

1 *State of Alaska*
2 *Department of Commerce, Community and Economic Development*
3 *Division of Corporations, Business and Professional Licensing*

4
5 ***BOARD OF VETERINARY EXAMINERS***

6
7 *MINUTES OF THE MEETING*

8 *March 9, 2021*

9
10 ***By authority of AS 08.01.070(2), and in compliance with the provisions of AS 44.61, Article 6,***
11 ***a scheduled meeting of the Board of Veterinary Examiners (BOVE) was held by***
12 ***teleconference.***

13
14
15 ***Agenda Item 1a*** ***Call to Order/ Roll Call*** ***Time 9:00 a.m.***

16
17 *The meeting was called to order by Board Chair, Dr. Rachel Bergartt, at 9:00 a.m.*

18
19 *Board Members present, constituting a quorum:*

20 Rachel Bergartt, DVM, JD- Juneau

21 Hal Geiger, PhD- public member- Juneau

22 Chris Michetti, DVM- Anchorage

23 Scott Flamme, DVM- Fairbanks

24 Denise Albert, DVM- Denali Park

25
26 *Division Staff present:*

27 Ilsa Lund, Occupational Licensing Examiner (Hereafter denoted OLE)

28 Greg Francois, Chief Investigator

29 Erika Prieksat, Senior Investigator (Hereafter denoted SI)

30 Autumn Miller, Investigator

31 Sara Chambers, Division Director

32 Melissa Dumas, Administrative Officer II (Hereafter denoted AO)

33 Lisa Sherrell- Prescription Drug Monitoring Program (PDMP) Manger

34 Laura Carrillo- Executive Administrator for the Alaska Board of Pharmacy

35 Sher Zinn- Regulations Specialist (hereafter denoted RS)

36
37 *Members of the Public Present:*

38 Dr. McKayla Dick

39 Dr. Sarah Coburn

40 Dr. Rosemarie Lombardi

41 Dr. Jon Basler

42 Dr. Bob Gerlach

43 Dr. Stanley Rubin

44 Patricia Anderson- Executive Administrator to the Alaska Veterinary Medical Association
45 (AKVMA)

46
 47 In accordance with AS 44.62.310(e) and AS 44.62.175, this meeting of the Alaska Board of
 48 Veterinary Examiners was public noticed in the Alaska Online Public Notice System on
 49 February 19th and in the Anchorage Daily News on February 21st. Notification was also posted
 50 on the board webpage and sent to interested parties via the board ListServ.

51
 52 Dr. Bergartt began the meeting by reading the mission statement of the Board of Veterinary
 53 Examiners:

54 **To protect the health, safety, and welfare of Alaskans by ensuring that**
 55 **veterinarian practitioners possess and maintain a level of skill and knowledge**
 56 **necessary to provide safe, competent professional veterinary services to consumers**
 57 **and to protect the public from veterinary practitioners who pose a risk to the**
 58 **public’s health, safety, and welfare.**

59
 60 *Agenda Item 1b* *Review Meeting Agenda* *Time 9:05 a.m.*

61 **On a motion duly made by Dr. Geiger, seconded by Dr. Albert, and with unanimous**
 62 **approval it was:**

63 **RESOLVED to APPROVE the agenda for this meeting as written.**

Board Member	Yes	No	Absent
Rachel Bergartt	x		
Hal Geiger	x		
Chris Michetti	x		
Scott Flamme			x
Denise Albert	x		

64
 65
 66 *Agenda Item 1c* *Review Past Meeting Minutes* *Time 9:07 a.m.*

67 **On a motion duly made by Dr. Geiger, seconded by Dr. Michetti, and with unanimous**
 68 **approval it was:**

69 **RESOLVED to APPROVE the October 27, 2020, November 16, 2020, and January**
 70 **12, 2021 meeting minutes as drafted.**

Board Member	Yes	No	Absent
Rachel Bergartt	x		
Hal Geiger	x		
Chris Michetti	x		
Scott Flamme			x
Denise Albert	x		

71
 72 *Dr. Flamme joined the meeting at 9:09 a.m.*

73 *Agenda Item 1d* *Ethics* *Time 9:09 a.m.*

74 There were no ethics concerns or requests for determination to report.

75

76 *Agenda Item 2*

Investigations

Time 9:10 a.m.

77 The report presented to the board covered the period from January 5 through February 24, 2021.
78 During that time, there were 56 cases open and two closed since the last report. However, since
79 the report was submitted for presentation on February 24, an additional 12 cases –all related to
80 the PDMP involving “failure to query” where no violation was found –have been closed. Thus,
81 currently there are 43 cases open, 36 of which are PDMP related.

82 To follow up with a discussion about board Investigative Expenditures from last meeting, Dr.
83 Bergartt asked SI Prieksat if she is the only investigator working on veterinary PDMP
84 violations. SI Prieksat responded by giving a rundown of her history with the board. She was
85 assigned the BOVE in April 2020 in addition to having other boards in her caseload. In July of
86 2020, over 50 PDMP cases were referred for investigation, so the BOVE became her only board.
87 In November 2020, she was promoted and her position was reclassified to Senior Investigator.
88 She now oversees a team of four, but is still the only investigator for BOVE matters. Chief
89 Francois later informed the board that the Investigations Division is actively trying to hire new
90 investigators and it is likely that the BOVE will be assigned to a new, lower ranking investigator.

91 Dr. Bergartt asked if SI Prieksat could estimate the amount of time she spent working on the
92 PDMP cases that were ultimately closed with no violation. SI Prieksat said she could not
93 because billing is not tracked per case. The investigators are aware that time equals money, so in
94 an effort to be conscious of that, only 4 subpoenas were issued for all BOVE PDMP cases, which
95 were lumped together by type of violation. However, closing each case is a time-consuming
96 process.

97 Chief Francois talked the board through the Investigative Procedure to illustrate how time-
98 consuming the process can be. There is myriad background information that must be gathered
99 first in order to give the reviewing board member an accurate, factual representation of the case.
100 Cases can go up to the Alaska Supreme Court in accordance with the appeal rights of the
101 licensee; therefore, investigators must ensure that a case cannot be overturned because it was
102 being rushed or there was not enough information.

103 Dr. Bergartt wanted to ensure the Investigations staff that the BOVE is in no way implying that
104 the investigators are not doing a good job. Board members are just trying to figure out if the
105 increase in Investigative Expenditures is a direct result of burdens placed on the board by the
106 PDMP. The goal is to figure out what the PDMP is costing the board. Chief Francois asked that
107 the board refer any specific financial questions to AO Dumas.

108 **On a motion duly made by Dr. Geiger in accordance with AS 44.62.310(c)(2), and seconded**
109 **by Dr. Albert, the board unanimously moved to enter executive session for the purpose of**
110 **discussing subjects that tend to prejudice the reputation and character of any person,**
111 **provided the person may request a public discussion, it was:**

112 **RESOLVED** to enter into executive session in accordance with AS 44.62.310(c)(2).
113 Staff was requested to remain in the room.

114 *Off record 9:38 a.m.*

115 *On record 9:51 a.m.*

116 **On a motion duly made by Dr. Geiger and seconded by Dr. Michetti, it was:**

117 **RESOLVED to ACCEPT the consent agreement for case #2017-0001281.**

Board Member	Yes	No	Abstain
Rachel Berngartt			x
Hal Geiger	x		
Chris Michetti	x		
Scott Flamme	x		
Denise Albert	x		

118

119 *Recess- 9:54- 10:12 a.m.*

120 All members were present after the recess.

121

122

123 *Agenda Item 3*

Division Update

Time 10:15 a.m.

124 *Fiscal Report*

125 Director Chambers began by presenting the board’s fiscal information¹.

	FY20	FY21- 1 st Quarter	FY21- 2 nd Quarter
Total Revenue	\$59,262	\$6,925	\$204,360
Non- Investigation Expenditures	\$90,710	\$14,768	\$23,884
Investigation Expenditures	\$48,627	\$20,873	\$20,674
Cumulative Surplus (Deficit)	(\$71,595)	(\$117,483)	\$25,146

126

127 Director Chambers clarified that none of these expenses reflect PDMP Investigative costs.
128 Those charges are covered by grant funding for the time being. Several members of the board
129 pointed out that this is contradictory to a statement Chief Francois made earlier when he
130 explained that, essentially, only the initial part of the data gathering for a PDMP related case
131 (drafting, signing, and issuing a subpoena to the PDMP staff) is charged to the PMDP, but once
132 interviews start being conducted and onward, all of those expenses are charged to the BOVE.
133 Director Chambers said that she would check with Chief Francois for clarification and then
134 report back to the board. The following is the response from Direct Chambers on behalf of the
135 division regarding this matter.

¹ Full fiscal reports for all CBPL boards and programs can be found here:
<https://www.commerce.alaska.gov/web/cbpl/DivisionReports.aspx>

136 Dear members of the Board of Veterinary Examiners:

137 Prior to the board's meeting last week, the chair asked for an agenda-item discussion
138 regarding the cause of the recent increase in investigative expenses. I was unable to
139 answer conclusively during the meeting because of an internal misunderstanding of the
140 question: Were the costs of PDMP violations increasing? Or, was the cost of all PDMP-
141 *related* compliance increasing?

142 Initially, our team understood your question to be the former. The cost of investigating
143 violations of the PDMP under AS 17.30.200 are charged to a PDMP Task Code in our
144 accounting system. These expenses have been offset by grant funding, which has allowed
145 us to keep the PDMP fee low. So, my initial response that there were no PDMP charges
146 was correct, but it did not answer the board's actual question.

147 After our further discussion with the board during the meeting, it became clear that the
148 desire was to learn whether the increase was due to any investigative activity *related* to
149 the PDMP. Because investigations of violations of AS 08.98 or 12 AAC 68 are charged
150 to the veterinary program, investigations of whether a licensee had registered with the
151 PDMP are reflected in the program's increased investigative expenses.

152

153 In accordance with State Law, professional licensing boards must be self-funded through
154 licensing fees. Because the board was not able to collect enough revenue during renewals to
155 cover operating costs until the next renewal, it is likely that the board will eventually receive a
156 fee increase after a fee analysis is conducted in the fall. The board had been slated to receive a
157 \$25 fee increase for this renewal, but the governor put a moratorium on all professional license
158 fee increases under Senate Bill 241. Whenever necessary and possible, the division tries to make
159 any increases gradually. The division is asking for supplemental funding to cover any lost
160 revenue from cancelled fee increases, but that is ultimately up to the legislature.

161 *Board Appointments*

162 The legislature sued the administration over unconfirmed appointments to Boards and
163 Commissions. The judge sided in favor of the legislature. Any board action taken between
164 December 15, 2020 and January 18, 2021 is potentially in jeopardy. Since 4 out of 5 of the
165 BOVE members were not confirmed, the board may be faced with a situation where they have to
166 cure any action taken during that time. OLE Lund has been tasked with researching what actions
167 –license actions, license discipline, resolution, or regulations –the board took during that time.
168 The administration intends to appeal the ruling and will keep the board informed if any further
169 action is required on their part.

170 Dr. Bergartt expressed concerns that a number of licenses were approved by the board during
171 the time in question –many of them Courtesy Licenses for the Iditarod. She went on to ask if the
172 legislature was concerned with the added expense to boards whose staff is having to spend extra

173 time in going back and researching board actions that need to be redone². Director Chambers
174 said that there should not be a significant financial impact to the board for staff to review the
175 records. If needed, the board can reconfirm every action taken during the time in question as a
176 slate. Director Chambers went on to say that the legislature, likely, did not consider financial
177 impacts to boards. Professional licensing boards are not really the focus of why the legislature is
178 spending Alaska’s money on this lawsuit and the effects to these boards are mostly collateral
179 damage. But, potential financial reimbursement is something she will bring up with the case
180 attorney.

181 Legislative Session

182 Director Chambers provided the board with a list of bills that may be of interest to them, but did
183 not go into great detail explaining the bills.

184 During the last legislative session, the division introduced an omnibus bill to clean up some of
185 the professional licensing statutes. The main area of interest to the BOVE in that original bill was
186 the ability for the board to name an acceptable program to assess foreign veterinary graduate
187 equivalency. As of now, the BOVE statutes name an antiquated program that is hardly used
188 anymore, making it almost impossible for foreign veterinary graduates to obtain licensure in
189 Alaska. The division does not plan to reintroduce that bill, so the Director encouraged the board
190 to pursue that legislative change on their own. Currently, the BOVE has HB91 in process.
191 Director Chambers suggested that, if that bill gains some traction, additional elements that are of
192 interest to the BOVE could be added to that bill.

193 House Bill 91- “An Act exempting veterinarians from the requirements of the controlled
194 substance prescription database.”

195 This bill was introduced on February 18, 2021 by Rep. Wool. Dr. Bergartt had a meeting
196 scheduled with Rep. Wool the week before this meeting, but it had to be rescheduled to March
197 16th due to COVID concerns in the Capitol. Rep. Wool’s staffer, Ashley Carrick, is the one
198 carrying the bill. Rep. Wool introduced the bill after hearing from several constituents over the
199 last several years about this issue.

200 Dr. Flamme has also been in conversations with Sen. Bishop to try and garner support on the
201 senate side. As Co-Chair of the Senate Finance Committee, Sen. Bishop is interested in the
202 financial burden of the PDMP.

203 Dr. Bergartt reached out to Harriet Dinegar-Milks from Department of Law (LAW) and
204 reported back that LAW found no legal conflict with the language in the bill, but a broader
205 policy issue exists.

206 While speaking with Ms. Dinegar-Milks, Dr. Bergartt sought clarification about the PDMP
207 subpoenas, which has been an ongoing concern of the board. Originally, the subpoenas were
208 issued to the BOVE for approval, which the board rejected. After which time, all PDMP
209 subpoenas were issued through the Board of Pharmacy. Ms. Dinegar-Milks clarified that the

² There were 20 licenses approved by the board, no license actions, and no regulations during the time in question. OLE Lund spent ~2 hours compiling the data.

210 BOVE was not stripped of any powers, but were erroneously given powers that they didn't
211 actually have.

212 Dr. Bergartt has been working on a position statement about HB91 on behalf of the board and
213 hopes to have that to OLE Lund soon for review by all board members. That document will be
214 helpful to distribute to licensees, legislators, and member of the public.

215 **On a motion duly made by Dr. Geiger, seconded by Dr. Michetti and with unanimous**
216 **approval, it was:**

217 **RESOLVED to ADOPT the following position statement:**

218 **The Alaska Board of Veterinary Examiners supports House Bill 91 –exempting**
219 **veterinarians from the PDMP –due to the unnecessary expense and the enormous**
220 **disruption to veterinary practitioners and the board.**

221

222 *Agenda Item 4*

PDMP

Time 11:15 a.m.

223 Lisa Sherrell relayed that the contract with Appriss, the vendor of the PDMP database
224 AWAxRE, has officially been renewed and will start on April 1, 2021. This is great because the
225 State has been working with that vendor for a while, but because of the initial contract renewal
226 uncertainty, certain feature roll-outs were put on hold. Now those can move forward without
227 having to start from scratch. One of the features is license integration where AWAxRE will be
228 cross-checked against the State's professional licensing database to automatically deactivate any
229 users that should not have access to the database. For example, if a practitioner has an expired
230 DEA registration or no longer hold an active Alaska license, then their AWAxRE account will be
231 automatically deactivated.

232 Another feature being introduced is a communications module that will allow providers to
233 communicate with other providers through the database about a patient. Ms. Sherrell compared
234 it to leaving a sticky note in a patient's file. Those will only be viewable by a practitioner, and
235 will not viewable by delegates.

236 Ms. Sherrell reported that PDMP use by veterinarians continues to be low in terms of review
237 compliance³. For the 4th quarter of 2020, there were 205 schedule II-IV controlled substance
238 medications dispensed, and only 3 of which where the client was searched beforehand. There is
239 not a full quarter's worth of data for 2021, yet, but the trend has not improved. It is up to the
240 BOVE how they would like to go about addressing compliance issues with licensees.

241 PDMP staff encourages the use of authorized delegates. This can help relieve the time constraint
242 placed on practitioners by the PDMP laws. Any entry that is made by the delegate is tracked
243 under the prescriber.

³ All reports for PDMP affected board can be found here:

<https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/PrescriptionDrugMonitoringProgram/PDMPBoardReports.aspx>

244 Dr. Flamme asked if pharmacists are properly trained to enter veterinary prescriptions into the
245 PDMP database. He expressed concerns that veterinarians may be flagged for noncompliance if
246 the prescription for a controlled substance is filled by a pharmacy and the data is not entered in
247 correctly. He stated that he has reviewed a client record in the PDMP, knowing that he has
248 previously prescribed a controlled substance to the client's animal, and has found no record of
249 the dispensation being entered into the PDMP database. Lisa said she would follow up about
250 that because she is unaware of what pharmacist training involves.

251 *Agenda Item 5* Lunch *Time 12:10 p.m.*

252 *Off record- 12:10 p.m.*

253 *On record- 1:00 p.m.*

254 OLE Lund took a roll call attendance and all members were present.

255 *Agenda Item 6* Public Comment *Time 1:00 p.m.*

256 **Dr. McKayla Dick-** I just wanted to call on behalf of the AKVMA. I listened in on this
257 morning's meeting. A couple updates: Dr. Coburn and I spoke with Representative Wool this
258 morning. So, we kind of went over our flyer. Got everybody on the same page. The AKVMA
259 has, like, a little subgroup for the PDMP and we've been reaching out to the House Labor and
260 Commerce. That's kind of where we've directed our attention lately. We'll keep you guys
261 posted, but I agree with y'all: Now's the time to make noise. So, please reach out, use our flyers,
262 if you have any questions let us know. It can be intimidating talking to some of these people, so
263 if anybody needs a buddy, don't hesitate to ask. You can ask Dr. Coburn, myself, Dr. Delker,
264 and we'd be more than willing to hop on a Zoom meeting with whoever. Just so we can get the
265 information across the first time. If you guys need anything on our end, please let us know.
266 We're also taking letters, and we're putting them in PDF form on, like, a link on our webpage.
267 So, if any clinics want to write a letter, feel free to email those to me, and I can get them to the
268 right place. Thank you, guys, for your hard work.

269 **Dr. Sarah Coburn-** Good afternoon! I don't have much to add. I just thought I would,
270 potentially, in case there was something extra. The only other thing I will add from Dr. Dick is
271 that we are trying to get in touch with some other boards, as well, to see what kind of support –if
272 we could potentially get some letters of support from the Medical Board or Nursing –so, we're
273 starting those contacts. But, if that's anything that any of you are able to assist with as well, or
274 people, potentially, that you could recommend we get in touch with to help show a broad level
275 and range of support, I think will be helpful for the legislators to see in the medical community
276 as well. So, we're working on that and would appreciate, like I said, any other contacts that you
277 could recommend to help with that process. That's all.

278 **Dr. Jon Basler-** Hi there! I'll introduce myself: Dr. Jon Basler. I'm the owner and medical
279 director of College Village Animal Clinic in Anchorage. Pleased to meet you whom I've not
280 met yet. I am one of the ones who's a little long in the tooth –or getting a little longer in the
281 tooth –these years. So, for my inappropriate attempt to make public comments earlier –the
282 observation that perhaps the PDMP board should have heard –was under their use. They said in

283 the fourth quarter of 2020, that there had only been three searches, and I can pretty much
284 guarantee that I did, personally, more than three searches. And, I can pretty much guarantee my
285 clinic did significantly more than three searches. So, I feel like their numbers are not accurate,
286 which probably reflects a lot of the issues that we have with the PDMP. I probably need a little
287 education, so the board members who might know a little bit more can correct me if I'm wrong,
288 but my impression was that the PDMP searches only needed to be done for prescriptions
289 exceeding three days. And, for those drugs which are being directly dispensed, and if the
290 prescriptions are prescribed, the onus on the search then goes to the pharmacy where the
291 prescription is. So, if that is not correct, you have a whole clinic doing it wrong, because that's
292 my understanding.

293 I would also state that the daily reporting is a pretty substantial burden. The way our clinic has
294 chosen to handle it—we have four and a half doctors—I have one technician who is responsible
295 for all controlled drug ordering, logging, etc., and then I have another one who is the delegate
296 who does all of the recording and she is responsible—along with the practice manager—for
297 making sure that the one doing the ordering, stocking, inventorying, is doing it accurately as a
298 check and control. [The delegate] works three to four days a week. She does not report zero
299 days, so if we haven't done a prescription she doesn't currently report. If it's something that is
300 reported on the day, of her when she's out, then it would be the next day back. So, potentially I
301 could have, with rotating schedules, the need for three or four, or more delegates to try to have
302 somebody there every one of the six to seven days. Depending on the week we are open six or
303 seven days. So, those are just some observations from my observation on the PDMP.

304 I would say that I did want to thank the veterinary board, in general, for all their hard work. I
305 know a lot of times you only hear people whine, but again, having been around here a long time,
306 I would say that the responsiveness of the board staff has been substantially higher over the last
307 five to ten years than it was, especially when I first got up here. And so, I do greatly appreciate
308 that and having been in every position on the state AKVMA—including President, alternate
309 delegate, and the delegate to the AVMA—I do appreciate everything that the board members do
310 on spending their voluntary time here. I would pretty much echo, in the packet for the AKVMA,
311 there should be a signed letter from my staff that I will forward on to my own personal
312 representatives, but I would echo almost all of the statements that the AKVMA has made. It has
313 been particularly frustrating because we've been reporting since 2017 and I can pretty much say
314 that, until this past year, was the only time when we did queries that I would actually get a
315 response, and that would include ones that I know that we reported and those occasionally don't
316 show up. I can probably count on one hand the number of queries that have shown up from
317 another prescriber, even if I have a medical record that shows that it's done, such as the
318 emergency clinic. There's probably lots of reasons for that, but the bottom line is that this
319 system is really not set up for our profession. And, if they want to make it functional, they really
320 need to completely redo their software to allow reporting for our species.

321 And, there are still issues with owners, you know—possibly more than one owner, birth dates are
322 never clear, there really is no clear identifying information on the patients that would show
323 through. And, in getting close to 40 years of practice, the number of times when anybody in my
324 clinic has expressed reservation about a request from clients on controlled drugs has been

325 exceedingly low –to the point of nonexistence –so, I do feel that this is an issue that the
326 veterinarians are being included in something that does not work for the veterinarian, does not
327 protect the public. I was astounded by the number of cases that are being generated. This is the
328 first time I was really aware of or seen that. My experience has been that veterinarians are
329 scrupulously honest, and generally scrupulously compliant. The fact that there are so many
330 cases, to me, would say that it’s a broken system.

331 Those are the main comments that I would make at this point, and I will continue to support the
332 efforts to pass House Bill 91. Thank you.

333

334 *Agenda Item 7* Regulations *Time 1:12 p.m.*

335 The regulations that were presented to the board by RS Zinn were originally drafted and
336 accepted by the BOVE during the October and November 2020 meetings held by the board.

337 **On a motion duly made by Dr. Geiger, with an amendment to remove the phrase “and**
338 **engaged in active practice” from 12 AAC 68.215(e) and to cite existing regulation in place**
339 **of the definition in 12 AAC 68.935(d)(2), seconded by Dr. Albert, and with unanimous**
340 **approval it was:**

341 **RESOLVED the ACCEPT 12 AAC 68.010(b), 12 AAC 68.215, 12 AAC 68.315(b), 12 AAC**
342 **68.910(e), 12 AAC 68.930, 12 AAC 68.935, and 12 AAC 68.990 as drafted and amended,**
343 **and to send those out for public comment.**

344 The board would like to hold oral public comment on these regulations after the written public
345 comment closes.

346 (Words in **boldface and underlined** indicate language being added; words [CAPITALIZED
347 AND BRACKETED] indicate language being deleted. Complete new sections are not in
348 boldface or underlined.)

349 **Chapter 68. Board of Veterinary Examiners.**

350

351 12 AAC 68.010(b) is amended to read:

352 (b) An application for licensure by examination and all supporting documents must be
353 received by the department at least **15** [120] days before the **deadline to register for the exam**
354 **as set by the International Council for Veterinary Assessment (ICVA) [NEXT**
355 **SCHEDULED EXAMINATION]**.

356 **Authority:** AS 08.98.050 AS 08.98.165

357 **Editor's note: The International Council for Veterinary Assessment (ICVA)**
358 **described in 12 AAC 68.010(b) is administered by ICVA, P.O. Box 1356, Bismarck, ND**
359 **58502; Telephone: (701) 224-0332; website at <https://www.icva.net/navle/>.**

360

361 12 AAC 68 is amended by adding a new section to read:

362 **12 AAC 68.215. Veterinarian-client-patient relationship.** (a) A person may not
363 practice veterinary medicine unless a veterinarian-client-patient relationship exists. “Patient” and
364 “client” are defined in 12 AAC 68.990. A veterinarian-client-patient relationship exists if the
365 licensed veterinarian or an associate of the licensed veterinarian:

366 (1) has assumed responsibility for making clinical judgements for the health of the
367 patient and the need for medical therapy, has instructed the client on a course of therapy
368 appropriate to the circumstance, and that client has agreed to follow the veterinarian’s
369 recommendations;

370 (2) has sufficient knowledge of the patient to initiate at least a general or
371 preliminary diagnosis of the medical conditions; sufficient knowledge means the veterinarian has
372 seen the patient for a physical examination within the last 12 months, or is personally acquainted
373 with the keeping and care of the patient through medically appropriate visits to the premises
374 where the patient is maintained within the last 12 months;

375 (3) provides oversight of treatment and is readily available to provide, or has
376 provided for, follow-up medical care in the event of adverse reactions or failure of the treatment
377 regimen;

378 (4) maintains patient records.

379 (b) A veterinarian-client-patient relationship cannot be established solely by telephone or
380 other electronic means; however, an established veterinarian-client-patient relationship as
381 defined in (a) of this section may be maintained by electronic or telephonic means during a 12-
382 month period.

383 (c) Both the licensed veterinarian and the client have the right to establish or decline a
384 veterinarian-client-patient relationship.

385 (d) A licensed veterinarian who in good faith engages in the practice of veterinary
386 medicine by rendering or attempting to render emergency or urgent care to a patient when a
387 client cannot be identified, and a veterinarian-client-patient relationship is not established, shall
388 not be subject to penalty based solely on the veterinarian’s inability to establish a veterinarian-
389 client- patient relationship.

390 (e) In remote regions of this state that are without access to the road system, where there
391 is no locally available veterinarian, it may be logistically impossible for the patient or
392 veterinarian to immediately travel for in-person consultation. In these cases, an emergency exists
393 and the patient is at risk of going untreated. In this situation, an evaluation of the patient or
394 premises may be initially conducted through electronic or telephonic means, as long as the
395 veterinarian requests that the patient be presented for an in-person examination or that the
396 veterinarian conducts a medically appropriate visit to the premise when reasonably achievable.
397 The veterinarian acting in this manner must be licensed in this state at the time the electronic or
398 telephonic evaluation is conducted. The veterinarian must provide the client with the
399 veterinarian’s identity, location, licensure status, and any privacy or security issues involved in
400 accessing veterinary services through electronic means.

401 **Authority:** AS 08.98.050

402

403 12 AAC 68.315(b) is amended to read:

404 (b) An application for examination or reexamination must be received by the department
405 at least **15** [45] days before the **deadline to register for** [DATE OF] the next examination **as set**
406 **by the American Association of Veterinary State Boards**. Applicants who fail the
407 examination may retake the examination within one year from the date of their application. After
408 the expiration of one year from the date of application, applicants who wish to retake the
409 examination must reapply for it.

410 **Authority:** AS 08.98.050 AS 08.98.080 AS 08.98.167

411 **Editor's note: The American Association of Veterinary State Boards (AAVSB)**
412 **described in 12 AAC 68.315 is administered by AAVSB, 380 W. 22nd Street, Suite 101,**
413 **Kansas City, MO 64108; Telephone: (816) 931-1504; website at <https://aavsb.org/vtne->**
414 **overview/the-online-application.**

415

416 12 AAC 68.910(e) is amended to read:

417 (e) Unless released to the patient's owner, patient medical records must be retained by the
418 veterinary medical facility or licensed veterinarian for a minimum of five years. Records may be
419 disposed of by tearing, shredding, [OR] burning, **or other method for electronic disposal** so
420 that the records are totally destroyed.

421 **Authority:** AS 08.98.050

422

423 12 AAC 68.930 is amended to read:

424 **12 AAC 68.930. Registration with the prescription drug monitoring program**
425 **controlled substance prescription database. (a)** A licensed veterinarian who has a federal
426 Drug Enforcement Administration registration number must register with the prescription drug
427 monitoring program (PDMP) controlled substance prescription database under AS 17.30.200,
428 **not later than 30 days after initial licensure or registration with the Drug Enforcement**
429 **Administration (DEA), whichever is later.**

430 **(b) A veterinarian may delegate PDMP responsibilities to another veterinarian or**
431 **veterinary technician within their practice, who holds a current license under AS 08.68 and**
432 **this chapter.**

433 **(c) The veterinarian's delegate must be registered with the PDMP using a separate**
434 **login, and shall register using the name of the delegating veterinarian. The veterinarian**
435 **may not give their login to a delegate.**

436 **Authority:** AS 08.98.050 AS 17.30.200

437

438 12 AAC 68 is amended by adding a new section to read:

439 **12 AAC 68. 935. Compliance with the prescription drug monitoring program**
440 **controlled substance prescription database.** (a) Unless excused under AS 17.30.200(t) and (c)
441 of this section, a veterinarian or the veterinarian's delegate must review the information in the
442 PDMP database to check a client's prescription records before dispensing, prescribing, or
443 administering a schedule II or III controlled substance to the client.

444 (b) Unless excused under AS 17.30.200(t) and (c) of this section, a veterinarian who
445 dispenses a schedule II, III, or IV controlled substance must submit the information as required
446 by AS 17.30.200(b), to the prescription drug monitoring program (PDMP) daily, including days
447 when no controlled substances are dispensed. When reporting a dispensed controlled substance
448 under this subsection, the veterinarian shall use the name of the client.

449 (c) A veterinarian is not required to review the client's information in the PDMP database
450 before prescribing, administering, or dispensing a controlled substance if

451 (1) the patient is receiving treatment

452 (A) in an inpatient setting;

453 (B) at the scene of an emergency;

454 (C) in an emergency veterinary hospital;

455 (D) immediately before, during, or within the first 48 hours after surgery
456 or a medical procedure; or

457 (2) the prescription is non-refillable and is written for a quantity intended to last
458 for not more than three days.

459 (d) In this section

460 (1) "reporting" means inputting prescription data for the client's animal patient;

461 (2) "client" is defined in 12 AAC 68.990(1);

462 (3) "emergency veterinary hospital" means a veterinary hospital or emergency
463 service with the primary function of receiving, treating, and monitoring of emergency patients
464 during its specified hours of operation. A veterinarian must be in attendance at all hours of
465 operation and sufficient staff must be available to provide timely and appropriate care. A
466 veterinary emergency service may be an independent, after-hours service; an independent 24-
467 hour service; or part of a full-service hospital.

468 **Authority:** AS 08.98.050 AS 17.30.200

469

470 12 AAC 68.990 is amended by adding a new paragraph to read:

471 (6) "veterinary facility" or "veterinary medical facility" means any premises or
472 facility where the practice of veterinary medicine is performed, including but not limited to a
473 mobile clinic, temporary clinic, outpatient clinic, veterinary hospital or clinic, emergency
474 facility, specialty facility, referral facility, or veterinary center, but shall not include the premises
475 of a veterinary client, research facility, or a federal military base

476 **Authority:** AS 08.98.050

477

478 *Agenda Item 8* **Board Business** *Time 1:52 p.m.*

479 *AAVSB Board Basics & Beyond*

480 **On a motion duly made by Dr. Michetti, seconded by Dr. Flamme, and with unanimous**
481 **approval, it was:**

482 **RESOLVED to send Dr. Albert to the AAVSB's 2021 Virtual Board Basics and Beyond**
483 **Training from April 22-23, 2021.**

484 *Common Farming Practices on Goats*

485 An individual was referred to the board (through OLE Lund) by the State Veterinarian, Dr.
486 Gerlach. The individual has raised and farmed goats for many years and has specialized skills
487 related to goat husbandry and care including elastration, disbudding, and hoof trimming. The
488 individual advertises services and accepts donations for services rendered throughout their
489 community. Dr. Gerlach was concerned that, in accordance with the statute definition of the
490 practice of veterinary medicine (AS 08.98.250(6)), that the services this individual provides to
491 their community may be encroaching on unlicensed practice of veterinary medicine.

492 Dr. Flamme described that, when he was a child, his family raised goats and they performed all
493 their own elastration, etc. When he moved to Fairbanks, he saw terrible examples of these
494 procedures performed by licensed veterinarians, and that there are lay persons in Alaska who
495 perform these procedures better. The main issue is that this individual advertises and accepts
496 compensation for providing these services. That is against the law. Neighbors helping
497 neighbors is one thing, but in his opinion, if a person cannot properly care for their own animals
498 and do not have access to a veterinarian to care for their animals, then they should not own the
499 animals.

500 Dr. Michetti, who has family that are farmers, concurred that if the person is being neighborly
501 and altruistically helping, that would be fine. But this individual cannot collect compensation or
502 advertise. Growing up in Missouri, if one family knew how to perform a procedure, they would
503 teach the other family.

504 **On a motion duly made by Dr. Geiger, seconded by Dr. Michetti, and with unanimous**
505 **approval, it was:**

506 **RESOLVED to send a letter of advisement to the individual requesting guidance on**
507 **common farm practiced related to raising goats.**

508 The letter will include that elastration, disbudding, and hoof trimming are a matter of animal
509 husbandry and not considered the practice of veterinary medicine, but anything that involved
510 diagnosing hoof deformities is, and a licensed veterinarian would need to be consulted. The
511 individual shall not advertise or collect compensation; however, the individual may provide free
512 advice or education to goat owners.

513 Rabies Vaccinations Given at Animal Shelters

514 The veterinarian at the Mat-Su Animal Care and Regulation shelter, Dr. Mika Straub, has
515 requested guidance from the board regarding authorizing shelter staff to provide rabies
516 vaccinations while she will be away for an extended period of time on military deployment.

517 In accordance with the “Compendium of Animal Rabies Prevention,”⁴ a veterinarian may
518 deputize a lay vaccinator as long as the vaccinator is appropriately trained and the rabies
519 certificate is cosigned by a licensed veterinarian and the individual that administered the
520 vaccination. Dr. Bergartt tabled the discussion and stated that she would like to have a meeting
521 with Dr. Louisa Castrodale, Epidemiologist with the Alaska Division of Public Health, about this
522 matter before sending a response letter to Dr. Straub.

523 CE Request- Grand Rounds

524 This request got excellent feedback when presented to the board as a ballot in OnBoard, the
525 electronic voting platform that is utilized by the division; however, the ballot was tabled until
526 this meeting because a board member expressed concerns about issuing a blanket approval with
527 no end date.

528 Dr. Flamme disclosed that he is acquainted with Dr. Rubin, the requestor and instructor for this
529 course, through Western College of Veterinary Medicine. Dr. Flamme spoke very highly of Dr.
530 Rubin. Dr. Bergartt determined that no conflict of interest exists so long as Dr. Rubin did not
531 pay Dr. Flamme to approve the CE course or sway the board’s decision in any way, but went on
532 to say that Dr. Flamme’s professional knowledge of Dr. Rubin was particularly relevant to the
533 topic at hand.

534 **On a motion duly made by Dr. Geiger, with an amendment to approve only through this**
535 **current license biennium ending on December 31, 2022, seconded by Dr. Flamme and with**
536 **unanimous approval, it was:**

537 **RESOLVED to APPROVE one hour per session to the Grand Rounds Continuing**
538 **Education course taught by Dr. Stanley Rubin through December 31, 2022.**

539 Jurisprudence Exam- Update

540 OLE Lund has recently received several complaints from applicants that the Alaska State
541 Veterinary Jurisprudence Exam is outdated. It has not been updated since 2013. In looking
542 further into the matter, OLE Lund discovered that the exam does contain several true/ false
543 questions that could be answered either way depending on reports of rabies cases in Alaska, or
544 what the term “recently” may mean to any given individual. There have also been quite a few
545 regulation changes or updates since then.

546 Drs. Flamme, Albert and Michetti volunteered to take a look at the jurisprudence exam. Dr.
547 Bergartt recommended that the 50-question exam be split three ways between the volunteering
548 board members. Any suggested updates will be reviewed during the next meeting.

⁴ <http://nasphv.org/Documents/NASPHVRabiesCompendium.pdf>

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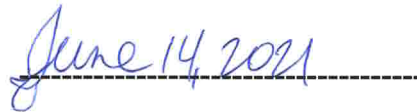
The board unanimously agreed to hold their next meeting on Wednesday, June 2, 2021. During that time, they will hold public comment on regulations.

Chair Bergartt called for adjournment at 3:21 p.m.

Respectfully Submitted,




Ilsa Lund, Licensing Examiner



Date



Hal Geiger



Acting Board Chair, Board of Veterinary Examiners Date