



## MEMORANDUM

<b>DATE</b>	January 9, 2026
<b>TO</b>	California Veterinary Medical Board (Board)
<b>FROM</b>	Marie Ussery, Member Multidisciplinary Advisory Committee (MDC)
<b>SUBJECT</b>	<b>Agenda Item 5.B. Recommendation on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 4825.1, 4826.6, 4830, and 4840.5 Regarding Veterinarian-Client-Patient-Relationship and Electronic Veterinary Services</b>

### **Background**

During its [October 2025 meeting](#), the MDC discussed concerns raised with the condition specific veterinarian-client-patient relationship (VCPR) and deliberated on whether the condition specific language should be removed. Ultimately, the MDC reached a consensus that the current language should be refined to reflect real-world practice. The condition-specific language could be removed and a time-based requirement to reestablish the VCPR, such as every 12 months, could be added.

This would align with controlled substance rules and apply to all prescriptions. There was general agreement that professional judgment should remain central, with added safeguards like time limits to balance access and protection.

As part of public comment, the California Veterinary Medical Association (CVMA) shared that they were considering sponsoring legislation to remove the condition specific language and shift to a patient specific VCPR.

During the Board's discussion the following day, the Board agreed that the MDC should proceed with developing recommendations for removing condition-specific language from VCPR requirements.

### **Update and Recommendation**

CVMA, San Francisco Society for the Prevention of Cruelty to Animals (SF SPCA), and San Diego Humane Society have expressed alignment with the Board's direction. As such, the Board's Executive Officer requested, and the groups accepted, to co-sponsor the legislation. That way, everyone can work closely together on one bill rather than two different pieces of competing legislation.

The Subcommittee and co-sponsors met multiple times to develop the attached legislative proposal. This legislative proposal not only shifts the condition specific VCPR

to patient-specific but also integrates previously approved telemedicine-related definitions and concepts. By doing so, this proposal removes the unintentionally narrowed telehealth scope created by Assembly Bill (AB) [1399](#) (Chapter 475, Statutes of 2023) and aligns terminology with industry standards.

Specifically, this proposal accomplishes the following:

#### **Definitions (BPC, § 4825.1)**

- Introduces new definitions for “electronic communication technology,” “herd,” “teleconsultation,” “telemedicine,” and “teletriage.”<sup>1</sup>
- Reorganizes into alphabetical order existing definitions for “animal,” “client,” and “Diagnosis”.
- Removes the definition of “synchronous” and “telehealth” as separate terms, integrating their meanings into new definitions.

#### **Rabies Exception (BPC, § 4826.6, subd. (a))**

- Adds previously Board-approved language exempting rabies vaccination administration from the VCPR requirement to prevent disease or loss of life.

#### **VCPR (BPC, § 4826.6):**

- Removes the condition specific language from subdivision (a)(2), as follows:  
(2) The veterinarian possesses sufficient knowledge of the animal patient ~~to initiate at least a general or preliminary diagnosis of the animal patient's medical condition.~~
- Moves the client-communication requirement to establish the VCPR in subdivision (a)(3), to a separate requirement in new subdivision (d), to be maintained throughout the lifespan of the VCPR as follows:  
(3) The veterinarian has assumed responsibility for making medical judgments regarding the health of the animal patient ~~and has communicated with the client a medical, treatment, diagnostic, or therapeutic plan appropriate to the circumstances.~~  
[...]  
(d) The veterinarian shall communicate with the client a medical, treatment, diagnostic, or therapeutic plan for each medical condition for which the veterinarian may prescribe, dispense, or administer treatment of whatever nature under the veterinarian-client patient relationship. If the medical, treatment, diagnostic, or therapeutic plan for a medical condition changes from that which was initially communicated to the client, then the

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<sup>1</sup> Herd, teleconsultation, telemedicine, and teletriage definitions were previously approved by the Board at the January 2023 meeting. Some definitions have been updated in this proposal to better align with current practice and AB 1399's legislative intent.

veterinarian must attempt to communicate the necessary changes with the client in a timely manner.

Since multiple conditions can be treated under the same VCPR, the veterinarian must communicate with the client the initial treatment plan for each medical condition and attempt to communicate any changes to the plan in a timely manner.

- Strikes subdivision (d), as telemedicine, defined in new BPC section 4825.1, subdivision (i), would replace telehealth and encompass all forms of electronic communication technology, defined under new BPC section 4825.1, subdivision (d).

The legislative proposal would not change the existing requirement for synchronous audio-video communication examination to establish the VCPR.

- Strikes subdivision (f) as unnecessary. The new definition of teleconsultation under BPC section 4825.1, subdivision (h), and amendments to BPC section 4830, subdivision (a)(2) and (7), would authorize an out-of-state veterinarian to practice veterinary medicine in California through teleconsultation; otherwise, the existing veterinarian licensure requirements to practice veterinary medicine in California remain unchanged.
- Subdivisions (g) and (h) are relettered as subdivisions (f) and (g), and amended to replace “telehealth” with “telemedicine” in conformity with the new definition of telemedicine.
- Subdivision (i) is relettered as subdivision (h), and makes the following changes:
  - Moves existing paragraph (2) (one-year prescription limitation) to new subdivision (k), as revised and discussed further below.
  - Moves existing paragraph (7) to new paragraph (2) for improved requirement organization.
  - Renumbers paragraph (2) as paragraph (3) and makes confirming revisions.
  - Moves existing paragraph (4) (six-month telemedicine prescription limitation) to new subdivision (k), as revised and discussed further below.
  - Renumbers paragraph (5) as paragraph (4) and revises the provisions in accordance with the new telemedicine provisions.
  - Renumbers paragraph (6) as paragraph (5).
  - Renumbers paragraph (8) as paragraph (6) and makes confirming revisions.
- Subdivision (j) is relettered as subdivision (i).

- Adds new subdivision (k) to establish a one-year VCPR expiration date after an in-person examination/visit and six month VCPR expiration after a synchronous audio-video examination. These provisions would replace the existing one-year and six-month prescription expirations. A new VCPR must be established after VCPR expiration.
- Moves language from California Code of Regulations (CCR), title 16, section 2032.15 to BPC section 4826.6, new subdivision (l), for ease of reference. This regulation outlines conditions under which a VCPR can continue in the absence of the original veterinarian, provided a designated veterinarian assumes responsibility and maintains the established plan.

To avoid confusion as to who “designates” the veterinarian, especially if the original veterinarian is absent due to illness/emergency, the legislative proposal would change “designated” to “subsequent” veterinarian serving at the same location where the medical records are kept.

- Moves language from CCR, title 16, section 2032.25 to BPC section 4826.6, new subdivision (m), for ease of reference. This regulation outlines conditions under which a drug refill may be prescribed, dispensed, or furnished in the absence of the original veterinarian.

The legislative proposal would refer to a subsequent veterinarian who prescribes, dispenses, or furnishes the refill, and, other than establishing the VCPR, which must already be established by the original veterinarian, the subsequent veterinarian would be subject to the other drug requirements of the statute.

#### **Teleconsultation (BPC, § 4830, subd. (a))**

- In paragraphs (2) and (7), accommodates licensure exemption for out-of-state veterinarians providing teleconsultation, defined under BPC section 4825.1, subdivision (h).

#### **Teleconsultation (BPC, § 4840.5)**

- Accommodates an RVT rendering lifesaving aid and treatment in an emergency including through teletriage, defined under BPC section 4825.1, subdivision (j).

#### **Benefits:**

The Subcommittee and co-sponsors believe this proposal aligns with current standard of care by moving to a patient specific VCPR. It also modernizes veterinary practice by embracing the benefits of teleconsultation, telemedicine, and teletriage while maintaining essential safeguards for animal welfare and public trust.

- **Enhanced Access to Care:** AB 1399 unintentionally limited the ability for veterinarians to provide care through electronic means by requiring a VCPR for

all veterinary services and limiting the provision of electronic veterinary services to only veterinarians. This proposal restores the ability for veterinary professionals to deliver veterinary services electronically, enhancing access to care.

- **Clearer Definitions and Regulations:** The updated definitions and requirements for establishing and maintaining a VCPR, especially in the context of telemedicine, provide much-needed clarity for both veterinarians and clients. This reduces ambiguity and promotes consistent application of standards.
- **Improved Animal Welfare:** By clearly defining teletriage and clarifying how it can be used in emergencies, this proposal can lead to faster access to veterinary advice and potentially life-saving interventions. The new one-year expiration period for VCPRs established with an in-person examination and six-month expiration period for VCPRs establish via electronic examination ensures that veterinarians maintain appropriate oversight and re-evaluate patient needs regularly.
- **Supports Veterinarian-to-Veterinarian Collaboration:** The clarified provisions for teleconsultation codifies the existing practice of collaboration among veterinarians, allowing specialists or veterinarians in other states to offer expertise to California-licensed veterinarians, ultimately benefiting the animal patient.

**Action Requested:**

If the Board agrees with the Subcommittee and MDC's recommendation, please entertain a motion to submit to the California State Legislature the attached legislative proposal to amend BPC sections 4825.1, 4826.6, 4830, and 4840.5.

**Attachment:**

1. Legislative Proposal to Amend BPC Sections 4825.1, 4826.6, 4830, and 4840.5  
Regarding Veterinarian-Client-Patient-Relationship and Electronic Veterinary Services

## CALIFORNIA VETERINARY MEDICAL BOARD

### LEGISLATIVE PROPOSAL TO AMEND BUSINESS AND PROFESSIONS CODE SECTIONS 4825.1, 4826.6, 4830, AND 4840.5 REGARDING VETERINARIAN-CLIENT- PATIENT RELATIONSHIP AND ELECTRONIC VETERINARY SERVICES

Additions are indicated in single underline.

Deletions are indicated in single strikethrough.

**4825.1.** These definitions shall govern the construction of this chapter as it applies to veterinary medicine.

(a) "Animal" means any member of the animal kingdom other than humans, and includes fowl, fish, and reptiles, wild or domestic, whether living or dead.

(a)(b) "Client" means the individual or individuals who represent to the veterinarian that they are the owner or owners of the animal patient at the time that the services are provided.

(b)(c) "Diagnosis" means the act or process of identifying or determining the health status of an animal patient through examination and the opinion derived from that examination.

(c) "Animal" means any member of the animal kingdom other than humans, and includes fowl, fish, and reptiles, wild or domestic, whether living or dead.

(d) "Electronic communication technology" means electronic devices and systems that transfer electronic content that includes, but is not limited to:

- (1) Electronic mail.
- (2) Live chats and synchronous, two-way text messaging.
- (3) Still photographs.
- (4) Synchronous video and audio communication.
- (5) Synchronous, two-way audio communication.
- (6) Telephone and voicemail.
- (7) Videos.

(d)(e) "Food animal" means any animal that is raised for the production of an edible product intended for consumption by humans. The edible product includes, but is not limited to, milk, meat, and eggs. Food animal includes, but is not limited to, cattle (beef or dairy), swine, sheep, poultry, fish, and amphibian species.

(f) "Herd" refers to any group of two or more animals of the same species and located at the same geographic location.

(e)(g) "Livestock" includes all animals, poultry, aquatic and amphibian species that are raised, kept, or used for profit. It does not include those species that are usually kept as pets such as dogs, cats, and pet birds, or companion animals, including equines.

(f) "Synchronous" means a real-time interaction between a client and animal patient with a veterinarian who is licensed in this state and located at a distant site.

(g) "Telehealth" means the mode of delivering veterinary medicine via electronic communication technologies to facilitate the diagnosis, consultation, care management, or treatment of an animal patient, and includes, but is not limited to, synchronous video and audio communication; synchronous, two-way audio communication; and electronic transmission of images, diagnostics, data, and medical information.

(h) "Teleconsultation" means communication via electronic communication technology between a California-licensed veterinarian who has established the veterinarian-client-patient relationship for the animal patient(s), and an individual whose expertise, in the opinion of the California-licensed veterinarian, would benefit the animal patient(s), but who does not have a veterinarian-client-patient relationship for the animal patient(s), does not have direct communication with the client or client's agent, and does not have ultimate authority over the care or primary diagnosis of the animal patient(s).

(i) "Telemedicine" means the use of electronic communication technology to practice veterinary medicine.

(j) "Teletriage" means the use of electronic communication to diagnose and treat a medical emergency as defined under Section 4840.5 without establishing a veterinarian-client-patient relationship, until the animal patient(s) can be transported to, and/or seen by, a veterinarian.

**4826.6.** (a) A veterinarian shall not prescribe, dispense, or administer a drug, medicine, application, or treatment of whatever nature for the prevention, cure, or relief of a wound, fracture, bodily injury, or disease of animals unless a veterinarian-client-patient relationship exists or as otherwise permitted by law, except when the animal patient is a wild animal or the owner of the animal patient is unknown, or a rabies vaccination is prophylactically administered to the animal patient to prevent disease or loss of life. A veterinarian-client-patient relationship exists if all of the following conditions are met:

- (1) The client has authorized the veterinarian to assume responsibility for medical judgments regarding the health of the animal patient.
- (2) The veterinarian possesses sufficient knowledge of the animal patient to initiate at least a general or preliminary diagnosis of the animal patient's medical condition.

(3) The veterinarian has assumed responsibility for making medical judgments regarding the health of the animal patient and has communicated with the client a medical, treatment, diagnostic, or therapeutic plan appropriate to the circumstances.

(b) A veterinarian possesses sufficient knowledge of the animal patient for purposes of paragraph (2) of subdivision (a) if the veterinarian has recently seen, or is personally acquainted with, the care of the animal patient by doing any of the following:

(1) Examining the animal patient in person.

(2) Examining the animal patient by use of synchronous audio-video communication.

(3) Making medically appropriate and timely visits to the premises on which the animal patient is kept.

(c) For purposes of paragraphs (1) and (3) of subdivision (a), the client may authorize an agent to act on the client's behalf.

(d) The veterinarian shall communicate with the client a medical, treatment, diagnostic, or therapeutic plan for each medical condition for which the veterinarian may prescribe, dispense, or administer treatment of whatever nature under the veterinarian-client patient relationship. If the medical, treatment, diagnostic, or therapeutic plan for a medical condition changes from that which was initially communicated to the client, then the veterinarian must attempt to communicate the necessary changes with the client in a timely manner.

(d) Synchronous audio-video communication is not required for the delivery of veterinary medicine via telehealth after a veterinarian-client-patient relationship has been established unless the veterinarian determines that it is necessary in order to provide care consistent with prevailing veterinary medical practice.

(e) A veterinarian-client-patient relationship shall not be established solely by audio-only communication or by means of a questionnaire.

(f) Only a person who holds a current license to practice veterinary medicine in this state is authorized to practice veterinary medicine via telehealth on an animal patient located in this state.

(f)(g) Before delivering veterinary medicine via telehealth telemedicine, the veterinarian shall inform the client about the use and potential limitations of telehealth telemedicine and obtain consent from the client to use telehealth telemedicine, including acknowledgment of all of the following:

(1) The same standards of care apply to veterinary medicine services via telehealth telemedicine and in-person veterinary medical services.

(2) The client has the option to choose an in-person visit from a veterinarian at any time.

(3) The client has been advised how to receive follow-up care or assistance in the event of an adverse reaction to the treatment or in the event of an inability to communicate resulting from technological or equipment failure.

(g)(h) A veterinarian who practices veterinary medicine via ~~telehealth~~ telemedicine shall do all of the following:

(1) Ensure that the technology, method, and equipment used to provide veterinary medicine services via ~~telehealth~~ telemedicine comply with all current privacy protection laws.

(2) Have historical knowledge of the animal patient by obtaining and reviewing the animal patient's relevant medical history, and, if available, medical records. If medical records exist from a previous in-person visit and are available to the client, the client may transmit those records, including any diagnostic data contained therein, to the veterinarian electronically.

(3) Employ sound professional judgment to determine whether using ~~telehealth~~ telemedicine is an appropriate method for delivering medical ~~advice~~ or treatment to the animal patient and providing quality of care consistent with prevailing veterinary medical practice.

(4) Be familiar with available medical resources, including emergency resources near the animal patient's location, be able to provide the client with a list of nearby veterinarians who may be able to see the animal patient in person upon the request of the client, and keep, maintain, and make available a summary of the animal patient record, as specified in Section 4855.

(5) Provide the client with the veterinarian's name, contact information, and license number.

(6) Secure an alternative means of contacting the client if the electronic means is interrupted.

(h)(i) (1) A veterinarian shall not prescribe a drug for a duration of time that is inconsistent with the medical condition of the animal patient or the type of drug prescribed.

~~(2) A veterinarian who established the required veterinarian-client-patient relationship by examining the animal patient in person or by making medically appropriate and timely visits to the premises on which the animal patient is kept shall not prescribe a drug for a duration of time that is longer than one year from the date that the veterinarian examined the animal patient in person or visited the premises and prescribed the drug.~~

(2) The veterinarian shall notify the client that some prescription drugs or medications may be available at a pharmacy and, if requested, the veterinarian shall submit a prescription to a pharmacy that the client chooses.

(3) Except as provided in paragraphs (4) to (6)(8), inclusive, a veterinarian who practices ~~veterinary medicine via telehealth~~ telemedicine may order, prescribe, or make available drugs, as defined in Section 11014 of the Health and Safety Code, in accordance with all relevant state and federal regulations.

(4) A veterinarian who established the required veterinarian-client-patient relationship using synchronous audio-video communication shall not prescribe a drug to the animal patient for use for a period longer than six months from the date upon which the veterinarian examined the animal patient or prescribed the drug. The veterinarian shall not issue another prescription to the animal patient for the same drug unless they have conducted another examination of the animal patient, either in person or using telehealth.

(4)(5) A veterinarian who established the required veterinarian-client-patient relationship using synchronous audio-video communication shall not prescribe an An antimicrobial drug prescribed to the animal patient via telemedicine shall not exceed for a period longer than 14 days of treatment. The A veterinarian shall not issue any further antimicrobial drug prescription, including a refill, to treat the condition of the animal patient unless the veterinarian has conducted an in-person examination of the animal patient.

(5)(6) The A veterinarian shall not order, prescribe, or make available a controlled substance, as defined in Section 4021, or xylazine, unless the veterinarian has performed an in-person physical examination of the animal patient or made medically appropriate and timely visits to the premises where the animal patient is kept.

(7) The A veterinarian shall notify the client that some prescription drugs or medications may be available at a pharmacy and, if requested, the veterinarian shall submit a prescription to a pharmacy that the client chooses.

(6)(8) A veterinarian shall not prescribe via ~~telehealth~~ telemedicine any drug or medication for use on a horse engaged in racing or training at a facility under the jurisdiction of the California Horse Racing Board pursuant to Chapter 4 (commencing with Section 19400) of Division 8.

(i)(j) As used in this section, "drug" means any controlled substance, as defined in Section 4021, or any dangerous drug, as defined in Section 4022.

(i)(k) A veterinarian is permitted to use ~~telehealth~~ teletriage without establishing a veterinarian-client-patient relationship in order to provide advice in an emergency, as defined in Section 4840.5.

(k) The veterinarian-client-patient relationship shall expire one year after examining the animal patient pursuant to paragraphs (1) or (3) of subdivision (b) or six months after examining the animal patient pursuant to paragraph (2) of subdivision (b). Upon expiration of the veterinarian-client-patient relationship, a new veterinarian-client-patient relationship shall be established to prescribe, dispense, or administer a drug, medicine,

application, or treatment of whatever nature for the prevention, cure, or relief of a wound, fracture, bodily injury, or disease of the animal patient.

(l) A veterinarian-client-patient relationship may continue to exist in the absence of the veterinarian when all of the following are met:

(1) A veterinarian-client-patient relationship was established with an original veterinarian, and a subsequent veterinarian serves in the absence of the original veterinarian at the same location where the medical records are kept.

(2) The subsequent veterinarian has assumed responsibility for making medical judgments regarding the health of the animal patient(s).

(3) The subsequent veterinarian has sufficient knowledge of the animal patient to initiate at least a general or preliminary diagnosis of the medical condition of the animal patient through one of the following:

(A) Examining the animal patient in person.

(B) Examining the animal patient via telemedicine.

(C) Making medically appropriate and timely visits to the premises where the animal patient is kept.

(D) Consulting with the original veterinarian who established the veterinarian-client-patient relationship.

(4) The subsequent veterinarian has continued the medical, treatment, diagnostic and/or therapeutic plan that was set forth and documented in the medical record by the original veterinarian.

(5) If the medical, treatment, diagnostic and/or therapeutic plan differs from that which was communicated to the client or client's agent by the original veterinarian, then the subsequent veterinarian has attempted to communicate the necessary changes with the client or client's agent in a timely manner.

(m) In the absence of the originally prescribing veterinarian who established the veterinarian-client-patient relationship, a subsequent veterinarian may prescribe, dispense, or furnish a refill of drugs for use on the animal patient if either of the following applies:

(1) The drugs were prescribed, dispensed, or furnished on an emergency basis for a traveling animal patient only as necessary to maintain the health of the animal patient until the animal patient can return to the originally prescribing veterinarian. Prior to providing a prescription refill pursuant to this paragraph, the veterinarian shall make a reasonable effort to contact the originally prescribing veterinarian, and document the communication, or the attempt to contact the originally prescribing veterinarian, in the animal patient's medical record.

(2) The subsequent veterinarian serves at the same location as the originally prescribing veterinarian, who was unavailable to authorize the refill, and the subsequent veterinarian authorizing the refill fulfills all of the following:

- (A) Possesses and reviews the animal patient's records.
- (B) Orders the refill of a medically indicated prescription for an amount not exceeding the original prescription in strength or amount or for more than one refill.
- (C) Enters the prescription refill in the animal patient's medical records.
- (D) In the subsequent veterinarian's professional judgment, determines that failure to refill the prescription might interrupt the animal patient's ongoing care and might have an adverse effect on the animal patient's well-being.

**4830.** (a) This chapter does not apply to:

- (1) Veterinarians while serving in any armed branch of the military service of the United States or the United States Department of Agriculture while actually engaged and employed in their official capacity.
- (2) Veterinarians holding a current, valid license in good standing in another state or country who provide assistance through any means, including via teleconsultation, to a California-licensed veterinarian and attend on a specific case. The California-licensed veterinarian shall maintain a valid veterinarian-client-patient relationship. The veterinarian providing the assistance shall not establish a veterinarian-client-patient relationship with the client by attending the case or at a future time and shall not practice veterinary medicine, open an office, appoint a place to meet patients, communicate with clients who reside within the limits of this state, give orders, or have ultimate authority over the care or primary diagnosis of a patient that is located within this state.
- (3) Veterinarians called into the state by a law enforcement agency or animal control agency pursuant to subdivision (b).
- (4) A student of a veterinary medical program accredited by the American Veterinary Medical Association Council on Education who participates as part of the student's formal curriculum in the diagnosis and treatment with direct supervision by a California-licensed veterinarian, or in surgery with immediate supervision by a California-licensed veterinarian, provided all of the following requirements are met:

- (A) The clinical training site has been approved by the university where the student is enrolled.
- (B) The student has prior training in diagnosis, treatment, and surgery as part of the formal curriculum.

(5) A veterinarian who is employed by the Meat and Poultry Inspection Branch of the California Department of Food and Agriculture while actually engaged and employed in the veterinarian's official capacity. A person exempt under this paragraph shall not otherwise engage in the practice of veterinary medicine unless the person is issued a license by the board.

(6) Unlicensed personnel employed by the Department of Food and Agriculture or the United States Department of Agriculture when in the course of their duties they are directed by a veterinarian supervisor to conduct an examination, obtain biological specimens, apply biological tests, or administer medications or biological products as part of government disease or condition monitoring, investigation, control, or eradication activities.

(7) A person not licensed under this chapter who provides teleconsultation to a California-licensed veterinarian.

(b) (1) For purposes of paragraph (3) of subdivision (a), a regularly licensed veterinarian in good standing who is called from another state by a law enforcement agency or animal control agency, as defined in Section 31606 of the Food and Agricultural Code, to attend to cases that are a part of an investigation of an alleged violation of federal or state animal fighting or animal cruelty laws within a single geographic location shall be exempt from the licensing requirements of this chapter if the law enforcement agency or animal control agency determines that it is necessary to call the veterinarian in order for the agency or officer to conduct the investigation in a timely, efficient, and effective manner. In determining whether it is necessary to call a veterinarian from another state, consideration shall be given to the availability of veterinarians in this state to attend to these cases. An agency, department, or officer that calls a veterinarian pursuant to this subdivision shall notify the board of the investigation.

(2) Notwithstanding any other provision of this chapter, a regularly licensed veterinarian in good standing who is called from another state to attend to cases that are a part of an investigation described in paragraph (1) may provide veterinary medical care for animals that are affected by the investigation with a temporary shelter facility, and the temporary shelter facility shall be exempt from the registration requirement of Section 4853 if all of the following conditions are met:

(A) The temporary shelter facility is established only for the purpose of the investigation.

(B) The temporary shelter facility provides veterinary medical care, shelter, food, and water only to animals that are affected by the investigation.

(C) The temporary shelter facility complies with Section 4854.

(D) The temporary shelter facility exists for not more than 60 days, unless the law enforcement agency or animal control agency determines that a longer period of time is necessary to complete the investigation.

(E) Within 30 calendar days upon completion of the provision of veterinary health care services at a temporary shelter facility established pursuant to this section, the veterinarian called from another state by a law enforcement agency or animal control agency to attend to a case shall file a report with the board. The report shall contain the date, place, type, and general description of the care provided, along with a listing of the veterinary health care practitioners who participated in providing that care.

(c) For purposes of paragraph (3) of subdivision (a), the board may inspect temporary facilities established pursuant to this section.

**4840.5.** Under conditions of an emergency, a registered veterinary technician may render such lifesaving aid and treatment through any means, including via teletriage, as may be prescribed under regulations adopted by the board pursuant to Section 4836. Such emergency aid and treatment if rendered to an animal patient not in the presence of a licensed veterinarian may only be continued under the direction of a licensed veterinarian. "Emergency" for the purpose of this section, means that the animal has been placed in a life-threatening condition where immediate treatment is necessary.