

Informational Statement Form

The following statement is submitted for adopted amendments to Nevada Administrative Code (NAC) Chapter NAC 638.

1. A clear and concise explanation of the need for the adopted regulation.

The proposed regulation updates and modernizes Nevada's veterinary medical regulations to align with current standards of veterinary practice, maintain patient safety, medical recordkeeping, clarify supervision and facility requirements, expand workforce utilization through registered veterinary student externs, and strengthen consumer protections. The regulation also addresses patient safety considerations in veterinary dentistry. Administrative updates regarding continuing education, receipt of payments, and medical records were made to align with statute.

2. A description of how public comment was solicited, a summary of public response, and an explanation of how other interested persons may obtain a copy of the summary.

Copies of the proposed regulations, notices of workshop, and notices of intent to act upon the regulation were sent by email to 3,142 individual license and registration holders, as well as the designated management contacts for 264 veterinary facilities who were known to have an interest in veterinary medicine, as well as any persons who had specifically requested such notice. These documents were also made available at the website of the Board of Veterinary Medical Examiners (www.nvvetboard.nv.gov), mailed to each county library in Nevada, and posted at the following locations:

State of Nevada Board of Veterinary Medical Examiners
4600 Kietzke Ln.
Suite O-265
Reno, NV 89502

Office of the Attorney General
100 North Carson Street
Carson City, NV 89701

Office of the Attorney General
1 State of Nevada Way
Las Vegas, NV 89119

Clark County Library
1401 E. Flamingo Rd.,
Las Vegas, NV 89119

Downtown Reno Library
301 S. Center Street
Reno, NV 89501

Sierra View Library
4001 South Virginia St.
Reno, NV 89502

www.notice.nv.gov

A workshop was held on October 23, 2025, and the Board received 8 written comments with 4 individuals testifying in-person or virtually. A second workshop was held on January 29, 2026, for which the Board received 10 written comments with 2 individuals testifying in-person or virtually.

A public hearing was held on April 30, 2026. At that hearing, 3 written comments were submitted before the hearing, and no one testified in person or virtually during the hearing.

A copy of the summary of the public comments made in person and by written submission to the proposed regulation is enclosed as 'Attachment A'.

- 3. The number of persons who:**
 - (a) Attended each hearing: 0**
 - (b) Testified at each hearing: 0**
 - (c) Submitted to the agency written comments: 3**
- 4. A list of names and contact information, including telephone number, business address, business telephone number, electronic mail address, and name of entity or organization represented, for each person identified above in #3, as provided to the agency, is attached as 'Attachment B'.**
- 5. A description of how comments were solicited from affected businesses, a summary of their response, and an explanation of how other interested persons may obtain a copy of the summary.**

Comments were solicited at each workshop and hearing from the 264 licensed veterinary facilities and 3,142 individual licenses, as well as 54 individuals who had requested such notice. Comments were solicited in the same manner as they were solicited from the public. Specific questions regarding potential small business impact were directed toward the solicitation for the October 30, 2025, workshop. The summary may be obtained as indicated in the response to question #2.

6. If the regulation was adopted without changing any part of the proposed regulation, a summary of the reasons for adopting the regulation without change.

The regulations were modified through the workshop process in response to public comments after Board consideration and discussion. At the April 30, 2026, adoption hearing, the Board did adopt the regulations with changes. One individual who submitted a comment had requested that the Board consider a modification to the 1,000-hour requirement for Veterinary Student Externs, but the Board felt that hands-on experience before granting registration would be in the interest of public safety, and as such, the Board elected not to make that change.

7. The estimated economic effect of the adopted regulation on the businesses that it regulates and on the public. These must be stated separately, and each case must include:

- (a) Both adverse and beneficial effects for business;**
- (b) Both adverse and beneficial effects for the public;**
- (c) Both immediate and long-term effects for business; and**
- (d) Both adverse and beneficial effects for the public.**

(a) Both adverse and beneficial effects for business.

Of benefit, the regulations will improve workforce availability and clarify roles between veterinary technicians in training and veterinary student externs that are currently not permitted to work during their first and second year of veterinary school. The regulations pertaining to animal drug shortages should alleviate potential disruptions caused by supply chain delays or interruptions. Allowing for electronic medical record delivery and electronic education resources should alleviate staff time during an investigation and support modernization efforts. The Board considered and does not believe that there will be any substantial adverse economic effects on veterinary businesses.

(b) Both adverse and beneficial effects for the public.

The proposed regulations are expected to be of benefit to the public by improving and clarifying standards of care, enhancing animal health and safety, increasing clarity and consistency in veterinary practice requirements, and improving access to qualified veterinary services. Adverse effects may include small changes to compliance and operational changes for some veterinary facilities; however, the regulatory changes were made with these changes in mind and are not overly restrictive or burdensome, especially when assessed against the needed patient protection the changes would codify.

(c) Both immediate and long-term effects for business.

Support of modernization and electronic access and delivery of medical records are intended to help alleviate staff time dedicated to the delivery of medical records during investigations or under circumstances where the Board requests records.

Facility operations should benefit in the long term from the increased flexibility and workforce pathways. Additionally, improved clarity regarding standards of care and facility standards should reduce risks associated with improper treatment of patients, as well as the management of medical records and facility operations.

(d) Both immediate and long-term effects for the public.

The proposed regulation may have immediate effects on the public through changes to veterinary facility operations, standards of care, and availability of certain veterinary services. Long-term effects are expected to include improved consistency in veterinary medical practices, enhanced consumer and animal protections, improved access to qualified veterinary care, and modernization of veterinary regulatory standards in Nevada.

(e) The estimated cost to the agency for enforcement of the adopted regulation.

There is no additional cost to the agency for enforcement of this regulation.

(f) A description of any regulations of other state or government agencies that the proposed regulation overlaps or duplicates, and a statement explaining why the duplication or overlapping is necessary. If the regulation overlaps or duplicates a federal regulation, the name of the regulating federal agency.

There are no other state or government agency regulations that the proposed regulation duplicates.

(g) If the regulation includes provisions that are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

There are no federal regulations that apply.

(h) If the regulation provides a new fee or increases an existing fee, the total annual amount the agency expects to collect and the manner in which the money will be used.

This regulation does not provide a new fee or increase an existing fee.

ATTACHMENT A

Public Comment Summary RO26-26

October 30, 2025, Regulation Workshop

Public Comment

Heather Davis asked why the item regarding identification of staff to clients was not being included in the draft regulation. Ms. Davis asked for clarification regarding dental procedures and stated that including regulations requiring a License Veterinary Technician (LVT) to report certain findings to the veterinarian may put undue pressure on the LVT to recognize abnormalities in the mouth which could be considered diagnosis. Ms. Davis also made recommendations regarding the timeline for retention of cremains and how to manage the volume of retained patients remains.

Rachel Schneider asked for the Board to consider the addition of allowing a VGAL to practice when the candidate is making a 6th attempt at the NAVLE rather than requiring them to cease practice. This would be especially important to consider when an individual that is required to be employed to maintain their work visa.

Destiny Cain, LVT stated that veterinarians are typically not involved in dental procedures and asked that the Board codify language to require a veterinarian to examine a patient prior to or at some time during the dentistry procedure. Ms. Cain also requested that the Board consider for future regulations, a permit for sonography for LVT's.

Suzanne Zervantian, DVM asked why recording the vaccine volume is required in the medical record. She also requested that the Board ensure regulation related to the retention of remains do not discriminate against larger breeds. She asked if the language regarding medication administration in the medical records is a concern. She reiterated concerns requiring LVTs to report dental abnormalities, and asked why veterinarians must document examination of a patient during a dental procedure when the requirement already exists.

Emily Renner, DVM, DAVDC strongly supports removing Nevada's allowance for non-anesthetic dental scaling. She argues the procedure is cosmetic rather than therapeutic, cannot properly identify or treat periodontal disease without anesthesia, probing, and radiographs, and may mislead owners into believing meaningful dental care has been provided. The letter provides detailed clinical explanations regarding periodontal disease, gingivitis, probing depths, tooth resorption, fractures, stomatitis, and radiographic findings to support the position that awake dental scaling does not meet accepted veterinary standards of care.

Rodney Ferry, DVM generally supports the proposed regulations but recommends revising the vaccine definition language to more accurately reflect how vaccines function clinically. He notes vaccines do not always create full immunity or completely prevent disease and suggests wording stating vaccines “aid in prevention” or “reduce severity” instead. He also expresses concern that the proposed animal remains storage and disposal requirements could unintentionally require facilities to store deceased animals for excessive periods, especially large animals.

Terri Koppe, DVM stated that there may be confusion with regulations that currently exist in regulation under the Board of Pharmacy.

Todd Behre, DVM commented on technical inaccuracies in the draft regulations regarding animal vaccines. He explains that the USDA, not the FDA, regulates animal vaccines and cites FDA guidance supporting that distinction. He additionally questions whether the terms “immunization” and “vaccination” are intended to be interchangeable throughout the regulations and recommends clarification for consistency and accuracy.

Brian Hewitt, DVM, DAVDC submitted an extensive statement opposing non-anesthetic or “cosmetic” dentistry. He explains that many serious dental diseases—including periodontal disease, endodontic disease, tooth fractures, developmental abnormalities, and inflammatory conditions—can only be properly diagnosed under anesthesia using probing and radiographs. He argues cosmetic cleaning may delay needed treatment, provide owners with a false sense of security, fail to protect the airway, increase patient stress, and permit progression of untreated disease. The letter includes several clinical case examples illustrating pathology that would have been missed during awake procedures and concludes that cosmetic dentistry provides no meaningful medical benefit while creating potential harm to animals and clients.

Jessica Ponte, LVT provided technical drafting recommendations intended to improve clarity and consistency in the regulations. Her comments address continuing education documentation requirements, use of undefined terminology such as “points,” formatting and punctuation corrections, and stronger owner access rights to radiographs and diagnostic images. She also identifies several grammatical and wording changes intended to improve enforceability and readability of the regulations.

Sarah Kalivoda, DVM requests that Nevada allow veterinary graduates awaiting licensure (VGALs) to perform limited emergency, life-saving care without a veterinarian physically present, provided a supervising veterinarian is nearby, immediately available by phone, and able to direct care remotely until arrival. She argues this would improve animal welfare and continuity of care while remaining consistent with the authority already granted to licensed veterinary technicians.

Megan Allman, LVT stated her support for expanding the scope and operational flexibility of mobile veterinary technicians in Nevada. She supports allowing licensed veterinary

technicians to provide additional in-home veterinary support services under indirect veterinary supervision, based on referrals and written veterinary orders. Her comments emphasize the benefits of mobile veterinary care, including reduced patient stress, improved client compliance and education, increased clinic efficiency, public safety, improved access to care, and support for the human-animal bond. She also outlines proposed services mobile LVTs could provide, discusses recordkeeping and liability coverage, and compares the model to human home-health nursing services.

January 30, 2026, Regulation Workshop Regulation Workshop

Dr. Amanda Kremer requested that that Board removed the requirement that a patient be referred by a veterinarian prior to engaging in chiropractic services by an Animal Chiropractic (AC). Other states allow for self-referral. With self-referral, an AC knows when care other than chiropractic is needed and refers back to the veterinarian with providing care.

Jayme Frayne, LVT found an omission of ‘the veterinarian’ in Sec.15 page 46

Brook Niemiec, DVM supports the change to the supragingival cleaning allowance. Dr. Niemiec would supports the availability of dental radiology.

Dr. Marlene Tremblay has concerns regarding proposed language for Veterinary Technician Specialists (VTS).

Amanda Ray, LVT, VTS (Dentistry) stated that the current proposed VTS language does not change the scope of practice for Veterinary Technician Specialists versus Licensed Veterinary Technicians

David Baggett, DVM stated that he has concerns regarding ethics, VGAL, continuity of care with relief DVM's, misuse of LVT's, unlicensed activity, facility safety and controlled substances. Furthermore, Dr. Baggett indicates that he knows of LVT's running vaccine clinics without a veterinarian on site and administering rabies vaccine.

Craig Shank, DVM stated that he would like to see changes to the proposed Registered Veterinary students and require that they completed the first year or 2-semesters rather than requiring 1000 hours in the field. Dr. Shank also would like to see an exemption regarding the storage and disposal standards for large animal species.

Christina Martini, DVM stated that she would the VTS language to better reflect the training performed by the VTS and expand the scope for the VTS.

Dennis Wilson, DVM stated that the Standard of Care in Sec 5.1, where the language states “in the best manner” is too ambiguous and open to interpretation consider “according to generally accepted standards of high quality medical and surgical care”.

NV Board of Physical Therapy proposed Assistant Physical Therapist registration that would permit APT to work under the supervision of a licensed physical therapist.

Jonathan Osmond, LVT, VTS VECC submitted an example of the skills checklist for finalizing a veterinary emergency and critical care technician specialist credential and supported the credentialing and expanded scope of practice for veterinary technician specialists in Nevada.

April 30, 2026, Adoption Hearing

Nathan LaHue, DVM submitted a comment that he has concerns that the regulations do not include 3rd and 4th year students.

Brook Niemiec, DVM submitted a letter of support of the Board in removing the practice of non-anesthetic dentistry from the regulations.

Katherine Fogelberg stated that she has concerns that the 1,000-hour requirement for veterinary student externs would prevent individual students from being able to work in their first and second years.

ATTACHMENT B

Name	Organization	Email	Phone
<i>In-Person</i>			
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Jonathan Esmond, LVT	Animal Emergency and Specialty Center	jaesmond@hotmail.com	760-490-6636
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John Lapira (Unverified)				
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<i>Written Comment</i>				
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