

appeared to be directly related to their training. Seventy-five percent performed some laboratory procedures including all the formally trained ones. One third of these performed only in this capacity in the dairy practice.

Most technicians administered medications, drew blood samples for the lab, assisted in major abdominal surgery, administered anesthetics, assisted on O.B. procedures, took milk samples and assisted with X-ray procedures.

Some technicians did dehorning, vaccinations, trimming of feet, artificial insemination and infused uteruses.

Only one technician did any castrations and none were used for pregnancy palpation, wound suturing, milking machine analysis or taking feed samples.

Most of these procedures were done with the veterinarian present and technicians were rarely used for emergency treatments.

The salary scale for two-year graduates was from \$6250 and an apartment to \$10,000 a year, which averages out to about \$145 to \$185 per week. The laymen that were trained by the veterinarian had a lower pay scale—from \$100 per week to a high of \$160. Sixty percent of the doctors returning the survey did not use laymen to help them and two-thirds of these had no intention of ever hiring any help. They gave three basic reasons for this attitude: (1) did not feel a need for help; (2) specialized practice, i.e., sterility, military, university; and (3) declining practice and economic worries. One man said he just liked to practice alone.

As to the various states, New York is trying to change their Practice Act but is still having problems with the legislature: Vermont is studying the problem with regard to changing their Practice Act.

Delphi is the only school that can be accredited and hopefully will be done in the near future. The University of Maine has a good program for small animals and with some change of program may become accredited in the future.

District II

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District II of the American Association of Bovine Practitioners in the Mid-Atlantic area of the country covers the states of New Jersey, Delaware, Pennsylvania, District of Columbia, Maryland and Virginia. We are not a heavy bovine area and do not use animal technicians in cattle practice to a great extent. District II of this Association has almost 150 members.

In the early fall, I sent out a questionnaire to our members. The questions were as follows:

1. Do you use animal technicians?
2. If not, why?
3. In what areas?
4. What restrictions should be placed on them?
5. How could technicians be used to your best advantage?

There was also room for comments. The questionnaire was to help me in organizing the many different impressions my colleagues have on animal technicians. Approximately 50% responded, many with good ideas.

About 20% of those responding employed animal technicians. I concluded from the responses, however, that a good portion of these technicians were being used wholly for the small animal portion of the practices. I also found that most veterinarians who use animal technicians also trained them. Less than 20% of the technicians had formal training. This training varied from a few months to two years. Salaries were also diverse, ranging from \$75 to \$200 per week. This averages from \$3,900 to \$10,000 each year.

The areas of work where animal technicians are engaged in bovine medicine are numerous. The following is a list where they are currently being used, and includes some suggestions as to the technician's proposed future use.

1. Stocking and driving vehicles
2. Drug inventories
3. Animal restraint
4. Uterine infusions
5. Artificial inseminating
6. Hoof trimming
7. Castrations
8. Dehorning
9. Mixing and administering vaccines
10. Dressing wounds
11. Radiology - exposure and developing
12. Office laboratory procedures
13. Milk sampling and plating
14. Preparing medicines
15. Regulatory testing
16. Keeping records
17. Surgical assistance
18. Preparing surgical packs.

This list basically should be used as a guideline; in other words, limit the animal technician to the point where he does not have to make decisions.

State and federal veterinarians utilize animal technicians to a great extent. They refer to them as livestock inspectors and orient their duties toward regulatory work.

The reason given by those responding as to why they did not use animal technicians in bovine practice were many and varied. Some felt their practice would not support a technician either because of approaching retirement or because their practice was newly established. A few of the veterinarians felt they could practice better as individuals. Most of those responding felt their practice could not utilize a technician's complete capabilities on a full-time

basis. There are also specialty practices such as reproduction or consultation where there are few advantages to having a technician. Other practices did not do routine procedures on a large enough scale to warrant having a technician. There were even a few responses from veterinarians who had never heard of animal technicians.

Many veterinarians have had previous experiences with technicians that have left the doctors with negative or embittered feelings toward them. For example, an individual works for a veterinarian for five or ten years. During this time he learns much concerning diagnosis and treatment. He then leaves his employment and starts artificial insemination or driving a drug truck. Now he is in a perfect position to quote, practice unquote veterinary medicine as many have in the past and still continue to do. Once proper steps are taken to regulate the technicians' responsibilities, the veterinary profession will no longer be subjected to the charlatans produced through lack of restraint on their future business ventures. How is one going to stop this?

Most practice acts are not strong enough for prosecution and in many areas it is up to the veterinarian to file charges and furnish evidence. Veterinarians are not policemen and are placed in the delicate position of relying on public empathy for the success of their practice.

The question of client acceptance is one of extreme importance. In large animal practice all work is done in the open, not behind closed doors as it is in the small animal practice. If you are paying a veterinarian to do a job he should do it, not the paramedical individual. If the paramedic can do it, so can the owner.

The question of restrictions and regulations governing a technician is most puzzling and controversial. Who should decide: the individual, the local practice acts, or the AVMA Committee on Technicians? The questions still remain questions.

The AVMA has set up specific standards thus encouraging the local Associations to tighten their practice acts and encourage proper utilization of technicians. Several of our states have already included the licensing or registration of technicians into their practice acts. There are considerable questions as to whether to license or register - one of legality. While on the idea of registration, I feel possibly it would be a good idea for state boards to hire an agency or individual for investigation and prosecution of violations. This would get the responsibility away from practitioners.

The use of animal technicians to the veterinarian's best advantage can be very broad. Basically, they should be used to relieve the veterinarian of routine chores and enable him to spend more time in diagnostic areas, surgery, and other professional areas. Hopefully, this would include more time off.

The subject of animal technicians has either been talked into the ground or simply avoided, but the many questions we face concerning animal

technicians must be answered, and quickly if we are to maintain the dignity of our profession and hold the respect of our clientele.

I personally would hope that with your discussion and help, we could aid the states toward a solution of this modern area of practice.

District III

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This has been a real interesting discussion. I don't think that I could become involved in anything that requires as much discussion as it is a political issue not only in the veterinary profession, but also for the general public. I had 53 answers to the questionnaire that was mailed. Out of these, 24 said they were using animal technicians and 29 said they were not. On the question, "Would you use them in the future?," 22 said no, and six said they were thinking about it. I'm hoping these answers give a pretty good representation of the population in District III. The answers came back all the way from Florida. There were probably more comments from my district than any other region about why they would not consider using animal technicians. Of the 24 that said they were using them, 22 said they were trained by the practitioner. I had one two-year trained animal technician and one four-year trained animal technician from North Carolina where they already have an effective school. North Carolina has the only effective school in District III that I know of, although there are other students in District III. I know we have one in Mississippi. Some other states have them or are in the process of getting them. Most of the people in my district are using animal technicians in a small animal or equine practice rather than food animal. Of all the reasons given on how to use animal technicians in your practice, every item that we have was mentioned except one. That was uterine conditions in cows. No one said they use animal technicians to infuse cattle. One of the things that was interesting also was the answer I received to the question, "Does the animal technician perform the above procedures in your presence?" Forty percent of the people said they did over 10% of the time, 60% said they did less than 10% of the time. Second point, several of the people said they did not use the technician for laboratory procedures. Seventy-five percent of the people in my district said they did not use their technicians for emergency surgery. According to what is usual in the southeastern United States, the salary paid ranged from \$2 an hour up to \$11,000 a year. I would like to mention some of the comments: Most of our practitioners who used animal technicians used them extensively in their practice but did not allow them to diagnose, start medication, or perform surgery of any type. This is something that I think each of you agree