

# LA Board of Veterinary Medicine – Meeting Minutes, February 5, 2026

## I. CALL TO ORDER – Christine McHughes Barr, DVM, President

Board President, Dr. Christine McHughes Barr, called the meeting to order at 8:40am.

## II. ROLL CALL – Christopher Morris, DVM, Secretary-Treasurer

Roll call was taken by Board Secretary-Treasurer, Dr. Christopher Morris, as follows:

Those present:

Christine D. McHughes Barr, DVM - Board President  
Jesse S. Brandon, DVM - Board Vice-President  
Christopher B. Morris, DVM - Board Secretary-Treasurer  
Trisha C. Marullo, DVM - Board Member  
Larry Findley, Sr., DVM - Board Member  
Jared B. Granier - Board Executive Director  
Stephen H. Vogt - Board General Counsel

The Board's Statement of Obligations (below) was read aloud by Dr. Morris to all present for the meeting.

**Statement of Obligations** – The LA Board of Veterinary Medicine (being a state regulatory agency within the LA Department of Agriculture and Forestry) is a governmental entity whose mandate is to protect the public/animals by enforcing its jurisdiction of interpreting and implementing applicable laws, and the rules it promulgates, regarding the acceptable standard of veterinary care in LA. The Board has sole and sovereign authority in Louisiana over the practice of veterinary medicine as granted to it by the Legislature. The Board members are appointed by the Governor and confirmed by the Senate and take an Oath of Office. The Board members in discharge of their duties are also held to the ethical standards of state government officials. By statute, candidates for the Governor's consideration for appointment to the Board are made by the state professional association. While a Board member may hold general membership in a professional association, he is legally and ethically bound to his Oath of Office and will discharge his duties without any considerations or goals beyond his lawful obligations on the Board. A Board member does not represent the interests of the practitioners of veterinary medicine or a professional association while he serves on the Board, nor will he use his office to engage in any conduct which may constitute restraint of lawful trade.

### A. Invitations to Address the Board

Attendees were given the opportunity to introduce themselves (if desired) and to make general public comments to the Board. Written comments related to Agenda Item V.C.1. were received prior to February 5, 2026 and presented to the Board prior to the meeting for review.

## III. APPROVAL OF MINUTES

### A. Board Minutes for December 5, 2025

The Board reviewed minutes from December 5, 2025. Mr. Granier noted several grammatical errors that were corrected prior to presenting the final minutes to the Board. Motion was made, and seconded, to accept the minutes as given. With no further discussion and with no public comments, the motion passed unanimously by voice vote from all members in attendance.

## IV. FINANCIAL MATTERS & CONTRACTS

### A. Financial Reports – November & December ‘25

Mr. Granier presented the financial reports for the months of November and December ‘25 for review by the Board. Mr. Granier informed the Board that all financial matters are in order, with no unexpected expenditures, and are within budgetary expectations. There were no questions regarding financial reports reviewed by the Board members. Motion was made, and seconded, to accept the financial reports as presented. With no further discussion and with no public comments, the motion passed unanimously by voice vote from all members in attendance.

### B. Investments, CDs – FY 2026

Mr. Granier reviewed figures for accrued interest amounts and total investments for current certificates of deposit (CDs) for FY2026. CDs will continue to roll over as they mature unless withdrawal is requested from the Board by Mr. Granier. Interest rates have dropped to 4.0% to 4.1% for 6- to 12-month CDs. Motion was made, and seconded, to accept the investment report as presented. With no further discussion and with no public comments, the motion passed unanimously by voice vote.

### C. Payment Approval Request for Changes from Authorize.net to Elavon as Payment Processor

Mr. Granier requested approval for payment of a \$1,650 work order by Thentia to change the payment gateway from Authorize.net to Elavon. Motion was made, and seconded, to approve the work order. With no further discussion and with no public comments, the motion passed unanimously by voice vote from all members in attendance.

## V. STATUTES, RULES, POLICIES & PROCEDURES

### A. Rulemaking Projects, Proposals, & Discussions

#### 1. Update: LAC 46LXXXV.305, 407, 811, 1213, 1215 – Various Rules Related to Renewals of Licenses & Certificates

Mr. Granier notified the Board that the Notice of Intent received a favorable opinion from the Department of Justice’s Occupational Licensing Review Program (OLRP) and awaits approval from Senate and House Legislative Oversight Committees on Agriculture, Forestry, Aquaculture, and Rural Development. Assuming approval is received, Mr. Granier will have the Final Rule promulgated in the *2026 Louisiana Register*, Volume 52, February ‘26 edition, effective February 20, 2026. No motion made, and no further action was taken or needed on this matter.

#### 2. Update: LAC 46LXXXV.1303 & 1305 – Reporting Requirements for Zoo Personnel

Mr. Granier informed the Board that following the December ‘25 meeting, the Notice of Intent and Fiscal & Economic Impact Statements were submitted to the Louisiana Legislative Fiscal Office for review. As of the February 5<sup>th</sup> meeting, the Board still awaits approval from the Legislative Fiscal Office. No motion made, and no further action was taken or needed on this matter.

#### 3. Discussion: LAC 46LXXXV.303.B.7 – Limit on NAVLE Attempts for Applicants

ICVA, the testing vendor, implemented a policy change effective with the March 2026 NAVLE testing window. Under this policy, all testing candidates will be granted five new opportunities to sit for the NAVLE, regardless of prior testing history. Any examination attempts made prior to December 1, 2025, will not be counted toward the new five-attempt limit.

Mr. Granier presented to the Board a proposed Notice of Intent to amend Rule 303.B.7 concerning the maximum number of attempts a licensure candidate may take the NAVLE. The proposed amendment would align the rule with ICVA's revised policy. If adopted, the amended rule would continue to limit candidates to no more than five attempts to take the NAVLE; however, any attempts made prior to December 1, 2025, would not be applied toward this five-attempt maximum.

After discussion of this proposal, motion was made, and seconded, to approve this amendment. With no further discussion and with no public comments, the motion passed unanimously by voice vote. Mr. Granier will move forward with the rulemaking process for this item.

## **B. Policies and Procedures**

### **1. Web Accessibility Policy**

Mr. Granier presented the Board with the Web Accessibility Policy required of all state agencies in accordance with the Web Accessibility Compliance Policy and Procedure Memorandum (PPM 74). This policy details the standards, responsibilities and accessibility statement as well as other language required by PPM 74. Upon review, motion was made, and seconded, to approve this policy. With no further discussion and with no public comments, the motion passed unanimously by voice vote.

## **C. Declaratory Statements**

### **1. May a veterinarian release confidential information obtained during the course of a VCPR as prescribed in La. R.S. 9:2800.28?**

A licensee filed a formal petition seeking a declaratory statement from the Board. Its object is to interpret the Board's regulatory provisions, including the AVMA's Principles of Veterinary Medical Ethics (adopted by the Board) in light of the passage of La. R.S. 9:2800.28 regarding the ability of licensed veterinarians and technicians to report to the proper authorities suspected instances of animal abuse notwithstanding the confidentiality of information obtained within the VCPR, over the objections of the client with whom the VCPR was established. The Board heard testimony and received filings and will render a decision in accordance with Rule 1423, LAC 46:LXXXV.

## **D. General Agenda**

### **1. What is the scope & level of emergency treatment allowed on working dogs for Fire Dept?**

A licensed veterinarian of record for a Louisiana based fire department requested via informal practice query an interpretation by the Board of the prohibition of the practice of veterinary medicine by a person not licensed by the Board as it pertains to medical emergencies involving service dogs, and asking whether a set of protocols has been published or adopted by the Board on topic.

The Board approved a provisional opinion from General Counsel advising that per prior considerations of the issue, “general first aid” rendered to those animals at the scene of injury or during transportation of the animals for emergency care from a licensed veterinarian is not generally considered “the practice of veterinary medicine” which is prohibited by a non-licensee. While there is no list of services specifically allowed or prohibited, prior board decisions allowed the administration of oxygen as “general first aid” but found intubation as constituting the prohibited “practice of veterinary medicine”. The Board also took notice of the approach of several states dealing with similar issues in providing a listing of those veterinary services which are acceptable under similar Practice Act provisions and/or a provision of immunities from civil, criminal and/or regulatory prosecutions for specific personnel, procedures, circumstances and animal patients. Since the prohibition against “the practice of veterinary medicine” lies within legislation and not regulation, the present position of the Board is that these issues be addressed by the legislature in revising or augmenting the Louisiana Veterinary Practice Act, La. R.S. 37:1511 et seq. The Board will continue to give guidance to the practice on specific procedures and circumstances concerning the interpretation of the Practice Act on a case-by-case basis.

## **2. What duties are allowed for DVM students while on externships in Louisiana?**

A licensee who sponsors externships of 3rd and 4th year veterinary students, including students from the LSU SVM, posed a query to the Board regarding those types of duties the students are allowed to do under supervision during the course of the externship under Board regulations. The Board, recognizing the repeal of the Preceptorship Rules, which allowed a broad scope of allowable veterinary duties for Preceptees, went into executive session with representatives of the LSU SVM to receive legal advice and discuss stakeholder needs and regulatory constraints in light of the repeal of post or near-graduate clinical experiences that were involved with Preceptorship.

### ***MEETING NOTES***

*General counsel was instructed to research the ability of the Board to engage in Rulemaking and to provide options that might expand the role of students involved in externships. However, as to the specific query posed, Rule 714 G is explicit: “...at no time shall the student’s role extend beyond observing the supervising veterinarian in a support capacity during assessment, diagnosis, treatment, and surgery...”.*

## **E. Consent Agenda Opinions – Answered**

### **1. What are the supervision requirements for Animal Acupuncture?**

A graduate of a school of veterinary medicine not now eligible for licensure as a veterinarian posed another in a series of queries concerning employment in Louisiana as an acupuncturist. The questions posed in this informal query were:

Question- If I have the requisite training to offer my services as an animal acupuncturist can a veterinarian refer the patient to me for in-home services?

Answer- No. Rule 712 requires, inter alia, direct supervision (on-premises) by the referring veterinarian who has established the VCPR with the client and patient and who has obtained informed consent from the client for this Alternative Therapy.

Question- If more supervision is needed, can I offer acupuncture if the referring veterinarian is on site in the clinic, even if he is not knowledgeable about the service?

Answer- Yes. The veterinarian who has established the VCPR must determine that acupuncture is indicated, must refer the patient to you and keep records under informed consent and offer supervision on-premises in the event of adverse reactions of the therapy. You cannot under the Rules provide ongoing evaluations, diagnoses, prognoses or prescribe for the patient.

Question- The ICVA as vendor of the NAVLE is allowing candidates 5 more attempts at passing the NAVLE. Is the Board recognizing this change?

Answer- This is a recent change. At the time of this response, the Board had not made a decision to engage in Rulemaking to alter the prohibition of licensure after five unsuccessful attempts to pass the NAVLE.

**2. What is the rule regarding tele-health care in veterinary medicine in Louisiana? Does a virtual visit satisfy establishing a veterinary-client-patient relationship?**

A licensee, noting a corporation's advertising to hire remote veterinarians from Louisiana, posed the foregoing question, noting the potential employer had advised that Louisiana had approved of a licensee writing prescriptions following a virtual visit. Under the Board's regulations, as indicated in numerous, prior opinions, an in-person visit with the patient is required to establish the VCPR, which cannot be established solely through telehealth, or solely by electronic means. No legend or controlled drug may be prescribed, dispensed, administered or ordered absent the valid establishment of the VCPR. While a virtual visit, depending on the specific facts applicable to the case, may be useful in maintaining the required knowledge of the condition of the patient so that the VCPR still exists, it cannot be established solely through a virtual visit.

**3. Are telemedicine consults conducted via zoom calls permitted in Louisiana?**

A veterinarian licensed in several states asked if Louisiana "does not approve of telemedicine" and whether she can conduct zoom calls for consultations. As per Rule 700, she was advised that the establishment of the VCPR cannot be done solely by telemedicine or electronic means but requires an in-person visit, but may be useful, depending on the specific circumstances of the case, for maintaining the VCPR. For purposes of this response, it was assumed that "consultations" did not mean a consultation with the attending veterinarian but with the client.

**4. How can I do equine dentistry in LA? Do I need to partner with a DVM?**

A non-licensee requested information concerning the ability to practice "equine dentistry" in the state. Included in the query were issues concerning the regulatory adequacy of the training contemplated, the ability to sedate patients, and the nature of the relationship required with the attending veterinarian—specifically referring to the "floating" of teeth at the owner's home.

The person posing the query was advised that “equine dentistry” is defined in the Practice Act as constituting the “practice of veterinary medicine” so as to come under the Board’s jurisdiction. Rule 1515 allows the “rasping (floating) of molar, incisor, or canine teeth of equines, and the removal of deciduous incisor and premolar teeth (caps) of equines” under the limited exception of licensure as a veterinarian, requiring:

- a. proper training of the lay person (Board approval of a program other than that offered by LSU-SVM, which has been pre-approved);
- b. direct supervision by the veterinarian (physical presence within a 30 mile/30 minute radius of the site where the authorized procedures are to be performed);
- c. employment (W-2) by the licensed veterinarian—no other contractual arrangement suffices

**5. Do CAETs need to be certified in chemical capture for pre-euthanasia restraint?**

This item was deferred.

**6. It is common practice for veterinarians to prescribe drugs in the owner's name and DOB?**

A representative of the DEA asked whether it was a “common practice” for veterinarians to prescribe drugs in the name of the owner and the owner’s date of birth. The question of the “commonality” of such a practice was pretermitted as there is no practical way for the Board to poll the practice to answer the question. However, the agent was advised of the requirements and regulatory principles pertaining generally to the query:

- a. The Board Rules do not require a licensee to have a DEA registration. However, if obtaining the registration the licensee is required under Board Rules to follow all DEA regulations;
- b. The Board Rules require that the initial prescription and any refills of a controlled drug shall be communicated personally or by telephone to the pharmacy by the veterinarian;
- c. A written prescription for a controlled drug shall be handwritten or typed and shall contain the specific client/patient’s names, or the herd i.d. as well as the drug prescribed with usage directions, appropriate government registration numbers and dates, and signed by the prescribing veterinarian, affixed with his signature stamp or electronic signature if transmitted electronically to a pharmacy.

**7. Can a non-DVM certified equine massage practitioner lawfully provide services under a model in which she independently schedules appointments at client farms, boarding stables, & performance events?**

A non-licensee lay person researching proposed certification as an equine Myo-manipulative Functional Therapist (equine) sought information regarding regulations pertaining to a business model that would allow:

1. independent (of veterinarian) scheduling of visits to client farms, stables, events;
2. supervision (“veterinarian oversight”) without the veterinarian physically present at the appointment or event;

... and the nature and type of documentation or record keeping required and any limitations on scope of practice.

The lay person was advised of the requirements of Rule 712:

1. The practitioner must be in an occupation regulated by another Louisiana regulatory board or have the education approved by the LBVM;

2. The “alternative therapy” must be ordered by the licensed veterinarian who has established the VCPR;
3. The referring veterinarian must be on-premises to supervise;
4. Written informed consent must be obtained from the client by the referring veterinarian, who has the duty of ongoing evaluations of the patient;
5. The attending veterinarian is responsible for proper record keeping and maintain the confidentiality of the information therein;
6. The lay person cannot perform surgery, on-going evaluation and/or diagnosis, prognosis, or prescribe treatment, medicines or appliances.

**8. Can LA Practices use RX destroyer for controlled substance disposal?**

This query, with an additional component asking about the availability of a checklist of minimal standards for premises, was posed by a licensed veterinarian. The query regarding the use of Rx destroyer for the purposes and under the circumstances provided was declined under Board policy as the DEA is the primary regulator of the issue and any opinion would not be binding on the DEA nor authoritative. The licensee was advised that the Board does not regulate facilities per se but that minimum equipment is required for facilities that advertise as a clinic, hospital, emergency facility, mobile unit, etc, in the Rules which are binding for those licensees practicing thereunder. Rule 711, LAC 46:LXXXV. Additionally, any facility must be sanitary and comply with local ordinances.

**9. Is it legal for a veterinarian in Louisiana to refuse to sign online prescriptions (for clients/patients with valid VCPRs) from third party pharmacies and instead make owners come get a hand-written prescription for a prescription fee?**

Rule 705 provides the answer to this query. A client is not obliged to buy prescription medication from the prescribing veterinarian. When a VCPR exists and a veterinarian has determined that a prescription medication will be used, the veterinarian may not ethically refuse to write a prescription to the client unless:

- a. The patient’s life is endangered without the immediate administration;
- b. The medication is not safe for at-home administration.

Further, the veterinarian may choose not to honor the request for a written prescription if it is not made directly by the client, or is not medically appropriate for the patient’s treatment.

Accordingly, under the query the veterinarian need not honor the on-line pharmacy’s request for a prescription. When providing a written prescription, the veterinarian may charge the client a reasonable amount for work done.

**10. Is it acceptable for a veterinary technician to perform cystocentesis if trained appropriately? Does it need to be a registered vet technician?**

This query was posed by a licensed veterinarian contemplating the training of employees to perform cystocentesis under the supervision of the attending veterinarian. The licensee was advised that there is no listing of procedures that can be properly delegated to the employees of veterinarians, but only a prohibition of those tasks that cannot be delegated irrespective of the degree of supervision—i.e. surgery, diagnosis, prognosis, or prescribing of drugs, medicines or appliances.

While there are differences between what may be delegated to a lay veterinarian assistant vs. an RVT, those differences do not come into play in this query.

All tasks delegated must be done pursuant to a valid VCPR being established with the delegating veterinarian, under his/her order, under direct supervision (on premises and available for prompt consultation), with the assumption of liability by the delegating veterinarian for the treatment performed.

The delegating, supervising veterinarian is responsible for determining the degree of expertise needed to perform any task. Accordingly, the distinction between delegating to a lay assistant vs. RVT could play a part in answering this query, or the possibility of any additional training. However, assuming proper training/expertise is present, cystocentesis is not considered non-delegable “surgery” and may be properly delegated under all the conditions listed.

**11. If I legally change my name due to marriage, am I able to continue practicing under my maiden name?**

Response: Under Louisiana’s general civil laws, the “legal name” of any person is the name on that person’s birth certificate. In order to change one’s name, an adult must petition the district court. However, the adoption of a spouse’s name after marriage is not included as one of those instances requiring such a petition, so marriage-based name changes are not considered “legal name changes” under Louisiana law, but are allowed as a customary usage.

Under the Board’s regulations there is no prohibition from using a part of your legal name (e.g. where the maiden name has been changed due to marriage but is used preceding the new marriage-based surname). Nor is there a prohibition from continuing to use your maiden name where in other instances you have adopted in whole or in part your spouse’s name. However, the use or combination of uses must not be adopted in circumstances where the public may likely be misled as to your identity.

Yes, you may continue to practice under your maiden name.

**12. Does a VCPR apply to the practice or to the individual veterinarian. ie. Can any veterinarian in the practice fill a medication that does not have a refill but has been filled recently? Or only a veterinarian that has personally examined the pet?**

This query was posed by a Louisiana license veterinarian. Rule 705.A.1 provides, in part that no legend drug may be administered, prescribed, dispensed, delivered to or ordered for animals with which the veterinarian has not established the veterinarian client-patient-relationship as a primary care provider. Rule 705 K then states that the veterinarian is responsible for and shall maintain accurate medical records when prescribing any drug, medicine, chemical or controlled substance, which includes:

- a. Client’s name;
- b. Patient’s name;
- c. Date of prescription;
- d. Usage dosage including route of administration;
- e. Quantity dispenses and number of refills;
- f. Name of the veterinarian prescribing the drug, medicine, chemical or controlled substance;

- g. Telephone calls changing the prescription or dosages must be recorded in the medical record of the patient; and
- h. Refill information must be recorded on the prescription and in the medical record of the patient.

Once the number of refills authorized has been exhausted, prescribing the medication must be within the context and confines of a VCPR. Accordingly, anyone dispensing a medication after the number of refills has been exhausted who does so without the context of a valid VCPR is engaged in the unauthorized practice of veterinary medicine and is subject to Board action.

#### **F. Consent Agenda Opinions – Proposed**

- 1. None at this time

#### **G. Consent Agenda Opinions – Expedited / Emergency Opinions**

- 1. None at this time

### ***MEETING NOTES***

*After review and discussion of all General Agenda and Consent Agenda Opinion items, motion was made by Dr. Morris to ratify all declaratory statements and opinions above in globo as reported by Mr. Vogt, seconded by Dr. Findley. With no further discussion and with no public comments, the motion passed unanimously by voice vote.*

## **VI. MISCELLANEOUS MATTERS**

### **A. New Licenses and Certificates Issued**

Mr. Granier reported all new licenses and certificates issued - 15 total listed below - from 11/14/26 to 01/16/26. Motion made, and seconded, to accept and ratify all issued licenses, registrations, and certificates as given. With no further discussion and with no public comments, the motion passed unanimously by voice vote from all members in attendance. Addendum #1 at the end of the minutes includes the list of all 15 licenses and certificates issued.

### **B. Office Updates – Applications, Renewals, Active Licensees, Complaints**

Mr. Granier reported to the Board statistics on applications, complaints, and continuing education review requests from 11/14/26 to 01/16/26. No motion made and no further action was taken on this matter. Addendum #2 at the end of the minutes includes all statistics.

### **C. LBVM Newsletter, January '26 Edition**

Mr. Granier presented the LBVM Newsletter to be sent to all currently active licensees and other stakeholders. Motion made, and seconded, to approve the annual newsletter, seconded by Dr. Brandon. With no further discussion and with no public comments, the motion passed unanimously by voice vote from all members in attendance.

### **D. CAET Training Scheduled for March 20, 2026**

Mr. Granier reported the estimated number of attendees for the CAET training scheduled for March 20<sup>th</sup> at the LASPCA in New Orleans. No motion made and no further action was taken on this matter.

## **E. Update on Website ADA Compliance**

Mr. Granier reported the status of the website re-design to bring the site and all publicly available documents into compliance with state and federal ADA guidelines. No motion made and no further action was taken on this matter.

## **VII. CONTINUING EDUCATION ISSUES**

### **A. Responses from AAVSB Listserv on Possible Credit for Exhibit Halls**

Mr. Granier reported that nine jurisdictions responded to his inquiry concerning the awarding of continuing education credit for exhibit hall attendance. All responding jurisdictions indicated that continuing education credit is not granted for exhibit halls. No motion made and no further action was taken on this matter.

## **MEETING NOTES**

*Motion made by Dr. Morris to go into executive session to discuss confidential matters regarding licensees, applicants, and administrative hearings not subject to public disclosure in accordance with Louisiana open meetings law, seconded by Dr. Findley, and passed unanimously by roll call vote from all members in attendance. All votes noted for the following agenda items in executive session were made at the end of discussions and out of executive session.*

## **VIII. ADMINISTRATIVE HEARINGS**

### **A. Case #26-0926 – Proposed Consent Order**

The Board received a complaint against a licensed veterinarian alleging surgical malpractice. Following an investigation, it was determined there was probable cause to initiate formal disciplinary hearings. The allegations were that the licensee, in attempting to remove a patient's descended and non-descended testicle instead removed the patient's prostate gland, cutting the patient's urethra, and leaving the non-descending testicle. The patient required revision surgery by a specialist and a permanent tube to effect urination and periodic replacement. The clients now have to drain the tube 3-4 times per day and take steps to avoid infection in the area. By Consent Order, the Board (sans the investigating member) approved the following terms:

- a. A fine of \$1000 for failing to meet the acceptable standards of care;
- b. Reimbursement of the costs of proceedings and investigation to the Board: \$1750;
- c. An additional 9 ½ hours of Continuing Education in RACE approved courses specifically chosen by the investigating member.

## **IX. LICENSING ISSUES**

### **A. None at this time**

## **X. APPLICANT ISSUES**

### **A. Zachary Badura, DVM – Waiver Request of NAVLE Retake**

The Board reviewed supplemental documentation submitted with the application for licensure from Dr. Badura. Motion made outside of executive session, and seconded, to approve the requested waiver of the national exam retake requirement as the documents provided supported the waiver criteria for the required period of time immediately. With no further discussion and with no public comments, the motion passed unanimously by voice vote from all members in attendance.

## **B. Kaylee McMahan, DVM – Waiver Request of NAVLE Retake**

The Board reviewed supplemental documentation submitted with the application for licensure from Dr. McMahan. Motion made outside of executive session, and seconded, to approve the requested waiver of the national exam retake requirement as the documents provided supported the waiver criteria for the required period of time immediately. With no further discussion and with no public comments, the motion passed unanimously by voice vote from all members in attendance.

## **C. Alison Mikes, DVM – Waiver Request of NAVLE Retake**

The Board reviewed supplemental documentation submitted with the application for licensure from Dr. Mikes. Motion made outside of executive session, and seconded, to approve the requested waiver of the national exam retake requirement as the documents provided supported the waiver criteria for the required period of time immediately. With no further discussion and with no public comments, the motion passed unanimously by voice vote from all members in attendance.

## ***MEETING NOTES***

*All motions and votes related to the applicant waiver requests were made in globo at the end of discussions and out of executive session.*

## **XI. EXECUTIVE SESSION**

### **A. Update: Civil Litigation, LBVM vs. O. Nyzhnyk (Suit No. 2021-9164 A)**

The Board was briefed on the status of its suit against an individual practicing equine dentistry without a license as a veterinarian and outside the employment of a veterinarian by general counsel.

### **B. Update: Civil Litigation, Pelican Institute vs. LBVM (Suit No. C-735730)**

The Board was briefed on the status of a civil suit filed against it on behalf of three DVMs who are/were licensed out of state and who either applied for a waiver of the requirement to retake the NAVLE or did not apply for licensure due to the Rule language adopted by the Board.

### **C. Legal Strategy Discussion on Potential Litigations Against Non-Licensee Practice of Veterinary Medicine**

The board was briefed on the progress of several investigations of individuals alleging the practice of veterinary medicine without a license.

### **D. Legal Strategy Discussion on Potential Litigation Against Practice Act Violations**

The Board took information on the number of licensees who failed to timely renew their licenses/certificates under circumstances where it appeared likely a violation occurred involving practicing veterinary medicine without a currently valid, active license or certificate of approval. The Board instructed the Executive Director and General Counsel to initiate investigations for possible administrative action.

## ***MEETING NOTES***

*All votes and action taken related to administrative hearings (VIII.), licensing issues (IX.), and applicant issues (X.) as noted above for each item were made out of executive session.*

*Upon conclusion of all administrative, licensing, and applicant discussions in executive session as well as discussions related to current and potential civil litigations, motion made to return to regular session by Dr. Findley, seconded by Dr. Morris, and approved unanimously by roll call vote from all members in attendance.*

**XI. ADJOURN**

There being no further business before the Board, motion was made to adjourn, and seconded. With no further discussion and with no public comments, the motion passed unanimously by voice vote from all members in attendance. The meeting was adjourned at 12:25pm.

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Minutes reviewed and approved by the full board on February 5, 2026.

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Christopher Morris, DVM, Board Secretary-Treasurer

## ADDENDUM #1

New Licenses Issued from 11/14/25 to 01/16/26; 15 total

License No.	Name	Type	Issued On
FAC-1229	Taylor Strickland	DVM Faculty	12/09/2025
10435	Ellen Wiedner	DVM	12/09/2025
10436	Leslie Harper	DVM	12/16/2025
10437	Jeremy Caseltine	DVM	12/19/2025
10438	Maura St. John	DVM	12/22/2025
10439	Avia Laborde	DVM	01/05/2026
10440	Rebecca Falgoust	DVM	01/06/2026
10441	Brittany Hutton	DVM	01/06/2026
10442	Caleb Hebert	DVM	01/06/2026
10443	Alison Mikes	DVM *	01/08/2026
10444	Priscilla Devora	DVM	01/15/2026
20187	Miranda Palacios	RVT	12/03/2025
20188	Sierra Gelbard	RVT	12/16/2025
20189	Gracie Nugent	RVT	12/23/2025
20190	Tasha Gremillion	RVT	01/13/2026

\* - conditional license issued under La R.S. 37:53 of Act. No. 253 ("Welcome Home Act").

## ADDENDUM #2

Applications Submitted and Approved from 11/14/25 to 01/16/26

Application Type	Number of Submitted	Number of Approved
CAET	3	0
DVM	8	11
DVM - Faculty	2	1
RVT	6	4
<b>GRAND TOTAL</b>	<b>19</b>	<b>16</b>

**Current Count of Active Licensees as of 01/16/26**

<b>License Type</b>	<b>Number of Licenses</b>
CAET – Active - Full	163
CAET – Active - Lead	18
<b>Subtotal of CAETs</b>	<b>181</b>
DVM – Active	1,803
DVM – Active - Conditional	3
DVM – Inactive - Disabled	1
DVM – Inactive - Retired	8
DVM – Military - Active Status	0
<b>Subtotal of DVMs</b>	<b>1,815</b>
DVM – Faculty - Active	104
<b>Subtotal of DVM Faculty</b>	<b>104</b>
RVT - Active	384
<b>Subtotal of RVT</b>	<b>384</b>
<b>GRAND TOTAL</b>	<b>2,484</b>

**Complaint Statistics from 11/14/25 to 01/16/26**

<b>Action Taken</b>	<b>Number</b>	<b>Still On-Going / Active</b>	<b>Number</b>
Complaints Received	25	Pending Cases (licensees)	33 *
Complaints Closed	13	Pending Cases (non-licensees)	6
Consent Orders Issued	1	Consent Orders	3
Consent Orders Closed	0	HPFLA Referrals (new & on-going)	7
Other Negative Actions	0	Other Negative Actions	0

\* Other negative actions include, formal reprimands, informal reprimands, cease and desist notices, etc. Pending Cases (non-licensees) includes civil action, cease & desist, monitoring or those currently under investigation.

\* 9 Pending Cases against licensees are for failure to renew by deadline with suspected violation of Practice Act for practicing with an expired license.

**Continuing Education Approval Requests from 11/14/25 to 01/16/26**

Between 11/14/25 to 01/16/26, 13 CE requests were approved for the '25-'26 CE period.