

 BUGINESS, CONSUMER SERVICES AND HOUSING AGENCY
 GAVIN NEWSOM, GOVERNOR

 DEPARTMENT OF CONSUMER AFFAIRS
 • VETERINARY MEDICAL BOARD

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### MEMORANDUM

SUBJECT	Agenda Item 17. Update, Discussion and Possible Action Regarding AAVSB Activities
FROM	Jessica Sieferman, Executive Officer
то	Veterinary Medical Board
DATE	January 4, 2021

### A. Call for Bylaws Amendments

On November 25, 2020, the American Association of Veterinary State Boards (AAVSB) emailed the attached memorandum from the AAVSB Bylaws and Resolution Committee to the Executive Directors and Registrars of the AAVSB Member Boards. The Memorandum provides a link to the current AAVSB Bylaws and requests proposed amendments be submitted to AAVSB by March 6, 2021.

### Action Requested:

If the Board has any specific amendments to the AAVSB Bylaws, please approve a motion to submit the proposed amendments to AAVSB.

**Note:** For Items B through H listed below, please refer to the attached AAVSB Topics to Discuss Memo for additional information. Staff does not anticipate any actions necessary at this time; however, the Board is able to take any actions it deems necessary.

### **B. AAVSB Annual Meeting**

- C. Continuing Education (CE) Tracking
- D. Model Regulations for the Appropriate use of Opioids in Veterinary Medicine
- E. Veterinary Technologist Job Analysis Survey Executive Summary
- F. AAVSB COVID-19 Tracking
- G. Veterinary Technician National Examination (VTNE) Scheduling Updates
- H. AAVSB Automated License Verifications

### Attachments:

- 1. AAVSB Memorandum Call for Bylaws Amendments
- 2. AAVSB Topics to Discuss, October December 2020

### Sieferman, Jessica@DCA

From:	Chrissy Bagby <cbagby@aavsb.org></cbagby@aavsb.org>
Sent:	Monday, November 30, 2020 7:55 AM
То:	Sieferman, Jessica@DCA
Subject:	Reminder: AAVSB 2021 Call for Bylaws Amendments

[EXTERNAL]: A8SwuZ2fmSeGFu5aZAuXBtQ==\_1102343557454\_DBG4kIB/EeiGrNSuUoRDcg==@in.constantcontact.com

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### MEMORANDUM

To:

Executive Directors and Registrars of the AAVSB Member Boards for Distribution to Board Members

### From:

Darren Wright, DVM, AAVSB Bylaws & Resolution Committee Chair

Date: November 25, 2020

### Subject:

Call for Bylaws Amendments

The AAVSB Bylaws and Resolution Committee is providing you with important information and dates for submitting Bylaws amendments for voting at the 2021 Annual Meeting. Per current Bylaws, any Member Board of the AAVSB, any committee established by the Bylaws, or the AAVSB Board of Directors may propose Bylaws amendments.

Please send any proposed amendments in the actual wording for inclusion in the Bylaws by March 6, 2021. A <u>copy of the current Bylaws is attached</u> for your review.

Below are the important dates in 2021 regarding proposal of Bylaws amendments:

### March 6, 2021

Proposed Bylaws amendments must be received in writing at the AAVSB office. This is no later than 210 days prior to the upcoming Annual Meeting. Submitted Bylaws amendments will be forwarded to the Board of Directors within seven days after receipt.

### May 28, 2021

The AAVSB Executive Director will forward any proposed Bylaws amendments to Member Board Executive Directors and Registrars for distribution to Board Members and Delegates. This is not less than 120 days prior to the Annual Meeting.

### October 1-2, 2021

On these dates at the 2021 Annual Meeting & Conference in Denver, Colorado, the Delegates will discuss and vote on any proposed Bylaws amendments.

Proposed Bylaws amendments can be sent to the AAVSB Bylaws and Resolution Committee by:

### MAIL:

AAVSB Attn Bylaws Committee 380 West 22nd Street Suite 101 Kansas City, MO 64108

**FAX:** 816.931.1604

### EMAIL:

Chrissy Bagby at cbagby@aavsb.org

If you have any questions, please contact Chrissy Bagby at the AAVSB office at 1.877.698.8482 or via the above email address.

Thank you,



Chrissy Bagby, CAE AAVSB Senior Director of Marketing & Technology <u>cbagby@aavsb.org</u>



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**AAVSB Topics to Discuss** 

October – December 2020

### Don't miss these important items from the AAVSB



• **AAVSB Annual Meeting** (*fyi/possible action*) The business meeting was not held due to the pandemic; however, the educational sessions were held in a virtual format. The AAVSB offered Member Boards a discounted registration fee for their entire board and 38 Member Boards selected this option. As a result, registration in 2020 more than doubled that of past years!

Registered, but couldn't attend? No worries! Simply utilize the login

information provided and watch the recordings. To obtain CE credit, email <u>race@aavsb.org</u> for the quiz questions and certificate.

• **CE Tracking** (*fyi/action*) Introducing RACEtrack!

RACEtrack replaces the Veterinary Continuing Education Tracking (VCET) program. The AAVSB has partnered with CE Broker, the worldwide leader in continuing education tracking software to enhance your ability to track your licensees' CE. With RACEtrack,



you can automate your audits, generate compliance reports, and review your licensees' unmet CE requirements. RACEtrack is free for both you and your licensees. Encourage your licensees to set up their free RACEtrack account. Contact <u>racetrack@aavsb.org</u> for more information.

Notify the AAVSB as soon as possible as to who will be the staff person(s) conducting CE audits. With this information you will login to the AAVSB.org website and be sent over to CE Broker to track and audit continuing education. If your Board has not signed on to the AAVSB's RACEtrack program, you will only see the licensees who have created a RACEtrack account.

To help prepare for RACEtrack, contact <u>racetrack@aavsb.org</u> to assist with license updates for the VIVA database.

• **Opioid Regulations** (*fyi*) We are pleased to announce the development of the attached *Model Regulations for the Appropriate Use of Opioids in Veterinary Medicine*. Model Regulations are developed by the AAVSB Regulatory Policy Task Force to serve as a resource for all the AAVSB Member Boards when considering changes to rules or regulations.

The document, *Model Regulations for the Appropriate Use of Opioids in Veterinary Medicine*, is a model for states and provinces to consider and should be used in conjunction with the AAVSB *Practice Act* 

*Model (PAM)*. It should in no way be construed to alter the scope of practice of any veterinarian or veterinary technician or authorize the delivery of veterinary medical services in a manner that is not otherwise authorized by law.

• Veterinary Technologist Survey Executive Summary (fyi) In May 2020, the AAVSB completed a job analysis of tasks performed by Veterinary Technologists (graduates of a 4-year bachelors' program). The study was done to identify any differences between the frequency and job tasks performed by Veterinary Technicians (2-year degree) as compared to Veterinary Technologists (4-year degree). The data received from the May 2020 study was compared to the results of the job analysis study completed in 2017 used to align with the blueprint for the Veterinary Technician National Examination (VTNE). This is the first such study of its kind to determine if there are any differences between job descriptions of a Veterinary Technologist and Veterinary Technician. See attached.

• **AAVSB COVID-19 tracking** (*fyi/action*) The AAVSB continues to assist you, your licensees, and the public in tracking the various changes boards have made during the pandemic. Check <u>https://www.aavsb.org/news/article/83</u> for the latest updates. We welcome updates from you as they occur.

• **VTNE SCHEDULING UPDATES** (*fyi*) The AAVSB has provided updates to exam candidates, jurisdictions, and program directors on the VTNE administration and application changes due to the coronavirus pandemic. Check <u>https://www.aavsb.org/news/article/81</u> for the latest updates.

• **AAVSB Automated License Verifications are Live!** (*fyi*) Jurisdictions are now receiving all new license verification requests, VAULT License Transfer Reports, and VAULT Premium Service packets online. Of the 62 AAVSB Member Boards, 58 Member Boards accept the VAULT Premium Packets online.

• Invite the AAVSB to attend one of your Board meetings. (*discussion/possible action*) Are you taking full advantage of the services offered by your Association? Not sure? Invite us to one of your board meetings to explain how the AAVSB's programs and services can benefit your board. The AAVSB would also like to hear from you regarding what new services you need from us. We are currently available in-person or virtually. Email Lainie Franklin at <u>efranklin@aavsb.org</u> to schedule a visit.

• **Board Basics & Beyond Training** (*discussion*) Mark your calendar for April 23-24, 2021, for the next training session. The tuition investment is \$250 per attendee. As space allows, the AAVSB will fund travel for one attendee from each Member Board. Registration will open this fall. We will be applying for RACE credit. Visit <u>www.aavsb.org/BoardBasics</u> for more information. Space is limited to 30 participants.

### Looking to Next Year

April 23 – 24, 2021 – **AAVSB Board Basics & Beyond**, Kansas City, Missouri September 30 – October 2, 2021 **AAVSB Annual Meeting & Conference**, Denver, Colorado

Have questions regarding the materials? Contact Lainie Franklin, Member Concierge, at <u>efranklin@aavsb.org</u> or call 1-877-698-8482 x221.

Agenda Item 17, Attachment 2



### **MODEL REGULATIONS – APPROPRIATE USE OF OPIOIDS**

As recommended by the AAVSB Regulatory Policy Task Force in July 2020

LOCATED AT

380 West 22nd Street Suite 101 P | 1.816.931.1504

### **FIND US AT** CONTACT US AT

P | 1.877.698.8482 www.aavsb.org aavsb@aavsb.org Kansas City, MO 64108 F | 1.816.931.1604 @AAVSB

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### Introduction

These Model Regulations are meant to support the statutory language that can be found in the AAVSB Practice Act Model (PAM). Each model regulation from the AAVSB is presented separately for ease of use for the AAVSB Member Boards to utilize as a model in developing regulations or rules specific to targeted topics. The AAVSB Regulatory Policy Task Force will continue to develop Model Regulations to address pressing issues in the regulation of Veterinary Medicine.

### Revisions

Created 2020

### **Structure and Format**

The AAVSB Model Regulations have been structured to allow Member Boards to develop new regulations or rules within their jurisdiction to address the specific language that can be found in the jurisdiction's existing statute or bylaws. It has been formatted to include the model language with corresponding commentary. To provide the rationale and thought processes behind the Model Regulations, readers are encouraged to read the commentary as well as the Regulation to receive a complete perspective. Commentary follows each section if appropriate.

### Appropriate Use of Opioids

### Model Regulation.

Veterinarians are allowed to prescribe, administer, and dispense controlled substances in keeping with the requirements of the laws of this Jurisdiction, and the statutes and regulations governing the practice of Veterinary Medicine. A Veterinarian-Client-Patient Relationship (VCPR) as set forth in the Act, must first exist before drugs may be prescribed by a Veterinarian. Refer to the AAVSB Practice Act Model (PAM) for additional information.

Veterinarians are required to be compliant with all applicable Jurisdictional and federal laws and regulations related to controlled substances. Multiple Jurisdictions already require Veterinarians to participate in these programs. However, this document does not address whether Veterinarians should be required to participate in these programs. Regulatory boards should seek to provide commentary to ensure that special circumstances pertaining to veterinary medicine are taken into consideration. In light of the opioid crisis, many veterinarians should be dispensed from the veterinary establishment or dispensed at a commercial establishment based on Jurisdictional laws and statutes.

### Section 1. Definitions.

**Controlled substances** mean all Schedule II through V drugs as set forth in the U.S. Controlled Substances Act of the Drug Enforcement Act and the Canadian Controlled Drugs and Substances Act. In some jurisdictions, controlled substances may also include drugs that require a prescription but are not Schedule II through V drugs as set forth in the U.S. Controlled Substances Act of the Drug Enforcement Act and Canadian Controlled Drugs and Substances Act.

**DEA** is the United States Drug Enforcement Administration.

**Opioids** means all pure opioids and partial agonist and antagonist opioids (including tramadol, buprenorphine, and butorphanol).

Commentary

Article I, Section 105 (b). Practice of Veterinary Medicine in the AAVSB Practice Act Model (PAM) indicates that any individual practices Veterinary Medicine when performing any one or more of the following on an Animal:

(b) Prescribes, dispenses or administers a drug, medicine, anesthetic, biologic, appliance, apparatus, application or treatment.

Opioids and other controlled substances (i.e. benzodiazepines, tranquilizers, and barbiturates) can be very useful for pain management and the control of other conditions in Animals, but they have a high potential for misuse, addiction and overdose death in humans; therefore, these controlled substances are closely regulated by Jurisdictions and the federal government. The magnitude of the veterinary community's role in the opioid epidemic is unclear. However, Veterinarians prescribe, dispense, administer, and stock many of the same opioid drugs that have the potential to be diverted and abused by humans. Therefore, the veterinary community needs to be part of the effort to address this national crisis.

### Section 2. Prescribing of Opioids for Acute Pain and Chronic Conditions

- (a) Veterinarians must have a valid DEA registration or meet requirements of the provincial licensing body, establish a Veterinarian-Client-Patient Relationship (VCPR) and comply with all DEA, federal, and Jurisdictional laws and statutes in order to provide opioids and other controlled substances for their Patients.
- (b) The Veterinarian shall complete a history and physical examination appropriate to the complaint and conduct an assessment of the Patient's history as part of the initial evaluation.
- (c) Before initiating treatment, nonpharmacologic and non-opioid treatment shall be given consideration prior to treatment with an opioid.
- (d) If an opioid is necessary for treatment of <u>acute</u> pain, the Veterinarian shall prescribe it in the lowest effective dose appropriate for the condition, the size and species of the animal for the least amount of time. The initial dose shall not exceed a <u>XX</u>-day supply.
- (e) For prescribing an opioid or other controlled substance for management of acute pain after the initial <u>XX</u>-day prescription, the Patient shall be seen and re-evaluated for the continued need for an opioid or a controlled substance.
- (f) A Veterinarian may prescribe an opioid for management of <u>chronic</u> pain, terminal illnesses, or certain chronic conditions, such as chronic heart failure, chronic bronchitis, osteoarthritis, collapsing trachea, or related conditions.
- (g) For the prescribing of an opioid for terminal illnesses or certain chronic conditions, it is not required to see and reevaluate the patient for prescribing beyond <u>XX</u> days. For any prescribing of an opioid beyond <u>XX</u> days, the Veterinarian shall develop a treatment plan for the patient, which shall include measures to be used to determine progress in treatment, the lowest effective dose appropriate for the size and species, further diagnostic evaluations or modalities that might be necessary, criteria to guide owners on when a follow-up visit is warranted, and the extent to which the pain or condition is associated with physical impairment.
- (h) For continued prescribing of an opioid for chronic conditions, the patient shall be seen and reevaluated at least every <u>XX</u> months, and the justification for such prescribing documented in the Patient record.
- (i) The medical record for prescribing opioids shall include signs or presentation of the pain or condition, a presumptive diagnosis for the origin of the pain or condition, an examination appropriate to the complaint, a treatment plan, and the medication prescribed to include the date, type, dosage, and quantity prescribed.

(j) Prior to prescribing or dispensing an opioid, the Veterinarian shall document a discussion with the Client about the known risks and benefits of opioid therapy, the responsibility for the security of the drug and proper disposal of any unused drug.

### Commentary

### Section 2. Prescribing of Opioids for Acute Pain and Chronic Conditions.

Regulations should cite the specific sections of the Jurisdiction's drug control act or section(s) of the Veterinary Medicine Act related to prescribing or dispensing controlled substances.

**Section 2 (d)** – The AAVSB recommends that the Jurisdiction limit the initial dose of an opioid that is dispensed or prescribed to a maximum 14-day supply. Following the initial 14-day supply, the AAVSB recommends that Jurisdictions require that the Patient be seen and re-evaluated for the continued need of the opioid.

**Section 2 (g)** – For terminal illnesses or chronic conditions, the AAVSB believes that the Veterinarian should not be required to see and re-evaluate the Patient after the specified time for the initial dose. However, the regulations should specify that the Veterinarian develop a specified treatment plan with measures to determine progress and further evaluations to assess the need for continued prescribing of the opioid.

**Section 2 (i)** – The AAVSB recommends that for the continued prescribing of opioids that the Patient should be seen and re-evaluated at least every six months and justification for continued use of the opioid or other controlled substance be documented in the medical record.

Agerral tene 17n Attachment 2



### Job Analysis Survey Study Executive Summary Overview

American Association of Veterinary State Boards (AAVSB)

Veterinary Technologist

May 2020

Submitted to:



### Where people meet potential

### Introduction

veterinary technicians and the percentage of test questions focusing on each domain. specifies the domains, tasks, and knowledge bases that comprise entry-level practice of certification. The results of the 2017 job analysis study were the VTNE exam content outline that for the development of fair, accurate, and realistic assessments of candidates' readiness for analysis process yields exam specifications that accurately reflect the scope of practice, allowing effort to provide a sound basis for the continuing development of the Veterinary Technician analysis was to provide a detailed study of the job activities of the veterinary technician in an facilitated by PSI Services LLC (PSI) in 2017. The purpose of the 2017 veterinary technician job practice of a veterinary technician. The most recent veterinary technician job analysis was studies to identify and verify the job tasks and knowledge bases that describe the entry-level The American Association of Veterinary State Boards (AAVSB) conducts periodic job analysis National Examination (VTNE) owned and administered by the AAVSB. When completed, the job

schools in Canada offering baccalaureate degree to students. degree, who have taken and passed the VTNE in the last 5 years. Please note that no Canadian Technician Education and Activities (AVMA-CVTEA) accredited schools with a baccalaureate and collected data in 2020 from graduates of American Veterinary Medical Association Veterinary With the assistance of PSI, the AAVSB adopted the 2017 veterinary technician job analysis survey respondents participated in the survey because there were no accredited veterinary technology

comparing survey data collected from veterinary technologists and veterinary technicians across between job descriptions of Veterinary Technologists and Veterinary Technicians. The purpose of The 2020 Veterinary Technologist job analysis survey was conducted to identify differences the U.S. and Canada is to use statistical analyses to:

technicians/technologists; confirm if the job tasks included in the survey identify differences between the two groups of survey responses in regard to adequately describes what a veterinary technologist would do in practice ratings on the frequency and importance of the job tasks performed by veterinary

Specifically, data collected from the following main sections on the survey were compared:

Data comparison on a comprehensive list of job tasks that may be performed by a veterinary nine major areas of practice listed below perform these tasks, and the importance of these tasks. These sections are organized into the technologist or technician. The respondents were asked to rate the frequency in which they

- 1. Pharmacy and Pharmacology
- 2. Surgical Nursing
- 3. Dentistry
- 4. Laboratory Procedures
- 5. Animal Care and Nursing
- Diagnostic Imaging

<u>о</u>

- Anesthesia
   Emergency
- Emergency Medicine/Critical Care
- 9. Pain Management/Analgesia

Data comparison on a separate listing of the criticality of the knowledge used in practice

provide percentage of time spent and patient harm ratings to each of the nine areas Data comparison on a separate listing of 9 areas of practice. The respondents were asked đ

what a veterinary technician would do in practice Data comparison on respondents' perceptions on how adequate this list of job tasks covering

Data comparison on the survey respondents' demographic background and practice.

# Job Analysis Survey

accredited schools for their perception of the job duties for veterinary technologists Veterinary Medical Association Veterinary Technician Education and Activities (AVMA-CVTEA) the 2020 Veterinary Technologist survey to collected information from graduates of American The same set of questions from the 2017 Veterinary Technician Job Analysis survey were used on

task area. The importance and frequency scale were used to evaluate the appropriateness of the inclusion of each task statement. To this end, the survey collected respondents' ratings of the importance and frequency for each

- Frequency Technologist/Technician in an average month? How frequently do you perform this task in your role as a Veterinary
- 0 Never
- 1 Quarterly
- 2 Monthly
- 3 Weekly
- 4 Daily/several times a day
- Importance How important is this task to your role as a Veterinary Technologist/Technician?
- 1 Minimally importance
- 2 Below average importance
- 3 Average importance
- 4 Above average importance
- СП Extreme importance
- Criticality Please indicate how critical the following areas of **knowledge** are to your job as veterinary technician/technologist.? പ
- 0 Does not apply
- 1 Desirable (helpful or desirable but not required for successful job performance)
- ω  $\sim$ - Important (important and required for successful job performance)
- Critical (critical and required for successful job performance)

technology schools in Canada offering baccalaureate degree to students. The survey was opened individuals that responded to the survey (tasks and knowledge statements) was 274. No a baccalaureate degree, who have taken and passed the VTNE in the last 5 years. The number of Association Veterinary Technician Education and Activities (AVMA-CVTEA) accredited schools with obtained from the AAVSB. The list consisted of graduates of American Veterinary Medical The live survey was sent using online survey software to a list of 1,224 individuals that was on February 18, 2020 and closed on March 16, 2020. Canadian respondents participated in the survey because there were no accredited veterinary

## Survey Results

procedures." the task of "Prepare the environment, equipment, instruments, and supplies for dental two groups. The largest difference of 11.76% between the survey respondent groups occurred for work. The results indicated that there were no significant differences in responses between the Data comparison provided the percent of respondents who indicated they perform a task at

two sets of task ratings was 0.26 for the task of "Calculate fluid therapy rate." respondents' work as a veterinary technologist/technician. The largest difference between the Data comparison also provided the average ratings on the importance of a task to the

from the Surgical Nursing were rated lower or less performed by the Veterinary Technologist than All the seven tasks in the area of Dentistry were rated lower or less performed by Veterinary the Veterinary Technician including: Technologist survey respondents than the Veterinary Technician survey respondents. Two tasks

- "Function as a sterile surgical technician to ensure patient safety and procedural efficiency";
- "Sterilize equipment and supplies by the appropriate method (e.g., steam, gas)."

similarly except for a few knowledge areas related to Dentistry and Pharmacy such as: Data comparison of the two groups rated the criticality of the knowledge used in practice very

- "Routes of administration of pharmacological and biological agents";
- "Legal requirements and procedures for acquiring, preparing, storing, dispensing
- documenting and disposing of pharmacological and biological agents";
- "Safe handling practices for pharmacological and biological agents"
- procedures, dental imaging)" "Dental procedures (including but not limited to cleaning, floating, charting, preventive
- equipment, verification of test results, calibration, and controls)" "Quality assurance in the laboratory (including but not limited to maintenance of

are quite similar between the two groups as well. Data comparison of the percentage distribution of the time spent at the different practice areas

veterinary technologist/technician. This is direct evidence that the majority of the respondents considered this job task list to at least adequately cover what they would do in practice as a Data comparison indicated that the majority of the respondents from both groups (99%-100%)

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in practice. considered this task list as highly inclusive of what a veterinary technologist/technician would do

differed the most between the two groups of survey respondents However, years of experience as a Veterinary Technician/Technologist was the only one that specialties; primary job role; type of species seen; the percentage for each type of species seen. primary work setting; credentials held; credentialing status as a Veterinary Nurse (VN); other demographic profiles of the two groups are quite comparable in terms of the distribution of their Data comparison shows the demographic information of the two respondent groups. The

AAVSB database and from Member Boards who provided credentialed lists. years for the 2017 Veterinary Technician respondent group sent to Veterinary Technicians in the years and was sent to graduates who took the VTNE in the past 5 years; whereas, it was 9.00 The average years of experience for the 2020 Veterinary Technologist respondent group was 3.48

two respondent groups are very different, with the Veterinary Technologist survey respondent group being almost ten times smaller than the Veterinary Technician survey respondent group In general, data differences should be interpreted with caution as the sample sizes between the

### Demographic data included:

academic, veterinary technician specialty certification, and continuing their education in education. Those opportunities included management and supervisory positions, research, Respondents were asked about professional opportunities available because of your veterinary veterinary school

79% worked in jurisdictions who regulate veterinary technicians

offered in an Associate's degree program). beneficial as a veterinary professional and completed during the Bachelor's degree program (not The Veterinary Technologist survey respondents identified additional general courses they found

- Accounting
- Business Management/Administration, Marketing
- Additional clinical rotations/internships
- Advanced math courses
- Communication
- Marketing
- Practice management

CVTEA accredited Veterinary Technology programs: Veterinary Technologists who participated in the survey were graduates from the following AVMA-

- Becker College
- California State Polytechnic University-Pomona
- Florida A&M University
- Fort Valley State University
- Lincoln Memorial University
- Medaille College-Buffalo
- Mercy College
- Mississippi State University Michigan State University

SQ

- Morehead State University
- Murray State University North Dakota State University
- . . . . Northwestern State University of Louisiana
- Purdue University
- • Texas A&M University-Kingsville
- • University of Maine at Augusta - Bangor University of Massachusetts-Amherst University of Puerto Rico
- • Wilson College





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