



Report to Licensees

of the



LOUISIANA BOARD OF VETERINARY MEDICINE

Volume 21, No. 1

Winter 2012-2013

Board Changes...The members of the Louisiana Board of Veterinary Medicine and staff of the Board office would like to welcome Board member, John Emerson, DVM. Dr. Emerson practices in the Lake Charles area and has been appointed to fill the vacancy of Dr. Mica Landry, to serve through July 31, 2013. We extend a warm welcome and best wishes for a productive team.

The Board will certainly miss departing member, Mica F. Landry, DVM, whose term with the Board concluded May 23, 2012. During her 7 year term, Dr. Landry has shared insight and experience pertinent to veterinary medicine and regulatory functions of the Board. She was also a leading force in the current CAET training program. The Board appreciates her service and wishes her well on future endeavors.

2013 Board Meeting Dates

The Louisiana Board of Veterinary Medicine will meet at 8:30 a.m. on the following dates:
Thursday, February 7, April 4, June 6, August 1, October 3, and December 5, 2013.



Disciplinary Cases

Case 11- 0716 V - Veterinarian failed to perform blood work, or at least to offer the service to the client and then record the consent/refusal under the facts of the case. Consent Order entered wherein a fine and administrative costs were paid.

Case 11- 1101 V - Veterinarian failed to properly perform a declawing surgical procedure (inappropriate surgical removal of the digital pads), as well as failed to properly provide aftercare under the facts.



License Renewal Statistics 2012-2013

Active DVM – 1249, Inactive DVM – 209, RVT – 112, CAET – 176, RED - 3

Board Takes CAET Training On-the-Road

As mandated by Act 764 of the 2010 Louisiana Legislative Session, prohibition for animal euthanasia by carbon monoxide gas chambers (effective January 1, 2013), created an increase in the need for training of Certified Animal Euthanasia Technicians throughout the state. To address that need, the Board revamped its annual training program and began to sponsor its programs more frequently, and at various sites around the state. The program was streamlined to encompass the training, legal and controlled substance regulations, and both written and practical examinations within a one-day format. A total of 116 applicants were successfully trained within the past year in Gonzales, Lake Charles, Alexandria, and Lafayette. The Board has scheduled three additional programs in March, July, and October 2013. The sites are to be announced later in the year.

RULE PROMULGATION

The Board in keeping with its jurisdiction promulgated Rules 712 (Alternative Therapy/Collaborative Practice) and 1209 (Pre-Euthanasia Restraint), both effective February 2012. Rule 712 was promulgated in response to submitted requests and demonstrated need regarding the subject matter, and Rule 1209 was promulgated in response to newly enacted State law. The text of both Rules is reproduced below for your review. Also, please note that the prohibition contained in Rule 1209A regarding "euthanasia by intracardiac injection on cats and dogs unless the animal is unconscious or rendered completely unconscious and insensitive to pain through the injection of an anesthetic" only applies to animal control shelters and their animals located on site, as well as their animals which may be transported to a veterinary clinic for euthanasia. The prohibition does not apply to the practice standards of veterinary medicine for veterinarians and CAETs performing euthanasia by intracardiac injection in veterinary practice sites other than animal control shelters and/or on animal control shelter animals. Again, temporary transfer of ownership of the animal to the veterinarian by the animal control shelter for euthanasia by cardiac injection is a violation of the law.

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§712. Alternative Therapy and Collaborative Treatment

A. Alternative therapy and/or collaborative treatment may be performed by a layperson (a person not licensed, registered, or certified by the board) only with an order or prescription from a Louisiana licensed, supervising veterinarian who has first established the veterinarian-client-patient relationship, and can be performed only under such supervising veterinarian's direct supervision and with the written informed consent of the owner of the animal (client) or his duly authorized agent. The layperson must possess a license, registration, or certification issued by another Louisiana regulatory authority, or he must possess verification of an educational level acceptable by the board, in the subject matter of the alternative therapy and/or collaborative treatment at issue.

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

C. The supervising veterinarian will be held accountable for the proper diagnosis and treatment of the animal, including the work delegated to the layperson, as well as compliance with proper documentation in the patient's medical record as set forth in §701, including the written informed consent for the alternative therapy and/or collaborative treatment obtained from the client or his duly authorized agent. The supervising veterinarian will also be held accountable for the maintenance of the confidential relationship with the client and patient.

D. Alternative therapy as used in this Section includes, but is not limited to, ultrasonography, magnetic field therapy, holistic medicine, homeopathy, animal chiropractic treatment, animal acupuncture, animal physical therapy, animal massage therapy, and laser therapy.

E. Collaborative treatment as used in this Section includes, but is not limited to, ophthalmology, cardiology, neurology, radiology, and oncology.

F. Written informed consent as used in this Section means the supervising veterinarian has informed the client or his duly authorized agent, in a manner that would be understood by a reasonable person, of the diagnostic and treatment options, risk assessment, and prognosis, and the client or his duly authorized agent has consented in writing to the recommended alternative therapy and/or collaborative treatment.

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

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

§1209. Pre-Euthanasia Restraint

A. Euthanasia by intracardiac injection on cats and dogs shall be prohibited unless the animal is unconscious or rendered completely unconscious and insensitive to pain through the injection of an anesthetic. Such prohibition is applicable to animal control shelters and their animals located on site as well as their animals which may be transported to a veterinary clinic for euthanasia. Temporary transfer of ownership of the animal to the veterinarian by the animal control shelter for euthanasia by cardiac injection is a violation of the law. The performance of euthanasia by intracardiac injection in violation of this section by a CAET and/or veterinarian is sanctionable.

B. A CAET (lead status or otherwise) shall not use any drug for purposes of sedation, or any form of anesthesia, since sedation is beyond the permissible scope of euthanasia practice for this certificate holder. However, Acepromazine, Rompun (xylazine), or Domitor (medetomidine) which are non-controlled drugs, may be legally used by CAETs for pre-euthanasia restraint of feral/fractious animals. If an animal control shelter's animal must be sedated/anesthetized pursuant to Subsection A above, then a LA licensed veterinarian must perform this service.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1558.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 38:357 (February 2012).