



Caveat

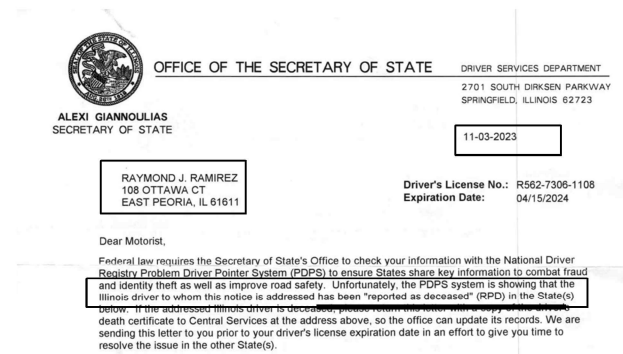
- All are from real examples
- Names have been changed
- Any views expressed are based on my experience as a DVM and a member of the board, but it is not endorsed by the Department.” (IDFPR)



5 Simple Steps
to Keep Yourself Out of
Regulatory Hot Water

Goal for presentation

- Understand process
- Comprehend ideas to reduce likelihood of complaint
- If do get complaint, getting in good habits daily to ‘back up what you say happened’



Goal for presentation

- Spectrum of care does NOT = license defense



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Schaumburg ER 1st year
Milwaukee AAHA Hospital 2.5 years
Wisconsin Locum tenens 5 years
Illinois Locum tenens 13 years
East Peoria, IL Practice owner 17 years
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Process

Goal of IDFPR: protect the public.

- Complaint
- Investigated by IDFPR staff
- Sent to a Veterinarian as ‘subject matter expert’

Over simplification of complaint

process

Goal of IDFPR: protect the public.

- Complaint
- Investigated by IDFPR staff
- Sent to a Veterinarian as 'subject matter expert'

- Dropped or informal interview for more answers
- Dropped or discipline – private or public
- Other



Cat 1

Medical Records



Overview of process

What Situations cause a complaint?

Explore and give ideas of how to avoid.



Cat 2

Communications (staff and client)



Instructions for using this template.

- Remember this is Jeopardy, so where I have written "Answer" this is the prompt the students will see, and where I have "Question" should be the student's response.
- To enter your questions and answers, click once on the text on the slide, then highlight and just type over what's there to replace it. If you hit Delete or Backspace, it sometimes makes the text box disappear.
- To see what category/answer your slide is on – check with 'outline' tab
- When clicking on the 'question' slide (during presentation) to move back to main slide, be sure you see the hand, not the arrow. (If you put your cursor over a text box, it will be an arrow and WILL NOT take you to the right location.)
- For final jeopardy, if you place the cursor over the lower left speaker icon, a music wave of the final 30 seconds jeopardy song will play.



Cat 3

Practice Act



Abuse Jeopardy

Choose a category.

You will be given the answer.

You must give the correct question.

[Click to begin.](#)



Cat 4

Red flags



Potpourri



Per practice act, which of following is NOT accurate regarding medical records: pet/client name, date and time, presenting complaint, meds prescribed, quantity, keep record for 3 years.



Medical Records	Communications	Practice Act	Red flag	Potpourri
<u>10 Point</u>	<u>10 Point</u>	<u>10 Point</u>	<u>10 Point</u>	<u>10 Point</u>
<u>20 Points</u>	<u>20 Points</u>	<u>20 Points</u>	<u>20 Points</u>	<u>20 Points</u>
<u>30 Points</u>	<u>30 Points</u>	<u>30 Points</u>	<u>30 Points</u>	<u>30 Points</u>
<u>40 Points</u>	<u>40 Points</u>	<u>40 Points</u>	<u>40 Points</u>	<u>40 Points</u>
<u>50 Points</u>	<u>50 Points</u>	<u>50 Points</u>	<u>50 Points</u>	<u>50 Points</u>

What is 'keep record for 3 years'?

Per act, keep for 5 years after last known visit, so if pup, may need to keep first visit record for 20 years.



This is who must be able to follow what is entered in a medical record.



On handout: Records 300: This is the challenging thing to follow in this 5 page record.



Who is a DVM? (or VMD)?



What is the date and time of these observations, activities?

For example, who entered the notations and on what date and at what time?



When veterinarians were taught about records in the 1980's we were told 'if not in record, it's normal'. As we speak in 2025, if it is not in record, it means this.



At the end of the investigation, this tends to be the number one grievance that clients will put on their complaint- that the Dr did not do this.



What is, it did not happen?

i.e. weight of pet on day of surgery, what procedure was done, anesthetic used, etc.



What is talk to them?



It is proper to use shortcuts like 'hbc, SWO' in the record, and your abbreviations as a notation of who is recording; however, when a 'request' is made for medical records by IDFPR, it is advisable to send this along so the investigator and board understands what that means, and does not have to delay in evaluating the files.



According to two IDFPR complaint investigators, 80% of the complaints would not be made if the veterinarian did this when the pet died.



What is an 'index/key' of abbreviations and what they mean, or who they belong to? (does not have to be grammatically correct)?



What is talk to the client?



Even though you can legally do something, doing so aggravates the client and can have you with a license discipline complaint. One common thing in our veterinary practices relates to what we do when clients request prescriptions.



When communicating to the board about your case, it is important to include this, which is assigned to any and every complaint that comes in, even if dismissed easily.



What is charge a prescription fee for writing a prescription?



What is the IDFPR case number?



When you call a client to tell them their pet has taken turn for worse, come in. Then the pet dies before client makes it in; this is the activity you should do, as a courtesy, and to reduce chance of complaint being filed.



T or F: Once you graduate from an AVMA accredited university, you can practice.



What is 'see the client and tell them yourself the pet did not make it', as the doctor?



What is false?



In Illinois, this is the person who can give phone advice.



In IL, this is who and how a valid VCPR can be established before any recommendation of subsequent treatment can be initiated by the doctor.



What is "No one until an IN PERSON VCPR is established, and then only the doctor"?

"You can't practice without having a bone pile, and anyone that says they don't have a bonepile is lying."

Paul Pion DVM DACVIM (Cardiology) co-founder VIN



What is in person with a DVM?
no over the phone 'my dog swallowed a ...' if NOT already a client



In Illinois, this is what legally, a 'veterinary nurse' can do in our practices. The problem is the public thinks what a 'veterinary nurse' is like a human nurse.



Of noted in handout 3, which is Standards of Professional Conduct outlined in the Veterinary practice act, these would be the two sections that the majority of disciplines fall into.



What is 'the same as an unregistered assistant with immediate or direct supervision'?



What is K & M?
Records: can a DVM follow - not a layperson;
and omission of something done that would ordinarily be done.
Ex: wt, tpr, pre op, volume of medication given?



If you are interviewing at a clinic for a job as a veterinarian or CVT, if they are using this title, (which is license protected in the human field for those with RN, LPN, BN), then you could be at risk for having a disciplinary case.



Daily Double!!



What is veterinary nurse? Added 'Technician' title protection will be in effect Jan 1, 2026. All about protecting the public so _know_ who is caring for their pet.



If hired by a rescue group to work a 'spay & neuter day', the rescue group record keeping details are defined in Illinois by this agency.



Even though this rarely will cause a complaint; when logging CS meds, the proper way is not to have a running total, but to have a log by the _of how the medication was dispensed or administered.



What is the Department of Agriculture?



What is a log by the bottle? This causes the board to be concerned about other record keeping discrepancies.



When you, as the Dr, are thinking on PE that a client's pet has a life threatening disease, (IMHA, GDV, severe renal failure) and the client seems to think it is not serious, this is the best course of action. It may still not prevent a complaint, but you have evidence that you explained things.



What is document,
document, document in the
Medical record?

Does not have to be for lay
person - for veterinarian.



Who is the Veterinarian?

Yes, CVT operate under the DVM
licensee, but also the unlicensed
personelle also operate under the
DVM license holder. CVT has no
legal supervisory responsibility.



If there is a gap in any
information that you
realize later, you think is
important enough to note
in the record, this is the
best way to note it in the
record.



When looking at handout 5-2,
this is a possible situation that
could end up in front of the
licensing board. In fact it was
the situation that caused Dr
Ramirez to be in front of the
board in 2008.



What is 'making
sure the note is clear
it was added later'?



What is 'which side
is the surgery
planned to be on'?



An unlicensed individual is sent
in assist your CVT in trimming
bird's nails. If cardiac racing
syndrome happens, this is the
person who's license will be
being defended in such a
situation.



As related to anesthesia, this is
the title that can not anesthetize,
intubate, and maintain an
animal under anesthesia unless
under "immediate" supervision.



What is unlicensed assistant?



What is to be polite, and be transparent?



From a license defense perspective, this is where a client declining treatment/diagnostic procedure must be noted. * this is different than malpractice.



Final Jeopardy



What is anywhere in record?
Does not need to be initialed by client.



Final Category
Regulatory Agencies



Make your wager



When talking to anyone from the Licensing board, it is best to have this as your default position regarding your conversation.



Every jurisdiction's regulatory agency that oversees veterinary medicine has a task to protect this group.



What is ‘The public’?



After ‘that letter’, now what?

Send in all medical records with narrative

1. Including x-ray and blood tests
 1. In record may state ‘only creatinine above normal’ but without supporting documents is going to raise questions.
2. Include all ‘shortcut fill in forms’
 1. If not transcribed into Med record
3. List of abbreviations used in records sent



So you get ‘that letter’, now what?

- Understand goal of board
 - Not out to ‘get you’ but to protect public



After ‘that letter’, now what?

1. Acknowledge right away
2. Another DVM reviewing
3. Write a summary narrative
4. Contact your license defense attorney
5. Send in all medical records
6. Ask if need anything else.



After ‘that letter’, now what?

1. Acknowledge right away
 1. Send email to individual in the letter and anticipated timeline
2. Realize that another Veterinarian will be reviewing what is sent in, not lay person.
3. Write a summary narrative of what happened
 1. Sign and date the document before sending in



After ‘that letter’, now what?

1. Acknowledge right away
2. Another DVM reviewing
3. Write a summary narrative
4. Contact your license defense attorney
5. Send in all medical records
6. Ask if need anything else.
7. The goal is transparency



After ‘that letter’, now what?

1. Acknowledge right away
2. Another DVM reviewing
3. Write a summary narrative
4. Contact your license defense attorney
 1. The attorney may want to look at narrative.
5. Send in all medical records with narrative



Bibliography

- Ilga.gov
 - Veterinary practice act



Goal for presentation

- Understand process
- Comprehend ideas to reduce likelihood of complaint
- If do get complaint, getting in good habits daily to 'back up what you say happened'



Questions?

- *Remember: Any views expressed are based on my experience as a DVM and a member of the board, but it is not endorsed by the Department.” (IDFPR)*

