

Veterinary Midlevel Position (MLP)

Creating a veterinary midlevel position (MLP) is neither a sufficiently targeted nor practical approach to address existing workforce issues. More expedient and sustainable solutions are available.

The past few years have been extremely difficult for the veterinary profession. Hiring challenges are real, but some of the numbers being circulated about the future workforce appear to overestimate demand and underestimate supply. These numbers, which are being used to support claims of a future shortage of companion animal veterinarians, are also being used to drive proposed long-term changes—like the MLP—that will negatively reverberate across the profession; fail to effectively target solutions that are unique for each segment where shortages are evident (e.g., food animal, equine, academia, emergency practices, specialties, public health); and pose threats to animal health and welfare, food safety, and public health. The AVMA opposes legislative initiatives that would authorize a MLP or other nonveterinarian to diagnose, prognose, develop treatment plans, prescribe, and/or perform surgery, due to the threat from such legislation to patient health and safety, the safety of animal products, and public health, as described below.

Not needed. Descriptions of a veterinary MLP overlap the training and responsibilities of veterinarians, veterinary technicians, veterinary technologists, and veterinary technician specialists—there is no gap to be filled. Diagnosis, prognosis, developing treatment plans, prescribing, and surgery are the domains of the veterinarian. Veterinarians receive an extensive education that prepares them to lead veterinary teams and make medical decisions. Veterinary technicians, veterinary technologists, and veterinary technician specialists support and complement the veterinarian by performing critical technical tasks. Many tasks can be delegated by the veterinarian to veterinary technicians, veterinary technologists, veterinary technician specialists, and other members of the practice team commensurate with their education and experience.

Not safe. An accredited educational program, national test, and regulatory structure would be needed to ensure a MLP would practice safely and effectively, and these are not available. All are necessary for licensing a competent professional, thereby protecting patient health and welfare and public interests. Furthermore, the duties and responsibilities necessary to build a curriculum and develop accreditation standards need to be approached as part of a national conversation, rather than by individual programs or small groups of proponents.

Not the same as a PA or APRN. Analogies are drawn to physician's assistants (PAs) and advanced practice registered nurses (APRNs); however, human medicine and veterinary medicine are NOT the same. In addition to individual patients, veterinarians are responsible for food safety and public health. Accordingly, there are differences in how the activities of veterinary professionals are regulated (e.g., prescribing, disease control, animal movement). Furthermore, proposed training plans for a veterinary MLP are not comparable to the training that a PA or APRN receives. Results in human healthcare systems are mixed; it is not a given that adding a MLP will improve quality of care, efficiency, lower cost, or increase access to care.

Not practical (and costly). To make a veterinary MLP functional would require legislative and regulatory changes in all 50 states (state veterinary practice acts, state pharmacy acts) and additional jurisdictions. All 48 states that have a VCPR defined in state statute or regulation tie its establishment to the veterinarian. A veterinary MLP cannot establish a VCPR that meets requirements under current federal law. A veterinary MLP would not be able to issue certificates of veterinary inspection (health certificates), nor perform required disease program testing, due to state and federal requirements. In addition, a veterinary MLP is prohibited by federal law from prescribing either on label or extralabel. Congress must act to change this and, because of concern about public health and robust pharmaceutical oversight (e.g., antibiotics, opioids), support appears unlikely. Attempting to achieve such changes would take years and be costly.

Liability. Proponents want to make the supervising veterinarian legally responsible for all of the acts and omissions of a MLP. Veterinary malpractice policies may not cover such a supervising veterinarian for this if they are not the employer of the MLP. Proponents, often not veterinarians, are asking veterinarians to shoulder all the risk.

Sustainability questions raise animal health and welfare, public health, and animal-related business concerns. In some areas, where service demand is barely sufficient to support a veterinary practice, integrating a MLP could make that no longer sustainable. In these cases, a veterinarian would not be available to diagnose and manage more complex illnesses and injuries, with corresponding negative impacts on animal health and welfare. In the case of zoonotic (e.g., rabies, leptospirosis) or high-consequence diseases (e.g., HPAI, FMD), public health and the economic health of those producing or receiving animal products could also be impacted. For the latter, economic damages could range into the billions of dollars.

May exacerbate veterinary technician, veterinary technologist, veterinary technician specialist, and veterinary assistant shortages. Introducing a MLP may make the current shortage of veterinary technicians and veterinary assistants worse, because a MLP will also need their services.

Better solutions, right now. There are things that can be done right now that will positively impact workforce efficiency in the short and long term. These include fully leveraging practice staff, especially veterinary technicians, veterinary technologists, and veterinary technician specialists; improving workplace culture to support retention and prevent attrition; and taking advantage of opportunities to integrate better processes and technology.

Public does not support. Results of the AVMA's 2023 National Pet Owner Survey indicate that 79% of pet owners want a licensed veterinarian, not a midlevel employee, to oversee their pet's care. Pet owners understand the importance of having a licensed veterinarian in charge of their pet's health and welfare.