Dr. Dewayne Rahe called the Board Meeting to order at 10:01 a.m. with the following Board Members in attendance: Dr. Tom Burkgren; Dr. Dewayne Rahe; Dr. Yuko Sato; Mrs. Ann Werner, and Mr. Will Yoder. Also present were Mr. Jacob Larson, Assistant Attorney General; Dr. Jeff Kaisand, Executive Secretary; Meghan Orr, Administrative Assistant, and Ginny Eason, staff.

Guest(s)

Jenny Dorman, Legal Counsel, Iowa Veterinary Medical Association
Jamee Eggers, Iowa Pork Producers Association
Chris Gruenhagen, Iowa Farm Bureau
Kiera Leddy, Iowa Farm Bureau
Logan Murray, Iowa Cattlemen’s Association
Randy Wheeler, DVM, Iowa Veterinary Medical Association

Approval of the Agenda

Dr. Burkgren moved to approve the agenda for the November 18, 2021, Board Meeting. Motion was seconded by Mrs. Werner. Motion approved unanimously.

Public Comment (Public comment period is open and limited to two minutes)

Dr. Wheeler stated the Iowa Veterinary Medical Association (IVMA) will soon submit the Continuing Education Application for the Annual Winter Conference 2022.

Mrs. Gruenhagen thanked Dr. Rahe, Dr. Sato, and the commodity stakeholder associations for their participation in meeting and discussing the proposed rules for Chapter 811-12.1 Veterinarian/Client/Patient Relationship.

Approval of the Open Meeting Minutes

Dr. Burkgren moved to approve the amended Open Meeting Minutes of October 28, 2021. Motion was seconded by Dr. Sato. Motion approved unanimously.

Executive Secretary Report

Dr. Kaisand stated Drip.Vet Learning Technologies, LLC responded to the letter that was mailed on October 6, 2021, regarding the continuing education courses listed on their website and those courses that did not reflect RACE approval. The company contact stated some of the special courses are for certain entities and they would review the website and courses regarding the listed continuing education courses and hours.

Dr. Kaisand provided an update on the USDA attempting to schedule a visit with the officials from the Dominican Republic for early December regarding the African Swine Fever outbreak. The Dominican Republic government seemed to be fairly receptive to some type of an eradication program that would be presented by the USDA. The producers are reluctant to do anything to assist with eradication. The producers remember when the USDA came in during the 1970s and depopulated the swine due to African Swine Fever. The pork products are a major export for the
Dominican Republic. Dr. Kaisand reported there are only one or two provinces in the Dominican Republic that African Swine Fever has not been diagnosed in yet. Dr. Kaisand stated there are several strains and it appears there is not a high mortality rate as some of the hogs are recovering from this strain. The USDA is having further discussions with the country and there are other factors also regarding disease outbreaks. Dr. Kaisand stated there has been an indirect mention of a new vaccine but was not aware if the new vaccine is ready for use.

In October the USDA met with the Chief Veterinary Officer from Haiti. The USDA staff was accompanied by armed guards and went to the Embassy directly and only spoke to the Chief Veterinary Officer by telephone and did not meet in person. There is approximately $500 million the United States has set aside for funding assistance and approximately $274-$275 million is tentatively set as indemnity for depopulation. There are several other countries that may receive funding assistance from the United States regarding this disease outbreak.

**Chairperson Report**

Dr. Rahe and Dr. Sato met with the stakeholder associations on Tuesday, November 16, 2021, to discuss the proposed rules for the veterinarian/client/patient relationship.

**Assistant Attorney General Report**

Mr. Larson stated the ethics rules the Board has approved should be noticed for public comment in the month of December.

**Board Member Report**

Mrs. Werner inquired regarding some harvested deer that tested positive for COVID. Dr. Kaisand explained the Iowa Department of Natural Resources (DNR) collects lymph nodes for Chronic Wasting Disease (CWD) testing. One lymph node is for the CWD testing and the other lymph node is banked and saved for later testing. The banked samples were from January 2020 to September 2021 and were sent to Penn State for testing. Ninety-four samples out of the 284 samples tested positive for COVID-19 by PCR testing. The testing with PCR must be carefully performed so there is no cross-contamination. Dr. Kaisand stated it was the captive deer versus wild deer that tested positive. The Iowa DNR has authority over the hunting preserves and the captive deer samples were collected from hunting preserves in Iowa. The final peer reviewed paper has not been released to the public as of now.

Mrs. Werner stated she had read that the Henry Doorly Zoo and Aquarium in Omaha, Nebraska is vaccinating some of the zoo animals for COVID.

**Rulemaking/House/Senate Files**

Proposed Rules for Providing Emergency Services by Veterinarians was discussed. Mrs. Werner stated under Definitions, the definition of “Department”, the “department of agriculture and land stewardship” should be capitalized. Mr. Larson stated this can be changed during rulemaking.

Dr. Rahe asked if the Proposed Rules for Providing Emergency Services by Veterinarians is voted on today will this help to expedite the ethics rules that have been submitted? Mr. Larson stated this would coincide with the ethics rules and a similar timeline for notice and public comments. Mr. Larson stated this would help to shorten the timeframe for both rules.
Mrs. Werner inquired about the usage of the word “should” in the proposed Rules for Providing Emergency Services by Veterinarians. The legal meaning of “should” and “shall” have different legal meanings and it will be the Board’s decision of what they would like in the rule. The word “shall” means they have to comply and “should” does not have that meaning.

Changes made to the proposed rule:

12.1(1)c: c. The licensed veterinarian is readily available or provides for follow-up in case of adverse reactions or failure of the regimen of therapy, or if unavailable, has designated another available veterinarian who has access to the patients records to provide reasonable and appropriate medical care.

12.1(7) In an emergency, if a veterinarian does not have the expertise or the necessary equipment and facilities to adequately diagnose or treat a patient they should advise the client that more qualified or specialized services are available elsewhere and offer to expedite referral to those services.

12.1(8) A licensed veterinarian who in good faith engages in the practice of veterinary medicine by rendering or attempting to render emergency or urgent care to a patient when a client cannot be identified and a veterinarian-client-patient relationship is not established shall not be subject to discipline based solely on the veterinarian's inability to establish a veterinarian-client-patient relationship.

Dr. Burkgren moved to approve the proposed rules for Providing Emergency Services by Veterinarians. Motion seconded by Mr. Yoder. Motion carried unanimously.

Correspondence

Taylor Veterinary Hospital response letter was revised and will be reviewed at the December Board Meeting.

The response letter to Dr. Kelly Clements, Petco Company, was approved by the Board Members.

The response letter to Dr. Jessi Turner was revised and will be mailed to the licensee.

Ms. Lauren Saehler inquired if she would be able to obtain a limited license based on her physical therapy license. Iowa Code Chapter 169.8.a states the applicant is a graduate of an accredited or approved college of veterinary medicine. Draft a letter for review at the December Board Meeting.

Miscellaneous

Veterinarian/Client/Patient Relationships Policy Guidance – Dr. Rahe and Dr. Sato met with the various commodity boards and stakeholder associations. There were representatives who met at the Iowa Cattlemen’s Association; Swine, Beef, Poultry, Sheep, Dairy, Turkey, and Egg industry attending the meeting. The Iowa Board of Veterinary Medicine was asked to provide background for the meeting which is to clarify the current veterinarian/client/patient relationship. The reasoning is the veterinarian/client/patient relationship lacks the term medically appropriate and timely visits, lacks clarity, and involves individual interpretation. Currently most practices operate in lieu of the veterinarian/client/patient relationship as the last 12 months, however, it is not defined, and the rule changes make this clearer instead of a case-by-case scenario. There were questions from individuals that were attending the meeting such as what defines a premise? There was discussion as to whether or not this is defined by a premise identification number. Currently there are no
requirements in the state of Iowa that require livestock or pet producers to have a premise identification number. Premise will need to be defined and does the 12-month rule apply to a physical exam or a premise visit? There were concerns expressed about the language, “the Board determines on a case-by-case scenario”. Discussion was held as to if that puts a precedence on the veterinarians. There was a request that the language be clear and that the interpretations are not variable.

The new alternative amendments that are being proposed would keep the language “the veterinarian must examine the patient within the last 12 months” instead of making that the sole requirement (Note: see the rules of Georgia, Idaho, Tennessee, Oregon, and Washington); medically appropriate and timely visits to the premises where the patient or representative patients are kept, the review of the veterinary medical records and laboratory records for the patient (See Indiana rules for “representative patient” and AVMA comment); visiting any of the premises where the patient is kept during the flow of production for the herd or group of animals and assessing the current medical condition of the patient through an examination of the veterinary medical records and laboratory records for the patient and periodic consultations with the client regarding the health management program for the herd or group of animals, including disease management protocols (Note: See AVMA commentary and FDA Guidance #CVM-GFI-209, pp. 21-22); the veterinarian has access to the patient’s records and has been designated by the veterinarian with the prior relationship to provide reasonable and appropriate medical care if he or she is unavailable (Note: Allows for veterinarians in the same practice or contract veterinarians to provide continuity of care. See AVMA definition of VCPR, and the Illinois and Indiana rules).

Mrs. Gruenhagen stated there are many questions the Iowa Board of Veterinary Medicine should address regarding the 12-month rule. Is the 12-month a physical examination of the patient or a 12-month visit to the premise? If the veterinarian examines a new animal does that establish the 12-month visit? This is not clear and needs to clarify the definition of the valid veterinarian/client/patient relationship for managing herd health for all species. Does the examination of a small animal also mean the veterinarian would have to visit the premises to satisfy the valid veterinarian/client/patient relationship? The valid veterinarian/client/patient relationship applies to all species and is unclear if the physical examination also means a visit to the premises. The definition of the valid veterinarian/client/patient relationship needs to accommodate the biosecurity concerns for managing the herd health as well as making sure the definition works for everyone.

Dr. Rahe stated the Iowa Board of Veterinary Medicine proposes that sufficient knowledge means the veterinarian has recently seen or is personally acquainted with the care of the patient by virtue of a physical examination of the patient or a visit to the premise where the patient is located within the past 12-months. The small animal physical examination or food animal production on the premise or the licensed veterinarian is readily available or provides for follow-up in case of adverse reactions or failure of the regimen of therapy or if unavailable has designated another available veterinarian who has access to the patient’s records to provide reasonable and appropriate medical care.

Ms. Dorman stated the American Veterinary Medical Association principles are still being referenced.

Dr. Burkgren moved to re-open discussion on Agenda Item 6a Proposed Rules for Providing Emergency Services by Veterinarians. Motion was seconded by Mr. Yoder. Motion carried unanimously.

Dr. Burkgren moved to approve the 811-12.1 Proposed Rules for Providing Emergency Services by Veterinarians 811-12.1(1)c The licensed veterinarian is readily available or provides for follow-up in case of adverse reactions or failure of the regimen of therapy, or if unavailable has designated another
available veterinarian who has access to the patient’s records to provide reasonable and appropriate medical care. Motion seconded by Dr. Sato. Motion approved unanimously.

Telemedicine – The COVID-19 positivity rate is increasing right now. The Board will provide advanced notice of 30 days prior to rescinding the Telemedicine policy.

Virtual Meetings – The COVID-19 positivity rate is increasing right now. The Board will provide advanced notice of 30 days prior to rescinding the Virtual Meeting policy.

Administrative Rules Chapter 811-11 Continuing Education and licensing requirements for initial licensing applications. Dr. Kaisand inquired regarding the initial license and the individual has been out of college for 10 years and never licensed. Do they have to submit continuing education credit for the last three years to obtain a license or not submit any continuing education hours since they have never been licensed in the state of Iowa? Dr. Rahe asked the Board Members for their opinion. Dr. Burkgrren stated the reason for continuing education is to keep their veterinary skills current. The veterinarian will have to submit 60 continuing education hours for the last three licensing years.

American Veterinary Medical Association ECFVG Program and American Association of Veterinary State Boards PAVE Program comparison chart was prepared by Ms. Orr per Dr. Kaisand’s request. Ms. Orr presented the chart and document will be attached to minutes as a permanent record. The Board Members thanked Ms. Orr for her work and presentation.

Mrs. Werner moved to go into Closed Meeting Session (closed session pursuant to Iowa Code section 21.5(1)(a) to review or discuss records which are required or authorized by state or federal law to be kept confidential or to be kept confidential as a condition for that governmental body’s possession and 21.5(1)(d) to discuss the contents of a licensing examination or whether to initiate licensee disciplinary investigations or proceedings if the governmental body is a licensing or examining board). Motion seconded by Dr. Sato.

Roll call vote by Board Members: Dr. Burkgrren, aye; Dr. Rahe, aye; Dr. Sato, aye; Mrs. Werner, aye; Mr. Yoder, aye. nay – 0. Motion passed at 11:35 a.m.

Open Meeting Session

The Board reconvened into the Open Meeting Session at 12:52 p.m.

Action on Closed Meeting Session Sanctions

Dr. Burkgrren moved to close cases 21-008 and 21-024. Motion was seconded by Dr. Sato. Motion approved unanimously.

Dr. Nilson Ribas, Petition for Waiver of Rules Chapter 9.1(2) Temporary In-state Permit. The Board Members discussed Dr. Ribas’ petition for the waiver of the rule regarding the Temporary In-state Permit. The Board Members directed Mr. Larson to prepare a one-time order approving the waiver for a 180 Day Temporary Permit. The Order will be voted on at the December 2021 Board Meeting.
Continuing Education

The continuing education applications were reviewed by the Board Members for approval.

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<td>David Brown, PhD</td>
<td>Mental Health First Aid (Adult)</td>
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<td>Kelley O'Hara</td>
<td>The Wound Healing Process and Treatment Options to Promote the Healing Potential! (11.30.2021 Des Moines, IA)</td>
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<td>Teresa Farrell</td>
<td>Financial Literacy and Clinic Ownership for New Veterinarians (12.15.2021 Ankeny, IA)</td>
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<td>Tim Smith, DVM</td>
<td>Virtual Fundamental Skills for Program Diseases (11.30-12.2.2021 Ames, IA)</td>
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Next Board Meeting

The next Board Meeting is Thursday, December 30, 2021, at 10:00 a.m. in the Second Floor Conference Room, Wallace State Office Building.

Adjournment

Dr. Sato moved to adjourn the Board Meeting at 12:58 p.m. Motion seconded by Dr. Burkgren. Motion approved unanimously.

Respectfully submitted,

Jeffrey J. Kaisand, DVM
Executive Secretary