

Vermont State Veterinary Board NEWSLETTER

Vermont Secretary of State, Office of Professional Regulation

Topics discussed in this issue include: brief biographies of new board members; Chair's report, stories worth mentioning, Dept. of Health inspections and fee charged; information regarding complaints; changes in the Board's statutes; updated policies; disciplinary actions; Q & A; Statistics, etc.

Board Members

Members are appointed by the Governor. Listed below are the current members of the State Veterinary Board and the date their terms expire (under the statute, Board members serve until a successor is appointed).

Mark A. Basol, D.V.M., Chairman, Vergennes, VT (12/08); Ronald S. Svec, D.V.M., Secretary, East Dummerston, VT, (12/11); Robert Bergman, D.V.M., Vice-Chair, Shaftsbury, VT (12/07); Kristin M. Haas, D.V.M., Hinesburg, VT (12/08); and public members: Linda Johnston, Greensboro, VT (12/09); and Terry York, East Montpelier, VT, (12/12).

The Board and the Office of Professional Regulation welcomes Terry York and says good-bye and thank you to public member Eveleen Cecchini who resigned for health reasons. We wish her well.

Introduction

The Vermont State Veterinary Board is pleased to bring you this issue of our Newsletter. We want to update you on changes in the statutes or rules, Board Policies, and general information. We encourage your feedback and input in these matters.

The Board generally meets in Montpelier, Vermont, on the 2nd Thursday, of every even month beginning in February. The meetings

are public, and we encourage you to attend.

Chairman's Report

Welcome to the biennial State Veterinary Board's Newsletter. We as a Board have had numerous discussions about the active practice requirement for licensure in Vermont. This requirement stated that an applicant for Veterinary licensure needed to have 3000 hours of clinical practice in the past three years. We have denied several otherwise qualified applicants for this reason. We as a Board felt that since we do not require in-state licensees to fulfill active practice or clinical practice requirements, it is unfair to require it of out-of-state applicants. Deleting this requirement was presented at the Vermont Veterinary Medicine Association's (VVMA) summer meeting. The Office of Professional Regulation's bill which included this proposed provision, recently passed. The new statutory provision will be in effect on July 1, 2007.

You have also by now received your renewal forms in the mail. This year we will be auditing a small percentage of licensees to review how the Continuing Education requirement is working. If audited, you would need to produce evidence of your participation in continuing education programs. Thank you.

Mark A. Basol, D.V.M., Chair

About the newly appointed Public Members

Linda Johnston

Linda is a native of Montpelier and graduated from Montpelier High School in 1961. She was employed by the Vermont Mutual Fire Insurance Company before joining the staff at National Life Insurance Company. In 1966 she married James Johnston owner of the Barber & Lanier Funeral Home. The Johnston's have two daughters. Linda was a stay at home Mom, with the exception of part time work at her husband's business.

Beginning in 1988, Linda and one of her daughters operated an equestrian stable for several years. They offered eight weeks of day camp plus exhibiting and coaching on the national horse show circuit. In 2001, Linda took a more active role in her husband's business as President of the corporation until her retirement in 2006.

Today the Johnstons' live in Greensboro, Vermont. Linda is active in that community, volunteering at the Greensboro Historical Society and the Greensboro Free Library. Linda was appointed by the Governor on April 18, 2005.

Terry Ricker York

Terry was born and raised in Montpelier, graduating from Montpelier High School in 1962. She pursued her education at UVM in the

College of Arts and Sciences with a Liberal Arts major in English and minor in French. Terry received her B.A. degree in 1966 and continued evenings at UVM earning her M.ED. in 1973 and C.A.S. in Education Administration in 1983.

After graduation in 1966 Terry worked in the insurance field for one year at Brown, Bridgeman and Miller Insurance Agency in Burlington. She began her teaching career at Edmunds Middle School in 1967 and relocated to Shelburne Middle School where she taught Language Arts for twenty-eight years and French for her final five years retiring in 2000. Though she coached and was compensated for several minor administrative positions she remained a classroom teacher for thirty-three years.

In 1976 Terry married Franklin York. Horses have been a lifelong interest for both of them. In 1986 they moved from Waitsfield to her mother's farm in East Montpelier after her Mom's death. They continued to raise, train and compete as well as fox hunt their horses until Frank's death in January of 2004. Terry currently resides on this farm with her horses and dogs. Terry is currently training and competing her young mare at schooling trials. She enjoys skiing both downhill and cross country, biking and spending time with her family and friends. She is pleased to be a member of the State Veterinary Board and was appointed on March 12, 2007.

Staff

Diane Lafaille, Board Administrator. To contact the Board, please call Ms. Lafaille at (802) 828-2390 or E-Mail: dlafaille@sec.state.vt.us.

Carla Preston, Unit Administrator. To reach Ms. Preston, you may call (802) 828-2875 or via E-Mail: cpreston@sec.state.vt.us

Larry S. Novins serves as the Board's counsel.

Christopher D. Winters, Esq. is the Director of the Office of Professional Regulation.

Our Web site is:
www.vtprofessionals.org

OPR is Moving!

Around the first of July, the Office of Professional Regulation is moving to a new location at the National Life Insurance Building in Montpelier. This move will consolidate most of OPR's staff, whom are now located at three separate locations. Our new mailing address will be OPR, National Life Building, North, FL2, Montpelier, VT 05620-3402. (Our phone numbers and E-Mail addresses will remain the same.)

The other divisions of the Secretary of State's Office will remain at their current locations.

Job Well Done

The need for recognition of a job well-done is universal...or is it? In our professional lives, a note of thanks from an appreciative client or a vote of confidence from a colleague can make the sun shine even in the middle of November. Do those creatures that we serve crave the same recognition? Probably not, but there are some patients that deserve our praise even if they can manage just fine without it. Included in this group are the canine members of the Vermont Police Service Dog Teams.

For a variety of reasons, our state has lost a number of excellent canines in the recent past. Some of these service dogs have been formally recognized by the Vermont Veterinary Medical Association and others have been recognized, along with their handlers, by the communities in which they have served. All of them have achieved a level of excellence in their relatively short careers that we would be wise to emulate, and their stories are worth our recognition.

Doc, one of the canine members of the Hinesburg Community Police Department, chose Chief Chris Morrell as his handler years ago. Although the dog was officially purchased with money from grants and donations, it was Chief Morrell that Doc bonded with instantly and worked faithfully beside for his entire career. In 2002, Doc was inducted into the Vermont Veterinary Medical Association's Animal Hall of Fame in the Professional Animal Category. He began working in 1997 and during his impressive career, he tracked and saved the lives of numerous people, found countless pounds of drugs and other contraband, and served as a good will ambassador between the police department and the citizens of Hinesburg and beyond. He could even sometimes be found at the local cremee stand ready to sneak a lick from an unsuspecting toddler. He was laid to rest last summer and is still missed by those fortunate enough to have known him.

Xerxes, owned and handled by Corporal Ed Hunter, was a canine member of the Vermont State Police. He passed away this past February at the age of 14. Xerxes successfully tracked 170 people and was credited with saving at least three lives. His 2003 induction into the Animal Hall of Fame in the Professional Animal Category was one of many accolades. Canine officer Xerxes also took part in numerous public service demonstrations in his community and his legacy will certainly live on in the citizens' lives that he benefited.

Kilo, an impressive black German Shepherd Dog, was donated to David Dewey of the Colchester Police Department in 1998. At six weeks of age with big feet and floppy ears, it was probably hard to imagine the important role Kilo would play in his community and beyond. Over his eight year career he tracked many people, suspects and runaways alike, located drugs, and in the words of his partner, "saved my back more times

than I can count!" He participated in many demos at colleges, Special Olympic events and other public events, and he reportedly carried around the bite sleeve as if to say that he really was "all that." In 2004, the Vermont Veterinary Medical Association honored him with an induction into the Animal Hall of Fame in the Hero Category. He passed away in November 2006 and is missed by his family and friends.

Other recent passings include K-9 Hugo of the Vermont State Police, owned and handled by Trooper Sam Truex. Hugo had worked with his partner as a drug and patrol canine since 2001 and was laid to rest in April 2006. K-9 Roca was handled and owned by Deputy Rob Sylvia and was the first canine officer in the Chittenden County Sheriff's Office. During her short time as a police service dog, Roca seized over \$250,000 in currency and hundreds of pounds of marijuana. She died unexpectedly in June 2006. K-9 Corey of the Bennington Police Department passed away in late 2006 after suffering from neurologic deficits.

Perhaps the most ironic thing about the lives of these dogs is that all of them led dual lives. Yes, they were service dogs, but they were also pets and loved dearly by the families that shared in their lives. They all loved their games of fetch, they all started with hurrendous cases of "puppy breath," and most of them, at one time or another, weasled their way into their partners' beds in the middle of the night. Their legacy will live on in the acquisition of new, chubby, puppy-breath bundles thanks to donations from those whose lives have been improved by the canines mentioned here. So, even though they don't require it in order to serve their communities, we would like to say to these dogs and their handlers...
THANK YOU, JOB WELL DONE!

Promoting the Human – Animal Bond on a Local Scale

The human – animal bond is an impressive force. It is one of the reasons that our profession is held in such high regard by the public, and it is often the thing that allows us to pursue advanced diagnostics and treatment protocols in order to save an ill or injured pet. We witnessed this force on a grand scale during Katrina as those people being rescued often refused to leave their pets, and when forced to do so, went to great lengths to find them in the aftermath.

On a local scale, this drive comes into play every day. It is estimated by officials that 40 to 50,000 pets perish in house fires annually in the U.S. Additionally, there are countless motor vehicle accidents and other tragedies that may leave pets injured or dead. A victim's first priority at an accident scene or house fire is often their pet that may be in harms way.

It is because of this bond and the dilemma that it sometimes creates for First Responders in our state that some local fire departments and rescue squads have initiated animal first aid training for their members and have acquired equipment that allows for emergency treatment at an accident scene. Proper animal restraint, limb immobilization and bandaging, treatment of smoke inhalation and animal CPR are just some of the topics that have been taught to first responders. First aid kits often include muzzles, leashes, bandage materials, SAM splints, and animal oxygen masks that are compatible with the human oxygen delivery systems already carried by most first responders.

The training of the first responders has often been handled by local veterinarians and the equipment has been donated by veterinary hospitals, local humane societies, and national humane organizations. For those of you who have already contributed to

this cause through training or equipment donations, thank you. For those of you who are looking for a way to give back to your community, please consider this endeavor as a means of promoting that human – animal bond that makes our profession worthwhile. You can approach the officers of your local fire department or rescue squad to get started or contact Dr. Rich Armstrong at randk@gmavt.net for information on protocols that have been successful in his department.

Inspection of Radiographic Equipment by the Vermont Dept. of Health

The Vermont Department of Health has for decades conducted radiological health inspections of x-ray units. In the past few years, the number of inspections decreased because of staff shortages. In 2006, an addition to the staff allowed for resumption of the x-ray inspection process.

X-ray inspection is required by Vermont Statute, and the regulations arising from the statutes may be found at: http://healthvermont.gov/regs/radio_health.pdf.

Funding for the inspection program has always come from the General Fund. During the 2007 Legislative Session, the Vermont Department of Health requested it be allowed to recover part of the costs of this x-ray inspection program through user fees. What has been proposed is a \$300.00 fee per x-ray facility. This fee would be assessed every three years, and it covers all registration and inspection services.

Clearly, the Vermont Department of Health must provide substantial services for the fees that are charged to recover costs.

For x-ray facilities, there are three primary services provided by the

Vermont Department of Health. The first is registration of facilities as required by regulations. The second is as an information source to x-ray users for purposes of health and safety improvement. The third is periodic inspection for image quality, user safety and public health protection. These inspections will be completed for each facility every two to four years. A preliminary veterinary facility inspection form is enclosed to allow the user some sense of what an inspection is like. **(These forms are informational only, you do not need to complete them or return them to the VDH.)**

As may be seen in the inspection document, the inspection is both qualitative and quantitative. There are observations of cleanliness as the lack of cleanliness may affect image quality, of imaging and developing procedures, and of patient and user dose minimization techniques. There are also measurements of physical parameters including entrance skin exposure.

Medical, dental, veterinary and industrial x-ray exposure is the primary source of public and occupational radiation exposure, excluding natural sources of exposure like radon. Though the exposures are generally low, the cumulative exposures for Vermonters are significant. In the Vermont Department of Health's effort to reduce exposures to levels that are as low as reasonably achievable, working with x-ray users to improve radiographic imaging practices may be of substantial benefit. The primary benefits are obtained when x-ray users have fewer repeat exposures.

Should veterinarians and veterinary facility administrators have questions about the x-ray registration and inspection program, they are encouraged to contact our x-ray specialist Carla White at cwhite@vdh.state.vt.us

Complaints

(worth repeating - from 2005)

The State Veterinary Board must investigate all allegations of unprofessional conduct submitted. What follows is a composite of some of the issues that may result in the filing of a complaint against a practitioner. Having a complaint filed against you can be extremely disruptive and upsetting. If a case alleges unprofessional conduct, as defined by the Board's statutes and rules, the Office will order an investigation.

Although many complaints do not result in disciplinary action, they are still investigated. Many of those complaints that are closed without prosecution might have been avoided altogether had the practitioner better communicated with the client.

If a complaint is filed, and the Investigative Team finds unprofessional conduct, the Board may take disciplinary action after a hearing. We hope that you will read this summary of common complaints carefully. It does not cover every possible scenario, but it may help you avoid common pitfalls that result in a complaint, and/or disciplinary action.

- 1) Poor communication. Be sure to communicate well with your clients, your colleagues, and with your employees.
- 2) Attitude. The Investigative Teams find that many cases are brought to the Office of Professional Regulation because the professional appears to have had an "attitude" that was flippant or seen as condescending.
- 3) Release Instructions. Investigative Teams have found that many practitioners simply verbalize post operative care which may involve multiple instructions to clients. Often those instructions are not followed properly, which may have disastrous results.

The Board strongly recommends that practitioners prepare written instructions for post operative release care, which covers administration of medications, foods, activities to avoid, and so on.

4) Expired License. Failing to renew and continuing to practice with an expired license is unprofessional conduct.

5) Poor Record keeping. Failing to maintain adequate patient records, drugs prescribed, anesthesia used, a drug inventory, etc. is unprofessional conduct.

Record Keeping

(worth repeating - from 2005)

The State Veterinary Board would like to remind all practitioners of the huge importance of thorough record keeping. It has been our experience that all too often incomplete and illegible records of patient care and client communications are provided to investigate a complaint.

Each patient should have its own medical record identifying the client's information and all patient information. On each dated occasion for an examination, records need to show the presenting complaint based on signs, not the owner's presumed diagnosis. A thorough history and findings should be documented outlining a tentative or definitive diagnosis. Diagnostic and therapeutic plans including all tests performed and medications prescribed must be documented. Any surgical procedure should be described in adequate detail to include findings, treatment, and anesthetics used. Clear instructions are a major portion of the appointment or discharge. It is helpful to include in the records any suggestions regarding referrals to a specialist or client waivers of recommended care. All conversations regarding an animal should be noted on its patient history. It is also important to record the patient's response to the care.

Record keeping should be of the problem-oriented approach for clarity and ease in retrieval. This method recognizes that multiple problems can exist at one time, and prevents the information for each from being compiled together with another. All notes should be legible to anyone reading the notes and signed at each entry with the provider's initials or name. All of these recommendations not only help insure good and thorough medicine, it also is your means of support in legal matters.

New Statutes, effective July 1, 2006
(*Underlined text is new and struck-out text to be removed*)

Title 26 V.S.A. § 2421(a) is amended to read:

(a) An applicant who has reached the age of majority, ~~is of good moral character~~, has passed the National Board Examination and the Clinical Competency Test or any subsequent licensing examinations prepared under the authority of the National Board Examination Committee for Veterinary Medicine, or its successor organization, and has graduated from a school of veterinary medicine accredited by the American Veterinary Medical Association is eligible for licensure. Upon submission of evidence acceptable to the board of satisfaction of these eligibility criteria and upon payment of the required fees, the applicant shall receive a license; provided, however, that the board may also require satisfactory completion of an examination covering state laws and rules related to the practice of veterinary medicine and the state or national veterinary codes of ethics.

2007 Legislation
(*passed both House & Senate*)

Sec. 34. 26 V.S.A. § 2402(b) is amended to read:

(b) A person who violates ~~a provision of this chapter subdivision (a)(1), (2), or (3) of this section~~ or who obtains a

license by fraud or misrepresentation shall be ~~imprisoned not more than 90 days nor less than 30 days or fined not less than \$500.00 or more than \$5,000.00, or both~~ subject to the penalties provided in subsection 127(c) of Title 3.

Sec. 35. 26 V.S.A. § 2424(a) is amended to read:

(a) ~~The director of the office of professional regulation, with approval of the board;~~ shall, upon application and payment of the required fee, issue a license without a written examination to a person who:

(1) holds a current license in good standing in another state, a territory of the United States or a Canadian province; and

(2) has passed:

* * *

(C) an equivalent examination, as established by the board; ~~and~~

~~(3) has actively practiced clinical veterinary medicine for 3,000 hours during the three years preceding application.~~

See the Web site for all changes to the statutes.

Board's Policy for Approving Continuing Education Credits
(worth repeating - from 2005)

It is the Board's intent that Licensees receive high quality Continuing Education credits from professionally recognized organizations at conferences. This creates personal interactions between veterinarians that will enhance the learning experience. Nevertheless, the Board recognizes that valuable education programs are available elsewhere. The Board's Rule, at present, permits obtaining CEs from online programs. However, these must be approved by recognized organizations as detailed in Board Rule 3.7 available via our Web site www.vtprofessionals.org.

Programs that are not pre-approved may be submitted to the Board for

consideration. Continuing education credit may be given for programs that are relevant to the diagnosis, treatment, and prevention of animal disease. This approval may be given provided that the licensee demonstrates the professional level of the program by submitting a program outline, including learning objectives, names and qualifications (Curriculum Vitae) of the presenter(s) to the Board. Contact us for a CE Request form.

Program providers are encouraged to apply directly to the American Association of Veterinary State Board (AAVSB)'s, Registry of Approved Continuing Education (RACE) for approval. Contact them by phone at (877) 698-VIVA, mail to 3100 Main Street, Suite 208, Kansas City, MO 64111, or E-Mail: info@aavsb.org. Visit their Web site at: www.aavsb.org

Board's Policy regarding Alternative Therapies
(worth repeating - from 2005)

Re: Dentistry, Physical Therapy, Acupuncture, Chiropractic, etc. in Veterinary Medicine

Currently, in Vermont, there are no provisions to allow a person other than a licensed veterinarian to administer treatment or to authorize treatment to animals. The one exception is a person treating his or her own animal. A veterinarian may be assisted in the practice of veterinary medicine by a person other than a licensed veterinarian if that person is acting under the veterinarian's direct supervision.

Therefore, an acupuncturist, physical therapist, physician, chiropractor, dentist, dental hygienist, dental assistant, herbalist, animal dental technician, or other practitioner of

medical arts, who is not a veterinarian may assist a licensed veterinarian in treating animals by administering treatments upon them, but only when the treatment has been prescribed by the veterinarian and the treatment is provided under the veterinarian's on-premise supervision. This applies to therapies and procedures on large and small animals.

It would constitute unprofessional conduct if the veterinarian failed to exercise his or her independent judgement in the diagnosis and prescribing of appropriate treatment for the animal and merely acted as a "conduit" for the unlicensed person to practice on animals.

A person, including an acupuncturist, herbalist, physical therapist, physician, chiropractor, dentist, dental hygienist, dental assistant, or animal dental technician, etc., who is not a veterinarian and who represents that he or she practices veterinary medicine independently of a veterinarian by treating animals, is in violation of the practice act and may be subject to criminal prosecution and civil action.

Any veterinarian who aids and abets the unlicensed practice of veterinary medicine may have action taken against his or her license for unprofessional conduct.
Policy adopted: July 23, 1992;
Policy amended: May 13, 1993;
Policy amended: July 15, 1993.

Disciplinary Actions

The Office of Professional Regulation issues Press Releases of all disciplinary actions taken during the month. The Press Release includes the name of the Respondent, profession, and a brief description of the disciplinary action taken. The full text of decisions can be accessed for reading or printing from the OPR

Web site noted below. The direct link to the search page is:

<http://vtprofessionals.org/opr1/searchdiscipline.htm>.

The Board took action against licensees as indicated below (June 1, 2005)

A veterinarian from Colchester, VT was disciplined for failing to properly monitor a cat's recovery from anesthetics, which resulted in its death, a violation of 3 V.S.A. § 129a(b)(2).

SANCTION: On June 10, 2005, the Board accepted a Stipulation and Consent Order which imposed Conditions on the Respondent's license.

A veterinarian from Ithaca, NY was found to have diverted drugs, a violation of 3 V.S.A. § 129a(b)(2) and § 129a(a)(3).

SANCTION: Pursuant to a Stipulation and Consent Order approved by the Board on August 12, 2005, the Board imposed Conditions on the Respondent's license for a period of three years.

A veterinarian from Alstead, NH failed to renew her license for a period of six months and continued to practice, violations of 3 V.S.A. § 129a(a)(3), Rule 2.1(8) and Rule 2.2. SANCTION: On April 17, 2006, the Board accepted a Stipulation and Consent Order which imposed an Administrative Penalty in the amount of \$300.

A veterinarian from Berlin, VT failed to supply oxygen to a dog in distress and failed to refer treatment locally, which resulted in its death, a violation of 3 V.S.A. § 129a(b)(2).

SANCTION: On June 12, 2006, the Board accepted a Stipulation and Consent Order which Reprimanded and imposed Conditions on the Respondent's license.

Questions & Answers

(Q) How many online continuing education credits will the Board accept? I wish to complete continuing education programs that are offered online. The credits are approved by the AAVSB's RACE program or by another body accepted by the Board.

(A) **The Board finds significant value in licensees participating in live CE programs where one can interact with the presenter and colleagues. At this time, the Board would not reject RACE approved on-line courses or other such programs offered by Board-approved presenters.**

Statistics

There are currently 573 active veterinarians, 246 of whom are non-residents, who possess Vermont veterinary licenses.

Annual Report

The Office of Professional Regulation's Annual Report is available online at www.vtprofessionals.org which contains statistics for all professions regulated under the Secretary of State's Office.

Miscellaneous

For a complete copy of the current laws and rules, you may access the Board's homepage at:

www.vtprofessionals.org

Other Web addresses:

Vermont Department of Health:
www.state.vt.us/health

Vermont Legislature:
www.leg.state.vt.us

Vermont Dept. of Agriculture:

www.agr.state.vt.us

The Board welcomes questions and concerns addressed to:

Vermont State Veterinary Board
Office of Professional Regulation
National Life Building, North, FL2
Montpelier, VT 05620-3402. Phone:
(802) 828-2390, or
Fax 828-2465, or
E-mail: “dlafail@sec.state.vt.us”