

**BEFORE THE MINNESOTA
BOARD OF VETERINARY MEDICINE**

In the Matter of
Scott S. Greiman, D.V.M.
License No. 09878

STIPULATION AND ORDER

STIPULATION

Scott S. Greiman, D.V.M. ("Licensee"), and the Minnesota Board of Veterinary Medicine Complaint Review Committee ("Committee"), agree that the above-referenced matter may be resolved without trial of any issue or fact as follows:

I.

JURISDICTION

1. The Minnesota Board of Veterinary Medicine ("Board") is authorized pursuant to Minnesota Statutes chapter 156 to license and regulate veterinarians and to take disciplinary action as appropriate.

2. Licensee holds a license from the Board to practice veterinary medicine in the State of Minnesota and is subject to the jurisdiction of the Board with respect to the matters referred to in this Stipulation and Order.

II.

CONFERENCE

3. On November 29, 2011, Licensee and his attorney, Robert E. Kuderer, Esq., of Johnson & Condon P.A., appeared before the Committee, composed of Barbara Fischley, D.V.M., Board member, and Joanne Schulman, D.V.M., Board member, to discuss allegations made in a Notice of Conference dated November 4, 2011. Karen B. Andrews, Assistant Attorney General, represented the Committee at the conference.

III.

FACTS

4. The parties agree this Stipulation and Order is based upon the following facts:

a. On December 5, 1978, Licensee was licensed by the Board to practice veterinary medicine in the State of Minnesota.

b. On December 27, 2000, Licensee and the Committee entered into an Agreement for Corrective Action ("2000 ACA") which was based, in part, upon Licensee's failure to ascertain a medical history, failure to advise the owners of their dog's condition or side effects of drugs given, failure to maintain proper records, and inappropriate treatment. In addition to the Committee's informal recommendations, the 2000 ACA required Licensee to prepare all future medical records in accordance with Rule 9100.0800, to provide the Committee with a hypothetical medical record on an animal with a serious medical condition for review, and to permit an unannounced inspection of his medical records by the Board if requested.

c. On January 27, 2009, Licensee and the Committee entered into another Agreement for Corrective Action ("2009 ACA") which was based, in part, upon Licensee's sale of services and products that were not medically necessary, his inappropriate prescription of medications, and his improper diagnosis, treatment and recommendations. The 2009 ACA required Licensee to inventory his prescription drugs; complete continuing education on veterinary pharmacology, urinalysis, and medical records; develop prescribing and diagnostic protocols; submit a list of references to the Committee; and complete a veterinary medical literature review pertaining to the judicious use of antimicrobials in the practice of veterinary medicine.

d. Between 2009 and 2011, Licensee provided veterinary care to a Schnoodle on 13 occasions. During this time, the following occurred:

1) On June 25, 2009, Licensee performed surgery on the dog to remove seven lipomas. Following the surgery, the dog was released to the owner despite exhibiting signs of the anesthesia and being unable to walk. The dog also had postoperative complications. Two weeks after the surgery, the dog had a rash and a 1 cm sore on its shoulder and it was diagnosed with cystitis.

2) On July 16, 2010, Licensee diagnosed the dog with what he believed to be liver disease and low thyroid function. Licensee failed to appropriately prescribe medications for these conditions; for example, he prescribed methionine and vitamins. Licensee also interpreted thyroid lab test values that were within the lab standard normal ranges as abnormal because he did not agree with the lab's determination of "normal." Licensee referenced veterinary sources that use other "normal" values that are different than the individual laboratory standard. When the dog's owner sought a second opinion in March 2011, the new veterinarian concluded that no medication was necessary to treat the dog for hypothyroidism based upon laboratory test results and the absence of clinical signs of hypothyroidism.

3) As part of the Board's investigation, Licensee provided copies of his medical records relating to this dog. The records were illegible and had to be transcribed in order to ascertain their information. Moreover, key information relating to Licensee's treatment of the dog and examination findings was not contained in the records.

e. On January 13, 2011, Licensee declawed a kitten at his hospital. Licensee administered only half the FDA-labeled and package-insert dose of anesthetic medication to the kitten because .15 ml of Butorphanol was added to the Telazol® injection. Licensee cites a veterinary reference that states that Telazol® dosages may need to be reduced when combined with other anesthetics. The kitten reportedly showed signs of discomfort during the procedure and was vocalizing and moving. Additionally, Licensee failed to intubate the kitten, failed to provide oxygen, failed to utilize monitoring equipment, and failed to take the kitten's

temperature (although an elevated temperature was noted a few days earlier and the kitten was currently being treated with antibiotics that Licensee prescribed). Licensee's medical records for this animal were also inadequate. During the conference with the Committee, Licensee admitted he does not document his actions when so-called "standard protocols" are utilized, but no written record of these standard protocols is currently available.

IV.

LAWS

5. Licensee acknowledges the conduct described in section III. above constitutes a violation of Minnesota Statutes section 156.081, subdivision 2(11) and (12), and justifies the disciplinary action described in section V. below.

V.

REMEDY

The parties agree the Board may take the following disciplinary action and require compliance with the following terms:

A. Limitation on License

6. The Board places the following **LIMITATION** on Licensee's license: Licensee may not perform veterinary surgery in the State of Minnesota until he satisfies the conditions in paragraphs 8.a., 8.b., 8.c., 8.d., and 8.e., below.

B. Removal of Limitation

7. Licensee may petition to have the limitation removed from his license at any regularly scheduled Board meeting following successful satisfaction of the conditions in paragraphs 8.a., 8.b., 8.c., 8.d. and 8.e., below. At the time of his petition, Licensee may be required to meet with the Committee and shall have the burden of proving by a preponderance of the evidence that he is capable of practicing veterinary medicine without the limitation and has complied with the limitation above; however, Licensee's compliance with the limitation shall not

create the presumption that the limitation should be removed. Upon consideration of the evidence submitted by Licensee or obtained through Board investigation, the Board may remove, amend, or continue the limitation imposed by this Order.

C. Conditions on License

8. The Board places the following **CONDITIONS** on Licensee's license:

a. One-on-One Consultation With Anesthesiologist. Before the limitation on Licensee's license in paragraph 6. above is removed, Licensee shall complete one-on-one consultation with a board-certified veterinary anesthesiologist. The consultant must be approved by the Committee, for purposes of this Stipulation and Order, before the consultation begins. In order for the Board to consider approving a consultant, Licensee shall submit, or cause to be submitted, the resume or curriculum vitae of the proposed consultant for pre-approval. Licensee is responsible for arranging and paying for the consultation. During the consultation, the consultant shall review the facts outlined in paragraph 4. above with Licensee, provide instruction to Licensee on appropriate pre-, intra-, and postsurgical pain management for each species he treats, and assist Licensee in implementing updated and appropriate written surgical pain management and anesthetic protocols for his practice (*see* paragraph 8.e. below). Licensee shall provide copies of the surgical pain management and anesthetic protocols to the Committee for approval. The consultant shall also submit a report directly to the Board, addressing the following:

- 1) Verification the consultant has reviewed a copy of this Stipulation and Order;
- 2) A description of the content and method of instruction provided during the consultation;
- 3) A statement indicating what Licensee learned and achieved through the instruction and how the learning was evaluated;

4) Any recommendations for additional education directed at improving Licensee's pain management methods and anesthetic protocols; and

5) Any other information the consultant believes would assist the Board in its ultimate review of this matter.

b. Compliance With Consultant's Recommendations. Licensee shall promptly comply with any recommendations made by the veterinary anesthesiologist consultant. If further education is recommended, Licensee must submit written documentation, such as measurable learning objectives and qualifications of the instructor, in order to receive prior approval from the Committee of classes that Licensee takes in fulfillment of this requirement. Licensee shall also submit verification of participation for any class taken in fulfillment of this requirement.

c. One-on-One Consultation With Surgeon. Before the limitation on Licensee's license in paragraph 6. above is removed, Licensee shall complete one-on-one consultation with a board-certified veterinary surgeon. The consultant must be approved by the Committee, for purposes of this Stipulation and Order, before the consultation begins. In order for the Board to consider approving a consultant, Licensee shall submit, or cause to be submitted, the resume or curriculum vitae of the proposed consultant for pre-approval. Licensee is responsible for arranging and paying for the consultation. During the consultation, the consultant shall review the facts outlined in paragraph 4. above with Licensee, provide instruction to Licensee on appropriate usage of suture materials, and review Licensee's written protocols for routine surgical procedures (*see* paragraph 8.e. below). Licensee shall provide copies of the routine surgical procedure protocols to the Committee for approval. The consultant shall also submit a report directly to the Board, addressing the following:

1) Verification the consultant has reviewed a copy of this Stipulation and Order;

2) A description of the content and method of instruction provided during the consultation;

3) A statement indicating what Licensee learned and achieved through the instruction and how the learning was evaluated;

4) Any recommendations for additional education directed at improving Licensee's suture technique or routine surgical procedure protocols; and

5) Any other information the consultant believes would assist the Board in its ultimate review of this matter.

d. Compliance With Consultant's Recommendations. Licensee shall promptly comply with any recommendations made by the veterinary surgeon consultant. If further education is recommended, Licensee must submit written documentation, such as measurable learning objectives and qualifications of the instructor, in order to receive prior approval from the Committee of classes that Licensee takes in fulfillment of this requirement. Licensee shall also submit verification of participation for any class taken in fulfillment of this requirement.

e. Written Protocols. Before the limitation on Licensee's license in paragraph 6. above is removed, Licensee shall create and implement updated written protocols for pain management of each species he treats (pre-, intra-, and post-surgery) and anesthetic protocols for all routine surgical procedures he performs. The pain management and anesthetic protocols shall be reviewed by the veterinary anesthesiologist consultant pursuant to paragraph 8.a. above, and the routine surgical procedure protocols shall be reviewed by the veterinary surgical consultant pursuant to paragraph 8.c. above. Licensee shall also provide copies of the protocols to the Committee for approval.

f. Companion Animal Disciplinary Examination. Within six months from the date of this Order, Licensee must take and pass, within two attempts, the Companion Animal

Disciplinary Examination ("CADE") sponsored by the National Board of Veterinary Medical Examiners ("NBVME"). For purposes of this condition, the minimum passing score of the CADE is the NBVME's recommended criterion-referenced passing point.

g. Monitoring of Practice. Within 30 days of the removal of the limitation in paragraph 6. above, Licensee's surgical skills and procedures shall be monitored for a minimum of four surgeries by a board-certified veterinary surgeon who has been pre-approved by the Committee. The observing surgeon must monitor the following surgical procedures:

- 1) One feline spay/declaw surgery;
- 2) One significant subcutaneous mass removal or lumpectomy on a canine (i.e. removal of two or more lumps or a single lump greater than 5 cm); and
- 3) One canine spay surgery;

At the conclusion of the monitoring, the observing surgeon shall provide the Board with a report outlining the surgeon's observations of Licensee's practice. If the observing surgeon recommends changes to Licensee's practice or an additional period of monitoring, Licensee shall comply with the consultant's recommendations.

h. Continuing Education. Within 18 months of the date of this Stipulation and Order, Licensee shall submit to the Board evidence of successful completion of the following continuing education: (1) at least four hours on hypothyroidism; (2) at least four hours on liver disease; (3) at least four hours on the appropriate treatment of urinary tract infections in dogs and cats; and (4) at least four hours on appropriate prescribing of antibiotics and nutraceuticals. Licensee shall submit written documentation, such as measurable learning objectives and qualifications of the instructor, in order to receive pre-approval from the Committee of classes that Licensee takes in fulfillment of this condition.

i. Continuing Education Audit. Within 30 days of the date of this Order, Licensee shall submit to the Committee the dates, number of hours, and titles of all continuing education courses taken by Licensee in the two-year period preceding his last license renewal.

j. Records Inspection. At any time while this Order is in effect, Licensee shall permit the Committee or the Committee's designee to perform on-site inspections of Licensee's records to assess Licensee's compliance with this Order. The inspections shall take place during regular business hours when Licensee is on the premises and may occur with or without notice to Licensee. Licensee shall permit the Committee or the Committee's designee to review and copy client records in connection with an inspection. In lieu of entry and inspection, the Committee or Committee's designee may forward a written request to Licensee to provide the Committee or Committee's designee with copies of medical records by mail.

D. Removal of Conditions

9. Licensee may petition to have the conditions removed from his license at any time following successful satisfaction of the conditions. At the time of his petition, Licensee may be required to meet with the Committee and shall have the burden of proving by a preponderance of the evidence that he is capable of practicing veterinary medicine without conditions and has complied with the conditions above; however, Licensee's compliance with the conditions shall not create the presumption that the conditions should be removed. Upon consideration of the evidence submitted by Licensee or obtained through board investigation, the Board may remove, amend, or continue the conditions imposed by this Order.

VI.

CONSEQUENCES OF A VIOLATION

10. *Hearing Before the Board.* If the Committee determines that Licensee has violated any term or condition of this Stipulation and Order, the Committee may schedule a hearing before the Board and serve on Licensee a Notice of Hearing for Alleged Non-

Compliance With Stipulation and Order ("Notice"), which sets forth the allegations against Licensee and provides Licensee notice of the date, time, and place of the hearing before the Board. The procedures set forth in paragraph 11. below shall apply to the hearing.

11. *Hearing Procedures.* The following procedures shall apply:

a. *Response to Allegations in Notice.* At least seven days before the hearing, Licensee shall submit a written response to the allegations set forth in the Notice. If Licensee does not submit a timely response to the Board, the allegations may be deemed admitted.

b. *Hearing Before Board.* The Board shall hold a hearing before its own members in accordance with the procedures set forth in paragraph 11.c. below to determine whether the allegations are true and, if so, whether to take additional disciplinary action against Licensee, which may include any of the forms of disciplinary action set forth in Minnesota Statute section 156.127.

c. *Evidence at Hearing/Burden of Proof/Waiver of Hearing Before Administrative Law Judge.* At the hearing before the Board, the Committee and Licensee may present affidavits made on personal knowledge or authenticated documents and may present argument based on such evidence in support of their positions. The record before the Board shall be limited to such affidavits, documents, and this Stipulation and Order. The Committee shall file with the Board all evidence it intends to present at the hearing and shall serve a copy on Licensee at least 14 days before the hearing. Licensee shall file with the Board all evidence she intends to present at the hearing and shall serve a copy on the Committee at least seven days before the hearing. The Committee must prove by a preponderance of the evidence that Licensee has violated this Stipulation and Order. The Board shall issue a final order within 30 days of the hearing. Licensee waives a hearing before an administrative law judge and waives discovery, cross-examination of adverse witnesses, and other procedures governing administrative hearings or civil trials.

d. *Costs.* If the Committee proves by a preponderance of the evidence that Licensee has violated this Stipulation and Order, the Board may require Licensee to pay costs of the proceedings. The costs of the proceedings may include the cost paid by the Board to the Office of the Attorney General for investigative and legal services, the cost of reproducing records and documents, Board staff time, travel costs and expenses, and Board members' per diem reimbursements, travel costs, and expenses.

12. *Statutory Procedures.* Nothing herein shall limit the Committee's right to attempt to resolve an alleged violation of this Stipulation and Order through the procedures of Minnesota Statutes section 214.103, subdivision 6, or to initiate a contested case proceeding under Minnesota Statutes chapter 14 based on an alleged violation of this Stipulation and Order.

VII.

ADDITIONAL INFORMATION

13. Licensee knowingly and voluntarily waives a contested case hearing and all other procedures before the Board to which Licensee may be entitled under the Minnesota and United States constitutions, statutes, or rules.

14. Licensee knowingly and voluntarily waives any and all claims against the Board, the Minnesota Attorney General, the State of Minnesota, and their agents, employees and representatives related to the investigation of the conduct herein, or the negotiation or execution of this Stipulation and Order, which may otherwise be available to Licensee.

15. This Stipulation and Order, the files, records and proceedings associated with this matter shall constitute the entire record and may be reviewed by the Board in its consideration of this matter.

16. Licensee shall be responsible for all costs incurred as a result of compliance with this Stipulation and Order.

17. Licensee has read, understands, and agrees to this Stipulation and Order and has voluntarily signed the Stipulation and Order. Licensee is aware that this Stipulation and Order must be approved by the Board before it goes into effect. The Board may either approve the Stipulation and Order as proposed, approve it subject to specified changes, or reject it. If the changes are acceptable to Licensee, the Stipulation and Order will take effect and the Order as modified will be issued. If the changes are unacceptable to Licensee or if the Board rejects the Stipulation and Order, it will be of no effect except as specified below.

18. Licensee agrees that if the Board rejects this Stipulation and Order or a lesser remedy than indicated in this settlement, and this case comes again before the Board, Licensee will assert no claim that the Board was prejudiced by its review and discussion of this Stipulation and Order or of any records relating to it.

19. This Stipulation and Order does not limit the Board's authority to proceed against Licensee by initiating a contested case hearing or by other appropriate means on the basis of any act, conduct, or omission of Licensee which constitutes grounds for disciplinary action and which is not directly related to the specific facts and circumstances set forth in this document.

VIII.

DATA PRACTICES NOTICES

20. This Stipulation and Order constitutes disciplinary action by the Board and is classified as public data pursuant to Minnesota Statutes section 13.41, subdivision 5. Data regarding this action will be provided to national licensee data banks or consistent with Board policy. While this Stipulation and Order is in effect, information obtained by the Board pursuant to this Order is considered active investigative data on a licensed health professional, and as such, is classified as confidential data pursuant to Minnesota Statutes section 13.41, subdivision 4.

21. This Stipulation contains the entire agreement between the parties, there being no other agreement of any kind, verbal or otherwise, which varies this Stipulation.



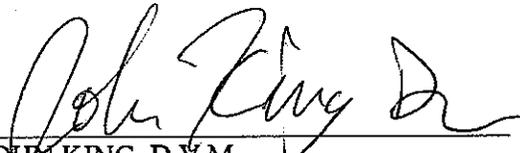
SCOTT S. GREIMAN, D.V.M.
Licensee

Dated: 4-12-12

ORDER

Upon consideration of the Stipulation and all the files, records and proceedings herein, the terms of the Stipulation are approved and adopted, and the recommended remedy set forth in the Stipulation is hereby issued as an Order of this Board effective this 16 day of May, 2012.

MINNESOTA BOARD
OF VETERINARY MEDICINE



JOHN KING, D.V.M.
Executive Director

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