

Maryland State Board of Veterinary Medical Examiners
Minutes for October 23rd, 2025

Meet In Person at 10:30 AM

Joint Meeting Agenda

Board Members: Dr. Christine Calvert, President; Ms. Patricia Quimby, Vice-President; Dr. Heidi Schmechel; Ms. Lynne Chaput; Dr. Peter Radue, Dr. Monica Maa, Dr. Justin Sobota.

Staff: Nathaniel Boan, Executive Director; Susan Husk, Assistant Director; Cindy Spirt, Assistant Attorney General; Tonya Kendrick-Green, Licensing Administrator; Britney Branch, Office Administrator; Pegeen Morgan, Inspector; Ellen James, Inspector; Sarah Hultz, Investigator.

Guest: Dr. Beth Venit, AAVSB

Open Meeting Agenda

Dr. Calvert called the meeting to order at 10:40am.

Approval of the Minutes:

In a motion by Dr. Schmechel, and seconded by Ms. Quimby, the Board voted unanimously to approve the minutes of the September 25th, 2025 Board meeting.

Application Approvals:

In a motion by Dr. Calvert, and seconded by Dr. Schmechel, the Board voted unanimously to accept the recommendations of the following applications to take the VTNE and become Registered Veterinary Technicians:

- VTNE Applications for Board Review:
 - The Veterinary Technician Committee (VTC) met on October 9th and 17th but were unable to reach a quorum for a final motion. Those present are making the following recommendations for the Board to review and approve rather than waiting another month for the next VTC meeting.
 - **VTNE Applications:**
 - Jennifer Evans
 - Jessica Holmes
 - **Veterinary Technicians For Board Review:**
 - Sarah Scothorn - Endorsement
 - Amanda Richardson - Reinstatement
 - Kayla Herren - Endorsement
 - Dawn Woosley - Endorsement
 - Tiffany Herndon - Endorsement

The following application was not approved and information will be provided to the applicant so that they may provide the remaining documentation and be considered:

- Lisa Henry
 - Does not meet the requirements:
 - Standard Education Pathway:
 - Not a graduate of an accredited school.
 - Endorsement:

- Not a graduate of an accredited school
- Not licensed for the preceding 5 years.
- Alternative pathway:
 - Doesn't have the required courses.
 - No grades on the transcript for Biology and Chemistry.
 - Never taken Microbiology.
 - VTNE scores are over 5 years old.

In a motion by Dr. Schmechel, and seconded by Dr. Calvert, the Board voted unanimously to approve the following license applications:

- Veterinarians For Board Review
 - Dr. Dianne Ferris - Reinstatement
 - Discipline in MD (Expired Medications)
 - In a previous meeting the Board determined that applications could be approved by staff and ratified at the next meeting if they had never had disciplinary action in any jurisdiction. Does the Board want to review reinstatement applications that had discipline in Maryland but the licenses were not suspended or revoked?
 - Staff may approve reinstatement applications whose disciplinary actions were in Maryland and did not result in the license being suspended or revoked.
 - Dr. Clarence Williams
 - Discipline in NJ (Substandard Care)
- Veterinarians approved by designated authority:

<ul style="list-style-type: none"> ○ J Schwarz ○ M. Matlitz ○ J. Jordan ○ R. Khare ○ L Mancuso ○ J. Jacobs ○ J. Von Kieckebusch ○ E. Knebel 	<ul style="list-style-type: none"> ○ A. Singh ○ C. Hohlman ○ A. Barrett ○ L. Jordan ○ B. Carson ○ D. Torrisi ○ E. Allen
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- Veterinary Technicians Approved by designated authority:

<ul style="list-style-type: none"> • A. Kaplinski • K. Rumer • S. Bielobocky • C. Vaughan • 	<ul style="list-style-type: none"> • P. Payne • S. Williams • C. Webster • B. George
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Sanitation Reports:

- Inspectors Ellen James and Pegeen Morgan presented the hospital inspection reports.
- The Board reviewed the responses from Radiocat regarding the hospital's practices.
- In a motion by Dr. Radue, and seconded by Ms. Quimby, the Team voted unanimously to approve the sanitation reports including Radiocat's.

CE Approval Requests:

In a motion by Dr. Calvert, and seconded by Dr. Schmechel, the Board voted unanimously to approve the following continuing education courses for use:

Organization	Title/Topic	Vet/ Techs	Date of CE	Credits	Type	Recurring	CDS
Laboratory Animal Welfare Training Exchange	Retraining Should Not be the Default	Both	9/23/2025	1	Non-Clinical/ Practice Management	No	No
AstraZeneca	AstraZeneca Symposia: Anesthesia Refinements in Rodent Handling	Both	9/25/2025	4.75 (Certificate does not have hours)	Clinical / Scientific	No	No
British Association of Homeopathic Veterinary Surgeons (BAHVS)	A New Hope: Holistic Medicine for the Future	Both	9/20/2025 - 9/21/2025	11	Clinical / Scientific	No	No
Delmarva Chicken Association	National Meeting on Poultry Health, Processing, and Live Production	Both	9/29/2025	11.5	Clinical/ Scientific (Topics look to be mixed)	No	No

The Board did not approve the following for use at this time. The information provided was for the 2025 conference and they would need to see the 2026 schedule to review. Additionally, the conference is not related to veterinary medicine but is for human medicine, unless specific courses were offered that were related to animal chiropractic they could only be used towards the 6 non-clinical continuing educations allowable.

Orthopedic Research Society	2026 Annual Meeting	Both	3/27/2026 - 3/31/2026	24	Clinical/ Scientific	No	No
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Miscellaneous:

- **Presentation on AI Regulation - Dr. Beth Venit (AAVSB)**
 - Dr. Beth Venit presented on the use of AI in veterinary medicine and how it relates to veterinary regulation.
 - AI is a tool used by veterinarians and the veterinarian is responsible for the use of it. Blaming AI for giving a false reading is not an acceptable defense

and information gained through AI should be evaluated for credibility and accuracy should not be assumed.

- **FY25 Registration Renewals Continuing Education Audit**
 - The 50 licensees (45 vets and 5 vet techs) have been selected for the CE Audit. A draft letter was reviewed and approved.
- **Inquiry from Foreign Trained Grad - becoming an RVT while waiting for the CPE for the ECFVG.**
 - The Board has no issues with this. They will need to meet all of the requirements for the alternative pathway. They also would only be able to practice at the scope of an RVT until they are able to meet the Veterinary Licensing Requirements.
- **RVT Committee update:**
 - The RVT committee has been meeting on the 2nd Thursday of the month at 7pm to review applications. This has cut down on processing time because motions and decisions are made in the meeting and not waiting on virtual responses. There has been some difficulty with attendance leaving 2 meetings in October that did not have a quorum (at least 4 of 7 members).
 - In a motion by Dr. Calvert, and seconded by Dr. Sobota, the Board voted unanimously to create an attendance policy for the tech committee meetings that matches the requirements of the Veterinary Board by the Governor's appointments office. Over any 12 month period the committee members will need to maintain 50% attendance. If attendance requirements are not met a replacement will be appointed to the committee.
 - At the August meeting the RVT committee reviewed the tasks and supervision levels recommended by the Board for regulation revisions. They agreed with all of the placements except would like the Board to consider catheter placement in an obstructed cat be allowed under some level of supervision as this is a required skill for some emergency veterinary technician certification programs and they need to get experience in this.
 - Board members were still hesitant to allow this due to the risks of complication.
 - May consider some type of regulation that allows for certain practices to be performed when actively seeking specializations and/or when having certain specializations. Requires more research into the specialization programs.
 - They also reviewed and provided a guideline for appropriate supervision levels of the same tasks by Veterinary Assistants to be reviewed at a later meeting.
- **Inquiry regarding pill splitting - Dr. Levi Gordon**
 - Whether there are any state regulations that prohibit veterinary hospitals from cutting pills for prescribed pet medications?
 - If such practices are allowed, whether there are any specific requirements, restrictions, or guidelines that must be followed?
 - Whether the regulations differ based on the type of medication (controlled substances vs. non-controlled substances, coated vs. uncoated pills, etc.)?
 - Pill splitting is not specifically addressed in the Maryland Veterinary Practice Act statutes or associated regulations. Generally speaking there is

nothing forbidding it, however, there is guidance available online from the FDA that may suggest that it would be inappropriate for a Veterinarian to split pills for a client. Whenever possible you should avoid splitting tablets. Pills that are not scored for splitting have not been assessed for uniformity by the FDA to ensure that each portion would provide the same dosage. For pills that are scored, the recommendation is that the pills be split at the time they are administered and the remaining portion be used for the next dosage whenever possible. Some pills have an outer coating that protects the internal contents from temperature, light and/or humidity. By splitting an entire bottle it increases the risks of exposure to these elements that may impact the pills efficacy. A pill should not be split to provide a dosage amount that is available in a manufactured form (i.e. splitting a 100mg tablet to make 2 x 50mg tablets when 50mg tablets are available from the manufacturer).

- **Inquiry regarding Good Samaritan Emergency Services -**

- I am a veterinarian currently practicing small animal emergency medicine in NYS (license #014700). I also held PA state licensure (BV013519) from my graduation in 2013 until 2018, when I moved to New York. I recently went to the NYS Canine Expo as an attendee, but my time there was interrupted when a young golden retriever collapsed with no designated veterinarian on site or on call. I was among several veterinary professionals visiting the expo who tended to this dog. I attend one dog event in Maryland each May (International Windsprite Club Mid-Atlantic Spring Specialty Show). In my several years there I have not witnessed any canine injuries beyond the occasional mild musculoskeletal ailment, but this incident at the canine expo made me want to assemble a more complete emergency kit. In the highly unlikely event that a serious injury would occur and I provided initial stabilization to a dog at this event en route to an emergency clinic, is this a violation of your state practice act, or does a Good Samaritan law address this topic? I read the Veterinary Practice Act, and as I understand §2-314, immunity only extends to people holding current licensure in your state.
 - §2-314 - It is correct that this only extends to people holding a current license, and this only refers to Civil Liability and may not apply to liability when considering the standards of practice.
 - The Board recommends coordinating with the event provider to recommend a veterinarian be on-site during the event or to develop an emergency response plan.
 - By definition this would likely be considered the practice of Veterinary Medicine and could potentially lead to disciplinary action. As with all cases, if a complaint were to be received by the Board, they would consider all relevant facts in the case to determine the appropriate action to take, if any.

- **Inquiry from Shanti Ramachandran**

- Foreign Trained Vet working as Veterinary Assistant able to intubate?
- *You and I spoke this morning about a situation regarding my assistant technician. She is a licensed veterinarian in Japan and is trying to get her license here in the US. She has passed her NAVLE test and has sat for her practical test. Unfortunately, she did not pass the anesthesia portion of the practical test and is looking for further help with training. She had worked with us for over 3 years and is very dedicated. She has gone on a couple international low cost spay neuter trips to get further experience. Can we*

allow her to intubate at our practice under the guidance of one of our veterinarians to help her gain more experience?

- This would be consistent with the approved tasks under the current guidance for Veterinary Assistants sent on September 9th, 2024.

- **Inquiry from Dr. Brokaw with Gentle Giants Draft Horse Rescue**

- *1) If a riding club wanted to have a vaccine day where everyone brings horses to a trail head/park for me to vaccinate/coggins, could I do that or would that need a different license? Since just once per year and not a repeat thing I was thinking this was different from a tractor supply type vaccine clinic and I wouldn't need a limited hospital license, but I wanted to confirm.*
- *2) A boarding barn has a picnic/party on vaccine day and boarders/staff bring their pets, may I vaccinate all the pets (dogs, etc) and not just the horses?*
- *3) When Gentle Giants hosts training clinics/events (about 2-4 times per year), if a participant horse (privately owned/ not Gentle Giants owned) has an emergency, am I permitted to treat it. I'm picturing normal farm vet style care (laceration repair, mild colic) as opposed to bringing the horse into our treatment barn for advanced care. Gentle Giants has a stable license. We do not have a hospital license.*
 - These would not require a hospital license as they are irregular events similar to pop-up public health clinics.
- *Additional Inquiry about needing a hospital license if they begin using anesthesia on wildlife rehabilitation patients.*
 - This could only be done on wildlife and not on client-owned animals. This should also not be done for surgical procedures unless there is a surgical suite and that may require an inspectable hospital for a license.

- **Inquiry from Dr. Sue Felter, Frederick County Team Lead for Street Dog Coalition**

- *I am a veterinarian licensed in MD. I started a job at an NVA owned practice a few months ago and part of my compensation package includes membership in the MVMA, but they have not activated it yet, so I am not a current member. I have formed a team of the Street Dog Coalition (www.thestretdogcoalition.org), a national non profit that provides free veterinary care to people experiencing and at risk of homelessness. We do this through periodic (every 2-3 months) "street clinics". These clinics may be held indoors (empty office space, store fronts, etc) or outdoors (parking lots and grounds of office buildings, etc). All veterinarians examining, vaccinating and treating animals at these clinics will be licensed in Maryland. I am wondering if there are any other state rules and regulations that apply to these clinics. Thank you so much.*
 - These are pop-up clinics and are not held regularly in designated spaces. We recommend coordinating with the local department of health for the public health rabies clinics and may offer additional services.

- **Inquiry from Dr. Troy Foland regarding Feline Birth Control prescriptions in a feral "herd" situation:**

- *A client has requested megestrol (using it like FeralStat) to administer to the cats on her property. She is feeding a herd of cats that has several litters a year because she has been unable to capture and spay some of the cats. I have advised she should thin out the herd, but local animal control is overwhelmed and cannot take more cats. Her hope is that birth control should, at least, decrease the multiplication problem of breeding in the herd. If I am prescribing for the herd, is there any problem with this? Yes, we have discussed possible side effects, questions of efficacy and the nature*

of "off label" use. Obviously I want to help the situation, but want to remain within the practice act. Thank you for your input.

- An appropriate VCPR could be established with the "herd" through "(ii) Medically appropriate and timely visits to the location where the animal is kept"
- The Board had some concerns about the method of administration, how it is getting to the appropriate animals and how other animals (including potentially protected wildlife) will be protected from exposure.

- **Meeting Schedule for 2026**

- December 4th, 2025 (Virtual)
- January 22nd, 2026 (Virtual)
- February 26th, 2026 (Virtual)
- April 2nd, 2026 (In Person)
 - This will replace the March meeting due to schedule conflicts.
- April 30th, 2026 (Virtual)
 - The meeting is delayed by 1 week due to scheduling conflicts (AAVSB Spring meeting) and delayed March meeting.
- May 28th, 2026 (In-Person)
- June 25th, 2026 (Virtual)
 - Will be a compressed meeting with a limited agenda due to registration renewals.
- July 23rd, 2026 (In-Person)
- August 27th, 2026 (Virtual)
- October 1st, 2026 (Virtual)
 - This will replace the September meeting due to schedule conflicts (AAVSB Fall meeting).
- October 29th, 2026 (In-Person)
- November 19th, 2026 (Virtual)
 - Will be a compressed meeting with a limited agenda due to the Thanksgiving holiday.
- December 10th, 2026 (Virtual)

Formal Disciplinary Action Finalized Since 9.25.2025

- Docket No. 26-022: SBVME /Dr. John Fox, Western Maryland Animal Hospital (L#01-007)
 - Expired Medications

In a motion by Dr. Calvert, and seconded by Dr. Schmechel, the Board voted unanimously to adjourn the meeting to move into an administrative closed session to perform administrative functions outside the scope of the Open Meetings Act, in accordance with § 3-103(a)(1)(i) of the General Provisions Article. The administrative functions to be performed include discussion of the specific matters identified on the Board Agenda. In the alternative, I move to close the meeting pursuant to the following Section 3-305(b):

(7) To obtain advice of counsel;

(8) To consult with staff, consultants, or other individuals about pending or potential litigation;

(12) To conduct or discuss an investigative proceeding on actual or possible criminal conduct;"
and

(13) To comply with a specific constitutional, statutory, or judicially imposed requirement that prevents public disclosures about a particular proceeding or matter.

Meeting moved into the administrative closed session at 12:48pm.