

CALIFORNIA VETERINARY MEDICAL BOARD MEETING MINUTES April 16-17, 2025

In accordance with Government Code section 11122.5, subdivision (a), the California Veterinary Medical Board (Board) met in-person with additional public participation available via teleconference/WebEx Event on **Wednesday, April 16, 2025**, and **Thursday, April 17, 2025**, with the following location available for Board and public member participation:

Department of Consumer Affairs
1625 North Market Boulevard, Hearing Room
Sacramento, CA 95834

10:00 a.m., Wednesday, April 16, 2025

Webcast Links:

- Agenda Items 1-5 (<https://youtu.be/caEdhsaY4i0>)
- Agenda Items 6-8 (<https://youtu.be/9SSpOzLiqYE>)

1. Call to Order / Roll Call / Establishment of a Quorum

Board President, Maria Preciosa S. Solacito, Doctor of Veterinary Medicine (DVM), called the meeting to order at 10:00 a.m. Executive Officer (EO), Jessica Sieferman, called roll, and six members of the Board were present, with Christina Bradbury, DVM, participating remotely; a quorum was established.

Members Present

Maria Preciosa S. Solacito, DVM, President
Kristi Pawlowski, Registered Veterinary Technician (RVT), Vice President
Christina Bradbury, DVM
Patick Espinoza, Esq.
Barrie Grant, DVM
Steve Manyak, DVM

Student Liaisons Present

Anna Styles, Western University of Health Sciences (Western University)
Holly Masterson, University of California, Davis (UC Davis)

Board Staff Present

Jessica Sieferman, EO
Matt McKinney, Deputy EO
Alicia Hernandez, Administration/Licensing Manager
Ashley Sanchez, Enforcement Manager
Justin Sotelo, Policy Specialist
Rob Stephanopoulos, Enforcement Manager
Keith Betchley, Enforcement Analyst
Kellie Fairless, Licensing Lead Analyst
Nellie Forget, Enforcement Analyst
Jacqueline French, Enforcement Analyst
Kimberly Gorski, Enforcement Analyst
Brett Jarvis, Enforcement Analyst
Amber Kruse, Enforcement Analyst
Anh-Thu Le, Enforcement Analyst
Rachel McKowen, Probation Monitor
Robert Rouch, Enforcement Analyst
Bryce Salasky, Enforcement Analyst
Daniel Strike, Enforcement Analyst
Phillip Willkomm, Special Investigator

Department of Consumer Affairs (DCA) Staff Present

David Bouilly, Moderator, Strategic Organizational Leadership and Individual Development (SOLID)
Alice Bourdykina-Jelobniouk, Legislative Manager, Legislative Affairs Division
Elizabeth Dietzen-Olsen, Regulations Counsel, Attorney III, Legal Affairs Division
Peter Fournier, Information Officer I, Office of Public Affairs (OPA)
Lynne Reinhardt, Enforcement Program Manager, Board of Chiropractic Examiners
Cesar Victoria, Television Specialist, OPA
Kristen Walker, EO, Board of Chiropractic Examiners
Tara Welch, Board Counsel, Attorney IV, Legal Affairs Division

Guest Presenters

Marie Ussery, RVT, Chair, Multidisciplinary Advisory Committee (MDC)
Matthew Wainwright, Legislative and Regulatory Manager, DCA, Legislative Affairs Division

Guests Present

Karen Atlas, President, Animal Physical Therapy Coalition (APTC)
GV Ayers, Lobbyist, Gentle Rivers Consulting, LLC, contract lobbyist for APTC

Joanne Bak, DVM, Certified Canine Rehabilitation Therapist (CCRT), Physical Therapist (PT)
Dan Baxter, Executive Director, California Veterinary Medical Association (CVMA)
Dawn Benton, MBA, Executive Vice President & CEO, California Chiropractic Association
Sarah Brennan, Account Executive, Weideman Group
Carrie Ann Calay
Faith Conley, Director, Weideman Group
Gary Cooper
Nancy Ehrlich, RVT, California Registered Veterinary Technicians Association (CaRVTA)
Eddie Franco, Consultant, Assembly Committee on Business and Professions
Bharon Hoag, Executive Director, One Chiropractic
Chazney Johnson
Bonnie Lutz, Esq., Klinedinst
Edie Marshall, DVM, Branch Chief, California Department of Food and Agriculture (CDFA), Animal Health and Food Safety Services (AHFSS), Antimicrobial Use and Stewardship (AUS) Program
Grant Miller, DVM, Director of Regulatory Affairs, CVMA
Katie Murray, DVM, CDFA, AHFSS
Mark Nunez, DVM, Director, American Association of Veterinary State Boards (AAVSB) and Member, MDC
Marissa Palmer, Doctor of Chiropractic (DC), Director of Government Affairs, California Chiropractic Association (CalChiro)
Marissa Silva, DVM, CDFA, AHFSS
Leah Shufelt, RVT, Member, MDC
Julianna Tetlow, San Diego Humane Society
TTY
Pamela Wittenberg, DVM, Santa Rosa Junior College
Scott Young, Summit / Pharma Policy Center

Dr. Solacito made a land acknowledgement to publicly recognize the indigenous peoples who have been dispossessed and displaced from their ancestral homelands and territories, and the culture, history, and continued contributions of the original caretakers of the land on which the meeting was held, including the Nisenan, Southern Maidu, Valley and Plains Miwok, Patwin Wintun Peoples, and the Wilton Rancheria tribes. She noted the Board's continued commitment to working with the tribes on issues of mutual concern.

2. Public Comment on Items Not on the Agenda

Public Comment: Dr. Solacito requested public comment on this item. The following public comment was made on this item:

- [Bonnie Lutz](#), Esq., Klinedinst, provided the Board with the following public comment:

Scanning for a Microchip as Part of the Standard Procedure for Physical Examinations

As a result of receiving many questions on the topic, Ms. Lutz raised concerns about whether scanning for a microchip should be part of the standard procedure for a physical examination. She noted that there seems to be a lot of misinformation regarding the issue. She emphasized the risk of disclosing confidential information if someone scanning goes too far in trying to reunite an animal with its owner. Ms. Lutz stated that she has been advising that scanning is permissible, but that individuals need to be careful with confidential information. She also noted that she committed to the Southern California Veterinary Medical Association that she would bring this issue forward to the Board.

3. [Review and Approval of January 15-16, 2025 Board Meeting Minutes](#)

Ms. Sieferman stated that Ms. Pawlowski had provided minor corrections to the [January 15-16, 2025 meeting minutes](#) and that staff had incorporated those corrections. Ms. Pawlowski shared her corrections with the Board. Dr. Bradbury and Ms. Sieferman also offered a couple of minor revisions.

Motion: Dr. Solacito requested a motion. Christina Bradbury, DVM, moved and Barry Grant, DVM, seconded a motion to approve the January 15-16, 2025 meeting minutes, as amended.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comment was made on the motion:

- [Karen Atlas](#), President, APTC, provided the following public comment:

Clarification Regarding Statement in the Board Meeting Minutes

Ms. Atlas stated that she wanted to make a clarification regarding one of her comments in the Board meeting minutes. She clarified that her group is trying to assure that decisions are made with facts and that the decisions help the consumers.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

4. Report and Update from Department of Consumer Affairs (DCA)

Matthew Wainwright, Legislative and Regulatory Manager, Legislative Affairs Division, thanked the Board for the opportunity to provide a DCA update. He stated that he would be reporting on two items: the Governor's reorganization plan; and, the hybrid telework transition.

- **Governor's Reorganization Plan:** Mr. Wainwright stated that in January 2025, Governor Gavin Newsom released his proposed 2025–2026 State Budget, which included a plan to split the current Business, Consumer Services and Housing Agency (Agency) into two separate state agencies: the California Housing and Homelessness Agency (CHHA), which will oversee housing and homelessness solutions and safeguard civil rights; and, the new Business and Consumer Services Agency, which will be responsible for consumer affairs, licensing, and enforcement. DCA would be among the eight entities under the new agency.

He explained that on April 4, 2025, the reorganization plan was delivered to the nonpartisan Little Hoover Commission, starting a 90-day formal process. Public hearings will be held for interested parties, and within 30 days of receiving the plan, the Commission will submit a report with its recommendation to the Governor and Legislature. The Legislature then has 60 days to consider the reorganization plan; unless either chamber adopts a resolution to reject it, the plan will automatically go into effect on the 61st day.

If approved, the new Business and Consumer Services Agency will be created in July 2025, with a one-year transition period, and will become operative on July 1, 2026. Mr. Wainwright emphasized that this is an extraordinary opportunity for DCA to align more closely with consumer protection entities and will strengthen its mission and delivery of services. DCA will continue to keep board and bureau leadership informed of the plan's progress.

- **Hybrid Telework Transition:** Mr. Wainwright noted that on March 3, 2025, Governor Newsom issued an executive order requiring all state agencies and departments to update their hybrid telework policies, increasing in-office work from two to four days per week starting July 1, 2025. On March 13, 2025, the California Department of Human Resources (CalHR) issued guidance outlining

implementation and when exceptions to the four-day requirement may be granted.

Mr. Wainwright shared that DCA has been working closely with several programs to identify additional space for this transition and has been actively responding to questions. DCA will continue to update leadership as further direction is received from CalHR.

Discussion: The following was discussed:

Regarding the Governor's reorganization plan, Dr. Manyak asked if there would be a change in how the Board functions in the interim while the plan is being put in place during the 60 days, and then afterwards. Mr. Wainwright responded that he did not have any additional information beyond what was provided to him at that time; however, he could pass the question on to DCA's Board and Bureau Relations office. With regard to the reorganization plan, Ms. Sieferman explained that there would be no change to Board operations.

Once the reorganization plan becomes operative, Dr. Bradbury asked who DCA would be reporting to. Mr. Wainwright responded that DCA would be reporting to the new Business and Consumer Services Agency. He added that DCA would be one of eight departments under that agency.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

5. Review, Discussion, and Possible Action on Multidisciplinary Advisory Committee (MDC) Report—*Marie Ussery, RVT, Chair, MDC*

A. Overview of April 15, 2025 Meeting

Ms. Ussery provided the Board with an overview of the [April 2025 MDC meeting](#) as follows:

- **Meeting Overview:** The meeting began at 10:00 a.m. with a quorum established. One public comment from Bonnie Lutz was received, which was the same public comment Ms. Lutz provided to the Board. The January 14, 2025 MDC meeting minutes, with minor amendments, were approved. Ms. Ussery stated that MDC agenda items 4 through 7 would be discussed in greater detail after her overview.
- **Inspections Subcommittee Update:** The mobile inspection application, launched in November 2024, has streamlined the inspection process. The hospital standards self-evaluation checklist is being updated to align with current law, add code hyperlinks, and revise or remove unsupported objectives and compliance examples. A draft is expected by July 2025. The

Subcommittee identified statutes and regulations needing creation, amendment, or repeal to clarify laws, close loopholes, and remove redundancies. Legislative and regulatory proposals will be drafted for MDC and Board consideration at future meetings.

- **Outreach Subcommittee Update:** The Subcommittee continues to focus on spectrum of care, engaging with UC Davis faculty and AAVSB resources. They emphasized how vital good medical records are and the importance of documenting recommendations that the client declines. The Subcommittee has also been discussing unlicensed practice. They've been reviewing outreach materials supplied by a reproductive services veterinarian geared towards educating educated consumers, mostly breeders at dog shows. The Subcommittee is also reworking the materials for consumers who may not be as familiar with the topics.
- **CDFA Subcommittee Update:** Blood bank regulations were recently approved and go into effect July 2025. CDFA appreciated the Board's help in getting the word out to veterinarians. Highly pathogenic avian influenza (HPAI) is still overwhelming multiple departments at CDFA, so an in-depth update was not provided. However, it was mentioned that the strategy for managing HPAI in dairies varies based on the area of the state where the dairy is. HPAI is now affecting most areas in California except for a few coastal and northern regions.

B. Recommendation on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 4825.1 and 4827 Regarding Veterinary Medicine Practice Exemptions

Ms. Ussery presented the [meeting materials](#) to the Board. At the conclusion of her presentation, she reported that revisions were made to the legislative proposal at the April 15, 2025 MDC meeting to clarify language and address public comments received; the revised proposal was emailed to Board members. Ms. Ussery explained the MDC revisions to the proposal. (See April 2025 MDC and Board revisions below).

Discussion: The Board discussed the agenda item and legislative proposal as follows:

- **Appreciation for Work and Legislative Context:** Ms. Ussery was thanked for the excellent job summarizing a very complex issue and making it more straightforward. The Board also acknowledged the extensive effort by the Unlicensed Practice Subcommittee and input from stakeholders. While the proposed legislation does not specifically mention racehorses, it was clarified that the California Horse Racing Board already oversees that area and has enforcement authority within enclosures to stop unlicensed practice.

However, this does not address the unlicensed running of races, which remains a serious issue.

- **Shelter Stakeholder Feedback and Board Response:** Gratitude was expressed for the stakeholder outreach work and responsiveness to input. Disappointment was noted regarding the contentious tone of some stakeholder letters, particularly from the shelter community, despite the Board's efforts to support them through revised minimum standards and other accommodations. It was felt that although the Board is trying hard to be supportive, it often seems like it is never enough.
- **Definition Inconsistencies and Legislative Language Concerns:** Concerns were raised about inconsistencies in definitions, such as amphibians being included in some sections and omitted in others. Suggestions were made to streamline the language—for example, amending livestock definitions to state that it includes all animal species, since poultry, aquatic animals, and amphibians fall under that category. It was also pointed out that the current language in one provision might allow a shelter employee to euthanize a sick animal without a veterinarian present, even outside the shelter, and that clarification is needed to specify that such activities must occur within the scope of employment at the shelter.
- **First Aid and Owner Authority to Provide Care:** Significant concern was expressed over whether the legislation clearly allows pet owners to provide first aid to their own animals. Stakeholders feared that without explicit permission, owners might be penalized for basic care such as applying a bandage. Some Board members had discussed the issue and assumed such care was implicitly allowed, but others emphasized that relying on assumption could lead to misinterpretation or enforcement issues in the future.
- **Proposal to Add a First Aid and Husbandry Exemption Clause:** The Board discussed adding a new paragraph (8) to subdivision (a) of BPC section 4827, stating that nothing prevents owners from providing standard husbandry and first aid. Concerns arose that including such an exemption would require definitions for both terms. It was noted that without clear definitions, enforcement staff would be forced to interpret the law without legal basis. The proposed definition of "first aid" would include care aimed at preserving life, reducing pain and discomfort, and minimizing the risk of permanent disability or disfigurement until a licensed veterinarian becomes available.
- **Concerns About Scope and Legal Interpretation:** There were concerns that a new exemption could serve as a loophole, allowing individuals to claim they were performing first aid even when engaging in more advanced procedures, such as surgery. Suggestions were made to limit the scope to

“basic” or “initial” first aid, or to care provided solely to one’s own animal. Others warned against trying to define every possible scenario, arguing instead that the focus should remain on whether an activity constitutes the practice of veterinary medicine. Emphasis was placed on allowing animal owners to act in emergencies, especially in rural areas, such as applying pressure to stop bleeding.

- **Balancing Enforcement with Stakeholder Practicalities:** The Board agreed that the exemption must balance permitting reasonable care—especially in shelters and underserved areas—without opening the door to unregulated veterinary practice. Concerns from shelter groups emphasized that new restrictions could hinder their ability to help animals due to limited access to veterinary services. The Board recognized the importance of addressing these concerns, while maintaining clear and enforceable standards.

Public Comment: Dr. Solacito requested public comment regarding the proposed addition of a first aid and husbandry exemption clause (new paragraph (8) in subdivision (a) under BPC section 4827). The following public comments were made regarding the proposed addition:

- [Dan Baxter](#), Executive Director, CVMA, provided the following public comment:

Wording Clarification

Mr. Baxter noted that the language in the proposed exemption is written in the conjunctive—requiring someone to meet all three conditions (preserve life, reduce pain and discomfort, and minimize the risk of disability or disfigurement) to qualify as first aid. He suggested revising the phrasing to be disjunctive (using “or”) to reflect the likely intent, so that meeting any one of those criteria would suffice.

Questioning the Need for a First Aid Clause

Mr. Baxter agreed with the perspective that basic first aid does not constitute the practice of veterinary medicine. This led him to question whether paragraph (8) is even necessary in the proposed language, since first aid may already fall outside the scope of regulated veterinary practice.

Need for Clear Legal Boundaries

Mr. Baxter stated that if the Board moves forward with drafting paragraph (8), the language must clearly distinguish between what qualifies as veterinary

medicine and what does not, in order to avoid regulatory confusion or enforcement issues.

- [Bonnie Lutz](#), Esq., Klinedinst, provided the following public comment:

Support for Paragraph (8)

Ms. Lutz expressed appreciation for the Board's efforts in tackling this complex issue and stated she supports paragraph (8). She emphasized that it helps address her concern, voiced previously, about owners potentially facing repercussions for providing first aid to their own animals. She liked that paragraph (8) offers some clarity, even if it is not perfect.

Concern About Veterinarians Reporting Owners

Ms. Lutz shared her concern that veterinarians could retaliate against clients they dislike by filing complaints with the Board if they believe an owner provided inappropriate first aid. This could place the Board in a difficult position of judging whether the owner's actions were appropriate—something that diverges from the intent of the statute, which is focused more on addressing unlicensed professional services, rather than penalizing owners caring for their own animals.

Value of Clarifying Language Despite Imperfect Enforcement

Ms. Lutz acknowledged the challenge staff face in interpreting vague statutes and noted that, in practice, staff and experts already interpret ambiguous regulations frequently. She cited the example of the humane care requirement and said paragraph (8) offers a needed foundation to guide future interpretations, even if definitions evolve. As with how standards around pain management after spaying have changed over decades without explicit statutory changes, she sees the value in allowing interpretation to develop over time and believes paragraph (8) provides a reasonable starting point.

- [Nancy Ehrlich](#), RVT, CaRVTA, provided the following public comment:

Concern About Mandatory Veterinary Follow-Up

Ms. Ehrlich raised a concern about the phrase "until a licensed veterinarian can assess the animal". She questioned whether an owner who bandages their dog's injured paw, observes that it heals well, and decides not to take the dog to a veterinarian, could get in trouble under the current language. Her comment highlights a situation where first aid may be sufficient and veterinary follow-up may not be necessary.

- [Carrie Ann Calay](#) provided the following public comment:

Support for Including Husbandry in Paragraph (8)

Ms. Calay expressed support for adding husbandry practices to paragraph (8), agreeing with prior suggestions. She emphasized that basic care, like treating abscesses on donkeys, deworming pets with products from the feed store, or applying salve for mange are common, necessary tasks that owners perform in the field. She noted these actions are part of everyday animal care and should be clearly protected under the law.

Concern That Paragraph (8) Undermines the Broader Proposal

She also stated that by including both husbandry and animal first aid in the exemption, the Board may be largely negating the need for the broader legislative proposal. In her view, the proposal seems to focus on eliminating the owner exemption and targeting small businesses performing services like insemination, while favoring exemptions for livestock or food animal producers. She urged the Board to step back and consider the overall implications rather than getting lost in the details.

- [Karen Atlas](#), President, APTC, provided the following public comment:

Request for Inclusion of Collaborative Care Exemption

Ms. Atlas reiterated that the proposals under discussion have not incorporated her coalition's recommendations, which include creating an exemption within the Practice Act to allow veterinarians to collaborate with other qualified animal healthcare professionals. She explained that this would enable veterinarians to refer patients to non-veterinarian providers who are nonetheless qualified to deliver safe and effective care under veterinary supervision.

Benefits of the Referral Exemption

She emphasized that this change would not only support interprofessional collaboration—something many California veterinarians are actively seeking—but also reduce the enforcement burden on the Board. Specifically, it would help distinguish between harmful unlicensed activity and cases where no harm occurred, improving enforcement prioritization and helping maintain access to care.

Call for Further Discussion

She concluded by urging the Board to consider these recommendations before advancing the legislative language, suggesting further discussion is needed to fully address these collaborative care concerns.

- [Bonnie Lutz](#), Esq., Klinedinst, provided the following additional public comment:

Clarification on Timing and Scope of First Aid

Ms. Lutz addressed a concern raised earlier regarding whether an owner might be penalized for not taking an animal to a veterinarian after rendering first aid. She explained that the way she interprets the proposed language, the intent is not to mandate veterinary follow-up if the pain or condition has been effectively resolved. If the owner provides first aid that successfully reduces pain, discomfort, or the risk of further harm, then there would be no need to take the animal to a veterinarian. However, if those issues persist, then veterinary care would be necessary.

- [Joanne Bak](#), DVM, CCRT, PT, provided the following public comment:

Support for Owner-Provided First Aid

Dr. Bak stated that pet owners should be permitted to provide immediate first aid when they identify a problem and a veterinarian is not available. She gave examples, such as applying pressure to a bleeding wound, using veterinary over-the-counter products to clean a wound, or applying styptic powder to a nail injury. In large animal situations, a client might need to stabilize an animal while waiting for an ambulatory veterinarian. These are reasonable and necessary first aid actions.

Veterinarian Role in First Aid Education

She emphasized the importance of veterinarians educating their clients on basic pet first aid, including what to do in emergency situations and when to follow up with veterinary care. Owners should be advised to call their veterinarian for further guidance and determine if the pet needs additional treatment.

Support for Defining First Aid and Including Animal Husbandry

Dr. Bak agreed that better defining what constitutes first aid in the regulation would be helpful. She also supported including animal husbandry within the exemption to allow reasonable care by owners.

Opposition to Expanding Scope of Unlicensed Providers

She clarified that including unlicensed animal health practitioners in the exemption, as suggested by another commenter, goes beyond the scope of this discussion. She stated that it is not appropriate for unlicensed individuals to treat other people's animals without proper veterinary licensure.

Discussion: The Board further discussed the agenda item and legislative proposal as follows:

- **Animal Husbandry Inclusion and Legislative Purpose Concerns:** Some members expressed willingness to include animal husbandry in the exemption, but questioned whether doing so undermines the original purpose of the legislation. There were concerns that broadening the language could be interpreted as allowing people to treat animals they don't own, potentially negating the restrictions on unlicensed practice.
- **Intent to Limit Unlicensed Practice:** Members emphasized that the legislative effort originally aimed to stop unlicensed individuals from performing veterinary procedures, like repeated joint injections on horses. They stressed that this type of activity should not fall under any new exemption and that adding first aid or animal husbandry should not open the door to broader unregulated care.
- **Concerns About Legal Loopholes and Enforcement:** Several members shared concerns that overly broad exemptions could be used as a loophole by individuals claiming their actions are merely to relieve pain or discomfort. They noted that vague language could lead to misuse and make enforcement more difficult. Suggestions were made to carefully distinguish between legitimate first aid and veterinary procedures.
- **Board's Frustration with Limited Engagement:** Some Board members voiced frustration over the lack of consistent, two-way communication from stakeholders, particularly the shelter and rescue community. While letters were received, there was limited dialogue at meetings, which some members found disappointing given the effort to draft inclusive language.
- **Balancing Stakeholder Needs and Consumer Protection:** Members acknowledged the real challenges faced by shelters and rescue groups, such

as limited resources and lack of veterinary access. They agreed the Board must try to support these groups while still protecting animal welfare and ensuring veterinary standards are upheld. The exemption was seen as an effort to strike this balance.

- **Need for Clarifying Language and Definitions:** There was general agreement that the language in paragraph (8) needed refinement. Edits were proposed to substitute “and” with “or” to avoid requiring all three listed criteria for first aid (preserving life, reducing pain, minimizing risk). Suggestions also included changing “animal first aid” to “emergency first aid” and explicitly including animal husbandry services, with new definitions possibly needed.
- **Suggested Structural Revisions:** It was noted Board Counsel previously recommended restructuring the language to focus on prohibited actions (e.g., surgery) rather than trying to list every allowable activity. One member shared that while this might still require a list, they would prefer some protections in place, even if not perfect.
- **Differentiating Scenarios and Reasonable Judgments:** Members discussed the need for owners to use reasonable judgment—such as treating a pet at home and consulting a veterinarian only if necessary—without fear of violating the law. It was emphasized that reasonable actions, like applying ointment or sending a photograph to a veterinarian, should not be penalized.
- **Next Steps and Proposed Revisions:** Revisions to the proposed paragraph included: changing the conjunctions to “or” to broaden the definition of first aid actions, adding the terms “emergency first aid” and “animal husbandry,” and clarifying that euthanasia must be done in the individual’s capacity as a shelter employee, if applicable.

Revisions to the Proposed Legislation

Revisions to the Proposed Legislation: Following, are the MDC April 15, 2025 revisions (additions in grey highlighted double underlined text, deletions in grey highlighted double strikethrough text) and Board April 16, 2025 revisions (in yellow highlighted, double underlined text) to the proposed legislation after all discussion:

§ 4827.

(a) Nothing in this chapter prohibits any person from:

[...]

(4) Administering sodium pentobarbital for euthanasia of sick, injured, homeless, or surrendered domestic pets or animals without the presence of a veterinarian when the person is administering the treatment in their capacity as an employee of an animal control shelter and its agencies or humane society and has received proper training in the administration of sodium pentobarbital for these purposes.

(5) Providing the following care to animals lawfully deposited with or impounded by a shelter not registered with the board pursuant to Section 4853 or removed from such shelter by, and in the current care of, a rescue group:

(A) Administering preventative or prophylactic nonprescription vaccinations to the animal pursuant to protocols written by a California-licensed veterinarian licensed in this state, an American Veterinary Medical Association (AVMA) accredited university veterinary medicine program, ~~or a reputable shelter medicine textbook,~~ state or national veterinary shelter medicine association, for the purposes of preventing the spread of communicable diseases, without the presence of a veterinarian when the person has received proper training in the administration of the nonprescription preventative or prophylactic vaccinations.

(B) Administering nonprescription medications to the animal pursuant to protocols written by a California-licensed veterinarian licensed in this state, an AVMA accredited university program, ~~or a reputable shelter medicine textbook,~~ state or national veterinary shelter medicine association, for the control or eradication of apparent or anticipated internal or external parasites, including, but not limited to, fleas, ticks, or worms, without the presence of a veterinarian when the person has received proper training in the administration of the nonprescription medications for the control or eradication of those internal or external parasites. A person's decision to administer these medications shall not be construed to mean the person has made a diagnosis of the animal's medical condition.

(C) Administering medications prescribed by a veterinarian licensed in the state to the animal without the presence of a veterinarian when the shelter ~~or rescue group~~ has received a written treatment plan from the licensed veterinarian for that specific animal and has a dispensing protocol in place for the tracking of dispensed prescribed medications and when the person has received proper training in the administration of prescription medications.

(6) Pursuant to a written treatment plan ~~prepared by a licensed veterinarian~~ that includes the route and/or method of administration and dosage and/or frequency of use prepared by a licensed veterinarian with whom the owner has a veterinarian-client-patient relationship to treat the animal, administering ~~at the~~ prescription drug or medication, other than anesthesia, to an animal by the owner of the animal, an employee of the owner, or a designated caretaker of the animal.

[...]

(8) Rendering animal husbandry services and emergency first aid to preserve life, reduce pain and discomfort, or minimize the risk of permanent disability or disfigurement to stabilize the animal or provide comfort until a licensed veterinarian can assess the animal.

[...]

Motion: Dr. Solacito requested a motion. Barry Grant, DVM, moved and Christina Bradbury, DVM, seconded a motion to submit to the California State Legislature the legislative proposal, as revised, to amend BPC sections 4825.1 and 4827 regarding veterinary medicine practice exemptions.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comment was made on the motion:

- [Karen Atlas](#), President, APTC, provided the following public comment:

Unlicensed Practice Amendments

Ms. Atlas stated for the record that the Board has not considered APTC's recommendations for inclusion in the amendments related to unlicensed practice and wanted to make that clear to the Board.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 5-1 with Dr. Manyak voting nay.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM		X		

Dr. Solacito expressed appreciation for the MDC's work, acknowledging the extensive discussion and effort involved. She stated it clearly shows the Board's intent to listen to all stakeholders and do what is best to fulfill its mission of protecting consumers and animals.

C. **Recommendation to Initiate a Rulemaking to Amend California Code of Regulations (CCR), Title 16, Section 2068.5 Regarding Practical Experience and Education as Equivalent Curriculum**

Ms. Ussery presented the [meeting materials](#) to the Board. At the conclusion of her presentation, she reported that the MDC, at its April 15, 2025 meeting, reviewed this item and chose the Option 3 pathway. She also added that there was a minor amendment to the regulatory proposal that was emailed to Board members.

Discussion: The Board discussed the agenda item as follows:

- **Concerns with Eliminating the RVT Task Checklist:** Board members expressed conflict and uncertainty about the decision to eliminate the RVT checklist. Some noted that although the checklist may be outdated, it still serves a critical purpose by giving supervising veterinarians clearer guidance on what they are attesting to. It was suggested that instead of removing it entirely, the Board could reference the American Veterinary Medical Association's (AVMA) Committee on Veterinary Technician Education and Activities (CVTEA) checklist; however, concerns were raised about its extensiveness, its frequent updates, and the possibility that it might include tasks beyond California's regulatory scope. As an alternative, members suggested broadening and clarifying CCR, title 16, section 2068.5, subsection (g) by listing general expectations without being too prescriptive. This could provide input on what knowledge, skills, and abilities are expected in areas like communication. The Board acknowledged a need to maintain the intent of the checklist—possibly by drafting a new one that is incorporated into regulation.
- **Need for Clearer Attestation Standards for Supervising Veterinarians:** Some members emphasized that if they were a veterinarian attesting to an RVT's clinical skills, they would appreciate a clear checklist—especially for nuanced areas like anesthesia. Without it, there is concern that assessments could become inconsistent or overly broad, potentially allowing unqualified individuals to pass through. While there was acknowledgment that updating a checklist could be a burden for the Board, members felt that was not a valid reason to dismiss the idea if the tool would be helpful. It was suggested that this task be assigned to a standing MDC subcommittee with a regular review timeline built into regulation, so updates would not always require formal rulemaking.
- **Challenges with Current Regulatory Authority and Legal Constraints:** It was noted that the current checklist is not legally enforceable because it contains items beyond what is specified in subsection (g). That means the Board cannot deny an application just because boxes in the checklist are not checked. To fix this, options include creating a new checklist that is either fully incorporated into regulation by reference or explicitly listing the tasks directly in subsection (g). Staff clarified that if a new checklist is pursued, the Board

must officially approve it and it must be properly grounded in law. This would allow it to be used in decisions without risking legal issues.

- **Debate Over Accepting Clinical Experience from Foreign Countries:** Dr. Bradbury and Dr. Grant raised concerns about restricting acceptable clinical experience to only the U.S., its territories, or Canadian provinces. They pointed out that this effectively blocks foreign-trained professionals from becoming registered unless they redo all clinical hours domestically, which may be unnecessary if the veterinarian is from an AVMA-accredited school in places like the United Kingdom, Ireland, or Australia. While members agreed these veterinarians are often highly qualified, the rationale for the restriction was that clinical practice quality varies widely outside the U.S. and Canada, and there is no reliable oversight mechanism for foreign clinical experience. Still, members encouraged reconsidering this restriction, noting it could help address workforce shortages and allow capable professionals an appropriate pathway.
- **Direction to the MDC and Next Steps:** It was agreed that the MDC should revisit both the checklist and foreign clinical experience issues. Members clarified that even if the current checklist is eliminated, the regulatory framework must still define what the supervising veterinarian is attesting to. If a new checklist is created, the Board needs to determine where it lives—either in the regulation or as a formally incorporated document. At the same time, the MDC should reevaluate the validity of foreign clinical training, especially for those working under AVMA-accredited veterinarians abroad. It was also mentioned that the repeal of CCR, title 16, section 2068.6 (Out of State Registration as Equivalent) should be paused until CCR, title 16, section 2068.5 is updated to reflect these discussions—so qualified professionals aren't left without a viable path. The consensus was to send everything back to the RVT Subcommittee for deeper work and revisit it at a future meeting.

Public Comment: Dr. Solacito requested public comment on this item. The following public comment was made on this item:

- [Nancy Ehrlich](#), RVT, CaRVTA, provided the following public comment:

Support for a Simple, Effective Checklist

Ms. Ehrlich emphasized that having a checklist is really important, but believes the issue may already be addressed by the existing language on page six of the proposal. She pointed out that if a supervising veterinarian is willing to attest to an applicant's knowledge, skills, and abilities in each category, that should meet the requirement. She suggested a very simple checklist format, listing each category for sign-off, with flexibility for different

veterinarians to sign off on different parts. She stressed that the checklist does not need to be overly complicated to be effective.

Limited Need to Address Foreign Graduate RVTs

Regarding foreign-trained RVTs, she shared that she asked why the Program for the Assessment of Veterinary Education Equivalence (PAVE) route for RVTs was eliminated and was told it was due to an insufficient number of candidates using it. Based on that, she concluded that this is not a major concern, as there are very few applicants coming from countries other than Canada, and those few can still use the alternate route.

D. Recommendation on Legislative Proposal to Amend BPC Section 4905 Regarding the Board's Fee Structure

Ms. Ussery presented the [meeting materials](#) to the Board.

Discussion: The following discussion occurred:

Ms. Sieferman responded to a public comment about the difficulty of printing a duplicate license from BreEZe, acknowledging the importance of being made aware of such challenges, which may point to a design issue. She explained that about five years ago, a process was implemented allowing initial licenses to be published to a licensee's BreEZe account for printing, but this does not apply to renewals. As a result, those licensed before the change cannot print renewal documents directly. She stated that a ticket is in place to create a process for making all license documents printable. In the meantime, licensees can email a request for a duplicate license, and staff can publish the renewal certificate to their account for printing. She explained that, while it requires an extra step, it is a quick fix, and instructions will be shared to help licensees navigate the process.

Dr. Bradbury thanked the MDC members and Board staff for all their work, noting that this effort began when she first joined the Board. She expressed appreciation for the well thought out and seemingly fair proposal.

Mr. Espinoza asked how the dollar amount was determined for some of the fee increases.

Ms. Sieferman explained that the DCA Budget Office provided the total revenue needed to sustain the Board over a certain period of time. She stated that the fund condition in the meeting materials showed the target amount and timeline. That total was divided among license and renewal types, considering proportional impact, and the amounts were determined by plugging in numbers to find what was most fair across the board.

Motion: Dr. Solacito requested a motion. Kristi Pawlowski, RVT, moved and Barry Grant, DVM, seconded a motion to submit to the California State Legislature the legislative proposal to amend BPC section 4905 (with Option 2) regarding the Board's fee structure.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comment was made on the motion:

- [Nancy Ehrlich](#), RVT, CaRVTA, provided the following public comment:

Support for Legislative Proposal

Ms. Ehrlich thanked the Board for considering the financial situation of RVTs when coming up with the new fees. She added that the Board has done a good job and that the fees are reasonable. She concluded by stating that CaRVTA supports the legislative proposal with Option 2.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

E. Recommendation on Legislative Proposal to Amend BPC Section 4875.1 Regarding Complaint Prioritization

Ms. Ussery presented the [meeting materials](#) to the Board. At the conclusion of her presentation, she mentioned that the MDC received a public comment on spectrum of care and how it affects opining on standard of care, with encouragement for it to be included in any roundtable discussions. CVMA also expressed interest in collaborating with the Board on this topic, as part of their 2025–2026 action plan.

Discussion: The following discussion occurred:

Mr. Espinoza asked if the MDC recommendation would expand the Board's jurisdiction beyond veterinarians and RVTs to include any individuals.

Ms. Sieferman clarified that the recommendation does not expand the Board's jurisdiction, as it already has authority to take action against unlicensed individuals. In a prior meeting, she mentioned the Board approved striking the list of license types in BPC section 4875.1, subdivision (a), paragraph (1), and replacing it with "individual" to ensure unlicensed individuals would be included in prioritization. She explained that, currently, complaints against unlicensed individuals fall into a lower priority category, even in cases involving significant harm or death. She stated the intent is to remove specific license references, so the prioritization framework applies to all individuals, without changing the Board's existing authority.

Motion: Kristi Pawlowski, RVT, moved and Patrick Espinoza, Esq., seconded a motion to submit to the California State Legislature the legislative proposal to amend BPC section 4875.1 regarding prioritization of cases.

Public Comment: Dr. Solacito requested public comment on the motion. There were no public comments made on the motion.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

6. Update, Discussion, and Potential Action on 2025 Legislation Impacting the Board, DCA, and/or the Veterinary Profession

A. Priority Legislation for Board Consideration

1. Assembly Bill (AB) 516 (Kalra, 2025) Registered Veterinary Technicians and Veterinary Assistants: Scope of Practice

Staff Update: Mr. Sotelo presented the meeting materials to the Board. Ms. Sieferman answered Board questions. The Board did not take a position on the bill.

2. AB 867 (Lee, 2025) Veterinary Medicine: Cat Declawing

Staff Update: Mr. Sotelo presented the meeting materials to the Board.

Discussion: The Board discussed the following:

- **Clarification on Bill Language:** A question was raised about whether the bill prohibits declawing only for exotic or native wild cats. It was clarified that while the bill references exotic species, the actual language applies to all cats.
- **Board's Position and Concerns:** Concerns were expressed about continuing the Board's historical opposition to declawing legislation. While the procedure is recognized as painful, it was noted that similar laws in other jurisdictions have not interfered with veterinary practice. Questions were raised about whether the bill causes consumer harm and whether blanket opposition remains appropriate. Concerns were voiced about the bill directing how veterinarians should practice medicine and imposing a new requirement that veterinarians submit written justifications to the Board when performing the procedure. This reporting was described as unusual, administratively burdensome, and potentially exposing veterinarians to risk through California Public Records Act (CPRA) requests. The Board questioned what would be done with the data, suggesting it adds unnecessary staff work without clear purpose. It was discussed that this type of issue is better addressed through education rather than legislation.

Motion: Dr. Solacito requested a motion. Steve Manyak, DVM, moved and Patrick Espinoza, Esq., seconded a motion to oppose AB 867, as written.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comments were made on the motion:

- **Grant Miller**, DVM, Director of Regulatory Affairs, CVMA, provided the following public comment:

Opposition to AB 867

Dr. Miller shared CVMA's opposition to AB 867, describing it as the sixth attempt by animal rights activists to ban cat declawing in California. The CVMA opposes legislation that dictates veterinary medical practice, asserting that decisions about procedures like declawing should be made between veterinarians and their clients after exploring all alternatives. Dr. Miller emphasized that the profession has already moved away from the practice on its own—major corporate veterinary groups no longer offer it, it is not taught in California's veterinary schools, and the CVMA has a public policy discouraging non-therapeutic declawing. Therefore, the CVMA believes criminalizing the procedure is unnecessary.

- [Carrie Ann Calay](#) provided the following public comment:

Support of Declaw Ban

Ms. Calay urged the Board to consider actual data on the number of cat declaw procedures performed in California, noting that while only anecdotal evidence from anti-declaw groups can be provided, it appears the procedure is still being offered in many places. She emphasized the need for concrete numbers to be presented. Ms. Calay also argued that declawing is unethical and causes behavioral and health issues for cats, such as problems with litter box use and increased likelihood of being surrendered to shelters. She described the practice as cruel and inconsistent with ethical veterinary principles. Lastly, Ms. Calay questioned the justification of any supposed “therapeutic” benefit of declawing and asked for clarification on what therapeutic purposes could possibly warrant the procedure.

Response to Public Comment: The Board acknowledged that public comments are being heard, clarifying that the profession is already moving away from declawing without the need for legislation. It was noted that the procedure is no longer taught at UC Davis or Western University, and the profession is addressing the issue internally by discouraging its use. The Board expressed concern that legislating medical practices can be problematic, as procedures evolve over time and blanket legal prohibitions may not reflect the complexity of veterinary care. The Board reiterated its intention to support progress through professional standards rather than mandates. In response to the public comment questioning therapeutic reasons for declawing, it was explained that legitimate medical justifications may include tumors, infections, or other conditions affecting the nail bed that would require declawing.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

3. [AB 1458 \(Wallis, 2025\) Physical Therapy and Veterinary Medicine: Animal Physical Therapy](#)

Staff Update: Mr. Sotelo presented the meeting materials to the Board.

Discussion: The Board discussed the following (with Ms. Sieferman and Ms. Welch also discussing some of the provisions in the bill and sharing some concerns):

- **Impact on the Board:** The Board discussed that the bill appears to expand its perceived responsibilities without providing additional resources or funding. While it suggests the Board may need to report disciplinary actions involving individuals licensed by another entity (e.g., the Physical Therapy Board of California), this is not enforceable since the Board does not license or discipline PTs. Any action taken would be a citation for unlicensed practice, not formal discipline, and therefore would not trigger a report.
- **Enforceability and Oversight Challenges:** It was noted that key provisions in the bill, such as licensing, registration, and verification of educational requirements, are unclear and currently unenforceable. Additionally, ambiguity around facility standards for where animal physical therapy would occur—under the Physical Therapy Act—further complicates enforcement, as those responsibilities fall outside the Board's jurisdiction.
- **Veterinarian Supervision and Practice Standards:** It was clarified that veterinarians can already employ individuals with physical therapy training under appropriate supervision within a veterinary hospital. However, the bill's allowance for indirect supervision raises concerns, as it could allow treatments without adequate veterinary oversight. The Board reiterated its support for direct supervision to ensure treatments are conducted properly and safely.
- **Board Position and Legislative Concerns:** Unresolved concerns were cited and it was concluded that the bill still does not align with the Board's priorities and enforcement capabilities and thus could not be supported in its current form.

Motion: Dr. Solacito requested a motion. Barry Grant, DVM, moved and Steve Manyak, DVM, seconded a motion to oppose AB 1458, as written.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comments were made on the motion:

- **Grant Miller**, DVM, Director of Regulatory Affairs, CVMA, provided the following public comment:

Opposition to AB 1458

Dr. Miller identified AB 1458 as CVMA's number one opposition bill of the year due to several serious concerns not yet fully addressed.

Conflicting Legal Definitions

He stated that a major issue is that the bill attempts to override existing definitions of indirect and direct supervision used in veterinary law by rewriting them specifically for physical therapy. Having two legal definitions would create conflict and confusion within the profession and ripple through the regulatory framework.

Loss of Regulatory Control

Dr. Miller also stated that the bill would remove the Board's authority to set minimum standards for animal facilities, transferring that responsibility to the Physical Therapy Board of California, which has no training or expertise in veterinary care.

Facility and Health Safety Concerns

He shared that there are also concerns about shared human-animal treatment facilities. For example, there has been no consideration of how allergen exposure could affect clients, such as performing physical therapy on a cat followed by a human without proper sanitization.

Lack of Animal-Specific Training

Lastly, Dr. Miller stated that the bill arbitrarily expands the physical therapy scope of practice to include animals despite practitioners lacking formal veterinary education. He questioned why, if that were acceptable, veterinarians should not also be allowed to treat humans after a short certification course.

- [G.V Ayers](#), Lobbyist, Gentle Rivers Consulting, LLC, contract lobbyist for APTC, provided the following public comment:

Support for AB 1458 and Legislative Collaboration

Mr. Ayers expressed appreciation for the opportunity to address the Board regarding AB 1458 and noted that they were grateful to Assemblymember Greg Wallis for authoring the bill. He acknowledged the Board's previous concerns, such as enforcement and notification requirements, including potential formal registration with the boards.

Ongoing Discussions and Willingness to Collaborate

Mr. Ayers noted active efforts to work with Assembly committee staff to resolve outstanding issues and emphasized a desire for future collaboration with the Board. He stated that APTC recalled the Board's earlier encouragement and support, but noted there had been no follow-through. He also stated that APTC expressed interest in sitting down with the Board to find a path forward for authorizing PTs to provide animal physical therapy.

- [Joanne Bak](#), DVM, CCRT, PT, provided the following public comment:

Opposition to AB 1458 and Support for Direct Supervision

Dr. Bak voiced strong support for the Board and CVMA in opposing AB 1458, emphasizing that direct veterinary supervision is essential for animal rehabilitation therapy. Drawing on nearly 30 years of veterinary practice, including two decades in animal rehabilitation, she stated that veterinary clients and staff routinely require moment-to-moment guidance, including adjustments to treatment plans and pain management strategies.

Need for Onsite Veterinary Oversight

Dr. Bak described specific clinical cases—such as zoonotic diseases, cardiac conditions, and wound complications—that illustrate the need for veterinary oversight during therapy. While expressing respect for PTs, she asserted that they should work within veterinary facilities under direct supervision, not independently under indirect supervision or based only on general referrals.

Concerns About Training and Safety

Dr. Bak highlighted that PTs are not trained to handle certain medical conditions that may contraindicate specific therapies. She concluded by firmly opposing indirect supervision and reaffirming support for requiring direct supervision in the veterinary context.

- [Karen Atlas](#), President, APTC, provided the following public comment:

Broad Representation and Advocacy for Access

Ms. Atlas stated that APTC now includes veterinarians, PTs, RVTs, and members of the public, and asserted that the CVMA is no longer the sole

voice on animal care in California. She emphasized growing support for collaborative care and improved access, noting that AB 1458 reflects over 15 years of advocacy, evidence-based data, and repeated appearances before the Board.

Misinformation vs. Evidence-Based Policy

Ms. Atlas criticized the dismissal of data in favor of what she described as unsupported claims from CVMA and urged the Board to prioritize facts over misinformation, arguing that AB 1458 affects real animals, families, and clinicians—not just abstract policy.

Preservation of Veterinary Authority

According to Ms. Atlas, AB 1458 addresses all previous Board concerns while maintaining full veterinary control. The bill requires an examination, diagnosis, referral, supervision, and written agreement from a veterinarian, and clearly defines liability for licensed PTs with mandated additional animal-specific education.

Proven and Safe Collaborative Model

She cited Colorado's 18-year use of a similar model as proof of safety and effectiveness, stating that it expanded access and created jobs. Ms. Atlas also referenced the Board's 2017 stakeholder task force, which she said supported this same model where veterinarians determine clearance and supervision.

Transparency, Safety, and Reduced Board Burden

Ms. Atlas argued the bill ensures transparency for consumers by reserving the title "animal physical therapist" for licensed PTs with advanced training. The model reportedly reduces unlicensed activity complaints and has not led to harm-related complaints involving trained PTs.

Conclusion: Trusting Licensees

She concluded that the bill empowers veterinarians to use professional judgment on referrals and supervision levels, and urged the Board to support AB 1458 if it is truly focused on public and animal welfare rather than professional turf.

- [Carrie Ann Calay](#) provided the following public comment:

Support for Collaboration Between Professions

Ms. Calay, identifying as a consumer and animal owner, urged the Board to support efforts to find a workable accommodation between the veterinary community and animal PTs.

Endorsement of Previous Testimony and Historical Perspective

She fully supported the previous comments made by Ms. Atlas and noted her own involvement with the animal physical therapy issue since 2015, including as a member of the stakeholder task force, confirming familiarity with its historical context.

Preference for Indirect Supervision with Trained Professionals

Ms. Calay expressed strong support for allowing indirect supervision of animal PTs, emphasizing that this assumes the therapists are trained and qualified, and that a veterinarian has examined the animal beforehand, as part of a collaborative care model.

Desire for Care from Specialists, Not Assistants

She stated a personal preference for her animals to receive physical therapy from trained animal PTs rather than from veterinary technicians or assistants, even under direct veterinarian supervision.

- [Dan Baxter](#), Executive Director, CVMA, provided the following public comment:

Legal Concern: Veterinarian Liability Not Protected by AB 1458

Mr. Baxter reiterated a legal objection raised the previous year, challenging the claim that AB 1458 protects veterinarians from liability. He argued that despite language in the bill suggesting there is no liability, veterinarians could still face claims under negligent referral or negligent delegation. He emphasized that determining whether delegation was appropriate, and whether the PT performed within scope, presents real legal risks for veterinarians.

Policy Concern: No Access Crisis in Animal Physical Rehabilitation

Mr. Baxter rejected the narrative of an access crisis in animal physical rehabilitation, stating that such a crisis does not exist in California, the U.S., or globally. He criticized proponents of the bill, particularly Ms. Atlas,

for invoking a false sense of urgency and likened it to misappropriating serious access to care issues faced by others. He concluded that real access problems should be addressed elsewhere, not through AB 1458.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

4. **AB 1502 (Committee on Business and Professions, 2025) California Veterinary Medical Board**

Staff Update: Mr. Sotelo presented the meeting materials to the Board. Ms. Sieferman provided additional updates regarding the bill.

Motion: Kristi Pawlowski, RVT, moved and Christina Bradbury, DVM, seconded a motion to support AB 1502, as written.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comment was made on the motion:

- **Grant Miller**, DVM, Director of Regulatory Affairs, CVMA, provided the following public comment:

Support of AB 1502

Dr. Miller stated that CVMA was moving to a support position on AB 1502.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

5. [Senate Bill \(SB\) 602 \(Cortese, 2025\) Veterinarians: Veterinarian-Client-Patient Relationship](#)

Staff Update: Mr. Sotelo presented the meeting materials to the Board. Ms. Siefertman provided additional updates regarding the bill.

Motion: Dr. Solacito requested a motion. Barry Grant, DVM, moved and Patrick Espinoza, Esq., seconded a motion to support SB 602, as written.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comment was made on the motion:

- [Grant Miller](#), DVM, Director of Regulatory Affairs, CVMA, provided the following public comment:

Support for Shelter-Based Vaccine Access Expansion

Dr. Miller stated CVMA is proud to co-sponsor the bill with the San Francisco Society for the Prevention of Cruelty to Animals and San Diego Humane Society. The goal is to expand access to veterinary care and help shelters serve underserved populations. He explained that the bill acts as a small expansion to SB 669 [(Cortese, Chapter 882, Statutes of 2024)], which allowed RVTs to act as agents of veterinarians in establishing a veterinarian-client-patient relationship (VCPR) for vaccine delivery. However, SB 669 overlooked the restriction requiring the veterinarian's physical presence in shelters. The proposed bill would allow RVTs in shelters to administer rabies and other vaccines to the public without a veterinarian onsite, while maintaining the same protocols and requirements. Dr. Miller expressed appreciation for the Board's potential support.

- [Nancy Ehrlich](#), RVT, CaRVTA, provided the following public comment:

Support for Shelter-Based Vaccine Access Expansion

Ms. Ehrlich stated that on behalf of CaRVTA, she supported SB 602.

Discussion: The following Board discussion occurred:

Ms. Welch raised a concern regarding the proposed amendment to BPC section 4826.7, subdivision (b), paragraph (2), which would permit RVTs to perform certain services in registered veterinary premises that are either public animal control agencies or shelters, or private animal shelters. She questioned the definition of a private animal shelter, suggesting it could be interpreted too broadly, potentially even including someone's home. She noted there is no requirement for nonprofit status and expressed concern about the lack of clarification in the language.

- **Clarification on the Definition of “Private Animal Shelter”:** The Board also raised questions about the meaning of “private animal shelter,” noting that it lacks a formal definition. Concern was expressed that the term could be overly broad—possibly including rescues or even individuals keeping multiple animals at home. Since “rescue group” is defined in statute, it was suggested the bill be amended to either define or clarify “private animal shelter.”
- **Motion Amendment and Delegation to Executive Committee:** To address these concerns, the Board discussed amending the motion to include a “support, if amended” stance, requesting clarification of “private animal shelter.” The Board discussed delegating authority to the Executive Committee and Executive Officer to work with the author's office and stakeholders to resolve the Board's concerns. Dr. Grant and Mr. Espinoza agreed to the friendly amendment to the motion.
- **Rationale for Support Position:** The Board stated that support for the bill would be based on its potential to increase access to care, especially for underserved communities. The importance of allowing RVTs to perform tasks within their capabilities was emphasized, particularly when veterinarians are overextended. The Board discussed ensuring that care is delivered responsibly by qualified personnel while relieving some of the burden on veterinarians.
- **Interpretation of Bill Language and Registered Premises:** Dr. Bradbury reviewed the bill language and pointed out that the text seems to require that services be performed at a registered veterinary premises, listing different types of shelters as examples. However, members acknowledged ambiguity in the wording, questioning whether the listed shelter types are all intended to be registered premises or if some might not be. The Board discussed the need for clearer legislative language to avoid misinterpretation.

- **Restating the Board's Purpose for Support:** In conclusion, it was reiterated that the Board's intent in supporting the bill is to increase access to care and assist more pet owners, while also resolving vague language in current statute.
- [Grant Miller](#), DVM, Director of Regulatory Affairs, CVMA, provided the following additional comments:

Clarifying Existing Law on RVTs in Traditional and Field Settings

Dr. Miller stated that, under current law, an RVT can function as an agent of a veterinarian at a registered veterinary premises—such as a traditional hospital setting—provided the veterinarian is present in the building. Additionally, under SB 669, RVTs may operate in field locations, like parks, where the veterinarian is available by phone or in the vicinity.

Proposed Scope Expansion for Registered Shelter Facilities

He stated that the bill proposes that if the registered veterinary premises is a shelter, humane society, municipal animal control facility, or a private shelter, RVTs would be allowed to administer rabies and other vaccines to the public without the veterinarian being physically present. This maintains the requirement that the veterinarian be available by phone or in the vicinity.

Rationale for Expansion

Dr. Miller also added that this proposed change responds to the challenge that 60% of shelters mandated to provide low-cost rabies vaccinations lack an on-site veterinarian. Many are actively hiring, but are unable to fill these roles. The bill seeks to allow RVTs to fill this gap, under existing protocols and agreements, by expanding their authority slightly while maintaining oversight.

Acknowledgment of Definition Issues for Private Shelters

Dr. Miller acknowledged that the term “private shelter” is not defined and thanked Ms. Welch and Board members for raising the issue. While there are private shelters in California that are registered veterinary premises, Dr. Miller agreed it is necessary to clarify which entities would fall under this expanded authority to ensure appropriate application.

Additionally, Ms. Welch emphasized the importance of keeping an eye on changes to exemptions from the practice of veterinary medicine under

BPC section 4827, subdivision (a), paragraph (5), which already grants significant authority to administer certain treatments. She noted that SB 669 has already added additional authority and expressed the need to monitor how each of these exemptions continues to expand.

- [Grant Miller](#), DVM, Director of Regulatory Affairs, CVMA, provided the following additional comment:

Clarification on BPC Section 4827 and Scope of SB 602

Dr. Miller clarified that BPC section 4827 contains exemptions from veterinary premises registration for shelters that only provide intake services to animals brought in by animal control officers, not to the general public bringing their animals in for veterinary services. These shelter staff administer vaccines, parasite control, and whatever else their veterinarians tell them to do. Shelters performing those services are exempt from registration. SB 602 has nothing to do with those services. SB 602 applies only to registered veterinary premises. Of approximately 330 shelters in California, roughly 230 are registered; the remaining 100 or so are not providing public veterinary services. Dr. Miller emphasized that the bill targets those 230 facilities extending services to the public and welcomed input from the Board to refine the bill's language, acknowledging the complexity and importance of specific wording. He also committed to bringing the issue of defining "private shelter" back to CVMA's focus group.

Ms. Welch emphasized the importance of having written documentation if the bill becomes law. She noted the need to track how access to care is evolving and how specific divisions in authorized practice are occurring at designated locations. This documentation would provide useful context and intent behind the proposals, especially as scope of practice continues to expand over the next several years.

Roll Call Vote: Ms. Sieferman clarified that, with the agreed upon friendly amendment, the motion was to support SB 602, if amended. She took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

6. [SB 687 \(Ochoa Bogh, 2025\) Chiropractors: Animal Chiropractic Practitioners](#)

Staff Update: Mr. Sotelo presented the meeting materials to the Board.

Discussion: The Board discussed the following:

- Concerns About Chiropractor Familiarity with Animal Conditions:**
 The Board recalled that during a previous animal chiropractic presentation, there was discussion about whether the presenters were actually familiar with specific animal conditions, particularly spinal issues. The individuals presenting did not seem well versed in spinal conditions in animals.
- Expectation for Continued Outreach and Knowledge Exchange:** The Board noted that there had been an expectation for follow-up outreach to foster knowledge exchange. Concerns from the Board remain unresolved, and the matter was not left with a clear position of support or opposition. The recommendation was to allow the EO the authority to continue discussions with the author's office.
- Parallels to Animal Physical Therapy Supervision Requirements:** It was mentioned that this issue is similar to the animal physical therapy situation. It was noted that provisions already exist for these services to be provided under the direct supervision of a veterinarian, and it was stated that there does not appear need for any change.

Motion: Dr. Solacito requested a motion. Steve Manyak, DVM, moved and Patrick Espinoza, Esq., seconded a motion to oppose SB 687, as written.

Discussion: The Board discussed the following:

- Rural Access Challenges for Large Animal Chiropractic Care:**
 Dr. Bradbury shared insight from a conversation with the President of the Board of Chiropractic Examiners, explaining that some chiropractors practicing on large animals in rural Northern California struggle to find

veterinarians willing to provide direct supervision in the field. This shortage of large animal veterinarians, and their reluctance to simply follow chiropractors around, limits access to collaborative practice in those areas.

- **Similarity to Physical Therapy Supervision Issues:** Other members noted the parallels between this situation and the concerns raised in the animal physical therapy debate, emphasizing that direct supervision remains important in both cases. One member suggested that the Board treat the chiropractic proposal similarly and oppose it in the same manner.
- **Licensing Oversight Distinction:** Dr. Bradbury acknowledged that while she wasn't opposed to opposition, she felt there was a distinction in this case—chiropractors are licensed and overseen by their own board, which brings an additional level of verification and accountability. However, she agreed there were still many holes in how the current proposal is written.
- **Concerns About Appropriate Care:** Dr. Grant added that many large animal veterinarians already perform chiropractic techniques and questioned the argument that no providers are available. He expressed concern that animals might receive inappropriate treatment—like unnecessary neck adjustments—simply due to being far from town, emphasizing that access issues shouldn't compromise the quality of care.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comments were made on the motion:

- [Dan Baxter](#), Executive Director, CVMA, provided the following public comment:

Clarifying the Supervision Standard in SB 687

Mr. Baxter emphasized that the core issue with SB 687 is not a question of direct versus indirect supervision. Unlike the animal physical rehabilitation proposal, the sponsors of this bill are openly requesting that chiropractors be allowed to perform adjustments on animals without any veterinary supervision. The bill explicitly aims to allow individuals with a DC degree and proper certification to practice independently, as stated in its own fact sheet.

- [Grant Miller](#), DVM, Director of Regulatory Affairs, CVMA, provided the following public comment:

Opposition to Scope Expansion by Human Healthcare Practitioners

Dr. Miller stated CVMA was strongly opposed to any bill allowing human healthcare practitioners to expand their scope arbitrarily to work on animals. He stated SB 687 is deeply disrespectful to the veterinary profession and to the Board itself, as it gives full regulatory authority to the Board of Chiropractic Examiners over individuals performing what is essentially veterinary medicine.

Concerns Over Lack of Veterinary Oversight

He emphasized that chiropractors lack training in zoonotic diseases and animal behavior, and questioned how the Board of Chiropractic Examiners could determine standard of care violations without veterinary expertise. Since the Board would be excluded from oversight, animals and consumers would be placed in measurable danger under a bill he described as very poorly written. He urged the Board to maintain authority over practices clearly falling within the definition of veterinary medicine.

- [Marissa Palmer](#), DC, Director of Government Affairs, CalChiro, provided the following public comment:

Support for Animal Chiropractic Access

Dr. Palmer stated that CalChiro's mission is to empower chiropractors to improve life quality for all Californians, including animals. She expressed strong support for expanding access to animal chiropractic care through certified and trained professionals.

Qualifications and Education of Certified Animal Chiropractors

She emphasized that only a small, highly educated group—certified through the American Veterinary Chiropractic Association and International Veterinary Chiropractic Association—would qualify under the bill. These individuals are already licensed human chiropractors with extensive education, including over 240 hours of additional animal-specific training and hands-on testing.

Regulatory Oversight by the Board of Chiropractic Examiners

Dr. Palmer highlighted the importance of allowing the Board of Chiropractic Examiners to enforce standards, as the Board does not license or register chiropractors and currently must use citations for enforcement. She argued this change would streamline enforcement and

also allow action against unqualified individuals misusing the chiropractic title.

Proven Safety and Precedent in Other States

She pointed out that Tennessee just passed a bill allowing direct access to American Veterinary Chiropractic Association (AVCA) certified animal chiropractors, and similar laws have been passed in six other states – Arkansas, Utah, Colorado, Ohio, Oklahoma, and Nebraska. One these states had language in place since 2011, demonstrating the model's safety. She also noted that malpractice insurers have reported no claims involving certified animal chiropractors, further supporting the bill's safety and legitimacy.

- [Carrie Ann Calay](#) provided the following public comment:

Support for Certified Animal Chiropractors

Ms. Calay expressed full support for the previous speaker's comments, emphasizing the importance of ensuring only certified chiropractors perform animal chiropractic care. She shared a personal experience in which her animal was injured by a veterinarian offering chiropractic adjustments without being a DC.

Concerns About Veterinarians Without Chiropractic Training

She stated the veterinarian lacked the complete education and training that certified animal chiropractors receive. While the injury was not serious, her animal experienced pain for several days, leading her to decide never to allow that individual to perform adjustments again.

Call for Qualified Practitioners

Ms. Calay urged the Board to consider that proper training matters and that not everyone should be performing animal chiropractic without the specific and rigorous education required for certification.

- [Joanne Bak](#), DVM, CCRT, PT, provided the following public comment:

Opposition to Allowing Independent Practice

Dr. Bak opposed the proposed amendment, consistent with her prior stance, stating chiropractors have long been allowed to practice under direct veterinary supervision and that this framework is appropriate.

Positive Experience with Supervised Chiropractor

She described a positive experience working with a human chiropractor who treated animals strictly under veterinarian supervision, following the Board's direction carefully, including deference on client questions and supplement discussions.

Emphasis on Animal Safety and Existing Veterinary Expertise

Dr. Bak stressed the importance of supervision for animal safety, noting that many veterinarians are specifically trained and certified in veterinary chiropractic care.

No Shortage of Qualified Providers and Need for Supervision

She did not believe a shortage of qualified chiropractic care providers exists and emphasized that spinal manipulations or related rehabilitation should only be performed by veterinarians or under their direct supervision.

Roll Call Vote: Ms. Sieferman reiterated that the motion was to oppose SB 867, as written. She took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

B. Other Board-Monitored Legislation

Ms. Sieferman noted that items listed in Section B under Other Board-Monitored Legislation are typically included for informational purposes only and not discussed in detail. However, she invited Board members to request discussion on any specific item, if desired. No requests were made.

C. Legislative Proposal to Amend BPC Section 4887 Regarding Petitions for Reinstatement

Staff Update: Ms. Sieferman presented the meeting materials to the Board.

Motion: Christina Bradbury, DVM, moved and Kristi Pawlowski, RVT, seconded a motion to submit to the California State Legislature the legislative proposal to amend BPC section 4887 regarding petitions for reinstatement.

Public Comment: Dr. Solacito requested public comment on the motion. There were no public comments made on the motion.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

*Agenda items for this meeting were taken out of order, and the Board moved to Agenda Item 17.A. The order of business conducted herein follows the publicly noticed Board meeting Agenda.

7. Update, Discussion, and Possible Action on Pending Regulations

A. Status on Pending Regulation

Mr. Sotelo presented the [meeting materials](#) to the Board.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

B. Recommendation to Initiate a Rulemaking to Repeal CCR, Title 16, Sections 2014, 2015, and 2015.2 Regarding Licensing and Registration Examinations

Mr. Sotelo and Ms. Sieferman presented the [meeting materials](#) to the Board.

Motion: Kristi Pawlowski, RVT, moved and Barry Grant, DVM, seconded a motion to take the following actions:

- Approve the regulatory proposal to repeal CCR, title 16, sections 2014, 2015, and 2015.2.
- Direct staff to submit the text to the Director of the Department of Consumer Affairs and the Business, Consumer Services, and Housing Agency for

review, and if the Board does not receive any comments providing objections or adverse recommendations specifically directed at the proposed action or to the procedures followed by the Board in proposing or adopting the action, then the Board authorizes the Executive Officer to take all steps necessary to initiate the rulemaking process, make any technical or non-substantive changes to the package, and set the matter for hearing, if requested.

- If after the 45-day public comment period, no adverse comments are received, and no public hearing is requested, authorize the Executive Officer to take all steps necessary to complete the rulemaking, and repeal the proposed regulations, as described in the text notice for CCR, title 16, sections 2014, 2015, and 2015.2.

Public Comment: Dr. Solacito requested public comment on the motion. There were no public comments made on the motion.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

8. Recess Open Session until April 17, 2025, at 9:00 a.m.

Dr. Solacito recessed open session at 4:43 p.m.

9:00 a.m., Thursday, April 17, 2025

Webcast Links:

- Agenda Items 9-11 (<https://youtu.be/KBgMdA-aH8>)
- Agenda Items 17-24 (<https://youtu.be/ArRxoWWsTJA>)

9. Reconvene Open Session – Establishment of a Quorum

Board President, Maria Preciosa S. Solacito, DVM, called the meeting to order at 9:00 a.m. EO, Jessica Sieferman, called roll; all six members of the Board were present, with Christina Bradbury, DVM, participating remotely, and a quorum was established.

Members Present

Maria Preciosa S. Solacito, DVM, President
Kristi Pawlowski, RVT, Vice President
Christina Bradbury, DVM
Patick Espinoza, Esq.
Barrie Grant, DVM
Steve Manyak, DVM

Student Liaisons Present

Holly Masterson, UC Davis
Anna Styles, Western University

Board Staff Present

Jessica Siefertman, EO
Matt McKinney, Deputy EO
Alicia Hernandez, Administration/Licensing Manager
Ashley Sanchez, Enforcement Manager
Justin Sotelo, Policy Specialist
Rob Stephanopoulos, Enforcement Manager
Kellie Fairless, Licensing Lead Analyst
Nellie Forget, Enforcement Analyst
Kimerly Gorski, Enforcement Analyst
Emilia Gutierrez, Enforcement Technician
Brett Jarvis, Enforcement Analyst
Amber Kruse, Enforcement Analyst
Anh-Thu Le, Enforcement Analyst
Rachel McKowen, Probation Monitor
Kim Phillips-Francis, Enforcement Analyst
Robert Rouch, Enforcement Analyst
Bryce Salasky, Enforcement Analyst
Daniel Sanders, Enforcement Analyst
Daniel Strike, Enforcement Analyst
Phillip Willkomm, Special Investigator

DCA Staff Present

Suzanne Balkis, Budget Manager, Budget Office
David Bouilly, Moderator, SOLID
Alice Bourdykina-Jelobniouk, Legislative Manager, Legislative Affairs Division
Elizabeth Dietzen-Olsen, Regulations Counsel, Attorney III, Legal Affairs Division
John Perry, Assistant Deputy Director, Legislative Affairs Division
Cesar Victoria, Television Specialist, OPA

Matthew Wainwright, Legislative and Regulatory Manager, Legislative Affairs
Division
Tara Welch, Board Counsel, Attorney IV, Legal Affairs Division

Guest Presenters

Mark Nunez, DVM, MDC

Guests Present

Efleida Adalia
Stephanie Alamo-Latif, Deputy Attorney General (DAG), Office of the Attorney
General (OAG), Department of Justice (DOJ)
Dan Baxter, Executive Director, CVMA
Patrice De Guzman Huber, Administrative Law Judge (ALJ)
Lillian Camacho, Manager, All Creatures Veterinary Center
Nancy Ehrlich, RVT, CaRVTA
Mark Franco, DVM, Witness
Patrick Huber, Attorney, California Public Utilities Commission
Sannee Jacobe
JL
Chazney Johnson
Sebastian Lidikay
Bonnie Lutz, Esq., Klinedinst
Sasha Naranjo, AV Veterinary Center
Priscilla Nguyen, Agricultural Technician, CDFA
Public Observer
Balpal S. Sandhu, DVM, Petitioner
Mukand Sandhu, DVM
Ramanpreet Sandhu
Neva Tassan, DAG Liaison, OAG, DOJ
TTY
Marie Ussery, RVT, Chair, MDC
Beth Venit, Veterinariae Medicinae Doctoris, AAVSB

10. Special Order of Business

A. [Hearing on Petition for Reinstatement of Balpal S. Sandhu, DVM, Revoked License No. VET 13678](#)

Dr. Solacito recused herself from the petition hearing due to a conflict.

At 9:02 a.m., ALJ Patrice De Guzman Huber presided over the [Petition for Reinstatement of Balpal S. Sandhu, DVM, Revoked License No. VET 13678](#).

DAG Stephanie Alamo-Latif updated and presented the case against Petitioner Balpal S. Sandhu, DVM.

Dr. Sandhu answered questions from his counsel, Bonnie Lutz, Esq., the DAG and Board members.

ALJ Patrice De Guzman Huber closed the hearing at 12:04 p.m.

11. Recess Open Session

Ms. Pawlowski recessed open session at 12:04 p.m.

12. Convene Closed Session

Closed session was convened at 12:23 p.m.

13. Pursuant to Government Code Section 11126(c)(3), the Board Will Meet in Closed Session to Deliberate and Vote on Disciplinary Matters, Including the Above-Identified Petition, Stipulated Settlements, and Proposed Decisions

In the Matter of the Petition for Reinstatement of Balpal S. Sandhu, DVM, Revoked License No. VET 13678; Board Case No. 4602025000207; OAH Case No. 2025030752.

Dr. Solacito was recused and not present in closed session on this item.

The Board denied the Petition for Reinstatement.

In the Matter of the First Amended Accusation Against Sonia Amador, Veterinarian License No. 17957, and Natural Pet Dental Inc., Veterinary Premises Registration No. 37373; Board Case No. 4602019000083; OAH No. 2022100704.

The Board rejected the proposed decision.

14. Pursuant to Government Code Section 11126(e)(1) and (2)(A), the Board Will Meet in Closed Session to Confer and Receive Advice From Legal Counsel Regarding the Following Matter: *Gurdeep Deol, DVM v. Veterinary Medical Board*, Riverside County Superior Court, Case No. CVPS2402058

This item was not discussed.

15. Adjourn Closed Session

Dr. Solacito adjourned closed session at 1:25 p.m.

16. Reconvene Open Session

Dr. Solacito reconvened open session at 1:35 p.m.

17. Student Liaison Reports

A. *[University of California, Davis, Liaison](#)—*Holly Masterson*

Ms. Masterson presented the Board with the following updates:

- **Farewell as Student Liaison:** Ms. Masterson shared that this was her final announcement in the role and expressed gratitude to the Board members for their welcome, advice, and inclusion in important discussions. She stated that she appreciated the opportunity to serve as a link between her school and the Board, join a committee, and learn about the Practice Act.
- **Introduction of Incoming Liaison:** Ms. Masterson introduced Sebastian Lidikay, a second-year veterinary student, as the new liaison. She noted that Sebastian would be attending the meeting online. Sebastian grew up in Ventura County, gained early experience in small animal medicine through their family's clinic, and has held lead roles in several clinics. They are interested in small animals, wildlife, and exotics, with a strong focus on animal welfare, and are excited to work with the Board. Additionally, she noted that Sebastian serves as a student ambassador for the Veterinary Information Network, treasurer and incoming president of the Camelon Medicine Club, and podcast director for the Students of One Health Club. They are also interested in veterinary-related politics.
- **Call for Veterinary Volunteers:** Ms. Masterson repeated UC Davis's request for veterinarians to serve as mentors in the doctoring course—especially large animal veterinarians—and as supervisors at access to care clinics across Northern California.
- **Closing and Future Updates:** Ms. Masterson concluded by noting that Sebastian, from the class of 2027, would soon provide future updates about their class and the school.

Board members expressed their appreciation to Ms. Masterson for serving as an excellent liaison between UC Davis and the Board. The Board thanked Ms. Masterson for consistently providing valuable updates that offered insight into the veterinary student experience and helped build connections with the younger generation of veterinarians.

As a gesture of gratitude, the Board presented Ms. Masterson with a certificate of appreciation, recognizing her service and professionalism during her time as

student liaison to the Board. She was commended for her informative contributions, which supported not only the Board, but also the veterinary community, consumers, and their pets. Board members wished her well as she approaches graduation and encouraged her to stay in touch.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

B. Western University of Health Sciences, Liaison—*Anna Styles*

Ms. Styles presented the Board with the following updates:

- **Student Resilience & Community Support:** Students at Western University have shown strong resilience in recovering from January's wildfires, balancing personal challenges with academic responsibilities and community involvement.
- **Academic & Curriculum Changes:** The college is undergoing administrative transition with a new Associate Dean of Academic Affairs. Notably, a dentistry module will be added to the third-year surgery and anesthesia curriculum beginning in the 2025–2026 academic year.
- **Concerns About Federal Policy & Career Outlook:** Students are increasingly anxious about how changes in the federal administration may affect veterinary careers, especially in public health and government roles. Canceled visits from federal veterinary professionals and uncertainty around financial aid have amplified these concerns. There is also debate over the emerging concept of mid-level veterinary practitioners, such as developments seen in Colorado.
- **Community Outreach & Public Engagement:** Students actively engage in outreach, including a partnership with Lopez Urban Farm to teach animal health and biosecurity and establish a pet food pantry. The college also held its annual open house, drawing around 2,000 attendees to educate the public on veterinary careers.
- **Call for Professional Involvement:** Practicing veterinarians are encouraged to collaborate with the college through lab sessions, clinical experiences, and rotations, particularly in underrepresented areas like wildlife, lab animal, and large animal medicine.

The Board members commended Ms. Styles' report for its content and depth, expressing admiration for how students today are engaged with real-world challenges in addition to their academic obligations.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

18. Board President Report—*Maria Preciosa S. Solacito, DVM*

Dr. Solacito presented the Board with the following updates:

- **Sunset Review Hearing Preparation & Participation:** The Board participated in its Sunset Review hearing on March 3, 2025. In preparation, the executive team held a mock hearing on February 28, 2025 with DCA leadership. This preparatory session played a key role in helping the team identify major issues, anticipate difficult questions, and practice effective responses. The support from DCA leadership was instrumental in boosting the team's readiness and confidence for the formal hearing.

Dr. Solacito noted that, during the hearing, a Board report was provided, which included the following information:

- **Licensing Process Improvements:** The Board fully implemented and interfaced with the AAVSB to receive electronic examination results for veterinarians and RVTs directly into the BreEZe system, eliminating manual data entry and streamlining the licensing process.
- **Veterinary Technician Examination Access Advocacy:** The Board successfully advocated for the change of the AAVSB long-standing policy allowing students to sit for the national examination, expanding job opportunities and accelerating entry into the profession.
- **National Examination Access and Score Reporting:** Partnering with the AAVSB, the Board secured continuous availability of the national examination and reduced retake waiting periods; additionally, score reporting times have been reduced from up to six weeks to less than one week.
- **Enhanced Enforcement and Inspections:** The enforcement team was expanded and supplemented with consultants, improving the case review process and resulting in faster complaint resolution, faster cycle times, and reduced subject matter expert (SME) costs. Merging enforcement and inspection units led to a 343% increase in inspections and a 262% increase in closed complaints in the last fiscal year.
- **Inspection Technology Upgrade:** In partnership with the California Board of Barbering and Cosmetology, the Board received a \$600,000 grant to develop a mobile inspection application, launched in November 2024, to streamline the inspection process for licensees, inspectors, and staff.

- **Educational Webinars:** The Board now hosts regular webinars covering enforcement, inspections, processes, and other topics requested by the profession.
- **Strategic Plan Progress:** The Board completed its 2024 Strategic Plan ahead of schedule and has already completed more than half of the tasks outlined in the new 2024-2028 Strategic Plan, reflecting strong progress by Board staff.

Next, Dr. Solacito summarized concerns brought up during the Sunset Review process:

- **Services Provided to Animals by Human Health Care Professionals:** The Board reaffirmed its openness to collaboration while stressing the importance of veterinary oversight to ensure animal welfare. The Board also noted that integrated veterinary service models are being incorporated into some veterinary school curricula.
- **Owner Exemptions for Veterinary Care:** The issue of pet owner ability to provide care for their own animals, particularly in rural areas with limited access to veterinary services, was acknowledged. The Board expressed a willingness to seek balanced solutions while continuing to uphold its mission to protect consumers and animals.
- **Medication Availability:** The Board highlighted ongoing discussions with the California Board of Pharmacy that address medication access issues, especially compounded medications.

Dr. Solacito provided additional Board President updates, which included the following:

- **CVMA Engagement:** The Board President and EO attended two CVMA Board of Governors meetings, where updates were provided on the following Board-focused areas: ongoing efforts to improve veterinary care; regulatory compliance; professional collaboration; key legislative issues; medication access; enforcement improvements; and, maintaining veterinary oversight in animal care. The meetings fostered a valuable dialogue with CVMA members and reinforced the shared commitment to advancing veterinary standards.
- **Executive Committee:** The Board's Executive Committee, which includes the President and Vice President, continues to meet biweekly and as needed with the EO to remain current on Board activities.
- **Board President Training:** On February 19, 2025, Dr. Solacito attended the DCA Board Presidents training. The training served as a forum to share best

practices and to hear from past presidents about their experiences presiding over a board.

- **DCA Director's Leadership Meeting:** In March 2025, Dr. Solacito attended the DCA Director's Leadership meeting. Topics discussed included: updates on DCA's executive team; California Business, Consumer Services and Housing Agency reorganization; efficiency drills; reiteration of DCA/board consumer protection mission; Los Angeles fire response; Sunset Review hearings; and Form 700 reminders. Dr. Solacito noted that the Board achieved 100% compliance with Form 700 filings by the April 1, 2025 deadline.
- **Board Commitment:** The Board remains committed to enhancing consumer protection, improving veterinary care, and ensuring efficient operations. The Board also looks forward to continuing its work with stakeholders and addressing concerns raised during the Sunset Review hearing, while also moving forward with its legislative priorities and strategic objectives.
- **Leadership Transition:** Dr. Grant announced he will not seek reappointment when his term ends in June 2025, marking the April 2025 meeting as his final Board meeting. His leadership was praised for shaping the Board's direction, and he was thanked for his service.
- **Interim MDC Liaison Role:** In light of Dr. Grant's departure, Dr. Solacito will temporarily assume his responsibilities as Board liaison to the MDC, including oversight of the Unlicensed Practice Subcommittee, with a pledge to maintain continuity and keep the Board informed of future developments.

Dr. Bradbury expressed deep gratitude to Dr. Grant for his time, commitment, and openness during his tenure. She highlighted his exceptional work in shaping policy and bridging divides within the group. While understanding his decision not to seek reappointment, she acknowledged his invaluable contributions and praised his efforts, and wished him well.

Dr. Grant expressed gratitude for serving three years on the Board, reflecting on the valuable experience of learning new topics, making new friends, and admiring the professionalism of both the Board members and staff. He mentioned that he wished he had started serving earlier on the Board, so that he could have expanded on the experience.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

*Agenda items for this meeting were taken out of order, and the Board moved to Agenda Item 20. The order of business conducted herein follows the publicly noticed Board meeting Agenda.

19. Registered Veterinary Technician Report—*Kristi Pawlowski, RVT*

Ms. Pawlowski presented the Board with the following updates:

- **AAVSB's Veterinary Technician National Exam (VTNE):** Examination developers have been busy writing new examination questions.
- **VTNE Meeting:** Ms. Pawlowski will attend the June 2025 VTNE meeting in Louisville, Kentucky.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

20. *Update, Discussion, and Possible Action Regarding American Association of Veterinary State Boards Activities

Dr. Nunez introduced himself to the most recently appointed members and provided his Board and professional association service background. As a Board of Director member of the AAVSB, Dr. Nunez provided the following AAVSB overview and updates to the members:

- **Overview of AAVSB:** The AAVSB is a voluntary association comprised of 63 U.S. and Canadian member jurisdictions.
- **Governance and Representation:** The AAVSB is led by a 10-member Board of Directors elected by the General Assembly. Current members include two representatives from the West, two from Canada, and the remaining representatives are from the East and Midwest.
- **Mission and Services:** The AAVSB's purpose is to ensure and enhance the welfare of the public and animals. Its mission is to support and advance veterinary medicine regulation. It develops the VTNE, the licensing examination accepted by those jurisdictions that license or register RVTs. Additionally, there are other important programs and services offered that help the member boards and licensees (i.e., Veterinary Information Verification Agency (VIVA), Veterinary Application for Uniform Licensure Transfer (VAULT), Registry of Approved Continuing Education (RACE), RACEtrack, PAVE, State and Provincial Assessments (SPA), etc.).

- **Educational and Networking Events:** The AAVSB's largest event is the Annual Meeting and Conference, which will be held on September 17-20, 2025, in Cincinnati, Ohio.
- **Model Practice Act and Other Model Document:** The AAVSB provides model law and model documents on issues like telemedicine, telehealth, virtual practice, appropriate use of opioids, cannabidiol (CBD) use, companion animals, VCPR, scope of practice, etc.
- **Artificial Intelligence (AI) Guidance:** The AAVSB released a white paper on AI in veterinary medicine, supporting innovation while urging licensees to ensure transparency, data protection, and informed consent.
- **Volunteer Opportunities:** The AAVSB is driven by volunteers serving on committees focused on examinations, policy, education, and global initiatives. Members are encouraged to get involved through the website.
- **Colorado Veterinary Practice Associate:** Although not widely supported by a prior AAVSB survey or the American Veterinary Medical Association (AVMA), Colorado voters approved a new mid-level license (veterinary practice associate). The AAVSB is helping develop its regulatory framework, including qualifications and continuing education (CE) requirements.
- **Annual Meeting and Conference:** Dr. Nunez reiterated that the AAVSB Annual Meeting and Conference will take place in September. He stated that the AAVSB offers a funded delegate program, typically covering the Board President and an alternate delegate, along with funding for legal counsel. He encouraged strong attendance from California, acknowledging Ms. Sieferman as an outstanding representative and expressing hope that Ms. Welch could also attend. Dr. Nunez added that Dr. Bradbury is expected to be nominated for a Board of Director position and that he himself will be a nominee for President Elect, requesting support from the Board.

Dr. Solacito thanked Dr. Nunez and expressed that many veterinarians may not fully recognize the AAVSB's significant role in shaping veterinary practice. She agreed on the importance of active participation to have a voice in regulatory decisions and praised both Dr. Nunez and Ms. Sieferman for their impactful leadership, noting that their strong presence is appreciated not only in California, but across the veterinary profession.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

21. Update, Discussion, and Possible Action Regarding the Board's Logo

Justin Sotelo presented the [meeting materials](#) to the Board. It was explained that Board members were being asked to consider a redesign of the Board's logo due to the Board's name changing to "California Veterinary Medical Board" as a result of SB 1526 (Committee on Business, Professions and Economic Development, Chapter 497, Statutes of 2024), effective January 1, 2025.

Discussion: The Board reviewed and discussed the four logo redesign options provided in the meeting materials.

Motion: Christina Bradbury, DVM, moved and Steve Manyak, DVM, seconded a motion to approve logo redesign option 2 provided in the meeting materials.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comments were made on the motion:

- [Nancy Ehrlich](#), RVT, CaRVTA, provided the following public comment:

Logo Redesign Option 2

Ms. Ehrlich stated that she liked logo redesign option 2.

- [Mark Nunez](#), DVM, MDC, provided the following public comment:

Logo Redesign Option 2

Dr. Nunez stated that he liked logo redesign option 2.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Barry Grant, DVM	X			
Steven Manyak, DVM	X			

22. Executive Management Reports

A. Administration

Alicia Hernandez presented the [meeting materials](#) to the Board.

[Karen Munoz](#), Budget Officer, DCA, Budget Office provided the Board with updates regarding the budget projection reports and fund condition.

Ms. Sieferman thanked Ms. Munoz for the presentation. She also expressed appreciation for Budget Office staff member Matt Nishimine's hard work on developing the Board's fee structure. She stated that he provided multiple models, and when asked to refine them further, he quickly delivered additional options that were extremely helpful. Ms. Munoz also acknowledged the efforts of Sam Dyer, noting that both he and Mr. Nishimine worked diligently on the fee requests from the Board.

B. [Examination/Licensing](#)

Ms. Hernandez and Ms. Sieferman presented the [meeting materials](#) to the Board and answered questions about the report.

Public Comment: Dr. Solacito requested public comment on Agenda Items 22.A. and 22.B. The following public comment was made on these items:

- [Nancy Ehrlich](#), RVT, CaRVTA, provided the following public comment:

Increasing Number of Veterinary Assistant Controlled Substance Permit (VACSP) Holders & Access to Restricted Drugs

Ms. Ehrlich noted the increasing number of VACSP holders compared to RVT registrations and DVM licenses. She mentioned that it had been previously mentioned that VACSP holders are more likely to have criminal records and face disciplinary actions. She questioned whether there is any consideration to address this issue, specifically regarding the potential risk of individuals with criminal backgrounds having access to restricted drugs.

C. [Enforcement](#)

Rob Stephanopoulos and Ashley Sanchez presented the [meeting materials](#) to the Board.

Board members expressed their appreciation for the enforcement staff's hard work, highlighting the significant progress in reducing case backlogs. Despite some comments from constituents about delayed responses, the trajectory of improvements was acknowledged. The engagement of SMEs was also acknowledged, noting their alignment with the Board's goals and the valuable contributions to managing expectations. Ms. Pawlowski specifically thanked Ms. Sanchez for her knowledge and quiet but impactful input, especially when working on the inspection checklist with her.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

D. Outreach

Mr. Sotelo presented the [meeting materials](#) to the Board.

Regarding the Board's Misbranded Drugs Webinar, Ms. Sieferman added that the Board received positive feedback from CVMA, particularly acknowledging Dr. James Howard's knowledge and expertise. The CVMA extended an invitation for Dr. Howard to give a presentation at an upcoming event, focusing on clarifying misunderstandings around misbranded drugs.

Dr. Solacito acknowledged the staff for their dedication and hard work, particularly highlighting the team's efforts in advancing the Strategic Plan. She gave special recognition to Ms. Sieferman and her team for their diligence in accomplishing tasks and emphasized that the public may not fully recognize the breadth of work being done, which goes far beyond just handling complaints and licenses. Dr. Solacito expressed gratitude for the team's ongoing contributions. Dr. Grant concurred with Dr. Solacito's comments.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

E. Strategic Plan

Mr. McKinney presented the [meeting materials](#) to the Board.

Dr. Solacito commended staff for the progress in completing Strategic Plan tasks.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

23. Future Agenda Items and Next Meeting Dates

Ms. Sieferman presented this item. She indicated that the following 2025 meeting dates were posted on the Board's website:

- July 16-17, 2025
- October 15-16, 2025

Additionally, she noted that the 2026 meeting dates were set as follows:

- January 21-22, 2026
- April 15-16, 2026
- July 15-16, 2026
- October 14-15, 2026

Regarding future agenda items, Ms. Sieferman stated that the following were anticipated to be brought to the Board in July:

- Proposed amendments to CCR, title 16, section 2068.5 regarding RVT Practical Experience and Education as Equivalent Curriculum (with recommendations from the Board from April 16, 2025 regarding the RVT task checklist)
- Demonstration from the California Department of Health Care Access and Information (the agency that collects demographic data on the Board's licensees and other DCA licensees at the time of renewal)

Dr. Manyak provided the following comment:

Electronic Medical Recordkeeping

Drawing on his experience as both a Board member and former case reviewer, Dr. Manyak identified poor record keeping as a consistent and central issue in many complaints. He explained that there are frequent problems with the legibility, completeness, and timing of medical records – particularly, uncertainty over whether notes were made at the time of treatment or created later, possibly in response to complaints. He stated this ambiguity complicates investigative efforts and undermines public trust.

To address this issue, Dr. Manyak proposed amending the Practice Act to implement the following: a requirement for electronic medical recordkeeping; mandatory date and time stamping for all entries, and, a locking mechanism - for example, a set period after patient discharge (such as 72 hours), so that records cannot be altered indefinitely.

He acknowledged potential concerns from practitioners still using paper records and technological limitations in rural areas, but argued that improvements in mobile cellular service over the past decade make barriers very infrequent. He explained that the suggested 72-hour window (or similar timeframe) would allow flexibility, giving practitioners time to enter records from a location with access.

Dr. Manyak asserted that electronic recordkeeping should be recognized as a standard of care, emphasizing that adopting this approach would safeguard both public interest and licensees, while enabling Board staff and reviewers to conduct investigations more efficiently. He stated he looked forward to discussing the issue.

Dr. Bradbury provided the following comment:

Awareness of Client Access to Records

Dr. Bradbury noted that she wanted to address a public comment (from a caller) from the previous Board meeting who did not know that records were required or that he had a right to access them. She added that she did not want that comment to go by the wayside. While acknowledging existing front desk or lobby notices, Dr. Bradbury suggested it might be worth considering some form of notice that records are available upon request. She added that if other professions can require that kind of notice, it might be worth discussing. She again emphasized that she did not want the concerns and comments to go unheard.

Ms. Pawlowski asked if the matter could be referred to the MDC. Dr. Bradbury responded that she would defer to the opinion of the Executive Committee.

Ms. Siefertman thanked Dr. Bradbury for her comment. She responded that the caller had said they would have liked to know they had a right to get a copy of their records. However, she noted that part of the confusion is that consumers currently do not have that right - they only have a right to a summary of the record.

Ms. Siefertman clarified this is part of a legislative proposal aiming to change that, so clients would have the right to the full record. She noted the Board could do outreach now and possibly create a notice requirement (which would likely need legislation), or wait until the proposed law takes effect in January 2026, and then develop appropriate outreach and notice at that time.

Regarding Dr. Manyak's comment, Mr. Espinoza asked if there was a way to invite potentially impacted parties to have a discussion about the suggestions that were made, to hear input from various affected groups, and consider their perspectives when thinking about policy areas moving forward.

Ms. Siefertman responded that stakeholder engagement can happen either at the Board level or by sending the matter to the MDC, which typically holds stakeholder meetings to gather input. She gave the example of when the MDC did this during discussions about RVT education and unlicensed practice, where they gathered feedback from those impacted and reported back. She added that the Board has various options, and it is ultimately up to the Board to decide the approach.

Dr. Solacito provided the following comment:

Animal Physical Therapy Proposals

Dr. Solacito expressed a desire to revisit the conversation with the physical therapy group, noting that every time they make proposals, the Board responds

that the proposals have been considered, which contributes to the perception that the Board is not being responsive.

Dr. Solacito suggested re-examining whether anything has changed since the issue was last discussed, particularly around data. She stated that she would also want to ask the group for data on the demand for animal physical rehabilitation and whether pet owners are not receiving adequate services, despite many practitioners already offering similar care. Dr. Solacito compared the tone of the current conversation to past discussions with chiropractors, who presented a more defined structure. After years of hearing the same concerns from the physical therapy group, she suggested that the Board revisit the issue.

Dr. Bradbury expressed support for revisiting the physical therapy discussion, expressing that she understood the frustration with the repeated response that the proposals have already been considered. She suggested that it might help the Board to see a presentation on what the 2017 task force decided, noting that none of the current Board members were involved at that time. She noted that she reviewed the task force meeting notes and Board votes, but highlighted that there is a continuing claim that the Board never accepted the task force's recommendation. She stated that she believes having data from that task force, and possibly including someone like Dr. Nunez, who chaired the task force, could help provide clarity. Dr. Bradbury also acknowledged the significant stakeholder participation, including special meetings, petitions, and reports of difficulty accessing physical therapy.

Dr. Solacito explained that the intent behind wanting to revisit the physical therapy discussion is because there seems to be a lot of information that the Board cannot stand by without fully understanding the original conversations and context. She emphasized the importance of finding out why the Board is in this situation and why the conversation has not been resolved.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

Ms. Pawlowski expressed gratitude to Dr. Grant, thanking him for everything he brought to the Board and everything he taught the members. She shared that she enjoyed the experience tremendously and added that the members were going to miss him.

Dr. Solacito formally recognized Dr. Grant with a plaque and resolution, honoring his service from February 15, 2023, to June 1, 2025. The resolution commended his exemplary contributions and unwavering commitment during his tenure, including his work on the MDC, and the MDC's Equine Practice and Unlicensed Practice Subcommittees. It stated that his distinguished service advanced the Board's mission and vision, setting a high standard for others. On behalf of the Board and DCA Director Kimberly Kirchmeyer, the resolution expressed deepest gratitude for

Dr. Grant's wisdom, leadership, excellence, and dedication. The resolution was signed and dated April 17, 2025, by Dr. Solacito and Ms. Kirchmeyer.

24. Adjournment

Dr. Solacito adjourned the meeting at 3:36 p.m.

Hyperlinks to the webcast are controlled by a third-party and may be removed at any time. They are provided for convenience purposes only and are not considered part of the official record.

**Agenda items 17.A. and 20 were taken out of order. The order of business conducted herein follows the publicly noticed Board meeting Agenda.*

DRAFT