



NEWSLETTER



IDAHO BOARD OF VETERINARY MEDICINE

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May 2012

CURRENT BOARD MEMBERS & STAFF

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I would like to welcome our newest public member Kathy Simpson. Kathy has replaced Joyceanne Fick, although I am quite sure we have not seen the last of Joyceanne. Her continued support of the board will be appreciated.

I wish everyone melting snow and greener pastures. Have a great spring and summer.

Doug Walker, DVM

INTRODUCING KATHY SIMPSON

Kathy Simpson is the Board's new public member. She graduated from Utah State University in Logan, Utah in 1972 with a BS degree from the College of Family Life; a composite major which includes food and nutrition, early childhood development, textiles, and interior design. As a native Idahoan, she grew up on a farm in Blackfoot, Idaho where she developed a love for animals early in life doing various chores associated with the family dairy, livestock operation and crop production.

Kathy has been working at the Idaho National Laboratory in Idaho Falls for the past 20 years where she's held several positions, the most recent of which has been in workplace planning and interior design.

Kathy is no stranger to community service and has been actively involved with fund raising for the Idaho Meth Project. Kathy and her husband are ardent dog lovers and she is looking forward to this opportunity to serve on the Board.

DID YOU KNOW?

As of March 8, 2012, Rule 154 regarding recordkeeping now includes the following:

"If changes are made to any records (either hard-copy or electronic), the records must clearly reflect what the change is, who made the change, when the change was made, and why."

PRESIDENT'S MESSAGE

I have enjoyed and appreciated my almost 4 years of service on the Idaho State Board. It is an experience that I strongly recommend to every veterinarian. This experience has given me a new insight into a completely different side of veterinary medicine. The things we never thought about like the amount of time, effort and process it takes to make a statute change and how much time and energy is spent on the budget of our small agency. It is not like the private sector where if you need something you just go get it.

Most importantly, I have truly enjoyed working with some of the finest people on this veterinary board. I do not have time to give all of them a personal shout out, however, I am going to let everyone know that Dave Schulz, our current liaison officer, has left some big shoes to fill. Dave has worked hard to make the board the best it can be, and has brought accounting experience, which has been extremely valuable in all of our budget work. Thanks Dave for your service. Thank you to our tireless staff of Karen Ewing and Carol Youtz; it has been a pleasure.

REFILLING PRESCRIPTIONS

Veterinarians commonly dispense prescription drugs meant to maintain animal health over a period of time; the number of refills allowed is documented in the patient medical record by the attending veterinarian. The client then contacts the veterinary hospital to make arrangements to pick up medication refills, as needed.

If a veterinarian authorizes prescription drug refills for a patient, and notes it in the patient chart, the non-veterinarian clinic staff must have a licensed staff veterinarian authorize each refill before it can be prepared for the client. Prescription refill approval cannot be delegated to non-veterinarian staff.

When a veterinarian dispenses a prescription drug, the veterinary hospital is acting as a pharmacy. Just as pharmacy technicians at human pharmacies cannot dispense medication without the pharmacist's express review and approval, non-veterinarian clinic staff cannot dispense prescription drugs/controlled substances without the supervising veterinarian's express authorization.

CLIENT DRUG COUNSELING REQUIRED

A new Idaho Board of Pharmacy (IBOP) statute became effective July 1, 2011 (Idaho Code Section 54-1739). The new statute requires drug review and counseling when a new prescription is dispensed to a client; this counseling must also be offered for all refills. Only a licensed veterinarian may perform the required client counseling. Read the new statute at:

<http://legislature.idaho.gov/idstat/Title54/T54CH17SEC T54-1739.htm>

Counseling is defined in IBOP statute as the effective communication of information to the patient or caregiver including but not limited to:

- a) Name and strength and description of the medication;
- b) Route of administration, dosage, dosage form, continuity of therapy and refill information;
- c) Special directions and precautions for preparation, administration, storage, and use by the patient as deemed necessary by the pharmacist;
- d) Side effects or adverse effects and interactions and therapeutic contraindications that may be encountered, including their avoidance, which may interfere with the proper use of the medication or device as was intended by the prescriber, and the action required if they occur;
- e) Techniques for self-monitoring drug therapy; and
- f) Action to be taken in the event of a missed dose.

The IBOP's rule 105 requires that veterinarians document their client drug counseling in a manner that provides sufficient evidence of compliance.

Any questions on statutes or rules of the Idaho Board of Pharmacy should be directed to IBOP personnel in Boise at (208) 334-2356.

NEW LATE FEES FOR RENEWALS

Increased late fees were recently implemented for all licensees and certificate holders. **Veterinarians will now pay a \$200 late fee** if their renewal forms are received at the Board office with a postmark of July 1 or later. To avoid the late fee, please ensure your completed renewal form and payment is postmarked June 30 or prior. Be aware that June 30 is on a Saturday this year.

Certified Veterinary Technicians (CVTs) will pay a late fee of \$50. As indicated above, a postmark of June 30 or before will prevent you from paying the late fee.

The late fees were increased substantially to act as a deterrent for late renewals and individuals practicing without licenses or certificates. Should the new late fee not prevent these issues, the Board will discuss the filing of formal disciplinary actions against those veterinarians and CVTs who continue to practice with expired licenses and certificates.

Renewal forms are mailed to each licensee and certificate holder in early May; this allows nearly seven (7) weeks to complete the form and return it with payment. Many veterinarians and CVTs complete their renewal forms and then delegate the renewal payment and mailing to another person, such as a spouse, employer, or office manager.

Please be aware that if your delegated individual does not return your renewal form with a June 30 or prior postmark, you will be responsible to pay the late fee. Plan to follow up with your delegated person before the deadline.

DEA REGISTRATIONS

The Federal Controlled Substances Act requires that a separate DEA registration be obtained for each principal place of business or professional practice where controlled substances are manufactured, distributed, or dispensed.

DEA Registrations continued...

For example, a veterinarian operating two (2) veterinary hospitals must hold separate DEA registrations for each location if he or she is administering, distributing, or dispensing controlled substances at both veterinary hospital locations.

If a veterinarian operating more than one (1) veterinary hospital administers, dispenses, or distributes controlled substances at the location shown on the DEA registration, and merely prescribes controlled substances at the other veterinary hospital locations, a separate DEA registration is not required for the other locations.

This exception applies only to a secondary location within the same state in which the practitioner maintains his or her DEA registration. DEA individual practitioner registrations are based on state authority to dispense or conduct research with respect to controlled substances. Since a DEA registration is based on a state license, it cannot authorize controlled substance dispensing outside that state. The separate registration exception applies only to locations within the same state in which practitioners have their DEA registrations.

SOFTWARE FOR ONLINE RENEWALS

The Board is in the process of purchasing new licensing and regulatory software. The new software will allow for online license and certificate renewals, as well as add many self-service options for licensees and certificate holders.

To save money and increase purchasing efficiency, the Board has collaborated with the Idaho Boards of Medicine, Dentistry, and Pharmacy, along with the Bureau of Occupational Licenses, to conduct a group licensing software purchase. The Board of Veterinary Medicine has budgeted \$40,000 for the initial purchase, with \$12,000 per year in software maintenance fees. Pharmacy and Medicine have budgeted \$250,000 each, Dentistry \$57,000, and the Bureau of Occupational Licensing has budgeted \$1,250,000. As you can see, licensing software is an extremely expensive product!

To purchase new software, the Board must go through the State of Idaho’s mandated purchasing process. This can be a cumbersome and time-consuming procedure. We are currently starting the “Request for Proposals” (RFP) phase, in which a public notice containing the software standards will be published to solicit interested software providers. We will review the responses, and

select the top performers to demonstrate the features of their software. Once a company has been awarded the contract, the software must be customized.

Due to the length of the required State purchasing process, the Board is hopeful it will have new software in time for the 2013 renewal period. However, it is possible that implementation will not occur until 2014. Online renewals will increase office efficiency, reduce errors, and provide for credit card payments. We will keep you posted on our progress.

COMPLAINT STATISTICS			
FY2010, FY2011, and PARTIAL FY2012			
(FY2012 covers July 1, 2011 through June 30, 2012)			
	2010	2011	2012
All types of written complaints (including unlicensed practice, accreditation violations, no jurisdiction)	39	17	21
Formal client complaints	23	14	18
Complaints dismissed	12	9	5
Discipline settlements	5	1	1
Administrative hearings	1	0	0
Letters of caution and warning letters	9	1	3
Cease and Desist letters	12	2	4

DID YOU KNOW?

Certified Veterinary Technicians (CVTs), veterinary technicians, and veterinary assistants are not allowed to suture or staple surgical incisions or wounds. The Board considers this to be surgery, and only a licensed veterinarian may perform these procedures.

In addition, only a licensed veterinarian may extract animal teeth in the state of Idaho. As has been frequently written in past newsletters, delegation of teeth extractions to anyone except a licensed veterinarian is grounds for a formal disciplinary action.

It takes only one complaint for this practice to be revealed. The Board has received multiple complaints regarding small animal dental procedures; these complaints have specifically regarded extractions

EXAM PRIOR TO VACCINATION

The Board staff frequently receives questions regarding Administrative Rule 46.01.01.153.01.b. The specific wording of the rule is as follows:

“When the primary objective is to protect the animal patient’s health and a professionally acceptable immunization procedure is being sought, an examination of the animal by the veterinarian is required prior to each and every immunization procedure, unless the animal has been examined in the last ninety (90) days, except in the practice of large animal medicine where mass immunizations of animal herds is involved or when immunization is performed by the animal patient’s owner...”

A common question regards the statement, “...*unless the animal has been examined in the last ninety (90) days...*” If you or your colleague at the same veterinary hospital have examined the animal in the last ninety (90) days, another exam is not required prior to vaccination. If the prior exam was done at a different veterinary hospital, the ninety (90) day exception does not apply, as a new exam is needed to establish a valid veterinarian/client/patient relationship.

RABIES VACCINATION CONFIDENTIALITY

An issue that creates many questions regards confidentiality of rabies vaccination records in the event of an animal bite. Idaho’s Administrative Rule IDAPA 46.01.01.151.08 under the Code of Professional Conduct states, “Confidentiality. A veterinarian shall maintain a confidential relationship with his clients, except as otherwise provided by law or required by considerations related to public health and animal health.”

When an animal bites a human or another animal, rabies is always a prime public health consideration. It is vital that law enforcement and animal control officials, attending medical professionals, or public health officials requesting verification of rabies vaccination status be provided this information without delay.

It is not necessary to request the animal owner’s permission to share rabies vaccination status with the above-listed professionals.

INTRACARDIAC INJECTIONS

Intracardiac injections administered to conscious animals for euthanasia cause great pain, distress, and suffering; this action violates the standards set forth in the Idaho Veterinary Practice Act.

Intracardiac injections should be used only as a last resort, and only on an unconscious, comatose, or anesthetized animal that does not have a blink reflex or a withdrawal reflex when the skin or web of the back toes is firmly pinched. A dying animal in agonal status with no blood pressure may be euthanized using an intracardiac injection. An intraperitoneal euthanasia injection is also within the standard of care if no veins are viable for an IV injection.

If you are in a position where an intracardiac injection is indicated for an owner-witnessed euthanasia, please ensure that you explain the process to the owner so there are no surprises. Most clients are only familiar with IV euthanasia, and may be shocked by an intracardiac injection.

The Board has seen an increase in the number of complaints regarding euthanasia procedures. The Board recommends that each veterinary hospital develop a specific written euthanasia protocol that is followed for each euthanasia procedure. To prepare your client, the protocol should also include a client education element that provides an explanation of the euthanasia process and any possible complications that might occur. This prepares your client in the event of problems.

PRACTICE PROCEDURES

The Board advises each veterinarian to offer clients your best recommendations regarding diagnostics and treatment. These recommendations are then noted in the patient record. If the client declines the recommended diagnostics and course of treatment, this refusal must be documented in the patient record as well.

In the event of a client complaint, documentation of your recommendations, and the client’s denial, is vital. To advance its mission of public protection, the Board works under the following premise: ***“If it is not documented in the medical record, it did not happen.”***

NEW RULES FOR 2012

The Board submitted fee and non-fee rules to the 2012 legislature for approval. Following is a list of the rules that became effective March 29, 2012:

Fee Rule Changes:

The Board proposed fee increases in nearly all licensing and certification categories; all new fees have been implemented as follows:

Veterinarians:

New application	\$275
Active renewal	175
Inactive renewal	50
Temporary permit	150
Inactive to active conversion	150
License verification:	20
Late fee	200

Certified Veterinary Technicians:

New application	\$125
Renewal	75
Certification verification	20
Late fee	50

Certified Euthanasia Agencies:

New application	\$100
Renewal	200
Late fee	50

Certified Euthanasia Technicians:

New application	\$100
Renewal	100
Late fee	50

Non-fee Rule Changes:

Rule 016 requiring that the Board evaluate eligibility of national veterinary exam candidates was removed in its entirety to correspond with a 2011 statute change.

Rule 154 was revised to add a requirement that changes to medical records must contain specific documentation. (See page 1 of this newsletter in the "Did You Know?" section.)

Rule 154.05 regarding ownership of patient records, and transfers of patient records was revised to remove the requirement that veterinarians secure a written release to document a request for a transfer of patient record copies. A verbal request will now suffice.

INTRODUCING MARCIA MATSUURA, DVM CERTIFIED EUTHANASIA TASK FORCE

On April 23, 2012, the Board voted to appoint Dr. Marcia Matsuura to the Certified Euthanasia Task Force (CETF). Dr. Matsuura's term of service began April 24, 2012 and will end April 23, 2015. She will cover the eastern side of Idaho.

CETF Chair Dr. Rena Carlson-Lammers will complete her third term of CETF service on October 15, 2012. The overlap in eastern Idaho CETF appointments will allow Dr. Matsuura to be mentored by Dr. Carlson-Lammers in instructing Certified Euthanasia Technician (CET) training courses, performing Certified Euthanasia Agency (CEA) inspections, writing CET exams and training manuals, making recommendations on CEA/CET certifications, and other associated duties.

The Board sincerely thanks Dr. Carlson-Lammers for her outstanding CETF service, and welcomes Dr. Matsuura to the CETF. The CETF has made tremendous progress to upgrade this important program and provide consistency in training and inspections.

CALLS TO THE BOARD OFFICE

Board office personnel receive many different types of phone calls from licensees and certificate holders, as well as from the general public. Common calls from licensees and certificate holders regard the following:

1. When is my CE due? This depends on when you received your original license or certificate. CE must be reported every other year.

2. How much CE do I need? Veterinarians must report a minimum of twenty (20) CE credits every two (2) years; CVTs must submit at least fourteen (14) CE credits every two (2) years.

3. How many CE credits can be earned in approved online courses? Veterinarians may earn a maximum of fifteen (15) CE credits online, and CVTs may earn a maximum of ten (10) CE credits online.

4. Is this CE course approved? The Board accepts all RACE-approved CE, and the Board and its staff also review and approve local and regional CE if it meets the Board's approval criteria.

5. Who do I contact for radiograph equipment inspections? Contact Dave Eisentrager at the Dept. of Health and Welfare, Bureau of Laboratories in Boise at (208) 334-2235 ext. 245.

“Calls to the Board Office” continued from page 5...

6. Who can help me with Rabies quarantine information in the event of an animal bite?

Contact the Idaho State Department of Agriculture, Division of Animal Industries in Boise at (208) 332-8540.

7. How do I help my upset clients understand that I must perform an examination of their pets prior to vaccination?

A client can be given a copy of the rule that requires an exam prior to vaccination. This is addressed in rule number 153.01.b, which can be accessed at the following web address: <http://adminrules.idaho.gov/rules/current/46/0101.pdf> If your client is still upset, please refer him or her to the Board office.

8. Can I sell “Bute” to a non-client who is headed to the mountains and wants to be prepared in case his horse goes lame?

No. Prescription drugs may only be sold within the context of a valid veterinarian/client/patient relationship (VCPR).

9. I forgot to renew my license/certificate and now it has lapsed. Do I have to reapply?

Yes. Idaho Code requires reapplication as if you had never been licensed in this state. All licenses and certificates expire June 30th of each year. An expired license/certificate may be reinstated in the month of July by paying the renewal fee plus the late fee. (You cannot practice on an expired license or certificate.) If your renewal form, renewal fee, and late fee are not postmarked by July 31, your license or certificate will lapse, and will not be reinstated.

10. Are my CVTs and assistants allowed to express anal glands? If so, under what level of supervision?

Yes, anal gland expression can be delegated. The Board has determined that it can occur under indirect supervision. This means the supervising veterinarian is not on the premises, but has examined the animal, given either written or oral instructions to the CVT or assistant, remains available by telephone, radio, or other means, and the animal, if previously anesthetized, has recovered to the point of being conscious and sternal. The veterinarian remains responsible for the delegated task, and must not delegate to an unqualified individual.

11. I am aware of an unlicensed person who is offering veterinary services to the public. What can I do?

If you have direct knowledge regarding unlicensed practice, file a complaint with the Board office. We will then conduct an investigation. If your knowledge is second-hand, find out if there is a person

with direct knowledge who is willing to file a complaint.

12. If I have purchased veterinary products, for which the manufacturer has voluntarily limited the sale to veterinarians as a marketing decision, am I allowed to sell them to a reseller, such as Costco, Walmart, or an online pharmacy?

No. This is prohibited by the Principles of Veterinary Medical Ethics of the AVMA, VI.D. Unethical veterinarians that are supplying these products to third-party resellers are in violation of Idaho law. This can apply to non-prescription items such as flea and tick products. The Idaho Veterinary Practice Act additionally prohibits the use, distribution, dispensation, prescription, or sale of prescription drugs and controlled substances without a valid VCPR.

13. If I drive while impaired and get a DUI, should I answer “yes” on veterinary renewal form question number 18 or CVT renewal form question number 14 that says, “Since your last license or renewal application, have you been, or are you now addicted to or used in excess, any drug or chemical substance, including alcohol?”

Yes. If you are cited for a DUI, it means that you used alcohol or other substances in excess under Idaho law. Include a signed and notarized affidavit explaining the situation, and provide copies of the applicable court documents.

14. A client left his animal at my veterinary hospital and won’t return my calls. What are my rights?

Abandonment of animals left with a veterinarian is covered under Idaho Code section 25-3512. Read the specific conditions of the law at <http://legislature.idaho.gov/idstat/Title25/T25CH35SE/CT25-3512.htm>

15. My veterinary hospital is overflowing with old patient records and radiographs. How long do I have to retain these medical records?

Administrative Rule 154 says, “Records shall be maintained for a period of three (3) years following the last treatment or examination.”

16. My colleague at another veterinary hospital ran out of a certain prescription medication and she wants to send the client to me to get the drug. Am I allowed to fill another veterinarian’s prescription?

Yes. Under Idaho Board of Pharmacy statute 54-1732 (4), a veterinarian may fill another veterinarian’s prescription. The veterinarian filling the prescription must simply ensure that there is a valid VCPR between the client and the veterinarian who wrote the prescription.

IDAHO RABIES PROTOCOL

A committee consisting of representatives from the Idaho Department of Health and Welfare, the Idaho District Health Departments, the Idaho Department of Agriculture, and the Idaho Department of Fish and Game, with input from the USDA, prepared a protocol to be followed in Idaho for rabies prevention and control.

The last update to the Idaho Rabies Protocol: Protocol for Animal Isolation, Animal Bites, and Rabies Post-exposure Prophylaxis was finalized on July 10, 2007. This document is available in its entirety at the following web address:

[http://www.healthandwelfare.idaho.gov/Portals/0/Health/Disease/RabiesProtocol2007\[1\].pdf](http://www.healthandwelfare.idaho.gov/Portals/0/Health/Disease/RabiesProtocol2007[1].pdf)

It is important that veterinarians practicing in Idaho familiarize themselves with the rabies protocol. Questions can be directed to the Idaho Department of Health and Welfare, Office of Epidemiology, in Boise at (208) 334-5939, or to the Idaho Department of Agriculture, Division of Animal Industries, in Boise at (208) 332-8540.

Another important document regarding rabies is the Compendium of Animal Rabies Prevention and Control. This document is prepared annually by the National Association of State Public Health Veterinarians, Inc. The most recent edition was published May 31, 2011.

The recommendations in the compendium serve as a basis for animal rabies prevention and control programs throughout the United States. This allows for standardization of procedures among various jurisdictions, which enhances an effective national rabies control program. The current compendium can be viewed at the following website:

<http://www.nasphv.org/Documents/RabiesCompendium.pdf>

There is no current overarching Idaho State law that requires rabies vaccinations in cats and dogs. However, many Idaho cities and counties have local ordinances requiring rabies vaccination.

2013 STATUTE CHANGE PROPOSALS

At its meeting on April 23, 2012, the Board discussed statute changes that will be presented to the 2013 legislature. Following is a listing of the proposed changes:

Idaho Code § 54-2103. Definitions:

(9)(b): The Board will remove this section as it allows an individual who was trained in euthanasia methods prior to December 31, 1992 to become a Certified Euthanasia Technician (CET). This statute was put into place when the Board's certified euthanasia program began in 1993. It is no longer valid and must be removed.

Idaho Code § 54-2103. Definitions:

(46): The Board received a call from an attorney for the AVMA indicating that a citation in Idaho statute that defines "veterinary technician" is incorrect. The current statute speaks of a veterinary technology program accredited by the "council on education of the AVMA"; this citation will be changed to the "Committee on Veterinary Technician Education and Activities".

Idaho Code § 54-2107. License Application-Contents-Fee.

(8) The Board will add a phrase to indicate that all application and first year's license fees are non-refundable. In addition, in the final section of this statute, refunds will not be issued when applications are voluntarily withdrawn or are denied by the Board. This will allow the Board to recover its expenses for the time and materials spent on application processing. Otherwise, all existing licensees absorb these costs.

2013 RULE CHANGE PROPOSALS

The Board also discussed several rule changes for presentation to the 2013 legislature as follows:

Administrative Rule 004: The Board's generic email address will be added, as well as its website. In addition, procedures for filing of rulemaking or contested case documents by email will be added.

2013 RULE CHANGE PROPOSALS CONTINUED...

Administrative Rule 005 (a): This rule incorporates the Principles of Veterinary Medical Ethics of the AVMA by reference, which gives the AVMA Ethics the force of rule. The version currently incorporated by reference was approved by the AVMA in April 2008. The AVMA has a new version dated November 2010; this rule will be revised to incorporate the new edition.

Administrative Rule 100: Refunds for Certified Veterinary Technician (CVT) applicants will be removed. A phrase will be added to 100.02.a to clearly state “All application and certification fees are nonrefundable”. In section 100.02.b, refunds will be removed for CVT applicants whose applications are denied; in section 100.02.c, refunds will be removed for CVT applicants

who withdraw their applications. As with the statute change for veterinarians, this will reimburse the Board of the time spent on processing new CVT applications that are then withdrawn or denied.

Administrative Rules 204, 205, 206, and 207: Certified Euthanasia Program

The Certified Euthanasia Task Force (CETF) has reviewed all certified euthanasia rules, and has proposed several changes to provide more clarity for certified euthanasia technicians (CETs). Reuse of needles and syringes will no longer be permitted; labeling and recordkeeping sections will be rearranged and made consistent with other areas of the euthanasia rules. In addition, the grounds for discipline for CETs will be revised to address misrepresentation on applications, in addition to addressing various issues related to potential substance abuse.

UPDATE: IDAHO BOARD OF PHARMACY RULES AND STATUTES

Mark Johnston, Executive Director

The legislature repealed all existing Board of Pharmacy (Board) rules and approved an entirely new set in 2012, to become effective upon the closing of the legislative session. One new area of Board registration is termed the **Prescriber Drug Outlet** and is defined as: “A drug outlet in which prescription drugs or devices are dispensed directly to patients under the supervision of a prescriber, except where delivery is accomplished only through on-site administration or the provision of drug samples.”

It is important to note that administering and prescribing are not included in this definition and thus do not require registration as a drug outlet. These rules only pertain to prescribers who dispense, which is defined as: “the preparation and delivery of a prescription drug...in a suitable container appropriately labeled...”.

Prescriber drug outlets are required to pay a \$35 fee with registration, renew annually, and post their registration conspicuously. Please note that only one registration per facility is required, not per prescriber within the facility. Prescriber drug outlets are required to abide by applicable general practice standard rules, including the following:

1) Drugs must be stored in accordance with USP-NF requirements in an area maintained and secured appropriately to safeguard product integrity and protect against product theft or diversion. The link to the USP-NF web site is: <http://www.usp.org/usp-nf>

2) Expired, deteriorated, adulterated, damaged, or contaminated drugs must be removed from stock and isolated for return, reclamation, or destruction.

BOARD OF PHARMACY ARTICLE CONTINUED...

3) Prescription drugs must be dispensed in packaging materials that preserve their integrity, cleanliness, and potency.

4) Once removed from the premises from which it was dispensed, a drug must not be accepted for return, unless it meets several requirements, including being unit dose packaged.

5) Each controlled substance registrant must maintain a current, complete, and accurate record of each controlled substance manufactured, imported, received, ordered, sold, delivered, exported, dispensed, or otherwise disposed of by the registrant.

6) A potential recipient of a controlled substance must first be positively identified, via a government issued ID, or the controlled substance must not be dispensed. Exceptions include the dispensing being paid for by an insurer, dispensing to institutionalized patients, and if the patient is personally and positively known. Documentation requirements exist.

7) Documentation must be created and retained sufficient to evidence compliance with the offer to counsel and the counseling requirements of 2011 changes to Section 54-1739, Idaho Code, which also require a prospective drug review with each dispensing. Said terms are defined in Section 54-1705, Idaho Code.

The DEA has required a biannual controlled substance inventory for decades. As per existing statute 37-2720, the Board may enforce DEA inventory and record keeping requirements. In 2011 however, Idaho started requiring an annual controlled substance inventory. The Board encourages prescribers to read the DEA’s Practitioner Manual available at:

<http://www.deadiversion.usdoj.gov/pubs/manuals/pract/index.html>.

Some prescribers may be utilizing Automated Dispensing and Storage Systems (ADS), which are defined as mechanical systems that perform operations or activities, other than compounding or administration, relative to the storage, packaging, dispensing, or distribution of drugs and that collect, control, and maintain transaction information. ADS are subject to extensive regulation and require additional registration. Additionally, some prescribers may be engaging in sterile product preparation, which requires a separate registration and an onsite Board inspection prior to engaging in such activity.

Specific rule language can be found on the Board’s web site: www.accessidaho/bop.org/. Questions can be directed to the Board by e-mailing info@bop.idaho.gov or by calling (208) 334-2356.

Idaho State Dept. of Agriculture
Division of Animal Industries
Information and Update
Idaho State Veterinarian – Dr. Bill Barton
Phone: (208) 332-8540

Orange or Silver metal eartags will meet this requirement. ‘Test eligible’ cattle and domestic bison that are, or have been located in the DSA between January 1 and January 15 of any year must have a **negative brucellosis test** within thirty (30) days prior to leaving the DSA *or* prior to change of ownership. Please call our office for more information.

Idaho’s brucellosis rules have been amended to officially define the **Idaho Designated Surveillance Area (DSA)** for brucellosis. Idaho’s **DSA for brucellosis** is located on our eastern border adjacent to Yellowstone National Park and includes parts of Teton, Bonneville, Fremont and Caribou counties. Intact cattle and domestic bison leaving the DSA must have **official individual identification** such as USDA -approved tags (but not market backtags), which are traceable to state and farm of origin. RFID 840 tags or

Import Requirements for Idaho cattle and bison have been put in place by **Colorado, Nebraska, Minnesota and South Dakota**. Sexually intact cattle/bison need to be individually identified and be accompanied by a Certificate of Veterinary Inspection (CVI). In addition, Minnesota requires a negative brucellosis test within 30 days on intact Idaho cattle and bison \geq 12 months of age. South Dakota

requires a negative brucellosis test on all intact Idaho cattle and bison 18 mos. of age and older within 30 days prior to import. If moving directly to slaughter, animals still need to be identified as described above, but do not need the CVI. Call the state veterinarian's office in the state of destination for more information or guidance.

Idaho Reportable Animal Diseases List is contained in the Division of Animal Industries Rules: IDAPA 02.04.03, which can be found on our website at www.agri.idaho.gov under Laws & Rules in the Green Banner > Rules in the navigation list on the left. Then select the blue web-link IDAPA 02.04 Animals > 02.04.03 Animal Industries.

For **Idaho Animal Importation Requirements**-click blue web-link 02.04.21 Rules Governing the Importation of Animals. Please call the Division of Animal Industries or stop by our office if you would like a printed copy of these rules.

The Idaho State Dept. of Agriculture **Animal Health Lab (AHL)** provides regulatory and diagnostic testing (including bacteriology) services to Idaho veterinarians. A services and fee list may be found on the AHL webpage at www.agri.idaho.gov under Animals > Animal Health Lab. The AHL has expanded molecular services to include several polymerase chain reaction (PCR) assays. Currently we offer PCR for BVDV (bovine viral diarrhea virus), cattle trichomoniasis (*T. foetus*), and Johne's disease, with Equine Herpes Virus – 1 (EHV-1) coming soon.

Demand for *T. foetus* qPCR has greatly increased, but the AHL has recently acquired a new machine that has more than doubled our Trich PCR run capacity and has lowered our cost of processing samples. Still, you may wish to call to see what day we expect results on your samples. The AHL would appreciate a call if you plan to submit >25 pouches for *T. foetus* PCR testing (or 25 samples of any kind, actually).

The **Trich culture reading proficiency test** for 'Trich' veterinarians and technicians newly certified last year will be sent out in June. Please call the AHL if you will need a proficiency test or have any questions about the program or testing.

Courier service to the AHL for delivery of samples from several points in Eastern/Western Idaho and from Idaho Equine Hospital in Nampa is available. Call the AHL **208-332-8570** for pick-up points and cost.

Samples for regulatory testing must be securely submitted to the lab to ensure the USDA chain-of – custody requirement.

The 2012 USDA Veterinary Accreditation Seminar is scheduled for Monday, June 25, 2012. (Continuing education credits will be offered.) If you haven't filled out the new Accreditation Program application, please go to the USDA Veterinary Services website at www.aphis.usda.gov and follow the directions to make sure you remain accredited to perform regulatory work for State-Federal Disease Control Programs (EIA, TB, brucellosis, interstate health certificates, etc.). When completing official program forms (vaccination or testing), or submitting samples, all required information must be filled in on official forms including animal identification. **USDA VS office - (208) 378-5631**

The State Veterinarian's Office has approved the use of GlobalVetLink (GVL) **Electronic Interstate Certificates of Veterinary Inspection (ICVI)**, commonly known as health certificates, for all species. GVLs eHealth documents are approved to move animals into all 50 states, plus 3 U.S. territories. Contact GVL by phone at 515-296-0860, or see their website at www.globalvetlink.com to sign your practice on to the system. The Animal Health Lab has capability to process GVL **electronic EIA (equine infectious anemia)** certificates, too.

Idaho Veterinary Emergency Response Team (IVERT) is a cadre of potential veterinary responders to foreign animal diseases (FADs) if detected in Idaho. Veterinarians and certified veterinary technicians may receive continuing education credits for most IVERT trainings. Contact Dr. Marilyn Simunich at msimunich@agri.idaho.gov or see the Department of Agriculture website at www.agri.idaho.gov under Animals > Emergency Management.

Additional ISDA Animal Industries Program contacts:

Dr. Scott Leibsle – deputy state veterinarian and all animal health/care issues, equine diseases, animal regulations

Dr. Deb Lawrence – brucellosis, trichomoniasis, traceability, scrapie genotyping, deleterious/exotic spp., fish health

Dr. Marilyn Simunich – lab tests, rabies/ zoonotic diseases, equine, Johne's disease, National Poultry Improvement Plan

Dr. Tom Williams – Eastern Idaho Field Veterinarian

Dr. Scott Barnes – Northern Idaho Field Veterinarian