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The Board's Sunset Bill—AB 1535— Brings Improvements for Consumers, Applicants, and Licensees

Throughout 2020, the Veterinary Medical Board evaluated its statutes and regulations to eliminate unnecessary barriers to licensure, streamline the licensing process, increase access to veterinary care, and improve consumer protection mechanisms. As a result, the Board approved legislative proposals to amend and repeal multiple statutes within the Veterinary Medicine Practice Act and submitted those proposals to the California Legislature for review and enactment.

Assembly Bill (AB) 1535 (Committee on Business and Professions, Chapter 631, Statutes of 2021) enacts most of the Board's legislative proposals and makes various changes to the regulation of veterinarians, registered veterinary technicians (RVT), Veterinary Assistant Controlled Substances Permit (VACSP) holders, veterinary schools, and veterinary premises. AB 1535 is the result of the joint sunset review of the Board by the Assembly Committee on Business and Professions and the Senate Committee on Business, Professions and Economic Development, and extends the provisions establishing the Board until January 1, 2026.

Here's what it means for you:

Consumers

- Increased Access to Veterinary Care
 - Eliminating unnecessary barriers to licensure and streamlining the licensure process, as described in more detail below, will increase your access to veterinary care in California while maintaining adequate consumer protection.
- Strengthened Consumer Protection and Enforcement Mechanisms
 AB 1535 strengthens consumer protection by protecting the professional
 judgement of veterinarians from outside influences and amends various
 enforcement statutes to eliminate confusion and streamline the enforcement
 process.

Veterinary Assistant

Name Tag Identification

Effective January 1, 2023, you will be required to wear a name tag identification in at least 18-point type in any area of the veterinary premises that is accessible to members of the public. Your name is the only thing required for your identification. (Business and Professions (BPC) section 4826.3.)

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Veterinary Assistant Controlled Substance Permit (VACSP)

• Applicant:

♦ Fee Amendments

- » Application fee increases from \$50 to \$100. (BPC section 4905, subd. (g).)
- » New permit fee (\$100) is required, like all RVT and veterinarian applicants. (BPC section 4905, subd. (r).)

♦ Abandoned After One Year

Applications are deemed abandoned if all permit requirements are not completed within one year after the application has been filed with the Board. (BPC section 4847.1, subd. (a).)

VACSP Holder:

Full Two-Year Initial Permit Regardless of Birth Month

Currently, initial permits are issued with expiration periods based on the permit holder's birth month. The difference in each permit holder's initial permit period could span anywhere from 13 to 24 months, even though all permit holders pay the same initial permit fee. AB 1535 changes the initial permit period to a full two years, regardless of the permit holder's birth month. (BPC section 4900, subd. (a).)

♦ Name Tag Identification

Effective January 1, 2023, you are required to wear a name tag identification in at least 18-point type in any area of the veterinary premises that is accessible to members of the public. The name tag shall include your name, permit type, and permit number issued by the Board. (BPC section 4826.3.)

Email Address and Address of Record Confirmation

If you have an email address, you will need to disclose
it to the Board upon renewal and confirm the email
and address of record are current and valid.

This will ensure you receive timely Board
communication regarding important updates
to laws and regulations, announcements,
press releases, etc. The Board also emails
any inquiries regarding pending complaints,
which assists in resolving the allegations
quicker. Your email address is confidential
and not subject to public disclosure. (BPC
section 4900, subd. (d).)

Veterinary Premises Registration:

• Applicants:

A Required Corporation Information

Veterinary corporations that own or operate a veterinary premises are required to include the names and titles of each officer, director, or shareholder on the application. (BPC section 4853, subd. (d).)

♦ Fee Amendments

Initial premises registration fee increases to \$500. (BPC section 4905, subd. (I).)

♦ Abandoned After One Year

Applications are deemed abandoned if all registration requirements are not completed within one year after the application has been filed with the Board. (BPC section 4847.1, subd. (a).)

• Registration Holders:

♦ Fee Amendments

Renewal fee increases to \$525. (BPC section 4905, subd. (m).)

♦ Electronic Mail (Email) Address

If you have an email address, you are required to report that to the Board during renewal and confirm the email address on record is current and valid. (BPC section 4900, subd. (d).)

♦ Reporting Changes to Corporation Information

Veterinary corporations that own or operate a veterinary premises will be required to report to the Board within 30 days any changes in the corporate officers, directors, and shareholders. (BPC section 4853, subd. (d).)

No Interference, Control, or Direction Over Professional Judgment

A premises registration holder who is not a Californialicensed veterinarian will be prohibited from interfering with, controlling, or otherwise directing the

professional judgment of any California licensed veterinarian or RVT. The Board will be authorized to require any information, including, but not limited to, employment contracts between the premises registration holder and a California-licensed veterinarian or RVT the Board deems is reasonably necessary for the enforcement of this section. (BPC section 4854.1.)

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In addition, the Board will be able to deny, revoke, or suspend a license or registration or assess a fine for exercising control over, interfering with, or attempting to influence the professional judgment of another California-licensed veterinarian or RVT through coercion, extortion, inducement, collusion, or intimidation through any means, including, but not limited to, compensation, in order to require the other California-licensed veterinarian or RVT to perform veterinary services in a manner inconsistent with current veterinary medical practice in this state. (BPC section 4883, subd. (t).)

♦ Email Address and Address of Record Confirmation
If you have an email address, you will need to disclose
it to the Board upon renewal and confirm the email
and address of record are current and valid. This will
ensure you receive timely Board communication
regarding important updates to laws and regulations,
announcements, press releases, etc. The Board also
emails any inquiries regarding pending complaints,
which assists in resolving the allegations more quickly.
Your email address is confidential and not subject to
public disclosure. (BPC section 4900, subd. (d).)

Registered Veterinary Technician

Applicants:

♦ Decreased Fees

Application fees will decrease from \$350 to \$225. (BPC section 4905, subd. (n).)

♦ Examination Requirements Moved to Registration Requirements¹

Graduation, education, and clinical practice experience requirements no longer will be prerequisites to sit for the national examination; those requirements will need to be completed for registration. RVT applicants will only file an application once they have completed the examination, education, and/or clinical experience requirements. Removing the Board from the examination eligibility review leads to quicker access to the national examination. (BPC section 4841.5.)

♦ Abandoned After One Year

Applications will be deemed abandoned if all registration requirements are not completed within one year after the application has been filed with the Board. (BPC section 4847.1, subd. (a).)

• RVTs:

♦ Decreased Fees

- » Initial registration fees will decrease from \$350 to \$225. (BPC section 4905, subd. (o).)
- » Renewal fees will decrease from \$350 to \$225. (BPC section 4905, subd. (p).)

♦ Full Two-Year Initial Registration Regardless of Birth Month

Currently, initial registrations are issued with expiration periods based on the applicant's birth month. The difference in each RVT's initial registration period could span anywhere from 13 to 24 months, even though all RVTs pay the same initial registration fee. AB 1535 changes the initial registration period to a full two years, regardless of the RVT's birth month. (BPC section 4900, subd. (a).)

♦ Name Tag Identification

Effective January 1, 2023, you will be required to wear a name tag identification in at least 18-point type in any area of the veterinary premises that is accessible to members of the public. The name tag shall include your name, registration type, and registration number issued by the Board. (BPC section 4826.3.)

◊ Professional Judgment Protections

A premises registration holder who is not a California-licensed veterinarian will be prohibited from interfering with, controlling, or otherwise directing the professional judgment of any California licensed veterinarian or RVT. The Board will be authorized to require any information, including, but not limited to, employment contracts between the premises registration holder and a California-licensed veterinarian or RVT the Board deems is reasonably necessary for the enforcement of this section. (BPC section 4854.1.)

In addition, the Board will be able to deny, revoke, or suspend a license or registration or assess a fine for exercising control over, interfering with, or attempting to influence the professional judgment of another California-licensed veterinarian or RVT through coercion, extortion, inducement, collusion, or intimidation through any means, including, but not limited to, compensation, in order to require the other California-licensed veterinarian or RVT to perform veterinary services in a manner inconsistent with current veterinary medical practice in this state. (BPC section 4883, subd. (t).)



¹ The American Association of Veterinary State Boards (AAVSB) will still require the Board to approve alternate route candidates to sit for the examination. The Board is working with AAVSB to identify improvements to streamline the review/ approval process.

♦ Veterinary Technician Specialists

Only licensees and registrants who are certified by an American Veterinary Medical Association-Recognized Veterinary Specialty Organization may make a statement, claim, or advertisement that the licensee or registrant is a veterinary specialist or board certified. Claiming to be a specialist without being properly certified can subject your license to disciplinary action. (BPC section 4883, subd. (s).)

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and address of record are current and valid. This will
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regarding important updates to laws and regulations,
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emails any inquiries regarding pending complaints,
which assists in resolving the allegations quicker. Your
email address is confidential and not subject to public
disclosure. (BPC section 4900, subd. (d).)

Veterinarian

Applicants:

♦ Elimination of California State Board Examination (CSBE) Through the Department of Consumer Affairs (DCA) Office of Professional Examination Services (OPES), the Board completed an Occupational Analysis and Linkage Study for the national and state veterinarian examinations and deemed the state examination redundant to the national examination. As such, the Board voted to eliminate the state examination from the veterinarian licensing requirements, and AB 1535 repeals the state examination requirement. Effective January 1, 2022, passing the CSBE will no longer be required to obtain a veterinarian license.

♦ Applicants Licensed Out-of-State

» California Course No Longer Required

If you are an out-of-state licensee seeking a California license, you will no longer be required to take a course on regionally specific and important diseases and conditions that are common in California.

» Passed National Examination Over Five Years Ago

If you passed the national licensing examination over five years from the date of submitting the California veterinarian license application, you will be required to satisfy one of the following:

- (i) Retake and pass the national licensing examination.
- (ii) Submit proof of having practiced clinical veterinary medicine for a minimum of two years and completed a minimum of 2,500 hours of clinical practice in another state, Canadian province, or United States territory within the three years immediately preceding filing an application for licensure in this state.
- (iii) Complete the minimum continuing education requirements of BPC section 4846.5 for the current and preceding year. (BPC section 4846, subd. (a)(5)(A).)

♦ Change of Address Notification

Applicants will be required to notify the Board of any changes in mailing or employment address that occur after filing the application. (BPC section 4847.1, subd. (c).)

♦ Abandoned After One Year

Applications will be deemed abandoned if all license requirements are not completed within one year after the application has been filed with the Board. (BPC section 4847.1(a).)

Veterinarians:

♦ Full Two-Year Initial License Regardless of Birth Month

Currently, initial licenses are issued with expiration periods based on the licensee's birth month. The difference in each licensee's initial license period could span anywhere from 13 to 24 months, even though all licensees pay the same

initial license fee. AB 1535 changes the initial license period to a full two years, regardless of the licensee's birth month. (BPC section 4900, subd. (a).)



♦ Professional Judgment Protections

A premises registration holder who is not a California-licensed veterinarian will be prohibited from interfering with, controlling, or otherwise directing the professional judgment of any California licensed veterinarian or RVT. The Board will be authorized to require any information, including, but not limited to, employment contracts between the premises registration holder and a California-licensed veterinarian or RVT, the Board deems is reasonably necessary for the enforcement of this section. (BPC section 4854.1.)

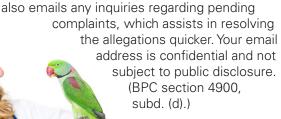
In addition, the Board will be able to deny, revoke, or suspend a license or registration or assess a fine for exercising control over, interfering with, or attempting to influence the professional judgment of another California-licensed veterinarian or RVT through coercion, extortion, inducement, collusion, or intimidation through any means, including, but not limited to, compensation, in order to require the other California-licensed veterinarian or RVT to perform veterinary services in a manner inconsistent with current veterinary medical practice in this state. (BPC section 4883, subd. (t).)

♦ Veterinary Specialists

Only licensees and registrants who are certified by an American Veterinary Medical Association-Recognized Veterinary Specialty Organization may make a statement, claim, or advertisement that the licensee or registrant is a veterinary specialist or board certified. Claiming to be a specialist without being properly certified can subject your license to disciplinary action. (BPC section 4883, subd. (s).)

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University Veterinarian

Applicants:

You will no longer be required to complete a course on regionally specific and important diseases and conditions that are common in California in order to obtain a university license.

♦ Change of Address Notification

Applicants will be required to notify the Board of any changes in mailing or employment address that occur after filing the application. (BPC section 4847.1, subd. (c).)

♦ Abandoned After One Year

Applications will be deemed abandoned if all license requirements are not completed within one year after the application has been filed with the Board. (BPC section 4847.1(a).)

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disclosure. (BPC section 4900, subd. (d).)

Temporary/Intern Licensees

 The Board will no longer be issuing temporary veterinarian licenses for temporary practice and/or internships. Instead, all individuals previously seeking a temporary license will apply for a full veterinarian license.

Shelters

• Licensure Exemption

Persons who have received proper training and provide specified care, pursuant to protocols written by veterinarians, to animals lawfully deposited with or impounded by a shelter not registered with the Board will be exempt from licensure requirements. Such care will include administering nonprescription vaccinations, nonprescription medications, and medications administered pursuant to a written treatment plan from the licensed veterinarian. (BPC section 4287, subd. (a)(5).)

FAQs

Question: Except for the CSBE, I have met all other license requirements. Do I need to reapply to get my veterinarian license?

Answer: No. There is no need to reapply. Board staff has identified all applicants who are only waiting to take the CSBE for a veterinarian license. After January 1, 2022, the Board will issue licenses to these applicants.

Question: I applied and paid for the CSBE, but it is now no longer required. Can I get a refund?

Answer: Board staff will proactively identify all those who have paid to take the CSBE and never completed it and will issue refunds after January 1, 2022.

Question: I want to participate in an internship or residency program in California, but I can no longer obtain a temporary license. What can I do?

Answer: All individuals who would have met the requirements to obtain a temporary license pursuant to BPC section 4848.3 will meet the requirements for a permanent license without the direct supervision of a California licensee. If you have graduated from a Board recognized veterinary college, submitted fingerprints, passed the national and California law examinations, simply complete a veterinarian application through BreEZe.

Question: I am an unlicensed individual working at a shelter that solely administered nonprescription vaccinations and medications to impounded animals. Does my shelter require a premises registration?

Answer: No, as long as the only veterinary care provided at the shelter is administering preventative or prophylactic nonprescription vaccinations to animals, administering nonprescription medications for the control or eradication of apparent or anticipated internal or external parasites, or administering medications prescribed by a veterinarian pursuant to a written treatment plan from the licensed veterinarian for that specific animal. However, the shelter will be required to report to the Board any adverse event resulting in significant impairment or death from the care provided, on a form prescribed by the Board, including severe injuries, infections, and unintended reactions caused by the incorrect or inappropriate administration of a vaccine or medications.

AB 1282 Transitions Animal Blood Banks From a Closed Colony Model to a Community-Sourced Model

AB 1282 (Bloom, Chapter 752, Statutes of 2021) allows community-based animal blood banks to commercially sell animal blood from community donors and expands the scope of actions constituting veterinary medicine to include the collection of blood from an animal for the purpose

of transferring or selling that blood and blood component products, as defined, to a licensed veterinarian for use at a registered premises, except in certain circumstances. Since blood collections are now deemed the practice of veterinary medicine, all locations where collections occur must obtain a premises registration from the Board. (BPC sections 4826, subd. (f), and 4853.) In addition, the community blood bank must comply with blood or blood component product registration requirements under the Food and Agricultural Code (commencing with section 9241). (BPC section 4920.5.)

AB 1282 authorizes the Board to establish a community-based animal blood bank registration and annual renewal fee to cover the costs associated with oversight and inspection of community-based animal blood banks. (BPC section 4920.4.) On or after January 1, 2022, initial premises applications and renewals will ask the premises registration holder if they are operating a community-based blood bank. The Board will use this information to determine costs associated with oversight and inspections. Once the information is received, the Board will analyze the costs and determine whether a fee should be added to register the veterinary premises as a community blood bank.

In addition, AB 1282 establishes specified safety procedures, such as veterinarian supervision and testing of the blood and requires both closed colony and community-based animal blood banks to submit quarterly reports to the California Department of Food and Agriculture (CDFA), who would subsequently be required to phase out licensing of closed colony blood banks within 18 months once the reports show that community-based blood banks are collecting an annual amount equal to the amount sold by closed colony blood banks in four consecutive quarters.

Animal Physical Rehabilitation

On November 15, 2021, the Board's regulatory proposal to add California Code of Regulations (CCR), title 16, section 2038.5 related to animal physical rehabilitation (APR) was approved by the Office of Administrative Law (OAL). The regulatory action becomes effective January 1, 2022. This regulation defines APR and clarifies when APR may be performed by RVTs and veterinary assistants.



Continuing Education Audits

The Board's Continuing Education (CE) Audit program launched in January 2021. One of the main goals while launching this program was to make it as simple as possible for licensees to provide the necessary information to the Board. If you are selected for an audit, the Board will send an email to the email address provided in your BreEZe account and/or mail a certified letter to your address of record. The email and/or letter will provide clear instructions on how to demonstrate CE compliance and the contact information for the analyst completing your CE audit.

The fastest and easiest way for licensees to demonstrate compliance during a CE audit is to have all CE certificates/ documentation already stored in the American Association of Veterinary State Board's (AAVSB) RACEtrack program.

RACEtrack is a free service that allows veterinary professionals the ability to record CE coursework in a single centralized database. This system easily communicates your CE to your credentialing agencies while also allowing the Board to retrieve your CE. If all of your CE documentation

is in RACEtrack, you would simply let the Board know by replying to the CE Audit email you received. For more information on RACEtrack, visit their website <u>here</u>.

Any CE documentation not stored in RACEtrack will need to be emailed directly to the CE analyst completing your audit. Once received, the CE analyst will conduct spot checks with providers to ensure the accuracy of the certificates.

The most common CE compliance violation is licensees taking too many self-study courses online and not enough interactive courses. Licensees can take up to six hours of self-study courses, pursuant to BPC section 4846.5, subdivision (b)(2)(A). Pre-recorded courses offering a quiz or Q&A after the recording is considered a self-study course. (CCR, tit. 16, section 2085, subs. (f).)

A good rule of thumb when looking for online CE courses is to make sure the course offers participatory interaction between the presenter and the audience throughout the course.



Thank You, Dr. Nunez



Thank you, Dr. Nunez, for serving the Board as president throughout 2021. Your leadership and navigation through issues facing the Board during virtual meetings and all your work in between each meeting is greatly appreciated. The Board looks forward to your continued

service on the Board through the end of your term and is grateful for everything you have done to smoothly transition the new 2022 president, Kathy Bowler.



Thank You, Ms. Pawlowski



In October 2021, Multidisciplinary Advisory Committee (MDC) Member/ Chair Kristi Pawlowski, RVT, said goodbye to the MDC after six years of serving California consumers. Here were her remarks:

"I would like to take this opportunity to thank each member of our committee for their personal time and commitment. The MDC is

devoted to assist and advise the Veterinary Medical Board through difficult and often controversial laws and policies. It has been our duty to research, spend time gathering information, and presenting our findings. We all interviewed with the Veterinary Medical Board, and one of the questions asked of us was 'How will you handle defending or presenting a position that is not popular with your profession or colleagues?' I am before you today as a complete representation that I have defended and presented positions that may not have been my personal opinions, but were the findings of long hours, dedication, and tireless effort of our committee.

"We have all chosen to work within the boundaries of our Veterinary Medicine Practice Act to achieve what is best to protect consumers and animals, thereby protecting the veterinary profession. We fight to safeguard what is most valuable to all those working on the MDC and the VMB—animals and those who serve them.

"I encourage anyone participating, whether it be in the audience or through the committee or the Board, to take a chance to get to know one another. We are all on a similar course. The path we choose may be different. The expected outcome may have variations. Some paths have a few more curves than others. However, if we continue discussions, gather more information, have those difficult conversations, we continue our mission to protect consumers and animals through the Veterinary Medicine Practice Act.

"Again, thank you for the many years of entertainment, continued learning, and growth. I look forward to the future.

"Thank you."

Ms. Pawlowski's dedication to the consumers, animal patients, licensees, and stakeholders could be seen in everything she did. The Board deeply appreciates everything she accomplished while diligently serving the MDC. She will be missed.

Meet the Board's 2022 President and Vice President



Kathy Bowler, President

Ms. Bowler has served on the Board since her appointment in 2014 by Governor Jerry Brown and has been vice president since January 2020. In addition to her "day job" detailed below, she has a lifetime of work with her beloved animals, which currently include several giant dogs, five cats, three parrots, ducks, over 50 large koi, and many large turtles. Ms. Bowler engages in many canine activities with her Irish wolfhound, Great Dane, Newfoundland, and adopted Labradoodle, including confirmation showing, obedience, and scent work.

In addition to the Board, Ms. Bowler has served as the public board member on the International Council for Veterinary Assessment since 2015 and two of its standing committees. Ms. Bowler also serves on the boards of two Northern California Breed Clubs. As a major consumer of

veterinary services over the past 40 years, she highly values the veterinary profession and the critical role veterinarians play in the lives of humans and the animals they love and live with.

In the non-animal arena, Ms. Bowler is an accomplished and nationally respected campaign strategist, organization executive, and public policy advisor. With more than 35 years of success winning statewide and district-level elections in California's many and diverse political micro-climates, Ms. Bowler is one of the state's top "go-to" consultants when the job requires a tight focus on voter/consumer demographics, finding key persuadable subgroups, and winning results using effective direct mail, phone, social media, and person-to-person contact. She currently manages campaigns and the budgets for the state Assembly targets in California, in addition to her work for other political and nonprofit clients.



Christina Bradbury, DVM, Vice President

Dr. Bradbury grew up on the coast in Pacifica, California. From her childhood experiences, she developed a deep connection with animals and nature, and ultimately her career as a veterinarian.

Dr. Bradbury pursued an undergraduate degree at the University of California, Davis, in wildlife, fish, and conservation biology and went on to obtain a doctor of veterinary medicine from UC Davis in 2006. After an internship at Texas A&M University, she continued her veterinary training at Colorado State University, completing a combined residency and master of science program. In 2010, she was board-certified in small animal internal medicine, becoming a diplomate of the American College of Veterinary Internal Medicine (ACVIM).

After her residency, Dr. Bradbury returned to Northern California and settled in the Sierra Nevada foothills. She worked in private practice in the Sacramento area for over a decade, and started a mobile specialty practice in 2020, providing minimally invasive procedures and ultrasound to veterinary clinics in the Central Valley and surrounding areas.

Dr. Bradbury has served as a member of the Board since 2018, when she was appointed to the Board by Governor Jerry Brown. She also serves as the Board liaison to the Multidisciplinary Advisory Committee.

In her free time, Dr. Bradbury enjoys adventuring outdoors and spending time with her husband and all of their animals—two very rambunctious Labradors, a very sweet German shepherd, two adorable cats, a spicy thoroughbred, and a sassy quarter horse.

Meet the 2022 MDC Chair and Vice Chair



Richard Sullivan, DVM, Chair

Dr. Sullivan grew up in Southern Wisconsin on a family dairy farm participating in 4-H and FFA programs. He attended Wisconsin State College, Platteville, for two years and then graduated from Purdue University School of Veterinary Medicine. He joined the Peace Corps where he was an extension veterinarian for two years in Mato Grosso, Brazil. He returned to settle in Torrance, California, while his wife, Connie, finished her doctorate in public health in epidemiology at the University of California, Los Angeles.

After four years as an associate, an opportunity to buy into the practice came along, and Dr. Sullivan and his wife decided to stay in California and raise their family. They have one daughter and two sons; one son is also a veterinarian.

Dr. Sullivan became active in organized veterinary medicine at the local, state, and eventually the national level. After he expressed concerns over the Board's development of a cite and fine program, he was asked to serve on a Board committee to develop its regulations. He was hooked on the importance of writing regulations that would be practical and would work as intended. Dr. Sullivan was first elected by the Board to serve on its MDC and then was appointed to the Board by Governor Jerry Brown, where he served for six years. He is now back on the MDC as its chair. In addition, Dr. Sullivan presently represents Hawaii, Nevada, and California on the American Veterinary Medical Association (AVMA) Board of Directors.



Leah Shufelt, RVT

Ms. Shufelt received her bachelor's degree in veterinary technology from Michigan State University in June 2002. She moved to California shortly thereafter and has been working as an RVT in the San Diego area ever since.

Ms. Shufelt is passionate about her career as an RVT, the future of veterinary medicine, and improving the lives of animals and their families. She has worked in emergency/critical care and general practice and currently is the radiation/oncology and imaging supervisor at a large specialty practice. She also teaches as an adjunct instructor in the San Diego Mesa College RVT Program. Ms. Shufelt has been active in organized veterinary medicine, having served on the Board of Directors of the San Diego County Medical Association for nearly 15 years. She

is a member of the House of Delegates for the California Veterinary Medical Association and serves as the chair of the Registered Veterinary Technician Committee. This is her second term as an RVT on the MDC, and she is excited to be the new vice chair.

Ms. Shufelt likes to read, kickbox, and spend time with her family—a husband, two dogs, and a cat.



Veterinarian-Client-Patient Relationship Frequently Asked Questions

Amendments to CCR sections **2032.15** and **2032.25** regarding veterinarian-client-patient relationships (VCPR) in the absence of client communication and the original prescribing veterinarian became effective on April 1, 2021. Since that time, the Board received several questions regarding the VCPR. To educate the veterinary profession and consumers, the Board approved the following **VCPR FAQs** and posted them on the Board's website:

Frequently Asked Questions Regarding Veterinarian-Client-Patient Relationship (VCPR) (California Code of Regulations (CCR), title 16, sections 2032.1, 2032.15, and 2032.25)

1. Can a veterinarian prescribe treatment after a previous associate veterinarian, at the same premises, did a wellness exam?

No; for a second veterinarian to prescribe treatment of a condition, the condition would have to be diagnosed under the original VCPR. If no condition is diagnosed, a new VCPR would have to be established by the second veterinarian to treat the new condition. (CCR, tit. 16, §§ 2032.1, subs. (b)(2), (3), 2032.15, subs. (a)(3), (4).)

However, if the original veterinarian prescribed medications at the time of the wellness exam, then the second veterinarian (or any veterinarian at the same premises) can continue to refill those prescriptions up to a year without a new exam or VCPR. (CCR, tit. 16, §§ 2032.1, subs. (c), 2023.25, subs. (b)(2).)

2. If Doctor A has established the VCPR with the animal patient, can Doctor B (within the same premises), treat the patient for additional follow-up and/or treatment without establishing a new VCPR?

Yes, Doctor B can treat the animal patient for the condition diagnosed by Doctor A, and no new exam is required to change the treatment plan for that condition. (CCR, tit. 16, § 2032.15.)

However, if Doctor B diagnosis a second (new) condition, treatment of the new condition would require Doctor B to establish a new VCPR. (CCR, tit. 16, §§ 2032.1, subs. (a), (b)(2), (3), 2032.15, subs. (a)(4).)

3. If Doctor A has established the VCPR with the animal patient, can Doctor B (within the same premises), prescribe a new medication to treat the condition?

Yes, Doctor B can prescribe a new medication to treat the same condition diagnosed by Doctor A. To do so, Doctor B must consult the animal patient's medical record or Doctor A (primary veterinarian), communicate the change in treatment to the client, and document the new prescription in the animal patient's medical records. (CCR, tit. 16, §§ 2032.15, subs. (a), (b), 2032.3, subs. (a)(12).)



4. Doctor A does relief work at XYZ Emergency Hospital and establishes a VCPR with the animal patient at that location; Doctor A then sees this same animal patient at Doctor A's original home hospital of ABC Hospital. Can Dr. A prescribe from ABC Hospital for said animal patient without establishing another VCPR?

Yes, Doctor A can issue a prescription while working at ABC Hospital to treat the animal patient without establishing a new VCPR, as long as the treatment is for the same condition that Doctor A previously diagnosed. (CCR, tit. 16, § 2032.1, subs. (b)(2).) A VCPR is established by the veterinarian and client for treatment of the animal patient; accordingly, the VCPR follows the veterinarian, not the veterinary premises.

Note: Doctor A should ensure that the animal patient's medical records at ABC Hospital includes records of the original examination and diagnosis performed at XYZ Emergency Hospital, as well as the prescription issued at ABC Hospital. (Business and Professions Code (BPC), § 4855; CCR, tit. 16, § 2032.3, subs. (a).) XYZ Emergency Hospital can share originals or copies of the animal patient's medical records with ABC Hospital. (BPC § 4857, subd. (a)(5).)

If Doctor B also works at ABC Hospital and has not established a VCPR with said animal patient, but needs to refill a prescription in the absence of Doctor A, as long as the complete animal patient records, including records of Doctor A's examination and diagnosis performed at XYZ Emergency Hospital, are located at ABC Hospital and Doctor B has reviewed those records, Doctor B can refill a prescription without a new VCPR. (CCR, tit. 16, § 2032.25, subs. (b)(2).)

5. Can a veterinarian do laboratory tests on an animal patient where no VCPR is established?

Yes; a VCPR is required only if the veterinarian is administering, prescribing, dispensing or furnishing a drug, medicine, appliance, or treatment to the animal patient (except for wild or unowned animals). Part of establishing the VCPR is obtaining sufficient knowledge of the animal(s), which includes through laboratory testing, to initiate at least a general or preliminary diagnosis of the medical condition. (CCR, tit. 16, § 2032.1, subs. (a), (b)(2).).

If the client requests treatment for the animal patient after the laboratory test results are returned, a VCPR, which includes a physical exam, must be established. (CCR, tit. 16, § 2032.1, subs. (a), (b).)

CURES Fee Increase Notice

The fee charged to maintain the Controlled Substances Utilization Review and Evaluation System (CURES) is set to increase from \$6 to \$11 for licenses that expire on or after July 1, 2021, pursuant to **AB 3330** (Calderon, Chapter 359, Statutes of 2020).

Most Board licensees will see a \$22 CURES fee at the time of license renewal, due to the biennial renewal cycle. The fee covers the reasonable regulatory costs of the Department of Justice for operating and maintaining CURES, a critical element in the state's effort to address the growing danger of opioid addiction stemming from prescription drug abuse.

The CURES fee will then decrease to \$18 for licenses expiring on or after July 1, 2023. For more information about CURES, visit https://oag.ca.gov/cures.

2021 Citations and Disciplinary Actions

Want to see what enforcement actions the Board took in 2021? Visit the Board's website **here** for a complete list of enforcement actions taken in 2021.





NEWS RELEASE: Los Angeles County Man Convicted, Cited, and Fined for Practicing Veterinary Medicine Without a License

On October 14, 2021, DCA issued the following news release regarding the outcome of the Board's recent undercover investigation for unlicensed practice.

SACRAMENTO – Marc Ching of Los Angeles pled no contest on the charge of practicing veterinary medicine without a license this summer, resulting from an undercover investigation initiated by the California Veterinary Medical Board (VMB).

The VMB had received complaints from consumers and licensees that Ching, who owned an organic pet food store The PetStaurant, in Sherman Oaks, had engaged in the practice of unlicensed veterinary medicine. An investigation conducted by the Department of Consumer Affairs' Division of Investigation (DOI), Investigation and Enforcement Unit—Chatsworth Field Office, and the VMB followed.

The probe revealed that Ching had practiced veterinary medicine without a license by diagnosing ailments and prescribing treatments to pets. Moreover, the website of Ching's pet food store, The PetStaurant, had posted instructions on how to treat undiagnosed pet conditions.

DOI investigators had shared evidence with the office of Los Angeles City Attorney Mike Feuer for criminal prosecution.

As a result of this joint investigation, on August 3, 2021, Ching was criminally convicted of unlicensed practice of veterinary medicine and sentenced to 12 months of probation and a \$1,000 fine.

On September 24, 2021, the VMB issued Ching a citation and a \$5,000 fine for the unlicensed practice of veterinary medicine and unlicensed activity at an unregistered veterinary premise.

"Unlicensed veterinary practice endangers the lives of animal patients throughout California and will not be tolerated," said VMB Executive Officer Jessica Sieferman. "The VMB appreciates the continued partnership with DOI and local officials in investigating and prosecuting these cases."

The VMB encourages any individuals with evidence of unlicensed practice to file a complaint by completing an online complaint form available at www.vmb.ca.gov.

The citation against Ching is available to view here: https://www.vmb.ca.gov/forms-pubs/ching-marc-cit.pdf.

Combating unlicensed practice is part of the Board's
Strategic Plan and will continue to be a priority of the Board.
The Board issued 11 citations for unlicensed practice in
2021, totaling \$59,000 in fines. Anyone
seeking veterinary care for their pet is
strongly encouraged to verify the license

first by visiting **DCA's License Search page**.

Drug Enforcement Administration Letter to Registrants Regarding Prescriptions

The following email was sent from the federal Drug Enforcement Administration (DEA) to all DEA registered pharmacies and practitioners to remind registrants that paper prescriptions must be manually signed by the prescribing practitioner. Included below is the entire text of the DEA email to registrants:

Dear Registrant:

DEA wishes to remind registrants that paper prescriptions, including prescriptions created on paper and prescriptions generated by computer or a prescription application that are printed out or faxed by a practitioner, must be manually signed by the prescribing practitioner.

The Controlled Substances Act (CSA) and its implementing regulations specify the requirements for issuing and filling prescriptions for controlled substances. By statutory requirement, a valid prescription issued by a DEA-registered practitioner (or a practitioner exempt from the requirement of registration) is required for dispensing a controlled substance, unless the controlled substance is dispensed directly by a practitioner. 21 U.S.C. 829; 21 CFR 1306.11.

The CSA provides that a pharmacist may dispense schedule III and IV controlled substances pursuant to a "written or oral prescription." 21 U.S.C. 829(b). DEA regulations further specify that a pharmacist may dispense a controlled substance listed in schedule III, IV, or V pursuant to "either a paper prescription signed by a practitioner [or] a facsimile of a signed paper prescription transmitted by the practitioner or the practitioner's agent . . . " 21 CFR 1306.21(a). With respect to paper prescriptions for controlled substances in any schedule, DEA regulations provide that a "computergenerated prescription that is printed out or faxed by the practitioner must be manually signed." 21 CFR 1306.05(d). Controlled substances in schedules III, IV, and V may also be dispensed by a pharmacist pursuant to "an oral prescription made by an individual practitioner and promptly reduced to writing by the pharmacist containing all information required [for a valid prescription] in § 1306.05(a), except for the signature of the practitioner." 21 CFR 1306.21(a).

In addition, DEA regulations permit a practitioner to issue, and a pharmacy to process, electronic prescriptions for controlled substances in schedules II-V provided that the requirements in part 1311 are met. 21 CFR 1306.08, 1306.05(e), and 1311.100(b),(e).

Because schedule II controlled substances have a higher potential for abuse and a greater likelihood of dependence

compared to those in schedules III-V, the CSA's controls on schedule II controlled substances are more restrictive. Therefore, the CSA and DEA regulations permit a schedule Il controlled substance to be dispensed only pursuant to a written prescription signed by the practitioner, except in emergency situations when dispensing pursuant to an oral prescription is permitted. 21 U.S.C. 829(a); 21 CFR 1306.11(a),(d).1 DEA regulations further provide that a paper prescription for a controlled substance in schedule II "may be transmitted by the practitioner or the practitioner's agent to a pharmacy via facsimile equipment, provided that the original manually signed prescription is presented to the pharmacist for review prior to the actual dispensing of the controlled substance" 21 CFR 1306.11(a). Certain limited exceptions apply to prescriptions for narcotic substances to be compounded for direct administration to a patient and to prescriptions for residents of long term care facilities and patients in certain hospice care programs. 21 C.F.R. 1306.11(e)-(g). However, in most cases, a pharmacist must receive the original, manually signed paper prescription or an electronic prescription meeting the requirements of part 1311 prior to dispensing a schedule II controlled substance.

In sum, DEA wishes to reiterate that paper prescriptions, including prescriptions created on paper and prescriptions generated by computer or a prescription application that are printed out or faxed, must be manually signed by the practitioner. This includes prescriptions faxed via computer or a prescription application which does not meet the requirements for electronic prescriptions in part 1311. Further, registrants are reminded that "the responsibility for the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription." 21 CFR 1306.04(a).

We hope this information is helpful. For information regarding DEA's Diversion Control Division, please visit **www.DEAdiversion.usdoj.gov**. Please contact the Diversion Control Division, Policy Section at (571) 362-3260 for further questions.







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2022 Meeting Dates

Multidisciplinary Advisory Committee

January 18 April 19 July 19 October 18

Veterinary Medical Board

January 19–20 April 20–21 July 20–21 October 19–20

