

1999 HOUSE AGRICULTURE

HB 1294

1999 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. HB 1294

House Agriculture Committee

Conference Committee

Hearing Date 1-22-99

Tape Number	Side A	Side B	Meter #
ONE-HB 1294		x	0.8 to 50.0
Committee Clerk Signature <i>Olivia Hanson</i>			

Minutes:

Summary of bill: Relates to the practice of Veterinary Medicine, what they may do and not do and states they may not perform an embryo transfer procedure on a cow.

Rep Boehm: One amendment that will clarify the bill. Now I will let others testify and explain the bill.

Dave Dockter: I work for Minn/Select Sires hdqtr out of St Cloud Minn. We cover ND & Minn. The Minnesota Board of Veterinary Medicine has determined that non-licensees(i.e.,lay personnel) can perform Direct-Transfer embryo transfer procedures without veterinary supervision. Any use of prescription veterinary drugs, however, must be under the supervision of a licensed veterinarian. (Testimony attached)

Rep Berg: What's the Issue? Is it more with extracting the Embryo and the drugs that are used to do the job.?

Dave Dockter: We are not asking for that. There are quite a few in other states that do this type of operation.

Rep Berg: On the recipient cow you are not using any of the drugs. More like artificial insemination.

Tom Bettenhausen: Bismarck: Reg breeder of cattle

Rep Warner: Can you give us any idea of the physical embryo? Cost of the Vet to do the work and how long window do you have to do this transplant?

Dave Dockter: Opportunity is approx. 7 days after the cow has been in heat or cycling. We figure about a 12 hour window to do the procedure. We sell embryo's that range from \$200 to \$600 a piece.

Kenneth Forstor: Richardton, ND Forster Red Angus been in existence since 1967. We ask that you do not make it mandatory to use a certified Veterinary for embryo transplant but to give people the freedom of choice to do it themselves or have a neighbor help.

Tom Hagleman: Dairy farmer from south of Mandan. Urges us to pass HB 1294 I have been using embryo transplant for the last nine years to improve our genetics. The past 4 years I have been practicing implanting frozen embryo's. My first 4 embryos I implanted became pregnant. If you pass this bill it will enable me to implant embryo's in my neighbors cows and my own.

Rep Koppang: What rate of success is normal with Embryo transplant.

Tom Hagleman: About 40 to 50% is normal.

Chad Ellingson: St Anthony, ND Need to be able to compete in the new world

Wade Moser: ND Stockmen in support of this bill. Need to have this type of law to allow our Ranchers the ability to compete with industry in other States.

Page 3

House Agriculture Committee

Bill/Resolution Number Hb 1294

Hearing Date 1-22-99

2-11-99.. Reopened hearing on Hb 1294..

Rep Renner: Worked out an agreement with the industry. We'd compromise on HB 1294 and put it on the calendar ahead of HB 1430. If 1294 passes kill 1430.

Rep Herbel: Supports Rep Renner in his efforts.

Rep Mueller: Supports Rep Renner in his efforts.

Rep Berg: Thinks vet who supplies the drugs should be held responsible. Moves amendment.

Second by Froelich. Motion carried

Vote total: YES 12 NO 3 ABSENT 0

Carrier: Rep Renner

2-11-99
 Date: 1-22-99
 Roll Call Vote #:

1999 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. 1294

House AGRICULTURE Committee _____

Subcommittee on _____
 or
 Conference Committee

Legislative Council Amendment Number _____

Action Taken Do pass as amended

Motion Made By Berg Seconded By Froelich

Representatives	Yes	No	Representatives	Yes	No
Eugene Nicholas, Chaiman	✓		Bob Stefonowicz	✓	
Dennis E. Johnson, Vice Chm	✓				
Thomas T. Brusegaard	✓				
Earl Rennerfeldt		✓			
Chet Pollert	✓				
Dennis J. Renner	✓				
Michael D. Brandenburg	✓				
Gil Herbel	✓				
Rick Berg	✓				
Myron Koppang	✓				
John M. Warner		✓			
Rod Froelich	✓				
Robert E. Nowatzki		✓			
Phillip Mueller	✓				

Total (Yes) 12 No 3

Absent _____

Floor Assignment Renner

1999 SENATE AGRICULTURE

HB 1294

1999 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. HB 1294

Senate Agriculture Committee

Conference Committee

Hearing Date March 19, 1999

Tape Number	Side A	Side B	Meter #
2	x		1-5355
Committee Clerk Signature <i>Jucia Jorgensen</i>			

Minutes:

SENATOR WANZEK opened the hearing on HB 1294. Committee members present included: Sens. Wanzek, Klein, Sand, Urlacher, Kinnoin, Kroeplin, and D. Mathern.

REPRESENTATIVE DENNIS RENNER, DISTRICT 31 introduced HB 1294 and proposed amendments. He explained the amendments. The amendments create a new section 12 regarding the embryo transfer.

SENATOR WANZEK You're saying a person performing an embryo transfer can do that except in the case where there is prescription drugs being administered.

REPRESENTATIVE RENNER They can do the embryo transfer and if they use these prescription drugs they have to have a client-veterinarian relationship. If I need to do this procedure, I have to see the veterinarian and he'll give me the drugs.

TOM KEIDEL, HOLSTEIN ASSOCIATION testified in support of HB 1294 (see testimony). I am a dairy farmer who uses the embryo transplant procedure directly on my farm. I raise Holstein cattle and I have been using the frozen embryo implants on my cattle for the last four years. It is very easy to learn if you have good AI experience (he gave an example). I encourage you to pass this bill which will allow me to sell the embryos to other producers and it will allow me and other layman to implant these embryos without the use of a legalized veterinarian practitioner.

SHARON CEYNAR, ND RED ANGUS AND BADLANDS RED ANGUS testified in support of HB 1294. We've been using embryo plantations in our registered Red Angus herd since 1989. There were no veterinarians and technicians in ND. In order to had our cattle implanted with embryos, we had to take them to eastern Montana. This became very costly due to the distance and the boarding of our cattle off the ranch. At this point we used a veterinarian and our results weren't satisfactory (she told of her experience). In the registered business it is hard to go forward because of the expenses. For the heifer end of the spectrum, the only way to progress is through embryology without huge expenses and a lot of gambling. My husband and I both went to school to learn this practice. It does take a lot of skill and practice to be successful at it. We feel this is necessary.

SENATOR SAND This is very important to ranchers and their financial viability?

SHARON CEYNAR Yes.

SENATOR WANZEK Today you can artificially inseminate your own cattle but you cannot transfer an embryo into a donor cow?

SHARON CEYNAR Yes, we can artificially inseminate our own cattle and we can transfer an embryo into a donor cow but we can't hire someone to do that transfer of an embryo.

CHAD ELLINGSON, ND ANGUS ASSOCIATION testified in support of HB 1294 (see testimony).

SENATOR URLACHER Is there a transplant with swine and sheep?

CHAD ELLINGSON Most embryo transfers has been in the beef and dairy cow industry.

SENATOR MATHERN Is this a lengthy process?

CHAD ELLINGSON It used to be a long surgical procedure, but now there is not much of a difference between embryos being transferred and artificial insemination.

SENATOR KINNOIN When did you start doing this?

CHAD ELLINGSON I have never actually put the embryos in myself.

SENATOR MATHERN I heard that females are better at this process.

CHAD ELLINGSON I would agree.

DAVID DOCKTER, MN SELECT SIRES AND NDBIF testified in support of HB 1294 (see testimony).

WADE MOSER, ND STOCKMEN'S ASSOCIATION testified in support of HB 1294 (see testimony from producers).

DR. GERALD KITTO, AMERICAN EMBRYO TRANSFER ASSOCIATION testified in a neutral position (see testimony).

SENATOR KINNOIN Regarding liability insurance, a lay person should be able to get insurance.

DR. KITTO I would assume they probably could.

SENATOR MATHERN What's your charge for this?

DR. KITTO I charge \$55 for each one.

SENATOR URLACHER This would be an option for a producer to hire qualified veterinarian or take the risk.

DR. KITTO Yes. As veterinarians, we feel comfortable with the bill and the amendments.

SENATOR WANZEK In your professional opinion, can it be done without spinal block drugs?

DR. KITTO It can be done but not when I do it.

SENATOR SAND When you use the figure \$3,000, I think that someone who buys an embryo worth that much knows what he is doing.

DR. KITTO I would think so.

JOHN BOYCE, ND BOARD OF VETERINARIAN AND MEDICAL EXAMINERS testified in a neutral position (see testimony).

DR. BILL ROTENBERGER, ND VETERINARY MEDICINE testified in a neutral position.

We want to add one word "direct" in Section 12 the first line, so it is not a collection procedure but a direct procedure. I don't want to be perceived as a veterinarian that is holding back the cattle industry that I make my living off of. We have some concerns about how this procedure is done. We want to be sure it is done properly and correctly.

WADE MOSER discussed the proposed amendment. I don't see any problem with adding that word but the bill does talk about the recipient cow.

DR. KITTO The reason for the direct is that there are many embryos that are frozen in another way and they cannot be implemented directly (he described a type of procedure).

SENATOR WANZEK So by using the word "direct" we're more narrowly describing what type of embryo.

DR. KITTO Yes.

SENATOR WANZEK We will close the hearing on HB 1294.

SENATOR SAND I motion to amend the amendment on line 12.

SENATOR KLEIN I second.

The amendment passed by a voice vote.

SENATOR URLACHER I motion to adopt amendment .0202.

SENATOR KLEIN I second.

A roll call vote was taken on the amendment (7 Yeas, 0 Nays, and 0 Absent and Not Voting).

SENATOR SAND I move a Do Pass as Amended.

SENATOR URLACHER I second.

There was committee discussion.

A roll call vote was taken on HB 1294 as a Do Pass as Amended (7Yeas, 0 Nays and 0 Absent and Not Voting).

Senator D. Mathern will carry HB 1294.

PROPOSED AMENDMENTS TO ENGROSSED HOUSE BILL NO. 1294

Page 1, line 1, after "A BILL" replace the remainder of the bill with "for an Act to amend and reenact section 43-29-13 of the North Dakota Century Code, relating to the practice of veterinary medicine.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. AMENDMENT. Section 43-29-13 of the 1997 Supplement to the North Dakota Century Code is amended and reenacted as follows:

43-29-13. Practices excepted from chapter. The following persons may not be considered to be engaging in the practice of veterinary medicine in this state:

1. Those who administer to livestock, the title to which rests in themselves, or in their regular employer, except where the ownership of the animal was transferred to avoid the requirements of this chapter, or those who perform gratuitous services.
2. Anyone who conducts experiments in scientific research in the development of methods, techniques, or treatment, directly or indirectly applicable to the problems of medicine, and who in connection with these activities uses animals.
3. Anyone who is a regular student in an accredited or approved college of veterinary medicine performing duties or actions assigned by an instructor or working under the direct supervision of a licensed veterinarian during a school vacation period.
4. Anyone licensed in another state or nation when engaged in this state in consultation with veterinarians legally practicing herein.
5. A senior student who is in an approved school of veterinary medicine and who obtains from the board a student permit to practice in the office and under the direct supervision of any veterinarian practicing within this state.
6. Any employee of the United States or this state while in the performance of duties as employees.
7. Any merchant or manufacturer selling medicine, feed, an appliance, or any other product used in the prevention or treatment of animal diseases.
8. Any veterinary technician or other employee of a licensed veterinarian performing duties under the direction and supervision of the veterinarian responsible for the technician's or other employee's performance.
9. Any member of the faculty of an accredited college of veterinary medicine performing regular functions or a person lecturing or giving instructions or demonstrations at an accredited college of veterinary medicine or in connection with a continuing education course or seminar.
10. Any person selling or applying any pesticide, insecticide, or herbicide.

11. Any graduate of a foreign college of veterinary medicine who is in the process of obtaining a certificate and is performing duties or actions assigned by the graduate's instructors in an accredited or approved college of veterinary medicine.
12. Any person performing an embryo transfer procedure on a recipient cow. Except as provided in this subsection, a person performing an embryo transfer procedure on a recipient cow may not administer prescription drugs to the cow during, or as part of, the procedure. The owner of the recipient cow, however, may administer or cause the administration of prescription drugs to the recipient cow during, or as part of, the procedure if a veterinarian-client-patient relationship exists."

Renumber accordingly

Date: 3/19

Roll Call Vote #: /

1999 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. HB 1294

Senate Agriculture Committee

Subcommittee on _____
or
 Conference Committee

Legislative Council Amendment Number _____

Action Taken Do Pass Amendments

Motion Made By Sand Seconded By Klein

Senators	Yes	No	Senators	Yes	No
Senator Wanzek	✓				
Senator Klein	✓				
Senator Sand	✓				
Senator Urlacher	✓				
Senator Kinnoin	✓				
Senator Kroeplin	✓				
Senator Mathern	✓				

Total (Yes) 7 No 0

Absent _____

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

Date: 3/19
Roll Call Vote #: 2

1999 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. HB 1294

Senate Agriculture Committee

Subcommittee on _____
or
 Conference Committee

Legislative Council Amendment Number _____

Action Taken Do Pass as Amended

Motion Made By Sand Seconded By Klein

Senators	Yes	No	Senators	Yes	No
Senator Wanzek	✓				
Senator Klein	✓				
Senator Sand	✓				
Senator Urlacher	✓				
Senator Kinnoin	✓				
Senator Kroeplin	✓				
Senator Mathern	✓				

Total (Yes) 7 No 0

Absent _____

Floor Assignment Senator ~~Wanzek~~ Mathern

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

HB 1294, as engrossed: Agriculture Committee (Sen. Wanzek, Chairman) recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (7 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). Engrossed HB 1294 was placed on the Sixth order on the calendar.

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2. Anyone who conducts experiments in scientific research in the development of methods, techniques, or treatment, directly or indirectly applicable to the problems of medicine, and who in connection with these activities uses animals.
3. Anyone who is a regular student in an accredited or approved college of veterinary medicine performing duties or actions assigned by an instructor or working under the direct supervision of a licensed veterinarian during a school vacation period.
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7. Any merchant or manufacturer selling medicine, feed, an appliance, or any other product used in the prevention or treatment of animal diseases.
8. Any veterinary technician or other employee of a licensed veterinarian performing duties under the direction and supervision of the veterinarian responsible for the technician's or other employee's performance.
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Renumber accordingly

1999 TESTIMONY

HB 1294



North Dakota Veterinary Medical Association

921 South Ninth Street
Bismarck ND 58504
Phone: 701/221-7740
Fax: 701/258-9005

Chairman Nicholas and members of the House Ag Committee. For the record my name is Bill Rotenberger. I currently serve as President of the North Dakota Veterinary Medical Association and I am here today on behalf of our membership.

We oppose House Bill 1294 for several reasons:

1. Embryo transfer is a medical procedure; direct transfer is not the same as artificial insemination
2. Requires use of restricted drugs; violation of federal law AMDUCA (Animal Medicinal Drug Use Clarification Act) which was supported by all state and national livestock organizations
3. Starting a list of exempt veterinary practices; what about Equine dentistry, animal chiropractic medicine, acupuncture, spay clinics; every session add to list?
4. ND has an enviable animal health record; result of working with animal agriculture and veterinary professions, i.e. South Dakota has not yet received their brucellosis free status yet
5. Animal Agriculture and Veterinary Medicine need to continue their cooperative efforts in disease and animal health issues
6. There are plenty of veterinarians available and capable of providing this service and have expressed their interest by attending continuing education courses
7. Exemption already exists to practice act allowing owners to work on their own animals
8. This legislation is for a few individuals to have an additional income; what benefit is it to the small rural communities to potentially have less veterinary service; short term gain for a few to the long term detriment of many
9. Education of new graduates



North Dakota Board of Veterinary Medical Examiners

Post Office Box 5001, Bismarck, ND 58502, phone: 701-328-9540, fax: 701-224-0435

London J. Jacobs, DVM
Powers Lake, ND
President

James Clement, DVM
Mandan, ND
Secretary

Daniel P. Treat, DVM
Fargo, ND

John R. Boyce, DVM, PhD
Executive Secretary

House Agriculture Committee, House Bill No. 1294, January 22, 1999
John R. Boyce, Executive Secretary, North Dakota Board of Veterinary Medical Examiners

Licensure is a mechanism designed to assure the public that individuals who provide professional services meet certain minimum qualifications and are accountable for their actions. The North Dakota Board of Veterinary Medical Examiners is responsible for regulating the practice of veterinary medicine and veterinary technology in North Dakota. In order to be licensed to practice veterinary medicine in North Dakota, candidates must be graduates of accredited or approved colleges of veterinary medicine. This typically requires between six and eight years of college education (including four years of veterinary school). In addition, candidates must pass two national board examinations and a state board examination. Licensed veterinarians are also required to complete 24 hours of approved continuing education every two years. Veterinary technicians must have at least two years of college-level training, must pass a national licensing examination, and must complete eight hours of continuing education every two years.

The North Dakota Board of Veterinary Medical Examiners would like to share the following concerns about House Bill 1294, regarding embryo transfer procedures in cattle. The same comments would also apply to House Bill 1430, which deals with pregnancy determination in cattle.

First, it is preferable from an administrative standpoint to retain a broad definition of the practice of veterinary medicine in the practice act, and then include in a separate section specific exemptions as necessary. This is the way the North Dakota veterinary medical practice act (Chapter 43-29) is constructed. The practice act contains a section dealing with activities that are not considered the practice of veterinary medicine (Section 43-29-13). This section includes an exemption for livestock owners and their employees, as well as exemptions for several other classes of individuals. House Bill 1294 makes a specific exception for embryo transfer procedures part of the definition of the practice of veterinary medicine in Section 43-29-01.1. This could be construed to prohibit veterinarians from performing embryo transfer procedures.

Second, the existing veterinary medical practice act already contains a provision allowing non-veterinarians to provide animal health services to the public, as long as they are doing so as employees of a licensed veterinarian and are under the direction and supervision of a veterinarian (Section 43-29-13, paragraph 8). The Board believes that this provision allows a variety of individuals with specialized qualifications and skills to provide needed services to animal owners, while maintaining appropriate accountability through the licensed veterinarian and the Board of Veterinary Medical Examiners. This accountability is, in the opinion of the Board, essential for public protection. If the proposed legislation were to be enacted as written, it would essentially allow persons doing embryo transfer procedures on cattle to operate free of any oversight to assure their competence or accountability. The Board does not believe that this action would be in the best interest of the citizens of North Dakota.

Thank you for this opportunity to address this legislation. I would welcome any questions you may have.

The AVMA considered establishing standards for veterinary practice facilities, and came to realize that specific requirements are difficult to define. The diverse types of practice, economic conditions, and facility requirements throughout the country preclude development of a single set of specific standards applicable to all practices.

As a result, the Association has listed 14 general principles of good practice that encompass all aspects of veterinary medicine, and should be considered in the development and operation of any practice. They are:

- 1) Overall cleanliness and neatness of personnel and facilities.
- 2) Adequate protection against dissemination of disease.
- 3) Proper disposal of all waste material.
- 4) Adequate protection against radiation exposure.

- 5) Adequate ventilation and freedom from noxious odors.
- 6) Freedom from noise pollution.
- 7) Adequate restraint facilities as per specialty.
- 8) Availability of proper refrigeration and sterilization equipment.
- 9) Facilities and equipment suitable for currently acceptable veterinary practice.
- 10) Adequate patient and financial records.
- 11) Evidence of continuing education participation.
- 12) Compliance with local ordinances and with cognizance of OSHA recommendations.
- 13) Adequate protection from hazardous exposure to pesticides, anesthetic gases, and other toxic substances.
- 14) Adequate personnel to provide proper veterinary care.

GUIDELINES FOR VETERINARY PRESCRIPTION DRUGS

(The following guidelines on veterinary prescription drugs were approved by the AVMA House of Delegates in 1997.)

Key Points

- Veterinary prescription drugs are labeled for use only by or on the order of a licensed veterinarian.
- Veterinary prescription drugs are to be used or prescribed only within the context of a valid veterinarian/client/patient relationship (VCPR).
- Veterinary prescription drugs must be properly labeled before being dispensed.
- Appropriate dispensing and treatment records must be maintained, and veterinary prescription drugs should be dispensed only in quantities required for the treatment of the animal(s) for which the drugs are dispensed.
- Any drug used in a manner not in accordance with its labeling (extralabel use) should be subjected to the same supervisory precautions that apply to veterinary prescription drugs.

The AVMA has prepared the following guidelines as a resource regarding the use and distribution of veterinary prescription drugs. Veterinarians making treatment decisions must use sound clinical judgment and current medical information and must be in compliance with federal, state, and local laws and regulations.

Veterinary Prescription Drugs

Veterinary prescription drugs are those drugs restricted by federal law to use by or on the order of a licensed veterinarian [Section 503(f) Food, Drug, and Cosmetic Act]. The law requires that such drugs be labeled with the statement: "Caution: Federal law restricts this drug to use by or on the order of a licensed veterinarian."

Veterinarian/Client/Patient Relationship

A VCPR exists when all of the following conditions have been met:

- The veterinarian has assumed the responsibility for making clinical judgments regarding the health of the animal(s) and the need for medical treatment, and the client has agreed to follow the veterinarian's instructions.
- The veterinarian has sufficient knowledge of the animal(s) to initiate at least a general or preliminary diagnosis of the medical condition of the animal(s). This means that the veterinarian has recently seen and is personally acquainted with the keeping and care of the animal(s) by virtue of an examination of the animal(s) or by medically appropriate and timely visits to the premises where the animal(s) are kept.
- The veterinarian is readily available for follow-up evaluation, or has arranged for emergency coverage, in the event of adverse reactions or failure of the treatment regimen.

Veterinary Prescription Orders

- Orders issued by licensed veterinarians authorize drug distributors to deliver veterinary prescription drugs to a specific client, or authorize pharmacists to dispense such drugs to a specific client.
- Veterinarians should check with their State Board of Pharmacy and State Veterinary Practice Act to be sure that they are in compliance with state laws.

Labeling & Record Keeping

- Adequate treatment records must be maintained by the veterinarian for at least two years (or as otherwise mandated by law), for all animals treated, to show that the drugs were supplied to clients with whom a valid VCPR has existed. Such records must include the information set forth under *Basic Information for Records, Prescriptions, and Labels*.
- Food animal owners must also keep treatment records. Owner treatment records have been developed by several producer organizations and are available in conjunction with quality assurance programs.
- All veterinary prescription drugs must be properly labeled when dispensed. A complete label should include the information set forth under *Basic Information for Records, Prescriptions, and Labels*. If that information is included in the manufacturer's drug label, it is unnecessary to repeat it in the veterinarian's label. If there is inadequate space on the label for complete instructions, the veterinarian must provide additional information to accompany the drug dispensed or prescribed. The veterinarian's additional instructions must be kept in the owner's drug storage area.
- When veterinary prescription drugs are dispensed to companion animal owners, the AVMA recommends that such drugs be placed in child-resistant containers. Such containers are mandated by law in certain states.

Basic Information for Records (R), Prescriptions (P), and Labels (L)

- a. Name, address, and telephone number of veterinarian (RPL)
- b. Name (L), address, and telephone number of client (RP)
- c. Identification of animal(s) treated, species and numbers of animals treated, when possible (RPL)
- d. Date of treatment, prescribing, or dispensing of drug (RPL)
- e. Name and quantity of the drug (or drug preparation) to be prescribed or dispensed (RPL)
- f. Dosage and duration directions for use (RPL)
- g. Number of refills authorized (RP)
- h. Cautionary statements, as needed (RPL)
- i. Expiration date (L)
- j. Slaughter withdrawal and/or milk withholding times, if applicable (RPL)
- k. Signature or equivalent (P)

Handling and Storage

The veterinarian should inform clients to whom prescription drugs are delivered or dispensed about appropriate drug handling and storage.

In the clinic, veterinary prescription drugs should be stored separately from over-the-counter drugs, and be easily distinguishable by the professional and paraprofessional staff. Drugs should be stored under conditions recommended by the manufacturer. All drugs should be examined periodically to ensure cleanliness and current dating.

Food animal clients should be advised that veterinary prescription drugs should be securely stored, with access limited to key personnel.

Animal Medicinal Drug Use Clarification Act (AMDUCA) Compliance in Drug Use

The therapeutic administration of any approved dosage form drug in a manner that is not in accordance with the drug's labeling requires additional management. AMDUCA regulations are in force for all approved therapeutic dosage form drugs if administered in a manner not in accordance with the drug's labeling. For such usage, the FDA specifies that the following criteria must be met:

- Make a careful diagnosis and evaluation of the conditions for which the drug is to be used.
- There is no approved animal drug that is labeled for such use, or that contains the same active ingredient in the required dosage form and concentration. Alternatively, an approved animal drug exists, but a veterinarian finds, within the context of a valid veterinarian/client/patient relationship, that the approved drug is clinically ineffective for its intended use.
- Assure that the identity of the treated animal(s) is carefully maintained.

- Establish a substantially extended withdrawal period supported by appropriate scientific information prior to marketing milk, meat, eggs, or other edible products from the treated animal(s).

The use of certain drugs is prohibited in food animals. This list may be amended by the Food and Drug Administration, thus the following list is accurate as of the publication date of this document.

- Prohibited therapy in food animals: chloramphenicol, clenbuterol, diethylstilbestrol, dimetridazole, ipronidazole, glycopeptides.
- Prohibited therapy in food animals except approved topical use: furazolidone, nitrofurazone.
- Prohibited therapy in food animals except approved uses in poultry: fluoroquinolone class of antibiotics.
- Prohibited therapy in lactating dairy cows: any sulfonamide except for those specifically approved (sulfadimethoxine, sulfabromethazine and sulfaethoxypridazine).

In addition to the items set forth under *Basic Information for Records, Prescriptions and Labels*, AMDUCA regulations specifically add "condition treated" to the record keeping requirement.

AMDUCA does not permit extralabel use of drugs in feed.

Compounding

Compounding is defined as any manipulation to produce a dosage form drug other than that manipulation that is provided for in the directions for use on the labeling of the approved drug product. A few examples include combining drug agents for anesthesia, incorporating a pill into reduced dosage liquid or capsule forms, or creating certain antidotes.

Guidance is found in FDA-CVM Compliance Policy Guide 608.400 "Compounding of Drugs for Use in Animals" issued July 1996.

AVMA POLICY ON VETERINARY TECHNOLOGY

PREAMBLE

The AVMA recognizes the valuable assistance of veterinary technicians as an integral and valuable component of veterinary medicine in the United States and urges the full utilization of veterinary technicians whenever possible in veterinary research, regulatory, and health care activities. The practice of veterinary medicine is enhanced through efficient utilization of each member of the veterinary health care team by delegation of tasks and responsibilities to the appropriate level of support staff.

Nomenclature

- "Veterinary Technology" is the science and art of providing professional support service to veterinarians in the practice of their profession.
- A "Veterinary Technician" is a person who has graduated from a two- or three-year, AVMA-accredited program in veterinary technology.
- A "Veterinary Technologist" is a graduate of a four-year, AVMA-accredited program who holds a baccalaureate degree from such study.
- "Veterinary Assistant": The adjectives "animal," "veterinary," "ward," or "hospital" combined with the nouns "attendant," "caretaker," or "assistant" are titles sometimes used for individuals where training, knowledge, and skills are less than that required for identification as a veterinary technician or veterinary technologist. The basic tasks performed by veterinary assistants may include, but are not limited to, feeding, watering, bathing, restraining, transporting, and exercising animals. They may also perform cleaning, clerical/office duties, and other, similar entry-level activities.
- AVMA will encourage schools, organizations, and regulatory authorities to use the standard terminology described above, but will not attempt to interfere, except through educational efforts, with the actual terminology used.

The Role of Veterinary Technicians in the Practice of Veterinary Medicine

- The role of veterinary technicians is that of providing professional assistance to veterinarians, biological research workers, scientists, and animal control and humane organizations.
- The duties of veterinary technicians shall be performed under the direction, supervision, and responsibility of veterinarians. These duties shall be accomplished in compliance with federal, state, and local laws and shall not include diagnosing, prescribing, or performing surgery.
- The veterinary technician must be knowledgeable in the care and handling of animals, their normal and abnormal life processes, medical and surgical nursing, anesthesiology, radiography, and clinical laboratory procedures.

Role of the AVMA

Approved by the AVMA House of Delegates
July, 1995

- The AVMA offers consultation on both primary and continuing education of veterinary technicians, their utilization, their regulation, and other related matters.
- The AVMA encourages the utilization of veterinary technicians in the veterinary college setting; providing for the veterinary students a demonstration of proper utilization, the economic value of such utilization, and the advantages of effective utilization of technicians in the delivery of quality veterinary care. Cooperation and affiliation between veterinary technology programs and veterinary colleges is encouraged.
- The AVMA makes an ongoing effort to determine and address present and future manpower needs in the field of veterinary technology. Placement services for veterinary technicians are available from the AVMA Career Development Center.

DANGEROUS ANIMAL LEGISLATION

(Approved by the AVMA Executive Board, 1988)

The AVMA supports dangerous animal legislation by state, county, or municipal governments provided that legislation does not refer to specific breeds or classes of animals. This legislation should be

directed at fostering safety and protection of the general public from animals classified as dangerous and undesirable.

POSITION OF DRUG USE IN SHOW ANIMALS

(Approved by the AVMA Executive Board, 1990)

That AVMA discourage the use of therapeutic agents such as tranquilizers, local and systemic anesthetics, anabolic steroids, diuretics, alcohol, all products not approved by FDA, and any other product

intended to alter the performance, conformation, or appearance of animals to be shown at fairs, exhibitions, displays, or contests.

EMBRYO TRANSFER AND THE PRACTICE OF VETERINARY MEDICINE

(Approved by the AVMA House of Delegates, 1986)

RESOLVED, 1) that the American Veterinary Medical Association continues to support the premise that embryo-transfer procedures are a function of veterinary medicine since the procedures require the prescribing of drugs, aseptic technique, diagnosis, and in some cases surgery. The AVMA recommends that the practice acts of each state hold that embryo-transfer procedures are a function of veterinary medicine;

2) that practitioners performing embryo-transfer procedures in states where they are not licensed should do so using the AVMA approved guidelines for referrals; and that the referring veterinarian should have a written agreement with the embryo-transfer practitioner and also should have an appropriate veterinarian-client-patient relationship with the herd where the procedures are performed.

Statement About the Resolution

The AVMA House of Delegates took a position in 1981 that embryo-transfer procedures are a function of veterinary medicine. The position states that more practitioners should become proficient in the procedures and this has been accomplished through numerous continuing education efforts.

Specific drugs cited by FDA as utilized in embryo-transfer procedures that would require the administration or a prescription by a licensed veterinarian are: estradiol, prostaglandin, xylazine, follicle-stimulating hormone, and gonadotropin-releasing hormone. The FDA

in recent investigations has also stressed the need for an appropriate veterinarian-client-patient relationship when prescribing drugs.

Many embryo-transfer practitioners are requested to perform services in states where they are not licensed due to the absence of a local practitioner with embryo-transfer capabilities, because of greater capabilities (ie, freezing and micromanipulation), or due to client preference. The 1981 AVMA position states that consultants should operate under the ethical considerations for referrals. By requiring that the referral agreement be in writing, the task of the state licensing boards of protecting the public would be easier when complaints arise.

The American Embryo Transfer Association has implemented a certification program for businesses involved in embryo-transfer procedures for the purpose of self-regulation of the industry and to identify to the public businesses that have met the requirements for certification. The program includes a minimum educational requirement of a DVM or a PhD in reproductive physiology which, in addition to other requirements eliminates unqualified laymen from being certified. Recognizing this program with the provision that businesses without licensed veterinarians have a written referral agreement with a licensed veterinarian, who is then responsible for them, will simplify the task of the state licensing boards. It should also help cope with opposition in some states where attempts are made to exempt embryo-transfer from the practice act.

POSITION ON EMBRYO TRANSPLANT PROCEDURES

(Approved by the AVMA House of Delegates, 1991)

The AVMA believes that the embryo transplant procedure is a function of veterinary practice, because it requires diagnosis and use of legend pharmaceuticals, and it may require surgery and use of controlled substances. To be effective, embryo transplant procedures demand extensive knowledge in anatomy, physiology, pharmacology,

biochemistry, endocrinology, and sterile surgical procedures that is part of the training of the graduate veterinarian.

Embryo transplant procedures are regulated by the various state practice acts. The AVMA encourages all veterinarians to conform to the laws of the states in which they practice.

GUIDELINES ON EMERGENCY VETERINARY SERVICE

(Approved by the AVMA House of Delegates, 1988)

1. Emergency veterinary service should be provided in every community where private veterinary service is regularly provided.
2. The public should be informed about the veterinary emergency service through telephone directories and other means. For a classification of emergency facilities, see the AVMA Guidelines for Naming of Veterinary Facilities.
3. The veterinarian who provides emergency treatment should refer the case and all pertinent records back to the owner's regular veterinarian, or a veterinarian of the owner's choice, as soon as practical after the emergency treatment has been concluded.
4. An emergency clinic, as all veterinary medical facilities, should

maintain adequate records, provide proper examination facilities, radiologic and anesthetic equipment, have an adequate staff of ancillary employees, have an up-to-date library of appropriate textbooks and periodicals, and a pharmacy containing both emergency drugs and those for continuing therapy. Housekeeping and maintenance procedures should be incorporated to provide a clean and pleasant environment for patients, staffs, and clientele. No set of emergency service guidelines can be designed to cover all practice situations. However, all veterinary emergency plans, regardless of the size or location, should be dedicated to a high standard of veterinary care and should be consistent with the "Principles of Veterinary Medical Ethics."

Dr. Gerald P. Kitto
Central Dakota Genetics, P.C.
Sheridan Animal Hospital
McClusky, ND 58463

Doctor of Veterinary Medicine Washington State University, 1975.
Board Certified in Embryo Transfer by The American Embryo Transfer Assoc.
Performing Embryo Transfers Since 1977.

Embryo Transfer is a specialized procedure performed on genetically superior animals. This advanced technology requires in depth knowledge of anatomy, endocrinology, reproductive physiology, super ovulation, estrus synchronization, cryobiology and cellular chemistry. The veterinarians of North Dakota have concerns about embryo transfers being performed by lay technicians, as asked for by HB 1294, for the following reasons:

- 1) Drugs approved for use by veterinarians only or under the direction of a veterinarian are necessary to perform embryo transfers.
 - a) Lidocaine: an anesthetic that must be used for spinals in the performance of embryo transfers. Anesthetics are controlled substances as mandated by the FDA. The warnings are on the bottle which is presented for your inspection. Note the problems that can occur if lidocaine is used improperly. If given intravenously, death can occur.
 - b) Prostaglandins: a hormone used for synchronizing heat cycles of animals. This hormone must be used in all embryo transfers. Prostaglandins can cause miscarriage or abortions in humans even if they only touch the skin. They penetrate unbroken skin. Prostaglandins also affect many organ systems other than the reproductive organs. Deaths have occurred in asthmatics due to prostaglandins. This is why they are labeled for veterinarians only by the FDA. Please note the warnings underlined on the bottle.
 - c) Follicle Stimulating Hormone: a hormone for stimulating the ovaries to produce more than a single ovum in the normal reproductive cycle. Notice this hormone is made in Canada. The FDA approved this hormone on a temporary basis less than one year ago because the only company manufacturing follicle stimulating hormone in the United States for animals elected to stop production. The misuse of this hormone could result in the immediate loss of approval.

The FDA has set guidelines for drugs for excellent reasons. It is a concern when it appears that HB 1294 plans to simply ignore FDA mandates.

- 2) The need to keep the standards of the American Embryo Transfer Association.

In the early 1980's, the embryo transfer industry recognized the need for an organization to keep the quality of embryo transfer work high and the need to standardize procedures. Thus the American Embryo Transfer Association was born and a board certification program was implemented. Only Doctors of Veterinary Medicine or Doctors of Philosophy can be examined for A.E.T.A. certification. Only certified embryo transfer companies can prepare embryos for export. Importing countries will not accept embryos collected without A.E.T.A. certification. The A.E.T.A. has strict guidelines for grading and preparation of embryos before implantation or freezing. It seems rather ludicrous to move embryo transfer over to lay technicians when the vanguard of the embryo transfer industry has these high standards. These high standards are for a reason. There are many spokes in the wheel to completing an embryo transfer successfully. If one spoke to the wheel gets broken, the whole procedure goes flat.
- 3) Embryo Transfer is not artificial insemination.

Embryo transfer requires expensive, sophisticated equipment. Embryo transfer requires very experienced adept professionals in the art of rectal palpation. Embryo transfer requires spinal anesthesia. When someone artificially inseminates an animal, the inseminator has around 10,000 chances for a successful pregnancy. There are around 10,000 viable sperm in every semen insemination straw. An embryo is alone in an insemination straw. The price of a straw of semen averages around \$10.00. The price of a straw with a single embryo in it averages around \$500.00. You have one chance for a pregnancy with a very expensive embryo. The implant should therefore be done by a competent experienced professional.

Dr. Gerald P. Kitto
Central Dakota Genetics, P.C.
Sheridan Animal Hospital
McClusky, ND 58463

4)The problem of liability.

Most embryo donors are very valuable animals. No lay technician has liability insurance to cover the possibility of a serious mistake. Who is going to be the loser in the event of a serious problem? The consumer of the embryo transfer service. There are several examples of litigation cases where incompetence caused severe losses to the owners of animals put into embryo transfer. A \$30,000 donor cow was ruined when a lay technician left a plastic straw in the cow's uterus. The owner wanted to sue the technician after the veterinarian removed the plastic straw from this cow's uterus. The owner had no recourse, however, because the lay technician had no liability insurance. These technicians cannot obtain liability insurance. There is no such thing for these people.

These are some of our concerns in allowing lay technicians to perform embryo transfers.

Good morning, members of the House Agriculture Committee. I am Chad Ellingson from St. Anthony, N.D., and I appear before you in support of HB 1294.

I have been employed with 21st Century Genetics, a bovine genetics firm, for the past seven years as a livestock programs consultant. This position has given me the opportunity to travel across the country and work with some of the nation's top beef and dairy producers. All of these producers have achieved their status by using top genetics to advance their herds.

These genetics have been introduced into herds for years through superior sires via artificial insemination. More recently, herds have made greater advancements by not only multiplying the genetics of a superior sire but also by multiplying the genetics of superior dams through embryo transfer.

In most states I travel in, embryo transfer is a convenient procedure, readily available to producers, because the states' laws allow cattlemen to hire the best in the business, highly-trained direct-thaw embryo technicians, even if they do not happen to be licensed veterinarians. This is the case in each of our surrounding states, including Montana, South Dakota, Wyoming, Minnesota and Wisconsin.

For example, at our office headquarters in Shawano, Wisc., we have in place a multi-ovulation embryo transplant program, in which we implant 200 dairy embryos into recipients each year. The embryos are implanted by professional artificial insemination technicians that have extended training in embryo transplant. Our company has decided to use their services, even though we have licensed veterinarians on staff, as the former individuals have the specialized skill of palpation of reproductive organs and have been more successful in this line.

In North Dakota, cattle producers have a difficult time keeping up with the competition in embryo transfer, since only veterinarians are allowed to perform this service and there are not enough of them that have the experience, necessary equipment or desire to do so. By passing this bill and allowing qualified technicians to perform direct-thaw embryo transfer, I believe North Dakota's beef and dairy industry will be able to keep the pace of the rest of the country's progressive cattlemen. If, however, we do not pass this bill, we'll be stifling the progress of North Dakota's beef and dairy industries, two of the state's most revenue-generating industries.

I strongly urge your do-pass recommendation. I would be happy to entertain any questions.

Double Diamond Ranch

John & Brenda Novodvorsky ◆ 23300 114th St SW ◆ Douglas, ND 58735 ◆
Phone 701-722-3942 ◆ Fax 701-722-3942 ◆ Email ddr@ndak.net

January 22, 1999

IN REFERENCE TO HOUSE BILL 1294

I am writing this with concerns regarding house bill 1294, an amendment that would allow embryologists that are not veterinarians to do embryo work in North Dakota. At our ranch, embryo's are a very important part of our breeding program, with 40 - 50 embryo's transferred to recipient cows each year. Our local veterinarians have no interest in doing this work for us as they don't do enough of it to feel confident. We transfer these embryo's in April or May, the height of a veterinarians' busy calving season which would also affect their ability to schedule a day away from the office to do this procedure.

I am reminded of artificial insemination in its infancy, veterinarians also felt that only a vet should do this procedure but very few of them were willing to actually do it. Eventually we all learned to do AI ourselves with great success. I don't see any differences between the embryo issue and the AI issue, both should be a tool in the hands of the rancher to help further the genetics' of his/her herd.

Please consider our testimony on this issue and vote to bring North Dakota into the 21st century with the state of the art embryo technology offered by embryo technicians.

Thank you for your consideration,

John & Brenda Novodvorsky
Double Diamond Ranch
Douglas, ND

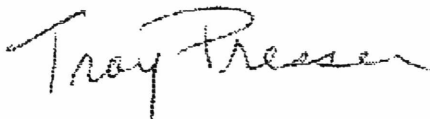
HONORABLE COMMITTEE MEMBERS:

ON BEHALF OF THE NORTH DAKOTA RED ANGUS ASSOCIATION OF NORTH DAKOTA, IT IS OF GREAT CONCERN THAT WE COME BEFORE YOU ON THE ISSUE OF EMBRYO TECHNICIANS IN NORTH DAKOTA.

IT IS OF GREAT CONCERN AS A BREED THAT AS THE LAW STANDS TODAY, THERE ARE MANY LIMITATIONS BEING PUT ON US AS PUREBRED BREEDERS. EMBRYO TECHNICIAN IS ADVANCED TECHNOLOGY WHICH ALLOWS US TO IMPROVE OUR PROGENY AND GENETICS. AT THIS POINT NORTH DAKOTA IS ONE OF VERY FEW STATES THAT STILL PUTS THE LIMITATIONS OF EMBRYO TRANSPLANT SERVICES IN THE HANDS OF A VETERINARIAN. WE AS A PUREBRED ASSOCIATION FEEL WE ARE LOOSING OUR COMPETITIVENESS TO BREEDERS IN OTHER STATES, DO TO RESTRICTIONS ON THE AVAILABILITY TO ADVANCED TECHNOLOGY. THIS LAW LIMITS THE COMPETITION RESULTING IN HIGHER PRICES AND LOWER QUALITY WORK. BY LIMITING THE PERFORMANCE OF EMBRYO TRANSPLANT TO A FEW, IT PENALIZES THE MANY PURE BRED BREEDER IN ORDER TO BENEFIT THE FEW VETERINARIANS IN NORTH DAKOTA

WE AS RED ANGUS BREEDERS FEEL THIS LAW NEEDS TO BE LIBERATED, AND NOT CONSIDERED A PRACTICE OF MEDICINE.

THANK -YOU!

A handwritten signature in cursive script that reads "Troy Presser".

NORTH DAKOTA RED ANGUS MEMBERS AND
TROY PRESSER, PRESIDENT

HONORABLE COMMITTEE MEMBERS:

ON BEHALF OF BADLANDS RED ANGUS OF ARNEGARD, ND, IT IS A GREAT CONCERN THAT WE COME BEFORE YOU ON THIS ISSUE REGARDING EMBRYO TECHNICIANS. AS STATED TO THIS DAY, WE AS RANCHERS CAN HIRE A CERTIFIED TECHNICIAN TO COME TO OUR RANCH AND FLUSH OR IMPLANT EMBRYO'S INTO OUR COWS AS LONG AS WE HIRE A VETERINARIAN TO OVER SEE THE WORK.

WE HAVE BEEN USING EMBRYO TECHNICIANS IN OUR REGISTERED RED ANGUS HERD SINCE 1989. AT THIS TIME THERE WERE NO EMBRYO TECHNICIANS, OR VETERINARIANS IN THE STATE OF NORTH DAKOTA PRACTICING THIS SKILL. WE HAD TO TAKE OUR COWS CLEAR TO EASTERN MONTANA. TO FIND A TECHNICIAN. NEED LESS TO SAY THIS WAS A VERY COSTLY AFFAIR DO TO DISTANCE AND BOARDING OUR COW/CALF UNIT OFF THE RANCH. AT THIS POINT WE USED A VETERINARIAN AND OUR RESULTS WERE NOT SATISFACTORY. AFTER TWO FULL YEARS OF MAJOR EXPENSES AND VERY FEW EMBRYOS, WE FOUND AN EMBRYO TECHNICIAN IN WYO., WHERE WE HAULED OUR COW/CALF PAIRS TO HIS BUSINESS ONCE AGAIN, SO WE WERE STILL DEALING WITH THE EXPENSES AS BEFORE. THIS TIME WE HAD FOUND A CERTIFIED TECHNICIAN WHO WAS NOT A VETERINARIAN. THIS MAN DOES EMBRYO WORK FOR A LIVING AND HAS MASTERED THE SKILL LIKE NO ONE ELSE. WE FOUND IT MUCH EASIER TO HAUL OUR CATTLE TO WYO. WHEN WE WERE GETTING QUALITY EMBRYO'S FROM OUR COWS, THE EMBRYO'S WERE ALSO SETTLING IN OUR RECIPIENT COWS AND GIVING US A CHANCE TO PROGRESS IN PROGENY AND GENETICS. THIS DISCOVERY WAS MADE IN JAN. OF 1992. WE WERE VERY EXCITED TO SEE OUR EXPENSIVE PROGRAM HAD PAID OFF IN THE SPRING OF 1993, WHEN THE CALF CROP ARRIVED.

IN THE REGISTERED BUSINESS IT IS VERY EXPENSIVE TO PURCHASE HEIFER CALVES, COWS OR AS FAR AS THAT GOES

BULLS. FOR THE BULL END OF THINGS IT IS EASILY SOLVED WITH ARTIFICIAL INSEMINATION. MY HUSBAND, DAUGHTER AND MYSELF ARE ALL CERTIFIED TO DO ARTIFICIAL INSEMINATION. BUT AS FOR THE HEIFER END OF THE SPECTRUM ABOUT THE ONLY WAY TO GROW QUICKLY IN YOUR GENETICS IS TO EMBRYO. THIS IS A SKILL IN WHICH MY HUSBAND AND I BOTH HAVE ATTENDED SCHOOL FOR AND ARE VERY KNOWLEDGEABLE IN THE FIELD. IN FACT WE REALIZE THAT UNLESS YOU DO EMBRYO WORK YEAR ROUND IT ISN'T ANYTHING TO MESS WITH ON THE SIDE LINE, THERE IS TOO MUCH ROOM FOR ERROR.

IN THE PAST YEARS WE HAVE GIVEN OUR OWN SHOTS ON THE RANCH AND HAD MANY DIFFERENT TECHNICIANS COME TO OUR RANCH AND FLUSH OUR COWS AND PUT EMBRYO'S IN OUR RECIPIENT COWS. WE HAVE USED DIFFERENT VETERINARIANS IN THE STATE AND HAD MAJOR DISASTERS IN OUR HEARD. SOME EXAMPLES ARE: NO EMBRYO'S, EMBRYO'S FROZEN WRONG SO THAT THE EMBRYO'S WERE SEVERED IN HALF WHEN FROZEN. THREE YEARS AGO WE LOST THREE OF OUR BEST DONOR COWS IN A ACCIDENT ON OUR HILL IN THE BADLANDS. DO TO THE FACT THAT WE WERE POOLING TOGETHER WITH ANOTHER BREEDER TO GET OUR DONORS TO AN EMBRYO TRANSPLANT CENTER SO THAT THE CATTLE COULD BE FIT INTO THE SCHEDULE OF THE EMBRYO TECHNICIAN OUT OF STATE. YES THE ROADS WEREN'T GOOD AND NO WE SHOULDN'T HAVE BEEN GOING. BUT THE POINT IS WITH THE LAW AS IT IS IN NORTH DAKOTA WE MUST TAKE OUR BUSINESS OUT OF STATE IN ORDER TO GET QUALITY SERVICE IN THIS FIELD. ALL IN ALL IT HAS BEEN A VERY EXPENSIVE TO PATRONIZE THE VETERINARIANS USING THIS TECHNIQUE. PERSONALLY WE CAN'T AFFORD TO DO IT!

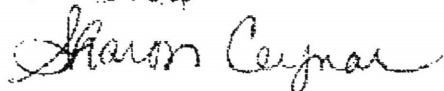
IN MAY OF 2000 OUR DAUGHTER WILL GRADUATE WITH A DEGREE IN ANIMAL SCIENCE WITH A CONCENTRATION IN BUSINESS PRODUCTION AND A DOUBLE MINOR IN AG BUSINESS AND AG MARKETING. HER LIFE LONG DREAM IS TO BE AN EMBRYO TECHNICIAN, SHE WENT TO SCHOOL THREE YEARS AGO KNOWING THAT SHE FINANCIALLY COULD NOT JUSTIFY THE OF

THOUSANDS OF DOLLARS IT TAKES TO BECOME A VETERINARIAN, WHEN HER GOAL WERE TO BE AN EMBRYO TECHNICIAN. NOT TO MENTION BEING RAISED IN THE HEART OF EMBRYO PROGRAM, KNOWING THAT IN ORDER TO BE A SUCCESSFUL EMBRYO TECHNICIAN YOU NEED TO CONCENTRATE ON EMBRYO WORK FULL TIME AND NOT ON THE MANY OTHER RESPONSIBILITIES OF A VETERINARIAN. AT THIS POINT WE KNOW IN ORDER FOR HER TO FULFILL HER LIFE LONG DREAM AS AN EMBRYO TECHNICIAN SHE WILL HAVE TO LEAVE THE STATE.

NORTH DAKOTA IS AN AGRICULTURAL STATE, WHICH I AM VERY PROUD OF. I FEEL AS MANY OF YOU DO TODAY THAT IT IS VERY IMPORTANT TO PROVIDE JOBS FOR OUR YOUTH. AS THE LAW READS TODAY WE ARE ACTUALLY ENCOURAGING OUR YOUTH TO LEAVE THE STATE IN SEARCH OF EMPLOYMENT. IS THIS WHAT WE REALLY WANT?

WE AT BADLANDS RED ANGUS FEEL THE LAWS FOR EMBRYOLOGY NEED TO BE EMANCIPATED. THIS WOULD INCREASE OUR JOB PLACEMENT, INCREASE COMPETITION, WHICH IN TURN WILL IMPROVE THE QUALITY OF SERVICE AND MAKE PRICES MUCH MORE COMPETITIVE. RIGHT NOW THE LAW FENCES OUT THE COMPETITION BECAUSE OTHER STATES ARE NOT LIMITED TO VETERINARIANS DOING THE EMBRYO WORK. AS OF NOW THE LAW IS PROTECTING A FEW VETERINARIANS AND HURTING MANY PRODUCERS. I FEEL IT IS TOTALLY UNNECESSARY TO HAVE TO BE A VETERINARIAN TO PERFORM EMBRYO TRANSFERS.

THANK YOU



BADLANDS RED ANGUS
BILL & SHARON CEYNAR
P.O. BOX 44
ARNEGARD, ND 58835

To whom this may concern,

As a member of the North Dakota Simmental Association, I am greatly concerned about the issue of embryo technicians in North Dakota.

We as purebred breeders utilize embryo transplanting to a very large degree and feel that more competition in this field would be a great benefit to the breeders of our state.

The way the law stands now, they must be a certified veterinarian to preform this process. We know of many technicians specializing in this service that are having a higher success rate and charging much fairer prices than the veterinarians. They specialize in only one area and are able to progress with better technology than most vets. North Dakota needs to open up the service to them also.

We feel this law needs changing for the benefit of the breeders of North Dakota and for our state to remain on the upper side of new technology as the states around us are.

Sincerely,



***Kevin E. Thompson
Board member of the ND Simmental Assoc.***



David Dockter testimony to 56th Legislative Assembly of North Dakota, committee considering House Bill No. 1294.

Thank you for the opportunity to contribute to the decision in the amendment defining the "Practice of veterinary medicine". My specific contribution to the discussion is to allow the non-surgical embryo transfer procedure on a cow as a non-veterinary practice.

The practice of embryo transfer in cows reacted^{ed} the commercial status by the early 1980's. By 1998, bovine embryo transfer has been used successfully in most all modern countries of the world. Technology advancements have allowed for non-surgical embryo transfer procedures to be successful and economical. Currently most embryos marketed are Direct Transfer embryos. Direct Transfer embryos represent an advancement in embryo transfer technology which makes transferring embryos almost as easy as artificial insemination and promises reasonable costs and convenience to the cattle breeder. Currently, dairy and beef producers can choose from an inventory of literally hundreds of embryos from superior sire and dam matings in many cattle breeds. The Direct Transfer embryos can be stored indefinitely in liquid nitrogen and thawed for implantation in any bovine recipient at the proper stage in her estrous cycle. A producer can choose to use an embryo with higher genetic potential on the low producers in his herd and have high quality offspring from those low producers. This allows for tremendous genetic advancement potential to producers interested in utilizing this technology.

The practice of thawing and implanting Direct Transfer embryo's is easy to adapt for most people with a high level of artificial insemination experience. In 1998, Select Sires marketed nearly 2,000 Direct Transfer embryos. Most of the Direct Transfer embryos were implanted by professional A.I. people who have received additional training in the procedure. The procedure requires no drug therapy, only experience in rectal palpation of the recipient cow.

North Dakota dairy and beef producers deserve the opportunity to utilize this technology. If this practice is defined as a non veterinary procedure, it is more likely to be available to a wider range of North Dakota cattlemen at the most economical cost.

Thank you for your consideration.

MAY 15 1996



MINNESOTA BOARD OF VETERINARY MEDICINE

2700 University Avenue West #102 • St. Paul, MN 55114-1081
(612) 642-0597

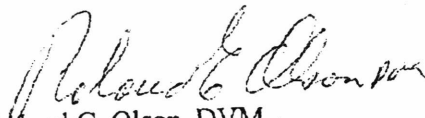
May 13, 1996

Lyle Kruse, General Manager
Minnesota/Select Sires Co-op, Inc.
6601 Gregory Park Road
St. Cloud, MN 56301

Dear Mr. Kruse:

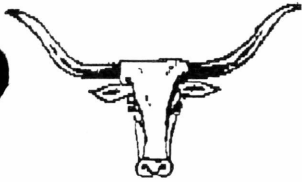
The Board of Veterinary Medicine has determined that non-licensees (i.e., lay personnel) can perform Direct-Transfer embryo transfer procedures without veterinary supervision. Any use of prescription veterinary drugs, however, must be under the supervision of a licensed veterinarian.

Sincerely,


Roland C. Olson, DVM
Executive Director

RCO/dc

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AN EQUAL OPPORTUNITY EMPLOYER



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FAX TRANSMISSION SHEET

SEND TO: Dave Dockett

FAX #: 701-663-1925

FROM: Jenny Stickle

PAGES -- INCLUDING COVER SHEET: 6

COMMENTS: _____

Dave,

- In MT, vets are "by law"

the only ones allowed to preg check

and ultrasound - embryo work can

be done by non-vets. The law (preg/ultrasound)

is not adhered to very strictly. Jenny Stickle

IF TRANSMISSION IS NOT SUCCESSFUL, CALL 442-3420

Forster Red Angus has been in existence since 1967. We have enjoyed 32 years of raising top quality registered seed stock. Our reputation has been built on family values, honesty and the use of new technology. We started an extensive embryo transplant program in 1991. We researched the embryo process and decided to have a certified Vet do our work. After two years of very low conception rate and many thousands of dollars lost, we decided to go with a very reputable embryo technician. We have had great success. We believe that this is due to the fact that the embryo tech. that we use is up on all the newest technology and embryo transplanting is his only enterprise. We have found in our Red Angus business that having cattle as our only enterprise has caused us to fine tune our skills and we believe this is also true in the process of embryo transplanting. We believe it would not be in the best interest to cattlemen to make it possible only to be allowed the choice of using a Vet for embryo transplanting. We ask that you do not make it mandatory to use a certified Vet for embryo transplant but to give people the freedom of choice.

Kenneth Forster

Richardson N.D.

House Bill 1294

Chairman ~~Artes~~
Wanzek

Mr. Chairman & Members of
the Ag Committee. I am
Tom a Dairy Farmer from
south of Mandan. I am
in favor of this bill because
I raise registered Holstein
and us Embryo transplanting
regularly on ~~any~~ operation.
I have been transplanting
frozen embryos in my
own herd for the past 4 years.
It is very easy to learn
how to transfer embryos
if you have AI experience.
The first 4 embryos I
transplanted became pregnant
which demonstrates success
can be achieved without a
vet degree. When this bill
is passed, it would enable
me to sell embryos and
allow myself or an AI
Tech to implant the embryos
for other producers.

CENTRAL DAKOTA GENETICS
GERALD P. KITTO, DVM
MCCLUSKY, ND 58463

An American Embryo Transfer Association certified embryo transfer company.

Outline of my testimony concerning the possibility of allowing lay technicians to implant direct transfer embryos in the state of North Dakota.

Advantages:

- 1) Obtaining the services from someone closer to home.
- 2) Using the natural estrous cycles of recipient cows to implant embryos because of a technician nearby.

Disadvantages:

- 1) The illegal use of prescription drugs by lay people.
- 2) The necessary knowledge and skill it requires to implant embryos versus artificial insemination.
- 3) The risk to the consumer with embryos versus artificial insemination with frozen semen.
- 4) The cost of a frozen embryo versus the cost of frozen semen.
- 5) The lack of accountability for incompetence and/or fraud.
- 6) No liability insurance.

Conclusion:

I have spent twenty-two years in the field of embryo transfer. I would not like to see the quality of the embryo transfer services currently available diluted. I have concerns with allowing just anyone without specific scientific knowledge and training do this procedure for the reasons outlined above.

Respectfully submitted.

G P Kitto, DVM

MEMO

DATE: February 23, 1999

TO: Representatives of North Dakota

FROM: Jami Ceynar

SUBJECT: Recommendation Report

As the law now stands, North Dakota is one of the few states that requires a person to be a veterinarian in order to be an embryo technician. The surrounding states of South Dakota, Montana, and Wyoming do not require that you be a veterinarian. I am currently attending South Dakota State University in Brookings, SD, and have my own registered Red Angus herd. In May 2000 I will graduate with my degree in Animal Science/Business and double minors in Ag Business and Ag Marketing. After receiving this degree, I will pursue my lifelong dream to become an embryo technician.

Observation/Conclusion

The state of North Dakota requires a person to be a veterinarian in order to be an embryo technician. I plan to become an embryo technician after graduating and would like to do so in my home state of North Dakota without the extra stress, time, and added expenses of being a veterinarian. I made a decision to move out of the state, to pursue my dream of becoming a successful embryo technician without also becoming a successful veterinarian. More and more North Dakota's young people are making the decision to move out of the state. From personal experience I have found that veterinarians do not have the time to do embryo work year round and be successful in both fields. Some of the mishaps that I have encountered are as follows: no embryos, embryos frozen wrong causing the embryo to be severed in half, and the loss of three donor cows in a tragic trailer accident during transportation out of state. Very few veterinarians in North Dakota are willing to add the embryo work to their already busy schedules. In order to be a successful embryo technician, you must concentrate on embryo work full time and not on the many other responsibilities of a veterinarian.

Recommended Change

I feel the laws of embryology need to be emancipated. This change would increase our job placement and competition, which in turn would improve the quality of service and make prices much more competitive. Right now the law fences out competition because other states are not limited to veterinarians doing the embryo work. As of now, the law is protecting a few veterinarians and hurting many producers. I feel it is an unnecessary requirement to be a veterinarian to perform embryo transfers.

Discussion

Emancipating the embryology law as it now stands will help create more jobs and keep more of North Dakota's young people from moving out of the state. It would allow Veterinarians and Embryo Technicians to concentrate on the job at hand and to become successful at it.

Good morning, members of the Senate Agriculture Committee. I am Chad Ellingson from St. Anthony, N.D., and I appear before you in support of HB 1294.

I have been employed with 21st Century Genetics, a bovine genetics firm, for the past seven years as a livestock programs consultant. This position has given me the opportunity to travel across the country and work with some of the nation's top beef and dairy producers. All of these producers have achieved their status by using top genetics to advance their herds.

These genetics have been introduced into herds for years through superior sires via artificial insemination. More recently, herds have made greater advancements by not only multiplying the genetics of a superior sire but also by multiplying the genetics of superior dams through embryo transfer.

In most states I travel in, embryo transfer is a convenient procedure, readily available to producers, because the states' laws allow cattlemen to hire the best in the business, highly-trained direct-thaw embryo technicians, even if they do not happen to be licensed veterinarians. This is the case in each of our surrounding states, including Montana, South Dakota, Wyoming, Minnesota and Wisconsin.

For example, at our office headquarters in Shawano, Wisc., we have in place a multi-ovulation embryo transplant program, in which we implant 200 dairy embryos into recipients each year. The embryos are implanted by professional artificial insemination technicians that have extended training in embryo transplant. Our company has decided to use their services, even though we have licensed veterinarians on staff, as the former individuals have the specialized skill of palpation of reproductive organs and have been more successful in this line.

In North Dakota, cattle producers have a difficult time keeping up with the competition in embryo transfer, since only veterinarians are allowed to perform this service and there are not enough of them that have the experience, necessary equipment or desire to do so. By passing this bill and allowing qualified technicians to perform direct-thaw embryo transfer, I believe North Dakota's beef and dairy industry will be able to keep the pace of the rest of the country's progressive cattlemen. If, however, we do not pass this bill, we'll be stifling the progress of North Dakota's beef and dairy industries, two of the state's most revenue-generating industries.

I strongly urge your do-pass recommendation. I would be happy to entertain any questions.



North Dakota Board of Veterinary Medical Examiners

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Executive Secretary

Senate Agriculture Committee, Engrossed House Bill No. 1294, March 19, 1999
John R. Boyce, Executive Secretary, North Dakota Board of Veterinary Medical Examiners

Licensure is a mechanism designed to assure the public that individuals who provide professional services meet certain minimum qualifications and are accountable for their actions. The North Dakota Board of Veterinary Medical Examiners is responsible for regulating the practice of veterinary medicine and veterinary technology in North Dakota. In order to be licensed to practice veterinary medicine in North Dakota, candidates must be graduates of accredited or approved colleges of veterinary medicine. This typically requires between six and eight years of college education (including four years of veterinary school). In addition, candidates must pass two national board examinations and a state board examination. Licensed veterinarians are also required to complete 24 hours of approved continuing education every two years. Veterinary technicians must have at least two years of college-level training, must pass a national licensing examination, and must complete eight hours of continuing education every two years.

The North Dakota Board of Veterinary Medical Examiners would like to share the following concerns about Engrossed House Bill 1294, regarding embryo transfer procedures in cattle. These comments are essentially the same ones we shared with the House Agriculture Committee when this bill was considered there in January.

First, it is preferable from an administrative standpoint to retain a broad definition of the practice of veterinary medicine in the practice act, and then include in a separate section specific exemptions as necessary. This is the way the North Dakota veterinary medical practice act (Chapter 43-29) is constructed. The practice act contains a section dealing with activities that are not considered the practice of veterinary medicine (Section 43-29-13). This section includes an exemption for livestock owners and their employees, as well as exemptions for several other classes of individuals. Engrossed House Bill 1294 makes a specific exception for embryo transfer procedures part of the definition of the practice of veterinary medicine in Section 43-29-01.1. This could be construed to prohibit veterinarians from performing embryo transfer procedures.

Second, the existing veterinary medical practice act already contains a provision allowing non-veterinarians to provide animal health services to the public, as long as they are doing so as employees of a licensed veterinarian and are under the direction and supervision of a veterinarian (Section 43-29-13, paragraph 8). The Board believes that this provision allows a variety of individuals with specialized qualifications and skills to provide needed services to animal owners, while maintaining appropriate accountability through the licensed veterinarian and the Board of Veterinary Medical Examiners. This accountability is, in the opinion of the Board, essential for public protection. If the proposed legislation were to be enacted as written, it would essentially allow persons doing embryo transfer procedures on cattle to operate free of any oversight to assure their competence or accountability. The Board does not believe that this action would be in the best interest of the citizens of North Dakota.

Thank you for this opportunity to address this legislation. I would welcome any questions you may have.