

Reg/Leg Report
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Multidisciplinary Advisory Committee (MDC) – The MDC met on April 18 in Oakland. All members except Diana Woodward Hagle were present. After approving the minutes, the first order of business was to discuss the issue of Extended Functions for RVTs. The Veterinary Medical Board (VMB) had asked CaRVTA to provide a list of tasks and justifications for those tasks. CaRVTA provided a list of tasks that are not currently restricted to RVTs but, in the opinion of its sub-committee, should be restricted to an RVT. MDC member David Johnson, RVT suggested that the regulations could be amended to state that a veterinarian should not delegate tasks to veterinary assistants that require the skills and knowledge of an RVT. CaRVTA representative Nancy Ehrlich, RVT suggested that the MDC consider allowing RVTs to apply splints or casts under Indirect Supervision, particularly to facilitate animal rehabilitation. The MDC ultimately decided to create a sub-committee to review the proposed Extended Functions tasks, including splinting and casting.

The MDC reviewed an analysis by legal counsel regarding RVT transporting controlled substances. The issue arose after the VMB approved adding language that will allow RVTs to administer pain medication in an emergency when a veterinarian is not present. Legal counsel stated that as long as the RVT is operating under the Direct or Indirect Supervision of a veterinarian with a DEA permit, it is legal for the RVT to transport controlled drugs.

The MDC also discussed if there was a clear line between sedation and anesthesia. This issue arose from a discussion of RVTs in shelters needing to sedate animals that were in serious discomfort, like having their mouth caught in a cage door, when a veterinarian was not present. Legal counsel opined that as long as it was the intent of the RVT to sedate and not to anesthetize, it was OK. The discussion included the need to amend Secs. 2069 and 4840.5 which allow RVTs to perform procedures in an emergency. The current definition of emergency says the emergency must be “life-threatening”. It was suggested that the language should be amended to include “serious bodily injury”.

Erica Hughes, the Executive Director of the State Humane Association of California, reported that they were still gathering data about whether there are sufficient numbers of veterinarians to acquire Premise Permits for all the shelters in the state. She is hoping to be able to provide a report at the next meeting.

A new law went into effect on January 1 that explicitly states that only a veterinarian or RVT may compound drugs for animal use (outside of a pharmacy). This is a new RVT only job task. The MDC reviewed proposed regulations that define compounding and the procedures that must be followed. Compounding includes any of the following:

1. Altering the dosage form or delivery system of a drug
2. Altering the strength of a drug
3. Combining components or active ingredients
4. Preparing a compounded drug preparation from chemicals or bulk substances

Compounding does not include reconstituting a drug or splitting or crushing a tablet, opening a capsule or adding flavoring for palatability. The regulations will be sent to the VMB for their approval.

A new proposed law, known as “Lizzie’s Law” requiring veterinarians to inform clients about dispensed drugs was discussed. SB 546 would require veterinarians to provide clients with written and/or verbal information about potential side effects. It was clarified by the sponsor of the bill that it is

intended to effect only medications dispensed in an outpatient setting and not for drugs used for in-patients.

Minimum Standards for Spay & Neuter Clinics was discussed. After much conversation, it was decided that the MDC would no longer pursue separate minimum standards for Spay & Neuter Clinics, but would leave it up to the hospital inspectors to pick the appropriate requirements for the particular practice setting. If the practice disagrees with a decision of the inspector, they can appeal the decision to VMB staff.

The MDC voted to recommend that veterinarians seeking reciprocity must acquire the required experience in the US, US territory or Canada and that Board Certification was not a substitute for work experience.

The next meeting of the MDC will be on July 25, in Sacramento.

The Veterinary Medical Board (VMB) met on April 19-20 in Oakland. All members were present. While discussing the minutes, CaRVTA President Allyne Moon, RVT suggested that CaRVTA was supposed to be included in the Shelter Task Force. Staff agreed to review the webcast.

The VMB re-appointed Dr. Jeff Pollard to the MDC and Dr. Lane Johnson to the Diversion Committee.

The next order of business was a discussion of pending regulations. Staff announced that the RVT education regulation package will be presented to the VMB at its next meeting in July. The VMB voted to approve the amended Disciplinary Guidelines and the Consumer Protection Regulations and to send both to the Department of Consumer Affairs.

Dr. Jon Klingborg reported on the activities of the MDC. The VMB accepted the report and agreed that the definition of emergencies in Secs. 2069 and 4840.5 should be amended to allow RVTs to administer pain medication and/or sedation to prevent serious bodily injury.

Animal Physical Rehabilitation (APR) was the next topic of discussion. The VMB reviewed the recommendations from the APR Task Force. The VMB approved the first 5 recommendations. (see footnote*) The VMB amended the 6th recommendation to allow the supervising veterinarian to determine the appropriate level of supervision for an RVT regardless of the setting. They also rejected the 7th recommendation regarding veterinary assistants, deferring to the current regulations, which allow a veterinarian to delegate the performance of APR to a veterinary assistant. The VMB voted to amend the 8th recommendation to require that licensed Physical Therapists with advanced certification in APR provide APR only in a Veterinary Premise under Direct Supervision or under Indirect Supervision in a large animal range setting. The rationale was that small animals receiving APR are more likely to be older and have concurrent medical conditions while large animals receiving APR are usually younger horses engaged in sporting events. The VMB delegated staff to determine if the new APR rules could be implemented by regulation or would require legislation.

Current rules allow veterinary school graduates to work as RVTs indefinitely. The VMB voted to amend the regulations to limit the time and to allow veterinary school graduates to apply for the RVT exam. The proposed legislation would give the graduates until 1/19 to discontinue working as an RVT unless they become certified as an RVT.

Just who needs a Veterinary Assistant Controlled Substance Permit (VACSP) was discussed. It was agreed that Animal Control Officers, Euthanasia Technicians and Humane Officers are exempt. It was also agreed that receptionists who hand out medications to clients and boarding staff who administer prescribed medications to animals also do not need a VACSP. It was reported that it is currently taking about 8 weeks to process a VACSP application and that the VMB has received about 3000 applications so far.

Board Staff Reports were next. Jennifer Loreda, RVT, RVT Member of the VMB, reported that there is a new RVT Specialty – the Academy of Physical Rehabilitation Veterinary Technicians. She also reported that the American Association of State Boards (AAVSB) is working on the foreign RVT graduate issue. **Ethan Mathes, Administrative Programs Coordinator, reported that they are expecting the results of the fee audit to be ready for the July meeting.** He also reported that the VMB is working on retroactively fingerprinting licensees who do not have fingerprints on file. He stated that the VMB expects to compare the California RVT exam to the national exam (VTNE) in January to see if there are any subject areas that need to be added to the California exam.

Mr. Mathes reported that due to an error in the state’s computer database, the number of RVTs currently licensed in California has been underreported. The current number is actually 7994, not 5900 as had been previously reported. He also reported that they now have the pass rates on the VTNE available for individual schools, which are available on-line in the agenda items from the meeting, but not yet on the web site. The California pass rate for the VTNE was 63% for the Nov/Dec administration. The overall pass rate for the California RVT Exam for the current administration (Jan-June 2017) is 89%, up from 60% for the last administration (July-Dec 2016). The published Test Plan has been corrected, which probably explains the increase in pass rate.

CaRVTA representative Nancy Ehrlich, RVT, asked the VMB to put the issue of the RVT licensing examinations on a future agenda. CaRVTA is recommending that California eliminate the VTNE and go back to using a comprehensive California RVT Exam since the cost of the 2 examinations has become really expensive. California RVT candidates could always choose to take the VTNE if they planned to work out-of-state. The VMB agreed to put the issue on a future agenda.

The next meeting of the VMB will be on July 26-27 in Sacramento.

***Actions Taken by the Veterinary Medical Board’s Animal Rehabilitation Task Force**

June 20, 2016 Meeting

At this meeting, the following motions were approved:

1. Animal Physical Rehabilitation is defined as the treatment of injury or illness to address pain and improve function by means of physical corrective treatment.
2. Animal Physical Rehabilitation does not include relaxation, recreational or wellness modalities, including but not limited to, massage, athletic training or exercise.
3. Any proposed changes to existing law and regulations are not an attempt to restrict or amend section 2038 of the California Code of Regulations regarding the provision of Musculoskeletal Manipulation modalities.
4. Prior to performing or authorizing Animal Physical Rehabilitation, a veterinarian shall establish a valid veterinarian-client-patient relationship as defined in sections 2032.1 or 2032.15 of the California Code of Regulations.

October 4, 2016 Meeting

At this meeting, the following motions were approved:

1. Veterinarians have sufficient education and training to provide Animal Physical Rehabilitation.
2. Registered Veterinary Technicians (RVTs) may provide Animal Physical Rehabilitation under the direct supervision of a veterinarian unless in a range setting in which case the veterinarian may provide the appropriate level of supervision.
3. Veterinary Assistants may provide Animal Physical Rehabilitation under the direct supervision of a veterinarian or an RVT.

February 2, 2017

At the third and final meeting, this motion was approved: California licensed physical therapists with advanced certification in Animal Physical Rehabilitation (with such certification to be defined by the Veterinary Medical Board and Physical Therapy Board working cooperatively) may provide animal physical rehabilitation under the degree of supervision to be determined by the veterinarian who has established a veterinarian-client-patient relationship, on a veterinary premises or an Animal Physical Rehabilitation premises (as defined in regulation by the Veterinary Medical Board and the Physical Therapy Board working cooperatively), or a range setting.