STATE OF MARYLAND
DEPARTMENT OF AGRICULTURE
BEFORE THE STATE BOARD OF VETERINARY MEDICAL EXAMINERS

IN THE MATTER OF:	*	
JANICE GRIFFIN, DVM LICENSE NO. 4087	*	DOCKET NO. 23-01
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CONSENT AGREEMENT AND ORDER

This Consent Agreement and Order ("Consent Agreement"), dated this 9th day of November 2023, is between the State Board of Veterinary Medical Examiners ("SBVME" or "Board") and Janice Griffin, DVM ("Dr. Griffin"), License No. 4087. This Consent Agreement resolves a case arising from a complaint filed with the SBVME on July 29, 2022, alleging that Dr. Griffin did not satisfy the Veterinary Practice Act, Md. Code Ann., Agric. §§ 2-301 – 2-316 and related Code of Maryland Regulations ("COMAR") 15.14.01 – 15.14.17, as set forth herein.

On November 6, 2023, Dr. Griffin, through legal counsel, having been advised in writing regarding her due process rights, agreed to resolve this case under the terms and conditions reflected in this Consent Agreement without formal charges. By signing this Consent Agreement, Dr. Griffin agrees to waive her due process rights for Docket No. 23-01, including the right to a hearing, and further agrees to the terms and conditions specified.

Under Maryland law, the SBVME is the licensing authority responsible for regulating the practice of veterinary medicine in this State, which includes filing disciplinary actions against veterinarians charged with violating the provisions of the Veterinary Practice Act and related COMAR regulations. As part of its authority, the SBVME "may refuse, suspend, or revoke any application or license, and censure or place on probation any licensee ... if the veterinarian ... [f]ails to comply with Board rules and regulations after receiving a license." Md. Code Ann., Agric. § 2-310(8). The Board may also impose a civil penalty of not more than $5,000 for a first offense or $10,000 for a second or subsequent offense in lieu of or in addition

to suspending or revoking a veterinarian's license, respectively. Agric. § 2-310.1. In setting the amount of a civil penalty, the Board shall consider the severity of the violation, the good faith of the violator, and any history of prior violations, as well as the Board's civil penalty standards. Md. Code Ann., State Gov't. § 10-1001(b); COMAR 15.14.11 (Civil Penalty Standards for Veterinarians).

FINDINGS OF FACT AND CONCLUSIONS OF LAW

By signing and agreeing to this Consent Agreement after having had the opportunity to seek the advice of counsel, Janice Griffin, DVM, License Number 4087, agrees to the provisions of this Consent Agreement, acknowledging that the SBVME has sufficient evidence to find as fact, and to conclude as a matter of law that she did not satisfy COMAR 15.14.01.07 (Professional Judgment and Practice) as set forth herein:

1. Dr. Griffin is a veterinarian licensed to practice in Maryland, where she has been licensed since 1993. Dr. Griffin is the owner and responsible veterinarian at Valley Veterinary Hospital ("VVH") (License No. 10-064), located at 8 Cambridge Avenue, East New Market, MD 21631. Dr. Griffin has no relevant disciplinary history with the Board.

2. This case involves veterinary care and treatment provided to Ruthie, a 2-year-old female domestic shorthair cat owned by Melissa Browne-Fitzherbert ("Ms. Fitzherbert"). At the time of the events in this case, Ms. Fitzherbert was an employee at VVH, Dr. Griffin's hospital.

3. On June 13, 2022, Ms. Fitzherbert took Ruthie to Cumberland Valley Animal Clinic ("CVAC") (License No. 21-002). Two days before the visit, Ruthie had chewed up a toy with ribbons on it, and later, Ruthie vomited up some of the ribbons. Diana Saxton, DVM ("Dr. Saxton") (License No. 6335), was Ruthie's attending veterinarian.

4. According to CVAC medical records, Dr. Saxton performed a physical exam and noted that Ruthie had a fever of 104.8 degrees. Dr. Saxton performed a FAST ultrasound scan, which showed no obvious foreign body. Dr. Saxton performed abdominal radiographs, which showed a moderate amount of feces in the colon, slight comma-shaped gas patterns throughout, and "strange density mid-JJ" on the lateral view. Dr. Saxton also noted in the medical records that she discussed her concerns about Ruthie's x-rays with

Ms. Fitzherbert and told her that no foreign body was seen on the ultrasound. Dr. Saxton told Ms. Fitzherbert that Ruthie's fever and ongoing vomiting were a concern, but immediate surgery did not seem necessary. However, Dr. Saxton told Ms. Fitzherbert that if Ruthie did not improve with supportive care overnight, she recommended exploratory surgery the next day. Dr. Saxton administered Cerenia and Onsior to Ruthie and dispensed Amoxidrops before discharging her.

5. On Tuesday, June 14, 2022, Ms. Fitzherbert took Ruthie to her employer, VVH. Ruthie was not on the appointment schedule, but Dr. Griffin offered to see Ruthie anyway, out of courtesy to her employee. Dr. Griffin examined Ruthie, who had a temperature of 103.9 degrees and was sick and dehydrated. Dr. Griffin placed an intravenous ("IV") catheter, started IV fluids, added stronger antibiotics, and performed radiographs on Ruthie.

6. According to Dr. Griffin, Ruthie's lateral x-ray showed feces in the same place as the day before. There was no apparent foreign body or obstruction. Dr. Griffin performed a barium swallow test. Dr. Griffin noted that the barium moved very slowly. She suspected a severe gastrointestinal ("GI") infection. Dr. Griffin did not suspect that Ruthie had a foreign body obstruction then, given her resolving fever and negative x-rays. Because Dr. Griffin suspected a GI infection with secondary ileus, she planned to treat Ruthie medically for an infection. Before discharging Ruthie on June 14, 2022, Dr. Griffin removed her catheter and prescribed Zeniquin.

7. Dr. Griffin was not scheduled to work the next day, Wednesday, June 15, 2022. With Dr. Griffin out of the office, Ms. Fitzherbert took Ruthie to VVH. The staff took x-rays and sent them to Dr. Griffin via text message for review. Dr. Griffin found that barium was still present in the large colon, and the feces in the colon had not moved. Dr. Griffin recommended continuing Zeniquin and adding Cisapride and lactulose. Dr. Griffin recommended that the veterinary assistants administer subcutaneous ("SQ") fluids to Ruthie and told them to monitor her.

8. On Thursday, June 16, 2022, Ms. Fitzherbert returned to VVH with Ruthie. Ruthie's condition had worsened, and Dr. Griffin was concerned about hypervolemia and sepsis. Dr. Griffin treated Ruthie, placed

her on IV fluids, took additional radiographs, and performed multiple enemas. Dr. Griffin's review of Ruthie's radiographs found no gas pattern or obvious obstruction.

9. Dr. Griffin recalls that she discussed the severity of Ruthie's situation with Ms. Fitzherbert, although Ms. Fitzherbert disputes this. At the end of Ruthie's visit, the IV catheter was removed, and Ruthie was discharged.

10. On Friday, June 17, 2022, Ms. Fitzgerald dropped Ruthie off at VVH again. Ruthie's condition was not improving, and her temperature was 103.8 degrees. Despite multiple antibiotics, Ruthie was "still licking and swallowing hard." Dr. Griffin examined Ruthie's mouth and checked under her tongue for any string or foreign body, but she found nothing. Dr. Griffin had difficulty visualizing Ruthie's veins, but eventually, she inserted a 24-gauge IV catheter and started administering IV fluids at 60 mls per hour. According to Dr. Griffin, she attempted several times to get blood to run a CBC/Lytes and Chem 17 panel on Ruthie, but she was unsuccessful.

11. At this point, Dr. Griffin became very concerned that Ruthie might have a string foreign body (that would not be visible on x-rays) or a tear in her intestines, causing peritonitis. Dr. Griffin discussed performing a "quick bowel exploratory" with Ms. Fitzherbert, and Ms. Fitzherbert verbally consented.

12. Later that afternoon, Dr. Griffin performed bowel exploratory surgery on Ruthie and found no foreign body. Due to Ruthie's condition, Dr. Griffin wanted to finish the surgery and get Ruthie off the surgery table as quickly as possible. Therefore, Dr. Griffin did not take any biopsies.

13. Ruthie remained on IV fluids post-surgery and was later taken home by Ms. Fitzherbert.

14. On Saturday, June 18, 2022, at 7:30 a.m., Ms. Fitzherbert texted Dr. Griffin that Ruthie was "not very responsive, and her gums looked pale." Dr. Griffin was concerned about sepsis. Dr. Griffin and Ms. Heck met Ms. Fitzherbert at VVH so that Ruthie could be examined.

15. Dr. Griffin noted that Ruthie was depressed and had pale mucous membranes. Ruthie's capillary refill time was 2 seconds. Dr. Griffin obtained blood for a CBC and PCV. Ruthie's PCV was 46%. According to Dr. Griffin, VVH's blood machine malfunctioned and could not complete the CBC. Dr.

Griffin placed an IV catheter and gave Ruthie fluids and cefazolin. Dr. Griffin took another abdominal x-ray, which revealed no apparent problems.

16. Ruthie was more alert three hours later, and her temperature was 103.6 degrees, according to the medical record. Ruthie's IV catheter was patent and left in place so that Ms. Fitzherbert could administer Ruthie's IV fluids at home. Dr. Griffin instructed Ms. Fitzherbert to give Ruthie 700 mls of fluids per day, and she was sent home with more cefazolin for Ruthie.

17. On Sunday, June 19, 2022, Ms. Fitzherbert took Ruthie to CARE Veterinary Center ("CVC") (License No. 10-076). Trisha Yarde, DVM ("Dr. Yarde") (License No. 7195), was Ruthie's attending veterinarian. Dr. Yarde examined Ruthie and discussed estimates for a treatment plan with Ms. Fitzherbert.

18. According to CARE's medical records, Dr. Yarde hospitalized Ruthie. Dr. Yarde administered IV fluids and medications to Ruthie. Dr. Yarde also ran diagnostic tests on Ruthie, including blood work, ultrasound-guided cystocentesis, and x-rays.

19. Later that day, Dr. Yarde diagnosed Ruthie with septic peritonitis. Due to a poor prognosis and the high cost of treatment, Ms. Fitzherbert elected to have Dr. Yarde euthanize Ruthie.

20. Dr. Griffin stated that Ms. Fitzpatrick did not inform her directly that Ruthie was euthanized. Dr. Griffin found out later from her staff. Ms. Fitzherbert left her employment at VVH shortly after these events and never texted or spoke to Dr. Griffin again.

21. On July 29, 2022, Ms. Fitzherbert filed a complaint with the SBVME against Dr. Griffin arising from the care Dr. Griffin provided to Ruthie.

22. The Board opened a case and investigated, which included obtaining and reviewing the medical records for Ruthie's care at VVH and CVC.

23. Through legal counsel, Dr. Griffin also responded to the SBVME detailing her interactions with Ms. Fitzherbert and her treatment of Ruthie.

24. Dr. Griffin expressed her regret and sadness about the loss of Ruthie. She stated that she cared deeply for both Ruthie and Ms. Fitzherbert and did her best to try to help Ruthie. Dr. Griffin maintains that Ruthie was extremely sick the first time she saw her, and despite appropriate treatment, Ruthie continued

to decline. Dr. Griffin denies responsibility for Ruthie's death. Dr. Griffin stated that without a necropsy, it is hard to tell where the infection originated and what made Ruthie so sick.

25. After it reviewed the case, the Board identified several ways in which Dr. Griffin's professional judgment and practice did not satisfy the standards for veterinary care in this state.

26. COMAR 15.14.01.07A (Professional Judgment and Practice) provides that: "[a] veterinarian, when caring for and treating a patient, shall conform to those minimum standards of care and treatment which are customary among veterinarians in this State."

27. Dr. Griffin did not satisfy the applicable standard in her care and treatment of Ruthie by instructing Ms. Fitzherbert to administer more fluids than recommended for a cat of Ruthie's size and by not offering blood work during Ruthie's initial visit on June 14, 2022.

28. Regarding the fluids, Ruthie weighed approximately 11.5 pounds, or 5.2 kilograms, at the time of the events in this case. The recommended amount of fluids for a cat of Ruthie's size would be 80 times the body weight in kilograms or 416 mls per 24-hour period. On June 18, 2022, Dr. Griffin instructed Ms. Fitzherbert to administer 700 mls per day, which the Board found was excessive. Fluid overload can cause complications ranging from nausea, vomiting, lethargy, and abdominal distention to more severe complications, including ataxia, weakness, coma, seizures, hypothermia, and bradycardia, even death.

29. Dr. Griffin also did not recommend or perform bloodwork at various stages of Ruthie's treatment, as required by the standard of care. While there is a notation in the record that Dr. Griffin unsuccessfully attempted to draw blood before the surgery on June 17, 2022, the records do not reflect that the consequences of performing surgery without bloodwork were noted in the record or discussed with Ms. Fitzherbert. Moreover, blood work should have been offered, if not strongly recommended, much earlier for a medically unstable cat suspected of having an infection.

Taking the facts and circumstances into consideration, including the nature of the violation(s), the veterinarian's lack of relevant disciplinary history, and her acceptance of responsibility and good faith cooperation in resolving this matter, the Board concluded that the most reasonable and appropriate resolution includes the sanctions set forth below.

ORDER

Based on the foregoing Findings of Fact and Conclusions of Law, it is ORDERED by the State Board of Veterinary Medical Examiners that:

(a) For not satisfying COMAR 15.14.01.07 (Professional Judgment and Practice) in the care and treatment provided to Ruthie, a 2-year-old female domestic shorthair cat owned by Melissa Browne-Fitzherbert ("Ms. Fitzherbert"), by prescribing excessive amounts of fluid and not recommending bloodwork at Ruthie's initial visit or thereafter, Dr. Griffin is assessed a civil penalty of $300;

(b) Dr. Griffin shall pay the $300 civil penalty within sixty (60) days from the date of this Order by check payable to the Maryland Department of Agriculture ("MDA") with the notation "SBVME – 23-01" sent to the MDA at 50 Harry S. Truman Parkway, Annapolis, MD 21401 to the attention of Nathaniel Boan;

(c) As an additional requirement of this Consent Agreement, Dr. Griffin shall complete twelve hours of continuing education ("CE"), with six (6) consisting of the Medical Record Keeping for Veterinarians course found at drip.vet, or an equivalent course pre-approved by the Board, and six (6) hours of CE in internal medicine, pre-approved by the Board. To obtain pre-approval, Dr. Griffin must submit the CE proposed to satisfy this agreement to the Board before completion by emailing Nathaniel Boan, Executive Director, at Nathaniel.boan@maryland.gov with descriptive information about each course proposed to be taken. Descriptive information may be provided through a link to each course or by attaching a syllabus to the email;

(d) The CE shall be completed, and verification of completion provided to the Board within sixty (60) days from the date of this Order, with verification sent by email to Nathaniel Boan, Executive Director, at nathaniel.boan@maryland.gov. Proof from the CE provider shall include the veterinarian's name, the number of hours of CE

completed, the topics covered, and the date(s) the CE was given. Only 6 of these 12 CE hours may be counted toward the 18 credit hours required annually for re-registration of the veterinary license; and

(e) This Consent Agreement is a public document.

WITNESS the hand of the State Board of Veterinary Medical Examiners, State of Maryland, this 9th day of November 2023.

STATE BOARD OF VETERINARY
MEDICAL EXAMINERS

Christine Calvert /NEB

Christine Calvert, DVM
Vice-President
State Board of Veterinary Medical Examiners
Maryland Department of Agriculture

CONSENT

I, Janice Griffin, DVM, acknowledge that I have had an opportunity to consult with counsel before entering into this Consent Agreement. By this Consent, I hereby acknowledge the legal authority and jurisdiction of the Board over this matter to issue and enforce this Consent Agreement. To resolve this matter, I agree to accept and submit to the foregoing Consent Agreement, consisting of nine (9) pages, including this Consent. I sign this Consent Agreement without reservation as my voluntary act and deed after having had an opportunity to consult with counsel. I fully understand and comprehend the language, meaning, and terms of this Consent Agreement.

Date: 11/7/23

Janice Griffin, DVM