

WRITTEN TESTIMONY IN SUPPORT OF HB0452 AND SB0054 WITH AMENDMENTS

State Board of Veterinary Medical Examiners – Grounds for Disciplinary Action – Restrictions

TO: The Honorable Marc Korman, Chair, Members of the House Environment and Transportation Committee

The Honorable Brian Feldman, Chair, Members of the Senate Education, Energy, and the Environment Committee

FROM: Jacquie Cohen Roth, MS

DATE: February 9, 2026 (House) / February 3, 2026 (Senate)

POSITION: FAVORABLE WITH AMENDMENTS

Dear Committee Chairs and Members:

I am writing to express my strong support for House Bill 452 and its companion Senate Bill 54, **WITH AMENDMENTS**, which would protect Maryland veterinarians from disciplinary action solely for discussing or recommending cannabis or cannabidiol (CBD) products for therapeutic purposes in animals. While I strongly support the intent and necessity of this legislation, I urge the committee to consider clarifying amendments to ensure the bill aligns with Maryland's existing medical cannabis framework and avoids unintended regulatory conflicts.

LEGAL PRECEDENT: HEALTHCARE PROVIDERS' RIGHT TO DISCUSS CANNABIS

Before addressing the specific provisions of HB0452/SB0054, it is essential to acknowledge established legal precedent protecting healthcare providers' right to discuss cannabis with patients. In 2003, the United States Supreme Court let stand a lower court's October 2002 decision in *Conant v. Walters* that allows doctors to discuss medical marijuana (cannabis) with their patients without federal authorities revoking the doctors' federal prescription licenses. Without comment, the Supreme Court refused to hear the Bush administration's challenge of the 2002 lower court ruling upholding a federal district court injunction blocking the administration's efforts to prevent doctors from telling their patients that medical marijuana may benefit them.

This landmark Supreme Court action established that DEA-licensed healthcare providers—including those authorized to prescribe Schedule II controlled substances—may discuss cannabis with patients without federal interference or threat to their DEA registration, provided they do not assist in the actual procurement or distribution of cannabis.

This precedent is directly relevant to veterinary medicine. Veterinarians hold DEA licenses to prescribe controlled substances for animal patients. Just as human healthcare providers are constitutionally protected when discussing cannabis within the scope of their professional practice, veterinarians should have similar protection when providing guidance to animal owners, particularly when such guidance serves animal welfare and public safety.

THE CRITICAL NEED FOR CLARIFYING AMENDMENTS

While I wholeheartedly support the animal welfare objectives of HB0452/SB0054, the current language requires refinement to align with Maryland's medical cannabis regulatory framework and avoid creating unintended confusion about veterinarians' role.

Issue: The Word "Recommending" Has Specific Meaning in Maryland's Medical Cannabis System

In Maryland's medical cannabis program, the terms "recommend" and "recommending" have precise regulatory meanings. Under Maryland law, when a healthcare provider "recommends" medical cannabis to a patient, they are:

- Certifying that a patient has a qualifying medical condition
- Issuing a written certification that allows the patient to register with the Maryland Cannabis Administration
- Enabling the patient to legally purchase cannabis from a licensed dispensary
- Creating a formal medical cannabis patient-provider relationship subject to specific regulatory oversight

This is a formalized process with legal consequences, regulatory reporting requirements, and a defined scope of practice.

HB0452/SB0054 is NOT Intended to Allow Veterinarians to "Recommend" Medical Cannabis

The intent of this legislation is not to create a parallel medical cannabis system for animals or to authorize veterinarians to issue medical cannabis certifications for pets. Rather, the bill aims to protect veterinarians from discipline when they exercise their professional judgment within the Veterinarian-Client-Patient Relationship (VCPR) to:

- **Educate** pet owners about the endocannabinoid system and how cannabinoids interact with animals
- **Guide** clients toward appropriate CBD products and away from dangerous THC-containing products
- **Advise** on potential benefits, risks, contraindications, and drug interactions

- **Counsel** pet owners who are already using or considering cannabis products for their animals

This fundamentally differs from how Maryland's regulatory framework defines "recommending medical cannabis."

The VCPR Standard is the Appropriate Framework

The Veterinarian-Client-Patient Relationship (VCPR) is the established standard for veterinary practice. Under VCPR, veterinarians have both the authority and the responsibility to provide comprehensive medical guidance to clients about all aspects of their animal's health, including:

- Dietary supplements and nutraceuticals (many of which are unregulated)
- Over-the-counter medications
- Environmental modifications
- Behavioral interventions
- Emerging therapies and products

Cannabis and CBD products should fall under this same VCPR standard, allowing veterinarians to educate, guide, and advise without the implication that they are issuing formal medical cannabis recommendations.

Proposed Amendment Language

I respectfully suggest the following amendment to Section 2-310(B):

CURRENT LANGUAGE:

"THE BOARD MAY NOT SUSPEND OR REVOKE A LICENSE, REPRIMAND OR CENSURE A LICENSEE, OR PLACE A LICENSEE ON PROBATION SOLELY ON THE BASIS OF THE LICENSEE DISCUSSING OR RECOMMENDING THE USE OF CANNABIS, AS DEFINED IN § 1-101 OF THE ALCOHOLIC BEVERAGES AND CANNABIS ARTICLE, OR A PRODUCT THAT CONTAINS CANNABIDIOL ON AN ANIMAL FOR POTENTIAL THERAPEUTIC EFFECT OR HEALTH SUPPLEMENTATION PURPOSES."

PROPOSED AMENDED LANGUAGE:

"THE BOARD MAY NOT SUSPEND OR REVOKE A LICENSE, REPRIMAND OR CENSURE A LICENSEE, OR PLACE A LICENSEE ON PROBATION SOLELY ON THE BASIS OF THE LICENSEE, WITHIN THE SCOPE OF A VETERINARIAN-CLIENT-PATIENT RELATIONSHIP, DISCUSSING, EDUCATING, GUIDING, OR ADVISING A CLIENT REGARDING THE USE OF CANNABIS, AS DEFINED IN § 1-101 OF THE ALCOHOLIC BEVERAGES AND CANNABIS ARTICLE, OR A PRODUCT THAT CONTAINS CANNABIDIOL ON AN ANIMAL FOR POTENTIAL THERAPEUTIC EFFECT OR HEALTH SUPPLEMENTATION PURPOSES."

This amendment:

- Eliminates the potentially confusing term "recommending"
- Explicitly grounds the protection in the VCPR standard
- Uses terminology consistent with veterinary practice ("educating," "guiding," "advising")
- Avoids creating confusion with Maryland's medical cannabis recommendation system
- Maintains all intended protections for veterinarians while providing clearer guidance

WHY THIS LEGISLATION IS CRITICAL FOR ANIMAL WELFARE

The need for this legislation, with clarifying amendments, is urgent and rooted in real animal welfare concerns.

The Current Dangerous Reality

Maryland veterinarians currently face an impossible situation. According to surveys, nearly 30% of veterinarians receive weekly inquiries from clients about cannabis and CBD products for their pets. Yet under current law, veterinarians risk professional discipline—including license suspension or revocation—simply for discussing these products with clients.

This creates a particularly dangerous scenario: well-meaning pet owners who have experienced relief from legal cannabis products for their own chronic pain or anxiety may assume the same products are safe for their dogs. They don't understand that dogs are uniquely vulnerable to THC toxicity.

Dogs' Extraordinary Vulnerability to THC

All mammals possess an endocannabinoid system (ECS), a complex cell-signaling system that regulates physiological processes including pain sensation, mood, appetite, and immune function. The ECS includes cannabinoid receptors, primarily CB1 (predominantly in the brain and central nervous system) and CB2 (predominantly in immune tissues).

When THC enters the body, it binds to CB1 receptors, producing both therapeutic effects and, at high doses, intoxication. Here's where the stakes become extraordinarily high for canine patients:

Dogs have a significantly higher density of CB1 receptors in their cerebellum compared to any other studied species, making them extraordinarily sensitive to THC.

The cerebellum is the brain region responsible for coordinating movement and maintaining balance. This concentrated receptor density explains why

dogs exhibit such distinctive and severe neurological symptoms when exposed to excessive THC.

THC Toxicity in Dogs: A Serious Medical Emergency

When dogs receive excessive THC, whether through accidental ingestion or well-intentioned but inappropriate dosing by owner, they develop a constellation of severe clinical signs known as "static ataxia":

- Distinctive wobbling stance and difficulty maintaining balance
- Urinary incontinence
- Severe lethargy or stuporous appearance
- Heart rate abnormalities (tachycardia or bradycardia)
- Hypersalivation and hypothermia
- Agitation

While most dogs recover with supportive veterinary care, severe cases require hospitalization and IV fluid support. In rare instances, fatal secondary complications like aspiration pneumonia can occur when animals are too sedated to eat, drink, or protect their airways properly.

Veterinarians NEED to Have These Conversations

Veterinarians need legal protection to:

- Explain the critical difference between human-use cannabis products (which may contain dangerous levels of THC) and appropriate CBD products for animals
- Warn owners about species-specific THC toxicity risks
- Guide pet owners toward safer alternatives
- Monitor for adverse effects and drug interactions
- Document product use in medical records

Currently, the threat of professional discipline silences these essential safety discussions. Pet owners are using these products regardless, but without professional guidance, animals are at risk.

ALIGNMENT WITH MARYLAND'S CANNABIS POLICY FRAMEWORK

Maryland has been a leader in cannabis reform, having:

- Legalized adult-use cannabis (2023)
- Expanded medical cannabis access
- Permitted home cultivation and production of cannabis products
- Reduced penalties for cannabis offenses

HB0452/SB0054, with the clarifying amendments I propose, extends Maryland's principles of access, harm reduction, and professional discretion to veterinary medicine. It acknowledges that cannabis and CBD products are legal, readily available, and already being used by pet owners—and that

veterinarians, as licensed medical professionals, should be able to provide guidance within their scope of practice.

MARYLAND FOLLOWS CALIFORNIA AND NEVADA'S SUCCESSFUL MODELS

Maryland's legislation follows successful models established by trailblazing states:

Nevada (AB 101, 2021): Nevada became the first state to authorize veterinarians to discuss, recommend, and administer hemp and CBD products containing no more than 0.3% THC. The bill passed both chambers without a single no vote.

California (AB 2215, 2018 and AB 1885, 2022): California took a two-step approach, first protecting discussions (AB 2215) and then protecting recommendations (AB 1885). The California Veterinary Medical Board stated, "By allowing veterinarians to recommend animal cannabis products for potential therapeutic purposes, AB 1885 provides a safer environment for pet owners to make well-informed decisions for their pets."

Maryland has the opportunity to improve these models by providing clearer guidance that explicitly grounds veterinary cannabis guidance in the VCPR standard.

ADDRESSING POTENTIAL CONCERNS

Some may worry that this bill reduces oversight or opens the door to inappropriate recommendations. These concerns are unfounded:

- 1. The bill maintains all existing veterinary standards of care.** Veterinarians remain subject to Board oversight for incompetence, negligence, or violations of professional standards.
- 2. The proposed amendments make the scope even clearer** by explicitly grounding protections in the VCPR and using standard veterinary guidance terminology.
- 3. The bill requires a therapeutic or health supplementation purpose,** preventing frivolous discussions.
- 4. Veterinarians already discuss unregulated supplements with clients** as part of standard practice. Cannabis and CBD should be no different—particularly when the consequences of NOT discussing them can be fatal for animals.

CONCLUSION

House Bill 452 and Senate Bill 54 represent critical, measured reforms that will improve animal welfare in Maryland by allowing veterinarians to fulfill their

professional responsibilities without fear of disciplinary action. However, clarifying amendments are necessary to ensure the legislation aligns with Maryland's existing medical cannabis regulatory framework and provides clear guidance to veterinarians and the State Board.

The amendments I propose:

- Eliminate potentially confusing language around "recommending"
- Ground protections explicitly in the VCPR standard
- Use terminology consistent with veterinary practice
- Avoid regulatory conflicts with Maryland's medical cannabis system
- Maintain all intended protections while providing clearer guidance

Pet owners deserve honest, evidence-based guidance from their veterinarians. Animals deserve comprehensive medical care that includes discussions of all relevant therapeutic options and critical safety information. And veterinarians deserve clear legal protection when they fulfill their professional duty to provide that care.

I strongly urge the committee to issue a **FAVORABLE** report on HB0452/SB0054 **WITH THE CLARIFYING AMENDMENTS** proposed herein.

Respectfully submitted,

Jacquie Cohen Roth, MS

Founder/CEO, CannabizMD and The Tea Pad Foundation LTD
VP Education and Strategic Partnerships, CannaWorkforce, Inc.
Adjunct Professor, University of Maryland School of Pharmacy
MS Medical Cannabis Science and Therapeutics Program

Contact Information:

E: jacquie@cannabizmd.com

M: 410-960-4715