control agency, humane society, or subcontractor thereof.

(2) For the euthanasia process, CETs may administer only the following drugs:

- (a) Acepromazine (DEA Non-scheduled).
- (b) Butorphanol (DEA Schedule IV).
- (c) Diazepam/Midazolam (DEA Schedule IV).
- (d) Ketamine (DEA Schedule III).
- (e) Medetomidine (DEA Non-scheduled).
- (f) Sodium pentobarbital (DEA Schedule II).
- (g) Tiletamine and Zolazepam (Telazol) (DEA Schedule III).
- (h) Xylazine (DEA Non-scheduled).

(3) CETs shall administer sedation and euthanasia drugs in conformance with any of these following guidelines:

- (a) The Association of Shelter Veterinarians (ASV) Guidelines for Standards of Care in Animal Shelters (Second Edition – December 2022).
- (b) American Veterinary Medical Association (AVMA) Guidelines on Euthanasia of Animals (2020 edition). And;
- (c) AVMA Guidelines on Depopulation of Animals (2019 edition).

(4) The references above shall be used in conjunction with sedations protocols created by a veterinarian licensed with the OVMEB.

(5) Unprofessional conduct for CETs includes, but is not limited to:

- (a) Handling animals in an inhumane manner or with unnecessary force.
- (b) Theft or diversion of legend or controlled drugs.
- (c) Improper use of sedation or euthanasia drugs.
- (d) Non-compliance with euthanasia protocols or guidelines.
- (e) Non-compliance with DEA regulations.
- (f) Non-compliance with proper drug storage.
- (g) Performing euthanasia or sedation outside the scope of the CET certification.
- (h) Any conduct described in ORS 686.130.
- (i) Gross negligence in the performance of duties as a CET.
- (j) A pattern, practice, or continuous course of negligence, ignorance, incompetence or inefficiency in practice as a CET. The incidents may be dissimilar.
- (k) Diagnosing, prescribing, or performing other activities that may be done only by a licensed veterinarian.
- (l) Failure to respond or appear as requested, without good cause, within the time required by the Board.
- (m) Failure to comply with any rule or order of the Board or as required by OAR 875-005-0010.
- (n) Altering or falsifying medical records.
- (o) Making a misrepresentation or omission on a certificate renewal application.

- (p) Violations of veterinary laws in other states that would constitute violations of Oregon law.
  - (q) Violations of other laws that relate to the practice of veterinary medicine.
  - (r) Failure without good cause to notify the Board within 15 days of a change in personal or business address and contact information.
  - (s) Providing false, misleading, or deceptive information to the Board.
  - (t) Failure to report unprofessional or prohibited conduct as described in ORS 676.150.
- Statutory/ Other Authority: ORS 686.210, ORS 686.120, ORS 686.130, ORS 686.132, ORS 686.150, ORS 686.160, ORS 606.110
- Statutes/ Other Implemented: ORS 475, ORS 686
- History:VMEB7-2021, amend filed 08/24/2021, effective 09/01/2021;VMEB9-2018, minor correction filed 08/01/2018, effective 08/01/2018;VMEB1-2012, f. & cert. ef. 6-25-12

875-040-0010

#### Certification of Technicians

- (1) Applicants must first apply as a CET Intern in order to obtain the training required for a permanent CET certificate. CET Interns may not act independently but only under the immediate supervision of an Oregon CET or Oregon licensed veterinarian. The intern certificate will expire within one year of issue date and does not renew.
  - (a) The Board May conduct background checks on applicants and certificate holders. Applicants and certificate holders shall be required to provide any police and court records for any arrests and convictions.
  - (b) The applicant must be an employee or a volunteer at a humane society or animal control agency.
  - (c) Pay an initial certification fee of \$25.00.
- (2) Upon completion of the following training , the intern may apply for a permanent certificate.
- (3) In order for a person to become a permanent Certified Euthanasia Technician (CET), an application must include the following, within the last 12 months:
  - (a) 15 hours of documented instruction, observation and hands-on euthanasia training done with an Oregon licensed DVM or Oregon CET. The University of Florida Euthanasia by injection Part 1 may be included in the 15 hours required and can count for up to 10 hours of the 15 hours; or
  - (b) Completion of an OVMEB approved euthanasia course. Part 1 and Part 2 of the University of Florida Euthanasia by injection course is an approved euthanasia course. Other courses may be individually approved with at least 90 days advance written permission of the OVMEB; or
  - (c) Oregon CETs outside the 12-month window of reinstatement, and Oregon licensed CVTs, may request to challenge the training requirements. In order to successfully challenge the training requirements applicants must successfully pass a 30-question test provided by the OVMEB. Applicants are allowed one attempt to challenge the training requirements. Applicants who complete the challenge test with a passing score of at least 90% shall be exempt from the training requirements.
  - (d) CET interns must exhibit proficiency when assessed within their organization performing euthanasia of domestic pets and other animals when observed by an Oregon licensed veterinarian. Submission of the following must occur prior to CET certification:
    - (i) An evaluation verification form signed by the veterinarian who witnessed euthanasia proficiency; and
    - (ii) Documentation of satisfactorily completing the training outlined in 3a-c above.
  - (e) Required evaluations and documentation of training may be submitted by the intern, the supervising veterinarian, or the agency the intern is an employee of, or volunteers with.
- (4) Upon separation from an organization, a CET will not euthanize animals until the person is employed by or is a volunteer at another approved agency, completed specific training in association with that agency, and the CET has notified the Board.

- (a) Certificates are valid only for the agency at which the person is currently working.
- (b) The CET will notify the Board within 10 days of their separation from their organization.
- (5) If a CET is reemployed or volunteers within 12 months of holding a CET license, the CET may apply to the Board for reactivation of their certification. After a 12-month lapse, the person must become recertified as described in (1).
- (6) CET certificate holders will need to be recertified every 5 years in the form of a proficiency assessment done by an Oregon licensed veterinarian and submitted to the Board with their certificate renewal.
- (7) All CET certificates expire on October 31st of each year and are in effect for one calendar year.
- (8) Certificate renewal fee is \$15.
- (9) Annual verification of employment or volunteer status must come directly from the organization the CET is employed or volunteers with.
- (10) Failure to renew or provide verification of employment or volunteer status will result in a lapse and euthanasia duties may not be conducted until the certificate is reinstated.
- (11) The Board may suspend, revoke, or otherwise discipline a CET Intern or permanent CET certificate holder for unprofessional conduct or non-compliance with applicable Board statutes and rules.

CET rules questions:

1. Is the language in 875-040-0000(1) in any other statues anywhere that would prevent us from adding the CVT information?
2. Does the board feel that the training requirements should be outlined within the rules or is this information better served in a protocol?
3. Does the board feel that University of Florida Part 1 equal 10 hours? More? Less? University of Florida lists Part 1 as 14 CE hours.
4. If University Part 1 or Part 2 is done by an CET applicant prior to their intern certificate being issued, would we want to put a timeframe on this training being able to be applied to their training? Is this better served in a protocol/case by case/outlined in these rules?
5. Are there other courses that the board has already approved- should we include them here? How will we list or include approved courses moving forward? Would they need to be RACE approved, or how/who would approve them?
6. The 30-question training would we want a bank of questions to rotate questions in and out?
7. Should there be a section for CVTs working with veterinarians in shelters to be able to bypass the intern application? How would we confirm that the CVT was working with a veterinarian to get the training and not being given oversight by a CET for this training, since they would need to be under the direction of a DVM to perform any euthanasia before they are a full-fledged CET? Is it worth creating this work around or is the challenge test enough to not limit CVTs in shelters to become a CET quickly, while still providing the training that they need, and not inadvertently putting CVTs in positions to not have a DVM present during training.
8. Is there interest in having CET's sign off on an intern's proficiency or just DVMs?