



March 6, 2025

Senator Angelique Ashby
Chair, Senate Business, Professions and Economic Development Committee
1021 O Street, Suite 8630
Sacramento, CA 95814

RE: SB 687 (Ochoa Bogh)
OPPOSE

Dear Senator Ashby,

Collectively representing more than 120,000 veterinary medical professionals throughout the State of California and across the country, the California Veterinary Medical Association (CVMA), Southern California Veterinary Medical Association (SCVMA), Sacramento Valley Veterinary Medical Association (SVVMA), and American Veterinary Medical Association (AVMA) are strongly opposed to SB 687, which would allow chiropractors to expand their practice to work on animals without veterinary supervision.

Regarding this bill, we ask for your consideration of the following points:

A. Animal Musculoskeletal Manipulation (MSM) is the practice of veterinary medicine, and should be performed by or under the direct supervision of veterinarians

Over three decades ago, the California Veterinary Medical Board (CVMB) promulgated California Code of Regulations Title 16, section 2038 (hereinafter, "Section 2038"). This regulation has been successfully forging collaborative working relationships between chiropractors and veterinarians for over 30 years. It defines MSM as "the system of application of mechanical forces applied manually through the hands or through any mechanical device to enhance physical performance, prevent, cure, or relieve impaired or altered function of related components of the musculoskeletal system of animals." Section 2038 further states that "MSM when performed upon animals constitutes the practice of veterinary medicine," placing it squarely within the practice of veterinary medicine as defined in California Business and Professions Code section 4826(c).

The rulemaking process that resulted in Section 2038 was open and fair, and welcomed all stakeholders to present information to help the CVMB craft a regulation that best served the interests of animals and consumers alike. The resulting regulation clearly delineated the responsibilities of both the supervising veterinarian and the chiropractor in delivering MSM services to animal patients and continues to safeguard animal welfare by providing a straightforward roadmap for veterinarians and chiropractors to follow relative to the use of MSM on animals. Distilled to its essence, Section 2038 permits animal-directed MSM to be performed by (1) veterinarians, and (2) licensed California chiropractors working under the direct supervision of a veterinarian.

B. Chiropractors have no animal-related training in their licensing curricula

SB 687 would override the above-described clinical framework by allowing chiropractors to perform MSM¹ “without supervision by a licensed veterinarian.” Allowing chiropractors to work on animals without veterinary supervision poses a threat to both animal welfare and consumer protection for the following reasons:

- 1) *Chiropractors learn only about human beings in their core education.* Vast anatomic, physiological, and behavioral differences exist between human beings and animals. For that matter, significant differences exist between animal species. In addition, animals obviously cannot speak and will instinctively hide signs of pain. Not only is animal-specific instruction and training absent in a chiropractor’s education, but also the training in *human* anatomy and physiology that chiropractors receive *does not* safely permit chiropractors to practice on animals without veterinary supervision.
- 2) *Chiropractors have no formal training or aptitude testing to address emergency conditions in animals.* Currently, if a human suffers a health emergency on a chiropractor’s premises, the chiropractor can call 911 and have paramedics promptly arrive. Because there is no 911 equivalent for animals, animals experiencing a health crisis resulting from or occurring during chiropractic treatment will not receive emergency care if treated at a facility that does not have veterinary licensees present. In that regard, veterinary practices are required by law to be equipped with emergency medical equipment and drugs to treat emergencies that could arise from procedures being performed on the premises.
- 3) *Many complex animal conditions that mimic a chiropractic issue can be more acute medical problems; chiropractors are not trained to identify those conditions.* When an animal limps, is stiff, sore, or has decreased ability or desire to move, many unknowing pet owners will instinctively seek a chiropractor to address the issues. Unfortunately, there are hundreds of medical conditions in animals that can mimic chiropractic issues. To make matters worse, many of them have an insidious onset, making them difficult to identify early on when intervention is most effective. A mere certification program in the absence of an animal-specific core curriculum (discussed further in the next section) cannot adequately educate chiropractors on all of these conditions across all animal species and thus would subject animals to a delay in appropriate treatment, prolonged suffering, and severe adverse health effects from not having their medical condition properly identified and treated. In addition, consumers will spend more money on a treatment that is potentially tangential to their animal’s core issue. Only veterinarians possess the level of education and training needed to diagnose and treat these conditions, yet SB 687 paradoxically permits chiropractors to work on animals

¹ MSM is denoted in SB 687 as “animal chiropractic.”

without veterinary supervision, removing veterinarians entirely from what is legally defined as veterinary care.

C. Certification is inadequate to permit unsupervised veterinary practice

Currently, there are approximately eight certification programs in the United States that offer animal-centric training to chiropractors and do so via online self-study and/or a few weekend classes (except for a couple of programs that are live/in-person.) Because the core education of chiropractors is focused on a very specific facet of human medicine, the certifications offered in animal chiropractic do not give chiropractors the necessary education or experience needed to safely manage animal patients without veterinary supervision. Among the glaring omissions resident in these certification programs are:

- No education in multiple species (programs focus on horse and dog models)
- No minimum requirement for live in-person education (even though MSM is the very definition of “hands-on” practice)
- No practice restriction for those who perform poorly in the course
- No continuing education requirement
- No obligation to meet ongoing minimum standards of care\

D. SB 687 would allow chiropractors to practice on animals without veterinary supervision or involvement of any kind

California’s Veterinary Medicine Practice Act—specifically, 16 CCR section 2034—defines two types of veterinary supervision: “Direct” and “indirect.” “Direct” supervision means that the veterinarian has established a Veterinarian-Client-Patient Relationship (VCPR) through examination of the animal and communication with the client, and is present on the premises while veterinary staff perform a treatment. “Indirect” supervision means that the same VCPR is established, but the veterinarian is not present on the premises while veterinary staff perform a treatment under direct veterinarian treatment orders. For example, under “indirect supervision,” a registered veterinary technician (RVT) could be instructed by a veterinarian to give a pill to an animal every 4 hours if the veterinarian had to be offsite during that time.

In contrast to this fundamental supervisory framework, not only does SB 687 fail to provide for any type of veterinary supervision, but it also *explicitly authorizes* chiropractors to practice a defined portion of veterinary medicine without *any* participation by a veterinarian. Put simply, SB 687 would allow a chiropractor to “hang out their own shingle” and perform work on an animal without any veterinarian having examined the animal beforehand, without any veterinarian being aware of the chiropractor’s treatment, and without any veterinarian being present during the appointment. Under that rubric, unsuspecting consumers will wrongly assume that all protections will be in place at a chiropractic facility to provide for the safety and proper veterinary medical care of the animal. Such will not be the case.

E. The veterinary profession provides chiropractic services and existing California law provides a pathway for chiropractors to do the same

Hundreds of California veterinarians possess animal chiropractic certification, which—when coupled with their Doctorate in Veterinary Medicine—provides consumers with comprehensive chiropractic care in addition to traditional veterinary services. Moreover, and as mentioned at the outset of this letter, Section 2038 permits chiropractors to also work on animals provided that they do so under veterinary supervision. In the case of a registered veterinary premises, the veterinarian must be in the building when the chiropractor is seeing patients. In the case of a “range setting,” the veterinarian must be in the general vicinity when the chiropractor is seeing patients. These scenarios provide for patient safety and consumer supervision that adequately protects California’s consumers and animals. Indeed, many California

veterinarians and chiropractors work effectively under the current collaborative supervision model (16CCR section 2038,) ensuring the delivery of competently provided and sufficiently supervised MSM services.

F. SB 687 contains numerous omissions that jeopardize patient safety

The attached table identifies significant issues that need to be addressed in SB 687 if it intends to make the unprecedented leap of human health care practitioners into veterinary medicine.

Thank you for your consideration.



Jennifer Hawkins, DVM
CVMA President



Alyssa Shelby, DVM
SVVMA President



Adam Gerstein, DVM
SCVMA President



Janet Donlin, DVM
AVMA Executive Vice President



Laura Halsey, DVM
SDCVMA President

cc: Senator Rosilicie Ochoa Bogh
Assembly Business and Professions Committee
Eddie Franco, Consultant, Assembly Business and Professions Committee
Bill Lewis, Assembly Republican Caucus

SB 687 Technical Issues

Section	Issue	Comment
1071(b)(2)	The section does not specify an adequate amount of training.	<p>Chiropractic courses certified by the bodies named in Section 1070(c) provide instruction on the dog and the horse. There are hundreds of species of animals that are not taught in the courses.</p> <p>This section should be amended to specify that an animal chiropractic practitioner may only provide services to types of animals for which they have received training <i>in a training program specified in 1070(c)</i>.</p>
1071(b)(3)	This section indicates that people can bring their animals to a chiropractor without any veterinarian supervision.	<p>This subsection should be amended to require that an animal chiropractic practitioner only provide services to an animal patient under veterinarian supervision. There are multiple examples of complex medical ailments in animals that may present as a chiropractic issue but in fact are other more serious conditions. A certification program does not adequately educate chiropractors on this plethora of illnesses and disease conditions. Therefore, veterinarian supervision is needed for patient and consumer safety.</p>
1071(c)(1)	As worded, this subsection indicates that a “chiropractor” can assume some type of responsibility for the animal, just not “primary” responsibility.	<p>The statement needs to be revised to indicate that the <i>animal chiropractic practitioner</i> (not chiropractor because this section applies to an animal chiropractic practitioner- as defined) MAY ONLY provide chiropractic care on the animal patient.</p>
1071(c)(2)	This subsection requires the chiropractor to declare “that animal chiropractic is not intended to replace traditional veterinary care and is considered an alternative therapy to be used concurrently and in conjunction with traditional veterinary care by a licensed veterinarian.”	<p>If chiropractors truly believe that they are not practicing veterinary medicine and that what they are doing is actually chiropractic practice, then this requirement should be applied to all chiropractors working on animals or human beings. In other words, chiropractors should have to provide a disclosure to human patients that “chiropractic is not intended to replace traditional medical care and is considered an alternative therapy to be used concurrently and in conjunction with traditional health care by a licensed physician.”</p>
1071(c)(3)	The question posed in this subsection does not add animal or consumer protection.	<p>Unless a requirement or stipulation is added for what the animal chiropractic practitioner is supposed to do when the animal patient <i>has not been</i> seen by a veterinarian in the past 12 months, then the</p>

		statement is moot. Also, if section 1071(b)(3) is amended to reflect the CVMA's recommendations, this section is moot.
1071(c)(4)	This subsection requires the animal chiropractic practitioner to ask the client to convey a diagnosis from a veterinarian.	In human medicine, would it be in the best interest of patient and consumer protection to require the patient to be a messenger/go-between when two licensed health care providers are communicating about such an important topic? This again dovetails with the previously stated need for supervision in this bill. Again, if Section 1071(b)(3) is amended to reflect the CVMA's recommendations, this subsection is not needed.
1071(g)(2)	This subsection vests narrow authority by the Board of Chiropractic Examiners to adopt regulations. Part (A) refers to standards of "medicine."	By limiting the Board's authority to regulations that pertain to "standards of medicine and care" and to the naming of accrediting bodies for animal chiropractic certification, this subdivision handcuffs the Board of Chiropractic Examiners' ability to promulgate other relevant regulations. Accordingly, subdivisions (g)(2)(A) and (g)(2)(B) need to be removed because the Board of Chiropractic Examiners needs the ability to promulgate other potential regulations.
1071(g)(3)	This subsection tries to create a (weak) bridge between the Board of Chiropractic and the Veterinary Medical Board.	There is no such thing as an "informal" vote on a regulatory board. In addition, this subdivision is superfluous if the Board of Chiropractic Examiners is allowed to proceed as it wishes regardless of what the Veterinary Medical Board says.
	Chiropractors have X-ray machines and routinely take and read radiographs as part of chiropractic practice.	The certification courses do not provide training on reading radiographs and diagnosing musculoskeletal conditions through radiography. This bill does not prohibit a chiropractor from taking and interpreting radiographs of an animal patient. California law prohibits the physical restraint of an animal patient by a human being during the taking of radiographs. Veterinary practices commonly utilize chemical restraint (tranquilization/sedation) and reversal agents to take radiographs of animal patients in compliance with California's "no-hold" law. But animal chiropractic practitioners are not permitted to possess or administer such drugs and even if they were, they have no training to do so.

		A specific statement needs to be added to prohibit the taking or interpreting of radiographs by an animal chiropractic practitioner.
	This bill provides no rule on the comingling of animal and human patients in a chiropractic office.	Animal chiropractors currently see animal patients in the same location that they see human patients, threatening potential infection or injury to both.
	This bill provides no rule on the patient confidentiality requirements for an animal chiropractic practitioner seeing an animal patient.	Animal chiropractors treat patients in the waiting room at their offices, which is inconsistent with the requirements that veterinarians themselves must meet under California Business and Professions Code section 4857. Therefore, this bill on its face is unfair to animals and animal owners by not providing a specification for client confidentiality. Also, absent a statement in the bill requiring animal chiropractic practitioners to follow the same requirements as are set forth in Section 4857, veterinarians providing the same services will be required to do more by law than animal chiropractic practitioners.
	The bill makes no provision for emergency veterinary care in the event of an adverse occurrence during a chiropractic visit.	Chiropractors have no training on veterinary emergency care. Furthermore, they have no access to veterinary drugs and no knowledge on how to use or administer those drugs. If this bill is altered to reflect the recommendations of the CVMA to Section 1071(b)(3), then this is not as much of an issue. However, without the incorporation of veterinary supervision, animals and consumers will not have the same level of safety that is afforded to them when they receive care in a registered veterinary premises.