



**Veterinary Board of Governors Special Meeting Minutes
October 24, 2022**

Board members present: Kim Morgan, Veterinary Technician, Chairperson
Dordor Vang, Veterinarian, Vice-chairperson
Kathryn Haigh, Veterinarian
Aja Senestraro, Veterinarian
Debra Sellon, Veterinarian
Rebecca Knoke, Public member

Board members absent: Andrea Sanchez-Chambers, Veterinarian

Staff members present: Jennifer Santiago, Executive Director
Kristina Bell, Program Manager
Madissen Schatz, Administrative Assistant
Bill Kellington, Supervising Staff Attorney

On October 24, 2022, the Veterinary Board of Governors met via web conference. Notice of the meeting was published on the [Veterinary Board of Governor's website](#) and was sent out through the GovDelivery listserv.

OPEN SESSION:

9:00 a.m. Open Session

Call to Order, Mission, and Introductions – Kim Morgan, Veterinary Technician, Chairperson

Ms. Morgan called the meeting to order at 9:03 a.m.

1. Virtual Meeting

Dr. Haigh moved to hold this meeting as a virtual meeting under the [Open Public Meetings Act](#). The motion was seconded and adopted.

2. Open Forum

No comments from the audience on issues of significance to the profession.

3. Approval of Agenda

Dr. Sellon moved to approve the agenda. The motion was seconded and adopted.

Board Business

4. Veterinary Telemedicine Rulemaking

The board discussed the rule modification for veterinary-client-patient relationship (VCPR) and telemedicine. A CR-101 Preproposal Statement of Inquiry for [WAC 246-933-010](#) and [246-933-200](#) was filed as [WSR 22-17-101](#), on August 19, 2022.

Sean Sanders, DVM, will submit written comments to the board by the end of the day. Dr. Sanders suggested that the language of [WAC 246-933-200 Veterinary-client-patient relationship](#) is changed to give veterinarians the same privileges within the scope of practice as human physicians, as well as protecting the board and state from future litigation. He recommended that the board does not expire [Veterinary-Client-Patient Relationship Requirements During the COVID-19 Response. Policy Number: VBOG 20-02](#). Dr. Sanders shared some statistics regarding emergency care and triage options.

Candace Joy, chief executive officer, Washington State Veterinary Medical Association (WSVMA), shared that the WSVMA is against the establishment of a VCPR through remote means.

Ashley Morgan, DVM, director of state advocacy, American Veterinary Medical Association (AVMA), shared that they are working with the U.S. Food & Drug Administration, and offered help in answering questions regarding conflict with federal law. Dr. Morgan shared that the AVMA is opposed to the proposed rule.

Sarah MacHell, DVM, medical director, Vetster, shared that Vetster has completed over 50,000 appointments to date. The company has not experienced negative patient outcomes or regulatory/board complaints. Ontario established the ability for veterinarians to create a VCPR via virtual means in 2018. In 2021, the College of Veterinarians in Ontario saw a 40% increase in disciplinary cases being raised to the board by pet owners, none of which were from cases managed virtually. The disciplinary cases were traced back to challenges with patients getting access to care.

Cherice Roth, DVM, chief veterinary officer, American Animal Hospital Association, shared that 60% of the pet parents that utilize Fuzzy do not have a relationship with a veterinarian. Fuzzy has completed over 100,000 appointments with zero disciplinary board complaints or negative impacts. Dr. Roth shared that many pets have experienced a break in VCPR due to COVID, extenuating circumstances in the family's life, or emergency room capacity. Telemedicine allows providers to prescribe pain medication by video when needed and abide by their oath to prevent and relieve animal suffering.

Jessica Simpson, senior specialist, public policy, the Humane Society of the United States, shared that the first barrier to access is getting clients into the door, which virtual care would alleviate. Veterinarians already practice low stress handling to establish a VCPR when dealing with aggressive pets. Ms. Simpson suggested that telemedicine would be one of the most effective ways to provide animal wellness services equitably.

Heather Woodke, DVM, questioned if Vetster and Fuzzy's positions are rooted in bias. Dr. Woodke suggested that the terms and conditions prevent consumers from lodging complaints. Dr. Woodke indicated terms and conditions do not include any prohibitions from complaints. A concern was mentioned regarding loopholes that the larger companies benefit from with the remote establishment of a VCPR, resulting in episodic and fragmented care.

Scott Schatzberg, DVM, Ph.D., DACVIM, chief medical officer, Thrive Pet Healthcare, shared that Colorado State University is forced to shut down emergency receiving every evening due to burden of care and supply demand inequities. In Washington State, clients will wait in the lobby for four to ten hours before being seen. Dr. Schatzberg suggested that clients need an opportunity to speak with a veterinarian or other veterinary caregiver to take direction. Veterinarians should be empowered to have a VCPR to address the access care issue.

Bruce Hutton, field veterinarian, Washington State Department of Agriculture (WSDA), shared that the WSDA is opposed to any changes in the rule due to concerns regarding production medicine, perspective and public health food safety, interstate movement of animals, and oversight on antibiotic use and resistance. The department worries that producers will be able to call multiple veterinarians to obtain prescriptions. A physical exam cannot be done remotely, paving the way for the elimination of farm calls.

Bob Lester, DVM, co-founder and chief medical officer, WellHaven Pet Health, shared that he is in favor of relaxing the VCPR. Patients often have to wait months to get into clinics.

Dr. Lester values the discretion of his veterinary colleagues in deciding when an in-person exam is necessary and when a virtual modality might suffice.

James McCutchan, DVM, CEO, Seattle Veterinary Specialists, explained that telemedicine gives the pet and pet owner another advocate to receive advanced care and get into general practices or the emergency room. Dr. McCutchan shared that in the last five years, veterinarians and veterinary facilities have had to turn away patients. This negatively impacts animals and the mental health of doctors and staff, eroding the profession. Dr. McCutchan shared that it would be appropriate to carve out production, medicine, food, and animal medicine in the VCPR.

Katie Cutter, DVM, DACVO, co-founder and CEO, BoosterPet, explained that the veterinary industry has a larger demand for services than the veterinary industry can offer. Telemedicine is a tool that veterinarians can utilize to help pet parents access care. Veterinarians can determine when telemedicine is appropriate and is necessary to meet the caseload of patients. Pet owners seek care from a variety of places when they are unable to get into veterinary hospitals.

Sandy Willis, DVM, MVSc, DACVIM, district XI board of directors representative, AVMA, shared that they understand telehealth triage would mostly encompass skin, behavior, and simple matters; however, veterinarians cannot always diagnose via telehealth. Dr. Willis shared that the AVMA is not opposed to triage.

Kathryn Haigh, DVM, caution the board in making any specific rule changes until further evaluation. Food animals may need special consideration. Engage in all interested individuals and continued conversations with the veterinarians and veterinarian organizations.

Kim Morgan, LVT, shared that access to care is a concern.

The board thanked everyone for participation and agreed to continue discussions at their next scheduled meeting.

Adjournment of Open Session

Dr. Haigh moved to adjourn the meeting at 10:31 a.m. The motion was seconded and adopted.

Submitted by:
Loralei Walker, Program Manager
Veterinary Board of Governors

Approved by:
Kim Morgan, Veterinary Technician,
Chairperson
Veterinary Board of Governors

on file

SIGNATURE

on file

SIGNATURE

DATE

DATE