

VETERINARY EXAMINING BOARD

October 16, 2024

9:00am

Contact: Melissa Mace 608-279-3861

In Person: Boardroom CR 106, 2811 Agriculture Drive, Madison, WI 53718

Via Zoom: <https://www.zoomgov.com/j/1603449656?pwd=dTZFBHU2cpYTAemTStE34YLYlQ6bcl.1>

Via Telephone Access: Dial 1 669 254 5252 Meeting ID: 160 344 9656 and participant code: 496514

If you would like to provide comment to the board 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. Tuesday, October 15, 2024

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

III. Approval of Board Meeting Minutes (Action Item)

- A. July 17, 2024 Full Board Meeting
- B. August 26, 2024 Admin Rule Committee Meeting
- C. September 18, 2024 Ad Hoc Meeting

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 state their name, address, who you are representing (if other than yourself), and the topic of your comments. (If in person complete an appearance card)

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

- A. 2024 AAVSB annual meeting attendee report out

VII. Administrative Items (informational)

- A. PAVE for CVTs
- B. VPAP quarterly report and update

C. Required trainings for board members

VIII. Guidance (Action)

- A. Emergency Clinic Intake
- B. Regional Anesthesia

IX. Administrative Code Updates (Action Item)

- A. VE 1 Evaluation

X. Legislative and Policy Update and Development of Board Position on Pending Legislation

- A. Legislative Priorities (discussion)
- B. Budget (informational)

XI. Strategic Goals (Informational)

- A. 2024 Strategic plan report

XII. Future Meeting Dates and Times (Action Item)

- A. Set future board meeting dates for 2025

XIII. 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.).

XIV. Deliberation on Licenses and Certificates (Action Items)

XV. Deliberation on Compliance Matters (Action Items)

A. Proposed Administrative Warnings

- 1. 24 VET 064 ES
- 2. 24 VET 062 RM

B. Proposed Stipulations, Final Decisions and Orders

- 1. 23 VET 134 BD
- 2. 23 VET 111 and 24 VET 034 JE
- 3. 23 VET 129 AE
- 4. 24 VET 048 PB
- 5. 24 VET 017 and 24 VET 042 JSR
- 6. 24 VET 022 JY
- 7. 24 VET 059 JF
- 8. 21 VET 128, 22 VET 011, 22 VET 059, and 23 VET 008 CR
- 9. 23 VET 058 and 23 VET 113 RM

C. Proposed Orders Granting Full Licensures

1. 24 VET 004 AD

D. Investigations Recommended for Closure

1. 24 VET 045 KI
2. 24 VET 068 KK
3. 24VET008. 24VET009. 24VET101 JSR

XVI. Review of Veterinary Examining Board Cases (Informational)

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

XVII. RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

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

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

XX. Ratification of Licenses and Certificates

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

XXI. ADJOURNMENT

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

VETERINARY EXAMINING BOARD

July 17, 2024

9:00am

Meeting Minutes

MEMBERS PRESENT: In person: Hunter Lang, DVM; Alan Holter, DVM; Stephanie Miesen, DVM
Virtual: Lyn Schuh, CVT; Karl Solverson, 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; Angela Fisher, Program and Policy Analyst; Jonathan Bent, Licensing Associate; Karen Torvell, Program Assistant Supervisor; Axel Candelaria Rivera, Attorney.

Hunter Lang, Chair, called the meeting to order at 9:07am. A quorum of five (5) members was confirmed.

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

II. Approval of the Agenda (action item)

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

III. Approval of Board Meeting Minutes (action items)

A. April 17, 2024 Full Board Meeting

MOTION Stephanie Miesen: moved, seconded by Lyn Schuh, to approve the April 17, 2024 board meeting minutes. Motion carried unanimously

B. May 7, 2024 Ad Hoc Board Meeting

MOTION Alan Holter: moved, seconded by Lyn Schuh, to approve the May 7, 2024 ad hoc board meeting minutes. Motion carried unanimously

IV. Introductions, Announcements and Recognition (informational)

A. Reappointments – Dr. Solverson and Dr. Estelle's terms end on July 1, 2025. Dr. Estelle is unavailable to serve a second term, but Dr. Solverson is willing to stay on the VEB until a replacement is found.

B. Board officers and committee appointments changeover

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

- A. AAVSB Annual Meeting & Conference, San Diego, CA Sept. 25-28 – The AAVSB provides funding for two board member delegates to travel and attend. Board members are encouraged to contact Melissa Mace if interested in attending.
- B. AAVSB Services Presentation – Dr. Beth Venit, Chief Veterinary Officer of the AAVSB, and Dr. Tim Kolb, AAVSB board member and Vice-President of the Ohio Veterinary Medical Licensing Board, provided an overview of the association’s services. See attached pdf of their presentation.

VII. Administrative Items(informational)

- A. VPAP Quarterly Report – Melissa Mace presented the report, noting that utilization was down for the first half of the year. She attributed this to the program lacking a public information officer during that time, greatly decreasing the amount of program messaging. Three webinars are planned for the year, with hopes for adding a fourth.
- B. Emergency Veterinarian Services – The VEB received a complaint regarding availability of emergency veterinary services, specifically the distance between clinics and that clinics are not required to provide veterinary care. This is not covered by VEB statute or rule. Dustin Boyd noted that the complaint’s stated lack of clinics seems to be overstated.
- C. AVMA HOD Report – Dr. Lang reported that discussions included guidelines for transport of animals, responsibility for standard of care at corporate practices, and integration of artificial intelligence through transcription services and diagnostic software. The AVMA will partner with the medical community to create guidelines for use of AI in veterinary medicine. Further discussion topics included the AVMA’s model practice act, virtual VCPR, veterinary technician utilization, license portability, veterinary examining boards, and progress on national xylazine legislation.
- D. AABP CVT Guidelines vs. WI VE 1.44 – Dr. Lang noted that a necessary adaptation of the guidelines for Wisconsin veterinarians is the different requirements and definitions of indirect and direct veterinary supervision.

VIII. Guidance Document (action item)

- A. VCPR timely exams – Angela Fisher presented the edited document to the board.

MOTION: Stephanie Miesen moved, seconded by Alan Holter, to approve guidance on VCPR timely exams. Motion carried unanimously.

IX. Licensing/Exam Inquiries (informational) – Nothing to present or discuss at this meeting.

X. Administrative Code

- A. VE 1 Evaluation (**action item**) – Angela Fisher presented the changes proposed by DATCP staff, noting where state statute 89 prevents rule changes. This was specifically noted in reference to applicants for licensure by endorsement who have disciplinary action against their license from another jurisdiction. A more detailed discussion is planned for the Administrative Rules Committee meeting.

MOTION: Karl Solverson moved, seconded by Stephanie Miesen, to refer the VE 1 evaluation to Admin Rules Committee. Motion carried unanimously.

XI. Legislative and Policy (informational)

- A. Legislative update – Angela Fisher expects that another reciprocal credential bill will be introduced in the next legislative session. The differences between rule changes and statute changes were also presented.
- B. Biennial Budget – Budget requests for two full-time VEB positions will be sent to the office of the secretary: one for investigation, monitoring, and effective enforcement; the other for program and policy analysis.

XII. Strategic Plan

- A. 2023 Goals (informational) – Melissa Mace reviewed the completed 2023 goals, including sending two voting members to the AAVSB Annual Meeting, having an AAVSB presentation at a VEB meeting, elevating awareness of the VPAP, completion of the guidance document clarifying that mental health is pertinent to veterinary medicine, streamlining the complaint process, and outreach to credential holders.
- B. 2024 Changes (discussion) – 2024 strategic goals include: review and update the state exam, update licensure forms, continue the VE 1 rule evaluation to streamline the licensing process, make compliance/disciplinary public documents more available to the public, continue support for the VPAP program through webinars and outreach, and present at the Vet School and at a Veterinary Technician program.

MOTION: Alan Holter moved, seconded by Stephanie Miesen to approve 2024 strategic plan. Motion carried unanimously.

XIII. Future Meeting Dates and Times

- A. AAVSB Voting Items Review Sept. 18 9am – Dr. Holter has proposed a special meeting to review and discuss the voting items before the upcoming AAVSB Annual Meeting.
- B. Next Board Meeting – October 16, 2024

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: Alan Holter – yes; Karl Solverson – yes; Hunter Lang – yes; Lyn Schuh – yes; Stephanie Miesen – yes. Motion carried.

XV. Deliberation on Licenses and Certificates (action items)

XVI. Deliberation on Compliance Matters (action items)

A. Proposed Administrative Warnings

1. 24 VET 002 BG
2. 24 VET 026 BK
3. 24 VET 024 AV
4. 23 VET 103 KS

B. Proposed Stipulations, Final Decisions and Orders

1. 24 VET 020 SH
2. 23 VET 118 BG
3. 24 VET 004 AD
4. 24 TECH 002 AL
5. 23 VET 120 SR
6. 20 VET 046; 20 VET 057; 20 VET 062; 20 VET 097; 20 VET 098; 21 VET 029; 21 VET 030; 21 VET 031; 21 VET 032; 21 VET 033 MR
7. 24 VET 041 TG
8. 23 VET 067; 23 VET 105 EM

C. Orders Granting Full Licensure

1. 23 VET 124 JSR

D. Investigations Recommended for Closure

1. 23 VET 114 KK

E. Suspension Orders

XVII. Review of Veterinary Examining Board Cases

- A. Licenses Returned to Full Status (Informational)
- B. Pending Case Status Report (informational)

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

MOTION: Alan Holter moved, seconded by Stephanie Miesen, to issue warning notices in the cases of: 24 VET 002 BG; 24 VET 026 BK; 24 VET 024 AV; 23 VET 103 KS. Motion carried unanimously.

MOTION: Alan Holter moved, seconded by Stephanie Miesen to accept stipulations and final decision orders in the cases of: 24 VET 020 SH; 23 VET 118 BG; 24 VET 004 AD; 24 TECH 002 AL; 23 VET 120 SR; 20 VET 046, 20 VET 057, 20 VET 062, 20 VET 097, 20 VET 098, 21 VET 029, 21 VET 030, 21 VET 031, 21 VET 032, 21 VET 033 MR; 24 VET 041 TG; 23 VET 067, 23 VET 105 EM. Motion carried unanimously.

MOTION: Stephanie Miesen moved, seconded by Hunter Lang, to accept orders granting full licensure in the case of 23 VET 124 JSR. Motion carried unanimously.

MOTION: Hunter Lang moved, seconded by Hunter Lang, to close case 23 VET 114 KK. Motion carried unanimously.

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: Alan Holter moved, seconded by Lyn Schuh, to delegate ratification of examination results to DATCP staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

XXII. ADJOURNMENT

MOTION: Alan Holter moved, seconded by Hunter Lang to adjourn. Motion carried unanimously.

The meeting adjourned at 11:18 am.

**VETERINARY EXAMINING BOARD
ADMINISTRATIVE RULES COMMITTEE**

MEETING MINUTES

August 26, 2024

MEMBERS PRESENT: Hunter Lang, DVM; Leslie Estelle, DVM.

STAFF PRESENT, Department of Agriculture, Trade and Consumer Protection (DATCP): Melissa Mace, VEB Executive Director; Aaron O'Neil, DATCP Attorney; Angela Fisher, Program and Policy Analyst; Jonathan Bent, Licensing Associate.

Hunter Lang, Chair, called the meeting to order at 10:00 am. A quorum of two (2) members was confirmed.

I. 10:00 A.M. OPEN SESSION – CALL TO ORDER – ROLL CALL

II. Approval of the Agenda

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

III. VE 1 Veterinarian Licensing Process Evaluation, Discussion, and Proposals

The committee discussed current licensing processes and different types of applicants. The committee discussed proposed changes to VE 1 veterinary licensing processes to ensure there are appropriate processes for all applicant types. The proposed changes to VE 1 will be brought to the quarterly VEB meeting for discussion by the full board.

IV. ADJOURNMENT

MOTION: Leslie Estelle moved, seconded by Hunter Lang, to adjourn. Motion carried unanimously.

The meeting adjourned at 10:35 am.

**VETERINARY EXAMINING BOARD
SPECIAL MEETING:
AAVSB ACTION DISCUSSION**

MEETING MINUTES

September 18, 2024

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

STAFF PRESENT, Department of Agriculture, Trade and Consumer Protection (DATCP): Melissa Mace, VEB Executive Director; Aaron O’Neil, DATCP Attorney; Jonathan Bent, Licensing Associate.

Hunter Lang, Chair, called the meeting to order at 9:03 am. A quorum of two (6) members was confirmed.

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

II. Approval of the Agenda (action item)

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

III. 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.

IV. American Association of Veterinary State Boards (AAVSB) Matters (Action)

A. 2024 AAVSB Annual Meeting Items for Vote:

1. Bylaw amendment

MOTION Alan Holter: moved, seconded by Leslie Estelle, to support the proposed bylaw amendment. Motion carried unanimously

2. Resolutions

MOTION Alan Holter: moved, seconded by Karl Solverson, to support the proposed resolutions. Motion carried unanimously

3. Proclamations

MOTION Leslie Estelle: moved, seconded by Stephanie Miesen, to support the proposed proclamations. Motion carried unanimously

4. Selection of Nominees – Board members discussed the value in supporting someone new to the role with new ideas versus supporting an experienced candidate with established knowledge.

MOTION Alan Holter: moved, seconded by Karl Solverson, to support the Dr. Frank Walker for AAVSB veterinarian representative to ICVA. Motion carried unanimously

- V. **ADJOURNMENT** – Before adjourning, the board noted their appreciation of Dr. Holter for suggesting that this meeting take place, supporting the idea of having a special meeting before the AAVSB annual meeting & conference each year.

MOTION: Leslie Estelle moved, seconded by Stephanie Miesen to adjourn. Motion carried unanimously.

The meeting adjourned at 9:18 am.

**Veterinary Examining Board
Agenda Request Form**

Meeting Date	Oct 16
Requestor Name	Dr. Alan Holter
Item Title for the Agenda	2024 AAVSB annual meeting attendee report out
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)	Yes
Is a Public Appearance Anticipated?	No
Description of the Agenda Item Dr. Holter and Dr. Solverson attended the 2024 AAVSB meeting as the WI delegates,. Melissa Mace attended Executive Director sessions and stayed for general meeting and education sessions	

AAVSB Annual Meeting - San Diego, CA. Sept. 2024

Notes and comments by Alan Holter DVM

AAVSB services

- Outreach and Engagement
- VAULT
- License Mobility
- New VTNE Application process
- RaceTrack - new offering of helping find subjects for CE

Talk from PSI - company that develops NAVLE testing - testing and protocols described

Treasurers Report

AAVSB Board of Directors Report

Executive Session - discussed BOD member being asked not to apply for 2nd term

Nominating Committee -

Legal Cases

Facility Inspections: Ontario rep. discussed procedures and protocols

Discussed on D,E,I: many factors and ideas

Appears that the public is demanding DEI but Governments, Institutions and Businesses are eliminating them.

Mental Health and Cognitive Decline in Veterinarians

- Estimated that 9% of people over 65 years of age show some symptoms of cognitive decline
- Questions:
 - VEB screen Respondants?
 - Provide more education?
 - Work with WVMA on CE?
 - Competency exam every 10 years?

International panel:

- CEO from Royal College of Veterinary Surgery
- CEO from New Zealand Veterinary Council
- Representative from Food Safety Industry in Italy

All have same concerns with work force shortages, AI and utilization of technicians

AAVSB Veterinary Team Survey: Understanding the results.

Looked at if CVT's and DVM's want a mid level practitioner (AAHP: Advance3d Animal Healthcare Provider)

Questions about Policy - mixed support
Questions about Tasks - did not support

Question if there is a need: 1/3 yes, 1/3 no and 1/3 unsure

Supporters of an AAHP still say CVT's are better utilized and support CVT's more

Did not find market support for AAHP

AAVSB not currently working on Model Practice Act revisions to include AAHP and are not looking at testing and credentialing.

Recommend review CVT Scope of Practice
77% support expanded scope with additional training

Things to think about in Practice Acts:

Evaluate vs Diagnose
Surgery vs Procedure
Prescribe vs Dispense

Controlled Substance Overview and Best Practices DEA

Diversion Controlled Division - how illegal drugs enter supply chain, etc.
Drug trafficking

DEA registration - can have drugs in vet truck in the state - if you go to another state - now ok.

DVM's do not need DEA opiod training

Drugs in the clinic are owned by vet with DEA license - recommend Power of Attorney so someone else can dispense these drugs.

DEA actions:

- Administrative Actions
- Civil fines
- Criminal Prosecution
- Criminal fines

Case studies:

Discussed red flags for clients doctor shopping for drugs.

Discussed potential signs of Diversion and Drug Addiction

Best Practices

- checks and balances - more than one person involved
- review losses
- review unbalanced counts
- situational awareness
- Security
- etc

Impact of Public Members and CVT's on Boards

- Need to recognize their importance
- Their presence elevates the veterinary profession as a whole

All members need to

“Follow the intent of the Legislature with the goal of public protection”

I am happy to expand further on any of these subjects or any events of this meeting if requested.

Veterinary Examining Board Agenda Request Form

Meeting Date	Oct 16
Requestor Name	
Item Title for the Agenda	PAVE for CVTs
Should this be in Open or Closed Session?	Open
Is this an Action Item or for Information Only?	Information Only
Are there Attachments? (If yes, include file names)	No
Is a Public Appearance Anticipated?	No
Description of the Agenda Item	
<p>AAVSB now offers PAVE for CVTs. At the July meeting the Board asked that we determine if WI would be able to accept PAVE for CVTs.</p> <p>VEB can't accept the PAVE for CVTs to satisfy 89.06(3) because the PAVE certificate is issued by AAVSB, which is not a technical school or college as required.</p> <p>However, the Board is able to approve the schools at which an appropriate education was received. So a foreign schooled applicant can provide their transcripts of initial education along with any additional education taken at technical schools or colleges to receive their PAVE certificate, and the Board can assess equivalency and approve the education received thru those schools as equivalent.</p> <p>Wis Chapter 89.06(3)</p> <p>(3) A veterinary technician certification may be issued only to a person who is at least 18 years of age and has either:</p> <p>(a) Successfully completed a 4-semester course of study in animal technology or its equivalent, <u>at a technical school or college approved by the examining board</u>, and has passed an examination, administered by the examining board, which establishes that the applicant's knowledge of animals and their treatment is sufficient to qualify the applicant as a veterinary technician; or</p>	

Veterinary Examining Board Agenda Request Form

Meeting Date	July 17, 2024																			
Requestor Name	M. Mace																			
Item Title for the Agenda	VPAP Update																			
Should this be in Open or Closed Session?	Open																			
Is this an Action Item or for Information Only?	Information Only																			
Are there Attachments? (If yes, include file names)	Yes																			
Is a Public Appearance Anticipated?	No																			
Description of the Agenda Item																				
<p>VPAP Update; Utilization reports attached</p> <p>Hosted Webinars:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Date</th> <th style="width: 60%;">Title</th> <th style="width: 25%;">Attendance</th> </tr> </thead> <tbody> <tr> <td>June 27 Noon</td> <td>Working with Challenging Customer Behaviors</td> <td style="text-align: center;">34</td> </tr> <tr> <td>Sept 12 Noon</td> <td>Living Well with Stress</td> <td style="text-align: center;">12</td> </tr> <tr> <td>Sept 18 Noon</td> <td>Orientation</td> <td style="text-align: center;">1</td> </tr> <tr> <td>Nov 12 Noon</td> <td>Seasonal Stress</td> <td></td> </tr> <tr> <td>Nov 14 Noon</td> <td>Orientation</td> <td></td> </tr> </tbody> </table>			Date	Title	Attendance	June 27 Noon	Working with Challenging Customer Behaviors	34	Sept 12 Noon	Living Well with Stress	12	Sept 18 Noon	Orientation	1	Nov 12 Noon	Seasonal Stress		Nov 14 Noon	Orientation	
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Sept 18 Noon	Orientation	1																		
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Nov 14 Noon	Orientation																			
RFP for 2025 VPAP closed TELUS Health retained the contract																				

[Overall Summary](#)[Trends](#)[Demographic](#)[Appendix](#)[Glossary](#)[Summary](#)[Participant](#)[Organization](#)

Summary (January 2024 to September 2024)

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 2024 to September 2024

During this reporting period, the program covered a population of **6,778**, resulting in a utilization rate of **0.38%** and an annualized utilization of **0.51%**. This is below the same period twelve months prior with **0.50%**.

Utilization

Annualized Utilization

0.38% **0.51%**[View Utilization Breakdown](#)

Counselling Services

0.35%

Work/Life Services

0.03%

Organizational Cases

Management Consultations

0

Critical Incident Services

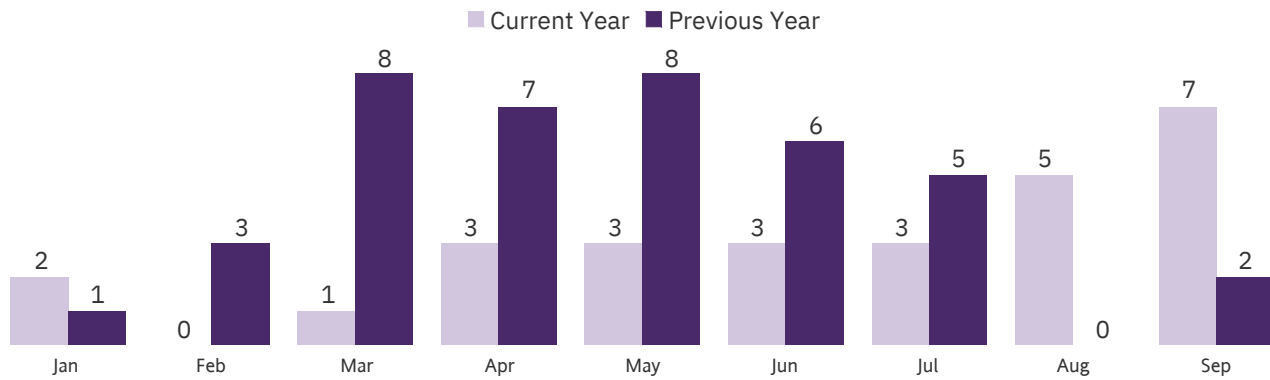
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Workplace Support Programs

0

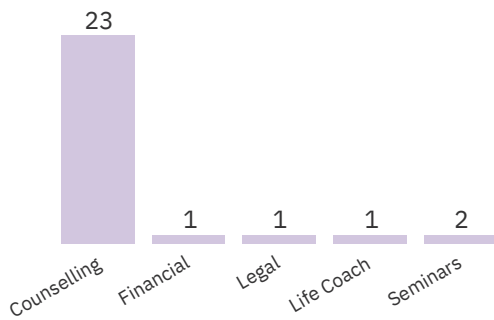
Comparative Prior Year vs. Current Year

Cases by Month



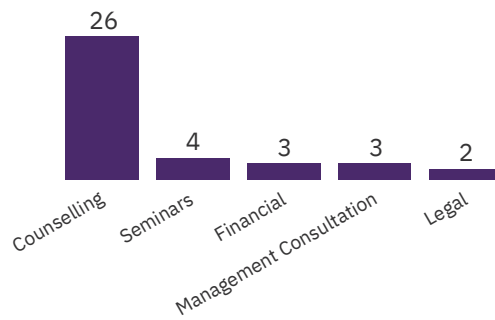
Case totals by top services

Current year



Case totals by top services

Previous Year



Participant (January 2024 to September 2024)

Total number of unique participants

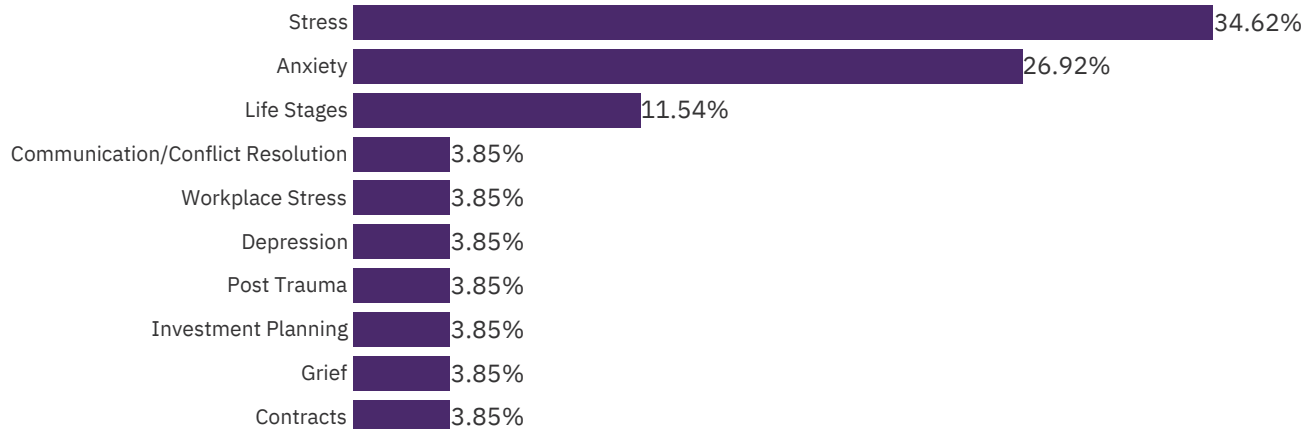
20

New
16

Re-access
4

Participant Services	Q1	Q2	Q3	Q4	Current Total
General Counselling	3	7	14	0	24
Counselling	3	7	13	0	23
Life Coach	0	0	1	0	1
Work/Life	0	1	1	0	2
Financial	0	0	1	0	1
Legal	0	1	0	0	1
Total	3	8	15	0	26

Issues



[Overall Summary](#)

[Trends](#)

[Demographic](#)

[Appendix](#)

[Glossary](#)

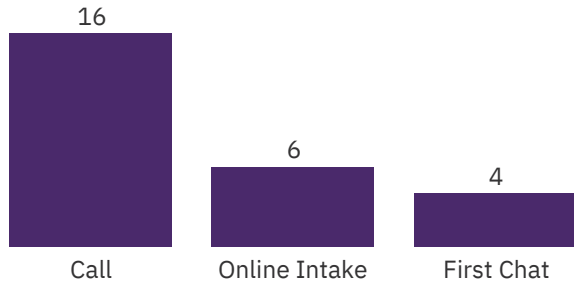
[Summary](#)

[Participant](#)

[Organization](#)

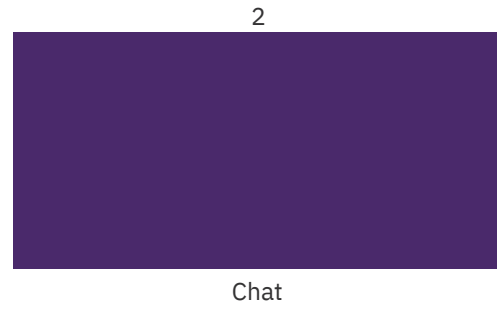
Cases by intake type

26

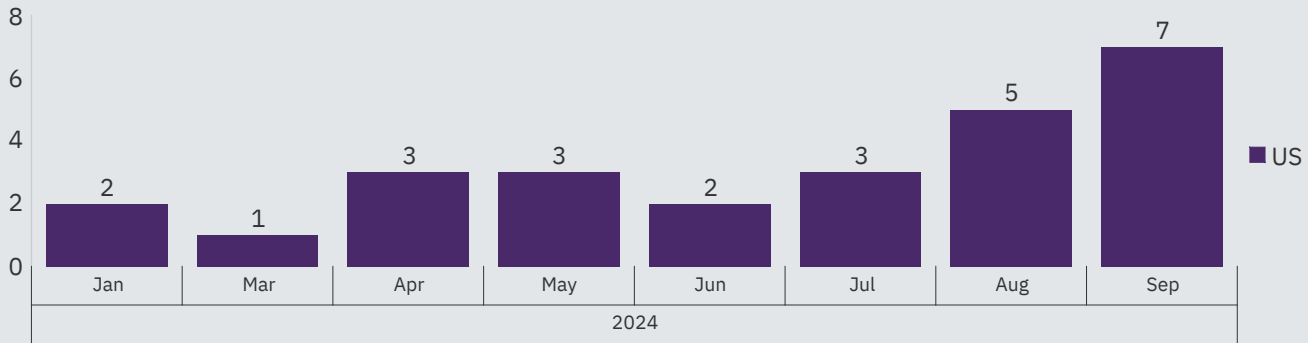


Service inquiries by intake type

2



Participant cases by month



[Overall Summary](#)

[Trends](#)

[Demographic](#)

[Appendix](#)

[Glossary](#)

[Summary](#)

[Participant](#)

[Organization](#)

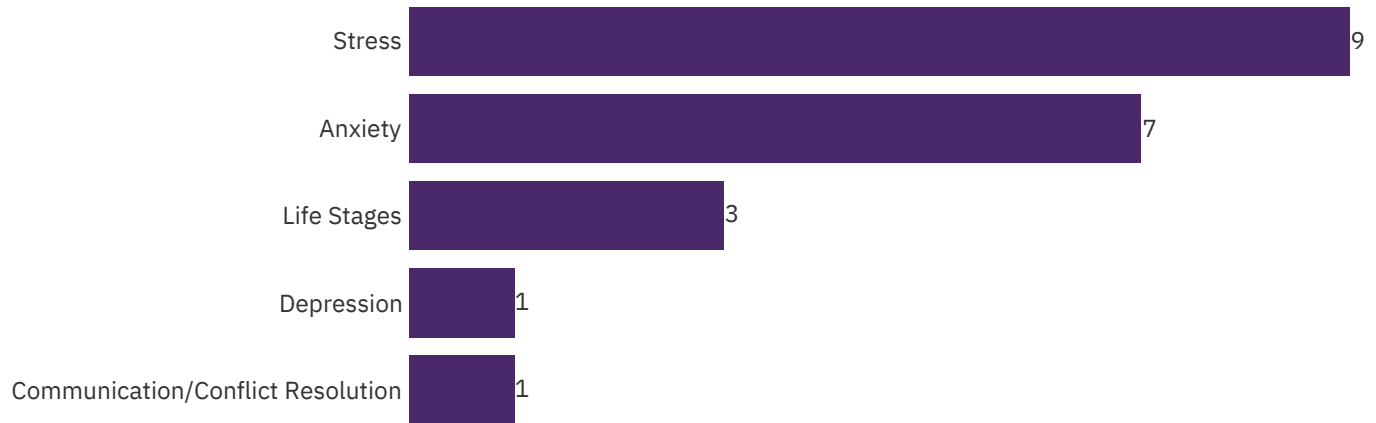
Organization (January 2024 to September 2024)

Organizational Solutions	Q1	Q2	Q3	Q4	Current Total
Training	0	1	1	0	2
Total	0	1	1	0	2

Emerging Issues (January 2024 to September 2024)

General Counselling

Top Issues



Top Modalities



Couple/Relationship	Q1	Q2	Q3	Q4	Current Total	Previous Year
Communication/Conflict Resolution	0	1	0	0	1	4.17%
Relationship - General	0	0	0	0	0	0.00%

Overall Summary

Trends

Demographic

Appendix

Glossary

Emerging Issues

Utilization

Relationship Breakdown	0	0	0	0	0	0.00%	1	3.57%
Total	0	1	0	0	1	4.17%	5	17.86%

Personal/Emotional	Q1	Q2	Q3	Q4	Current Total		Previous Year	
Stress	1	2	6	0	9	37.50%	3	10.71%
Anxiety	1	1	5	0	7	29.17%	6	21.43%
Life Stages	0	2	1	0	3	12.50%	2	7.14%
Depression	1	0	0	0	1	4.17%	0	0.00%
Grief	0	0	1	0	1	4.17%	1	3.57%
Post Trauma	0	0	1	0	1	4.17%	2	7.14%
Total	3	5	14	0	22	91.67%	14	50.00%

Work Related	Q1	Q2	Q3	Q4	Current Total		Previous Year	
Workplace Stress	0	1	0	0	1	4.17%	8	28.57%
Total	0	1	0	0	1	4.17%	8	28.57%

Work-Related	Q1	Q2	Q3	Q4	Current Total		Previous Year	
Work Performance	0	0	0	0	0	0.00%	1	3.57%
Total	0	0	0	0	0	0.00%	1	3.57%

	Q1	Q2	Q3	Q4	Current Total		Previous Year	
General Counselling	3	7	14	0	24	100.00%	28	100.00%

Work/Life

Top Issues



Top Modalities



Financial	Q1	Q2	Q3	Q4	Current Total	Previous Year
Investment Planning	0	0	1	0	1	50.00%
Divorce	0	0	0	0	0	0.00%
Estate	0	0	0	0	0	0.00%
Total	0	0	1	0	1	50.00%

[Overall Summary](#)

[Trends](#)

[Demographic](#)

[Appendix](#)

[Glossary](#)

[Emerging Issues](#)

[Utilization](#)

Legal	Q1	Q2	Q3	Q4	Current Total		Previous Year	
Contracts	0	1	0	0	1	50.00%	1	20.00%
Consumer Protection	0	0	0	0	0	0.00%	1	20.00%
Total	0	1	0	0	1	50.00%	2	40.00%

	Q1	Q2	Q3	Q4	Current Total		Previous Year	
Work/Life	0	1	1	0	2	100.00%	5	100.00%

[Overall Summary](#)

[Trends](#)

[Demographic](#)

[Appendix](#)

[Glossary](#)

[Emerging Issues](#)

[Utilization](#)

Utilization (January 2024 to September 2024)

Weighted population for the report period was: 6,778

[Back to Summary](#)

Case Utilization	Q1	Q2	Q3	Q4	Current Quarter Utilization	Current Total	Utilization	Annualized Utilization
<i>Population</i>	6,870	6,870	6,595	0		6,778		
<i>General Counselling</i>	3	7	14	0	0.21%	24	0.35%	0.47%
<i>Work/Life</i>	0	1	1	0	0.02%	2	0.03%	0.04%
Total	3	8	15	0		26		

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.

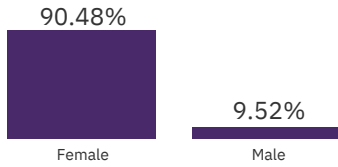
Utilization by Region

Region	Population	Q1	Q2	Q3	Q4	Current Total	Utilization
North America	6,778	3	8	15	0	26	0.38%
Overall	6,778	3	8	15	0	26	

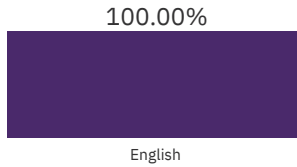
North America	Population	Current Total	Current Utilization	Previous Year Utilization
UNITED STATES OF AMERICA	6,778	26	0.38%	0.50%
Overall	6,778	26		

Demographic (January 2024 to September 2024)

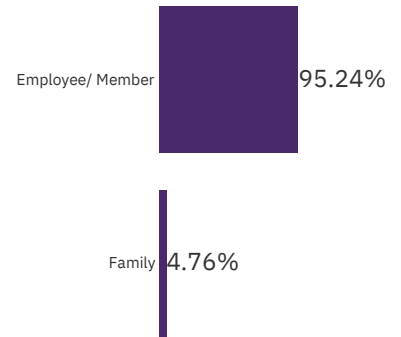
Gender



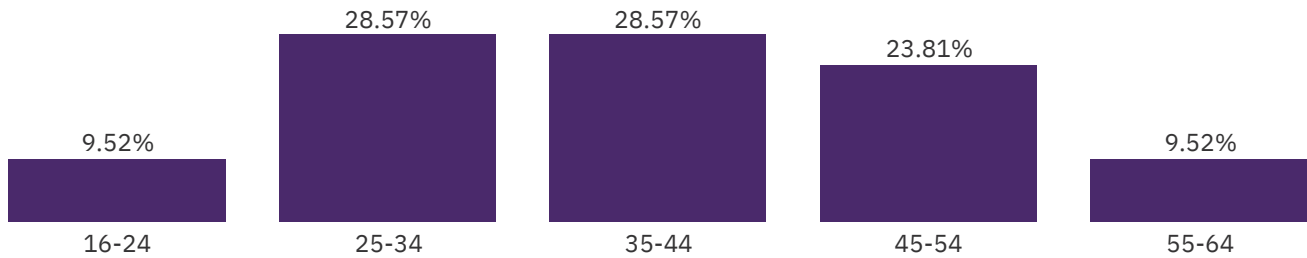
Language



Category

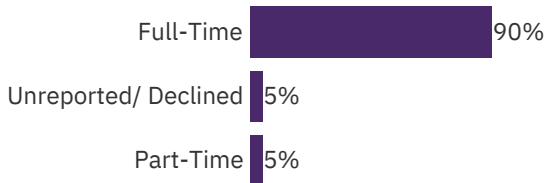


Age

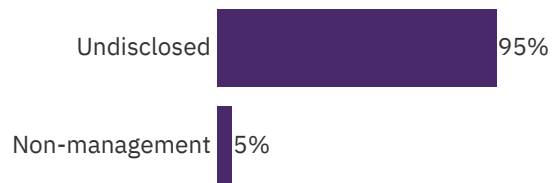


Profile

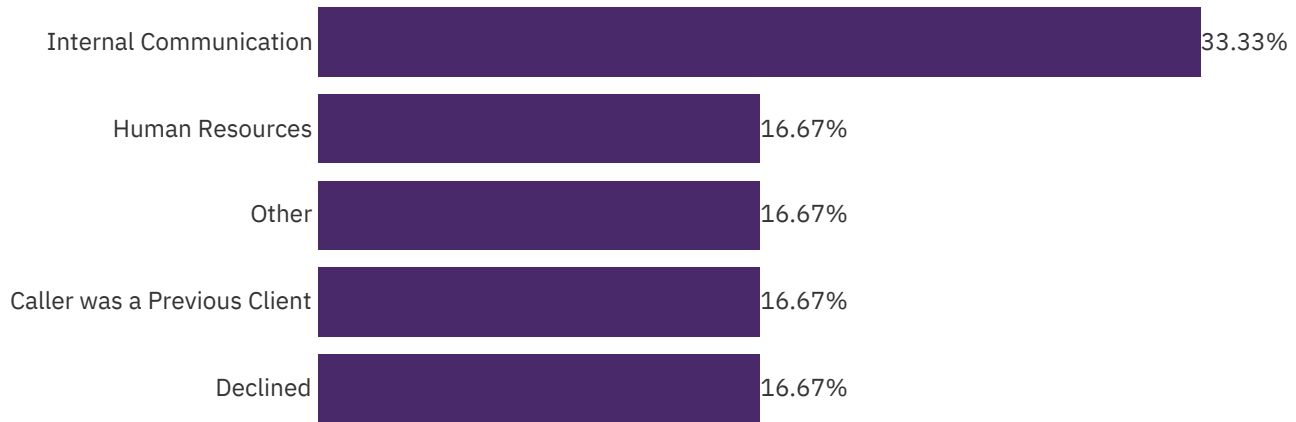
Employee/Member Status



Management Status



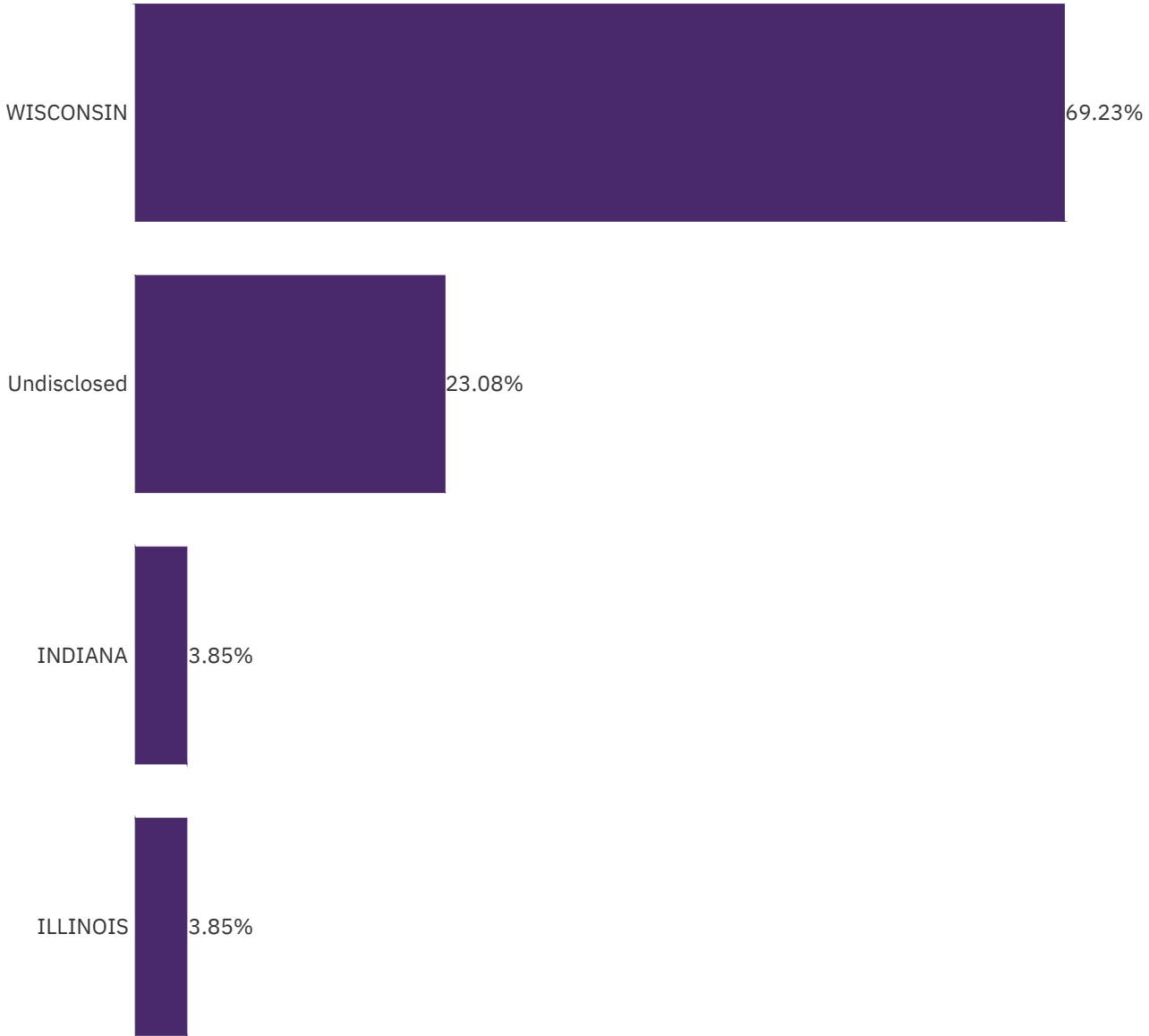
How did you hear about us?



Years of Service



Cases by State/Province



Province/State Legend

Province/State	Cases
ILLINOIS	1
INDIANA	1
Undisclosed	6
WISCONSIN	18

Organization in Detail (January 2024 to September 2024)

[Back to Organization](#)

Work Related	0	0	0	0	0	0%	3	100.00%
Total	0	0	0	0	0	0%	3	100%

Critical Incident Service

No Data Available

Critical incident events

No Data Available

Training name	Training type	Date	City	Country
Working with Difficult customer behaviours	Stress Management	Jun 27, 2024	MADISON	US
Living Well with Stress	Stress Management	Sep 12, 2024	MADISON	US
Seasonal Stress	Stress Management	Nov 12, 2024	MADISON	US

Glossary (January 2024 to September 2024)

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 explicitly 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 explicitly 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

stated as closed cases, the counts are based on cases opened during the reporting period.

Workplace Support Programs

Workplace Support Programs

Critical Incident Services

In the aftermath of an incident, our experts will design an immediate, global response that takes care of your people and your organization.

Management Consultations

Service delivered to the organization's people leaders to support with participant issues and how to have difficult conversations. The service is delivered by the program's clinical staff.

Training

Total training sessions conducted. Sessions can be short seminars, longer workshops offered onsite, online and self-directed. Topics can include mental health, resiliency, retirement/finances, nutrition/fitness and more.

Trends

Emerging Issues

Provides details on the counselling and work/life services opened during the reporting period. The presenting issues are self-identified by the participant at the time of intake.

Benchmarks

Provides comparative benchmarks between the organizational case distribution and the experience of other organizations within the same country, industry, or region. If the report is run for multiple countries, global benchmark comparison will also be available.

Modalities

The method by which the participant received their service.

Demographic

Gender

This is a breakdown of participant self-identified gender during the intake process. This information is only collected from covered participants and not family member participants.

Language

This is a breakdown of participant self-identified preferred language for service delivery purposes.

Category

This is a breakdown of participant self-identified category during the intake process.

Age

This is a breakdown of participant self-identified age group during the intake process. This information is only collected from covered participants and not family member participants.

Employee/Member Status

This is a breakdown of employee/member self-identified status during the intake process. This information is only collected from covered participants and not family member participants.

Management Status

This is a breakdown of participant self-identified job category during the intake process.

How did you hear about us?

This is a breakdown of participant self-reported detail on how they heard about the program.

Are you calling us as a result of Covid19?

This is a breakdown of participant self-reported to identify those who were calling as a result of the Covid-19 pandemic.

Years of Service

This is a breakdown of participant self-reported detail on how long the participant has been part of the organization. This information is only collected from covered participants and not family member participants.

Cases by Country

This is a map of the world to showcase the breakdown of case percentages by country.

Appendix

Report Information

Organization

The name of one or more organizations for the report run. Data on the report is aggregated for all selected organizations.

Report Run Date

The date that the report was generated.

[Overall Summary](#)

[Trends](#)

[Demographic](#)

[Appendix](#)

[Glossary](#)

Country	Name of one or more countries represented in the report. Data on the report is aggregated for all selected countries.
Region	Name of one or more regions represented in the report. Data on the report is aggregated for all selected regions.
Participant Category	Name of one or more participant category represented in the report. Data on the report is aggregated for all selected participant categories.
Optional Answers	List of one or more custom answer options represented in the report. Data on the report is aggregated for all selected answer options.
Consortium or Partner Name	Name of the Alliance Partner, Group, or Consortium 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.

Overall Summary (Jan 1, 2024 to Sep 30, 2024)

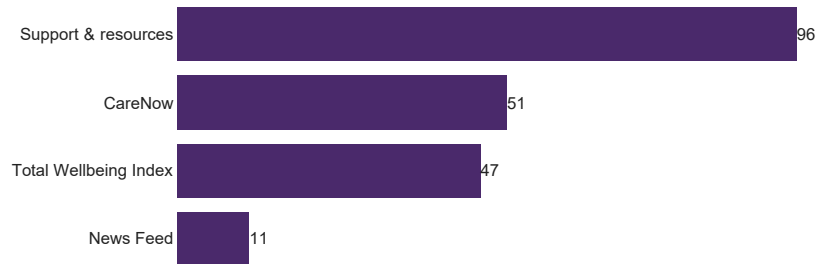
User



Overall Engagement

Adoption

Activities by Feature



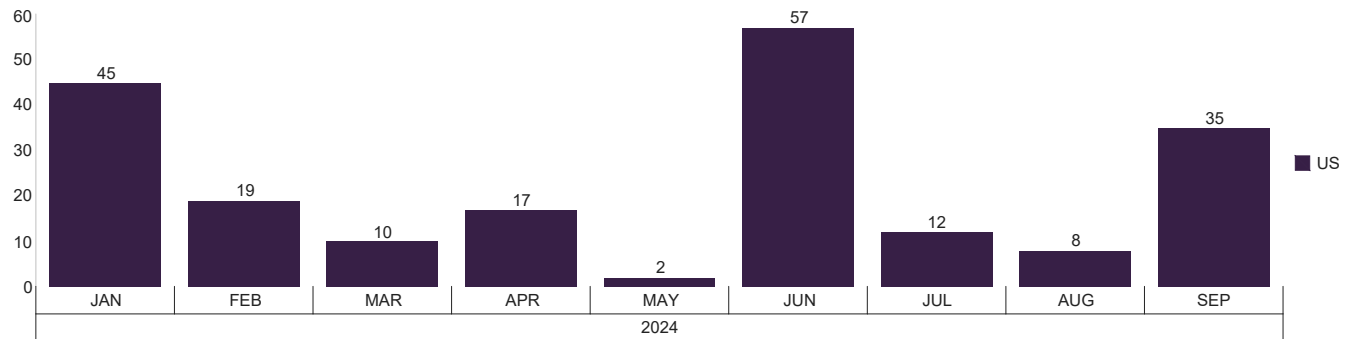
Total Activities

205

[Compared to the same period 12 months prior](#)

399 (Jan 1, 2023 to Sep 30, 2023)

Total Activities by Month



Total Activities by Country



Activities by Group

Company & News Feed Posts

Number of
company posts

11

CareNow

Total Wellbeing Index

Challenges

Tiering

CareNow (Jan 1, 2024 to Sep 30, 2024)

Adoption

Total users who started a program

8

Adoption

Average # of programs started per user

1

Task success

Total users who completed a module

4

Task success

Average # of modules completed per user

10

Adoption

Total programs started



Total Wellbeing Index (Jan 1, 2024 to Sep 30, 2024)

TWI Score

65

This is your Total Wellbeing Index score
 The median benchmark score is: 63
 The top performing score is: 76

Distribution of Risk

Current



Benchmark



■ At Risk ■ Problem ■ Strained ■ Active ■ Optimal

Mental

46

Median benchmark: 56
 Top performing score: 72

Physical

62

Median benchmark: 59
 Top performing score: 69

Social

66

Median benchmark: 68
 Top performing score: 79

Financial

72

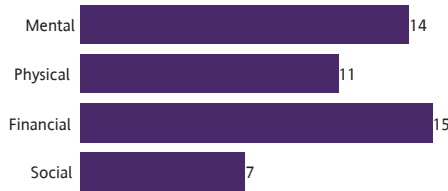
Median benchmark: 71
 Top performing score: 85

Total Participation

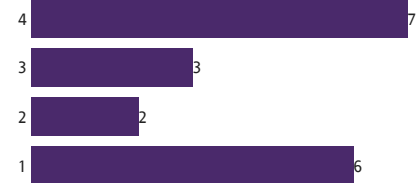
18 of 109

17%
 of Registered Users

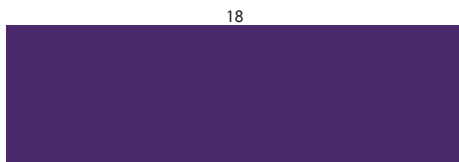
Completions by Assessment



Number of Assessment Completed per Person



Age Bands



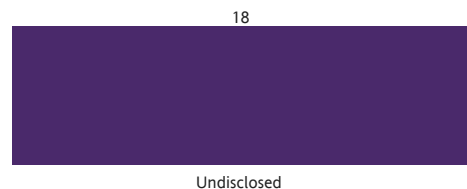
Generation



Gender



Tenure



[See All](#)

How to improve my score?

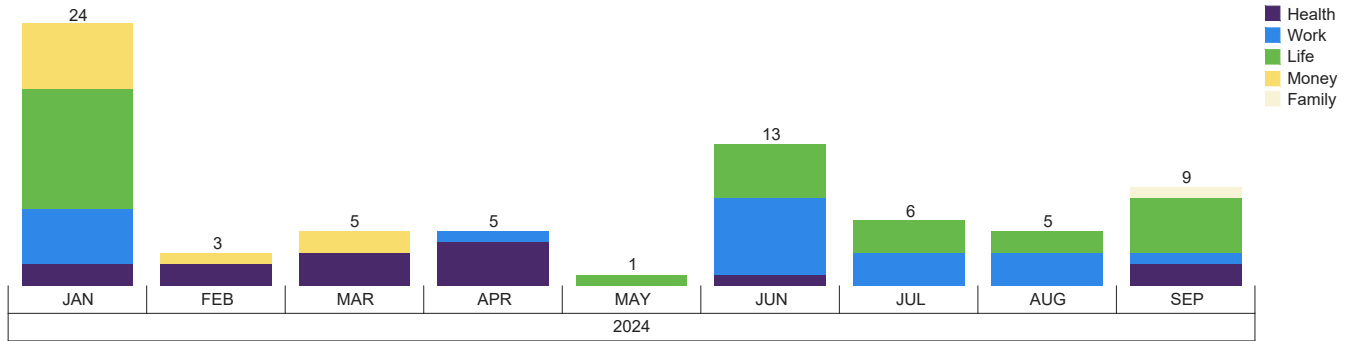
This report is designed to provide your organization with a simple viewpoint to: i) describe the wellbeing of your people; and ii) provide ongoing monitoring and knowledge of important wellbeing indicators. The results provide directional information, which can be used to focus on planning, evaluation and measurement of wellbeing programs that target the needs of your people.

- Your Mental health score indicates that your people's mental wellbeing is the greatest risk area.
- Your Financial score indicates that your people's financial wellbeing is the greatest strength.
- Your scores demonstrate the organization's investment in the value of wellbeing. Continue to engage your people across the continuum of wellbeing by investing in tools that help them maintain and manage their health.

Support & Resources (Jan 1, 2024 to Sep 30, 2024)

Support & Resource Activities

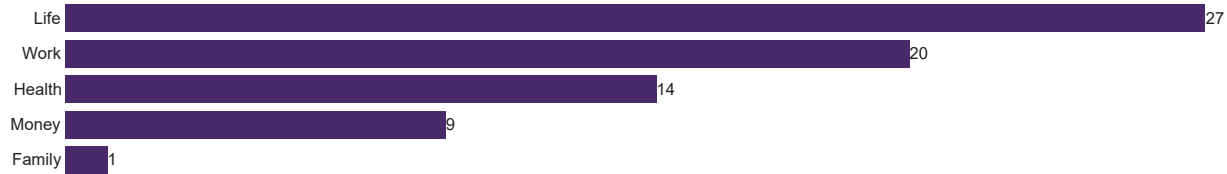
* Other resources are not included in this total



Top Categories

Total Activities 71

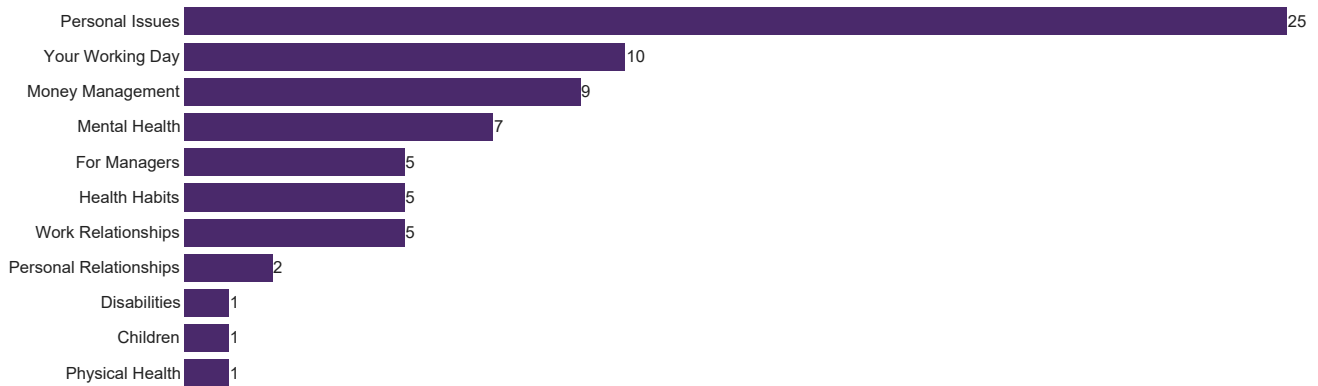
* Other resources are not included in this total



Top Subcategories

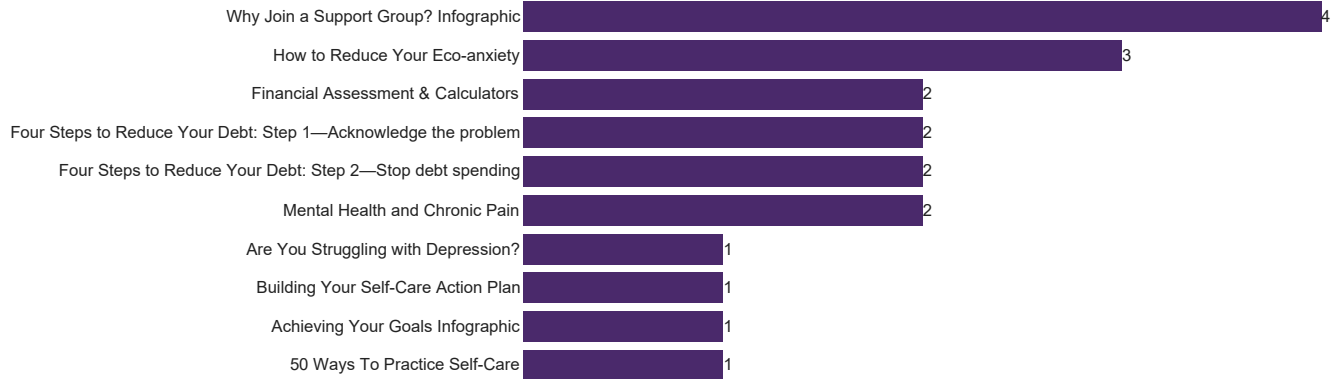
Total Activities 71

* Other resources are not included in this total



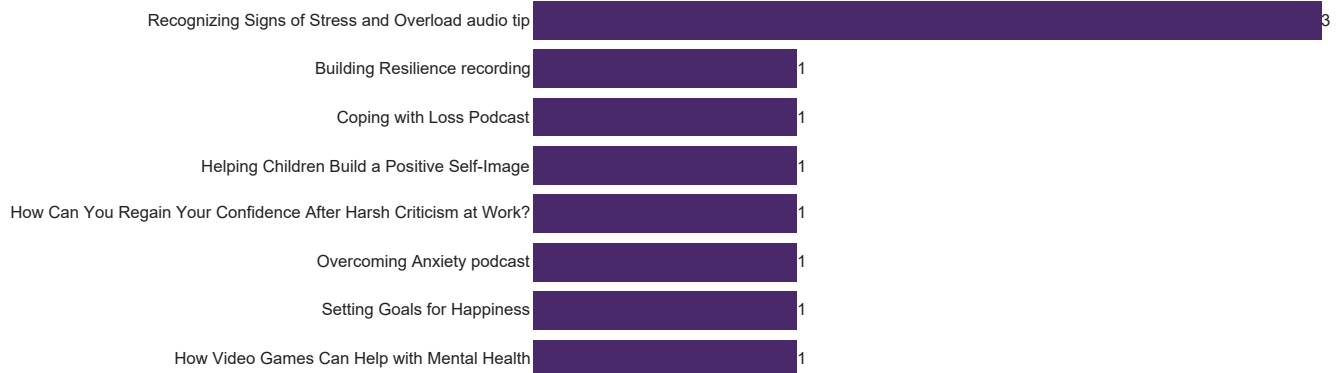
Top Articles

Total Activities **53** of **71**



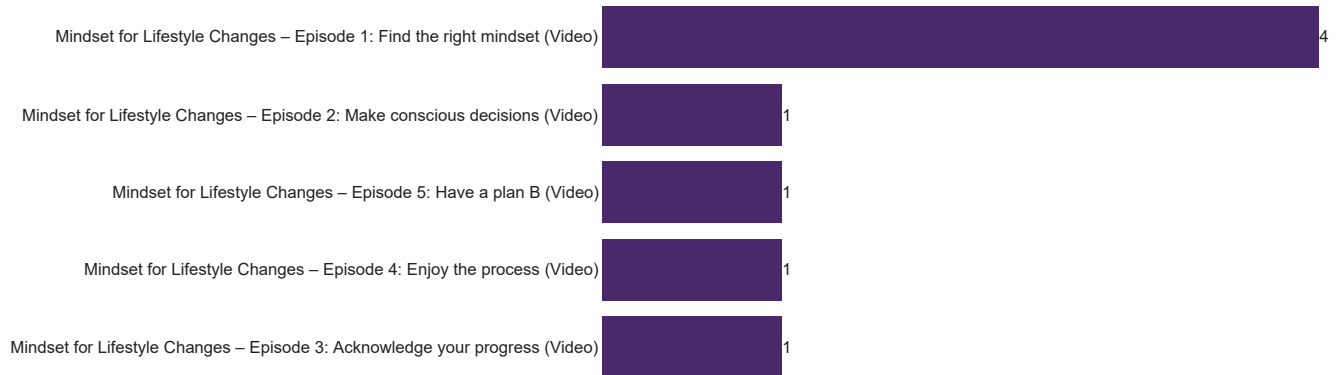
Top Audios

Total Activities **10** of **71**



Top Videos

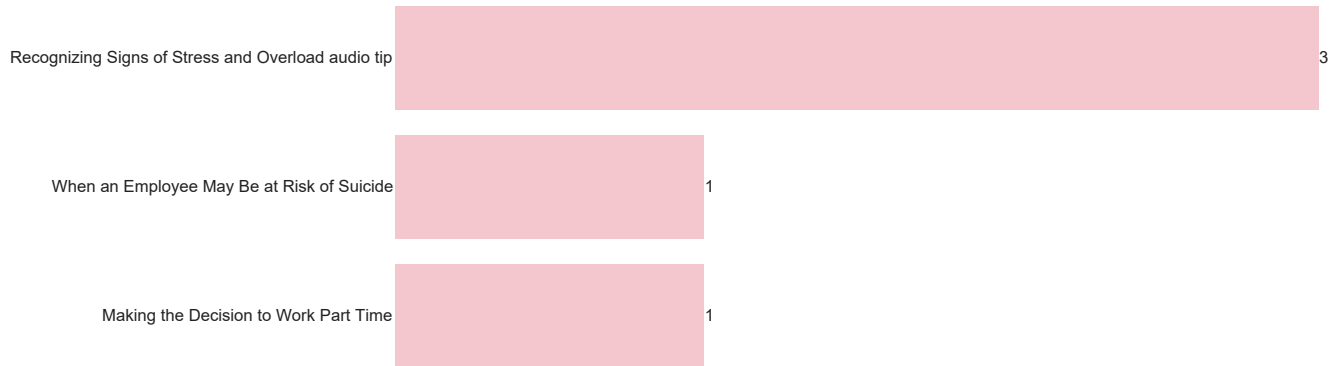
Total Activities **8** of **71**



Top Manager Resources

Total Activities **5**

* Total reflects a subset of the top categories.



Other Resources

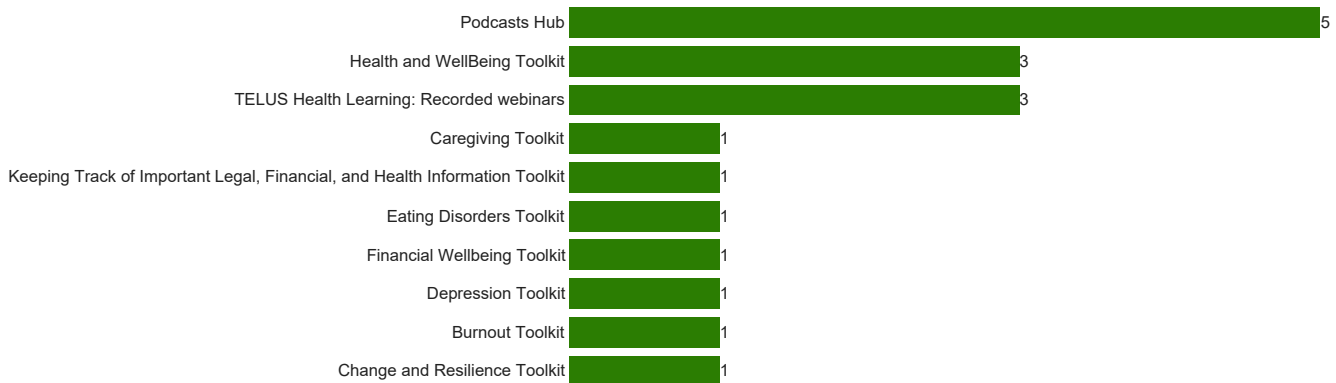
Other resources accessed

Total Activities **25**



Top Toolkits

Total Activities **24 of 25**



Glossary (Jan 1, 2024 to Sep 30, 2024)

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

Activities	Measuring the general depth of use of the platform. 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

Modules Completed	Each CareNow program has multiple modules or chapters to complete. Each module focuses on a specific area. A
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module is completed when all content is viewed within the module.

Total programs started

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 TWI related scores require completion of all four assessments.

The Total Wellbeing Index (TWI) is a scale aggregating behavioural assessment data from the four pillars of total health: Mental, Physical, Social and Finance.

Mental:

This pillar includes questions covering various areas of mental health, including anxiety, depression, coping skills, burnout, and general mental health.

Physical:

This pillar includes questions covering various areas of physical health, including physical activity, medical health, biometric awareness, lifestyle choices, sleep, and nutrition.

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, and general financial behaviour.

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 different risk groups (below). The percentage of the population falling into each category is displayed in the risk distributions.

Optimal Health (score from 81-100)

Individuals in this category are doing well in balancing the demands of life and work. Their Total Wellbeing (Mental, Physical, Social and Finance) collectively is quite good. Based on the information reported, individuals in this group should focus on sustaining optimal health.

Active Health (score from 71-80)

Individuals who fall in this category are doing reasonably well overall. In general, their total well-being is not an issue; however, there are areas upon which focus can help improve the individual's overall quality of life.

Strained Health (score from 61-70)

Individuals who fall in this category are currently experiencing some level of strain in one or more of the four total wellbeing areas. The challenge is to help and support these individuals in the areas they are feeling strain so that they can be improved into Active or Optimal Health and avoid dipping into Problem or At Risk Health.

Problem Health (score from 51-60)

Individuals who fall into this category are typically experiencing some physical, psychological, or financial symptoms that are having a negative impact on their total wellbeing and productivity. Individuals in this group typically require support 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 of wellbeing: Mental, Physical, Social and Finance. These individuals are often off work or on the verge of being off work. Access to support 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 benchmarking is to measure the organization's performance/results against the standard. The benchmark/standard is based on the 50th percentile (middle value of all organizations) of collective scores of all organizations that have completed the TWI.

Top Performing (Employers) score:

Refers to scores at or above 90 per cent of the total TWI completions; only 10 per cent of total scores are above this threshold.

Generation:

Generations are defined by birth year. Regardless of age, individuals always belong to the generation into which they were born. Generations tend to experience similar life issues. By reporting on generations, organizations are able to compare results against other generations at a different place in the life cycle.

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 by the overall score of their responses to the assessment.

Full HRA

The HRA (health risk assessment) is the completion of all the health and biometric assessments.

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.

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 include step and habitude challenges.
Personal	Challenges available to users to earn platform points as they progress towards long term healthy lifestyle choices. These challenges do not have a public leaderboard.
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 challenge.

Wellness Tiers

Points	Users earn points by completing various activities on the platform or by taking actions outside of the platform (that are tracked within the TELUS Health platform) to positively influence their overall wellbeing.
Tiers	There are 4 tiers that can be achieved by earning platform points. Within each tier, users can access specially-curated wellness rewards. These tiers are: Bronze (5), Silver (2,500), Gold (5,000), and Platinum (10,000)

Promoted Activities

Promoted Activity	An activity selected to promote to your user population. These include: Biometric Screening, Medical Event or Check-up, Preventive Screening, Training or Benefit Event, Competition or Athletic Event, Volunteering, Fitness or Sports, Gym or Workout, LIFT Challenge.
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Support & Resources

Support & Resource Activities	The platform's Support & Resources section includes 1,800+ articles, podcasts, and toolkits. This report section shows the content viewed and which categories, subcategories, and specific content items are most popular. Viewing content 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.
Total cashback	The total currency returned to the user who made the purchase, which is credited to the user's platform wallet. Upon confirmation from the vendor, the amount is eligible to be withdrawn by the user.
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 Health' 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

Appendix

Report Information

Organization	Name of one or more organizations for the report run. Data on the report is aggregated for all selected organizations.
Country	Name of one or more countries represented in the report. Data on the report is aggregated for all selected countries.
Group	Name of one or more groups selected for the report run. Data on the report is aggregated for all selected groups.
Report Run Date	Name of one or more groups selected for the report run. Data on the report is aggregated for all selected groups.

Veterinary Examining Board Agenda Request Form

Meeting Date	Oct 16, 2024
Requestor Name	State of WI
Item Title for the Agenda	Required trainings for board members
Should this be in Open or Closed Session?	open
Is this an Action Item or for Information Only?	Information Only
Are there Attachments? (If yes, include file names)	No
Is a Public Appearance Anticipated?	No
Description of the Agenda Item	
<p>All members of State boards, committees, and & councils are required to take public records law training and some may also be required to take Ethics for public officials. All training must be completed by November 15, 2024.</p> <p>All of you should have an account in the system and have at a minimum public records law training assigned to you. Please access the system using the Use Learn Center job aid attached. I you need to take the Ethics training it was assigned to your account on Aug 1. If it is not a training pending in your account, you do not need to take it.</p> <p>If you get in your account and there is not a public records law training pending, please reference the Search for Training attachment to assist you in adding the 2024 Wisconsin Public Records Law training to your queue for completion.</p> <p>If you encounter difficulties, please can contact the Bureau of Training and Development's regional email (DOABTDRegion1Training@wisconsin.gov) for assistance or Joey Stella joey.stella@wisconsin.gov who is one of DATCPs cornerstone administrators.</p>	



Cornerstone has a robust search feature. You can search for training by the name of the training (partial or full name), type of training, subject, keyword, etc. You can also browse the training catalog.

Global Search

1. Select the **search landmark button** (magnifying glass icon) beside the menu. Type a search term, such as the training title or keyword(s). Search results appear for each category where there are relevant results. A maximum of five relevant results appear for each category.
2. If the training you are searching for appears, select the training title and you will be taken to the Training Details page for that item.
3. If the training does not appear, press the **Enter** key on your keyboard within the search field and you will be taken to a Global Search page, which will display additional search results.
4. On the Global Search page, you can filter the search results by selecting **Show all, Training, or People**.
5. In **Training**, you can toggle results by training type. For example, choose the calendar "events" icon to see only classroom trainings.
6. To access one of the training items that displays in the results, select the training title and you will be taken to the Training Details page for that item.



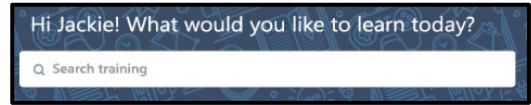
Learning Search

1. From the menu, under Learning, select **Search**.
2. To search for a specific training by name or key phrase, enter a search term into the search field and press the **Enter** key on your keyboard.
3. You can filter the search results by using the different types of filters on the left side of the page. To filter by training types, select **Type** and a list of training types appears. For example, select the **Event** training type to show only classroom training.
4. After you find a training you are interested in, select the training title and you will be taken to the Training Details page for that item.



Learner Home

1. From the menu, under Learning, select **Learner Home**.
2. Enter a search term or phrase into the search field.
3. Up to ten training titles most relevant to your search term display.
4. To access one of the training items, select the training title and you will be taken to the Training Details page for that item.
5. If the training you are searching for was not included in the list of ten results, press the **Enter** key to receive more search results on the Learning Search page.



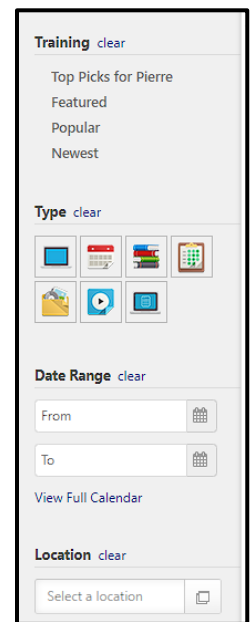
Events Calendar

1. From the menu, under Learning, select **Events Calendar**. A calendar appears for the current month.
2. If you are searching for a training you know is going to be held on a specific date, use the calendar navigation arrows on the top to page forward through the months.
3. The calendar shows classroom training sessions that have been scheduled. Hover over the Event name to view more information. Select the **Event name** and you will be taken to the Training Details page for that particular training, where you can view additional information and see if there are seats available.



Browse for Training

1. From the menu, under Learning, select **Browse for Training**.
2. A list of all available training in the catalog appears.
3. Use the tools on the page to sort or filter the catalog.
 - a. From the training menu, filter by **Featured**, **Popular**, or **Newest**.
 - b. Use the Type list to toggle search results by training type. For example, select the calendar **"Events"** icon to see only classroom training.
 - c. Use the Date Range to specify trainings occurring in a certain period.
 - d. Use the Location filter to select trainings occurring in a predefined location.
 - e. Toggle between the **Tile** and **List** views using the buttons at the top of the results.





Using the LearnCenter to complete required training as a State of WI Board, Council, or Committee Member

To facilitate your Wisconsin Public Records training, we have opened some space on the State of Wisconsin learning management system, called LearnCenter.

You can use the Learn Center to-

- Launch and complete training
- View or print your transcript of courses
- Print a completion certificate for a course

This document will give you the instructions for creating an ID on this system, and then using that ID to log in. Another document will follow after you have registered to show you how to find and start the training itself. This guide contains three parts:

1. [Setting up your account for the first time](#) – follow these instructions for your first visit to the account creation page. You only do this once.
2. [Using your account in the LearnCenter](#) – follow these instructions for every visit after you have set up your account for the first time.
3. [Reset your password for your LearnCenter account](#) – follow these instructions only if you need to reset your password.

If you have any questions, please contact your Training Team at the LearnCenter Help Desk by emailing DOABTDRegion1Training@wisconsin.gov. We'll be happy to help!



If you have already created an account on the LearnCenter, do not create another one. Proceed to [Part 2](#), with instructions to [log in](#).



Using the LearnCenter as a State of WI Board, Council, or Committee Member



Setting up your account for the first time

To set up your account on the LearnCenter for the first time, you will use the online self-registration system to select the appropriate board, council, or commission of which you are a member. If you already have an account on the LearnCenter, [skip to the next section](#); otherwise, use the following steps to create an account:

1. Select the link to [open the State of Wisconsin Agency Board and Council Member registration page on the LearnCenter](#). You will only use this link the first time you create an account.

Welcome to the LearnCenter

If this is your first visit here:
Please fill out the form below and enter a password for an account. You will receive a verification email at the email address you entered to confirm your account.

If you've been here before, look at the bottom of the page for a link to log in. (Use the scroll bar if needed.)

* Required Field

* First Name:

* Last Name:

* Email Address:

* Division:

* Passwords must contain both upper and lower case letters.
* Passwords must contain both numbers and special characters.
* Passwords must be 8 - 20 characters.
* Passwords cannot have leading or trailing spaces.
* Passwords cannot be the same as the Username. Use ID, if that applies.
* Passwords must contain at least one special character.

* New password:

* Confirm password:

2. Fill in your first name, last name, and email address. **Remember your email** address; it will be your username in the future.
3. Select the Division selection button to choose your organization.

* Division:

4. In the Search Division window, select the **Plus button** to expand the list of State of Wisconsin Agency Board and Council Members.
5. In the next Search Division window, type part of the name of your organization in the Title field, then press the **Search** button.

Search Division

Title:

ID:

Title	ID
State of Wisconsin Agency Board and Council Members	BOARDS

* Search





Using the LearnCenter as a State of WI Board, Council, or Committee Member




- Find your organization's name in the resulting list and select its title. Your organization will now be listed in the Division line of the registration page.

**DATCP - Agricultural
Chemical Cleanup
Council**

* Division: DATCP - Agricultural Chemical Cleanup Council  

- Type in a strong password for this account. Confirm that password by typing it again.
- Select the checkbox next to the words, "I'm not a robot".

I'm not a robot 
reCAPTCHA
Privacy - Terms

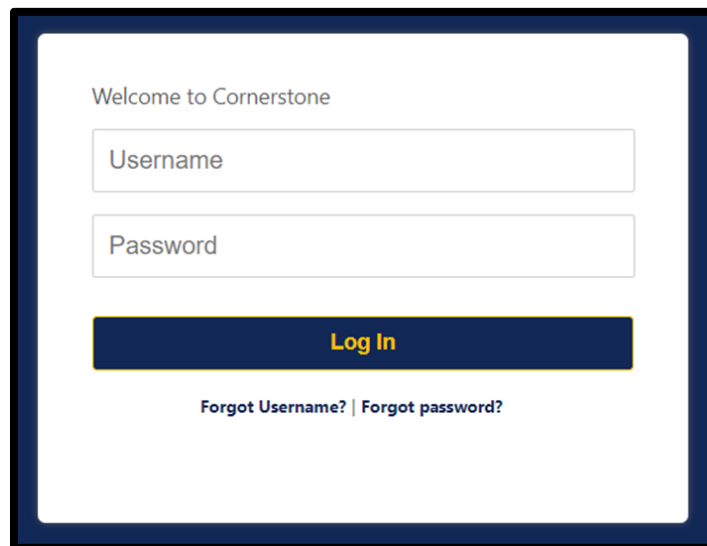
- When the reCAPTCHA confirms with a green check mark, select the Log In button.
- You have successfully registered, and your account is set up. You do not need to repeat these steps again. To access the portal in the future, refer to the [instructions to log in](#).



Using your account in the LearnCenter


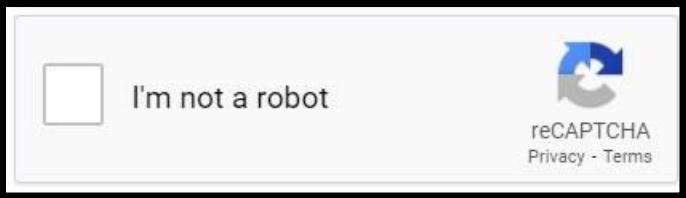
Once your account has been created, you can access your profile in the LearnCenter using a simple login process.

1. Open the [LearnCenter login page](#).
2. Enter your **username** and **password** into the login fields. For your username, enter the email address you used to create your account. For the password, enter the password you used when you created your account (or the password you used when you changed the password).
3. Select the **Log In** button.

A screenshot of the LearnCenter login page, enclosed in a dark blue border. The page has a white background and contains the following elements: the text "Welcome to Cornerstone" at the top; a text input field labeled "Username"; a text input field labeled "Password"; a dark blue button with the text "Log In" in yellow; and a link "Forgot Username? | Forgot password?" at the bottom.



Reset your password for your LearnCenter account

1. If you can't remember your password, from the [LearnCenter login page](#), select the **Forgot password?** link.

2. On the Forgot password page, enter your email address (the one you used to create your account on the LearnCenter) in the **Login Credential** field.
3. Select the checkbox next to the words, "I'm not a robot".

4. If prompted, complete the reCAPTCHA image challenge, then press **VERIFY**. There is also an audio challenge option.
5. When the reCAPTCHA confirms with a green check mark, press the **Submit** button.
6. You will receive an email within 5-10 minutes that contains a unique link allowing you to manually reset your LearnCenter password. Open the link from your email and follow the instructions to reset your password. Once your password is reset, return to the [instructions to use your account in the LearnCenter](#) to complete login.



If you can't remember your username (the email address you used to create your account), do not create a new account. Please contact your Training Team at the LearnCenter Help Desk by emailing DOABTDRegion1Training@wisconsin.gov.

**Veterinary Examining Board
Agenda Request Form**

Meeting Date	Oct 16
Requestor Name	Lyn Schuh
Item Title for the Agenda	Emergency Triage – Care responsibility
Should this be in Open or Closed Session?	Open
Is this an Action Item or for Information Only?	Discussion
Are there Attachments? (If yes, include file names)	Yes RE_Question_Discussion_ERVets_schuh
Is a Public Appearance Anticipated?	No
Description of the Agenda Item See attached email from Lyn Schuh	

From: [Mace, Melissa A - DATCP](#)
To: [lyn schuh](#)
Cc: [O'Neil, Aaron R - DATCP](#); [languh](#); [Boyd, Dustin K - DATCP](#)
Subject: RE: Question/discussion
Date: Wednesday, July 24, 2024 1:14:00 PM

I will get added to the October agenda.

Thanks Lynn.

Melissa Mace (she/her/hers)
Director, Bureau of Field Services, Division of Animal Health
Executive Director WI Veterinary Examining Board
Wisconsin Department of Agriculture, Trade and Consumer Protection
Cell: 608-279-3861
Melissa.Mace@Wisconsin.gov

Please fill out our customer survey to help us improve. Thank you!

-----Original Message-----

From: lyn schuh <lynmschuh@gmail.com>
Sent: Wednesday, July 24, 2024 1:00 PM
To: Mace, Melissa A - DATCP <Melissa.Mace@wisconsin.gov>
Cc: O'Neil, Aaron R - DATCP <aaronr.oneil@wisconsin.gov>; languh <languh@charter.net>; Boyd, Dustin K - DATCP <Dustin.Boyd@wisconsin.gov>
Subject: Re: Question/discussion

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.

There was an incident at the U that we all heard about and that is what prompted the discussion. I think it will continue to happen seeing the state that all the ER hospitals are in.

It would be great to establish some guidelines.

> On Jul 24, 2024, at 12:27 PM, Mace, Melissa A - DATCP <Melissa.Mace@wisconsin.gov> wrote:

>

> I think this is a good discussion that perhaps some space could be made for at the next full board meeting. If it is case specific, you could set aside some time at the next screening committee if needed.

>

>

>

> Melissa Mace (she/her/hers)
> Director, Bureau of Field Services, Division of Animal Health
> Executive Director WI Veterinary Examining Board
> Wisconsin Department of Agriculture, Trade and Consumer Protection
> Cell: 608-279-3861
> Melissa.Mace@Wisconsin.gov

>

> Please fill out our customer survey to help us improve. Thank you!

>

> -----Original Message-----

> From: lyn schuh <lynmschuh@gmail.com>

> Sent: Wednesday, July 24, 2024 11:00 AM
> To: Mace, Melissa A - DATCP <Melissa.Mace@wisconsin.gov>
> Subject: Question/discussion

>
> 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.

>
>
> HI Melissa

>
> I am talking to a few different dvm's at different ER clinics and the U and we all know that once a patient is admitted, it is the responsibility of of the hospital however, what about if a triage is done by a tech in the lobby and they are advised to wait or seek care elsewhere after initial triage vitals are taken. So basically, if anyone touches it, is it the responsibility of the hospital even if NOT admitted.

>
> What is the difference of triage by a tech who records the admit vitals VS admitting to the back and starting a record, when does the client patient relationship begin:

- >
> 1. When they walk through the door?
> 2. When a tech triages and records vitals?
> 3. When a record is started?
> 4. When a DVM examines?

>
> Thanks for any help you can provide and if you cant, please point me in the right direction, I think this would make an excellent article for the WVMA newsletter!

>
> Lyn

>
>
>

Veterinary Examining Board Agenda Request Form

Meeting Date	Oct 16
Requestor Name	Melissa Mace for Kristen Cooley
Item Title for the Agenda	Regional Anesthesia
Should this be in Open or Closed Session?	Open
Is this an Action Item or for Information Only?	Discussion
Are there Attachments? (If yes, include file names)	Yes Request for clarification on article VE 1.44 2 C 2
Is a Public Appearance Anticipated?	Unknown
Description of the Agenda Item	
<p>Kristen Cooley submitted a question in regards to the administration of regional anesthesia and how it may or may not be delegated see:</p> <p>VE 1.44(6)(6) Veterinarians may delegate to certified veterinary technicians the provision of the following veterinary medical services under the supervision of the veterinarian when the veterinarian is personally present on the premises where the services are provided:</p> <p style="padding-left: 40px;">(a) Administration of local or general anesthesia, including induction and monitoring.</p> <p>Her email is attached.</p>	

From: [Kristen Cooley](#)
To: [Mace, Melissa A - DATCP](#)
Cc: [Kate Lafferty](#)
Subject: Request for clarification on article VE 1.44 2 C 2
Date: Friday, August 23, 2024 12:53:12 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.**

Hi Mellissa,

Thank you for responding to my email. Below is the email I promised. Please share this with the VEB in October at the meeting. If you can get an answer before then, that would be great but I am not expecting one. Please also let me know if you have questions or need clarification. I appreciate you. ~ Kristen

Dear members of the Wisconsin Veterinary Examining Board,

I am writing for clarification of article VE 1.44 2 C 2. It reads as follows:

2. Activities considered the practice of veterinary medicine, but which a veterinarian may delegate to a certified veterinary technician, as specified in s. [VE 1.44 \(5\)](#) and [\(6\)](#), as follows:
 - a. Simple dental extractions that require minor manipulation and minimal elevation.
 - b. Administration of injections, including local and general anesthesia.**
 - c. Sample collection via a cystocentesis procedure.
 - d. Placement of intravenous and arterial catheters.
 - e. Suturing of tubes and catheters.
 - f. Fine needle aspirate of a mass.
 - g. Performing amniocentesis, embryo collection and transfer, follicular aspiration, and transvaginal oocyte collection and recovery on livestock.

I am interested in the clarification of 2b. It specifically mentions local anesthesia but does not mention regional anesthesia. Often the two are spoken of together as locoregional anesthesia or local and regional anesthesia however, I believe that this is not common knowledge. Many veterinary professionals believe that local anesthesia includes regional anesthesia as well (think epidurals, ring blocks, etc.) as veterinary technicians have been performing these tasks safely for years.

Is it possible to get some clarification on this? It would be very unfortunate for everyone if these duties would be relegated to DVMs only. It would further slow down the flow of the clinic and stretch veterinarians even closer to the brink of burnout. Not to mention reducing job satisfaction for many advanced technicians.

The ultimate question is, can credentialed technicians perform regional blocks like epidurals, ring blocks, intercostal, retrobulbar (for enucleation), and dental nerve blocks as long as they have the proper training?

Thank you for your time, I appreciate the clarification.

--

Kristen Cooley BA, CVT, VTS (Anesthesia & Analgesia), VCC
Founder, Veterinary Anesthesia Support and Training, LLC
PEAK Veterinary Anesthesia Services www.peakvas.com

**Veterinary Examining Board
Agenda Request Form**

Meeting Date	10/16/24
Requestor Name	Angela Fisher
Item Title for the Agenda	VE 1 Evaluation
Should this be in Open or Closed Session?	Open
Is this an Action Item or for Information Only?	Action Item
Are there Attachments? (If yes, include file names)	VE 1 Vet Licensing Process Evaluation VE 1 Track Changes VE 1 Statement of Scope Ch. 89 Estimated Rule Timeline
Is a Public Appearance Anticipated?	No
Description of the Agenda Item	
<p>Action Item: Discuss and propose changes to VE 1 within the statement of scope.</p> <p>Attached is a summary of the VE 1 veterinary licensing process evaluation, as well as a copy of VE 1 showing proposed changes. These changes were reviewed and discussed by the VEB Administrative Rules Committee on August 26th. The approved statement of scope and ch. 89, Wis. Stat., are also attached for reference.</p> <p>After the October meeting, DATCP staff will take the proposed changes and begin drafting a hearing draft, which will go to the VEB for approval, and then a public hearing and comment period will be held.</p>	

VEB Vet Licensing Process Evaluation

Last Updated: 8/13/24

Current Application Processes:

Applicant with No Prior Veterinary License in Any Jurisdiction, Took the NAVLE within the Last 5 Years

Currently license by examination

- s. 89.06, Wis. Stat.
- s. VE 1.14 and VE 1.16, Wis. Admin. Code

Applicant Previously Licensed in Wisconsin

Currently license renewal

- s. 89.062, Wis. Stat.
- s. VE 1.28, Wis. Admin. Code

Applicant Licensed in another Jurisdiction

Currently license by endorsement

- s. 89.072, Wis. Stat.
- s. VE 1.14 and VE 1.18, Wis. Admin. Code
- Applicants that are licensed in another jurisdiction apply by endorsement, under s. 89.072, if the applicant is not currently under investigation and have never been disciplined by the licensing authority in the other state, territory or country, has not been found guilty of a crime the circumstances of which are substantially related to the practice of veterinary medicine, is not currently 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 and has never been found liable for damages for acts committed in the course of practice which evidenced a lack of ability or fitness to practice.
- If the applicant has prior discipline from their current license jurisdiction, the applicant must become licensed in another jurisdiction, have no discipline in that new jurisdiction, and then apply to Wisconsin. If someone is licensed in multiple jurisdictions and has no discipline in at least one, they can apply for endorsement using the non-discipline jurisdiction. This is based on legal advice that Wis. Stat. s. 89.072 says that the applicant has never been disciplined in “the” other jurisdiction and not “any” other jurisdiction.
- If the applicant has been found guilty of a crime, is currently a party in pending litigation, or has been found liable for damages, then the application goes to the Credentialing Committee for review to determine if the circumstances are substantially related to the practice of veterinary medicine or evidence a lack of ability or fitness to practice.
- Applicants who are not currently licensed in another jurisdiction with no prior discipline cannot apply through s. 89.072, Wis. Stat.

Applicant Previously Licensed in Another Jurisdiction, but Not Currently Licensed in Another Jurisdiction, and Never Licensed in Wisconsin

Currently no process

- There is currently no process for these applicants, because s. VE 1.14 (6) says the applicant must apply by endorsement, but s. 89.072, Wis. Stat., says the applicant must

be currently licensed in another jurisdiction to apply by endorsement. Before the 2022 rule change, these applicants would have applied by examination.

Applicant who is a Service Member, Former Service Member, or their Spouse

Currently reciprocal credentials

- s. VE 1.22, Wis. Admin. Code
- s. 89.073, Wis. Stat.

Proposals and Discussion Items:

The attached VE 1 Track Changes document shows the following proposed changes:

1. Remove the language in s. VE 1.14 (6) that limits who must apply by examination or endorsement. The language was added in 2022 and has created problems by limiting the licensing processes available to applicants. Removing this language would allow applicants who cannot apply by endorsement to instead apply by examination. This change would also remove an inconsistency that currently says a Wisconsin licensee must apply by endorsement.
2. Add language to ss. VE 1.14 (1) and VE 1.28 (1) and (2) to make it clear that the board may review the application for items listed under s. VE 1.20. This clarification should address 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 s. VE 1.20.
3. Add 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 should address 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 s. VE 1.20.
4. Add language to s. VE 1.16 (1) to create a process for applicants by examination who have not passed the 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.
5. Add language to s. VE 1.18 (3) to create a process for applicants by endorsement who have neither satisfied the qualifications for licensure, in s. VE 1.16, 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.
6. Minor edits throughout the licensing processes to consistently use the term “jurisdiction”.

Chapter VE 1

VETERINARIANS

Subchapter I – Authority and Definitions

- VE 1.01 Authority.
VE 1.02 Definitions.

Subchapter II – Examinations

- VE 1.04 Administration.
VE 1.06 Competency tested.
VE 1.08 Passing scores.
VE 1.10 Claim of examination error.

Subchapter III – Licensure

- VE 1.12 License exemptions.
VE 1.14 Qualifications for licensure; examination or endorsement.
VE 1.16 Qualifications for licensure by examination.
VE 1.18 Qualifications for licensure by endorsement.
VE 1.20 Licensure review by board.
VE 1.22 Reciprocal credentials for service members, former services members, their spouses.
VE 1.24 Issuing a license.
VE 1.26 Administrative fees.
VE 1.28 Renewal of license.

- VE 1.30 Continuing education; requirements.
VE 1.32 Continuing education; programs and courses.

Subchapter IV – Permits

- VE 1.34 Temporary veterinary permits.
VE 1.36 Veterinary consulting permits.

Subchapter V – Practice Related to Veterinary Schools

- VE 1.38 Faculty license.
VE 1.40 Post graduate training permit.
VE 1.42 Veterinary students.

Subchapter VI – Standards of Practice and Unprofessional Conduct

- VE 1.44 Delegation of veterinary medical acts.
VE 1.46 Veterinary consulting.
VE 1.48 Veterinary referral to a license holder in another profession.
VE 1.50 Veterinary telemedicine.
VE 1.52 Records.
VE 1.54 Change of name and address.
VE 1.56 Display of license.
VE 1.58 Unprofessional conduct.
VE 1.60 Board action.

Note: Chapter VE 1 as it existed on July 31, 2022, was repealed and a new Chapter VE 1 was created Register July 2022 No. 799, effective August 1, 2022.

Subchapter I – Authority and Definitions

VE 1.01 **Authority.** The rules in this chapter are adopted by the veterinary examining board pursuant to the authority delegated by ss. 15.08 (5), 89.03 (1) and (2), and 227.11 (2), Stats.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.02 **Definitions.** In this chapter:

(1) “AAVSB” means the American Association of Veterinary State Boards.

(2) “Accredited college or university” means an educational institution that is accredited by a regional or national accrediting agency recognized by the U.S. department of education.

(3) “Advertising” means to give notice by any means, including any circular, card, notice, telephone book listing, magazine, newspaper or other printed material or any electronic medium.

(4) “Approved veterinary college” means a veterinary college which is AVMA accredited or approved.

(5) “Attending veterinarian” means the veterinarian who holds the VCPR and is responsible for the medical care and treatment of the animal.

(6) “AVMA” means the American Veterinary Medical Association.

(7) “Board” means the veterinary examining board.

Note: The board office is located at 2811 Agriculture Drive, P.O. Box 8911, Madison, Wisconsin 53708-8911.

(8) “Client” has the meaning set forth at s. 89.02 (3), Stats.

(9) “Department” has the meaning set forth at s. 89.02 (3d), Stats.

(10) “Informed consent” means the veterinarian has informed the client or the client’s authorized representative, in a manner understood by the client or the client’s authorized representative, of the diagnostic and treatment options, risk assessment, and prognosis, and the client or the client’s

authorized representative has consented to the recommended treatment.

(11) “License” means a credential issued to a person by the board signifying the person has met the requirements of ss. 89.06 (1) or (2m) (a) or 89.072, Stats., to practice veterinary medicine in this state.

(12) “NAVLE” means the North American Veterinary Licensing Examination.

(13) “Patient” has the meaning set forth at s. 89.02 (4s), Stats.

(14) “Supervision” means 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.

(15) “Telehealth technologies” means the collection of technology tools used to remotely deliver virtual veterinary medical, health, and education services, allowing a veterinarian to deliver enhanced care and education.

(16) “Unlicensed assistant” means a person working under the supervision of a veterinarian, but not holding a license, permit, or certificate issued by the board.

(17) “VCPR” means a veterinarian-client-patient relationship and has the meaning set forth at s. 89.02 (8), Stats.

(18) “Veterinary prescription drug” has the meaning set forth at s. 89.02 (11), Stats.

(19) “Veterinary student” means a person enrolled in an approved veterinary college in a curriculum leading to a doctor of veterinary medicine degree.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

Subchapter II – Examinations

VE 1.04 **Administration.** (1) The board or its designee shall administer the examinations required of applicants for licensure as a veterinarian by s. VE 1.12 and of applicants for certification as a veterinary technician by s. VE 2.04 at least once each year.

(2) Prior to November 1, 2000, the board shall accept as its licensure examinations the national board examination and the

clinical competency test. On and after November 1, 2000, the board shall accept as its licensure examination the NAVLE.

(3) The board or its designee shall provide an examination admission document to the applicant. The applicant shall present the admission document with any required identification at the examination.

(4) The board or its designee shall provide rules of conduct at the beginning of the examination. Time limits may be placed on each portion of the examination.

(5) The board may deny release of grades or issuance of a license or certificate if the board determines that the applicant violated rules of conduct or otherwise acted dishonestly.

Note: Qualified applicants with disabilities shall be provided with reasonable accommodations.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.06 **Competency tested.** (1) Examinations administered under this chapter test entry level competency and seek to determine that an applicant's knowledge of animals and their treatment is sufficient to protect public health and safety.

(2) The board shall furnish to individuals, upon request, general information describing the competencies upon which the examination is based.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.08 **Passing scores.** (1) Passing scores for veterinary applicants for the national board examination and the clinical competency test, and for the NAVLE, shall be based on the board's determination of the level of examination performance required for minimum acceptable competence in the profession. The board shall make the determination, after consulting with subject matter experts who have reviewed a representative sample of the examination questions and available candidate performance statistics, and set the passing score for the examination at the point representing the minimum acceptable competence in the profession. The board may accept any recommendation of the national examination provider.

(2) The passing score for an examination on state laws and rules related to the practice of veterinary medicine shall be based on the board's determination of the level of examination performance required for minimum acceptable competence in the profession. The board shall make the determination, after consulting with subject matter experts who have reviewed a representative sample of the examination questions and available candidate performance statistics, and set the passing score for the examination at the point representing the minimum acceptable competence in the profession.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.10 **Claim of examination error.** (1) An applicant for veterinary licensure wishing to claim examination error shall file a written request for board review in the board office within 30 days of the date the examination was reviewed. The request shall include all of the following:

- (a) The applicant's name and address.
- (b) The type of license for which the applicant applied.
- (c) A description of the mistakes the applicant believes were made in the examination content, procedures, or scoring, including the specific questions or procedures claimed to be in error.
- (d) The facts which the applicant intends to prove, including reference text citations or other supporting evidence for the applicant's claim.

(2) The board shall review the claim, make a determination of the validity of the objections and notify the applicant in writing of the board's decision and any resulting grade changes.

(3) If the board confirms the failing status following its review, the application shall be deemed incomplete, and the applicant may be reexamined under s. VE 1.04.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

Subchapter III – Licensure

VE 1.12 **License exemptions.** No veterinary license or permit is required for the following veterinarians:

(1) Employees of the federal government while engaged in their official duties.

(2) Employees of an educational or research institution while engaged in teaching or research, except if employed by a school of veterinary medicine in this state and the employee practices veterinary medicine on privately owned animals.

(3) Graduates of schools outside the United States and Canada who are enrolled in the educational commission for foreign veterinary graduates certification program of the AVMA or the program for the assessment of veterinary education equivalence offered by the AAVSB while completing the required year of clinical assessment under the supervision of a veterinarian.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.14 **Qualifications for licensure; examination or endorsement.** The board may issue a license to practice veterinary medicine to an applicant who satisfies all of the following:

(1) Submits an application form provided by the board which includes the applicant's notarized signature. The board may review the application for items listed under s. VE 1.20.

Note: Applications are available upon request to the board office located at 2811 Agriculture Drive, P.O. Box 8911, Madison, WI 53708-8911 or at the website at www.datcp.wi.gov.

(2) Successfully completes an examination on state laws and rules related to the practice of veterinary medicine.

Note: The examination on state laws and rules is separate from the NAVLE and the national board examination and clinical competency test.

(3) Provides proof of graduation through one of the following means:

(a) A certificate of graduation from a veterinary college which shall be signed and sealed by the dean of the school and submitted directly to the board by the school. The certificate may be provided by electronic means if the seal is visible.

(b) Certification of graduation provided by the AAVSB.

(4) Does not have a conviction record or pending criminal charge relating to an offense the circumstances of which substantially relate to the practice of veterinary medicine. An applicant who has a conviction record or pending criminal charge shall request appropriate authorities to provide information about the record or charge directly to the board in sufficient specificity to enable the board to make a determination whether the record or charge substantially relates to the practice of veterinary medicine.

(5) Provides all documents in English.

(6) Satisfies the requirements for either licensure by examination or licensure by endorsement.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.16 **Qualifications for licensure by examination.** Applicants for licensure by examination shall satisfy all of the following:

(1) Passed the NAVLE within the last five years. If the applicant has not passed the NAVLE within the last five years, the board shall inquire as to whether the applicant is competent to practice as a veterinarian in this state and shall impose any reasonable conditions on instatement of the license, including reexamination, as the board deems appropriate. An applicant under this section 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 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. The board may review the application for items listed under s. VE 1.20.

(2) For applicants who graduated from a veterinary college which is not board approved, provide proof of graduation required under s. VE 1.14 (3), and evidence of successful completion of either the educational commission for foreign veterinary graduates certification program or the program for the assessment of veterinary education equivalence offered by the AAVSB which shall be submitted directly to the board by the AVMA or the AAVSB.

(3) Pay the nonrefundable application fee of \$115.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22; correction in (2) made under s. 35.17, Stats., Register July 2022 No. 799.

VE 1.18 Qualifications for licensure by endorsement. Applicants for licensure by endorsement shall satisfy all of the following:

(1) The applicant has not previously failed the NAVLE, unless the applicant has subsequently retaken and passed the NAVLE.

(2) The applicant holds a current license to practice veterinary medicine in a jurisdiction of the United States or Canada.

(3) The applicant has satisfied the qualifications for licensure, in s. VE 1.16, within the last 5 years or has actively practiced for 4000 hours during the 5 years preceding application. If the applicant has neither satisfied the qualifications for licensure, in s. VE 1.16, within the last 5 years nor actively practiced for 4000 hours during the 5 years preceding application, the board shall inquire as to whether the applicant is competent to practice as a veterinarian in this state and shall impose any reasonable conditions on instatement of the license, including reexamination, as the board deems appropriate. An applicant under this section 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 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.

(4) For an applicant holding a current unrestricted license to practice veterinary medicine in a country other than the United States or Canada, who is not a graduate of an approved veterinary college, in addition to the requirements of sub. (3), submit evidence that the applicant has successfully completed either the certification program of the educational commission for foreign veterinary graduates of the AVMA or the program for the assessment of veterinary education equivalence offered by the AAVSB.

(5) For an applicant holding a current unrestricted license to practice veterinary medicine in a country other than the United States or Canada, who is a graduate of a school of veterinary

medicine approved by the board, in addition to the requirements of sub. (3), submit the following:

(a) Evidence satisfactory to the board that the requirements for initial licensure in the country where the applicant was originally licensed, including examination requirements, are substantially equivalent to the requirements for graduates of schools of veterinary medicine approved by the board who are seeking initial licensure in this state; or

(b) Before November 1, 2000, evidence that the applicant has successfully completed the national board examination and the clinical competency test. On or after November 1, 2000, evidence that the applicant has successfully completed the NAVLE.

(6) Provides verification of licensure records and status which has been provided directly to the board by every jurisdiction in which the applicant has ever held a license or certificate to practice veterinary medicine or by the AAVSB.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.20 Licensure review by board. The board may determine that an applicant is not eligible for licensure, or a license is not eligible for renewal, if any of the following apply:

(1) The applicant has a conviction record or pending criminal charge relating to an offense the circumstances of which substantially relate to the practice of veterinary medicine.

(2) The applicant has been disciplined by the veterinary licensing authority in any other jurisdiction.

(3) The applicant is a party in pending litigation in which it is alleged that the applicant is liable for acts committed in the course of practice which evidence a lack of ability or fitness to practice, as determined by the board.

(4) The applicant is currently under investigation by another veterinary licensing authority, for acts, related to the license to practice veterinary medicine, which may provide a basis for disciplinary action in this state, as determined by the board.

(5) The applicant has been found liable for damages for acts committed in the course of practice of veterinary medicine which evidenced a lack of ability or fitness to practice, as determined by the board.

(6) The applicant has had United States drug enforcement administration privileges restricted or revoked.

(7) The applicant has had physical or mental impairment, including impairment related to drugs or alcohol, which is reasonably related to the applicant's ability to adequately undertake the practice of veterinary medicine in a manner consistent with the safety of a patient or the public.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.22 Reciprocal credentials for service members, former services members, their spouses.

(1) The board shall grant a license or permit to an individual who the board determines meets all of the requirements under s. 89.073, Stats.

(2) A person applying for a reciprocal credential under s. 89.073, Stats., shall pay one of the following nonrefundable fees as applicable:

(a) \$40 for a service member or former service member.

(b) \$141 for a spouse as defined by s. 89.073 (1) (c), Stats.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22; correction in (1), (2) (intro.), (b) made under s. 35.17, Stats., Register July 2022 No. 799.

VE 1.24 Issuing a license. (1) The board shall review its records to determine eligibility of the applicant for licensure.

Within 30 business days of determining an applicant is eligible for licensure, the board shall issue a license to the applicant.

(2) The board shall inquire as to whether the applicant is competent to practice as a veterinarian in this state and shall impose any reasonable conditions in issuing the license, including reexamination, as the board deems appropriate, if any of the following apply:

(a) The applicant has not previously been licensed in any jurisdiction and passed the NAVLE more than 5 years ago.

(b) The applicant was previously licensed in Wisconsin or another jurisdiction and has not been licensed in any jurisdiction for more than 5 years.

(c) The board has reviewed the application under any provision in s. VE 1.20.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.26 **Administrative fees.** (1) A person requesting a printed license shall pay a nonrefundable fee of \$10.

(2) A person requesting verification of licensure to another state or organization shall pay a nonrefundable fee of \$10.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.28 **Renewal of license.** A license expires if not renewed by January 1 of even-numbered years. A licensee who allows the license to expire may apply to the board for renewal of the license as follows:

(1) If the licensee applies for renewal of the license less than 5 years after its expiration, the license shall be renewed upon payment of the renewal fee, payment of the late fee if applicable, and fulfillment of 30 hours of continuing education required under s. VE 1.30 completed before the license renewal. The board may review the application for items listed under s. VE 1.20.

(2) If the licensee applies for renewal of the license 5 or more years after its expiration, in 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 inquire as to whether the applicant is competent to practice as a veterinarian in this state and 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 to practice as a veterinarian in this state if at the time of application for renewal the applicant 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. 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). The board may review the application for items listed under s. VE 1.20.

(3) The licensee shall pay a nonrefundable renewal fee of \$160.

(4) A licensee who submits a license renewal after January 1 of even numbered years shall pay, in addition to the renewal fee under sub. (3), a nonrefundable late fee of \$25.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.30 **Continuing education; requirements.** (1)

(a) Except as provided in subs. (2) and (3), a veterinarian shall complete at least 30 hours of continuing education pertinent to veterinary medicine in each biennial renewal period. The 30 hours of continuing education shall include at least 25 hours of

continuing education that relates to scientific topics pertinent to veterinary medicine.

(b) All 30 continuing education hours in this subsection shall be documented. A minimum of 25 hours of continuing education shall be documented by an approved continuing education provider.

(c) A continuing education hour shall consist of 50 minutes of contact time.

(2) Subsection (1) does not apply to an applicant who applies to renew a license that expires on the first expiration date after the initial issuance of the license.

(3) The board may waive the requirements, under sub. (1), if it finds that exceptional circumstances, such as prolonged illness, disability, or other similar circumstances, have prevented an applicant from meeting the requirements.

(4) Continuing education hours shall be completed during the preceding 2-year licensure period.

(5) To obtain credit for completion of continuing education hours, a licensee shall, at the time of each renewal, sign a statement saying that the licensee has completed, during the preceding 2-year licensure period, the continuing education programs required under sub. (1).

(6) A veterinarian who fails to complete the continuing education requirements by the renewal date shall not practice as a veterinarian until the license is renewed.

(7) For auditing purposes, every veterinarian shall maintain records of continuing education hours for at least 5 years from the date the certification statement required under sub. (5) is signed. The board may audit for compliance by requiring a veterinarian to submit evidence of compliance to the board for the biennium immediately preceding the biennium in which the audit is performed. Documentation of completion of continuing education hours shall include one of the following:

(a) A certificate of attendance from an approved course provider.

(b) A grade report or transcript from an accredited college or university.

(c) A copy of a published work authored or co-authored by the licensee.

(d) A copy of a meeting syllabus, announcement, abstract or proceeding for a presentation.

(e) A signed document from an internship or residency institution certifying enrollment in a program.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.32 **Continuing education; programs and courses.** (1) CRITERIA FOR PROGRAMS AND COURSE APPROVAL. To be approved, a continuing education program or course shall meet the following criteria:

(a) The subject matter of the program or course shall be pertinent to veterinary medicine.

(b) The program or course sponsor agrees to record registration and furnish a certificate of attendance to each participant.

(2) UNRELATED SUBJECT MATTER. If a continuing education course includes subject matter that is not pertinent to veterinary medicine, only those portions of the course that relate to veterinary medicine will qualify as continuing education under this chapter.

(3) MODALITIES AND METHODS OF DELIVERY. Modalities and methods of delivery of continuing education programs acceptable to the board include one or more of the following:

(a) Attendance at a scientific workshop, seminar, or laboratory demonstration pertinent to veterinary medicine.

(b) Enrollment in graduate or other college level courses pertinent to veterinary medicine. Credit for qualified courses will be approved on the basis of multiplying each college credit hour by 10.

(c) Enrollment in an internship, residency or certification program approved by a veterinary specialty organization recognized by the AVMA or in an AVMA accredited veterinary school.

(d) Authorship or co-authorship of a published work, such as review articles, abstracts, presentations, proceedings, book chapters, and web-based continuing education materials shall be approved for 5 hours each.

(e) A peer reviewed publication shall be approved for 5 hours.

(f) Development and presentation of research findings, scientific workshops, seminars or laboratory demonstrations pertinent to veterinary medicine shall be approved for 5 contact hours each.

(g) Up to 15 hours per biennium shall be granted for a combination of continuing education hours completed under pars. (d) to (f), provided the continuing education is published or presented under the auspices of a provider approved under sub. (4).

(h) On-line, video, audio, correspondence courses, or other interactive distance learning courses pertinent to veterinary medicine, or to employment as a veterinarian.

(4) APPROVED PROGRAM PROVIDERS. Subject to compliance with the requirements set forth in subs. (1) to (3), the board shall approve attendance at and completion of one or more continuing education programs approved by any one of the following approved program providers as fulfilling the continuing education hours required under this chapter:

(a) A national, regional, state, or local veterinary medical or veterinary technician association.

(b) A federal or state agency.

(c) An accredited college or university.

(d) An association listed in the AVMA or the National Association of Veterinary Technicians in America directory.

(e) An AVMA accredited veterinary school or veterinary technician program.

(f) A program approved by the AAVSB through its Registry of Approved Continuing Education approval program.

(g) A foreign veterinary medical or veterinary technician association, an accredited college or university, or a governmental agency that is, as determined by the board comparable to a program provider listed under pars. (a) to (f).

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

Subchapter IV – Permits

VE 1.34 Temporary veterinary permits. (1) In this section, “preceptor” means a veterinarian who agrees to supervise a holder of a temporary veterinary permit.

(2) An applicant may be granted a temporary veterinary permit before the board receives notice of successful completion of the NAVLE or the examination on state laws and rules related to the practice of veterinary medicine, if the applicant provides evidence that the applicant is either scheduled to take the examination for the first time, or is awaiting results of the examination.

(3) An applicant shall complete an application for temporary veterinary permit and submit the nonrefundable fee of \$10.

(4) The board shall receive written verification of employment signed and provided directly to the board by the preceptor.

(5) The application and verification required by subs. (3) and (4) shall be received by the board office at least 2 weeks prior to the date the applicant intends to begin work.

(6) In order to provide supervision for a holder of a temporary veterinary permit, a preceptor shall do all of the following:

(a) Delegate only those tasks commensurate with demonstrated abilities of the temporary veterinary permit holder.

(b) Be available for direct communication with the temporary veterinary permit holder when the temporary veterinary permit holder is providing veterinary services. Direct communication shall be in person, by telephone, video conference, or electronic communication device.

(7) A temporary veterinary permit shall expire upon any of the following:

(a) Notification of failure of any examination.

(b) Failure to take the next scheduled examination.

(c) Issuance of a license.

(d) Denial of a license.

(8) An applicant may be granted a temporary veterinary permit only once.

(9) Any change or addition of preceptor shall be reported to the board by filing a new verification as specified in sub. (4).

(10) Within 30 business days of determining an applicant is eligible for a temporary permit, the board shall issue a permit to the applicant. Notification of issuance shall also be provided to the preceptor.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.36 Veterinary consulting permits. (1) The board may issue a veterinary consulting permit to practice veterinary medicine in this state to a person holding a license to practice veterinary medicine in another state or territory of the U.S. or in another country, provided the licensee is in good standing in the other jurisdiction, and a veterinarian has requested a consultation.

(2) A veterinary consulting permit may be used up to 60 total days per calendar year.

(3) The veterinary consulting permit shall expire on December 31 of each year or on the 60th day of use in a calendar year. The holder of a consulting permit may apply for a new permit for a subsequent year by completing the application procedure specified in this section.

(4) An applicant for a veterinary consulting permit shall file a completed application with the board. All supporting documents shall be provided in English. An application is not complete until the board receives all of the following:

(a) An application form provided by the board and completed by the applicant which includes the applicant’s notarized signature.

Note: Applications are available upon request to the board office located 2811 Agriculture Drive, P.O. Box 8911, Madison, WI 53708-8911.

(b) The required nonrefundable fee of \$160.

(c) Verification of licensure records and status which has been provided directly to the board by the jurisdictions or the AAVSB for every state or country in which the applicant has ever held a license or certificate to practice veterinary medicine.

(d) Written verification from a veterinarian that a consultation is being sought.

(5) A veterinary consulting permit shall automatically expire upon notice to the board that the consultation has been completed.

(6) After hearing, a veterinary consulting permit may be denied, suspended, limited or revoked, or the permittee may be reprimanded, for any of the following reasons:

(a) Revisiting the patient or client or communicating directly with the client without the knowledge of the attending veterinarian.

(b) Taking charge of a case or problem without the consent of the attending veterinarian and the client.

(c) Violating any law or rule related to the practice of veterinary medicine.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

Subchapter V – Practice Related to Veterinary Schools

VE 1.38 **Faculty license.** (1) APPLICATION. An applicant for a faculty license under s. 89.06 (2m) (a), Stats., shall file a completed application with the board. All supporting documents shall be submitted in English. An application is not complete until the board receives all of the following:

(a) An application form provided by the board and completed by the applicant, which includes the applicant's notarized signature.

Note: Applications are available upon request to the board office located at 2811 Agriculture Drive, P.O. Box 8911, Madison, Wisconsin 53708-8911.

(b) The required nonrefundable fee of \$185.

(c) Verification of employment by a school of veterinary medicine in this state which has been submitted directly to the board by the dean of the school.

(d) Proof of graduation through one of the following means:

1. A certificate of graduation from an approved veterinary college signed and sealed by the dean of the school submitted directly to the board by the school, or evidence of substantially equivalent qualifications.

2. Certification of graduation provided by the AAVSB.

(e) Successful completion of an examination on state laws and rules related to the practice of veterinary medicine.

(2) DISCIPLINARY ACTION. A faculty license may be denied, suspended, limited or revoked, or the licensee may be reprimanded, for any of the following reasons:

(a) Violation of any law or regulation substantially related to the practice of veterinary medicine.

(b) Engaging in the practice of veterinary medicine in this state outside the scope of employment unless licensed to do so.

(3) EXPIRATION. The faculty license expires upon termination of the faculty employee's employment with the school of veterinary medicine, as reported by the dean of the school of veterinary medicine.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.40 **Post graduate training permit.** (1) The board may grant a post graduate training permit allowing the permit holder to practice veterinary medicine on privately owned animals only within the scope of the permittee's internship or residency program at a school of veterinary medicine in this state.

(2) An applicant for a post graduate training permit under s. 89.06 (2m) (b), Stats., shall file a completed application with the board. All supporting documents shall be provided in English.

An application shall not be considered complete until the board receives all of the following:

(a) An application form provided by the board and completed by the applicant, including the applicant's notarized signature.

Note: Applications are available upon request to the board office located at 2811 Agriculture Drive, P.O. Box 8911, Madison, Wisconsin 53708-8911.

(b) Evidence that the applicant has received a degree from a school of veterinary medicine or an equivalent degree.

(c) The required nonrefundable fee of \$100.

(d) Verification that the applicant is undertaking intern or resident training at a school of veterinary medicine in this state. Verification shall consist of certification signed and sealed by the dean of the school and submitted directly to the board by the school.

(3) An applicant for a post graduate training permit shall successfully complete an examination on state laws and rules related to the practice of veterinary medicine before a permit may be issued.

(4) A post graduate training permit may be denied, suspended, limited or revoked, or the licensee may be reprimanded, for any of the following reasons:

(a) Violation of any law or regulation substantially related to the practice of veterinary medicine.

(b) Engaging in the practice of veterinary medicine in the State of Wisconsin outside the scope of the training program unless licensed to do so.

(5) The post graduate training permit expires upon termination of the permittee's internship or residency program, as reported by the dean of the school of veterinary medicine.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.42 **Veterinary students.** (1) A veterinary student may practice veterinary medicine within the school of veterinary medicine pursuant to standards and supervisory protocols established by the school.

(2) A veterinary student may perform delegated veterinary acts outside of the school setting as set forth under s. VE 1.44 (1), (3), and (9).

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

Subchapter VI – Standards of Practice and Unprofessional Conduct

VE 1.44 **Delegation of veterinary medical acts.** (1) In delegating the provision of veterinary medical acts to veterinary students, certified veterinary technicians and others, the veterinarian shall do all of the following:

(a) Delegate only those tasks commensurate with the education, training, experience and demonstrated abilities of the person supervised.

(b) Provide the supervision required under subs. (2) to (8).

(c) Where the veterinarian is not required to be personally present on the premises where the delegated services are provided, be available at all times for consultation either in person or within 15 minutes of contact by telephone, by video conference or by electronic communication device.

(d) Observe and monitor the activities of those supervised on a daily basis.

(e) Evaluate the effectiveness of delegated acts performed under supervision on a daily basis.

(f) Establish and maintain a daily log of each delegated patient service which has been provided off the premises of the supervising veterinarian.

(g) Notify the client that some services may be provided by a veterinary student, certified veterinary technician or an unlicensed assistant.

(2) The following acts are limited to those holding a license under s. 89.06 (1), 89.06 (2m) (a), or 89.072, Stats.; a permit under s. VE 1.36, 1.38, or 1.40; or active status as a student at a college of veterinary medicine approved by the board, and may not be delegated to or performed by veterinary technicians or other persons not holding such license or permit:

(a) Diagnosis and prognosis of animal diseases and conditions.

(b) Prescribing of drugs, medicines, treatments and appliances.

(c) Performing surgery, which means any procedure in which the skin or tissue of the patient is penetrated or severed but does not include any of the following:

1. Activities not considered the practice of veterinary medicine, as follows:

- a. Activities identified in s. 89.05 (2) (a) and (b), Stats.
- b. Subcutaneous insertion of a microchip for identifying an animal.
- c. Ear tag or tattoo placement for identifying an animal.
- d. Euthanasia by injection.

2. Activities considered the practice of veterinary medicine, but which a veterinarian may delegate to a certified veterinary technician, as specified in s. VE 1.44 (5) and (6), as follows:

- a. Simple dental extractions that require minor manipulation and minimal elevation.
- b. Administration of injections, including local and general anesthesia.
- c. Sample collection via a cystocentesis procedure.
- d. Placement of intravenous and arterial catheters.
- e. Suturing of tubes and catheters.
- f. Fine needle aspirate of a mass.
- g. Performing amniocentesis, embryo collection and transfer, follicular aspiration, and transvaginal oocyte collection and recovery on livestock.

(3) Except as provided under s. 95.21 (2), Stats., veterinarians may delegate to veterinary students the provision of veterinary medical services under the supervision of the veterinarian when the veterinarian is personally present on the premises where the services are provided.

(4) Except as provided under s. 95.21 (2), Stats., veterinarians may delegate to certified veterinary technicians the provision of the following veterinary medical services under the supervision of the veterinarian:

(a) Nonsurgical veterinary treatment of animal diseases and conditions, including administration of vaccines.

Note: See s. 95.21 (2) (a), Stats., for the delegation of rabies vaccinations.

(b) Observations and findings related to animal diseases and conditions to be utilized by a veterinarian in establishing a diagnosis or prognosis, including routine radiographs, nonsurgical specimen collection, drawing of blood for diagnostic purposes, and laboratory testing procedures.

(c) Administration of sedatives and presurgical medications.

(d) Nutritional evaluation and counseling.

(e) Except to certified veterinary technicians who are also licensed professionals governed by the provisions in s. VE 1.48,

the provision of any complementary, alternative, or integrative therapy, as defined in s. VE 1.48 (1).

(5) Veterinarians may delegate to certified veterinary technicians the provision of the following veterinary medical services 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:

(a) Performing diagnostic radiographic awake contrast studies not requiring general anesthesia.

(b) Sample collection via cystocentesis procedure.

(c) Placement of intravenous catheters.

(d) Suturing of tubes and catheters.

(f) Fine needle aspirate of a mass.

(6) Veterinarians may delegate to certified veterinary technicians the provision of the following veterinary medical services under the supervision of the veterinarian when the veterinarian is personally present on the premises where the services are provided:

(a) Administration of local or general anesthesia, including induction and monitoring.

(b) Performing diagnostic radiographic contrast studies, including those requiring general anesthesia.

(c) Dental prophylaxis and simple extractions that require minor manipulation and minimal elevation.

(d) Placement of arterial catheters.

(e) Performing amniocentesis, embryo collection and transfer, follicular aspiration, and transvaginal oocyte collection and recovery on livestock.

(7) Veterinarians may delegate to unlicensed assistants the provision of the following veterinary medical services under the supervision of the veterinarian:

(a) Basic diagnostic studies, including routine radiographs, nonsurgical specimen collection, and laboratory testing procedures.

(b) Monitoring and reporting to the veterinarian changes in the condition of a hospitalized patient.

(c) Dispensing prescription drugs pursuant to the written order of the veterinarian.

(8) Except as provided under s. 95.21, Stats., veterinarians may delegate to unlicensed assistants the provision of the following veterinary medical services under the supervision of the veterinarian when the veterinarian is personally present on the premises where the services are provided:

(a) Nonsurgical veterinary treatment of animal diseases and conditions, including administration of vaccines, and administration of sedatives and presurgical medications.

(b) Observations and findings related to animal diseases and conditions to be utilized by a veterinarian in establishing a diagnosis or prognosis, including the drawing of blood for diagnostic purposes.

(c) Dental prophylaxis.

(d) Nutritional evaluation and counseling.

(e) Placement of intravenous catheters.

(9) Notwithstanding subs. (1) to (8), a veterinary student, certified veterinary technician or unlicensed assistant employed by a veterinarian may, 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.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22; correction in numbering of (2) (c) 1., 2. made under s. 13.92 (4) (b) 7., Stats., Register July 2022 No. 799.

VE 1.46 **Veterinary consulting.** (1) DEFINITIONS. In this section:

(a) “Consulting veterinarian” means the veterinarian who gives advice or assistance, whether in-person or by any method of communication, to the attending veterinarian, for the benefit of a patient.

(b) “Consultant” means a person whose subject matter expertise, in the opinion of the attending veterinarian, will benefit a patient, and who gives the attending veterinarian advice or assistance, whether in-person or by any method of communication.

(2) A consulting veterinarian or other consultant may give advice or assistance to the attending veterinarian where the VCPR remains with the attending veterinarian and the responsibility for patient treatment, prescriptions, and welfare remain with the attending veterinarian.

(3) A consulting veterinarian or other consultant may not do any of the following:

(a) Visit the patient or client or communicate directly with the client without the knowledge of the attending veterinarian.

(b) Take charge of a case or problem without the consent of the attending veterinarian and the client.

(4) Subsection (3) does not apply to other veterinarians licensed by the board, practicing with the attending veterinarian, who have access to, and have reviewed, the medical history and records of the animal.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.48 **Veterinary referral to a license holder in another profession.** (1) In this section, “Complementary, alternative, and integrative therapies” means a heterogeneous group of preventive, diagnostic, and therapeutic philosophies and practices. These therapies include:

(a) Veterinary acupuncture, acuthery, 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.

(2) A veterinarian may 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 sub. (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.

(3) The VCPR, as defined in s. 89.02 (8), Stats., 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 sub. (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.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.50 **Veterinary telemedicine.** (1) In this section, “telemedicine” means the remote delivery of veterinary healthcare services, such as health assessments or consultations, over the telecommunications infrastructure, allowing a veterinarian to evaluate, diagnose and treat patients without the need for an in-person visit.

(2) The practice of veterinary medicine, in accordance with ss. 89.05 (1) and 89.02 (6), Stats., takes place where the animal is located at the time of practice.

(3) In order to practice veterinary telemedicine in Wisconsin, a veterinarian must be licensed in Wisconsin.

(4) Except as provided under subs. (6) and (7) and s. VE 1.46, the veterinarian must have an established VCPR with the client. The VCPR must be established via an in-person physical exam, or timely medically appropriate visits to the premises on which the patient is kept. The VCPR may not be established by telehealth technologies.

(5) The VCPR, once established, extends to other veterinarians licensed by the board, who are practicing with the attending veterinarian, and who have access to, and have reviewed, the medical history and records of the animal.

(6) Tele-triage and emergency animal care, including animal poison control services, for immediate, potentially life-threatening animal health situations, including poison exposure mitigation, animal cardiopulmonary resuscitation instructions, and other critical lifesaving treatment or advice that may be performed within or outside of a VCPR.

(7) A veterinarian may provide general advice in general terms that is not specific to an individual animal or group of animals, diagnosis, or treatment, and may provide this general advice within or outside of an established VCPR.

(8) Records must be kept in accordance with this chapter.

(9) In accordance with s. 89.02 (8) (c), Stats., an animal owner must be able to easily seek follow-up care or information from the veterinarian who conducts an encounter while using telehealth technologies.

(10) A veterinarian using telehealth technologies is required to follow all applicable requirements of this chapter.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22; correction in (2), (9) made under s. 35.17, Stats., Register July 2022 No. 799.

VE 1.52 **Records.** (1) A veterinarian shall maintain individual patient records on every patient administered to by the veterinarian other than food and fiber patients and equine patients for a period of not less than 3 years after the date of the last entry. The veterinarian shall keep individual client records for equine and food and fiber patients for 3 years after the date of the last entry. A computerized system may be used for maintaining a record, as required under this section, if the system is capable of producing a printout of records contained in such system within 48 hours of a request.

(2) The individual patient record shall contain clinical information pertaining to patients other than food and fiber patients and equine patients with sufficient information to justify the diagnosis and warrant treatment, including information regarding each of the following matters which apply:

- (a) Date.
- (b) Client name.
- (c) Patient identification.
- (d) History.
- (e) Complaint.
- (f) Present illness.
- (g) Provisional diagnosis.
- (h) Physical examination findings.
- (i) Record of client's informed consent by signature and date or other specified means.
- (j) Treatment — medical, surgical.
- (k) Vaccinations administered.
- (L) Drugs prescribed, dispensed or administered, including strength or concentration, route of administration, dosing schedule, number dispensed and number of refills allowed.
- (m) Final diagnosis.
- (n) Consultation, if any.
- (o) Clinical laboratory reports.
- (p) Radiographic reports.
- (q) Necropsy findings.
- (r) Identification of the veterinarian providing the care.
- (3)** The client record for food and fiber patients shall contain at least the following information which apply:
 - (a) Date.
 - (b) Client name.
 - (c) Type of call.
 - (d) Individual or herd diagnosis.
 - (e) Record of client's informed consent by signature and date or other specified means.
 - (f) Treatment and drugs used including amounts of drugs administered and method of administration.
 - (g) Drugs dispensed including dosing schedule and number dispensed.
 - (h) Meat or milk withholdings.
 - (i) Clinical laboratory reports.
 - (j) Identification of the veterinarian providing the care.
- (4)** The client record for equine patients shall contain at least the following information which applies:
 - (a) Date.
 - (b) Client name.
 - (c) Patient identification.
 - (d) History.
 - (e) Physical examination findings.
 - (f) Diagnosis.
 - (g) Record of client's informed consent by signature and date or other specified means.
 - (h) Treatment-medical, surgical.
 - (i) Treatment and drugs used including amount of drugs administered and method of administration.
 - (j) Drugs dispensed including dosing schedule and number dispensed.
 - (k) Clinical laboratory reports.
 - (L) Radiographic reports.
 - (m) Necropsy findings.
 - (n) Identification of the veterinarian providing the care.

(5) A veterinarian shall provide access to health care records in accordance with s. 89.075, Stats.
History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22; correction in (5) made under s. 35.17, Stats., Register July 2022 No. 799.

VE 1.54 Change of name and address. Every veterinarian shall notify the board of a change of name or address within 30 days.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.56 Display of license. Each veterinarian shall display a current license in a manner conspicuous to the public view, and shall at all times have evidence of licensure available for inspection when practicing at a remote location.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

VE 1.58 Unprofessional conduct. Unprofessional conduct by a veterinarian is prohibited. Unprofessional conduct includes:

- (1)** Unprofessional conduct under s. 89.07 (1), Stats.
- (2)** Conduct in the practice of veterinary medicine which evidences a lack of knowledge or ability to apply professional principles or skills.
- (3)** Fraud in the practice of veterinary medicine, including any of the following:
 - (a) The making of false claims regarding knowledge, ability, skills or facilities for use in treatment or diagnosis of a disease.
 - (b) The making of false claims regarding testing, inspecting, reporting or issuing of inter-state, intra-state or export health certificates.
- (4)** Gross, serious, or grave negligence, as compared to less serious or more ordinary acts of negligence, in the practice of veterinary medicine.
- (5)** "Deception" in the practice of veterinary medicine, including any of the following:
 - (a) Claiming to have performed an act or given a treatment which has not in fact been performed or given.
 - (b) Giving needless treatment.
 - (c) Using a different treatment than stated.
- (6)** Being convicted of a crime the circumstances of which substantially relate to the practice of veterinary medicine.
- (7)** Violating or aiding and abetting the violation of any law or administrative rule or regulation substantially related to the practice of veterinary medicine.
- (8)** Advertising in a manner which is false, fraudulent, misleading or deceptive, or knowingly maintaining a professional association with another veterinarian or veterinary firm that advertises in a manner which is false, fraudulent, misleading or deceptive.
- (9)** Having a veterinary license or federal veterinary accreditation limited, suspended or revoked, or having been subject to any other related discipline or restriction.
- (10)** Practicing or attempting to practice, while the veterinarian has a physical or mental impairment, including impairment related to drugs or alcohol which is reasonably related to the applicant's ability to adequately undertake the practice of veterinary medicine in a manner consistent with the safety of a patient or the public.
- (11)** The personal use, misuse, or sale, other than for medical treatment of patients, of the drugs listed in the U.S. Controlled Substances Act of 1979, as amended, or ch. 961, Stats., except personal use of drugs prescribed by a physician for individual use by the veterinarian.
- (12)** Prescribing, ordering, dispensing, administering, supplying or giving of any amphetamine, its salts, isomers and salts of its isomers or related sympathomimetic amine drug designated as a Schedule II drug in ch. 961, Stats., except for the treatment of narcolepsy or hyperkinesis in animals who do not

respond to other methods of treatment, or for clinical research of these compounds as approved by the board. A written description of the intended research project proposed shall be filed with the board prior to conducting the research.

(13) Prescribing or dispensing veterinary prescription drugs to a client without following the requirements in s. 89.068 (1) (c), Stats.

(14) Dispensing any veterinary prescription drugs to a person unless the person requests fulfillment of a prescription meeting the requirements of s. 89.068 (1) (b), Stats.

(15) Failure to include on the label of a prescription drug the generic or brand name of the drug dispensed, the name and address of the clinic or veterinarian dispensing the drug, the directions for use and caution statements required by law. In case of companion animals, the prescription shall bear the name or identification of the patient.

(16) Prescribing, ordering, dispensing, administering, supplying or giving any controlled substance solely for training or racing purposes and not for a medically sound reason.

(17) Allowing a veterinary student to treat a patient without the veterinarian giving supervision.

(18) Failure of the veterinarian to advise the client that the person assisting is a veterinary student or unlicensed assistant.

(19) Failure to maintain records as required by s. VE 1.52.

(20) Refusal, upon request, to cooperate in a timely manner with the board's investigation of complaints lodged against the veterinarian. Persons taking longer than 30 days to provide requested information shall have the burden of demonstrating that they have acted in a "timely manner."

(21) Failure to keep the veterinary facility and all equipment, including mobile units, in a clean and sanitary condition while practicing as a veterinarian.

(22) Failure of a veterinarian to permit the board or its agents to enter and inspect the veterinarian's practice facilities, vehicle, equipment and records during office hours and other reasonable hours.

(23) Engaging in unsolicited communications to members of the board regarding a matter under investigation by the board other than to the investigative member of the board.

(24) Practicing under an expired license.

(25) Exceeding the scope of veterinary practice, as defined in s. 89.02 (6), Stats., by providing medical treatment to humans or distributing, prescribing or dispensing for human use prescription drugs, as defined in s. 450.01 (20), Stats., or any drug labelled for veterinary or animal use only.

(26) Falsely certifying to the board under s. VE 1.30 (5) that the veterinarian:

(a) Has completed the 30 hours of continuing education required under s. VE 1.30 (1).

(b) Is exempt under s. VE 1.30 (2) from having to complete the 30 hours of continuing education required under s. VE 1.30 (1).

(27) Failure to inform a client prior to treatment of the diagnostic and treatment options consistent with the veterinary profession's standard of care, meaning diagnostic procedures and modes of treatment considered by the veterinary profession to be within the scope of current, acceptable veterinary medical practice, and the associated benefits and risks of those options.

(28) Failure to release a patient's medical records as required by s. 89.075, Stats.

(29) Advertising a specialty or claiming to be a specialist when not a diplomate of a veterinary specialty organization recognized by the AVMA American Board of Veterinary Specialties or by a foreign veterinary specialty organization which, in the opinion of the board, is equivalent to an AVMA American Board of Veterinary Specialists recognized veterinary specialty organization.

(30) Failure to provide copies of or information from veterinary records, with or without the client's consent, to the board or to public health, animal health, animal welfare, wildlife or agriculture authorities, employed by federal, state, or local governmental agencies who have a legal or regulatory interest in the contents of said records for the protection of animal or public health.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22; correction in (1) made under s. 35.17, Stats., Register July 2022 No. 799.

VE 1.60 **Board action.** The board may reprimand the licensee or deny, suspend, limit or revoke a veterinary license or permit under this chapter for cause, including any of the following:

(1) Filing an incomplete or fraudulent application, or misrepresenting any information on an application.

(2) Violating this chapter or ch. 89, Stats.

History: CR 21-062: cr. Register July 2022 No. 799, eff. 8-1-22.

STATEMENT OF SCOPE

Veterinary Examining Board

Rule No.: Ch. VE 1, Wis. Admin. Code (Existing)

Relating to: Veterinarians

Rule Type: Permanent

1. Finding/nature of emergency (Emergency Rule only):

Not applicable.

2. Detailed description of the objective of the proposed rule:

The objective of the proposed rule is to evaluate veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

Existing Policies Relevant to the Rule:

Under s. 89.06 (1), Stats., except as provided under ss. 89.072 and 89.073, veterinary licenses shall be issued only to persons who successfully pass an examination conducted by the examining board and pay the fee established under s. 89.063. An applicant for an initial license shall be a graduate of a veterinary college that has been approved by the examining board or have successfully completed either the educational commission for foreign veterinary graduates certification program of the American Veterinary Medical Association or the program for the assessment of veterinary education equivalence offered by the American Association of Veterinary State Boards.

Under s. 89.072 (1), Stats., upon application and payment of the fee established under s. 89.063, the examining board may issue a license to practice veterinary medicine to any person licensed to practice veterinary medicine in another state or territory of the United States or in another country if the applicant is not currently under investigation and has never been disciplined by the licensing authority in the other state, territory or country, has not been found guilty of a crime the circumstances of which are substantially related to the practice of veterinary medicine, is not currently 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 and has never been found liable for damages for acts committed in the course of practice which evidenced a lack of ability or fitness to practice.

Veterinary licensing processes are contained in ch. VE 1. Under s. VE 1.14 (6), applicants who have never been previously licensed in any jurisdiction must apply by examination, and applicants who have previously been licensed in Wisconsin or any other jurisdiction must apply by endorsement. Under s. VE 1.28, applicants who have previously been licensed in Wisconsin and allowed the license to expire may apply for renewal of the license.

There are unintentional gaps and inconsistencies in licensing processes. For example, the current rules do not have a clear process for applicants who have been disciplined by a licensing authority in the past. Under s. 89.072, the applicant cannot be licensed by endorsement, but under s. VE 1.14 (6) the applicant cannot be licensed by examination. As another example, VE 1.14 (6) requires applicants who have

previously been licensed in Wisconsin to apply by endorsement, but VE 1.28 allows these applicants to apply for renewal.

New Policies Proposed to be Included in the Rule and Analysis of Policy Alternatives:

The VEB proposes evaluating veterinary licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. Without the proposed rule, there would continue to be unintentional gaps in veterinary licensing processes.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

Section 89.03, Stats., authorizes the VEB to promulgate rules as follows:

89.03 Rules.

- (1) The examining board shall promulgate rules, within the limits of the definitions under s. 89.02 (6), establishing the scope of practice permitted for veterinarians and veterinary technicians and shall review the rules at least once every 5 years to determine whether they are consistent with current practice. The examining board may promulgate rules relating to licensure qualifications, denial of a license, certification, or temporary permit, unprofessional conduct, and disciplinary proceedings.
- (2) The examining board shall promulgate rules requiring training and continuing education sufficient to assure competency of veterinarians and veterinary technicians in the practice of veterinary medicine, except that the board may not require training or continuing education concerning the use, handling, distribution, and disposal of pesticides other than for disciplinary purposes.
- (3) The examining board shall promulgate rules specifying a procedure for addressing allegations that a person licensed or certified by the veterinary examining board under this chapter has practiced as a veterinarian or veterinary technician while impaired by alcohol or other drugs or that his or her ability to practice is impaired by alcohol or other drugs, and for assisting a person licensed by the veterinary examining board under this chapter who requests to participate in the procedure or who requests assistance in obtaining mental health services. In promulgating rules under this subsection, the examining board shall seek to facilitate early identification of chemically dependent veterinarians or veterinary technicians and encourage their rehabilitation. The rules promulgated under this subsection may be used in conjunction with the formal disciplinary process under this chapter. The examining board may contract with another entity to administer the procedure specified under the rules promulgated under this subsection.

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

DATCP estimates that it will use approximately 200 staff hours to develop this rule. This estimate includes time required for the investigation and analysis, rule drafting, preparing related documents, holding public hearings, and communicating with affected persons and groups. DATCP will use existing staff to develop this rule.

6. List with description of all entities that may be affected by the proposed rule:

Entities impacted by this rule include veterinarians, veterinary clinics, and consumers of veterinary services.

7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:

The proposed rule is specific to Wisconsin statutes. There is not a federal licensing process for veterinarians.

8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):

The proposed rule would evaluate VEB licensing processes for clarity, consistency, and to ensure there are processes for all applicant types. Most affected entities are small businesses, pursuant to the definition under s. 227.485 (1) (c), Wis. Stats. The overall anticipated economic impact is minor.

Contact Person: Angela Fisher (Angela.Fisher1@wisconsin.gov); Phone (608) 219-5761

Signed this ____ day of _____ 2023

Hunter Lang, DVM
Chair
State of Wisconsin Veterinary Examining Board

CHAPTER 89

VETERINARY EXAMINING BOARD

89.02	Definitions.	89.071	Administrative warnings.
89.03	Rules.	89.0715	Assessment of costs.
89.04	Violations.	89.072	Licenses of other jurisdictions.
89.05	Practice; penalties.	89.073	Reciprocal credentials for service members, former service members, and their spouses.
89.06	Licensure.	89.075	Access to health care records.
89.062	Renewal; continuing education.	89.078	Background investigations.
89.063	Fees.	89.079	Unauthorized practice.
89.065	Examinations.	89.08	Injunctive relief.
89.068	Drugs for animal use.		
89.07	Discipline.		

Cross-reference: See also [VE](#), Wis. adm. code.

89.02 Definitions. As used in this chapter, unless the context requires otherwise:

(1g) “Administer,” when used in reference to administering a drug to an animal, means directly applying the drug, whether by injection, ingestion, or any other means, to the body of the animal.

(1m) “Animal” means any animal except a human being.

(3) “Client” means the person who owns or who has primary responsibility for the care of a patient.

(3d) “Department” means the department of agriculture, trade and consumer protection.

(3g) “Dispense” means the act of delivering a drug to a person who may lawfully possess the drug, including the compounding, packaging or labeling necessary to prepare the drug for delivery.

(3r) “Drug” has the meaning given in s. 450.01 (10).

(4) “Examining board” means the veterinary examining board.

(4e) “Extra-label use” means use of a drug in a manner that is not in accordance with the directions for use that are contained on the label affixed to the container in which the drug is dispensed.

(4m) “Food-producing animal” means an animal that is raised to produce food for human consumption.

(4s) “Patient” means an animal that is examined or treated by a veterinarian.

(5) “Pesticide” has the meaning specified in s. 94.67 (25).

(5m) “Pharmacist” means an individual who is licensed as a pharmacist under ch. 450.

(6) To “practice veterinary medicine” means 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.

(6m) “Prescription” means a written, oral or electronic order from a veterinarian to a pharmacist or to another veterinarian that authorizes the pharmacist or other veterinarian to dispense a drug, or from a veterinarian to a client that authorizes the client to make extra-label use of a drug.

(7) “Veterinarian” means a practitioner of veterinary medicine who is duly licensed by the examining board.

(8) “Veterinarian–client–patient relationship” means a relationship between a veterinarian, a client and the patient in which all of the following apply:

(a) The veterinarian has assumed the responsibility for making medical judgments regarding the health of the patient and the patient’s need for medical treatment, and the client has agreed

to accept those medical judgments and to follow the related instructions of the veterinarian.

(b) The veterinarian has sufficient knowledge of the patient to initiate a general or preliminary diagnosis of the medical condition of the patient because the veterinarian has recently examined the patient or has made medically appropriate and timely visits to the premises on which the patient is kept.

(c) The veterinarian is readily available for follow-up treatment of the patient if the patient has an adverse reaction to veterinary treatment.

(9) “Veterinary drug” means any of the following:

(a) A drug that is recognized as a drug for animal use in the official U.S. pharmacopoeia or the official national formulary or any supplement to either of them.

(b) A drug that is intended for use in the diagnosis, cure, mitigation, treatment or prevention of disease in an animal.

(c) A drug that is intended to affect the structure or function of the body of an animal, including medicated feed or a growth-promoting implant, but not including feed that does not contain a drug.

(d) A substance that is intended for use as a component of a drug described in par. (a), (b) or (c).

(e) A drug that is produced and intended for human use but that is prescribed by a veterinarian for animal use.

(10) “Veterinary over-the-counter drug” means a drug that is labeled for animal use, that may be dispensed without a prescription and that is not required to bear the label statement: “CAUTION: Federal law restricts this drug to use by or on the order of a licensed veterinarian.”

(11) “Veterinary prescription drug” means a drug that may not be dispensed without the prescription of a veterinarian.

(12) “Veterinary technician” means a person duly certified by the examining board to work under the direct supervision of a licensed veterinarian.

History: 1975 c. 309; 1983 a. 189; 1987 a. 39; 1989 a. 279; 1991 a. 306; 1993 a. 213; 1995 a. 321; 1997 a. 27; 2015 a. 55 s. 2597, 4491; Stats. 2015 s. 89.02; 2015 a. 196.

The termination of the life of an animal by injection is not the practice of veterinary medicine. 65 Atty. Gen. 231.

89.03 Rules. (1) The examining board shall promulgate rules, within the limits of the definition under s. 89.02 (6), establishing the scope of practice permitted for veterinarians and veterinary technicians and shall review the rules at least once every 5 years to determine whether they are consistent with current practice. The examining board may promulgate rules relating to licensure qualifications, denial of a license, certification, or temporary permit, unprofessional conduct, and disciplinary proceedings.

(2) The examining board shall promulgate rules requiring training and continuing education sufficient to assure competency of veterinarians and veterinary technicians in the practice

89.03 VETERINARY EXAMINING BOARD

Updated 19–20 Wis. Stats. 2

of veterinary medicine, except that the board may not require training or continuing education concerning the use, handling, distribution, and disposal of pesticides other than for disciplinary purposes.

(3) The examining board shall promulgate rules specifying a procedure for addressing allegations that a person licensed or certified by the veterinary examining board under this chapter has practiced as a veterinarian or veterinary technician while impaired by alcohol or other drugs or that his or her ability to practice is impaired by alcohol or other drugs, and for assisting a person licensed by the veterinary examining board under this chapter who requests to participate in the procedure or who requests assistance in obtaining mental health services. In promulgating rules under this subsection, the examining board shall seek to facilitate early identification of chemically dependent veterinarians or veterinary technicians and encourage their rehabilitation. The rules promulgated under this subsection may be used in conjunction with the formal disciplinary process under this chapter. The examining board may contract with another entity to administer the procedure specified under the rules promulgated under this subsection.

History: 1987 a. 39; 1989 a. 279; 1995 a. 321; 2003 a. 103; 2009 a. 139; 2015 a. 55 s. 4492; Stats. 2015 s. 89.03; 2017 a. 59.

Cross-reference: See also VE, Wis. adm. code.

89.04 Violations. The chairperson of the examining board shall institute actions for violations of this chapter by any person and for violations of ch. 450 or 961 by veterinarians. The district attorney of the county in which the offense is committed shall promptly prosecute any such violation upon being informed thereof, from any source.

History: 1985 a. 146; 1993 a. 184; 1995 a. 448; 2015 a. 55 s. 4493; Stats. 2015 s. 89.04.

89.05 Practice; penalties. (1) Except as provided under sub. (2) and ss. 256.155 and 257.03, no person may offer to practice, advertise to practice or practice veterinary medicine, or use, in connection with his or her name, any title or description which may convey the impression that he or she is a veterinarian, without a license or temporary permit from the examining board. For purposes of this subsection, a person who makes extra-label use of a drug on an animal without a prescription or in any manner not authorized by that prescription is considered to be practicing veterinary medicine.

(2) No veterinary license or temporary permit is required for the following activities or persons:

(a) Artificial insemination, or for continuing the practice of pregnancy examinations of animals when such practice was engaged in prior to February 11, 1968.

(b) Castrating male livestock, as defined in s. 95.68 (1) (d) or for dehorning or branding animals.

(c) Students at a veterinary college approved by the examining board.

(d) Certified veterinary technicians while working under the direct supervision of a veterinarian.

(e) Employees of the federal government while engaged in their official duties.

(f) Employees of an educational or research institution while engaged in teaching or research. This paragraph does not apply to employees of a school of veterinary medicine in this state who practice veterinary medicine on privately owned animals.

(g) Employees of a school of veterinary medicine in this state who practice veterinary medicine on privately owned animals only as a part of their employment and who are licensed under s. 89.06 (2m).

(h) Graduates of schools outside the United States and Canada who are enrolled in the educational commission for foreign veterinary graduates certification program of the American Veterinary Medical Association while completing the required year of clinical assessment under the supervision of a veterinarian.

(3) Any person violating this section may for the first offense be fined not more than \$1,000, and for any 2nd offense within 3 years be fined not more than \$3,000.

History: 1975 c. 309; 1977 c. 418; 1979 c. 337; 1981 c. 125; 1987 a. 39; 1991 a. 306; 1995 a. 321; 2005 a. 96, 237; 2009 a. 42; 2015 a. 55 s. 4494; Stats. 2015 s. 89.05; 2017 a. 166.

A license under sub. (2) (a) is not required for person to engage in artificial insemination of animals but is required for persons engaged in pregnancy examinations who were not engaged in practice prior to February 11, 1968. 78 Atty. Gen. 236.

89.06 Licensure. (1) Except as provided under ss. 89.072 and 89.073, veterinary licenses shall be issued only to persons who successfully pass an examination conducted by the examining board and pay the fee established under s. 89.063. An applicant for an initial license shall be a graduate of a veterinary college that has been approved by the examining board or have successfully completed either the educational commission for foreign veterinary graduates certification program of the American Veterinary Medical Association or the program for the assessment of veterinary education equivalence offered by the American Association of Veterinary State Boards. Persons who qualify for examination may be granted temporary permits to engage in the practice of veterinary medicine in the employment and under the supervision of a veterinarian until the results of the next examination conducted by the examining board are available. In case of failure at any examination, the applicant shall have the privilege of taking subsequent examinations, upon the payment of another fee for each examination.

(2m) (a) Upon application, the examining board may issue a veterinary faculty license to an employee of a school of veterinary medicine in this state who has received the degree of doctor of veterinary medicine from a veterinary college approved by the examining board or if the examining board determines that the person possesses substantially equivalent qualifications. A person holding a veterinary faculty license may practice veterinary medicine on privately owned animals only within the scope of the person's employment at the school.

(b) Upon application, the examining board may grant a veterinary postgraduate training permit to a person undertaking intern or resident training at a school of veterinary medicine in this state. The only purpose of the veterinary postgraduate training permit is to provide opportunities in this state for the postgraduate education of persons who have received the degree of doctor of veterinary medicine or an equivalent degree but who have not yet met the requirements for licensure in this state. Issuance of a postgraduate training permit does not modify in any respect the requirements for licensure to practice veterinary medicine in this state, and a permit holder may practice veterinary medicine on privately owned animals only within the scope of the permit holder's internship or residency program. Violation of this restriction or of any applicable provision of this chapter constitutes cause for revocation of the permit.

(c) A license issued under this subsection expires upon termination of the licensee's employment at a school of veterinary medicine in this state. A postgraduate training permit expires upon termination of the permit holder's internship or residency program.

(3) A veterinary technician certification may be issued only to a person who is at least 18 years of age and has either:

(a) Successfully completed a 4-semester course of study in animal technology or its equivalent, at a technical school or college approved by the examining board, and has passed an examination, administered by the examining board, which establishes that the applicant's knowledge of animals and their treatment is sufficient to qualify the applicant as a veterinary technician; or

(b) Been an employee of a veterinarian for a total of 2 years and has passed an examination, administered by the examining board, which establishes that the applicant's knowledge of animals and their treatment is sufficient to qualify the applicant as a veterinary technician. The 2-year employment requirement of this paragraph shall include at least 50 percent of the applicant's

3 Updated 19–20 Wis. Stats.

time spent in practical field experience and the remainder of the applicant's time spent in laboratory work, office procedure, and technical veterinary training with a veterinarian.

History: 1971 c. 213 s. 5; 1975 c. 309; 1977 c. 29, 418; 1979 c. 34 s. 2102 (58) (b); 1981 c. 125; 1985 a. 182 s. 57; 1987 a. 39; 1991 a. 39; 1995 a. 321; 2001 a. 76; 2003 a. 103; 2009 a. 396; 2015 a. 55 s. 4495; Stats. 2015 s. 89.06; 2015 a. 179; 2017 a. 365 s. 111.

Cross-reference: See also chs. VE 3, 4, 5, 6, 8, and 10, Wis. adm. code.

The examining board lacks authority to condition the renewal of licenses upon either reexamination or continuing education. 65 Atty. Gen. 35.

89.062 Renewal; continuing education. (1) RENEWAL. The renewal date for veterinary licenses and veterinary technician certifications is December 15 of each odd-numbered year, and the renewal fees for such licenses and certifications are determined by the department under s. 89.063.

(2) CONTINUING EDUCATION. (a) Except as provided in sub. (3), the examining board may not renew a veterinary license unless the applicant certifies that he or she has completed, during the preceding 2-year licensure period, at least 30 hours of continuing education programs or courses approved by the examining board.

(b) Except as provided in sub. (3), the examining board may not renew a veterinary technician certification unless the applicant certifies that he or she has completed, during the preceding 2-year certification period, at least 15 hours of continuing education programs or courses approved by the examining board.

(c) If any complaint is made against a veterinarian or veterinary technician, the examining board may require the veterinarian or veterinary technician to submit proof of the continuing education programs or courses that he or she has completed during the preceding 2-year licensure or certification period.

(3) EXCEPTIONS. (a) Subsection (2) (a) and (b) does not apply to an applicant who applies to renew a license or certification that expires on the first expiration date after initial issuance of the license or certification.

(b) The examining board may waive the requirements of sub. (2) (a) or (b) if it finds that exceptional circumstances, such as prolonged illness, disability, or other similar circumstances, have prevented an applicant from meeting the requirements.

History: 2003 a. 103 ss. 2, 4; 2007 a. 20; 2015 a. 55 s. 4496; Stats. 2015 s. 89.062.

89.063 Fees. The department shall determine by rule the fees for each initial license, certification, and permit issued under ss. 89.06, 89.072, and 89.073, and, if applicable, for renewal of the license, certification, or permit, including late fees, based on the department's administrative and enforcement costs under this chapter. The department shall notify the holder of each such license, certification, or permit of any fee adjustment under this subsection that affects that license, certification, or permit holder.

History: 2015 a. 55, 179.

89.065 Examinations. (1) Examinations under this chapter shall be designed to determine whether an applicant is competent to engage in the practice of veterinary medicine and shall be administered at least once annually. Examinations shall be objective and reliable, reasonably related to the skills likely to be needed by an applicant and seek to determine the applicant's preparedness to exercise such skills.

(2) The examining board may require passage of a nationally recognized examination if the examination meets basic standards of objectivity. The examining board may administer a state written examination in elements of practice that are not covered in a national examination. The examining board may administer a practical or oral examination if such an examination tests knowledge and skills that cannot be measured or tested in a written examination.

(3) The passing score on examinations for licensure and certification shall be determined by the examining board to repre-

VETERINARY EXAMINING BOARD 89.068

sent a standard of minimum competency in the profession, as established by the examining board by rule.

History: 1987 a. 39; 2015 a. 55 s. 4497; Stats. 2015 s. 89.065.

Cross-reference: See also ch. VE 2, Wis. adm. code.

89.068 Drugs for animal use. (1) PRESCRIBING; DISPENSING. (a) *Extra-label use on animal; prescription required.* No person may make extra-label use of a drug on an animal without a prescription or in any manner not authorized by that prescription.

(b) *Form of prescription.* A prescription shall include all of the following:

1. The name and address of the veterinarian and, if the prescription is a written order, the signature of the veterinarian.
2. The name and address of the client.
3. The species and identity of the patient for which the prescription is issued.
4. The name, strength and quantity of the drug prescribed.
5. The date on which the prescription is issued.
6. The directions for administering the drug.
7. If the patient is a food-producing animal, the withdrawal time for the veterinary drug.
8. If the prescription authorizes extra-label use, the manner in which the client may use the drug.
9. Any cautionary statements required by law.

(c) *Prescribing, dispensing and administering requirements for veterinarian.* A veterinarian may not do any of the following:

1. Prescribe for or dispense to a client a veterinary prescription drug or a drug for extra-label use without personally examining the patient unless a veterinary-client-patient relationship exists between the veterinarian, client and patient and the veterinarian determines that the client has sufficient knowledge to administer the drug properly.
2. Prescribe or dispense a veterinary prescription drug to a client unless the veterinarian indicates in the appropriate records described under sub. (3), within 72 hours after the prescription is issued or the drug is dispensed, that the prescription has been issued or that the drug has been dispensed.

3. Prescribe a drug to a client for extra-label use on a patient unless all of the following apply:

a. A veterinary-client-patient relationship exists between the veterinarian, client and patient and the veterinarian has made a careful medical diagnosis of the condition of the patient within the context of that veterinarian-client-patient relationship.

b. The veterinarian determines that there is no drug that is marketed specifically to treat the patient's diagnosed condition, or determines that all of the drugs that are marketed for that purpose are clinically ineffective.

c. The veterinarian recommends procedures for the client to follow to ensure that the identity of the patient will be maintained.

d. If the patient is a food-producing animal, the veterinarian prescribes a sufficient time period for drug withdrawal before the food from the patient may be marketed.

4. Transmit a prescription electronically unless the client approves the transmission and the prescription is transmitted to a pharmacist or veterinarian designated by the client.

(2) LABELING. A veterinarian or pharmacist may not dispense a drug that has been prepared, mixed, formulated or packaged by the veterinarian or pharmacist unless the veterinarian or pharmacist affixes to the container in which the drug is dispensed a label containing all of the information specified in sub. (1) (b), except the address of the client. A veterinarian or pharmacist may not dispense a veterinary prescription drug that has been prepackaged by its manufacturer for dispensing unless the veterinarian or pharmacist affixes to the container in which the drug is dispensed a label containing all of the information speci-

fied in sub. (1) (b), except the address of the client. A veterinarian or pharmacist may dispense a veterinary over-the-counter drug without affixing any information to the container in which the drug is dispensed if a label that has been affixed to the container by its manufacturer provides adequate information for its use.

(3) **PRESCRIPTION RECORDS.** A veterinarian shall maintain complete records of each veterinary prescription drug that the veterinarian receives, prescribes, dispenses or administers, and of each prescription issued by the veterinarian that authorizes extra-label use. Records of each veterinary prescription drug shall include the name of each veterinary prescription drug that is received, the name and address of the person from whom the drug is received and the date and quantity received, the name and address of the person to whom the drug is dispensed and the date and quantity dispensed and, if the veterinarian prescribes or administers the drug, the information specified in sub. (1) (b). Records of each prescription authorizing extra-label use shall include the information specified in sub. (1) (b). A veterinarian shall maintain records of each veterinary prescription drug under this subsection for not less than 3 years after the date on which the veterinarian prescribes, dispenses or administers the drug or extra-label use.

(4) **ENFORCEMENT.** (a) *Inspections.* Except as provided in par. (b), if the examining board has reason to believe that a person is violating or has violated this section, the examining board, the attorney general or the district attorney of the proper county may do any of the following:

1. Inspect the premises on which the person possesses, prescribes, dispenses, labels or administers veterinary drugs.
2. Inspect pertinent records, equipment, materials, containers or facilities that are relevant to determining whether the person is violating or has violated this section.
3. Collect relevant samples of veterinary drugs.

(b) *Records exempt from inspection.* The examining board, attorney general or district attorney may not inspect a person's financial, pricing, personnel or sales records under this subsection, other than the records described under sub. (3).

History: 1991 a. 306; 1997 a. 27; 2015 a. 55 s. 4498; Stats. 2015 s. 89.068.

89.07 Discipline. (1) In this section, “unprofessional conduct” includes, but is not limited to:

- (a) Making any materially false statement or giving any materially false information in connection with an application for a license or for renewal or reinstatement of a license or in making a report to the examining board.
- (b) Violating this chapter or any federal or state statute or rule that substantially relates to the practice of veterinary medicine.
- (c) Practicing veterinary medicine while the person's ability to practice is impaired by alcohol or other drugs or physical or mental disability or disease.
- (d) Engaging in false, misleading or deceptive advertising.
- (e) Making a substantial misrepresentation in the course of practice which is relied upon by a client.
- (f) Engaging in conduct in the practice of veterinary medicine which evidences a lack of knowledge or ability to apply professional principles or skills.
- (fm) Handling, distributing, using or disposing of pesticides in violation of ss. 94.67 to 94.71 or the rules promulgated under ss. 94.67 to 94.71.
- (g) Obtaining or attempting to obtain compensation by fraud or deceit.
- (h) Violating any order of the examining board.

(2) Subject to subch. II of ch. 111, the examining board may, by order, reprimand any person holding a license, certificate, or permit under this chapter or deny, revoke, suspend, limit, or any combination thereof, the person's license, certification, or permit if the person has:

- (a) Engaged in unprofessional conduct.
- (b) Been adjudicated mentally incompetent by a court.
- (c) Been found guilty of an offense the circumstances of which substantially relate to the practice of veterinary medicine.

(3) In addition to or in lieu of a reprimand or denial, limitation, suspension, or revocation of a license, certification, or permit under sub. (2), the examining board may assess against the applicant for or the holder of the license, certification, or permit a forfeiture of not more than \$5,000 for each violation of s. 89.068.

History: 1987 a. 39; 1989 a. 279; 1991 a. 306; 2015 a. 55 s. 4499; Stats. 2015 s. 89.07.

Cross-reference: See also ch. VE 7 and 9, Wis. adm. code.

89.071 Administrative warnings. (1) If the examining board determines during an investigation of a complaint against a person holding a license, certification, or permit issued under s. 89.06, 89.072, or 89.073 that there is evidence that the credential holder committed misconduct, the examining board may close the investigation by issuing an administrative warning to the credential holder if the examining board determines that no further disciplinary action is warranted, the complaint involves a first occurrence of a minor violation, and the issuance of an administrative warning adequately protects the public.

(2) A credential holder may obtain review of an administrative warning through a personal appearance before the examining board.

(3) (a) An administrative warning does not constitute an adjudication of guilt or the imposition of discipline and, except as provided in par. (b), may not be used as evidence that the credential holder is guilty of the alleged misconduct.

(b) If the examining board receives a subsequent complaint of misconduct by a credential holder against whom the examining board issued an administrative warning, the examining board may reopen the matter that gave rise to the administrative warning and commence disciplinary proceedings against the credential holder, and the administrative warning may be used as evidence in a subsequent disciplinary proceeding that the credential holder had actual notice that the misconduct that was the basis for the administrative warning was contrary to law.

(4) The record that an administrative warning was issued shall be a public record. The contents of the administrative warning shall be private and confidential.

History: 2015 a. 179.

89.0715 Assessment of costs. (1) In this section, “costs of the proceeding” means all of the following:

- (a) Compensation and reasonable expenses of hearing examiners and prosecuting attorneys for the department and examining board.
- (b) A reasonable disbursement for the service of process or other papers.
- (c) Amounts actually paid out for certified copies of records in any public office and for postage, telephoning, adverse examinations and depositions, copies, expert witness fees, and witness fees and expenses.
- (d) Compensation and reasonable expenses of experts and investigators.
- (e) Compensation and reasonable expenses of a reporter for recording and transcribing testimony.

(2) In any disciplinary proceeding against a holder of a license, certification, or permit issued under s. 89.06, 89.072, or 89.073 in which the examining board orders suspension, limitation, or revocation of the credential or reprimands the credential holder, the examining board may, in addition to imposing discipline, assess all or part of the costs of the proceeding against the credential holder. Costs assessed under this subsection are payable to the department. Interest shall accrue on costs assessed under this subsection at a rate of 12 percent per year beginning on the date that payment of the costs are due as ordered by the

5 Updated 19–20 Wis. Stats.

examining board. Upon the request of the department, the department of justice may commence an action to recover costs assessed under this subsection and any accrued interest.

(3) In addition to any other discipline imposed, if the examining board assesses costs of the proceeding to a credential holder under sub. (2), the examining board may not restore, renew, or otherwise issue any credential to the holder until the holder has made payment to the department under sub. (2) in the full amount assessed, together with all accrued interest.

History: 2015 a. 179.

89.072 Licensees of other jurisdictions. (1) Upon application and payment of the fee established under s. 89.063, the examining board may issue a license to practice veterinary medicine to any person licensed to practice veterinary medicine in another state or territory of the United States or in another country if the applicant is not currently under investigation and has never been disciplined by the licensing authority in the other state, territory or country, has not been found guilty of a crime the circumstances of which are substantially related to the practice of veterinary medicine, is not currently 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 and has never been found liable for damages for acts committed in the course of practice which evidenced a lack of ability or fitness to practice.

(2) Upon application and payment of the fee established under s. 89.063, the examining board may issue a temporary consulting permit to practice veterinary medicine in this state for up to 60 days per year to any nonresident licensed to practice veterinary medicine in another state or territory of the United States or in another country.

History: 1987 a. 39; 2015 a. 55 s. 4500; Stats. 2015 s. 89.072.

89.073 Reciprocal credentials for service members, former service members, and their spouses. (1) In this section:

(a) “Former service member” means a person who was discharged from the U.S. armed forces under conditions other than dishonorable within 4 years of the date on which the service member or the spouse of the service member applies for a license, certification, or permit under this section.

(b) “Service member” means a member of the U.S. armed forces, a reserve unit of the U.S. armed forces, or the national guard of any state.

(c) “Spouse” includes the spouse of a person who died while in service in the U.S. armed forces or in forces incorporated as part of the U.S. armed forces.

(2) The examining board shall grant a license, certification, or permit specified under s. 89.06 to an individual who the examining board determines meets all of the following requirements:

(a) The individual applies for a credential under this section on a form prescribed by the examining board.

(b) The individual is a service member, a former service member, or the spouse of a service member or former service member and resides in this state.

(c) The individual holds a credential that was granted by a governmental authority in a jurisdiction outside this state that qualifies the individual to perform the acts authorized under the appropriate credential specified under s. 89.06.

(d) The individual pays the fee established under s. 89.063.

(f) The individual is in good standing with the governmental authorities in every jurisdiction outside this state that have granted the individual a credential that qualifies the individual to perform acts authorized under the appropriate credential specified under s. 89.06.

(2m) If an individual is unable to provide documentation that the individual is a service member, former service member, or the spouse of a service member or former service member, the

VETERINARY EXAMINING BOARD 89.079

individual may submit an affidavit to the examining board stating that the individual is a service member, former service member, or the spouse of a service member or former service member.

(3) (a) A credential granted under this section expires on the renewal date specified in s. 89.062 (1), except that if the first renewal date specified in s. 89.062 (1) after the date on which the credential is granted is within 180 days of the date on which the credential is granted, the credential expires on the 2nd renewal date specified in s. 89.062 (1) after the date on which the credential is granted.

(b) The examining board shall grant a renewed license, certification, or permit specified under s. 89.06 to an applicant who pays the renewal fee specified under s. 89.063 and satisfies the renewal requirements under s. 89.062.

(4) The examining board shall expedite the issuance of a license, certification, or permit granted under this section.

(5) The examining board may promulgate rules necessary to implement this section.

History: 2015 a. 179; 2019 a. 143.

89.075 Access to health care records. The owner of any animal patient of a veterinarian, or any other person who submits to the veterinarian a statement of written informed consent signed by the owner, may, upon request to the veterinarian:

(1) Receive a copy of the animal patient’s health care records upon payment of reasonable costs.

(2) Have the animal patient’s X-rays referred to another veterinarian of the owner’s choice upon payment of reasonable costs.

History: 1987 a. 39; 2015 a. 55 s. 4501; Stats. 2015 s. 89.075.

89.078 Background investigations. (1) The examining board may conduct an investigation to determine whether an applicant for a license, certification, or permit issued under s. 89.06, 89.072, or 89.073 satisfies any of the eligibility requirements specified for the license, certification, or permit, including, subject to ss. 111.321, 111.322, and 111.335, whether the applicant does not have an arrest or conviction record. In conducting an investigation under this subsection, the examining board may require an applicant to provide any information that is necessary for the investigation.

(2) A person holding a license, certification, or permit issued under s. 89.06, 89.072, or 89.073 who is convicted of a felony or misdemeanor anywhere shall send a notice of the conviction by 1st class mail to the examining board within 48 hours after the entry of the judgment of conviction. The examining board shall by rule determine what information and documentation the person holding the credential shall include with the written notice.

(3) The examining board may investigate whether an applicant for or holder of a license, certification, or permit issued under s. 89.06, 89.072, or 89.073 has been charged with or convicted of a crime.

History: 2015 a. 55, 179.

89.079 Unauthorized practice. (1) The department may conduct investigations, hold hearings, and make findings as to whether a person has engaged in a practice or used a title without a credential required under this chapter.

(2) If, after holding a public hearing, the department determines that a person has engaged in a practice or used a title without a required credential, the department may issue a special order enjoining the person from continuing the practice or use of the title.

(3) In lieu of holding a public hearing, if the department has reason to believe that a person has engaged in a practice or used a title without a required credential, the department may petition the circuit court for a temporary restraining order or an injunction as provided in ch. 813.

89.079 VETERINARY EXAMINING BOARD

Updated 19–20 Wis. Stats. 6

(4) (a) Any person who violates a special order issued under sub. (2) may be required to forfeit not more than \$10,000 for each offense. Each day of continued violation constitutes a separate offense. The attorney general or any district attorney may commence an action in the name of the state to recover a forfeiture under this paragraph.

(b) Any person who violates a temporary restraining order or an injunction issued by a court upon a petition under sub. (3) may be fined not less than \$25 nor more than \$5,000 or imprisoned for not more than one year in the county jail or both.

History: 2015 a. 55.

89.08 Injunctive relief. If it appears upon complaint to the examining board by any person, or if it is known to the examining board, that any person is practicing veterinary medicine without a license, the examining board, the attorney general or the district attorney of the proper county may investigate and may, in addition to any other remedies, bring an action in the name and on behalf of the state against the person to enjoin the person from such practice.

History: 1987 a. 39; 2015 a. 55 s. 4502; Stats. 2015 s. 89.08.

DAH Rules Estimated Timelines

Future dates are estimates for the purposes of work planning.
Last Updated: 10/1/24

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

Rule	Topic	Scope #	Docket #	Clearing-house #	Statement of Scope										Hearing Draft									Final Draft							Deadline to Refer to Legis. (Scope Expires)	Rule Effective Date								
					Initiate				Governor			Preliminary Hearing ¹			Board		Info	EIA ²		Board		Clearinghouse		Hearing			Board		Governor				Legislature ³			Adopt				
					Begin Scope	Materials to OS Review 1	Meeting with OS	Materials to OS Review 2	Scope to Governor	Governor Approve Scope	Scope Publish in Register	Materials to OS	Board Approve Hearing	Notice Publish in Register	Hearing Date(s)	Record Open Until	Materials to OS	Board Approve Scope	Additional Meetings	Posted for Comment	Record Open Until	Materials to OS	Board Approve Draft	Refer to CH	Receive CH Comment	Notice Publish in Register	Hearing Date(s)	Record Open Until	Materials to OS	Board Approve Final			Final to Governor	Governor Approve Final	Refer to Legis.	Refer to Comm.	Comm. Review Ends	Refer to JCRAR	JCRAR Review Ends	Rule to LRB
VE 1	Vet Licensing	SS 109-23			7/19/23	8/24/23	9/8/23	9/8/23	10/23/23	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	12/20/24	1/3/25	12/23/24	1/15/25	1/22/25	2/11/25	2/15/25	2/25/25	3/11/25	6/17/25	7/10/25	7/17/25	8/7/25	8/21/25	8/31/25	10/30/25	11/9/25	1/8/26	1/22/26	6/4/26	3/1/26

Rule 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	Expiration	Step 35	
General Projection Assumptions: (specific projections may vary)	Begin process of drafting scope	60 days after Step 1	30 days after Step 2	30 days after Step 3	30 days after Step 4	30 days after Step 5	7 days after Step 6	23 days before Step 9	23 days after Step 7	11 days after Step 9	7 days after Step 10	2 days after Step 11	23 days before Step 14	30 days after Step 12	90 days after Step 14	120 days after Step 14	60 days after Step 16	23 days before Step 19	23 days after Step 17	7 days after Step 19	20 days after Step 20	10 days before Step 23	14 days after Step 21	14 days after Step 23	23 days before Step 26	90 days after Step 24	7 days after Step 26	21 days after Step 27	14 days after Step 28	10 days after Step 29	60 days after Step 29	10 days after Step 30	60 days after Step 32	14 days after Step 33	30 months after Step 7	1-2 months after Step 34	
Notes:								7 days OS + 14 days Board	Or next Board meeting	Monday after DATCP submits to publish	At least 3 days after publish in register	Or later	7 days OS + 14 days Board	Or next Board meeting	Only some rule packages will have	Or later if additional meetings	14, 30, or 60 days	7 days OS + 14 days Board	Or next Board meeting				At least 10 days after publish in register		7 days OS + 14 days Board	Or next Board meeting					Or next session if referred to Legis after March in even year	30 days, can be extended to 60 days (+ more if hearing)		30 days, can be extended to 60 days (+ more if hearing)	Need to wait for official "no action taken" from legis		1st of month after 1 full month (+3mo small bus.)

¹JCRAR may require a preliminary public hearing for the scope statement.

²JCRAR 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.

Veterinary Examining Board Agenda Request Form

Meeting Date	October 16
Requestor Name	M. Mace
Item Title for the Agenda	Legislative Priorities
Should this be in Open or Closed Session?	Open
Is this an Action Item or for Information Only?	Discussion
Are there Attachments? (If yes, include file names)	No
Is a Public Appearance Anticipated?	No
Description of the Agenda Item	
<p>Discussion of any legislative priorities the board may have for the upcoming session. For example:</p> <ul style="list-style-type: none"> • Modification of 89.072 Licensees of other jurisdictions – Seek change that will allow for applicants that are currently licensed in another jurisdiction but have discipline in that jurisdiction to apply for licensure via endorsement. • Incorporation of PAVE for CVTs into statute similar to the PAVE for veterinarians 	

Veterinary Examining Board Agenda Request Form

Meeting Date	Oct 16
Requestor Name	M. Mace
Item Title for the Agenda	Biennial Budget Update
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

Angela will provide a brief update on the status of the Boards biennial budget request, details below:

Division of Animal Health staff submitted a request for 2.0 FTEs for VEB work. The request is being reviewed by the Office of the Secretary for possible activity in the biennial budget process. 1.0 FTE was requested for investigation, monitoring, and effective enforcement by the VEB, and 1.0 FTE was requested for program and policy analysis for the VEB.

2.0 FTE positions were requested in the 2021-23 biennial budget, and 1.0 FTE was granted. At the time of that request, only data through calendar year 2018 was available, and workload has nearly doubled since then. Updated data through calendar year 2023 is shown below:

CY	2016	2017	2018	2019	2020	2021	2022	2023
# Complaints Received	59	71	94	148	111 (COVID Closures)	151	152	162

There is now currently 1.0 FTE and two part-time LTE positions tasked with this work. The number of veterinary-related complaints are anticipated to continue increasing, further necessitating a second FTE. The requested FTE position would also allow the Department to discontinue the two LTE positions.

A 1.0 FTE is also requested for program and policy analysis work for the VEB. The position would work on communications for the Veterinary Professional Assistance Program, participate in the Wisconsin Veterinary Medical Association mental health group, and scheduled webinars. The position would provide support for VEB rules, legislation, and other guidance creation. The VEB is statutorily required to do a rule review every five years. The position would assist in the review of application processes and identifying efficiencies to process applications quicker. The position would modify forms, work on getting all application types online, develop a more user friendly online licensing list and discipline list. The position would streamline processes, such as the process for providing verification letters.



VEB



VISION:

Setting the standard of forward thinking veterinary regulation.

MISSION:

To protect the public through a fair regulatory process that instills public confidence in our licensees while remaining agile to the constant advancement of veterinary medicine.

CORE VALUES

ProteCting the public

TrAnsparency

IntegRity

HonEsty

2024-2025 VEB Strategic Goals

Effective July 1, 2024 – June 30, 2025

1. Complete a review of the license and exam process.
 - a. Update the State Exam
 - i. With exam liaisons being reviewed.
 - b. Update all licensure Forms
 - c. Update rules to create efficient licensing paths.
 - i. In progress

2. Update and enhance the current list of veterinary examining board disciplinary actions in the following ways:
 - a. 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.
 - i. **October 2024 - Initiated contact with BITS to add definitions to list, defining FDO and FLO.**
 - b. Assess the viability of creating a portal where the public can easily download the referenced discipline.
 - i. **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.**

3. Present a report on the top 5 violations resulting in discipline from the previous quarter.
 - 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(11) - 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(27) - 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 2.26(13)(a) - Falsely certifying to have completed 15 hours of CE**

4. 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.
 - a. Budget request submitted to DATCP administration.

5. VPAP:
 - a. Complete the RFP process for a VPAP platform and have in place Jan 2025.
 - i. TELUS health won the bid. Contracting in process.
 - b. Host 6 webinars.
 - c. Send a monthly outreach to credentialing holders on VPAP services and the focus of the month.
 - i. August:
 - ii. September: Suicide Prevention information
 - iii. October: Mental Health Awareness.

6. VEB Outreach (Public, Credential Holder, Student);
 - a. Madison College, CVT program outreach
 - b. Newsletter

7. AAVSB Involvement:
 - a. Attend the AAVSB annual meeting.
 - b. Include AAVSB information on Racetrack in Newsletter.

**Veterinary Examining Board
Agenda Request Form**

Meeting Date	Oct 16
Requestor Name	M. mace
Item Title for the Agenda	Strategic plan report
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)	Yes 2024 Strategic Plan
Is a Public Appearance Anticipated?	No
Description of the Agenda Item Update on Strategic Plan Goals	

Veterinary Examining Board Agenda Request Form

Meeting Date	Oct 16
Requestor Name	Mace
Item Title for the Agenda	2025 Meeting Dates
Should this be in Open or Closed Session?	Open
Is this an Action Item or for Information Only?	Action Item
Are there Attachments? (If yes, include file names)	No
Is a Public Appearance Anticipated?	No
Description of the Agenda Item	
<p>Set meeting dates and times for a minimum of 4 VEB meetings in 2025</p> <p>2024 quarterly meeting schedule:</p> <p>Jan 17 April 17 July 17 Oct 17</p> <p>Food for thought:</p> <p>The January meeting gets to be a push because of the Holiday season, suggest moving it to the fourth or fifth week of January: Jan 22 or 29.</p> <p>Similarly, due to the AAVSB conference being the last week of September the October meeting prep is rushed, suggest moving to Oct 22 or 29.</p>	