

# West Virginia Board of Veterinary Medicine

NEWSLETTER

MAY 2025

## NEWS FLASH!

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### MEDICAL RECORD KEEPING CE—SEPTEMBER 22, 2023

One of the most common findings in complaint reviews has been insufficient documentation in medical records. As a result, the WV Board of Veterinary Medicine has done the following:

- Held a 2nd Medical Record Keeping CE on September 22, 2023 for all licensed veterinarians, registered veterinary technicians, veterinary assistants, and office managers. There was a great turnout and a way for the licensees/registrants to communicate with their peers, as well as Board members. The presenters and topics are listed below:
  - Dr. Sue Duran—Veterinary Facility Drug Handling
  - Dr. Keith Berkeley, Board Chair—Medical Record Keeping Guidance
  - Questions for the Board and Dr. Sue Duran
- Created a Medical Record Keeping Guidance Document
  - This guidance document can be found on the home page at [www.wvbvm.gov](http://www.wvbvm.gov).
    - Examination Requirements
    - Rabies Vaccines
    - Medical Record Documentation Guidance
    - Exam and Monitoring Templates
    - Rabies Vaccine Exam Visit Waiver Template (see page 2 of newsletter)
    - Pre-Anesthesia Examination and Monitoring Template
    - Surgery Patient Records Template

### NEW WEBSITE NAME—WVBVM.GOV

The Board's new website is now [wvbvm.gov](http://wvbvm.gov). Because the Board is a state agency, the WV legislation has suggested that licensing Boards' websites should be easily identified ending in ".gov."

The previous website, [www.wvbvm.org](http://www.wvbvm.org), will be automatically forwarded to the new website.

Please contact the Board if you have trouble locating the new website.

## RABIES VACCINE EXAM WAIVER TEMPLATE

The Board will allow a brief examination to be done to determine if the animal is healthy enough to receive a vaccine along with a required Rabies only visit waiver (shown below). If you are unable to examine a patient due to its demeanor, that should be documented. A record of the examination, the waiver and vaccine information must be maintained and kept for 3 years beyond the last patient visit.

### WV BOARD OF VETERINARY MEDICINE RECOMMENDED

#### RABIES VACCINE EXAM VISIT WAIVER TEMPLATE

I, client, understand this is a Rabies only vaccine visit. **The purpose of this visit is to protect the public and animal health from Rabies.** I understand my pet will only be provided with a brief visual exam to verify that my pet is healthy enough to receive the Rabies vaccine. Some diseases and conditions will not be detected with this type of exam, slightly increasing the chance of an unexpected result from the vaccine. I understand the purpose and accept the risk of getting my pet vaccinated in this type of setting.

Rabies Vaccine Given: \_\_\_\_\_ 1 Year \_\_\_\_\_ 3 year

Patient Name: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Client Provided Medical History: \_\_\_\_\_ Yes \_\_\_\_\_ No

Client Provided Immunization Records: \_\_\_\_\_ Yes \_\_\_\_\_ No

Please contact the veterinary facility of your choice should your pet have an adverse reaction to the Rabies vaccination.

**Method of emergency care:** (Insert what method was provided to the client should the patient require emergency care when the veterinarian is not available)

**§26-4-3.9.** The professional services of a veterinarian shall not be controlled or exploited by any lay agency, personal or corporate, which intervenes between the client and the veterinarian. A veterinarian shall avoid all relationships which could result in interference or intervention in the veterinarian's practice by any person or entity. A veterinarian is responsible for his or her own actions and is directly responsible to the client and for the proper care and treatment of the patient. ***This is to include information on how clients may receive emergency care when the veterinarian is not available.***

**§26-4-5.6.e.** The veterinarian shall provide a method for the client to obtain emergency advice pertaining to surgical and post treatment problems after the animal is released to the owner or agent following the completion of the surgery or treatment;

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

## RECENT BOARD QUESTIONS AND ANSWERS

**Question:** Could the Board elaborate on §26.5.6.e. The veterinarian shall provide a method for the client to obtain emergency advice pertaining to surgical and post treatment problems after the animal is released to the owner or agent following the completion of the surgery or treatment.

**Answer:** Provide to the client either an emergency phone number for your facility or a phone number to a local emergency veterinary facility.

**Question:** What's the minimum database requirement for surgeries, vaccines, and other records?

**Answer:** Please see the Record Keeping Guidance Document and Series 4 "Standards of Practice" for guidance.

**Question:** When sharing records/information, are we allowed to share with county-run facilities without written consent from the client?

**Answer:** No, you must have written consent from the client. However, records may be released by court order, subpoena or compliance with local, state or federal law as deemed necessary to protect the animal or public health.

**Question:** Will digital records be a requirement in the near future?

**Answer:** No.

**Question:** Do emergency clinics have to accept patients 24 hours a day to advertise as an emergency clinic?

**Answer:** No, an emergency clinic means a facility that provides after hours OR 24 hour emergency care.

**Question:** Generally, any advise about preparing for and taking the exam for WV state licensure.

**Answer:** You will be required to pass the NAVLE and pass the open book WV jurisprudence exam.

**Question:** Can you comment on the use of digital DEA documentation such as VetSnap that would streamline processes for veterinarians and hospitals?

**Answer:** There is no requirement for a handwritten log. However, the records must be readily retrievable, meaning the reports can be generated at our request in a reasonable amount of time. Please ensure all the affected staff would be trained on how to generate reports. There are other non-veterinary businesses that utilize specific software for DEA compliance which seems to work well for them. However, the DEA cannot endorse anything specific.

**Question:** Can a WV RVT give boosters to an animal if a relief veterinarian has already established a VCPR at the facility? The relief veterinarian gave the initial vaccines and noted the booster requirements in the patient records. There is no full-time veterinarian at this facility.

**Answer:** A RVT can only give boosters under general supervision of a WV licensed veterinarian for animals with a current VCPR. "General supervision" means the supervising veterinarian is in the building where the animal is being treated, has given instructions for treatment and is quickly and easily available.

**Question:** Can a veterinary assistant or veterinary technician (someone other than the veterinarian) apply a microchip?

**Answer:** Yes, under general supervision of a WV licensed veterinarian.

**Question:** Does the Board have regulatory authority over a veterinarian working at racetracks or humane societies/shelters?

**Answer:** Yes, all veterinarians licensed by the Board must adhere to the Board's laws and regulations.

## EQUINE DENTAL CARE

**WV Board of Veterinary Medicine "Board" Equine Dental Care Stakeholders' Meeting was held Monday, July 15, 2024.**

The purpose of the stakeholders meeting was to discuss possible resolutions for unlicensed people practicing equine dental care in WV. This meeting was facilitated by Jim Strawn, moderator. The ones that could not attend in person were able to watch the meeting virtually.

**The agenda items were:**

- Attendees provided comments identifying the problems of equine dental care practiced by unlicensed people.
- Attendees provided ideas and solutions to solve the problem of equine dental care practiced by unlicensed people.

**The WV Board of Veterinary Medicine is still researching and discussing equine dentistry performed by non licensees. The Board does expect non-licensees that are performing equine dentistry to be under general supervision of a WV licensed veterinarian.**

## WV CONTROLLED SUBSTANCES

### LISTED FOR WV BUT NOT FEDERAL

These drugs must be entered into the controlled substance register for all drugs dispensed, administered, or prescribed.

- Xylazine - WV Schedule IV - **must be secured in a locked safe**
- Fioricet (butalbital/acetaminophen/caffeine) - WV Schedule III - **must be secured in a locked safe**
- Gabapentin - WV Schedule V - **must be secured in a locked safe**
- Pseudoephedrine - WV Schedule V - **must not be accessible to the public**
- Proin (contains phenylpropanolamine) – WV Schedule V - **must not be accessible to the public**

## DISPOSING OF CONTROLLED SUBSTANCES OPTIONS

DEA Requires using an approved DEA Reverse Distributor for disposing of controlled substances. DEA Form 41 must be completed and a witness' signature is required.

**There is a list of DEA approved Reverse Distributors and Distributors that offer mail in services on the Board's website: <https://www.wvbvm.gov/Home/Practitioners/Forms-Links> (Under Facility Tab).**

## DEA GUIDANCE ON USING A DISPOSAL PRODUCT NOT LISTED ON THE DEA REVERSE DISTRIBUTOR LIST:

To comply with the DEA regulations when disposing of a controlled substance, registrants must use a method which renders the substance "**non-retrievable**" (21 CFR 1317.90(a)) and otherwise complies with relevant law and regulations. The term "non-retrievable" is defined in a results oriented manner as DEA requires the substance to be permanently rendered to an unusable state. 21 CFR 1300.05. The performance standard is that the method irreversibly renders the substance such that it cannot be transformed to a physical or chemical condition or state as a controlled substance or controlled substance analogue. Thus, regardless of whether the product claims to render controlled substances non-retrievable, to comply with the DEA regulations, a registrant that disposes of a controlled substance must use a product or method that actually does render the controlled substance non-retrievable within the meaning of the DEA regulations.

## TELEHEALTH PRACTICE

The practice of veterinary medicine occurs where the patient is located at the time telehealth services are provided. Must be a WV Licensed Veterinarian or a Registered Veterinary Telehealth Practitioner.

**Veterinarians cannot diagnose medical conditions, prescribe medications, or provide treatment without having an in-person VCPR established within the last 12 months.**

### Licensed Veterinarian

- Practices veterinary medicine at a WV veterinary facility.
- VCPR is established with an in-person exam at the WV veterinary facility.
- Telehealth visits are allowed for 12 months after the in-person VCPR.
- If a veterinarian with the same registered WV veterinary facility has established a VCPR with the patient, another veterinarian from that facility can provide telehealth veterinary services to that patient under that same VCPR.

### Registered Veterinary Telehealth Practitioner

- Practices veterinary medicine at an out of state veterinary facility (Most likely neighboring states).
- VCPR is established with an in-person exam at the out-of-state veterinary facility.
- Telehealth visits are allowed for 12 months after the in-person VCPR.

### A provider of telehealth services must ensure that the client is aware of the following:

- Veterinarian's identity
- Location
- License number
- Licensure status
- Provide to the client a clear mechanism to:
  - Access, supplement, and amend client-provided contact information and health information about the patient
  - Register complaints with the Board
  - Provide consent for the use of telemedicine
- Patient medical records must meet the requirements as specified in the Standard of Practice Rules.

### Prescribing:

- Shall not prescribe any controlled substance listed in Schedule II of the Uniform Controlled Substance Act via interstate telehealth services.
- Federal law requires that a licensed veterinarian have an established, in-person VCPR, to prescribe the extralabel use of approved animal or human drugs, or to issue a VFD.

### In the event of an imminent, life-threatening emergency:

- Telehealth services can be performed without an existing VCPR or
- Without an in-person visit within 12 months.

## SCHEDULE OF BOARD MEETINGS AND TRAINING

### MEETINGS ARE OPEN TO THE PUBLIC OTHER THAN WHEN IN EXECUTIVE SESSION

July 24, 2025— Rule Making Committee Meeting

July 25, 2025—Complaint Committee Meeting (Executive Session)

July 25, 2025—Board Meeting

October 17, 2025—Complaint Committee Meeting (Executive Session)

October 17, 2025—Board Meeting

November 14-16, 2025—CAET Certification Training

## COMMUNICATING WITH CLIENTS

Most of the complaints that the Board has received against veterinarians could have been resolved if the veterinarian had communicated to the client. Below are some suggestions to help improve communication with clients:

- Waiving blood work or other testing:
  - You should talk to the client and be sure they understand what they are signing.
- Document if you are providing clients with waivers or after care instructions:
  - May want to have signature of client and veterinarian
- Clients complain for not being able to talk to the veterinarians.

## AMBULATORY FACILITY REGISTRATION

Effective July 1, 2018, ambulatory facilities were required to be registered and inspected.

**"Ambulatory practice" means a professional visit to the location of a patient or client and includes house calls and farm calls.**

All veterinarians that offer ambulatory services in WV must have their ambulatory facility registered with the Board and the ambulatory vehicle(s) are required to be inspected by the Board's Inspector. Please contact the Board office if you are needing to get your ambulatory vehicle registered.

## BENEFITS FOR RENEWING YOUR LICENSE ON TIME

The Board office received several phone calls and emails in the last days of renewals in December from licensees that were trying to renew their license. Because the Board is a state agency, the office was closed for New Years Eve and New Years Day.

In order to guarantee your license will be renewed on time, the Board suggests the following:

- Paper renewals be mailed or emailed by December 15
- Online renewals be submitted by December 25
  - Sometimes there are glitches with online renewals, you may need to verify with the Board office that your renewal was processed.

### Renewal Dates: October 1 – December 31

Online Renewals Available

- **Avoid Late Fees**
  - Veterinary - \$62.50
  - RVT - \$1.25
  - CAET - \$12.50
- **Avoid Not Being Compliant with the Board's Law by Practicing Without an Active License**
- **Avoid Delays for Being Able to Order/Fill Prescriptions**
- **Avoid Panic—Peace of Mind**

**RECENT DISCIPLINARY ACTION**

Copies of disciplinary actions are available on our website.

**CONSENT AGREEMENT: Case 0622A Dr. Julia Thomas—March 23, 2023**

**Violation:** Failed to maintain an adequate anesthesia log and monitoring during surgery.

**Penalty:** Within 3 months of Consent Agreement, complete 3 hours of CE on the subject of record keeping and reimbursement of the Board cost and legal expenses. Within 3 months from completion of medical record keeping CE, provide 5 surgery medical records for the Board to review.

**CE AUDIT DISCIPLINARY—Failed to obtain the required CEs within the calendar year 2022**

**Penalty:** Within 3 months of Consent Agreement, fine of \$100.00, reimbursement of the Board cost and legal expenses. Within 6 months of Consent Agreement, complete deficient CE. Such hours may NOT be counted as part of the CE requirement for the calendar year 2023. Submit to a CE audit for 2023 CEs.

**Case BVMCE0523A—Dr. Jessica Anderson**

**Case BVMCE0523B—Dr. Allison Dascoli**

**Case BVMCE0523C—Dr. Conrad McCoy**

**Case BVMCE0523D—Dr. Linda Richards**

**Case BVMCE0523E—Raschel Pecjak, RVT**

**CONSENT AGREEMENT: Case 0123B Dr. Patrick Masters—August 1, 2023**

**Violation:** Failed to maintain adequate patient medical records, as the records did not contain vital signs for first day of treatment, the records noted that the physical examination was checked “normal,” including the skin, where it was clear that the patient had lacerations, the records noted that muscular skeletal was checked “normal,” when the previous veterinary providers noted a painful left leg, and the records lacked an adequate description of wounds for progress assessment.

**Penalty:** Within 3 months of Consent Agreement, complete 3 hours of CE on the subject of medical record keeping and reimbursement of the Board cost and legal expenses. Within 3 months from completion of medical record keeping CE, provide 5 medical records for the Board to review.

**CONSENT AGREEMENT: Case 1222A and 0323B Dr. Kevin Hennessy—September 6, 2023**

**Violation:** Failed to provide appropriate pain management and failed to perform adequate anesthesia monitoring during the anesthesia process.

**Penalty:** Probation for a period of 2 years. During this period of probation, submit 4 medical records every month and be visited by a Board member or a person approved by the Board at least once per month. If during the probationary period, the medical records continue to be insufficient, or if the Board receives 1 more complaint in which it determines that probable cause exists to charge with one or more violations of the Board’s governing statutes and rules, the Board will consider more severe action. Professional behavior and conduct shall be observed by the officer manage on a daily basis. Coordinate with the office manager to have them submit a monthly report to the Board; and shall be responsible for coordinating with the Board-approved supervising veterinarian to have him/her submit a report to the Board after each visit, including copies of patient records reviewed and verification of such review. Within 6 months of Consent Agreement, complete 6 hours of CE on the subject of veterinary pharmacy, 3 hours of CE on the subject of gastrointestinal surgery, and reimbursement of the Board cost and legal expenses.

**CONSENT AGREEMENT: Case 1222A, 0323B, 1023B Dr. Kevin Hennessy—January 4, 2024**

**Violation:** Failed to comply with Consent Agreement and Order by not maintaining complete medical records. Failure to provide professional standard of care that resulted in a dog dying and failure to maintain adequate patient records, as the records misrepresented lab results, and failure to provide correct interpretation of lab results.

**Penalty:** Suspended license.



**RECENT DISCIPLINARY ACTION—CONTINUED****CONSENT AGREEMENT: Case 1222A, 0323B, 1023B Dr. Kevin Hennessy—March 18, 2024**

**Violation:** During the probationary period, failed to provide professional standard of care that resulted in a dog dying and failure to maintain adequate patient records, as the records misrepresented lab results, and failure to provide correct interpretation of lab results.

**Penalty:** Revoked license.

**CONSENT AGREEMENT: Case 0323C Dr. Jacqueline Chevalier—February 5, 2024**

**Violation:** Failed to provide the adequate standard of care by declining to offer or perform additional optional diagnostic treatments, such as imaging, and providing incomplete documentation of client communication.

**Penalty:** Within 3 months of Consent Agreement, complete 3 hours of CE on the subject of the urinary system and reimbursement of the Board cost and legal expenses.

**CE AUDIT DISCIPLINARY—Failed to obtain the required hours of CEs within the calendar year 2023**

Within 3 months of Consent Agreement, fine of \$100.00, reimbursement of the Board cost and legal expenses.

Within 6 months of Consent Agreement and Order, complete deficient CE. Such hours may NOT be counted as part of the CE requirement for the calendar year 2024. Submit to a CE audit for 2024 CEs.

**Case BVMCE0324A—Dr. Timothy Knotts**

**Case BVMCE0324B—Dr. John Spiker**

**Case BVMCE0324C—Dr. David Williams**

**Case BVMCE0324D—Kaitlyn Rhodes, RVT**

**Case BVMCE0324E—Heather Sager, RVT**

**CONSENT AGREEMENT: Case 1223C Dr. Laura Slack—June 28, 2024**

**Violation:** Failed to perform post-surgical monitoring as shown by the incomplete patient medical records, the difficulty of awaking the patient, and the resulting death of the patient.

**Penalty:** Within 3 months of Consent Agreement, complete 3 hours of CE on the subject of surgical anesthesia and post-surgical monitoring and reimbursement of the Board cost and legal expenses.

**CONSENT AGREEMENT: Case 0424C Dr. Mary Olson—August 19, 2024**

**Violation:** Failed to act on a critical patient and failed to properly monitor the animal during post-operative care when the veterinary facility was closed and failed to address the post-operative complications which prevented the animal's release after surgery.

**Penalty:** Within 3 months of Consent Agreement, complete 3 hours of CE on the subject post operative care and/or surgical complications, 3 hours of CE on the subject of anesthesia monitoring, and reimbursement of the Board cost and legal expenses.

**CONSENT AGREEMENT: Case 1223A Dr. Kelly Pinkston—August 19, 2024**

**Violation:** Failed to perform sufficient anesthesia monitoring and failed to perform proper resuscitation protocol.

**Penalty:** Within 6 months of Consent Agreement, complete 3 hours of CE on the subject of anesthesia monitoring, 3 hours of CE on the subject of cardiopulmonary resuscitation (CPR), and reimbursement of the Board cost and legal expenses.

**CONSENT AGREEMENT: Case 0624A Dr. James Radcliffe—March 10, 2025**

**Violation:** Failed to properly diagnosis a patient given the symptoms presented.

**Penalty:** Within 3 months of Consent Agreement, complete 3 hours of CE on the subject of metabolic disease such as Cushing's disease and reimbursement of the Board cost and legal expenses.



## RECENT DISCIPLINARY ACTION—CONTINUED

### **CONSENT AGREEMENT: Case 0924A Dr. Timothy Knotts—March 10, 2025.**

**Violation:** Failed to properly communicate with the client and properly monitor the animal post-operation.

**Penalty:** Probation for a period of 6 months. During this period of probation, submit 3 surgery medical records every month. If during the probationary period, the medical records continue to be insufficient, and/or if the Board receives 1 more complaint in which it determines that probable cause exists to charge with one or more violations of the Board's governing statutes and rules, the license will be immediately suspended for 3 months without a hearing. Within 3 months of Consent Agreement, complete 6 hours of CE on the subject of administering anesthesia and post-operative care, reimbursement of the Board cost and legal expenses.

## HANDLING WILDLIFE IN WEST VIRGINIA

### **Injured, Sick, or Orphaned – Wildlife Rehabilitation Permit - Effective July 10, 2025**

Effective July 10, 2025, HB2836 allows veterinarians to provide emergency care to wildlife. This bill also gives the WV Department of Natural Resources "DNR" authority to establish laws for a wildlife rehabilitation permit "WL permit" for people to provide the care, treatment, and release of orphaned, sick, or injured wildlife.

No person may keep, hold, or possess in captivity any orphaned, sick, or injured wildlife without receiving a WL permit. This permit is not available until DNR establishes laws to include criteria on a WL permit system.

Any person may capture, and transport orphaned, injured, or sick wildlife without unnecessary delay directly to a permitted Wildlife Rehabilitator or a Veterinarian licensed in this state, **but only after contacting the individual or entity to which the wildlife is to be transferred and confirming that the wildlife will be accepted.**

### **Once WL Permits have been issued:**

On advice from the permit holder's consulting veterinarian, an injured or sick wildlife that is incapable of surviving if released to the wild must be:

- (1) Humanely euthanized under the direction of the permit holder's consulting veterinarian;
- (2) Turned over to the Director of DNR "Director" or his or her designee; or
- (3) On approval by the Director, may remain with the rehabilitator for educational display.

Euthanasia of wildlife shall be carried out by the most humane means possible under the direction of the permit holder's consulting veterinarian according to criteria established by the AVMA, NWRA, or the IWRCI. Threatened or endangered species may be euthanized only on written approval from the Director.

### **Exception to Birds:**

Federal law protects migratory birds, and only individuals with a U.S. Fish & Wildlife Rehabilitation Permit are allowed to care for them. Below is a list of a few licensed avian wildlife rehabilitators in WV:

Avian Conservation Center of Appalachia—Morgantown, WV, 304-906-5438

Three Rivers Avian Center—Hinton, WV, 304-466-4683

Oglebay—Wheeling, WV, 304-243-4027

**Exempt:** Individuals with a WV hunting or trapping license allow permitted individuals to legally handle certain wildlife during open trapping seasons.

For any questions, please contact your local WV DNR office, visit [wvdnr.gov/contact/](http://wvdnr.gov/contact/)

West Virginia Board of Veterinary Medicine

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