## In the Matter of the Petition for Reinstatement: AMANDEEP SINGH

### VETERINARY MEDICAL BOARD CASE NO. AV 2015 26

#### **Attorney General's Exhibits**

ATTORNEY GENERAL'S EXHIBIT NO.	DOCUMENT	MARKED	ADMIT
1	Notice of Hearing		
2	<b>License History Certification</b>		
3	Petition for Reinstatement		
4	Documents in Support of Petition for Reinstatement		
5	Decision and Order, Case No. AV 2015 26, OAH No. 2016050594, Including the Following:  > Order Denying Petition for Reconsideration > Order Granting 10-Day Stay of Execution > Decision and Order > Proposed Decision > Second Amended Accusation		
6	Citation No. 4602022000254		

## EXHIBIT 1

## DEPARTMENT OF CONSUMER AFFAIRS • VETERINARY MEDICAL BOARD 1747 North Market Blvd., Suite 230, Sacramento, CA 95834-2987 P (916) 515-5520 | Toll-Free (866) 229-6849 | www.vmb.ca.gov



#### VIA ELECTRONIC MAIL, CERTIFIED MAIL AND REGULAR MAIL

April 1, 2022

Amandeep Singh c/o Grantline Vet

Bonnie Lutz c/o Klinedinst

RE: HEARING NOTICE OAH Case No. TBD

Petition for Reinstatement or Modification of Penalty - Amandeep Singh

Dear Dr. Singh:

You are hereby notified that a hearing will be held before the Veterinary Medical Board, Department of Consumer Affairs:

Date: Thursday, April 21, 2022 Time: 1:00 PM Pacific Time

**Location: Department of Consumer Affairs** 

Hearing Room 1625 N. Market Blvd Sacramento, CA 95834

Alternatively, in lieu of attending in-person at this hearing in the Sacramento office, you may attend and participate virtually via Webex:

#### **Event address:**

https://dca-meetings.webex.com/dca-meetings/j.php?MTID=m23bfd762f779b6b8a46807b2191203dc

Event number: 2484 349 4111 Event password: VMB04212022

Phone audio conference: (415) 655-0001 Access code: 2484 349 4111 The hearing will be conducted before the Veterinary Medical Board, Department of Consumer Affairs and an administrative law judge of the Office of Administrative Hearings, who will preside over the Petition for Reinstatement or Modification of Penalty.

You may be present at the hearing. You have the right to be represented by an attorney at your own expense. You are not entitled to the appointment of an attorney to represent you at public expense. You are entitled to represent yourself without legal counsel. You may present any relevant evidence and will be given full opportunity to cross-examine all witnesses testifying against you. You are entitled to the issuance of subpoenas to compel the attendance of witnesses and the production of books, documents, or other things by applying to:

Office of Administrative Hearings Attn: General Jurisdiction 2349 Gateway Oaks, Suite 200 Sacramento CA 95833

**INTREPRETER:** Pursuant to section 11435.20 of the Government Code, the hearing shall be conducted in English language. If a party or party's witness does not proficiently speak or understand the English language and before commencement of the hearing requests language assistance, an agency subject to the language assistance requirement in section 11435.15 of the Government Code shall provide a certified interpreter or an interpreter approved by the administrative law judge conducting the proceedings. The cost of providing the interpreter shall be paid by the agency having jurisdiction over the matter if the administrative law judge or hearing officer so directs, otherwise by the party for whom the interpreter is provided. If you or a witness requires the assistance of an interpreter, ample advance notice of this fact should be given to the Office of Administrative Hearings so that appropriate arrangements can be made.

**CONTINUANCES:** Under section 11524 of the Government Code, the agency may grant a continuance, but when an administrative law judge of the Office of Administrative Hearings has been assigned to the hearing, no continuance may be granted except by him or her or by the presiding judge for good cause. When seeking a continuance, a party shall apply for the continuance within 10 working days following the time the party discovered or reasonably should have discovered the event or occurrence which establishes good cause for the continuance. A continuance may be granted for good cause after the 10 working days have lapsed only if the party seeking the continuance is not responsible for and has made a good faith effort to prevent the condition or even establishing the good cause.

Please visit the Board's website at www.vmb.ca.gov to view a copy of the agenda or you may contact me at (916) 282-6911 or via email at jeffrey.weiler@dca.ca.gov

Sincerely,

Jeffrey Weiler Probation Monitor

cc: Malissa Siemantel, Deputy Attorney General



BUSINESS CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM. GOVERNOR DEPARTMENT OF CONSUMER AFFAIRS • VETERINARY MEDICAL BOARD 1747 North Market Blvd., Suite 230, Sacramento, CA 95834-2987 P (916) 515-5520 | Toll-Free (866) 229-0170 | www.vmb.ca.gov



#### **DECLARATION OF SERVICE BY CERTIFIED MAIL**

RE: Case Number 4602022000254

I, the undersigned declare that I am over 18 years of age; my business address is 1747 N. Market Boulevard, Suite 230, Sacramento, CA 95834. I served a true copy of the attached letter by Certified Mail on the following, by placing same in an envelope addressed as follows:

NAME AND ADDRESS

Dr. Amandeep Singh c/o Grantline Vet

CERTIFIED NUMBER: 7022 0410 0002 3623 7632

**LICENSE NO: 16252** 

Said envelope was then, on **April 1, 2022**, sealed and deposited in the United States Mail at 1747 N. Market Boulevard, Suite 230, Sacramento, CA 95834, the county in which I am employed, as certified mail with postage thereon fully prepaid, return receipt requested.

Executed on April 1, 2022, at Sacramento, California.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

**DECLARANT:** 

Probation Monitor Veterinary Medical Board U.S. Postal Service CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

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Sent To

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BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY · GAVIN NEWSOM. GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS · VETERINARY MEDICAL BOARD
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NAME AND ADDRESS

Bonnie Lutz c/o Klinedinst

**CERTIFIED NUMBER:** 7022 0410 0002 3623 7618

**LICENSE NO: 16252** 

Said envelope was then, on **April 1, 2022**, sealed and deposited in the United States Mail at 1747 N. Market Boulevard, Suite 230, Sacramento, CA 95834, the county in which I am employed, as certified mail with postage thereon fully prepaid, return receipt requested.

Executed on April 1, 2022, at Sacramento, California.

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**DECLARANT:** 

Probation Monitor Veterinary Medical Board

## EXHIBIT 2



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY - GAVIN NEWSOM. GOVERNOR

DEPARTMENT OF CONSUMER AFFAIRS • VETERINARY MEDICAL BOARD

1747 North Market Blvd., Suite 230, Sacramento, CA 95834-2978

P (916) 515-5220 | Toll-Free (866) 229-0170 | www.vmb.ca.gov



#### CERTIFICATION OF LICENSE HISTORY

This is to certify that I, Matthew McKinney, Enforcement Manager of the Veterinary Medical Board (Board), Department of Consumer Affairs, State of California, share the responsibility of maintaining control and custody of the official records of the Board. I made or caused to be made a diligent search of the files and records concerning the license history of Amandeep Singh. I have determined that the official records prepared by Board employees, acting within the scope of their duties, show the dates and time periods listed herein for the issuance, expiration, periods of invalidity, and renewals of the license, as well as citations issued and periods of formal Board discipline:

VET No. 16252:

Amandeep Singh

First Issued:

June 12, 2006

Expiration:

August 31, 2019

Status:

Revoked

Discipline:

On April 18, 2018, a Decision and Order became effective in the matter of the Second Amended Accusation against Amandeep Singh and Geisert Animal Hospital, case AV 2015 26. The Order revoked Dr. Singh's license (VET 16252), imposed a fine of \$5,000.00, and ordered him to pay the Board \$51,280.00 for its costs. As Dr. Singh was no longer the managing licensee of Geisert Animal Hospital (HSP 1592), its certificate of registration was not revoked.

On April 5, 2018, an Order Granting 10-Day Stay of Execution was issued staying the Decision and Order (Ordered on March 9, 2018) in case AV 2015 26 in the matter of the Second Amended Accusation against Amandeep Singh and Geisert Pet Hospital.

On August 23, 2017, the Second Amended Accusation was filed against Amandeep Singh (VET 16252) and Geisert Animal Hospital (HSP 1592) in case AV 2015 26. The Fist Amended Accusation in this case was filed on December 13, 2016, and the Accusation was filed on April 5, 2016.

License Relationships:

None

Given under my hand at Sacramento, California, this 11th day of June 2021.

Matthew Mekinney, Enforcement Manager

## EXHIBIT 3



#### Veterinary Medical Board

1747 N. Market Boulevard, Sulte 230, Sacramente, CA 95834 Telephone: (916) 515-5220 Fax: (916) 928-6849 I www.vmb.ca.gov



## PETITION FOR REINSTATEMENT OR MODIFICATION OF PENALTY

INSTRUCTIONS: Please type or print neatly. All blanks must be completed; if not applicable enter N/A. If more space is needed attach additional sheets. Attached to this application should be a "Narrative Statement" and two original verified recommendations from a veterinarian licensed by the Board who has personal knowledge of activities since the disciplinary action was imposed.

TYPE OF PETIT	ION [Reference Busin	ess and Professions Code se	ection 4887]		
Reinstatement of R	Revoked/Surrendered License	or Registration Modification	on of Probation	Terminatio	on of Probation
Modification, yo	ou must specify in your "	or Termination of Probation car Narrative Statement" the term(s provide an explanation. Please	s) and condition(s)	of your probat	tion
PERSONAL INF	ORMATION				
NAME:	First	Medle		Last SING!	4
Other name(s) licens	ed under, if any:	NA			
HOME ADDRESS:	Number & Street	City	Sta	ite	Zip
HOME TELEPHONE	E NUMBER	WORK TELEPHONE NUM	BER CE	LL NUMBER	
E-mail address:	• • • •	CA Licenso	e or Registration N	lumber	
Are you licensed by an	ny other state(s) or countr	y(ies) (please include license nur	mber(s), issue date(	s), and status o	of license(s)):
ATTORNEY INFO	ORMATION (If Applicab	ole)			
Will you be represent	ited by an attorney?	No Z Yes (If "Yes	s," please provide th	ne following inf	ormation)
NAME: Bonn	ne L. LUTZ				
The second of		1 .	1 "	01.1	
ADDRESS:					
PHONE:					
DISCIPLINARY I	NFORMATION				
		Statement" as to the cause for t xtreme departures from sanitary		, , ,	•
probation in any other s	state or country?	nded, votuntarily surrendered, den		Ø No	☐ Yes
	ause for administrative ac d (e.g., 5 years probation	ction or license denial in your "N n.)	larrative Statemen	it" section, incl	uding dates

Total number of years in veterinary practice:	12	Years		
CONTINUING EDUCATION (List continuing ed	ucation completed sin	ce the date of	the disciplinary action	)
1) PUROUE UNIVERSITY modicine - Felle science	ne inallepriate	eliminadion al Brad	Feb 2020	a Hys
2) WUC 92 amual conference in	Las vegas		Feb 15-19, 200	10 32 Hx
	19,20 27,28	2020		12 Hr
4) Quadam uptermory Soft -	tissue ranine.	Suggest a	01 Sept - 15 Nov 2	020 24 H
CURRENT OCCUPATION OTHER THAN V (Answer only if currently not practicing as a Veterinar	rian or Registered Vet	Technician)	ERED VET TECH	NICIAN
List employer, address, e-mail address, phone number	er, job title, and duties			
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AVPIN (A 16LP BUISTOSS MA DBA Grantline Veterinary Hospital EMPLOYMENT HISTORY (list for the past 5 yes	9988 332 W 7869 (	Gøantline A 95376	Rd	<i>asau</i>
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Since the effective date of your last Veterinary Medical Board disciplinary action have you:				
Been placed on criminal probation or parole?		Yes		No
2. Been charged in any pending criminal action by any state, local or federal agency or court?		Yes		No
<ol> <li>Been convicted of any criminal offense? (A conviction includes a no contest plea; disregard traffic offenses with a \$100 fine or less.)</li> </ol>		Yes		No
4. Been charged or disciplined by any other veterinary board?		Yes		No
5. Surrendered your license to any other veterinary board?		Yes		No
6. Had your licensee manager's premise permit disciplined?		Yes		No
7. Had any civil malpractice claims filed against you of \$10,000 or more?		Yes	<u>-</u>	No
8. Become addicted to the use of narcotics or controlled substances?		Yes		No
Become addicted to or received treatment for the use of alcohol?		Yes	D	No
10. Been hospitalized for alcohol or drug problems or for mental illness?		Yes	N	No
Was cost recovery ordered? No Yes If yes, what is the remaining balance? 4 When is paymentanticipated? Trime diately ushen License is Rems			780	
DECLARATION				
Executed on $\frac{A}{I}$ $\frac{I}{I}$ $$	<u> </u>		(Sta	te)
I declare under penalty of perjury under the laws of the State of California that the correct and that all statements and documents attached in support of this petition  Amandee Single  Petitioner (print name)  Signature		_		
Petitioner (print name) Signature	•			
The information in this document is being requested by the Veterinary Medical Board (Board) purposessions Code section 4887. In carrying out its licensing or disciplinary responsibilities, the information to make a determination on your petition for reinstatement or modification of penalty access the Board's records containing your personal information as defined in Civil Code section	Boar , You	d requi u have	res thi a righ	is

Custodian of Records is the Executive Officer at the address shown on the first page.

## EXHIBIT 4

### NARRATIVE STATEMENT

#### Statement

I request California veterinary medical board to reinstate my California Veterinarian License—which was revoked back in April 2018. I have learned from my mistakes and have gone through multiple rehabiliotation processes to be a better veterinarian that pet owners and veterinary medical board can trust.

I have missed serving the pets and pets owners as a veterinarian in last 3 years but have prepared my self to be a better veterinarian through different tools during my rehabilitation process.

I had done multiple mistakes in record writing like missing key details of clients information, history of pet, physical finding data documentation, concentration and dosages of different drugs documentation, daily disposition of pet throughout their stay, prognosis, client communication details and altering and modifying records which was unprofessional conduct on my part.

I also made mistakes in being negligent and by not rechecking surgery complications on rechek visits. I had made mistakes in being not able to evaluate correctly the criticality of trauma patient and not able to render the competent care , close supervision and failure in radiograph interpretations

I failed to render competent care to pets

I was heartbroken when my license was revoked but my family and friends kept me motivatedo. I gathered myself and started on my rehabilitation process. I made a list of my mistakes which led to revocation of my license and understood the significance of these mistakes and ways to learn.

I started volunteering in similar veterinary practices environment like mine to learn from my fellow veterinarians who have been practicing for long time in their practiceso.

During my visits to these hospitals, I learned the correct ways of different elements of record writing like owner's information including their addresses and phone numbers, complete history, physical exam data documentation, name or initials of the person responsible for entries, owner and dosages documentation of drugs, recording daily disposition of pet throughout their stay, prognosis documentation, client communication documentation and post op insoructions to client at chek out of patients.

I learned how to draft supplemental documents or additional notes in records if needed with date rather than altering or changing the primary medical record. I shadowed the rechek appointments on surgery complications by veterinarian on duty.

l reviewed and discussed with veterinarians multiple radiographs of different case files while visioting these hospitals specially

focusing on chest and abdomen radiographs to get myself more knowledge of interpretation of these radiographs.

I also learned at emergency animal hospital the different critical care—aspects including but not limited to oxygen treatment and close supervision in crisically ill patients.

I completed feline Inappropriate Elimination Course and Science Behind Human Animal Bond online course in February 2020 from Purdue University.

l attended western veterinary conference in Las Vegas in February 2000 where different lectures and classes helped mes.

I also attended Pacific Veterinary Conference in June 2000 which was online due to Covid pandemic restrictions.

I completed 2 month online course on different canine soft tissue surgeries in September to November 2000 from Quadam veterinary as these are very common cases in our area of service at Stockton and Tracy.

I also did axial pattern flaps surgery online course in November 2020 from vet Dojo. Com. as we get lot of these cases.

I have read routinely The California Veterinarian and Clinicians brief which always has interesting case discussions on different cases.

Since revocation of my license in 2018s, I have continued to serve as business manager of Geisert animal hospital, Stockton and Grantline veterinary hospital Tracy

After spending most part of 2019 in partnering process, to partner with company Amerivet, which finally accomplished in early 2020.

I continued the same role till date after partnering with Amerivet in March 2020.

The extra time this partnership will give me to focus on veterinary medicine (if my license is reinstated) by talking away management stress like inventory management, recruisment, human resources, vendor negotiations, IT support and many more along with my understandings, learning and fixing of my mistakes from rehabilitation process—efforts and continuing education wisl protect me against recurrence of mistakes.

My plan, if my license is reinstated, is to practice in same area of Stockton and Tracy where I have served since 2006

I want to continue charity work as well with ongoing collaboration with multiple organizations (Animal Protection League United way, Animal Protection League Shelser Animals, Finding A Best Friend, East Of Eden, Paws In Need, Saving Feral, 510 Paws Rescue, Sweet Dog Rescue, SVI Rescue) serving locally by providing low cost and competent care.

A mandee b Singh

Sincerely Alingh

Exhibit 4 -003

# LETTERS OF RECOMMENDATION



Madera Animal Hospital 16772 Rd 26 Madera ca,93638 559-674-9871

4-12-21

#### To whom it may concern

I am writing this letter of recommendation for Doctor Amandeep Singh, whom I have personally known since back in the college of veterinary sciences Punjab India. In his college days he was involved in multiple social and charitable Organizations that benefit poor families. He would also volunteer at Organized blood donation camps. In last 15 plus years we have settled in Central Valley California, and we both have seen each other grow in veterinary industry.

He practiced veterinary medicine at Geisert Animal Hospital which is located in South Stockton. Doctor Singh and Geisert Animal Hospital are both well known in the San Joaquin Stanislaus area. They are known for quality pet care at exceptionally low cost serving the poorer people in the area. He mentioned he is also a part of multiple cat rescue groups offering low cost spay and neuter and partnered 'as well with homeless pet Organizations. His journey as a veterinarian and serving poor and helping others has been a great inspiration to so many veterinarians in Central Valley and around.

He was heartbroken when his License was revoked in 2018. After a period of sadness and depression, he collected himself and started his rehabilitation process. He went on to fix all the mistakes and Deficiencies which led to the disciplinary action against his License. He came to visit me at Madera Animal Hospital multiple times in 2019 and 2020. He would spend few hours with me every now and then after the hospital was closed. He reviewed different case files to learn different aspects of record writing, documentation of dosages, concentrations of drugs, and post op instruction handouts for clients. He would do radiology rounds of x-rays for different cases to learn more. He was determined and focused on his rehabilitation process towards improving on the mistakes he did, which lead to revocation of his License.

He also took my guidance to partner with Amerivet which I did in 2018 and then he did in March 2020. After accomplishing the partnership with Amerivet and continuing in his rehab by attending veterinary conferences in person. He mentioned he did the conferences online and did

other online courses during covid restrictions till date. I wish him success in his efforts to get his license back as thousands of pet owners that he served are wishing resumption of his veterinarian services.

I declare under penalty of perjury under the laws of the state of California that the foregoing is true and correct.

4-12-21

Kulibr S Khehra

### Intercity Animal Emergency Clinic



#### To Whom it may concern

Dr. Amandeep Singh has visited the Intercity animal emergency clinic located at SE Marine drive Vancouver, BC during his family visits to Canada in July 2018, Nov 2018 and July 2019.

He volunteered/shadowed me for the two consecutive days during each visit to learn the critical care of hospitalized pets espcially focusing primarily on trauma patients and other emergency cases needing stabilization, oxygen therapy, fluid therapy and Radiology rounds (Especially on chest radiograph).

We are a 24-hour AAHA accredited full Emergency hospital dealing with critical care, hospitalization and treatment of patients. We are equipped with all the modern equipment (Except CT Scan and MRI) to serve the need of any such patients.

Dr Amandeep Singh showed the keen interest to study the entire record keeping of such cases by going thorough detailed patient history, physical exam data, radiographs and treatment plan.

He had planned to return again in 2020 but due to covid19 situation and border closure prevented him from making a trip to Canada till date. I admire his keen interest to learn emergency veterinary medicine even after practicing veterinary medicine for more than 10 years.

Any inquiry on above can be directed to my personal cell phone Sincerely,

Dr Amit Rahian, BVSc & AH

Dated: 10 April 2021

(Director) Intercity Animal Emergency Clinic

BC Lic # 2476





#### To whom it may concern,

It is my pleasure to write this letter of recommendation for Dr. Amandeep Singh. I have known Dr. Singh since he was a fellow student in my class in veterinary school at Punjab Agriculture University in India. During his student life, he played a very active and innovative leadership role in starting up new student clubs to help out poor and underserved farmer populations by organizing educational and awareness seminars, fundraisers, free medicine clinics, shelter, and food to the farmers who would come seeking help from all over the state. He was the most devoted and hard-working student of our class, continuously instilling pride in all faculty members.

He chose to continue his desire to serve underserved populations when he opened up a low cost clinic in the South Stockton area in order to provide affordable treatment. This hard work and excellent service allowed Dr. Singh to build up an astoundingly successful practice within a short period of time. He is a truly devoted and passionate veterinarian who has dedicated his entire life for this profession. Whether it be sacrificing his time to leave his clinic open until midnight hours or rearranging his schedule to accommodate for doctors who were unavailable, he has always proven his willingness to put others before himself.

Even to this day, Dr. Singh's love for veterinary medicine never fails to astound me. When he lost his license, he was devastated. Many colleagues advised Dr. Singh to consider changing his profession in apprehension of the Board's final decision. But, Dr. Singh proved his true commitment to this job when he reflected, improved, and growed over the last three years. I witnessed all the events that took place leading up to his revocation and have been close following his rehabilitation. After a few months of silence in remorse and depression after the revocation in 2018, Dr. Singh gathered himself with the help of family and friends to start his journey to reeducation. He began his path by initially visiting a few veterinary clinics, including Elkhorn Walerga Animal Hospital, which I have owned since 2010, about two to three times every month. During this period of time. Dr. Singh would shadow me in order to gain perspective on different aspects of veterinary practice. More specifically, he learned various methods of record writing, documentation of medical dosages and concentrations, and discussing X-ray details and radiology rounds of the chest and abdomen of different pets. In order to attain a well-rounded understanding, he often requested to study different post-op handouts given to clients at checkouts and, during down time, would sit in my office to read informational journals such as Clinician's Brief, Veterinary Team Brief, The California Veterinarian, and Today's Veterinary Practice, all of which we have held regular subscriptions for the past few years.

In addition to shadowing me, Dr. Singh took continuing education classes to reevaluate his approaches to practicing. He attended the WVC last year in Las Vegas just before COVID hit us, and he would eagerly call me throughout the conference to discuss the powerful innovations and new discoveries he learned. Dr Singh wanted to continue more lecture series like this, and he did not let complications like the global pandemic obstruct his education. He defeated the limited exposure available by grasping virtual opportunities and attending the Pacific Veterinary Conference online, where he learned from veterinarians and practitioners from across the





country. Furthermore, he continued to take online courses that he found relevant for his practice and common cases he encountered for pets in his area in order to improve his services to clients for when he resumes his veterinary responsibilities.

Finally, Dr. Singh closely witnessed my partnership with PetVet Care Centers- a company that holds over 350 practices across the country. He learned that companies like PetVet oversee the management, inventory, payroll, human resources, and recruitment involved with partnerships, using the tools and resources available to larger companies and corporations, in order to allow for more time to veterinarians like myself to focus on the veterinary aspect of my practice. Dr. Singh followed my footsteps and just a year later, in 2020, he started his own partnership with a different company, AmeriVet and continued as the manager of both Geisert Animal Hospital and Grantline Animal Hospital. I have never seen an individual who holds the same enthusiasm and fervor he does when it comes to striving to improve and cultivating gratitude for the wonderful field that is veterinary medicine. I hope this letter helps in your decision-making process and would be more than willing to discuss his capabilities via phone or in-person.

I declare under penalty of perjury under the law of the State of California that the foregoing is true and correct.

04/10/2021

Sincerely,

Dr. Avtar Singh, BVSC&AH, DVM

### **FINGERPRINTS**



#### REQUEST FOR LIVE SCAN SERVICE

Applicant Submission		
	LICEOSE CERT OF PERMIT	_
ORI (Code assigned by DOJ)	Authorized Applicant Type	
Type of License/Certification/Permit OR Working Title (Maximum 30 character)	s - if assigned by DOJ, use exact little assigned)	
Contributing Agency Information:		
Agency Authorized to Receive Criminal Record Information	Mail Code (nve-uigh code assigned by DOJ)	-
1747 N MARKET BIND ST		
Street Address or P.O. Box	Contact Name (mandatory for all school submissions)	
SACRAMENTO (A 95834		
City State ZiP Code	Contact Telephone Number	
Applicant Information:	AMANDEEP	
Last Name		Suffix
Other Name: (AKA or Alias)		
Last Name	First Name	Suffix
	Tractioning	SUIIIX
Sex Male Female	Driver's License Number	_
	Billing	
Height Weight Eve Color Hair Color	Number [Agency Billing Number]	-
Place of Birth (State or Country) Social Security Number	Misc. Number	
	(Other Identification Number)	
Home Address Street Address or P.O. Box	City State ZIP Code	9
I have received and read the included Privacy Notice	e, Privacy Act Statement, and Applicant's Privacy Rights.	
Bull	04/14/21	
Applicant Signature	Date	
Your Number:	Level of Service: X DOJ X FBI	
OCA Number (Agency Identifying Number)	(If the Level of Service indicates FBI, the fingerprints will be used to the criminal history record information of the FBI.)	ck the
If re-submission, list original ATI number:	Similar motory record mornatori of the Larry	
(Must provide proof of rejection) Original ATI Number		
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Freedom Norm		
Employer Name		
Street Address or P.O. Box	Telephone Number (optional)	_
City State	ZIP Code Mail Code (five digit code assigned by DOJ)	
Coent Cill	4-14-21	
Name of Operator	Date Exhibit 4 -011	
Cathrol Notery BF8		
Transmitting Agency LSID	ATI Number Amount Collected/Billed	- 15

### **CONTINUING EDUCATION**

#### VetDojo.com

3 Roper Street Moorabbin VIC 3189 Australia

+61395531775

invoice number

00211

#### Invoice

Date

30 Nov 2020

Client Details

Amandeep Singh

<b>e</b> ty	Total
1	\$349.00
Total	\$349.00
	\$349.00
an	nount

Thanks you for choosing us. We hope you enjoyed the course

Web: https://vetdojo.learnworlds.com - Email: admin@vetdojo.com



### **Certificate of Completion**

Course Name: The Science Behind the Human-Animal Bond

Date: 13th February 2020

Taken by: Amandeep Singh,

Authored by: Maggie O'Haire, PhD

Authored on behalf of: Purdue University College of Veterinary Me

**Duration:** 00:45:00

Credits: 0.75

Self Verified. No exam taken.

This course is accredited by: University Accredited Veterinary CE

This course was hosted on the World Continuing Education Alliance Learning and Content Mana



### **Certificate of Completion**

Course Name: Feline Inappropriate Elimination

Date: 13th February 2020

Taken by: Amandeep Singh,

Authored by: John Ciribassi, DVM

Authored on behalf of: Purdue University College of Veterinary Me

**Duration:** 01:00:00

Credits: 1

Exam Score: 9 out of 10

This course is accredited by: University Accredited Veterinary CE 240202 Purdue

This course was hosted on the World Continuing Education Alliance Learning and Content Mana

#### 2020 PacVet-Live!

#### CONTINUING EDUCATION CERTIFICATE OF ATTENDANCE

This certifies that \_\_\_\_\_\_and eep \_\_\_\_\_attended the following interactive webinar sessions at PacVe Live on June 19-20, 2020 and June 27-28, 2020, sponsored by the California Veterinary Medical Association. This form is provided for you records. The form may be used to verify CE requirements for license renewal. Record CE hours for the sessions that you attended and write the total on the bottom of this form.

Credit Hrs. for Sessions Attended	Max. Credit	Friday, June 19, 2020 TRACK: Small Animal TOPIC: Gastroenterology SPEAKER: Dr. Jacqueline Whittemore
1	1.0	Chronic Enteropathy in the Cal
ì	1.0	Fat Cat Gone Wrongo- Send Hepatic Lipidosis Packing
	1.0	PLE - Abandon Hope or Business as Usual?
í	1.0	Gastrointestinal Applications of Probiotics – An Evidenced&ase d Review
Credit Hrs. for Sessions Attended	Max. Credit	TOPIC: Use of Antibiotics in Animals SPEAKER: Dr. Adam Smith
1	1.0	Use of Antibiotics In Animals ‡

Credit Hrs. for Sessions Attended	Max. Credit	Saturday, June 27, 2020 TRACK: Avian/ Exotic TOPIC: Small Mammals/ Backyard Poultry SPEAKER: Or. Susan Orosz
1	1.0	The Respiratory System in Small Mammals: Commor Diseases
	1.0	Managing Old Hens and Roosters
Credit Hrs. for Sessions Attended	Max. Credit	TRACK: Avian/ Exotic TOPIC: Avian SPEAKER: Dr. Scott Echols
	1.0	Common Surgical Procedures in Poultry (Part 1)
	1.0	Common Surgical Procedures in Poultry (Part 2)

<sup>‡</sup> This course satisfies the one hour of California CE requirement on the judicious use of medically important antimicrobial drugs.

Credit Hrs. for Sessions Attended	Max. Credit	Saturday, June 20, 2020 TRACK: Small Animal/Wellness TOPIC: Neurology/Wellness SPEAKER: Dr. Carrie Jurney
1	1.0	Spinal Radiographs
i	1.0	Den't LetVestibular Disease Spin You Around
	1.0	Diagnosing Well-Being
T	1.0	When Veterinary Medicine Kicks You in the Teeth: A Survival Guide

I certify that I have attended the sessions entered above which qualify for a total of 12\_continuing education hours.

Signature tate 08 15) a
The California Veterinary Medical Association is a statutokily approved

California CE provider.

Valerie R. Fenstermaker, Executive Director

for Sessions Attended	Max. Credit	Sunday, June 28, 2020 TRACK: Small Animal TOPIC: Ophthalmology SPEAKER: Dr. Sara Thomasy
1	1,0	Practical Corneal Ulcer Management I: Superficial Corneal Ulcers
l	1.0	Practical Comeal Ulcer Management II: Superficial Corneal Ulcers
	1.0	Eyelid Surgeries to Incorporate into Your Clinic
	1.0	FHV-1 Management: What's New That I Can Do?
Credit Hrs. for Sessions Attended	Max. Credit	TRACK: Technician TOPIC: Emergency Critical Care SPEAKER: Megan Brashear, CVT
	1.0	Shock Talk
	1.0	The Art of Nursing
	1.0	Basic ECG Interpretation
	1.0	Critically Important Critical Thinking Skills



### CERTIFICATE OF ATTENDANCE

Dr. Amandeep Singh

#### WVC 92nd Annual Conference February 15-19, 2020

AAVSB-RACE Provider #3-39436
49 CE hours of Veterinary Continuing Education
were presented via Lectures and interactive sessions by
WVC in Las Vegas, NV

State of Licensure

Signature

CA

leap Singl

License #[s]

16252

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02120/20

1!his program 3 37436 is approved by the AAVSB RACE to offer a total of 942.00 CE Credits (4900 max) being available to any one veterinarian: and/or888.00 Veterinary Technician CE Credits (40.00 max). This RACE approval is for the subject matter categoriels) of:

Medical Program

Non-Medical Program

using the delivery mathod(s) of: Seminar/Lecture, Lab/Wet Lab. This approval is valid in jurisdictions which recognize AAVSB RACE; however participants are responsible for ascertaining each board's CE requirements, RACE does not faccredit" or "endorse" or "certify any program or person, nor does RACE approval validate the content of the program.

Anthy Feare

**AAVSB** 





## CERTIFICATE

OF ACHIEVEMENT

### Canine Soft Tissue Surgery part 1

Course held from 21 Sep 2020 to 15 Nov 2020. Hours: 24. Delivered by John Berg.

### **Amandeep Singh**

Program Number: 706-41449. This program has been approved for 24 hours of continuing education credit in jurisdictions that recognize RACE approv

Ana A. Puig Quadam Veterinary John Berg
DVM, DACVS, ACVS Founding Fellow,
Surgical Oncology

Amandeep Singh

## EXHIBIT 5

## BEFORE THE VETERINARY MEDICAL BOARD DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Second Amended Accusation Against:

Case No. AV 2015 26

Amandeep Singh, DVM,

OAH No. 2016050594

Veterinary License No. VET 16252

and

GEISERT ANIMAL HOSPITAL AMANDEEP SINGH, DVM (MGL) Premises Permit No. HSP 1592

Respondents.

#### ORDER DENYING PETITION FOR RECONSIDERATION

The Petition for Reconsideration filed by Respondent Amandeep Singh, DVM, and received by the Board on April 4, 2018, in the above-entitled matter, having been read and considered, the Board hereby makes the following order:

Respondent's Petition for Reconsideration is hereby denied. The attached Decision and Order issued on March 9, 2018, shall go into effect on April 18, 2018.

IT IS SO ORDERED this 17th day of April, 2018.

FOR THE VETERINARY MEDICAL BOARD DEPARTMENT OF CONSUMER AFFAIRS

Cheryl Waterhouse, DVM, President

## BEFORE THE VETERINARY MEDICAL BOARD DEPARTMEN'T OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Second Amended Accusation Against:

Amandeep Singh, D.V.M., et. al Veterinarian License No. VET 16252 Case No. AV 2015 26 OAH No. 2016050594

Respondent.

#### **ORDER GRANTING 10-DAY STAY OF EXECUTION**

On March 9, 2018, the Veterinary Medical Board (Board) issued its Decision and Order in the above entitled matter, with the Decision and Order to become effective on April 8, 2018. On April 4, 2018, Respondent filed a Petition for Reconsideration (Petition) of Decision Adopting Administrative Law Judge's Proposed Decision and Request for Stay.

Pursuant to section 11521(a) of the Government Code, the Board hereby GRANTS a stay of execution of the effective date of the Decision and Order in the above-stated case for ten (10) days until April 18, 2018, solely for the purpose of considering the Petition.

IT IS SO ORDERED this 5th day of April, 2018.

Ethan Mathes, Interim Executive Officer

Veteriinary Medical Board

**Department of Consumer Affairs** 

## BEFORE THE VETERINARY MEDICAL BOARD DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Second Amended Accusation against:

Case No. AV 2015 26

OAH No. 2016050594

AMANDEEPSINGH, 9DVM Veterinary License No. VET 16252

and -

GEISERT ANIMAL HOSPITAL AMANDEEP SINGH, DVM (MGL) Premises Permit No. HSP 1592

Respondents.

#### **DECISION AND ORDER**

The attached Proposed Decision of the Administrative Law Judge is hereby accepted and adopted by the Veterinary Medical Board as its Decision in the above-entitled matter, except that, pursuant to Government Code section 11517(c)(2)(C), the following minor and technical errors are corrected as noted here:

- 1. Page 1, first paragraph, line 1, after "Hearings," insert "State of California,"
- 2. Page 1, second paragraph, line 1, after "General," insert "Office of the Attorney General, Department of Justice, State of California,"
- 3. Page 1, second paragraph, line 2, after "Board" insert ", State"
- 4. Page 2, paragraph 1, line 1, before "Accusation" insert "Second Amended"
- 5. Page 2, paragraph 4, line 1, before "Accusation" insert "Second Amended"

- 6. Page 9, paragraph 30, line 2, before "Amended Accusation" insert "Second"
- 7. Page 11, footnote 3, first line, before "Amended Accusation" insert "Second"
- 8. Page 21, paragraph 87, line 5, before "Accusation" insert "Second Amended"
- 9. Page 22, paragraph 88, line 1, replace "patients" with "clients"
- 10. Page 22, paragraph 88, line 2, before "Accusation" insert "Second Amended"
- 11. Page 23, footnote 6, paragraph a., line 1; replace "Negligence" with "Fraud and Deception"
- 12. Page 24, footnote 6, paragraph c., line 1, replace "Fraud and Deception" with "Negligence"
- 13. Page 26, paragraph 3, line 1, replace "the board" with "[t]he board"
- 14. Page 27, paragraph 6, line 7, replace "35" with "37"
- 15. Page 28, paragraph 9, line 3, replace "2032,435" with "2032,35"

v v	APR 0 8 2018	
This Decision shall become effective on	MIN O O TRIB	

IT IS SO ORDERED on MAR 0 9 2018

Cheryl Waterhouse, DVM, President

FOR THE VETERINARY MEDICAL BOARD

DEPARTMENT OF CONSUMER AFFAIRS

FOR THE VETERINARY MEDICAL BOARD

DEPARTMENT OF CONSUMER AFFAIRS

# BEFORE THE VETERINARY MEDICAL BOARD DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Second Amended Accusation Against:

Case No. AV 2015 26

AMANDEEP SINGH, D.V.M. Veterinary License No. VET 16252

OAH No. 2016050594

and

ě

GEISERT ANIMAL HOSPITAL AMANDEEP SINGH, D.V.M. MANAGING LICENSEE

Premises Certificate of Registration No. HSP 1592

Respondent.

#### PROPOSED DECISION

Joy Redmon, Administrative Law Judge, Office of Administrative Hearings, heard this matter on September 18, 19, 20, 21, 22, and October 25, 2017, in Sacramento, California.

Karen Denvir, Deputy Attorney General, represented complainant Annemarie Del Mugnaio, Executive Officer, Veterinary Medical Board of California.

Bonnie Lutz, Attorney at Law, represented respondent Amandeep Singh, D.V.M., who was present throughout the hearing.

Evidence was received and the record held open for written closing briefs. The written briefs were timely submitted, the record closed, and the matter submitted for decision on December 11, 2017.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> Complainant's closing brief is marked Ex. 37 for identification. Respondent's closing brief is marked Ex. AAAA for identification.

#### FACTUAL FINDINGS

#### Jurisdiction

- 1. Annemarie Del Mugnaio (complainant) brought the Accusation solely in her official capacity as the Executive Officer of the Veterinary Medical Board of California (Board), Department of Consumer Affairs. The Second Amended Accusation was issued on August 23, 2017.
- 2. On June 12, 2006, the Board issued respondent Veterinary License Number VET 16252. The license will expire on August 31, 2019, unless revoked or renewed.
- 3. On February 22, 1972, the Board issued Premises Certificate of Registration No. HSP 1592 to Geisert Animal Hospital (Geisert). On January 1, 2007, respondent became Geisert's managing licensee and held that position through March 7, 2017. The certificate will expire on May 31, 2018, unless renewed.

## Board Allegations

4. The Accusation charges respondent, in connection with his treatment of animal patients (a cat and seven dogs), with negligence, unprofessional conduct, fraud and/or deception in making a representation to the Board, and violations of regulations relating to anesthesia and record keeping. Complainant requests an order revoking respondent's license and Geisert's premises certificate issued to respondent as managing licensee. Complainant seeks a fine not in excess of \$5,000 for any cause of action specified in Business and Professions Code section 4883. Complainant further requests that respondent be ordered to pay the reasonable investigative and enforcement costs in this action.

Respondent contests some of the allegations, particularly those regarding fraud and deception. He acknowledges submitting "re-created" patient medical records to the Board but asserts this was done to create a "complete picture" of what occurred with each patient and not with the intent to decive. Respondent concedes some medical records were incomplete and asserts he has modified his practice to comply with the regulatory requirements governing patient medical records. Respondent believes each animal's medical treatment was within the standard of care and that the Board did not meet its burden to establish by clear and convincing evidence that his conduct was negligent or unprofessional. Respondent asserts that the appropriate discipline in this case is license revocation stayed with probation ordered.

# Professional Background

5. Respondent graduated from the University of Punjab College of Veterinary Science in 1998. As noted above, he has been a licensed veterinarian in California since 2006 after having passed the California licensing examination on his initial attempt. Respondent is a shareholder of a corporation that owns Geisert. The corporation purchased

Geisert in 2006 and respondent became managing licensee thereafter. Shahid Zaigham, D.V.M., became Geisert's managing licensee in March 2017. Respondent is also a shareholder in a corporation that owns Grantline Veterinary Hospital (Grantline) but was never the managing licensee at Grantline.

6. Respondent currently works three to four days per week at Geisert for up to four hours per day. He conducts physical examinations, dental cleanings, and extractions. There are approximately eight to ten employees comprised of kennel staff, veterinary assistants, receptionists, an office manager, and other veterinarians. Several employees have worked at Geisert for more than five years. He also performs surgeries at Grantline for approximately ten hours per week. Geisert is located in an economically depressed area and respondent works with patients to help them afford veterinary services. Many pet owners lack the financial resources to obtain medical care from other, more expensive local veterinarians. Respondent considers himself a valuable member of the community and wants to continue serving his patients.

# Animal Patients Mini Schnauzer Puppies

- 7. Complainant asserts respondent is subject to discipline regarding three miniature Schnauzer puppies for negligence in that he failed to examine the puppies at a recheck appointment following dewclaw removal surgery, and he allowed a veterinary assistant, Alex Medina, to examine the puppies instead. Complainant further asserts that respondent failed to comply with the record keeping regulations in that he did not document complete data from the physical examination of the three puppies, including their respiratory rates and pulses, and only documented one puppy's weight and temperature.
- 8. On January 29, 2012, Malissa Galindo brought three five-day-old miniature Schnauzer puppies to Geisert to have their dewclaws removed and their tails docked. Ms. Galindo testified that following the procedure Mr. Medina discharged the puppies to her care at approximately 5:00 p.m. with tight blue bandages around the dewclaw removal sites. He informed her to remove the bandages in 24 hours and to watch for excess bleeding. Ms. Galindo testified she did not see respondent at that time. The following morning, on January 30, 2012, the puppies' paws were excessively swollen and Ms. Galindo removed the bandages. She returned to Geisert, accompanied by her daughter Breanna who also testified at hearing, and asked to see respondent. According to both Ms. Galindo and her daughter, Mr. Medina looked at the puppies' paws in the waiting room and reassured them the swelling would decrease. No veterinarian saw the puppies that evening and the medical records do not document a visit on that day.

On February 1, 2012, Ms. Galindo and her husband returned to Geisert and respondent examined the puppies. Respondent informed the Galindos there must have been "miscommunication" because pressure bandages should have been removed in 30 minutes and not 24 hours. Respondent offered to amputate one paw at no charge and issue them a \$400 credit which they refused. Ms. Galindo then sought medical treatment from another

veterinarian; however, one of the puppy's paws fell off and Breanna found the paw in the dog bed.

- 9. Respondent disputes Ms. Galindo's account asserting that he released the puppies to her and personally instructed her to remove the pressure bandages in 30 minutes. He did not recall if Mr. Medina was present when he gave this instruction to Ms. Galindo. Mr. Medina testified that he remembered instructing Ms. Galindo to remove the pressure bandages in 30 minutes and not 24 hours later, and did not indicate that respondent was present during this exchange. Mr. Medina acknowledged seeing the Galindos and the puppies when they returned on January 30, 2012, and recalls respondent was not available to see the puppies. He recalls informing them they could wait to be seen or they could have the puppies examined at a different veterinarian's office if they were unable to wait. They chose to leave. He denies examining the puppies and informing Ms. Galindo the swelling would go down.
- 10. Ms. Galindo's memory was clear, her testimony straightforward, and it was consistent with the complaint she submitted to the Board following the incident. The evidence established that Mr. Medina discharged the puppies without respondent being present and instructed Ms. Galindo to remove the bandages in 24 hours. Regarding January 30, 2012, the evidence established the Galindos were concerned enough about the puppies' paws to return to the animal hospital and they would have waited until respondent or another veterinarian was available to see the puppies but for Mr. Medina's assurance that the swelling would decrease.

#### **EXPERT TESTIMONY**

- 11. As noted above, complainant asserts respondent's conduct was negligent in his care and treatment of the puppies and that he committed record keeping violations. In making these allegations, complainant relied upon the expert opinion of Ann Lesch-Hollis, D.V.M. Dr. Lesch-Hollis received her Bachelor of Science and Doctor of Veterinary Medicine degrees at Colorado State University. She has been licensed by the Board for 30 years. Dr. Lesch-Hollis is a general practitioner with a special interest in small animal medicine and surgery. She also works as a relief veterinarian in other clinics. Dr. Lesch-Hollis currently owns and manages a veterinary clinic in Lincoln, California. Dr. Lesch-Hollis has served as a consultant and expert witness for the Board since 2001.
- 12. Dr. Lesch-Hollis prepared a Case Evaluation of respondent's care and treatment of the three puppies. She also testified at hearing. In rendering her opinion, Dr. Lesch-Hollis reviewed the patient medical record. Dr. Lesch-Hollis's testimony was consistent with her written report.

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13. Respondent called George Cuellar, D.V.M., to render an opinion regarding the negligence claims against respondent.<sup>2</sup> Dr. Cuellar is a board-certified veterinarian who owns Southern California Veterinarian Hospital, a facility accredited by the American Animal Hospital Association. He currently practices veterinary medicine four days per week, eight hours per day. Dr. Cuellar has reviewed approximately 120 cases for approximately 16 attorneys. Dr. Cuellar reviewed the medical records and testified at the hearing in this matter.

#### NEGLIGENCE

- 14. Dr. Lesch-Hollis opined that respondent was negligent in failing to see the puppies when Ms. Galindo and her daughter returned to Geisert on January 30, 2012, or recommend an appropriate alternative. Dr. Lesch-Hollis explained that occasionally surgical complications arise and patients present without a scheduled appointment. Dr. Lesch-Hollis opined the standard of care requires the surgeon to examine the patients and if the surgeon is not present, then the veterinarian on duty is to conduct such an examination. If the veterinarian on duty is otherwise occupied, the standard of care requires the patient be informed of their right to wait or to take the patients to another veterinarian for evaluation. It is below the standard of care for a veterinarian assistant to examine the patients and render an opinion about their condition.
- 15. Respondent asserted that Dr. Lesch-Hollis's opinions should be disregarded because she provided inconsistent testimony regarding which version of the Veterinary Medicine Practice Act she reviewed in connection to the years at issue in this case. This acknowledgement did not undermine her opinions. The evidence established that when comparing her opinions to the different versions of the Act in place at the time respondent rendered care to the various animals at issue in this case, her opinions were consistent with the applicable versions.
- 16. Dr. Cuellar explained that he found no evidence from the medical records that respondent was present at the facility on January 30, 2012, or that he knowingly allowed Mr. Medina to examine the puppies. He acknowledged that it would have been below the standard of care not to have a veterinarian examine the puppies when they returned on January 30, 2012, with possible post-surgical complications. Dr. Cuellar confirmed that leaving a pressure bandage on for 12 hours could cause a puppy's paw to fall off. He further acknowledged that, as managing licensee, respondent was responsible for the information provided to pet owners by facility staff.
- 17. Dr. Lesch-Hollis's testimony was credible and her opinions supported by the record. It was established by clear and convincing evidence that respondent's conduct was

<sup>&</sup>lt;sup>2</sup> Dr. Cuellar reviewed the allegations and explained he only formed opinions regarding the negligence claims and did not form opinions regarding causes for discipline for fraud and deception, unprofessional conduct, and record keeping violations. However, on cross examination he did offer opinions on the latter allegations which are included herein.

below the standard of care which constitutes negligence regarding the three miniature schnauzer puppies. Specifically, respondent failed to examine them on January 30, 2012, or as the managing licensee, have them examined by another veterinarian at Geisert or refer them to another facility. Additionally, as the managing licensee, respondent failed to have procedures in place to avoid Mr. Medina, a veterinary assistant, from examining the puppies and offering an opinion regarding their prognosis.

#### RECORD KEEPING

- 18. In 2012, the requirements for record keeping contained in California Code of Regulations, title 16, section 2032.3, subdivision (a), required a legible written or computergenerated record containing the following:
  - (1) Name or initials of the veterinarian responsible for entries.
  - (2) Name, address and phone number of the client.
  - (3) Name or identity of the animal, herd or flock.
  - (4) Except for herds or flocks, age, sex, breed, species, and color of the animal.
  - (5) Dates (beginning and ending) of custody of the animal, if applicable.
  - (6) A history or pertinent information as it pertains to each animal, herd, or flock's medical status.
  - (7) Data, including that obtained by instrumentation, from the physical examination.
  - (8) Treatment and intended treatment plan, including medications, dosage and frequency of use.
  - (9) Resords for surgical procedures shall include a description of the procedure, the name of the surgeon, the type of sedative/anesthetic agents used, their route of administration, and their strength if available in more than one strength.
  - (10) Diagnosis or tentative diagnosis at the beginning of custody of animal.
  - (11) If relevant, the prognosis of the animal's condition.
  - (12) All medications and treatments prescribed and dispensed, including strength, dosage, quantity, and frequency.
  - (13) Daily progress, if relevant, and disposition of the case.
- 19. Respondent created only one medical record for all three puppies. He included a physical description of one puppy, also noting a weight and temperature for one of the three puppies. Respondent did not document the physical examination, including the puppies' respiratory rates or pulses. Respondent contends it was appropriate not to document respiratory rates or pulses for the puppies because the data would have been unreliable due to the puppies' young age.
- 20. Dr. Lesch-Hollis's opinions regarding the record keeping was persuasive and consistent with the provisions of the Act in place in 2012. Even if respondent was not required to document the puppies' respiratory rates and pulses due to their age, he still failed to comply with the Act's record keeping requirements. Respondent was required to have a

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separate medical chart for each patient, and to document separately their physical description, weight, and temperature when he examined them on January 29, 2012. Accordingly, he violated the provisions of the Act related to record keeping in his care and treatment of the three miniature Schnauzer puppies.

## Animal Patient Spooky Duke

- 21. The Board asserts that respondent is subject to disciplinary action for committing fraud or deception when he altered, modified, or falsified Spooky Duke's medical records submitted to the Board. It is further alleged respondent was negligent in his care and treatment of Spooky Duke for failing to feed or monitor the cat overnight and knowingly discharging the cat covered in urine. Finally, the Board asserts respondent violated the Act's record keeping requirements in both the original medical records and the submitted medical records.
- 22. On March 20, 2012, Amber Lamb and Richard Gardea took their one-year-old cat, Spooky Duke, to Geisert to be spayed. They were not informed Geisert was unstaffed overnight. On March 21, 2012, Mr. Gardea retrieved the cat following surgery. Spooky Duke was given to Mr. Gardea in the cat carrier they brought to the facility and had left overnight. Mr. Gardea looked into the carrier and saw Spooky Duke, was given pills he was told were antibiotics and pain medication, and he left the facility.
- Spooky Duke from the pet carrier and found the cat and the blanket inside the carrier covered in urine. Ms. Lamb and Mr. Gardea returned to Geisert upset and requesting Spooky Duke be bathed. According to the original medical record regarding the return, the owners were informed the blanket was not wet following surgery so the cat, "probably urinated overnight." A staff member agreed to towel off Spooky Duke but declined to bathe the cat given the recent surgery. Ms. Lamb and Mr. Gardea were not satisfied with the response and were concerned that the incision site looked inflamed. They left Geisert and took Spooky Duke to another veterinarian, Satwinder Sahi, D.V.M., for treatment.
- 24. Dr. Sahi testified at the hearing in this matter. Dr. Sahi confirmed Spooky Duke was covered in urine on his tail, abdomen, and back and front paws, but could not tell when the urination occurred. The cat had a temperature and possible infection at the incision site. Dr. Sahi was unable to determine the type and concentration of the medication dispensed at Geisert based on the label. Dr. Sahi instructed Ms. Lamb and Mr. Gardea to discontinue Spooky Duke's Giesert- issued medication and he dispensed an alternative.
- 25. On March 26, 2012, Ms. Lamb took Spooky Duke to Morgan Patterson, D.V.M. at Rosemarie Pet Hospital in Stockton to evaluate the incision site. Dr. Patterson testified at the hearing in this matter. Spooky Duke's incision had dehisced and Dr. Patterson debrided the incision which she considered a routine repair. Dr. Patterson explained that she received a copy of Spooky Duke's original handwritten Geisert medical records (original records) but did not recall if they were submitted by Geisert or from the

owners. The original records do not contain Spooky Duke's sex, age, birthdate, or markings. The record states, "spay done under RAK 0.33 cc IV Isoflurane," a notation in the left margin indicates "13 mg." The description of the surgery indicates, "abdomen closed with 3-0 PDS." The record does not specify if Spooky Duke was fed or given water overnight.

- 26. On April 23, 2012, the Board received a complaint from Mr. Gardea regarding respondent. On May 2, 2012, the Board sent respondent a letter requesting he submit all medical records relating to Spooky Duke's treatment. On March 14, 2013, respondent submitted a typed medical record (submitted record). The medical record was not the same as the original record given to Dr. Patterson.
- 27. The submitted record contains a complete description of Spooky Duke, including age, birthdate, color and markings and medical examination results for March 21, 2012. The submitted record also includes the following description of the anesthetic protocol and description of the spay surgery:

Induction with Diazepam I/V 1.2 mg (5mg/ml), ketamine I/V 16 mg (10mg/ml), Atropine I/V .12 mg (.54 mg/ml) & maintained On Isoflurane by endotracheal size 3.00 OVH completed, Pedicles and Uterine horn transfixed with 3-0 PDS, Uterine body, horns & ovaries had increased blood supply Abdomen closed in two layers with 2-0 PDS Skin closed with Interrupted Braun amide Sutures Woke uneventful from general anesthesia

The entry contains respondent's initials. The forgoing information was not included in the original record.

- 28. Respondent acknowledges that Spooky Duke's original medical record, as well as several other animals at issue in this case, are different from those submitted to the Board. He explained that his practice at that time was to keep patient information in the chart, on sticky notes attached to the chart, and in drug logs. When he received the request from the Board for records regarding Spooky Duke and the other patients, he "re-created" the medical record by compiling information from these sources. Regarding the different anesthetic protocols described in the medical records, respondent asserts that upon checking in, his staff would write down an anticipated anesthetic protocol. If the record submitted to the Board differed from the original medical record, it was because respondent included the anesthetic protocol actually used after comparing it to the drug log and sticky notes. He also included descriptions in the submitted record such as "uneventful" and "normal" as a default to describe what occurred believing he would have noted in the original chart or on a sticky note had it been otherwise. Respondent testified that his intent was not to deceive the Board but to provide an accurate and complete description of what occurred.
- 29. Respondent explained that if a cat stayed at Geisert overnight following surgery, the animal would be kept in a kennel with water and food. The animal would not be

kept in a carrier. Two long-time Geisert employees, Marisela Palacios and Mr. Medina confirmed respondent's testimony regarding overnight stays. Respondent further asserted that Spooky Duke likely urinated during the car ride home from Geisert following surgery because an employee would not have put the cat into the carrier covered in urine. Had Spooky Duke urinated before discharge, respondent's staff would have toweled the cat off as was done when the owners returned later that day.

#### **EXPERT TESTIMONY**

- 30. The Board called Bonnie Markoff, D.V.M., to establish the contentions in the Amended Accusation regarding Spooky Duke. Dr. Markoff obtained her undergraduate degree from California Polytechnic State University, San Luis Obispo, and her Doctor of Veterinary Medicine from the UC Davis School of Veterinary Medicine. She has been licensed by the Board as a veterinarian since 1988. She opened Animal Care Clinic in San Luis Obispo, California, the following year, and continues to own and operate that veterinary practice. She has received her specialty certification in Canine & Feline Practice from the American Board of Veterinary Practitioners. Dr. Markoff has reviewed between 40 and 50 cases for the Board and has testified approximately six times.
- 31. Dr. Markoff reviewed both the original records submitted to Dr. Patterson and the records respondent submitted to the Board. She reviewed a letter from Dr. Sahi summarizing his medical findings as well as records from Dr. Patterson. Dr. Markoff authored a written report summarizing her opinion regarding respondent's care and treatment of Spooky Duke and whether or not he committed any violations of the Act. Dr. Markoff testified consistently with her written report.

#### NEGLIGENCE

- 32. Dr. Markoff opined that it is below the standard of care and therefore negligent to leave a post-surgical patient overnight without food or water, unless instructed otherwise by a veterinarian. Dr. Markoff explained that if it was not charted in the medical record, it did not occur. As the medical records did not indicate that Spooky Duke was provided food and water overnight, Dr. Markoff surmised the cat was not provided these essentials. Dr. Markoff further opined that it was below the standard of care to discharge a cat covered in urine.
- 33. Dr. Cuellar opined that a patient should be provided food and water overnight, but neither the record keeping requirement in the Act or the standard of care require this medical record documentation. Dr. Cuellar saw no evidence in the medical record that Spooky Duke was discharged covered in urine.
- 34. The evidence established that Spooky Duke was provided food and water overnight, as that was consistent with Geisert's practice at that time. Regarding Spooky Duke's condition on discharge, Mr. Gardea did not smell urine when he looked into the cat carrier before leaving Geisert; however, Ms. Lamb reported a notable scent as soon as she

opened the carrier door. Therefore, it is just as likely Spooky Duke urinated after being discharged from Geisert but before arriving at home. It was not established by clear and convincing evidence that respondent was negligent in his care and treatment of Spooky Duke.

## FRAUD AND DECEPTION

- 35. Dr. Markoff compared the original handwritten medical record provided to Dr. Patterson with the typed medical record submitted to the Board. They differed significantly. Dr. Markoff explained this constitutes fraud because the records tell a "completely different story," and not simply a clarification. According to Dr. Markoff, a veterinarian is to complete the medical records within 24 hours and, although unadvisable, possibly as much as 72 hours later. Only in an extreme situation where a medical record is completely destroyed, would it be appropriate to "re-create" a medical record. Any deletions to a medical record should be done with a strike-through so the original information can be seen. In Dr. Markoff's opinion, because the original version of the medical record and submitted version are extensively different, respondent intended to deceive the Board by passing off the submitted record as the record completed at the time Spooky Duke was treated. She opined that constitutes fraud.
- 36. As noted above, respondent testified that he had no fraudulent intent, but merely wanted to submit an accurate medical record to the Board. Additionally, respondent asserts that Dr. Markoff's opinion should be disregarded because she applied a "layman's" definition of fraud and was unable to articulate a "legal definition." Both arguments are unpersuasive.
- 37. Dr. Markoff's opinion was based on a thorough review of the records and a thoughtful comparison between the two documents. Additionally, her definition of fraud was sufficiently accurate in the context within which it was rendered to be reliable. Moreover, determining whether respondent had a fraudulent intent does not need to be established through expert opinion. Respondent's conduct regarding the altered medical records submitted to the Board was deceitful. He wanted it to appear that the submitted records were, in fact, created contemporaneously with the rendered treatment. His explanation regarding having an unlicensed person include an anticipated anesthetic protocol upon an animal's check in is illogical. Doing so serves no purpose and can lead to dangerous results, where another veterinarian risks erroneously relying on incorrect information regarding what drug cocktail an animal was given.

Even had respondent's practice been to have staff anticipate the protocol, respondent could have struck-through and updated the information at the time he conducted the surgery. Otherwise, the medical chart was not an accurate record and served no useful purpose. If respondent wanted to "give a full picture," rather than deceive the Board, he could have drafted a supplemental document or added additional information and correctly dated the newly added information. Instead, respondent created an entirely new record and included information such as "woke uneventful," and a detailed description of the surgical procedure

when a year after the event he had no independent recollection of either. The evidence established that submitting the newly created medical record constituted fraud and deceit.

#### RECORDKEEPING REGULATIONS

- 38. Dr. Markoff testified regarding the specific record keeping violations relating to both Spooky Duke's original medical record and the altered chart submitted to the Board on March 14, 2013. The evidence established the following record keeping violations:
  - a. Respondent failed to record Spooky Duke's complete description in the original medical record;
  - b. Respondent failed to record Spooky Duke's history in both versions of the medical record;
  - c. Respondent failed to include a complete description of the spay procedure in the original medical record;
  - d. Respondent failed to record the anesthetic agents administered to Spooky Duke in the original medical record and the name, dosage, frequency of use, quantity, and strength of the medication dispensed to Mr. Gardea when Spooky Duke was discharged; and
  - e. Respondent failed to document the physical examination of Spooky Duke in the original medical record conducted within 12 hours of the spay procedure.<sup>3</sup>
- 39. In sum, it was not established by clear and convincing evidence that respondent was negligent in his care and treatment of Spooky Duke in failing to provide food or monitoring overnight following the spay surgery or discharging the cat covered in urine. It was, however, established by clear and convincing evidence that respondent's conduct was fraudulent and deceitful in submitting altered medical records rather than the original medical record in response to the Board's records' request. It was further established that respondent engaged in multiple record keeping violations, as described above, in both the original and submitted medical records.

# Animal Patient Daisy

40. The Board asserted that respondent engaged in record keeping violations regarding a Chihuahua, Daisy. On May 1, 2012, Crystal Thurman took her dog Daisy to Geisert to be spayed. Ms. Thurman testified at the hearing in this matter. Ms. Thurman

<sup>&</sup>lt;sup>3</sup> The Amended Accusation also cites respondent's failure to include the owner's contact information in the medical record. An additional client contact sheet was provided at hearing which satisfied that requirement.

completed a client information sheet containing her name and telephone number and she prepaid for the procedure upon check-in. When she picked up Daisy following the procedure she was informed Daisy had been pregnant and was charged an additional \$39 for the procedure. Ms. Thurman disbelieved the contention because Daisy had remained inside and away from any male dog since delivering a litter of puppies eight weeks earlier. She filed a complaint with the Board the same day she retrieved Daisy from Geisert.

- 41. The Board requested Dr. Lesch-Hollis review the complaint and respondent's medical records for Daisy but did not receive the client information sheet completed by Ms. Thurman. Dr. Lesch-Hollis reviewed the records and wrote a report documenting her findings. Dr. Lesch-Hollis testified consistent with her report and concluded that respondent violated the Act's recordkeeping requirements by: 1) failing to include his name or initials; 2) failing to record the owner's name and address; 3) failing to document Daisy's history including recent pregnancy and vaccines; 4) failing to document the quantity of ketofen syrup sent home following the procedure; and 5) failing to document and evaluate Daisy's post-operative condition and case disposition. Dr. Lesch-Hollis concurred that the client information sheet completed by Ms. Thurman satisfied the requirement to record the owner's name and address.
- 42. Respondent does not contest the forgoing omissions. He explained that at the time he treated Daisy he was using a form that did not include sufficient space to include the detailed information required under the Act. He is more aware now of the record keeping requirements and has changed his forms such that more detailed information can be provided.
- 43. Dr. Lesch-Hollis's review was thorough. As noted previously, her acknowledgement that she reviewed a prior version of the Act's record keeping requirements did not diminish her opinion's reliability because the violations she noted were consistent with the applicable record keeping requirements. The evidence established respondent violated the Act's record keeping requirements as noted in Dr. Lesch-Hollis's written report with the exception of the owner's name and address which were appropriately documented.

#### Animal Patient Dexter

- 44. The Board asserts respondent is subject to discipline for negligence in his care for Dexter, a Yorkshire mix terrier, for failing to provide supervision or monitoring despite respiratory distress and chest trauma; failing to provide repeated examinations and radiographic imaging despite worsening respiratory distress; failing to provide oxygen therapy; and failing to recognize potential pulmonary bleeding on radiographs. The Board further asserts respondent committed record keeping violations regarding Dexter.
- 45. On June 6, 2013, eight-year-old Dexter was attacked by a German Shepherd. Dexter's owner, Jocelyn Kackstetter (formerly Bello), took Dexter to Geisert. Ms. Kackstetter testified at the hearing in this matter. Ms. Kackstetter believed Dexter was seriously injured but noted that he was standing on his own in her vehicle on the way to

Geisert. Respondent immediately saw Dexter. Respondent noted that upon arrival, Dexter had a rapid heart rate, wheezes and crackles in his chest, labored breathing, and deep puncture wounds on the left side of his chest.

- 46. Respondent started an IV and administered pain medication, and anti-inflammatory medication, and an antibiotic. Respondent also performed radiographs and determined there was no rib fracture. He did not notice an area on the radiograph that may have indicated potential pulmonary bleeding. Respondent did not administer oxygen therapy. Ms. Kackstetter went home believing Dexter would be monitored overnight at Geisert. Respondent telephoned Ms. Kackstetter at 10:30 p.m. during which respondent informed her of the steps taken thus far and that the next 24-48 hours, "would be critical." Ms. Kackstetter felt comfortable with respondent's care and considered him compassionate.
- 47. Respondent left Geisert at approximately 1:30 a.m., on June 7, 2013. Dexter was not monitored overnight. Another veterinarian, Harsimran Saini, took over Dexter's care upon arrival later on June 7, 2013, as respondent was off work that day. Dexter's condition deteriorated and he was not stable enough for surgery. By 7:00 a.m. on June 8, 2013, Dexter was unable to stand, had rapid respiration and an elevated temperature. By 8:00 a.m., Dexter died, and a voicemail message was left asking Ms. Kackstetter to call Geisert. She called back and the receptionist informed her that Dexter had passed away.
- 48. On February 21, 2014, and May 12, 2014, Ms. Kackstatter filed complaints with the Board against respondent and Dr. Saini. She also filed an action against respondent in small claims court but did not prevail.

#### EXPERT OPINION

- 49. The Board requested Dr. Markoff review the allegations regarding Dexter. Dr. Markoff reviewed the medical records, including the radiographs, and authored a written report. Dr. Markoff testified at hearing consistently with her report.
- 50. Regarding the medical care provided to Dexter between June 6, 2013, and his death two days later, Dr. Markoff noted the following concerns in her report:
  - a. Any patient with puncture wounds to the chest represents a potentially critical situation. This dog had "dyspnea" or difficulty breathing and abnormal lung sounds were heard. This is a situation that requires close supervision with a DVM present and likely would require the patient to be on oxygen therapy. This owner should have been offered a referral to a facility that could provide this level of care or the attending DVM should have stayed with the patient.
  - b. Patients with respiratory distress should be put on oxygen. This was not even offered during the day when staff and doctors were present.

- c. Any patient with chest trauma that does not stabilize quickly requires repeated radiographs of the chest. The initial images developed in this case are inadequate to tell us what was happening as the respiratory troubles continued.
- d. The use of IV fluids is proper and expected in cases of shock (when CRT of 2.5-3 seconds would support). However, in cases of pulmonary bleeding or trauma, IV fluid therapy can lead to worsening of respiratory distress. Therefore, in cases such as Dexter's, it is critical to closely monitor the patient with respiratory checks at least every 30 minutes and preferably repeated radiographs while on IV fluids. As soon as the patient's cardiovascular situation is stabilized, the fluid rate should be decreased. None of this occurred in this case.
- e. On June 8, 2013 the patient was found to be lying on its side, febrile, unable to stand and in worsening respiratory distress. Still, oxygen was not provided. Several injections were given and no response to these injections noted-it appears that no one looked at the dog again until it was found dead about an hour later.
- 51. Dr. Markoff also expressed concern regarding the medical records. For example, the CRT time was listed as < 3, which she considered inadequate asserting it is essential to note whether the CRT was < 2 seconds, 2.5 seconds, or 3 seconds as a normal CRT is 1-1.5 seconds and 3 is abnormal. Additionally, the records show no notes or observations between 10 p.m. on June 6, 2013, and 10 a.m. the following morning; and again nothing between 7 p.m. and 7 a.m. from June 7 through 8, 2013. The notation regarding the IV fluids and injections are inadequate to determine what was administered. Finally, the notations throughout the daytime hours occur at two to four-hour intervals which is insufficient for a dog in respiratory distress. Dr. Markoff asserts an animal in Dexter's condition should have been monitored more closely and observations recorded every time the patient was observed.<sup>5</sup>
- 52. Respondent called Dr. Cuellar to address the negligence claims against respondent. Dr. Cuellar reviewed the medical records, radiographs, and the complaint sent to the Board by Ms. Kackstetter. Dr. Cuellar explained that respondent, as the admitting veterinarian, was responsible for Dexter's care from admission until the case was transferred to the next veterinarian on June 7, 2013. Dr. Cuellar did not observe conclusive evidence of pulmonary bleeding on the radiograph taken shortly after admission but considered it a

<sup>&</sup>lt;sup>4</sup> CRT refers to capillary refill time. The CRT measures the time for gum tissue to return pink, or for the capillaries to refill, after depressing the gum making it appear white.

<sup>&</sup>lt;sup>5</sup> Dr. Markoff also initially noted a violation for failing to include the owner's address and telephone number. This concern was adequately addressed via the client information contact sheet.

- possibility. He found no evidence that Dexter's respiratory distress worsened overnight on June 6, 2013, because by the following morning, Dexter's respiration had improved. Accordingly, Dr. Cuellar opined oxygen therapy was not required on June 6, 2013.
- 53. Dr. Cuellar agreed on cross-examination that given the severity of Dexter's condition, respondent failed in certain respects to treat Dexter within the standard of care. Specifically, respondent should have recognized potential pulmonary bleeding on the initial radiograph. Respondent should have examined Dexter before leaving Geisert in the early hours of June 7, 2013, and given Dexter's condition, the dog required continuous monitoring overnight following admission. In these respects, Dr. Cuellar opined respondent fell below the standard of care which constitutes negligence.

#### RESPONDENT'S TESTIMONY REGARDING DEXTER

- 54. Respondent observed Dexter walking but with labored breathing and in pain upon admission. Dexter's had puncture wounds on his left side and respondent knew he required treatment. Respondent did not consider Dexter to be in respiratory distress but recognized wheezing and crackles that he heard upon examination consistent with fluid on the lungs. Respondent believed the heavy breathing may have been attributed to pain. He started an IV and provided fluids, an antibiotic, and pain medication. Respondent recalls Dexter's CRT as close to two seconds which he considers consistent with 3.
- 55. Respondent did not recognize potential pulmonary bleeding on the radiograph. He did not offer oxygen therapy to Dexter because following the IV therapy, respondent observed Dexter's respirations improve. Respondent did not believe overnight monitoring was necessary because Dexter appeared to be improving before respondent left at 1:30 a.m. on June 7, 2013. He was not involved in the rest of Dexter's care and treatment.
- 56. Dr. Markoff and Dr. Cuellar's opinions were generally consistent. Dr. Markoff's opinions encompassed Dexter's entire treatment and Dr. Cuellar's opinions were limited to only the care provided, or required to be provided, by respondent. Their opinions differed regarding when Dexter required oxygen therapy. It was not established by clear and convincing evidence that oxygen therapy was required before noon on June 7, 2013. Dr. Markoff's testimony regarding the specificity required when documenting a CRT was more persuasive than respondent's assertion that 3 is consistent with a CRT of 2.
- 57. It was established by clear and convincing evidence that respondent was negligent in: 1) failing to offer or provide close monitoring and supervision to Dexter overnight on June 6, 2012; 2) failing to examine Dexter before leaving Geisert; and 3) failing to recognize possible pulmonary bleeding on the initial radiographs. It was not established by clear and convincing evidence that respondent should have provided oxygen therapy to Dexter during the time respondent was responsible for Dexter's care.
- 58. Regarding record keeping violations, it was established by clear and convincing evidence that respondent failed to document in Dexter's medical record complete

data from the physical examination, specifically an accurate CRT. It was not established by clear and convincing evidence that respondent failed to record the name and dosage of medications given to Dexter on June 7, 2013, at 10 a.m., nor that he failed to record the daily disposition of Dexter throughout his stay because respondent was not responsible for Dexter's care commencing on the morning of June 7, 2013, when Dr. Saini took over Dexter's care.

#### Animal Patient Hercules

- 59. The Board asserts that respondent is subject to disciplinary action regarding the dental treatment of a Chihuahua, Hercules, for fraud and deception in submitting altered, modified, or falsified medical records to the Board; for unprofessional conduct regarding the submitted medical records; and for record keeping violations.
- 60. On May 5, 2014, Hercules, a nine-year-old Chihuahua, was taken to Geisert for a routine dental cleaning. Hercules' owner, Christine Johnson, testified at the hearing in this matter. Ms. Johnson's husband took Hercules to the cleaning appointment and pre-paid \$125 for cleaning. Ms. Johnson explained that she and her husband were concerned regarding the cost and that he was clear with Geisert staff that any additional treatment needed pre-authorization. Mr. Johnson gave Ms. Johnson's cellular telephone number to contact if anything arose. The Johnsons did not receive a telephone call requesting additional treatment.
- The Johnsons went to pick up Hercules and Ms. Johnson remained in the car 61. with their baby while her husband went to retrieve their pet. Mr. Johnson was informed that a tooth had been extracted and they owned \$178. He refused to pay, asserting that additional treatment was not authorized. Respondent came into the waiting room and informed Mr. Johnson that he personally spoke with Ms. Johnson who authorized the treatment. Mr. Johnson went to the car and both Johnsons returned to speak with respondent. Ms. Johnson was extremely upset and told respondent they had not spoken and she had not authorized additional treatment. Respondent then told her the tooth was infected and needed to be removed. Initially, respondent refused to release Hercules until they paid for the extraction. Ms. Johnson threatened to call the police and the dog was released. Hercules was taken to another veterinarian thereafter who prescribed antibiotics and pain medication. Ms. Johnson requested and received a copy of Hercules' medical records (original records) from a Geisert employee, not respondent. Related to the extraction, the record states, "rt. Mandibular pm, extracted," and that patient, "argued (for not paying on extraction.)" The original record has two areas that are whited out and what was originally written is unknown.
- 62. On May 30, 2014, Ms. Johnson filed a complaint with the Board against respondent. She submitted a copy of the original record she received from Geisert. On July 1, 2014, the Board sent a letter to respondent requesting he submit all records regarding Hercules' treatment. Respondent submitted a handwritten medical record in response (submitted record) that differed significantly from the original record provided to Ms. Johnson.

- 63. The original record states that anesthetic used for the treatment was, "RAK: 0.4 ml." The submitted records state the procedure was, "induced 1 mg I/V Diazepam maintained ISP/02." Regarding the tooth, the submitted record states, "rt mandibular pm, loose which has fallen off while cleaning tartar off," and "flushed with antibiotic." There is also a statement in the submitted record that Hercules had, "Dental tartaro+++," with no similar notation in the original record.
- 64. The Board requested Dr. Lesch-Hollis review the case. Dr. Lesch-Hollis reviewed both sets of medical records and the complaint. She authored a written report and testified consistently with her report.
- 65. Dr. Lesch-Hollis found respondent committed fraud and deception by submitting an altered medical record. She explained that in 30 years of practice she has never encountered a need to "re-create" a medical record or compile information from multiple sources. The records cannot both be accurate in that different anesthetic medication was described in the two versions. The original record specifies an "extraction" and the submitted record states the "tooth fell off" during treatment. Dr. Lesch-Hollis concluded these discrepancies constituted fraud. Altering medical records is also considered unprofessional conduct pursuant to California Code of Regulations, title 16, section 2032.35, which became operative January 1, 2014. This provision specifies that, "[a]ltering or modifying the medical record of any animal, with fraudulent intent, or creating any false medical record, with fraudulent intent, constitutes unprofessional conduct in accordance with Business and Professions Code section 4883(g)."
- Dr. Lesch-Hollis also determined respondent committed record keeping violations regarding the submitted record in that it did not include complete data from a physical examination. Regarding the original records given to Ms. Johnson, the record failed to include a treatment plan for Hercules, and did not contain a description of the dental procedure, name of the surgeon, the type of sedative/anesthetic agents used, and their route of administration and strength.
- 66. Respondent asserted that he did not intend to deceive the Board with the submitted records. Rather, he wanted to provide an accurate and complete picture of what occurred. Respondent explained that he changed the word "extracted" to "fallen off" to be more accurate. He explained that to him the terms are synonymous because the treatment, specifically flushing the area, is the same once the tooth is out. He confirmed that he now provides a more clear description in his medical records.
- 67. Respondent's explanation regarding the medical records is not credible. He failed to call Ms. Johnson during the procedure before extracting Hercules' tooth. The Johnsons were angry and caused a scene in his waiting room. After receiving the Board's inquiry and unaware that Ms. Johnson had the original medical record, respondent recast the incident as the tooth merely falling out on its own rather than being extracted. This was an attempt to discredit Ms. Johnson's complaint to the Board. When confronted with the two

versions, respondent attempts to explain his conduct by asserting the terms are synonymous. Respondent's testimony at hearing was not credible.

68. It was established by clear and convincing evidence that respondent's conduct in submitting the altered records constitutes fraud and deception. It was also established by clear and convincing evidence that the altered records were submitted with the fraudulent intent of making it appear as if they were the original medical record which constitutes unprofessional conduct. It was also established by clear and convincing evidence that respondent committed record keeping violations described by Dr. Lesch-Hollis in Finding 65.

# Animal Patient Lady Carpenter (Lady)

- 69. The Board asserts that respondent is subject to discipline in his care and treatment of a two-year-old Labrador mix who went to Grantline Veterinary Hospital, located in Tracy, California, for a spay and dewclaw removal surgery. The Board asserts that respondent was negligent in failing to adequately ligate the uterine stump which resulted in internal bleeding. The Board further asserts respondent committed fraud and deception by submitting altered, modified, or falsified medical records, which also constitutes unprofessional conduct. Finally, the Board asserts respondent committed record keeping violations in the records submitted to the Board.
- 70. •n August 8, 2013, Erin Carpenter took Lady to Grantline Tracy to be spayed and have her dewclaws removed. Ms. Carpenter testified at the hearing in this matter. Later that day, she received a telephone call informing her that Lady was pregnant. Ms. Carpenter gave consent for respondent to continue with the procedure. That afternoon, Ms. Carpenter's husband, James Carpenter, picked Lady up following the ovariohysterectomy (spay) and dewclaw removal. Mr. Carpenter testified at the hearing in this matter.
- 71. Mr. Carpenter walked Lady to the car and lifted her into the back seat. Lady was typically a high-energy dog but she remained still and quiet on the rear floor of the vehicle on the ride home. Lady was unable to walk independently when they returned home. Mr. Carpenter noticed blood drops in the vehicle. Once inside the house, Lady "collapsed" on the floor and began bleeding excessively.
- 72. Mr. Carpenter took Lady to Central Valley Veterinary Hospital in Manteca for emergency care. Rajvinder Dhanota, D.V.M. determined Lady was bleeding internally and recommended emergency surgery. Mr. Carpenter consented to treatment. Dr. Dhanota testified at the hearing in this matter.
- 73. Dr. Dhanota found the suture on the left uterine artery was loose which was the source of the bleeding. He was unable to determine if the suture was loose when placed or "slipped" after the surgery was complete. Dr. Dhanota ligated the uterine stump, applied new sutures, confirmed the bleeding stopped, and closed Lady's abdomen.

74. On August 28, 2013, Ms. Carpenter sent a complaint to the Board. On January 2, 2014, the Board sent respondent a letter requesting all records for Lady's treatment. On January 22, 2014, respondent submitted a handwritten medical record dated August 8, 2013, and a typewritten record and anesthesia chart. On November 12, 2015, a Board investigator found a third version of the medical record related to the spay procedure (handwritten dated August 8, 2013) while conducting a complaint-related investigation at Grantline.

#### **EXPERT TESTIMONY**

75. The Board requested Dr. Markoff review the complaint related to Lady's care and treatment. Dr. Markoff reviewed all versions of the medical records and the initial complaint. Dr. Markoff prepared a written report. She testified consistently with her report. Respondent called Dr. Cuellar to testify regarding the negligence allegations in Lady's case.

#### **NEGLIGENCE**

- 76. Dr. Markoff determined respondent was negligent for failing to adequately ligate Lady's left uterine artery. She explained that, while infrequent, a ligature slipping happens to every veterinarian at some point in their practice. To avoid this, a veterinarian must suture the stump properly and then confirm that the ligatures have not slipped after the procedure before the patient is closed by checking for bleeding. Dr. Markoff believes the ligature was improperly tied but acknowledged the possibility it slipped following the procedure. She also acknowledged that she does not know if respondent properly checked for bleeding before closing Lady's abdomen. Dr. Markoff opined that the fact the ligature slipped, regardless of when or how, is below the standard of care and constitutes negligence.
- 77. Dr. Cuellar testified on respondent's behalf. Dr. Cuellar agreed with Dr. Markoff that although infrequent, ligatures can slip. If a ligature is not initially tied properly it would be a surgical error or mistake. If a properly tied ligature slips, it is considered a surgical complication. Dr. Cuellar opined that a surgical complication is not below the standard of care. As there is nothing in the medical record to suggest respondent improperly ligated the uterine stump it cannot be concluded respondent's treatment was below the standard of care.
- 78. Dr. Cuellar's testimony was more persuasive than Dr. Markoff's on this point. Dr. Markoff acknowledged that virtually all veterinarians experience a ligature slip throughout their career. Therefore, it is a recognized surgical complication. It was not established by clear and convincing evidence that respondent improperly ligated the uterine stump or failed to check for bleeding before closing Lady's abdomen. It was not established by clear and convincing evidence that respondent's conduct fell below the standard of care. Accordingly, it was not established that he was negligent regarding Lady's spay procedure.

#### FRAUD, DECEPTION, AND UNPROFESSIONAL CONDUCT

79. As noted above, respondent submitted two medical records to the Board upon request (submitted records) in January 2014, and a third version was discovered during a complaint-related investigation (original record). Dr. Markoff compared the records and noted several discrepancies. For example, the submitted records contained complete data from a physical examination on August 8, 2013, but the original records contained none.

The anesthetic protocol was inconsistent between the records. The submitted records indicate Lady was pre-medicated with butorphanol and acepromazine, given intramuscularly at 9:35 a.m., and that anesthesia was introduced with propofol at 10:15 a.m. The original records do not discuss pre-medication and states, "2.5 ml of RAK by IV," was administered.

In addition to the forgoing, the submitted records, including the anesthesia chart, state the medication was introduced at 10:15 a.m. and there is no reference to calls between respondent and the Carpenters. The original records indicate telephone calls were exchanged between the owners and respondent regarding Lady's pregnancy. These calls were documented to have occurred between 12:50 and 12:55 p.m.

The records were inconsistent regarding the synthetic absorbable surgical sutures (PDS) used. The anesthesia chart on the submitted records state 0 PDS was used to ligate the uterine stump, 2-0 PDS was used for wall and subcutaneous tissue closure, and braunamide was used for skin closure. The original records indicate 2-0 PDS was used in all aspects of the surgery.

The original records do not reflect pain medication was given to Lady. The submitted records indicate Metacam was administered. There were various other inconsistencies related to antibiotics dispensed or refused, and no reference in the submitted record to Lady receiving an antibiotic injection prior to surgery which was noted in the original record.

- 80. Dr. Markoff opined that due to the type and degree of differences, the two medical records (original and submitted) were irreconcilably inconsistent. It was impossible to know which, if either, version was accurate. Dr. Markoff concluded this was evidence that respondent intended to deceive the Board and that the submitted records constituted a completely different story, and not a clarification of the original records. According to Df. Markoff, respondent's fraudulent intent renders his conduct unprofessional.
- 81. Respondent testified that he re-created the medical records by compiling information from multiple sources including the original record, sticky notes, and his drug log. Respondent explained that he changed some of the information based on his subsequent recollection and some based on his default position that if nothing abnormal was noted, the outcome was normal or uneventful.
- 82. As before, respondent's testimony was not credible. It was established by clear and convincing evidence that respondent intended to deceive the Board by submitting

records that were more complete that the original record. Additionally, it was established by clear and convincing evidence that the altered medical records submitted in January 2014 constituted unprofessional conduct.

## RECORD KEEPING VIOLATIONS

83. Dr. Markoff reviewed the different versions of the medical record and determined respondent committed numerous record keeping violations. The evidence established by clear and convincing evidence the following violations: 1) respondent failed to adequately document Lady's medical history on the submitted records; 2) respondent failed to document Lady's dewclaw removal in the submitted records; 3) respondent failed to document in the original record the name and dosage of RAK used to induce anesthesia and the dosage of Polyflex administered to Lady; 4) respondent failed to document in the original record a complete physical examination within 12 hours of anesthesia induction; and 5) respondent failed to document adequate pain control in the original record.

# Respondent's Additional Evidence

- 84. Respondent enjoys being a veterinarian, cares about his patients, and wants to provide a high level of service. He is the primary financial provider for his wife, his children, and his parents. Losing his license will be financially devastating for his family. Respondent has been licensed for over ten years and has not previously been disciplined by the Board.
- 85. Respondent noted that he is an important member of the local veterinary community because he serves a poor population. Many of his patients cannot afford to seek veterinary services from alternative facilities because they charge higher prices than Geisert.
- 86. Respondent explained that he was not taught how to maintain medical records in veterinary school and there is no specific record keeping course requirement included in the curriculum for veterinarians to become licensed. He understands that his medical documentation was insufficient. He attended a continuing education class on keeping accurate medical records in August 2017. He is not sure that he is currently compliant with medical record requirements but is willing to continue working to improve his practice.

#### CHARACTER WITNESSES

87. Respondent called seven witnesses to testify regarding his skill and ability as a veterinarian. These witnesses included long-time employees such as Ms. Palacios, Mr. Medina, and Megan Eldred. Each appeared at hearing willingly and was not paid for their attendance. They described respondent as a compassionate and capable veterinarian and as a good boss. They were all aware of the allegations in the Accusation and that knowledge did not change their opinion of respondent.

- 88. Four patients also appeared on respondent's behalf. Each appeared voluntarily, was aware of the allegations in the Accusation, and was not compensated for their travel or time to testify.
  - a. Irma Avila has taken between eight and ten pets to respondent for approximately nine years. She rescues dogs and considers respondent an excellent veterinarian.
  - b. Mary Neville has taken up to 20 cats to respondent for care and treatment.

    Ms. Neville is a licensed nurse, a college professor, and based on her medical training is particularly focused on the quality of care respondent provides. She considers him an excellent veterinarian. She has taken her animals to him for more than ten years and sees him almost monthly. Ms. Neville considers him an important part of the local veterinary community.
  - c. Terisa Catrina has 14 cats and six dogs for which respondent provides veterinary care and treatment. She has always been satisfied with his care. She particularly appreciates that he places care above the financial cost and works with her to arrange payments. She considers him a very good veterinarian and wants to continue as a patient.
  - d. Wanda Centeno gives respondent the "highest rating," and her pets have been treated by respondent for nearly ten years. Ms. Centeno explained that she travels past numerous other veterinarians and would go nearly any distance to have her pets treated by respondent.

## LETTERS OF REFERENCE

89. The character witnesses who testified at hearing also submitted written letters of reference. Respondent submitted 39 reference letters in all. They are consistent in their description that respondent is a compassionate veterinarian who provides a valuable service at a reasonable cost. Several of them rescue animals and explained it would be difficult to continue this practice without respondent. Others describe feeling, "lucky to have a wonderful doctor seeing [their] pets," that he is a, "great doctor," who is concerned for the, "wellbeing of the pets."

# Appropriate Discipline

- 90. The Board alleged fifteen causes for discipline involving the care and treatment of seven dogs and one cat. Respondent prevailed against two allegations of negligence in the care of Lady and Spooky Duke. Causes of discipline were established by clear and convincing evidence as follows:
  - a. Negligence in the care and treatment of three Schnauzer puppies for failing to examine the puppies at a recheck appointment on January 30, 2012, and

- allowing his assistant to examine them instead (Business and Professions Code section 4883, subdivision (i);
- b. Negligence in the care and treatment of Dexter for failing to provide close supervision or monitoring overnight on June 6, 2013, failing to recognize potential pulmonary bleeding on the radiographs; and failing to examine Dexter before leaving in the early morning hours on June 7, 2013 (Business and Professions Code section 4883, subdivision (i));
- c. Record keeping violations were established in the medical records regarding the three Schnauzer puppies, Spooky Duke, Daisy, Dexter, Hercules, and Lady (Business and Professions Code section 4883, subdivision (o));
- d. Fraud and deception was established regarding altered medical records submitted to the Board for Spooky Duke, Hercules, and Lady (Business and Professions Code section 4883, subdivision (i)); and
- e. Unprofessional conduct was established based on the submission of altered medical records with fraudulent intent for Hercules and Lady (Business and Professions Code section 4883, subdivision (g)).
- 91. The Board has adopted Disciplinary Guidelines to follow when affixing discipline. The recommended discipline for the violations found above include a maximum of revocation and a fine and a minimum of revocation stayed with probation and terms.<sup>6</sup>

- a. Negligence (Business and Professions Code section 4883, subdivision (i): The maximum penalty should be based on the following factors: "if the acts or omissions caused harm to an animal or an animal has died, there is limited or no evidence of rehabilitation or no mitigating circumstances at the time of the commission of the offense(s)." The minimum penalties, "may be considered if the acts or omissions did not cause substantial harm to an animal, there is evidence of rehabilitation and there are mitigation circumstances such as no prior discipline, remorse for the harm that occurred, cooperation with the Board's investigation, etc.o."
- b. Record Keeping (Business and Professions Code section 4883, subdivision (o): The maximum penalty should be considered if the acts or omissions caused or threatened

<sup>&</sup>lt;sup>6</sup> The Guidelines specify the following when considering the maximum and minimum penalties:

- 92. Careful consideration was given to the Disciplinary Guidelines and all recommendations therein. Regarding mitigation, respondent is a valued member of the community in Stockton and is held in high regard by numerous patients for his skill, compassion, and reasonably priced services. Additionally, respondent has been licensed to practice veterinary medicine since 2006 and this is the first disciplinary action taken against his license. He purchased Geisert very early in his career and has spent the majority of his career as a managing licensee. He did not benefit from being mentored or trained under other more experienced veterinarians. He acknowledges that he has more to learn regarding keeping appropriate medical records and appears willing to continue to improve in that area. Respondent has self-initiated some rehabilitative efforts such as completing a medical record keeping course.
- 93. Despite the foregoing, respondent's conduct caused actual harm to animals. For example, the three miniature Schnauzer puppies were undoubtedly in pain having pressure bandages affixed for 12 hours. This directly resulted in one puppy losing his paw, an irreversible outcome. Dexter was left alone overnight without monitoring after sustaining

harm to the animal or the public, there was more than one offense, there is limited or no evidence of rehabilitation, and there was no mitigating circumstances at the time of the offense." The minimum penalty may be considered if, "there is evidence of attempts at self-initiated rehabilitation." Those attempts include pro bono services, specific training in areas of weakness, full restitution to persons harmed, and full compliance with all laws since the violation occurred.

- c. Fraud and Deception (Business and Professions Code section 4883, subdivision (i): The maximum penalty may be considered if the acts or omissions caused or threatened harm to animals or the public. The minimum penalty may be considered if the acts did not cause or threaten harm to animals or people, remedial action has been taken to correct the deficiencies, and there is remorse for the negligent act.
- d. Unprofessional Conduct (Business and Professions Code section 4883, subdivision (g): The maximum penalty may be considered if the acts caused or threatened harm to an animal or client. The minimum penalty may be considered if the acts did not cause harm, there are no prior similar violations, and there is evidence of self-initiated rehabilitation.

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traumatic bite injuries. Respondent also committed record keeping violations in varying degrees regarding all animals at issue in this case.

94. Most concerning are the sustained allegations regarding fraud, deception, and unprofessional conduct based on altered medical records. Respondent created false records and submitted them to the Board as if they were accurate. They were replete with misstatements regarding anesthesia protocols. The submitted record regarding Hercules contained an outright fabrication, specifically that his tooth fell out during a routine cleaning when respondent actually extracted the tooth. This was done to undermine the owner's version of what occurred. Rather than acknowledge his conduct and express remorse, respondent attempted to explain away the inconsistencies. He concocted fallacious practices such as asking unlicensed receptionists to anticipate and chart possible anesthetic protocols, and he cast tooth "extraction" and "falling out" as synonymous. Respondent's testimony was not credible and constituted ongoing deception.

Veterinarians hold a position of trust, respect, and importance in society as they render care to people's beloved pets. The public deserves veterinarians who can render competent care and who are also honest and ethical in their interaction with the public and the Board. Respondent failed to uphold these tenets in his interactions with the Board and before this tribunal. "Dishonesty is not an isolated act; it is more a continuing trait of character." (*Paulino v. Civ. Serv. Com.* (1985) 175 Cal.App.3d 962, 972.) When all the evidence is considered, respondent cannot continue to practice veterinary medicine, even under a stayed revocation with probation, at this time.

#### Costs

- 95. Business and Professions Code section 125.3 provides, in pertinent part, that the Board may request the Administrative Law Judge to direct a licentiate found to have committed violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case. Complainant submitted in evidence a certification of costs from the Deputy Attorney General, and complainant, which established the costs of prosecution and investigation in the sum of \$51,280.
- 96. As set forth below in the Legal Conclusions, the costs incurred by the Board in connection with its investigation and prosecution of this case were reasonable given the allegations and their complexity.

#### **LEGAL CONCLUSIONS**

1. Complainant bears the burden of proving cause for disciplinary action by clear and convincing evidence to a reasonable certainty to discipline respondent's professional license. (See *Ettinger v. Board of Medical Quality Assurance* (1982) 135 Cal.App.3d 853, 855-856.)

# APPLICABLE LAW

2. Business and Professions Code section 4875 provides in pertinent part that:

The board may revoke or suspend for a certain time the license or registration of any person to practice veterinary medicine or any branch thereof in this state after notice and hearing for any of the causes provided in this article. In addition to its authority to suspend or revoke a license or registration, the board shall have the authority to assess a fine not in excess of five thousand dollars (\$5,000) against a licensee or registrant for any of the causes specified in Section 4883. A fine may be assessed in lieu of or in addition to a suspension or revocation.

3. Pursuant to Business and Professions Code section 4883, "the board may deny, revoke, or suspend a license or registration or assess a fine as provided in Section 4875" for any of the following pertinent reasons:

(g) Unprofessional conduct...

(i) Fraud, deception, negligence, or incompetence in the practice of veterinary medicine.

$$[\P] \dots [\P]$$

- (o) Violation, or the assisting or abetting violation, of any regulations adopted by the board pursuant to this chapter.
- 4. California Code of Regulations, title 16, section 2032.3 provides the following with regard to the obligation of veterinarians to prepare written records concerning animals in their care:
  - (a) Every veterinarian performing any act requiring a license pursuant to the provisions of Chapter 11, Division 2, of the code, upon any animal or group of animals shall prepare a legible, written or computer generated record concerning the animal or animals which shall contain the following information:
    - (1) Name or initials of the person responsible for entries.
    - (2) Name, address and phone number of the client.

- (3) Name or identity of the animal, herd or flock.
- (4) Except for herds or flocks, age, sex, breed, species, and color of the animal.
- (5) Dates (beginning and ending) of custody of the animal, if applicable.
- (6) A history or pertinent information as it pertains to each animal, herd, or flock's medical status.
- (7) Data, including that obtained by instrumentation, from the physical examination.
- (8) Treatment and intended treatment plan, including medications, dosages, route of administration, and frequency of use.
- (9) Records for surgical procedures shall include a description of the procedure, the name of the surgeon, the type of sedative/anesthetic agents used, the route of administration, and their strength if available in more than one strength.
- (10) Diagnosis or assessment prior to performing a treatment or procedure.
- (11) If relevant, a prognosis of the animal's condition.
- (12) All medications and treatments prescribed and dispensed, including strength, dosage, route of administration, quantity, and frequency of use.
- (13) Daily progress, if relevant, and disposition of the case.
- 5. California Code of Regulations, title 16, section 2032.35 states that altering or modifying the medical record of any animal, with fraudulent intent, or creating any false medical record, with fraudulent intent, constitutes unprofessional conduct in accordance with Business and Professions Code section 4883, subdivision (g).

#### CAUSE FOR DISCIPLINARY ACTION

6. Negligence. Respondent had a duty to engage in veterinary medical practice with the degree of learning and skill ordinarily possessed by a reputable veterinarian practicing in the same or similar locality and under similar circumstances. He was further obligated to use reasonable diligence and his best judgment in the exercise of his professional skill and in the application of his learning, in an effort to accomplish the purpose for which he was engaged. A failure to fulfill such duty is negligence. (*Keen v. Prisinzano* (1972) 23 Cal.App.3d 275, 279; *Huffman v. Lundquist* (1951) 35 Cal.2d 465, 473.) A veterinarian is not necessarily negligent because of errors in judgment or because efforts prove unsuccessful. A veterinarian is negligent only where the error in judgment or lack of success is due to a failure to perform any of the duties required of reputable members of the veterinary profession practicing under similar circumstances. (*Norden v.* 

Hartman (1955) 134 Cal.App.2d 333,\$37; Blackv. Caruso (1960) 187 Cal.App.2d 195.) A lack of ordinary care defines negligent conduct.

Cause exists for disciplinary action under Business and Professions Code section 4883, subdivision (i), regarding the Schnauzer puppies as set forth in Findings 14 and 17; and regarding Dexter as set forth in Findings 49 through 57.

Negligence was not established with regard to other matters alleged in this case. (See Findings 32 through 34, and 75 through 78.)

- 7. Fraud or Deception. Cause for disciplinary action exists under Business and Professions Code section 4883, subdivision (i), for Spooky Duke as set forth in Findings 35 through 37; for Hercules as set forth in Findings 62-68; and for Lady as set forth in Findings 79 through 82.
- 8. Recordkeeping. Cause for disciplinary action exists under Business and Professions Code section 4883, subdivision (o), based on respondent's failure to comply with California Code of Regulations, title 16, section 2032.3, subdivisions (1), and (3) through (12) as set forth in Findings 18 through 20, 38, 43, 58, 65, 68, and 83.
- 9. Unprofessional Conduct. Cause for disciplinary action exists under Business and Professions Code section 4883, subdivision (g), based on respondent's failure to comply with California Code of Regulations, title 16, section 2032.435, by reason of the matters set forth in Findings 68 and 82.

#### Costs

10. Pursuant to Business and Professions Code section 125.3, a licensee found to have violated a licensing act may be ordered to pay the reasonable costs of investigation and prosecution of a case. In Zuckerman v. Board of Chiropractic Examiners (2002) 29 Cal.4th 32, the California Supreme Court set forth factors to be considered in determining the reasonableness of the costs sought pursuant to statutory provisions like Business and Professions Code section 125.3. These factors include whether the licensee has been successful at hearing in getting charges dismissed or reduced, the licensee's subjective good faith belief in the merits of his position, whether the licensee has raised a colorable challenge to the proposed discipline, the financial ability of the licensee to pay, and whether the scope of the investigation was appropriate in light of the alleged misconduct.

Complainant seeks \$51,280 in costs associated with its investigation and enforcement of this case. The cost itemization submitted by the Board in support of its request has been reviewed and determined to be reasonable given the allegations and their complexity. Respondent was successful in reducing some charges after hearing; however, complainant substantially prevailed on the majority of the claims. Additionally, the evidence demonstrated that respondent engaged in fraud and deceit, was negligent in his conduct regarding two animals, and unprofessional in submitting altered medical records. When all

of the Zuckerman factors are considered, the costs sought by complainant should not be reduced.

#### Conclusion

- 11. The objective of an administrative proceeding relating to licensing is to protect the public. Such proceedings are not for the primary purpose of punishment. (See Fahmy v. Medical Board of California (1995) 38 Cal.App.4th 810, 817.) After considering all evidence presented, including in mitigation and rehabilitation, license revocation is necessary to protect the public in this case. Additionally, a \$5,000 fine for the sustained allegations is ordered. (Bus. & Prof. Code, § 4883.)
- 12. Complainant also sought to revoke Premises Certificate of Registration No. HSP 1592 issued to respondent as Managing Licensee. The evidence established the Premises Certificate Registration transferred to Shahid Zaigham, D.V.M. Accordingly, the certificate is not revoked.

#### ORDER

- 1. Veterinary License number VET 16252 issued to Amandeep Singh, D.V.M. is REVOKED, pursuant to Legal Conclusions 6 through 9, jointly and individually.
- 2. Premises Certificate of Registration Number HSP 1592, issued to Amandeep Singh, D.V.M, is NOT REVOKED because he is no longer the managing licensee.
- 3. Respondent shall pay the Board a fine in the amount of \$5,000 for the sustained violations of Business and Professions Code section 4883.
- 4. Respondent shall pay the Board \$51,280, as the reasonable cost of investigation and enforcement of this case pursuant to Business and Professions Code section 125.3. Payment shall be arranged through the Board.

DATED: January 5, 2018

Docusigned by:

Joy Pedmon

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JOY REDMON
Administrative Law Judge
Office of Administrative Hearings

1 2	KAMALA D. HARR IS Attorney General of California JANICE K. LACHMAN Supervising Deputy Attorney General	FILED - STATE OF CALIFORNIA Veterinary Medical Board Sacramento, CA on August 23, 2017 By
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7	Facsimile: (916) 327-8643 Atterneys for Complainant	
8	BEFORE THE VETERINARY MEDICAL BOARD DEPARTMENT OF CONSUMER AFFAIRS	
10	STATE OF C	CALIFORNÍA
11	In the Matter of the Accusation Against:	Case No. AV 2015 26
12	AMANDEEP SINGH, DVM	OAH No. 2016050594
13	332 W. Grantline Road Tracy, California 95376	SECOND AMENDED ACCUSATION
14	Veterinary License No. VET 16252	
15	and	
16	GEISERT ANIMAL HOSPITAL	
17	AMANDEEP SINGH, DVM, MANAGING LICENSEE	
18	1827 S. El Dorado Street Stockton, Califernia 95206	
19	Premises Certificate of Registration No. HSP 1592	
20   21	Respondent.	
22	Complainant alleges:	_
23		TIES
24	1. Annemarie Del Mugnaio ("Complainant") brings this Second Amended Accusation	
25	solely in her official capacity as the Executive Officer of the Veterinary Medical Board	
26	("Board"), Department of Consumer Affairs. This Second Amended Accusation replaces in its	
27	entirety First Amended Accusation No. AV 2015 26 filed on December 13, 2016.	
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		-

- 2. On or about June 12, 2006, the Board issued Veterinary License Number VET 16252 to Amandeep Singh, DVM ("Respondent"). The veterinary license was in full force and effect at all times relevant to the charges brought herein and will expire on August 31, 2019, unless renewed.
- 3. On or about February 22, 1972, the Board issued Premises Certificate of Registration Number HSP 1592 to Geisert Animal Hospital. On or about January 1, 2007, Respondent became the managing licensee of Geisert Animal Hospital. The premises certificate of registration was in full force and effect at all times relevant to the charges brought herein and will expire on May 31, 2018, unless renewed.

#### JURISDICTION/STATUTORY AND REGULATORY PROVISIONS

- 4. This Accusation is brought before the Board under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.
- Section 4875 provides, in pertinent part, that the Board may revoke or suspend the license of any person to practice veterinary medicine, or any branch thereof, in this state for any causes provided in the Veterinary Medicine Practice Act (Bus. & Prof. Code § 4800, et seq.). In addition, the Board has the authority to assess a fine not in excess of \$5,000 against a licensee for any of the causes specified in section 4883 of that code. Such fine may be assessed in lieu of, or in addition to, a suspension or revocation.
- 6. Section 118, subdivision (b), provides, in pertinent part, that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary action during the period within which the license may be renewed, restored, reissued or reinstated.
- 7. Section 477, subdivision (b), provides, in pertinent part, that a "license" includes "registration" and "certificate".
- 8. Section 4853.6 provides, in pertinent part, that the Board shall withhold, suspend or revoke the registration of a veterinary premises when the license of the licensee manager to practice veterinary medicine is revoked or suspended.

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between Respondent and M. G. regarding how long the bandages should have been left on the puppies' paws. M. G. refused further care from Respondent and told him that she would be taking the puppies to another veterinary facility.

- 17. On and between February 3, 2012 and February 29, 2012, the puppies were treated by H. B., DVM. On or about February 6, 2012, Dr. H. B. noted in the medical records that one puppy's right paw had fallen off, and the paws on the other two puppies were swollen, inflamed tand oozing.
- Respondent. M. G. stated that when she received the puppies on January 29, 2012, bandages were wrapped tightly around their front paws. That same day, M. G. called Geisert and was advised to take the bandages off in 24 hours. On or about January 30, 2012, M. G. took the bandages off and observed open wounds and deep lacerations around the puppies' paws. Later that evening, M. G. took the puppies back to Geisert. The receptionist told M. G. that she would get Respondent. Respondent's "assistant", Alex, came out to look at the puppies and told M. G. that he worked under Respondent. Alex told M. G. that the puppies looked fine and the swelling would eventually go down. On or about January 31, 2012, M. G. returned the puppies to Geisert and waited until approximately 7:30 p.m. to see Respondent. When Respondent arrived at Geisert, M. G. asked him who performed the procedures on the puppies. Respondent would not answer the question and instead, offered M. G. a \$400 credit on the invoice. Respondent also offered to amputate one of the puppies' paws at no charge.

#### FIRST CAUSE FOR DISCIPLINE

#### (Negligence)

19. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (i), in that Respondent was guilty of negligence in his care and treatment of the three mini-Schnauzer puppies, as follows: Respondent failed to examine the three puppies at the recheck appointment on January 30, 2012, and allowed his assistant, Alex, to examine the puppies instead.

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#### SECOND CAUSE FOR DISCIPLINE

## (Violations of Regulations Adopted by the Board)

20. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (o), in that Respondent failed to comply with Regulation 2032.3 (record keeping), subdivision (a)(7), as follows: On or about January 29, 2012, Respondent failed to document on the medical record complete data from the physical examinations of the three puppies, including but not limited to, the animal/patients' respiratory rates and pulses. Further, Respondent noted the weight and temperature of only one of the puppies, described by Respondent as "salt & pepper" colored.

#### ANIMAL/PATIENT "SPOOKY D. DUKE"

- 21. On or about March 20, 2012, R. G. took his cat, Spooky D. Duke ("Spooky"), to Respondent at Geisert to be spayed.
- 22. On or about March 21, 2012, R. G. returned to Geisert to pick Spooky up and found that the cat was covered in urine and the incision was "oozing blood". Ketoprofen syrup (pain medication) was dispensed for home. That same day, R. G. took Spooky to S. S., DVM. Dr. S. S. noted upon examination that the cat was soiled in urine, that the spay incision was inflamed and swollen, and that the cat had a temperature. An antibiotic injection was given and an antibiotic was dispensed for home.
- 23. On or about March 26, 2012, R. G. took Spooky to M. P., DVM. Dr. M. P. examined Spooky and found that the incision had dehisced (come apart). Dr. M. P. anesthetized Spooky and repaired the incision (the incision was debrided and closed with subcutaneous and subcuticular sutures). That same day, Dr. M. P. received a copy of Spooky's medical record (handwritten) from Geisert (Dr. M. P. subsequently provided the record to the Board).
- 24. On or about April 23, 2012, the Board received a complaint from R. G. against Respondent.
- 25. On or about May 2, 2012, the Board sent Respondent a letter, requesting that he submit all medical records relating to Spooky's treatment to the Board.
- 26. On or about March 14, 2013, Respondent submitted a copy of Spooky's medical record (handwritten) to the Board along with a typewritten copy of the record.

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# (Fraud and Deception)

- 27. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (i), in that Respondent was guilty of fraud and/or deception when he altered, modified, or falsified Spooky's medical record, as follows:
- Respondent documented on the medical record Respondent provided to the Board on March 14, 2013, a complete description of Spooky, including sex, birthdate, color and markings. In fact, these notes or chart entries were not recorded on the medical record Respondent provided to Dr. M. P. on March 26, 2012.
- Respondent initialed or signed his chart entry of March 21, 2012, on the medical b. record he provided to the Board on March 14, 2013. In fact, Respondent did not initial or sign this chart entry on the medical record he provided to Dr. M. P. on March 26, 2012.
- Respondent documented on the medical record he provided to the Board on March 14, 2013, complete data from a physical examination. In fact, there was no indication; i.e., notes or chart entries, on the medical record Respondent provided to Dr. M. P. on March 26, 2012, that Respondent had conducted a physical examination of Spooky.
- d، Respondent documented on the medical record he provided to the Board on March 14, 2013, his anesthetic protocol and a description of the surgical (spay) procedure. In fact, the anesthetic protocol was not recorded on the medical record Respondent provided to Dr. M. P. on March 26, 2012. Further, the description of the surgical procedure was inadequate or incomplete.
- Respondent documented on the medical record he provided to the Board on March 14, 2013, information regarding the desages and concentration of drugs administered to Spooky. In fact, these notes or chart entries were not recorded on the medical record Respondent provided to Dr. M. P. on March 26, 2012.

#### FOURTH CAUSE FOR DISCIPLINE

#### (Negligence)

- 28. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (i), in that Respondent was guilty of negligence in his care and treatment of Spooky, as follows:
  - a. Respondent failed to feed and/or monitor Spooky during his overnight stay at Geisert.
- b. Respondent knowingly discharged Spooky despite the fact that the cat was covered in urine.

#### FIFTH CAUSE FOR DISCIPLINE

#### (Violations of Regulations Adopted by the Board)

- 29. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (o), in that Respondent failed to comply with Regulations 2032.3 (record keeping) and 2032.4 (anesthesia), as follows:
- a. Respondent failed to include his name or initials on the medical record he provided to Dr. M. P. on March 26, 2012, in violation of Regulation 2032.3, subdivision (a)(1).
- b. Respondent failed to record R. G.'s address and telephone number on both versions of the medical record, in violation of Regulation 2032.3, subdivision (a)(2).
- c. Respondent failed to record on the medical record he provided to Dr. M. P. on March 26, 2012, a complete description of Spooky, including age, sex, breed, species, and color, in violation of Regulation 2032.3, subdivision (a)(4).
- d. Respondent failed to record Spooky's history on both versions of the medical record, in violation of Regulation 2032.3, subdivision (a)(6).
- e. Respondent failed to include on the medical record he provided to Dr. M. P. on March 26, 2012, an adequate or complete description of the surgical procedure (spay), in violation of Regulation 2032.3, subdivision (a)(9).
- f. Respondent failed to record on the medical record he provided to Dr. M. P. on March 26, 2012, the name, dosage, frequency of use, quantity and strength of "Syrup Vel Keto" that he dispensed to Spooky or the anesthetic agents he administered to the animal/patient, in violation of Regulation 2032.3, subdivision (a)(12).

g. Respondent failed to document on the medical record he provided to Dr. M. P. on March 26, 2012, a physical examination of Spooky within 12 hours of the anesthetic (spay) procedure, in violation of Regulation 2032.4, subdivision (b)(1).

#### **ANIMAL/PATIENT "DAISY"**

30. On or about May 1, 2012, C. T. took her Chihuahua, Daisy, to Respondent at Geisert to be spayed and paid Respondent \$141 in advance for the procedure. When C. T. returned to Geisert to pick Daisy up, she was told that the dog was pregnant and was charged an additional fee of \$39. That same day, C. T. filed a complaint with the Board against Respondent. C. T. stated that it was impossible Daisy was pregnant because she had a Litter of puppies eight weeks earlier and had been indoors since that time with no access to male dogs.

#### SIXTH CAUSE FOR DISCIPLINE

#### (Violations of Regulations Adopted by the Board)

- 31. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (o), in that Respondent failed to comply with Regulation 2032.3 (record keeping), as follows:
- a. Respondent failed to include his name or initials on Daisy's medical record, in violation of Regulation 2032.3, subdivision (a)(1).
- b. Respondent failed to record C. T.'s address and telephone number on Daisy's medical record, in violation of Regulation 2032.3, subdivision (a)(2).
- c. Respondent failed to document on the medical record Daisy's history, including pregnancy and vaccines, in violation of Regulation 2032.3, subdivision (a)(6).
- d. Respondent failed to record on Daisy's medical record the quantity of ketofen syrup sent home with the dog, in violation of Regulation 2032.3, subdivision (a)(12).
- e. Respondent failed to document on the medical record an evaluation of Daisy's post-operative condition and disposition of the case, in violation of Regulation 2032.3, subdivision (a)(13).

#### ANIMAL/PATIENT "DEXTER"

32. •n or about June 6, 2013, J. B. took her 8 year old male Yorkshire mix, Dexter, to Respondent at Geisert after Dexter was attacked by a large German Shepherd. Respondent noted

in the medical records that Dexter was depressed and had a rapid heart-rate, wheezes and crackles in his chest, labored breathing, and deep puncture wounds on the left side of his chest. Dexter was started on IV fluids and was given pain medication, antibiotics, and an anti-inflammatory steroid injection. Radiographs were taken and no rib fractures were seen. J. B. was told that once Dexter was stabilized, he would be anesthetized to suture the wounds.

- 33. On or about June 7, 2018, Respondent noted in the medical records that Dexter was not eating or drinking and was still having respiratory difficulty. Surgery was not performed as Dexter was not "stabilized."
- 34. On or about June 8, 2013, at approximately 7:00 a.m., Respondent documented in the medical records that Dexter was laterally recumbent with rapid respiration and an elevated temperature. At approximately 8:30 a.m., a note was made in the medical records that a message was left on the owner's message machine "to call back" as Dexter had died "around 8AM."

#### SEVENTH CAUSE FOR DISCIPLINE

#### (Negligence)

- 35. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (i), in that Respondent was guilty of negligence in his care and treatment of Dexter, as follows:
- a. Respondent failed to offer or provide proper close supervision or monitoring of Dexter despite his respiratory distress and known chest trauma.
- b. Respondent failed to properly monitor Dexter with repeated examinations and radiographic imaging despite his worsening respiratory distress.
- c. Respondent failed to provide oxygen therapy to Dexter despite his respiratory distress.
  - d. Respondent failed to recognize potential pulmonary bleeding on the radiographs.

#### EIGHTH CAUSE FOR DISCIPLINE

#### (Violations of Regulations Adopted by the Board)

36. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (o), in that Respondent failed to comply with Regulation 2032.3 (record keeping), as follows:

- a. Respondent failed to record on Dexter's medical records J. B.'s address and telephone number, in violation of Regulation 2032.3, subdivision (a)(2).
- b. Respondent failed to document on Dexter's medical records complete data from the physical examination, specifically, an accurate capillary refill time (CRT), in violation of Regulation 2032.3, subdivision (a)(7).
- c. Respondent failed to record on the medical records the name and dosage of medications that were given to Dexter on June 7, 2013, at 10:00 a.m., in violation of Regulation 2032.3, subdivision (a)(12).
- d. Respondent failed to adequately record on the medical records the daily disposition of the animal/patient despite the fact that Dexter had been hospitalized at Geisert from June 6, 2013 to June 8, 2013, in violation of Regulation 2032.3, subdivision (a)(13).

#### ANIMAL/PATIENT "HERCULES"

- 37. On or about May 5, 2014, C. J.'s husband took their 9 year old Chihuahua, Hercules, to Respondent at Geisert for a dental prophylactic cleaning. Later that evening, C. J. received a call from Respondent, informing her that she could pick up Hercules in about 45 minutes. Respondent also told C. J. that he had to extract one of Hercules' teeth.
- 38. On or about May 30, 2014, C. J. filed a complaint with the Board, alleging that Respondent extracted Hercules' tooth without her authorization. C. J. provided the Board with a copy of Hercules' medical record which she had received from Geisert. Respondent noted on the record, "Rt mandibular PMlt(right mandibular premolar tooth) extracted".
- 39. On or about July 1, 2014, the Board sent Respondent a letter, requesting that he submit all medical records relating to Hercules' treatment to the Board. Respondent submitted a copy of Hercules' medical record (handwritten) to the Board along with a typewritten copy of the record.

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#### NINTH CAUSE FOR DISCIPLINE

#### (Unprofessional Conduct)

- 40. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (g), for unprofessional conduct, as defined in Regulation 2032.35, in that Respondent fraudulently altered or modified Hercules' medical record, as follows:
- a. Respondent documented on the medical record he provided to the Board that Hercules' temperature was normal and that he had "dental tartar (+++)." In fact, these notes or chart entries were not recorded on the medical record C. J. provided to the Board.
- b. Respondent documented on the medical record he provided to the Board complete data from the physical examination. In fact, the physical examination documented on the medical record C. J. provided to the Board was incomplete.
- Respondent documented on the medical record he provided to the Board that Hercules was induced with 1 mg diazepam IV and was intubated and maintained on isoflurane and oxygen. In fact, these notes or chart entries were not recorded on the medical record C. J. provided to the Board (Respondent did note that 0.4 ml of RAK was administered to Hercules).
- d. Respondent documented on the medical record he provided to the Board that a "dental cleaning" was performed on Hercules and that the right mandibular premolar was loose and "fell out" during the cleaning procedure. In fact, these notes or chart entries were not recorded on the medical record C. J. provided to the Board. Further, Respondent documented on the latter record that the owner argued "for not paying on extraction."

#### TENTH CAUSE FOR DISCIPLINE

#### (Fraud and Deception)

Respondent is subject to disciplinary action pursuant to section 4883, subdivision (i), in that Respondent was guilty of fraud and/or deception when he altered, modified, or falsified Hercules' medical record, as set forth in paragraph 40 above.

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#### ELEVENTH CAUSE FOR DISCIPLINE

#### (Violations of Regulations Adopted by the Board)

- 42. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (o), in that Respondent failed to comply with Regulation 2032.3 (record keeping), as follows:
- a. Respondent failed to document on the medical record C. J. provided to the Board complete data from the physical examination, in violation of Regulation 2032.3, subdivision (a)(7).
- b. Respondent failed to document on the medical record C. J. provided to the Board a treatment plan for Hercules, in violation of Regulation 2032.3, subdivision (a)(8).
- c. Respondent failed to document on the medical record C. J. provided to the Board a description of the dental procedure (tooth extraction), the name of the surgeon, the type of sedative/anesthetic agents used, and their route of administration and strength, if available in more than one strength, in violation of Regulation 2032.3, subdivision (a)(9).

#### ANIMAL/PATIENT "LADY CARPENTER"

- A3. On or about August 8, 2013, E. C. took her 2 year old female Labrador mix to Respondent at Grantline Veterinary Hospital (now known as Allied Veterinary Services) locatedn in Tracy, California, to be spayed and to have her dewclaws removed. After admission, Respondent determined that Lady was pregnant and called E. C., who gave Respondent permission to proceed with the procedure. An ovariohysterectomy and removal of the dewclaws was performed and Lady recovered from anesthesia. After picking Lady up from the hospital, E. C.'s husband noted significant bleeding from the incision. Lady was taken to Central Valley Veterinary Hospital located in Manteca, California, for emergency care. Surgical exploration revealed that the left uterine artery was actively bleeding due to inadequate surgical ligation.

  R. D., DVM ligated the uterine stump, applied sutures, and the bleeding was controlled.
- 44. On or about August 28, 2013, the Board received a complaint from E. C. against Respondent.
- 45. On or about January 2, 2014, the Board sent Respondent a letter, requesting that he submit all medical records relating to Lady's treatment to the Board.

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On or about January 22, 2014, Respondent submitted a copy of Lady's medical 46. record (handwritten) dated August 8, 2013, to the Board along with a typewritten copy of the record and an Anesthesia Chart.

On or about November 12, 2015, a Board inspector performed a complaint-related inspection of Grantline Veterinary Hospital and obtained copies of various animal records, including records for Lady. The hospital had provided the inspector with a copy of a handwritten record dated August 6, 2013, duplicates of the records Respondent submitted to the Board on January 22, 2014, and a second and different version of the record dated August 8, 2013, for the ovariohysterectomy.

#### TWELFTH CAUSE FOR DISCIPLINET

#### (Unprofessional Conduct)

- 48. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (g), for unprofessional conduct, as defined in Regulation 2032.35, in that Respondent fraudulently altered or modified Lady's medical records, as follows:
- a. The record dated August 6, 2013, indicated that laboratory results supported the needt for antibiotics before and after surgery and that the owner had picked up a prescription for amoxicillin on August 6, 2013. The second/different version of the record dated August 8, 2013, provided during the inspection, indicated that a second antibiotic was recommended and refused by the owner. None of this information was documented on the record dated August 8, 2013, t submitted to the Board on January 22, 2014.
- Respondent documented on the record dated August 8, 2013, submitted to the Board on January 22, 2014, complete data from a physical examination. In fact, there was no indication on the second/different version of the record dated August 8, 2013, provided during the inspection, that Respondent had conducted a physical examination of Lady.
- Respondent documented on the second/different version of the record dated August 8, c. 2013, provided during the inspection, that a rabies vaccine was given to Lady. In fact, this information was not documented on the record dated August 8, 2013, submitted to the Board on January 22, 2014.

1	d. Respondent documented on the second/different version of the record dated August 8	
2	2013, provided during the inspection, that an antibiotic injection was given to Lady before the	
3	surgery. In fact, this information was not documented on the record dated August 8, 2013,	
4	submitted to the Board on January 22, 2014.	
5	e. Respondent documented on the second/different version of the record dated August 8	
6	2013, provided during the inspection, that anesthesia was induced with 2.5 ml of RAK by IV. In	
7	fact, Respondent documented on the Anesthesia Chart that Lady was pre-medicated with	
8	butorphanol and acepromazine, given IM (intramuscularly), at 9:35 a.m. and that anesthesia was	
9	induced with propofol, given IM, at 10:15 a.m.	
10	f. Respondent documented on the second/different version of the record dated August 8	
11	2013, provided during the inspection, that various phone calls were made to the owner between	
12	12:50 p.m. and 12:55 p.m. to discuss the fact that Lady was pregnant and to obtain approval for	
13	the procedure. In fact, Respondent documented on the Anesthesia Chart that anesthesia was	
14	induced at 10:15 a.m. Further, the information pertaining to the phone calls was not documented	
15	on the record dated August 8, 2013, submitted to the Board on January 22, 2014.	
16	g. Respondent documented on the second/different version of the record dated August 8	
17	2013, provided during the inspection, that 2-0 PDS was used in all aspects of the surgery. In fact	
18	Respondent documented on the Anesthesia Chart that 0 PDS was used to ligate the stump,	
19	2-0 PDS was used for closure of the body wall and subcutaneous tissue, and braunamide was used	
20	to close the skin.	
21	h. Respondent documented on the Anesthesia Chart that Metacam, a pain medication,	
22	was administered to Lady on August 8, 2013. In fact, this information was not documented on	
23	the second/different version of the record dated August 8, 2013, provided during the inspection.	
24	THIRTEENTH CAUSE FOR DISCIPLINE	
25	(Negligence)	
26	49. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (i),	
2.7	in that Respondent was guilty of negligence in his care and treatment of Lady, as follows:	
28	Respondent failed to adequately ligate the uterine stump, specifically, the left uterine artery.	

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#### FOURTEENTH CAUSE FOR DISCIPLINE

#### (Fraud and Deception)

50. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (i), in that Respondent was guilty of fraud and/or deception when he altered, modified, or falsified Lady's medical records, as set forth in paragraph 48 above.

#### FIFTEENTH CAUSE FOR DISCIPLINE

#### (Violations of Regulations Adopted by the Board)

- 51. Respondent is subject to disciplinary action pursuant to section 4883, subdivision (o), in that Respondent failed to comply with Regulations 2032.3 (record keeping) and 2032.4 (anesthesia), as follows:
- a. Respondent failed to include his name or initials on the record dated August 6, 2013, and the second/different version of the record dated August 8, 2013, provided during the inspection, in violation of Regulation 2032.3, subdivision (a)(1).
- b. Respondent failed to include E. C.'s address on the record dated August 6, 2013, the second/different version of the record dated August 8, 2013, provided during the inspection, and the record dated August 8, 2013, submitted to the Board on January 22, 2014, in violation of Regulation 2032.3, subdivision (a)(2). Further, Respondent failed to include E. C.'s telephone number on the record dated August 8, 2013, submitted to the Board.
- c. Respondent failed to document an adequate medical history of Lady on the record dated August 8, 2013, submitted to the Board on January 22, 2014, in violation of Regulation 2032.3, subdivision (a)(6).
- d. Respondent failed to document on both records dated August 8, 2013, a description of the surgical procedure for the removal of Lady's dewclaws and subsequent bandaging, in violation of Regulation 2032.3, subdivision (a)(9).
- e. Respondent failed to document on the second/different version of the record dated August 8, 2018, provided during the inspection, the name and dosage of RAK used to induce anesthesia, in violation of Regulation 2032.3, subdivision (a)(12). Further, Respondent failed to document on that same record the dosage of Polyflex administered to Lady.

- f. Respondent failed to document on the second/different version of the record dated August 8, 2013, provided during the inspection, a complete physical examination of Lady within 12 hours of induction of anesthesia, in violation of Regulation 2032.4, subdivision (b)(1).
- g. Respondent failed to provide adequate pain control for a major surgical procedure, the ovariohysterectomy, in violation of Regulation 2032.4, subdivision (b).

#### PREMISES CERTIFICATE OF REGISTRATION

52. Pursuant to section 4853.6, if the Board should suspend or revoke Veterinary License Number VET 16252, issued to Amandeep Singh, DVM, the Board shall suspend or revoke Premises Certificate of Registration Number HSP 1592 issued to Respondent as managing licensee of Geisert Animal Hospital.

#### **PRAYER**

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Veterinary Medical Board issue a decision:

- 1. Revoking or suspending Veterinary License Number VET 16252, issued to Amandeep Singh, DVM;
- 2. Revoking or suspending Premises Certificate of Registration Number HSP 1592, issued to Amandeep Singh, DVM, managing licensee of Geisert Animal Hospital;
- 3. Assessing a fine against Amandeep Singh, DVM not in excess of \$5,000 for any of the causes specified in Business and Professions Code section 4883;
- 4. Ordering Amandeep Singh, DVM to pay the Veterinary Medical Board the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3; and
  - 5. Taking such other and further action as deemed necessary and proper.

DATED: (lignst 23,0017

ANNEMARIE DEL MUGNAIO

Executive Officer

Veterinary Medical Board

Department of Consumer Affairs

State of California

Complainant

# EXHIBIT 6

# BEFORE THE VETERINARY MEDICAL BOARD DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

# In the Matter of the Citation Against:

Amandeep Singh, DVM

Citation No. 4602022000254

#### **CITATION**

Complainant alleges:

#### **PARTIES**

- 1. Jessica Sieferman ("Complainant") brings this Citation solely in her official capacity as the Executive Officer of the Veterinary Medical Board ("Board"), Department of Consumer Affairs, State of California.
- 2. The Board's records reveal that Amandeep Singh ("Respondent") was issued a veterinary license on June 12, 2006. Said license was revoked on April 18, 2018.

#### **STATUTORY PROVISIONS**

- 3. Business and Professions Code (BPC) sections 125.9, 148, and 4875.2 and California Code of Regulations (CCR), title 16, section 2043 authorize the Executive Officer of the Board to issue citations containing orders of abatement and/or administrative fines against a licensee of the Board, or to an unlicensed person, who has committed any acts or omissions in violation of the Veterinary Medicine Practice Act (Act).
- 4. BPC section 4825 states:

It is unlawful for any person to practice veterinary medicine or any branch thereof in this State unless at the time of so doing, such person holds a valid, unexpired, and unrevoked license as provided in this chapter.

5. BPC section 4826 states in pertinent part:

[...]

(c) A person practices veterinary medicine, surgery, and dentistry, and the various branches thereof, when he or she performs any act set forth in BPC section 4826, including administering a drug, medicine, appliance, application, or treatment of whatever nature for the prevention, cure, or relief of a wound, fracture, bodily injury, or disease of animals.

[...]

(d) Performs a surgical or dental operation upon an animal.

[. . .]

#### **CAUSE FOR CITATION**

- 6. On or about May 08, 2019, Respondent administered Distemper-hepatitis-parainfluenza-parvovirus (DHPP) and Corona vaccine to Patient M without possessing a valid California veterinarian license. Such unlicensed conduct constitutes a violation of BPC section 4825, as defined in BPC section 4826, subdivision (c).
- 7. On or about June 08, 2019, Respondent administered DHPP, Corona, and Bordetella vaccinations to Patient M without possessing a valid California veterinarian license. Such unlicensed conduct constitutes a violation of BPC section 4825, as defined in BPC section 4826, subdivision (c)
- 8. On or about December 18, 2020, Respondent performed surgery on Patient P without possessing a current, valid California veterinarian license. Such unlicensed conduct constitutes a violation of BPC section 4825, as defined in BPC section 4826, subdivisions (c), and (d).
- 9. On or about May 01, 2020, through July 12, 2021, Respondent performed surgery upon various animal patients without possessing a valid California veterinarian license. Such unlicensed conduct constitutes a violation of BPC section 4825, as defined in BPC section 4826, subdivision (d).

# DETERMINATION OF ISSUES CASE OF ACTION

- 10. Violations exist pursuant to BPC section 4825, as defined in BPC section 4826, subdivision (c), as set forth above in Paragraph 5. A cause of action thereby exists.
- 11. Violations exist pursuant to BPC section 4825, as defined in BPC section 4826, subdivision (c), as set forth above in Paragraph 6. A cause of action thereby exists.
- 12. Violations exist pursuant to BPC section 4825, as defined in BPC section 4826, subdivisions (c) and (d), as set forth above in Paragraph 7. A cause of action thereby exists.

13. Violations exist pursuant to BPC section 4825, as defined in BPC section 4826, subdivision (d), as set forth above in Paragraph 8. A cause of action thereby exists.

#### **PENALTY**

14. In compliance with BPC sections 148 and 4875.2 and CCR, title 16, section 2043, it is determined that:

Respondent be cited for a Class "C" violation in the amount of \$5,000 for the Cause for Citation, based upon a determination that the above-described facts set forth in Paragraph 5 constitute a violation of BPC section 4825, as defined in BPC section 4826, subdivision (c).

Respondent be cited for a Class "C" violation in the amount of \$5,000 for the Cause for Citation, based upon a determination that the above-described facts set forth in Paragraph 6 constitute a violation of BPC section 4825, as defined in BPC section 4826, subdivisions

Respondent be cited for a Class "C" violation in the amount of \$5,000 for the Cause for Citation, based upon a determination that the above-described facts set forth in Paragraph 7 constitute a violation of BPC section 4825, as defined in BPC section 4826, subdivisions (c) and (d).

Respondent be cited for a Class "C" violation in the amount of \$5,000 for the Cause for Citation, based upon a determination that the above-described facts set forth in Paragraph 8 constitute a violation of BPC section 4825, as defined in BPC section 4826, subdivision (d).

14. In compliance with BPC sections 125.9 and 4875.2, and CCR, Title 16, section 2043, subsection (e), the total penalty amount for the above violations is \$20,000.00. However, pursuant to BPC section 125.9, subdivision (b)(3), in no event shall the administrative fine assessed by the Board exceed \$5,000.00. Therefore, the total fine amount due to the Board is \$5,000.00.

#### ORDER OF ABATEMENT

The Board hereby orders Respondent to cease and desist from violating BPC sections 4825 and 4826, subdivisions (c) and (d).

April 11, 2022	
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DATE

JESSICA SIEFERMAN
Executive Officer
Veterinary Medical Board
Department of Consumer Affairs
State of California

# CONTEST OF CITATION (Business and Professions Code (BPC) Sections 125.9 and 4875.6)

If you desire to administratively contest the citation or the proposed assessment of a civil penalty therefor and want to request an informal conference, you must, within 10 business days after you receive the citation, notify the executive officer in writing of your request for an informal conference with the executive officer or his or her designee. (BPC, § 4875.6, subd. (a).)

If you desire a hearing to contest the finding of a violation, you must submit a written request for hearing to the Veterinary Medical Board (Board) within 30 days of the date of issuance of the citation or assessment. (BPC, § 125.9, subd. (b)(4).)

Submit your request for an informal conference or hearing to contest the citation to the following address:

Veterinary Medical Board 1747 N. Market Blvd., Suite 230 Sacramento, CA 95834.

If you fail to notify the executive officer or Board in writing that you intend to contest the citation or the proposed assessment of a civil penalty therefor, by either submitting a request for an informal conference or hearing as described above, the citation or the proposed assessment of a civil penalty shall be deemed a final order of the Board and shall not be subject to further administrative review. (BPC, § 4875.6, subd. (a).)

You may, in lieu of contesting a citation, transmit to the Board the amount assessed in the citation as a civil penalty, within 10 business days after receipt of the citation. (BPC, § 4875.6, subd. (b).)

Failure of a licensee or registrant to pay a civil penalty within 30 days of the date of receipt of the assessment, unless the citation is being appealed, may result in disciplinary action being taken by the Board. When a citation is not contested and a civil penalty is not paid, the full amount of the assessed civil penalty shall be added to the fee for renewal of the license or registration. A license or registration shall not be renewed without payment of the renewal fee and civil penalty. (BPC, § 125.9, subd. (b)(5).)

If you are an unlicensed person, you may notify the Board and file a petition for a writ of administrative mandamus under section 1094.5 of the Code of Civil Procedure within 30 calendar days after receipt of the citation, without engaging in an informal conference or administrative hearing. Payment of any fine shall not constitute an admission of the violation charged. (BPC, § 4875.6, subd. (b).)



# BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY - GAVIN NEWSOM, GOVERNOR DEPARTMENT OF CONSUMER AFFAIRS • VETERINARY MEDICAL BOARD 1747 North Market Blvd., Suite 230, Sacramento, CA 95834-2978 P (916) 515-5220 | Toll-Free (866) 229-0170 | www.vmb.ca.gov



April 11, 2022

#### **VIA CERTIFIED AND REGULAR MAIL**

Amandeep Singh, DVM

Re: CITATION 4602022000254

Case Number: 4602022000254; 4602019001233 Fine: \$5,000.00

Dear Dr. Singh:

You are hereby served the enclosed citation by the Executive Officer of the California Veterinary Medical Board.

This citation was issued and a fine assessed in accordance with Business and Professions Code §4875.2, and California Code of Regulations, Title 16, Division 20, Article 5.5, §2043.

Fine Assessed: \$5,000.00

Fines are assessed based on the violation findings. Payment of the fine represents a satisfactory resolution of the matter and does not constitute an admission of the violation(s) charged. Payment of the fine must be made to the Board within **ten (10) business days** after service of this citation order.

If you have any questions or need additional information regarding the citation, please contact me at (916) 318-6598 or email me at Fredy.Olea-Gaspar@dca.ca.gov.

Sincerely,

Fredy O Gaspar Enforcement Analyst

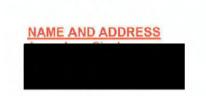
cc: Bonnie L. Lutz, Esq.

BUSINESS CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM. GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • VETERINARY MEDICAL BOARD
1747 North Market Blvd., Suite 230, Sacramento, CA 95834-2987
P (916) 515-5520 | Toll-Free (866) 229-0170 | www.vmb.ca.gov

#### DECLARATION OF SERVICE BY CERTIFIED AND REGULAR MAIL

RE: Case Number: Multiple LICENSE NO: Unlicensed

I, the undersigned declare that I am over 18 years of age; my business address is 1747 N. Market Boulevard, Suite 230, Sacramento, CA 95834. I served a true copy of the attached letter by Certified and Regular Mail on the following, by placing same in an envelope addressed as follows:



**CERTIFIED NUMBER:** 70220410000236238097

Said envelope was then, on April 11e2022, sealed and deposited in the United States Mail at 1747 N. Market Boulevard, Suite 230, Sacramento, CA 95834, the county in which I am employed, as certified and regular mail with postage thereon fully prepaid, return receipt requested.

Executed on April 11, 2022, in Sacramento, California.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

**DECLARANT:** 

9-9

Fredy O Gaspar Enforcement Analyst Veterinary Medical Board

