

October 13, 2022
Board Room 4
9:00 a.m.

Agenda
Virginia Board of Veterinary Medicine
Full Board Meeting

Call to Order – Tregel Cockburn, D.V.M., Board President

Page 1

- Welcome
- Emergency Egress Procedures
- Introduction of New Board Members
- Mission Statement

Ordering of Agenda – Dr. Cockburn

Public Comment – Dr. Cockburn

The Board will receive all public comment related to agenda items at this time. The Board will not receive comment on any regulatory process for which a public comment period has closed or any pending or closed complaint or disciplinary matter.

Approval of Minutes – Dr. Cockburn

Pages 2-15

March 3, 2022 – Full Board Meeting (pages 2-5)
March 15, 2022 – Conference Call (page 6)
July 28, 2022 – Formal Hearing (pages 7-9)
July 29, 2022 – Formal Hearing (pages 10-13)
August, 22, 2022 – Conference Call (pages 14-15)

Agency Director’s Report - David E. Brown, D.C., Director

Legislative/Regulatory Report – Erin Barrett

Pages 16-37

- Petitions for Rulemaking
 - Licensure by endorsement requirements for veterinary technicians submitted by Amber Lee (pages 16-20)
 - Removal of clinical practice requirement for licensure by endorsement submitted by Mark Cushing (pages 21-23)
- Guidance Document Review
 - 150-8 Disposition of Cases Involving Practicing on an Expired License or Registration (pages 24-28)
 - 150-9 Medical Recordkeeping (pages 29-37)
- Regulatory Reduction Process/2022 Periodic Review Implementation

10:00 a.m. Consideration of Agency Subordinate Recommendations – Dr. Cockburn/Kelli

Moss

- **Bryan Auten, Veterinarian**
- **Slate River Veterinary Clinic**

Board Counsel’s Report – Charis Mitchell

President’s Report – Dr. Cockburn

Board of Health Professions’ Report – Steven Karras, D.V.M.

Staff Reports**Pages 38-40**

- Executive Director's Report – **Leslie Knachel /Ms. Moss**
 - Statistics (pages 38-39)
 - Outreach Information (page 40)
 - [Current Board Meeting Calendar](#)
 - American Association of Veterinary State Boards Update
 - Discipline Report

New Business – Dr. Cockburn**Pages 41-45**

Officer Elections (pages 41-45)

Next Meeting – Dr. Cockburn/Ms. Knachel**Page 46**

- 2023 Board Meeting Calendar (page 46)
- March 28, 2023

Meeting Adjournment – Dr. Cockburn

This information is in **DRAFT** form and is subject to change.

MISSION STATEMENT

Our mission is to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public.

Call to Order

The March 3, 2022, Virginia Board of Veterinary Medicine (Board) meeting was called to order at 9:10 a.m. at the Department of Health Professions (DHP), Perimeter Center, 9960 Mayland Drive, 2nd Floor, Board Room 2, Henrico, Virginia 23233.

Presiding Officer - Tregel Cockburn, DVM, President

Members Present

Jeffery Newman, DVM, Secretary
Ellen Hillyer, DVM
Steve Karras, DVM
Thomas Massie, DVM
Mary Yancey Spencer, JD, Citizen Member

Members Attending Electronically

Autumn Halsey, LVT, Vice-President was approved by the Board President to participate in the board meeting via electronic communication, telephone in this case, because she was unable to attend due to a personal matter. Ms. Halsey was out of the state attending an equine competition.

Staff Present

Leslie L. Knachel, Executive Director
Kelli Moss, Deputy Executive Director
Elaine Yeatts, Senior Policy Analyst DHP
Erin Barrett, Senior Policy Analyst DHP
Yetty Shobo, Deputy Director, DHP Healthcare Workforce Data Center
Charis Mitchell, Assistant Attorney General, Board Counsel
Laura Jackson, Board Analyst
Laura Paasch, Licensing & Operations Administrative Specialist

Public Present

Katie Hellebush, Virginia Veterinary Medical Association (VVMA)
Talya George, VVMA
Pattie Seeger, Virginia Association of Licensed Veterinary Technicians (VALVT)
Noah Meyers, VALVT

Establishment of Quorum

With six out of seven members present in the Henrico, VA location and one participating via electronic communication, a quorum was established.

Mission Statement

Dr. Cockburn read the Department of Health Professions' mission statement.

Ordering of Agenda

Dr. Cockburn opened the floor to any edits or corrections regarding the agenda. Hearing none, the agenda was accepted as presented.

Public Comment

There were no requests to provide public comment.

Approval of Minutes

Dr. Cockburn opened the floor to any additions or corrections regarding the draft minutes of the October 21, 2021, full Board meeting. Hearing none, the minutes were approved as presented.

Agency Director's Report

Ms. Knachel informed the Board that Dr. Brown was not able to join the meeting due to attending the General Assembly and that Dr. Allison-Bryan, Chief Deputy Director retired as of March 1, 2022. Ms. Knachel recognized the board members with expiring terms as of June 30, 2022. She thanked Dr. Hillyer and Ms. Spencer for their service on the Board and to the Commonwealth. In addition, Ms. Knachel recognized Ms. Yeatts' pending retirement and her service to DHP and the Commonwealth. Ms. Erin Barrett will replace Ms. Yeatts as of April 1, 2022.

Legislative and Regulatory Report

Ms. Yeatts reported that the regulatory amendment for acceptance of the PAVE Certificate for Veterinary Technicians becomes effective on April 1, 2022.

Ms. Yeatts provided a report on the 2022 Session of the General Assembly.

Ms. Yeatts provided information on the periodic review of the regulations.

Dr. Karras made a motion to continue Chapter 20 of the *Regulations Governing the Practice of Veterinary Medicine* with amendments, which was seconded by Dr. Massie. The motion carried unanimously.

Ms. Yeatts and Ms. Knachel reviewed the proposed changes to Guidance Document 150-15 Disposition of Routine Inspection Violations and 150-21 Frequently Asked Questions about Reporting to the Prescription Monitoring Program.

Dr. Newman made a motion to adopt Guidance Document 150-15 Disposition of Routine Inspection Violations and 150-21 Frequently Asked Questions about Reporting to the Prescription Monitoring Program as presented, which was seconded by Dr. Hillyer. The motion carried unanimously.

Discussion Items

2021 Veterinary Medicine Healthcare Workforce Data Center Report

Dr. Yetty Shobo provided a presentation on the 2021 Veterinarian & Veterinary Technician Healthcare Workforce Data Center Reports.

Continuing Education audit for January 1, 2021 to December 31, 2021

Ms. Knachel asked the Board whether it wanted to conduct a CE audit for the period of January 1, 2021 to December 31, 2021.

Dr. Karras made a motion, which was seconded by Dr. Newman to conduct a CE audit for the period of January 1, 2021 to December 31, 2021. The motion carried unanimously.

Veterinary Establishment Inspection Committee Report

Dr. Cockburn reported that the Veterinary Committee met in February 11, 2022. The Inspection Committee is working on regulatory amendments to present to the Board.

Board Counsel Report

Ms. Mitchell had no information to report to the Board.

President's Report

Dr. Cockburn had no information to report to the Board.

Board of Health Professions' Report

Dr. Karras reported that the Board of Health Professions met on December 2, 2021.

Staff Reports

Ms. Knachel stated that the most recent veterinary medicine licensure renewal ended on December 31, 2021. She provided information on board statistics and outreach activities, which included presentations to the veterinary students at the Virginia-Maryland College of Veterinary Medicine, and to the memberships of the VVMA and the VALVT.

Ms. Knachel provided an update on the American Association of Veterinary State Boards' activities to include the annual meeting scheduled for September in Charlotte, NC.

Ms. Moss provided an update on open and closed discipline cases.

Next Meeting

The next full board meeting is scheduled for July 28, 2022.

Adjournment

With no objection, Dr. Cockburn adjourned the meeting at 10:40 a.m.

**VIRGINIA BOARD OF VETERINARY MEDICINE
POSSIBLE SUMMARY SUSPENSION TELEPHONE CONFERENCE CALL
MARCH 15, 2022**

CALL TO ORDER: Pursuant to §54.1-2408.1(A) of the Code of Virginia, a telephone conference call of the Virginia Board of Veterinary Medicine was called to order on March 15, 2022 at 11:04 a.m., to consider a possible summary suspension, after a good faith effort failed to assemble a quorum of the board in person.

PRESIDING: Tregel Cockburn, DVM, Chairperson

MEMBERS PRESENT: Autumn Halsey, LVT
Ellen Hillyer, DVM
Steve Karras, DVM
Thomas Massie, DVM
Mary Yancey Spencer, JD

QUORUM: With 6 members of the Board participating in the telephone conference, a quorum is established.

STAFF PRESENT: Leslie Knachel, Executive Director
Kelli Moss, Deputy Executive Director
Heather Pote, Senior Discipline Case Specialist
Emily Tatum, Senior Adjudication Specialist

OTHERS PRESENT: Erin Weaver, Assistant Attorney General

BOARD COUNSEL: Charis Mitchell, Assistant Attorney General

Ayman Salem, Veterinarian
License No. 0301-201313
Case Nos. 210961, 212327, 213511,
213789, 214580:

Ms. Weaver presented a summary of the evidence that the continued practice of Dr. Salem may present a substantial danger to the health and safety of the public.

DECISION: Dr. Karras moved to suspend the license of Ayman Salem to practice veterinary medicine pending a formal administrative hearing. The motion was seconded by Ms. Halsey and carried unanimously.

ADJOURNMENT: The meeting was adjourned at 11:51 a.m.



Leslie Knachel, Executive Director

DRAFT

**VIRGINIA BOARD OF VETERINARY MEDICINE
FORMAL HEARING MINUTES
DEPARTMENT OF HEALTH PROFESSIONS
BOARD ROOM 2
HENRICO, VA
July 28, 2022**

CALL TO ORDER: The meeting of the Virginia Board of Veterinary Medicine (Board) was called to order at 9:05 a.m., on July 28, 2022, at the Department of Health Professions (DHP), Perimeter Center, 9960 Mayland Drive, 2nd Floor, Board Room 2, Henrico, Virginia.

PRESIDING OFFICER: Tregel M. Cockburn, D.V.M., President

MEMBERS PRESENT: Ellen Hillyer, D.V.M., M.P.H.
Steve Karras, D.V.M.
Thomas Massie, D.V.M.

QUORUM: With four members of the Board present, a quorum was established.*

STAFF PRESENT: Kelli Moss, Deputy Executive Director
Heather Pote, Senior Discipline Case Administrator

BOARD COUNSEL: Charis A. Mitchell, Assistant Attorney General

COURT REPORTER: Andrea Pegram, Court Reporting Services, LLC

PARTIES ON BEHALF OF THE COMMONWEALTH: Christine Corey, Adjudication Specialist, Administrative Proceedings Division

COMMONWEALTH WITNESSES: Jermial Gray, Senior Investigator

RESPONDENT WITNESSES: None

OTHERS PRESENT: Taryn Singleton, L.V.T., Discipline Case Administrator
Julia Bennett, Deputy Executive Director, Administrative Proceedings Division

*On August 1, 2022, the Board was notified that a new board member had been appointed on July 11, 2022 to succeed Dr. Hillyer, whose term expired on June 30, 2022. Because the Board was unaware of this new appointment, a quorum was not established in order to conduct this hearing.

MATTER SCHEDULED:

**Sarah Carter, Veterinary Technician Applicant
Case: 215924**

Ms. Carter appeared before the Board in accordance with a Notice of Formal Hearing dated June 23, 2022. She was not represented by counsel. The Board received evidence from the Commonwealth and from Ms. Carter regarding allegations in the Notice.

CLOSED SESSION:

Dr. Karras moved that the Board convene a closed meeting pursuant to § 2.2-3711(A)(27) of the Code of Virginia (“Code”) for the purpose of deliberation to reach a decision in the matter of **Sarah Carter, Veterinary Technician Applicant**. Additionally, he moved that Ms. Mitchell and Ms. Pote attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Board in its deliberations. The motion was seconded by Dr. Massie and carried unanimously.

RECONVENE:

Dr. Karras moved that the Board certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Dr. Massie and carried unanimously.

The Board reconvened in open session pursuant to § 2.2-3712(D) of the Code.

DECISION:

Dr. Karras moved to approve Ms. Carter’s application for licensure as a Veterinary Technician. The basis for this decision will be set forth in a final Board Order that will be sent to Ms. Carter at her address of record. The motion was seconded by Dr. Hillyer and carried unanimously.

This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions and decision of this quorum of the Board.

ADJOURNMENT: The Formal Hearing adjourned at 11:18 a.m.

Tregel M. Cockburn, D.V.M., President

Leslie L. Knachel, M.P.H., Executive Director

DRAFT

DRAFT

**VIRGINIA BOARD OF VETERINARY MEDICINE
FORMAL HEARING MINUTES
DEPARTMENT OF HEALTH PROFESSIONS
BOARD ROOM 2
HENRICO, VA
July 28 and 29, 2022**

CALL TO ORDER: The meeting of the Virginia Board of Veterinary Medicine (Board) was called to order at 12:05 p.m. on July 28, 2022, at the Department of Health Professions (DHP), Perimeter Center, 9960 Mayland Drive, 2nd Floor, Board Room 2, Henrico, Virginia.

PRESIDING OFFICER: Tregel M. Cockburn, D.V.M., President

MEMBERS PRESENT: Steve Karras, D.V.M.
Thomas Massie, D.V.M.
Jeffery Newman, D.V.M.

QUORUM: With four members of the Board present, a quorum was established.

STAFF PRESENT: Kelli Moss, Deputy Executive Director
Heather Pote, Senior Discipline Case Administrator

BOARD COUNSEL: Charis A. Mitchell, Assistant Attorney General

COURT REPORTER: Andrea Pegram, Court Reporting Services, LLC

PARTIES ON BEHALF OF THE COMMONWEALTH: Emily Tatum, Senior Adjudication Specialist, Administrative Proceedings Division
Christine Corey, Adjudication Specialist, Administrative Proceedings Division

COMMONWEALTH WITNESSES: Jermial Gray, Senior Investigator, DHP
Scott Dillon, Senior Investigator, DHP
Curt Shade
Sienna Church, Veterinarian
Jacob Bogart
Richard Malament
Renee Addison, Veterinarian
Taylor Wilcher
Hannah Plaughter, Veterinarian

RESPONDENT WITNESS: Ayman Salem, Veterinarian

OTHERS PRESENT: Shirin Zin Faqiri
Taryn Singleton, L.V.T., Discipline Case Administrator
Tsering Cole
Greer Peacock
Diane Powers, DHP
Sue Bartos, DHP
Randi B. Hagi
Erin T. Weaver

MATTER SCHEDULED: **Ayman Salem, Veterinarian**
License No: 0301-201313
Case Nos: 210960, 212327, 213511, 213789, 214580

Dr. Salem appeared before the Board in accordance with a Notice of Formal Hearing dated May 9, 2022. He was represented by Michael Thorsen, Esq. The Board received evidence from the Commonwealth and from Dr. Salem and his counsel regarding the allegations in the Notice.

RECESS: Dr. Cockburn recessed the hearing at 3:59 p.m. on July 28, 2022, to be reconvened on July 29, 2022.

July 29, 2022

CALL TO ORDER: The meeting of the Virginia Board of Veterinary Medicine (Board) was called to order at 9:02 a.m. on July 29, 2022. Dr. Cockburn stated for the record that all of the same board members, staff members, and the parties were in attendance as were at the first day of the hearing.

COMMONWEALTH WITNESSES: Scott Dillon, Senior Investigator, DHP
Thomas Burgess, Veterinarian
Joseph Sorensen
Garrett Smith, Veterinarian

RESPONDENT WITNESS: Ayman Salem, Veterinarian

OTHERS PRESENT: Shirin Zin Faqiri
Diane Powers, DHP

Sue Bartos, DHP
Randi B. Hagi
Erin T. Weaver
Crissy Sorensen

CLOSED SESSION:

Dr. Karras moved that the Board convene a closed meeting pursuant to § 2.2-3711(A)(27) of the Code of Virginia (“Code”) for the purpose of deliberation to reach a decision in the matter of **Ayman Salem, Veterinarian**. Additionally, he moved that Ms. Mitchell and Ms. Moss attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Board in its deliberations. The motion was seconded by Dr. Massie and carried unanimously.

RECONVENE:

Dr. Karras moved that the Board certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Dr. Massie and carried unanimously.

The Board reconvened in open session pursuant to § 2.2-3712(D) of the Code.

DECISION:

Dr. Karras moved to continue the indefinite suspension of the license of Dr. Salem for not less than two years, and that the basis for this decision will be set forth in a final Board Order that will be sent to Dr. Salem at his address of record. The motion was seconded by Dr. Newman and carried unanimously.

This decision shall be effective upon the entry by the Board of a written Order stating the findings, conclusions and decision of this quorum of the Board.

ADJOURNMENT:

The Formal Hearing adjourned at 4:08 p.m. on July 29,
2022.

Tregel M. Cockburn, D.V.M., President

Leslie L. Knachel, M.P.H., Executive Director

DRAFT

**VIRGINIA BOARD OF VETERINARY MEDICINE
CONFERENCE CALL FOR CONSIDERATION OF POSSIBLE RESOLUTION OF
CASE 215924
AUGUST 22, 2022 AT 1:00 P.M.
DRAFT MINUTES**

- CALL TO ORDER:** Pursuant to §54.1-2400(13) of the Code of Virginia (“Code”), a telephone conference call of the Virginia Board of Veterinary Medicine was held on August 22, 2022, at 1:01 p.m. at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive; Suite 300, Henrico, VA 23233 to consider a settlement proposal in a matter referred for formal proceedings.
- PRESIDING:** Tregel Cockburn, D.V.M, Chairperson
- MEMBERS PRESENT:** Richard Bailey, D.V.M
Steve Karras, D.V.M
Thomas Massie, D.V.M.
- STAFF PRESENT:** Leslie Knachel, Executive Director
Kelli Moss, Deputy Executive Director
Heather Pote, Sr. Discipline Case Specialist
- BOARD COUNSEL:** Charis Mitchell, Assistant Attorney General
- Sarah Fae Carter, Veterinary Technician Applicant
Case 215924:** Ms. Moss presented a possible resolution for Case 215924, which is a matter referred for formal proceedings.
- CLOSED SESSION:** Dr. Karras moved that the Board convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code for the purpose of deliberation to reach a decision in the matter of Case 215924. Additionally, he moved that Ms. Mitchell and Ms. Knachel attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Board in its deliberations. The motion was seconded by Dr. Bailey and passed unanimously.
- RECONVENE:** Dr. Karras moved that the Board certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Dr. Bailey and passed unanimously.

DECISION:

Dr. Karras moved that the Board ratify the Consent Order signed by Sarah Fae Carter, Veterinary Technician Applicant and grant the Veterinary Technician license in lieu of convening a formal hearing to resolve Case 215924. The motion was seconded by Dr. Massie and carried unanimously.

ADJOURNMENT:

The conference call was adjourned at 1:09 p.m.

DRAFT

Agenda Item: Consideration of periodic review to amend 18VAC150-20-121

Included in your agenda package are:

- Petition for rulemaking to amend 18VAC150-20-121 to remove (2)
- Comments received in response to petition
- 18VAC150-20-121

Action needed:

- Motion to either:
 - Take no action, specifying why; or
 - Initiate rulemaking

FAX COVER SHEET

3/23/2022

FROM: AMBER LEE, DVM

MOUNTAIN VIEW HUMANE

CHRISTIANSBURG, VA 24073

PHONE (540) 382-0222

FAX: (540) 260-3233

EMAIL: ALEE@MVHCLINIC.ORG

TO: COMMONWEALTH OF VIRGINIA

BOARD OF VETERINARY MEDICINE

PETITION FOR RULE-MAKING

TOTAL PAGES INCLUDING COVER: 2



COMMONWEALTH OF VIRGINIA

Board of Veterinary Medicine

9960 Mayland Drive, Suite 300
Richmond, Virginia 23233-1463

(804) 367-4468 (Tel)
(804) 527-4471 (Fax)

Petition for Rule-making

The Code of Virginia (§ 2.2-4007) and the Public Participation Guidelines of this board require a person who wishes to petition the board to develop a new regulation or amend an existing regulation to provide certain information. Within 14 days of receiving a valid petition, the board will notify the petitioner and send a notice to the Register of Regulations identifying the petitioner, the nature of the request and the plan for responding to the petition. Following publication of the petition in the Register, a 21-day comment period will begin to allow written comment on the petition. Within 90 days after the comment period, the board will issue a written decision on the petition.

Please provide the information requested below. (Print or Type)

Petitioner's full name (Last, First, Middle initial, Suffix,)

Lee, Amber, J.

Street Address

525 Gold Leaf Drive

Area Code and Telephone Number

(240) 475-0462

City

Christiansburg

State

VA

Zip Code

24073

Email Address (optional)

alee@mvhclinic.org

Fax (optional)

(540) 260.3233

Respond to the following questions:

1. What regulation are you petitioning the board to amend? Please state the title of the regulation and the section/sections you want the board to consider amending.

18VAC150-20-121 Requirements for Licensure by endorsement for veterinary technicians, section d.

2. Please summarize the substance of the change you are requesting and state the rationale or purpose for the new or amended rule.

I am petitioning to remove this requirement. This requirement is burdensome for those who have been out of the workforce for an extended period of time due to circumstances such as childbearing. The requirement for 16 hours of CE makes up for the lack of recent clinical experience. Removing this requirement will allow many qualified technicians to become licensed in the state of Virginia.

3. State the legal authority of the board to take the action requested. In general, the legal authority for the adoption of regulations by the board is found in § 54.1-2400 of the Code of Virginia. If there is other legal authority for promulgation of a regulation, please provide that Code reference.

§ 54.1-2400 Part 1.

Signature:

Amber Lee

Date:

3/23/2022

Public Petition for Rulemaking: 363

Commenter	Title	Comment	Date/ID
Lauren W.	Petition support	This amendment would definitely benefit the LVT's who have been home or out of the field for a period of time and wanting to transition back to coming in to a clinic. Also, it would reduce the stress of the current LVT's by increasing numbers so clinics aren't so short on these necessary roles. Of course, the credentials will still be in place, but make it easier for individuals looking to get back to work. Allowing this change can only benefit Virginia's veterinary staff overall.	4/25/22 12:36 pm CommentID:121859
Meghan B.	Full support of this petition	The points made by the petitioner are valid--we need to recognize that licensed technicians can be exceptional at their work without having performed consistent clinical work for two out of the last four years. Given the impact that the pandemic has had on our workforce, this rule seems excessive and unnecessary. In addition, this rule makes it more difficult for mothers to take time off to be with their children and then return to the workforce without repercussion.	4/25/22 6:45 pm CommentID:121865
Leslie Sinn	Petition Support	It makes sense to maintain credential requirements but to allow people to transition in and out of employment depending on the various stages of their careers and lives. This change is most likely to benefit working mothers and allow a smooth return to the workforce when they are ready and able to do so.	4/29/22 6:36 am CommentID:121888
Prof. Michael Moates, MA, QBA, LBA, LMHP	Opposition and Alternative Proposal	<p>I admire the petitioners request. I am also open to hearing more if she can counter my question.</p> <p>The question is: The animal sciences are constantly changing. In an order to keep animals safe, the provider should have been regularly engaged in the practice. How do you keep animals safe by removing this requirement?</p> <p>I think the board should consider decreasing the requirement from <u>2-years</u> to <u>6 months of the last 5 years.</u></p>	5/6/22 12:03 pm CommentID:121920
Saravuth Lerkaram	Petition Support	<p>I completely agree with statements previously made in support of the changes and do not have anything further to add at the moment.</p> <p>-Dr. Lerkaram</p>	5/8/22 6:28 pm CommentID:121938
Deepak devdaliya	blogging adda	I completely agree with statements previously made in support of the changes and do not have anything further to add at the moment.	5/19/22 4:52 pm CommentID:122071

Virginia Administrative Code
Title 18. Professional And Occupational Licensing
Agency 150. Board of Veterinary Medicine
Chapter 20. Regulations Governing the Practice of Veterinary Medicine

18VAC150-20-121. Requirements for licensure by endorsement for veterinary technicians.

In its discretion, the board may grant a license by endorsement to an applicant who is licensed, certified, or registered to practice as a veterinary technician or a veterinary nurse in another jurisdiction of the United States, provided that the applicant:

1. Holds at least one current and unrestricted license, certification, or registration issued by the regulatory entity in another jurisdiction of the United States and that he is not a respondent in any pending or unresolved board action in any jurisdiction;
2. Provides documentation of having been regularly engaged in clinical practice as a licensed, certified, or registered veterinary technician or veterinary nurse for at least two of the past four years immediately preceding application;
3. Has received a degree in veterinary technology or veterinary nursing from a college or school accredited by the AVMA or the CVMA or has passed the Veterinary Technician National Examination approved by the AAVSB or any other board-approved national board examination for veterinary technology with a score acceptable to the board;
4. Provides documentation of completion of at least 16 hours of continuing education requirements during the preceding four years;
5. Submits the application fee specified in [18VAC150-20-100](#) and a complete application on a form obtained from the board;
6. Signs a statement attesting that the applicant has read, understands, and will abide by the statutes and regulations governing the practice of veterinary medicine in Virginia; and
7. Has committed no acts that would constitute a violation of § [54.1-3807](#) of the Code of Virginia.

Statutory Authority

§ [54.1-2400](#) of the Code of Virginia.

Historical Notes

Derived from Virginia Register [Volume 26, Issue 4](#), eff. November 25, 2009; amended, Virginia Register [Volume 34, Issue 1](#), eff. October 25, 2017; [Volume 37, Issue 26](#), eff. October 1, 2021.

Website addresses provided in the Virginia Administrative Code to documents incorporated by reference are for the reader's convenience only, may not necessarily be active or current, and should not be relied upon. To ensure the information incorporated by reference is accurate, the reader is encouraged to use the source document described in the regulation.

As a service to the public, the Virginia Administrative Code is provided online by the Virginia General Assembly. We are unable to answer legal questions or respond to requests for legal advice, including application of law to specific fact. To understand and protect your legal rights, you should consult an attorney.

Agenda Item: Consideration of periodic review to amend 18VAC150-20-120

Included in your agenda package are:

- Petition for rulemaking to amend 18VAC150-20-120 to remove (2)
- 18VAC150-20-120

Staff note: No public comment was received.

Action needed:

- Motion to either:
 - Take no action, specifying why; or
 - Initiate rulemaking



COMMONWEALTH OF VIRGINIA Board of Veterinary Medicine

9960 Mayland Drive, Suite 300
Richmond, Virginia 23233-1463

(804) 367-4468 (Tel)
(804) 527-4471 (Fax)

Petition for Rule-making

The Code of Virginia (§ 2.2-4007) and the Public Participation Guidelines of this board require a person who wishes to petition the board to develop a new regulation or amend an existing regulation to provide certain information. Within 14 days of receiving a valid petition, the board will notify the petitioner and send a notice to the Register of Regulations identifying the petitioner, the nature of the request and the plan for responding to the petition. Following publication of the petition in the Register, a 21-day comment period will begin to allow written comment on the petition. Within 90 days after the comment period, the board will issue a written decision on the petition.

Please provide the information requested below. (Print or Type)

Petitioner's full name (Last, First, Middle initial, Suffix,)

Mark Cushing

Street Address

13802 N Scottsdale Rd. Suite 151-25

Area Code and Telephone Number

971-344-1347

City

Scottsdale

State

AZ

Zip Code

85254

Email Address (optional)

Mark@animalpolicygroup.com

Fax (optional)

Respond to the following questions:

1. What regulation are you petitioning the board to amend? Please state the title of the regulation and the section/sections you want the board to consider amending.

18VAC150-20-120. Requirements for licensure by endorsement as a veterinarian.

...

2. Provides documentation of having been regularly engaged in clinical practice for **at least two of the past four years immediately preceding application;**

2. Please summarize the substance of the change you are requesting and state the rationale or purpose for the new or amended rule.
Request: Remove language requiring a licensed veterinarian to have been engaged in clinical practice for at least 2 of the past 4 years.

Purpose: The current rule imposes a condition of services regardless of previous passage of the NAVLE and no criminal record, professional malfeasance, or blemishes on the veterinarian's existing license. Lifting this restriction helps to address the veterinary shortage and reduces the administrative barriers for relocating of veterinary professionals. Recent graduates of accredited veterinary colleges can take the NAVLE and be licensed ~~without any prior experience, as they should be.~~ Experienced veterinarians are required to re-take the NAVLE if they have taken over 2 of the last 4 years off. 20 states honor the freedom of a licensed veterinarian to gain a license in another state, either to move or expand practice opportunities. These states do not require a conditional specified period of service in another state. This disproportionately affects women in the field who go on maternity leave, and anyone who takes leave for medical reasons. Other professional fields in Virginia allow for reciprocity; Virginia provisionally admits lawyers from other states who reciprocate for Virginia lawyers.

3. State the legal authority of the board to take the action requested. In general, the legal authority for the adoption of regulations by the board is found in § 54.1-2400 of the Code of Virginia. If there is other legal authority for promulgation of a regulation, please provide that Code reference.

Signature:

Date: 6/3/2022

Virginia Administrative Code
Title 18. Professional And Occupational Licensing
Agency 150. Board of Veterinary Medicine
Chapter 20. Regulations Governing the Practice of Veterinary Medicine

18VAC150-20-120. Requirements for licensure by endorsement as a veterinarian.

The board may, in its discretion, grant a license by endorsement to an applicant who is licensed to practice veterinary medicine in another jurisdiction of the United States, provided that the applicant:

1. Holds at least one current, unrestricted license in another jurisdiction of the United States and is not a respondent in any pending or unresolved board action in any jurisdiction;
2. Provides documentation of having been regularly engaged in clinical practice for at least two of the past four years immediately preceding application;
3. Provides documentation of completion of at least 30 hours of continuing education requirements during the preceding four years;
4. Submits the application fee specified in [18VAC150-20-100](#) and a complete application on a form obtained from the board;
5. Signs a statement attesting that the applicant has read, understands, and will abide by the statutes and regulations governing the practice of veterinary medicine in Virginia; and
6. Has committed no acts that would constitute a violation of § [54.1-3807](#) of the Code of Virginia.

Statutory Authority

§ [54.1-2400](#) of the Code of Virginia.

Historical Notes

Derived from VR645-01-1 § 2.2, eff. June 10, 1987; amended, Virginia Register Volume 6, Issue 26, eff. October 31, 1990; [Volume 15, Issue 5](#), eff. December 23, 1998; [Volume 19, Issue 9](#), eff. March 1, 2003; [Volume 26, Issue 4](#), eff. November 25, 2009; [Volume 34, Issue 1](#), eff. October 25, 2017.

Website addresses provided in the Virginia Administrative Code to documents incorporated by reference are for the reader's convenience only, may not necessarily be active or current, and should not be relied upon. To ensure the information incorporated by reference is accurate, the reader is encouraged to use the source document described in the regulation.

As a service to the public, the Virginia Administrative Code is provided online by the Virginia General Assembly. We are unable to answer legal questions or respond to requests for legal advice, including application of law to specific fact. To understand and protect your legal rights, you should consult an attorney.

Agenda Item: Revision of Guidance Document 150-8

Included in your agenda package are:

- Existing Guidance Document 150-8
- Revised Guidance Document 150-8

Staff Note: Due to the older format of existing Guidance Document 150-8, it could not be edited in the current version of Word. The document appears entirely new, but no substantive changes were made, only formatting changes.

Action needed:

- Motion to adopt revisions to Guidance Document 150-8

VIRGINIA BOARD OF VETERINARY MEDICINE**DISPOSITION OF CASES INVOLVING PRACTICING ON AN EXPIRED LICENSE OR REGISTRATION**

The Board adopted the following guidelines for resolution of cases of practicing with an expired license or registration:

Practicing with an Expired Individual License**Veterinarian**

(Veterinarian-in-Charge may be subject to disciplinary action for allowing unlicensed persons to practice)

Cause	Possible Action
First offense; 31 days or less	Advisory Letter
First offense; 32 days to one year	Confidential Consent Agreement
First offense; more than one year	Consent Order; Reprimand or may result in the Board holding an informal conference
Second offense; one or more days	Consent Order; Monetary Penalty of \$1000 or may result in the Board holding an informal conference

Veterinary Technician/Equine Dental Technician

Cause	Possible Action
First offense; 31 days or less	Advisory Letter
First offense; 32 days to one year	Confidential Consent Order
First offense; more than one year	Consent Order; Reprimand or may result in the Board holding an informal conference
Second offense; one or more days	Consent Order; Monetary Penalty of \$1000 or may result in the Board holding an informal conference

Practicing with an Expired Veterinary Establishment Registration**Veterinary Establishment**

Cause	Possible Action
First offense; 31 days or less	Advisory letter
First offense; 32 days to one year	Confidential Consent Agreement
First offense; more than one year	Consent Order; Reprimand or may result in the Board holding an informal conference
Second offense; one or more days	Consent Order; Monetary Penalty of \$1000 or may result in the Board holding an informal conference

Veterinarian-in-Charge

Cause	Possible Action
First offense; 31 days or less	Advisory Letter
First offense; 32 days to one year	Confidential Consent Agreement

First offense; more than one year	Consent Order; Reprimand or may result in the Board holding an informal conference
Second offense; one or more days	Consent Order; Monetary Penalty of \$1000 or may result in the Board holding an informal conference

Board of Veterinary Medicine
Disposition of Cases Involving Practicing on an
Expired License or Registration

The Board adopts the following guidelines for resolution of cases involving practicing with an expired license or registration:

Veterinarian*

Cause	Possible Action
First offense, 31 days or less	Advisory Letter
First offense, 32 days to one year	Confidential Consent Agreement
First offense, more than one year	Consent Order; reprimand. Board may choose to hold an informal conference in the alternative.
Second offense, one or more days	Consent Order; monetary penalty of \$1,000. Board may choose to hold an informal conference in the alternative.

*Veterinarian-in-Charge may be subject to disciplinary action for allowing unlicensed persons to practice.

Veterinary Technician/Equine Dental Technician

Cause	Possible Action
First offense, 31 days or less	Advisory Letter
First offense, 32 days to one year	Confidential Consent Agreement
First offense, more than one year	Consent Order; reprimand. Board may choose to hold an informal conference in the alternative.
Second offense, one or more days	Consent Order; monetary penalty of \$1,000. Board may choose to hold an informal conference in the alternative.

Practicing with an expired Veterinary Establishment Registration

A. Veterinary Establishment

Cause	Possible Action
First offense, 31 days or less	Advisory Letter
First offense, 32 days to one year	Confidential Consent Agreement
First offense, more than one year	Consent Order; reprimand. Board may choose to hold an informal conference in the alternative.
Second offense, one or more days	Consent Order; monetary penalty of \$1,000. Board may choose to hold an informal conference in the alternative.

B. Veterinarian-in-Charge

Cause	Possible Action
First offense, 31 days or less	Advisory Letter
First offense, 32 days to one year	Confidential Consent Agreement
First offense, more than one year	Consent Order; reprimand. Board may choose to hold an informal conference in the alternative.
Second offense, one or more days	Consent Order; monetary penalty of \$1,000. Board may choose to hold an informal conference in the alternative.

Agenda Item: Revision of Guidance Document 150-9

Included in your agenda package are:

- Existing Guidance Document 150-9
- Revised Guidance Document 150-9

Staff Note: Due to the formatting of Guidance Document 150-9, it could not be edited in the current version of Word. The document appears entirely new, but no substantive changes were made, only formatting and grammatical changes. Unnecessary copy and paste of Code and regulation provisions have been replaced with hyperlinks to ensure current information is reviewed by the regulated community and the public.

Action needed:

- Motion to adopt revisions to Guidance Document 150-9

Board of Veterinary Medicine Medical Recordkeeping

The Board of Veterinary Medicine often receives questions regarding medical record keeping requirements. The most frequently asked questions are the following:

- 1. Is a veterinarian required to maintain a record on every patient?**
- 2. May all records for the animals of one owner be filed together?**
- 3. Is a veterinarian required to use a specific format for documenting information in the record?**
- 4. May an assistant transcribe a medical record entry for a veterinarian?**
- 5. What is the length of time a medical record must be kept?**
- 6. When must a veterinarian release a medical record to the client?**
- 7. How may a record be amended?**
- 8. Do the requirements of the Health Insurance Portability and Accountability Act (HIPAA) apply to veterinary medical records?**
- 9. How should veterinary medical records be handled when closing or selling a practice?**

1. Is a veterinarian required to maintain a record on every patient?

A daily record of each patient treated must be maintained by the veterinarian (see 18VAC150-20-195 below). This includes a brief visit that may result in a referral or tentative diagnosis. Records for economic animals or litters of companion animals under the age of four months may be maintained on a per owner basis.

2. May all records for the animals of one owner be filed together?

The regulations do not speak to how to organize the daily record of each patient. The Board recommends that if a master file is kept, the record should have individual files contained within for each animal other than economic animals or litters of companion animals under the age of four months.

3. Is a veterinarian required to use a specific format for documenting information in the record?

No, regulations do not specify a format required for recordkeeping. The Board recommends using a problem-oriented (SOAP) format that allows any veterinarian, by reading the record, to proceed with the proper treatment and care of the animal and allows the Board or other agency to determine the advice and treatment recommended and performed by the practitioner.

The problem oriented veterinary medical record or SOAP format is the most widely-used format by the veterinary profession. It includes the following elements:

The “S” in SOAP stands for subjective findings. These are things that are communicated by the client and recorded in the patient’s history, such as name, age, date of visit, including vaccination history along with the current complaint. This information is essential in properly identifying the animal in the record and providing information that may be essential as the examination proceeds. For the most part, the information is accepted as true, but always be aware of incomplete information or inaccurate perceptions.

The “O” or objective part of the record documents observations about the patient. It should include physical exam findings and everything seen, felt, touched, or smelled. Examples include, but are not limited to temperature, weight, body condition, assessment of all organs and data obtained by instrumentation.

The “A” or assessment portion of the record uses the information gathered to formulate a diagnosis or tentative diagnosis in order to formulate a plan for each complaint.

The “P” or plan portion documents the recommendations to the client. Communicating the recommendations is extremely important to aid in the client’s understanding of a *therapeutic plan* in which medications are prescribed or a *diagnostic plan* in which additional tests or information is needed to make a final diagnosis. The client’s decision to proceed or decline a therapeutic or diagnostic plan should be documented.

If an animal is hospitalized, an abbreviated version of the SOAP, including an assessment of the patient’s progress and condition can be added to the record daily.

4. May an assistant transcribe a medical record entry for a veterinarian?

There are no provisions restricting who transcribes a medical record entry. The veterinarian is required to maintain the record, regardless of who makes the entries. The Board recommends that the veterinarian sign-off on his entries.

5. What is the length of time a medical record must be kept?

Regulations require that a record be kept for a period of three years following the last office visit or discharge of such animal from a veterinary practice.

6. When must a veterinarian release a medical record to the client?

Failure to release patient records when requested by the owner: a law-enforcement entity; or a federal, state, or local health regulatory agency may be considered unprofessional conduct and may result in disciplinary action. The veterinarian is considered the owner of the original medical record and may provide a copy of the record to the requester.

Radiographs are required to be maintained as part of the patient’s record. If an original radiograph is transferred to another establishment or released to the owner, a record of this transfer must be maintained on or with the patient’s record.

7. How may a record be amended?

Regulations do not require a specific format for amendments. The Board recommends never altering an original record and amending records by dating all information, including amendments, on the day entered.

8. Do the requirements of the Health Insurance Portability and Accountability Act (HIPAA) apply to veterinary medical records?

The HIPAA requirements only apply to human medical records.

9. How should veterinary medical records be handled when closing or selling a practice?

Regulations require that upon the sale or closure of a veterinary establishment involving the transfer of patient records to another location, the veterinarian shall follow the requirements found in § 54.1-2405 of the Code of Virginia.

The Code of Virginia requires notification to current patients via mail and notice in a newspaper of general circulation within the veterinarian's practice area. A current patient is defined as a patient encounter with the provider or his professional practice during the two-year period immediately preceding the date of the record transfer.

Failure to provide the two forms of notification may result in disciplinary action.

Pursuant to 18VAC150-20-181(C)(2), if there is no transfer of records upon sale or closure of an establishment, the veterinarian-in-charge shall provide the board information about the location of or access to patient records.

ReferencesCode of Virginia***§ 54.1-2405. Transfer of patient records in conjunction with closure, sale, or relocation of practice; notice required.***

A. No person licensed, registered, or certified by one of the health regulatory boards under the Department shall transfer records pertaining to a current patient in conjunction with the closure, sale or relocation of a professional practice until such person has first attempted to notify the patient of the pending transfer, by mail, at the patient's last known address, and by publishing prior notice in a newspaper of general circulation within the provider's practice area, as specified in § 8.01-324.

The notice shall specify that, at the written request of the patient or an authorized representative, the records or copies will be sent, within a reasonable time, to any other like-regulated provider of the patient's choice or provided to the patient pursuant to § 32.1-127.1:03. The notice shall also disclose whether any charges will be billed by the provider for supplying the patient or the

provider chosen by the patient with the originals or copies of the patient's records. Such charges shall not exceed the actual costs of copying and mailing or delivering the records.

B. For the purposes of this section:

"Current patient" means a patient who has had a patient encounter with the provider or his professional practice during the two-year period immediately preceding the date of the record transfer.

"Relocation of a professional practice" means the moving of a practice located in Virginia from the location at which the records are stored at the time of the notice to another practice site that is located more than 30 miles away or to another practice site that is located in another state or the District of Columbia.

§ 32.1-127.1:03. Health records privacy.

1. Health care entities shall disclose health records to the individual who is the subject of the health record, except as provided in subsections E and F and subsection B of § 8.01-413.

B. As used in this section:

"Health care entity" means any health care provider, health plan or health care clearinghouse. "Health care provider" means those entities listed in the definition of "health care provider" in § 8.01-581.1, except that state-operated facilities shall also be considered health care providers for the purposes of this section. Health care provider shall also include all persons who are licensed, certified, registered or permitted or who hold a multistate licensure privilege issued by any of the health regulatory boards within the Department of Health Professions, except persons regulated by the Board of Funeral Directors and Embalmers or the Board of Veterinary Medicine.

Regulations Governing the Practice of Veterinary Medicine

18VAC150-20-140. Unprofessional conduct.

Unprofessional conduct as referenced in subdivision 5 of § 54.1-3807(5) of the Code of Virginia shall include the following:

15. Failing to release a copy of patient records when requested by the owner; a law-enforcement entity; or a federal, state, or local health regulatory agency.

18VAC150-20-195. Recordkeeping.

A. A legible, daily record of each patient treated shall be maintained by the veterinarian at the registered veterinary establishment and shall include at a minimum:

- 1. Name of the patient and the owner;*
- 2. Identification of the treating veterinarian and of the person making the entry (Initials may be used if a master list that identifies the initials is maintained.);*
- 3. Presenting complaint or reason for contact;*
- 4. Date of contact;*

5. *Physical examination findings;*
6. *Tests and diagnostics performed and results;*
7. *Procedures performed, treatment given, and results;*
8. *Drugs administered, dispensed, or prescribed, including quantity, strength and dosage, and route of administration. For vaccines, identification of the lot and manufacturer shall be maintained;*
9. *Radiographs or digital images clearly labeled with identification of the establishment, the patient name, date taken, and anatomic specificity. If an original radiograph or digital image is transferred to another establishment or released to the owner, a record of this transfer or release shall be maintained on or with the patient's records; and*
10. *Any specific instructions for discharge or referrals to other practitioners.*

B. An individual record shall be maintained on each patient, except that records for economic animals or litters of companion animals under the age of four months may be maintained on a per owner basis. Patient records, including radiographs or digital images, shall be kept for a period of three years following the last office visit or discharge of such animal from a veterinary establishment.

C. An initial rabies certification for an animal receiving a primary rabies vaccination shall clearly display the following information: "An animal is not considered immunized for at least 28 days after the initial or primary vaccination is administered."

18VAC150-20-181. Requirements for veterinarian-in-charge.

C. Prior to the sale or closure of a veterinary establishment, the veterinarian-in-charge shall:

1. *Follow the requirements for transfer of patient records to another location in accordance with § 54.1-2405 of the Code of Virginia; and*
2. *If there is no transfer of records upon sale or closure of an establishment, the veterinarian-in-charge shall provide to the board information about the location of or access to patient records and the disposition of all scheduled drugs.*

Board of Veterinary Medicine Guidance on Medical Recordkeeping

The Board of Veterinary Medicine often receives questions regarding medical recordkeeping requirements. The most frequently asked questions are included in this document.

- 1. Is a veterinarian required to maintain a record on every patient?**
- 2. May all records for the animals of one owner be filed together?**
- 3. Is a veterinarian required to use a specific format for documenting information in the record?**
- 4. May an assistant transcribe a medical record entry for a veterinarian?**
- 5. What is the length of time a medical record must be kept?**
- 6. When must a veterinarian release a medical record to the client?**
- 7. How may a record be amended?**
- 8. Do the requirements of the Health Insurance Portability and Accountability Act (“HIPAA”) apply to veterinary medical records?**
- 9. How should veterinary medical records be handled when closing or selling a practice?**

1. Is a veterinarian required to maintain a record on every patient?

A daily record of each patient treated must be maintained by the veterinarian. *See* 18VAC150-20-195. This includes a brief visit that may result in a referral or tentative diagnosis. Records for economic animals or litters of companion animals under the age of four months may be maintained on a per owner basis.

2. May all records for the animals of one owner be filed together?

The regulations do not address how to organize the daily record of each patient. The Board recommends that, if a master file is kept, then the record should have individual files contained within for each animal other than economic animals or litters of companion animals under the age of four months.

3. Is a veterinarian required to use a specific format for documenting information in the record?

No, regulations do not specify a format required for recordkeeping. The Board recommends using a problem-oriented (“SOAP”) format that allows any veterinarian, by reading the record, to proceed with the proper treatment for and care of the animal, and allows the Board or other agency to determine the advice and treatment recommended and performed by the practitioner.

The problem oriented veterinary medical record, or SOAP, format is the most widely-used format by the veterinary profession. It includes the following elements:

- The “S” in SOAP stands for subjective findings. These are things that are communicated by the client and recorded in the patient’s history, such as name,

age, date of visit, including vaccination history along with the current complaint. This information is essential in properly identifying the animal in the record and providing information that may be essential as the examination proceeds. For the most part, the information is accepted as true, but always be aware of incomplete information or inaccurate perceptions.

- The “O” or objective part of the record documents observations about the patient. It should include physical exam findings and everything seen, felt, touched, or smelled. Examples include, but are not limited to temperature, weight, body condition, assessment of all organs and data obtained by instrumentation.
- The “A” or assessment portion of the record uses the information gathered to formulate a diagnosis or tentative diagnosis in order to formulate a plan for each complaint.
- The “P” or plan portion documents the recommendations to the client. Communicating the recommendations is extremely important to aid in the client’s understanding of a *therapeutic plan* in which medications are prescribed or a *diagnostic plan* in which additional tests or information is needed to make a final diagnosis. The client’s decision to proceed or decline a therapeutic or diagnostic plan should be documented.

If an animal is hospitalized, an abbreviated version of the SOAP, including an assessment of the patient’s progress and condition can be added to the record daily.

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There are no provisions restricting who transcribes a medical record entry. The veterinarian is required to maintain the record, regardless of who makes the entries. The Board recommends that the veterinarian sign-off on his entries.

5. What is the length of time a medical record must be kept?

Regulations require that a record be kept for a period of three years following the last office visit or discharge of such animal from a veterinary practice.

6. When must a veterinarian release a medical record to the client?

Failure to release patient records when requested by any of the following may be considered unprofessional conduct and may result in disciplinary action:

- the owner;
- law enforcement; or
- a federal, state, or local health regulatory agency.

Radiographs are required to be maintained as part of the patient's record. If an original radiograph is transferred to another establishment or released to the owner, a record of this transfer must be maintained on or with the patient's record.

7. How may a record be amended?

Regulations do not require a specific format for amendments. The Board recommends amending records by dating all information, including amendments, on the day entered rather than altering an original record.

8. Do the requirements of HIPAA apply to veterinary medical records?

No. HIPAA requirements only apply to human medical records.

9. How should veterinary medical records be handled when closing or selling a practice?

Virginia Code § 54.1-2405 specifies requirements for transfer of patient records to another location upon the sale or closure of a practice.

Section 54.1-2405 requires notification to current patients via mail or electronically and that notice be placed in a newspaper of general circulation within the veterinarian's practice area. "Current patient" is defined as a patient that has had an encounter with the provider or the professional practice during the two-year period immediately preceding the date of the record transfer. Failure to provide the two forms of notification may result in disciplinary action.

Pursuant to 18VAC150-20-181(C)(2), if there is no transfer of records upon sale or closure of an establishment, the veterinarian-in-charge shall provide the Board information about the location of or access to patient records.

References

Code of Virginia

[Va. Code § 54.1-2405](#), Transfer of patient records in conjunction with closure, sale, or relocation of practice; notice required

[Va. Code § 32.1-127.1:03](#), Health records privacy

Regulations Governing the Practice of Veterinary Medicine

[18VAC150-20-140](#), Unprofessional Conduct

[18VAC150-20-181](#), Requirements for veterinarian-in-charge

[18VAC150-20-195](#), Recordkeeping

Veterinary Medicine Monthly Snapshot for August 2022

Veterinary Medicine closed more cases in August than received. Veterinary Medicine closed 20 patient care cases and 13 non-patient care cases for a total of 33 cases.

Cases Closed	
Patient Care	20
Non Patient Care	13
Total	33

Veterinary Medicine has received 9 patient care cases and 21 non-patient care cases for a total of 30 cases.

Cases Received	
Patient Care	9
Non Patient Care	21
Total	30

As of August 31, 2022 there were 89 patient care cases open and 122 non-patient care cases open for a total of 211 cases.

Cases Open	
Patient Care	89
Non Patient Care	122
Total	211

There are 8,768 Veterinary Medicine licensees as of August 31, 2022. The number of current licenses are broken down by profession in the following chart.

Current Licenses	
Equine Dental Technician	21
Veterinarian	4828
Veterinary Establishment – Ambulatory	299
Veterinary Establishment – Stationary	902
Veterinary Faculty	102
Veterinary Intern/Resident	40
Veterinary Technician	2576
Total for Veterinary Medicine	8,768

There are 83 licenses issued for Veterinary Medicine for the month of August. The number of current licenses are broken down by profession in the following chart.

Licenses Issued	
Veterinarian	37
Veterinary Establishment – Ambulatory	3
Veterinary Establishment – Stationary	7
Veterinary Faculty	3

Veterinary Technician	33
Total for Veterinary Medicine	83

[DHP Home](#) > [Boards](#) > [VetMed](#) > [About the Board](#) > [News](#)

Recent newsletters and email notices from the Board.

2022

- From the Drug Enforcement Administration: To view the press release issued by DEA regarding the alarming emerging trend of colorful fentanyl across the US, [please go here](#) - 9/8/2022
- [Veterinary Medicine Virtual Conference](#) - 8/16/2022
- From Virginia Department of Health: CDC monkeypox guidance for [Pets in the Home](#) and [Information for Veterinarians](#) - 6/28/2022

**VIRGINIA BOARD OF VETERINARY MEDICINE
BYLAWS**

Article I. Officers of the Board.

A. Election of officers.

1. The officers of the Board of Veterinary Medicine shall be a President, a Vice-President and a Secretary. At the last regularly scheduled meeting of the calendar year, the board shall elect its officers. Nominations for office shall be selected by open ballot, and election shall require a majority of the members present.
2. The term of office shall be one year from January 1 to December 31; a person may serve in the same office for one additional term.
3. A vacancy occurring in any office shall be filled during the next meeting of the board.

B. Duties of the officers

1. President.

The President shall preside at all meetings and formal administrative hearings in accordance with parliamentary rules and the Administrative Process Act, and requires adherence of it on the part of the board members. The President shall appoint all committees unless otherwise ordered by the board.

2. Vice-President.

The Vice-President shall, in the absence or incapacity of the President, perform pro tempore all of the duties of the President.

3. Secretary.

The Secretary shall perform generally all the duties necessary and usually pertaining to such office

4. In the absence of the President, Vice-President and Secretary, the President shall appoint another board member to preside at the meeting and/or formal administrative hearing.

5. The Executive Director shall be the custodian of all board records and all papers of value. The Executive Director shall preserve a correct list of all applicants and licensees. The

Executive Director shall manage the correspondence of the board and shall perform all such other duties as naturally pertain to this position.

Article II. Meetings.

A. Number and organization of meetings.

1. For purposes of these bylaws, the board shall schedule at least three full board meetings in each year, with the right to change the date or cancel any board meeting; with the exception that one meeting shall take place annually.

2. A majority of the members of the board shall constitute a quorum for the transaction of business. The current edition of Robert's Rules of Order, revised, shall apply unless overruled by these bylaws or when otherwise agreed.

B. Attendance of board members.

Members shall attend all scheduled meetings of the board and committee to which they serve, unless prevented by illness or similar unavoidable cause. In the event of two consecutive unexcused absences at any meeting of the board or its committees, the President shall make a recommendation about the board member's continued service to the Director of the Department of Health Professions for referral to the Secretary of Health and Human Resources and Secretary of the Commonwealth.

C. Order of business. The order of the business shall be as follows:

1. Call to order with statement made for the record of how many and which board members are present and that it constitutes a quorum.
2. Public comment.
3. Approval of minutes.
4. The Executive Director and the President shall collaborate on the remainder of the agenda.

Article III. Committees.

A. Standing Committees:

1. Special Conference Committee.

This committee shall consist of two board members who shall review information regarding alleged violations of the veterinary medicine laws and regulations and determine if probable cause exists to proceed with possible disciplinary action. The President shall also designate

another board member as an alternate on this committee in the event one of the standing committee members becomes ill or is unable to attend a scheduled conference date. Further, should the caseload increase to the level that additional special conference committees are needed, the President may appoint additional committees.

2. Regulatory/Legislative Committee.

The committee shall consist of at least three board members. The board delegates to the Regulatory/Legislative Committee to recommend actions to petitions for rulemaking. This committee is responsible for the development of proposals for new regulations or amendments to existing regulations with all required accompanying documentation; the drafting of board responses to public comment as required in conjunction with rulemaking; conducting the required review of all existing regulations as required by the board's Public Participation Guidelines and any Executive Order of the Governor, and other required tasks related to regulations. In accordance with the Administrative Process Act, any proposed draft regulation and response to public comment shall be reviewed and approved by the full board prior to publication. The board delegates the authority to develop proposals for legislative initiatives of the board. Any proposed draft legislation and response to public comment shall be reviewed and approved by the full board prior to publication.

3. Credentials Committee.

The committee shall consist of two board members. The members of the committee may review non-routine licensure applications to determine the credentials of the applicant and the applicability of the statutes and regulations when the Board President deems necessary. The committee shall not be required to meet collectively.

B. Ad hoc committees

There may be ad hoc committees, appointed as needed and shall consist of three or more persons appointed by the board who are knowledgeable in the particular area of practice or education under consideration by the board. The committee shall review matters as requested by the board and advise the board relative to the matters or make recommendations for consideration by the board.

Article IV. General Delegation of Authority.

A. The Board delegates to board staff the authority to issue and renew licenses and registrations for which statutory and regulatory qualifications have been met.

B. The Board delegates to the Executive Director the authority to reinstate a license or registration when the reinstatement is due to the lapse of the license or registration rather than a disciplinary action and there is no basis upon which the Board could refuse to reinstate.

C. The Board delegates to board staff the authority to develop, approve and update information on forms used in the daily operations of board business, to include, but not limited to, licensure

applications, renewal forms, inspection forms and documents used in the disciplinary process. The Executive Director shall consult with the board President prior to posting inspection form changes.

D. The Board delegates authority to the Executive Director to negotiate a Consent Order in consultation with the chair of a Special Conference Committee or formal hearing.

E. The Board delegates to the Executive Director the authority to sign as entered any Order or Consent Order resulting from the disciplinary process or other administrative proceeding.

F. The Board delegates to the Executive Director, who may consult with a special conference committee member, the authority to provide guidance to the agency's Enforcement Division in situations wherein a complaint is of questionable jurisdiction and an investigation may not be necessary.

G. The Board delegates to the Executive Director the authority to review information regarding alleged violations of law or regulations and, in consultation with a member of a special conference committee, make a determination as to whether probable cause exists to proceed with possible disciplinary action.

H. The Board delegates authority to the Executive Director to close non-jurisdictional cases and fee disputes cases without review by a board member.

I. The Board delegates authority to the Executive Director to grant an extension for good cause of up to one year for the completion of continuing education requirements upon written request from the licensee or registrant prior to the renewal date.

J. The Board delegates authority to the Executive Director to grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the licensee or registrant, such as temporary disability, mandatory military service, or officially declared disasters.

K. The Board delegates authority to the Executive Director to issue an advisory letter, offer a confidential consent agreement or offer a Consent Order for action consistent with any board-approved guidance document.

L. The Board delegates to the President the authority to represent the board in instances where board "consultation" or "review" may be requested where a vote of the board is not required, and a meeting is not feasible.

M. The Board delegates to the Department of Health Professions' inspectors the authority to issue an Inspection Summary upon completion of an inspection, and the Board delegates to the Executive Director the authority to take action consistent with any board-approved guidance document related to inspection violations.

N. The Board delegates to the Executive Director the authority to grant an accommodation of additional testing time or other requests for accommodation to candidates for Board-required examinations pursuant to the Americans with Disabilities Act, provided the candidate provides documentation that supports such an accommodation.

O. The Board delegates authority to the Executive Director to issue an Advisory Letter to the person who is the subject of a complaint pursuant to Va. Code § 54.1-2400.2(F), when it is determined that a probable cause review indicates a disciplinary proceeding will not be instituted.

P. The Board delegates authority to the Executive Director to request and accept from a licensee or registrant, in lieu of disciplinary action, a Confidential Consent Agreement, pursuant to Va. Code § 54.1-2400(14), consistent with any guidance documents adopted by the Board.

Q. The Board delegates authority to the Executive Director or designee to make probable cause decisions for cases involving the following:

- Impairment;
- Diversion;
- Failure to maintain drugs in a secure manner;
- Inspections;
- Compliance with Board Orders;
- PMP reporting;
- Compliance with continuing education requirements;
- Unlicensed activity;
- Aiding and abetting unlicensed activity;
- Fraud;
- Unprofessional conduct for failure to release records; and
- Compliance with medical recordkeeping requirements.

R. The Board delegates authority to the Executive Director or designee to make investigation decisions for cases involving the following:

- Lack of evidence to proceed; and
- Reports of drug theft and loss

Article V. Amendments.

Proposed amendments to these bylaws shall be presented in writing to all Board members, the Executive Director of the Board, and the Board's legal counsel prior to any regularly scheduled Board meeting. Amendments to the bylaws shall become effective with a favorable vote of at least two-thirds of the board members present at that regular meeting.

BOARD OF VETERINARY MEDICINE

2023 CALENDAR

February 16, 2023 (Thursday)	TR 1 HR 2 & 4 9:00 AM	INFORMAL CONFERENCES
MARCH 28, 2023 (Tuesday)	BR 4 9:00 AM	BOARD MEETING
April 27, 2023 (Thursday)	TR 1 HR 2 & 4 9:00 AM	INFORMAL CONFERENCES
June 8, 2023 (Thursday)	TR 1 HR 2 & 4 9:00 AM	INFORMAL CONFERENCES
JULY 28, 2023 (Friday)	BR 2 9:00 AM	BOARD MEETING
September 14, 2023 (Thursday)	TR 2 HR 2 & 4 9:00 AM	INFORMAL CONFERENCES
OCTOBER 26, 2023 (Thursday)	BR 2 9:00 AM	BOARD MEETING
November 16, 2023 (Thursday)	BR 1 HR 2 & 4 9:00 AM	INFORMAL CONFERENCES
December 14, 2023 (Thursday)	TR 1 HR 2 & 4 9:00 AM	INFORMAL CONFERENCES

CALENDAR_2023