

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

**IN THE MATTER OF THE PETITION FOR EARLY TERMINATION OF PROBATION
OF KIM LEWIS KUHLMANN**

Agency Case No. 4602018000299

Office of Administrative Hearings Case No. 2025090684

HEARING EXHIBITS INDEX

| EX. # | DOCUMENT | I.D. | ADMIT |
|--------------|--|-------------|--------------|
| 1 | Notices of Hearing and Proofs of Service (Redacted) | | |
| 2 | Certification of License History | | |
| 3 | Veterinary Medical Board Case No. 4602018000299 Decision and Order re. Stipulated Settlement, effective December 30, 2022; Stipulated Settlement and Disciplinary Order No. 4602018000299, signed October 15, 2022; and First Amended Accusation, filed April 7, 2022. (Redacted) | | |
| 4 | Petition for Early Termination of Probation (Redacted) | | |
| 5 | Petitioner's Narrative Statement | | |
| 6 | Letters of Recommendation (Redacted) | | |
| 7 | Continued Education Certificates | | |
| 8 | Petitioner's Resume (Redacted) | | |
| 9 | Probation Compliance Report | | |

| | | | |
|-----------|--|--|--|
| 10 | Probation Violation Letter, dated January 30, 2023 (Redacted) | | |
| 11 | Probation Supervisor Approval Form (Redacted) | | |
| 12 | Probation Violation Letter, dated May 26, 2023 (Redacted) | | |
| 13 | Quarterly Probation Report (Redacted) | | |
| 14 | Probation Violation Letter, dated June 25, 2024 (Redacted) | | |
| 15 | Emails, Monthly Supervision Reports, and Supervision Review Logs (Redacted) | | |

Exhibit 1



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR
 DEPARTMENT OF CONSUMER AFFAIRS • CALIFORNIA 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



VIA ELECTRONIC MAIL, CERTIFIED MAIL AND REGULAR MAIL

September 5, 2025

Dr. Kim L. Kuhlmann
 San Francisco Equine
 15 Augusta Ct.
 Alamo, CA 94507-2301
 [REDACTED]

Drew Couto
 Klinedinst Law
 755 West A Street, Ste. 100
 San Diego, CA 92101

RE: HEARING NOTICE
OAH Case No. TBD
Petition for Reinstatement or Modification of Penalty – Dr. Kim L. Kuhlmann

Dear Dr. Kim L. Kuhlmann:

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

Date: Thursday, October 16, 2025
Time: 9:00 AM 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=m7ddadf7a4a8a1147878bd4349ec28e79>

Event number: 2492 180 1395
Event password: CVMB1016

Phone audio conference: (415) 655-0001
Access code: 2492 180 0395
Passcode: 28621016

The hearing will be conducted before the California 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 (279) 895-6043 or via email at Rachel.McKowen@dca.ca.gov.

Sincerely,

Rachel McKowen
Probation Monitor
California Veterinary Medical Board

cc: Neva Tassan, Deputy Attorney General
Drew Couto, Petitioner's Counsel



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September 5, 2025

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Rachel McKowen
Probation Monitor
California Veterinary Medical Board

cc: Neva Tassan, Deputy Attorney General
Drew Couto, Petitioner's Counsel



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DECLARATION OF SERVICE BY CERTIFIED, REGULAR, & ELECTRONIC MAIL

RE: Notice of Hearing

LICENSE NO: VET 8208

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. Kim L. Kuhlmann
 San Francisco Equine
 15 Augusta Ct.
 Alamo, CA 94507-2301
 [REDACTED]

CERTIFIED NUMBER:

9589 0710 5270 2856 5943 72

Drew Couto
 Klinedinst Law
 755 West A Street, Ste. 100
 San Diego, CA 92101

9589 0710 5270 2856 5943 89

Neva Tassan, DAG
Neva.Tassan@doj.ca.gov

Email

Said envelope was then, on **September 5, 2025**, 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 **September 5, 2025** 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:

SIGNATURE ON FILE

Emilia Gutierrez
Office Technician
California Veterinary Medical Board

9589 0710 5270 2856 5943 72

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☐ Certified Mail Restricted Delivery

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☐ Adult Signature Restricted Delivery

\$

Postage

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Total Postage and Fees

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Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Kuhlmann
NOH Postmark
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PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and Fees

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City, State, ZIP+4®

Kuhlmann
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 Postmark
 Here

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

Exhibit 2



CERTIFICATION OF LICENSE HISTORY

This is to certify that I, Ashley Sanchez, Enforcement Manager of the California 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 Dr. Kim Kuhlmann. 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. 8208:

Kim Lewis Kuhlmann
 San Francisco Equine Inc.
 15 Augusta Ct.
 Alamo, CA 94507-2301

First Issued: March 7, 1983
 Expiration: January 31, 2026
 Status: Current
 Secondary Status: Probation

HSP No. 6179:

San Francisco Equine Inc.
 15 Augusta Ct.
 Alamo, CA 94507-2301

First Issued: May 30, 2006
 Expiration: May 31, 2026
 Status: Current
 Secondary Status: Probation

Discipline:

On or about April 7, 2022, the Board filed a First Amended Accusation (Case No. 4602018000299) against Respondent. On October 14, 2022, Respondent agreed to a Stipulated Settlement, placing his license on probation for four years with terms and conditions, effective December 30, 2022.

Dated at Sacramento, California, this 20th day of August 2025

SIGNATURE ON FILE

Ashley Sanchez, Enforcement Manager

Exhibit 3

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

In the Matter of the First Amended Accusation Against:

Kim Lewis Kuhlmann, DVM,

Veterinarian License No. VET 8208,

and

San Francisco Equine, Inc.

Premises Registration No. HSP 6179

Respondents

Case No. 4602018000299

OAH No. 2021040361

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Veterinary Medical Board, Department of Consumer Affairs, State of California, as its Decision in this matter.

This Decision shall become effective on December 30, 2022.

It is so ORDERED November 30, 2022.

SIGNATURE ON FILE

Kathy Bowler, President
VETERINARY MEDICAL BOARD
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

1 ROB BONTA
 Attorney General of California
 2 KIM KASRELIOVICH
 Supervising Deputy Attorney General
 3 MICHAEL YI
 Deputy Attorney General
 4 State Bar No. 217174
 ELAINE YAN
 5 Deputy Attorney General
 State Bar No. 277961
 6 300 So. Spring Street, Suite 1702
 Los Angeles, CA 90013
 7 Telephone: (213) 269-6483
 Facsimile: (916) 731-2126
 8 E-mail: Michael.Yi@doj.ca.gov
Attorneys for Complainant
 9

10 **BEFORE THE**
VETERINARY MEDICAL BOARD
 11 **DEPARTMENT OF CONSUMER AFFAIRS**
 12 **STATE OF CALIFORNIA**
 13

14 In the Matter of the Accusation Against:

15 **KIM LEWIS KUHLMANN**
SAN FRANCISCO EQUINE, INC.
 16 [REDACTED]

17 Veterinarian License No. VET 8208,
 18 and

19 **SAN FRANCISCO EQUINE, INC.,**
KIM LEWIS KUHLMANN, DVM
Managing Licensee
 21 [REDACTED]

22 Premises Registration No. HSP 6179,
 23

Respondents.
 24

Case No. 4602018000299

OAH No. 2021040361

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

1 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
2 entitled proceedings that the following matters are true:

3 **PARTIES**

4 1. Jessica Sieferman (Complainant) is the Executive Officer of the Veterinary Medical
5 Board (Board). She brought this action solely in her official capacity and is represented in this
6 matter by Rob Bonta, Attorney General of the State of California, by Michael Yi and Elaine Yan,
7 Deputy Attorneys General.

8 2. Respondents Kim Lewis Kuhlmann (Respondent Kuhlmann) and San Francisco
9 Equine, Inc. (Respondent SFE) are represented in this proceeding by attorney George M. Wallace
10 of Wallace, Brown & Schwartz, whose address is: 215 North Marengo Ave, 3rd Floor, Pasadena,
11 CA 91101-1504.

12 3. On March 3, 1983, the Board issued Veterinarian License Number VET 8208 to
13 Respondent Kuhlmann. The Veterinarian License was in full force and effect at all times relevant
14 to the charges brought in First Amended Accusation number 4602018000299, and will expire on
15 January 31, 2024, unless renewed.

16 4. On May 30, 2006, the Board issued Premises Registration Number HSP 6179 to
17 Respondent Kuhlmann, as managing licensee of the premises, San Francisco Equine, Inc. The
18 Premises Registration was in full force and effect at all times relevant to the charges brought in
19 First Amended Accusation number 4602018000299, and will expire on May 31, 2023, unless
20 renewed.

21 **JURISDICTION**

22 5. First Amended Accusation number 4602018000299 was filed before the Board, and is
23 currently pending against Respondents. The First Amended Accusation and all other statutorily
24 required documents were properly served on Respondents on April 11, 2022. Respondents timely
25 filed their Notice of Defense contesting the First Amended Accusation.

26 6. A copy of First Amended Accusation number 4602018000299 is attached as Exhibit
27 A and incorporated herein by reference.
28

ADVISEMENT AND WAIVERS

7. Respondents have carefully read, fully discussed with counsel, and understand the charges and allegations in First Amended Accusation number 4602018000299. Respondents have also carefully read, fully discussed with counsel, and understand the effects of this Stipulated Settlement and Disciplinary Order.

8. Respondents are fully aware of their legal rights in this matter, including the right to a hearing on the charges and allegations in the First Amended Accusation; the right to confront and cross-examine the witnesses against them; the right to present evidence and to testify on their own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

9. Respondents voluntarily, knowingly, and intelligently waive and give up each and every right set forth above.

CULPABILITY

10. Respondents understand and agree that the charges and allegations in First Amended Accusation number 4602018000299, if proven at a hearing, constitute cause for imposing discipline upon their Veterinarian License and Premises Registration.

11. For the purpose of resolving the First Amended Accusation without the expense and uncertainty of further proceedings, Respondents agree that, at a hearing, Complainant could establish a factual basis for the charges in the First Amended Accusation, and that Respondents hereby gives up their right to contest those charges.

12. Respondents agree that their Veterinarian License and Premises Registration are subject to discipline and they agree to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

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CONTINGENCY

13. This stipulation shall be subject to approval by the Veterinary Medical Board. Respondents understand and agree that counsel for Complainant and the staff of the Veterinary Medical Board may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondents or their counsel. By signing the stipulation, Respondents understand and agree that they may not withdraw their agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

14. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

15. This Stipulated Settlement and Disciplinary Order is intended by the parties to be an integrated writing representing the complete, final, and exclusive embodiment of their agreement. It supersedes any and all prior or contemporaneous agreements, understandings, discussions, negotiations, and commitments (written or oral). This Stipulated Settlement and Disciplinary Order may not be altered, amended, modified, supplemented, or otherwise changed except by a writing executed by an authorized representative of each of the parties.

16. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

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DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Veterinarian License Number VET 8208 and Premises Registration Number HSP 6179 issued to Respondent Kuhlmann are revoked. However, the revocation is stayed and Respondents are placed on probation for four (4) years on the following terms and conditions:

1. Obey All Laws

Respondent Kuhlmann shall obey all federal and state laws and regulations substantially related to the practice of veterinary medicine. Within thirty (30) days of any arrest, Respondent Kuhlmann shall notify the Board. Within thirty (30) days of any conviction, Respondent Kuhlmann shall report to the Board and provide proof of compliance with the terms and conditions of the court order including, but not limited to, probation and restitution requirements. Obey all laws shall not be tolled.

2. Quarterly Reports

Respondent Kuhlmann shall report quarterly to the Board or its designee, under penalty of perjury, on forms provided by the Board, stating whether there has been compliance with all terms and conditions of probation. Omission or falsification in any manner of any information on these reports shall constitute a violation of probation and shall result in the filing of an accusation and/or a petition to revoke probation against Respondents' license registration or permit. If the final written quarterly report is not made as directed, the period of probation shall be extended until the final report is received by the Board. Any period(s) of delinquency in submission of reports as directed may be added to the total period of probation.

3. Interview with the Board

Within 30 days off the effective date of the Decision, Respondent Kuhlmann shall appear in person for an interview with the Board or its designee to review the terms and conditions of probation. Thereafter, Respondent Kuhlmann shall, upon reasonable request, report or appear in person as directed. Interview with the Board shall not be tolled.

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1 **4. Cooperation with Board Staff**

2 Respondents shall cooperate with the Board's inspection program and with the Board's
3 monitoring and investigation of Respondents' compliance with the terms and conditions of
4 Respondents' probation. Respondents may receive the assistance of private counsel, but
5 Respondents shall communicate directly with the Board or its designee, and written
6 communications from the Board will only be sent to the Respondents. Respondents shall make
7 available all patient records, hospital records, books, logs, and other documents relating to the
8 practice of veterinary medicine to the Board, upon request.

9 Respondents shall claim all certified mail issued by the Board, respond in a timely manner
10 to all notices and requests for information, and submit Reports, Identification Update reports or
11 other reports similar in nature, as requested and directed by the Board or its designee.
12 Respondents are encouraged to contact the Board's probation monitoring program representative
13 at any time Respondents have a question or concern regarding the terms and conditions of
14 Respondents' probation.

15 **5. Probation Monitoring Costs**

16 Probation monitoring costs are set at a rate of \$100 per month for the duration of the
17 probation. These costs shall be payable to the Board on a schedule as directed by the Board or its
18 designee.

19 **6. Changes of Employment or Address**

20 Respondents shall notify the Board, and appointed probation monitor in writing, of any and
21 all changes of employment, location, and address within fourteen (14) calendar days of such
22 change. This includes, but is not limited to, termination or resignation from employment, change
23 in employment status, and change in supervisors, administrators or directors. Respondents shall
24 also notify Respondents' probation monitor AND the Board IN WRITING of any changes of
25 residence or mailing address within fourteen (14) calendar days. P.O. Boxes are accepted for
26 mailing purposes; however, Respondents must also provide Respondents' physical residence
27 address as well.
28

1 **7. No Supervision of Students, Interns, or Residents**

2 Respondent Kuhlmann shall not supervise students, interns, or residents.

3 **8. Notice to Employers**

4 During the period of probation, Respondent Kuhlmann shall notify all present and
5 prospective employers of this Decision and the terms, conditions, and restrictions imposed on
6 Respondents by this Decision, as follows:

7 Within thirty (30) days of the effective date of this Decision and within fifteen (15) days of
8 Respondent Kuhlmann undertaking any new employment, Respondent Kuhlmann shall cause
9 Respondent Kuhlmann's supervisor and/or managing licensee (licensee manager) to report to the
10 Board in writing, acknowledging that the listed individual(s) has/have read this Decision,
11 including the terms conditions, and restrictions imposed. It shall be Respondent Kuhlmann's
12 responsibility to ensure that Respondent Kuhlmann's supervisor and/or licensee manager submit
13 timely acknowledgment(s) to the Board.

14 If Respondent Kuhlmann provides veterinary services as a relief veterinarian, Respondent
15 Kuhlmann shall notify each individual or entity with whom Respondent Kuhlmann is employed
16 or contracted and require the supervisor and/or licensee manager to submit to the Board timely
17 acknowledgment of receipt of the notice.

18 **9. Notice to Employees**

19 Throughout the probationary period, and in a manner that is visible to all licensed,
20 registered, or permitted veterinary employees at the veterinary premises, Respondents shall post a
21 notice provided or approved by the Board, that recites the violations for which Respondents have
22 been disciplined and the terms and conditions of probation.

23 **10. Tolling of Probation**

24 Respondent Kuhlmann shall notify the Board or its designee in writing within fifteen (15)
25 calendar days of any periods of non-practice lasting more than thirty (30) calendar days and shall
26 notify the Board or its designee within fifteen (15) calendar days of Respondent Kuhlmann's
27 return to practice. Any period of non-practice will result in the Respondent Kuhlmann's
28 probation being tolled.

Non-practice is defined as any period of time exceeding thirty (30) calendar days in which Respondent Kuhlmann is not engaging in the practice of veterinary medicine in California.

It shall be considered a violation of probation if Respondent Kuhlmann's periods of temporary or permanent residence or practice outside California total two years. However, it shall not be considered a violation of probation if Respondent Kuhlmann is residing and practicing in another state of the United States and is on active probation with the licensing authority of that state, in which case the two-year tolling limitation period shall begin on the date probation is completed or terminated in that state.

The following terms and conditions, if required, shall not be tolled:

- Obey All Laws
- Interview with the Board
- Tolling of Probation
- Maintain a Current and Active License
- Cost Recovery

Non-practice is also defined as any period that Respondent Kuhlmann fails to engage in the practice of veterinary medicine in California for a minimum of 24 hours per week for the duration of probation (except reasonable time away from work for vacations, illnesses, etc.) or as determined by the Board. While tolled for not meeting the hourly requirement, Respondent Kuhlmann shall comply with all terms and conditions of this Decision.

Any period of tolling will not apply to the reduction of the probationary term.

11. Maintain a Current and Active License

At all times while on probation, Respondent Kuhlmann shall maintain a current and active license with the Board. Maintain a current and active license shall not be tolled.

12. Violation of Probation

If Respondents violate probation in any respect, the Board, after giving Respondents notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an accusation or petition to revoke probation is filed against Respondents during probation, or if the Attorney General's office has been requested to prepare any disciplinary action against Respondents' license, the Board shall have continuing jurisdiction until the matter

is final, and the period of probation shall be extended until the matter is final. No petition for modification or termination of probation shall be considered while there is an accusation or petition to revoke probation pending against Respondents.

13. License Surrender While on Probation/Suspension

Following the effective date of this Decision, should Respondent Kuhlmann cease to practice veterinary medicine due to retirement or health issues, or be otherwise unable to satisfy the terms and conditions of probation, Respondent Kuhlmann may tender his license to practice veterinary medicine to the Board for surrender. The Board or its designee has the discretion to grant the request for surrender or to take any other action it deems appropriate and reasonable. Upon formal acceptance of the license surrender, Respondent Kuhlmann will no longer be subject to the terms and conditions of probation. The surrender constitutes a record of discipline and shall become a part of the Respondent Kuhlmann's license history with the Board.

Respondent Kuhlmann must relinquish his license to the Board within ten (10) days of receiving notification from the Board that the surrender has been accepted.

14. Completion of Probation

All costs for probation monitoring and/or mandatory premises inspections shall be borne by Respondents. Failure to pay all costs due shall result in an extension of probation until the matter is resolved and costs paid or a petition to revoke probation is filed. Upon successful completion of probation and all payment of fees due, Respondents' license or permit will be fully restored.

15. Cost Recovery

Pursuant to Section 125.3 of the California Business and Professions Code, within thirty (30) days of the effective date of this Decision, Respondents shall pay to the Board its enforcement costs including investigation and prosecution, in the amount of \$71,001.01, which may be paid over time in accordance with a Board approved payment plan, within six (6) months before the end of the probation term. Cost recovery shall not be tolled.

16. Inspections

If Respondent Kuhlmann is the owner or managing licensee of a veterinary premises, the following probationary conditions apply:

(A) The location or mobile veterinary practice shall hold a current premises registration issued by the Board, and Respondent Kuhlmann shall make the practice or location available for inspections by a Board representative to determine whether the location or veterinary practice meets minimum standards for a veterinary premises. The inspections will be conducted on an announced or unannounced basis and shall be held during normal business hours. The Board reserves the right to conduct these inspections on at least a quarterly basis during probation. Respondent Kuhlmann shall pay the Board for the cost of each inspection, which is \$500.

(B) As a condition precedent to any premises registration issued to Respondent Kuhlmann as Owner or managing licensee, the location or mobile veterinary practice for which application is made shall be inspected by a Board representative to determine whether the location or mobile veterinary practice meets minimum standards for a veterinary premises. Respondent Kuhlmann shall submit to the Board, along with any premises registration application, a \$500 inspection fee.

17. **Medical Records Review**

Within 30 calendar days of the effective date of this Decision, Respondent Kuhlmann shall provide to the Board or its designee the name and qualifications of one or more proposed reviewer of the medical records of animal patients created and maintained by Respondents. If Respondent Kuhlmann's terms of probation include Supervised Practice, that supervisor also may serve as the medical records reviewer. Each reviewer shall be a licensed veterinarian in California, have held a valid California license for at least five (5) years, and have never been subject to any disciplinary action by the Board.

The Board or its designee shall provide the approved reviewer with copies of this Decision. Within fifteen (15) calendar days of the reviewer's receipt of this Decision, the reviewer shall sign an affirmation that they have reviewed the terms and conditions of this Decision and fully understands the role of the reviewer.

If Respondent Kuhlmann fails to obtain the Board's or its designee's approval of a reviewer within sixty (60) calendar days of the effective date of this Decision, Respondent Kuhlmann shall receive a notification from the Board or its designee to cease practicing veterinary medicine within three (3) calendar days after being notified. Respondent Kuhlmann shall cease practice

until a reviewer is approved to provide medical records review services.

The reviewer shall review a minimum of ten percent (10%) of Respondents' animal patient medical records or fifteen (15) records (whichever is greater), a minimum of twelve (12) times per year. The reviewer shall determine the method of random selection of medical records to review and shall access the medical records directly from where the medical records are being kept. Review of Respondents' medical records shall not be delegated to Respondents or Respondents' staff. The reviewer's random selection of medical records shall include medical records that correlate to the animal patient care issues or other issues identified in the disciplinary action that resulted in this Decision. Respondents are required to make all animal patient medical records available for immediate inspection and copying by the reviewer at all times during business hours. The reviewer shall immediately notify the Board's Probation Monitor if Respondents fail or refuse to make the medical records available for inspection and/or copying.

Any potential costs associated with conducting the medical records review shall be borne by Respondents.

The reviewer shall evaluate the medical records to assess 1) The medical necessity and appropriateness of Respondents' treatment; 2) Respondents' compliance with minimum standards of practice in the diagnosis and treatment of animal patients; 3) Respondents' maintenance of necessary and appropriate treatment; 4) Respondents' maintenance of necessary and appropriate records and chart entries; and 5) Respondents' compliance with existing statutes and regulations governing the practice of veterinary medicine.

The reviewer shall submit quarterly reports to the Board on a form designated by the Board. The reports shall be submitted by the reviewer directly to the Board's Probation Monitor within seven (7) calendar days after the end of the preceding quarter. The quarterly reporting periods and due dates are as follows:

| Reporting Time Period | Due No Later Than |
|---------------------------------------|--------------------------|
| January 1 to March 31 (Quarter I) | April 7 |
| April 1 to June 30 (Quarter II) | July 7 |
| July 1 to September 30 (Quarter III) | October 7 |
| October 1 to December 31 (Quarter IV) | January 7 |

18. Continuing Education

Within sixty (60) days of the effective date of this Decision, and on an annual basis thereafter, Respondent Kuhlmann shall submit to the Board for its prior approval, an educational program or course related to recordkeeping which shall not be less than 8 hours per year, for each year of probation. Upon successful completion of the course, Respondent Kuhlmann shall provide proof to the Board. This program shall be in addition to the Continuing Education required of all licensees for licensure renewal. All costs shall be borne by Respondent Kuhlmann.

19. **Fine**

Respondent Kuhlmann shall pay to the Board a fine in the amount of \$5,000 pursuant to Business and Professions Code sections 4875 and 4883, which may be paid over time in accordance with a Board approved payment plan, within six (6) months before the end of the probation term.

ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney George M. Wallace. I understand the stipulation and the effect it will have on my Veterinarian License and Premises Registration. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Veterinary Medical Board.

DATED:

10-14-22 
KIM LEWIS KUHLMANN
Respondent

I have read and fully discussed with Respondent Kim Lewis Kuhlmann the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED:

October 15, 2022

George M. Wallace
 GEORGE M. WALLACE
 Attorney for Respondents

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Veterinary Medical Board.

DATED: October 16, 2022

Respectfully submitted,

ROB BONTA
Attorney General of California
KIM KASRELIOVICH
Supervising Deputy Attorney General
ELAINE YAN
Deputy Attorney General

Michael Yi

MICHAEL YI
Deputy Attorney General
Attorneys for Complainant

LA2021600024

Exhibit A

First Amended Accusation number 4602018000299

1 ROB BONTA
 Attorney General of California
 2 KIM KASRELIOVICH
 Supervising Deputy Attorney General
 3 MICHAEL YI
 Deputy Attorney General
 4 State Bar No. 217174
 ELAINE YAN
 5 Deputy Attorney General
 State Bar No. 277961
 6 300 So. Spring Street, Suite 1702
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 7 Telephone: (213) 269-6483
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 8 E-mail: Michael.Yi@doj.ca.gov
Attorneys for Complainant
 9

10 **BEFORE THE**
VETERINARY MEDICAL BOARD
 11 **DEPARTMENT OF CONSUMER AFFAIRS**
 12 **STATE OF CALIFORNIA**
 13

14 In the Matter of the Accusation Against:

Case No. 4602018000299

15 **KIM LEWIS KUHLMANN**
SAN FRANCISCO EQUINE, INC.
 16 [REDACTED]

FIRST AMENDED ACCUSATION

17 Veterinarian License No. VET 8208,
 18 and

19 **SAN FRANCISCO EQUINE, INC.,**
 20 **KIM LEWIS KUHLMANN, DVM**
Managing Licensee
 21 [REDACTED]

22 Premises Registration No. HSP 6179,

23 Respondents.
 24

PARTIES

1
2 1. Jessica Sieferman (Complainant) brings this First Amended Accusation (Accusation)
3 solely in her official capacity as the Executive Officer of the Veterinary Medical Board (Board),
4 Department of Consumer Affairs, State of California.

5 2. On or about March 7, 1983, the Board issued Veterinarian License Number VET
6 8208 to Kim Lewis Kuhlmann (Respondent Kuhlmann). The Veterinarian License was in full
7 force and effect at all times relevant to the charges brought in this Accusation and will expire on
8 January 31, 2024, unless renewed.

9 3. On or about May 30, 2006, the Board issued Premises Registration Number HSP
10 6179 to Respondent Kuhlmann, as managing licensee of the premises, San Francisco Equine, Inc.
11 (Respondent SFE or SFE). Respondent Kuhlmann is the Chief Executive Officer of San
12 Francisco Equine, Inc. The Premises Registration was in full force and effect at all times relevant
13 to the charges brought in this Accusation and will expire on May 31, 2022, unless renewed.

JURISDICTION

14
15 4. This Accusation is brought before the Board under the authority of the following
16 laws. All section references are to the Business and Professions Code unless otherwise indicated.

17 5. Section 118, subdivision (b), provides that suspension, expiration, surrender, or
18 cancellation of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary
19 action during the period within which the license may be renewed, restored, reissued, or
20 reinstated.

21 6. Section 4853.6 provides, in relevant part, that the Board shall withhold, suspend, or
22 revoke registration of a veterinary premises when the license of the managing licensee to practice
23 veterinary medicine is revoked or suspended.

24 7. Section 4875 provides, in relevant part, that the Board may revoke or suspend the
25 license of any person to practice veterinary medicine, or any branch thereof, in this state for any
26 causes provided in the Veterinary Medicine Practice Act (Bus. & Prof. Code § 4800, et seq.). In
27 addition, the Board has the authority to assess a fine not in excess of \$5,000 against a licensee for
28

any of the causes specified in Code section 4883. Such fine may be assessed in lieu of, or in addition to, a suspension or revocation.

STATUTORY PROVISIONS

8. Section 4021 defines “controlled substance” to mean “any substance listed in Chapter 2 (commencing with Section 11053) of Division 10 of the Health and Safety Code.”

9. Section 4022 provides:

“Dangerous drug” or “dangerous device” means any drug or device unsafe for self-use in humans or animals, and includes the following:

(a) Any drug that bears the legend: “Caution: federal law prohibits dispensing without prescription,” “Rx only,” or words of similar import.

(b) Any device that bears the statement: “Caution: federal law restricts this device to sale by or on the order of a _____,” “Rx only,” or words of similar import, the blank to be filled in with the designation of the practitioner licensed to use or order use of the device.

(c) Any other drug or device that by federal or state law can be lawfully dispensed only on prescription or furnished pursuant to Section 4006.

10. Section 4024, subdivision (b), defines “dispense” to include the furnishing of drugs or devices directly to a patient by a veterinarian acting within the scope of his or practice.

11. Section 4169 provides, in relevant part:

(a) A person or entity shall not do any of the following:

....

(3) Purchase, trade, sell, or transfer dangerous drugs that the person knew or reasonably should have known were misbranded, as defined in Section 111335 of the Health and Safety Code.

(4) Purchase, trade, sell, or transfer dangerous drugs or dangerous devices after the beyond use date on the label.

12. Section 4170 provides, in relevant part:

(a) No prescriber shall dispense drugs or dangerous devices to patients in his or her office or place of practice unless all of the following conditions are met:

....

(2) The dangerous drugs or dangerous devices are necessary in the treatment of the condition for which the prescriber is attending the patient.

13. Section 4854 requires all premises where veterinary medicine, veterinary dentistry, or veterinary surgery is being practiced, and all instruments, apparatus and apparel used in connection with those practices, to be kept clean and sanitary at all times, and conform to those minimum standards established by the Board.

14. Section 4855 requires a veterinarian, as required by regulation of the Board, to keep a written record of all animals receiving veterinary services, and provide a summary of that record to the owner of animals receiving veterinary services, when requested.

15. Section 4883 states, in relevant part:

The board may deny, revoke, or suspend a license or registration or assess a fine as

....

(g) Unprofessional conduct, that includes, but is not limited to, the following:

....

(3) A violation of any federal statute, rule, or regulation or any of the statutes, rules, or regulations of this state regulating dangerous drugs or controlled substances.

....

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

....

(o) Violation, or the assisting or abetting violation, of any regulations adopted by the board pursuant to this chapter [the Veterinary Medicine Practice Act].

16. Health and Safety Code section 11190 states, in relevant part:

....

(c)(1) For each prescription for a Schedule II, Schedule III, or Schedule IV controlled substance that is dispensed by a prescriber pursuant to Section 4170 of the Business and Professions Code, the prescriber shall record and maintain the following information:

(A) Full name, address, and the telephone number of the ultimate user or research subject, or contact information as determined by the Secretary of the United States Department of Health and Human Services, and the gender, and date of birth of the patient.

(B) The prescriber's category of licensure and license number; federal controlled substance registration number; and the state medical license number of any prescriber using the federal controlled substance registration number of a government-exempt facility.

(C) NDC (National Drug Code) number of the controlled substance dispensed.

(D) Quantity of the controlled substance dispensed.

(E) ICD-9 (diagnosis code), if available.

(F) Number of refills ordered.

(G) Whether the drug was dispensed as a refill of a prescription or as a first-time request.

(H) Date of origin of the prescription.

(2) (A) Each prescriber that dispenses controlled substances shall provide the Department of Justice the information required by this subdivision on a weekly basis in a format set by the Department of Justice pursuant to regulation.

(B) The reporting requirement in this section shall not apply to the direct administration of a controlled substance to the body of an ultimate user.

(d) This section shall become operative on January 1, 2005.

(e) The reporting requirement in this section for Schedule IV controlled substances shall not apply to any of the following:

(1) The dispensing of a controlled substance in a quantity limited to an amount adequate to treat the ultimate user involved for 48 hours or less.

(2) The administration or dispensing of a controlled substance in accordance with any other exclusion identified by the United States Health and Human Service Secretary for the National All Schedules Prescription Electronic Reporting Act of 2005.

(f) Notwithstanding paragraph (2) of subdivision (c), the reporting requirement of the information required by this section for a Schedule II or Schedule III controlled substance, in a format set by the Department of Justice pursuant to regulation, shall be on a monthly basis for all of the following:

(1) The dispensing of a controlled substance in a quantity limited to an amount adequate to treat the ultimate user involved for 48 hours or less.

(2) The administration or dispensing of a controlled substance in accordance with any other exclusion identified by the United States Health and Human Service Secretary for the National All Schedules Prescription Electronic Reporting Act of 2005.

17. Health and Safety Code section 111345 states: "Any drug or device is misbranded if any word, statement, or other information required by or under this part to appear on the label or labeling is not prominently placed on the label or labeling with conspicuousness, as compared with other words, statements, designs, or devices in the labeling, and in terms as to render it likely

1 to be read and understood by the ordinary individual under customary conditions of purchase and
2 use.”

3 18. Health and Safety Code section 111395, subdivision (a), provides that any drug is
4 misbranded if it is an imitation of another drug.

5 19. Health and Safety Code section 111440 states: “It is unlawful for any person to
6 manufacture, sell, deliver, hold, or offer for sale any drug or device that is misbranded.”

7 20. Health and Safety Code section 111500 states, in relevant part, that a veterinarian
8 may personally furnish his or her own patient with drugs as are necessary in the treatment of the
9 condition for which he or she attends the patient provided that the drug is properly labeled to
10 show all the information required in Section 111480 except the prescription number.

11 The following information is required under Section 111480:

12 (a) Except where the prescriber orders otherwise, either the manufacturer’s trade
13 name of the drug, or the generic name and the name of the manufacturer. Commonly
14 used abbreviations may be used. Preparations containing two or more active
ingredients may be identified by the manufacturer’s trade name or the commonly
used name or the principal active ingredients.

15 (b) The directions for the use of the drug or device.

16 (c) The name of the patient(s).

17 (d) The name of the prescriber.

18 (e) The date of issue.

19 (f) The name, address of the furnisher, and prescription number or other means of
20 identifying the prescription.

21 (g) The strength of the drug or drugs dispensed.

22 (h) The quantity of the drug or drugs dispensed.

23 (i) The expiration date of the effectiveness of the drug or device if the information is
included on the original label of the manufacturer of the drug or device.

24 **REGULATORY PROVISIONS**

25 21. Code of Federal Regulations, title 21, section 1304.22, provides, in relevant part:

26 Each person registered or authorized (by §§ 1301.13(e), 1307.11, 1307.13, or part
27 1317 of this chapter) to manufacture, distribute, dispense, import, export, reverse
28 distribute, destroy, conduct research with controlled substances, or collect controlled
substances from ultimate users, shall maintain records with the information listed in
paragraphs (a) through (f) of this section.

(a) *Records for manufacturers.* Each person registered or authorized to manufacture controlled substances shall maintain records with the following information:

....

(2) For each controlled substance in finished form,

(i) The name of the substance;

(ii) Each finished form (e.g., 10-milligram tablet or 10-milligram concentration per fluid ounce or milliliter) and the number of units or volume of finished form in each commercial container (e.g., 100-tablet bottle or 3-milliliter vial);

....

(iv) The number of units of finished forms and/or commercial containers acquired from other persons, including the date of and number of units and/or commercial containers in each acquisition to inventory and the name, address, and registration number of the person from whom the units were acquired;

....

(vii) The number of commercial containers distributed to other persons, including the date of and number of containers in each reduction from inventory, and the name, address, and registration number of the person to whom the containers were distributed; (viii) The number of commercial containers exported directly by the registrant (under a registration as an exporter), including the date, number of containers and export permit or declaration number for each exportation; and

(ix) The number of units of finished forms and/or commercial containers distributed or disposed of in any other manner by the registrant (e.g., by distribution of complimentary samples or by destruction), including the date and manner of distribution or disposal, the name, address, and registration number of the person to whom distributed, and the quantity in finished form distributed or disposed.

....

(c) *Records for dispensers and researchers.* Each person registered or authorized to dispense or conduct research with controlled substances shall maintain records with the same information required of manufacturers pursuant to paragraph (a)(2)(i), (ii), (iv), (vii), and (ix) of this section. In addition, records shall be maintained of the number of units or volume of such finished form dispensed, including the name and address of the person to whom it was dispensed, the date of dispensing, the number of units or volume dispensed, and the written or typewritten name or initials of the individual who dispensed or administered the substance on behalf of the dispenser. In addition to the requirements of this paragraph, practitioners dispensing gamma-hydroxybutyric acid under a prescription must also comply with § 1304.26.

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22. California Code of Regulations (CCR), title 4, section 1867, subdivision (b), prohibits the possession and/or use on the premises of a facility under the jurisdiction of the California Horse Racing Board (CHRB) of any drug, substance, or medication by a veterinarian that has not been approved by the United States Food and Drug Administration for use in the United States.

23. CCR, title 16, section 2030 states, in relevant part:

All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those

the following minimum standards:

....

(f) The veterinary premises shall meet the following standards:

....

(6) All drugs and biologicals shall be maintained, administered, dispensed and

24. CCR, title 16, section 2030.05, subdivision (b), states that the Licensee Manager is responsible for ensuring that the premises for which he/she is manager complies with the requirements in Code sections 4853, 4854, 4855 and 4856. The Licensee Manager is responsible for ensuring that the physical and operational components of a premises meet the minimum standards of practice as set forth in CCR, title 16, sections 2030 through 2032.5.

25. CCR, title 16, section 2032.1 provides, in relevant part:

(a) It is unprofessional conduct for a veterinarian to administer, prescribe, dispense or furnish a drug, medicine, appliance, or treatment of whatever nature for the prevention, cure, or relief of a wound, fracture or bodily injury or disease of an animal without having first established a veterinarian-client-patient relationship with the animal patient or patients and the client, except where the patient is a wild animal or the owner is unknown.

(b) A veterinarian-client-patient relationship shall be established by the following:

(1) The client has authorized the veterinarian to assume responsibility for making medical judgments regarding the health of the animal, including the need for medical treatment,

(2) The veterinarian has sufficient knowledge of the animal(s) to initiate at least a general or preliminary diagnosis of the medical condition of the animal(s). This means that the veterinarian is personally acquainted with the care of the animal(s) by virtue of an examination of the animal or by medically appropriate and timely visits to the premises where the animals are kept, and

(3) The veterinarian has assumed responsibility for making medical judgments regarding the health of the animal and has communicated with the client a course of treatment appropriate to the circumstance.

(c) A drug shall not be prescribed for a duration inconsistent with the medical condition of the animal(s) or type of drug prescribed. The veterinarian shall not prescribe a drug for a duration longer than one year from the date the veterinarian examined the animal(s) and prescribed the drug.

(d) As used herein, "drug" shall mean any controlled substance, as defined by Section 4021 of the code, and any dangerous drug, as defined by Section 4022 of the code.

(e) No person may practice veterinary medicine in this state except within the context of a veterinarian-client-patient relationship or as otherwise permitted by law. A veterinarian-client-patient relationship cannot be established solely by telephonic or electronic means.

26. CCR, title 16, section 2032.3 provides, in relevant part:

(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:

....

(4) Except for herds or flocks, age, sex, breed, species, and color of the animal.

....

(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.

....

(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.

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COST RECOVERY

27. Section 125.3 provides that a board may request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

DRUG CLASSIFICATIONS

28. *Acepromazine*, commonly known as Ace, is a tranquilizer used in horses. Acepromazine is restricted for use by or on the order of a licensed veterinarian and is a dangerous drug pursuant to section 4022.

29. *Acetylcysteine*, sold as Acetyl-L-Cysteine, is an injectable used for a number of clinical uses in horses. Acetylcysteine is a dangerous drug pursuant to section 4022.

30. *Adrenocorticotrophic hormone*, sold under the brand name ACTH, is an injectable polypeptide tropic hormone used in the treatment of adrenal cortex suppression and severe stress in horses. Adrenocorticotrophic hormone is a dangerous drug pursuant to section 4022.

31. *Aminocaproic acid* is used to treat various bleeding disorders in horses. Aminocaproic acid is a dangerous drug pursuant to section 4022.

32. *Branched chain amino acids*, commonly known as BC2A paste, is marketed to support horse health and performance, including joints, muscles, hooves, skin and coat, mane and tail, and digestion.

33. *Bupivacaine hydrochloride*, sold as Marcaine, is a local anesthetic used to treat pain. Bupivacaine hydrochloride is a dangerous drug pursuant to section 4022.

34. *Butorphanol tartrate* is a narcotic, Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision (c)(3), and a dangerous drug pursuant to section 4022.

35. *Calcium gluconate* in an injectable in the treatment of hypocalcemic conditions. Calcium gluconate is a dangerous drug pursuant to section 4022.

36. *Carisprodol* is a depressant used as a muscle relaxant in horses. Meprobamate is the primary active metabolite in carisprodol. Meprobamate is a Schedule IV controlled substance

1 pursuant to Health and Safety Code section 11057, subdivision (d)(18), and a dangerous drug
2 pursuant to section 4022.

3 37. *Conjugated equine estrogens*, sold under the brand name Premarin, is an estrogen
4 medication used in menopausal hormone therapy. Conjugated equine estrogens is a dangerous
5 drug pursuant to section 4022.

6 38. *Cyanocobalamin*, commonly known as Vitamin B and used in horses, is a dangerous
7 drug pursuant to section 4022.

8 39. *Dimethyl sulfoxide*, commonly known as DMSO, is approved by the FDA for topical
9 use on horses, but has been used off-label to treat inflammatory conditions.

10 40. *Electrolyte paste*, commonly referred to as ELPAS, is a nutritional supplement
11 marketed as replacing crucial electrolytes depleted through exercise, stress, heat and/or humidity
12 to help a horse maintain the necessary fluid levels for normal function.

13 41. *Electrolytes D* is a nutritional supplement used in horses.

14 42. *Enrofloxacin*, sold as Enroflox, is used to treat various infections. Enrofloxacin is
15 restricted for use by or on the order of a licensed veterinarian and is a dangerous drug pursuant to
16 section 4022.

17 43. *Entrolyte packet* is a nutritional supplement for veterinary use only.

18 44. *EqStim* is a biologic used as an injectable adjunct therapy for equine respiratory
19 disease.

20 45. *Estrone*, sold under the brand names Estragyn, Kestrin, and Theelin, is an estrogen
21 medication used in menopausal hormone therapy. Estrone is a dangerous drug pursuant to section
22 4022.

23 46. *Ferric hydroxide-sucrose complex*, sold as Hippiron, is an injectable iron supplement
24 for treatment of iron deficiency in racing horses. Ferric hydroxide-sucrose complex is a
25 dangerous drug pursuant to section 4022.

26 ///

27 ///

28 ///

1 47. *Flumethasone*, sold under the brand name Flucort, is an injectable corticosteroid used
2 in horses for musculoskeletal conditions due to inflammation, where permanent structural
3 changes do not exist, such as bursitis, carpalis, osselets, and myositis. Flumethasone is a
4 dangerous drug pursuant to section 4022.

5 48. *Flunixin meglumine*, sold under the brand name Banamine, is an injectable non-
6 steroidal anti-inflammatory drug (NSAID) approved for use in cattle and horses in the United
7 States. Flunixin meglumine is a dangerous drug pursuant to section 4022.

8 49. *Glycopyrrolate* is a quaternary ammonium salt and synthetic anti-cholinergic drug
9 that exerts peripheral anti-muscarinic effects on the respiratory tract. Glycopyrrolate is a
10 dangerous drug pursuant to section 4022

11 50. *Guaifenesin* is a centrally acting skeletal muscle relaxant used in horses. Guaifenesin
12 is a dangerous drug pursuant to section 4022.

13 51. *Heparin* is an anticoagulant drug used to treat a variety of medical conditions where
14 there is excessive clotting or increased risk of clot formation. Heparin is a dangerous drug
15 pursuant to section 4022

16 52. *Iodine in almond oil* is a compounded sterile drug prescribed for horses to treat
17 tendon, ligament, and muscle strains. Iodine in almond oil is a dangerous drug pursuant to
18 section 4022.

19 53. *Ketamine* is a Schedule III controlled substance pursuant to Health and Safety Code
20 section 11056, subdivision (g), and a dangerous drug pursuant to section 4022.

21 54. *Ketoprofen*, sold under the brand name Ketofen, is an injectable NSAID used for the
22 alleviation of inflammation and pain associated with musculoskeletal disorders in horses.
23 Ketoprofen is a dangerous drug pursuant to section 4022.

24 55. *L-arginine* is an injectable prescribed for use in horses. L-arginine is a dangerous
25 drug pursuant to section 4022.

26 56. *N-butyl alcohol*, commonly known as Clotol, is a pre-race bleeding medication.
27 N-butyl alcohol is a dangerous drug pursuant to section 4022.
28

57. *Normosol-R* is a sterile, nonpyrogenic isotonic solution of electrolytes in water administered by intravenous infusion to treat dehydration, as fluid replacement during surgery, and in treating diseases, such as colic in horses. Normosol-R is a dangerous drug pursuant to section 4022.

58. *Omeprazole paste*, sold under the brand name Gastrogard, is used to treat equine gastric ulcers. Omeprazole paste is a dangerous drug pursuant to section 4022.

59. *Parapox ovis virus immunomodulator*, sold under the brand name Zylexis, is a vaccine used in the treatment of equine herpes virus or in periods of stress. Parapox ovis virus immunomodulator is a dangerous drug pursuant to section 4022.

60. *Pentosan polysulfate sodium*, sold under the brand name Pentosan, is approved for use as a post-surgical joint lavage, but is used off-label via intramuscular injection as a general joint supplement and anti-inflammatory. Pentosan is a dangerous drug pursuant to section 4022.

61. *Phenylbutazone*, commonly known as Bute and sold as Butazolidin, is an NSAID used to treat lameness in horses. Phenylbutazone is a dangerous drug pursuant to section 4022.

62. *Platinum Performance Equine* is a nutritional supplement marketed to support horse health and performance.

63. *Polysulfated glycosaminoglycan*, sold under the brand name Adequan, is used for the intramuscular treatment of non-infectious degenerative and/or traumatic joint dysfunction and associated lameness of the carpal and hock joints in horses. Polysulfated glycosaminoglycan is a dangerous drug pursuant to section 4022.

64. *Magnesium sulfate*, commonly referred to as Magsul or Magsulfate, is used for muscle function. Magnesium sulfate is a dangerous drug pursuant to section 4022.

65. *Medroxyprogesterone* is a synthetic progestin hormone administered to mares off-label to suppress behavioral estrus and may be prescribed for behavior control. Medroxyprogesterone is a dangerous drug pursuant to section 4022.

66. *Methocarbamol*, sold under the brand name Robaxin-V, is a potent skeletal muscle relaxant, and federal law restricts this drug to use by or on the order of a licensed veterinarian. Methocarbamol is a dangerous drug pursuant to section 4022.

67. *Minocycline* is an antibiotic used in horses to treat susceptible bacterial infections and tick-borne diseases. Minocycline is a dangerous drug pursuant to section 4022.

68. *Reserpine* is a long-acting tranquilizer used in horses to sedate excitable or difficult horses. Reserpine is a dangerous drug pursuant to section 4022.

69. *Sarapin* is a prescription medication designed to reduce joint pain and inflammation in horses. Sarapin is a dangerous drug pursuant to section 4022.

70. *Selenium-tocopherol*, sold under the brand name E-SE, is an injectable drug and labeled for only veterinary use to control myositis syndrome, rapid respiration, profuse sweating, muscle spasms and stiffness. Selenium-tocopherol is restricted by federal law for use by or on the order of a licensed veterinarian and is a dangerous drug pursuant to section 4022.

71. *Seramune* is used for the treatment of failure of passive transfer in neonatal foals and sold for veterinary use. Seramune is a dangerous drug pursuant to section 4022.

72. *Sodium hyaluronate* injection, sold as Hylartin-V, is used to treat joint dysfunction in horses. Sodium hyaluronate is restricted for use by or on the order of a licensed veterinarian and is a dangerous drug pursuant to section 4022.

73. *Sodium pentobarbital and phenytoin sodium solution*, commonly referred to as Euthanasia Solution, is used to cause humane, painless, and rapid euthanasia of animals. Sodium pentobarbital and phenytoin sodium solution is restricted by federal law for use by or on the order of a licensed veterinarians, is a Schedule III controlled substance pursuant to Health and Safety Code section 11056, subdivision (c)(1)(C), and is a dangerous drug pursuant to section 4022.

74. *Stanozolol*, sold under the brand name Winstrol, is an anabolic steroid, Schedule III controlled substance pursuant to Health and Safety Code section 11056, subdivision (f), and a dangerous drug pursuant to section 4022.

75. *Stop Two* is a homeopathic animal medicine that is not FDA-approved for the treatment or mitigation of any disease. The Stop Two label states an indication "to reduce the incidence and severity of EPIH (bleeding) in performance horses." The label also states it is "RX Only for IV injection." Stop Two is a dangerous drug pursuant to section 4022.

76. *Trimethoprim and sulfadiazine*, sold as Uniprim, is an oral antibiotic powder used in horses to treat systemic bacterial infections. Trimethoprim and sulfadiazine is restricted for use by or on the order of a licensed veterinarian and is a dangerous drug pursuant to section 4022.

77. *Vitamin C*, an injectable nutritive supplement used in horses, is a dangerous drug pursuant to section 4022.

78. *Vitamin/electrolyte*, a substance injected or administered intravenously, is a dangerous drug pursuant to section 4022.

79. *Vitamins*, injectable nutritive supplements used in horses, are dangerous drugs pursuant to section 4022.

80. *Zylkene* is a nutritional supplement marketed for calming horses.

FACTUAL ALLEGATIONS

81. On or about September 22, 2017, the Board received a complaint from the California Horse Racing Board (CHRB) alleging that Respondent Kuhlmann and two other veterinarians employed at Respondent SFE, Dr. Kenneth Allison and Dr. Steven Boyer (collectively, “the SFE veterinarians”), prescribed and administered medications to equine patients per the trainer’s instructions, without an examination or medical necessity. The complaint alleged the SFE veterinarians prescribed the medications because the equine patients were entered to race – not to treat any specific condition diagnosed by the veterinarians. The complaint included CHRB veterinarian reports completed by the SFE veterinarians, dated June 2017 through August 2017. The reports showed that the trainers of SFE’s equine patients, rather than the SFE veterinarians, made the decisions to prescribe and administer the medications.

82. On or about September 27, 2018, Board Inspector J. H., assisted by investigators J. A. and C. R. from the Department of Consumer Affairs, Division of Investigation, inspected Respondent SFE’s premises (Board inspection). No SFE veterinarians were present during the inspection. J. A. requested that SFE’s Office Manager, S. K., provide records for the equine patients allegedly treated by the SFE veterinarians. S. K. could not locate records for some of the equine patients. The records produced by S. K. showed that there was no examination, assessment, medical explanation, or quantity for the medication given to the equine patients.

J. A. asked S. K. to verify there were no additional records explaining the reason for the medication administered or dispensed. S. K. confirmed there was no explanation in the records as to why the medications were administered or dispensed.

FIRST CAUSE FOR DISCIPLINE

(Negligence)

83. Respondent Kuhlman is subject to disciplinary action under section 4883, subdivision (i), for negligence in the practice of veterinary medicine. Respondent Kuhlmann prescribed, dispensed, or administered medications to animal patients without performing an examination and forming a diagnosis of any condition that required treatment, as follows:

84. On or about July 2, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient W.¹:

- a. Ketoprofen;
- b. Flumethasone;
- c. Vitamin C-K injection;
- d. Pentosan polysulfate sodium;
- e. Seramune;
- f. BC2A paste;
- g. Conjugated equine estrogen;
- h. Electrolyte paste; and
- i. Methocarbamol injection.

85. On or about July 2, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient T. I.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Pentosan polysulfate sodium;

¹ Initials are used to protect the equine patients' identities.

1 d. BC2A paste; and

2 e. Electrolyte paste.

3 86. On or about July 2, 2017, without performing an examination and forming a
4 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
5 or administered the following medications to equine patient Y. T.:

6 a. Ketoprofen;

7 b. Flumethasone;

8 c. BC2A paste;

9 d. Electrolyte paste;

10 e. Conjugated equine estrogen; and

11 f. Vitamin C-K injection.

12 87. On or about July 2, 2017, without performing an examination and forming a
13 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
14 or administered the following medications to equine patient M. B.:

15 a. Flunixin meglumine injection;

16 b. Calcium gluconate injection;

17 c. Vitamin C injection;

18 d. BC2A paste;

19 e. Electrolyte paste; and

20 f. Flumethasone.

21 88. On or about July 2, 2017, without performing an examination and forming a
22 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
23 or administered the following medications to equine patient Mi. B.:

24 a. Flumethasone;

25 b. Flunixin meglumine injection;

26 c. Calcium gluconate injection;

27 d. Vitamin C injection;

28 e. BC2A paste; and

1 f. Electrolyte paste.

2
3 89. On or about July 2, 2017, without performing an examination and forming a
4 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
5 or administered the following medications to equine patient Q. S.:

- 6 a. Flumethasone;
7 b. Flunixin meglumine injection;
8 c. Calcium gluconate injection;
9 d. Vitamin C injection;
10 e. BC2A paste; and
11 f. Electrolyte paste.

12 90. On or about July 2, 2017, without performing an examination and forming a
13 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
14 or administered the following medications to equine patient A. P.:

- 15 a. Ketoprofen;
16 b. Flumethasone;
17 c. Pentosan polysulfate sodium;
18 d. BC2A paste;
19 e. Electrolyte paste;
20 f. Methocarbamol injection;
21 g. Estrone; and
22 h. Adrenocorticotrophic hormone.

23 91. On or about August 1, 2017, without performing an examination and forming a
24 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
25 or administered the following medications to equine patient S.:

- 26 a. Ketoprofen;
27 b. Flumethasone;
28 c. Pentosan polysulfate sodium;

- d. Methocarbamol injection;
- e. BC2A paste;
- f. Electrolyte paste; and
- g. Estrone.

92. On or about August 1, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient M. M.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Pentosan polysulfate sodium;
- d. Methocarbamol injection;
- e. BC2A paste; and
- f. Electrolyte paste.

93. On or about August 1, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient S. F.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Pentosan polysulfate sodium;
- d. Methocarbamol injection;
- e. BC2A paste; and
- f. Electrolyte paste.

94. On or about August 3, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient L. T.:

- a. Flunixin meglumine injection;
- b. Flumethasone;
- c. Calcium gluconate injection;

- d. Vitamin C injection;
- e. BC2A paste;
- f. Electrolyte paste; and
- g. Vitamin/electrolyte.

95. On or about August 3, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient E. B.:

- a. Flunixin meglumine injection;
- b. Flumethasone;
- c. Calcium gluconate injection;
- d. Vitamin C injection;
- e. BC2A paste;
- f. Electrolyte paste; and
- g. Vitamin/electrolyte.

96. On or about August 3, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient R. A.:

- a. Flunixin meglumine injection;
- b. Flumethasone;
- c. Calcium gluconate injection;
- d. Vitamin C injection;
- e. BC2A paste; and
- f. Electrolyte paste.

97. On or about August 3, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient M.:

- a. Ketoprofen;
- b. Flumethasone;

- c. Pentosan polysulfate sodium;
- d. BC2A paste; and
- e. Electrolyte paste.

98. On or about August 3, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient R. H.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Pentosan polysulfate sodium;
- d. BC2A paste;
- e. Electrolyte paste; and
- f. Calcium gluconate injection.

99. On or about August 4, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient O.:

- a. Flunixin meglumine injection;
- b. Methocarbamol injection;
- c. Flumethasone;
- d. Dimethyl sulfoxide IV;
- e. Polysulfated glycosaminoglycan injection; and
- f. Vitamin/electrolyte.

100. On or about August 4, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient G. S.:

- a. Flunixin meglumine injection;
- b. Methocarbamol injection;
- c. Flumethasone;
- d. Dimethyl sulfoxide IV;

1 e. Vitamin/electrolyte;

2 f. Stop Two; and

3 g. Gastrogard paste.

4 101. On or about August 4, 2017, without performing an examination and forming a
5 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
6 or administered the following medications to equine patient C. S.:

7 a. Flunixin meglumine injection;

8 b. Flumethasone;

9 c. Calcium gluconate injection;

10 d. Vitamin C injection;

11 e. BC2A paste; and

12 f. Electrolyte paste.

13 102. On or about August 4, 2017, without performing an examination and forming a
14 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
15 or administered the following medications to equine patient A. M.:

16 a. Flunixin meglumine injection;

17 b. Flumethasone;

18 c. Calcium gluconate injection;

19 d. Vitamin C injection;

20 e. BC2A paste; and

21 f. Electrolyte paste.

22 103. On or about August 4, 2017, without performing an examination and forming a
23 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
24 or administered the following medications to equine patient E.:

25 a. Flunixin meglumine injection;

26 b. Flumethasone;

27 c. Calcium gluconate injection;

28 d. Vitamin C injection;

1 e. BC2A paste; and

2 f. Electrolyte paste.

3 104. On or about August 4, 2017, without performing an examination and forming a
4 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
5 or administered the following medications to equine patient S.P.:

6 a. Flunixin meglumine injection;

7 b. Flumethasone;

8 c. Calcium gluconate injection;

9 d. Vitamin C injection;

10 e. BC2A paste; and

11 f. Electrolyte paste.

12 105. On or about August 16, 2017, without performing an examination and forming a
13 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
14 or administered the following medications to equine patient J. L.:

15 a. Vitamin/Electrolyte;

16 b. Ketoprofen injection;

17 c. BC2A paste;

18 d. Electrolyte paste; and

19 e. Entrolyte packet.

20 106. On or about August 16, 2017, without performing an examination and forming a
21 diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed,
22 or administered the following medications to equine patient L. A.:

23 a. Ketoprofen;

24 b. Flumethasone;

25 c. Calcium gluconate injection;

26 d. Vitamin C injection;

27 e. BC2A paste;

28 f. Electrolyte paste; and

g. Entrolyte packet.

107. On or about August 16, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient E. G.:

- a. Flunixin meglumine injection;
- b. Methocarbamol injection;
- c. Electrolytes D;
- d. Cyanocobalamin (2); and
- e. Calcium gluconate injection (2).

108. On or about August 16, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient S.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Pentosan polysulfate sodium;
- d. BC2A paste;
- e. Electrolyte paste; and
- f. Methocarbamol injection.

109. On or about August 16, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient D. E.:

- a. Polysulfated glycosaminoglycan injection;
- b. Ketoprofen;
- c. Flumethasone;
- d. BC2A paste;
- e. Entrolyte packet; and
- f. Adrenocorticotrophic hormone.

110. On or about August 16, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient I. J.:

- a. Polysulfated glycosaminoglycan injection;
- b. Ketoprofen;
- c. Flumethasone;
- d. BC2A paste;
- e. Entrolyte packet; and
- f. Adrenocorticotrophic hormone.

111. On or about August 16, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medications to equine patient N. J.:

- a. Polysulfated glycosaminoglycan injection;
- b. Ketoprofen;
- c. Flumethasone;
- d. Adrenocorticotrophic hormone (2);
- e. BC2A paste; and
- f. Entrolyte packet.

112. On or about August 17, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medication to equine patient W. N.: N-butyl alcohol.

113. On or about August 17, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medication to equine patient A.: N-butyl alcohol.

114. On or about August 17, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann prescribed, dispensed, or administered the following medication to equine patient U. G.: N-butyl alcohol.

SECOND CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Dispensing Dangerous Drugs Without Medical Necessity)

115. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2). Respondent Kuhlmann dispensed dangerous drugs to equine patients that were unnecessary for the treatment of any condition, as follows:

116. On or about July 2, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the following unnecessary dangerous drugs to equine patient W.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Vitamin C injection;
- d. Pentosan polysulfate sodium;
- e. Conjugated equine estrogen; and
- f. Methocarbamol injection.

117. On or about July 2, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the following unnecessary dangerous drugs to equine patient T. I.:

- a. Ketoprofen;
- b. Flumethasone; and
- c. Pentosan polysulfate sodium.

118. On or about July 2, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the following unnecessary dangerous drugs to equine patient Y. T.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Conjugated equine estrogen; and
- d. Vitamin C injection.

1 119. On or about July 2, 2017, without performing an examination and forming a
2 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
3 following unnecessary dangerous drugs to equine patient M. B.:

- 4 a. Flunixin meglumine injection;
- 5 b. Calcium gluconate injection;
- 6 c. Vitamin C injection; and
- 7 d. Flumethasone.

8 120. On or about July 2, 2017, without performing an examination and forming a
9 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
10 following unnecessary dangerous drugs to equine patient Mi. B.:

- 11 a. Flumethasone;
- 12 b. Flunixin meglumine injection;
- 13 c. Calcium gluconate injection; and
- 14 d. Vitamin C injection.

15 121. On or about July 2, 2017, without performing an examination and forming a
16 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
17 following unnecessary dangerous drugs to equine patient Q. S.:

- 18 a. Flumethasone;
- 19 b. Flunixin meglumine injection;
- 20 c. Calcium gluconate injection; and
- 21 d. Vitamin C injection.

22 122. On or about July 2, 2017, without performing an examination and forming a
23 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
24 following unnecessary dangerous drugs to equine patient A. P.:

- 25 a. Ketoprofen;
- 26 b. Flumethasone;
- 27 c. Pentosan polysulfate sodium;
- 28 d. Methocarbamol injection;

- e. Estrone; and
- f. Adrenocorticotrophic hormone.

123. On or about August 1, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the following unnecessary dangerous drugs to equine patient S.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Pentosan polysulfate sodium;
- d. Methocarbamol injection; and
- e. Estrone.

124. On or about August 1, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the following unnecessary dangerous drugs to equine patient M. M.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Pentosan polysulfate sodium; and
- d. Methocarbamol injection.

125. On or about August 1, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the following unnecessary dangerous drugs to equine patient S. F.:

- a. Ketoprofen;
- b. Flumethasone;
- c. Pentosan polysulfate sodium; and
- d. Methocarbamol injection.

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1 126. On or about August 3, 2017, without performing an examination and forming a
2 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
3 following unnecessary dangerous drugs to equine patient L. T.:

- 4 a. Flunixin meglumine injection;
- 5 b. Flumethasone;
- 6 c. Calcium gluconate injection;
- 7 d. Vitamin C injection; and
- 8 e. Vitamin/electrolyte.

9 127. On or about August 3, 2017, without performing an examination and forming a
10 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
11 following unnecessary dangerous drugs to equine patient E. B.:

- 12 a. Flunixin meglumine injection;
- 13 b. Flumethasone;
- 14 c. Calcium gluconate injection;
- 15 d. Vitamin C injection; and
- 16 e. Vitamin/electrolyte.

17 128. On or about August 3, 2017, without performing an examination and forming a
18 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
19 following unnecessary dangerous drugs to equine patient R. A.:

- 20 a. Flunixin meglumine injection;
- 21 b. Flumethasone;
- 22 c. Calcium gluconate injection; and
- 23 d. Vitamin C injection.

24 129. On or about August 3, 2017, without performing an examination and forming a
25 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
26 following unnecessary dangerous drugs to equine patient M.:

- 27 a. Ketoprofen;
- 28 b. Flumethasone; and

1 c. Pentosan polysulfate sodium.

2 130. On or about August 3, 2017, without performing an examination and forming a
3 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
4 following unnecessary dangerous drugs to equine patient R. H.:

- 5 a. Ketoprofen;
6 b. Flumethasone;
7 c. Pentosan polysulfate sodium; and
8 d. Calcium gluconate injection.

9 131. On or about August 4, 2017, without performing an examination and forming a
10 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
11 following unnecessary dangerous drugs to equine patient O.:

- 12 a. Flunixin meglumine injection;
13 b. Methocarbamol injection;
14 c. Flumethasone;
15 d. Polysulfated glycosaminoglycan injection; and
16 e. Vitamin/electrolyte.

17 132. On or about August 4, 2017, without performing an examination and forming a
18 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
19 following unnecessary dangerous drugs to equine patient G. S.:

- 20 a. Flunixin meglumine injection;
21 b. Methocarbamol injection;
22 c. Flumethasone;
23 d. Vitamin/electrolyte;
24 e. Stop Two; and
25 f. Gastrogard paste.

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1 133. On or about August 4, 2017, without performing an examination and forming a
2 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
3 following unnecessary dangerous drugs to equine patient C. S.:

- 4 a. Flunixin meglumine injection;
- 5 b. Flumethasone;
- 6 c. Calcium gluconate injection; and
- 7 d. Vitamin C injection.

8 134. On or about August 4, 2017, without performing an examination and forming a
9 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
10 following unnecessary dangerous drugs to equine patient A. M.:

- 11 a. Flunixin meglumine injection;
- 12 b. Flumethasone;
- 13 c. Calcium gluconate injection; and
- 14 d. Vitamin C injection.

15 135. On or about August 4, 2017, without performing an examination and forming a
16 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
17 following unnecessary dangerous drugs to equine patient E.:

- 18 a. Flunixin meglumine injection;
- 19 b. Flumethasone;
- 20 c. Calcium gluconate injection; and
- 21 d. Vitamin C injection.

22 136. On or about August 4, 2017, without performing an examination and forming a
23 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
24 following unnecessary dangerous drugs to equine patient S.P.:

- 25 a. Flunixin meglumine injection;
- 26 b. Flumethasone;
- 27 c. Calcium gluconate injection; and
- 28 d. Vitamin C injection.

1 137. On or about August 16, 2017, without performing an examination and forming a
2 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
3 following unnecessary dangerous drugs to equine patient J. L.:

- 4 a. Vitamin/electrolyte; and
- 5 b. Ketoprofen injection.

6 138. On or about August 16, 2017, without performing an examination and forming a
7 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
8 following unnecessary dangerous drugs to equine patient L. A.:

- 9 a. Ketoprofen;
- 10 b. Flumethasone;
- 11 c. Calcium gluconate injection; and
- 12 d. Vitamin C injection.

13 139. On or about August 16, 2017, without performing an examination and forming a
14 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
15 following unnecessary dangerous drugs to equine patient E. G.:

- 16 a. Flunixin meglumine injection;
- 17 b. Methocarbamol injection;
- 18 c. Cyanocobalamin (2); and
- 19 d. Calcium gluconate injection (2).

20 140. On or about August 16, 2017, without performing an examination and forming a
21 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
22 following unnecessary dangerous drugs to equine patient S.:

- 23 a. Ketoprofen;
- 24 b. Flumethasone;
- 25 c. Pentosan polysulfate sodium; and
- 26 d. Methocarbamol injection.

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1 141. On or about August 16, 2017, without performing an examination and forming a
2 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
3 following unnecessary dangerous drugs to equine patient D. E.:

- 4 a. Polysulfated glycosaminoglycan injection;
- 5 b. Ketoprofen;
- 6 c. Flumethasone; and
- 7 d. Adrenocorticotrophic hormone.

8 142. On or about August 16, 2017, without performing an examination and forming a
9 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
10 following unnecessary dangerous drugs to equine patient I. J.:

- 11 a. Polysulfated glycosaminoglycan injection;
- 12 b. Ketoprofen;
- 13 c. Flumethasone; and
- 14 d. Adrenocorticotrophic hormone.

15 143. On or about August 16, 2017, without performing an examination and forming a
16 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
17 following unnecessary dangerous drugs to equine patient N. J.:

- 18 a. Polysulfated glycosaminoglycan injection;
- 19 b. Ketoprofen;
- 20 c. Flumethasone; and
- 21 d. Adrenocorticotrophic hormone.

22 144. On or about August 17, 2017, without performing an examination and forming a
23 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
24 following unnecessary dangerous drug to equine patient W. N.: N-butyl alcohol.

25 145. On or about August 17, 2017, without performing an examination and forming a
26 diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the
27 following unnecessary dangerous drug to equine patient A.: N-butyl alcohol.

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146. On or about August 17, 2017, without performing an examination and forming a diagnosis of any condition that required treatment, Respondent Kuhlmann dispensed the following unnecessary dangerous drug to equine patient U. G.: N-butyl alcohol.

THIRD CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Failure to Establish a Veterinarian-Client-Patient Relationship)

147. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under section 4883, subdivisions (g) and (o), and CCR, title 16, section 2032.1, subdivision (a). Respondent did not establish a veterinarian-client-patient relationship before administering, prescribing, dispensing, or furnishing a drug, medicine, application, or treatment, as follows:

148. As set forth in paragraphs 81 through 146 above, incorporated here by reference, Respondent Kuhlmann prescribed, dispensed, or administered drugs to equine patients, without establishing a veterinarian-client-patient relationship with the patients. Respondent Kuhlmann did not: (1) perform and/or document an examination of the patients; (2) form and/or document a diagnoses of any condition that required treatment; or (3) communicate and/or document the appropriate course of treatment with the client.

149. On August 16, 2017, Respondent Kuhlmann also provided pharynx treatment to equine patient M. G. Before providing treatment, Respondent did not: (1) perform and/or document an examination of M. G.; (2) form and/or document a diagnoses of any condition that required treatment; or (3) communicate and/or document the appropriate course of treatment with the client. Accordingly, Respondent Kuhlmann failed to establish the required veterinarian-client-patient relationship before treating M. G.

FOURTH CAUSE FOR DISCIPLINE

(Record keeping)

150. Respondent Kuhlmann is subject to disciplinary action under sections 4855 and 4883, subdivision (o), for failing to keep written records containing the information required under CCR, title 16, section 2032.3, for equine patients receiving veterinary services, as follows:

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1 151. The Patient History Report for equine patient W., dated July 2, 2017, failed to
2 include the following information:

- 3 a. Age, sex, breed, and color of the equine patient as required under CCR,
4 title 16, section 2032.3, subdivision (a)(4);
- 5 b. A history or pertinent information as it pertains to the equine patient's
6 medical statutes as required under CCR, title 16, section 2032.3,
7 subdivision (a)(6);
- 8 c. Data, including that obtained by instrumentation, from the physical
9 examination of the equine patient as required under CCR, title 16, section
10 2032.3, subdivision (a)(7);
- 11 d. Treatment and intended treatment plan, including medication dosages as
12 required under CCR, title 16, section 2032.3, subdivision (a)(8);
- 13 e. Diagnosis or assessment prior to performing a treatment or procedure as
14 required under CCR, title 16, section 2032.3, subdivision (a)(10);
- 15 f. A prognosis of the animal's condition as required under CCR, title 16,
16 section 2032.3, subdivision (a)(11);
- 17 g. For each medication prescribed and dispensed, the strength, dosage, route
18 of administration, quantity, and frequency of use as required under CCR,
19 title 16, section 2032.3, subdivision (a)(12); and
- 20 h. Daily progress and disposition of the case as required under CCR title 16,
21 section 2032.3, subdivision (a)(13).

22 152. The Patient History Report for equine patient T. I., dated July 2, 2017, failed to
23 include the following information:

- 24 a. A history or pertinent information as it pertains to the equine patient's
25 medical statutes as required under CCR, title 16, section 2032.3,
26 subdivision (a)(6);

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- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

153. The Patient History Report for equine patient Y. T., dated July 2, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);

- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

154. The Patient History Report for equine patient M. B., dated July 2, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

1 155. The Patient History Report for equine patient Mi. B., dated July 2, 2017, failed to
2 include the following information:

- 3 a. Age, sex, breed, and color of the equine patient as required under CCR,
4 title 16, section 2032.3, subdivision (a)(4);
- 5 b. A history or pertinent information as it pertains to the equine patient's
6 medical statutes as required under CCR, title 16, section 2032.3,
7 subdivision (a)(6);
- 8 c. Data, including that obtained by instrumentation, from the physical
9 examination of the equine patient as required under CCR, title 16, section
10 2032.3, subdivision (a)(7);
- 11 d. Treatment and intended treatment plan, including medication dosages as
12 required under CCR, title 16, section 2032.3, subdivision (a)(8);
- 13 e. Diagnosis or assessment prior to performing a treatment or procedure as
14 required under CCR, title 16, section 2032.3, subdivision (a)(10);
- 15 f. A prognosis of the animal's condition as required under CCR, title 16,
16 section 2032.3, subdivision (a)(11);
- 17 g. For each medication prescribed and dispensed, the strength, dosage, route
18 of administration, quantity, and frequency of use as required under CCR,
19 title 16, section 2032.3, subdivision (a)(12); and
- 20 h. Daily progress and disposition of the case as required under CCR title 16,
21 section 2032.3, subdivision (a)(13).

22 156. The Patient History Report for equine patient Q. S., dated July 2, 2017, failed to
23 include the following information:

- 24 a. Age, sex, breed, and color of the equine patient as required under CCR,
25 title 16, section 2032.3, subdivision (a)(4);

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- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

157. The Patient History Report for equine patient A. P., dated July 2, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);

- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

158. The Patient History Report for equine patient S., dated August 1, 2017, failed to include the following information:

- a. Age, sex, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);

- 1 g. For each medication prescribed and dispensed, the strength, dosage, route
2 of administration, quantity, and frequency of use as required under CCR,
3 title 16, section 2032.3, subdivision (a)(12); and
4 h. Daily progress and disposition of the case as required under CCR title 16,
5 section 2032.3, subdivision (a)(13).

6 159. The Patient History Report for equine patient M. M., dated August 1, 2017, failed to
7 include the following information:

- 8 a. A history or pertinent information as it pertains to the equine patient's
9 medical statutes as required under CCR, title 16, section 2032.3,
10 subdivision (a)(6);
11 b. Data, including that obtained by instrumentation, from the physical
12 examination of the equine patient as required under CCR, title 16, section
13 2032.3, subdivision (a)(7);
14 c. Treatment and intended treatment plan, including medication dosages as
15 required under CCR, title 16, section 2032.3, subdivision (a)(8);
16 d. Diagnosis or assessment prior to performing a treatment or procedure as
17 required under CCR, title 16, section 2032.3, subdivision (a)(10);
18 e. A prognosis of the animal's condition as required under CCR, title 16,
19 section 2032.3, subdivision (a)(11);
20 f. For each medication prescribed and dispensed, the strength, dosage, route
21 of administration, quantity, and frequency of use as required under CCR,
22 title 16, section 2032.3, subdivision (a)(12); and
23 g. Daily progress and disposition of the case as required under CCR title 16,
24 section 2032.3, subdivision (a)(13).

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1 160. The Patient History Report for equine patient S. F., dated August 1, 2017, failed to
2 include the following information:

- 3 a. A history or pertinent information as it pertains to the equine patient's
4 medical statutes as required under CCR, title 16, section 2032.3,
5 subdivision (a)(6);
- 6 b. Data, including that obtained by instrumentation, from the physical
7 examination of the equine patient as required under CCR, title 16, section
8 2032.3, subdivision (a)(7);
- 9 c. Treatment and intended treatment plan, including medication dosages as
10 required under CCR, title 16, section 2032.3, subdivision (a)(8);
- 11 d. Diagnosis or assessment prior to performing a treatment or procedure as
12 required under CCR, title 16, section 2032.3, subdivision (a)(10);
- 13 e. A prognosis of the animal's condition as required under CCR, title 16,
14 section 2032.3, subdivision (a)(11);
- 15 f. For each medication prescribed and dispensed, the strength, dosage, route
16 of administration, quantity, and frequency of use as required under CCR,
17 title 16, section 2032.3, subdivision (a)(12); and
- 18 g. Daily progress and disposition of the case as required under CCR title 16,
19 section 2032.3, subdivision (a)(13).

20 161. The Patient History Report for equine patient L. T., dated August 3, 2017, failed to
21 include the following information:

- 22 a. A history or pertinent information as it pertains to the equine patient's
23 medical statutes as required under CCR, title 16, section 2032.3,
24 subdivision (a)(6);
- 25 b. Data, including that obtained by instrumentation, from the physical
26 examination of the equine patient as required under CCR, title 16, section
27 2032.3, subdivision (a)(7);

- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

162. The Patient History Report for equine patient M., dated August 3, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);

- 1 g. For each medication prescribed and dispensed, the strength, dosage, route
2 of administration, quantity, and frequency of use as required under CCR,
3 title 16, section 2032.3, subdivision (a)(12); and
4 h. Daily progress and disposition of the case as required under CCR title 16,
5 section 2032.3, subdivision (a)(13).

6 163. The Patient History Report for equine patient R. H., dated August 3, 2017, failed to
7 include the following information:

- 8 a. A history or pertinent information as it pertains to the equine patient's
9 medical statutes as required under CCR, title 16, section 2032.3,
10 subdivision (a)(6);
11 b. Data, including that obtained by instrumentation, from the physical
12 examination of the equine patient as required under CCR, title 16, section
13 2032.3, subdivision (a)(7);
14 c. Treatment and intended treatment plan, including medication dosages as
15 required under CCR, title 16, section 2032.3, subdivision (a)(8);
16 d. Diagnosis or assessment prior to performing a treatment or procedure as
17 required under CCR, title 16, section 2032.3, subdivision (a)(10);
18 e. A prognosis of the animal's condition as required under CCR, title 16,
19 section 2032.3, subdivision (a)(11);
20 f. For each medication prescribed and dispensed, the strength, dosage, route
21 of administration, quantity, and frequency of use as required under CCR,
22 title 16, section 2032.3, subdivision (a)(12); and
23 g. Daily progress and disposition of the case as required under CCR title 16,
24 section 2032.3, subdivision (a)(13).

25 164. The Patient History Report for equine patient E. B., dated August 3, 2017, failed to
26 include the following information:

- 27 a. Age, sex, breed, and color of the equine patient as required under CCR,
28 title 16, section 2032.3, subdivision (a)(4);

- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

165. The Patient History Report for equine patient R. A., dated August 3, 2017, failed to include the following information:

- a. Age, sex, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);

- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

166. The Patient History Report for equine patient O., dated August 4, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and

- 1 g. Daily progress and disposition of the case as required under CCR title 16,
2 section 2032.3, subdivision (a)(13).

3 167. The Patient History Report for equine patient G. S., dated August 4, 2017, failed to
4 include the following information:

- 5 a. Age, sex, breed, and color of the equine patient as required under CCR,
6 title 16, section 2032.3, subdivision (a)(4);
7 b. A history or pertinent information as it pertains to the equine patient's
8 medical statutes as required under CCR, title 16, section 2032.3,
9 subdivision (a)(6);
10 c. Data, including that obtained by instrumentation, from the physical
11 examination of the equine patient as required under CCR, title 16, section
12 2032.3, subdivision (a)(7);
13 d. Treatment and intended treatment plan, including medication dosages as
14 required under CCR, title 16, section 2032.3, subdivision (a)(8);
15 e. Diagnosis or assessment prior to performing a treatment or procedure as
16 required under CCR, title 16, section 2032.3, subdivision (a)(10);
17 f. A prognosis of the animal's condition as required under CCR, title 16,
18 section 2032.3, subdivision (a)(11);
19 g. For each medication prescribed and dispensed, the strength, dosage, route
20 of administration, quantity, and frequency of use as required under CCR,
21 title 16, section 2032.3, subdivision (a)(12); and
22 h. Daily progress and disposition of the case as required under CCR title 16,
23 section 2032.3, subdivision (a)(13).

24 168. The Patient History Report for equine patient C. S., dated August 4, 2017, failed to
25 include the following information:

- 26 a. A history or pertinent information as it pertains to the equine patient's
27 medical statutes as required under CCR, title 16, section 2032.3,
28 subdivision (a)(6);

- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

169. The Patient History Report for equine patient A. M., dated August 4, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);

- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

170. The Patient History Report for equine patient E., dated August 4, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

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171. The Patient History Report for equine patient S.P., dated August 4, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

172. The Patient History Report for equine patient D. E., dated August 16, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);

- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

173. The Patient History Report for equine patient I. J., dated August 16, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and

- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

174. The Patient History Report for equine patient N. J., dated August 16, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

175. The Patient History Report for equine patient J. L., dated August 16, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);

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- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

176. The Patient History Report for equine patient L. A., dated August 16, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);

- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

177. The Patient History Report for equine patient E. G., dated August 16, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

178. The Patient History Report for equine patient S., dated August 16, 2017, failed to include the following information:

- a. Age, sex, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);

- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

179. The Patient History Report for equine patient A., dated August 16, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);

- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

180. The Patient History Report for equine patient W. N., dated August 17, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and

- 1 h. Daily progress and disposition of the case as required under CCR title 16,
2 section 2032.3, subdivision (a)(13).

3 181. The Patient History Report for equine patient U. G., dated August 17, 2017, failed
4 to include the following information:

- 5 a. A history or pertinent information as it pertains to the equine patient's
6 medical statutes as required under CCR, title 16, section 2032.3,
7 subdivision (a)(6);
- 8 b. Data, including that obtained by instrumentation, from the physical
9 examination of the equine patient as required under CCR, title 16, section
10 2032.3, subdivision (a)(7);
- 11 c. Treatment and intended treatment plan, including medication dosages as
12 required under CCR, title 16, section 2032.3, subdivision (a)(8);
- 13 d. Diagnosis or assessment prior to performing a treatment or procedure as
14 required under CCR, title 16, section 2032.3, subdivision (a)(10);
- 15 e. A prognosis of the animal's condition as required under CCR, title 16,
16 section 2032.3, subdivision (a)(11);
- 17 f. For each medication prescribed and dispensed, the strength, dosage, route
18 of administration, quantity, and frequency of use as required under CCR,
19 title 16, section 2032.3, subdivision (a)(12); and
- 20 g. Daily progress and disposition of the case as required under CCR title 16,
21 section 2032.3, subdivision (a)(13).

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FIFTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Prohibited Veterinary Practices)

182. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating CCR, title 4, section 1867, subdivision (b). Respondent Kuhlmann possessed a drug, substance, or medication that has not been approved by the United States Food and Drug Administration (FDA) for use in the United States, as follows:

183. On or about July 2, 2017, Respondent Kuhlmann used the following medications not approved by the FDA to treat equine patient W.:

- a. Vitamin C-K, compounded injection; and
- b. Pentosan polysulfate sodium, compounded.

184. On or about July 2, 2017, Respondent Kuhlmann used the following medications not approved by the FDA to treat equine patient T. I.:

- a. Pentosan polysulfate sodium, compounded.

185. On or about July 2, 2017, Respondent Kuhlmann used the following medications not approved by the FDA to treat equine patient Y. T.:

- a. Vitamin C-K, compounded injection.

186. On or about July 2, 2017, Respondent Kuhlmann used the following medications not approved by the FDA to treat equine patient A. P.:

- a. Pentosan polysulfate sodium, compounded; and
- b. Estrone, compounded.

187. On or about August 1, 2017, Respondent Kuhlmann used the following medications not approved by the FDA to treat equine patient S.:

- a. Pentosan polysulfate sodium, compounded; and
- b. Estrone, compounded.

188. On or about August 1, 2017, Respondent Kuhlmann used the following medications not approved by the FDA to treat equine patient M. M.:

- a. Pentosan polysulfate sodium, compounded.

1 189. On or about August 1, 2017, Respondent Kuhlmann used the following medications
2 not approved by the FDA to treat equine patient S. F.:

3 a. Pentosan polysulfate sodium, compounded.

4 190. On or about August 3, 2017, Respondent Kuhlmann used the following medications
5 not approved by the FDA to treat equine patient M.:

6 a. Pentosan polysulfate sodium, compounded.

7 191. On or about August 3, 2017, Respondent Kuhlmann used the following medications
8 not approved by the FDA to treat equine patient R. H.:

9 a. Pentosan polysulfate sodium, compounded.

10 192. On or about August 3, 2017, Respondent Kuhlmann used the following medications
11 not approved by the FDA to treat four (4) equine patients:

12 a. N-butyl alcohol, compounded.

13 193. On or about August 4, 2017, Respondent Kuhlmann used the following medications
14 not approved by the FDA to treat equine patient O.:

15 a. Dimethyl sulfoxide IV, industrial solvent.

16 194. On or about August 4, 2017, Respondent Kuhlmann used the following medications
17 not approved by the FDA to treat equine patient G. S.:

18 a. Dimethyl sulfoxide IV, industrial solvent; and

19 b. Stop Two, homeopathic, misbranded.

20 195. On or about August 4, 2017, Respondent Kuhlmann used the following medications
21 not approved by the FDA to treat six (6) equine patients:

22 a. N-butyl alcohol, compounded.

23 196. On or about August 4, 2017, Respondent Kuhlmann used the following medications
24 not approved by the FDA to treat two (2) equine patients:

25 a. Dimethyl sulfoxide, compounded.

26 197. On or about August 16, 2017, Respondent Kuhlmann used the following
27 medications not approved by the FDA to treat equine patient S.:

28 a. Pentosan polysulfate sodium, compounded.

198. On or about August 17, 2017, Respondent Kuhlmann used N-butyl alcohol, compounded, which is not approved by the FDA, to treat equine patient W. N.

199. On or about August 17, 2017, Respondent Kuhlmann used N-butyl alcohol, compounded, which is not approved by the FDA, to treat equine patient A.

200. On or about August 17, 2017, Respondent Kuhlmann used N-butyl alcohol, compounded, which is not approved by the FDA, to treat equine patient U. G.

SIXTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Misbranded Drugs; Compounded Imitation Drugs)

201. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violations of section 4169, subdivision (a)(3), and Health and Safety Code sections 111395, subdivision (a), and 111440. Respondent Kuhlmann manufactured, sold, delivered, held, or offered for sale, drugs that were imitations of commercially available drugs, and therefore misbranded, as follows:

202. An extremely large number of compounded drugs were found during the Board inspection. Many of the compounded drugs were commercially obtainable at the same concentrations as ketoprofen, glycopyrrolate, and others.

203. Respondent Kuhlmann compounded the drugs to circumvent the cost of commercially obtainable drugs. The compounded drugs imitated commercially available drugs. Accordingly, Respondent Kuhlmann misbranded the compounded drugs.

SEVENTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Misbranded Drugs; Labeling Requirements)

204. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violations of section 4169, subdivision (a)(3), and Health and Safety Code sections 111345, subdivision (a), 111440, and 111500. Respondent Kuhlmann manufactured, sold, delivered, held, or offered for sale, drugs that were improperly labeled, and therefore misbranded, as follows:

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205. Inspectors found a bottle labeled as “Laryngeal Lavage” during the Board inspection. The label on the bottle failed to include the following required information:

- (a) Except where the prescriber orders otherwise, either the manufacturer’s trade name of the drug, or the generic name and the name of the manufacturer. Commonly used abbreviations may be used. Preparations containing two or more active ingredients may be identified by the manufacturer’s trade name or the commonly used name or the principal active ingredients.
- (b) The directions for the use of the drug or device.
- (c) The name of the patient(s).
- (d) The name of the prescriber.
- (e) The date of issue.
- (f) The name, address of the furnisher, and prescription number or other means of identifying the prescription.
- (g) The strength of the drug or drugs dispensed.
- (h) The quantity of the drug or drugs dispensed.
- (i) The expiration date of the effectiveness of the drug or device if the information is included on the original label of the manufacturer of the drug or device.

By maintaining an improperly labeled drug at Respondent SFE’s premises, Respondent Kuhlmann manufactured, sold, delivered, held, or offered for sale a misbranded drug.

EIGHTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Expired Drugs)

206. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violations of section 4169, subdivision (a)(4), for purchasing, trading, selling, or transferring dangerous drugs after the beyond use date on the label, as follows:

207. A large number of expired² dangerous drugs were found during the Board inspection. The expired drugs were not separated from non-expired drugs, which suggested that the SFE veterinarians used expired drugs to treat animal patients.

² An expiration date (EXP) reflects the stability of the product as prepared by the manufacturer; the beyond-use date (BUD) is the last date that a product can be safely used after it has been altered for patient use. Expiration dates are found on drugs from manufacturers that make FDA approved drugs. Beyond-use dates are found on compounded drugs that are not

208. The following expired dangerous drugs were found on Respondent SFE's premises:

- a. Aminocaproic acid, Buy-Rite Drugs, Inc., compounded, BUD 9/11/18;
- b. Acepromazine injectable, EXP 09/17;
- c. Acetyl-L-Cysteine, Wedgewood Pharmacy, compounded, BUD 08/24/18;
- d. Enroflox 100, EXP 04/2018;
- e. Glycopyrrolate, Buy-Rite Drugs, Inc., compounded BUD 09/12/18;
- f. Heparin, EXP 02/2018;
- g. Iodine in Almond Oil, Pharmacy Resources, Inc., compounded, BUD 01/31/2018;
- h. Medroxyprogesterone, 300 mg/ml, Wedgewood Pharmacy, compounded, BUD 03/04/2018;
- i. Medroxyprogesterone, 200 mg/ml, Wedgewood Pharmacy, compounded, BUD 03/20/2018;
- j. Marcaine, EXP SEP 2016;
- k. Reserpine, Buy-Rite Drugs, Inc., compounded, BUD 09/07/2018;
- l. Vitamin B 15 / DMG, Buy-Rite Drugs, Inc., compounded, BUD 06/12/18;
- m. Guaifenesin in D5W, Precision Compounding, compounded, BUD 5/9/2017;
- n. Sarapin Repack, US Compounding, compounded, BUD 9/3/2018;
- o. Minocycline, UC Davis VMTH Pharmacy, EXP 10/16;
- p. Uniprim, marked "exp 1/18 use first," EXP 01/26/2018;
- q. Parapox Ovis Virus; EXP 07/MAY/13;
- r. Hylartin-V, EXP 09/2009;
- s. Normosol-R IV fluids, EXP Jan 2012;
- t. L-arginine, Buy-Rite Drugs, Inc., compounded, BUD 09/10/18; and
- u. Stanazolol (C-V), Pharmacy Resources, Inc., compounded, BUD 2/13/18.

approved by the FDA. Expiration dates and beyond-use dates are furnished to define the dates beyond which the drugs are considered unsafe for patient use.

NINTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Minimum Standards for Drugs and Biologics)

209. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under sections 4854 and 4883, subdivision (o), for violations of CCR, title 16, sections 2030, subdivision (f)(6), and 2030.05, subdivision (b). Respondent Kuhlmann failed to ensure that all drugs and biologics at SFE's premises were maintained, administered, dispensed, and prescribed in compliance with state and federal laws, as follows: no protocols regarding the disposal of expired drugs or monitoring of expired drugs, were provided to inspectors during the Board inspection.

TENTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Minimum Standards for Medical Waste)

210. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under sections 4854 and 4883, subdivision (o), for violations of CCR, title 16, sections 2030, subdivision (f)(3), and 2030.05, subdivision (b). Respondent Kuhlmann failed to ensure that Respondent SFE complied with regulations regarding the disposal of waste material, as follows: Respondent SFE was not registered in Contra Costa County as a medical waste generator, as of September 17, 2018.

ELEVENTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Schedule IV Drug Record)

211. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under sections 4854 and 4883, subdivisions (g)(3) and (o), and CCR, title 16, sections 2030, subdivision (f)(6), and 2030.05, subdivision (b), for violations of Health and Safety Code section 11190, subdivision (c)(1). Respondent Kuhlmann, as the managing licensee of Respondent SFE, failed to ensure that Schedule IV drugs dispensed by SFE veterinarians were properly recorded and maintained, as follows:

212. The CHRB Veterinarian Report completed by Dr. Boyer, dated August 18, 2017, showed that Dr. Boyer dispensed 500 tablets of carisprodol to equine patient L. C. Respondent SFE's drug logs, as of September 17, 2018, did not include a record of the dispensed carisoprodol

1 tablets. Respondent Kuhlmann also failed to ensure the drug logs included the following required
2 information:

- 3 a. Full name, address, and the telephone number of the ultimate user or
4 research subject, or contact information as determined by the Secretary of
5 the United States Department of Health and Human Services, and the
6 gender, and date of birth of the patient.
- 7 b. The prescriber's category of licensure and license number; federal
8 controlled substance registration number; and the state medical license
9 number of any prescriber using the federal controlled substance registration
10 number of a government-exempt facility.
- 11 c. NDC (National Drug Code) number of the controlled substance dispensed.
- 12 d. ICD-9 (diagnosis code), if available.
- 13 e. Number of refills ordered.
- 14 f. Whether the drug was dispensed as a refill of a prescription or as a first-
15 time request.
- 16 g. Date of origin of the prescription.

17 **TWELFTH CAUSE FOR DISCIPLINE**

18 **(Unprofessional Conduct – CURES Reporting)**

19 213. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct
20 under sections 4854 and 4883, subdivision (g)(3), for violating Health and Safety Code section
21 11190, subdivision (c)(2)(A). Respondent Kuhlmann failed to report the dispensing of a
22 controlled substance to the Department of Justice, as follows:

23 214. Respondent Kuhlmann holds the only Drug Enforcement Agency (DEA)
24 registration at Respondent SFE's premises. The Board inspection revealed that Dr. Boyer and
25 Dr. Allison prescribed, distributed and administered controlled substances as agents under
26 Respondent Kuhlmann's DEA registration.

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215. The CHRB Veterinarian Report completed by Dr. Boyer, dated August 18, 2017, showed that Dr. Boyer dispensed 500 tablets of carisprodol, a Schedule IV controlled substance, to equine patient L. C. No record of dispensation of this Schedule IV controlled substance was found in the Controlled Substance Utilization Review and Evaluation System (CURES) database on or about May 21, 2019.

216. Respondent Kuhlmann failed to report the dispensing of carisoprodol to the Department of Justice, along with the following information:

- a. Full name, address, and the telephone number of the ultimate user or research subject, or contact information as determined by the Secretary of the United States Department of Health and Human Services, and the gender, and date of birth of the patient.
- b. The prescriber's category of licensure and license number; federal controlled substance registration number; and the state medical license number of any prescriber using the federal controlled substance registration number of a government-exempt facility.
- c. NDC (National Drug Code) number of the controlled substance dispensed.
- d. Quantity of the controlled substance dispensed.
- e. ICD-9 (diagnosis code), if available.
- f. Number of refills ordered.
- g. Whether the drug was dispensed as a refill of a prescription or as a first-time request.
- h. Date of origin of the prescription.

THIRTEENTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct – Minimum Standards for Drug Logs)

217. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct under sections 4854, 4855, and 4883, subdivisions (g)(3) and (o), and CCR, title 16, sections 2030, subdivision (f)(6), and 2030.05, subdivision (b), for violations of Code of Federal Regulations, title 21, section 1304.22, subdivision (c), as follows: Respondent SFE's drug

1 dispensing logs obtained during the Board inspection failed to include the name and address of
 2 the person to whom the drugs were dispensed. The logs were also incomplete, as continuation
 3 marks were used.

4 **FOURTEENTH CAUSE FOR DISCIPLINE**

5 **(Recordkeeping – Licensee Manager)**

6 218. Respondent Kuhlmann is subject to disciplinary action for unprofessional conduct
 7 under sections 4854, 4855, and 4883, subdivision (o), and CCR, title 16, sections 2032.3, and
 8 2030.05, subdivision (b). Respondent Kuhlmann failed to ensure the medical records maintained
 9 at Respondent SFE complied with minimum standards for recordkeeping, as follows:

10 219. The Patient History Report for equine patient E. R., dated June 21, 2017, failed to
 11 include the following information:

- 12 a. A history or pertinent information as it pertains to the equine patient's
 13 medical statutes as required under CCR, title 16, section 2032.3,
 14 subdivision (a)(6);
- 15 b. Data, including that obtained by instrumentation, from the physical
 16 examination of the equine patient as required under CCR, title 16, section
 17 2032.3, subdivision (a)(7);
- 18 c. Treatment and intended treatment plan, including medication dosages as
 19 required under CCR, title 16, section 2032.3, subdivision (a)(8);
- 20 d. Diagnosis or assessment prior to performing a treatment or procedure as
 21 required under CCR, title 16, section 2032.3, subdivision (a)(10);
- 22 e. A prognosis of the animal's condition as required under CCR, title 16,
 23 section 2032.3, subdivision (a)(11);
- 24 f. For each medication prescribed and dispensed, the strength, dosage, route
 25 of administration, quantity, and frequency of use as required under CCR,
 26 title 16, section 2032.3, subdivision (a)(12); and
- 27 g. Daily progress and disposition of the case as required under CCR title 16,
 28 section 2032.3, subdivision (a)(13).

220. The Patient History Report for equine patient S.Y., dated June 21, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

221. The Patient History Report for equine patient O. M., dated June 22, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);

- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

222. The Patient History Report, dated June 22, 2017, and CHRB Veterinarian Report completed by Respondent Kuhlmann, dated August 18, 2017, for equine patient L. C., failed to include the following information:

- a. Age, sex, breed, species, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);

- 1 g. For each medication prescribed and dispensed, the strength, dosage, route
2 of administration, quantity, and frequency of use as required under CCR,
3 title 16, section 2032.3, subdivision (a)(12); and
4 h. Daily progress and disposition of the case as required under CCR title 16,
5 section 2032.3, subdivision (a)(13).

6 223. The Patient History Report for equine patient N. N., dated June 23, 2017, failed to
7 include the following information:

- 8 a. A history or pertinent information as it pertains to the equine patient's
9 medical statutes as required under CCR, title 16, section 2032.3,
10 subdivision (a)(6);
11 b. Data, including that obtained by instrumentation, from the physical
12 examination of the equine patient as required under CCR, title 16, section
13 2032.3, subdivision (a)(7);
14 c. Treatment and intended treatment plan, including medication dosages as
15 required under CCR, title 16, section 2032.3, subdivision (a)(8);
16 d. Diagnosis or assessment prior to performing a treatment or procedure as
17 required under CCR, title 16, section 2032.3, subdivision (a)(10);
18 e. A prognosis of the animal's condition as required under CCR, title 16,
19 section 2032.3, subdivision (a)(11);
20 f. For each medication prescribed and dispensed, the strength, dosage, route
21 of administration, quantity, and frequency of use as required under CCR,
22 title 16, section 2032.3, subdivision (a)(12); and
23 g. Daily progress and disposition of the case as required under CCR title 16,
24 section 2032.3, subdivision (a)(13).

25 224. The Patient History Report for equine patient E. S., dated June 23, 2017, failed to
26 include the following information:

- 27 a. Age, sex, breed, species, and color of the equine patient as required under
28 CCR, title 16, section 2032.3, subdivision (a)(4);

- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

225. The Patient History Report for equine patient V., dated June 29, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);

- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

226. The Patient History Report for equine patient I. C., dated June 29, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

227. The Patient History Report for equine patient T. A., dated June 29, 2017, failed to include the following information:

- a. Age, sex, breed, species, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

228. The Patient History Report for equine patient S. L., dated June 30, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);

- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

229. The Patient History Report for equine patient G. S., dated June 30, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);

- 1 f. A prognosis of the animal's condition as required under CCR, title 16,
2 section 2032.3, subdivision (a)(11);
- 3 g. For each medication prescribed and dispensed, the strength, dosage, route
4 of administration, quantity, and frequency of use as required under CCR,
5 title 16, section 2032.3, subdivision (a)(12); and
- 6 h. Daily progress and disposition of the case as required under CCR title 16,
7 section 2032.3, subdivision (a)(13).

8 230. The Patient History Report for equine patient V., dated July 2, 2017, failed to
9 include the following information:

- 10 a. A history or pertinent information as it pertains to the equine patient's
11 medical statutes as required under CCR, title 16, section 2032.3,
12 subdivision (a)(6);
- 13 b. Data, including that obtained by instrumentation, from the physical
14 examination of the equine patient as required under CCR, title 16, section
15 2032.3, subdivision (a)(7);
- 16 c. Treatment and intended treatment plan, including medication dosages as
17 required under CCR, title 16, section 2032.3, subdivision (a)(8);
- 18 d. Diagnosis or assessment prior to performing a treatment or procedure as
19 required under CCR, title 16, section 2032.3, subdivision (a)(10);
- 20 e. A prognosis of the animal's condition as required under CCR, title 16,
21 section 2032.3, subdivision (a)(11);
- 22 f. For each medication prescribed and dispensed, the strength, dosage, route
23 of administration, quantity, and frequency of use as required under CCR,
24 title 16, section 2032.3, subdivision (a)(12); and
- 25 g. Daily progress and disposition of the case as required under CCR title 16,
26 section 2032.3, subdivision (a)(13).

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231. The Patient History Report for equine patient R. M., dated July 2, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

232. The Patient History Report for equine patient P. C., dated August 1, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);

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- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

233. The Patient History Report for equine patient B. D., dated August 1, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);

- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

234. The Patient History Report for equine patient N. O., dated August 1, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

1 235. The Patient History Report for equine patient N., dated August 1, 2017, failed to
2 include the following information:

- 3 a. A history or pertinent information as it pertains to the equine patient's
4 medical statutes as required under CCR, title 16, section 2032.3,
5 subdivision (a)(6);
- 6 b. Data, including that obtained by instrumentation, from the physical
7 examination of the equine patient as required under CCR, title 16, section
8 2032.3, subdivision (a)(7);
- 9 c. Treatment and intended treatment plan, including medication dosages as
10 required under CCR, title 16, section 2032.3, subdivision (a)(8);
- 11 d. Diagnosis or assessment prior to performing a treatment or procedure as
12 required under CCR, title 16, section 2032.3, subdivision (a)(10);
- 13 e. A prognosis of the animal's condition as required under CCR, title 16,
14 section 2032.3, subdivision (a)(11);
- 15 f. For each medication prescribed and dispensed, the strength, dosage, route
16 of administration, quantity, and frequency of use as required under CCR,
17 title 16, section 2032.3, subdivision (a)(12); and
- 18 g. Daily progress and disposition of the case as required under CCR title 16,
19 section 2032.3, subdivision (a)(13).

20 236. The Patient History Report for equine patient A., dated August 1, 2017, failed to
21 include the following information:

- 22 a. A history or pertinent information as it pertains to the equine patient's
23 medical statutes as required under CCR, title 16, section 2032.3,
24 subdivision (a)(6);
- 25 b. Data, including that obtained by instrumentation, from the physical
26 examination of the equine patient as required under CCR, title 16, section
27 2032.3, subdivision (a)(7);

- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

237. The Patient History Report for equine patient C., dated August 8, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and

- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

238. The Patient History Report for equine patient Y. D., dated August 3, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

239. The Patient History Report for equine patient M. L., dated August 16, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);

- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

240. The Patient History Report for equine patient P. S., dated August 16, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);

- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

241. The Patient History Report for equine patient N., dated August 16, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

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1 242. The Patient History Report for equine patient M. G., dated August 16, 2017, failed
2 to include the following information:

- 3 a. A history or pertinent information as it pertains to the equine patient's
4 medical statutes as required under CCR, title 16, section 2032.3,
5 subdivision (a)(6);
- 6 b. Data, including that obtained by instrumentation, from the physical
7 examination of the equine patient as required under CCR, title 16, section
8 2032.3, subdivision (a)(7);
- 9 c. Treatment and intended treatment plan, including medication dosages as
10 required under CCR, title 16, section 2032.3, subdivision (a)(8);
- 11 d. Diagnosis or assessment prior to performing a treatment or procedure as
12 required under CCR, title 16, section 2032.3, subdivision (a)(10);
- 13 e. A prognosis of the animal's condition as required under CCR, title 16,
14 section 2032.3, subdivision (a)(11);
- 15 f. For each medication prescribed and dispensed, the strength, dosage, route
16 of administration, quantity, and frequency of use as required under CCR,
17 title 16, section 2032.3, subdivision (a)(12); and
- 18 g. Daily progress and disposition of the case as required under CCR title 16,
19 section 2032.3, subdivision (a)(13).

20 243. The Patient History Report for equine patient H. J., dated August 17, 2017, failed to
21 include the following information:

- 22 a. Age, sex, breed, and color of the equine patient as required under CCR,
23 title 16, section 2032.3, subdivision (a)(4);
- 24 b. A history or pertinent information as it pertains to the equine patient's
25 medical statutes as required under CCR, title 16, section 2032.3,
26 subdivision (a)(6);

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- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

244. The Patient History Report for equine patient T. S., dated August 17, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);

- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

245. The Patient History Report for equine patient I. K., dated August 17, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

246. The Patient History Report for equine patient B. D., dated August 17, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);

- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

247. The Patient History Report for equine patient R. R., dated August 17, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);

- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

248. The Patient History Report for equine patient N. O., dated August 17, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and

- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

249. The Patient History Report for equine patient P. S., dated August 17, 2017, failed to include the following information:

- a. Age, sex, breed, and color of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(4);
- b. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- c. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- d. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- e. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- f. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- g. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- h. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

250. The Patient History Report for equine patient A., dated August 17, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);

- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

251. The Patient History Report for equine patient M. L., dated August 17, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);

- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

252. The Patient History Report for equine patient M. G., dated August 17, 2017, failed to include the following information:

- a. A history or pertinent information as it pertains to the equine patient's medical statutes as required under CCR, title 16, section 2032.3, subdivision (a)(6);
- b. Data, including that obtained by instrumentation, from the physical examination of the equine patient as required under CCR, title 16, section 2032.3, subdivision (a)(7);
- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

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1 253. The Patient History Report for equine patient N., dated August 17, 2017, failed to
2 include the following information:

- 3 a. A history or pertinent information as it pertains to the equine patient's
4 medical statutes as required under CCR, title 16, section 2032.3,
5 subdivision (a)(6);
- 6 b. Data, including that obtained by instrumentation, from the physical
7 examination of the equine patient as required under CCR, title 16, section
8 2032.3, subdivision (a)(7);
- 9 c. Treatment and intended treatment plan, including medication dosages as
10 required under CCR, title 16, section 2032.3, subdivision (a)(8);
- 11 d. Diagnosis or assessment prior to performing a treatment or procedure as
12 required under CCR, title 16, section 2032.3, subdivision (a)(10);
- 13 e. A prognosis of the animal's condition as required under CCR, title 16,
14 section 2032.3, subdivision (a)(11);
- 15 f. For each medication prescribed and dispensed, the strength, dosage, route
16 of administration, quantity, and frequency of use as required under CCR,
17 title 16, section 2032.3, subdivision (a)(12); and
- 18 g. Daily progress and disposition of the case as required under CCR title 16,
19 section 2032.3, subdivision (a)(13).

20 254. The Patient History Report for equine patient B. R., dated August 18, 2017, failed to
21 include the following information:

- 22 a. A history or pertinent information as it pertains to the equine patient's
23 medical statutes as required under CCR, title 16, section 2032.3,
24 subdivision (a)(6);
- 25 b. Data, including that obtained by instrumentation, from the physical
26 examination of the equine patient as required under CCR, title 16, section
27 2032.3, subdivision (a)(7);

- c. Treatment and intended treatment plan, including medication dosages as required under CCR, title 16, section 2032.3, subdivision (a)(8);
- d. Diagnosis or assessment prior to performing a treatment or procedure as required under CCR, title 16, section 2032.3, subdivision (a)(10);
- e. A prognosis of the animal's condition as required under CCR, title 16, section 2032.3, subdivision (a)(11);
- f. For each medication prescribed and dispensed, the strength, dosage, route of administration, quantity, and frequency of use as required under CCR, title 16, section 2032.3, subdivision (a)(12); and
- g. Daily progress and disposition of the case as required under CCR title 16, section 2032.3, subdivision (a)(13).

VETERINARY PREMISES REGISTRATION

255. Pursuant to section 4853.6, if the Board suspends or revokes Veterinarian License Number VET 8208 issued to Respondent Kuhlmann, the Board shall suspend or revoke Veterinary Premises Registration No. HSP 6179 issued to Respondent Kuhlmann, as managing licensee of Respondent SFE.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters alleged in this First Amended Accusation, and that following the hearing, the Board issue a decision:

- 1. Revoking or suspending Veterinarian License Number VET 8208, issued to Kim Lewis Kuhlmann;
- 2. Revoking or suspending Premises Registration Number HSP 6179, issued to San Francisco Equine, Inc., Kim Lewis Kuhlmann, managing licensee;
- 3. Ordering Kim Lewis Kuhlmann 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;

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- 4. Assessing a fine against Kim Lewis Kuhlmann, DVM, not in excess of \$5,000, for each violation of the causes specified in Business and Professions Code section 4883; and
- 5. Taking such other and further action as deemed necessary and proper.

DATED: _____

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

LA2021600024
64987289.docx

Exhibit 4



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



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 PETITION [Reference Business and Professions Code section 4887]

☐ Reinstatement of Revoked/Surrendered License or Registration ☐ Modification of Probation ☒ Termination of Probation

NOTE: A Petition for Modification and/or Termination of Probation can be filed together. If you are requesting Modification, you must specify in your "Narrative Statement" the term(s) and condition(s) of your probation that you want reduced or modified and provide an explanation. Please check all boxes above that apply.

PERSONAL INFORMATION

NAME: First Middle Last
 Kim Lewis Kuhlmann

Other name(s) licensed under, if any:

HOME ADDRESS: Number & Street City State Zip

HOME TELEPHONE NUMBER WORK TELEPHONE NUMBER CELL NUMBER
 () (510) 412-3660

E-mail address: CA License or Registration Number
 8208

Are you licensed by any other state(s) or country(ies) (please include license number(s), issue date(s), and status of license(s)):

N/A

ATTORNEY INFORMATION (If Applicable)

Will you be represented by an attorney? ☐ No ☒ Yes (If "Yes," please provide the following information)

NAME: Drew Couto

ADDRESS: 755 West A Street, Suite 100, San Diego, Ca 92101

PHONE: (858) 354-3739

DISCIPLINARY INFORMATION

Provide a brief explanation in your "Narrative Statement" as to the cause for the disciplinary action (e.g., negligence or incompetence, self use of drugs or alcohol, extreme departures from sanitary conditions, conviction of a crime, etc.)

Have you ever had your license revoked, suspended, voluntarily surrendered, denied, or placed on probation in any other state or country? ☒ No ☐ Yes

(If Yes, give a brief cause for administrative action or license denial in your "Narrative Statement" section, including dates and discipline ordered (e.g., 5 years probation.)

| |
|--|
| VETERINARIAN/REGISTERED TECHNICIAN BACKGROUND |
| Total number of years in veterinary practice: |
| CONTINUING EDUCATION (List continuing education completed since the date of the disciplinary action) |
| Lake Tahoe Equine Conference 01/2023, 01/2024 & 01/2025 Medical Record Keeping for Veterinarians - DripVet Record Keeping 02/2023 Controlled Substance Management in Veterinary Medicine - Vet Med Team 02/2023 Veterinary Medical Records - Animal & Veterinary Legal Services - 12/2024 Legal Requirements of Medical Records - DripVet - 12/2024 |
| CURRENT OCCUPATION OTHER THAN VETERINARIAN OR REGISTERED VET TECHNICIAN (Answer only if currently not practicing as a Veterinarian or Registered Vet Technician) |
| List employer, address, e-mail address, phone number, job title, and duties: |
| N/A |
| EMPLOYMENT HISTORY (list for the past 5 years only) |
| Provide the employer's name, address, phone number, job title and dates of employment: |
| San Francisco Equine, Inc. 7026 Koll Center Parkway, Suite 205, Pleasanton, Ca 94566 |
| (510) 412-3660 Veterinarian 30 years |
| |
| REHABILITATION |
| Describe any rehabilitative or corrective measures you have taken since your license/registration was disciplined. List dates, nature of programs or courses, and current status. You may include any community service or volunteer work. |
| Continuing education courses for record keeping and controlled substance management, also Equine related courses. Medical Record Keeping for Veterinarians - DripVet Record Keeping 02/2023 Controlled Substance Management in Veterinary Medicine - Vet Med Team 02/2023 Veterinary Medical Records - Animal & Veterinary Legal Services - 12/2024 Legal Requirements of Medical Records - DripVet - 12/2024 Lake Tahoe Equine Conference 01/2023, 01/2024 & 01/2025 |

CURRENT COMPLIANCE

Since the effective date of your last Veterinary Medical Board disciplinary action have you:

- | | | |
|---|------------------------------|--|
| 1. Been placed on criminal probation or parole? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 2. Been charged in any pending criminal action by any state, local or federal agency or court? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 3. Been convicted of any criminal offense? (A conviction includes a no contest plea; disregard traffic offenses with a \$100 fine or less.) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 4. Been charged or disciplined by any other veterinary board? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 5. Surrendered your license to any other veterinary board? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 6. Had your licensee manager's premise permit disciplined? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 7. Had any civil malpractice claims filed against you of \$10,000 or more? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 8. Become addicted to the use of narcotics or controlled substances? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 9. Become addicted to or received treatment for the use of alcohol? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 10. Been hospitalized for alcohol or drug problems or for mental illness? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

NOTE: If your answer is "Yes" to **any** of the above questions, please explain in the "Narrative Statement."

COST RECOVERY

Was cost recovery ordered? ☒ Yes ☐ No If yes, what is the remaining balance? 0

When is payment anticipated? _____

DECLARATION

Executed on January 23rd, 2025, at Alamo, C A
(City) (State)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that all statements and documents attached in support of this petition are true and correct.

KIM KUHLMANN

Petitioner (print name)

Signature

The information in this document is being requested by the Veterinary Medical Board (Board) pursuant to Business and Professions Code section 4887. In carrying out its licensing or disciplinary responsibilities, the Board requires this information to make a determination on your petition for reinstatement or modification of penalty. You have a right to access the Board's records containing your personal information as defined in Civil Code section 1798.3. The Custodian of Records is the Executive Officer at the address shown on the first page.

Exhibit 5

SAN FRANCISCO EQUINE, INC.



KIM L. KUHLMANN, DVM
KEN ALLISON, DVM

7026 KOLL CENTER PARKWAY, SUITE 205
PLEASANTON, CA 94566
TEL 510-412-3660

January 18, 2025

California Veterinary Medical Board
1747 North Market Blvd.
Suite 230
Sacramento, California 95834-2978

To whom it may concern,

I am respectfully requesting the California Veterinary Medical Board (CVMB) consider my petition for early termination and/or modification of my current probation.

By way of background, on July 16, 2019, the CVMB filed Case No. 460-201-8000299. The causes of action included violations of :

- B&P Code, secs. 4883 and 4169 – expired drugs;
- B&P Code, secs. 4883 and 4170 – CURES reporting;
- B&P Code, sec. BPC4883: medical waste generator;
- B&P Code, sec. 4883 and Cal. Code Regs., Tit. 16, sec. 2030: drug dispensing logs;
- B&P Code, sec. 4883 and Cal. Code Regs., Tit. 16, sec. 2030: compounded drugs;
- B&P Code, sec. 4883 and Cal. Code Regs., Tit. 16, sec. 2032.2: laryngeal lavage, incomplete labeling; and,
- B&P Code, sec. 4883 and Cal. Code Regs., Tit. 16, sec. 2032.3: incomplete medical records, VCPR.

As a result of these charges, a Stipulated Agreement was signed November 30, 2022, with probation beginning on December 30, 2022. Since the date of the Agreement, I have fully adhered to both the terms and spirit of my probation requirements, as conscientiously and meticulously as possible. I have not only filed my quarterly reports in a timely fashion, I have completed my required record keeping and continuing education hours each year. The latter has improved and fortified the understanding and practice of my professional obligations in this regard.

Regarding the specific violations, these experiences have proved valuable in improving my overall recognition of potential problems and the need to stay vigilant in establishing sound practice procedures. These improvements have been especially helpful as they relate to monitoring regularly expiration dates for medications, which are now done on a monthly basis so as to minimize and avoid the risks of carrying in inventory expired medications. Additionally, I have improved my practice with regard to the disposal of expired medication, ensuring that they are at all times disposed of in the approved and appropriate manner.

In accordance with CURES reporting practices, my practice no longer dispenses controlled substances to patients and has not done so since 2018, following the CVMB's inspection of the practice.

Similarly, in the context of drug dispensing logs, once I learned of my practice's deficiencies in the manner we maintained these logs, I took responsibility and made certain the procedures used to log drug substances was corrected and thus on subsequent inspections have been found to be fully compliant.

As for compounded medications, that was a subject that previously caused me and many of my equine veterinary colleagues' great confusion and frustration. However, in 2022, the Food and Drug Administration (FDA) modified its compounding regulations pertaining to veterinary medicines which provided greater clarification. As implemented, the new guidelines more clearly restrict the number of compounded medications permitted. While certain compounded medications are still permitted to be maintained as equine practice office stock other specified compounded medication is to be considered patient specific and requires a prescription requesting compounding. Since the FDA regulations changes were announced, I and my practice have closely followed these clarified guidelines. My practice maintains a very limited quantity of permitted general compound medications. Patient specific compounded medications are procured only from approved compounders, on an 'as needed basis through specific patient prescriptions based on thorough examinations and/or diagnostic test results warranting such use.

Consistent with the FDA's regulatory changes, in September 2022, the CVMB and the California Horse Racing Board (CHRB) issued written guidance authorizing the use of certain compounded drugs for horses under the same restraints. I and my practice have likewise adhered to the CVMB and CHRB guidelines as well.

As instructed by the CVMB, I and my practice have revised the manner in which we maintain patient (medical) records relating to our examination and/or treatment of horses (Thoroughbreds) regardless of their status as herd animals. Moreover, in January 1, 2021, the CHRB amended CHRB Rule 1842 to require electronic veterinary record keeping for any and all horses, regardless of breed, stabled within a CHRB licensed facility. That particular electronic record system was deemed the official equine treatment and record keeping system, as created and maintained by The Jockey Club.

On January 1, 2023, a new official electronic record keeping system was recognized by the CHRB. That system is known as "EquiTaps." This system was also created by The Jockey Club, and was considered to be an improved system for all users. Like the system before it, EquiTaps required:

1. Complete signalment of the patient;
2. Identification of any and all medications/substances administered and routes of administration;
3. Medication dosages, in milligrams;
4. Time of administration; and,
5. Specific reason for treatment.

The electronic records submitted are reviewed on a daily basis by qualified and experienced CHRB regulatory veterinarians. The system has enabled practicing veterinarians such as myself to more easily maintain accurate and complete medical records in simple retrievable formats. In addition, our CHRB records are available to and have been reviewed by CVMB approved practitioners on a monthly basis with reports submitted to the CVMB on regular or otherwise appropriate time frames.

As previously admitted, from approximately February 1983 up until late 2018 – when the accusation was first submitted – my record keeping practice was based on what I had been taught by my mentors – longtime CVMB and CHRB licensed veterinarians – and what we all understood to be the authorized and approved methods and standards required by the CHRB, pursuant to their plenary rulemaking authority over all licensees and racing-related

activities. . Once the CVMB determined my records were not in compliance with its standards and the Agreement executed, I immediately revised my practice to comply with the CVMB's requirements.

As I believe my probation records reflect, and based upon my own admission, upon implementation of the CVMB's medical record keeping protocols, I do believe my records are now even more comprehensive and complete than they were previously.

In summary, I believe I have learned from the corrective actions imposed on me by the CVMB and they have improved my methods of practice and made me a better practitioner.

I am hopeful that the CVMB shares in my assessment of these improvements and also believes that my efforts to correct the violations have been sincere, constructive and conscientious. Please be assured that it remains my intent to continue in these efforts to improve as a veterinary medicine practitioner in the future. I also remain hopeful that the CVMB sees my efforts as indicative of one warranting modification as to the length of my probation.

Thank you for your consideration of my request for Petition. Should you have any questions or believe there is any benefit in discussing the request directly in person, please feel free to contact me.

Sincerely yours,



Kim Lewis Kuhlmann, DVM

Exhibit 6



California Veterinary Medical Board:

Dear Board Members,

I have been asked to provide a letter of assessment for Dr. Kim Kuhlmann, who is a prominent equine practitioner that I have had a positive working relationship since 1995. I understand that under the penalty of perjury, under the laws of the state of California, the foregoing is true and correct.

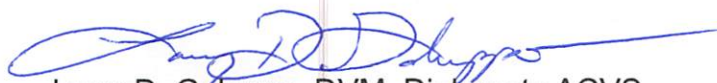
After graduating from UC Davis School of Veterinary Medicine in 1990, I had spent most of my career at UC Davis. From my residency in equine surgery (1991-95) to my academic career spanning from 1996 to my recent retirement as Professor Emeritus in Equine Surgery in 2024, I feel qualified to provide an assessment of Dr. Kuhlmann's practice standards and ethics. I have recently moved to the New England area, and now I am actively practicing at New England Equine Medical and Surgical Center.

My working relationship with Dr. Kuhlmann has been mainly associated with consulting on challenging orthopedic, respiratory and medical cases. We have also worked together on the Golden Gate Hospital Board for 2 years, and I have assisted him in person with clinical cases at the Golden Gate Fields Equine Hospital. Dr. Kuhlmann was also instrumental in organizing a sling training session for racetrack practitioners that I hosted at the UC Davis VMTH so that they could use the Anderson Sling for recovery and postoperative management of challenging orthopedic cases. Based on our working relationship for the past 30 years, I believe that I have full knowledge of his skill level, knowledge base, compassion for his patients, integrity and ethics.

I believe that Dr. Kuhlmann has set the standard of care for Northern California racetrack veterinary practice. He continues to strive to meet industry needs, provide exceptional patient care and is always doing his best to improve his knowledge base and clinical skills. I believe he is truly striving hard to provide the greatest health and welfare for the Northern California racing industry.


Please feel free to contact me if you require further information regarding Dr. Kim Kuhlmann.

Respectfully,



Larry D. Galuppo, DVM, Diplomate ACVS

Professor Emeritus, Equine Surgery, School of Veterinary Medicine, UC Davis

EQUINE SPORTS MEDICINE AND SURGERY, INC.
January 22, 2025

To Whom It May Concern:

I have been asked to write an assessment of Dr. Kim Kuhlmann for consideration by the California Veterinary Medical Board.

I have been practicing veterinary medicine since 1979. Since 1983 I have been a resident of California and I have specialized in equine surgery and medicine in the San Francisco Bay area. I am president of Equine Sports Medicine and Surgery, Inc. I am currently vice president of the North American Association of Racetrack Veterinarians.

I am confident that Dr. Kuhlmann has adhered to the requirements of the CVMB for record keeping and inventory management. Since 2021 he has been obligated to follow the revised and more stringent requirements of the California Horse Racing Board, the Horseracing Integrity and Safety Authority and the Horseracing Integrity and Welfare Unit. In 2021 the CHRB initiated the requirement of electronic veterinary record keeping. Since late in 2021, when they were created by Congressional mandate, HISA and HIWU have formulated strict requirements for record keeping and medication management. Since January 1, 2023 the CHRB has utilized the electronic record keeping system known as "EquiTaps" to keep track of medical procedures and medications. As a condition of his CHRB license Dr. Kuhlmann has been required to adhere to these programs. His record keeping and medication management have been under constant scrutiny by the CHRB as well as HISA/HIWU. Because of this I am confident that Dr. Kuhlmann has been scrupulous in following appropriate record keeping procedures.

I have practiced in the same venue as Dr. Kuhlmann for the past 42 years. Although we were members of competitive veterinarian practices I have had a high regard for Dr. Kuhlmann's dedication and effectiveness as a veterinarian.

Our region and the country as a whole are facing an increasing demand for veterinarians while at the same time experiencing a shortage of veterinarians to meet that demand, particularly in large animal practice. Dr. Kuhlmann is held in high esteem by his fellow veterinarians and his clients. He devotes an exceptional amount of time to his patients. He is very proficient and professional in his clinical performance. I hope that the actions of the CVMB will facilitate Dr. Kuhlmann's ability to continue to effectively practice veterinary medicine. It would be harmful to our horse population to deny them the attention of a veterinarian as accomplished as Dr. Kuhlmann.

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



Donald Smith D.V.M.

BATTEN EQUINE LLC

Casille Batten DVM

January 20, 2025

To whom it may concern:

I am writing regarding Dr Kim Kuhlmann. I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct.

I have known Dr Kuhlmann since 2020 when I began working as a regulatory practitioner at Golden Gate Fields racetrack in Berkeley. At the beginning of 2024, with the impending closure of Golden Gate Fields, I moved back into private practice and have worked at the same racetrack as Dr Kuhlmann (Pleasanton Race Track). I have also been reviewing the medical records for SF Equine, as required by the Veterinary Medical Board, since 2023.

Dr Kuhlmann has worked diligently over the last few years to improve the discrepancies brought up in the board filing. I review approximately 15% of his medical records every month and he has made every effort to ensure cases are accurately documented and meet the standards required by the California Veterinary Medical Practices Act. SF Equine has also made efforts to ensure veterinary technicians and office staff are following regulations.

On a personal level - Dr Kuhlmann has been servicing the racing community of Northern California for over 40 years and is regarded very highly by all members of that community. While I was working in a regulatory capacity, Dr Kuhlmann would reach out if there were any concerns regarding changes to rules or regulations to ensure he and his patients were in compliance. I always appreciated his openness and willingness to discuss any issues regarding cases.

Please feel free to contact me should you have any questions or concerns

Sincerely,



Casille Batten DVM

Exhibit 7



Kim Kuhlmann, DVM

has completed

Controlled Substance Management in Veterinary Medicine

on February 28, 2023

This program 769259 is approved by the AAVSB RACE to offer a total of 2.00 CE Credits (2.00 max) being available to any one veterinarian: and/or 2.00 Veterinary Technician CE Credits (2.00 max).

This RACE approval is for the subject matter categories of: Medical using the delivery method of Non-interactive Distance. This approval is valid in jurisdictions which recognize AAVSB RACE; however, participants are responsible for ascertaining each board's CE requirements. RACE does not "accredit" or "endorse" or "certify" any program or person, nor does RACE approval validate the content of the program.

David Tollon, DVM, MBA, Founder

Pat Lynch, Director of Operations

VetMedTeam, LLC, 2325 SW Dodge Terrace, Port St. Lucie, FL 34953
www.VetMedTeam.com



drip.vet a part of the VIN Family

CERTIFICATE OF COMPLETION

6 anytime on-demand CE hours (non-medical) for completing RACE Program 20-981038. This program has been approved for 6 hours of continuing education credit in jurisdictions that recognize RACE approval.

KIMKUHLMANN

Provided by drip.vet, a part of the VIN Family, RACE Provider 50-26217

Medical Recordkeeping for Veterinarians

Date: 2023-12-28

Serial No.

cert_gg3hn4yb

State: CA

License

Number: 0200



drip.vet a part of the VIN Family

CERTIFICATE OF COMPLETION

6 anytime on-demand CE hours (non-medical) for completing RACE Program 20-1042648. This program has been approved for 6 hours of continuing education credit in jurisdictions that recognize RACE approval.

KIMKUHLMANN

Provided by drip.vet, a part of the VIN Family, RACE Provider 50-26217

Legal Requirements of Medical Records

Date: 2024-11-26

Serial No.

cert_j66h79dl

State: CA

License

Number:

8208



Animal & Veterinary Legal Services

CERTIFICATE OF COMPLETION

Race Program # 20-745377 and VHMA Course

KIM KUHLMANN

This non interactive-distance, non medical program has been approved for 2 hours of continuing education credit in jurisdictions that recognize RACE approval. The Veterinary Hospital Managers Association has approved this course for 2.0 (two) continuing education credits (Online Delivery).

Veterinary Medical Records (2 hours)

Date: 2025-01-02

Serial No.

cert_66bl97zs



SARAH L. BABCOCK, DVM, JD
PRESIDENT, ANIMAL & VETERINARY LEGAL SERVICES, PLLC

CERTIFICATE of ATTENDANCE

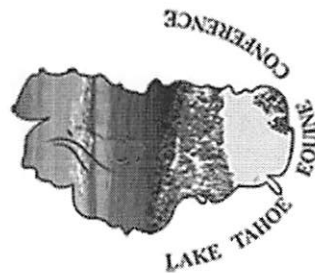
THIS ACKNOWLEDGES THAT

Kim Kuhlmann

HAS SUCCESSFULLY COMPLETED THE

20 Hours of Scientific Continuing Education (Medical / Surgical)

at the 43rd Annual Lake Tahoe Equine Conference presented by AAVSB Race Provider #91. The Course meets the requirements for 20 hours of scientific continuing education credit in jurisdictions which recognize AAVSB RACE approval; however, participants should be aware that some boards have limitations on the number of hours accepted in certain categories and / or restrictions of certain methods of delivery of continuing education.



Sharon Spier, DVM, PhD

Sharon Spier, DVM, PhD, Dipl ACVIM, Program
Coordinator, Lake Tahoe Equine Conference

State ____ CA ____ License # __8208__

State _____ License # _____

CERTIFICATE of ATTENDANCE

THIS ACKNOWLEDGES THAT

KIM KUHLMANN

HAS SUCCESSFULLY COMPLETED THE

20 Hours of Scientific Continuing Education (Medical / Surgical)

at the 45th Annual Lake Tahoe Equine Conference presented by AAVSB Race Provider #91. The Course meets the requirements for 20 hours of scientific continuing education credit in jurisdictions which recognize AAVSB RACE approval; however, participants should be aware that some boards have limitations on the number of hours accepted in certain categories and / or restrictions of certain methods of delivery of continuing education.



Sharon Spier, DVM, PhD

SHARON SPIER, DVM, PHD, DIPL ACVIM, Program
Coordinator, Lake Tahoe Equine Conference

JANUARY 25,
2024

State CA License # 6208

State _____ License # _____

CERTIFICATE of ATTENDANCE

THIS ACKNOWLEDGES THAT

KIM KUHLMANN

HAS SUCCESSFULLY COMPLETED THE

20 Hours of Scientific Continuing Education (Medical / Surgical)

at the 46th Annual Lake Tahoe Equine Conference presented by AAVSB Race Provider #91. The Course meets the requirements for 20 hours of scientific continuing education credit in jurisdictions which recognize AAVSB RACE approval; however, participants should be aware that some boards have limitations on the number of hours accepted in certain categories and / or restrictions of certain methods of delivery of

continuing education.

Sharon Spier, DVM, PhD

SHARON SPIER, DVM, PHD, DIPL ACVIM, Program
Coordinator, Lake Tahoe Equine Conference



JANUARY 30,
2025

State CA License # 6206

State _____ License # _____

Exhibit 8

Kim Kuhlmann

A146

VETERINARIAN

Alamo, CA 94507

Methodical with extensive experience in diagnosing, treating, and preventing animal diseases. Skilled in advanced medical procedures, conducting thorough examinations, and developing customized treatment plans. Strong background in veterinary pharmacology and exemplary problem-solving abilities. Passionate about continual learning and scientific research. Treated or examined approximately 1.7 million patients during a time spanning over four decades. During that time period performed approximately five thousand surgical procedures involving the musculoskeletal and respiratory systems in racing age thoroughbreds which constituted a majority of all surgeries in Northern California racing thoroughbreds.

EXPERIENCE

VETERINARIAN

San Francisco Equine Inc.

Pleasanton, CA

September 1991 - Present

- Educated owners regarding proper nutrition, preventative health care measures and potential risks associated with racing thoroughbreds
- Maintained accurate medical records and updated patient histories regularly.
- Managed emergencies efficiently, providing critical care for injured and sick animals.
- Performed orthopedic, soft tissue and respiratory system surgery.
- Monitored anesthesia during surgical procedures to ensure safety of animal patients.
- Attended lectured, conferences, and continuing education courses.

PRESIDENT

San Francisco Equine Inc.

Pleasanton, CA

September 1991 - Present

VETERINARIAN

Equine Veterinary Services

San Mateo, CA

February 1983 - September 1991

EDUCATION

DOCTOR OF VETERINARY MEDICINE (D.V.M.) IN VETERINARY SCIENCE

Colorado State University, Fort Collins, CO, US

Jan 1983

BACHELOR OF SCIENCE (B.S.) IN VETERINARY SCIENCE

Colorado State University, Fort Collins, CO, US

May 1980

CERTIFICATIONS

- California Veterinary Medical Board
- License #8208

Ex. 8 - 001

A146

Exhibit 9



PROBATION COMPLIANCE REPORT

PETITIONER: Kim Lewis Kuhlmann, DVM, VET 8208

REPORT TYPE: Early Termination of Probation

CASE NUMBER: 4602018000299

PROBATIONARY TERM: Four years: December 30, 2022 – December 29, 2026

PROBATION TERMS AND CONDITIONS AND STATUS:

1. Obey All Laws: Compliant.

The Board has not received any notices of arrest or criminal conviction concerning Petitioner. The Board has not taken any action against Petitioner for violations of the Veterinary Medicine Practice Act.

2. Quarterly Reports: Non-Compliant.

All Quarterly Reports except for quarter 1 of 2023 was submitted in a timely manner.

On May 26, 2023, Petitioner was issued a Probation Violation letter. This letter informed Petitioner that he did not submit a Quarter Report for quarter 1 of 2023. Petitioner submitted the late Quarter Report on or about May 30, 2023.

On June 25, 2024, Petitioner was issued a Probation Violation letter. This letter informed Petitioner that he did not submit a Quarter Report for quarter 3 of 2023. Petitioner had submitted the Quarter Report on October 5, 2023 via email, therefore, this quarter report is not considered late.

3. Interview with the Board: Compliant.

Petitioner appeared for his interview on December 30, 2022, to review the terms and conditions of probation.

4. Cooperation with Board Staff: Compliant.

Petitioner has responded and cooperated with probation surveillance in a timely manner when requested to respond.

5. Probation Monitoring Costs: Compliant.

The probation monitoring total, \$4,800, is Probationer's total for four years of probation. Probation monitoring costs were paid in full as of September 23, 2024.

6. Changes of Employment or Address: Compliant.

Probation Compliance Report
Kim Lewis Kuhlmann, DVM

Petitioner notified to Board of a change in address for San Francisco Equine on May 26, 2025. Starting on June 1, 2025, the new address for San Francisco Equine became 15 Augusta Ct., Alamo, CA 94507.

7. No Supervision of Students, Interns, or Residents: Compliant.

No evidence has been received that Petitioner has supervised any students, interns, or residents.

8. Notice to Employers.

The Board has not requested a Notice to Employers form from Petitioner as he identified himself as the co-owner of San Francisco Equine.

9. Notice to Employees.

The Board has not requested a Notice to Employees form from Petitioner as he indicated San Francisco Equine does not employ any staff veterinarians, registered veterinary technicians, or controlled substance permit holders.

10. Tolling of Probation.

Petitioner has not entered tolling status during his probationary period.

11. Maintain a Current and Active License: Compliant.

Petitioner has maintained a valid license during probation.

12. Violation of Probation.

Since the effective date of the Decision, no Accusation or Petition to Revoke Probation has been filed against Petitioner for a probation violation.

As discussed in more detail in Condition 2, Petitioner was issued Probation Violation Letter on May 26, 2023. However, this violation did not result in the Board filing a Petition to Revoke Probation.

As discussed in more detail in Condition 17, Petitioner was issued Probation Violation Letters on January 30, 2023, and June 25, 2024. However, these violations did not result in the Board filing a Petition to Revoke Probation.

13. License Surrender While on Probation/Suspension.

Petitioner has not requested to surrender his license.

14. Completion of Probation.

To date, all probation related costs have been paid.

15. Cost Recovery: Compliant.

Probation Compliance Report
Kim Lewis Kuhlmann, DVM

Petitioner has made timely payments towards his Cost Recovery total, \$71,001.01 at a rate of \$4,900 per month for 14 months and a final monthly payment of \$2,401.01. Petitioner paid the final payment of the \$71,001.01 in Cost Recovery on April 1, 2024.

16. Inspections:

Petitioner is co-owner of San Francisco Equine, HSP 6179, and is not responsible for inspection fees for inspections completed on August 12, 2024, as Petitioner was not the MGL of the facility.

17. Medical Record Review: Non-Compliant.

On January 30, 2023, Petitioner was issued a Probation Violation letter. This letter informed Petitioner that he did not have a Board-approved reviewer. Petitioner provided the name and qualifications of the reviewer, Casille Batten, DVM, and received approval on or about January 31, 2023.

On June 25, 2024, a Probation Violation Letter was sent to Petitioner. This letter informed Petitioner the Board had not received Medical Record Review Reports for the months of January through June 2024. Petitioner's Medical Record Reviewer supplied January, February, and March's Medical Record Reports on or about June 26, 2024. Since this letter was issued to Petitioner on June 25, 2024, Medical Record Reviews for the months of April, May, and June were not due until July 7, 2024, so they were not considered late at the time of this letter. April, May, and June 2024 reviews were submitted on or about July 6, 2024.

The Board has now received all Medical Record Review reports; however, the unsatisfactory pages of the reports are missing. An email was sent to the reviewer, Casille Batten, DVM, to inform her that these pages were missing and to include them in future reports. Casille Batten responded stating that she would be sure to attach the missing page in the future. There is no indication that the reviewer was notified of the missing pages previously.

18. Continuing Education: Compliant.

Petitioner is required to submit CE courses related to medical record keeping for eight (8) hours for each year of probation.

December 30, 2022 – December 29, 2023:

- Medical record keeping: 8 hours with approval and certificates received.

December 30, 2023 – December 29, 2024:

- Medical record keeping: 8 hours with approval and certificates received.

19. Fine: Compliant.

Petitioner's \$5,000 Fine was paid in full on January 12, 2023. No other costs related to fines are outstanding.

Probation Compliance Report
Kim Lewis Kuhlmann, DVM

Completed by: Rachel McKowen Signature: SIGNATURE ON FILE Date: August 18, 2025

Exhibit 10



VIA ELECTRONIC, CERTIFIED & REGULAR US MAIL

January 30, 2023

Dr. Kim Kuhlmann
 c/o San Francisco Equine Inc
 865 Marina Bay Parkway #39
 Richmond, CA 94804
sfequine.office@gmail.com

Re: PROBATION VIOLATION LETTER
Case No. 4602018000299

Dear Dr. Kuhlmann:

The following item requires your immediate attention:

MEDICAL RECORDS REVIEW

Within 30 calendar days of the effective date of this Decision, Respondent Kuhlmann shall provide to the Board or its designee the name and qualifications of one or more proposed reviewer of the medical records of animal patients created and maintained by Respondents. If Respondent Kuhlmann's terms of probation include Supervised Practice, that supervisor also may serve as the medical records reviewer. Each reviewer shall be a licensed veterinarian in California, have held a valid California license for at least five (5) years, and have never been subject to any disciplinary action by the Board.

The Board or its designee shall provide the approved reviewer with copies of this Decision. Within fifteen (15) calendar days of the reviewer's receipt of this Decision, the reviewer shall sign an affirmation that they have reviewed the terms and conditions of this Decision and fully understands the role of the reviewer.

If Respondent Kuhlmann fails to obtain the Board's or its designee's approval of a reviewer within sixty (60) calendar days of the effective date of this Decision, Respondent Kuhlmann shall receive a notification from the Board or its designee to cease practicing veterinary medicine within three (3) calendar days after being notified. Respondent Kuhlmann shall cease practice until a reviewer is approved to provide medical records review services.

The reviewer shall review a minimum of ten percent (10%) of Respondents' animal patient medical records or fifteen (15) records (whichever is greater), a minimum of twelve (12) times per year. The reviewer shall determine the method of random selection of medical records to review and shall access the medical records directly from where the medical records are being kept. Review of

Respondents' medical records shall not be delegated to Respondents or Respondents' staff. The reviewer's random selection of medical records shall include medical records that correlate to the animal patient care issues or other issues identified in the disciplinary action that resulted in this Decision. Respondents are required to make all animal patient medical records available for immediate inspection and copying by the reviewer at all times during business hours. The reviewer shall immediately notify the Board's Probation Monitor if Respondents fail or refuse to make the medical records available for inspection and/or copying.

Any potential costs associated with conducting the medical records review shall be borne by Respondents.

The reviewer shall evaluate the medical records to assess: 1) The medical necessity and appropriateness of Respondents' treatment; 2) Respondents' compliance with minimum standards of practice in the diagnosis and treatment of animal patients; 3) Respondents' maintenance of necessary and appropriate treatment; 4) Respondents' maintenance of necessary and appropriate records and chart entries; and 5) Respondents' compliance with existing statutes and regulations governing the practice of veterinary medicine.

The reviewer shall submit quarterly reports to the Board on a form designated by the Board. The reports shall be submitted by the reviewer directly to the Board's Probation Monitor within seven (7) calendar days after the end of the preceding quarter. The quarterly reporting periods and due dates are as follows: January 1 to March 31 (Quarter I) due no later than April 7; April 1 to June 30 (Quarter II) due no later than July 7; July 1 to September 30 (Quarter III) due no later than October 7; October 1 to December 31 (Quarter IV) due no later than January 7.

Pursuant to the Medical Records Review term of probation included in the Stipulated Settlement which became effective on December 30, 2022, you are required to maintain an approved reviewer. You do not have a Board-approved reviewer.

Failure to comply with the terms and conditions of your disciplinary order will result in the Board filing a Petition to Revoke Probation with the Attorney General's Office.

If you have any questions or concerns, please contact me via email at jeffrey.weiler@dca.ca.gov

Regards,

SIGNATURE ON FILE

Jeffrey Weiler
Lead Probation Monitor
Veterinary Medical Board

Exhibit 11



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



PROBATION SUPERVISOR APPROVAL FORM

INSTRUCTIONS: Complete all sections below. If you work at multiple locations where you will have more than one supervisor, a separate form must be completed for each supervisor. The supervisor shall be independent, with no prior business or personal relationship with you and the supervisor shall not be in a familial relationship with or be an employee, partner, or associated with you. Do not enter into any Agreement until you have received approval by the Board. Please type or print clearly.

Probationer's Name Kim L. Kuhlmann Case # 46020180029

Proposed Supervisor's Information

Supervisor's Name CASILE BATTER VET # 18833

Mailing Address [REDACTED]

Phone number: [REDACTED]

E-mail address: [REDACTED]

Area of Practice: Equine Regulatory Veterinary
 (Please list the type of veterinary medicine the proposed supervisor practices)

Duration of Supervision 1-1-23 → 12-31-27
 (Please list a start and end date)

Type of Supervision: **DIRECT**
 (Please circle one)

MEDICAL RECORD REVIEW

SPECIFIC PROCEDURE

(list the type of procedures to be supervised)

I hereby submit this signed form, as required by the Veterinary Medical Board's Disciplinary Order, to obtain approval for a supervisor during my probation.

I declare under penalty of perjury under the laws of the State of California that all statements given here are true and correct.

Probationer's Signature: [Signature]

VET # 8208

How is the supervisor known to you? Regulatory vet at Golden Gate Fields

(For Board use only)

APPROVED X

DENIED _____

Probation Monitor Signature SIGNATURE ON FILE

Date: January 31, 2023

Exhibit 12



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



VIA ELECTRONIC MAIL

May 26, 2023

Dr. Kim Kuhlmann
sfequine.office@gmail.com

Re: PROBATION VIOLATION LETTER
Case No. 4602018000299

Dear Dr. Kuhlmann:

The following item requires your immediate attention:

QUARTERLY REPORTS

Respondent Kuhlmann shall report quarterly to the Board or its designee, under penalty of perjury, on forms provided by the Board, stating whether there has been compliance with all terms and conditions of probation. Omission or falsification in any manner of any information on these reports shall constitute a violation of probation and shall result in the filing of an accusation and/or a petition to revoke probation against Respondents' license registration or permit. If the final written quarterly report is not made as directed, the period of probation shall be extended until the final report is received by the Board. Any period(s) of delinquency in submission of reports may be added to the total period of probation.

The quarterly report for the first quarter of 2023 has not been received. The deadline to submit that report was April 5, 2023. Please submit the missing quarterly report and ensure all future quarterly reports are submitted timely to the Board.

Failure to comply with the terms and conditions of your disciplinary order will result in the Board filing a Petition to Revoke Probation with the Attorney General's Office.

If you have any questions or concerns, please contact me via email at jeffrey.weiler@dca.ca.gov

Regards,

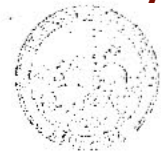
SIGNATURE ON FILE

Jeffrey Weiler
 Lead Probation Monitor
 Veterinary Medical Board

Exhibit 13



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



Quarterly Probation Report

INSTRUCTIONS: Please type or print neatly. ALL requested information and questions on this form must be answered. When space provided is insufficient, attach additional sheets of paper. All attachments are considered part of the Declaration. Submit your completed report to the Veterinary Medical Board's Probation Unit via email to your Probation Monitor, or via U.S. mail to the office address above. Please retain a completed copy for your records.

Check Appropriate Box Below for Reporting Period

- | | | |
|-------------------------------------|---|---------------------------------------|
| <input checked="" type="checkbox"/> | 1 st Quarter (January, February, March) | Postmark date April 5 th |
| <input type="checkbox"/> | 2 nd Quarter (April, May, June) | Postmark date July 5 th |
| <input type="checkbox"/> | 3 rd Quarter (July, August, September) | Postmark date October 5 th |
| <input type="checkbox"/> | 4 th Quarter (October, November, December) | Postmark date January 5 th |

| | | |
|--|-----------------------------|---|
| First Name | Middle Name | Last Name |
| Kim | Lewis | Kuhlmann |
| Case Number | License/Registration Number | Primary Email Address |
| | 8208 | [REDACTED] |
| Hours Worked Per Week: | Days Worked Per Week: | Mobile Phone Number Home Phone Number |
| 60 | 7 | [REDACTED] |
| M [REDACTED] | | |
| Principle Place of Practice | | |
| Golden Gate Fields Racetrack | | |
| Address of Principle Place of Practice | | |
| 1100 Eastshore Hwy, Berkeley CA 94710 | | |

*You must list all practice locations and changes in practice or employment. If you have additional practice locations or employers, you must list this information on an attached sheet of paper.

COMPLIANCE REPORT

The questions below refer to the time period since your last completed Quarterly Report. Please provide any supporting documentation as requested in the section below.

| (Check ONE box for each question below) | YES | NO |
|--|-------------------------------------|-------------------------------------|
| Have you had any disciplinary action taken by any federal, state, other governmental agency against any professional or vocational license you now hold? <i>If yes, attach an explanation.</i> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Since the last quarterly report have you been arrested, charged, or convicted of any violation of any federal, state or local laws? <i>If yes, attach a detailed explanation.</i> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Have you complied with every term and condition of your probation? <i>If no, provide an explanation.</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Exhibit 14



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR
 DEPARTMENT OF CONSUMER AFFAIRS • VETERINARY MEDICAL BOARD
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 P (916) 515-5220 | Toll-Free (866) 229-0170 | www.vmb.ca.gov



VIA ELECTRONIC, CERTIFIED & US MAIL

June 25, 2024

Kim Lewis Kuhlmann, DVM



Re: PROBATION VIOLATION LETTER
Case No. 4602018000299

Dear Dr. Kuhlmann:

A comprehensive review of your probation file was conducted. The following items require your immediate attention:

QUARTERLY REPORTS

The Respondent Kuhlmann shall report quarterly to the Board or its designee, under penalty of perjury, on forms provided by the Board, stating whether there has been compliance with all terms and conditions of probation. Omission or falsification in any manner of any information on these reports shall constitute a violation of probation and shall result in the filing of an accusation and/or a petition to revoke probation against Respondents' license registration or permit. If the final written quarterly report is not made as directed, the period of probation shall be extended until the final report is received by the Board. Any period(s) of delinquency in submission of reports as directed may be added to the total period of probation.

After review of the Board's records, the Board has not received a Quarterly Report for Quarter 3 of 2023. Quarterly Reports are due on the 5th day after each quarter of the calendar year.

MEDICAL RECORDS REVIEW

The reviewer shall review a minimum of ten percent (10%) of Respondent's animal patient medical records or fifteen (15) records (whichever is greater), a minimum of twelve (12) times per year. The reviewer shall submit quarterly reports to the Board on a form designated by the Board. The reports shall be submitted by the reviewer directly to the Board's Probation Monitor within seven (7) calendar days after the end of the preceding quarter.

After review of the Board's records, the Board has not received reports for the months of January 2024 through June 2024. Medical Records Review reports are due on (at least) a quarterly basis.

Please submit a written letter of explanation in answer to the above-described violation along with a proposed plan to correct the violation by **July 9, 2024**. Failure to rectify any and/or all of the violations may be considered violations of your probation.

If you have any questions or concerns, please contact me via email at Alexander.Juarez@dca.ca.gov.

Regards,

Alexander A. Juarez
Probation Monitor
Veterinary Medical Board

Exhibit 15

McKowen, Rachel@DCA

From: Juarez, Alexander@DCA
Sent: Friday, August 29, 2025 1:11 PM
To: McKowen, Rachel@DCA
Subject: FW: Quarterly report letter

Here you go.



Alexander A. Juarez
Probation Monitor
 California Veterinary Medical Board
 Department of Consumer Affairs
 1747 N. Market Blvd, Suite 230
 Sacramento, CA 95834
 Direct: 916-905-5434 Toll Free: 866-229-0170
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From: Kimkuhlmann [REDACTED]
Sent: Wednesday, June 26, 2024 12:38 PM
To: Juarez, Alexander@DCA <Alexander.Juarez@dca.ca.gov>
Subject: Quarterly report letter

This Message Is From an Untrusted Sender

Warning: This email originated from outside of the organization! Do not click links, open attachments, or reply, unless you recognize the sender's email.

Report Suspicious

Dear Mr Juarez;

I was informed today by my office staff of a letter from your office informing us that you are missing the first quarter report as well as reviews of our billing records. I spoke with Dr Batten and she informed me that she sent in the report for our March records today and you should have received January and February records reviews already.

In regards to the first quarter report, it was sent the first week of April. It includes attachments and when it was sent we received an automated response that you were out of the office so the email address should have been correct. They will resend it today, hopefully including the time stamp showing the original submission. Please confirm receipt of the documents so we will know you received them. Thank you.

Sincerely,

Kim Kuhlmann, DVM

McKowen, Rachel@DCA

From: Juarez, Alexander@DCA
Sent: Tuesday, September 2, 2025 9:40 AM
To: McKowen, Rachel@DCA
Subject: FW: Automatic reply: 3rd Quarterly Probation Report - Dr. Kim Kuhlmann



Alexander A. Juarez
Probation Monitor
 California Veterinary Medical Board
 Department of Consumer Affairs
 1747 N. Market Blvd, Suite 230
 Sacramento, CA 95834
 Direct: 916-905-5434 Toll Free: 866-229-0170
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From: sf equine <sfequine.office@gmail.com>
Sent: Wednesday, June 26, 2024 1:36 PM
To: Juarez, Alexander@DCA <Alexander.Juarez@dca.ca.gov>
Subject: Re: Automatic reply: 3rd Quarterly Probation Report - Dr. Kim Kuhlmann

This Message Is From an Untrusted Sender

Warning: This email originated from outside of the organization! Do not click links, open attachments, or reply, unless you recognize the sender's email.

Report Suspicious

I understand you didn't request the QUARTER 1 2024 in your letter from yesterday, I was just covering my bases, since the same automatic email response was received for the missing QUARTER 3 2023. I don't want it to happen again in the future that you are missing a Quarterly report, when I get an automatic email response from you.

Thank you for your understanding.

Chris

On Wed, Jun 26, 2024 at 1:03 PM Juarez, Alexander@DCA <Alexander.Juarez@dca.ca.gov> wrote:

Hello,

McKowen, Rachel@DCA

From: Juarez, Alexander@DCA
Sent: Friday, August 29, 2025 1:12 PM
To: McKowen, Rachel@DCA
Subject: FW: Allison and Kuhlman reviews
Attachments: ALLISON JAN 24 MEDICAL RECORD REVIEW OVERALL EXAMINATION ASSESSMENT.pdf; Kuhlman JAN24 MEDICAL RECORD REVIEW OVERALL EXAMINATION ASSESSMENT - Page 2.pdf; ALLISON MAR 24 MEDICAL RECORD REVIEW OVERALL EXAMINATION ASSESSMENT.pdf; Kuhlman JAN 24 Monthly Supervision VET Report Packet.pdf; Allison JAN 24 Monthly Supervision VET Report Packet Fillable.pdf; Kuhlman MAR MEDICAL RECORD REVIEW OVERALL EXAMINATION ASSESSMENT.pdf; Allison MARCH 24 Monthly Supervision VET Report Packet Fillable.pdf; Kuhlman MARCH 24 Monthly Supervision VET Report Packet.pdf

Here you go.



Alexander A. Juarez
Probation Monitor
 California Veterinary Medical Board
 Department of Consumer Affairs
 1747 N. Market Blvd, Suite 230
 Sacramento, CA 95834
 Direct: 916-905-5434 Toll Free: 866-229-0170
[f](#) | [X](#) | [Join Our Email List!](#) | [VMB Customer Satisfaction Survey](#)

From: Casille Batten <[REDACTED]>
Sent: Wednesday, June 26, 2024 9:07 AM
To: Juarez, Alexander@DCA <Alexander.Juarez@dca.ca.gov>
Subject: Allison and Kuhlman reviews

This Message Is From an Untrusted Sender

Warning: This email originated from outside of the organization! Do not click links, open attachments, or reply, unless you recognize the sender's email.

[Report Suspicious](#)

Hi Alex,

Here are the record reviews for Drs Allison and Kuhlman. Sorry for the delay in getting these to you. I will have some more coming soon.

Thanks

Casille

--

Casille Batten, DVM

I received the Quarter 1 2024 Quarterly Report. That report was not requested in the letter I sent yesterday. Dr. Batten sent reports for January and March 2024, but has not sent over a report for February 2024. Dr. Batten stated a report for February 2024 will be sent over later today.

Thank you.

From: sf equine <sfequine.office@gmail.com>

Sent: Wednesday, June 26, 2024 12:51 PM

To: Juarez, Alexander@DCA <Alexander.Juarez@dca.ca.gov>

Subject: Re: Automatic reply: 3rd Quarterly Probation Report - Dr. Kim Kuhlmann

Did you receive the 1ST QUARTER 2024 email? I got an OUT OF OFFICE response when I sent that email.

I am not sure what you are looking for as far as Medical Records Reviewer report. Dr. Batten resent them this morning and you confirmed receipt.

Please let me know if this is satisfactory.

Chris

--

San Francisco Equine, Inc.
510-412-3660

**** PLEASE NOTE OUR NEW LOCATION ADDRESS ****

7026 KOLL CENTER PARKWAY
SUITE 205
PLEASANTON, CA 94566



MONTHLY SUPERVISION REPORT

Case No: 4602018000299Veterinarian Name: Kim KuhlmanVET # 8208

Report for the Month of: (circle one)

☒ Jan Feb March April May June July August Sept Oct Nov Dec

Instructions:

- (1) Please review the supervision agreement which includes the percentage and frequency of records that need to be reviewed.
- (2) **Make additional copies of this page and two types of Supervision Review logs to be turned in monthly (Satisfactory/Unsatisfactory).**
- (3) Fill this page completely with all up-to-date information and turn in monthly by the 5th of each month of supervision with corresponding logs.
- (4) Please fill out UNSATISFACTORY TREATMENT OR DOCUMENTATION review log for all patient care reviewed that required discussion, concerns or recommendations and provide your feedback to the Board (e.g. did you discuss the concerns with the probationer, were any changes made, what was the outcome, etc.)
- (5) Please fill out SATISFACTORY TREATMENT AND DOCUMENTATION for all patient care reviewed that was in total compliance.

The BOX below is to be filled out AFTER all necessary logs are filled out.

I HEREBY SUBMIT THIS REPORT OF COMPLIANCE AS REQUIRED BY THE VETERINARY MEDICAL BOARD AND THE TERMS AND CONDITIONS OF THE DISCIPLINARY ORDER IN THE MATTER REGARDING THE ABOVE REFERENCE PROBATIONER. I HEREBY CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAW OF THE STATE OF CALIFORNIA THAT ALL STATEMENTS GIVEN HERE ARE TRUE AND CORRECT.

SUPERVISOR NAME: Casille Batten VET # 18833
 PROBATIONER'S EMPLOYER OR HOSPITAL:
San Francisco Equine, Inc
ADDRESS: 865 Marina Bay Pkwy Ste 39, Richmond, CA 94804 TELEPHONE #: (510)867-5871
 NUMBER OF HOURS YOU SPEND REVIEWING PATIENT RECORDS: PER WEEK _____ PER MONTH 4
SUPERVISOR'S SIGNATURE: Casille Batten, DVM REVIEW DATE: 04.15.24

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|-------------------------|-----------------------|----------|
| Patient Name | Yes He Can (1) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race fluid therapy | | |

| | | | |
|------------------------------|--------------------------|-----------------------|----------|
| Patient Name | Ann (2) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race flyuid therapy | | |

| | | | |
|------------------------------|--------------------------------------|-----------------------|----------|
| Patient Name | Algeria (3) | Treatment Date | 01.21.24 |
| Medical Care Provided | Diagnostic analgesia right hind limb | | |

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|------------------------------|------------------|-----------------------|----------|
| Patient Name | HersABigGirl (4) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|-------------------|-----------------------|----------|
| Patient Name | North Country (5) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|---------------|-----------------------|----------|
| Patient Name | Miss Will (6) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|------------------------|-----------------------|----------|
| Patient Name | Orderly Transition (7) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|-----------|-----------------------|----------|
| Patient Name | Acero (8) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|---|-----------------------|----------|
| Patient Name | Acclider (9) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race fluid and electrolyte supplementation | | |

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|------------------------------|---|-----------------------|----------|
| Patient Name | Bronze Girl (10) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race fluid and electrolyte supplementation | | |

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|------------------------------|---|-----------------------|----------|
| Patient Name | Conejo Malo (11) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race fluid and electrolyte supplementation | | |

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|------------------------------|---|-----------------------|----------|
| Patient Name | Galopin Gourmet (12) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race fluid and electrolyte supplementation | | |

Reviewing Vet Initials CB

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

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|------------------------------|---|-----------------------|----------|
| Patient Name | La Primer Estrella (13) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race fluid and electrolyte supplementation | | |

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|------------------------------|---|-----------------------|----------|
| Patient Name | Lord Wlmborne (14) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race fluid and electrolyte supplementation | | |

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|------------------------------|---|-----------------------|----------|
| Patient Name | Uncle Juan (15) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race fluid and electrolyte supplementation | | |

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|------------------------------|---|-----------------------|----------|
| Patient Name | Senor Del Campo (16) | Treatment Date | 01.21.24 |
| Medical Care Provided | Post race fluid and electrolyte supplementation | | |

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|------------------------------|--|-----------------------|----------|
| Patient Name | Port O Call (17) | Treatment Date | 01.21.24 |
| Medical Care Provided | Dispense medication for pastern dermatitis | | |

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|------------------------------|---------------|-----------------------|----------|
| Patient Name | Tigersun (18) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|------------------|-----------------------|----------|
| Patient Name | Elwood Road (19) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|--------------------|-----------------------|----------|
| Patient Name | Hops For Pops (20) | Treatment Date | 01.21.24 |
| Medical Care Provided | Prewrite exam | | |

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|------------------------------|-----------------|-----------------------|----------|
| Patient Name | Beau Brume (21) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|-----------------|-----------------------|----------|
| Patient Name | Mars Magic (22) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|-----------------|-----------------------|----------|
| Patient Name | Seaver Way (23) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|-------------------------|-----------------------|----------|
| Patient Name | Lookin For Revenge (24) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

Reviewing Vet Initials CB

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|---|-----------------------|------------------|
| Patient Name | Good Lovin (25) | Treatment Date | 01.21 - 01.23.24 |
| Medical Care Provided | Treatment and diagnostics for respiratory infection | | |

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|------------------------------|--------------------|-----------------------|----------|
| Patient Name | Hot And Spicy (26) | Treatment Date | 01.21.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|---------------------------------|-----------------------|----------|
| Patient Name | Harcyn (27) | Treatment Date | 01.21.24 |
| Medical Care Provided | Diagnostic analgesia left front | | |

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|------------------------------|--------------------|-----------------------|----------|
| Patient Name | LLL Cool (28) | Treatment Date | 01.21.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|------------------|-----------------------|----------|
| Patient Name | Long Jacket (29) | Treatment Date | 01.21.24 |
| Medical Care Provided | Radiograph | | |

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|------------------------------|--------------------|-----------------------|----------|
| Patient Name | Lord Sheldon (30) | Treatment Date | 01.21.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|------------|-----------------------|----------|
| Patient Name | Mobou (31) | Treatment Date | 01.21.24 |
| Medical Care Provided | Dental | | |

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|------------------------------|-----------------------|-----------------------|----------|
| Patient Name | Almost Got Lucky (32) | Treatment Date | 01.21.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|-------------------------|-----------------------|----------|
| Patient Name | Alphabetical Order (33) | Treatment Date | 01.21.24 |
| Medical Care Provided | Endoscopic exam | | |

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|------------------------------|-------------|-----------------------|----------|
| Patient Name | Lammas (34) | Treatment Date | 01.21.24 |
| Medical Care Provided | Pework exam | | |

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|------------------------------|-------------|-----------------------|----------|
| Patient Name | Oops (35) | Treatment Date | 01.21.24 |
| Medical Care Provided | Pework exam | | |

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|------------------------------|-----------------|-----------------------|----------|
| Patient Name | Sunglasses (36) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

Reviewing Vet Initials CB

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

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|------------------------------|---|-----------------------|----------|
| Patient Name | Tessa (37) | Treatment Date | 01.22.24 |
| Medical Care Provided | Post work fluid and electrolyte supplementation | | |

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|------------------------------|--------------------------------------|-----------------------|----------|
| Patient Name | TopAnticipation (38) | Treatment Date | 01.23.24 |
| Medical Care Provided | Dispense steroid for mild dermatitis | | |

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|------------------------------|--------------------------------------|-----------------------|----------|
| Patient Name | Cat Bandit (39) | Treatment Date | 01.23.24 |
| Medical Care Provided | Dispense steroid for mild dermatitis | | |

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|------------------------------|----------------------|-----------------------|----------|
| Patient Name | Johnny Paycheck (40) | Treatment Date | 01.21.24 |
| Medical Care Provided | Lasix | | |

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|------------------------------|-----------------------|-----------------------|----------|
| Patient Name | Juliet's Kitchen (41) | Treatment Date | 01.23.24 |
| Medical Care Provided | Prewrite exam | | |

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|------------------------------|-------------------------|-----------------------|----------|
| Patient Name | Contrary Chieftain (42) | Treatment Date | 01.23.24 |
| Medical Care Provided | Endoscopic exam | | |

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|------------------------------|--------------------|-----------------------|----------|
| Patient Name | Dontim (43) | Treatment Date | 01.21.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|------------------------|-----------------------|----------|
| Patient Name | Many Silver Bells (44) | Treatment Date | 01.21.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|--------------------|-----------------------|----------|
| Patient Name | Poker Alice (45) | Treatment Date | 01.21.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|------------------------|-----------------------|----------|
| Patient Name | Champagne Pegasus (46) | Treatment Date | 01.21.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|--------------------|-----------------------|-----------------|
| Patient Name | Church Harbor (47) | Treatment Date | 01.21 -01.22.24 |
| Medical Care Provided | Treatment for EIPH | | |

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|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

Reviewing Vet Initials CB

| MEDICAL RECORD REVIEW. Record # | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | | |
|---|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|--|
| OVERALL EXAMINATION ASSESSMENT | | | | | | | | | | | | | | | | | | | | | | | | |
| Diagnosis complied with minimum standards. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Treatment was necessary, appropriate, and complied with minimum standards. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Maintained necessary and appropriate treatment. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Maintained necessary and appropriate records and chart entries. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Complied with existing statutes and regulations governing the practice of veterinary medicine. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| CCR SECTION 2032.3 (a) RECORD REVIEW | | | | | | | | | | | | | | | | | | | | | | | | |
| Legible | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Name or initials of the person responsible for entries. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Name, address and phone number of the client. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Name or identity of the animal, herd or flock. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Except for herds or flocks, age, sex, breed, species. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Dates (beginning and ending) of custody of the animal, if applicable. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | |
| A history or pertinent information as it pertains to each animal, herd, or flock's medical status. | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | |
| Data, including that obtained by instrumentation, from the physical examination. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| Treatment and intended treatment plan, including medications, dosages, route of administration, and frequency of use. | N/A | N/A | N/A | N/A | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | N/A | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | N/A | N/A | N/A | <input checked="" type="checkbox"/> | | |
| Records for surgical procedures 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. | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | |
| Diagnosis or assessment prior to performing a treatment or procedure. | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | N/A | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | N/A | N/A | N/A | <input checked="" type="checkbox"/> | | |
| If relevant, a prognosis of the animal's condition. | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | |
| All medications and treatments prescribed and dispensed, including strength, dosage, route of administration, quantity, and frequency of use. | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | N/A | N/A | N/A | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | N/A | N/A | N/A | N/A | N/A | N/A | <input checked="" type="checkbox"/> | | |
| Daily progress, if relevant, and disposition of the case. | N/A | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | |



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



MONTHLY SUPERVISION REPORT

Case No: 4602018000299

Veterinarian Name: Kim Kuhlman

VET # 8208

Report for the Month of: (circle one)

Jan Feb March April May June July August Sept Oct Nov Dec

Instructions:

- (1) Please review the supervision agreement which includes the percentage and frequency of records that need to be reviewed.
- (2) **Make additional copies of this page and two types of Supervision Review logs to be turned in monthly (Satisfactory/Unsatisfactory).**
- (3) Fill this page completely with all up-to-date information and turn in monthly by the 5th of each month of supervision with corresponding logs.
- (4) Please fill out UNSATISFACTORY TREATMENT OR DOCUMENTATION review log for all patient care reviewed that required discussion, concerns or recommendations and provide your feedback to the Board (e.g. did you discuss the concerns with the probationer, were any changes made, what was the outcome, etc.)
- (5) Please fill out SATISFACTORY TREATMENT AND DOCUMENTATION for all patient care reviewed that was in total compliance.

The BOX below is to be filled out AFTER all necessary logs are filled out.

I HEREBY SUBMIT THIS REPORT OF COMPLIANCE AS REQUIRED BY THE VETERINARY MEDICAL BOARD AND THE TERMS AND CONDITIONS OF THE DISCIPLINARY ORDER IN THE MATTER REGARDING THE ABOVE REFERENCE PROBATIONER. I HEREBY CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAW OF THE STATE OF CALIFORNIA THAT ALL STATEMENTS GIVEN HERE ARE TRUE AND CORRECT.

SUPERVISOR NAME: Casille Batten VET # 18833

PROBATIONER'S EMPLOYER OR HOSPITAL:
San Francisco Equine, Inc

ADDRESS: 865 Marina Bay Pkwy Ste 39, Richmond, CA 94804 TELEPHONE #: (510)867-5871

NUMBER OF HOURS YOU SPEND REVIEWING PATIENT RECORDS: PER WEEK _____ PER MONTH 4

SUPERVISOR'S SIGNATURE: Casille Batten, DVM REVIEW DATE: 05.01.24

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|--------------|-----------------------|---------|
| Patient Name | Original (1) | Treatment Date | 3.24.24 |
| Medical Care Provided | Scope | | |

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|------------------------------|----------------------|-----------------------|---------|
| Patient Name | Beat of My Heart (2) | Treatment Date | 3.25.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|----------------|-----------------------|---------|
| Patient Name | Good Lovin (3) | Treatment Date | 3.24.24 |
| Medical Care Provided | Castration | | |

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|------------------------------|--------------------------------|-----------------------|---------|
| Patient Name | Greatful Attitude (4) | Treatment Date | 3.23.24 |
| Medical Care Provided | Fluid administration post race | | |

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|------------------------------|--|-----------------------|----------------|
| Patient Name | Hot and Spicy (5) | Treatment Date | 3.23 - 3.25.24 |
| Medical Care Provided | Blood work and antibiotics for respiratory disease | | |

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| Patient Name | Infinite Love (6) | Treatment Date | 3.7.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|-------------------|-----------------------|---------|
| Patient Name | Alibi Terhune (7) | Treatment Date | 3.23.24 |
| Medical Care Provided | Lasix for work | | |

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|------------------------------|---------------------|-----------------------|---------|
| Patient Name | Cry Me A Runner (8) | Treatment Date | 3.24.24 |
| Medical Care Provided | Lasix for work | | |

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|------------------------------|---|-----------------------|---------|
| Patient Name | Slewscion (9) | Treatment Date | 3.25.24 |
| Medical Care Provided | Prerace entry exam and prerace medication | | |

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|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Bettor Bet'r (10) | Treatment Date | 3.25.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|-------------------|-----------------------|---------|
| Patient Name | Berry Valley (11) | Treatment Date | 3.24.24 |
| Medical Care Provided | Prewrite exam | | |

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|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Cowboy Kisses (12) | Treatment Date | 3.24.24 |
| Medical Care Provided | Prewrite exam | | |

Reviewing Vet Initials CB

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Mr Duff (13) | Treatment Date | 3.25.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|-------------------|-----------------------|---------|
| Patient Name | Not My Rodeo (14) | Treatment Date | 3.24.24 |
| Medical Care Provided | Pework exams | | |

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| Patient Name | Stormy Kiss (15) | Treatment Date | 3.24.24 |
| Medical Care Provided | Pework exam | | |

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|------------------------------|----------------------|-----------------------|---------|
| Patient Name | Senor Del Campo (16) | Treatment Date | 3.23.24 |
| Medical Care Provided | Ultrasound tendon | | |

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|------------------------------|-----------------------|-----------------------|---------|
| Patient Name | What's In A Name (17) | Treatment Date | 3.24.24 |
| Medical Care Provided | Upper airway scope | | |

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|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Dontim (18) | Treatment Date | 3.25.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|-------------------------|-----------------------|---------|
| Patient Name | No More Ding Dongs (19) | Treatment Date | 3.24.24 |
| Medical Care Provided | Upper airway scope | | |

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|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Poker Alice (20) | Treatment Date | 3.25.24 |
| Medical Care Provided | Prerace entry exam | | |

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|------------------------------|---------------------|-----------------------|---------|
| Patient Name | Proof He Rides (21) | Treatment Date | 3.23.24 |
| Medical Care Provided | Upper Airway scope | | |

| | | | |
|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Rivermark (22) | Treatment Date | 3.24.24 |
| Medical Care Provided | Upper Airway scope | | |

| | | | |
|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Beau Brume (23) | Treatment Date | 3.25.24 |
| Medical Care Provided | Prerace entry exam | | |

| | | | |
|------------------------------|------------------|-----------------------|---------|
| Patient Name | Begin Again (24) | Treatment Date | 3.24.24 |
| Medical Care Provided | Lasix for work | | |

Reviewing Vet Initials CB

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|--|-----------------------|---------------|
| Patient Name | Sparkle Sweetly (25) | Treatment Date | 03.23.24 |
| Medical Care Provided | Lasix for work | | |
| Patient Name | Baby Kristen (26) | Treatment Date | 3.23.24 |
| Medical Care Provided | Lasix for work | | |
| Patient Name | Tamarando Star (27) | Treatment Date | 3.24.24 |
| Medical Care Provided | Medication dispensed - medication for gastric ulcers | | |
| Patient Name | Explain This Audit (28) | Treatment Date | 3.24.24 |
| Medical Care Provided | Upperairway scope | | |
| Patient Name | Along Came Joann (29) | Treatment Date | 3.24.24 |
| Medical Care Provided | Post race fluids | | |
| Patient Name | Bid On The Prize (30) | Treatment Date | 3.23.24 |
| Medical Care Provided | Radiograph shin | | |
| Patient Name | We Can (31) | Treatment Date | 3.25.24 |
| Medical Care Provided | Prerace entry exam | | |
| Patient Name | Steve's Big Ticket (32) | Treatment Date | 3.25.24 |
| Medical Care Provided | Prerace entry exam | | |
| Patient Name | Gerlachs (33) | Treatment Date | 3.23.24 |
| Medical Care Provided | Lasix for work | | |
| Patient Name | Monsieur (34) | Treatment Date | 3.24.24 |
| Medical Care Provided | Lasix for work | | |
| Patient Name | Smiling Molly (35) | Treatment Date | 3.24.24 |
| Medical Care Provided | Lasix for work | | |
| Patient Name | Juniors Kitty(36) | Treatment Date | 3.19; 3.21.23 |
| Medical Care Provided | Pework exam | | |

Reviewing Vet Initials CB

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|-----------------|-----------------------|---------|
| Patient Name | Luna Linda (37) | Treatment Date | 3.24.24 |
| Medical Care Provided | Prewrite exam | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

Reviewing Vet Initials CB

Ex. 15 - 018

| MEDICAL RECORD REVIEW. Record # | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 |
|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----|----|----|----|----|----|----|----|----|----|
| OVERALL EXAMINATION ASSESSMENT | | | | | | | | | | | | | | | | | | | | | | |
| Diagnosis complied with minimum standards. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| Treatment was necessary, appropriate, and complied with minimum standards. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| Maintained necessary and appropriate treatment. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| Maintained necessary and appropriate records and chart entries. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| Complied with existing statutes and regulations governing the practice of veterinary medicine. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| CCR SECTION 2032.3 (a) RECORD REVIEW | | | | | | | | | | | | | | | | | | | | | | |
| Legible | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| Name or initials of the person responsible for entries. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| Name, address and phone number of the client. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| Name or identity of the animal, herd or flock. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| Except for herds or flocks, age, sex, breed, species. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | |
| Dates (beginning and ending) of custody of the animal, if applicable. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | | | | |
| A history or pertinent information as it pertains to each animal, herd, or flock's medical status. | N/A | ✓ | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | | | |
| Data, including that obtained by instrumentation, from the physical examination. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | |
| Treatment and intended treatment plan, including medications, dosages, route of administration, and frequency of use. | ✓ | ✓ | ✓ | ✓ | ✓ | N/A | N/A | ✓ | ✓ | ✓ | ✓ | N/A | ✓ | | | | | | | | | |
| Records for surgical procedures 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. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | | | |
| Diagnosis or assessment prior to performing a treatment or procedure. | ✓ | ✓ | ✓ | ✓ | ✓ | N/A | N/A | ✓ | ✓ | ✓ | ✓ | N/A | ✓ | | | | | | | | | |
| If relevant, a prognosis of the animal's condition. | N/A | N/A | N/A | N/A | ✓ | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | | | |
| All medications and treatments prescribed and dispensed, including strength, dosage, route of administration, quantity, and frequency of use. | ✓ | ✓ | N/A | ✓ | ✓ | N/A | N/A | ✓ | ✓ | ✓ | ✓ | N/A | ✓ | | | | | | | | | |
| Daily progress, if relevant, and disposition of the case. | N/A | N/A | N/A | N/A | ✓ | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | | | |

McKowen, Rachel@DCA

From: Juarez, Alexander@DCA
Sent: Friday, August 29, 2025 1:13 PM
To: McKowen, Rachel@DCA
Subject: FW: Allison and Kuhlman reviews
Attachments: ALLISON FEB 24 MEDICAL RECORD REVIEW OVERALL EXAMINATION ASSESSMENT.pdf; Allison FEB 24 Monthly Supervision VET Report Packet Fillable.pdf; Kuhlman FEB24 MEDICAL RECORD REVIEW OVERALL EXAMINATION ASSESSMENT.pdf; Kuhlman FEB 24 Monthly Supervision VET Report Packet.pdf

Here you go.



Alexander A. Juarez

Probation Monitor

California Veterinary Medical Board

Department of Consumer Affairs

1747 N. Market Blvd, Suite 230

Sacramento, CA 95834

Direct: 916-905-5434 Toll Free: 866-229-0170

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From: Casille Batten [REDACTED]
Sent: Wednesday, June 26, 2024 5:41 PM
To: Juarez, Alexander@DCA <Alexander.Juarez@dca.ca.gov>
Subject: Re: Allison and Kuhlman reviews

This Message Is From an Untrusted Sender

Warning: This email originated from outside of the organization! Do not click links, open attachments, or reply, unless you recognize the sender's email.

Report Suspicious

Hi Alex,

Here are the reviews for February.

Casille

On Wed, Jun 26, 2024 at 10:40 AM Juarez, Alexander@DCA <Alexander.Juarez@dca.ca.gov> wrote:

Hello,

You have provided reports for January 2024 and March 2024. Do you have reports for February 2024?

Thank you,

From: Casille Batten [REDACTED]
Sent: Wednesday, June 26, 2024 9:07 AM
To: Juarez, Alexander@DCA <Alexander.Juarez@dca.ca.gov>
Subject: Allison and Kuhlman reviews

Hi Alex,

Here are the record reviews for Drs Allison and Kuhlman. Sorry for the delay in getting these to you. I will have some more coming soon.

Thanks

Casille

--

Casille Batten, DVM

--

Casille Batten, DVM



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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



MONTHLY SUPERVISION REPORT

Case No: 4602018000299

Veterinarian Name: Kim Kuhlman

VET # 8208

Report for the Month of: (circle one)

Jan **Feb** March April May June July August Sept Oct Nov Dec

Instructions:

- (1) Please review the supervision agreement which includes the percentage and frequency of records that need to be reviewed.
- (2) **Make additional copies of this page and two types of Supervision Review logs to be turned in monthly (Satisfactory/Unsatisfactory).**
- (3) Fill this page completely with all up-to-date information and turn in monthly by the 5th of each month of supervision with corresponding logs.
- (4) Please fill out UNSATISFACTORY TREATMENT OR DOCUMENTATION review log for all patient care reviewed that required discussion, concerns or recommendations and provide your feedback to the Board (e.g. did you discuss the concerns with the probationer, were any changes made, what was the outcome, etc.)
- (5) Please fill out SATISFACTORY TREATMENT AND DOCUMENTATION for all patient care reviewed that was in total compliance.

The BOX below is to be filled out AFTER all necessary logs are filled out.

I HEREBY SUBMIT THIS REPORT OF COMPLIANCE AS REQUIRED BY THE VETERINARY MEDICAL BOARD AND THE TERMS AND CONDITIONS OF THE DISCIPLINARY ORDER IN THE MATTER REGARDING THE ABOVE REFERENCE PROBATIONER. I HEREBY CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAW OF THE STATE OF CALIFORNIA THAT ALL STATEMENTS GIVEN HERE ARE TRUE AND CORRECT.

SUPERVISOR NAME: Casille Batten VET # 18833

PROBATIONER'S EMPLOYER OR HOSPITAL:
San Francisco Equine, Inc

ADDRESS: 865 Marina Bay Pkwy Ste 39, Richmond, CA 94804 TELEPHONE #: (510)867-5871

NUMBER OF HOURS YOU SPEND REVIEWING PATIENT RECORDS: PER WEEK _____ PER MONTH 3.5

SUPERVISOR'S SIGNATURE: Casille Batten, DVM REVIEW DATE: 04.23.24

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Peter Flies (1) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |

| | | | |
|------------------------------|-------------------------------------|-----------------------|----------------|
| Patient Name | Moonrise (2) | Treatment Date | 2.18 - 2.19.24 |
| Medical Care Provided | Diagnostics and treatment for fever | | |

| | | | |
|------------------------------|---|-----------------------|---------|
| Patient Name | Union Express (3) | Treatment Date | 2.18.24 |
| Medical Care Provided | Post race electrolyte and vitamin supplementation | | |

| | | | |
|------------------------------|---|-----------------------|---------|
| Patient Name | Buttonwood Tree (4) | Treatment Date | 2.18.24 |
| Medical Care Provided | Post race electrolyte and vitamin supplementation | | |

| | | | |
|------------------------------|---|-----------------------|---------|
| Patient Name | Lord Sheldon (5) | Treatment Date | 2.18.24 |
| Medical Care Provided | Post race electrolyte and vitamin supplementation | | |

| | | | |
|------------------------------|---|-----------------------|---------|
| Patient Name | MacLeans Rhyme (6) | Treatment Date | 2.18.24 |
| Medical Care Provided | Post race electrolyte and vitamin supplementation | | |

| | | | |
|------------------------------|---|-----------------------|---------|
| Patient Name | Super Ellie (7) | Treatment Date | 2.18.24 |
| Medical Care Provided | Post race electrolyte and vitamin supplementation | | |

| | | | |
|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Sir Greyson (8) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |

| | | | |
|------------------------------|---------------|-----------------------|---------|
| Patient Name | Slewscion (9) | Treatment Date | 2.18.24 |
| Medical Care Provided | Lasix | | |

| | | | |
|------------------------------|------------|-----------------------|---------|
| Patient Name | Dulas (10) | Treatment Date | 2.18.24 |
| Medical Care Provided | Lasix | | |

| | | | |
|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Lammas (11) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |

| | | | |
|------------------------------|---|-----------------------|---------|
| Patient Name | Naughty Nadine (12) | Treatment Date | 2.18.24 |
| Medical Care Provided | Post race electrolyte and vitamin supplementation | | |

Reviewing Vet Initials CB

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|---|-----------------------|----------------|
| Patient Name | Shana Madel (13) | Treatment Date | 2.18.24 |
| Medical Care Provided | Post race electrolyte and vitamin supplementation | | |
| Patient Name | Sunglasses (14) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |
| Patient Name | Tessa (15) | Treatment Date | 2.18.24 |
| Medical Care Provided | Post race electrolyte and vitamin supplementation | | |
| Patient Name | TopAnticipation (16) | Treatment Date | 2.18.24 |
| Medical Care Provided | Post race electrolyte and vitamin supplementation | | |
| Patient Name | My Bucket List (17) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |
| Patient Name | Sensational ZZ (18) | Treatment Date | 2.18.24 |
| Medical Care Provided | Diagnostics and treatment for fever | | |
| Patient Name | Momma Mocca (19) | Treatment Date | 2.18.24 |
| Medical Care Provided | Radiographs | | |
| Patient Name | Little Mischevious (20) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |
| Patient Name | Mischiefs King (21) | Treatment Date | 2.18.24 |
| Medical Care Provided | Preerace entry exam | | |
| Patient Name | FastTrainToTexas (22) | Treatment Date | 2.18.24 |
| Medical Care Provided | Dispense steroid for cellulitis | | |
| Patient Name | Cat Bandit (23) | Treatment Date | 2.18.24 |
| Medical Care Provided | Lasix | | |
| Patient Name | Warrens World (24) | Treatment Date | 2.18 - 2.19.24 |
| Medical Care Provided | Treatment for bacterial dermatitis | | |

Reviewing Vet Initials CB

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|-----------------------|-----------------------|---------|
| Patient Name | Alexanders Dream (25) | Treatment Date | 2.18.24 |
| Medical Care Provided | Endoscopic exam | | |

| | | | |
|------------------------------|------------------|-----------------------|---------|
| Patient Name | Elwood Road (26) | Treatment Date | 2.18.24 |
| Medical Care Provided | Lasix for work | | |

| | | | |
|------------------------------|----------------|-----------------------|---------|
| Patient Name | TigerSun (27) | Treatment Date | 2.18.24 |
| Medical Care Provided | Lasix for work | | |

| | | | |
|------------------------------|------------------------|-----------------------|---------|
| Patient Name | River Of Ambition (28) | Treatment Date | 2.18.24 |
| Medical Care Provided | Upper airway scope | | |

| | | | |
|------------------------------|--------------|-----------------------|---------|
| Patient Name | Hartman (29) | Treatment Date | 2.18.24 |
| Medical Care Provided | Lasix | | |

| | | | |
|------------------------------|-----------------------|-----------------------|---------|
| Patient Name | Rose Of Mooncoin (30) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |

| | | | |
|------------------------------|---|-----------------------|---------|
| Patient Name | ShezaLuckyCharm (31) | Treatment Date | 2.18.24 |
| Medical Care Provided | Dispense steroid for soft tissue inflammation | | |

| | | | |
|------------------------------|---------------------|-----------------------|---------|
| Patient Name | Do It For Dave (32) | Treatment Date | 2.18.24 |
| Medical Care Provided | Pework exam | | |

| | | | |
|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Hops For Pops (33) | Treatment Date | 2.18.24 |
| Medical Care Provided | Pework exam | | |

| | | | |
|------------------------------|--|-----------------------|---------|
| Patient Name | Gerlachs (34) | Treatment Date | 2.19.24 |
| Medical Care Provided | Preventative medication for osteoarthritis | | |

| | | | |
|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Silver Flirt (35) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |

| | | | |
|------------------------------|----------------------|-----------------------|---------|
| Patient Name | Sparkle Sweetly (36) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |

Reviewing Vet Initials CB

Supervision Review Log

SATISFACTORY TREATMENT AND DOCUMENTATION

| | | | |
|------------------------------|--------------------|-----------------------|---------|
| Patient Name | Druidic (37) | Treatment Date | 2.18.24 |
| Medical Care Provided | Prerace entry exam | | |

| | | | |
|------------------------------|----------------------|-----------------------|---------|
| Patient Name | Lil Bit Thirsty (38) | Treatment Date | 2.18.24 |
| Medical Care Provided | Lasix | | |

| | | | |
|------------------------------|--------------------------|-----------------------|--------------|
| Patient Name | Daddy's Doll (39) | Treatment Date | 2.18-2.19.24 |
| Medical Care Provided | Treatment for cellulitis | | |

| | | | |
|------------------------------|--------------------------|-----------------------|----------------|
| Patient Name | Dress Rehearsal (40) | Treatment Date | 2.18 - 2.19.24 |
| Medical Care Provided | Treatment for cellulitis | | |

| | | | |
|------------------------------|------------------------|-----------------------|---------|
| Patient Name | Wine and Whisky (41) | Treatment Date | 2.18.24 |
| Medical Care Provided | Upper airway endoscopy | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

| | | | |
|------------------------------|--|-----------------------|--|
| Patient Name | | Treatment Date | |
| Medical Care Provided | | | |

Reviewing Vet Initials CB

| MEDICAL RECORD REVIEW. Record # | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 |
|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| OVERALL EXAMINATION ASSESSMENT | | | | | | | | | | | | | | | | | | | | | | | | | |
| Diagnosis complied with minimum standards. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Treatment was necessary, appropriate, and complied with minimum standards. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Maintained necessary and appropriate treatment. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Maintained necessary and appropriate records and chart entries. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Complied with existing statutes and regulations governing the practice of veterinary medicine. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| CCR SECTION 2032.3 (a) RECORD REVIEW | | | | | | | | | | | | | | | | | | | | | | | | | |
| Legible | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Name or initials of the person responsible for entries. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Name, address and phone number of the client. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Name or identity of the animal, herd or flock. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Except for herds or flocks, age, sex, breed, species. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Dates (beginning and ending) of custody of the animal, if applicable. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| A history or pertinent information as it pertains to each animal, herd, or flock's medical status. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | ✓ | N/A | N/A | ✓ | N/A | N/A | N/A |
| Data, including that obtained by instrumentation, from the physical examination. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Treatment and intended treatment plan, including medications, dosages, route of administration, and frequency of use. | N/A | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | N/A | ✓ | ✓ | N/A | N/A | ✓ | N/A | ✓ | ✓ | N/A | ✓ | N/A | N/A | N/A | ✓ | ✓ | ✓ | ✓ |
| Records for surgical procedures 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. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | ✓ | N/A | N/A | N/A | N/A | N/A | N/A |
| Diagnosis or assessment prior to performing a treatment or procedure. | N/A | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | N/A | ✓ | ✓ | N/A | N/A | ✓ | N/A | ✓ | ✓ | N/A | ✓ | ✓ | N/A | N/A | ✓ | ✓ | ✓ | ✓ |
| If relevant, a prognosis of the animal's condition. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | ✓ | N/A | N/A | N/A | N/A | N/A | N/A |
| All medications and treatments prescribed and dispensed, including strength, dosage, route of administration, quantity, and frequency of use. | N/A | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | N/A | ✓ | ✓ | N/A | N/A | ✓ | N/A | ✓ | ✓ | N/A | ✓ | ✓ | N/A | N/A | ✓ | ✓ | ✓ | N/A |
| Daily progress, if relevant, and disposition of the case. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | ✓ | N/A | N/A | N/A | N/A | N/A | N/A |

| MEDICAL RECORD REVIEW. Record # | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | | |
|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----|----|----|----|----|----|--|--|
| OVERALL EXAMINATION ASSESSMENT | | | | | | | | | | | | | | | | | | | | | | | | |
| Diagnosis complied with minimum standards. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Treatment was necessary, appropriate, and complied with minimum standards. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Maintained necessary and appropriate treatment. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Maintained necessary and appropriate records and chart entries. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Complied with existing statutes and regulations governing the practice of veterinary medicine. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| CCR SECTION 2032.3 (a) RECORD REVIEW | | | | | | | | | | | | | | | | | | | | | | | | |
| Legible | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Name or initials of the person responsible for entries. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Name, address and phone number of the client. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Name or identity of the animal, herd or flock. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Except for herds or flocks, age, sex, breed, species. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Dates (beginning and ending) of custody of the animal, if applicable. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | |
| A history or pertinent information as it pertains to each animal, herd, or flock's medical status. | N/A | N/A | N/A | N/A | N/A | ✓ | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | |
| Data, including that obtained by instrumentation, from the physical examination. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | |
| Treatment and intended treatment plan, including medications, dosages, route of administration, and frequency of use. | ✓ | ✓ | ✓ | ✓ | N/A | ✓ | N/A | N/A | ✓ | N/A | N/A | N/A | ✓ | ✓ | N/A | N/A | | | | | | | | |
| Records for surgical procedures 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. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | |
| Diagnosis or assessment prior to performing a treatment or procedure. | ✓ | ✓ | ✓ | ✓ | N/A | ✓ | N/A | N/A | ✓ | N/A | N/A | N/A | ✓ | ✓ | N/A | N/A | | | | | | | | |
| If relevant, a prognosis of the animal's condition. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | |
| All medications and treatments prescribed and dispensed, including strength, dosage, route of administration, quantity, and frequency of use. | ✓ | ✓ | N/A | ✓ | N/A | ✓ | N/A | N/A | ✓ | N/A | N/A | N/A | ✓ | ✓ | N/A | N/A | | | | | | | | |
| Daily progress, if relevant, and disposition of the case. | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | |

McKowen, Rachel@DCA

From: Casille Batten <[REDACTED]>
Sent: Wednesday, August 27, 2025 2:37 PM
To: McKowen, Rachel@DCA
Cc: Kim Kuhlmann
Subject: Re: CVMB - Medical Record Review for Dr. Kuhlmann

This Message Is From an Untrusted Sender

Warning: This email originated from outside of the organization! Do not click links, open attachments, or reply, unless you recognize the sender's email.

Report Suspicious

Hi Rachel,

Thanks for the heads up! I'll make sure the form is attached for the next quarters reviews.

Casille

Casille Batten, DVM

On Wed, Aug 27, 2025 at 2:23 PM McKowen, Rachel@DCA <Rachel.McKowen@dca.ca.gov> wrote:

Good Afternoon Dr. Batten,

I hope you are doing well! I wanted to touch base with you in regards to the medical record review services that you provide for Dr. Kuhlmann.

It appears that the forms you have been submitting to the Board are missing the "unsatisfactory treatment or documentation" page of the report packet (please see attachment). Going forward, please make sure you are submitting this page as well, even if there wasn't any unsatisfactory treatment. There are two small boxes that say "compliant" and "noncompliant" on this page. If there isn't any unsatisfactory treatment, you would mark the "compliant" box and initial the bottom right of the page. If there is unsatisfactory treatment, then you would mark the "noncompliant" box and explain whatever was unsatisfactory and initial the bottom.

If you have any questions regarding the packet or the information given today, please feel free to reach out.