State of Wisconsin

Governor Tony Evers



Veterinary Examining Board

Dr. Hunter Lang, DVM, Chair

VETERINARY EXAMINING BOARD April 22, 2025 9:00am Contact: Melissa Mace 608-279-3861

In Person: Boardroom CR 106, 2811 Agriculture Drive, Madison, WI 53708 Via Internet Access: <u>https://www.zoomgov.com/j/1615264017?pwd=Oko65Bm4W2HqvTXjab97KfsLAqgGmu.1</u>

Via Telephone Access: Dial 1-669-254-5252, Meeting ID: 161 526 4017 and participant code: 159835

If you would like to speak during the public comment time please send your name, address, who you are representing (if other than yourself), and the topic of your comments to Melissa Mace at Melissa.Mace@wisconsin.gov or (608) 279-3861 by 4:30 p.m. Monday, April 21, 2025

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.

AGENDA

I. 9:00 A.M. OPEN SESSION – CALL TO ORDER – ROLL CALL

II. Approval of the Agenda (action item)

III. Approval of Board Meeting Minutes (action items)

- A. January 28, 2025 Full Board Meeting
- B. March 11, 2025 Ad Hoc Full board Meeting

IV. Introductions, Announcements and Recognition (informational)

- A. Moment of silence for Dr. Hunter Lang
- B. Recognition of outgoing board members: Dr. Leslie Estelle & Amanda Reese

V. Public Comments

Each speaker is limited to five minutes or less, depending on the number of speakers. Each speaker must fill out and submit an appearance card to the Board clerk.

VI. Administrative Items

- A. Election of Officers (Current office holders) (action item)
 - 1. Chair (Vacant)
 - 2. Vice Chair (Dr. Alan Holter)
 - 3. Secretary (Amanda Reese)

- B. Appointments of Liaisons, Alternates, and Delegates (Current appointees) (action item)
 - 1. Continuing Education and Exams Liaison (Primary: Vacant/ Alternate: Schuh)
 - 2. Screening Panel (Dr. Holter, Schuh, Dr. Miesen, Dr. Solverson, Public member vacancy July 1 [Reese], Veterinary vacancy July 1[Estelle])
 - 3. Credentialing Committee (Vacant, Dr. Solverson, Schuh)
 - 4. Administrative Rules Committee (Veterinary vacancy July 1[Estelle], Public member vacancy July 1 [Reese], Vacant)
- C. VPAP Quarterly Report
- D. Discipline: Administrative Warning vs. Final Decision & Order

VII. Guidance & Reference Documents (action item)

- A. Anesthesia Monitoring
- B. Animal Massage
- C. Regional Anesthesia
- D. UW SVM Medical Services Delegation

VIII. Licensing/Exam Inquiries

A. Credential Holder Summary

IX. American Association of Veterinary State Boards (AAVSB) Matters

- A. Recap AAVSB Spring Executive Directors Meeting Kansas City MO
- B. AAVSB Annual Meeting & Conference, Cincinnati, OH September 17-18 preconference sessions September 19-20 Annual Meeting and conference.
- C. AAVSB call for nominations
- D. AI Whitepaper

X. Administrative Code

A. VE 1 Final Draft (action item)

XI. Legislative and Policy

- A. Legislative update
- B. Biennial Budget

XII. Strategic Goals

A. 2024-25 strategic accomplishments

XIII. Future Meeting Dates and Times

A. Next Board Meeting – July 22, 2025

XIV. CONVENE TO CLOSED SESSION (ROLL CALL)

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual

histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.).

XV. Deliberation on Licenses and Certificates (action items)

XVI. Deliberation on Compliance Matters (action items)

- A. Proposed Administrative Warnings
 - 1. 24 TECH 011 KM
 - 2. 24 TECH 019 JH
 - 3. 24 TECH 026 NP
 - 4. 24 VET 092 CS
 - 5. 24 VET 137 HF

B. Proposed Stipulations, Final Decisions and Orders

- 1. 24 VET 011 AC
- 2. 24 VET 049 LR
- 3. 24 VET 055 EN, 24 VET 106 EN, 24 VET 136 EN and 24 VET 152 EN
- 4. 24 VET 066 CR
- 5. 24 VET 118 AJ
- 6. 24 VET 132 KS
- 7. 24 VET 156 TM
- 8. 24 VET 094 PG
- 9. 24 VET 151 MH
- 10. 25 VET 144 TH
- 11. 24 VET 165 RS
- 12. 24 VET 119 JJ
- C. Orders Granting Full Licensure
 - 1. 21 VET 128, 22 VET 011, 22 VET 059 and 23 VET 008 CR
- D. Investigations Recommended for Closure
 - 1. 24 VET 125 SR
 - 2. 24 VET 134 AL
- E. Suspension Orders

XVII. Review of Veterinary Examining Board Cases

- A. Licenses Returned to Full Status
- B. Pending Case Status Report

XVIII. RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

XIX. Open Session Items Noticed Above not Completed in the Initial Open Session

XX. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

XXI. Ratification of Licenses and Certificates

To delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued.

XXII. ADJOURNMENT

The Board may break for lunch sometime during the meeting and reconvene shortly thereafter.

State of Wisconsin

Governor Tony Evers



Veterinary Examining Board

Dr. Hunter Lang, DVM, Chair

VETERINARY EXAMINING BOARD January 22, 2025 9:00am Contact: Melissa Mace 608-279-3861

MEMBERS PRESENT: In person: Hunter Lang, DVM; Alan Holter, DVM; Stephanie Miesen, DVM. Virtual: Lyn Schuh, CVT; Karl Solverson, DVM; Leslie Estelle, DVM.

STAFF PRESENT, Department of Agriculture, Trade and Consumer Protection (DATCP): Melissa Mace, VEB Executive Director; Aaron O'Neil, DATCP Attorney; Erin Carter, Regulatory Specialist; Dustin Boyd, Compliance Supervisor; Heidi Ulteig, Regulatory Specialist; Liz Kennebeck, Regulatory Specialist; Angela Fisher, Program and Policy Analyst; Jonathan Bent, Licensing Associate.

Hunter Lang, Chair, called the meeting to order at 9:07am. A quorum of six (6) members was confirmed.

I. 9:00 A.M. OPEN SESSION – CALL TO ORDER – ROLL CALL

II. Approval of the Agenda

MOTION Stephanie Miesen: moved, seconded by Alan Holter, to approve the agenda. Motion carried unanimously

III. Approval of Board Meeting Minutes

A. October 16, 2024 Full Board Meeting

MOTION Leslie Estelle: moved, seconded by Stephanie Miesen, to approve the October 16, 2024 board meeting minutes. Motion carried unanimously

IV. Introductions, Announcements and Recognition

V. Public Comments

Each speaker is limited to five minutes or less, depending on the number of speakers. Each speaker must fill out and submit an appearance card to the Board clerk.

VI. Administrative Items Chair requests The Exec Director to run nominations and election of officers

A. Election of Officers (Current office holders)

- 1. Chair (Dr. Lang)
 - Melissa Mace called for nominations three times.

NOMINATION: Hunter Lang has been nominated for the Office of Chair. **VOTE:**

Hunter Lang was elected as Chair by unanimous vote

2. Vice Chair (Dr. Alan Holter) Melissa Mace called for nominations three times.

NOMINATION: Alan Holter has been nominated for the Office of Vice Chair. **VOTE:**

Alan Holter was elected as Vice-Chair by unanimous vote

3. Secretary (Amanda Reese) Melissa Mace called for nominations three times.

NOMINATION: Amanda Reese has been nominated for the Office of Secretary. **VOTE:**

Amanda Reese was elected as Secretary by unanimous vote

B. Appointments of Liaisons, Alternates, and Delegates

1. Continuing Education and Exams Liaison (Primary: Dr. Lang/ Alternate: Schuh)

MOTION: Alan Holter moved, seconded by Stephanie Miesen: , to affirm the Chair's appointment of liaisons. Motion carried unanimously

- 2. Screening Panel (Dr. Holter, Schuh, , Dr. Solverson, , Dr. Miesen)
 - a. Add newly appointed member replacing Dr. Estelle, and public member when received.

MOTION: Stephanie Miesen: moved, seconded by Alan Holter, to affirm the Chair's appointment of the Screening Committee. Motion carried unanimously.

- 3. Credentialing Committee (Dr. Lang, Dr. Solverson, Schuh)
- **MOTION:** Stephanie Miesen: moved, seconded by Leslie Estelle, to affirm the Chair's appointment of the Credentialing Committee. Motion carried unanimously.
 - Administrative Rules Committee (, Reese, Dr. Lang)

 <u>a.</u> Add newly appointed member in July
 <u>a.</u>b.

MOTION: Alan Holter moved, seconded by Stephanie Miesen: , to affirm the Chair's appointment of the Administrative Rules Committee. Motion carried unanimously.

C. Delegated Authority Motions

1. Urgent Matters

- **MOTION:** Alan Holter moved, seconded by Leslie Estelle, that in order to facilitate the completion of assignments between meetings, the Board delegates authority by order of succession to the Chair, highest ranking officer, or longest serving member of the Board, to appoint liaisons to the Department to act in urgent matters and to fill vacant appointment positions, where knowledge or experience in the profession is required to carry out the duties of the Board in accordance with the law. Motion carried unanimously.
 - 2. Screening Committee
- MOTION Stephanie Miesen: moved, seconded by Alan Holter, that the Board delegates to the Screening Committee the authority to consult with Department staff concerning complaints against persons who may be engaged in the practice of veterinary medicine or veterinary technology without holding a credential. As part of this delegation, the committee may consider questions regarding the scope of practice of veterinary medicine and veterinary technology. The Screening Committee may also determine that a particular practice is or is not the practice of veterinary medicine or veterinary technology or refer the matter to the full Board for its consideration.
 - 3. Credentialing Committee

MOTION: Alan Holter moved, seconded by Stephanie Miesen:, that the Board delegates authority to the Credentialing Committee to address all issues related to credentialing matters, except potential denial decisions should be referred to the full Board for final determination. Motion carried unanimously.

MOTION: Leslie Estelle moved, seconded by Alan Holter, that the Board delegates authority to the Credentialing Committee to employ a "passive review" process for issues related to credentialing matters, whereby if no Committee member requests a Committee meeting on the materials within five (5) business days after receiving them, the application would be considered cleared to proceed through the process, except for credentialing matters involving applicants that are:

- Currently under investigation or has been disciplined by the licensing authority in the other state, territory or country,
- A party in pending litigation in which it is alleged that the applicant is liable for damages for acts committed in the course of practice or,
- Where the applicant has been found liable for damages for acts committed in the course of practice which evidenced a lack of ability or fitness to practice.

Motion carried unanimously.

4. Document Signatures

MOTION: Stephanie Miesen moved, seconded by Alan Holter, that the Board delegates authority to the Chair to sign documents on behalf of the Board. In order to carry out duties of the Board, the Chair has the ability to

delegate this signature authority to the Board's Executive Director for purposes of facilitating the completion of assignments during or between meetings. Motion carried unanimously.

5. Roles and Authorities Delegated to the Case Advisor and Department Monitor

MOTION: Alan Holter moved, seconded by Leslie Estelle, to adopt the "Roles and Authorities Delegated to the Monitoring Liaison and Department Monitor" document. Motion carried unanimously.

- D. VPAP Quarterly Report (informational) Melissa Mace delivered the quarterly report to the board.
- E. Anesthesia Monitoring (discussion) Multiple complaints have been received by the VEB regarding unlicensed veterinary assistants adjusting anesthesia as directed by a licensed veterinarian, leading the Board to question what qualifies as monitoring anesthesia and when direct monitoring of anesthesia required. After discussion lead to further questions, the matter was referred to the Administrative Rules Committee for creation of a guidance document. Drs. Lang, Holter, Solverson, and Estelle have expressed interest in involvement.
- F. Animal Massage (discussion) Board members shared their individual experience with animal massage, with Dr. Miesen noting that she has not dealt with practitioners trying to diagnose or behave in a manner that crosses into unlicensed veterinary practice. The Board agreed that a guidance document is needed on the subject; Melissa Mace and Angela Fisher will prepare a draft for the Board.
- G. AVMA ECFVG Committee (informational) Dr. Lang reported that the American Veterinary Medical Association (AVMA) is looking for an additional member with current or past board experience for their Educational Commission for Foreign Veterinary Graduates Committee.

VII. American Association of Veterinary State Boards (AAVSB) Matters (informational)

- A. AAVSB call for nominations Interested Board members should contact Melissa Mace for a letter of recommendation
- B. Board Basics & Beyond Training, Kansas City MO March 28-29 Interested Board members should contact Melissa Mace as soon as possible.
- C. AAVSB Annual Meeting & Conference, Cincinnati, OH September 17-18 preconference sessions September 19-20 Annual Meeting and conference.
- D. Medical Recordkeeping Model Regulations The Board discussed whether the AAVSB's model practice act could be used in the creation of the proposed guidance document on anesthesia monitoring.

VIII. Guidance Document (action item)

A. Regional Anesthesia

MOTION: Stephanie Miesen moved, seconded by Alan Holter, to approve guidance document VEB-GD-008 regarding regional anesthesia. Motion carried unanimously.

B. Cannabis revision request – The Board received a request to review their guidance document for possible updates. Melissa Mace noted that any VEB guidance would need to remain in accordance with state and federal guidelines.

IX. Licensing/Exam Inquiries (informational)

A. Unique CE requirements – The Board received CE certificates from a credential holder that took the same course within a year, with the second listed as a "refresher course". The Board considers this to be unethical.

X. Administrative Code

A. VE 1 (action item) – Angela Fisher reported that the rule change is proceeding as expected. **MOTION:** Alan Holter moved, seconded by Hunter Lang, to approve the VE1 hearing draft rule, DATCP Docket number 23-R-03, to go to hearing and receive public comments as set forth in the public hearing notice. Motion carried unanimously.

XI. Legislative and Policy

- A. Legislative update (informational) Angela Fisher reported that the legislative session began on January 6, with no relevant bills yet introduced.
- B. Biennial Budget (informational) Angela Fisher reported that the governor's budget is expected on February 18th. We will not know if the VEB positions requested are included before then.

XII. Strategic Goals

- A. 2024 Goals Melissa Mace reviewed the 2024 goals and progress/completion of them.
 - 1. Making the licensing process more efficient: the state exam has been updated and split into separate tests for veterinarians and veterinary technicians.
 - 2. Licensure forms: forms have been updated with accurate rule citations. A more comprehensive update will follow when the VE 1 rule change is in effect.
 - 3. Increased transparency for disciplinary actions: Dustin Boyd reported meeting with a software developer that worked with the Department of Safety and Professional Services on their website in hopes of developing a more accessible listing of VEB disciplinary actions and the related public documents. The current website lists discipline, but public documents must be individually requested.
 - 4. Increasing communication between the Board and veterinary credential holders: the Board had expressed interest in meeting with students in veterinary technician programs, similar to their meeting at the University of Wisconsin's School of Veterinary Medicine last year; no schools showed interest in this meeting, either virtual or in-person.
 - 5. Annual Newsletter: the 2024-25 newsletter remains on the agenda. The VEB did submit an article to the Wisconsin Veterinary Medical Association regarding upholding the standard of care in veterinary clinics owned by non-credential holders; state requirements must be maintained regardless of practice policies.

Dustin Boyd also presented a summary of veterinary complaints received in 2024: 209 total complaints received (highest recorded), 56 investigations opened (highest recorded), and an average investigation time of 194 days (trending downward).

XIII. Future Meeting Dates and Times

A. Next Board Meeting - April 22, 2025

XIV. CONVENE TO CLOSED SESSION (ROLL CALL VOTE)

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.).

MOTION: Alan Holter moved, seconded by Hunter Lang to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.). Roll Call Vote: Leslie Estelle – yes; Alan Holter – yes; Karl Solverson – yes; Hunter Lang – yes; Lyn Schuh – yes; Stephanie Miesen – yes

XV. Deliberation on Licenses and Certificates

XVI. Deliberation on Compliance Matters

- A. Proposed Administrative Warnings
 - 1. 24 VET 052 AK
 - 2. 24 TECH 024 JC
 - 3. 24 VET 112 EE
- B. Proposed Stipulations, Final Decisions and Orders
 - 1. 23 VET 058 and 23 VET 113 RM
 - 2. 24 VET 093 CJ
 - 3. 24 VET 053 MS
 - 4. 24 VET 085 BM
 - 5. 24 VET 065 KH
 - 6. 24 VET 072 BS
 - 7. 24 VET 098 TO
 - 8. 24 VET 130 TA
 - 9. 24 VET 113 KA
- C. Orders Granting Full Licensures
 - 1. 23 VET 124 JSR
 - 2. 24 VET 017 and 24 VET 042 JSR

D. Suspension Orders

XVII. Review of Veterinary Examining Board Cases

- A. Licenses Returned to Full Status
- B. Pending Case Status Report

XVIII. RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

XIX. Open Session Items Noticed Above not Completed in the Initial Open Session

XX. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

- 1. **MOTION:** Alan Holter moved, seconded by Lyn Schuh, to accept administrative warnings in the cases of: 24 VET 052 AK; 24 TECH 024 JC; 24 VET 112 EE
- MOTION: Stephanie Miesen moved, seconded by Hunter Lang to accept stipulations and final decision orders in the cases of: 23 VET 058 and 23 VET 113 RM; 24 VET 093 CJ; 24 VET 053 MS; 24 VET 085 BM; 24 VET 065 KH; 24 VET 072 BS; 24 VET 098 TO; 24 VET 130 TA; 24 VET 113 KA
- 3. **MOTION:** Alan Holter moved, seconded by Stephanie Miesen, to accept orders granting full licensure in the cases of: 23 VET 124 JSR; 24 VET 017 and 24 VET 042 JSR

XXI. Ratification of Licenses and Certificates

To delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued.

MOTION: Stephanie Miesen moved, seconded by Leslie Estelle, to delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

XXII. ADJOURNMENT

MOTION: Stephanie Miesen moved, seconded by Alan Holter to adjourn. Motion carried unanimously.

The meeting adjourned at 11:10 am.

State of Wisconsin

Governor Tony Evers



Veterinary Examining Board

Dr. Hunter Lang, DVM, Chair

VETERINARY EXAMINING BOARD March 11, 2025 12:00pm Contact: Melissa Mace 608-279-3861

Online only, no in person option

Via Internet Access: https://www.zoomgov.com/j/1604609012?pwd=TrAcioOuSv7JsrMhDqmC6amEsUmCXy.1

Via Telephone Access: Dial 1-669-254-5252, Meeting ID: 160 460 9012 and participant code: 090857

MEMBERS PRESENT: Dr. Alan Holter, Dr. Leslie Estelle, Dr. Karl Solverson, Dr. Stephanie Miesen, Lyn Schuh, Amanda Reese

STAFF PRESENT, Department of Agriculture, Trade and Consumer Protection (DATCP): Melissa Mace, VEB Executive Director; Aaron O'Neil, DATCP Attorney; Erin Carter, Regulatory Specialist; Dustin Boyd, Compliance Supervisor; Karen Torvell, Program Assistant Supervisor.

(reminder: turn on voice recorder)

Dr. Alan Holter, called the meeting to order at 12:01. A quorum of six (6) members was confirmed.

AGENDA

A. 12:00 P.M. OPEN SESSION – CALL TO ORDER – ROLL CALL

II. Approval of the Agenda (action item)

MOTION Leslie Estelle: moved, seconded by Stephanie Miesen, to approve the agenda. Motion carried unanimously

III. Public Comments

Each speaker is limited to five minutes or less. The Board may further limit the time for each speaker depending on the number of speakers. Each speaker must state their name, address, who they are representing (if other than themselves), and the topic of their comments

Public comments were given by: Rebekah Robertson, Kim Dennis, Atty Eric McLeod

IV. Future Meeting Dates and Times

A. Next Board Meeting – April 22, 2025

V. CONVENE TO CLOSED SESSION (ROLL CALL)

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual

histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.).

MOTION: Amanda Reese moved, seconded by Karl Solverson to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.). Roll Call Vote: Amanda Reese – yes; Alan Holter – yes; Karl Solverson – yes; Leslie Estelle – yes; Lyn Schuh – yes; Stephanie Meisner – yes;

A. Suspension Orders 1. 24 VET 158 RV

B. Other Orders1. 24 VET 158 RV

VI. Review of Veterinary Examining Board Cases

VII. RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

MOTION: Amanda Reese moved, seconded by Leslie Estelle, to reconvene to open session. Motion carried unanimously.

VIII. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

MOTION: Stephanie Miesen moved, seconded by Amanda Reese, to deny the petition for summary suspension in the case of 24 VET 158 RV. Motion carried unanimously

MOTION: Stephanie Miesen moved, seconded by Amanda Reese, to accept the stipulation in the case of 24 VET 158 RV. Motion carried unanimously.

IX. Ratification of Licenses and Certificates

To delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued.

MOTION: Karl Solverson moved, seconded by Leslie Estelle To delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued.

X. ADJOURNMENT

MOTION: Karl Solverson moved, seconded by Leslie Estelle to adjourn. Motion carried unanimously.

Meeting adjourned at: 12:50pm

Veterinary Examining Board Agenda Request Form

Meeting Date	April 22, 2025			
Requestor Name	M. Mace			
Item Title for the AgendaElections and of Liaisons, Alternates, and Delegates				
Should this be in Open or Open				
Closed Session?				
Is this an Action Item or for	Action			
Information Only?				
Are there Attachments?	Yes,			
(If yes, include file names)				
Is a Public Appearance	No			
Anticipated?				

Description of the Agenda Item

Election for Chair

New Chair reappoint committee's recognizing;

- Dr. Estelle's term expires July 1, 2025
- Amanda Reese has notified that she will be resigning effective July 1, 2025.

Currently vacant:

- Large Animal Veterinarian member
- Public member

State of Wisconsin



Veterinary Examining Board

2811 Agriculture Drive • PO Box 8911 • Madison, WI 53708-8911 • Wisconsin.gov

2025 Elections and Appointments (effective July 1, 2025)

2024 Election Results						
Office	Description of Role	Member Name				
Board Chair	Highest ranking officer. Manages meetings. Delegated authority to sign documents on behalf of the Board. In order to carry out duties of the Board, the Chair has the ability to delegate this signature authority to the Board's Executive Director for purposes of facilitating the completion of assignments during or between meetings.	Vacant				
Vice Chair	Serves as backup for the Board Chair.	Dr. Alan Holter				
Secretary	Serves as secondary backup for the Board Chair.	Amanda Reese – Resigning July 1				

	2024 Liaison Appointments							
Liaison	Description of Role		Member Name					
	Consultation on CE questions (type of CE, acceptable as CE, etc.) Review	Primary:	Vacant					
Continuing Education and Exams Liaison	and consult on questions regarding	Alternate:	Lyn Schuh					

2023 Committee Appointments						
Committee	Description of Role	Member Name				
	Delegated authority to open cases for	Dr. Alan Holter				
Screening Committee	investigation or closes cases inappropriate for further action.	Dr. Miesen				
	Delegated authority to consider questions related to scope of practice of	Lyn Schuh				
	veterinary medicine and veterinary technicians. The Committee may choose	Dr. Estelle – Resigning July 1				

	to approve or reject a particular practice, or bring the matter to the full Board.	Dr. Karl Solverson
	Chair manages Committee meetings.	Vacant 6 th position needed?
	Delegated authority to address all issues related to credentialing matters, except	Vacant
	potential denial decisions should be	Lyn Schuh
Credentialing Committee	referred to the full Board for final determination. Delegated authority to employ a "passive review" process for background checks, whereby if no Committee member requests a meeting on the materials within five business days after receiving them, the application would be considered cleared to proceed through the process. Chair manages Committee meetings.	Dr. Karl Solverson
	Meet in between quarterly meetings to discuss administrative rules and	Vacant
Administrative	guidance documents. The Committee's role is to expedite the process of drafting	Dr. Leslie Estelle – Resigning July 1
Rules	documents. Final drafts will go to the	
Committee	full Board for approval. Chair manages committee meetings and is the primary contact for simpler administrative rule questions.	Amanda Reese- Resigning July 1

Veterinary Examining Board Agenda Request Form

April 22.20)25				
-					
M. Mace					
VPAP upd	ate				
Open					
-					
Information	n				
No					
Description of the Agenda Item					
		Request			
	Date	Status	Attendees		
e	15-Jan	complete	23		
	M. Mace VPAP upd Open Information	VPAP update Open Information No Date	M. Mace VPAP update Open Information No Request Status	M. Mace VPAP update Open Information No No Request Date Request Attendees	

Connict resolution in the workplace	T2-Jall	complete	25
Substance abuse/Addiction (Specialized)	23-Apr	Scheduled	
Making time work for you	14-May	In process	
Welcoming Change into your life	13-Aug	In process	
Suicide awareness and prevention (Specialized)	TBD		
Understanding different personalities for			
better collaboration	8-Oct	Inprocess	
Creating Balance	12-Nov	Inprocess	
Gratitude/Seasonal Stress/Other YE type of			
webinar	TBD		

New Orientation video: <u>youtube.com/watch?v=T-Q42s5onmc&feature=youtu.be</u>

Overall 2% utilization rate (not counting webinar attendance



TELUS Health EAP

Overall Su	mmary	Trends	Demographic	Appendix	Glossary
Summary	Participant	: Organiz	ation		

Summary (January 2025 to March 2025)

Utilization Overview

We are pleased to present you with the key indicators relating to usage of your program for eligible participants by:

Veterinary Professional Assistance Program

The period covered is from: January 2025 to March 2025

During this reporting period, the program covered a population of **6,773**, resulting in a utilization rate of **0.16%** and an annualized utilization of **0.65%**. This is above the same period twelve months prior with **0.04%**.

Utilization 0.16%	Annualized Utilization 0.65%					
View Utilization E	Breakdown					
Counselling Service	ces		Work/Life Set	rvice	es	
Organizational Case	es					
Management Con	sultations	Critical Incide	nt Services		Workplace Support Programs	
0		0			0	



Overall Su	mmary	Trends	Demographic	Appendix	Glossary
Summary	Participar	nt Organi	zation		

TELUS Health EAP

Comparative Prior Year vs. Current Year







TELUS Health EAP

Overall Sun	nmary	Trends	Demographic	Appendix	Glossary
Summary	Participan	t Organiz	ation		

Participant (January 2025 to March 2025)

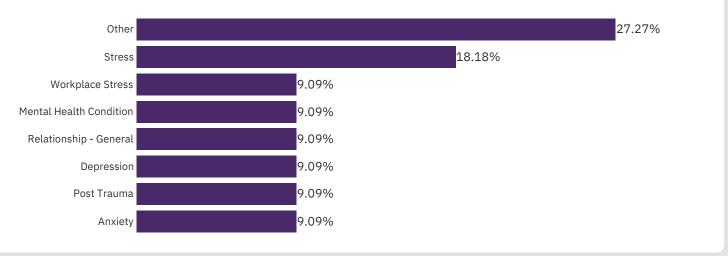
Total number of unique participants

C	
C)

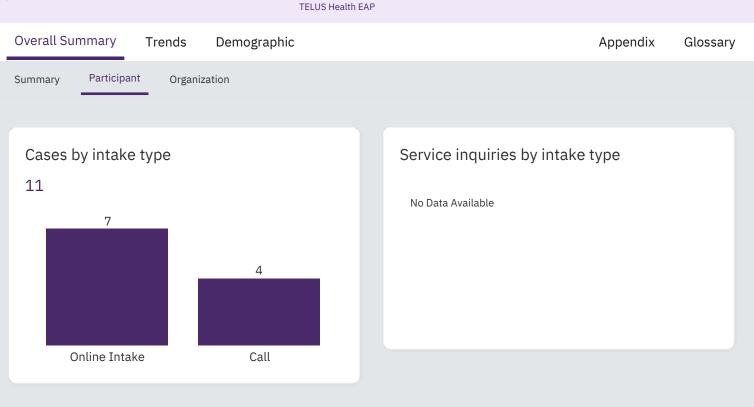
New Re-access 5 3

Participant Services	Q1	Q2	Q3	Q4	Current Total
General Counselling	11	0	0	0	11
Counselling	11	0	0	0	11
Total	11	0	0	0	11

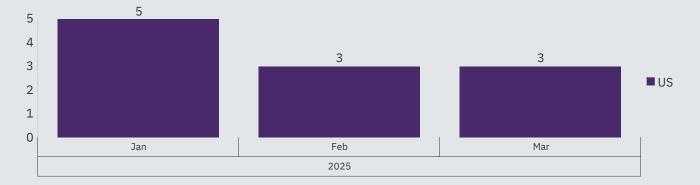
Issues







Participant cases by month





Overall Sun	nmary	Trends	Demographic	Appendix	Glossary
Summary	Participant	d Organiz	ation		

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Organization (January 2025 to March 2025)

Organizational Solutions	Q1	Q2	Q3	Q4	Current Total
Training	1	0	0	0	1
Total	1	0	0	0	1

View Organizational Services Breakdown

Organization cases by month



*Country assignment unavailable or service provided virtually across multiple countries.

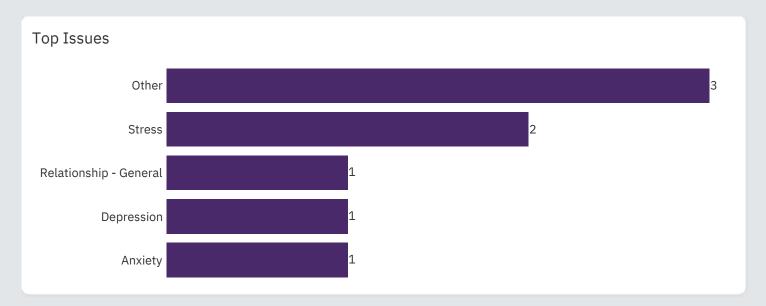


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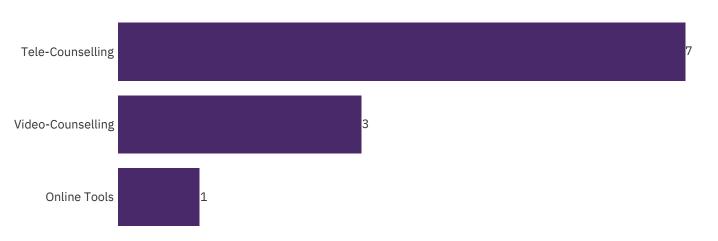
Overall Summary	Trends	Demographic	Appendix	Glossary
Emerging Issues	Utilization			

Emerging Issues (January 2025 to March 2025)

General Counselling



Top Modalities



Couple/Relationship	Q1	Q2	Q3	Q4	Cui	rrent Total	Pre	evious Year
Relationship - General	1	0	0	0	1	9.09%	0	0.00%
Total	1	0	0	0	1	9.09%	0	0.00%



Trends Demographic Appendix Glossary **Overall Summary** Emerging Issues Utilization Personal/Emotional Q1 **Current Total Previous Year** Q2 Q3 Q4 Other 3 0 0 0 3 27.27% 0 0.00% 2 0 0 2 1 0 18.18% 33.33% Stress

TELUS Health EAP

Total	1	0	0	0	1	9.09%	0	0.00%
Norkplace Stress	1	0	0	0	1	9.09%	0	0.00%
Work Related	Q1	Q2	Q3	Q4	Cu	rrent Total	Pr	evious Year
Total	9	0	0	0	9	81.82%	3	100.00%
Post Trauma	1	0	0	0	1	9.09%	0	0.00%
Mental Health Condition	1	0	0	0	1	9.09%	0	0.00%
Depression	1	0	0	0	1	9.09%	1	33.33%
Anxiety	1	0	0	0	1	9.09%	1	33.33%

	Q1	Q2	Q3	Q4	Cu	rrent Total	Pr	evious Year
General Counselling	11	0	0	0	11	100.00%	3	100.00%



Overall Summary	Trends	Demographic	Appendix	Glossary
Emerging Issues	Utilization			

Utilization (January 2025 to March 2025)

Weighted population for the report period was: 6,773

Back to Summary

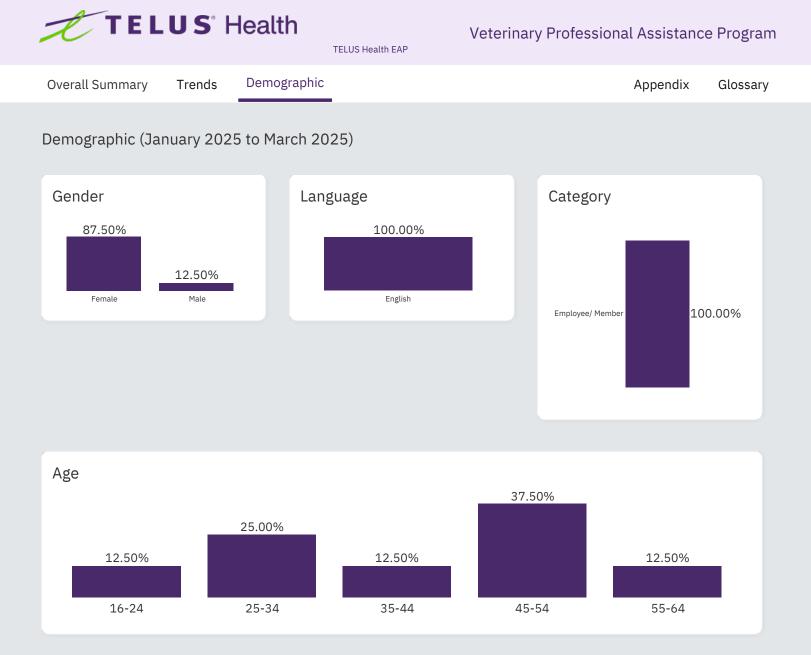
Case Utilization	Q1	Q2	Q3	Q4	Current Quarter Utilization	Current Total	Utilization	Annualized Utilization
Population	6,773	0	0	0		6,773		
General Counselling	11	0	0	0	0.16%	11	0.16%	0.65%
Total	11	0	0	0		11		

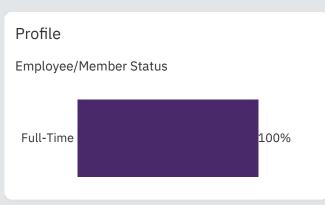
For any services that are counted at a ratio other than 1:1, the utilization above has been calculated based on the ratio. Population reflects the weighted average population of each quarter.

Utilization by Region

Region	Population	Q1	Q2	Q3	Q4	Current Total	Utilization
North America	6,773	11	0	0	0	11	0.16%
Overall	6,773	11	0	0	0	11	

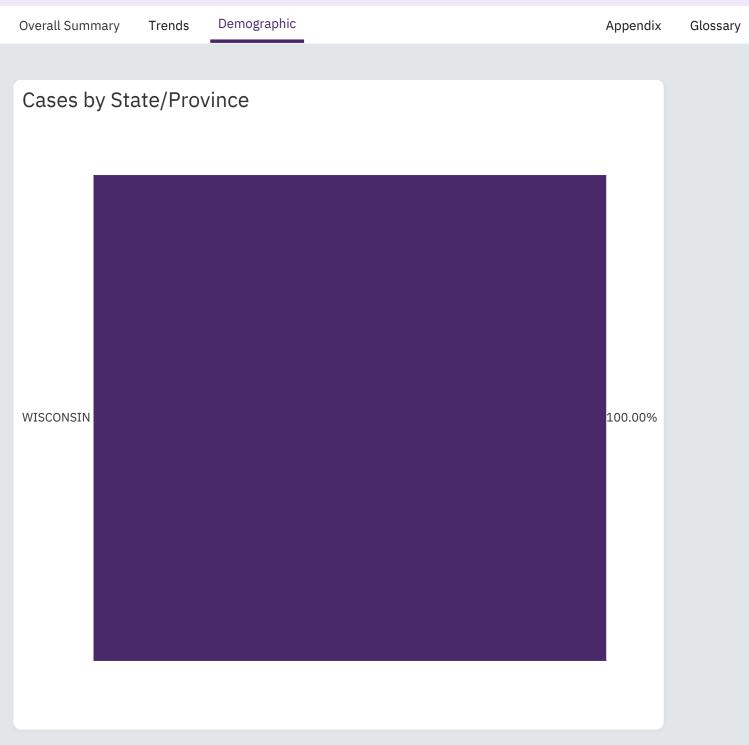
North America	Population	Current Total	Current Utilization	Previous Year Utilization
UNITED STATES OF AMERICA	6,773	11	0.16%	0.04%
Overall	6,773	11		







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Province/State Legend

Province/State	Cases
WISCONSIN	11



Overall Summary	Trends Demo	graphic	Appendix	Glossary
Report Information	Organization in Detail	Organizational Units Breakdown		

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Report Information (January 2025 to March 2025)

Organization: Veterinary Professional Assistance Program/184050563

Report Run Date Apr 6, 2025



Overall Summary	Trends	Demographic				Appendix	Glossary
Report Information	Organization in	Detail Organizatio	onal Units Breakdown				
Organization in E)etail (Janu	ary 2025 to Mar	rch 2025)			Back to Organiz	ation
Management Co No Data Available							
Critical Inciden No Data Available							
Critical incident	events						
No Data Available	9						
Training name			Training type	Date	City	Cour	ntry

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-			-	-
Content Development & Customization	Custom	Mar 25, 2025	MADISON	US
Custom Seminar	Custom	Apr 30, 2025	MADISON	US

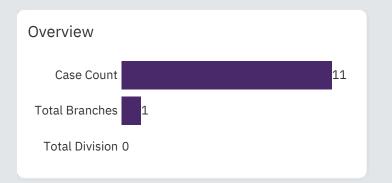


Overall Summary	Trends Demo	graphic	A	Appendix	Glossary
Report Information	Organization in Detail	Organizational Units Breakdown			

TELUS Health EAP

Organizational Units Breakdown (January 2025 to March 2025)

Any divisions/ branches/ offices that have population below the reporting threshold will not be displayed



Company Veterinary Professional Assistance

Program

•

Branch	Division			Population	Cases	Utilization
Veterinary Professional Assistance Program	~	~	~	6,773	11	0.16%
Total				6,773	11	0.16%



Overall Summary	Trends	Demographic	Appendix	Glossary

Glossary (January 2025 to March 2025)

Some features defined below may not be applicable to your program.

Overall Summary	
Summary	
Participants & Participant Cases	Participants are eligible individuals who have accessed services within the reporting period. Participant cases includes: Counselling, Work/Life (i.e. legal, financial), Community Services. Except where explicity stated as closed cases, the counts are based on cases opened during the reporting period.
Organization & Organization Cases	The number of organizational cases (including Critical incidents, trainings, workplace support programs, management consults) and other organization authorized services. Except where explicity stated as closed cases, the counts are based on cases opened during the reporting period.
Population	Total lives that are covered within the reporting period. Population is averaged over time.
Utilization (%)	This is a measure to capture program usage by taking the total of cases as a proportion of the overall covered population. This reflects all cases contracted to count towards utilization. Calculated As: SUM =(number of cases/Population)*100
Annualized Utilization (%)	This is the projected annualized utilization if the reporting period selected is less than 12 months. Calculated As: SUM=(%of case utilization/the number of months in the reporting period)*12
EMEA	Europe, Middle East & Africa
NA	North America
APAC	Asia-Pacific
LATAM	Latin America
Country, Region, Global Benchmark	Overall benchmarking utilization percentages. Country benchmark is displayed if report is run for an individual country. Region benchmarks is displayed if report is run for countries only within the same region. Global benchmarks is displayed if report is run for more than one country in different regions. Calculated As: SUM=(total cases/total covered population)*100
Industry Benchmarks (Country, Region & Global)	Industry Benchmarks (Country, Region & Global)

Participant

Total number of unique participants	The number of distinct participants who have accessed services during the reporting period.
New participants	This is the number of unique participants who accessed services in the defined reporting period and have not previously accessed services within the reporting period.
Re-access Participants	This is the number of unique participants who have re-accessed services within the reporting period. In other words, total participants who have accessed the services more than once within the reporting period.
Cases by intake type	The method by which the participant contacted the program to access services.
Service inquiries by intake type	Service inquiries are brief calls that do not result in a case as no service was delivered. Intake type is the method by which a participant initiated a service inquiry.

Organization & Organization Cases

The number of organizational cases (including Critical incidents, trainings, workplace support programs, management consults) and other organization authorized services. Except where explicitly



Overall Summary	Trends	Demographic	Appendix (Glossary
		stated as closed cases, the counts are bas	sed on cases opened during the reporting period.	
Workplace Support Pro	ograms	Workplace Support Programs		
Critical Incident Service	es	In the aftermath of an incident, our exper of your people and your organization.	rts will design an immediate, global response that	takes care
Management Consultat	tions		ople leaders to support with participant issues an is delivered by the program's clinical staff.	d how to
Training			ons can be short seminars, longer workshops offer de mental health, resiliency, retirement/finances,	
Trends				
Emerging Issues		Provides details on the counselling and w presenting issues are self-identified by th	vork/life services opened during the reporting perione participant at the time of intake.	od. The
Benchmarks			een the organizational case distribution and the ex buntry, industry, or region. If the report is run for m will also be available.	
Modalities		The method by which the participant rece	aived their service.	
Demographic				
Gender		This is a breakdown of participant self-ide only collected from covered participants a	entified gender during the intake process. This info and not family member participants.	ormation is
Language		This is a breakdown of participant self-ide	entified preferred language for service delivery pu	rposes.
Category		This is a breakdown of participant self-ide	entified category during the intake process.	
Age			entified age group during the intake process. This d participants and not family member participants	
Employee/Member Sta	itus		self-identified status during the intake process. T d participants and not family member participants	
Management Status		This is a breakdown of participant self-ide	entified job category during the intake process.	
How did you hear abou	t us?	This is a breakdown of participant self-rep	ported detail on how they heard about the program	m.
Are you calling us as a	result of Covid2	L9? This is a breakdown of participant self-rep Covid-19 pandemic.	ported to identify those who were calling as a resu	ult of the
Years of Service			ported detail on how long the participant has beer collected from covered participants and not famil	
Cases by Country		This is a map of the world to showcase th	e breakdown of case percentages by country.	
Appendix				
Report Information	n			
Organization		The name of one or more organizations fo selected organizations.	or the report run. Data on the report is aggregated	for all

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Report Run Date

The date that the report was generated.



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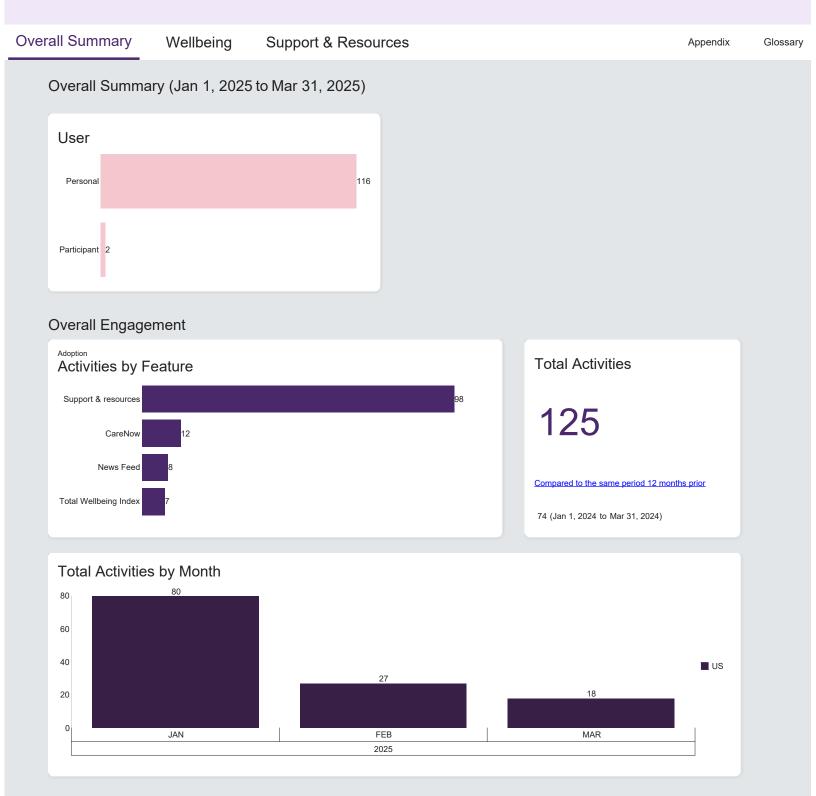
Overall Summary	Trends	Demographic	Appendix Glossary
Country		Name of one or more countries represented in the selected countries.	report. Data on the report is aggregated for all
Region		Name of one or more regions represented in the re selected regions.	port. Data on the report is aggregated for all
Participant Category		Name of one or more participant category represer for all selected participant categories.	nted in the report. Data on the report is aggregated
Optional Answers		List of one or more custom answer options represe for all selected answer options.	ented in the report. Data on the report is aggregated
Consortium or Partner I	Name	Name of the Alliance Partner, Group, or Consortiun	n name represented in the report.

Organizational Units Breakdown

Association, Companies, Branches & Divisions	Organizations for the program can be set up in hierarchical manner to support with breaking down utilization data at more granular levels. Services and cases are booked at the lowest level. The four possible levels in descending order are Association, Company, Branch and Division. Though cases are booked at the lowest level, they are also rolled up to the higher levels to provide aggregated organizational usage details.
Partner/Group	Partner is the name of the Alliance Partner for which the report was run. Group is the name of the group for which the report was run.



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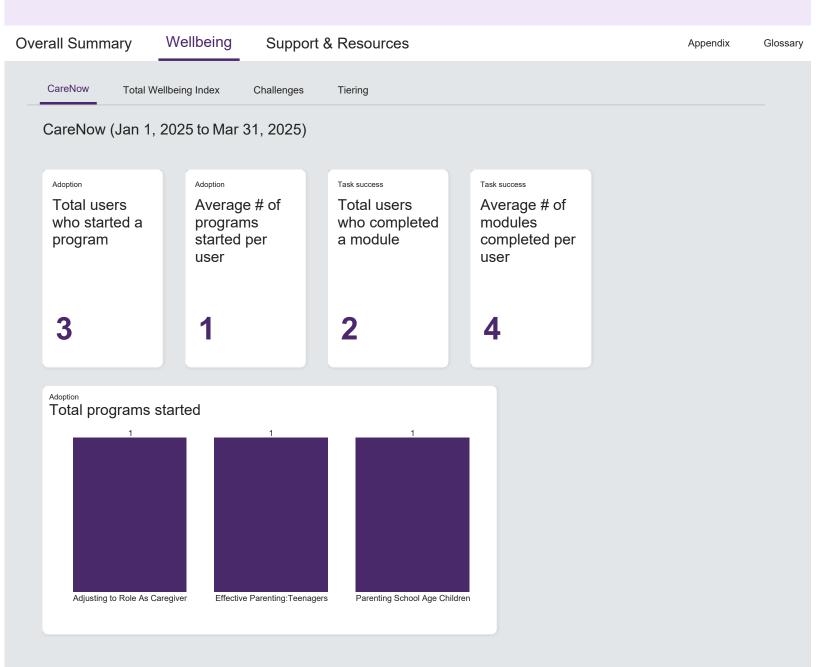


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Overall Summary	Wellbeing	Support & Resources	Appendix	Glossary
Total Activities	by Country		125	
Activities by Group Company & Nev				
Number of company posts				



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TELUS Health One

Overall Summary Wellbeing Support & Resources Appendix Glossary Total Wellbeing Index CareNow Challenges Tiering Total Wellbeing Index (Jan 1, 2025 to Mar 31, 2025) TWI Score Distribution of Risk Current No Data Available Benchmark 20% 29% 26% This is your Total Wellbeing Index score Optimal The median benchmark score is: At Risk Problem Strained Active The top performing score is: Mental Physical Social Financial 52 32 Median benchmark: 56 Median benchmark: 59 Median benchmark: 68 Median benchmark: 71 Top performing score: 72 Top performing score: 69 Top performing score: 79 Top performing score: 85 **Total Participation** Completions by Assessment Number of Assessment Completed per Person Mental 3 of 121 Physical 2% Financial of Registered Users Social Age Bands Generation Undisclosed Undisclosed Gender Tenure Undisclosed Undisclosed



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Overall Summary	Wellbeing	Support & Resources	Appendix	Glossary
Support & Reso	ources (Jan 1, 2	025 to Mar 31, 2025)		
Support & Res	source Activities	3	* Other resources are not included in this total	
	47		Work Life Money Health Family	
		22		
			10	
	JAN	FEB 2025	MAR	
Top Categorie	es		Total Activities 79 * Other resources are not included in this total	
Health Money			22 22	
Work Life		13		
Family 1				
			Total Activities 79	
Top Subcatego	ories		* Other resources are not included in this total	
He	anagement alth Habits		18 17	
	ntal Health onal Issues		11 11	
	orking Day	3	11	
For	Managers 2	2		
	Parenting 1			
carenow fina				
Income Changes & Err Shoppin	nergencies 1 ng Services 1			

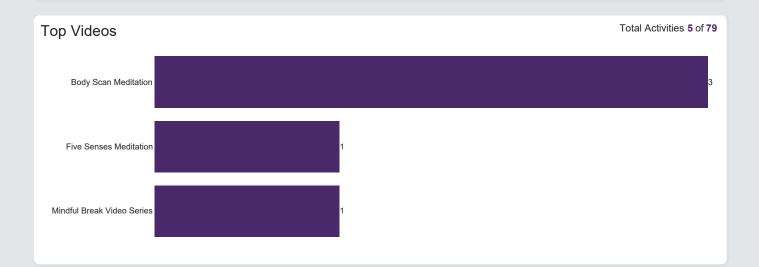


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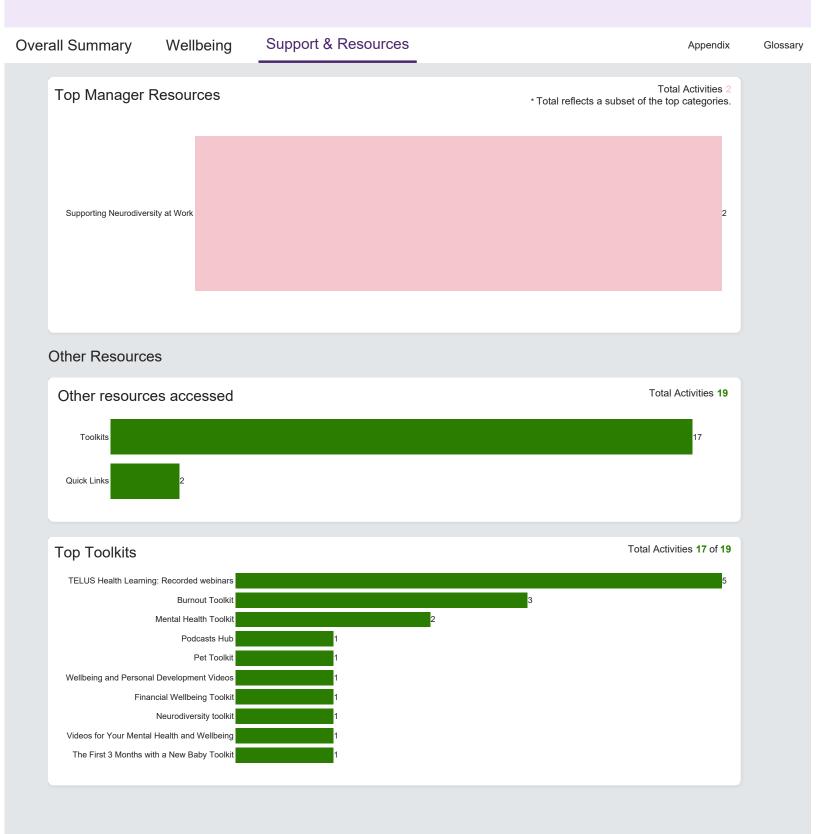


Managing Your Moods: Simple and Practical Tools for Everyday Living





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Overall Summary	Wellbeing	Support & Resources	Appendix	Glossary
Report Information	Activities by Group	TWI Demographics		

Appendix (Jan 1, 2025 to Mar 31, 2025)

Organization	WI
	Veterinary Professionals

Report Run Apr 6, 2025 Date:



WI Veterinary Professionals

Overall Summary	Wellbeing	Support & Resources	Appendix	Glossary
Report Information	Activities by Group	TWI Demographics		
Activities by Grou	up (Jan 1, 2025	to Mar 31, 2025)		

Group Name	Registered User Count	CareNow	News Feed	Support & resources	Total Wellbeing Index
WI Veterinary	3	11	8	27	7
VPAP	2	1		71	



WI Veterinary Professionals

Overall Summary Wellbeing Support & Resources

Appendix Glossary

Glossary (Jan 1, 2025 to Mar 31, 2025)

Modules Completed

Some features defined below may not be applicable to your program.

Overall Summary	
Adoption	
Registration	A user creates an account and accepts the terms and conditions for using the TELUS Health platform.
User	All individuals who have created an account and accepted the terms and conditions for using the TELUS Health platform. This can include a participant, family, admin or personal account.
Participant	The user is invited to the platform by the Admin or signed up via CSV by our onboarding team. The user completes the sign up process and creates a profile on the platform.
Family	These accounts are friends or family members invited to the platform by a Participant via the "Family" feature in the Profile section. The user completes the sign up process and creates a profile on the platform.
Admin	The designated platform Administrators are granted access to certain features beyond those associated with a user. Administrators have access to the Admin Panel — the organization's dashboard and administrator tools – which will include an overview of recent activities and summary statistics.
Personal	A personal account is created when a participant who has logged into the platform under a shared/group login creates a personal profile to access certain features requiring registration.
Pending	These accounts are individuals who have been invited to join the platform but have yet to register, either from an eligibility list or through an invitation from an admin.
Overall Engagement	Measuring the general depth of use of the platform.
Activities	The sum total of user activities on the platform. Activities include: -viewing content (e.g. articles) -liking company posts -creating newsfeed posts -posting a recognition -purchases made using Perks -views and participation in wellbeing activities including: -joining a challenge -tracking your habitude or steps -completing assessments -completing a module or program, or starting a program within CareNow
% of users with at least one activity	The percentage of users that have had an activity on the platform, out of all of the users who have completed the registration and profile creation process.
Compared to the same period 12 months prior	
	Where available the footnote number in the bottom left corner showcases the data from the same time period twelve months prior.
Compared to the same period 12 months prior	Example 1: If report period is March 2020 then the data showcased in the bottom left corner is for March 2019.
	Example 2: If report period is November 2019 to January 2020 then the data showcased n the bottom left corner is for November 2018 to January 2019.
Company & News Feed Posts	News Feed posts that are created by a platform Admin
Average likes per company posts	The average number of likes for all company posts.
Average comments per company posts	The average number of comments on all posts.
Recognitions	
Recognitions	Posting a recognition (submitting text and selecting a badge) for one or more other users that is posted to your company's News Feed.
Total number of initial recognitions received	This represents the users receiving an initial recognition.
Total Initial Recognitions	This represents the process of creating a recognition (submitting a story and selection a badge) for one or more other users that will be posted to your company's News Feed.
Users Who Gave Recognitions	This represents the users giving an initial recognition.
Re-recognitions	Number of recognitions given by using the 'Re-recognize' button in the News Feed section of the platform.
Wellbeing	
CareNow	



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Overall Summary	Wellbeing	Support & Resources	Appendix	Glossary
		module is completed when all content is viewed within the module		
Total programs started		module is completed when all content is viewed within the module. Total number of times a CareNow program was started.		
Total Wellbeing Index		The scores reported for each pillar are based on those that completed that pillar's assessment;	however all TW/I relat	ed
		scores require completion of all four assessments.		5u
		The Total Wellbeing Index (TWI) is a scale aggregating behavioural assessment data from the f Mental, Physical, Social and Finance.	our pillars of total heal	lth:
Mental:		This pillar includes questions covering various areas of mental health, including anxiety, depress burnout, and general mental health.	sion, coping skills,	
Physical:		This pillar includes questions covering various areas of physical health, including physical activit biometric awareness, lifestyle choices, sleep, and nutrition.	ty, medical health,	
Social:		This pillar includes questions covering various areas of work-life, relationships, and work.		
Financial		This pillar includes questions covering various areas of financial health, including debt, savings, behaviour.	and general financial	
Score:		A number from 0 to 100 which represents the average of all employee responses in a particular	area.	
Risk distributions:		Individuals completing the full TWI assessment and each pillar assessment are categorized into (below). The percentage of the population falling into each category is displayed in the risk distribution.	0 1	
Optimal Health (score from	81-100)	Individuals in this category are doing well in balancing the demands of life and work. Their Total Physical, Social and Finance) collectively is quite good. Based on the information reported, indivisional focus on sustaining optimal health.		
Active Health (score from 7	1-80)	Individuals who fall in this category are doing reasonably well overall. In general, their total well- however, there are areas upon which focus can help improve the individual's overall quality of li		
Strained Health (score from	1 61-70)	Individuals who fall in this category are currently experiencing some level of strain in one or mor wellbeing areas. The challenge is to help and support these individuals in the areas they are fee can be improved into Active or Optimal Health and avoid dipping into Problem or At Risk Health	eling strain so that they	/
Problem Health (score from	n 51-60)	Individuals who fall into this category are typically experiencing some physical, psychological, or are having a negative impact on their total wellbeing and productivity. Individuals in this group ty to make changes that improve their total wellbeing.		
At Risk Health (score from	0-50)	Individuals in this category are at risk for significant health issues in many or all of the key pillars Physical, Social and Finance. These individuals are often off work or on the verge of being off w services is essential to get them back on the right track.		
Benchmark:		A standard or point of reference against which scores can be compared. The value of benchmar organization's performance/results against the standard. The benchmark/standard is based on (middle value of all organizations) of collective scores of all organizations that have completed to	the 50th percentile	e
Top Performing (Employers	s) score:	Refers to scores at or above 90 per cent of the total TWI completions; only 10 per cent of total s threshold.	cores are above this	
Generation:		Generations are defined by birth year. Regardless of age, individuals always belong to the generations. Generations tend to experience similar life issues. By reporting on generations, org compare results against other generations at a different place in the life cycle.	eration into which they anizations are able to	
		Generation breakdown Generation Z: born in 1996 or later Millennials: born from 1980 to 1995 Generation X: born from 1965 to 1979 Baby boomers: born from 1946 to 1964 Traditionalists: born in 1945 or earlier		
Assessments				
Assessments		A thematic assessment available in the wellbeing section of the platform.		
Outcome		The calculated level of risk or impact pertaining to that area of the user's health, as determined their responses to the assessment.	by the overall score of	
Full HRA		The HRA (health risk assessment) is the completion of all the health and biometric assessments	š.	
Precontemplation		User is not ready to engage in change and does not intend to take action in the next six months		
Contemplation		User is ready to consider change and does not intend to take action in the next six months.		
Preparation		User is preparing to change and ready to take action within the next 30 days.		



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Overall Summary	Wellbeing	Support & Resources	Appendix	Glossary
Action		User has started to engage in change.		
Maintenance		User is continuing to engage in change after six months.		
Challenges				
Challenges		A personal or organization program that promotes activities related to improved health. This may in habitude challenges.	clude step and	
Personal		Challenges available to users to earn platform points as they progress towards long term healthy life. These challenges do not have a public leaderboard.	estyle choices.	
Corporate		Challenges created on behalf of your organization to promote engagement and health.		
Habit		Specific behaviour that a user is looking to improve.		
Step		A measurement of the action of taking a step.		
Started or joined		The number of users who accepted or joined a personal or organization challenge.		
Goal attained		This represents the number of users who have completed a challenge and met the target goal of the	e challenge.	
Wellness Tiers				
Points		Users earn points by completing various activities on the platform or by taking actions outside of the tracked within the TELUS Health platform) to positively influence their overall wellbeing.	e platform (that ar	e
Tiers		There are 4 tiers that can be achieved by earning platform points. Within each tier, users can access wellness rewards. These tiers are: Bronze (5), Silver (2,500), Gold (5,000), and Platinum (10,000)	s specially-curate	ed
Promoted Activities				
Promoted Activity		An activity selected to promote to your user population. These include: Biometric Screening, Mediup, Preventive Screening, Training or Benefit Event, Competition or Athletic Event, Volunteering, F Gym or Workout, LIFT Challenge.		:k-
Support & Resources				
Support & Resource Activitie	25	The platform's Support & Resources section includes 1,800+ articles, podcasts, and toolkits. This r the content viewed and which categories, subcategories, and specific content items are most popul counts as an activity.	•	
Top Categories		There are five categories within Support & Resources: Family, Health, Life, Money, Work.		
Top Subcategories		The subset of categories in the five categories from Support & Resources feature.		
Total Activities		Total content views for each modality. The charts display up to ten most popular resources.		
Perks				
Summary				
Total Perks transactions		Number of individual transactions completed on the Perks section of the platform.		
Gift Cards				
Gift cards transactions		Purchase of a single gift card through the Perks section of the platform.		
Total gift card value		The redeemable value of the gift cards purchased.		
Total gift card spend		The purchase price of the gift card paid by the user.		
Gift card savings		The total savings divided by the total value of the gift cards purchased.		
Cashback				
Cashback Transactions		A single purchase (regardless of the # of products involved) from a partnered vendor's site.		
Total cashback spend		The pre-tax purchase value of the transaction made with the vendor.		
		The total currency returned to the user who made the purchase, which is credited to the user's plat	form wallet. Upon	
Total cashback		confirmation from the vendor, the amount is eligible to be withdrawn by the user.	enn nanen open	
Average savings %		The portion of the total spending that is credited to the user's platform wallet.		
Merchants		A 3rd party company that has an agreement with TELUS Health to provide cashback to TELUS He	alth' users	
Cinemas				
Cinema Transactions		Purchase of cinema tickets at a discount through the Perks section of the platform.		
Cinema Value		The redeemable value of the cinema tickets purchased.		
Cinema Spend		The purchase price of the cinema tickets paid by the user.		
Cinema Saving		The difference between the value and the purchase price of the cinema tickets		
Appondix				

Meeting Date	April 22, 2025
Requestor Name	Dustin Boyd
Item Title for the Agenda	Administrative Warnings vs. Final Decision and Orders
Should this be in Open or	Open
Closed Session?	
Is this an Action Item or for	Information only
Information Only?	
Are there Attachments?	No. Data is below
(If yes, include file names)	
Is a Public Appearance	
Anticipated?	
Description of the Agenda Item	

For cases closed in 2024 there were:

- 10 Administrative Warnings (3 in 2023)
- 35 FDOs (43 in 2023)

Meeting Date	April 22, 2025
Requestor Name	Angela Fisher
Item Title for the Agenda	Guidance Document: Anesthesia Monitoring
Should this be in Open or	Open
Closed Session?	
Is this an Action Item or for	Action
Information Only?	
Are there Attachments?	VEB-GD-009 Anesthesia Monitoring
(If yes, include file names)	
Is a Public Appearance	No
Anticipated?	
Description of the Agende Home	

Description of the Agenda Item

A guidance document was drafted based on the discussion at the January VEB meeting. The attached document is ready for the VEB's discussion and revision.

If no revisions are needed and the guidance document is approved at the meeting, the draft motion would be: Motion to approve guidance document VEB-GD-009 regarding anesthesia monitoring.



State of Wisconsin

Veterinary Examining Board

2811 Agriculture Drive • PO Box 8911 • Madison, WI 53708-8911 • Wisconsin.gov

Guidance Document VEB-GD-009 Anesthesia Monitoring

Wis. Stat. § 89.07 Wis. Admin. Code § VE 1.44 and 1.58 3/6/25 DRAFT

<u>Topic</u>

This guidance document clarifies expectations for anesthesia monitoring.

Relevant Statutes and Administrative Code

Wisconsin Stat. § 89.07 (1) (b) provides that "unprofessional conduct" includes violating Chapter 89 of the Wisconsin Statutes or any federal or state statute or rule that substantially relates to the practice of veterinary medicine.

Wisconsin Stat. § 89.07 (1) (f) provides that "unprofessional conduct" includes engaging in the practice of veterinary medicine which evidences a lack of knowledge or ability to apply professional principles or skills.

Wisconsin Stat. § 89.07 (2) (a) authorizes the board to, by order, reprimand any person holding a license, certificate, or permit under the chapter or deny, revoke, suspend, limit, or any combination thereof, the person's license, certification, or permit if the person has engaged in unprofessional conduct.

Wisconsin Admin. Code § VE 1.44 (6) (a) allows a veterinarian to delegate the administration of local or general anesthesia, including induction and monitoring, to a certified veterinary technician under the supervision of the veterinarian when the veterinarian is personally present on the premises where the services are provided.

Wisconsin Admin. Code § VE 1.44 (9) allows, notwithstanding subs. (1) to (8), a veterinary student, certified veterinary technician or unlicensed assistant employed by a veterinarian to, under the supervision of the veterinarian and pursuant to mutually acceptable written protocols, perform evaluative and treatment procedures necessary to provide an appropriate response to life-threatening emergency situations for the purpose of stabilizing the patient pending further treatment.

Wisconsin Admin. Code § VE 1.02 (14) defines "supervision" to mean available at all times for consultation, either in person or within 15 minutes of contact by telephone, by video conference or by electronic communications device, except where other provisions are specified in rule.

Wisconsin Admin. Code § VE 1.58 (2) provides that "unprofessional conduct" includes conduct in the practice of veterinary medicine which evidences a lack of knowledge or ability to apply professional principles or skills.

Wisconsin Admin. Code § VE 1.58 (7) provides that "unprofessional conduct" includes violating or aiding and abetting the violation of any law or administrative rule or regulation substantially related to the practice of veterinary medicine.

Board Position

A veterinarian may not delegate anesthesia monitoring to an unlicensed assistant, unless necessary to provide an appropriate response to life-threatening emergency situations for the purpose of stabilizing the patient pending further treatment, pursuant to Wisconsin Admin. Code § VE 1.44 (9). Delegations in this situation must be made pursuant to mutually acceptable protocols and under supervision as defined in Wis. Admin. Code § VE 1.02 (14).

If a veterinarian monitors anesthesia, delegates anesthesia monitoring to a certified veterinary technician, or delegates anesthesia monitoring to an unlicensed assistant when necessary to provide an appropriate response to life-threatening emergency situations for the purpose of stabilizing the patient pending further treatment, the veterinarian must ensure a standard of care that does not evidence a lack of knowledge or ability to apply professional principles or skills, pursuant to Wisconsin Stat. § 89.07 (1) (f) and Wisconsin Admin. Code § VE 1.58 (2).

When reviewing cases involving anesthesia, the VEB may consider whether the veterinarian wrongfully delegated anesthesia monitoring to an unlicensed assistant, and whether the delegation evidenced a lack of knowledge or ability to apply professional principals or skills. For example, the VEB may consider who was present, the complexity of the surgery, whether the anesthesia was intubated gas anesthesia or injectable anesthesia, how anesthesia records were made, and other relevant information specific to the case.

The VEB may also consider whether the situation was an emergency or the result of inadequate planning. The veterinarian is responsible for ensuring appropriate staff (a certified veterinary technician or another veterinarian) are present to monitor anesthesia for surgeries in which the veterinarian could not readily stop the surgery and make adjustments to anesthesia without endangering the patient. In general, if the surgery itself is not necessary to provide an appropriate response to a life-threatening emergency situation for the purpose of stabilizing the patient pending further treatment, then anesthesia monitoring cannot be delegated to an unlicensed assistant.

Meeting Date	April 22, 2025
Requestor Name	Angela Fisher
Item Title for the Agenda	Guidance Document: Animal Massage
Should this be in Open or	Open
Closed Session?	
Is this an Action Item or for	Action
Information Only?	
Are there Attachments?	VEB-GD-010 Animal Massage
(If yes, include file names)	
Is a Public Appearance	No
Anticipated?	
Decemination of the Agende Item.	

Description of the Agenda Item

A guidance document was drafted based on the discussion at the January VEB meeting. The attached document is ready for the VEB's discussion and revision.

If no revisions are needed and the guidance document is approved at the meeting, the draft motion would be: Motion to approve guidance document VEB-GD-010 regarding animal massage.



State of Wisconsin

Veterinary Examining Board

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Guidance Document VEB-GD-010 Animal Massage

Wis. Stat. § 89.02 Wis. Admin. Code § VE 1.44 and 1.48 3/6/25 DRAFT

<u>Topic</u>

This guidance document clarifies activities regarding animal massage.

Relevant Statutes and Administrative Code

Wisconsin Stat. § 89.02 (6) defines the practice of veterinary medicine as to examine into the fact or cause of animal health, disease or physical condition, or to treat, operate, prescribe or advise for the same, or to undertake, offer, advertise, announce, or hold out in any manner to do any of said acts, for compensation, direct or indirect, or in the expectation thereof.

Wisconsin Admin. Code § VE 1.44 (4) (a) allows a veterinarian to delegate the provision of nonsurgical treatment of animal diseases and conditions to certified veterinary technicians under the supervision of the veterinarian.

Wisconsin Admin. Code § VE 1.44 (8) allows a veterinarian to delegate the provision of nonsurgical veterinary treatment of animal diseases and conditions to an unlicensed assistance under the supervision of the veterinarian when the veterinarian is personally present on the premises where the services are provided.

Wisconsin Admin. Code § VE 1.48 (1) defines "Complementary, alternative, and integrative therapies" as a heterogeneous group of preventive, diagnostic, and therapeutic philosophies and practices. These therapies include:

- (a) Veterinary acupuncture, acutherapy, and acupressure.
- (b) Veterinary homeopathy.
- (c) Veterinary manual or manipulative therapy, meaning therapies based on techniques practiced in osteopathy, chiropractic medicine, or physical medicine and therapy.
- (d) Veterinary nutraceutical therapy.
- (e) Veterinary phytotherapy.

Wisconsin Admin. Code § VE 1.48 (2) allows a veterinarian to make a referral to a client, for treatment of a patient by a license holder in another profession, using complimentary, alternative, or integrative therapies, as defined in Wisconsin Admin. Code § VE 1.48 (1) if the license holder, to whom the client and patient are referred, provides all of the following evidence to the veterinarian for performing the type of therapy for which the referral is being made:

(a) The license holder's current licensing in good standing, with the applicable board through the department of safety and professional services.

(b) The license holder's education, training, and experience in performing the therapy on an animal.

Wisconsin Admin. Code § VE 1.48 (3) provides that the VCPR, as defined in Wisconsin Stat. § 89.02 (8) does not extend to the provision of any complementary, alternative, or integrative therapy performed on a veterinarian's patient, under either of the following circumstances:

(a) The therapy is performed by a license holder in another profession, where the veterinarian demonstrates meeting the requirements, in Wisconsin Admin. Code § VE 1. 48 (2), for making the referral to the license holder.

(b) The veterinarian's client obtains any complementary, alternative, or integrative therapy services for a veterinarian's patient without a referral by the veterinarian.

Board Position

The practice of animal massage, when it includes activities that are considered the practice of veterinary medicine as defined under Wisconsin Stat. § 89.02 (6), is considered a complementary, alternative, and integrative therapy (CAITS). CAITS are veterinary services that can be delegated in accordance with Wisconsin Admin. Code § VE 1.44 (4) (a) or VE 1.44 (8), or the client may be referred to a licensed massage therapist in accordance with Wisconsin Admin. Code § VE 1.44 (2) (a) or VE 1.44 (2) (2) or VE 1.48.

The practice of massage, when it does <u>not</u> include any activities that are the practice of veterinary medicine (for example, the massage therapist does not align, adjust, manipulate, offer animal rehabilitation services, use needles, apply any product, diagnose or prescribe), would not need to be delegated or referred in accordance with Wisconsin Stat. ch. 89 or Wisconsin Admin. Code ch. VE 1.

Meeting Date	April 22, 2025
Requestor Name	Angela Fisher
Item Title for the Agenda	Guidance Document: Regional Anesthesia
Should this be in Open or	Open
Closed Session?	
Is this an Action Item or for	Action
Information Only?	
Are there Attachments?	VEB-GD-008 Regional Anesthesia
(If yes, include file names)	
Is a Public Appearance	No
Anticipated?	
Description of the Agende Item	

Description of the Agenda Item

Guidance document VEB-GD-008 regarding regional anesthesia was approved at the January 28, 2025, VEB meeting. A typo has been identified in the guidance document's text of Wis. Admin. Code s. VE 1.44 (6) (a), which is corrected on the attached draft. The attached draft is ready for VEB review and approval.

If no further revisions are needed and the guidance document is approved at the meeting, the draft motion would be: Motion to approve guidance document VEB-GD-008 regarding regional anesthesia.



State of Wisconsin

Veterinary Examining Board

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Guidance Document VEB-GD-008 Regional Anesthesia

Wis. Stat. § 89.03 (1) Wis. Admin. Code § VE 1.44 <u>1/28/254/10/25 DRAFT</u>

<u>Topic</u>

This guidance document clarifies when a veterinarian may delegate the administration of regional anesthesia.

Relevant Statutes and Administrative Code

Wisconsin Stat. § 89.02 (6) defines the practice of veterinary medicine as to examine into the fact or cause of animal health, disease or physical condition, or to treat, operate, prescribe or advise for the same, or to undertake, offer, advertise, announce, or hold out in any manner to do any of said acts, for compensation, direct or indirect, or in the expectation thereof.

Wisconsin Stat. § 89.03 (1) authorizes the board to promulgate rules to establish the scope of the practice permitted for veterinarians and veterinary technicians, within the limits of the definition under Wis. Stat. § 89.02 (6).

Wisconsin Admin. Code § VE 1.44 (2) (c). limits performing surgery to those holding a license under Wis. Stat. §§ 89.06 (1), 89.06 (2m) (a), or 89.072, a permit under Wis. Admin. Code §§ VE 1.36, 1.38, or 1.40, or active status as a student at a college of veterinary medicine approved by the board. Under Wis. Admin. Code § VE 1.44(2) (c) 2. the administration of injections, including local and general anesthesia, is excluded from the definition of "performing surgery" because it may be delegated to a certified veterinary technician.

Wisconsin Admin. Code § VE 1.44 (6) (a) allows a veterinarian to delegate the administration of local or general anesthesia, including induction and monitoring, to a certified veterinary technician under the supervision of the veterinarian when the veterinarian is available to communicate via telehealth technologies within 5 minutes or the veterinarian is personally present on the premises where the services are provided.

Board Position

For the purposes of Wis. Admin. Code §§ VE 1.44 (2) (c) 2. b. and (6) (a), the Board considers "local or general anesthesia" to include regional anesthesia. Local, regional, and general anesthesia are on a spectrum from local to general, with regional in between.

Meeting Date	April 22, 2025
Requestor Name	M. Mace
Item Title for the Agenda	UW SVM Medical Services Delegation
Should this be in Open or	Open
Closed Session?	
Is this an Action Item or for	Discussion/Information only
Information Only?	
Are there Attachments?	No
(If yes, include file names)	
Is a Public Appearance	No
Anticipated?	
Description of the Agenda Item	

Description of the Agenda Item

The UW SVM requested a meeting to discuss delegation of medical services to radiological technicians and ultrasonographers.

Dr. Holter, Aaron O'Neil and Melissa Mace met with UW SVM representatives to discuss their questions. Summary of meeting to be presented.

Meeting Date	April 22, 2025	
Requestor Name	Routine	
Item Title for the Agenda	Credential Holder Summary	
Should this be in Open or Closed Session?	Open	
Is this an Action Item or for Information Only?	Information	
Are there Attachments? (If yes, include file names)	No	
Is a Public Appearance Anticipated?	No	
Description of the Agenda Item		
Credential	2025	2024
Exam/Endorsement	2119	1,937
OTJ	1025	720
<u>CVT Tota</u> l	<u>3144</u>	2,657
Veterinarian	4077	3,789

Meeting Date	April 22, 2025
Requestor Name	
Item Title for the Agenda	AAVSB Matters
Should this be in Open or	open
Closed Session?	
Is this an Action Item or for	informational
Information Only?	
Are there Attachments?	New Opportunities – AAVSB 2025 Call for Nominations
(If yes, include file names)	
Is a Public Appearance	No
Anticipated?	

Description of the Agenda Item

- Annual meeting: Cincinnati Ohio
 - Sept 17 -18 preconference meetings
 - Sept 19-20 annual meeting & conference

• AAVSB Opportunities to join leadership. The following positions are open for nominations:

President-Elect (1 Position with a 3-year term)

Serves as President-Elect, President, and Immediate Past President; approximately 18 days of travel (travel expenses paid by the AAVSB)

Director (3 positions with 2-year terms)

Approximately 14 days of travel (travel expenses paid by the AAVSB)

Nominating Committee Member (1 Position with a 2-year term)

Four days of travel to attend the AAVSB Annual Meeting (travel expenses paid by the AAVSB)

ICVA Representative (1 Licensed Veterinarian Position with a 3-year term)

Travel to two ICVA Board meetings and the AAVSB Annual Meeting (travel expenses paid by the ICVA).

The AAVSB Call for Nominations for 2025 Document is available and provides detailed

information on the open positions and criteria for each. All nominations require a nomination application (which can be completed online), a short bio (as described in the Call for Nominations), and a letter from the sponsor.

NOMINATION DEADLINE: May 22, 2025

How to Submit a Nomination Packet:

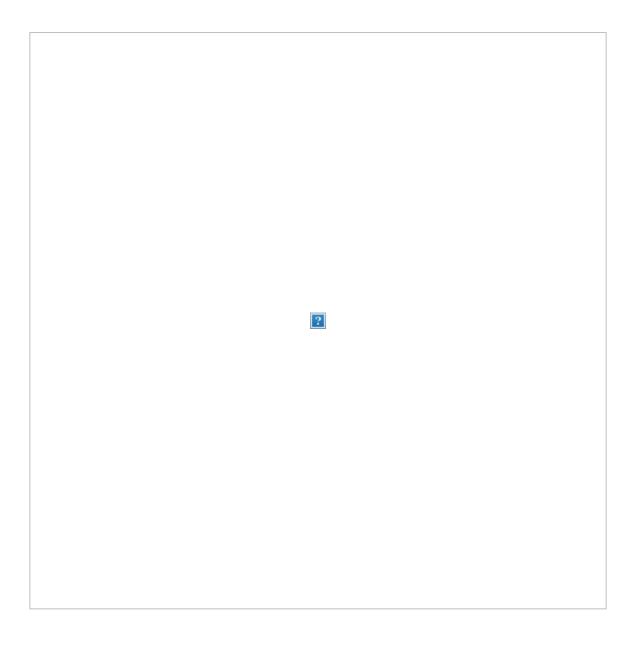
- ONLINE: Submit Nomination Application Here
- EMAIL: <u>nominations@aavsb.org</u>
- FAX: 816.931.1604

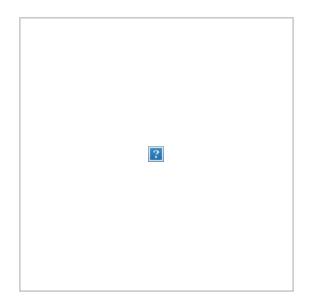
Voting on the slate of candidates will take place at the 2025 AAVSB Annual Meeting & Conference, being held in Cincinnati, Ohio, during the Delegate Assembly portions on September 19 - 20.

- White paper on AI summary attached
 - Full Document: <u>b56f19e0-1d52-4b2c-ab60-1b9502fb5c15.pdf</u>

From:	AAVSB
To:	Mace, Melissa A - DATCP
Subject:	AAVSB Releases White Paper on AI Guidance
Date:	Monday, March 24, 2025 2:48:12 PM

CAUTION: This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.





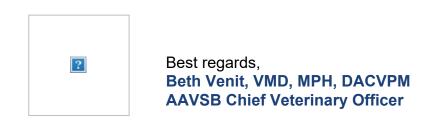
Dear AAVSB Member Board Members, Executive Directors, and Registrars,

Over the past year and at the request of several AAVSB Members, the AAVSB has engaged with dozens of subject matter experts, regulatory board members and staff, federal agencies, and veterinary practitioners to create this white paper: "Regulatory Considerations of the Use of Artificial Intelligence in Veterinary Medicine."

You will see the attached white paper and the sample of a shorter summary document. The summary document was created for you to distribute to your licensees, if desired. If you would like to distribute it, please let me know and I will finalize it and work with you to modify the summary document to meet the specific regulatory language within your jurisdiction.



I am also happy to attend any of your meetings to discuss either document in greater depth. If you have any questions or need assistance, please don't hesitate to reach out to me at <u>evenit@aavsb.org</u>.

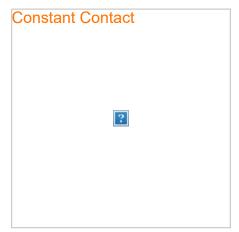


Strengthening the Veterinary Regulatory Community



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REGULATORY CONSIDERATIONS OF THE USE OF Artificial Intelligence in Veterinary Medicine



Artificial Intelligence (AI) and other emerging technologies may benefit the veterinary profession. Many use cases have the potential to reduce non-clinical workloads, improve diagnostic accuracy, improve patient outcomes, and reduce burnout. However, licensees must understand the risks and limitations of AI to maintain a standard of care, prevent unlicensed practices, and maintain client confidentiality and data security standards.

Veterinary professionals must understand that as of the drafting of this document, AI tools and devices do not require premarket approval. Yet veterinary professionals are responsible for using AI in a manner that meets the requirements of current jurisdictional and federal regulations.

Below, we examine the key regulatory considerations associated with the use of AI-enabled tools.

Introduction to Regulatory Considerations

Veterinary professionals must comply with federal, state/provincial, and local regulations. While most practice acts do not regulate the specific tools used in veterinary medicine (e.g., AI), they do regulate how the tools are used.

Navigating compliance considerations with AI is made more difficult by the lack of transparency within the tools. Licensees should understand AI programming, performance, or methodologies prior to use.

The AAVSB believes there are five primary regulatory principles to consider:

- 1. Unlicensed practice of veterinary medicine
- 2. Standards of practice
- 3. Medical record keeping
- 4. Data storage and client confidentiality
- 5. Appropriate informed consent.

Unlicensed Practice of Veterinary Medicine

Most North American practice acts dictate that veterinary medicine should only be practiced by licensees within their jurisdiction. Many practice acts also prohibit aiding an unlicensed individual to practice veterinary medicine, and may contain "duty to report" clauses. The management of these risks is twofold. First, AIenabled tools may augment but must never replace a licensee's clinical judgment. The AI tool is not a licensed professional. So, relying on it for clinical decisions imaging interpretation, diagnoses, prognoses, treatment plans — may be considered unlicensed activity. Second, some emerging technologies allow licensees to practice remotely. It's important to consider whether a license is required in the jurisdiction where the treatment is physically taking place, and how that may impact liability.

Standards of Practice

Al use does not automatically improve patient care. In fact, a lack of standardized benchmarking in Al could lead to substandard care. Al devices could fabricate information, conversations, and medical summary information. These errors can only be identified and corrected by a licensee's expertise.

In addition, high degrees of variation between animal species may not be accounted for in an AI tool's training data. Nor is it guaranteed that a trained, experienced, licensed professional contributed to the tool's development or testing. Responsibility for clinical judgment rests solely with a licensee. It's up to veterinary professionals to practice due diligence when augmenting their practice with an AI-enabled tool. While it's unreasonable to expect a licensee to perfectly understand every tool — its dataset, known flaws, and other limitations — the veterinary professional should perform due diligence to understand these factors prior to using an AI tool.

Medical Recordkeeping

Al tools use Natural Language Processing (NLP) to assess written text. They can transcribe, summarize, rewrite, and learn patterns specific to each licensee's record keeping. Unfortunately, this introduces possible bias and/or inaccuracies that must be accounted for by a licensee.

An AI tool may not know to distinguish between discharge instructions for a healthy one-year-old dog versus a twelveyear-old cat. Or, it may mimic content from a previous client communication that was for a different species of patient. It's important to check all outputs for accuracy as it relates to record keeping and client communications.

Proper Data Storage and Confidentiality

Data privacy and security are cornerstones of the ethical practice of veterinary medicine. Unfortunately, not all AI tools meet the legal requirements of data protection laws. Some tools may incorporate a client's sensitive or personal identifying information into its training data. Similarly, some tools do not have robust encryption protocols that safeguard its data in case of a security breach.

To protect their clients and their careers, veterinary professionals and facilities should implement robust security measures that ensure compliance with federal or jurisdictional data storage, security, and privacy requirements. This applies to onsite and cloud-based storage. Software that does not have clearly stated safeguards for privacy, security, and encryption should be avoided. Ultimately, due diligence and staying informed is the responsibility of a licensee.

Appropriate Informed Consent

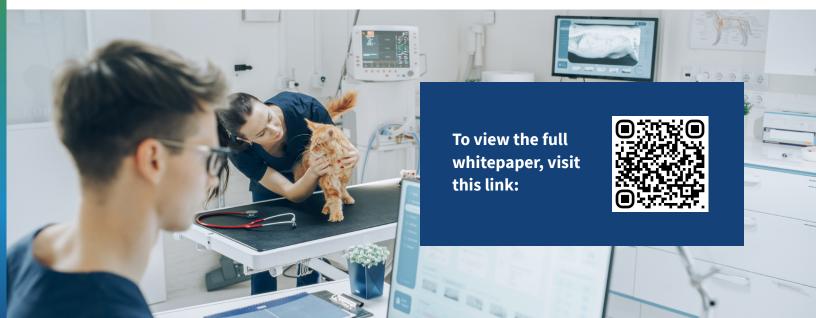
When the above considerations are understood and met, licensees still need to obtain Informed Consent before using AI. This means explaining the benefits, risks, and limitations of these technologies, and how they may be used. High-risk use cases — e.g., diagnostic support, augment clinical decision-making, etc. — may require more in-depth consent. Low-risk use cases—e.g., administrative tasks, reminder emails, etc. — may require little or no consent.

At a minimum, Informed Consent should be obtained when AI assists in writing or summarizing medical records, transmits unencrypted/unprotected Client data, or augments clinical decision-making, diagnostics, or treatment.

As in other regulatory considerations, transparency and due diligence are key. Licensees should be able to show that they have made a reasonable effort to inform clients how AI may be used, how their information will be protected, the limitations of AI, and that they may opt out of AI use.

Conclusion

It is important for veterinary professionals to carefully weigh the benefits against the risks of using AI, and should consider client consent before doing so.



Meeting Date	April 22, 2025
Requestor Name	Angela Fisher
Item Title for the Agenda	VE 1 Final Draft
Should this be in Open or	Open
Closed Session?	
Is this an Action Item or for	Action
Information Only?	
Are there Attachments?	Final Rule Draft
(If yes, include file names)	Regulatory Flexibility Analysis
	Fiscal Estimate and Economic Impact Analysis
	Clearinghouse Comments
	Summary of Public Comments
	Estimated Rule Timeline
Is a Public Appearance	No
Anticipated?	

Description of the Agenda Item

The VE 1 final draft is ready for the VEB's approval.

After the VEB's approval, the final draft will be referred to the Governor. After the Governor's approval, the final draft will be referred to the Legislature.

Draft Motion: Move to approve the VE 1 final rule draft, regarding Wis. Admin. Code ch. VE 1, relating to veterinary licensing processes.

THE VETERINARY EXAMINING BOARD'S PROPOSED ORDER TO ADOPT PERMANENT RULES

PROPOSED ORDER

The Wisconsin Veterinary Examining Board proposes an order to repeal and recreate VE 1.16

(1) and 1.18 (3), and to amend VE 1.14 (intro.) and (6), 1.16 (title) and (intro.), 1.18 (2) and (6),

1.20 (intro.) and (2), and 1.28 (intro.) and (2), *relating to* veterinary licensing processes.

Analysis Prepared by the Veterinary Examining Board

Statutes Interpreted: Wis. Stat. §§ 89.03, 89.06, and 89.072

Statutory Authority: Wis. Stat. §§ 89.03 (1) and (2) and 15.08 (5) (b)

Explanation of Agency Authority

Wis. Stat. § 89.03 (1) authorizes the Veterinary Examining Board (Board) to promulgate rules establishing the scope of practice permitted for veterinarians and rules relating to veterinary licensure qualifications and denial of a license. Wis. Stat. § 89.03 (2) authorizes the Board to promulgate rules requiring training and continuing education sufficient to assure competency of veterinarians in the practice of veterinary medicine. Wis. Stat. § 15.08 (5) (b) authorizes the Board to promulgate rules for its own guidance and for the guidance of the veterinary profession.

Related Statutes and Rules

Wis. Stat. ch. 89 and Wis. Admin. Code chs. VE 1 to 4.

Plain Language Analysis

The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. Without these changes, there would continue to be unintentional gaps preventing applicants with unique circumstances from having a path to licensure. The rule draft makes the following changes:

The rule draft removes language in s. VE 1.14 (6) that limits who must apply by examination or endorsement. The language was added in 2022 and created problems by limiting the licensing processes available to applicants. Removing this language allows applicants who cannot apply

by endorsement to instead apply by examination. This change also removes an inconsistency that currently says a Wisconsin licensee must apply by endorsement.

The rule draft adds language to ss. VE 1.14, VE 1.16, and VE 1.28 to make it clear that the Board may review an application for items listed under s. VE 1.20. This clarification addresses the concerns that led to the limitations under s. VE 1.14 (6) that were created in 2022. For example, an applicant with discipline in another jurisdiction applying by examination is still subject to review under s. VE 1.20.

The rule draft adds language to s. VE 1.20 to make it clear that the section applies to both new applicants for licensure and applicants for renewal. This clarification addresses the concerns that led to the limitations under s. VE 1.14 (6) that were created in 2022. For example, an applicant who was previously licensed in Wisconsin, then licensed in another jurisdiction, and received discipline from the other jurisdiction, is still subject to review under s. VE 1.20.

The rule draft adds language to s. VE 1.16 (1) to create a process for applicants based on examination who have not passed the North American Veterinary Licensing Examination (NAVLE) in the past 5 years. This addition includes language consistent with s. VE 1.28 (2) regarding the Board inquiring as to whether the applicant is competent to practice and imposing reasonable conditions.

The rule draft adds language to s. VE 1.18 (3) to create a process for applicants by endorsement who have neither passed the NAVLE within the last 5 years nor actively practiced for 4,000 hours during the 5 years preceding application. This addition includes language consistent with s. VE 1.28 (2) regarding the Board inquiring as to whether the applicant is competent to practice and imposing reasonable conditions.

The rule draft makes minor edits throughout the licensing processes to consistently use the term "jurisdiction".

Summary of, and Comparison with, Existing or Proposed Federal Statutes and Regulations

Licensure requirements to practice veterinary medicine are established by each state and are not established by federal statutes or regulations.

Pursuant to 9 CFR 160 to 162, a veterinarian must be specifically authorized by the United States Department of Agriculture – Animal and Plant Health Inspection Service to perform animal disease eradication and control functions under federal animal health laws.

Summary of Comments Received

Preliminary Public Hearing and Comment Period on the Statement of Scope

The Board held a preliminary hearing on the statement of scope (SS 109-23) on February 13, 2024, with comments open through February 15, 2024. The hearing offered a combination of in-

person access and remote access. There were no attendees at the hearing, in-person or remote, and no written comments were received.

Comment Period on the Economic Impact Analysis

The economic impact analysis was posted for 14 days, with comments accepted through December 24, 2024. No comments were received.

Public Hearing and Comment Period on the Preliminary Rule Draft

The Board held a hearing on the preliminary rule draft on March 4, 2025, with comments open through March 18, 2025. The hearing offered a combination of in-person access and remote access. There were two commenters at the hearing, and two written comments received. Three of the commenters expressed support of the preliminary rule draft and also recommended removing the 4,000 hours requirement under the current s. VE 1.18 (3). One commenter asked if the Board was going to address situations of people practicing veterinary medicine without a license.

The statement of scope for this rule package (SS 109-23) is specific to just evaluating veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. The Board is unable to evaluate more substantive changes to existing licensing requirements, such as the 4,000 hours requirement under the current s. VE 1.18 (3), within this current rule scope.

Situations of people practicing veterinary medicine without a license is currently a violation under s. 89.05 (1), Wis. Stat. If members of the public have evidence of this occurring, a complaint can be filed with the Board.

Rules Clearinghouse

The Board made changes to address all Clearinghouse comments. Within the rule text, references to s. VE 1.20 were rearranged to be more clear and concise. The title for VE 1.16 was renamed for clarity. The provisions in ss. VE 1.16 (1) and 1.18 (3) were broken into multiple paragraphs for clarity.

Comparison with Rules in Adjacent States

The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. These changes are specific to Wisconsin rules and address unintentional gaps in current licensing processes. Adjacent states also have veterinary boards that license veterinarians.

Illinois

Illinois veterinary licenses are issued by the Illinois Veterinary Licensing and Disciplinary Board, attached to the Illinois Department of Financial and Professional Regulation.

Iowa

Iowa veterinary licenses are issued by the Iowa Board of Veterinary Medicine, attached to the Iowa Department of Agriculture and Land Stewardship.

Michigan

Michigan veterinary licenses are issued by the Michigan Board of Veterinary Medicine, attached to the Michigan Department of Licensing and Regulatory Affairs.

Minnesota

Minnesota veterinary licenses are issued by the Minnesota Board of Veterinary Medicine.

Summary of Factual Data and Analytical Methodologies

There are unintentional gaps and inconsistencies in current veterinary licensing processes. The Board reviewed veterinary licensing processes, assessed what process would apply to each applicant type, and identified unintentional gaps preventing applicants with unique circumstances from being able to apply. The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types.

Analysis and Supporting Documents used to Determine Effect on Small Business or in Preparation of an Economic Impact Analysis

Most veterinary practices are small businesses. The Board expects the proposed rule to have minimal to no economic impact. Under the current rules, there are unintentional gaps preventing some applicants with unique circumstances from applying. The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. The proposed rule would have a positive impact on those applicants who do not currently have an application process, and would not impact other applicants or licensees.

Fiscal Estimate and Economic Impact Analysis

The Fiscal Estimate and Economic Impact Analysis is attached.

Effect on Small Business

Most veterinary practices are small businesses. The Board expects the proposed rule to have minimal to no economic impact. Under the current rules, there are unintentional gaps preventing some applicants with unique circumstances from applying. The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. The proposed rule would have a positive impact on those applicants who do not currently have an application process, and would not impact other applicants or licensees.

The Department's Regulatory Review Coordinator, Bradford Steine, may be contacted by: Email at <u>Bradford.Steine1@wisconsin.gov</u> Telephone at (608) 405-0370

The Regulatory Flexibility Analysis is attached.

Department Contact Person

Angela Fisher Division of Animal Health Department of Agriculture, Trade and Consumer Protection P.O. Box 8911 Madison, WI 53708-8911 (608) 224-5051 Angela.Fisher1@wisconsin.gov

RULE TEXT

- **SECTION 1.** VE 1.14 (intro.) and (6) are amended to read:
- 2 VE 1.14 (intro.) The Subject to s. VE 1.20, the board may issue a license to practice
- 3 veterinary medicine to an applicant who satisfies all of the following:
- 4 (6) Satisfies the requirements for either licensure by <u>based on</u> examination or licensure by
- 5 endorsement. Applicants who have never previously been licensed in any jurisdiction must apply
- 6 by examination. Applicants who have previously been licensed in Wisconsin or any other
- 7 jurisdiction must apply by endorsement.
- 8 SECTION 2. VE 1.16 (title) and (intro.), are amended to read:
- 9 VE 1.16 Qualifications for licensure by based on examination. Applicants Subject to s. VE
- 10 <u>1.20, applicants</u> for licensure by <u>based on</u> examination shall satisfy all of the following:
- **SECTION 3.** VE 1.16 (1) is repealed and recreated to read:
- 12 (1) The applicant has satisfied at least one of the following:
- 13 (a) Passed the NAVLE within the last five years.
- 14 (b) Passed the NAVLE more than five years prior to application and satisfies at least one of the
- 15 following:

Currently holds a full unexpired license issued by a similar licensing board of another
 jurisdiction whose standards, in the opinion of the board, are equivalent to or higher than the
 requirements for licensure in this state.

2. Previously held a license issued by a similar licensing board of another jurisdiction whose
 standards, in the opinion of the board, are equivalent to or higher than the requirements for
 licensure in this state, and has been deemed competent to practice by the board, including
 satisfying any reasonable conditions imposed by the board. The board shall inquire as to whether
 the applicant is competent to practice as a veterinarian in this state and may impose any
 reasonable conditions on instatement of the license, including reexamination, as the board deems
 appropriate.

26 SECTION 4. VE 1.18 (2) is amended to read:

27 VE 1.18 (2) The applicant holds a current license to practice veterinary medicine in another

28 state or U.S. territory or province of <u>a jurisdiction of the United States or</u> Canada.

29 SECTION 5. VE 1.18 (3) is repealed and recreated to read:

30 (3) The applicant has satisfied at least one of the following:

31 (a) Passed the NAVLE within the last five years.

32 (b) Actively practiced for 4000 hours during the 5 years preceding application.

33 (c) Has been deemed competent to practice by the board, including satisfying any reasonable

conditions imposed by the board. The board shall inquire as to whether the applicant is

35 competent to practice as a veterinarian in this state and may impose any reasonable conditions on

36 instatement of the license, including reexamination, as the board deems appropriate. An

applicant under this paragraph is presumed to be competent to practice as a veterinarian in this

state if at the time of application the applicant holds a full unexpired license issued by a similar

39 licensing board of another jurisdiction whose standards, in the opinion of the board, are

40 equivalent to or higher than the requirements for licensure in this state.

41 SECTION 6. VE 1.18 (6) is amended to read:

42 (6) Provides verification of licensure records and status which has been provided directly to

43 the board by every state or country jurisdiction in which the applicant has ever held a license or

44 certificate to practice veterinary medicine or by the AAVSB.

45 SECTION 7. VE 1.20 (intro.) and (2) are amended to read:

46 VE 1.20 (intro.) The board may determine that an applicant is not eligible for licensure, or a

47 <u>licensee is not eligible for renewal</u>, if any of the following apply:

48 (2) The applicant has been disciplined by the veterinary licensing authority in any other state,
 49 territory or country jurisdiction.

50 SECTION 8. VE 1.28 (intro.) and (2) are amended to read:

51 VE 1.28 (intro.) A license expires if not renewed by January 1 of even-numbered years. A

Subject to s. VE 1.20, a licensee who allows the license to expire may apply to the board for
 renewal of the license as follows:

(2) If the licensee applies for renewal of the license 5 or more years after its expiration, in 54 55 addition to requiring the licensee to pay the renewal fee and late fee, and to fulfill the continuing education hours required under s. VE 1.30 completed before the license renewal, the board shall 56 57 inquire as to whether the applicant is competent to practice as a veterinarian in this state and 58 shall impose any reasonable conditions on reinstatement of the license, including reexamination, as the board deems appropriate. An applicant under this subsection is presumed to be competent 59 to practice as a veterinarian in this state if at the time of application for renewal the applicant 60 61 holds a full unexpired license issued by a similar licensing board of another state or territory of

62 the United States or of a foreign country or province jurisdiction whose standards, in the opinion

63 of the board, are equivalent to or higher than the requirements for licensure in this state.

64 Notwithstanding any presumption of competency under this subsection, the board shall require

each applicant under this subsection to pass the examination specified under s. VE 1.14 (2).

66 SECTION 9. EFFECTIVE DATE. This rule takes effect on the first day of the month following

publication in the Wisconsin Administrative Register as provided in s. 227.22 (2) (intro.), Stats.

(END OF RULE TEXT)

Dated this _____ day of _____, 2025

WISCONSIN VETERINARY EXAMINING BOARD

By: , Chair

Wisconsin Veterinary Examining Board

Regulatory Flexibility Analysis

Rule Subject:VeterinariansAdm. Code Reference:VE 1Rules Clearinghouse #:CR 25-006DATCP Docket #:23-R-03

Rule Summary

The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. Without these changes, there would continue to be unintentional gaps preventing applicants with unique circumstances from having a path to licensure. The rule draft makes the following changes:

The rule draft removes language in s. VE 1.14 (6) that limits who must apply by examination or endorsement. The language was added in 2022 and created problems by limiting the licensing processes available to applicants. Removing this language allows applicants who cannot apply by endorsement to instead apply by examination. This change also removes an inconsistency that currently says a Wisconsin licensee must apply by endorsement.

The rule draft adds language to ss. VE 1.14, VE 1.16, and VE 1.28 to make it clear that the Board may review the application for items listed under s. VE 1.20. This clarification addresses the concerns that led to the limitations under s. VE 1.14 (6) that were created in 2022. For example, an applicant with discipline in another jurisdiction applying by examination is still subject to review under s. VE 1.20.

The rule draft adds language to s. VE 1.20 to make it clear that the section applies to both new applicants for licensure and applicants for renewal. This clarification addresses the concerns that led to the limitations under s. VE 1.14 (6) that were created in 2022. For example, an applicant who was previously licensed in Wisconsin, then licensed in another jurisdiction, and received discipline from the other jurisdiction, is still subject to review under s. VE 1.20.

The rule draft adds language to s. VE 1.16 (1) to create a process for applicants based on examination who have not passed the North American Veterinary Licensing Examination (NAVLE) in the past 5 years. This addition includes language consistent with s. VE 1.28 (2) regarding the Board inquiring as to whether the applicant is competent to practice and imposing reasonable conditions.

The rule draft adds language to s. VE 1.18 (3) to create a process for applicants by endorsement who have neither passed the NAVLE within the last 5 years nor actively practiced for 4,000 hours during the 5 years preceding application. This addition includes language consistent with s. VE 1.28 (2) regarding the Board inquiring as to whether the applicant is competent to practice and imposing reasonable conditions.

The rule draft makes minor edits throughout the licensing processes to consistently use the term "jurisdiction."

Small Businesses Affected

Most veterinary practices are small businesses. The Board expects the proposed rule to have minimal to no economic impact. Under the current rules, there are unintentional gaps preventing some applicants with unique circumstances from applying. The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. The proposed rule would have a positive impact on those applicants who do not currently have an application process, and would not impact other applicants or licensees.

Reporting, Bookkeeping and other Procedures

The proposed rule does not create any new reporting or bookkeeping requirements.

Professional Skills Required

The proposed rule does not create any new professional skills requirements.

Accommodation for Small Business

No accommodation for small business will be necessary for the proposed rule. The Board expects the proposed rule to have minimal to no economic impact. The proposed rule would have a positive impact on those applicants who do not currently have an application process, and would not impact other applicants or licensees.

Conclusion

The Board expects the proposed rule to have minimal to no economic impact.

Dated this _____ day of _____, 2025.

WISCONSIN VETERINARY EXAMINING BOARD

Ву

Chair Veterinary Examining Board

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis	2. Date
Original Updated Corrected	12/5/24
3. Administrative Rule Chapter, Title and Number (and Clearinghou VE 1, Veterinarians	se Number if applicable)
4. Subject Veterinarians	
5. Fund Sources Affected	6. Chapter 20, Stats. Appropriations Affected 20.115 (2) (jm)
7. Fiscal Effect of Implementing the Rule ☑ No Fiscal Effect ☐ Increase Existing Revenues ☐ Indeterminate ☐ Decrease Existing Revenues	 Increase Costs Could Absorb Within Agency's Budget
8. The Rule Will Impact the Following (Check All That Apply)	
	ific Businesses/Sectors
	c Utility Rate Payers
	Il Businesses (if checked, complete Attachment A)
 9. Estimate of Implementation and Compliance to Businesses, Loca \$0 	a Governmental Units and Individuals, per s. 227.137(3)(b)(1).
10. Would Implementation and Compliance Costs Businesses, Loca	D Covernmental Units and Individuals Bo \$10 Million or more Over
Any 2-year Period, per s. 227.137(3)(b)(2)?	
11. Policy Problem Addressed by the Rule	
The proposed rule modifies veterinary licensing processes fo	r clarity, consistency, and to ensure there are processes for
all applicant types. Without these changes, there would conti	
unique circumstances from having a path to licensure.	
12. Summary of the Businesses, Business Sectors, Associations Re	
that may be Affected by the Proposed Rule that were Contacted	
The Board held a preliminary hearing on the statement of sco	
until February 15, 2024. The hearing offered a combination of attendees at the hearing, in-person or remote, and no written	
13. Identify the Local Governmental Units that Participated in the De	
Not applicable.	evelopment of this EIA.
14. Summary of Rule's Economic and Fiscal Impact on Specific Bus Governmental Units and the State's Economy as a Whole (Incl Incurred)	
Most veterinary practices are small businesses. The Board ex	pects the proposed rule to have minimal to no economic
impact. Under the current rules, there are unintentional gaps	preventing some applicants with unique circumstances from
applying. The proposed rule modifies veterinary licensing pr	ocesses for clarity, consistency, and to ensure there are
processes for all applicant types. The proposed rule would have	
currently have an application process, and would not impact	other applicants or licensees.)
15. Benefits of Implementing the Rule and Alternative(s) to Implement	
The proposed rule modifies veterinary licensing processes fo	
all applicant types. Without these changes, there would conti	nue to be unintentional gaps preventing applicants with
unique circumstances from being able to apply.	
16. Long Range Implications of Implementing the Rule	

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. Without these changes, there would continue to be unintentional gaps preventing applicants with unique circumstances from being able to apply.

17. Compare With Approaches Being Used by Federal Government

Licensure requirements to practice veterinary medicine are established by each state and are not established by federal statutes or regulations.

Pursuant to 9 CFR 160 to 162, a veterinarian must be specifically authorized by the United States Department of Agriculture – Animal and Plant Health Inspection Service to perform animal disease eradication and control functions under federal animal health laws.

18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. These changes are specific to Wisconsin rules and address unintentional gaps in current licensing processes. Adjacent states also have veterinary boards that license veterinarians.

Illinois

Illinois veterinary licenses are issued by the Illinois Veterinary Licensing and Disciplinary Board, attached to the Illinois Department of Financial and Professional Regulation.

Iowa

Iowa veterinary licenses are issued by the Iowa Board of Veterinary Medicine, attached to the Iowa Department of Agriculture and Land Stewardship.

Michigan

Michigan veterinary licenses are issued by the Michigan Board of Veterinary Medicine, attached to the Michigan Department of Licensing and Regulatory Affairs.

Minnesota

Minnesota veterinary licenses are issued by the Minnesota Board of Veterinary Medicine.

19. Contact Name	£	20. Contact Phone Number
Angela Fisher		608-219-5761

This document can be made available in alternate formats to individuals with disabilities upon request.

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

ATTACHMENT A

1. Summary of Rule's Economic and Fiscal Impact on Small Businesses (Separately for each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)

Most veterinary practices are small businesses. The Board expects the proposed rule to have minimal to no economic impact. Under the current rules, there are unintentional gaps preventing some applicants with unique circumstances from applying. The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. The proposed rule would have a positive impact on those applicants who do not currently have an application process, and would not impact other applicants or licensees.

2. Summary of the data sources used to measure the Rule's impact on Small Businesses

There are unintentional gaps and inconsistencies in current veterinary licensing processes. The Board reviewed veterinary licensing processes, assessed what process would apply to each applicant type, and identified unintentional gaps preventing applicants with unique circumstances from having a path to licensure. The proposed rule modifies veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types.

3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?

Less Stringent Compliance or Reporting Requirements

Less Stringent Schedules or Deadlines for Compliance or Reporting

Consolidation or Simplification of Reporting Requirements

Establishment of performance standards in lieu of Design or Operational Standards

Exemption of Small Businesses from some or all requirements

Other, describe:

4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses

The proposed rule would have a positive impact on those applicants who do not currently have an application process, and would not impact other applicants or licensees.

5. Describe the Rule's Enforcement Provisions

The proposed rule does not makes changes to enforcement.

6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)

🗌 Yes 🛛 No





Wisconsin Legislative Council RULES CLEARINGHOUSE

Scott Grosz Clearinghouse Director Anne Sappenfield Legislative Council Director

Margit Kelley Clearinghouse Assistant Director

CLEARINGHOUSE REPORT TO AGENCY

[THIS REPORT HAS BEEN PREPARED PURSUANT TO S. 227.15, STATS. THIS IS A REPORT ON A RULE AS ORIGINALLY PROPOSED BY THE AGENCY; THE REPORT MAY NOT REFLECT THE FINAL CONTENT OF THE RULE IN FINAL DRAFT FORM AS IT WILL BE SUBMITTED TO THE LEGISLATURE. THIS REPORT CONSTITUTES A REVIEW OF, BUT NOT APPROVAL OR DISAPPROVAL OF, THE SUBSTANTIVE CONTENT AND TECHNICAL ACCURACY OF THE RULE.]

CLEARINGHOUSE RULE **25-006**

AN ORDER to amend VE 1.14 (1) and (6), 1.16 (1), 1.18 (2), (3), and (6), 1.20 (intro.) and (2), and 1.28 (1) and (2), relating to veterinarians.

Submitted by **DEPARTMENT OF VETERINARY EXAMINING BOARD**

- 01-31-2025 RECEIVED BY LEGISLATIVE COUNCIL.
- 02-26-2025 REPORT SENT TO AGENCY.

MSK:PW

LEGISLATIVE COUNCIL RULES CLEARINGHOUSE REPORT

This rule has been reviewed by the Rules Clearinghouse. Based on that review, comments are reported as noted below:

1.	STATUTORY AUTHORITY [s.	227.15 (2) (a)]	
	Comment Attached	YES 🗸	NO 🗌
2.	FORM, STYLE AND PLACEME	ENT IN ADMINISTRATI	IVE CODE [s. 227.15 (2) (c)]
	Comment Attached	YES 🗸	NO 🗌
3.	CONFLICT WITH OR DUPLICA	ATION OF EXISTING R	ULES [s. 227.15 (2) (d)]
	Comment Attached	YES	NO 🗸
4.	ADEQUACY OF REFERENCES [s. 227.15 (2) (e)]	TO RELATED STATUT	TES, RULES AND FORMS
	Comment Attached	YES	NO 🗸
5.	CLARITY, GRAMMAR, PUNCT	FUATION AND USE OF	PLAIN LANGUAGE [s. 227.15 (2) (f)]
	Comment Attached	YES 🗸	NO 🗌
6.	POTENTIAL CONFLICTS WITH REGULATIONS [s. 227.15 (2) (g	-	TY TO, RELATED FEDERAL
	Comment Attached	YES	NO 🗸
7.	COMPLIANCE WITH PERMIT	ACTION DEADLINE RE	EQUIREMENTS [s. 227.15 (2) (h)]
	Comment Attached	YES	NO 🗸



Wisconsin Legislative Council RULES CLEARINGHOUSE

Scott Grosz Clearinghouse Director Margit Kelley Clearinghouse Assistant Director Anne Sappenfield Legislative Council Director

CLEARINGHOUSE RULE 25-006

Comments

[<u>NOTE</u>: All citations to "Manual" in the comments below are to the <u>Administrative Rules Procedures Manual</u>, prepared by the Legislative Council Staff and the Legislative Reference Bureau, dated November 2020.]

1. Statutory Authority

In the board's analysis for the proposed rule, consider identifying which subsection of s. 89.03, Stats., is relied on for statutory authority, in order to be more precise. Also, the current text of s. VE 1.01 additionally identifies s. 15.08 (5), Stats., as a source of statutory authority; should that citation be added to the board's analysis? [s. 1.01 (2) (c), Manual.]

2. Form, Style and Placement in Administrative Code

a. In the caption for the proposed rule, consider being more specific in the relating clause. The relating clause should concisely state the subject matter of the proposed order. [s. 1.01 (1) (a), Manual.]

b. In the board's analysis for the proposed rule, consider being more precise in what statutes are being interpreted. For example, the analysis cites s. 89.06, Stats., but it appears that only sub. (1) of that provision is interpreted in the proposed rule.

c. In the plain language analysis for the proposed rule, consider whether s. VE 1.16(1) should be added to the cited provisions at the beginning of the third paragraph.

d. In the board's analysis for the proposed rule, an entry should be inserted under the "Effect on Small Business" header.

5. Clarity, Grammar, Punctuation and Use of Plain Language

a. In SECTION 1 of the proposed rule, in s. VE 1.14 (1), instead of the inserted language, consider adding "Subject to s. VE 1.20," or something similar, at the beginning of s. VE 1.14 (intro.). This same comment generally applies to the last sentences in ss. VE 1.16 (1) and 1.28 (1) and (2).

b. In SECTION 2 of the proposed rule, in s. VE 1.16 (1), it is not clear what activities satisfy the requirements in sub. (1). If an applicant must pass the NAVLE within the last five years, then

the purpose of the second and third sentences is unclear. Alternatively, if an applicant may satisfy sub. (1) by either having passed the NAVLE within the last five years *or* by being deemed competent to practice or by satisfying reasonable conditions imposed by the board, then sub. (1) should be revised to make that clear.

- (1) To address this, consider revising the first sentence to require either having passed the NAVLE within the last five years *or*, if the applicant has not passed the NAVLE within the last five years, having been deemed competent to practice by the board, including satisfying any reasonable conditions imposed by the board.
- (2) Additionally, it is not clear what the effect is of being presumed competent to practice in Wisconsin or whether the board is required to impose reasonable conditions on an applicant who is presumed competent, but who has not passed the NAVLE in the last five years.
- (3) This same comment generally applies to s. VE 1.18 (3).

c. Consider revising the current title for s. VE 1.16, which refers to "qualifications for licensure by examination", to reflect the alternative licensure pathways provided in SECTION 2 of the proposed rule.

d. In SECTION 3 of the proposed rule, in s. VE 1.18 (3), consider whether the commas around "in s. VE 1.16" are necessary.

Summary of Public Comments Statement of Scope SS 109-23 Chapter VE 1 Permanent Rule Regarding Veterinary Licensing Processes

Statement of Scope Preliminary Public Hearing

In-Person in Madison and Remotely via Zoom and Telephone, 9:00 am, February 13, 2024 There were no attendees, in-person or remote.

Statement of Scope Preliminary Public Comment Period Written Comments Received through February 15, 2024

No written comments were received.

Economic Impact Analysis Public Comment Period 14 Days, Written Comments Received through December 24, 2024

No written comments were received.

Name/Organization	Position	oom and Telephone, 9:00 am, March 4, 2025 Summary of Comments
Loren Breen, Director of Policy, Research & Governmental Relations, Animal Policy Group	Support	 Thanked and congratulated the Board for joining the 18 other states who already ease access to licensing for out-of-state veterinarians. Expressed that, with recent AVMA house of delegates unanimous support of this type of position, the Group hopes that other states will follow Wisconsin and adopt these kinds of changes. Recommended removing from s. VE 1.18 the 4,000 hours over 5 years language to further remove any administrative burdens.
Marie Gilbertson	Support	 Expressed that glad this change is being made. Is an alternative path veterinarian and found the existing rules quite confusing. Asked if the 4,000 hours language only applies if the applicant doesn't meet the requirements under VE 1.16. Agreed with Loren's comments that the 4,000 hours language is challenging, and expressed that the 4,000 hours language is confusing, particularly because what it means to practice is not well defined. For example, work in wildlife research is different from a small or large animal practitioner, but still uses veterinary skills and requires a veterinary license. Encouraged further assessment of the 4,000 language.

Preliminary Rule Draft Public Hearing In-Person in Madison and Remotely via Zoom and Telephone, 9:00 am, March 4, 2025

Preliminary Rule Draft Public Comment Period

Written Comments Received through March 18, 2025

Name/Organization Position Summary of Comments	Name/Organization Position Sum	nary of Comments
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Lynne M Dzuba, DVM, Boviquine Veterinary Service SC		 Asked if the Board was going to address situations where people are practicing veterinary medicine without a license.
Jennifer Hobgood, Ph.D., Senior Director, Access to Care Policy, American Society for the Prevention of Cruelty to Animals (ASPCA)	Support	 Provided a summary of ASPCA. Described barriers to veterinary care, including a veterinary shortage. Expressed support of the rule change to enable the Board the discretion to grant licensure through endorsement without the applicant having met the prior service requirement. Recommended removing the language relating to the 4,000 hours over 5 years altogether. Explained that eighteen other states recognize licensed veterinarians from other jurisdictions.

DAH Rules Estimated Timelines

Future dates are estimates for the purposes of work planning. Last Updated: 4/3/25

										Sta	temen	t of Sco	ope										Hearin	g Draf	ťt								Final	Draft					Deadline	
						Init	iate			Governo	r		Prelim	inary He	earing ¹		Во	ard	Info	Во	ard	E	A ²	Clearin	nghouse		Hearing		Во	ard	Gov	ernor		L	egislatuı	e³		Adopt	to Refer t	
						Materials		Materials	5	Governor	Scope		Board	Notice		Record		Board			Board		Record		Receive	Notice		Record		Board		Governor			Commit.		JCRAR		Legis. (Scope	Rule Effectiv
		DATC		°.	Begin	to OS	Meeting	to OS	Scope to	Approve	Publish in				•		Materials	Approve	Commit.	Materials		Posted for	Open	Refer to		Publish in	Hearing	Open	Materials	Approve	Final to	Approve	Refer to	Refer to	Review	Refer to		Rule to	Expires)	Dat
Topic	Scope #					Review 1	with OS		Governor		Register	to OS		0	Date(s)	Until	to OS		Meetings	to OS	Draft	Comment	Until	.	Comment	Register	Date(s)	Until	to OS	Final	Governor	Final	Legis.	Commit.	Ends	JCRAR	Ends	LRB		
Vet	SS 109-23	23-R-0	03 CR 2	5-006 7	7/19/23	8/24/23	9/8/23	9/8/23	10/23/23	3 11/8/23	12/4/23	12/22/23	1/17/24	1/29/24	2/13/24	2/15/24	3/19/24	4/17/24	8/26/24	12/6/24	1/28/25	12/6/24	12/23/24	1/31/25	2/26/25	2/10/25	3/4/25	3/18/25	4/3/25	4/22/25	4/29/25	5/20/25	6/3/25	6/13/25	8/12/25	8/22/25	10/21/25	11/4/25	6/4/26	1/1/
Licensing																																								
		Rule	e Process	Step:	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9	Step 10	Step 11	Step 12	Step 13	Step 14	Step 15	Step 16	Step 17	Step 18	Step 19	Step 20	Step 21	Step 22	Step 23	Step 24	Step 25	Step 26	Step 27	Step 28	Step 29	Step 30	Step 31	Step 32	Step 33	Step 34	Expiratio	Step
	General P	rojectior	n Assump	tions:	Begin	60	14	7	30	30	14	23	23	11	7	2	23	30	90	23	270	7	60	7	30	10	30	14	23	60	7	21	14	10	60	10	60	14	30	1-
	(specif	fic project	tions may	vary) pr	rocess of	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	days	months	mon
				c	drafting	after	after	after	after	after	after	before	after	after	after	after	before	after	after	before	after	after	after	after	after	before	after	after	before	after	after	after	after	after	after	after	after	after	after	aft
					scope	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 9	Step 7	Step 9	Step 10	Step 11	Step 14	Step 12	Step 14	Step 17	Step 14	Step 17	Step 18	Step 17	Step 20	Step 23	Step 20	Step 23	Step 26	Step 24	Step 26	Step 27	Step 28	Step 29	Step 29	Step 30	Step 32	Step 33	Step 7	Step
			r	Notes:							Must be	7 days OS	Or next	Monday	At least 3	Or later	7 days OS	Or next	Only some	7 days OS	Or next	Or later if	14, 30, or		20		At least 10	Or date	7 days OS	Or next				Or next	30 days,		30 days,	Need to		1st o
											submitted	+ 14 days	Board	after	days after		+ 14 days	Board	rule	+ 14 days	Board	additional	60 days		working		days after	EIA record	+ 14 days	Board				session if	can be		can be	wait for		mon
											for publish	Board	meeting,	DATCP	publish in		Board	meeting,	packages	Board	meeting	meetings			days after		publish in	open until,	Board	meeting				referred to	extended		extended	official "no		after 1
											within 30		at least 11	submits to	register			no sooner	will have			or			refer to		register,	whichever						Legis after	to 60 days		to 60 days	action		mon
											days of		days after	publish				than 11th				complex			СН		and 20	is later						February	(+ more if		(+ more if	taken"		(+3m
											Gov		publish in					day after				rule					working							in even	hearing)		hearing)	from legis		small b
											approve		register					scope									days after							year				_		1
																		publish									refer to													
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¹JCRAR may require a preliminary public hearing for the scope statement.

³/JCRAR may require a separate, independent economic analysis any time between the EIA posting and the Governor's approval of the final draft. ³The standing committees and/or JCRAR may take actions, including requiring a meeting/hearing, making germane changes, recalling the rule, and introducing legislation.

K	ey
White	Estimated date
Blue	Actual date
Yellow	Estimated date requires revision
Red	Projection exceeds deadline (scope expires)

Veterinary Examining Board Agenda Request Form

Meeting Date	April 22, 2025
Requestor Name	Angela Fisher
Item Title for the Agenda	Legislative
Should this be in Open or	Open
Closed Session?	
Is this an Action Item or for	Information
Information Only?	
Are there Attachments?	No
(If yes, include file names)	
Is a Public Appearance	No
Anticipated?	
Description of the Agenda Item	

Description of the Agenda Item

The 2024-2025 legislative session began in January 2025.

Veterinary Examining Board Agenda Request Form

Meeting Date	April 22, 2025
Requestor Name	Angela Fisher
Item Title for the Agenda	Biennial Budget
Should this be in Open or	Open
Closed Session?	
Is this an Action Item or for	Information
Information Only?	
Are there Attachments?	No
(If yes, include file names)	
Is a Public Appearance	No
Anticipated?	
Description of the Agenda Item	

The Governor released his biennial budget recommendations on February 18th, and included the following item related to VEB:

• *Veterinary Examining Board Positions.* The Governor recommends creating 1.0 PR FTE for the Veterinary Examining Board. The position will assist with investigations, monitoring, and enforcement for the board. Also, 0.75 PR FTE would be transferred from the dog sellers program to better align funding sources. The board appropriation would be changed to allow funds to be used to provide dog license tags and forms, perform other activities related to regulation of dogs, administer rabies control, and carry out activities related to humane officers.

The Joint Committee on Finance (JFC) in the Legislature has begun their biennial budget process. JFC might decide to create a similar item in their budget, or they might not.

Items may be added, removed, and changed throughout the biennial budget process. The budget will not be final until it is approved by the Legislature and signed by the Governor.

Veterinary Examining Board Agenda Request Form

Meeting Date	April 22, 2025
Requestor Name	M. mace
Item Title for the Agenda	Strategic plan report
Should this be in Open or	Open
Closed Session?	
Is this an Action Item or for	Information
Information Only?	
Are there Attachments?	Yes
(If yes, include file names)	2024 Strategic Plan KPOs
Is a Public Appearance	No
Anticipated?	

Description of the Agenda Item

Update on Strategic Plan Goals

Begin discussion on 2025-2026 Strategic goals.

VEB Strategic Plan: July 2024-June 2025

				July to September, 2024	October to December, 2024
Core Strategy	Key Performance Objective (KPO)	Current Lead	Status	Status Notes	Status Notes
Licensure Process	Update the State Exams	Melissa Mace	Completed		State exam split to be one exam for CVTs and one for Veterinarians. Both updated
Licensure Process	Update the licensure forms	Jonathan Bent	in process		Citations have been updated. Further updating will need to be done after rule package
Licensure Process	for veterinarians	Melissa Mace	in process		
Transparency with public and credential holders: Discipline	Review the current discipline list's format to determine if there is a presentation that provides clearer information to the public. Current list contains the issuance of the FDO (no definitions included) and FLO (again no definitions), terminology is used inconsistently, it is also not sortable, or easily searchable	Dustin Boyd	in process		October 2024 - Initiated contact with BITS to add definitions to list, defining FDO and FLO. Definitions of acronyms added to public website as a temporary solution until below KPO is completed (creating a portal)
Transparency with public and credential holders: Discipline	Assess the viability of creating a portal where the public can easily download the referenced discipline.	Dustin Boyd	ongoing		October 2024 – Met with DSPS for demo of their portal. Met with software rep who created DSPS's portal to discuss feasibility of making similar software work with DATCP's current CRM system Met w/BITS on 10/31, saw demo of other Division's licensed displays. Think this internal solution will work.
Communication with Board/public and credential holders; non compliance trends	Provide a report at the 1/4ly board meetings on the top 5 violation resulting in discipline prior quarter.	Dustin Boyd	ongoing	a. (6) violations of VE 1.58(26)(a) – Falsely certifying to have completed 30 hours of CE. b. (3) violations of VE 1.58(2) - Lack of knowledge or ability to apply professional principles or skills. c. (1) violation of each of the following: i. VE 1.58(1) - The personal use, misuse, or sale (other than to a patient) of controlled substances ii. VE 1.58(20) - Refusal, upon request, to cooperate in a timely manner with the board's investigation iii. VE 1.58(21) - Failure to inform a client prior to treatment of the diagnostic and treatment options consistent with the veterinary profession's standard of care iv. VE 1.58(3)(b) - The making of false claims regarding testing, inspecting, reporting or issuing of inter-state, intra-state or export health certificates v. VE 1.58(5)(a) - Claiming to have performed an act or given a treatment which has not in fact been performed or given. vi. VE 1.58(7) - Violating or aiding and abetting the violation of any law or administrative rule or regulation substantially related to the practice of veterinary medicine. vii. VE 2.58(5)(a) - Claiming to have performed on the or regulation substantially related to the practice of veterinary medicine. vii. VE 2.58(1)(a) - Falsely certifying to have completed 15 hours of CE	 (7) violations of VE 1.58(2) - Lack of knowledge or ability to apply professional principles or skills. (3) violations of VE 1.58(26)(a) - Falsely certifying to have completed 30 hours of CE. (3) violations of VE 1.58(27) - Fallure to inform a client prior to treatment of the diagnostic and treatment options consistent with the veterinary profession's standard of care (2) violations of VE 1.44(5)(b) – Improper delegation of sample collection via cystocentesis procedure. (2) violations of VE 1.58(19) - Failure to maintain records as required.
Communication with Board, public and credential holders; non compliance trends	CVT program outreach	Jonathan Bent	in process		Met with WTCS on new VTNE process on Jan 13. Offered to do a webinar with students to 'introduce' the VEB and go over licensing and complaint processes, they were not interested. Jonathon is working on updating the website and creating licensing 'check list' for CVTs.
Communication with Board, public and credential holders; General information	Annual newsletter for distribution.	Melissa Mace			
Workload Management/Budget	Work with DATCP to create and support a budget request for 2.0 FTE to support the VEB in investigations, VPAP administrations, and policy and rule development	Melissa Mace/Angela Fisher	in process	White Paper on position submitted to Secretary's office	No position requested in the DATCP budget. Hopefully in Governors budget.
VPAP	Complete RFP process, secure a 2025-2026 provider	Melissa Mace	Completed		TELUS Health contract is signed for service thru 2026 with option for further years.
VPAP	Host 6 VPAP specific webinars	Melissa Mace	in process	Living Well With Stress: 12 attendees	Seasonal Stress; 15 attendees.
VPAP	Send a monthly outreach to credentialing holders on VPAP services and the focus of the month.		ongoing	Monthly VPAP newsletters sent.	Monthly Newsletters sent.
	1	Melissa Mace	Completed	Drs. Holter and Solverson attended conference	
AAVSB	Attend the Annual Conference			along with ED Mace.	