



Sunset Report
**Alabama State
Board of Veterinary
Medical Examiners**
Montgomery, Alabama

October 1, 2023 through September 30, 2025

ALABAMA DEPARTMENT OF
EXAMINERS of Public Accounts

Rachel Laurie Riddle, *Chief Examiner* | 334-777-0500 | www.alexaminers.gov



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September 16, 2026

Representative Margie Wilcox
Chairman, Sunset Committee
Alabama State House
Montgomery, Alabama 36130

Dear Representative Wilcox:

This report was prepared to provide information for use by the Sunset Committee in conducting its review and evaluation of the operations of the Alabama State Board of Veterinary Medical Examiners in accordance with the *Code of Alabama 1975*, Section 41-20-9.

The report contains unaudited information obtained from the management, staff, and records of the Alabama State Board of Veterinary Medical Examiners in addition to information obtained from other sources.

Please contact me if you have any questions concerning this report.

Sincerely,

Rachel Laurie Riddle
Chief Examiner

Examiner
Karen McClure

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PROFILE

Purpose/Authority

The Alabama Board of Veterinary Medical Examiners (the “Board”), in its present form, was created by Act Number 1986-500, Acts of Alabama, Page 956. The Board licenses and regulates the practice of veterinary medicine in Alabama, investigates complaints, and disciplines licensees. The Board operates under the authority of the *Code of Alabama 1975*, Sections 34-29-60 through 34-29-94; Sections 34-29-110 through 34-29-111; and Sections 34-29-130 through 34-29-135.

Additionally, the *Code of Alabama 1975*, Sections 20-2-1 through 20-2-190 and Sections 20-2-210 through 20-2-220, addressing controlled substances and prescription drug monitoring, respectively, also contain provisions applicable to the Board.

The following Act passed since the last sunset review and has not been codified in the current statutory authority. A copy of the Act can be found in Appendix II of this report.

Act Number 2026-503, Acts of Alabama, relating to veterinary medicine, amended Section 34-29-61, *Code of Alabama 1975*, to define the veterinarian-client-patient relationship and other terms. Additionally, this act added Section 34-29-77.1 to the *Code of Alabama 1975*, to prohibit veterinarians from dispensing medication without a veterinarian-client-patient relationship; to provide the amount of time within which a prescription may be refilled; to provide the veterinarian-client-patient relationship is shared among all veterinarians at a location; to require a veterinarian-client-patient relationship be reestablished annually; and to make nonsubstantive, technical revisions to update the existing code language to current style.

<u>Characteristics</u>	
Members and Selection	Eight members appointed by the Governor from a list of three persons nominated by the Alabama Veterinary Medical Association. Six members shall be veterinarians, one member shall be a veterinary technician, and one member shall be a consumer. <i>Code of Alabama 1975</i> , Sections 34-29-63 and 34-29-64
Term	Members serve four-year terms. Members serve until their successors are appointed and qualified. No member can serve more than two consecutive terms, and no more than 13 years total. <i>Code of Alabama 1975</i> , Section 34-29-63

Qualifications	Six members of the Board must be veterinarians who satisfy the following qualifications: • Must be legal residents of Alabama • Graduates of an accredited veterinary medical school. • Licensed to practice veterinary medicine in Alabama. • Actively employed and licensed in veterinary practice for a minimum of five years prior to appointment. • Required to practice veterinary medicine for at least 35 hours per week during their tenure One member shall be a licensed veterinary technician. <i>Code of Alabama 1975</i>, Section 34-29-64
Consumer Representation	One consumer member required by law. One consumer member currently serving. <i>Code of Alabama 1975</i>, Section 34-29-64
Racial Representation	No specific statutory requirement. One minority member currently serving.
Geographical Representation	No specific statutory requirement.
Other Representation	The membership of the Board shall be inclusive and reflect the racial, geographic, urban/rural, and economic diversity of the state. <i>Code of Alabama 1975</i>, Section 34-29-63
Compensation	Board members receive \$400 for each day, or portion thereof, the member is actually engaged in the work of the Board. Members are reimbursed for necessary travel expenses at the same rate as state employees. <i>Code of Alabama 1975</i>, Section 34-29-67
Attended Board Member Training	Four Current Board Members Two Former Board Members Executive Director

<u>Operations</u>	
Administrator	Tammy Cargile serves as the Board's Executive Director. She is an unclassified employee appointed by the Board with an annual salary of \$97,716.00. <i>Code of Alabama 1975</i>, Section 34-29-65
Location	8100 Seaton Place, Suite A Montgomery, AL 36116 Monday through Friday 7:00 am to 4:00 pm
Real Property Ownership	The Board does not own any real property.
Employees	Six employees.
Legal Counsel	Olivia Martin, Assistant Attorney General, an employee of the Attorney General's Office, provides legal services for the Board. <i>Code of Alabama 1975</i>, Section 34-29-67(b)
Subpoena Power	The Board has the power to subpoena records and witnesses and to compel the production of any books, records, papers or documents. <i>Code of Alabama 1975</i>, Section 34-29-69(3) and (4)
Internet Presence	www.asbvme.alabama.gov The Board's website includes announcements, meeting notices, administrative rules, and links to state and national associations. The website has links to renewals, exam information and forms for licensees. Miscellaneous forms such as complaint forms and public record request forms and the ability to search for licensees are also included on the website. Minutes of the Board's meetings are not on the Board's website.

<u>Financial</u>																									
Source of Funds	License and permit fees, examination fees, and penalties.																								
State Treasury	Yes, Special Revenue Fund 0408. <i>Code of Alabama 1975</i> , Section 34-29-70																								
Required Distributions	Any controlled substance permit surcharge from veterinary medicine practitioners authorized to prescribe or dispense controlled substances is to be distributed to the Department of Public Health. <i>Code of Alabama 1975</i> , Section 20-2-217																								
Unused Funds	Funds at the end of each fiscal year that exceed 200% of the Board's budget for the fiscal year shall be transferred to the State General Fund. Funds at the end of each fiscal year included in this Sunset Review did not exceed 200% of the Board's Budget for the fiscal year. Therefore, no transfers to the General Fund were required. <i>Code of Alabama 1975</i> , Section 34-29-70																								
<u>Licensure</u>																									
Licensees	As of August 12, 2026, the Board had the following licensees/ permit holders: <table border="1"> <thead> <tr> <th>Type of License</th><th></th></tr> </thead> <tbody> <tr> <td>Veterinarian (Active)</td><td>2,706</td></tr> <tr> <td>Faculty</td><td>189</td></tr> <tr> <td>Veterinary Technician (Active)</td><td>656</td></tr> <tr> <td>Premise Permits</td><td>757</td></tr> <tr> <td>Controlled Substance Certificates</td><td>1,465</td></tr> <tr> <td>Veterinarian (Inactive)</td><td>54</td></tr> <tr> <td>Veterinary Technician (Inactive)</td><td>11</td></tr> <tr> <td>Certified Euthanasia Technician (Active)</td><td>166</td></tr> <tr> <td>Certified Euthanasia Technician (Inactive)</td><td>464</td></tr> <tr> <td>Registered Animal Euthanasia Facility</td><td>43</td></tr> <tr> <td>Total</td><td>6,511</td></tr> </tbody> </table> <i>Source:</i> Executive Director	Type of License		Veterinarian (Active)	2,706	Faculty	189	Veterinary Technician (Active)	656	Premise Permits	757	Controlled Substance Certificates	1,465	Veterinarian (Inactive)	54	Veterinary Technician (Inactive)	11	Certified Euthanasia Technician (Active)	166	Certified Euthanasia Technician (Inactive)	464	Registered Animal Euthanasia Facility	43	Total	6,511
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Licensure Qualifications	<u>Veterinarians</u> Applicants applying for licensure as a veterinarian must: • Be at least 21 years old. • Be a graduate of accredited veterinary school. • Be a citizen of the United States or legally present. • Applicants who are graduates of a program not accredited by the American Veterinary Medical Association (AVMA) must provide proof of an Educational Commission for Foreign Veterinarian Graduates certificate or its equivalent by the AMVA. • Pass an examination. <u>Faculty License</u> In order to obtain a faculty license, applicants must: • Provide proof of graduation from a reputable school of veterinary medicine. • Provide proof of appointment to the faculty of an Alabama school or college of veterinary medicine. • Demonstrate competency in the English language. • Pass state Board examination on Alabama practice act. • Be a citizen of the United States or legally present. <u>Veterinary Technician</u> Applicants applying for licensure as a veterinary technician must: • Be at least 18 years of age. • Be of good character. • Demonstrate that they have attained a competent education and have received a diploma in veterinary technology from an AMVA accredited school or other school approved by the Board. • Pass an examination. <i>Code of Alabama 1975, Section 34-29-72 and 34-29-94</i>
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Examinations

Applicants for a Veterinarian license must pass the North American Veterinary Licensing Examination (NAVLE) prepared and administered by the National Board of Veterinary Medical Examiners (NBVME). The exam is administered in April, November, and December at Prometric test centers in Birmingham, Dothan, and Montgomery. Exam fees are paid to the NBVME.

The following are the pass/fail rates for Alabama applicants:

North American Veterinary Licensing Examination

Year	# Taken	# Passed	% Passed
2024	50	41	82%
2025	112	92	82%

The following are the pass/fail rates for Alabama public educational institutions:

Auburn University Examination Rates

Year	# Taken	# Passed	% Passed
2024	34	28	82%
2025	29	27	93%

Source: Executive Director

Administrative Rule 930-X-1-.09

Code of Alabama 1975, Section 34-29-73

Applicants for a Veterinary Technician license must pass the Veterinary Technician National Examination (VTNE) prepared and administered by the American Association of Veterinary State Boards (AAVSB). The exam is administered in March, July, and December at Prometric test centers in Birmingham, Dothan, and Montgomery. Exam fees are paid to the AAVSB.

The following are the pass/fail rates for Alabama applicants:

Veterinary Technician National Examination

Year	# Taken	# Passed	% Passed
2024	44	18	41%
2025	43	28	65%

The following are the pass/fail rates for Alabama public educational institutions:

Coastal Alabama Community College

Year	# Taken	# Passed	% Passed
2024	10	3	30%
2025	6	4	67%

Examinations (continued)	Jefferson State Community College			
	Year	# Taken	# Passed	% Passed
	2024	24	10	42%
	2025	18	9	50%
	Southern Union Community College			
Reciprocity	Year	# Taken	# Passed	% Passed
	2025*	4	3	75%
	*First class to sit for examination			
	Source: Executive Director			
	Code of Alabama 1975 , Section 34-29-94(c)			
Renewals	Every applicant shall be subjected to a written state examination on material found in the Alabama Practice Act and the Administrative Code of the Board.			
	Administrative Rule 930-X-1-.09			
	Any applicant satisfactorily completing the American Veterinary Medical Association approved National Veterinary Licensing Exam in another state need not repeat the examination for licensure in Alabama, however, the Board retains jurisdiction to require the applicant repeat any portion of the AVMA approved National Veterinary Licensing Exam or practice specific examinations necessary to determine practice competency.			
	Code of Alabama 1975 , Section 34-29-72(c)			
	Licenses expire annually on December 31.			
Licensee Demographics	Code of Alabama 1975 , Section 34-29-75			
	Online renewals are available and approximately 90% are completed online.			
	Source: Executive Director			
	Data not collected by agency.			
	Continuing Education			
Continuing Education	Veterinarians are required to complete 20 hours each year. Veterinary Technicians are required to complete 8 hours each year.			
	Code of Alabama 1975 , Section 34-29-69(8)			
	Administrative Rule 930-X-1-.12			

SIGNIFICANT ISSUES

There were no new significant issues.

STATUS OF PRIOR FINDINGS/SIGNIFICANT ISSUES

There were no unresolved prior significant issues.

MATTERS OF CONCERN FROM QUESTIONNAIRES

Matter of Concern 2026-001: Three of seven (42%) Board members responding to our survey think corporate veterinary medicine is the most significant issue facing the profession. Some of the noted concerns include risks posed by corporately owned veterinary interests having undue influence over the Board and how corporate medicine is affecting the quality and cost of medicine for Alabamians.

Matter of Concern 2026-002: Five of fifteen (33%) licensed veterinarians responding to our survey noted concerns about the continuing education requirements. Specific concerns noted included how many hours were required to be obtained each year and the form, i.e. in-person, virtual, and on demand, in which the hours had to be obtained.

PRIOR MATTERS OF CONCERN FROM QUESTIONNAIRES

Prior Matter of Concern 2024-001: Five of seven (71%) Board members responding to our survey think the Veterinary Practice Act should be updated. Three of seven (43%) Board Members responding to our survey believe the Board's laws should be updated to include telemedicine, stand-alone mobile practices and online pharmacies. Some of the issues cited include reaching underserved rural areas with mobile units without requiring the mobile practice to be attached to a brick-and-mortar practice and the risks involved with telemedicine.

Current Status: Unresolved. Three of seven (43%) Board members responding to our survey think the language of the Veterinary Practice Act should be updated.

Prior Matter of Concern 2024-003: Eighteen licensed veterinary technicians responded to our survey and the following was noted from the responses:

- **Six of eighteen (33%) licensed veterinary technicians responding to our survey consider title protection the most significant issues facing their profession in Alabama.** Some of the issues cited include unlicensed personnel performing procedures that should only be done by licensed technicians and the lack of motivation of veterinary assistants to pursue a degree and licensure.
- **Seven of eighteen (39%) licensed veterinary technicians responding to our survey consider salary and low wages the most significant issues facing their profession in Alabama.** Some of the issues cited include low wages contributing to a lack of interest in the profession and veterinarians opting to pay an unlicensed person less rather than hire a licensed veterinary technician.

Current Status: Unresolved. Seven of seventeen (41%) licensed veterinary technicians responding to our survey consider title protection the most significant issue facing their profession in Alabama. Six of seventeen (35%) licensed veterinary technicians responding to our survey consider salary and low wages the most significant issue facing their profession in Alabama.

Prior Matter of Concern 2024-004: Five of eighteen (29%) licensed veterinary technicians and two of five (40%) of licensed faculty responding to our survey indicated they are not adequately informed by the Board of changes to and interpretations of the Board's positions, policies, rules, and laws.

Current Status: Unresolved. Four of seventeen (24%) of licensed veterinary technicians and four of eight (50%) of veterinary faculty responding to our survey indicated they are not adequately informed by the Board of changes to and interpretations of the Board's positions, policies, rules, and laws.

Prior Matter of Concern 2016-002: **Complainants were not satisfied with their dealings with the Alabama Board of Veterinary Medical Examiners.** Eighteen of twenty-eight complainants responding (64%) stated they were not satisfied with their dealings with the Alabama State Board of Veterinary Medical Examiners, 57% (16 of 28 complainants responding) did not think the Board did everything it could to resolve their complaint.

Current Status: Unresolved. Seventeen of twenty-one (81%) complainants responding to our survey do not think the Board did everything it could to resolve their complaint.

QUESTIONNAIRES

Board Member Questionnaire

A letter was sent to all eight members of the Alabama State Board of Veterinary Medical Examiners requesting participation in our survey. Seven participated in our survey. The percentages are based on the number who responded to the question.

1. What do you consider the most significant issue(s) currently facing the Alabama State Board of Veterinary Medical Examiners and how is the Board addressing these issues?

Board Member #1 – “the introduction of corporate medicine into the state and ability to oversee how they affect the quality and cost of medicine for Alabamians”

Board Member #2 – “Continued need to keep the Board members representing the people of Alabama and protect their interests. Guarding against the potential risks posed by corporately owned Veterinary interests having undue influence over the ASBVME.”

Board Member #3 – “The mid level veterinary physician assistant position which was passed into law in Colorado. This give VPA's the authority to diagnose and treat animals without a veterinary license. The ASBVME position is to oppose this VPA status in the State of Alabama.”

Board Member #4 – “It typically cost a solo practitioner board member approximately twice as much to hire someone to work for them so that they may attend the Board meeting than the state pays to attend the meeting. For this reason, the solo practitioner does not volunteer for a position on the board. Therefore, the solo practitioner is underrepresented on the Board.”

Board Member #5 – “I think one of our most significant challenges is the number of complaints we receive that are not based on violations of the practice act or substandard care. We get a lot of complaints from people who are upset about the charges for veterinary services and we do not regulate that. We also receive quite a few fraudulent complaints from disgruntled former employees of veterinary practices. Those also do typically do not address violations of the practice act or substandard care. All of those complaints are investigated and it take time to sort through the justified and unjustified complain cases.”

Board Member #6 – “People trying to skirt the Veterinary Client Patient Relationship for Telemedicine and Prescribing drugs. It is a Legislative function. Corporate Ownership of Veterinary Practices.”

Board Member #7 – “I do not feel that we have any significant issues with the Board.”

2. What, if any, changes to the Board’s laws are needed?

Board Member #1 – “we have the practice act but we don't have the money and power to enforce our laws”

Board Member #2 – “Some modernizing of language. The ALVMA has been at work to study the current Practice Act, and much of that work may improve/modernize the Practice Act if and when it is adopted by the legislature.”

Board Member #3 – “To improve the wording of our veterinary client patient relationship clause in the Alabama Practice Act.”

Board Member #4 – “Telemedicine needs to be addressed.”

Board Member #5 – “We recently submitted proposed legislation to Representative [REDACTED]. As soon as that is passed through the legislature, we will have another meeting to implement that statute as a rule for our members.”

Board Member #6 – “Improve wording on VCPR (Veterinary Client Patient Relationship) that must be established.”

Board Member #7 – “I do not feel like any changes are needed.”

3. Do you think the Board is adequately funded?

Yes	6	86%
Unknown	1	14%

4. Do you think the Board is adequately staffed?

Yes	7	100%
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5. Does the Board receive regular reports on its operations from the Executive Director?

Yes	7	100%
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6. Has the Board experienced any significant change to its operations?

No	7	100%
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7. Does the Board plan to make any significant changes to its operations?

No	5	71%
Unknown	2	29%

8. Do you have any additional comments you would like to make?

Board Member #1 – “none at this time”

Board Member #2 – “It has been a pleasure to serve on the Board; enlightening in many respects, although complaint cases have caused me to agonize over each one, I am a better Veterinarian for having been through this experience.”

Board Member #3 – “No”

Board Member #4 – “None”

Board Member #5 – “none”

Board Member #6 – “None”

Board Member #7 – “I have no additional comments.”

Veterinarian Questionnaire

A letter was sent to one hundred licensees requesting participation in our survey. Fifteen participated in the survey. The percentages are based on the number who responded to the question.

1. What do you consider the most significant issue(s) facing your profession in Alabama?

Respondent #1 – “Malpractice claims, human drug dependence , wellness”

Respondent #2 – “I think a significant issue that this profession is facing in Alabama is having an outdated practice act. The practice act needs to be updated for presents times and to prepare for the future of this profession. One example is re-evaluating skills that a veterinary assistant can and cannot perform. Also preparing for having a shortage of Veterinarians and compensating for those times.”

Respondent #3 – “Senators introducing bills that hurt the profession (e.g., eliminating VCPR)”

Respondent #4 – “1. Title Protection/Injection of mid-level practitioners with LIMITED training! (██████ has been pushing this)

2. Technician/Nurse protections

3. Telemedicine has greatly increased, we need clarity and a little more space to work in this space for very rural patients.”

Respondent #5 – “Rising costs and veterinary wellness influencers.”

Respondent #6 – “Cost of care & public’s general distrust of those in this profession”

Respondent #7 – “Retainability within the veterinary profession, specifically for large animal based practitioners.”

Respondent #8 – “Shortage of hard working veterinarians”

Respondent #9 – “The buying up of practices by corporates owned by private equity.”

Respondent #10 – “Workforce shortages/recruitment and retention of technicians. Compensation that do not always reflect the level of education, responsibility, and physical workload required for the job.”

Respondent #11 – “Lay people practicing veterinary medicine without a medical license.”

Respondent #12 – “pricing, The economy”

Respondent #13 – “Costs. The cost of practice which includes being able to pay a salary to veterinarians who come out of college with high student debt loads. The cost clients must pay as a result of the cost of practice.”

Respondent #14 – “UNLICENSED INDIVIDUALS PRACTICE VETERINARY MEDICINE. TELEMEDICINE AND ILLEGAL PRESCRIPTION WRITING”

Respondent #15 – “The economy”

2. Do you think regulation of your profession by the Alabama State Board of Veterinary Medical Examiners is necessary to protect the public welfare?

Yes	14	93%
No	1	7%

3. Do you think any of the Board's laws, rules, or policies are an unnecessary restriction on the practice of your profession?

Yes	4	27%
No	9	60%
Unknown	2	13%

4. Are you adequately informed by the Board of changes to and interpretations of the Board's positions, policies, rules, and laws?

Yes	9	60%
No	4	27%
Unknown	2	13%

5. Do you consider mandatory continuing education necessary for the competent practice of your profession?

Yes	15	100%
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6. Does the Board respond to your inquiries in a timely manner?

Yes	7	47%
No	2	13%
Unknown	6	40%

7. Has the Board performed your licensing and renewal in a timely manner?

Yes	14	93%
No	1	7%

8. Do you have any additional comments you would like to make?

Respondent #1 – “None”

Respondent #2 – “It would be nice not to have to renew our licenses every year. I worked in another state and we only had to renew our license every two years. It would also be nice not to have to wait for paper copies of licenses each year. Not sending out paper licenses each year can save money for the state. I think sending a copy of the license is a waste of money and resources. That money can be used for other things. Another suggestion is to grandfather veterinary technicians who have worked in this field for over 15 years, to be licensed veterinary technicians, if that is something that they want. They have worked in this field for so long and can perform all the skills, and even more, than the current LVT/CVT that have finished school.”

Respondent #3 – “Would like to see increase of number of virtual/online CE hours allowed per year”

Respondent #4 – “Having worked with many state's boards I have been happy with Alabama's. They have always been responsive when I have a question and are the BEST about renewal support. If anyone doesn't renew in Alabama it is their own fault, not that of our board. I'm thankful I've not had to deal with a board complaint, but I do think the overall feel is that the board does a good job of identifying true/bonified concerns and engage in due diligence to evaluate concerns.”

Respondent #5 – “There is an increasing number of ways to get great CE for all veterinarians in the country, much of it LIVE, virtual, on demand. The fact that AL restricts us to only 10 hours of "online" CE each year is a problem. Depending on your season of life, travel and hotels may not be an option for you. Often the online CE is much better than any local CE I can attend. I would suggest that the Board continue with 20 hours of CE a year because it is imperative to veterinarians practicing evidenced based medicine. However, I would make it possible to do your 20 hours in any capacity that is available, in person, on demand, virtual, LIVE.K”

Respondent #6 – “Would love if CE could be carried over if more than the 20 in one year & allow any amount to be virtual unless it's wetland- like surgery, etc”

Respondent #7 – “While I love the CE requirements yearly in AL, I do feel the "in-person" mandate may be stretching it for some practitioners.. Especially for large animal practitioners. I also think that permit necessity for mobile based practitioners is a bit overkill and trying to schedule for "site visits" for established clinics may be a waste of fiscal resources.”

Respondent #8 – “No”

Respondent #9 – “I think a review of the CE hours requirements should be done. I think that the hours could be cumulative or considering lowering the amount to mirror other states requirements should be considered.”

Respondent #10 – “Please allow for online registration for licensure. Mailing checks is very outdated.”

Respondent #11 – “I think the practice of veterinary medicine without a license is a serious issue that needs to be addressed in the interest of this profession but also for the protection of the public and our nations food supply chain. I want to see action and not discussion on this matter.”

Respondent #12 – “I think it would be good to give updated copies of the Practice act at each inspection as well as copies of other laws that may pertain to us.”

Respondent #13 – “No”

Respondent #14 – “Keep the board.”

Respondent #15 – “None”

Veterinary Technician Questionnaire

A letter was sent to one hundred licensees requesting participation in our survey. Seventeen participated in the survey. The percentages are based on the number who responded to the question.

1. What do you consider the most significant issue(s) facing your profession in Alabama?

Respondent #1 – “Lack of pay and burnout”

Respondent #2 – “Title protection/recognition within hospitals.”

Respondent #3 – “Recognition as boarded, credentialed medical professionals.”

Respondent #4 – “Lack of veterinary support and pay scale”

Respondent #5 – “-Up until recently, I would have said that lack of licensing abilities for technicians. But, now that we have 3 schools in Alabama, I can't really use that one except that they do not reach North Alabama to support the growth for my area. I do believe that the online schooling approach is terrible for technicians, not having proper support and guidance in an online format. Now, we add the cost of these schools to a low pay career. What makes it worth it for people to stay?

-Pay, benefits and underutilization of technicians.”

Respondent #6 – “Not strict enough title protection for Licensed Technicians & we do not get paid enough”

Respondent #7 – “Having to renew your license every year. I came from Ohio and we renewed every other year. Alabama requires the same amount of CE hours yearly that we needed in Ohio every other year. I also don't like that people without a license can do the same things I can. In Ohio, that was not the case and it was enforced.”

Respondent #8 – “no title protection. VAs can do most of the same task as LVTs, and some clinics still label/title VAs as LVTs even though they are not licensed.”

Respondent #9 – “When an assistant is trained to our job as a LVT”

Respondent #10 – “Lack of proper utilization of credentialed veterinary technicians.”

Respondent #11 – “Competitive pay”

Respondent #12 – “Lack of public education of what a Licensed Veterinary Technician is, and the education we have received. This paired with lack of title protection really degrades all of our education, training, and expertise.”

Respondent #13 – “Burn out. Staff turn over is high and staff frequently voice exhaustion, depression, and waking up dreading coming into work. I am part of many educational Facebook groups not specifically created as an outlet to discuss burnout but rather to discuss cytologies and how to set up different labs, etc, but there are still extremely frequent posts with people venting about exhaustion and requesting tips on how to transfer their skills to other jobs.”

Respondent #14 – “The lack of appreciation and pay for licensed veterinary technicians. We do the extra step by going to school, taking our boards, work 12 plus hours a day and get paid less than \$20 a hour. We have bills, some have children, and don't forget those student loans that a good percentage had to take out to get through the veterinary technician program.”

Respondent #15 – “Title protection”

Respondent #16 – “Overuse of “Vet Tech” for those without education & being undervalued & not adequately paid. Assistants are paid more than LVTs in certain circumstances.”

Respondent #17 – “Title protection for LVTs”

2. Do you think regulation of your profession by the Alabama State Board of Veterinary Medical Examiners is necessary to protect the public welfare?

Yes	17	100%
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3. Do you think any of the Board's laws, rules, or policies are an unnecessary restriction on the practice of your profession?

Yes	2	12%
No	13	76%
Unknown	2	12%

4. Are you adequately informed by the Board of changes to and interpretations of the Board's positions, policies, rules, and laws?

Yes	9	52%
No	4	24%
Unknown	4	24%

5. Do you consider mandatory continuing education necessary for the competent practice of your profession?

Yes	17	100%
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6. Does the Board respond to your inquiries in a timely manner?

Yes	6	35%
No	1	6%
Unknown	10	59%

7. Has the Board performed your licensing and renewal in a timely manner?

Yes	17	100%
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8. Do you have any additional comments you would like to make?

Respondent #1 – “N/A”

Respondent #2 – “N/A”

Respondent #3 – “Would prefer to see better defined roles/responsibilities and enforcement thereof of credentialed vs non-credentialed personnel written into the Practice Act.

There should be a way for staff to report unethical or harmful practitioners without signatures/fear of repercussion.”

Respondent #4 – “Getting the word out that there are options for becoming a LVT and having professors/instructors visit local hospitals to encourage the assistants who are interested but don't know where to stay would be most helpful.”

Respondent #5 – “#3. The laws, rules and policies for Veterinary Technicians is as outdated as the good ole boys that made it up. I know that some changes have been made, but I see more good people jumping out of profession than ever that could have been helped or prevented by the policies in place.”

Respondent #6 – “Not at this time”

Respondent #7 – “See above”

Respondent #8 – “I think it should be required to be an LVT in order to monitor surgery. I understand that VAs cannot scale teeth, but I feel like having them monitor is more of a risk than scaling teeth.”

Respondent #9 – “N/A”

Respondent #10 – “Credentialed Veterinary Technicians are not afforded the same rights as Licensed Veterinarians in Rule 930-X-1-.12 (c) as it pertains to continuing education requirements. Veterinarians who are non-practicing over seventy years old may be exempted from continuing education requirements. In an effort to be inclusive, Licensed Veterinary Technicians should be afforded the same exemption.”

Respondent #11 – “None”

Respondent #12 – “N/a”

Respondent #13 – “As I have not had my license for very long, I do not feel I have enough experience to answer some of the other questions on this form so I have selected “unknown”.”

Respondent #14 – “No matter what veterinary hospital I have worked out the “license” doesn’t mean anything. They treat unlicensed assistants just like a licensed technician. It makes you wonder if the schooling and studying for the boards was even worth it.”

Respondent #15 – “No”

Respondent #16 – “I appreciate the ASBVME, and I’m proud to be an LVT. I feel CE is very important! And most of all- I love what I do. Our profession should be protected.”

Respondent #17 – “I would love to see an updated breakdown of tasks and skills LVTs can perform under DVM direction.”

Veterinary Faculty Questionnaire

A letter was sent to one hundred licensees requesting participation in our survey. Eight participated in the survey. The percentages are based on the number who responded to the question.

1. What do you consider the most significant issue(s) facing your profession in Alabama?

Respondent #1 – “Burn out related to understaffing, particularly with veterinary technicians.”

Respondent #2 – “Affordability for clients”

Respondent #3 – “The absence or lack of qualified technician.”

Respondent #4 – “Affordability of care, recruitment and retention of vets and technicians, pay for technicians”

Respondent #5 – “None”

Respondent #6 – “Finding board certified veterinarians to fill vacant spots to teach students”

Respondent #7 – “NA”

Respondent #8 – “In my specific field (large animal practice), I think Alabama faces a lack of widespread and uniform veterinary care accessibility, particularly in the rural areas, as well as outreach programs that would educate the lay public about basic concepts of animal welfare, the importance of routine/preventive veterinary care, and establishing a relationship with a primary care veterinarian.”

2. Do you think regulation of your profession by the Alabama State Board of Veterinary Medical Examiners is necessary to protect the public welfare?

Yes	7	87%
No	1	13%

3. Do you think any of the Board’s laws, rules, or policies are an unnecessary restriction on the practice of your profession?

Yes	1	13%
No	5	62%
Unknown	2	25%

4. Are you adequately informed by the Board of changes to and interpretations of the Board’s positions, policies, rules, and laws?

Yes	2	25%
No	4	50%
Unknown	2	25%

5. Does the Board respond to your inquiries in a timely manner?

Yes	3	38%
Unknown	5	62%

6. Has the Board performed your licensing and renewal in a timely manner?

Yes	8	100%
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7. Do you have any additional comments you would like to make?

Respondent #1 – “Enforcement and prosecution of individuals performing veterinary medicine without a license (non-veterinarians) is also a problem that needs greater enforcement.”

Respondent #2 – “No”

Respondent #3 – “n/a”

Respondent #4 – “Licensing for interns and residents at Auburn University can be streamlined. Use of technology and digital forms should be highly considered.”

Respondent #5 – “None”

Respondent #6 – “practicing veterinarians from other states find that getting an alabama license is cumbersome”

Respondent #7 – “N/A”

Respondent #8 – “None”

Complainant Questionnaire

A letter was sent to sixty-five complainants requesting participation in our survey. Twenty-one participated in the survey. The percentages are based on the number who responded to the question.

1. Was the receipt of your complaint acknowledged by the Board?

Yes	19	90%
No	2	10%

2. Approximately how long after filing your complaint did the Board contact you?

Within 15 days	1	5%
Within 30 days	3	14%
Within 60 days	4	19%
More than 60 days	9	43%
Unknown	4	19%

3. Did the Board communicate the results of its investigation into your complaint to you?

Yes	18	85%
No	2	10%
Unknown	1	5%

4. Do you think the Board did everything it could to resolve your complaint?

Yes	3	14%
No	17	81%
Unknown	1	5%

5. Do you have any additional comments you would like to make?

Respondent #1 – “my Name is [REDACTED]

I am writing to share my experience with the Alabama State Board of Veterinary Medical Examiners regarding a complaint I filed against [REDACTED] Veterinary Clinic and Dr. [REDACTED] after my dog [REDACTED] surgery was botched.

The Board ultimately found Dr. [REDACTED] at fault, and I do appreciate that my complaint was taken seriously and investigated. However, the overall process was extremely long and at times I felt out of the loop, almost as if the case had been forgotten.

I would like to say that the gentleman who investigated my case was very professional. He was knowledgeable, compassionate, and seemed to genuinely understand my concerns. During the investigation, it also appeared that he recognized how rude Dr. [REDACTED] and his office manager were to me when I initially tried to contact the clinic.

After [REDACTED] surgery at [REDACTED] Veterinary Clinic, I had to rush her to an emergency veterinarian to save her life due to complications from the original procedure. Before I even realized the surgery had been botched, all I wanted was to speak with Dr. [REDACTED] to hear his side of what happened. Instead, the clinic refused to speak with me. I was yelled at by the office manager and treated very disrespectfully when I was simply asking for a conversation.

At one point during the investigation, I was told there might be a possibility that Dr. [REDACTED] would be required or encouraged to reimburse me for the emergency veterinary bill I had to pay in order to stabilize [REDACTED]. I was also told I might be given the opportunity to speak with Dr. [REDACTED] and receive an apology. Unfortunately, neither of those things ever happened.

I also submitted additional information showing that the clinic had a pattern of bullying clients in Google reviews and responding aggressively to people who shared concerns about their experiences. In some cases, the responses felt like intimidation or attempts to silence criticism. I was able to speak with several individuals who left reviews and said they felt bullied by Dr. [REDACTED] in the comment sections. I never received any follow-up regarding whether that information was considered.

As someone who trusted a licensed veterinarian with the life of my pet, this experience was extremely upsetting. Veterinarians swear an oath to use their scientific knowledge and skills for the benefit of society through the protection of animal health and welfare, the prevention and relief of animal suffering, and the promotion of public health. They are also expected to practice their profession conscientiously and with dignity while placing the care and welfare of their patients first.

Unfortunately, my experience with [REDACTED] Veterinary Clinic did not reflect those commitments. It often felt as though the clinic was more concerned with protecting its reputation and business interests than with the well-being of its patients or the concerns of their owners. This is particularly concerning given that the clinic holds contracts with local animal shelters to perform a high volume of spay and neuter procedures, which places a significant level of trust and responsibility on the clinic to provide safe and compassionate care.

Overall, I would say my experience with the complaint process was not bad, but it was also not great. I appreciate that the Board ultimately sided with me, but I was disappointed that I was never told what disciplinary action, if any, was taken. I was informed in a letter that I was not allowed to know the outcome of the punishment.

I also never received reimbursement for the emergency veterinary expenses I had to pay to save [REDACTED] life, and I never had the opportunity to speak directly with Dr. [REDACTED] about what happened.

My intention in writing this email is simply to provide feedback on the process from a complainant's perspective. I believe more communication with individuals who file complaints and greater transparency about outcomes would improve the experience for others."

Respondent #2 – "My complaint was not thoroughly investigated because if it had been they would have known [REDACTED] at [REDACTED] did not provide standard adequate care for my pet. The vet board's conclusion found no wrong doing against this vet along with other complaints sent in about other pets all within a few months of what happened to my dog. This resulting in this vet feeling like it freed her of any wrong doings [REDACTED] then filed a lawsuit calling our vet board complaint letters fraudulent and is suing myself and many others for libel slander defamation saying we are lying about what she did to our pets all within her first 4-6 months of opening up her very first veterinary clinic. This vet board is made up of practicing and prior vets which is unfair to pet owners whose pets suffered due to other vets like [REDACTED]. To find no wrong doings in any of these complaints is absurd, something needs to be changed about who these boards are made up of. If this is what happens to all pet owners and no punishment or real investigations are done on these vets and they are allowed to provide substandard care for our pets and then try to sue us for speaking out about it then we shouldn't put our trust in veterinarians or the Veterinarian Board at all !!"

Respondent #3 – “It is our opinion that the review board is worthless! They are one sided and take up only for the doctor being reviewed. Rules stated as being violated such as Rule 930-X-1-.11.(1)(2)(3) and Rule 930-X-1-.10-(20)(t) & (x) were clearly violated by the ER Dr. [REDACTED] but the board took no exception to these being violated only stating that they could find her not at fault for any wrong doing! Our [REDACTED] died a Horrible death at the hands of a doctor who wasn't supposed to be even treating our sweet baby especially injecting her with Fentanyl a controlled substance without even telling us. Also, a further letter of appeal to the boards executive director [REDACTED] [REDACTED] apparently went no where as she never responded! Another slap in the face by overpaid board members that protect doctors screw ups while the victims of their stupidity or arrogance goes unchecked! So yes we are very unhappy with the board and think they should be replaced with a nonbiased team that would fairly look at both sides of the complaint and not just rule in favor of the doctors because they are highly educated most of the time more so than the complainant. Feel free to contact us for additional information or we can meet with you at your convience if you wish: [REDACTED]
PS: Our complaint was never resolved except to their standards!

Thank you for contacting us! We have been so disillusioned with the outcome of their investigation as it was all one-sided in their favor in our opinion. My wife who is disabled still hasn't gotten over the loss of her sweet baby!!!”

Respondent #4 – “The doctor who handled the complaint was EXTREMELY rude and condescending to the point of making me cry. Nothing was done or handled. I felt unheard and felt like my complaint was not worth their time.”

Respondent #5 – “I have proof that my dog life was taken due to a mistake from the doctor she even told us out of her own mouth what they did wrong but the board still ruled in her favor and said she did nothing wrong. She said out of her own mouth that she tore her uterus removing the puppies but she she took the puppies from that wrong area and put her back together and let her bleed out. It all started from her sending us back home the day before when we went there for a csection cause our dog went in labor early. She tried to convince us to let a small frenchie go home and have puppies naturally and when we did that she couldn't even get the first puppy out so we rushed back up there. She even told us that she should have spayed her she told us all this before she knew our dog was going to die. Then when she told us how long recovery would be later they came back telling us she still sleeping give her more time and then a while later they came talking about her heart stopped. ”

Respondent #6 – “I felt that they thoroughly addressed the matter. I appreciated the call that I got to let me know of the resolution. They were prompt and professional and they thoroughly explained everything.”

Respondent #7 – “My complaint was not against the vet. It was against the coven of incompetent front office staff that think a patient has all day to wait on their inefficient overbooking.”

Respondent #8 – “I don't feel my complaint was investigated. The investigator took the word of the vet The complaint was against.”

Respondent #9 – “The depth of my disappointment in this board is unmeasurable. My case was delayed for over 3 quarters without the proper communication of what was going on internally. I was left feeling completely unjustified on multiple occasions just to receive a letter in the mail 1 year following the death of [REDACTED] stating that [REDACTED] was “held accountable” however the details were to be sealed away from public knowledge. I want to again reiterate how the death of my baby was preventable with proper intervention and this office did not act with urgency or compassion. The details of this case has touched many people across the state and the outcome of the investigation was a grave injustice. I sat in their office day after day, advocating something was wrong with [REDACTED] after surgery and no actions were taken until end of day Friday. Where Dr. [REDACTED] tells me there is nothing he can do at that point because his staff has gone home. Then proceeds to send me off to Tennessee for an emergency surgery without even preparing me with the state of her prognosis that he was fully aware of. I spent hours waiting in their clinic with a critical complaint that [REDACTED] was very bloated and in a lot of pain, I was ignored and not assessed until nearly closing. This was a complete violation of standard of care. It has felt like this board has gone out of their way for the protection of this well connected generational veterinarian and it has been disheartening to feel overlooked. This entire situation was horrendous and left me thousands in debt unnecessarily especially by pushing any intervention of her care into the weekend, when it all began Tuesday night. This office had staff members communicate with me my assessment of my animal based on my knowledge as a nurse was not applicable, which was wrong. They told me I was just overly concerned, and they had no sense of compassion. I am forever devastated and I will never forget.”

Respondent #10 – “The issue was the high price of canine prescriptions mandated and supplied by a veterinarian. When I compared prices with on-line identical products, the vet prices were often 100% or more higher. I requested the result be the pet owner have the option to purchase the prescription rather than using the vet. The board also used the wrong name of my dog. The complaint originally was sent to the Alabama AG. Though the excess price/gouging may not be illegal consumers should be protected.”

Respondent #11 – “I realize my comments will give my identity away, but I was concerned about a veterinarian administering rabies vaccines to pets that were too young to receive it. The board member handling my case did not seem concerned this was happening. I was told it was not the board's job to address this and my complaint was dismissed. As a former board member myself, I disagree. I still believe to this day that this veterinarian continues to practice outside the scope of the standard of care set forth in the Practice Act and the Administrative Code, but have no further recourse to stop it. Addressing the veterinarian directly myself did not work, which was what prompted me to file the complaint. ”

Respondent #12 – “The depth of my disappointment in this board is unmeasurable. My case was delayed for over 3 quarters without the proper communication of what was going on internally. I was left feeling completely unjustified on multiple occasions just to receive a letter in the mail 1 year following the death of [REDACTED] stating that [REDACTED] was “held accountable” however the details were to be sealed away from public knowledge. I want to again reiterate how the death of my baby was preventable with proper intervention and this office did not act with urgency or compassion. The details of this case has touched many people across the state and the outcome of the investigation was a grave injustice. I sat in their office day after day, advocating something was wrong with [REDACTED] after surgery and no actions were taken until end of day Friday. Where Dr. [REDACTED] tells me there is nothing he can do at that point because his staff has gone home. Then proceeds to send me off to Tennessee for an emergency surgery without even preparing me with the state of her prognosis that he was fully aware of. I spent hours waiting in their clinic with a critical complaint that [REDACTED] was very bloated and in a lot of pain, I was ignored and not assessed until nearly closing. This was a complete violation of standard of care. It has felt like this board has gone out of their way for the protection of this well connected generational veterinarian and it has been disheartening to feel overlooked. This entire situation was horrendous and left me thousands in debt unnecessarily especially by pushing any intervention of her care into the weekend, when it all began Tuesday night. This office had staff members communicate with me my assessment of my animal based on my knowledge as a nurse was not applicable, which was wrong. They told me I was just overly concerned, and they had no sense of compassion. I am forever devastated and I will never forget.”

Respondent #13 – “I felt I received a somewhat vague response to the Boards findings. Since my dog lost a leg due to incompetence, I felt I should have been more informed of the penalty. Wondering if my dog had a \$20.00 leg or a \$2,000.00 leg? Would appreciate any information you could forward.

[REDACTED] - email [REDACTED]”

Respondent #14 – “Submitted complaint [REDACTED], was [REDACTED] when it was addressed. Regarding the complaint: I was required to report to a board member my mental health status while I face rapid fire sequential complaints against my medical license based on a false narrative orchestrated, perpetuated and disseminated by the board members friends/associates. The board member was fully aware of the identities of all parties involved and yet volunteered to advise me and elicited communication from me regarding my mental anguish. Social posts made by the board members friends/associates at the time of the incidence made fun of my mental anguish publicly and disclosed content I disclosed only to that board member. The ASBMVE removed her from caring for others mental health, however, I was betrayed and violated and the board said there was “nothing more they could or would do” regarding the matter. This matter is ongoing as is my mental anguish, which was worsened by the handling of my complaint. It is my opinion nothing was/is resolved. The harassment from the board members friends/family has only exacerbated since I filed my complaint. To make it worse, her husband is now the legal council for her friends/associates in the civil matter and is counter suing me.”

Respondent #15 – “I complained about an unlicensed individual performing surgeries on animals owned by others in the area. They sent him a cease and desist. I don't think it stopped him since I've seen him continue to advertise since then, but I believe that's all they can really do.”

Respondent #16 – “I presented document/labs based evidence from an emergency vet to the man assigned to my case. The diagnosis of IMHA was made and referred to Dr [REDACTED] during [REDACTED] followup. I was told then and at subsequent appointments that he did NOT have IMHA by Dr [REDACTED]. This and the accusatory treatment I received from Dr [REDACTED] afterwards (saying I should've known he needed to be euthanized before he died)...and after I was sent home with him and RXs by her substitute vet), was unacceptable. They didn't triage him either, made me wait to be seen on his final day, and afterwards tried to shift the blame for his death on me. Yet her improper treatment after the IMHA results from the [REDACTED] ER, obviously led to his demise.

The investigatory vet seemed to have a bias towards Dr [REDACTED], which was evident in his questioning of me. And the final assessment was only that Dr [REDACTED] receive more education explaining treatment plans and diagnosis to patients. This is ridiculous considering she denied the initial diagnosis of IMHA from the ER vet!!! [REDACTED] was occasionally treated for allergies with steroids, so the investigator used that as [REDACTED] defense..as if well, he was getting a similar course of treatment as he would for IMHA. I trusted Dr [REDACTED] after many years of using her, so when she told me several times he didn't have this deadly blood disease.. I believed her. And the onus was shifted to me for not taking him to a hospital the final day, even though she had made a new diagnosis of seizures..not IMHA. When in fact the seizures were a symptom!! I even asked if he needed iron after she showed me labs that he was anemic again..she said no!

In my opinion, it was useless to go to the board. Because even with all my evidence, labs, and documents of her clearly contributing to his death, the board trivialized her part by concluding that she simply had to explain diagnosis and treatment better. I was never even offered a refund let alone compensation for my [REDACTED], [REDACTED]. Of course I'd rather he still be here, and have been treated humanely.. because he suffered with low platelets, anemia, seizures and organ failure due to her apathy and/or incompetence..and I had hoped the board would rule in my favor. So my experience added more pain to my loss of [REDACTED], whom I loved dearly. Thank you for your attention.

-Sincerely, [REDACTED]
[REDACTED]”

Respondent #17 – “Board failed to take reasonable action against Vet performing very questionable practices leading to my dogs death. Claim was submitted around September, results were not given until at least March. Letter with results sent to us used the incorrect dog's name, showing how little care they put into our claim. Extremely disappointed with our treatment. If you care at all about quality, look into how our case was handled. [REDACTED] [REDACTED] against Dr. [REDACTED].”

Respondent #18 – “Yes' [REDACTED] and [REDACTED] (Cat) [REDACTED] the board did no justice for [REDACTED]! nor the situation. I'm still going to seek an attorney. I also now blame every single board member for allowing continuation of this inexperienced vet putting other babies within the care of such a negligent young man. NO JUSTICE HAS BEEN SERVED FOR OUR BABY [REDACTED] The board failed to do what God put them in place to do. Your duty is to protect and seek justice for the innocent not the Quilty' [REDACTED] was a very special baby/cat. God is above the law and every single person that had their hands in the decision to do nothing, the board, the vet and his workers all know their wrong what happened that day [REDACTED] life was taken, I now depend on a much Higer power for justice and that's the almighty God. No law on earth can stop his justice/judgement towards all. [REDACTED]. You will never forget her!! Also, I forgive you all, have no anger/hate because I love people, but I serve a God that takes care of me and he's the one that's handling this situation for [REDACTED]. THE BOARD FAILED JUSTICE FOR [REDACTED]”

Respondent #19 – “I would have liked the vet to be understanding about the needs of everyone involved. I hope this will help him be more understanding.”

Respondent #20 – “Because of my position, I have contact with many, many LVT's. They confide in me and ask for advice in their work life. Because of this I am privy to MANY violations of the Alabama Practice act across the state. I encourage those LVT's to make their own complaints, however, if I know they won't and the offence is bad enough I will send in a complaint myself, or I will submit a complaint if I have first hand knowledge of a violation. So, I have sent in many complaints over the years. I was informed on multiple occasions that the Executive Director "Would not investigate any more of my complaints..." I was giving them too much work. I have only occasionally been notified of receipt of my complaint or the results of an investigation, IF any was done. My last complaint was in 2024 and I have heard nothing on it since placing the complaint.

I feel the process is antiquated (it should be able to be done online); there is no way to know if they received the complaint by mail (again, the process should have an automated system, where you can see where in the process your complaint is); there should be a way to appeal a decision if you actually get information back, if you feel justice was not served or resolution was not achieved; the board should take complaints very seriously, as the complainants have usually agonized over even making the complaint; and the inspections of clinics and questioning of personnel about SOP's should be a surprise inspection, with no notification prior to the inspection. In the inspections that are supposed to happen on a regular basis, those should be surprise inspections as well. No notification to get the place up to speed. Restaurants have those and have to be inspection-ready at all times. Why would a veterinary hospital (health care facility) have a lower standard for pet health care than a food establishment. Let's try to raise the bar for veterinary medicine in the state and hold these clinics to a higher standard! It is a bit embarrassing when meeting on a national level that I have to make excuses about the state of veterinary medicine in Alabama. "It's what we have to work with." That is shameful. I think currently, the board just puts out fires, they don't check the fire extinguishers or maintain the fire hydrants. All veterinary hospitals should be required to practice at the national level of "contemporary standard of care". That is not what is happening.

One aspect of the issue is that hospitals are not held to the standard of only utilizing credentialed veterinary technicians (LVT's) for their scope of practice. A lot of hospitals have on the job trained people who have zero formal education in the job. This creates very much lowered standards of care. They have no excuse. There are 3 veterinary technology programs in the state, and many more online options, so I feel the options should be: they can choose to put students through a program, or be fined for not having (at least) one in their hospitals. And let's face it, every DVM can use at least 2 LVT's, so our numbers should be at least twice the number of DVM's. Again, they really don't have an excuse any longer. If a OTJ trained person is good enough to induce and monitor anesthesia, then put them through school to stop breaking the law! I have been in this profession for 36+ years and it is ONLY a bit better now, but it is not where it should be. I feel the Good 'ol Boy system's time is finished and we should finally be raising the bar. The public loves their pets and they deserve to have properly educated and credentialed personnel taking care of them at all times. Sincerely, [REDACTED], LVT, [REDACTED], [REDACTED] - Veterinary Technology Program.”

Respondent #21 – “Dear Ms. [REDACTED],

Thank you for the opportunity to provide feedback regarding how my complaint was handled. I want to be candid, because I assume the purpose of this survey is to identify where the process is failing complainants.

One issue I feel compelled to raise is a serious error in the Board’s written response to me dated [REDACTED]. In the final paragraph, the letter states: “we extend our condolences for the loss of your sweet boy [REDACTED].” My complaint was about my dog, [REDACTED], who is still alive and well. [REDACTED] is not my dog.

That was not a minor typo to me. My complaint involved concerns about communication, follow-through, and record handling. Receiving a formal response that referred to someone else’s pet made the process feel careless, impersonal, and poorly reviewed. It undermined my confidence that my complaint was handled with the attention and accuracy it deserved.

I also want to mention my experience with the investigator or Board representative who called us to discuss the complaint. He came across as patronizing and dismissive from the beginning of the conversation. Rather than sounding neutral or genuinely interested in understanding the facts, his tone suggested that he had already made up his mind and viewed my complaint as petty or unwarranted. I had him on speakerphone, and my husband heard the conversation as well and had the same impression.

Frankly, that phone call was more upsetting than helpful. I came away feeling belittled, not heard. Instead of feeling that the Board was seriously evaluating the matter, I felt as though I was being talked down to and discouraged for having filed the complaint at all.

The process was also burdensome. I had to pay for a fax app on my phone in order to submit the complaint, which added unnecessary expense and frustration. Unfortunately, I then forgot to cancel the service and incurred additional charges. While I understand that may not be the Board’s direct responsibility, requiring a faxed complaint felt outdated and created an unnecessary barrier to filing.

Most discouraging of all, after taking the time to prepare and submit the complaint, participate in the process, and respond to follow-up, the outcome letter conveyed that no meaningful wrongdoing had been found. Combined with the dismissive phone interaction and the error referring to “[REDACTED],” the overall process left me with the impression that my concerns were minimized rather than seriously considered.

Because your office specifically requested feedback on how the complaint was handled, I wanted to be honest about that experience. I hope this helps highlight the need for greater professionalism, neutrality, accuracy, and care in future interactions with complainants.

Sincerely,

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

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APPENDICES

Appendix I: Applicable Statutes

Article 4 Veterinary Practice.

Section 34-29-60 Short title

This article shall be known as the Alabama Veterinary Practice Act.

(Acts 1986, No. 86-500, p. 956, §1.)

Section 34-29-61 Definitions

For the purposes of this article, the following terms shall have the following meanings ascribed by this section:

(1) ACCREDITED SCHOOL OF VETERINARY MEDICINE. Any veterinary college or division of a university or college that offers the degree of doctor of veterinary medicine or its equivalent and is accredited by the American Veterinary Medical Association (AVMA).

(2) ANIMAL. Any animal or mammal other than man, including birds, fish, reptiles, wild or domestic, living or dead.

(3) APPLICANT. A person who files an application to be licensed to practice veterinary medicine or licensed as a veterinary technician.

(4) BOARD. Alabama State Board of Veterinary Medical Examiners.

(5) CONSULTING VETERINARIAN. A veterinarian licensed in another state who gives advice or demonstrates techniques to a licensed Alabama veterinarian or group of licensed Alabama veterinarians. A consulting veterinarian shall not utilize this privilege to circumvent the law.

(6) DIRECT SUPERVISION. The supervising veterinarian has initially examined the animal and will examine at other times as acceptable veterinary medical practice requires, consistent with the particular delegated animal health care task. The supervising veterinarian is on the premises and is quickly and easily available.

(7) EMERGENCY. The animal has been placed in a life threatening condition and immediate treatment is necessary to sustain life.

(8) FOREIGN VETERINARY GRADUATE, EXCLUDING CANADA. Any person, including a foreign national or an American citizen, who has received a professional veterinarian medical degree from an American Veterinary Medical Association listed veterinary college that is not accredited by the American Veterinary Medical Association.

(9) IMMEDIATE SUPERVISION. The supervising veterinarian is on the premises and in audible or visual range of the animal patient and the person treating the patient.

(10) INDIRECT SUPERVISION. The supervising veterinarian has examined the animal and has given written or oral instructions for the treatment of the animal while the supervising veterinarian is away from the premises.

(11) LICENSE. Any permit, approval, registration, or certificate of qualification issued by the board.

(12) LICENSED VETERINARIAN. A person who is validly and currently licensed to practice veterinary medicine in Alabama.

(13) LICENSED VETERINARY TECHNICIAN. A person who is validly and currently licensed to practice as a veterinary technician in Alabama.

(14) PERSON. Any individual, firm, partnership, association, joint venture, cooperative, or corporation or any other group or combination acting in concert; and whether or not acting as a principal, trustee, fiduciary, receiver, or as any kind of legal or personal representative, or as the successor in interest, assigning agent, factor, servant, employee, director, officer, or any other representative of such person.

(15) PRACTICE OF VETERINARY MEDICINE:

- a. To diagnose, treat, correct, change, relieve, or prevent animal disease, deformity, defect, injury, or other physical or mental condition; including the prescription or administration of any drug, medicine, biologic, apparatus, application, anesthesia, or other therapeutic or diagnostic substance or technique on any animal including but not limited to acupuncture, dentistry, animal psychology, animal chiropractic, theriogenology, surgery, including cosmetic surgery, any manual, mechanical, biological, or chemical procedure for testing for pregnancy or for correcting sterility or infertility, or to render service or recommendations with regard to any of the above.
- b. To represent directly or indirectly, publicly or privately, an ability and willingness to do any act described in paragraph a.
- c. To use any title, words, abbreviations, or letters in a manner or under circumstances which induce the belief that the person using them is qualified to do any act described in paragraph a. Such use shall be prima facie evidence of the intention to represent oneself as engaged in the practice of veterinary medicine.
- d. Collects blood or other samples for the purpose of diagnosing disease or other conditions. This paragraph shall not apply to unlicensed personnel employed by the United States Department of Agriculture or the Alabama Department of Agriculture who are engaged in the Brucellosis eradication program or external parasite control program pursuant to Section 2-15-192.
- e. To remove any embryo from a food animal or companion animal for the purpose of transplanting the embryo into another female animal or for the purpose of cryopreserving the embryo, or to implant the embryo into a food or companion animal. It shall not be considered the practice of veterinary medicine for a person or his or her full-time employees to remove an embryo from the food or companion animal of the person for the purpose of transplanting or cryopreserving the embryo, or to implant an embryo into the food or companion animal of the person, provided ownership of the food or companion animal shall not be transferred or employment of the person shall not be changed for the purpose of circumventing this article.
- f. To provide veterinary medical services to a client or patient in this state, through telephonic, electronic, or other means, regardless of the location of the veterinarian, shall constitute the practice of veterinary medicine in this state and shall require licensure within this state and a veterinarian-client-patient relationship must be established.

(16) SUPERVISING VETERINARIAN. A veterinarian who assumes responsibility for the professional care given to an animal by a person working under his or her direction.

(17) TEMPORARY LICENSE. Temporary permission to practice veterinary medicine issued by the board pursuant to this article.

(18) UNLICENSED ASSISTANT. Any individual who is not a licensed veterinary technician or veterinarian and is employed by a licensed veterinarian.

(19) VETERINARIAN-CLIENT-PATIENT RELATIONSHIP (VCPR). A relationship when the veterinarian has assumed responsibility for making medical judgments regarding the health of the animal or animals and the need for medical treatment and is created by actual examination by the veterinarian of the animal or a representative segment of a consignment or herd.

(20) VETERINARIAN, DOCTOR OF VETERINARY MEDICINE, DVM, VMD, or EQUIVALENT TITLE. A person who has received a doctor's degree in veterinary medicine from an accredited school of veterinary medicine or holds an Educational Commission for Foreign Veterinary Graduates (ECFVG) certificate issued by the American Veterinary Medical Association (AVMA).

(21) VETERINARY FACILITIES. Any place or unit from which the practice of veterinary medicine is conducted. The following are types of veterinary facilities:

a. Veterinary or Animal Hospital or Clinic. Meets or exceeds all mandatory requirements as listed in the administrative code of the board for veterinary facilities. In doing so, it provides quality examination, diagnostic, and health maintenance services for medical and surgical treatment of animals and is equipped to provide housing and nursing care for the animals during illness or convalescence.

b. Specialty Practice or Clinic. Provides complete specialty service by a veterinarian who has advanced training in that specialty and is a diplomat of an approved specialty college. It meets all minimum standards that are applicable to that specialty.

c. Central Hospital. Shall meet all requirements of paragraph a., as well as provide specialized care including 24-hour nursing care and specialty consultation on a permanent or on-call basis. It is mainly utilized on referral from area veterinary hospitals or clinics.

d. Satellite, Outpatient, or Mobile Small Animal Clinics. A supportive facility owned by or associated with, or both, and has ready access to, within a reasonable distance, a full-service veterinary hospital or clinic or a central hospital providing all mandatory services and meeting all minimum standards. The public shall be informed of the limitation of services by way of a posted notice in plain view and easily readable or by notice provided to the client by flyer or card which clearly specifies those mandatory veterinary medical services which are not provided. In addition, the main location and telephone number of the veterinary hospital or clinic providing the required service, as well as the signed agreement with the veterinary hospital or clinic shall also be posted in plain view and be easily readable. A veterinarian associated with this veterinary hospital or clinic shall be on call during and after operation of the satellite, outpatient, or mobile clinic to render aid if necessary. The personnel of satellite, outpatient, or mobile clinics shall consist of one or more veterinarians and auxiliary personnel necessary to provide adequate outpatient service. Operation of any satellite, outpatient, or mobile clinic shall be under the direct supervision of a licensed veterinarian who remains on the premises during the entire time of operation.

e. Large Animal Mobile Clinic. Must provide examination, diagnostic, and preventive medicine, and minor surgical services for large animals not requiring confinement or hospitalization. Emergency service and radiology service shall be provided by that veterinarian or by written agreement with another veterinarian or group of veterinarians in practice in that locale. These clinics shall provide a degree of veterinary care compatible with the level of standards considered adequate to the practice of veterinary medicine currently available in the area. Complete hospital facilities may be provided by the nearest large animal hospital or veterinary school.

f. Emergency Clinic. A facility established to receive patients and to treat illnesses and injuries of an emergency nature requiring treatment. The clinic shall provide professional diagnostic and emergency treatment during hours when local veterinary hospitals are normally closed. Emergency clinics shall meet all mandatory requirements of a veterinary hospital or clinic.

(22) VETERINARY INTERN. A person who is working towards completion of an ECFVG certificate and who is working under the direct or indirect supervision of a board approved licensed veterinarian in any state to complete the practical experience internship required for licensing in Alabama.

(23) VETERINARY MEDICINE. Includes veterinary surgery, theriogenology, dentistry, acupuncture, animal psychology, chiropractic, and all other branches or specialties of veterinary practice.

(24) VETERINARY STUDENT PRECEPTEE. A person who is pursuing a veterinary degree in an accredited school of veterinary medicine which has a preceptor or extern program and who has completed the academic requirements of the program.

(25) VETERINARY TECHNICIAN STUDENT. Any person enrolled in an AVMA accredited veterinary technology program; gaining clinical experience under the supervision of a licensed veterinarian or licensed veterinary technician in a clinical setting.

(26) VETERINARY TECHNOLOGY. The skills and knowledge accrued in a post-high school course of study, accredited by the AVMA Committee on Education (COE) or the board, in the area of care and treatment of animals. It embodies limited skills, responsibility, and minimal exercise of independent judgment in the treatment of patients of veterinarians while under direct, indirect, or immediate supervision of a veterinarian.

(27) WHOLESALE VETERINARY DRUG DISTRIBUTOR. A person engaged in the business of distributing veterinary drugs and medicines for resale to veterinary practitioners and other veterinary wholesalers and possesses a current permit issued by the Alabama Board of Pharmacy to engage in the selling of veterinary drugs or medicines in the State of Alabama.

(Acts 1986, No. 86-500, p. 956, §2; Acts 1987, No. 87-794, p. 1557, §2; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1; Act 2010-536, p. 905, §1.)

Section 34-29-62 Legislative intent

In order to promote the public health, safety, and welfare by safeguarding the people of the State of Alabama against unqualified or incompetent practice of veterinary medicine, it is hereby declared that the right to practice veterinary medicine is a privilege conferred by legislative grant to persons possessed of the personal and professional qualifications specified in this article. It is the legislative intent that veterinarians who are not normally competent or who otherwise present a danger to the public shall be disciplined or prohibited from practicing in the State of Alabama.

(Acts 1986, No. 86-500, p. 956, §3.)

Section 34-29-63 State Board of Veterinary Medical Examiners established; composition

(a) There is established a state board to consist of eight members to be known as the Alabama State Board of Veterinary Medical Examiners.

(b) Each of the eight members of the board shall be appointed by the Governor from a list of three persons nominated and submitted to him or her by the Alabama Veterinary Medical Association at least 30 days prior to appointment.

(c) The term of each member of the board shall be four years unless removed or until a successor is appointed and qualified. Vacancies shall be filled by appointment by the Governor as provided in subsection (b).

(d) No person may serve as a member of the board for more than 13 years total.

(e) Members may not serve more than two consecutive terms of office.

(f) The membership of the board shall be inclusive and reflect the racial, gender, geographic, urban/rural, and economic diversity of the state.

(g) Each member of the board shall be a citizen of this state.

(Acts 1986, No. 86-500, p. 956, §4; Acts 1987, No. 87-794, p. 1557, §3; Acts 1989, No. 89-236, p. 310, §3; Acts 1997, No. 97-249, p. 431, §1; Act 2001-249, p. 299, §3; Act 2009-29, p. 93, §3.)

Section 34-29-64 Qualifications of members; removal

(a)(1) Six members of the board shall be graduates of an accredited school of veterinary medicine; legal residents of Alabama; currently and validly licensed to practice veterinary medicine in Alabama; actively employed and licensed in the practice of veterinary medicine in the State of Alabama for the five years immediately prior to appointment; and continuing at least 35 hours per week in the practice of veterinary medicine while serving on the board.

(2) One member of the board shall be a licensed veterinary technician.

(3) One member of the board shall be a consumer.

(b) No person who has been appointed to the board shall continue membership on the board if, during the term of his or her appointment, he or she shall have done any of the following:

(1) Transfer his or her legal residence to another state.

(2) Own or be employed by any wholesale or jobbing house dealing in supplies, equipment, or instruments used or useful in the practice of veterinary medicine.

(3) Have his or her license to practice veterinary medicine as a veterinarian or as a licensed veterinary technician rescinded.

(4) Miss three consecutive meetings of the board.

(5) Be guilty of misconduct or gross inefficiency.

(c) The board shall establish procedures for the removal of members who violate one or more of the provisions of subsection (b).

(Acts 1986, No. 86-500, p. 956, §5; Acts 1987, No. 87-794, p. 1557, §4; Acts 1997, No. 97-249, p. 431, §1; Act 2001-249, p. 299, §3.)

Section 34-29-65 Executive director; incapacitation of director; official bond

(a) The board may employ an executive director, prescribe the duties, and set the salary of the executive director.

(b) In the event the director should become incapacitated or unable to perform the duties of the position, the board may employ a person or persons to assume the duties of the director for as long as the board deems necessary.

(c) The director shall make and file with the Secretary of State an official bond in an amount to be fixed by the board. Premiums of the bond shall be paid out of funds of the board. The bond shall be payable to the State of Alabama and shall be written by an approved bonding company licensed to do business in the State of Alabama.

(Acts 1986, No. 86-500, p. 956, §6; Acts 1987, No. 87-794, p. 1557, §6; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-66 President and vice-president; bylaws; meetings; quorum; records

(a) The board shall elect from its members a president and vice-president, each of whom shall serve a term of one year.

(b) The board shall do all of the following:

(1) Adopt rules and regulations to be compiled as an administrative code.

(2) Name a definite time and place for meetings.

(3) Have at least two business meetings each year called by the president, which shall be in addition to meetings for the conduct of examinations.

(4) Give notice in writing at least 10 days prior to the date on which the two annual business meetings are held to Alabama licensed veterinarians.

- (5) Have a majority of sitting members of the board as a quorum.
- (6) Hold meetings and administrative hearings open to the public except where closed to prepare, approve, administer, or grade examinations or to deliberate the qualifications of an applicant for licensing or the disposition of a proceeding to discipline a licensed veterinarian or any other person licensed under this article.
- (7) Hold special meetings called by the president or vice-president of the board and meet anywhere in Alabama.
- (8) Keep complete and accurate records of all meetings and these records, except the records of closed meetings as provided in subdivision (6), shall be open to the public.
(Acts 1986, No. 86-500, p. 956, §7; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-67 Compensation and expenses; expenditure of funds

- (a) The members of the board shall receive four hundred dollars (\$400) for each day, or portion thereof, the member is actually engaged in the work of the board, and in addition, the usual per diem expenses allowed to other persons acting in the service of the State of Alabama or any of its agencies, institutions, boards, bureaus, or commissions.
- (b) The legal expenses of the board for administration of this article shall be paid from funds in the State Treasury to the credit of the board and shall be paid only on warrant of the State Treasurer and approved by the Governor. No funds shall be withdrawn or expended except as budgeted and allotted pursuant to Title 41, Chapter 4, Article 4, and only in amounts as stipulated in the general appropriations act.
(Acts 1986, No. 86-500, p. 956, §8; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1; Act 2023-467, §1.)

Section 34-29-68 Records to be kept; issuances and denials of licenses; what records are confidential

The board shall keep records of its proceedings in a book provided for that purpose, especially with relation to the issuance, denial, renewal, suspension, and revocation of licenses to practice veterinary medicine. All licenses issued by the board shall be numbered and recorded by the executive director in a file for that purpose. Where a license is denied by the board to any applicant under this article, the facts and grounds of denial shall be entered in the minutes of the board. The issuance or denial of a license shall be noted along with the names of those board members present and the file shall be maintained by the board. Information received by the board through applications, complaints, inspections, and investigations shall be confidential and shall not be disclosed, except in a proceeding involving the question of the issuance of a license or disciplinary proceedings against a licensee or if authorized by law, a non-licensee. The board shall also be responsible for keeping a list of its members and their current status of license, whether revoked, inactive, suspended, etc.
(Acts 1986, No. 86-500, p. 956, §9; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-69 Powers of board

The board shall be a body corporate and shall have the power to do all of the following:

- (1) Examine and determine the qualifications and fitness of applicants for a license to practice veterinary medicine in the state.
- (2) Issue, renew, deny, suspend, and revoke licenses, issue private reprimands and private informed admonitions to practitioners who practice veterinary medicine in this state, or otherwise discipline or censure veterinary professionals, irrespective of their licensure status, whether active, inactive, expired, lapsed, surrendered, or disciplined, relative to acts, omissions, complaints, and investigations which occurred during the licensure period consistent with this article.

(3) Conduct investigations for the purpose of discovering violations of this article or grounds for disciplining licensed veterinary professionals or other non-licensed individuals pursuant to the administrative code of the board and appoint individuals and committees to assist in the investigations. Jurisdiction of the board shall extend to non-licensed individuals engaging in the unauthorized practice of veterinary medicine. It is the intent of this section that licensees may not divest the board of jurisdiction by changing or relinquishing licensure status. The board shall have the power to subpoena records.

(4) Have a common seal and act as a corporate body with the right to sue and be sued, hold hearings, subpoena witnesses, compel the production of any books, records, papers, or documents, and take testimony bearing on the records of applicants for licensing to practice veterinary medicine and surgery in Alabama and on the records of practitioners who may be under consideration by the board for charges of misconduct.

(5) Employ full-time or part-time personnel, including an executive director as previously provided, professional, clerical, or special personnel as necessary to effectuate this article and to purchase or rent necessary office space, equipment, and supplies.

(6) Appoint from its own membership one or more members to act as representatives of the board at any meeting in or out of the state when representation is deemed desirable. The delegate or delegates from the board shall attend the annual meeting of the American Association of Veterinary State Boards and his or her expenses shall be paid by the board. The board may authorize the attendance of the executive director, legal counsel, or other staff members of the board at any meeting described in this subdivision.

(7) Adopt, amend, or repeal all rules necessary for its governance and all regulations necessary to carry into effect the provisions of this article in accordance with the Administrative Procedure Act, including, but not limited to, the establishment and publication of rules of professional conduct for the practice of veterinary medicine. These regulations shall be known as the Alabama State Board of Veterinary Medical Examiners Administrative Code. They shall be published and distributed to all licensed Alabama veterinarians and to all applicants for licensing. Any proposed changes to the administrative code shall be published in the official newsletter of the Alabama Veterinary Medical Association and mailed to all Alabama licensed veterinarians. A period of 10 days shall be allowed to post publication or notification so that any Alabama licensed veterinarian opposing the changes has time to request a hearing as hereafter provided.

(8) To fix minimum standards for continuing veterinary medical education which standards shall be a condition precedent to the renewal of a license under this article.

(9) To inspect any hospitals, clinics, satellites, outpatient clinics, mobile clinics, or other places utilized for the practice of veterinary medicine. An inspection shall be made by the board's authorized representative(s). The inspection shall be for the purpose of reporting such inspection to the board on a form prescribed by the board or for seeking disciplinary action in cases of violation of this article or violation of other health and sanitation regulations duly established and published by the board or other duly constituted state authorities having jurisdiction in such matters.

Notwithstanding any other provision of law, if certain equipment or services required by rule or regulation of the board to be available at a premises are not available at a premises, a written and signed agreement may be provided to the board demonstrating that the arrangements have been made to provide the equipment or services at a location that is within a reasonable distance from the premises.

(10) To provide special registration for veterinarian technicians, and if desired, veterinary interns, and veterinary student preceptees and to adopt regulations concerning the training, legislation, and service limits of those assistants while employed by and acting under the supervision and responsibilities of licensed veterinarians. The board shall have exclusive jurisdiction in determining eligibility and qualification requirements and in granting or refusing to grant or to suspend or revoke registration. Any suspension or revocation of a special registration issued under this section shall be conducted pursuant to the Code of Alabama 1975.

(11) Establish and publish annually a schedule of fees for the licensing or registration, or both, and for renewal of a license or registration for veterinarians and veterinary technicians pursuant to this article.

(12) Authorize any member of the board to sign complaints for the bringing of proceedings in courts for the enforcement of this article.

(13) To act as a corporate board or as an individual member of the board to prosecute in court on an action quo warranto, injunction, or any other proper suit to oust from practice unlawful practitioners and to assist the Attorney General or any other prosecutor for criminal violations of this article.

(14) For disciplinary purposes, to adopt, levy, and collect administrative fines for noncompliance by its licensees and other individuals engaging in the unauthorized practice of veterinary medicine of this chapter, or the administrative code of the board, of not less than two hundred fifty dollars (\$250), nor more than one thousand dollars (\$1,000) per violation, and to institute any legal proceedings necessary to effect compliance with this chapter.

(15) To promulgate and implement administrative rules and regulations in accordance with the State Administrative Procedure Act to provide for an inactive license status, an inactive license fee, and a reactivation process and reactivation fee.

(Acts 1986, No. 86-500, p. 956, §10; Acts 1989, No. 89-236, p. 310, §3; Acts 1993, No. 93-155, p. 250, §3; Acts 1997, No. 97-168, p. 243, §3; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1.)

Section 34-29-70 Board of Veterinary Medical Examiners Fund; expenditures; transfer of excess

All revenues received by the board shall be accepted by the executive director and deposited with the Treasurer of the state to be credited to an account to be known as the Board of Veterinary Medical Examiners Fund. All expenses of the board shall be paid from the fund by vouchers signed by the executive director of the board and no part of the state's General Fund shall be expended for this purpose. Funds shall be a continuing account and shall not be subject to diversion to the State General Fund except to the extent that the balance in the fund at the close of any fiscal year exceeds the budget of the board by 200 percent, in which case the excess shall be transferred to and become a part of the State General Fund.

(Acts 1986, No. 86-500, p. 956, §11; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-71 Temporary license

(a) The board may issue a temporary license to practice veterinary medicine to an unlicensed applicant providing the applicant meets all conditions and requirements of this article relating to qualifications of applicants for license to practice veterinary medicine. Any person applying for a temporary license shall associate himself or herself with a licensed doctor of veterinary medicine. His or her license shall be limited to the work of a licensed doctor of veterinary medicine and he or she shall not participate without direct supervision in the practice of or operation of a branch office, clinic, or allied establishment. An applicant may work under the indirect supervision in the primary clinic of his or her employer. The license, when granted, shall bear the name and address of the licensed doctor of veterinary medicine. There shall be a fee which shall not be refundable for the temporary license.

(b) Renewal of temporary licenses may be granted by the board. No temporary license shall be issued to an applicant who has not passed either the AVMA approved National Veterinary Licensing Exam or the National Board Examination for Veterinarians, and the Clinical Competency Test for Veterinarians, or has failed any portion of the Alabama state board examination.

(c) All temporary licenses shall expire 90 days from date of issue or on the day the applicant receives or is denied a license from the board, whichever date is earliest.

(d) Acceptance of a temporary license by an applicant shall be deemed to be consent for expiration of that license in accordance with this article.

(e) If employment ceases at the place of employment noted on the temporary license, then the board shall be notified or if there is more than one employer of that temporary license holder, the board shall be notified by the employer.

(Acts 1986, No. 86-500, p. 956, §12; Acts 1987, No. 87-794, p. 1557, §5; Acts 1989, No. 89-236, p. 310, §3; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1.)

Section 34-29-72 Application; qualifications; faculty license

(a) Any person desiring a license to practice veterinary medicine in this state shall make written application in the English language to the board. The application shall show that the applicant is at least 21 years old, is a graduate of an accredited veterinary school, is a citizen of the United States or, if not a citizen of the United States, is legally present in the United States with appropriate documentation from the federal government, and any other information and proof as the board may require pursuant to the administrative code of the board. The application shall be accompanied by application and examination fees in the amounts established and published by the board.

(b) Graduates of veterinary medical programs not accredited by the AVMA shall furnish satisfactory proof of an Educational Commission for Foreign Veterinarian Graduates (ECFVG) certificate or its equivalent provided by the American Veterinary Medical Association (AVMA), proof of completion of an internship as provided in Section 34-29-91, and of having, within three years of application to the State of Alabama, passed the AVMA approved National Veterinary Licensing Exam and proof of comprehension of and an ability to communicate in the English language.

(c) Any applicant satisfactorily completing the AVMA approved National Veterinary Licensing Exam in another state need not repeat the examination for licensure in Alabama, however, the board retains jurisdiction to require the applicant repeat any portion of the AVMA approved National Veterinary Licensing Exam or practice specific examinations necessary to determine practice competency.

(d) If the board determines that the applicant possesses the proper qualifications, it shall admit the applicant to the next AVMA approved National Veterinary Licensing Examination or state board examination; or if the applicant is eligible for a license without examination under this article, the board may grant him or her a license.

(e) Licenses issued under this subsection shall not require graduation from an AVMA accredited college or school of veterinary medicine, shall not require that the licensee have passed either the NBE and CCT or the NAVLE, shall not require the licensee to hold an ECFVG certificate, and shall not require that a licensee be previously licensed in this state or in the United States. All practice of veterinary medicine in Alabama requires a license. All members of the faculty at a college or school of veterinary medicine shall have a license if they practice on client-owned animals in direct association with their employment at the college or school. Notwithstanding any provision of law to the contrary, the board may issue a veterinary faculty license to any applicant who is a member of the faculty or staff at any college or school of veterinary medicine in this state and is involved in the instruction program of veterinary medicine students. Holders of a veterinary faculty license are permitted to practice veterinary medicine within their specialty or subspecialty, only as it relates to his or her regular function within the college or school. Such individuals shall be remunerated for the practice aspects of their employment solely from state, federal, or institutional funds.

(1) Applicants for a veterinary faculty license shall perform all of the following:

- a. Complete the application form provided by the board, along with submitting a recent photograph and applicable fees.
- b. Provide proof of graduation from a reputable college or school of veterinary medicine.
- c. Provide proof of an appointment to the faculty of an Alabama school or college of veterinary medicine teaching veterinary students. This proof shall be provided by an authorized administrative official of the college or school.
- d. Certify that he or she understands and agrees that the veterinary faculty license is valid only for the practice of veterinary medicine as a faculty member of the college or school where employed.
- e. Demonstrate competency in the English language.
- f. Take and pass the state board examination on the Alabama practice act.
- g. Provide proof that he or she is a citizen of the United States or, if not a citizen of the United States, a person who is legally present in the United States with appropriate documentation from the federal government.

(2) The license issued pursuant to this subsection shall always be prominently displayed.

(3) The license issued pursuant to this subsection restricts the holder to practice that is confined to clinical and hospital units or field services units, or both, of the college or school of veterinary medicine where employed.

(4) The license issued pursuant to this subsection may be disciplined, suspended, or revoked in accordance with this article.

(5) The license issued pursuant to this subsection shall be cancelled by the board upon receipt of information that the holder of the license has left or has otherwise been discontinued from faculty employment at a college or school of veterinary medicine in Alabama.

(6) The board recognizes that flexibility is needed in licensing eminent scholars from around the world. The primary purpose of the veterinary faculty license is to allow deans of Alabama's colleges and schools of veterinary medicine a standardized procedure through which to bring talents to our faculties and to license them, keeping them subject to this article.

(Acts 1986, No. 86-500, p. 956, §13; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1; Act 2009-29, p. 93, §3.)

Section 34-29-73 Examination procedures

(a) The board shall hold at least two examinations and may hold additional examinations as it deems necessary. The executive director or his or her designee shall give appropriate public notice of the time and place of the examination at least 120 days in advance of the date set forth for the examination. Any person desiring to take the examination shall make license application at least 60 days before the examination and pay the required application and examination fees.

(b) The preparation, administration, and grading of examinations shall be governed by the administrative code as prescribed by the board. Examinations shall be designed to test the examinee's knowledge of and proficiency in subjects and techniques commonly taught in veterinary school. To pass the examination, the examinee shall demonstrate scientific and practical knowledge sufficient to prove himself or herself a competent person to practice veterinary medicine in the judgment of the board. All examinees shall be tested by written examinations supplemented by oral interviews and practical demonstrations as the board may deem necessary. The board may adopt and use the examinations and passing criteria prepared by professional examination services approved by the American Veterinary Medical Association, in addition to a state written examination.

(c) A passing score on the AVMA approved National Licensing Examination or examinations shall be determined by the professional examination provider based on a national criteria which reflects a passing score of at least 70 percent.

(d) A passing score on the state examination shall be deemed to be the correct answering of at least 70 percent of the questions contained on the state written examination and on the state practical and oral examinations. The scores may not be combined.

(e) Within 60 days after each examination, the executive director or his or her designee shall notify each examinee of the results of his or her examination and the board shall issue licenses to the persons successfully completing the examination provided all requirements for licensing have been met. The executive director or his or her designee shall record the new licenses and issue a certificate of qualification to the new licensees. Any person failing an examination shall be eligible to take any subsequent examination upon payment of the application and examination fees. Any person failing an examination may retake that examination for a maximum of three times. The examination shall be given in English.

(Acts 1986, No. 86-500, p. 956, §14; Acts 1987, No. 87-794, p. 1557, §7; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1.)

Section 34-29-74 Issuance of license without written examination to certain applicants

The board may issue a license without a written examination to a qualified applicant who furnishes satisfactory proof that he or she is a graduate of an accredited veterinary school and who has been for the five years immediately prior to filing his or her application a practicing veterinarian licensed in a state, territory, or district of the United States having license requirements at the time the applicant was first licensed which were substantially equivalent to the requirements of this article.

The board may orally or practically examine any person qualifying for licensing under this section.

(Acts 1986, No. 86-500, p. 956, §15; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-75 Expiration and renewal of licenses; suspension for nonrenewal

All licenses shall expire annually on December 31 of each year but may be renewed by application to the board showing fulfillment of continuing education requirements and payment of a renewal fee established and published by the board. The continuation of practice after the expiration of a license shall be in violation of this article and be cause for suspension of the license. The executive director shall send a reminder of expiration 30 days prior to expiration by first class mail and issue a new display license to all persons registering under this article. Failure to renew a license on or before January 1 of each year shall prompt the executive director to send a final notice of expiration by certified mail, return receipt requested, to the last address of the veterinarian known to the board and a late penalty shall be assessed and the license shall be suspended for non-renewal. A person may renew a license suspended for non-renewal at any time within two years, upon application, payment of the prescribed renewal fee and a late penalty fee per year for late renewals, provided the applicant is otherwise eligible for renewal. The board may renew a license without fulfillment of the continuing education requirement to any nonpracticing veterinarian over 70 years old or grant extensions or exemptions of continuing education requirements for veterinarians with extenuating medical or other circumstances.

(Acts 1986, No. 86-500, p. 956, §16; Acts 1987, No. 87-794, p. 1557, §8; Acts 1989, No. 89-236, p. 310, §3; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1.)

Section 34-29-76 License required - Certain acts prohibited

No person shall practice veterinary medicine or veterinary technology unless the person holds an active license to practice veterinary medicine or veterinary technology in the State of Alabama and in addition:

- (1) No person shall use the name or title of licensed veterinarian when the person has not been licensed pursuant to this article.
- (2) No person shall use the name or title of a licensed veterinary technician when the person has not been licensed pursuant to this article.
- (3) No person shall present as his or her own the license of another.
- (4) No person shall give false or forged information to the board or a member thereof for the purpose of obtaining a license.
- (5) No person shall use or attempt to use a veterinarian's license which has been suspended or revoked.
- (6) No person shall knowingly employ unlicensed persons in the practice of veterinary medicine.
- (7) No person shall knowingly conceal information relative to violations of this article.
- (8) No person shall falsely represent himself or herself as being in a supervisory status without providing such supervision.
- (9) No person shall provide veterinary medical services to a client or patient in this state through telephonic, electronic, or other means, regardless of the location of the veterinarian, without a license to practice in this state and without establishing a veterinarian-client-patient relationship.
- (10) No person convicted of fraud, deceit, gross negligence, incompetency, violation of the administrative code of the board, or any other misconduct in the practice of veterinary medicine shall be allowed to retain his or her license to practice veterinary medicine and surgery in Alabama.
- (11) No person convicted of or pleading nolo contendere to a felony or a crime involving moral turpitude shall be allowed to retain his or her license to practice veterinary medicine and surgery in Alabama.

(Acts 1986, No. 86-500, p. 956, §17; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1; Act 2010-536, p. 905, §1.)

Section 34-29-77 License required - Certain acts not prohibited

No person shall practice veterinary medicine or veterinary technology in the State of Alabama who is not a currently and validly licensed veterinarian or licensed veterinary technician or the holder of a temporary permit issued by the board. This article shall not be construed to prohibit any of the following:

(1) A student in a school or college of veterinary medicine from the performance of duties assigned by his or her instructor or from working as a veterinary student preceptee under direct or indirect supervision of a licensed veterinarian.

(2) A student in a school or college of veterinary technology accredited by the AVMA from the performance of duties assigned by his or her instructor or from working as a veterinary technician student under direct or indirect supervision of a licensed veterinarian or licensed veterinary technician.

(3) Any doctor of veterinary medicine in the employ of a state or federal agency while actually engaged in the performance of his or her official duties; however, this exemption shall not apply to a person when he or she is not engaged in carrying out his or her official duties or is not working at or for the installations for which his or her services were engaged.

(4) Any person or his or her regular employee, administering to the ills or injuries of his or her own animals, including but not limited to, castration and dehorning of cattle unless title is transferred or employment changed for the purpose of circumventing this article.

(5) State agencies, accredited schools, institutions, foundations, business corporations or associations, physicians licensed to practice medicine and surgery in all its branches, graduate doctors of veterinary medicine, or persons under direct supervision thereof, which or who conduct experiments and scientific research on animals in the development of pharmaceuticals, biologicals, serums, or methods of treatment or techniques for diagnosis or treatment of human ailments or when engaged in the study and development of methods and techniques directly or indirectly applicable to the problems of the practice of veterinary medicine.

(6) Qualified practitioners of veterinary medicine and surgery from without the State of Alabama consulting with licensed veterinarians in Alabama. No veterinarian of any other state shall actively and actually practice veterinary medicine in Alabama unless and until he or she shall obtain a license to practice veterinary medicine from the Alabama State Board of Veterinary Medical Examiners and shall comply with the other requirements contained in this article.

(7) A member of the faculty of a veterinary school performing his or her regular functions or a person giving board approved lectures, instructions, or demonstrations in connection with continuing education courses or seminars to licensed veterinarians, licensed veterinary technicians, veterinary students, or veterinary technician students.

(8) Persons from gratuitously giving aid, assistance, or relief in emergency cases if they do not represent themselves to be veterinarians or use any title or degree appertaining to the practice thereof.

(9) Fishery biologists actively employed by the State of Alabama, the United States government, or any person in the production or management of commercial food or game fish while in the performance of their official duties.

(10) A person from being or practicing as a "veterinary intern", as that term is defined in subdivision (22) of Section 34-29-61.

(Acts 1986, No. 86-500, p. 956, §18; Acts 1989, No. 89-236, p. 310, §3; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1; Act 2010-536, p. 905, §1.)

Section 34-29-78 Injunction against unauthorized practice of veterinary medicine

The board or any citizen of this state may bring action in the Circuit Court of Montgomery County to enjoin any person from practicing veterinary medicine without a currently valid license or temporary permit. If the court finds that the person is violating or is threatening to violate this article, it shall enter an injunction restraining him or her from such unlawful acts. The successful maintenance of an action based on any one of the remedies set forth in this section shall in no way prejudice the prosecution of an action based on any other of the remedies.

(Acts 1986, No. 86-500, p. 956, §19; Acts 1997, 97-249, §1.)

Section 34-29-79 Administrative hearing procedures

(a) When the board, by its official actions, acts or proposes to act in a manner which will affect the rights, duties, or privileges of the issuance of a license to an applicant or the license of a veterinarian, veterinary technician, or other individual, those persons shall have a right to an administrative hearing. When the board proposes to act in such manner, it shall give to the person or persons notice of their right to a hearing by certified mail to the person at his or her last known address, a notice of the proposed action, notice of a right to a hearing, and the time and place for a hearing, as provided in subsection (b). If the person or persons fail to appear at the time set for the hearing, the hearing may be conducted in absentia.

(b) A hearing shall be held no sooner than 20 days after written notice to the licensed veterinarian, veterinary technician, or other individual of the administrative charges against him or her, or to the applicant in the case of a person whose application for license is denied. The applicant, licensed veterinarian, veterinary technician, or other individual shall have the right to be heard in person and by counsel, the right to have subpoenaed the attendance of witnesses and records in the behalf of, and the right to cross-examine witnesses appearing against him or her. Strict rules of evidence shall not apply. The board may provide a stenographer or other stenographic means to take down the testimony and shall preserve a record of the proceedings. If a transcript of the record is prepared and is, by definition, a matter of public record, it may be purchased by any person interested in such hearing on payment to the board of the cost of preparing the transcript.

(c) The board shall notify the applicant, licensed veterinarian, veterinary technician, or other individual of its decision in writing within a reasonable time after the conclusion of the hearing. The executive director or his or her designee, in all cases of suspension, revocation, or other discipline, shall enter the fact in the minutes of the board. Any person whose license is suspended or revoked shall be deemed an unlicensed person for purposes of this article and the probate court of that county or counties where the license should be filed shall be notified, the license pulled, and the fact published in the newsletter of the board. The board shall also cause a notice of revocation or suspension to be published in a newspaper of general circulation in each county of the State of Alabama in which the disciplined veterinarian maintains an office for the practice of veterinary medicine or veterinary technician is employed or the individual resides.

(d) When a member of the board is unable to continue the hearing either by disqualification or for any other reason, and the board is unable to obtain a quorum, the Governor shall appoint as many special members as is necessary to obtain a quorum from a list of three persons submitted for each place by the Alabama Veterinary Medical Association. These special members serve on the board only for that hearing for which they were appointed and the special members may be reappointed for subsequent hearings if necessary.

(Acts 1986, No. 86-500, p. 956, §20; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §

Section 34-29-80 Complaints and testimony to be privileged; immunity of certain persons from suit

Complaints submitted to the board or testimony with respect thereto shall be absolutely privileged and no lawsuit predicated thereon may be instituted. Members of the board and their staffs, and any member of a grievance committee authorized by the board to investigate a complaint filed pursuant to this article shall be immune from suit for any conduct in the course of their official duties.

(Acts 1986, No. 86-500, p. 956, §21.)

Section 34-29-81 Relicensing and reinstatement

Any person whose license is suspended or revoked by the board may be relicensed or reinstated at any time without an examination by a majority vote of the board on written application made to the board showing cause justifying relicensing and reinstatement pursuant to the administrative code of the board.

(Acts 1986, No. 86-500, p. 956, §22; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-82 Criminal penalties

Any person who shall practice veterinary medicine without a current valid license shall be guilty of a misdemeanor, and upon conviction shall be fined not less than five hundred dollars (\$500) nor more than one thousand dollars (\$1,000) or imprisoned for not more than 90 days, or both, and each act of unlawful practice shall constitute a distinct and separate offense. The person, in the discretion of the judge, may be imprisoned or placed at hard labor for not more than six months.

(Acts 1986, No. 86-500, p. 956, §23; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-83 Appeal of disciplinary action; stay of revocation

A person disciplined pursuant to this article may appeal to the Circuit Court of Montgomery County, notwithstanding the provisions of the Administrative Procedure Act. To do so, he or she shall file a petition in the circuit court within 30 days after notification of the decision of the board. The board has 15 days to enter an appearance and to file the record of the administrative proceedings. The court may affirm or set aside the decision of the board by judicial review. The license shall not be revoked pending appeal except in extraordinary circumstances as determined by the board, and approved by the circuit court in which the appeal is pending.

(Acts 1986, No. 86-500, p. 956, §24; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-84 Filing of license with probate office; fee

A person shall be responsible for filing his or her license with the probate office of the county where he or she resides or the probate office of the county where he or she may move, or each county where he or she is to practice even if he or she is not a resident. The fee shall be one dollar (\$1).

(Acts 1986, No. 86-500, p. 956, §25; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-85 Status of persons holding license on April 30, 1986

Any person holding a valid license to practice veterinary medicine in Alabama on April 30, 1986, shall be recognized as a licensed veterinarian and shall be entitled to retain this status so long as he or she complies with this article and the administrative code of the board.

(Acts 1986, No. 86-500, p. 956, §26; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-86 Disposition of abandoned animals; notice to owner or agent; financial liability of owner or agent

(a) Any animal placed in the custody of a licensed veterinarian for the treatment, boarding, or other care which shall be unclaimed by its owner or his or her agent for a period of more than 10 days after written notice by registered or certified mail, return receipt requested, to the owner or his or her agent at his or her last known address shall be deemed to be abandoned and may be turned over to the nearest humane society or dog pound or sold to collect the lien pursuant to Sections 35-11-390 and 35-11-391.

(b) The giving of notice to the owner or the agent of the owner of the animal by the licensed veterinarian as provided in subsection (a) shall relieve the licensed veterinarian and custodian to whom the animal may be given of any further liability for disposal.

(c) For the purpose of this article, the term abandoned shall mean to forsake entirely, to neglect, or refuse to provide or perform the legal obligations for care and support of an animal by its owner or his or her agent. The abandonment shall constitute the relinquishment of all his or her rights and claims by the owner to the animal.

(d) The disposal of an abandoned animal shall not relieve the owner or agent thereof of any financial obligation incurred for treatment, boarding, or care by the veterinarian.

(Acts 1986, No. 86-500, p. 956, §27; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-87 Partnership or employment in practice of veterinary medicine not to be for nonlicensed persons; exceptions

(a) Whenever the practice of veterinary medicine is carried on by a partnership, all partners shall be either licensed or holders of temporary licenses to practice veterinary medicine in the State of Alabama.

(b) It shall be unlawful for any licensed veterinarian to practice veterinary medicine as an employee of any person or other entity not engaged primarily in the practice of veterinary medicine or for any person that is the owner or owners of an active veterinary practice to be other than a veterinarian or veterinarians duly licensed in the State of Alabama.

(c) The following shall be exempt from this section:

(1) A veterinarian employed by a person treating his or her employer's animals.

(2) A veterinarian employed by an official agency of the federal or state government or any subdivision thereof.

(3) A veterinarian employed by any licensed research facility.

(4) An heir or heirs inheriting under the terms of a will or by intestate succession for a period of two years following the death of the licensee.

(Acts 1986, No. 86-500, p. 956, §28; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-88 Premise permits - Required; fees; inspection; revocation, etc.; closure and imposition of penalties; renewal; requirements for satellite on mobile clinics

(a) Any facility, including mobile clinics or any other premises where a licensed veterinarian practices shall have a premise permit issued by the board. Upon application and payment of a premise permit fee and an inspection fee, if necessary to cover the cost of inspection, the board shall cause a facility to be inspected. A premise permit shall be issued if the facility meets minimum standards to be adopted by the administrative code of the board as to sanitary conditions and physical plant. In lieu of the above procedure, the board may issue a premise permit to any premise which is accredited by a recognized organization whose standards meet or exceed minimum board standards as established by the administrative code of the board.

- (b) Each application for premise permit shall set forth the names of all licensed veterinarians who shall be responsible for the management of the premises.
 - (c) The premise permit may be revoked, suspended, or denied when inspection reveals that the premises do not meet the standards set by the administrative code of the board or when the license of the responsible veterinarian or veterinarians has been suspended or revoked.
 - (d) The board may cause the closure of a facility and impose a penalty against any owner, operator, or responsible veterinarian of any premises operating without a premise permit in violation of this section or in violation of the administrative code of the board. No penalties so imposed shall exceed one thousand dollars (\$1,000) for each count or separate offense. In order that the board and the executive director may determine whether or not a danger to the public or to animals exists, the executive director or investigators employed by the board may conduct inspections or investigations of premises suspected of being in violation of any rule of the board. If a violation is found in conducting an inspection which is determined to be a hazard and a danger to the public or to animals, the executive director may suspend that premise permit until further notice.
 - (e) All premise permits shall be renewed yearly by payment of a fee to the board.
 - (f) Veterinary facilities shall be reinspected periodically as determined by the board.
 - (g) Premise permits issued to satellite, outpatient, or mobile small animal clinics shall state the name of the full service veterinary facility in that locale providing emergency and after hours service. Premise permits issued to mobile large animal clinics shall state the name of the full service veterinary facility in that locale providing radiology, emergency, and after hours service. Mobile clinics operating in more than one locale, i.e. city, shall have a premise permit for each locale. If the agreement between the outpatient, satellite, mobile large animal clinic, mobile small animal clinic, and the full service veterinary clinic providing back-up service ceases, the board shall be notified immediately and a new agreement for back-up service shall be provided before the issuance of a new premise permit.
- (Acts 1986, No. 86-500, p. 956, §29; Acts 1987, No. 87-794, p. 1557, §9; Acts 1997, No. 97-249, p. 431, §1.)*

Section 34-29-89 Premise permits - Display

Each person to whom a license or premise permit, or both, is issued shall keep such license or premise permit, or both, conspicuously displayed in his or her office, place of business, or place of employment and shall, whenever required, exhibit the license or premise permit, or both, to any member or authorized representative of the board.

(Acts 1986, No. 86-500, p. 956, §30; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-90 Immunity of veterinarians from suit for emergency care of animals or human victims; nonliability to animal hospital

- (a) Any licensed veterinarian who in good faith as a volunteer and without fee renders emergency care or treatment to a domestic animal shall not be liable in a suit for damages as a result of his or her acts or omissions which may occur during emergency care or treatment, nor shall he or she be liable to any animal hospital for its expense if under emergency conditions he or she orders an animal hospitalized or causes his or her admission to a hospital.
 - (b) Any licensed veterinarian who in good faith renders or attempts to render emergency care at the scene of an accident or emergency to the human victim or victims thereof shall not be liable for any civil damages as a result of any act or omissions by persons rendering or attempting to render the emergency care.
- (Acts 1986, No. 86-500, p. 956, §31; Acts 1997, No. 97-249, p. 431, §1.)*

Section 34-29-91 Eligibility for graduate of nonaccredited school to take examination

A person who is a graduate of a college of veterinary medicine not accredited by the American Veterinary Medical Association shall be eligible to take the regularly scheduled state licensing examination given by the board upon furnishing all the following required documents or items:

(1) The certificate of the American Veterinary Medical Association Educational Commission for Foreign Veterinary Graduates (ECFVG).

(2) A certificate evidencing the completion of a one-year internship as required by the ECFVG in a veterinary hospital or clinic approved by the Alabama State Board of Veterinary Medical Examiners. This internship can be completed in more than one hospital or clinic; however, a minimum of three months shall be spent in any one place and the intern shall receive a variety of veterinary experience. This internship may commence prior to or following the national and state examinations and all shall be completed within an 18-month period. The sponsoring practitioner of the internship shall give a complete written report to the board at the completion of each three months which shall include a performance evaluation of the intern. The board shall insure that the internship was satisfactorily completed by the applicant prior to issuance of a state license. The ECFVG certificate shall be in addition to all other requirements expected for licensing of veterinarians in Alabama.

(3) Proof of his or her citizenship of the United States and of good moral character.

(Acts 1986, No. 86-500, p. 956, §32; Acts 1997, No. 97-168, p. 243, §3, Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1.)

Section 34-29-92 Service of applicants as student preceptees for minimum period

The Alabama State Board of Veterinary Medical Examiners may require that all applicants serve as a student preceptee working under the supervision of a veterinarian licensed in any state for a minimum period of nine consecutive weeks.

(Acts 1986, No. 86-500, p. 956, §33; Acts 1997, No. 97-249, p. 431, §1.)

Section 34-29-94 Veterinary technician licensing requirements; authorized acts; unlicensed assistants; emergency care; suspension, revocation of license; continuing education

(a) In order to obtain a license as a veterinary technician, the applicant shall do all of the following:

(1) Submit a complete notarized application on a form prescribed by the board setting forth that the applicant meets all of the following qualifications:

a. At least 18 years of age.

b. Of good character.

c. Has attained a competent school education and has received a diploma in veterinary technology from an American Veterinary Medical Association accredited school, or other school of veterinary technology approved by the board.

(2) Submit an application accompanied by an authenticated copy of the college transcript of the applicant signed by the dean or the registrar of the school, college, or university.

(3) Submit an application accompanied by a photograph of reasonable likeness of the applicant taken within six months of the date of the application.

(4) Submit an application fee as prescribed by the board.

(b) Notification and penalty for nonrenewal of licenses for veterinary technicians shall be applied as provided in this article for veterinarians.

(c) The board may adopt the Veterinary Technician National Examination and passing criteria prepared by the Professional Examination Service (PES), or any other veterinary technician national examination as the sole veterinary technicians examination or in addition to a state examination at its discretion.

(1) Examination of applicants for licensing as veterinary technicians in Alabama shall be held at a time, place, and date set by the board. Appropriate public notice of the time and place of the examination shall be given at least 90 days in advance of the date set forth for the examination.

(2) A passing score on the AVMA approved National Licensing Examination shall be determined by the professional examination provider based on a national criteria which reflects a passing score of at least 70 percent. Each applicant who passes the examination and meets all other requirements for licensure prescribed by the board shall be granted a license as a veterinary technician and shall be registered as such and a record kept by the board, and shall receive a license in a form to be prescribed by the board.

(d) There shall be an annual renewal of each veterinary technician's license and the renewal fee established and published by the board.

(e) The supervising veterinarian may require a licensed veterinary technician to perform any task for which he or she has been trained as delineated in the American Veterinary Medical Association's essential tasks list for veterinary technician teaching programs. The following tasks may be performed under the level of supervision indicated unless specifically prohibited by regulation and the supervision shall be under a licensed veterinarian currently registered to practice in this state, provided the veterinarian makes examinations in a manner and frequency consistent with the accepted standard of care for the condition of the patient and for the condition being treated:

(1) A licensed veterinary technician may perform the following tasks under the indirect supervision of a veterinarian. If the animal is anesthetized, these tasks shall require the direct supervision of a veterinarian:

- a. Dental prophylaxis.
- b. Enemas.
- c. Electrocardiography.
- d. Application of bandages.
- e. Catheterization of the unobstructed bladder and inserting indwelling catheter.
- f. Gavage.
- g. Ear flush.
- h. Surgical site preparation.
- i. Diagnostic imaging:
 1. Patient preparation and positioning.
 2. Operation of X-ray and ultrasound machines.
 3. Oral and rectal administration of radio-opaque materials.
- j. Injections of medications not otherwise prohibited:
 1. Intramuscular.
 2. Subcutaneous.
 3. Intravenous.
 4. Intradermal.
- k. Oral medications.
- l. Topical medication.
- m. Laboratory:

1. Collection of tissue during or after a veterinarian has performed necropsy.
 2. Urinalysis.
 3. Hematology.
 4. Parasitology.
 5. Exfoliative cytology.
 6. Microbiology.
 7. Blood chemistry.
 8. Serology.
 9. Coprology.
 - n. Administration of preanesthetic drugs.
 - o. Oxygen therapy.
 - p. Removal of partially exposed foreign objects from skin and feet.
 - q. Removal of sutures.
 - r. Euthanasia.
 - s. Administration of immunological agents.
 - t. Blood collection for diagnostic purposes.
 - u. Cystocentesis.
 - v. Placement of a device to allow vascular access.
 - w. Handling of biohazardous waste materials.
- (2) A licensed veterinary technician may perform the following tasks under the direct supervision of a veterinarian:
- a. Endotracheal intubation.
 - b. Blood administration and collection.
 - c. Fluid aspiration.
 - d. Intraperitoneal injections.
 - e. Assist during surgery and diagnostics and treatment procedures.
 - f. Monitoring of vital signs of anesthetized patient.
 - g. Application of splints.
 - h. Induce anesthesia by intravenous, intramuscular, or subcutaneous injection, or by inhalation.
 - i. When the animal is anesthetized, those tasks listed under subdivision (1).
 - j. Suturing skin lacerations, the site shall be examined by a veterinarian prior to and following suture.
- (3) An unlicensed assistant may perform the following tasks under the indirect supervision of a licensed veterinarian or licensed veterinary technician:
- a. Blood collection for diagnostic purposes.
 - b. Fecal sample collection.
 - c. Surgical site preparation.
 - d. Administration of previously prescribed medications: Ophthalmic, otic, oral, topical, or parenteral.
 - e. Handling of biohazardous waste materials.
- (4) An unlicensed assistant may perform the following tasks under the immediate supervision of a licensed veterinarian or a licensed veterinary technician:
- a. Blood collection and administration.
 - b. Placement of a device to allow vascular access.
 - c. Gavage.
 - d. Diagnostic imaging:
 1. Patient preparation and positioning.
 2. Film exposure.

3. Oral and rectal administration of radio-opaque materials.
 - e. Intravenous injections of medications not otherwise prohibited.
 - f. Exfoliative cytology preparation.
 - g. Application of bandages.
 - h. Ear flush.
 - i. Electrocardiography.
 - j. Removal of sutures.
 - k. Euthanasia.
 - l. Assist during surgery and diagnostics.
 - m. Place endotracheal tube.
- (f) Under the conditions of an emergency, a licensed veterinary technician may render the following lifesaving aid and treatment:
- (1) Application of tourniquets or pressure bandages, or both, to control hemorrhage.
 - (2) Administration of pharmacological agents and parenteral fluids shall only be performed after direct communication with a veterinarian authorized to practice in this state and the veterinarian is either present or in route to the location of the distressed animal.
 - (3) Resuscitative respiratory procedures.
 - (4) External cardiac massage.
 - (5) Application of temporary splints or bandages to prevent further injury to bones or soft tissue.
 - (6) Application of appropriate wound dressings and external supportive treatment in severe burn cases.
- (g) Any persons licensed or certified pursuant to this article who gratuitously and in good faith give emergency treatment to a sick or injured animal at the scene of an accident or emergency shall not be liable for damages to the owner of the animal in the absence of gross negligence.
- (h) Any licensed veterinary technician who in good faith renders or attempts to render emergency care at the scene of an accident or emergency to the human victim or victims thereof shall not be liable for any civil damages as a result of any act or omission by the person in rendering or attempting to render the emergency care.
- (i) Any veterinary technician shall display his or her license at his or her place of employment as to be easily accessible to the public or his or her clients.
- (j) The board shall revoke the license of any veterinary technician convicted of or pleading nolo contendere to a felony, a crime involving moral turpitude, or who is guilty of one or more of the following:
- (1) Soliciting patients from any practitioner of the healing arts.
 - (2) Willfully or negligently divulging a professional confidence or discussing a diagnosis or treatment of a veterinarian without the express permission of the veterinarian.
 - (3) The habitual or excessive use of intoxicants or drugs.
 - (4) Fraud or misrepresentation in applying for or procuring a license to perform as a veterinary technician or in applying for or procuring an annual registration.
 - (5) Impersonating another person licensed as a veterinary technician or allowing any person to use his or her license as a technician.
 - (6) Abetting or aiding the practice of veterinary medicine by a person not licensed by the board.
 - (7) Gross negligence in the performance of duties, tasks, or functions assigned to him or her by a licensed veterinarian.

(8) Manifest incapability or incompetence to perform as a veterinary technician.

(k) The board may revoke or suspend any license which they may have issued for violation of this article relating to the practice of veterinary medicine or the conduct of veterinary technicians, or both, for the violation of the administrative code of the board after notice and hearing proceedings, as provided by Section 34-29-79. Appeals from any adverse action of the board under this section shall be made to the Circuit Court of Montgomery County.

(l) Any veterinarian who permits a veterinary technician to work and perform the duties of a licensed technician in his or her office without having been issued a license or any licensed veterinary technician working in a veterinary office without a license shall be guilty of a misdemeanor. Nothing, however, in this article shall be construed to prevent a student of veterinary technology from performing duties necessary to complete course requirements from an accredited school or college of veterinary technology while under the supervision of a competent instructor of veterinary medicine recognized by the Alabama State Board of Veterinary Medical Examiners.

(m) A minimum number of hours of continuing education shall be required yearly for license renewal as provided by the administrative code of the board.

(n) Graduates of veterinary technology programs not accredited by the AVMA may become eligible for licensure by meeting all of the requirements of the AVMA and successfully passing the AVMA approved veterinary technician licensing examination.

(Acts 1986, No. 86-500, p. 956, §35; Acts 1989, No. 89-236, p. 310, §§3, 4; Acts 1997, No. 97-249, p. 431, §1; Act 2006-590, p. 1596, §1; Act 2010-536, p. 905, §1.)

Article 5 Impaired Veterinary Professionals.

Section 34-29-110 Definitions

For the purposes of this article the following terms shall have the following meanings:

(1) **IMPAIRED.** The inability of a veterinary professional to practice veterinary medicine or veterinary technology with reasonable skill and safety to patients by reason of illness, inebriation, excessive use of drugs, narcotics, alcohol, chemicals, or other substances, or as a result of any physical or mental condition.

(2) **VETERINARY PROFESSIONAL.** A veterinary licensed to practice veterinary medicine and veterinary technicians who are licensed to practice veterinary technology.

(Act 2000-453, p. 815, §1.)

Section 34-29-111 Duties of board; Alabama Veterinary Professionals Wellness Committee; liability

(a) It shall be the duty and obligation of the State Board of Veterinary Medical Examiners to promote the early identification, intervention, treatment, and rehabilitation of veterinary professionals licensed to practice veterinary medicine or veterinary technology in Alabama who may be impaired by reason of illness, inebriation, excessive use of drugs, narcotics, alcohol, chemicals, or other substances, or as a result of any physical or mental condition.

(b) In order to carry out this obligation the State Board of Veterinary Medical Examiners may contract with any nonprofit corporation or medical professional association for the purpose of creating, supporting, and maintaining a committee of veterinary professionals to be designated the Alabama Veterinary Professionals Wellness Committee. The committee shall consist of not less than 10 nor more than 15 veterinary professionals licensed to practice in Alabama and selected in a manner prescribed by the board. The board may expend available funds as necessary to adequately provide for the operational expenses of the Alabama Veterinary Professionals Wellness Committee, including, but not limited to, the actual cost of travel, office overhead, and personnel expense. The funds provided by the board for the purpose of operating expenses shall not be subject to any provision of law requiring competitive bidding.

(c) The Board of Veterinary Medical Examiners may enter into an agreement with a nonprofit corporation or medical professional association for the Alabama Veterinary Professionals Wellness Committee to undertake those functions and responsibilities specified in the agreement which may include any or all of the following:

- (1) Contracting with providers of treatment programs.
- (2) Receiving and evaluating reports of suspected impairment from any source.
- (3) Intervening in cases of verified impairment.
- (4) Referring impaired veterinary professionals to treatment programs.
- (5) Monitoring the treatment and rehabilitation of impaired veterinary professionals.
- (6) Providing post-treatment monitoring and support of rehabilitated impaired veterinary professionals.
- (7) Performing other activities as agreed by the Board of Veterinary Medical Examiners and the Alabama Veterinary Professionals Wellness Committee.

(d) The Alabama Veterinary Professionals Wellness Committee shall develop procedures in consultation with the Board of Veterinary Medical Examiners for the following:

- (1) Periodic reporting of statistical information regarding impaired veterinary professionals program activity.
- (2) Periodic disclosure and joint review of the information as the board deems appropriate regarding reports received, contracts or investigations made, and the disposition of each report, provided, however, that the committee shall not disclose any personally identifiable information except as provided in this article.

(e) Any veterinary professional licensed in Alabama who shall be duly appointed to serve as a member of the Alabama Veterinary Professionals Wellness Committee and any auxiliary personnel, consultants, attorneys, or other volunteers or employees of the committee taking any action authorized by this article, engaging in the performance of any duties on behalf of the committee, or participating in any administrative or judicial proceeding resulting therefrom, shall, in the performance and operation thereof, be immune from any liability, civil or criminal, that might otherwise be incurred or imposed. Any nonprofit corporation or medical professional association or state or county veterinary medical association that contracts with or receives funds from the State Board of Veterinary Medical Examiners for the creation, support, and operation of the Alabama Veterinary Professionals Wellness Committee shall, in so doing, be immune from any liability, civil or criminal, that might otherwise be incurred or imposed.

(f) All information, interviews, reports, statements, memoranda, or other documents furnished to or produced by the Alabama Veterinary Professionals Wellness Committee and any findings, conclusions, recommendations, or reports resulting from the investigations, interventions, treatment, or rehabilitation, or other proceedings of such committee are declared to be privileged and confidential. All records and proceedings of the committee pertaining to the impaired veterinary professional shall be confidential and shall be used by the committee and the members thereof only in the exercise of the proper function of the committee and shall not be public records nor available for court subpoena or for discovery proceedings. In the event of a breach of contract between the committee and the impaired veterinary professional, any and all records pertaining to the conduct determined to cause the breach of contract will be disclosed to the regulatory board upon its request for disciplinary purposes only. Nothing contained herein shall apply to records made in the regular course of business of a veterinary professional and information, documents, or records otherwise available from original sources are not to be construed as immune from discovery or use in any civil proceedings merely because they were presented or considered during the proceedings of the Alabama Veterinary Professionals Wellness Committee.

(g) The Alabama Veterinary Professionals Wellness Committee shall render an annual report to the State Board of Veterinary Medical Examiners concerning the operations and proceedings of the committee for the preceding year. The committee shall report to the board any veterinary professional who in the opinion of the committee is unable to practice veterinary medicine or veterinary technology with reasonable skill and safety to patients by reason of illness, inebriation, excessive use of drugs, narcotics, alcohol, chemicals, or other substances, or as a result of any physical or mental condition when it appears that the veterinary professional is currently in need of intervention, treatment, or rehabilitation and the veterinary professional has failed or refused to participate in programs of treatment or rehabilitation recommended by the committee. A report to the Alabama Veterinary Professionals Wellness Committee shall be deemed to be a report to the Board of Veterinary Medical Examiners for the purposes of any mandated reporting of veterinary professional impairment otherwise provided for by law.

(h) If the Board of Veterinary Medical Examiners has reasonable cause to believe that a veterinary professional is impaired, the board may cause an evaluation of the veterinary professional to be conducted by the Alabama Veterinary Professionals Wellness Committee for the purpose of determining if there is an impairment. The Alabama Veterinary Professionals Wellness Committee shall report the findings of its evaluation to the Board of Veterinary Medical Examiners.

(Act 2000-453, p. 815, §2.)

Article 6 Euthanasia in Animals.

Section 34-29-130 Permit to purchase, possess, and use certain agents for euthanizing animals

(a) The State Board of Veterinary Medical Examiners, hereinafter called the board, shall adopt rules providing for the issuance of permits authorizing the purchase, possession, and use of sodium pentobarbital, sodium pentobarbital with lidocaine, or other similar agents at facilities approved by the board that are operated for the collection and care of stray, neglected, abandoned, or unwanted dogs and cats, or federally licensed wildlife rehabilitation centers, for the purpose of euthanizing injured, sick, or abandoned animals which are in their lawful possession. The rules shall set forth guidelines for the proper storage and handling of the substances and other provisions as may be necessary to ensure that these drugs are used solely for the purpose set forth in this section. The rules shall also provide for an application or inspection fee and an annual renewal fee.

(b) Any facility approved by the board that operates for the collection and care of stray, neglected, abandoned, or unwanted dogs and cats, or a federally licensed wildlife rehabilitation center may apply to the board for a permit to purchase, possess, and use sodium pentobarbital and sodium pentobarbital with lidocaine pursuant to subsection (a). Upon certification by the board that the applicant meets the qualifications set forth in the rules, a permit shall be issued.

(c) The board may revoke or suspend the permit upon a determination that the permittee is using the scheduled substances for any purpose other than that set forth in this section or if the permittee fails to follow the rules of the board regarding proper storage and handling of the substance.

(Act 2004-523, p. 1067, §1.)

Section 34-29-131 Exemptions

(a) The board shall provide by rule that sodium pentobarbital, a sodium pentobarbital derivative, or other authorized injectable agents that act on the central nervous system shall be the only means of euthanasia of dogs and cats at facilities approved by the board that are operated for the collection and care of stray, neglected, abandoned, or unwanted dogs and cats.

(b) The board shall promulgate rules providing for the use of carbon monoxide, CO, and inhalant anesthetics as an acceptable alternative to the injectable agents for individual animals or mass euthanasia in small animals other than dogs or cats. Rules shall include provisions for the type of chamber and gas used, training and inspection requirements, humane comfort of the animals, and safety precautions for personnel.

(c) Euthanasia shall be performed only by a licensed veterinarian or an employee or agent of a facility approved by the board that is operated for the collection and care of stray, neglected, abandoned, or unwanted animals, provided the employee or agent has successfully completed a euthanasia technician certification course. The curriculum for the course shall be approved by the board and shall include, at a minimum, all of the following:

- (1) The pharmacology, proper administration, and storage of euthanasia solutions.
- (2) Federal and state laws regulating the storage and accountability of scheduled drugs.
- (3) OSHA Safety and Material Safety Data Sheet Regulations.
- (4) Euthanasia stress management.
- (5) Proper disposal of euthanized animals.

(d) Notwithstanding the foregoing, a licensed veterinary technician, in accordance with Section 34-29-94, and regulations adopted pursuant thereto, who is an employee or agent of a licensed veterinarian or animal shelter as defined in Section 34-29-130, may perform euthanasia without completing the certification course required by subsection (c).

(e) Within by January 31, 2012, any animal shelters operated for the collection and care of stray, neglected, abandoned, or unwanted animals, which operated a gas chamber prior to that date shall have dismantled and removed its gas chamber and shall provide documentation to that effect to the board.

(Act 2004-523, p. 1067, §2; Act 2011-626, p. 1479, §2.)

Section 34-29-132 Euthanasia in emergency situation

Whenever an emergency situation exists which requires the immediate euthanasia of an injured, diseased, or dangerous animal, a law enforcement officer, a veterinarian, or an agent or designee of a local animal control unit may humanely destroy the animal, as provided herein.

(1) Whenever any domestic animal is so injured or diseased as to appear useless and is in a suffering condition, and it reasonably appears to any officer that the animal is imminently near death and cannot be cured or rendered fit for service, and the officer has made a reasonable and concerted, but unsuccessful, effort to locate the owner, the owner's agent, or a veterinarian, then the officer, acting in good faith and upon reasonable belief, may immediately destroy the animal by shooting the animal or injecting the animal with a barbiturate drug. If the officer locates the owner or the owner's agent, the officer shall notify the owner or the owner's agent of the animal's location and condition. If the officer locates only a veterinarian, the officer shall destroy the animal only upon the advice and recommendation of the veterinarian.

(2) In the absence of negligence, wantonness, or willful conduct, no officer or veterinarian acting in good faith and with due care pursuant to this article may be held liable either criminally or civilly for euthanizing an animal, nor shall any civil or criminal liability attach to the employer of the officer or veterinarian.

(3) A court order shall not be necessary to carry out the provisions of this section.

(Act 2004-523, p. 1067, §3.)

Section 34-29-133 Animals not to be left unattended until death; disposal of body upon confirmation of death

No animal may be left unattended between the time euthanasia procedures are first begun and the time that death occurs, nor may the body of the animal be disposed of until death has been confirmed by a euthanasia technician or other qualified person as defined by this chapter.

(Act 2004-523, p. 1067, §4.)

Section 34-29-134 Violations of article

(a) The Attorney General may bring action to enjoin any violation of this article.

(b) Any person who violates this article shall be guilty of a Class B misdemeanor and upon conviction shall be punished as provided by law.

(Act 2004-523, p. 1067, §§5, 6.)

Section 34-29-135 Relation to Section 34-29-94

Notwithstanding the provisions of Section 34-29-94, this article shall prevail in all cases in which there is a direct conflict.

(Act 2004-523, p. 1067, §9.)



1 SB85

2 2JE9HIK-3

3 By Senators Stutts, Sessions, Butler

4 RFD: Healthcare

5 First Read: 13-Jan-26

ACT #2026-503





Enrolled, An Act,

Relating to veterinary medicine; to amend Section 34-29-61, Code of Alabama 1975, to define the veterinarian-client-patient relationship and other terms; to add Section 34-29-77.1 to the Code of Alabama 1975, to prohibit veterinarians from dispensing medication without a veterinarian-client-patient relationship; to provide the amount of time within which a prescription may be refilled; to provide the veterinarian-client-patient relationship is shared among all veterinarians at a location; to require a veterinarian-client-patient relationship be reestablished annually; and to make nonsubstantive, technical revisions to update the existing code language to current style.

BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

Section 1. Section 34-29-61, Code of Alabama 1975, is amended to read as follows:

"§34-29-61

For the purposes of this article, the following terms ~~shall have the following meanings ascribed by this section:~~

(1) ACCREDITED SCHOOL OF VETERINARY MEDICINE. Any veterinary college or division of a university or college that offers the degree of doctor of veterinary medicine or its equivalent and is accredited by the American Veterinary Medical Association (AVMA).

(2) ANIMAL. Any ~~animal or mammal other than man,~~
~~including birds, fish, reptiles, wild or domestic member of~~



29 the Kingdom Animalia other than humans, living or dead.

30 (3) APPLICANT. ~~A person~~ An individual who files an
31 application to be licensed to practice veterinary medicine or
32 licensed as a veterinary technician.

33 (4) BOARD. Alabama State Board of Veterinary Medical
34 Examiners.

35 (5) CLIENT. A person who has entered into an agreement
36 with a licensed veterinarian in person for the purpose of
37 obtaining veterinary medicine services.

38 ~~(5)~~ (6) CONSULTING VETERINARIAN. A veterinarian licensed
39 in another state who gives advice or demonstrates techniques
40 to a licensed Alabama veterinarian or group of licensed
41 Alabama veterinarians. A consulting veterinarian ~~shall~~ may not
42 ~~utilize~~ use this privilege to circumvent the law.

43 ~~(6)~~ (7) DIRECT SUPERVISION. ~~The~~ A supervising
44 veterinarian has initially examined the animal and will
45 examine at other times as acceptable veterinary medical
46 practice requires, consistent with the particular delegated
47 animal health care task. The supervising veterinarian is on
48 the premises and is quickly and easily available.

49 ~~(7)~~ (8) EMERGENCY. ~~The animal has been placed in a life~~
50 ~~threatening condition and immediate treatment is necessary to~~
51 ~~sustain life~~ A medical condition as determined by a licensed
52 veterinarian to warrant immediate medical intervention. The
53 term includes life-threatening or life-altering conditions and
54 potential loss of or permanent damage to major bodily
55 functions.

56 ~~(8)~~ (9) FOREIGN VETERINARY GRADUATE, EXCLUDING CANADA.



Any ~~person~~ individual, including a foreign national or an American citizen, who has received a professional veterinarian medical degree from an American Veterinary Medical Association listed veterinary college that is not accredited by the American Veterinary Medical Association.

~~(9)~~ (10) IMMEDIATE SUPERVISION. ~~The~~ A supervising veterinarian is on the premises and in audible or visual range of the animal patient and the ~~person~~ individual treating the patient.

~~(10)~~ (11) INDIRECT SUPERVISION. ~~The~~ A supervising veterinarian has examined the animal and has given written or oral instructions for the treatment of the animal while the supervising veterinarian is away from the premises.

~~(11)~~ (12) LICENSE. Any permit, approval, registration, or certificate of qualification issued by the board.

~~(12)~~ (13) LICENSED VETERINARIAN. ~~A person~~ An individual who is validly and currently licensed to practice veterinary medicine in Alabama.

~~(13)~~ (14) LICENSED VETERINARY TECHNICIAN. ~~A person~~ An individual who is validly and currently licensed to practice as a veterinary technician in Alabama.

(15) LIVESTOCK: Food-producing animals, including cattle, elk, reindeer, bison, horses, deer, sheep, goats, swine, egg- and meat-producing poultry, llamas, alpacas, honeybees, rabbits, live fish, crawfish, and other animals that are a part of a herd.

(16) PATIENT. Any single animal or representative segment of a consignment, herd, or flock.



85 ~~(14)~~ (17) PERSON. Any individual, firm, partnership,
86 association, joint venture, cooperative, or corporation or any
87 other group or combination acting in concert; and whether or
88 not acting as a principal, trustee, fiduciary, receiver, or as
89 any kind of legal or personal representative, or as the
90 successor in interest, assigning agent, factor, servant,
91 employee, director, officer, or any other representative of
92 ~~such~~ the person.

93 ~~(15)~~ (18) PRACTICE OF VETERINARY MEDICINE:

94 a. To diagnose, treat, correct, change, relieve, or
95 prevent animal disease, deformity, defect, injury, or other
96 physical or mental condition; including the prescription or
97 administration of any drug, medicine, biologic, apparatus,
98 application, anesthesia, or other therapeutic or diagnostic
99 substance or technique on any animal including ~~but not limited~~
100 ~~to~~ acupuncture, dentistry, animal psychology, animal
101 chiropractic, theriogenology, surgery, including cosmetic
102 surgery, any manual, mechanical, biological, or chemical
103 procedure for testing for pregnancy or for correcting
104 sterility or infertility, or to render service or
105 recommendations with regard to any of the above.

106 b. To represent directly or indirectly, publicly or
107 privately, an ability and willingness to do any act described
108 in paragraph a.

109 c. To use any title, words, abbreviations, or letters
110 in a manner or under circumstances which induce the belief
111 that the ~~person~~ individual using them is qualified to do any
112 act described in paragraph a. Such use shall be prima facie



113 evidence of the intention to represent oneself as engaged in
114 the practice of veterinary medicine.

115 d. ~~Collects~~ To collect blood or other samples for the
116 purpose of diagnosing disease or other conditions. This
117 paragraph shall not apply to unlicensed personnel employed by
118 the United States Department of Agriculture or the Alabama
119 Department of Agriculture and Industries ~~who are engaged in~~
120 ~~the Brucellosis eradication program or external parasite~~
121 ~~control program pursuant to Section 2-15-192.~~

122 e. To remove any embryo from a food animal or companion
123 animal for the purpose of transplanting the embryo into
124 another female animal ~~or for the purpose of~~, cryopreserving
125 the embryo, ~~or to implant~~ implanting the embryo into a food or
126 companion animal. It shall not be considered the practice of
127 veterinary medicine for ~~a person~~ an individual or his or her
128 full-time employees to remove an embryo from the food or
129 companion animal of the ~~person~~ individual for the purpose of
130 transplanting or cryopreserving the embryo, or to implant an
131 embryo into the food or companion animal of the ~~person~~
132 individual, provided ownership of the food or companion animal
133 shall not be transferred or employment of the ~~person~~
134 individual shall not be changed for the purpose of
135 circumventing this article.

136 f. To provide veterinary medical services to a client
137 or patient in this state, including through ~~telephonic,~~
138 ~~electronic, or other means~~ telemedicine, regardless of the
139 location of the veterinarian, shall constitute the practice of
140 veterinary medicine in this state and shall require licensure



141 within this state and a veterinarian-client-patient
142 relationship must ~~be~~ have been previously established.

143 (19) SMALL ANIMAL. Animals other than livestock. The
144 term includes companion pets, exotic pets, and birds. The term
145 does not include poultry.

146 ~~(16)~~ (20) SUPERVISING VETERINARIAN. A veterinarian who
147 assumes responsibility for the professional care given to an
148 animal by a person an individual working under his or her
149 direction.

150 (21) TELEMEDICINE. In conjunction with a valid VCPR,
151 the use of electronic communication to exchange information
152 between a client and a licensed veterinarian about a patient's
153 health status from one site to another.

154 (22) TELETRIAGE. In the absence of a valid VCPR, the
155 safe, appropriate, and timely assessment and management of a
156 patient by electronic communication to render a good and safe
157 decision regarding a patient's condition based on a client's
158 or responsible party's report of the patient's history,
159 clinical signs, and photos or videos. The term includes the
160 determination of the immediate need of a patient to be
161 presented for an in-person physical examination due to
162 conditions of uncertainty and urgency. The term does not
163 include diagnosis treatment.

164 ~~(17)~~ (23) TEMPORARY LICENSE. Temporary permission to
165 practice veterinary medicine issued by the board pursuant to
166 this article.

167 ~~(18)~~ (24) UNLICENSED ASSISTANT. Any individual who is
168 not a licensed veterinary technician or veterinarian and is



169 employed by a licensed veterinarian.

170 ~~(19)~~ (25) VETERINARIAN-CLIENT-PATIENT RELATIONSHIP

171 (VCPR). A relationship in which a licensed veterinarian

172 satisfies all of the following:

173 a. ~~when the veterinarian has~~ Has assumed responsibility

174 for making medical judgments regarding the health of ~~the~~

175 ~~animal or animals~~ a patient and the need for medical

176 treatment, and ~~is created by actual examination by the~~

177 ~~veterinarian of the animal or a representative segment of a~~

178 ~~consignment or herd~~ the client has agreed to comply with the

179 veterinarian's instructions.

180 b. Has physically examined a patient within the

181 previous 12 months or more frequently as dictated by the age

182 of the patient, medical condition of the patient, treatment

183 therapy, or use of controlled substances.

184 c. Has sufficient knowledge of the patient to initiate

185 a general or preliminary diagnosis of the patient's medical

186 condition.

187 d. Is acquainted with the keeping and care of the

188 patient or the operation where the patient is managed.

189 e. Is readily available for ongoing or follow-up

190 evaluation and care of the patient or has arranged for

191 emergency veterinary care or continuing care and treatment of

192 the patient by an appropriate veterinary professional.

193 f. Oversees treatment of the patient, compliance with

194 the treatment, and the outcome.

195 g. Maintains complete and legible medical records

196 regarding the patient, including an assessment and treatment



197 plan, in a manner that another veterinarian may proceed with
198 continuity of care and treatment of the patient.

199 ~~(20)~~ (26) VETERINARIAN, DOCTOR OF VETERINARY MEDICINE,
200 DVM, VMD, or EQUIVALENT TITLE. ~~A person~~ An individual who has
201 received a doctor's degree in veterinary medicine from an
202 accredited school of veterinary medicine or holds an
203 Educational Commission for Foreign Veterinary Graduates
204 (ECFVG) certificate issued by the American Veterinary Medical
205 Association (AVMA).

206 ~~(21)~~ (27) VETERINARY FACILITIES. Any place or unit from
207 which the practice of veterinary medicine is conducted. The
208 following are types of veterinary facilities:

209 a. Veterinary or Animal Hospital or Clinic. Meets or
210 exceeds all mandatory requirements as listed in the
211 administrative code of the board for veterinary facilities. In
212 doing so, it provides quality examination, diagnostic, and
213 health maintenance services for medical and surgical treatment
214 of animals and is equipped to provide housing and nursing care
215 for the animals during illness or convalescence.

216 b. Specialty Practice or Clinic. Provides complete
217 specialty service by a veterinarian who has advanced training
218 in that specialty and is a diplomat of an approved specialty
219 college. It meets all minimum standards that are applicable to
220 that specialty.

221 c. Central Hospital. ~~Shall meet~~ Meets all requirements
222 of paragraph a., ~~as well as provide~~ and provides specialized
223 care including 24-hour nursing care and specialty consultation
224 on a permanent or on-call basis. It is mainly utilized on



225 referral from area veterinary hospitals or clinics.

226 d. Satellite, Outpatient, or Mobile Small Animal
227 ~~Clinics~~ Clinic. A supportive facility owned by or associated
228 with, or both, and has ready access to, within a reasonable
229 distance, a full-service veterinary hospital or clinic or, a
230 central hospital providing all mandatory services and meeting
231 all minimum standards. The public shall be informed of the
232 limitation of services by way of a posted notice in plain view
233 and easily readable or by notice provided to the client by
234 flyer or card which clearly specifies those mandatory
235 veterinary medical services ~~which~~ that are not provided. In
236 addition, the main location and telephone number of the
237 veterinary hospital or clinic providing the required service,
238 as well as the signed agreement with the veterinary hospital
239 or clinic shall also be posted in plain view and be easily
240 readable. A veterinarian associated with this veterinary
241 hospital or clinic shall be on call during and after operation
242 of the satellite, outpatient, or mobile clinic to render aid
243 if necessary. The personnel of satellite, outpatient, or
244 mobile clinics shall consist of one or more veterinarians and
245 auxiliary personnel necessary to provide adequate outpatient
246 service. Operation of any satellite, outpatient, or mobile
247 clinic shall be under the direct supervision of a licensed
248 veterinarian who remains on the premises during the entire
249 time of operation.

250 e. Large Animal Mobile Clinic. ~~Must provide~~ Provides
251 examination, diagnostic, and preventive medicine, and minor
252 surgical services for large animals not requiring confinement



or hospitalization. Emergency service and radiology service shall be provided by that veterinarian or by written agreement with another veterinarian or group of veterinarians in practice in that locale. These clinics shall provide a degree of veterinary care compatible with the level of standards considered adequate to the practice of veterinary medicine currently available in the area. Complete hospital facilities may be provided by the nearest large animal hospital or veterinary school.

f. Emergency Clinic. ~~A facility established to receive~~ Receives patients and ~~to treat~~ treats illnesses and injuries of an emergency nature requiring treatment. The clinic shall provide professional, diagnostic and emergency treatment during hours when local veterinary hospitals are normally closed. Emergency clinics shall meet all mandatory requirements of a veterinary hospital or clinic.

~~(22)~~ (28) VETERINARY INTERN. ~~A person~~ An individual who is working ~~towards~~ toward completion of an ECFVG certificate and who is working under the direct or indirect supervision of a board approved licensed veterinarian in any state to complete the practical experience internship required for licensing in Alabama.

~~(23)~~ (29) VETERINARY MEDICINE. Includes veterinary surgery, theriogenology, dentistry, acupuncture, animal psychology, chiropractic, and all other branches or specialties of veterinary practice.

~~(24)~~ (30) VETERINARY STUDENT PRECEPTEE. ~~A person~~ An individual who is pursuing a veterinary degree in an



281 accredited school of veterinary medicine which has a preceptor
282 or extern program and who has completed the academic
283 requirements of the program.

284 ~~(25)~~ (31) VETERINARY TECHNICIAN STUDENT. ~~Any person~~ An
285 individual enrolled in an AVMA accredited veterinary
286 technology program, gaining clinical experience under the
287 supervision of a licensed veterinarian or licensed veterinary
288 technician in a clinical setting.

289 ~~(26)~~ (32) VETERINARY TECHNOLOGY. The skills and
290 knowledge accrued in a post-high school course of study,
291 accredited by the AVMA Committee on Education (COE) or the
292 board, in the area of care and treatment of animals. It
293 embodies limited skills, responsibility, and minimal exercise
294 of independent judgment in the treatment of patients of
295 veterinarians while under direct, indirect, or immediate
296 supervision of a veterinarian.

297 ~~(27)~~ (33) WHOLESALE VETERINARY DRUG DISTRIBUTOR. A
298 person engaged in the business of distributing veterinary
299 drugs and medicines for resale to veterinary practitioners and
300 other veterinary wholesalers and possesses a current permit
301 issued by the Alabama State Board of Pharmacy to engage in the
302 selling of veterinary drugs or medicines in the State of
303 Alabama."

304 Section 2. Section 34-29-77.1 is added to the Code of
305 Alabama 1975, to read as follows:

306 §34-29-77.1

307 (a) A VCPR remains with the licensed veterinarian who
308 established the initial VCPR and remains valid with other



309 licensed veterinarians within the practice premises where the
310 written or electronic medical records of the patient are kept.

311 (b)(1) A licensed veterinarian may not prescribe or
312 dispense drugs without a VCPR.

313 (2) A VCPR may not be established for the sole purpose
314 of drug sales.

315 (3) Telemedicine may not be used to establish a VCPR.

316 (c) With a VCPR, a prescription may be refilled for not
317 more than one year from the initial prescription date unless
318 medically prohibited or restricted or prohibited by state or
319 federal law, rule, or regulation.

320 (d) A new VCPR shall be reestablished annually by the
321 date that the previous VCPR was established. If not
322 reestablished annually, a VCPR is not valid.

323 (f)(1) A licensed veterinarian may communicate by means
324 of teletriage with an individual if:

325 a. An emergency occurs outside of a valid VCPR;

326 b. The individual has not had a valid VCPR established
327 in the previous 12 months; or

328 c. The individual contacting the licensed veterinarian
329 is not a client.

330 (2) In teletriage, a diagnosis or treatment may not be
331 rendered. The individual and licensed veterinarian may arrange
332 an in-person visit or the licensed veterinarian may refer the
333 patient and individual to another licensed veterinarian for
334 assessment and treatment.

335 (g) If an emergency occurs within a valid VCPR and the
336 veterinarian who established the original VCPR is not



337 available to examine the patient, the veterinarian may
338 communicate the changes in protocol to the client by means of
339 telemedicine and provide consultation, issue recommendations,
340 or refer the client to another licensed veterinarian.

341 Section 3. This act shall become effective on October
342 1, 2026.



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[Signature]

President and Presiding Officer of the Senate

[Signature]

Speaker of the House of Representatives

SB85

Senate 25-Feb-26

I hereby certify that the within Act originated in and passed the Senate, as amended.

Patrick Harris,
Secretary.

House of Representatives
Passed: 08-Apr-26

By: Senator Stutts

APPROVED

4-14-2026

TIME

3:35 pm

Kay Ivey
GOVERNOR

Alabama Secretary Of State

Act Num...: 2026-503
Bill Num...: S-85

ENGROSSED

Senate Bill No. 85

SPONSOR

1 Stutts

CO-SPONSORS

2 Sessions

3 Butler

4 _____

5 _____

6 _____

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SENATE ACTION

I hereby certify that the Resolution as required in Section C of Act No. 81-889 was adopted and is attached to the Bill, SB 85.
Yours 34 nays 0 abstain 0

PATRICK HARRIS,
Secretary

I hereby certify that the notice & proof is attached to the Bill, SB _____ as required in the General Acts of Alabama, 1975 Act No. 919.

PATRICK HARRIS,
Secretary

CONFERENCE COMMITTEE

Senate Conferees _____

HOUSE ACTION

DATE: 3-5-2026

RD 1 RFD AR

REPORT OF STANDING COMMITTEE

This bill having been referred by the House to its standing committee on ALY & FORESTRY was acted upon by such committee in session, and returned therefrom to the House with the recommendation that it be Passed, w/amend(s) w/sub
This 4th day of MARCH, 2026.

[Signature] Chairperson

DATE: 3-5-2026

RF RD 2 CAL

DATE: 20

RE-REFERRED ☐ RE-COMMITTED ☐

Committee _____

I hereby certify that the Resolution as required in Section C of Act No. 81-889 was adopted and is attached to the Bill, SB 85.

YEAS _____ NAYS _____

JOHN TREADWELL,
Clerk

FURTHER HOUSE ACTION (OVER)



Appendix III: Board Members

ALABAMA STATE BOARD OF VETERINARY MEDICAL EXAMINERS

8100 SEATON PLACE – SUITE A, MONTGOMERY, AL 36130-5330

Tammy S. Cargile
Executive Director

The following are the names, cities, and expiration of terms, for the current ASBVME Board Members

David C. Tyree, DVM	Addison, AL	Expiration of Term: 03-14-2028
Lisa Hethcox, LVT	Altoona, AL	Expiration of Term: 03-14-2030
Homer S. Bruce, DVM	Opelika, AL	Expiration of Term: 03-14-2030
Thomas W. Fell, Jr., DVM	Mobile, AL	Expiration of Term: 09-16-2029
Brenda Glover	Greensboro, AL	Expiration of Term: 09-27-2026
Charles D. Hart, Jr., DVM	Trussville, AL	Expiration of Term: 10-10-2026
Tomeshia Hubbard, DVM	Bessemer, AL	Expiration of Term: 03-14-2028
J. Wesley Dunn, DVM	Montgomery, AL	Expiration of Term: 11-24-2028

Tammy S. Cargile

Tammy S. Cargile, Executive Director

Appendix IV: Board's Response



Tammy S. Cargile
Executive Director

ALABAMA STATE BOARD OF
VETERINARY MEDICAL EXAMINERS
8100 SEATON PLACE – SUITE A, MONTGOMERY, AL 36130-5330

Board Member

David Tyree, DVM
President
Addison, AL

August 17, 2026

Lisa Hethcox, LVT
Vice-President
Altoona, AL

Homer Bruce, DVM
Opelika, AL

J. Wesley Dunn, DVM
Montgomery, AL

Mrs. Rachel Laurie Riddle
Chief Examiner
State of Alabama Examiners of Public Accounts
401 Adams Avenue – Suite 280
Montgomery, AL 36104-4338

Thomas W. Fell, Jr., DVM
Mobile, AL

Re: Sunset Review "Matters of Concern from Questionnaires"

Ms. Brenda Glover
Greensboro, AL

Dear Mrs. Riddle:

Charles D. Hart, Jr., DVM
Trussville, AL

Tomeshia Hubbard, DVM
Bessemer, AL

Please find enclosed with this letter the Alabama State Board of Veterinary Medical Examiners (ASBVME) response to the "Matters of Concern from Questionnaires" that have been presented to the ASBVME Board after our most recent Sunset Audit.

Please do not hesitate to contact me should you have any questions pertaining to any of the responses to the significant issues.

Staff

Sincerely,

Ms. Tammy S. Cargile
Executive Director

Mr. John M. McCall
Executive Assistant

Ms. Malia Palama
Clerk

Mrs. Celia J. Dixon
Inspector / Investigator

Mr. Cody Smith
Inspector / Investigator

A handwritten signature in black ink, appearing to read "Tammy S. Cargile".

Tammy S. Cargile
Executive Director

enclosure

Matter of Concern 2026-001: Three of seven (42%) Board Members responding to our survey think Corporate Veterinary Medicine is the most significant issue facing the profession. Some of the noted concerns include risks posed by corporately owned veterinary interests having undue influence over the Board and how corporate medicine is affecting the quality of and cost of medicine for Alabamians.

ASBVME Response: The ASBVME Board agrees that corporate clinics are a major concern, but the ASBVME Board as a whole does not think they have excessive influence over this Board. They are a detriment to the consumer because those doctors in the corporate clinics cannot practice with the same autonomy as a private practitioner. The corporate clinics rely more on diagnostic tests instead of excellent physical examination skills. Those diagnostic tests are done to prevent dispute over a diagnosis, and the ASBVME Board understands that. However, those tests also add to the cost of services. The greatest tools any veterinarian or medical doctor has in their toolbox, are their hands, eyes, and ears. Corporate medicine is detracting from those basic skills that are so valuable in any type of medicine.

Matter of Concern 2026-002: Five of fifteen (33%) licensed veterinarians responding to our survey noted concerns about the continuing education requirements. Specific concerns noted included how many hours were required to be obtained each year and the form, i.e. in-person, virtual, and on demand, in which the hours had to be obtained.

ASBVME Response: In reviewing the ASBVMEs CE requirements as well as the CE requirements for most other states. The ASBVMEs requirement is annual CE hours. There are several other states that still require annual CE, but a lot of them also require CE every two years. Those that allow CE every two years, require a similar number of hours, but they are not required to receive all of those hours in one calendar year. Noting that many states require 35-45 hours every other year, which is basically the same as our 20 hours per year. A lot of states accept all of those hours as online courses. Some states limit the number of hours of online CE, Interactive online CE and in person attendance for CE. The ASBVME Board feels like our requirements should remain the same at this time. There is no replacement for in-person CE hours, this time allows veterinarians the opportunity to visit with vendors and have discussions with colleagues regarding new equipment, medications, surgical techniques, etc. At the majority of in-person CE meetings wet labs are provided where veterinarians can get hands on experience with the topics that are being discussed. A hands on experience is not available through online or interactive CE meetings. The ASBVME Board believes that the in-person CE meetings are also an excellent opportunity to learn and practice interpersonal communication skills. The ASBVME Board is of the belief that if interpersonal communication skills were used more then a large percentage of our complaint cases could be avoided. Many of our veterinarians now prefer to communicate with clients electronically, and that has caused a lot of complaints by the consumers. The ASBVME Board feels like the hands-on opportunities and the development of communication skills is vitally important to our veterinarians and the majority of the ASBVME Board would prefer to leave our CE requirements as they are now written.