BOARDS AND COMMISSIONS

Board of Veterinary Examiners

(Amended After Comments)

201 KAR 16:750. Licensed veterinary technicians (LVTs) -- Veterinary assistants -- Scope of practice and supervisory requirements.

RELATES TO: KRS 321.175, 321.190, 321.441, 321.443

STATUTORY AUTHORITY: KRS 321.235(2)(b)3.c., 321.441(3)(b)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 321.175 and 321.235 declare that the Kentucky Board of Veterinary Examiners shall protect the public by ensuring only qualified individuals are allowed to engage in the practice of veterinary technology <u>in</u> the Commonwealth to promote, preserve, and protect the public health, safety, and welfare. KRS 321.441 details that a license is required for veterinary technicians to practice veterinary technology in the Commonwealth. <u>KRS 321.190(1) provides that veterinary assistants may work in the Commonwealth without a veterinarian or veterinary technicians and veterinary assistants must be properly supervised when assisting a veterinarian with the practice of veterinary medicine. This administrative regulation sets forth the scope of practice <u>for licensed veterinary technicians (LVTs) and veterinary assistants</u> under various levels of veterinarian supervision to ensure the safety and welfare of animal patients, clearly define appropriate roles to be assigned by supervisors, and to provide confidence in basic care and support for clients.</u>

Section 1. Definitions.

- (1) "Direct supervision" is defined by KRS 321.181(59)(c).
- (2) "Immediate supervision" is defined by KRS 321.181(59)(b).
- (3) "Indirect supervision" is defined by KRS 321.181(59)(d).
- (4) "Veterinarian-client-patient relationship" or "VCPR" is defined in KRS 321.185.

Section 2. General Provisions.

- (1) Pursuant to KRS 321.190(7), a supervising veterinarian is individually and separately responsible and liable for the performance of the acts delegated to and the omissions of the licensed veterinary technician, veterinary assistant, or any other individual working under the veterinarian's supervision. Nothing in this subsection shall be construed to relieve licensed veterinary technicians, veterinary assistants, or any other individuals working under supervision of any responsibility or liability for any of their own acts or omissions.
- (2) Except as authorized by KRS 321.200, KRS 321.201, and subsection (3) of this administrative regulation, pursuant to KRS 321.190(6) nothing in KRS Chapter 321 or 201 KAR Chapter 16 shall be construed to permit an LVT, veterinary assistant, or any person who is not a veterinarian to perform any of the following activities relating to animals:
 - (a) Surgery;
 - (b) Diagnosis;
 - (c) Prognosis; or
 - (d) Prescription.
- (3) <u>Veterinary students enrolled in good standing in an approved veterinary medical program or veterinary technology students enrolled in good standing in an approved veterinary technology program may perform tasks related to curriculum advancement or preparation for a board approved national exam while under the direct supervision of a veterinarian or immediate supervision of an LVT.</u>

(4) Persons providing clinical care to patients shall comply with the medical record keeping requirements established in KRS 321.187 and 201 KAR 16:701.

Section 3. Restrictions on the use of Licensed Veterinary Technicians.

- (1) An LVT [A licensed veterinary technician (LVT)] may perform acts as assigned[the following acts as set forth in this administrative regulation] under the direction, supervision, and responsibility of a board-licensed veterinarian, who has established and maintains a current veterinarian-client-patient relationship (VCPR) with the patient and the client in accordance with KRS 312.185.
- (2) The veterinarian and LVT shall comply with the record keeping <u>requirements</u>[rule] established <u>in KRS 321.187 and [by the board in]</u> 201 KAR 16:701 (Standards for Medical Records).
- (3) The decision about the level of supervision required by an LVT is ultimately up to the discretion **and professional judgement** of the supervising veterinarian as long as:
 - (a) [The tasks assigned to the LVT do not provide a lower level of supervision than that which is prescribed in this administrative regulation;]
 - [(b)] The supervising veterinarian is confident in the level of training and trust in the LVT; and
 - (b) [(e)] The tasks assigned to the LVT are not otherwise prohibited by KRS Chapter 321, 201 KAR Chapter 16 and comply with all state and federal laws.
- [(4)] [Pursuant to KRS 321.443, a veterinary assistant under the employ of a board-licensed veterinarian may be assigned work similar to an LVT, as described in subsection (3) of this section, so long as the supervising veterinarian is confident in the level of training and trust in the veterinary assistant and their ability to competently and safely perform assigned tasks.]
- [(5)] [Except as authorized by KRS 321.200, nothing in KRS Chapter 321 or 201 KAR Chapter 16 shall be construed to permit an LVT or veterinary assistant, or any person who is not a veterinarian to perform any of the following activities relating to animals:]

(a) | Surgery;

(b) (Diagnosis;)

[(e)] [Prognosis; or]

(d) [Prescription.]

[Section 3.] [Immediate Supervision. Allowable animal healthcare tasks for LVTs under immediate supervision are:]

- [(1)] [Assisting the Veterinarian with surgical procedures; and]
- [(2)] [Placement of abdominal, thoracic, or PEG tubes.]

[Section 4.] [Direct Supervision. Allowable animal healthcare tasks under direct supervision are:]

[(1)] [Dental procedures including, at a minimum:]

[(a)] [The removal of calculus, soft deposits, plaque, and stains;]

[(b)] [The smoothing, filing, and polishing of teeth;]

[(e)] [Dental single root extractions not requiring sectioning of the tooth or sectioning of the bone;]

(d) | Suturing a gingival incision;

- (2) (Euthanasia; and)
- [(3)] [Placement of intraosseous eatheterization.]

[Section 5.] [Indirect Supervision. Telesupervision falls under the definition of indirect supervision. Allowable animal healthcare tasks under indirect supervision are:]

- [(1)] [General anesthesia and sedation, maintenance, and recovery;]
- [(2)] [Non-emergency endotracheal intubation;]

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(3) Regional anesthesia, including paravertebral blocks, epidurals, local blocks;
[(4)] [Placement of tubes, including at a minimum:]
  (a) | Gastric tubes;
  [(b)] [Nasogastric tubes; and]
  (c) | Nasocsophageal tubes;
[(5)] [Placement of epidural and nasal eatheters;]
[(6)] [Ear flushing with pressure or suction;]
(7) Application of casts, splints, and slings for the immobilization of fractures;
[(8)] [Administration of chemotherapy;]
[(9)] [Administration of radiation therapy;]
[(10)] [Intravascular catheterization through creation of a relief hole in the skin;]
[(11)] [Intra-arterial eatheterizations;]
(12) (Unless prohibited by state or federal regulation administration, preparation
and application of treatments, including at a minimum:
  (a) (Drugs;
  {(b)} {Medications;}
  (c) | Controlled substances;
  (d) (Enemas; and)
  (e) Biological and immunological agents,
(13) | Suturing, stapling, and gluing of an existing surgical skin incision;
(14) Fluid aspiration from a body cavity or organ, as known as cystocentesis;
(15)| (Intravenous catheterization, intra-arterial catheterization, and maintenance;)
[(16)] [Imaging, including at a minimum:]
  [(a)] [Radiography;]
  (b) (Ultrasonography;
  (e) | Computed tomography;
  (d) [Magnetic resonance imaging;]
  (e) [Fluoroscopy; and]
  [(f)] [Administration of radio-opaque agents/materials;]
[(17)] [Except when in conflict with state or federal law:]
  (a) (Collection of blood;
  [(b)] [Collection and preparation of cellular or microbiological samples by skin
  scrapings, impressions, or other non-surgical methods;
[(18)] [Collection of urine by expression, eatheterization (unobstructed), and
insertion of an indwelling urinary eatheter;
[(19)] [Monitoring, including at a minimum:]
  <del>[(a)]</del> <del>[ECG;]</del>
  (b) Blood pressure; and
  (c) (CO2 and blood oxygen saturation;
[(20)] [Clinical laboratory test procedures;]
[(21)] [Handling and disposal of biohazardous waste materials;]
[(22)] [Implantation of a subcutaneous identification chip;]
(23) [Laser therapy;]
[(24)] [Animal rehabilitation therapies;]
(25) Ocular tonometry, Schirmer tear test, and fluoresecin stain application;
(26) | Suture and staple removal:
[(27)] [Reproductive ultrasound, and semen evaluation;]
[(28)] [Floating equine teeth; and]
[(29)] [Tasks at the discretion of the veterinarian, which are not in contravention of
KRS 321.190 and 321.181(50).
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<u>Section 4. [Section 6.] Patient Emergency Care Provided by LVTs. [Emergency Animal Patient care.]</u>

- [(1)] A supervising veterinarian in emergency [animal patient] care situations may assign to an LVT under indirect supervision, via verbal communication or in accordance supervising veterinarian's written protocols, the following tasks until such time as the veterinarian is available on the premises to take over treatment:
- (1) {(a)} Application of tourniquets and/or pressure procedures to control hemorrhage;
- (2) ((b)) Application of appropriate wound dressings in severe burn cases;
- (3) {(e)} Resuscitative oxygen procedures;
- (4) {(d)} Anti-seizure treatment; and
- (5) (e) Supportive treatment in heat prostration cases; ...
- [(2)] [In emergency situations and while under the direct supervision of a veterinarian via verbal communication or in accordance supervising veterinarian's protocols, an LVT may:]
- (6) {(a)} Administer drugs to control pain and shock;
- (7) {(b)} Initiate and perform CPR and provide immediate post resuscitation care, including:
 - (a) [1.] Administration of medication; and
 - (b) [2.] Defibrillation according to protocols established in writing at the veterinary facility.

Section 5. Restrictions on the use of Veterinary Assistants.

- (1) Pursuant to KRS 321.443, a veterinarian may employ a veterinary assistant and assign work at the discretion of the supervising veterinarian, except for those tasks identified in subparagraph (2) of this section, so long as:
 - (a) The veterinary assistant is under the direction, supervision, and responsibility of a board-licensed veterinarian, who has established and maintains a current Veterinarian-Client-Patient Relationship (VCPR) with the patient in accordance with KRS 321.185;
 - (b) The tasks assigned to the veterinary assistant are at all times:
 - 1. Under the supervision of a veterinarian at a minimum supervisory level as detailed in subparagraphs (3) (5) of this section; or
 - 2. Under the immediate or direct supervision of an LVT;
 - (c) The supervising veterinarian or supervising LVT is confident in the level of training and trust in the veterinary assistant and their ability to competently and safely perform assigned tasks; and
 - (d) The tasks assigned to the veterinary assistant comply with all state and federal laws.
- (2) Under no circumstances shall a veterinary assistant be assigned the following tasks:
 - (a) Surgery;
 - (b) Diagnosis;
 - (c) Prognosis;
 - (d) Prescription;
 - (e) Euthanasia; or
 - (f) Tooth extractions of any kind.
- (3) A supervising veterinarian or LVT may assign to a veterinary assistant the following tasks under immediate supervision.
 - (a) Regional anesthesia, including paravertebral blocks, epidurals, local blocks;
 - (b) Fluid aspiration from a body cavity or organ, known as centesis;
 - (c) Small animal reproductive ultrasound, and semen collection; and

- (4) A supervising veterinarian or LVT may assign to a veterinary assistant the following tasks under direct supervision.
 - (a) Unless prohibited by state or federal regulation administration, preparation and application of treatments prescribed by a veterinarian, including:
 - 1. Controlled substances; and
 - 2. Enemas;
 - (b) Maintenance and recovery tasks following veterinarian or LVT administration of general anesthesia and sedation;
 - (c) Non-emergency endotracheal intubation and extubation;
 - (d) Imaging, including at a minimum:
 - 1. Computed tomography (CT); and
 - 2. Magnetic resonance imaging (MRI);
 - 3. Radiography;
 - 4. <u>Ultrasonography</u>;
 - 5. Fluoroscopy; and
 - 6. Administration of radio-opaque agents/materials;
 - (e) Floating equine teeth;
 - (f) Ocular tonometry, Schirmer tear test, and fluorescein stain application; and
 - (g) Tasks at the discretion of the veterinarian, which are not in contravention of KRS 321.190, 321.181(50), 321.443, and this administrative regulation.
- (5) A supervising veterinarian may assign to a veterinary assistant the following tasks under indirect supervision.
 - (a) Unless prohibited by state or federal law, the administration, preparation and application of treatments prescribed by a veterinarian, including:
 - 1. Drugs;
 - 2. Medications; and
 - 3. Biological and immunological agents;
 - 4. Collection of blood; and
 - 5. Collection and preparation of cellular or microbiological samples by skin scrapings, impressions, or other non-surgical methods;
 - (b) Intravenous catheterization and maintenance;
 - (c) Collection of urine by voided sample;
 - (d) Monitoring, including at a minimum:
 - 1. Electrocardiogram (ECG);
 - 2. Blood pressure; and
 - 3. CO2 and blood oxygen saturation;
 - (e) Clinical laboratory test procedures;
 - (f) Handling and disposal of biohazardous waste materials;
 - (g) Implantation of a microchip;
 - (h) Laser therapy;
 - (i) Animal rehabilitation therapies; and
 - (j) Suture and staple removal.
- Section 6. Patient Emergency Care Provided by Veterinary Assistants. A supervising veterinarian in emergency care situations may assign to a veterinary assistant who they employ and who is under the veterinarian's direct supervision, via verbal communication and in accordance supervising veterinarian's written protocols, the following tasks:
 - (1) Application of tourniquets and/or pressure procedures to control hemorrhage;
 - (2) Application of appropriate wound dressings in severe burn cases;
 - (3) Resuscitative oxygen procedures;
 - (4) Anti-seizure treatment;

- (5) Supportive treatment in heat prostration cases;
- (6) Administration of drugs to control pain and shock in accordance with state and federal laws; and
- (7) <u>Initiation and performance of CPR and performance of immediate post resuscitation care, including:</u>
 - (a) Administration of medication; and
 - (b) <u>Defibrillation according to protocols established in writing at the veterinary facility.</u>

MICHELLE M. SHANE, Executive Director For JOHN C. PARK, DVM, Board Chair

APPROVED BY AGENCY: November 13, 2023 FILED WITH LRC: November 13, 2023 at 11:30 a.m.

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REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

Contact Person: Michelle Shane

(1) Provide a brief summary of:

(a) What this administrative regulation does:

This administrative regulation establishes the level of supervision required for various veterinary medicine tasks assigned by a supervising veterinarian to a licensed veterinary technician or veterinary assistant.

(b) The necessity of this administrative regulation:

This administrative regulation is necessary to establish clearly delineated tasks that a veterinarian may safely assign to veterinary technicians and veterinary assistants, ensuring that the employees are utilized to the fullest extent of their abilities and help reduce workload pressures on veterinarians.

(c) How this administrative regulation conforms to the content of the authorizing statutes:

KRS 321.235, 321.351, 321.360, 321.990 specifically direct the board enforce the provisions of KRS Chapter 321 and impose penalties, where appropriate. KRS 321.235 authorizes the board promulgate administrative regulations to carry out the provisions of the chapter.

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes:

This administrative regulation shall assist in effective administration by clearly detailing the tasks a veterinarian can safely and confidently assign to staff.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

- (a) How the amendment will change this existing administrative regulation:
 - This is a new administrative regulation.
- (b) The necessity of the amendment to this administrative regulation:

This is a new administrative regulation.

- (c) How the amendment conforms to the content of the authorizing statutes: This is a new administrative regulation.
- (d) How the amendment will assist in the effective administration of the statutes: This is a new administrative regulation.
- (3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation:
 - 2,690 veterinarians, 590 licensed veterinary technicians, and future applicants.
- (4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:
 - (a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment:

Licensees identified in question (3) generally work together in a veterinary facility. This new administrative regulation establishes the level of supervision required for licensed veterinary technicians (LVTs) and veterinary assistants, increasing work efficiencies. Veterinarians shall be required to assign tasks, and LVTs and veterinary

assistants shall be required work within the supervisory parameters established in this administrative regulation.

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3):

There shall be no additional costs imposed as a result of this administrative regulation.

(c) As a result of compliance, what benefits will accrue to the entities identified in question (3):

Administrative ease of clear communications of the approved requirements.

- (5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:
 - (a) Initially:

No costs are anticipated.

(b) On a continuing basis:

No costs are anticipated.

(6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation:

This administrative regulation does not establish fees. Funding for the KBVE comes from licensure and certification fees.

(7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment:

There is no anticipation of an increase in fees or needed funding to implement this administrative regulation, as the regulation establishes supervisory requirements only.

(8) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees:

No fees are established or increased by this administrative regulation.

(9) TIERING: Is tiering applied?

No. All regulated entities have the same requirements.

FISCAL NOTE

(1) What units, parts, or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation?

The Kentucky Board of Veterinary Examiners.

(2) Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation.

KRS 321.235, 321.351, 321.360, 321.441, 321.990.

- (3) Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect.
 - (a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for the first year?

No revenue will be generated from this filing.

(b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years?

No revenue will be generated from this filing.

- (c) How much will it cost to administer this program for the first year? This is not a new program. There are no costs involved.
- (d) How much will it cost to administer this program for subsequent years? There are no costs involved.

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Revenues (+/-):None.

Expenditures (+/-):None or negligible.

Other Explanation:

n/a

- (4) Estimate the effect of this administrative regulation on the expenditures and cost savings of regulated entities for the first full year the administrative regulation is to be in effect.
 - (a) How much cost savings will this administrative regulation generate for the regulated entities for the first year?

There will be no cost savings; this amendment simply codifies the requirements, making them easily accessible for regulated entities.

(b) How much cost savings will this administrative regulation generate for the regulated entities for subsequent years?

There will be no cost savings.

(c) How much will it cost the regulated entities for the first year?

There will be no additional costs involved.

(d) How much will it cost the regulated entities for subsequent years?

There will be no additional costs involved.

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Cost Savings (+/-):None.

Expenditures (+/-):None or negligible.

Other Explanation:

n/a

(5) Explain whether this administrative regulation will have a major economic impact, as defined below.

"Major economic impact" means an overall negative or adverse economic impact from an administrative regulation of five hundred thousand dollars (\$500,000) or more on state or local government or regulated entities, in aggregate, as determined by the promulgating administrative bodies. [KRS 13A.010(13)] This amendment shall not have a "major economic impactâ€, as defined in KRS 13A.010(13).