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October 5, 2012

Tammy Wallace  
Executive Director  
Alabama State Board of Veterinary Medical Examiners  
8 Commerce Street, Suite 910  
Montgomery, AL 36130-5330

**RE: HSVMA Comments on Alabama State Board of Veterinary Medical Examiners Rule No. 930-X-1-.39 Exercise of Independent Professional Judgment by Veterinarians; Prohibited Business Arrangements or Relationships**

Dear Ms. Wallace,

I am writing on behalf of the Humane Society Veterinary Medical Association (HSVMA), a national organization of more than 5,000 veterinary professionals, opposing Alabama State Board of Veterinary Medical Examiners (ASBVME) proposed new administrative rule, Rule No. 930-X-1-.39. This rule would prohibit licensed veterinarians from working for non-veterinarian owned organizations, such as nonprofit spay/neuter clinics for dogs and cats.

For over a decade now, spay/neuter programs have been a recognized practice area within veterinary medicine. They have been designed to facilitate access to spay/neuter services in an effort to prevent reproduction and reduce subsequent overpopulation and to decrease the number of animals entering animal shelters. There are a wide variety of spay/neuter programs that operate in all regions of the country: stationary clinics, MASH-style clinics, programs that use volunteer veterinarians and shuttle services, mobile clinics, voucher programs, and partnerships with veterinary schools and veterinary technical schools. These programs are commonly run by nonprofit entities with a diverse range of professional backgrounds on their board of directors. By employing licensed veterinarians to perform spay/neuter services these nonprofit organizations are able to help reduce the overpopulation of dogs and cats in their area.

Additionally important to recognize is that subsidized spay/neuter is often the entry point to veterinary care for many pet owners. The Humane Society of the United States' report, titled "Pets for Life – A New Community Understanding"<sup>1</sup> shows that 53% of the owners of unaltered pets surveyed had never seen a veterinarian before. These owners surveyed are of a demographic which lacks access to veterinary care. With

many barriers in place, wellness care and veterinary treatment for their pets is out of reach—but when subsidized by the humane movement as is done in the nonprofit spay/neuter arena, barriers have been proven to be surmountable and sterilization rates and general pet wellness care have increased. Many animals are vaccinated during their sterilization procedures, and many pet owners who never would have otherwise are thereby introduced to the value of veterinary medicine for their pets. One in five Alabama households live below the poverty line (one in six being the national average), and Alabama is the nation's third poorest state. Given that two-thirds of American families have pets, and lower income households are likely to have multi-pet households, now is not the time to further limit access to veterinary care.

If the ASVBME Board of Directors adopts this new rule, current nonprofit spay/neuter programs in the state of Alabama would have to discontinue operations and it would prevent the much needed development of more of them. The impact of this on Alabama's animal shelters could be devastating—increasing the intake of the number of animals and placing an additional burden on already stretched to the limit resources. A perfect example of this is what happened in Limestone County. Limestone County Animal Control picked up 946 dogs and 569 cats in 2009. In 2010, the same year the North Alabama Spay/Neuter Clinic opened, the number dropped to 740 dogs and 399 cats. In 2011, when the clinic was closed for nine months, the numbers increased again to 873 dogs and 363 cats. Ultimately, the subsequent increase in the intake of the number of animals by Alabama's animal shelters means that more than the already estimated 100,000 to 200,000 animals euthanized in facilities across the state every year would be killed simply because there is not enough room for them—a true tragedy.

Requiring spay/neuter programs to meet standards of care is of utmost importance. As a matter of fact, the Association of Shelter Veterinarians convened a task force of veterinarians to develop veterinary medical care guidelines for spay-neuter programs in an effort to ensure a consistent, high-quality level of care. Their findings were published in the *Journal of the American Veterinary Medical Association* in 2008.<sup>2</sup> In an article about the Alabama debate on nonprofit spay/neuter clinics that appeared in the American Animal Hospital Association's magazine earlier this year, Dr. Robert Pitman, ASBVME President, is quoted as stating, "There is a body of evidence that indicates standard of care is not being met." Yet, this body of evidence has not been presented to the public. This means that the evidence does not exist or the ASBVME has not acted on evidence that is in their possession. Either scenario is unacceptable. On the other hand, however, there is an abundance of evidence to support that high-volume practices can maintain high standards of care.<sup>3</sup>

Nonprofit establishments have been at the forefront of advancing and improving small animal veterinary medicine for decades. For example, the premier training site for those who wished to be small animal practitioners in the 1950s and 1960s was the Massachusetts SPCA's Angell Memorial Hospital, where graduating veterinarians would go for no pay to learn veterinary medicine. Another example, the Animal Medical Center, is currently governed by a board of 29 people, at least three quarters of whom are not veterinarians and its new CEO (appointed in 2010) is a non-veterinarian. In other words, landmark veterinary institutions in the US have grown, prospered, and contributed very significantly to the advancement of veterinary care without being governed by a veterinarian.

It is estimated that nonprofit animal organizations (not including the world famous Animal Medical Center and Angell Memorial Hospital) provide no more than 1-2% of veterinary services across the USA. Since private practitioners began offering significantly more spay/neuter operations in the 1970s, private practices have thrived and now perform around 90% of all sterilizations. According to the

American Veterinary Medical Association, total veterinary practice income in 2011 was around \$13.6 billion, of which approximately 75% is small animal practice. By contrast, using data obtained from Guidestar, shelters and animal rescue operations across the USA had total income of \$2.4 billion of which around \$800 million came from adoption fees and other services. Veterinary fees are estimated to be no more than 25% of that total, or around \$200 million. Therefore, nonprofit organizations account for only about 2% of all veterinary service in the United States, most of which is directed specifically to under-served communities where pets have never before seen a veterinarian.

When asked about the ASBVME board's purpose in an article by *DVM Magazine*, ASBVME Vice President William Ronald Welch is quoted as saying, "We're there to protect the public. We protect the public by regulating the profession. Ownership ensures that the public knows that [a clinic's] veterinarian is regulated." But this certainty of regulation already exists by the simple fact that the veterinarian is licensed in the state of Alabama. To require ownership of the clinic by a veterinarian in addition to a veterinary license implies otherwise.

In addition, the requirement of ownership of a clinic by a licensed veterinarian is not the national norm. According to SpayUSA,<sup>4</sup> at least 33 states have nonprofit spay/neuter clinics not owned by a veterinarian. Therefore, the nation as a whole does not have this ownership requirement and yet hundreds of high-quality nonprofit spay/neuter clinics are able to perform thousands of valuable sterilization procedures every year and meet or exceed their state's standard of care.

The millions of animals who are euthanized every year in our nation's animal shelters is a tragedy of epidemic proportions. As veterinarians, we should be the ones taking the lead to curb this heartbreak for the betterment of the patients that we serve. We ask the ASBVME to not adopt this new rule and instead work to supporting efforts to reduce the overpopulation of dogs and cats, increasing under-served pet owners' access to veterinary care, and protecting public health with rabies vaccination of the 40,000 plus animals who are sterilized every year at nonprofit spay/neuter clinics in the state of Alabama.

Sincerely,



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<sup>1</sup> The Humane Society of the United States Pets for Life – A New Community Understanding. [http://www.humanesociety.org/assets/pdfs/pets/pfl\\_report\\_1\\_12.pdf](http://www.humanesociety.org/assets/pdfs/pets/pfl_report_1_12.pdf) (October 2, 2012).

<sup>2</sup> Association of Shelter Veterinarians' Spay-Neuter Task Force. [The Association of Shelter Veterinarians veterinary medical care guidelines for spay-neuter programs](#). *Journal of the American Veterinary Medical Association* 2008;233(1):74-86.

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<sup>3</sup> White S. "The Case for Low-cost, High-quality, High-volume Spay and Neuter," *HSVMA Newsletter*, August 2011, <[http://www.hsvma.org/case\\_for\\_low\\_cost\\_high\\_quality\\_high\\_volume\\_spay\\_neuter\\_081111](http://www.hsvma.org/case_for_low_cost_high_quality_high_volume_spay_neuter_081111)> (October 2, 2012).

<sup>4</sup> SpayUSA. [Located a Clinic](#). < <http://www.spayusa.org/search.php> > (September 26, 2012).