

Notices of Intent

NOTICE OF INTENT

Department of Agriculture and Forestry Board of Veterinary Medicine

Veterinary Practice
(LAC 46:LXXXV.700, 701, 702, 704, 705, 707, and 712)

In accordance with the Administrative Procedure Act, R.S. 49:950 et seq., the Board (“Board”) of Veterinary Medicine has amended LAC 46:LXXXV. Sections 700, 701, 702, 704, 705, 707, and 712. Of greater substance is the proposed amendment of Section 700 to the Veterinarian-Client-Patient-Relationship definition relative to in-person, physical examinations and the definition of an unlicensed veterinarian as well as the proposed amendment to Section 705 providing greater discretion to licensed veterinarians with respect to the allowable drugs prescribed and dispensed to deer farmers. All other proposed amendments are cleaning up rule language.

Title 46 PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part LXXXV. Veterinarians

Chapter 7. Veterinary Practice

§700. Definition

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Animal Control Officer—a bona fide employee of a governmental agency meeting the requirements of R.S. 37:1514(1).

* * *

Layperson—a person who is not registered and/or licensed in any of the categories defined in this Rule.

* * *

Unlicensed Veterinarians—individuals who have completed an approved, accredited program of instruction and have received a degree as a Doctor of Veterinary Medicine, or if foreign educated have completed the Educational Commission for Foreign Veterinary Graduates (ECFVG) or the Program for the Assessment of Veterinary Education Equivalence (PAVE) program through the American Association of Veterinary State Boards (AAVSB), but who have not yet successfully passed the national exam (NAVLE) or have not been issued a license by the board to practice veterinary medicine in the state of Louisiana. Individuals who have a Louisiana license in an expired status are also unlicensed veterinarians.

Veterinarian-Client-Patient-Relationship—exists when:

1. - 3. ...

a. the veterinarian or associate veterinarian has recently seen and is personally acquainted with the keeping and care of the animal(s) by virtue of an in-person, physical examination of the animal(s) and/or by medically appropriate and timely visits to the premises where the animal(s) are kept; or

b. - c. ...

* * *

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 19:1328 (October 1993), amended LR 20:666 (June 1994), LR 20:1381 (December 1994), LR 24:940 and 941 (May 1998), LR 24:1932 (October 1998), LR 24:2257 (December 1998), LR 27:51 (January 2001), LR 27:543 (April 2001), LR 31:3162 (December 2005), LR 33:2424 (November 2007), LR 35:244 (February 2009), LR 40:308 (February 2014), LR 49:640 (April 2023), amended by the Department of Agriculture and Forestry, Board of Veterinary Medicine, LR 50:

§701. Record Keeping

A. - A.1.a.i.v. ...

vi. The documentation standards set forth above do not mandate a particular format, however, a record must include these elements, as well as any other document required by law or the board's rules. Examples include General Anesthesia Consent Forms, Euthanasia Consent Forms, documents involving prescribing, administering, or dispensing legend drugs or controlled substances, and billing invoices or statements of services or products provided. The veterinarian shall be ultimately responsible for the content and maintenance of the record.

A.1.b. - D.9. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Veterinary Medicine, LR 6:71 (February 1980), amended by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:225 (March 1990), LR 19:1328 (October 1993), LR 20:1381 (December 1994), LR 23:969 (August 1997), LR 24:941 (May 1998), LR 25:872 (May 1999), LR 33:2424 (November 2007), amended by the Department of Agriculture and Forestry, Board of Veterinary Medicine, LR 50:

§702. Direct Supervision

A. - B. ...

C. A *Registered Veterinary Technician* (RVT) as defined in §700 shall perform all tasks or procedures under direct supervision of a licensed veterinarian, except:

1. an RVT may perform the duties listed in §702.E.1 without the direct supervision of a licensed veterinarian, but the RVT is required to follow the record keeping requirements found in §702.E.3; and

2. an RVT may administer medications and/or treatments to non-boarding animals (hospitalized or ill) without direct supervision by a licensed veterinarian under the following conditions:

C.2.a. - D. ...

E. A *layperson* shall perform all tasks or procedures under direct supervision of a licensed veterinarian under the following conditions and with the exception described in §702.E.1.

1. A *layperson* may administer medications to boarding animals without direct supervision by a licensed veterinarian if the medication is directed to be used orally or topically and if the licensed veterinarian has recorded the exact treatments to be given in the animal's medical record.

2. When a *layperson* administers medications to non-boarding animals under the direct supervision of a licensed veterinarian, the licensed veterinarian must personally check the animal and update the treatment plan in the medical record at least once every 24 hours.

3. When a *layperson* administers medications, with or without direct supervision, the *layperson* shall keep a written record of all treatments which are performed, and that written record shall be incorporated into the animal's medical record.

4. The licensed veterinarian has the ultimate responsibility for the proper diagnosis and treatment of the animal, including the work delegated to a *layperson*.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:225 (March 1990), amended LR 19:1329 (October 1993), LR 24:940 (May 1998), LR 40:309 (February 2014), LR 49:640 (April 2023), amended by the Department of Agriculture and Forestry, Board of Veterinary Medicine, LR 50:

§704. Consulting and Providing Legend and Certain Controlled Substances

A. Legend Drugs

1. When an animal control agency which is operated by a state or local governmental agency or which is operated by any duly incorporated humane society which has a contract with a local governmental agency to perform animal control services on behalf of the local governmental agency seeks to administer legend drugs to an animal for the sole purpose of animal capture and/or animal restraint, the animal control agency must have a staff or consulting veterinarian who is licensed to practice veterinary medicine by the board and who obtains the legend drugs.

A.2. - F ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 20:666 (June 1994); amended LR 24:334 (February 1998), LR 25:519 (March 1999), LR 26:317 (February 2000), amended by the Department of Agriculture and Forestry, Board of Veterinary Medicine, LR 50:

§705. Prescribing and Dispensing Drugs

A. - C. ...

D. Records shall be maintained in accordance with §701.

E. - N.6. ...

O. A veterinarian licensed by the board may lawfully prescribe and/or dispense legend and controlled drugs, and a mix of these drugs, to a deer farmer licensed by, and in good standing with, the Department of Agriculture and Forestry only under the following terms and conditions.

1. - 5. ...

6. The licensed deer farmer who obtains the drugs from the veterinarian shall be the only person allowed to use or administer the drugs on his deer and for capture purposes and subsequent reversal of the effects of those drugs only.

7. - 10. ...

11. The prescribing and/or dispensing veterinarian shall comply with all state and federal laws and/or regulations regarding the prescribing and/or dispensing of any legend or controlled drug, or a mix thereof, to a deer farmer licensed by, and in good standing with, the Department of Agriculture and Forestry.

12. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Veterinary Medicine, LR 6:71 (February 1980), amended by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:225 (March 1990), LR 19:1329 (October 1993) LR 20:1381 (December 1994), LR 23:1686 (December 1997), LR 24:1932 (October 1998), LR 25:1249 (July 1999), LR 25:1627 (September 1999), LR 27:51 (January 2001), LR 30:797 (April 2004), LR 37:1571 (June 2011), amended by the Department of Agriculture and Forestry, Board of Veterinary Medicine, LR 50:

§707. Accepted Livestock and Equine Management Practices

A. - A.2. ...

3. the carrying out of schools and short courses, teaching A.I. techniques for livestock and equine, prospective A.I. technicians, and university agricultural students by qualified university faculty, cooperative extension service specialists, and qualified employees of NAAB-CSS approved A.I. organizations;

4. - 10. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Veterinary Medicine, LR 9:213 (April 1983), amended by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 23:969 (August 1997), LR 24:1933 (October 1998), amended by the Department of Agriculture and Forestry, Board of Veterinary Medicine, LR 50:

§712. Alternative Therapy and Collaborative Treatment

A. ...

B. Direct supervision as used in this Section means the supervising veterinarian must be on the premises where the alternative therapy and/or collaborative treatment are being performed and is directly responsible for the on-going evaluation and/or diagnosis. A *layperson* (a person not licensed, registered, or certified by the board) cannot perform surgery, on-going evaluation and/or diagnosis, prognosis, or prescribe treatment, medicines, or appliances as set forth in §702.A.2.

C. - F. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 23:970 (August 1997), amended LR 38:357 (February 2012), amended by the Department of Agriculture and Forestry, Board of Veterinary Medicine, LR 50:

Family Impact Statement

The proposed Rule should not have any known or foreseeable impact on family formation, stability, and autonomy. In particular, the proposed Rule has no known or foreseeable impact on:

1. the stability of the family;
2. the authority and rights of persons regarding the education and supervision of their children;
3. the functioning of the family;
4. family earnings and family budget;
5. the behavior and personal responsibility of children;
6. the ability of the family or a local government to perform the function as contained in the proposed Rule.

Poverty Impact Statement

The proposed Rule should not have any known or foreseeable impact on any child, individual or family as defined by R.S. 49:973(B). In particular, there should be no known or foreseeable effect on:

- 1. the effect on household income, assets, and financial security;
- 2. the effect on early childhood development and preschool through postsecondary education development;
- 3. the effect on employment and workforce development;
- 4. the effect on taxes and tax credits;
- 5. the effect on child and dependent care, housing, health care, nutrition, transportation, and utilities assistance.

Small Business Analysis

The proposed Rule should have no adverse impact on small businesses as defined in the Regulatory Flexibility Act.

Provider Impact Statement

The proposed Rule should not have any known or foreseeable impact on providers as defined by HCR 170 of the 2014 Regular Legislative Session. In particular, there should be no known or foreseeable effect on:

- 1. the effect on the staffing level requirements or qualifications required to provide the same level of service;
- 2. the total direct and indirect effect on the cost to the providers to provide the same level of service; or
- 3. the overall effect on the ability of the provider to provide the same level of service.

Public Comments

Interested parties may submit written comments to the Louisiana Board of Veterinary Medicine, Attention: Jared B. Granier, Executive Director, via U.S Mail at 5825 Florida Blvd, Baton Rouge, LA 70806 or via e-mail attachment to director@lsbvm.org or via hand delivery. Comments will be accepted until 3 p.m. on Monday, September 9, 2024. All written comments must be dated and must include the first and last name, email address, mailing address, phone number, and the original signature of the person submitting the comments.

Public Hearing

Interested parties may submit a written request to conduct a public hearing to the Louisiana Board of Veterinary Medicine, Attention: Jared B. Granier, Executive Director, via U.S Mail at 5825 Florida Blvd, Baton Rouge, LA 70806 or via e-mail attachment to director@lsbvm.org or via hand delivery; however, such request must be received by no later than 3 p.m. on Monday, September 9, 2024. If the criteria set forth in R.S. 49:953(A)(2)(a) are satisfied, a public hearing will be conducted at 1 p.m. on Wednesday, September 25, 2024 at 5825 Florida Blvd, Baton Rouge, LA 70806. To confirm whether or not a public hearing will be held, interested parties should visit www.lsbvm.org/rulemaking-projects after Monday, September 9, 2024. If a public hearing is to be held, all interested parties are invited to attend and present data, views, comments, or arguments, orally or in writing. In the event of a hearing, parking is available to the public in front of the Department of Agriculture and Forestry Building at 5825 Florida Blvd, Baton Rouge, LA 70806.

Jared B. Granier
Executive Director

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES
RULE TITLE: Veterinary Practice**

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

There will be no costs or savings to state or local governmental units resulting from the proposed rule change, except for the cost associated with publishing, which is included in the annual operating budget of the Board of Veterinary Medicine (Board). The proposed rule change defines an unlicensed veterinarian, requires an in-person physical examination to establish the Veterinarian-Client-Patient-Relationship, and gives discretion to the licensed veterinarian with respect to the allowable drugs prescribed and dispensed to Louisiana deer farmers.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed rule change will not affect revenue collections for state or local governmental units.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed rule change will help better protect the public and animals of Louisiana from the unlicensed practice of veterinary medicine and by requiring an in-person, physical exam for the establishment of the Veterinarian-Client-Patient-Relationship.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT(Summary)

The proposed rule change is anticipated to have no effect on competition or employment.

Jared B. Granier
Executive Director
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Deputy Fiscal Officer
Legislative Fiscal Office

