

**hb1097F.RVT.Remarks.pdf**

Uploaded by: Adam Alfano

Position: FAV

House Bill 1097

State Board of Veterinary Medical Examiners – Veterinary Technicians and Veterinary Assistants

Outline: For the purpose of authorizing a veterinary assistant to perform certain tasks under the direct supervision of a veterinary practitioner or veterinary technician; authorizing a veterinary technician to perform certain procedures, including certain emergency procedures and euthanasia, under certain circumstances; requiring the State Board of Veterinary Medical Examiners to develop by regulation a certain alternative pathway for employed veterinary assistants to become veterinary technicians; and generally relating to the State Board of Veterinary Medical Examiners and veterinary technicians and veterinary assistants.

Position: Favorable

Comments:

It's 2am on a Friday night. A young Chesapeake Bay Retriever is in surgery for a splachnicectomy to save her life. While one patient is in surgery, an owner brings in her 19-year-old cat. The cat is open mouth breathing, and the owner is concerned about quality of life and doesn't want her cat to suffer anymore. The doctor on duty is performing lifesaving surgery and now must decide which patient to help.

This scenario is all too common in our veterinary ERs. If the doctor steps away from the surgery, the patient might not make it. If the doctor continues in with the surgery the other patient waits in agony, for what could be hours. No matter what, the doctor's stress and anxiety has drastically increased. Today's increased stress and anxiety is just compounded interest to a career that is full of burnout and compassion fatigue.

House Bill 1067 hopes to make at least this scenario a little better. It would allow licensed technicians in an emergency to stop a patient's suffering. A licensed technician with support of the veterinarian and owner can help make this difficult situation less stressful and bring peace to a suffering patient while ensuring the doctor stays focused on the lifesaving surgery.

I used the word patient, but these are family members. We often see these family members in the worst situations. Our goal is to be as safe and humane as possible. We want to do as much suffering as possible while simultaneously reducing the amount of suffering.

I am also in favor of the timeline of October 1, 2027, for the bill to go into full effect. Our local program at the Community College of Baltimore County and the online program Penn Foster usually takes 24 months (about 2 years) to complete. Completion of this program culminates in the VETERINARY TECHNICIAN NATIONAL EXAM. The passage of this exam results in becoming a fully licensed veterinary technician.

Thank you for your time,

Adam Alfano  
Hospital Director  
Pet+ER Hunt Valley

**Favorable - HB 1097 - Del. Guyton.pdf**

Uploaded by: Michele Guyton

Position: FAV

MICHELE GUYTON  
Legislative District 42B  
Baltimore County

Environment and Transportation  
Committee



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Michele.Guyton@house.state.md.us

THE MARYLAND HOUSE OF DELEGATES  
ANNAPOLIS, MARYLAND 21401

**February 28, 2024**

**Favorable – HB 1097 – State Board of Veterinary Medical Examiners – Veterinary Technicians and Veterinary Assistants – Del. Guyton**

Dear Chair Korman and Members of the Environment and Transportation Committee,

I respectfully request a favorable report on HB 1097 that clarifies the duties of a registered veterinary technician in Maryland code.

We have heard in this committee before that there are shortages in the veterinary field. In addition, registered veterinary technicians are underutilized and advance training is disincentivized due to a lack of clarity and consistency regarding their duties.

This bill will codify the duties a registered veterinary technician can perform in Maryland and is based on recommendations and model legislation from American Veterinary Medical Association in partnership with Association of Veterinary State Boards. HB 1097 defines which duties can be done under immediate, direct, and indirect supervision of a veterinarian.

The AVMA recognizes the importance on leveraging skills and engagement of registered veterinary technicians. This legislation will be one of the first steps to ensure that this happens in Maryland.

This bill supports our state economy by keeping better paying jobs in Maryland. And this helps our animals as well, allowing veterinarians to utilize registered veterinary technicians more efficiently and improve access to care.

Please support HB 1097.

Sincerely,

A handwritten signature in cursive script that reads "Delegate Michele Guyton".

Delegate Michele Guyton

# **HB1097\_Guyton\_Amendment**

Uploaded by: Michele Guyton

Position: FAV



HB1097/383226/1

AMENDMENTS  
PREPARED  
BY THE  
DEPT. OF LEGISLATIVE  
SERVICES

01 MAR 24  
08:54:59

BY: Delegate Guyton

(To be offered in the Environment and Transportation Committee)

AMENDMENTS TO HOUSE BILL 1097

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 4, after the second “the” insert “immediate or”.

AMENDMENT NO. 2

On page 6, strike line 9 in its entirety; in line 10, strike “URINE” and substitute “BLOOD, URINE,”; in lines 10, 11, 12, 13, 14, and 15, strike “(9)”, “(10)”, “(11)”, “(12)”, “(13)”, and “(14)”, respectively, and substitute “(8)”, “(9)”, “(10)”, “(11)”, “(12)”, and “(13)”, respectively; in line 15, after “NONINVASIVE” insert “, AS DEFINED BY THE BOARD,”; in line 18, after “(B)” insert “A VETERINARY ASSISTANT MAY PERFORM THE FOLLOWING TASKS UNDER THE IMMEDIATE SUPERVISION OF A VETERINARY PRACTITIONER OR VETERINARY TECHNICIAN:”

(1) SET UP OF ANESTHESIA; AND

(2) ANESTHESIA MONITORING.

(C)”;

and in the same line, strike “(C)” and “(D)”, respectively, and substitute “(D)” and “(E)”, respectively.

On page 7, in lines 20 and 25, strike “(C)” and “(D)”, respectively, and substitute “(D)” and “(E)”, respectively; and in line 21, strike “(B) (1)” and substitute “(C)(1)”.

On page 8, in lines 4 and 11, strike “**(E)**” and “**(F)**”, respectively, and substitute “**(F)**” and “**(G)**”, respectively.

# **Sponsor Amendment HB 1097**

Uploaded by: Michele Guyton

Position: FAV





**HB1097/713223/1**

AMENDMENTS  
PREPARED  
BY THE  
DEPT. OF LEGISLATIVE  
SERVICES

28 FEB 24  
12:58:29

BY: Delegate Guyton

(To be offered in the Environment and Transportation Committee)

AMENDMENT TO HOUSE BILL 1097

(First Reading File Bill)

On page 2, in line 24, strike “PATIENTS” and substitute “PATIENT”.

On page 3, in line 25, strike the brackets.

On page 5, in line 6, strike “QUALIFIED AS A CREDENTIALLED” and substitute “REGISTERED WITH THE BOARD AS A”; in line 10, strike the opening bracket; strike beginning with the closing bracket in line 11 down through “BOARD” in line 26; and in line 31, after “TECHNICIAN” insert “UNDER THE DIRECT SUPERVISION OF A VETERINARY PRACTITIONER”.

On page 6, in line 18, strike “SUBJECT TO SUBSECTIONS (C) AND” and substitute “EXCEPT AS PROVIDED IN SUBSECTION”.

On page 7, in line 21, strike “(B)” and substitute “(A)”; and in the same line, strike “(15)” and substitute “(14)”.

On page 8, in line 13, strike “DESIGNATED BY THE BOARD” and substitute “DEFINED IN REGULATIONS ADOPTED BY THE BOARD”.

**HB1097 FWA.pdf**

Uploaded by: Marisa Francis

Position: FWA



## Favorable With Amendments HB1097

On behalf of the Maryland Veterinary Medical Association (MDVMA) and its member veterinarians and veterinary technicians, we appreciate the devotion of the bill sponsor to help clarify and codify key responsibilities of the veterinary team in veterinary hospitals across the state of Maryland. We feel the provision of clarity in defining roles helps elucidate clearly individual responsibilities and may better empower veterinary providers to appropriately utilize support staff to improve efficiency of care to their patients and the clientele depending on them. Additionally, these clear definitions reinforce the responsibility of the Board of Veterinary Medical Examiners to ensure all providers are upholding an acceptable, high standard of care.

We accept and support most of the wording and all the sentiment of this legislation. We are concerned that some of the responsibilities delegated under the current drafted language do not adequately safeguard the health and welfare of patients but feel there are acceptable ways to restructure some of the listed responsibilities which will preserve the intended purpose of this legislation, improve efficiency of care, and mitigate the risks we have identified.

1. Striking lines 15-17 on page 6 of the bill draft altogether.

“[ALLOWS] Any other skill that is noninvasive and within the veterinary assistant’s skills as determined by the supervising veterinary practitioner” is too nebulous. While we appreciate, and certainly agree that veterinary professionals are responsible and should have the ability to oversee and allocate responsibility to their staff we feel it is very important that individuals who are taking part in critical care of patients have adequate oversight of the Board of Veterinary Medical Examiners to protect the public, as well as our patients. Granting too wide of latitude makes enforcement more difficult and “noninvasive” is not defined in the bill. We recognize the intent of this addition was likely to ensure small oversights of required tasks from the bill text would not prohibit assistants from being able to perform the task.

From our discussion with current veterinarians, technicians, and past appointees to the State Board of Veterinary Medical Examiners, it is our position that assistants will still be delegated safe tasks within their scope by veterinarians to perform even if they may not be specifically elucidated by the bill. While striking lines 15-17 on page 6 won’t prohibit veterinarians from delegating tasks that aren’t explicitly authorized in the text, it maintains the unstated responsibilities of veterinary assistants that currently exist. Veterinarians will continue to delegate responsibly without being offered explicit legislative text to reference as reasons for why that delegation may have been too broadly applied.

Additionally, we do not feel it is appropriate for veterinary assistants without a formalized education and without regulatory oversight from the State Board of Veterinary Medical Examiners to be granted authority by a veterinarian to essentially function as a veterinary

technician-even if that individual is technically responsible enough and capable of performing the task.

2. We propose removing phlebotomy (page 7 line 9) from the tasks delegated exclusively to veterinary technicians and adding it to tasks appropriate of veterinary assistants under direct supervision. Alternatively, line 10 on page 6 could be reworded to state “collecting of blood, urine and fecal samples” to facilitate the same effect.
3. In the list of procedures that veterinary assistants are authorized to perform under direct supervision we request that lines 4, 9, 12 of page 6 be separated into a separate category that allows veterinary assistants to perform these procedures under “immediate supervision” of a veterinary technician or veterinarian.

Dental prophylaxis has inherent risks to a patient (including necrosis/death of a tooth) and veterinary assistants do not receive any formalized training on how to perform the procedure. Most complications from a dental prophylaxis only become evident days to weeks following the procedure-it is critical a licensed, trained individual is immediately supervising to stop anything dangerous that may be occurring during the provision of that care. While we entirely appreciate the flexibility and enhancement that allowing veterinary assistants to legally perform the procedure will afford veterinarians, and we agree with the premise, we also agree that it is unsafe for assistants to be afforded the ability to perform this task without a veterinarian or a veterinary technician immediately at their side.

This bill grants veterinary technicians the legal ability to provide immediate oversight with the definitions already provided and that in and of itself will alleviate a burden on the veterinarian the presently exists. By restructuring this responsibility, it will also allow better utilization of veterinary support staff without undermining the need for more of them to seek specific accreditation and training to become veterinary technicians.

Anesthetic Monitoring is one of the most important responsibilities of a health care provider. The balance of life and death is, in many cases, seconds. An individual that has not received formalized training on the importance of respiratory and cardiac physiology and respiratory inhalants is not qualified to safely provide anesthesia. Veterinary assistants aren't trained to calculate doses and rates of emergency medications. Trained and licensed providers (technicians and veterinarians) must constantly challenge themselves to maintain composure in high stakes and high stress environments where seconds matter. It is unsafe to expect even an exceptional assistant to be able to do so. If such an assistant is confident their abilities allow them to make these high-stake life and death calculations under duress we strongly encourage that assistant to become credentialed so there is direct regulatory oversight of them for the decisions they make. It would be entirely irresponsible for them to be allowed to provide anesthesia under direct supervision, but we do feel it would be appropriate to allow it under

immediate supervision which requires an individual (technician or veterinarian) to be immediately at the side of the assistant monitoring the anesthesia. It would be the role of that licensed individual to make those immediate life and death decisions/calculations and the assistant can facilitate delivery of those requests.

When things go wrong during anesthesia - and they occasionally, and unpredictably do - the patient that survives is the one that has someone capable of *immediately* implementing life-saving intervention without hesitation. Seeking input from the veterinarian one door over will diminish success rates in critical cases. Immediate Supervision still grants the flexibility of a veterinarian to have a veterinary assistant at the surgical table when a veterinary technician is otherwise unavailable, and it still allows the veterinarian to have the flexibility to manage more than one case simultaneously in an emergency environment.

For similar reasons assistants who set up for surgery and other procedures need to be immediately supervised because this, by definition, means these individuals will be preparing anesthetic machines and equipment. It is not an encumbrance to a veterinarian to provide immediate supervision when anesthetic equipment is being prepared because the patient requiring the anesthesia is in imminent need of receiving attention from a licensed provider (veterinarian or technician) anyway. Provision of other surgical equipment is always going to occur under immediate supervision because sterile drapes and packs are not delivered and fully assembled to the surgical area prior to arrival of that practitioner. If the licensed providers are too busy to offer immediate supervision while an anesthetic device is being setup it is unreasonable to believe they would be present enough to ensure in that moment that the machine has been prepared correctly to safely administer anesthesia to a patient and therefore it is irresponsible for that patient to be placed under anesthesia even under the most strenuous of emergencies.

4. We propose striking lines 20-24 on page 7.

We have discussed with our veterinary technicians specifically this provision and our feedback is that they agree veterinary technicians should not be offered latitude to practice essentially unsupervised. Furthermore, we feel it opens the state of Maryland up to an opportunity where practitioners who maintain a Maryland license but are not directly domiciled in Maryland or even available in person to the patient or the technician could interpret the wording to authorize them to form "minute clinic" type businesses that are essentially run exclusively by licensed technicians.

Technicians aren't really trained to function in this manner and most we have talked to aren't even comfortable with the idea of that type of structure. We suspect the intent is to allow veterinarians who are "on call" to have technicians begin triage and management of the case prior to the veterinarian's arrival at the hospital. We also expect that is how most practitioners

would function under the wording of this bill because we do believe veterinarians are professionals and the overwhelming majority will always put patient care first. However, the definitions of “indirect supervision” would not require of the practitioner to practice with that level of responsibility and therefore, the definition of “indirect supervision” requires further revision to ensure a veterinarian is available to the patient in a very near time or the authority granting discretion of the veterinarian to authorize a technician to practice with “indirect supervision” must be struck.

5. Finally, we request the sponsor ensure that lines 4 and 5 of page 7 do not conflict with Maryland Department of Health Controlled Substance laws/provisions or Federal Drug Enforcement Agency Policies.

It is our opinion that it may be in conflict with the policies and regulations of both. Admittedly, we don't feel we have all the information necessary to fully advise on this. While we are not opposed to this allowance in any way, we are concerned that it could open practitioners that follow this up to potential fines from these regulatory authorities and we wish for additional clarification and kindly request our legislators ensure the provision as written is cohesive with what is currently allowed and won't create a potential liability, conflict or ambiguous situation where state and federal regulations are incongruent with themselves or one another.

Sincerely,

Ashley Nichols, DVM  
President

Matthew Weeman, DVM  
Legislative Committee Chair

**HB1097 - SBVME - Letter of Concern 2.26.2024.pdf**

Uploaded by: Nathaniel Boan

Position: INFO



**Maryland  
Department of Agriculture**

*Office of Marketing, Animal Industries and Consumer Services*

**Wes Moore**, Governor  
**Aruna Miller**, Lt. Governor  
**Kevin M. Atticks**, Secretary  
**Steven A. Connelly**, Deputy Secretary

*State Board of Veterinary  
Medical Examiners*

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410-841-5780 Fax

## **Maryland Department of Agriculture**

### **Legislative Comment**

**Date: February 26, 2024**

**BILL NUMBER:** HB 1097

**SHORT TITLE:** State Board of Veterinary Medical Examiners - Veterinary Technicians and  
Veterinary Assistants

**MDA POSITION:** LETTER OF CONCERN

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SBVME supports the intent proposed in HB1097. However, the SBVME would like to share that this bill provides exemption of veterinary technicians from registration if they are “credentialed” in other jurisdictions. Without in-state registration, the SBVME will have no regulatory authority over these veterinary professionals.

Generally, the State Board of Veterinary Medical Examiners (SBVME) supports much of the language in the proposed HB 1097. The Board greatly appreciates the new definitions for each degree of supervision, which is an area in need of clarification. The Board also appreciates the bill’s added definition of veterinarian assistants and its description of specific healthcare tasks that may be delegated to veterinary assistants and veterinary technicians under specified levels of supervision.

This bill appears to remove the requirement that individuals who hold credentials in other jurisdictions register with the SBVME. Currently, only registered veterinary technicians (RVTs) may perform certain health care tasks requiring a higher level of skill and training than other hospital staff. Registration of veterinary technicians with the state is essential to the SBVME’s ability to validate credentials, remain informed regarding disciplinary action taken in other jurisdictions, investigate complaints submitted in Maryland, and take disciplinary action when necessary. Registered individuals must understand the unique rules and regulations governing practice in Maryland and cooperate with Board investigations without the need for subpoenas or other legal process (which is not true for unlicensed individuals). The Board is very concerned that HB 1097 simultaneously expands permissible health care tasks that can be performed by veterinary technicians, authorizes lesser degrees of veterinary supervision required for some tasks, and removes regulatory oversight over these professionals by not requiring registration for veterinary technicians credentialed in other jurisdictions. The Board is unable to take action against a technician’s license/registration/certification in another state. Additionally, if they are convicted of animal cruelty or significant neglect in their duties as a veterinary technician, we would be unable to revoke or suspend their license/registration because it would not exist.

With further discussion it may be possible to address the concerns of the SBVME with the Bill’s sponsor.



Sincerely,

A handwritten signature in black ink, reading "Nathaniel Boan". The signature is written in a cursive style with a large initial "N" and a long, sweeping underline.

Nathaniel Boan  
Executive Director  
Maryland State Board of Veterinary Medical Examiners



# **HB\_1097\_INFO\_RachelJones**

Uploaded by: Rachel Jones

Position: INFO



**Maryland  
Department of Agriculture**

*Office of Marketing, Animal Industries  
and Consumer Services*  
**Wes Moore, Governor**  
**Aruna Miller, Lt. Governor**  
**Kevin M. Atticks, Secretary**  
**Steven A. Connolly, Deputy Secretary**

*State Board of Veterinary  
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**Maryland Department of Agriculture**

**Legislative Comment**

**Date: February 28, 2024**

**BILL NUMBER:** HB 1097

**SHORT TITLE:** State Board of Veterinary Medical Examiners - Veterinary Technicians and Veterinary Assistants

**MDA POSITION:** LETTER OF INFORMATION

The State Board of Veterinary Medical Examiners (SBVME) is a division of the Maryland Department of Agriculture (MDA). The SBVME supports the intent proposed in HB1097. Generally, the State Board of Veterinary Medical Examiners (SBVME) supports much of the language in the proposed HB 1097.

The Board recognizes that there is a lack of licensed veterinarians practicing in the State. SBVME greatly appreciates the new definitions for each degree of supervision, which is an area in need of clarification. The Board also appreciates the bill's added definition of veterinarian assistants and its description of specific healthcare tasks that may be delegated to veterinary assistants and veterinary technicians under specified levels of supervision.

The SBVME initially had concerns that the exemption of veterinary technicians from registration if they are "credentialed" in other jurisdictions would create a regulatory loophole. Without in-state registration, the SBVME would have no regulatory authority over these veterinary professionals.

The bill sponsor has filed amendments that address some of the Board's concerns and has indicated a desire to continue working with us to ensure that the bill will not disrupt the SBVME's ability to regulate veterinary professionals practicing in Maryland. The bill as amended will also require veterinary supervision for some tasks. For additional questions, please contact me at [Nathaniel.Boan@maryland.gov](mailto:Nathaniel.Boan@maryland.gov).

Sincerely,

Nathaniel Boan  
Executive Director  
Maryland State Board of Veterinary Medical Examiners