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### BIENNIAL REPORT OF EXAMINING AND LICENSING BOARDS

		001110
M.S. 1985 Supplement	, Section 214.07)	

001710

BOARD:	VETERI	NARY MED	ICINE	
LOCATION:	2700 Univ	ersity A	venue We	st #105
	St. Paul,	Minneso	ta 55114	
STATUTORY AUTH	ORITY:	156		
REPORT PERIOD:	July 1,	1984	To:	June 30, 1986.
SUBMITTED BY:	Glen H.	Nelson,	DVM	Executive Director
	Name		Title	Date

Copies of this report shall be delivered to: (A) the Legislature in accordance with Section 3.195 (1 copy to the Secretary of the Senate, 1 copy to the Chief Clerk of the House of Representatives and 10 copies to the Legislative Reference Library); (B) the Governor; and (C) Commissioner of Administration. Each healthrelated board shall also deliver a copy of their report to the Board of Health.

### Clause a: GENERAL STATEMENT OF BOARD ACTIVITIES

This description should cover both FY 85 and FY 86 and include any changes (additions/deletions) in activities between those years.

The Board of Veterinary Medicine examines qualified applicants twice each year to assure that adequately trained professional people are licensed to deliver veterinary services to the public. Approximately 130 new licenses are issued each year. The board investigates consumer complaints along with the Attorney General's Office. Approximately 2400 licenses were renewed in 1985.

The continuing goal of the board is to improve the professional competence of licensed veterinarians thus improving the quality of service to the public. This is accomplished by verifying qualifications of candidates for licensure. By administering State and National Board Examinations both written and practical. By verifying character references, college transcripts and other credentials required for each applicant. To request from and provide to other state and national organizations, information concerning board policy and procedures and status of licensees. Inform dru: regulating agencies upon request of location and status of licensees. Interchanging rules and regulations information. By keeping the State of Minnesota Animal Health Board informed of all new licensees and updating their records for credentialling by that agency. To certify approximately 6 new professional corporations annually and renewing 100. To verify approximately 300 licensees to drug firms and enforcement agencies.

The board is writting new rules concerning controlled substances by veterinarians. Hold hearings and suspend licenses when indicated.

Page 1 of 1 pages for Clause a

Page<sup>1</sup>

VETER	INARY	MEDICINE

Clause b: TOTAL NUMBER MEETINGS HELD FY 85 \_ 6 FY 86 \_ 6 FY 85 AND 36 \_ 12

APPROXIMATE TOTAL NUMBER OF HOURS SPENT BY BOARD MEMBERS IN MEETINGS AND ON OTHER BOARD ACTIVITIES.

	MEETING	H	OURS		OTHER ACTIVITIES		HOURS	
BOARD MEMBER'S NAME	TYPE	FY 85	FY 86	FY 85 & 86	ТҮРЕ	FY 85	FY P.	FY 85 & 86
Dī; Bennett Porter,Jr	.Bd.Mtg.	45	45	90				
Dr. Wm. F. Maher	Bd. Mtg.	47	38	85			ļ	
Dr. James Farnham	Bd. Mtg.	37	21	58			<u> </u>	
Dr. Milton Crenshaw	Bd. Mtg.	35	46	81			ļ	
Dr. A. J. Eckstein	Bd. Mtg.	51	54	105				
Mr. Neale Deters	Bd. Mtg.	17	0	17			<b>_</b>	
Mr. Gary Hayer	Bd. Mtg.	47	45	92				
<b>Ms. Marion</b> Fogarty	Bd. Mtg.	26	46	72				
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				<u></u>				

Page \_\_1 of \_1 pages for Clause b

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# Clause c: THE RECEIPT AND DISBURSEMENT OF BOARD FUNDS

	FY 85	FY 86	FY's 85 & 86
Total State Appropriations	72.1	80.4	152.5
Total Non-Dedicated Fee Receipts	65.6	71.0	136.6
Total Disbursements	69.4	76.5	145.9

COMMENTS (Optional)

Page  $\_{1}^{1}$  of  $\_{1}^{1}$  pages for Clause c



Clause d: LIST OF BOARD MEMBERS WHO SERVED DURING FY 85 AND FY 86

FOR EASY REFERENCE PLEASE GIVE:

- (A) Number of Board members required by statute:
- (B) The statutory length of term: <u>4 years</u>.

NAME & ADDRESS	OCCUPATION	GIVE BEGIN AND END DATE OF APPOINTMENT AND EACH RE- APPOINTMENT
Bennett Porter,	Veterinarian	4 - 11 - 84 = 01 - 86
Jr.		01 - 86 = 01 - 90
William F. Maher	Veterinarian	6-6-86 = 01-87
Gary R. Hayer	Farmer - Homemaker	5-3-84 = 01-88
A. J. Eckstein	Veterinarian	5 - 3 - 84 = 01 - 88
James Farnham	Veterinarian	5-3-84 = 01-88 (Resigned)
Milton P. Crensh	aw Veterinarian	6 - 6 - 83 = 01 - 87
Marion Fogarty	Farmer	4 - 8 - 85 = 01 - 89
Neale Deters	Teacher	3-27-81 - 01-85
**************************************		
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Page  $\_$  of  $\_$  pages for Clause d

BOARD

# Clause e: LIST BOARD EMPLOYEES WHO WERE EMPLOYED DURING FY 85 AND/OR FY 86

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			Sт	ATUS
JOB CLASSIFICATION/TITLE & CLASS	CLASS CODE	FT	PT	Dates of Service
DVM-Executive Director			x	1965 to Date
Executive I			x	1965 to Date
			ļ	
				·····
	DVM-Executive Director	DVM-Executive Director	JOB CLASSIFICATION/TITLE & CLASS CODE	JOB CLASSIFICATION/TITLE & CLASS FT PT   PVM-Executive Director X

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Page <u>1</u> of <u>1</u> pages for Clause e

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Page 5

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Clause 1: BRIEF SUMMARY OF BOARD RULES PROPOSED OR ADOPTED DURING THIS REPORTING PERIOD, FY 85 AND FY 86. GIVE APPROPRIATE CITATIONS TO THE STATE REGISTER AND PUBLISHED RULES FOR THOSE ADOPTED.

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NONE

Clause g: LIST THE NUMBER OF PERSONS HAVING EACH TYPE OF LICENSE AND REGISTRATION ISSUED BY THE BOARD AS OF JUNE 30, 1986 (IN THE YEAR OF THE REPORT)

TYPE OF LICENSE/REGISTRATION	TOTAL NUMBER IN EFFECT
Veterinary License	2,363

Page  $\_$  of  $\_$  pages for Clause g

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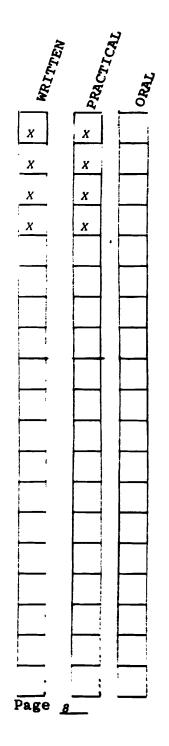
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BOARD

# Clause h ADMINISTRATION OF EXAMINATIONS BY BOARD

## EXAMINATION:

LOCATION	TYPES OF LICENSE/REGISTRATION	DATES
Dept. of Health Bldg.	Veterinary License	Dec. 1984
U. of M. St. Paul	Veterinary License	May. 1985
Dept. of Health Bldg.	Veterinary License	Dec. 1985
U. of M. St. Paul	Veterinary License	May. 1986
	2 day examinations:	
	Dec 10 & 11, 1984	, <del></del>
	May 13 & 14, 1985	, <del></del>
	Dec 9 & 10, 1985	
	Мау 12 & 13, 1986	
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Page 1 of 1 pages for Clause h

BOARD

#### Clauses i, j, k: MINNESOTA RESIDENTS PY TYPE OF LICENSE/REGISTRATION

List the number of Minnesota Residents <u>only</u> who were (1) examined and either (2) Licensed/Registered or (3) Not licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration

TYPE OF LICENSE/REGISTRATION

VETERINARY LICENSE

_				F	Y	85						_	1	FY	86						FX	85	AND	FY	86		
AGE GROUP	EX	AMI	NED		RE	GIS	LIC	NO C/RE		EX	AMI	NED	LIC	C/RI	EGIS	LIC	NO 27RI		EX		INED	LIC	C/RE	GIS	LI	NO C7RE	T GIS
	M	F	T	М	F	T	M	F	T	Μ	F	T	М	F	T	М	F	Ĩ	M	F	T	М	F	T	M	F	T
Under 18																											
18-25	8	7	15	8	1	15	Ü	0	0	9	7	16	8	7	15	1	0	1	17	14	31	16	14	30	1	0	1
26-34	28	16	44	28	16	<del>44</del>	0	0	0	<b>ž</b> 5	34	59	33	33	55	3	1	4	53	50	103	50	49	99	3	1	4
35-59	1	/	2	0	1	/		0		1	1	2	0	1	1		0	/	Z	2	#	0	3	2	2	0	2
60-65																											
66 & Over																											
Total	37	24	61	36	24	60	/	0	1	35	43	17	30	4/	71	5	1	6	72	66	138	66	65	31	6	1	7
				Cal	cula	ate	% of	Ma	le an	d %	of I	Fema	le to	th	e Tot	al o	of Ea	ach C	ate	gory							
6 of Total	61	39	100	8	40	100	100	0	100	45	55	100	43	58	100	83	17	100	57	48	100	51	49	100	86	14	100

BOARD

### Clauses 1, J, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of <u>Non-Minnesota Residents only</u> who were (1) examined and either (2) Licensed/Registered or (3) <u>Not</u> licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration. TYPE OF LICENSE/REGISTRATION

		FY 85 FY																			FX	85	AND	FY	86		
AGE GROUP	EX	AMIN	IED		RE	GIS		NO C/RE	T GIS		AMI				EGIS					AMI	INED	LIC/RE		GIS	LI	<u>NO</u> <u>C7R1</u>	
	M	F	T	M	F	T	M	F	T	M	F	Ť	M	F	T	М	F	T	M	F	T	M	F	Т	M	F	Т
Under 18																						┃					
18-25		6	17	1	6	7	0	0	0	3	5	8	3	5	8	0	0	0	4	11	15	4	//	15	0	0	0
26-34	11	10	2/	//	10	21	0	0	0	8	5	/3	8	4	12	0	1	1	19	15	34	9	14	33	0	1	4
35-59	4	3	7	3	1	4		2	3	8	1	9		0	2	7	1	8	/2	4	16	4		5	8	3	11
<b>6</b> 0-65			Í																								
66 & Over																											
Total	16	19	35	15	17	32	1	2	3	19	11	30	12	19	2/	7	2	9	35	30	65	27	26	53	8	4	12
	16 19 35 15 17 32 1 2 3 19 11 30 12 19 21 7 2 9 Calculate % of Male and % of Female to the Total of Each C															Cate	gory										
% of Total	46	54	100	47	53	100	33	67	100	63	37	100	57	43	100	78	રેર	100	54	46	100	51	49	100	67	33	100
State						•			TOT	ALN	NUM	BER (	QF N	ION-	RESI	DEN	TS E	BY ST	'ATE	3							
LOWA	6	8	14	6	7	/3	0		<i>[</i> .	8	3	11	8	R	10	0	1	/	14	11	25	14	9	23	0	/	
mich		1	જ	1	1	२	0	0	0										1	1	2	1	/	R	0	0	0
Egypt		0	$\bot$	1	0	/	0	0	0											0	/		0	1	0	0	0
ALAb.		1	2	1	1	2	0	0	0	1	/	2		/	2	0	0	0	2	Z	4	2	ર	Å	0	0	0
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BOARD

**CONTINUATION SHEET:** 

Claunes 1, J, K: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of <u>Non-Minnesota Residents only</u> who were (1) examined and either (2) Licensed/Registered or (3) <u>Not</u> licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration.

TYPE OF LICENSE/REGISTRATION

				F	Y	85				FY 86											FX	AND	ND FY 86				
	EX	AMI	NED	LIC	RE	GIS	LI	NO C/RE	T IGIS	EX	AMI	NED	LIC		EGIS	LIC	NO CIRI	T EGIS	EX	(AM	INED	LK	:/RE	GIS	LI	NO C/RI	T EGIS
	M	F	T	M	F	T	M	F	T	Μ	F	T	M	F	T	M	F	ŢT	Μ	F	T	M	F	T	M	F	T
State				P	ĻEA	SE	ĻIST	THE	TOT	'AL I	NUM	BER	OF N	ION	-RES	DEN	ITS	BY S'	TAT	E							•
R <b>KM</b> ANY	1	0	1	1	0		0	0	0										1	0	1	1	0	/	0	0	0
Cawada	1	0		L	0		0	0	0											0	1	1	0		0	0	0
Killipines	1	0	1	1	0	1	0	0	0	_									l	0	1	1	0	1	0	0	0
T.L.	Ż	0	1	/	0	1	0	0	0	0	1	/	0	1	/	0	0	0	1	1	2	1		2	0	0	0
KANS.	1	1	a	1		2	0	0	0	1	0	1		0	1	0	0	0	2	1	3	ス	/	3	0	0	0
Tud.	0	1	1	0	1		0	0	0	0	2	2	0	ス	र	0	0	0	0	3	3	0	3	3	0	0	0
OK.	0	1	1	0	1	1	0	0	0										0	1	/	0		$\angle$	0	0	0
FLA.	0		1	0	1	1	0	0	0	0	2	2	0	2	ょ	0	0	0	0	3	3	0	3	3	Ø	0	0
PENN	0	1	1	0	1	1	0	0	0	2	0	1		0	/	0	0	Ó	1	1	Z	1	1	a	0	0	0
m.	0	1	1	0	1	/	0	0	0										0	/	/	0	1	Ż	0	0	0
Denimark	0	1	1	0	1	1	0	0	0	_									0	1	/	0	1	$\angle$	ð	0	0
ARKISTAN	-0		4	0	1	1	o	0	0	-									0		/	0	4	7	0	0	0
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age	oſ	و ۲۰۰۶	_ pa	ges	10	)r (	Clau	868	i,	j.	K (	Non-	Res	ide	nts	)						á.			Pa	ge .	10

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**CONTINUATION SHEET:** 

Clauses 1, J, k: NON-MINNESOTA RESIDENTS BY TYPE OF LICENSE/REGISTRATION

List the number of <u>Non-Minnesota Residents only</u> who were (1) examined and either (2) Licensed/Registered or (3) <u>Not</u> licensed/registered after being examined for the type of license/registration noted. Use a separate page for each type of license or registration. TYPE OF LICENSE/REGISTRATION

FY 85 FY 86 FX 85 AND FY 86 NOT NOT NOT LICTREGIS EXAMINED LICTREGIS LICTREGIS LICTREGIS EXAMINED EXAMINED LIC/REGIS LIC/REGIS MF M F IM F M F M State PLEASE LIST THE TOTAL NUMBER OF NON-RESIDENTS BY STATE D 0 INDOUSIA 0 0 0 0 CA. 0 0 0 0 0 0 0 0 GA. 0 0 0 D 0 2 3 0 0 0 .2 0 0 ENDIA. 0 0 0 0 0 0 0 0 Mexico 0 0 0 0 0 0 0 Reece 0 D  $\partial$ 0 D 0 00 0 0 CUASOR Page \_\_\_\_\_ of \_\_\_ pages for Clauses 1, j, k (Non-Residents) Page 10

BOARD

Clause 1: THE NUMBER OF PERSONS NOT TAKING EXAMINATIONS WHO WERE LICENSED OR REGISTERED BY THE BOARD OR WHO WERE DENIED LICENSING OR REG. TRATION WITH THE REASONS FOR THE LICENSING OR REGISTRATION OR DENIAL THEREOF.

TOTAL NUMBER OF PERSONS NOT TAKING EXAMS AND GRANTED LICENSES OR REGISTRATIONFY 85 FY 86 FY 85 & 8OOOOTOTAL NUMBER OF PERSONS NOT TAKING EXAMS AND DENIED LICENSES OR REGISTRATIONOO

FOR EACH PERSON GIVE:

Type of lic./Regis.;	State of Res.	AGE GROUP 0-18   18-25   26-34   35-59   60-65   66-					0.514		* Method of			** Reasons for	
		0-18	118-25	126-34	<u>135-59</u>	60-65	66-	SE M	x TF	Lic./Regis.	Grant	Deny	Granting or Denial
				<u> </u>	1			1	<u> </u>		1		
and any second		+	+					+	+				
			<b> </b>					<b> </b>	<b> </b>		+		
							<u>1999-9999-999</u> -999-999-99-99-99-99-99-99-						9
	999-9999,999-999-999-999-999-999-999-99												
							<u> </u>				<b> </b>		
													· · · · · · · · · · · · · · · · · · ·

\* IDENTIFY METHOD: e.g. Application, Reciprocity, Endorsements, Credential Evaluation, Comity, etc. \*\* REASONS FOR GRANTING OR DENIAL: Attach Additional Sheets if necessary.

Page 1 of 1 pages for Clause 1

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Clause m: PERSONS PREVIOUSLY LICENSED OR REGISTERED BY THE BOARD WHOSE LICENSES OR REGISTRATIONS WERE REVOKED, SUSPENDED OR OTHERWISE ALTERED IN STATUS, WITH BRIEF STATEMENTS OF THE REASONS FOR THE REVOCATION, SUSPENSION OR ALTERATION.

TOTAL number of revocations TOTAL number of suspensions

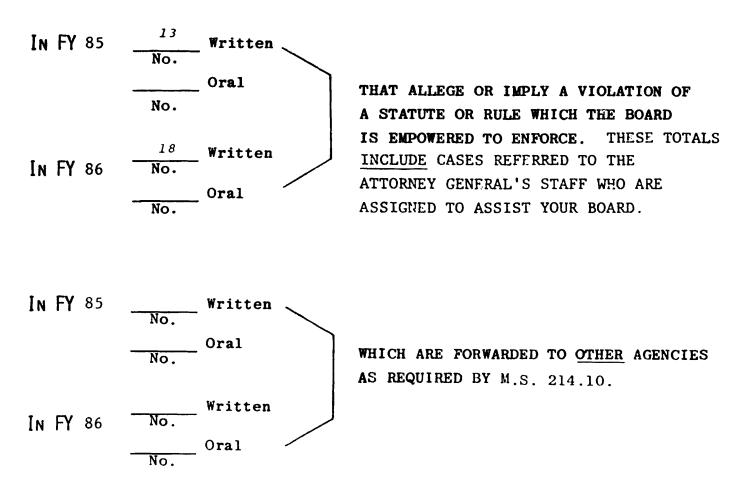
FY 85	FY 86	FY's 85&86			
	78	78			
76	36	112			

TOTAL number of other status changes

TYPE OF LICENSE OR REGISTRATION	STAT	TYPE OF TUS CHANGE		REASONS FOR EACH CHANGE IN STATUS FOR EACH CASE		
(By case)	Revoked	Suspended	Other (Specify)			
Veterinary Lic.		78		Non payment of Fees		
Veterinary Lic.			Deaths	16		
Veterinary Lic.			Retired	96		
			· · · · · · · · · · · · · · · · · · ·			

**Page** 1 of 1 pages for Clause m

Clause n: List the number of complaints and other communications received by the Executive Secretary, each Board member, employee or other person performing services for the Board



Please indicate the number of complaints referred to <u>each</u> other governmental agency (Federal, State, and Local) in each fiscal year:

Page 1 of 1 pages for Clause n

Clause o: SUMMARIZE, BY SPECIFIC CATEGORY, THE SUBSTANCE OF THE COMPLAINTS AND COMMUNICATIONS REFERRED TO IN CLAUSE (n) OF M.S. 214.07 AND AND, FOR EACH SPECIFIC CATEGORY, THE RESPONSES OR DISPOSITIONS THEREOF PURSUANT TO M.S. 214.10 and 214.11 (INDICATE AUTHORITY/ CITATIONS FOR DISPOSITION).

(Dispositions occuring during this period of complaints and communications received prior to July 1, 1984, and complaints and communications received but not disposed of as of June 30, 1986 should be included).

	SUMMARY OF COMPLAINTS AND COMMUNICATIONS BY SPECIFIC CATEGORY	SUMMARY OF RESPONSES AND DISPOSITIONS FOR EACH SPECIFIC CATEGORY				
	(Give number in each specific category)	(Give number in each specific category)				
	24 written complaints were received that were non- jurisdictional and were resolved by the Complaint Panel and Attorney General's Office.	24 dismissed as non-jurisdictional.				
	<b>7 written complaints were received that were board jurisdictional</b>					
1.	Illegal use of veterinary technician.	l. Indefinite suspension - stayed.				
2.	Unsanitary conditions and unacceptable standards of practice.	2. Indefinite suspension - stayed.				
3.	Misappropriated drugs for personal use.	3. Indefinite suspension - after l year a restricted and conditional license was issued.				
4.	License used to purchase narcotics for personal use.	4. Indefinite suspension.				
5.	3 licensees falsified Health Certificates.	5. Indefinite suspension - stayed.				
Page	<u>1</u> of <u>1</u> pages for Clause o	Page <u>14</u>				

March Sector

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- Clause p: STATE ANY OTHER OBJECTIVE INFORMATION WHICH THE BOARD MEMBERS BELIEVE WILL BE USEFUL IN REVIEWING BOARD ACTIVITIES:
- (For Example: In what other states do your licensees hold licenses? Number of Minnesota licenses verified/certified to other states? Number of inspections? Comparisons with past Biennial Reports?)

For health-related boards: (except Veterinary Medicine)

1) What progress has the board made so far in establishing procedures to exchange information with other Minnesota state boards, agencies, and departments responsible for licensing health related occupations, facilities, and programs, and for coordinating investigations involving matters within the jurisdiction of more than one licensing body? and,

2) What progress has the board made so far in establishing procedures for exchanging information with other states regarding disciplinary action against licensees? (see M.S. 1985 Supplement, Section 214.10, Subd. 8(d)(e).

Minnesota licensees hold license in the following states:

Iowa, Missouri, Michigan, Penn. Maryland, So. Dak., Florida, Colo. Ms., Washington, Oklahoma, Kansas, Illinois, Wisconsin, New York, Idaho, Virginia, Maine, California, Texas, Indiana, Ohio, Georgia.

Approximately 50 licenses verified/certified to other states.

Approximately 300 licenses verified/certified to Drug Enforcement Adm., and Drug firms.

**Page** <u>1</u> of <u>1</u> pages for Clause p

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