



CALIFORNIA VETERINARY MEDICAL BOARD MEETING MINUTES July 16-17, 2025

In accordance with Government Code section 11122.5, subdivision (a), the California Veterinary Medical Board (Board) met in-person with additional public participation available via teleconference/WebEx Events on **Wednesday, July 16, 2025**, and **Thursday, July 17, 2025**, with the following location available for Board and public member participation:

Department of Consumer Affairs
1625 North Market Boulevard, Hearing Room
Sacramento, CA 95834

10:00 a.m., Wednesday, July 16, 2025

Webcast Link:

- Agenda Items 1-12 and 17 (<https://youtu.be/h3oILsYaA6w>)

1. **Call to Order / Roll Call / Establishment of a Quorum**

Board President, Maria Preciosa S. Solacito, Doctor of Veterinary Medicine (DVM), called the meeting to order at 10:00 a.m. Executive Officer (EO), Jessica Sieferman, called roll, and six members of the Board were present; a quorum was established.

Members Present

Maria Preciosa S. Solacito, DVM, President
Kristi Pawlowski, Registered Veterinary Technician (RVT), Vice President
Christina Bradbury, DVM
Patick Espinoza, Esq.
Steven Manyak, DVM
Evelyn Mitchell, Mayor

Student Liaisons Present

Sebastian Lidikay, University of California, Davis (UC Davis)
Anna Styles, Western University of Health Sciences (Western University)

Board Staff Present

Jessica Sieferman, EO
Matt McKinney, Deputy EO

Alicia Hernandez, Administration/Licensing Manager
Patty Rodriguez, Enforcement Manager
Ashley Sanchez, Enforcement Manager
Justin Sotelo, Policy Specialist
Rob Stephanopoulos, Enforcement Manager
Susan Aklin, Licensing Technician
Andrea Amaya-Torres, Enforcement Analyst
Stephanie Doerr, Enforcement Analyst
Nellie Forget, Enforcement Analyst
Jacqueline French, Enforcement Analyst
James Howard, DVM, Board Veterinarian Consultant
Brett Jarvis, Enforcement Analyst
Amber Kruse, Enforcement Analyst
Anh-Thu Le, Enforcement Analyst
Robert Rouch, Enforcement Analyst
Bryce Salasky, Enforcement Analyst
Daniel Strike, Enforcement Analyst
Zakery Tippins, Enforcement Analyst
Phillip Willkomm, Special Investigator

Department of Consumer Affairs (DCA) Staff Present

Suzanne Balkis, Budget Manager, Budget Office
Elizabeth Dietzen-Olsen, Regulations Counsel, Attorney III, Legal Affairs Division
Sarah Irani, Moderator, Strategic Organizational Leadership and Individual Development (SOLID)
Bryce Penney, Television Specialist, Office of Public Affairs (OPA)
Jennifer Tompkins, Budget Analyst, Budget Office
Tara Welch, Board Counsel, Attorney IV, Legal Affairs Division

Guest Presenters

Judie Bucciarelli, Staff Services Manager, DCA, Executive Office, Board and Bureau Relations
Marie Ussery, RVT, Chair, Multidisciplinary Advisory Committee (MDC)

Guests Present

Brittany Benesi, American Society for the Prevention of Cruelty to Animals
Kathy Bowler, Member, MDC
Carrie Ann Calay
Emma Clifford, Founder and Executive Director, Animal Balance
Pam Collier, RVT, Ethos Veterinary Health
DMc

Nancy Ehrlich, RVT, California Registered Veterinary Technicians Association (CaRVTA)
Chazney Johnson
Carissa Jones, DVM, Chief Veterinarian, Orange County Animal Care
Brina Lopez, Veterinarian Specialist (General), California Department of Food and Agriculture (CDFA), Animal Health and Food Safety Services (AHFSS), Antimicrobial Use and Stewardship (AUS) Program
Edie Marshall, DVM, Branch Chief, CDFA, AHFSS, AUS
Grant Miller, DVM, Director of Regulatory Affairs, California Veterinary Medical Association (CVMA)
Katelyn Morita, UC Davis
Katie Murray, DVM, CDFA, AHFSS, AUS
Jeff Pollard, DVM
Kaitlyn Preston, Legislative Aide, Norwood Associates
Amy Rice, RVT
Laura Searle-Barnes, DVM, Not Just 4 Paws Animal Hospital
Marissa Silva, DVM, CDFA, AHFSS, AUS
Molly Stadum, Staff Counsel, San Francisco Society for the Prevention of Cruelty to Animals (SFSPCA), Shelter Policy and Legal Service
Andrei Tarassov, DVM, Olympus Cove Veterinary Clinic
Aileen Thompson, DVM, Blue Oaks Veterinary Clinic
Beth Venit, Veterinariae Medicinae Doctoris (VMD), American Association of Veterinary State Boards (AAVSB)
Scott Young, Summit / Pharma Policy Center

Dr. Solacito opened with a land acknowledgement, recognizing the Nisenan, Southern Maidu, Valley and Plains Miwok, Patwin Wintun Peoples, and Sacramento's only federally recognized tribe, the Wilton Rancheria. She honored their enduring stewardship of the land and emphasized the Board's commitment to respectful collaboration with tribal nations on shared concerns.

2. Public Comment on Items Not on the Agenda

Dr. Solacito reminded participants that public comments should not address pending complaints, licensing applications, or disciplinary matters, as Board members cannot discuss or act on such issues during this time. She clarified that the comment period is for providing information, not for dialogue with the Board.

She also urged speakers to be respectful and mindful of their tone, recognizing that topics may be personal or contentious. Emphasizing the Board's mission to protect consumers and animals, she thanked everyone for their cooperation and welcomed their input.

Public Comment: Dr. Solacito requested public comment on this item.

Ms. Siefertman reminded members that the Board had received written public comments from a couple of entities, and that these comments were included in the meeting materials and posted [online](#) as well.

The following public comments were made on this item:

- [Carissa Jones](#), DVM, Chief Veterinarian, Orange County Animal Care, provided the Board with the following public comment:

Dr. Jones urged Board members to consider the importance of high-volume spay and neuter services and to update existing regulations around surgical standards and setup requirements, particularly for Mobile Animal Sterilization Hospital (MASH)-type clinics and community-based events.

She emphasized that pet overpopulation is a critical issue in California, with thousands of dogs and cats ending up in shelters each year, many of which are euthanized due to lack of space and resources. She stated that high-volume spay and neuter events are effective in addressing this issue by preventing unwanted litters, reducing shelter intake, and ultimately saving lives. These events also promote access, equity, and public health, especially in underserved communities that lack access to traditional veterinary services due to costs, transportation barriers, or clinic shortages.

Dr. Jones pointed out that current regulations make it unnecessarily difficult to carry out these events. She argued that updated requirements around surgical suite setups, equipment redundancy, and facility types often do not account for the proven safety protocols and success of mobile and MASH-style operations. These regulations were designed with brick-and-mortar practices in mind and do not reflect the capabilities of modern, high-volume teams led by licensed, experienced professionals working with evidence-based guidelines.

She clarified that she is not advocating for lowering standards, but for modernizing regulations to reflect current best practices. Other states have found ways to support high-volume programs without compromising animal welfare. Dr. Jones urged the Board to consult with veterinarians specializing in shelter and community medicine, as well as nonprofit organizations, that run these lifesaving events. She called for collaboration to ensure regulations strike the right balance, protecting animals while allowing for scalable, accessible, and sustainable care models that benefit both pets and people.

She concluded by thanking the Board members for their time and commitment to consumer protection and to the health and well-being of California animals.

- [Emma Clifford](#), Founder and Executive Director, Animal Balance, provided the Board with the following public comment:

Ms. Clifford thanked the Board for the opportunity to speak. She mentioned that Animal Balance and the SFSPCA had sent the Board a packet of information requesting an allowance for MASH clinics, as an exemption to current regulatory requirements for surgical suites.

She explained that Animal Balance is an international organization founded in 2004, providing high-quality, high-volume spay and neuter services worldwide, including in California. Using the MASH clinic model, Animal Balance has been able to consistently sterilize over 60 animals per day or 200 over a three-day clinic.

Current California regulations require surgery suites to have walls and a closed door, which prevents the use of buildings like gymnasiums or community centers that are one large room and found in every community across California. This regulation is a significant barrier to accessing affordable veterinary care, as MASH clinics are designed to be inclusive, accessible, and affordable.

To demonstrate the safety of MASH clinics, Ms. Clifford noted that Animal Balance's current post-operative complication rate is 0.9%, and the infection rate is 0.1%. She compared this to the Royal College of Veterinary Medicine's average complication rate for spay and neuter surgeries of 2.6% and a UC Davis study reporting a 2.5% infection rate.

Ms. Clifford highlighted the need for more spay and neuter services in California due to the crisis in access to veterinary care, especially for the hundreds of thousands of animals in shelters needing spaying or neutering before adoption. She pointed out that shelters and supporting nonprofits are financially overwhelmed, and the pet-loving community cannot afford regular veterinary prices for spay and neuter surgeries, which range from \$600 to \$2,000 per surgery. Additionally, one dog can have two litters of approximately six puppies per year, and people want the service, but may not be able to afford it or be able to travel with their pets for sterilization.

Ms. Clifford respectfully requested that the Board review the information sent and reach out with questions to work together on making the exemption that would allow MASH organizations to use one room for all activities. She thanked the Board for their time and for reviewing the packet previously sent.

- [Laura Searle-Barnes](#), DVM, Not Just 4 Paws Animal Hospital, provided the Board with the following public comment:

Dr. Searle-Barnes thanked Dr. Solacito and Board members for the opportunity to speak. She highlighted a growing crisis in veterinary care in California, which is also a national issue, directly harming consumers. She pointed out the discriminatory pricing practices of major veterinary pharmaceutical companies

like Zoetis, Elanco, Boehringer Ingelheim, and Merck, which offer significant discounts (30-90%) to large corporate-owned veterinary hospital chains, while denying the same prices to independently owned clinics. Independent clinics can only get rebates, not upfront discounts, meaning they pay much higher prices for the same drugs.

Dr. Searle-Barnes explained that this forces independent clinics to pass the inflated costs onto their clients or absorb them, making veterinary care less accessible, affordable, and competitive. This situation drives up the cost of pet care for millions of Californians, reduces consumer choice by pushing independent clinics out of business, and creates regional monopolies where only corporate hospitals remain. This disproportionately affects rural and low-income communities that rely on independent providers.

She noted that, under California law, such conduct appears to be illegal. The Cartwright Act prohibits business combinations that restrain trade, the Unfair Competition Law bans practices unfair to consumers, and the Robinson-Patman Act prohibits discriminatory pricing that harms market competition. Dr. Searle-Barnes emphasized that the Board has a public protection mission that extends beyond clinical oversight. When corporations and manufacturers engage in pricing schemes that restrict access to care and inflate costs, the Board has a duty to investigate.

She urged the Board to lead, stating that Californians trust them not only to license veterinarians, but also to protect their ability to access fair, ethical, and affordable care. She concluded by thanking the Board.

3. [Review and Approval of April 16-17, 2025 Board Meeting Minutes](#)

Ms. Pawlowski provided one minor correction to the [April 16-17, 2025 meeting minutes](#).

Motion: Christina Bradbury, DVM, moved and Kristi Pawlowski, RVT, seconded a motion to approve the April 16-17, 2025 meeting minutes, as amended.

Public Comment: Dr. Solacito requested public comment on the motion. There were no public comments made on the motion.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 5-0-1 with Mayor Mitchell abstaining.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Steven Manyak, DVM	X			
Evelyn Mitchell, Mayor			X	

4. [Report and Update from Department of Consumer Affairs \(DCA\)](#)

Judie Bucciarelli, Staff Services Manager, Executive Office, Board and Bureau Relations, thanked the Board for the opportunity to provide the following DCA update:

- **Governor's Reorganization Plan:** In January 2025, Governor Gavin Newsom proposed splitting the Business, Consumer Services and Housing Agency (Agency) into two agencies: the California Housing and Homelessness Agency and the Business and Consumer Services Agency. The plan was enacted on July 5, 2025, and takes effect July 1, 2026. DCA will be one of eight departments under the new Business and Consumer Services Agency and is participating in transition planning.
- **Hybrid Telework Transition:** A March 2025 executive order increased in-office workdays from two to four per week starting July 1, 2025. However, union agreements delayed implementation by one year. DCA continues biweekly meetings with board and bureau leadership to support the transition.
- **Travel Updates and Reminders:** As of June 2025, out-of-state travel is limited to essential business. DCA outlined criteria for mission-critical travel and requires requests to be submitted eight weeks in advance. Staff are encouraged to minimize costs through carpooling and must keep receipts for reimbursable expenses like baggage fees. Travel questions should be directed to Member Relations.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

5. **Review, Discussion, and Possible Action on Multidisciplinary Advisory Committee (MDC) Report—Marie Ussery, RVT, Chair, MDC**

A. [Overview of July 15, 2025 MDC Meeting](#)

Ms. Ussery provided the Board with an overview of the [July 15, 2025 MDC meeting](#) as follows:

- **Meeting Overview:** The meeting was called to order at 10:00 a.m. There were no public comments on items not on the agenda. The April 15, 2025 MDC meeting minutes were reviewed and approved with minor amendments. Ms. Ussery provided an update to the MDC on the Board's feedback and decisions from the report given at the April 2025 Board meeting.
- **RVT Subcommittee Update:** Ms. Ussery mentioned that she would cover the RVT Subcommittee items in greater detail under Agenda Items 5.B. and 5.C.
- **Inspections Subcommittee Update:** The Inspections Subcommittee presented drafts of self-evaluation checklists and asked for feedback from the MDC. Ms. Ussery stated that this information would be presented under Agenda Item 5.D.
- **Complaint Audit Subcommittee Update:** From February to April 2025, consultants reviewed 121 cases: 57 closed with no violation, 12 closed with educational letters, six closed due to insufficient evidence, and 46 referred for expert review—a 20% increase in reviews since the last roundtable. No violation closures dropped 12%, while expert referrals more than doubled. Pending consultant reviews slightly decreased to 898 cases involving 724 respondents.

Experts reviewed 159 cases: 46 closed with no violation, 30 closed with educational letters, seven cited (six respondents), and 74 sent to the Office of the Attorney General (OAG) for action (12 respondents). This reflects a 26% increase in reviews, over 50% more no violation closures, similar educational/insufficient evidence outcomes, one-third fewer citations, and 40% more OAG referrals. There are 656 cases (440 respondents) awaiting expert review.

Consultant and expert roundtables were held on May 21 and 22, 2025, respectively, to provide guidance. The Subcommittee reviewed four finalized cases to identify strengths and improvement areas for expert feedback.

At the June 6, 2025 meeting, the Subcommittee received an update on Strategic Plan Objective 3.3 (tracking complaint types), which remains in progress with the BreEZe team.

Roundtable discussions included the accepted standard of care versus regulation. The Subcommittee referred two topics to the MDC for potential regulatory changes:

- **Condition-Specific Veterinarian-Client-Patient Relationship (VCPR):** The first topic was whether the VCPR should be condition specific.

A scenario was presented where a veterinarian examined and administered vaccinations to a healthy dog during its annual wellness visit. Four months later, the clients called the veterinary clinic to report the dog had diarrhea for four days, despite a bland diet. The clients reported the

dog was eating normally, not vomiting, and had normal energy levels. The veterinarian, unable to see the dog immediately, recommended the clients submit a fecal sample for the animal patient, which tested positive for Giardia. The veterinarian called the clients to discuss the results and prescribed medication without a new VCPR for the Giardia condition.

The roundtable veterinarians agreed that filling the prescription was acceptable, even though a new VCPR to treat the diarrhea was not established, thus the standard of care was established. However, there was no consensus on the MDC on whether the VCPR should be condition specific.

It was noted that only two states (California and Oregon) require a condition-specific VCPR. Dr. Grant Miller on behalf of CVMA provided public comment that the condition-specific VCPR was one of the biggest things affecting access to care and hinted that later this year, CVMA will be discussing the possibility of proposed legislation to address this. Dr. Miller did not believe that any wording in the Veterinary Medicine Practice Act needed to be changed to interpret Business and Professions Code (BPC) section 4826.6, subdivisions (a)(2) and (b), more broadly. Dr. Miller stated the authority needs to be put back into the hands of the veterinarians to decide what is required to be seen and what is not based on the previous history with the animal. Nancy Ehrlich for CaRVTA agreed with CVMA's concerns, recalling that this was the practice when she first entered the field. She questioned why the VCPR became condition specific and emphasized the importance of lowering fees for clients. The EO provided clarification on the history of the language.

- **Clinic Staff Signing on Behalf of Treating Veterinarians and Type of Signature:** The second topic dealt with clinic staff signing on behalf of treating veterinarians and whether the type of signature made a difference.

This scenario was tabled for discussion during the CDFA Subcommittee report, as CDFA brought forth a similar topic.

Discussion: The Board discussed the topic of condition-specific VCPRs as follows:

Ms. Sieferman clarified that the VCPR statute refers to the animal's medical condition in the singular, a long-standing interpretation. During telemedicine discussions, there was agreement that the VCPR is condition specific. The MDC and Board are now considering whether to maintain this or revise the statute to allow a broader interpretation.

Dr. Bradbury supported the CVMA's view and suggested a time limit, such as annual contact or examinations. As an internist, she noted that treating one

condition often reveals others, and veterinarians can judge when an in-person visit is necessary.

Dr. Manyak agreed, emphasizing the importance of standard of care over strict legal interpretation. He argued that if the law overrides clinical judgment, expert witnesses become irrelevant, and the profession should be guided by its training and evolving standards.

Ms. Pawlowski echoed this, noting the profession is evolving. She referenced prior MDC discussions on the spectrum of care, stressing that while the law is fixed, the standard of care is fluid and adapting.

She added that while telemedicine was initially implemented with broad consensus, the profession must now evolve together to meet new challenges and maintain alignment with current practices.

Dr. Bradbury cited an example where strict adherence to the condition-specific rule could delay care or force costly emergency visits, ultimately harming consumers and patients.

Ms. Sieferman shared that some subject matter experts (SMEs) noted a gap between what they would do and what others avoid due to legal concerns, highlighting a conflict between the statute and standard of care. She suggested the statute may need reevaluation.

Dr. Solacito recalled earlier concerns about telemedicine guardrails, which led to the condition-specific rule. Now, with new concerns raised, she believes it is time to reconsider and possibly broaden the VCPR definition.

Ms. Sieferman concluded that the Board could choose to refer this issue to the MDC for further review.

Public Comment: Dr. Solacito requested public comment on the topic of condition-specific VCPRs.

The following public comment was made on this item:

- [Nancy Ehrlich](#), RVT, CaRVTA, mentioned that she might be the only one who remembers when the VCPR was defined differently. It used to be that the veterinarian was expected to examine the animal once a year to maintain the VCPR, and that worked very well for their practice. The technician would be able to see the animal for a simple problem because the animal had been examined by the veterinarian. In situations like when a client calls, they could send medication home because they knew the animal.

She added that was a surprise to all of them when the VCPR was redefined, and she did not recall any justification for it other than a new legal counsel making a new interpretation. She noted that if you read the actual laws and regulations, nothing in them say that the animal has to be examined every time prior to administering any sort of treatment. She urged the Board to go back to what worked for most of the life of the Board, which was maintaining the VCPR for one year.

Dr. Solacito stated that the Board would ask the MDC to continue working on this issue.

Ms. Ussery [continued](#) with her overview of the [July 15, 2025 MDC meeting](#) as follows:

- **Outreach Subcommittee Update:** In May 2025, the Subcommittee met with UC Davis students to discuss spectrum of care, laws, and the VCPR. They plan on giving a similar talk at a local VMA in September. The current focus for the Subcommittee has been on unlicensed activity at dog shows, especially as it relates to reproductive services. This is still in the investigation and research phase, but they would like to address it by providing informational materials to consumers.
- **CDFA Subcommittee Update:** Ms. Ussery shared that the Subcommittee met with CDFA the previous Friday. CDFA raised concerns about veterinary feed directives (VFDs) containing unauthorized or forged veterinarian signatures.

This prompted questions about acceptable signature types under Code of Federal Regulations, Title 21, Part 11 (21 CFR Part 11). CDFA contacted the Food and Drug Administration (FDA) for guidance and wanted to involve the Board to consider possible outreach or legislation. Their goal is to protect veterinarians and the food supply without adding burdens.

Ms. Ussery linked this to a Complaint Process Audit Subcommittee case where a relief veterinarian's name was used on a prescription they did not authorize. A chart showed signature types and their compliance with 21 CFR Part 11, raising the question of whether guidance is needed.

The discussion noted that any signature type can be forged, even typed names. Dr. Nunez reminded the group that veterinarians are currently exempt from electronic prescription submission and warned that changes could reopen that issue. MDC members were interested in how other boards handle this. Ms. Sieferman had contacted the Medical Board of California (MBC), but had not received a response.

Discussion: The Board discussed the topic of signatures on VFDs as follows:

Ms. Pawlowski recommended keeping the item with the MDC, citing a lack of information on signature requirements. She referenced veterinary practice software where signatures are integrated and expressed concern about moving forward without more background.

She also noted Dr. Waterhouse's example of using a digital signature to buy a house, highlighting their legal weight. Due to these concerns, she felt the Board should not act without further MDC research.

Dr. Manyak questioned why the Board was involved at all, suggesting signature issues are internal business matters and should be standardized across professions.

Dr. Solacito agreed, sharing that her relief veterinarian has a contract limiting signature use. She noted that internal agreements and policies already exist, and the current guideline is too broad, especially given the common use of electronic signatures.

Dr. Bradbury said electronic signatures are standard today and should not be an issue. She emphasized that forgery is illegal, but internal misuse should be handled within the practice.

Ms. Sieferman clarified that while one case involved forgery, the broader issue is confusion over what types of signatures are acceptable and who can sign. SMEs were split—some accepted stamps or e-signatures with veterinarian awareness, others did not—highlighting inconsistency in the field.

She added that other boards she has worked with accepted all signature types, though their laws predated e-signatures. She stressed the need for clarity, especially if FDA rules deem certain practices violations, and recommended MDC explore legal changes or outreach.

Dr. Solacito suggested waiting for a response from the MBC and returning the item to the MDC for final review and recommendation.

Dr. Manyak agreed to send it back but only for outreach purposes, opposing any regulatory or policy changes.

Ms. Pawlowski said her stance depends on the MDC's findings. She emphasized that next steps—whether outreach or policy—should be based on the substance of the information gathered.

Public Comment: Dr. Solacito requested public comment on the topic of signatures on VFDs. There were no public comments made on this topic.

Ms. Ussery [continued](#) with her overview of the [July 15, 2025 MDC meeting](#) as follows:

- **Additional CDFA Subcommittee Update:** Ms. Ussery shared that community blood banks provide 5% of blood products. All three have re-registered and remain active. No new blood banks have opened, but one premises has expressed interest.
- **Future Agenda Items and Meeting Dates:** Ms. Ussery noted no current action items, though subcommittees are working on outreach materials. Future topics may include drug diversion loopholes, medical record requirements, and revisiting VCPR and signature issues discussed today.

**B. [Recommendation to Amend Assembly Bill \(AB\) 1502 \(Berman, 2025\)](#)
[Veterinary Medicine: California Veterinary Medical Board; Business and Professions Code Section 4841.5](#)**

Ms. Ussery presented the [meeting materials](#) to the Board. Additionally, she provided the following [update](#) from the July 15, 2025 MDC meeting:

- **Program for the Assessment of Veterinary Education Equivalence (PAVE) Program Removal:** During the MDC discussion, it was noted that the PAVE program no longer exists. A recommendation was made to remove that option from the statute, but it was determined that it is too late in the legislative process to include the change at this time. However, this issue can be addressed later through a committee bill for cleanup.
- **Proficiency Checklist for Reciprocity:** During public comment, Dr. Miller from CVMA raised concerns about removing the proficiency checklist for reciprocity. He emphasized that RVT scopes of practice vary by state, and it cannot be assumed that all RVTs possess the same skills. The RVT Subcommittee and the MDC shared concerns that eliminating the checklist could discourage RVTs from entering the state and worsen existing workforce challenges.
- **Alternate Pathway and Skill Attestation:** It was clarified that applicants using the alternate pathway would still be required to attest to their skills. All applicants must have completed their education, and this discussion pertains to those who have met educational requirements and passed the Veterinary Technician National Exam (VTNE).
- **Veterinarian Supervision:** It was also noted that the supervising veterinarian is ultimately responsible for determining which tasks an RVT can perform based on their proficiency. This supervisory role helps ensure safety and accountability, even with differences in RVT training and responsibilities across states.

- **Board Action Request:** Ms. Ussery concluded by requesting that, if the Board agrees with the recommendations, a motion be made to ratify the proposed amendments to BPC section 4841.5 as outlined in the June 25, 2025 version of AB 1502.

Discussion: The Board discussed the agenda item and legislative amendments as follows:

- **Status of Amendments:** It was pointed out that the changes being discussed had already been made and are currently included in AB 1502. Because of this, they felt there was not much need for further discussion, as the matter had already been addressed.
- **Legislative Flexibility:** It was clarified that if Board members had concerns, they could still request changes. While those changes might not be incorporated into AB 1502 at this stage, they could be included in a future omnibus bill.
- **PAVE Program Concern:** A concern was raised regarding the PAVE program, which is no longer offered by the AAVSB for RVTs. Since this pathway is still referenced in current language, it was suggested that it be removed in a future omnibus bill, as it is no longer a valid option for registration.
- **Support for Proficiency Checklist:** Dr. Bradbury expressed agreement with Dr. Miller's comments supporting the proficiency checklist. She emphasized that the checklist would be helpful for veterinarians to understand what they are expected to vouch for when supervising RVTs, reinforcing accountability and clarity.
- **Clarification on Alternate Pathway Requirements:** It was explained that the checklist requirement applies to those using the alternate pathway. However, under the proposed language, even RVTs who graduated from accredited programs and passed the examination over five years ago would be required to obtain supervisor attestations—something not currently required by law.
- **Concerns About Adding New Requirements:** It was questioned why requiring the checklist would be problematic. The response was that adding this requirement would introduce a new burden without a clearly defined consumer protection need, especially since it is not currently required for accredited graduates.
- **Timing and Board Authority:** There was some confusion about the legislative process and the Board's role. It was clarified that the amendments were made by the Senate Business, Professions and Economic Development Committee on July 1 and are already in the bill. The Board was being asked

to ratify them, and the Executive Committee has authority to act on behalf of the Board when legislative timelines move faster than Board meetings.

- **Origin of the Checklist Requirement:** It was asked why the checklist was included if it was not necessary. It was explained that its inclusion was an oversight due to confusion with alternate pathway requirements. The Subcommittee had not intended for the requirement to apply to graduates of accredited programs.
- **Subcommittee Deliberation:** It was emphasized that the Subcommittee, including Leah Shufelt, RVT, and Dr. Solacito, had discussed the issue thoroughly. They had reviewed the language multiple times under different conditions and initially supported the checklist before later determining it was not appropriate.
- **Supervision and Consumer Protection:** A member of the MDC noted that veterinarians are always responsible for supervising RVTs. Because of this built-in oversight, they felt there was not a strong consumer protection justification for requiring a new checklist process for all applicants.

Motion: Dr. Solacito requested a motion. Kristi Pawlowski, RVT, moved and Patrick Espinoza, Esq., seconded a motion that the Board ratify the proposed amendments to BPC section 4841.5 in the June 25, 2025 version of AB 1502.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comments were made on the motion:

- [Grant Miller](#), DVM, Director of Regulatory Affairs, CVMA, provided the following public comment:

Dr. Miller thanked Dr. Bradbury for her comments and acknowledged that he had shared similar concerns the previous day, particularly about the importance of having thoughtful discussion before removing the checklist requirement. He emphasized that if the checklist was initially included and the Board had been considering that pathway, it was important to understand the reasoning behind taking it out.

However, Dr. Miller stated that after hearing the MDC's discussion, he agreed that the rationale made sense. He noted that many RVTs have gone to school, some have completed an alternate pathway in their state, and all have passed a licensing examination. Additionally, they are under the oversight of a veterinarian. Based on these factors, he felt it was satisfactory to agree that, in this specific circumstance, the checklist is not necessary. He thanked the Board for revisiting the issue and stressed the importance of understanding the nuances involved with each group of applicants.

- [Nancy Ehrlich](#), RVT, CaRVTA, provided the following public comment:

Ms. Ehrlich stated that she agrees there is no need for this checklist, since these individuals are already licensed and have been practicing. She emphasized that this situation is very different from someone who is just applying for the first time. Based on that distinction, she agreed with having no requirement for the checklist.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Steven Manyak, DVM	X			
Evelyn Mitchell, Mayor	X			

C. Recommendation to Initiate a Rulemaking to Amend California Code of Regulations (CCR), Title 16, Section 2068.5 Regarding Practical Experience and Education as Equivalent Curriculum for Registered Veterinary Technicians

Ms. Ussery presented the [meeting materials](#) to the Board. Additionally, she explained the following:

A note on [page four](#) of the meeting materials referenced the American Veterinary Medical Association (AVMA) Center for Veterinary Education Accreditation's ninth category, which requires students to understand safe, effective care for birds, reptiles, amphibians, guinea pigs, hamsters, gerbils, and ferrets.

It was noted that alternate pathway RVTs may not encounter all of these species in practice. Since these topics are already covered in the national examination, requiring hands-on experience could burden applicants whose workplaces do not treat such animals.

Ms. Ussery added that this requirement exceeds current expectations for alternate pathway applicants. She cited Dr. Miller's public comment recommending removal of proposed subsection (f)(8), which excludes large animals. Removing it would allow subsections (f)(1)–(7) to apply broadly.

She concluded that the MDC agreed to remove subsection (f)(8), and an updated version of the proposed regulatory language was emailed to Board members the night before.

Discussion: The Board discussed the agenda item and regulatory amendments as follows:

- **Acknowledgment of MDC Efforts:** Appreciation was expressed to the MDC for revisiting the issue and making revisions, with emphasis on the importance of the matter.
- **Concern About Omission of Legal Compliance Language:** A question was raised about why the RVT Subcommittee did not include the CVTEA requirement to follow and uphold applicable laws in subsection (f). The rationale provided was that laws vary by state, but concern was expressed since the context is California.
- **Clarification on Multi-State Applicability:** It was clarified that the regulation applies to all states, not just California. This change followed the Board's decision to repeal the out-of-state registrant equivalency, which had previously tied education requirements specifically to California.
- **Concern About Knowledge of California Law:** A concern was raised about how applicants under this pathway would be aware of California-specific regulations. It was explained that RVT applicants are not currently required to take a law examination, regardless of where they practice. Adding such a requirement would require legislation. The concern remained that applicants may lack familiarity with California's regulatory framework.
- **Veterinary Law Examination Distinction:** It was clarified that veterinarians are required to take a veterinary law examination, distinguishing them from RVT applicants who are not subject to the same requirement.
- **Support for Removal of Subsection (f)(8):** Agreement was expressed with the removal of subsection (f)(8), noting that it had also been identified as a concern.
- **Suggestion Regarding Supervising Veterinarians:** A suggestion was made to allow multiple supervising veterinarians on the clinical practice attestation form. It was confirmed this was already considered—each supervisor can submit a separate attestation, and the "(s)" in "veterinarian(s)" reflects this flexibility.

Updated Proposed Regulatory Language Presented to the Board:

§ 2068.5.

[...]

(gf) The directed clinical practice required in subsection (fe) shall have provided the applicant with knowledge, skills, and abilities in each of the areas of ~~communication with clients, patient examinations, emergency procedures,~~

laboratory procedures, diagnostic imaging, surgical assisting, anesthesia, animal nursing, nutrition, dentistry, animal behavior, and pharmacology. following categories:

[...]

~~(8) Avian, Exotic, or Small Mammals Procedures.~~

~~(A) Understand the approach to providing safe and effective care for avian, exotic, or small mammals.~~

[...]

Motion: Dr. Solacito requested a motion. Christina Bradbury, DVM, moved and Patrick Espinoza, Esq., seconded a motion to take the following actions:

- Approve the regulatory text to amend CCR, title 16, section 2068.5.
- Direct staff to submit the text to the Director of the Department of Consumer Affairs and the Business, Consumer Services, and Housing Agency for review, and if the Board does not receive any comments providing objections or adverse recommendations specifically directed at the proposed action or to the procedures followed by the Board in proposing or adopting the action, then the Board authorizes the Executive Officer to take all steps necessary to initiate the rulemaking process, make any technical or non-substantive changes to the package, and set the matter for hearing, if requested.
- If after the 45-day public comment period, no adverse comments are received, and no public hearing is requested, authorize the Executive Officer to take all steps necessary to complete the rulemaking, and adopt the proposed regulations as described in the text notice for CCR, title 16, section 2068.5.

Public Comment: Dr. Solacito requested public comment on the motion. The following public comment was made on the motion:

- [Nancy Ehrlich](#), RVT, CaRVTA, provided the following public comment:

Ms. Ehrlich stated that she was involved in the creation of the alternate route and emphasized that it was always the idea that, eventually, alternate route programs would be established to the point where the ad hoc education originally associated with them would no longer be necessary. She expressed that she is happy this has now happened and noted that the amendment to the regulation reflects this progress by recognizing that there are now sufficient alternate route programs in place to provide the education people need.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Steven Manyak, DVM	X			
Evelyn Mitchell, Mayor	X			

D. **Recommendations Regarding Updates to the Board's Self-Inspection Checklist**

Ms. Ussery presented the [meeting materials](#) to the Board. Additionally, she provided the following [update](#) from the July 15, 2025 MDC meeting:

- **Board Counsel's Guidance:** Ms. Welch emphasized that online checklists must reflect current law and be updated as changes occur. Ms. Ussery added that while future regulations were discussed, inspections are happening now, so checklists must reflect current requirements.
- **Public Comment from CVMA:** Dr. Miller thanked the team for their work and suggested changing "clinic" to "premises" in the mobile checklist title (page 18) to align with Practice Act updates. Ms. Ussery explained the term "clinic" must remain until regulatory changes are finalized.
- **Clarification on VCPR Requirements:** Dr. Miller also suggested including a statement clarifying that CCR, title 16, section 2030.3 does not override the requirement for a valid VCPR, as outlined in BPC section 4826.6. He noted that this remains a minimum standard and that there appears to be some confusion regarding this point.
- **Acknowledgment of Staff Contributions:** Ms. Ussery concluded by recognizing the hard work of staff members Ms. Rodriguez and Ms. Sanchez, noting that they dedicated significant time to the project, along with Mr. McKinney. She then invited feedback from the Board.

Discussion: The Board discussed the agenda item as follows:

- **Reason for Revisiting the Checklist:** The checklist was brought back to the Board primarily due to the removal of radiation safety items. This change was prompted by the realization that the Radiation Health Branch (RHB) already inspects for compliance with radiation laws, making the Board's inspections

duplicative. The Board will continue collaborating with RHB to ensure oversight without redundancy.

- **Boarding Facilities and Owner Exemption:** There was discussion about the gray area involving boarding facilities administering medications. Only boarding facilities attached to veterinary premises were considered. Standalone facilities often claim the owner exemption, stating they are assisting owners without charging, which exempts them from the Practice Act.
- **Large Animal Checklist:** A checklist for large animal practices will be developed once the new alternate veterinary premises regulations become effective, anticipated by January 1, 2026.
- **Surgery Door Requirements:** A comment was made about a checklist item requiring large doors for animal entry, which seems irrelevant for small animals. This is a holdover from large animal standards and will be addressed in the alternate veterinary premises regulations.
- **Checklist Accuracy and Updates:** Several checklist items were identified as outdated or confusing. These include:
 - A bullet point under “Drugs and Biologics” that needs removal.
 - A reference to Schedule I controlled substances, which are illegal and should not be listed.
 - General inconsistencies that will be revised to reflect current and future regulations.
- **Drug Enforcement Administration (DEA) Registration Confusion:** It was clarified that one DEA license per premises is sufficient. The Subcommittee is reviewing this due to possible loopholes and inconsistencies.
- **Mobile Practice Requirements:** Concerns were raised about checklist items for mobile clinics mirroring brick-and-mortar standards. These will be revised to reflect mobile practice needs. The pending regulatory package also addresses evolving models like standalone units and in-home services.

Public Comment: Dr. Solacito requested public comment on Agenda Items 5.A. through 5.D. There were no public comments made on these items.

6. Update, Discussion, and Potential Action on 2025 Legislation Impacting the Board, DCA, and/or the Veterinary Profession

A. Priority Legislation for Board Consideration

1. [AB 516 \(Kalra, 2025\) Registered Veterinary Technicians and Veterinary Assistants: Scope of Practice](#)

Staff Update: Mr. Sotelo presented the meeting materials to the Board.

2. [AB 867 \(Lee, 2025\) Veterinary Medicine: Cat Declawing](#)

[Staff Update](#): Mr. Sotelo presented the meeting materials to the Board.

Ms. Sieferman updated the Board's position on the bill, reaffirming its opposition to the overall policy. She recalled prior concerns about a reporting requirement that would have forced veterinarians to report each therapeutic procedure. She questioned its intent and noted that similar mandates have been misused by activists to harass veterinarians, particularly in rodeo contexts.

She emphasized the lack of consumer protection in the reporting requirement and the potential risk to veterinarians. After meeting with Assemblymember Lee's legislative director, she explained existing enforcement tools that do not require reporting and followed up in writing. As a result, the requirement was removed, and the Senate committee agreed it was unnecessary.

Ms. Sieferman also addressed a related concern from Senate staff about banning cat declawing in large cats, including those in sanctuaries and zoos. She clarified that such entities are exempt under the owner clause. The bill was revised to prohibit owners from declawing their own cats.

Despite these changes, Ms. Sieferman concluded that the author's office is fully aware the Board remains opposed to the bill's overall policy.

3. [AB 1458 \(Wallis, 2025\) Physical Therapy and Veterinary Medicine: Animal Physical Therapy](#)

[Staff Update](#): Mr. Sotelo presented the meeting materials to the Board.

Ms. Sieferman explained that the topic had largely been addressed at the April Board meeting, relating to a similar bill on chiropractors treating animals. She reiterated the Board's opposition to allowing human health practitioners to treat animals. However, discussions with both the Assembly and Senate Business and Professions Committees showed growing support for the idea. The debate, she said, is now about implementation, not whether it should happen.

One committee believes such practice should fall under the Board's oversight, while the other prefers it be under the relevant healing arts board—or possibly not licensed at all, based on the bill's wording. Ms. Sieferman noted the committees are far apart on implementation. As a result, the legislative process was paused to work with stakeholders on a path forward, should the policy move ahead.

Dr. Solacito referenced a prior suggestion to add a future agenda item covering the history of physical therapy discussions and the task force's recommendations. She noted that none of the current Board members were involved in those early discussions.

After further review, the Executive Committee decided the agenda item was not needed. Dr. Solacito explained that members already have access to historical materials, and Ms. Sieferman had sent a refresher email with links to relevant documents and webcasts.

Dr. Solacito emphasized that the Board's current position on AB 1458 is based on members' present-day knowledge and understanding of the profession's needs. While historical context is useful, she clarified that past positions do not dictate current decisions. Therefore, no separate agenda item will be added to revisit the past decade.

4. [**AB 1502 \(Berman, 2025\) Veterinary Medicine: California Veterinary Medical Board**](#)

[**Staff Update**](#): Mr. Sotelo presented the meeting materials to the Board.

5. [**AB 1505 \(Committee on Agriculture, 2025\) Food and Agriculture: Omnibus Bill**](#)

[**Staff Update**](#): Mr. Sotelo presented the meeting materials to the Board.

Ms. Sieferman explained that minor amendments were added following collaboration with CDFA. During that process, it became apparent that minor amendments to the Food and Agricultural Code were necessary. The Board requested that these changes be incorporated, and the request was successful. She described the outcome as involving only minor adjustments to the code.

6. [**Senate Bill \(SB\) 602 \(Cortese, 2025\) Veterinarians: Veterinarian-Client-Patient Relationship**](#)

[**Staff Update**](#): Mr. Sotelo presented the meeting materials to the Board.

7. [**SB 687 \(Ochoa Bogh, 2025\) Chiropractors: Animal Chiropractic Practitioners**](#)

[**Staff Update**](#): Mr. Sotelo presented the meeting materials to the Board.

Ms. Sieferman provided a brief update, stating there was no new information. She reminded the Board that Senator Ochoa Bogh's office had previously indicated the bill would become a two-year bill and that a stakeholder meeting

was planned for August. Since then, there has been no further contact from the author's office or the committee.

B. Other Board-Monitored Legislation

Ms. Sieferman noted that items in Section B under Other Board-Monitored Legislation are typically informational and not discussed unless requested. However, she mentioned that Ms. Welch had concerns about AB 742.

Ms. Welch outlined concerns with AB 742 regarding implementation, fiscal impact, and clarity. She explained that current law mandates expedited licensure for four groups: 1) honorably discharged members of the Armed Forces; 2) SkillBridge participants; 3) active duty military spouses/domestic partners stationed in California; and 4) refugees who have been granted asylum or special immigrant visa holders.

She added that the Board must also process military spouse/domestic partner applications within 30 days. AB 742 is unclear on whether it would prioritize descendants of American slaves over these existing groups.

Ms. Welch noted that Government Code sections 12944 and 11135 prohibit race-based qualifications or denial of access. She warned that favoring one racial group could lead to constitutional challenges and costly litigation.

To address this, Ms. Welch suggested seeking clarification from the bill's author or legislative committees. She recommended the Board request clarity of numerical priority as to what type of applicant population would get expedited processing, and require the state—not the Board or its licensees—cover all costs associated with litigating claims brought against the Board due to its implementation of the bill.

Motion: Dr. Solacito requested a motion. Christina Bradbury, DVM, moved and Kristi Pawlowski, RVT, seconded a motion to send a letter informing the author's office and committees (via carbon copy) of the Board's concerns.

Public Comment: Dr. Solacito requested public comment on the motion and all of Agenda Item 6. The following public comment was made:

- **Grant Miller**, DVM, Director of Regulatory Affair, CVMA, provided the following public comment:

Dr. Miller raised a concern intended to prompt discussion among Board members regarding AB 867, the cat declawing bill. He noted that the CVMA had testified alongside Ms. Sieferman at the Senate Business, Professions and Economic Development Committee hearing. During that hearing, they engaged in a significant dialogue with the committee about the bill. One of the

ongoing concerns he highlighted is the bill's language that prohibits any surgical claw removal or any other procedure that alters a feline's toes, claws, or paws in a way that prevents or impairs their normal function.

Dr. Miller explained that, based on their interpretation, this language could include the application of vinyl nail caps—commonly known as soft paws or soft claws—which are widely available on the market. He described real-world scenarios where clients, such as individuals undergoing chemotherapy, those on blood thinners like Coumadin, or parents of autistic children, seek out these alternatives to prevent scratching. Under the current language of the bill, veterinarians may be left with no legal option to assist these clients, potentially having to tell them they cannot help or that they must attempt to apply the caps themselves.

He shared that this concern was raised during the hearing, and although the author of the bill stated that this was not the intended outcome, the language of the bill still suggests otherwise. Dr. Miller emphasized that the Board—or a future Board—would be responsible for enforcing the law as written, and under the current wording, veterinarians may be prohibited from even offering nail caps as an option.

He further noted that while the author's office agreed to work on amendments and the committee chair allowed the bill to move forward on the condition that those amendments would be made, no changes had been implemented as of yet. The bill had already reached the Senate Floor, and the only action taken was a note added to the legislative file stating that the intent was not to ban soft claws. Dr. Miller expressed concern that such notes are not permanent and may be lost over time, leaving only the statutory language to guide future interpretation.

He concluded by urging the Board to share their interpretation of the bill's language, as their input could be valuable in communicating concerns back to the author's office and potentially securing clarification or amendments before the bill is finalized. He emphasized the urgency of the matter, noting that they were at the "11th hour" with the bill and that despite the author's stated willingness to collaborate, no progress had been made.

Discussion: The following discussion occurred:

Ms. Sieferman thanked Dr. Miller for his public comment and for reminding her of an issue raised during the AB 867 legislative hearing. She explained that after the hearing, the author's office asked whether she or her team would interpret the bill as prohibiting vinyl nail caps (soft paws). She responded that they would not, but acknowledged future interpretations could vary.

She noted that while a prohibition on soft paws under the bill would likely fail, someone might still attempt it. She suggested the author clarify the bill's intent through an amendment. Although hesitant to amend the bill, the author's office agreed to include a letter of legislative intent.

Ms. Sieferman explained that such letters can be kept in the Board's records alongside legal opinions and used as reference if interpretation questions arise. The letter would also be publicly available.

She added that when legislation is finalized, the Board typically issues outreach materials. For AB 867, those materials could clarify that the bill does not prohibit vinyl nail caps, ensuring consistent understanding.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Sieferman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Steven Manyak, DVM	X			
Evelyn Mitchell, Mayor	X			

7. **Update and Discussion on Pending Regulations**

Mr. Sotelo presented the [meeting materials](#) to the Board.

Discussion: The following discussion occurred:

Ms. Dietzen-Olsen reported that the drug compounding package was submitted to the DCA Director the previous day. She expressed hope for quick approval and noted good progress on the matter.

Dr. Solacito appreciated the definitions provided for regulatory phases and statuses, saying they clarified ongoing discussions. She noted that without clear updates, it can be hard to track repeated issues, and the structured information was personally helpful.

Ms. Dietzen-Olsen emphasized the importance of understanding the regulatory timeline. While the one-year clock starts at OAL submission, much work happens beforehand, making the process feel long. She noted that preparing a strong package before the 45-day comment period helps move things forward efficiently.

Dr. Bradbury thanked Ms. Dietzen-Olsen for streamlining processes and Mr. Sotelo for his contributions.

Dr. Bradbury also asked for a drug compounding update, noting delays due to developments with the Board of Pharmacy and uncertainty about the current status.

Ms. Sieferman updated the Board, noting the package includes Veterinary Assistant Controlled Substance Permit holder authority to compound drugs, as would be authorized in AB 1502. Based on that, the Board moved the package forward as is.

She added that the Board of Pharmacy's related regulations have progressed, and there has been strong collaboration to address veterinary pharmacy challenges.

With help from Dr. Miller and CVMA, the Board of Pharmacy clarified laws to entities that misunderstood them. As a result, some previously unavailable drugs are now accessible again.

Ms. Sieferman also mentioned a pending joint stakeholder meeting with the Board of Pharmacy, confirming that Board members, including Dr. Solacito, will attend to address remaining concerns.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

*Agenda items for this meeting were taken out of order, and the Board moved to Agenda Item 9. The order of business conducted herein follow the publicly notice Board meeting Agenda.

8. ***Presentation from American Association of Veterinary State Boards (AAVSB) Regarding "Regulatory Considerations of the Use of Artificial Intelligence in Veterinary Medicine" White Paper – Beth Venit, VMD, MPH, DACVPM, Chief Veterinary Officer, AAVSB**

Dr. Venit provided a presentation to the Board which include the following information:

- **Introduction to the AAVSB White Paper on AI:** Dr. Venit introduced a 2025 AAVSB white paper on regulatory considerations for AI in veterinary medicine, developed by a diverse task force of experts. She noted this was a condensed version of her upcoming AAVSB annual meeting presentation and disclosed she used ChatGPT to help outline the paper, aligning with the topic's relevance.
- **AAVSB's Position on AI Use in Veterinary Practice:** The AAVSB supports innovation and the benefits of AI but emphasizes that licensees must understand its risks and limitations to uphold the standard of care, avoid unlicensed practice, and maintain transparency. Veterinarians must protect client data, obtain

informed consent when appropriate, and comply with applicable laws and practice acts.

- **Current Applications of AI in Veterinary Medicine:** Dr. Venit outlined three broad categories of AI use: natural language processing (e.g., speech-to-text for medical records), computer vision (e.g., interpreting radiographs or cytology), and robotic systems (e.g., surgical assistance or drone monitoring of livestock). While robotic systems are more common in human medicine, their veterinary applications are emerging.
- **Benefits of AI in Veterinary Settings:** AI can significantly reduce administrative workload, allowing veterinarians to focus more on patient care. It enables rapid analysis of large datasets, supports drug discovery, facilitates meta-analyses, and enhances early detection of disease outbreaks through pattern recognition and real-time monitoring.
- **Risks and Limitations of AI:** Despite its benefits, AI poses risks such as hallucinated or fabricated data, unexpected errors, lack of real-world validation, and embedded biases in training data. These risks necessitate strong regulatory oversight and careful professional judgment to avoid compromising patient care.
- **Automation Bias and Professional Judgment:** A key concern is automation bias—the tendency for professionals to over-rely on AI outputs, even when they conflict with clinical judgment. Dr. Venit emphasized that veterinarians must remain accountable for all decisions and verify AI-generated results, as responsibility cannot be delegated to the technology.
- **Data Quality and Model Transparency:** The principle of “garbage in, garbage out” was highlighted to stress that poor-quality data or flawed models will yield unreliable results. Veterinarians often lack visibility into the quality of the data or the AI model, making it difficult to assess the reliability of outputs. This lack of transparency can lead to misinformed decisions.
- **Consequences of Automation Bias:** Automation bias can lead to deskilling of professionals, increased medical errors, and a feedback loop where AI systems reinforce their own inaccuracies. Dr. Venit warned that veterinarians may not realize their judgment is being influenced, which could result in substandard care.
- **Regulatory Gaps and Data Privacy Concerns:** Dr. Venit noted that while California has taken the lead with legislation requiring AI developers to disclose training data, there is no federal or Canadian requirement for pre-market approval of AI tools in veterinary medicine. This regulatory gap leads to misconceptions that AI is unregulated, when in fact, boards are responsible for overseeing how licensees use these tools.
- **Misconceptions About FDA Oversight:** Many licensees mistakenly believe that if the FDA does not regulate a veterinary AI tool, it is unregulated. Dr. Venit clarified that most veterinary drugs and instruments are not FDA-approved for

animal use, yet their use is still regulated by state boards. The same logic applies to AI tools.

- **Five Key Regulatory Considerations:** The white paper outlines five regulatory concerns: 1) AI must not make diagnostic or treatment decisions independently; 2) veterinarians must apply their own judgment and not rely solely on AI; 3) AI-generated records must be reviewed by licensees; 4) client data must be protected, especially when using third-party AI services; and 5) informed consent must be obtained when AI is used in diagnostics or treatment.
- **Examples of AI Misuse Risks:** Dr. Venit cautioned against AI tools that auto-generate diagnoses or treatment plans, as these can bias veterinarians. She also warned about chatbots giving medical advice to clients, which could constitute unlicensed practice. Even though AI may outperform humans in some studies, it is not a substitute for professional expertise.
- **Standards of Care and AI Training Data:** Veterinarians should understand how AI tools are trained—whether on ideal or real-world data—and whether the datasets account for breed and species diversity. Unlike board-certified specialists, AI tools lack formal validation, testing, and continuing education, raising concerns about their reliability and appropriateness in clinical settings.
- **Human Oversight and AI Integration:** The AAVSB advocates for a “human in the loop” model where AI supports but does not replace veterinary professionals. A good example is using AI to triage radiographs by flagging abnormalities for further review by a specialist, rather than making final diagnoses.
- **Medical Recordkeeping and AI:** Licensees are responsible for reviewing all AI-generated content, including client communications and discharge instructions. Dr. Venit raised the question of whether speech-to-text transcripts should be included in the official medical record—an issue for boards to consider.
- **Data Security and AI Vendors:** Many AI tools integrate with platforms like OpenAI, raising concerns about whether client data is being transmitted externally. Licensees must carefully review terms of service to ensure compliance with data privacy laws and prevent unauthorized data sharing.
- **Informed Consent and Risk-Based Disclosure:** The AAVSB recommends that clients be informed when AI is used in diagnostics or treatment. The level of consent should match the level of risk—ranging from no consent for low-risk internal tools to written consent for high-risk applications. Clients should be given the option to opt out and choose a human alternative.
- **Final Thoughts and Board Engagement:** Dr. Venit concluded by reaffirming that licensees are fully accountable for AI use, and ignorance is not a defense. She suggested that facility inspections could be used to educate licensees on AI and verify data practices. She invited boards to consider their role—whether educational, regulatory, or reactive—and asked how the AAVSB can support

them with resources or guidance. She emphasized that this is the beginning of an ongoing conversation.

Discussion: The Board discussed the agenda item as follows:

Dr. Solacito expressed her appreciation to Dr. Venit, describing the presentation as a “very interesting topic.” She acknowledged that many Board members have been informally discussing AI, noting its growing relevance. She pointed out AI’s increasing presence in veterinary conferences, where vendors promote it as the future of practice.

Ms. Pawlowski expressed strong appreciation for the information and Dr. Venit’s work, recognizing its value and relevance. She emphasized that AI’s accuracy depends on continuous data input and stressed the importance of keeping veterinarians involved to ensure responsible use.

Dr. Manyak thanked Dr. Venit and highlighted the need for veterinary colleges to teach AI literacy. He noted that students must learn to assess AI-generated information and use AI as a tool, not a replacement for clinical judgment.

Dr. Venit agreed on the importance of student education but expressed greater concern for older adopters. She noted that younger generations are more skeptical of online content, while older professionals may trust AI-generated information too readily, underscoring the need to educate this group.

Dr. Manyak added that practitioners have long used forms of AI, such as lab reference ranges, normalizing AI as part of clinical workflows.

Dr. Solacito reflected on her key takeaway: the Board must be proactive in addressing AI’s role in veterinary medicine. She stressed the importance of staying engaged and preventing issues before they impact practitioners, consumers, or pets in California.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item:

Anna Styles, Student Liaison, Western University, offered a student perspective on the AI discussion, responding to Dr. Manyak’s comments on education. She shared that at Western University, evaluating information quality is emphasized early, and students are taught to find reliable resources, as knowing everything is not possible. This habit is reinforced throughout their education.

She explained how AI tools like ChatGPT are addressed academically. Some professors require students to state they did not use it, while others allow it with submitted prompts and responses. Ms. Styles clarified that ChatGPT is just one

example, and students are already engaging with AI tools thoughtfully and responsibly.

Dr. Solacito thanked Dr. Venit for her presentation and participation, saying it was a pleasure to have her and that the Board looks forward to seeing her at the September meeting.

Dr. Venit thanked the Board for the invitation and said she also looks forward to the September session. She encouraged members to reach out with questions or topics in the meantime and offered to continue the conversation.

*Agenda items for this meeting were taken out of order, and the Board moved to Agenda Item 11. The order of business conducted herein follow the publicly notice Board meeting Agenda.

9. *Student Liaison Reports

A. University of California, Davis Liaison – **Sebastian Lidikay**

Sebastian Lidikay presented the Board with the following update:

- Sebastian introduced themselves as a first-time student liaison and shared that they will be entering their third year at UC Davis in August. They expressed that they were very pleased to meet everyone at the meeting. At this time, they did not have any updates to report, but expressed interest in receiving input from the Board regarding what types of data or information they should gather. Sebastian offered to source that information from the student body and bring it to the next meeting.

Dr. Solacito thanked Sebastian for the introduction and clarified the Board's expectations for future student liaison updates. She explained the Board is especially interested in what students are engaged in, their current concerns—particularly around education—and any issues they foresee.

Dr. Solacito added that the Board values insights into topics not yet on their radar but being discussed among students, such as trends or challenges in the profession. She emphasized this information would help inform the Board's work.

Dr. Bradbury welcomed Sebastian and expressed excitement about their involvement. She introduced herself and shared the Board's interest in student career paths, especially in large animal, food animal, and equine medicine, where shortages exist. Understanding student choices in these areas has been helpful.

Dr. Bradbury also highlighted access to care as a key interest. She noted the Board is curious about how students are being educated on this topic and what

related extracurriculars they are involved in. She encouraged Sebastian to share anything relevant from the student perspective.

- Sebastian acknowledged the Board's input and shared some initial observations based on their current understanding. They noted that the majority of students are still primarily focused on small animal medicine, with a particular interest in private and general practice. For those pursuing food animal medicine, a key attraction appears to be the opportunity to work with herd health.
- Additionally, the availability of the Public Service Loan Forgiveness program is seen as a significant incentive. Sebastian suggested that financial motivators are likely the primary influence behind these career choices. They committed to gathering more detailed insights by speaking with peers and conducting surveys, with plans to report back at the next meeting.

Ms. Pawlowski suggested that it might be helpful to have Ms. Styles give her report first. She explained that by listening to Ms. Styles' report, Sebastian might gain a better understanding of the type of information the Board is looking for, which could help them prepare their future reports.

Dr. Solacito expressed appreciation for Sebastian's participation on the Board and shared that members are looking forward to the future reports Sebastian will provide.

B. Western University of Health Sciences Liaison – Anna Styles

Ms. Styles presented the Board with the following updates:

- **Feline Surgery Suite Opening:** Ms. Styles reported that since the April meeting, the Pet Health Center opened the Hyla Marrow Feline Surgery Suite, funded by the Hyla Marrow Trust and the Hope Organization. She emphasized that while it may seem like just another room, it reflects a commitment to patient wellbeing, noting the environment's impact on animal health and recovery. Surgeries began the same day as the ribbon -cutting.
- **Outreach at Mount San Antonio College:** She shared that Western University faculty and students attended a career fair at Mount San Antonio College for the third year, speaking with undergraduate and high school students about veterinary careers. Pet Health Center technicians also participated, highlighting both veterinary and technician paths.
- **Street Dog Coalition Clinic:** Ms. Styles highlighted the Street Dog Coalition Clinic, which she values personally. Despite cold weather, 60 students provided care to 31 pets of unhoused or housing-insecure individuals. She noted the event's popularity and its reflection of the college's commitment to

public health and access to care, also acknowledging support from volunteers and local partners.

- **Graduation and Career Paths:** She announced that 104 new doctors graduated this spring. While she did not have specific data, she noted graduates typically split evenly between employment and internships or residencies.
- **Summer Research Program:** Ms. Styles reported that 24 students are participating in the summer research program, mentored by 16 faculty members, mostly from the College of Veterinary Medicine. Students also had mentors from other colleges, reflecting interprofessional collaboration. All visited UC Riverside's Center for Integrative Bee Research (CIBER), with three conducting research there.
- **Faculty Departures and Student Reflections:** She shared that recent faculty departures have prompted students to reflect on the importance of community and relationships with educators. While change is part of academic life, this year's transitions have made students more aware of their educators' impact.
- **Board-Relevant Issues and Student Awareness:** Ms. Styles emphasized that students begin learning about Board-related issues from day one. Topics like consumer protection and good medicine are shaped by their teachers. She noted student interest in developments like Colorado's mid-level practitioner legislation.
- **Loan Forgiveness Concerns:** Echoing Sebastian's comments, she said students are concerned about the future of the loan repayment program. With federal uncertainty, some students are unsure about its availability and potential changes.

The Board expressed appreciation for the updates and concerns shared by the student liaisons. They asked Sebastian and Ms. Styles to keep them informed about the impact of recent federal legislation on student loans. It was noted that a potential \$257,000 borrowing cap across undergraduate and professional education could affect student experiences and career choices. The Board expressed interest in feedback on how this is impacting students.

Additionally, the Board suggested it would be helpful for student liaisons to poll their peers to better understand how students are making career decisions, especially during the critical third and fourth years of veterinary school.

The Board also expressed concern about reports of students signing employment contracts before entering their third year, calling the trend concerning. These insights were tied to broader discussions about access to care and the pressures students face during their education.

Public Comment: Dr. Solacito requested public comment on this item. The following public comment was made on this item.

- [Marissa Silva](#), DVM, CDFA, AHFSS, AUS, provided the following public comment:

Dr. Silva expressed her appreciation for the opportunity to speak and wanted to ensure that both Ms. Styles and Sebastian were aware of a resource available to them and their classmates. She explained that she works for CDFA, where they monitor the Veterinary Medicine Loan Repayment Program (VMLRP) at the federal level. She encouraged the student liaisons to let any classmates who may feel caught in the middle of recent changes know that they are welcome to reach out to her. She offered to share her contact information, Marissa.Silva@cdfa.ca.gov.

10. **Board President Report** – *Maria Preciosa S. Solacito, DVM*

Dr. Solacito presented the Board with the following updates:

- **Executive Officer Salary Adjustment:** Dr. Solacito shared that Ms. Sieferman received a well-deserved salary increase, recognizing her exceptional leadership, professionalism, and dedication. She praised Ms. Sieferman's consistent strength and compassion and thanked Dr. Bradbury for her key role in advocating for the raise with a strong, fact-based justification.
- **DCA Director's Board Leadership Meeting:** Dr. Solacito reported on the June 17 meeting, where updates were provided by Undersecretary Grant, Deputy Secretary Cullis, and DCA Director Kim Kirchmeyer. A key takeaway was that Board members should not participate in licensing examination development. She expressed concern about this policy's impact on Ms. Pawlowski's VTNE committee role, emphasizing her unique qualifications.
- **VTNE Committee Participation:** Ms. Sieferman explained that Ms. Pawlowski's real-world experience is critical to the VTNE committee, which has lacked practicing RVTs and has been largely comprised of faculty members designing exam questions with strong opinions against alternate pathways. As a practicing RVT and alternate pathway registrant, Ms. Pawlowski has already provided significant input into the creation of those exams to ensure the examinations are testing for minimum practical competency. Dr. Solacito plans to request an exception to the DCA exam participation policy and will consult Ms. Sieferman on next steps.
- **Clarification on Committee Roles:** Ms. Sieferman also clarified that the DCA examination policy does not apply to Dr. Manyak's nomination to the International Council for Veterinary Assessment (ICVA) through AAVSB, as that board does not directly develop examination questions. The distinction lies in oversight versus content creation.

- **Travel Guidelines and New Board Member:** Dr. Solacito mentioned new out-of-state travel guidelines and advised consulting with Ms. Sieferman's team. She welcomed new Board member Mayor Evelyn Mitchell, highlighting her experience with the Humane Society of Sonoma County and as Mayor of Healdsburg. Ms. Sieferman provided onboarding.
- **CVMA Meetings and Collaboration:** She reported that she and Ms. Sieferman attended the CVMA Board of Governors and House of Delegates meetings on June 26–27. They shared updates on Board priorities and emphasized the importance of continued collaboration with CVMA.
- **Executive Committee Meetings:** Dr. Solacito noted that the Executive Committee—herself and Ms. Pawlowski—continues to meet with Ms. Sieferman virtually every other week to stay updated and address Board matters.
- **Good Fix Program Inquiry:** She shared that the Board spoke with Greater Good Charities about their Good Fix program, which promotes MASH-style spay/neuter clinics. The group is seeking guidance on compliance with California regulations, presenting an opportunity for further Board exploration.
- **Reappointment Announcement:** Dr. Solacito concluded by announcing her reappointment by the Governor on May 21 and that she will continue serving through June 2028.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

*Agenda items for this meeting were taken out of order, and the Board moved to Agenda Item 8. The order of business conducted herein follow the publicly notice Board meeting Agenda.

11. Registered Veterinary Technician Report – *Kristi Pawlowski, RVT*

Ms. Pawlowski stated that she had nothing to report and had already discussed this with Ms. Sieferman. She expressed concern that, since RVT-related items are always on the agenda, it may appear she is not contributing, which she described as disingenuous. She clarified this does not reflect the ongoing work being done.

To address this, Ms. Pawlowski suggested removing the RVT report item from the agenda, emphasizing this should not diminish the importance of RVT representation. She reiterated that RVT matters are consistently active and recommended cleanup language to formally remove the item.

Ms. Sieferman clarified that the RVT report is a statutory requirement, originating when the RVT Committee transitioned into the MDC. It was added to ensure RVT issues were not overlooked.

She noted that removing the requirement would need a statutory change, possibly through an omnibus bill.

Dr. Solacito asked if the RVT report could remain on the agenda as an “as needed” item—appearing only when there is something to report.

Ms. Welch noted past RVT reports included updates on participation in national veterinary technician events. If similar engagement occurs, the item could be added back on the agenda. If the Board wants to remove the statutory requirement, it should be specifically agendized for public transparency.

Dr. Bradbury acknowledged the discussion and said she had also planned to raise the issue due to recurring “nothing to report” updates. She recalled former RVT member Jennifer Loredó’s helpful reports on broader RVT community activities not already on the Board’s radar.

Dr. Bradbury recognized that this may be harder now, as Ms. Loredó was based at a teaching facility. Gathering such updates would require more outreach. Dr. Bradbury mentioned a second RVT may join the Board soon, who could help share the workload. She reiterated the value of hearing about developments beyond Board discussions.

Ms. Siefertman suggested listing the RVT report as a future agenda item for further discussion. She proposed keeping it on the agenda with the understanding that it would only be agendized when there are updates, which would still meet the statutory requirement.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

*Agenda items for this meeting were taken out of order, and the Board moved to Agenda Item 17. The order of business conducted herein follow the publicly notice Board meeting Agenda.

12. Recess Open Session until July 17, 2025, at 9:00 a.m.

Dr. Solacito recessed open session at 4:14 p.m.

*Agenda items for this meeting were taken out of order, and the Board moved to Agenda Item 20. The order of business conducted herein follow the publicly notice Board meeting Agenda.

9:00 a.m., Thursday, July 17, 2025

Webcast Link:

- Agenda Items 13-16, 18, and 19 (<https://youtu.be/3ucPKCwezRI>)

13. Reconvene Open Session – Establishment of a Quorum

Board President, Maria Preciosa S. Solacito, DVM, called the meeting to order at 9:00 a.m. EO, Jessica Sieferman, called roll, and six members of the Board were present; a quorum was established.

Members Present

Maria Preciosa S. Solacito, DVM, President
Kristi Pawlowski, RVT, Vice President
Christina Bradbury, DVM
Patick Espinoza, Esq.
Steve Manyak, DVM
Evelyn Mitchell, Mayor

Student Liaisons Present

Anna Styles, Western University

Board Staff Present

Jessica Sieferman, EO
Matt McKinney, Deputy EO
Alicia Hernandez, Administration/Licensing Manager
Patty Rodriguez, Enforcement Manager
Ashley Sanchez, Enforcement Manager
Justin Sotelo, Policy Specialist
Rob Stephanopoulos, Enforcement Manager
Nellie Forget, Enforcement Analyst
Anna Fulton, Enforcement Analyst
Kimberly Gorski, Enforcement Analyst
Emilia Gutierrez, Enforcement Technician
Amber Kruse, Enforcement Analyst
Anh-Thu Le, Enforcement Analyst
Daniel Strike, Enforcement Analyst
Zakery Tippins, Enforcement Analyst

DCA Staff Present

Judie Bucciarelli, Staff Services Manager, Executive Office, Board and Bureau Relations
Sarah Irani, Moderator, SOLID
Bryce Penney, Television Specialist, OPA
Ryan Vaughn, Web Application Developer, Office of Information Services (OIS)
Tara Welch, Board Counsel, Attorney IV, Legal Affairs Division

Guest Presenters

Baird Cowan, Chief Technology Officer, DCA, OIS
Keith Kun, Senior Web/Solutions Architect, DCA, OIS
Eric Neuhauser, MPA, Research and Evaluation Branch Chief, Office of Health Workforce Development, Department of Health Care Access and Information (HCAI)
Mark Nunez, DVM, Director, AAVSB and Member, MDC
Ellice Ramm, Researcher, HCAI

Guests Present

Kathy Bowler, Member, MDC
Megan Cross, Deputy Attorney General, OAG, Department of Justice DMC
Nancy Ehrlich, RVT, CaRVTA
Grant Miller, DVM, Director of Regulatory Affairs, CVMA
Kaitlyn Preston, Legislative Aide, Norwood Associates
Marissa Silva, DVM, CDFA, AHFSS, AUS
Andrei Tarassov, DVM, Olympus Cove Veterinary Clinic
Kristy Veltri, RVT

14. Presentation from Department of Health Care Access and Information (HCAI) Regarding Demographical Data Collected During Renewals – *Eric Neuhauser, MPA, Research and Evaluation Branch Chief, Office of Health Workforce Development, HCAI*

Eric Neuhauser and Ellice Ramm presented the [meeting materials](#) to the Board.

Additionally, they provided a dashboard demonstration, which included the following:

- **Dashboard Overview:** Ms. Ramm introduced the new dashboard as the first tool offering regional-level data on race and ethnicity across all veterinary license types. Users can filter by license type and racial or ethnic group. For example, selecting Hispanic reveals a significant gap between population and workforce

representation. Clicking chart elements reveals subgroup details within broader categories like Asian, Black, and multiracial.

- **Concordance and Geographic Views:** The concordance view shows statewide data down to the county level, excluding individual license types for privacy. Users can select a race or ethnicity—like Hispanic—and see county-level representation. White areas on the map indicate no active licenses for the selected group. Users can also focus on regions like the Inland Empire and view included counties.
- **Concordance Metrics:** Ms. Ramm explained concordance metrics assess how closely workforce demographics match the general population. A value near 1 indicates proportional representation; above 1 suggests overrepresentation, and closer to 0 indicates underrepresentation. These metrics highlight diversity gaps statewide and locally.
- **Age Group Demographics:** The dashboard includes age group data filtered by license type and race or ethnicity. For example, 77.5% of licensees over 75 are white, non-Hispanic. While most age groups are stable, younger brackets show increasing Hispanic and decreasing white, non-Hispanic representation—indicating gradual workforce diversification.
- **Survey Response Rates and Data Inclusion:** Ms. Ramm noted the dashboard includes only actively employed licensees. Retired or non-practicing individuals are excluded. It tracks responses to race, ethnicity, and employment questions. Age data is complete for all licensees, with no “declined to state” entries.
- **Data Hosting and Public Access:** Mr. Neuhauser said the dashboard and open data were submitted to DCA and will be hosted on its website. A data table was also submitted for DCA’s open data portal. He offered to follow up on the publication timeline and emphasized the dashboard’s user-friendly design, with raw data available for deeper analysis.

Discussion: The following discussion occurred:

Dr. Bradbury asked whether the veterinary license data in the dashboard could be compared to human medical license data, specifically to evaluate how veterinary demographics align or differ from those of human doctors.

Mr. Neuhauser responded that such an analysis is possible if a specific license type is selected, but emphasized the need to first define the exact purpose of the comparison.

Dr. Solacito said the information was interesting and would take time to digest. She stressed the importance of understanding the data’s significance and thanked the presenters for sharing valuable insights to support the Board’s work.

Mr. Neuhauser acknowledged the dashboard's depth and agreed it may take time to absorb. He explained this version builds on last year's release with added data from other license types. It offers a holistic view of the veterinary workforce and its alignment with the populations served. He invited Board members to contact him or Ms. Ramm with questions or for further demonstrations.

Dr. Bradbury added that national studies on veterinary students might help analyze workforce demographics. She noted the dashboard data aligns with those studies and could show whether California's workforce reflects current graduates or a different demographic. She mentioned the AAVSB has shared similar data and suggested it as a useful resource.

Mr. Neuhauser replied that Ms. Ramm is updating the education pathways dashboard using graduate data, as enrollment data is unavailable. He said this and two more dashboards—on languages spoken and education pathways—will be shared with DCA. He is also working to obtain more enrollment data from schools or organizations.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on these items.

Dr. Solacito expressed her appreciation for the presentation by Mr. Neuhauser and Ms. Ramm. She also conveyed hope for continued collaboration and information sharing moving forward.

**15. Update, Discussion, and Possible Action Regarding AAVSB Activities –
*Mark Nunez, DVM, AAVSB Board of Directors***

Dr. Nunez introduced himself and provided the following AAVSB updates:

- **Annual Meeting:** The AAVSB Annual Meeting will be held September 17–19 in Cincinnati, Ohio, offering U.S. and Canadian member boards a chance to “connect, collaborate, educate, and conduct business.” Attendance is high due to AAVSB-funded delegates. Committees and task forces will meet to “elaborate, exchange ideas,” and avoid overlap. Many sessions are open. The Executive Directors and Registrars Summit will cover key topics, and new delegates will receive board training. A President's Reception will honor volunteers, with entertainment including a baseball game. Educational sessions will be 90 minutes, covering health and wellness, crisis media training, top legal cases by Dale Atkinson, and avian influenza.
- **Elections and Nominations:** The business session includes elections for President-Elect: Sheila Dodson, DVM (Kansas) and Dr. Nunez (California). For Director-at-Large, five nominees vie for three seats: Christina Bradbury, DVM (California), Robin Lazaro, RVT (North Carolina), Michael Pfander, DVM (Missouri), Ashli Selke, RVT (Indiana), and Jessica Sewell, RVT (Georgia).

Dr. Nunez highlighted six key board member attributes and urged voters to consider gaps in skills, specialties, or diversity. One Nominating Committee seat is open (no nominees, floor nominations allowed), and three nominees are up for AAVSB representative to the ICVA: Thomas Fell, Jr., DVM (Alabama), Steven Manyak, DVM (California), and Karl Solverson, DVM (Wisconsin).

- **Bylaws Proposals:** Three amendments are under review. Kentucky proposes a comprehensive overhaul, described as “a big beautiful bylaws change.” West Virginia suggests reducing DVMs and increasing executive directors and registrants, citing relevance to current issues. The AAVSB Bylaws and Resolutions Committee proposes updating the section defining AAVSB committees. Each includes the change location, proposer, a summary and committee position, and the Board of Directors’ recommendation.
- **Resolutions:** Four were presented. Kentucky opposes expanding AAVSB membership internationally, citing resource concerns. Another Kentucky resolution opposes endorsing the Veterinary Professional Associate (VPA) role, referencing California debates. A third addresses VCPR, including telemedicine. The fourth, from the AAVSB Board, supports RVTs on boards that license them. The Board supports it; the Bylaws and Resolutions Committee has no position.
- **Colorado VPA Update:** Dr. Nunez clarified that while AAVSB does not support creating the VPA role, it is assisting Colorado’s implementation per Proposition 129. AAVSB is funding development of a competency examination and may serve as the credentialing body. Colorado’s model requires both. The job analysis will be speculative, as no VPAs exist yet. The scope may include spays and neuters. Model regulations will be delayed until broader adoption.
- **Governance:** A President’s Update will seek member board feedback. In February, the board discussed nomination and election models: competency-based, constituency-based, and hybrid. Dr. Nunez stressed the need for feedback to address trust issues, stating, “if you do not provide that feedback, then you cannot complain about the decisions that are made.” The board is committed to improving governance and building a stronger, more representative board.

Ms. Siefertman noted her comments should have been made during the earlier VPA discussion and thanked President Frank Richardson, DVM, for his efforts. She explained he has been speaking with every AAVSB committee to emphasize that the organization does not support the VPA initiative. While AAVSB is assisting Colorado with VPA regulations and developing an examination and credentialing program, they continue to reiterate their lack of support. She appreciated Dr. Richardson’s consistency in delivering this message.

Ms. Pawlowski acknowledged the complexity of the situation, stating the Board is in a “tricky situation” due to new information received that morning from the previous

day's developments. She emphasized the urgency, noting the Board must make decisions based on this recent information.

Motion: Kristi Pawlowski, RVT, moved and Patrick Espinoza, Esq., seconded a motion to direct the Board's delegates and alternate delegate to speak with the bylaw and resolution submitters, speak with candidates if possible during the Annual Conference and watch the candidate videos when available, and then in addition to direct the Board's delegates and alternate delegate to vote on the matters that they believe best fulfill the Board's consumer protection mission and the mission of the AAVSB.

Public Comment: Dr. Solacito requested public comment on the motion. There were no public comments made on the motion.

Roll Call Vote: Dr. Solacito called for the vote on the motion. Ms. Siefertman took a roll call vote on the motion. The motion carried 6-0.

Members	Vote			
	Yea	Nay	Abstain	Absent
Maria Preciosa S. Solacito, DVM, Pres.	X			
Kristi Pawlowski, RVT, Vice President	X			
Christina Bradbury, DVM	X			
Patrick Espinoza, Esq.	X			
Steven Manyak, DVM	X			
Evelyn Mitchell, Mayor	X			

Dr. Solacito thanked Dr. Nunez for the enlightening update.

16. **Presentation from DCA's Office of Information Services on Chatbot Options for Board's Website**

Baird Cowan, Chief Technology Officer, DCA, OIS, and Keith Kun, Senior Web/Solutions Architect, DCA, OIS provided a presentation and demonstration to the Board, which included the following information:

- **Evolution of Web Chat and Gen AI Integration:** Over the past 2–3 years, web chat has advanced from basic services to tools using generative AI (Gen AI). As Gen AI gained traction, DCA explored chatbot services from state and partner vendors like Amazon Web Services (AWS), Google Cloud, and Microsoft Copilot, while monitoring CDT's Statewide Digital Assistant using multiple LLMs.
- **Current Tools and Pilots:** DCA is piloting the AWS chatbot using Bedrock and has deployed Microsoft Copilot Chat department wide. They are also exploring options with Google and CDT. The AWS chatbot, in development for six months, is cost-effective. A demonstration was provided, and DCA is evaluating all tools for best fit.

- **Policy and Regulatory Framework:** Executive Order N-12-23 launched the state's Gen AI governance, followed by CDT's Technology Letter 25-01, SB 896, and AB 2013, which addressed public data disclosure. These updates led to changes in SAM/SIM manuals, especially Section 4986, covering Gen AI procurement, use, and training.
- **DCA Compliance and Training:** DCA adopted a Gen AI policy and updated its IT acceptable use policy, enabling Gen AI efforts. Gen AI training has reached 72% of 4,000 users. Board staff and leadership are trained and capable of responsible tool use.
- **Human Oversight and Risk Mitigation:** All chatbot interactions are logged and reviewed to ensure accuracy and prevent hallucinations. Human oversight is required to confirm alignment with veterinary practices. A Gen AI risk assessment (5305) must be completed before full deployment.
- **Chatbot Functionality and Customization:** The AWS chatbot limits responses to vetted website content. It handles varied user input, supports multiple question formats, and allows staff to update content. It logs unanswered questions and supports customization of text and styling.
- **Interactive Features and Usability:** The chatbot includes clickable links, feedback, and AI-driven question matching. It guides users through decision trees and adapts to informal input. It is highly tunable and requires regular maintenance.
- **Staffing and Maintenance:** A data analyst will help monitor and maintain the chatbot. Staff will review analytics and update content regularly. Ongoing maintenance is essential for accuracy and relevance.
- **Strategic Alignment and Impact:** The chatbot supports the Board's Strategic Plan to improve public communication. It is expected to reduce call volume and enhance user experience. The Board is the first to pilot this technology, demonstrating innovation and meeting public demand for digital self-service.
- **Timeline and Next Steps:** Implementation is expected in 90–100 days, depending on staffing. While AWS is the current focus, DCA will continue evaluating other options. The chatbot will first launch on development servers for testing and refinement.

Dr. Solacito expressed appreciation and enthusiasm for the presentation, describing it as exciting and thanking the presenters for the information shared. She concluded by stating that the Board looks forward to the launch of the chatbot.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

*Agenda items for this meeting were taken out of order, and the Board moved to Agenda Item 18. The order of business conducted herein follow the publicly notice Board meeting Agenda.

17. Executive Management Reports

A. Administration

Alicia Hernandez and Matt McKinney presented the [meeting materials](#) to the Board.

Dr. Bradbury asked whether the months in reserve were included in the Board's Sunset Bill. Ms. Sieferman responded that it was.

B. Examination/Licensing

Ms. Hernandez presented the [meeting materials](#) to the Board.

Dr. Solacito commented on the licensing statistics, noting the numbers looked pretty good overall. She acknowledged that while application figures may not fully meet California's veterinary needs, the data shows progress.

Ms. Sieferman expressed appreciation for Dr. Miller and his husband, crediting them as key to transitioning to a more efficient renewal postcard system. She recalled that despite BreZE being live for over two years when she started, DCA still relied heavily on paper. A campaign was launched to promote online renewals, reducing the eight-page notice to one page.

In February, Dr. Miller pointed out that outdated inserts were still being mailed with renewals, including a 2016 bill notice, a 2018 fee increase, and a call for SMEs for a discontinued examination. Ms. Sieferman admitted she had not considered whether inserts were still included and stressed the importance of staff alerting her when process changes do not match actual practice.

Thanks to Dr. Miller's feedback, the renewal process is now a true postcard format, eliminating unnecessary inserts and cutting printing and mailing costs. Ms. Sieferman acknowledged the delay in catching the issue but confirmed the process is now more efficient and cost-effective.

C. Enforcement

Rob Stephanopoulos and Ashley Sanchez presented the [meeting materials](#) to the Board.

Discussion: The Board discussed the agenda item as follows:

- **SME Case Volume:** The 1,500 cases in the consultant and SME queues only reflect those with requested and received records. With intake staff now actively requesting records, the number needing SME review may double to over 3,000—significant, as most of the 3,500 pending cases involve standard of care issues.
- **SME Turnaround Times:** SMEs are typically given 30 days to complete reviews, though many finish sooner. Newer SMEs may take 2–3 weeks, while experienced ones often finish within a week. Analysts confirm turnaround times, and delays are rare unless due to personal or professional obligations.
- **SME Recruitment Efforts:** Recruitment remains challenging, with word of mouth most effective. Ken Pawlowski, DVM, was credited for inspiring three new SMEs during a CVMA speech. In-person conference outreach is more effective than virtual, but travel is limited by budget and state bans. Staff are exploring more in-person outreach, especially in Southern California.
- **Comparative Analysis with Other Boards:** Dr. Bradbury questioned how other healing arts boards, like the MBC, manage complaint volume and SME staffing. She noted MBC's larger licensee base may not correlate with complaint volume and suggested analyzing how other boards handle complaints, SME recruitment, and use of in-house SMEs.
- **Support for Medical Record Reviewers:** Concerns about unclear expectations for medical record reviewers led to a standardized checklist now provided to reviewers and probationers. This aims to improve consistency and address confusion noted in administrative hearings.
- **Increasing Complaint Volume:** Complaints have risen since BreZE made filing easier. Other factors include pets being seen as family, increased attention during COVID, and online self-diagnosis tools like "Dr. Google." These trends have led to more frequent and emotionally charged complaints.
- **Public Outreach and Education:** Participants suggested better public education to reduce complaints, including explaining veterinarians' roles and qualifications. The Board has a document on its website outlining veterinary professions, and the Outreach Subcommittee may update and promote it.
- **Challenges in Complaint Processing:** Investigations are delayed due to thoroughness and multiple complaints against the same licensee. The Board now narrows record requests to specific incidents, but broader reviews are often needed since animals cannot articulate symptoms.
- **Backlog and Coordination with the OAG:** The Board is working with the OAG to streamline discipline and reduce backlog. Monthly meetings improve coordination and case tracking. SME availability remains a challenge due to their full-time responsibilities.

- **Consultant Review Process:** Consultant reviews have improved efficiency by filtering out cases not needing SME review. From February to April 2025, 121 reviews were done, with only 46 referred to SMEs. Others were resolved through educational letters or no violation findings.
- **Need for More SMEs and Consultants:** Although many SMEs are under contract, only 21 are active—the lowest recorded. More active SMEs are urgently needed to reduce backlog. Additional consultants could help triage cases more effectively.
- **Sunset Bill and Stipulated Settlements:** The Board's Sunset Bill includes provisions allowing it to bypass the OAG and offer stipulated settlements directly, which could further streamline enforcement.

D. Outreach

Mr. Sotelo presented the [meeting materials](#) to the Board.

E. Strategic Plan

Mr. McKinney presented the [meeting materials](#) to the Board.

Dr. Solacito commended staff for the progress in completing Strategic Plan tasks.

Public Comment: Dr. Solacito requested public comment on Agenda Items 17.A. through 17.E. There were no public comments made on these items.

*Agenda items for this meeting were taken out of order, and the Board moved to Agenda Item 21. The order of business conducted herein follow the publicly notice Board meeting Agenda.

18. Future Agenda Items and Next Meeting Dates

Ms. Sieferman noted that the next Board meeting dates are October 15-16, 2025, and the 2026 meeting dates are posted on the Board's website.

With regard to future agenda items, the Board discussed the following:

- **Upcoming Scheduled Items:** The October meeting will include standard items like the EO evaluation and officer nominations. The MDC has also been tasked with reviewing condition-specific VCPR language and the signature issue, which may appear on a future agenda.
- **High-Volume Spay/Neuter and MASH Concerns:** There was strong interest in adding MASH and high-volume spay/neuter issues to the agenda. Though not standalone items, they will be addressed through broader discussions tied to public comment and pending rulemaking.

- **Electronic Medical Records:** Dr. Manyak requested a future agenda item on transitioning to electronic medical records. Members supported exploring this through the MDC, citing enforcement issues tied to poor recordkeeping and challenges like cost, rural access, and large animal practices.
- **Pharmaceutical Pricing and Access to Care:** Public comment raised concerns about unfair pharmaceutical practices affecting care access. While the Board's role is unclear, members agreed it impacts consumer protection and may merit MDC research or collaboration with agencies like the Better Business Bureau.
- **AVMA Foreign Equivalency Program:** A request was made to invite AVMA to present on its foreign equivalency program. Concerns included disciplinary cases involving foreign graduates, removal of the clinical year, and lack of post-credentialing support. The Board agreed to begin with an AVMA presentation and data review to assess any correlation.

Public Comment: Dr. Solacito requested public comment on this item. There were no public comments made on this item.

Ms. Sieferman shared that Mr. Espinoza had emailed her about student loan concerns, also raised by students. She asked if it should be a separate issue or part of student follow-up. Mr. Espinoza suggested hearing from veterinary school financial aid offices but noted it may be too early to assess the impact, as changes are just taking effect. He recommended revisiting the topic in about a year, after another application cycle and updated aid packages.

19. Recess Open Session

Dr. Solacito recessed open session at 10:49 a.m.

20. *Convene Closed Session

Closed session was convened on July 16, 2025, at 4:24 p.m., and reconvened on July 17, 2025, at 10:57 a.m.

21. *Pursuant to Government Code Section 11126(c)(3), the Board Will Meet in Closed Session to Deliberate and Vote on Disciplinary Matters, Including Stipulated Settlements and Proposed Decisions

In the Matter of the First Amended Accusation Against Sonia Amador, Veterinarian License No. 17957, and Natural Pet Dental, Inc., Veterinary Premises Registration No. 37373; Board Case No. 4602019000083; OAH No. 2022100704.

The Board adopted the Decision After Rejection.

In the Matter of the Second Amended Accusation and Petition to Revoke Probation Against Sehaj P. Grewal, Veterinarian License No. 21671, and The Melrose Vet,

Sehaj P. Grewal, Owner, Veterinary Premises License No. HSP 38268; Board Case No. 4602024000453; OAH No. 2024091078.

The Board adopted the Corrected Proposed Decision in its entirety.

In the Matter of the First Amended Accusation Against Paul F. Lynch, DVM; Board Case No. 4602019001222; OAH No. 2024081148.

The Board rejected the stipulated settlement and proposed a counteroffer.

22. Pursuant to Government Code Section 11126(e)(1) and (2)(A), the Board Will Meet in Closed Session to Confer and Receive Advice From Legal Counsel Regarding the Following Matter: *Gurdeep Deol, DVM v. Veterinary Medical Board*, Riverside County Superior Court, Case No. CVPS2402058

This item was not discussed.

23. *Adjourn Closed Session

Dr. Solacito recessed closed session on July 16, 2025, at 5:11 p.m.

Dr. Solacito adjourned closed session on July 17, 2025, at 11:39 a.m.

24. Reconvene Open Session

Dr. Solacito reconvened open session on July 17, 2025, at 11:39 a.m.

25. Adjournment

Dr. Solacito adjourned the meeting at 11:39 a.m.

Hyperlinks to the webcast are controlled by a third-party and may be removed at any time. They are provided for convenience purposes only and are not considered part of the official record.

**Agenda items 8, 17, 20, 21, and 23 were taken out of order. The order of business conducted herein follows the publicly noticed Board meeting Agenda.*