



380 W. 22nd Street, Suite 101, Kansas City, MO 64108 • www.aavsb.org

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Contact: Chrissy Bagby, Director of Marketing & Technology
816-931-1504

AAVSB Membership Approves Practice Act Model Updates Including Telehealth Guidelines

Kansas City, MO (September 19, 2018) – The American Association of Veterinary State Boards (AAVSB) is pleased to announce the most recent version of its Practice Act Model as approved by the AAVSB Member Boards at the 2018 AAVSB Annual Meeting & Conference in Washington, DC on September 15, 2018. The Annual Meeting recorded the highest attendance in the AAVSB history with 55 of 62 member jurisdictions represented.

“The Practice Act Model has always been and continues to be a resource for all of the AAVSB Member Boards as it helps them when considering changes to their statutes or regulations,” stated Dr. Lila Miller, the chair of the AAVSB Regulatory Policy Task Force charged by the AAVSB Board of Directors with updating the document. She continued, “The Task Force was focused on responding to the current regulatory environment as well as considering how technology could impact veterinary regulation in the future.”

The AAVSB Regulatory Policy Task Force addressed changes in technology that allow access to veterinary medical services in-person or by any means of communication. Dr. Miller stated, “The Task Force recognized that veterinary practice is evolving and veterinarians considering using telehealth tools to enhance their practice should be held accountable. As regulators, we must ensure animals and the public are protected, and consumers have an avenue to file a complaint should something go wrong.”

A major revision to the AAVSB Practice Act Model modified its definition of the Veterinarian-Client-Patient Relationship (VCPR) to better align with the Code of Federal Regulations (CFR) while still providing guidance to its Member Boards in its commentary on how a veterinarian should establish knowledge of the animal(s) if using telehealth tools. The AAVSB recommends that each jurisdiction promulgate appropriate regulations defining how to establish sufficient knowledge of the animal(s), including the following:

- A. A recent examination of the animal or group of animals, either physically or by the use of instrumentation and diagnostic equipment through which images and medical records may be transmitted electronically; or
- B. Through medically appropriate and timely visits to the premises at which the animal or group of animals are kept.

Commentary in the AAVSB Practice Act Model goes on to reference the *AAVSB Recommended Guidelines for the Appropriate Use of Telehealth Technologies in the Practice of Veterinary Medicine* for further guidance. The guidance document was developed by the AAVSB Regulatory Policy Task Force for our Member Boards when considering regulation changes. “These guidelines are a model for states and provinces to consider and should be used in conjunction with the AAVSB Practice Act Model. They should in no way be construed to alter the scope of practice of any veterinarian or veterinary technician or authorize the delivery of veterinary medical services in a setting or in a manner that is not otherwise authorized by law” said Dr. Michael Gotchey, the AAVSB President. “It is up to the individual jurisdictions whether to use and implement these suggestions, which may take time.”

James Penrod, the AAVSB Executive Director, stated, “The AAVSB Practice Act Model is a fluid document that will always be subject to modifications reflecting changes in professional regulation. Both the updated Practice Act Model and the Telehealth Guidelines document can be found on our website under Board Services.”

About the AAVSB: The AAVSB is a 501(c)(3) non-profit organization whose mission is to support and advance the regulatory process for veterinary medicine. The membership of the AAVSB consists of 62 jurisdictions representing all of the United States and the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and nine Canadian provinces: Alberta, British Columbia, Manitoba, New Brunswick, Newfoundland & Labrador, Nova Scotia, Ontario, Prince Edward Island, and Saskatchewan.