1 2 3 4 5 6 7 8 9 10		RE THE EDICAL BOARD
11	DEPARTMENT OF C	ONSUMER AFFAIRS
12	STATE OF C	ALIFORNIA
13		
14	In the Matter of the Accusation Against:	Case No. 4602021000371
15 16	VINCENT A. BAKER EQUINE MEDICAL CENTER 10542 Walker Street	ACCUSATION
_	Cypress, CA 90630	
17 18	Veterinarian License No. VET 10550	
	and	
19 20	VINCENT A. BAKER, DVM EQUINE MEDICAL CENTER, Managing Licenses	
21	Managing Licensee 10542 Walker Street Cypress, CA 90630	
22	Premises Registration No. HSP 3171,	
23		
24	Respondents.	
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	(VINCENT A. BAK	ER and EQUINE MEDICAL CENTER) ACCUSATION

1	DADTIES
1	PARTIES
2	1. Jessica Sieferman (Complainant) brings this Accusation solely in her official capacity
3	as the Executive Officer of the Veterinary Medical Board (Board), Department of Consumer
4	Affairs, State of California.
5	2. On or about July 28, 1989, the Board issued Veterinarian License Number VET
6	10550 to Vincent A. Baker (Respondent Baker). The Veterinarian License was in full force and
7	effect at all times relevant to the charges brought herein and will expire on August 31, 2022,
8	unless renewed.
9	3. On or about June 15, 1981, the Board issued Premises Registration Number HSP
10	3171 to Baker Equine Hospital, Inc. with Bartlett Baker as managing licensee of the premises.
11	On or about May 15, 2003, Respondent Baker became the managing licensee. The name of the
12	corporation changed to Equine Medical Center (Respondent EMC), but the Premises Registration
13	Number remained the same. The Premises Registration was in full force and effect at all times
14	relevant to the charges brought in this Accusation and will expire on May 31, 2022, unless
15	renewed.
16	JURISDICTION
17	4. This Accusation is brought before the Board under the authority of the following
18	laws. All section references are to the Business and Professions Code unless otherwise indicated.
19	5. Section 118, subdivision (b), provides that suspension, expiration, surrender, or
20	cancellation of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary
21	action during the period within which the license may be renewed, restored, reissued, or
22	reinstated.
23	6. Section 4853.6 provides, in relevant part, that the Board shall withhold, suspend, or
24	revoke registration of a veterinary premises when the license of the managing licensee to practice
25	veterinary medicine is revoked or suspended.
26	7. Section 4875 provides, in relevant part, that the Board may revoke or suspend the
27	license of any person to practice veterinary medicine, or any branch thereof, in this state for any
28	causes provided in the Veterinary Medicine Practice Act (Bus. & Prof. Code § 4800, et seq.). In
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1	addition, t	he Board has the authority to assess a fine not in excess of \$5,000 against a licensee for
2	any of the causes specified in section 4883. Such fine may be assessed in lieu of, or in addition	
3	to, a suspension or revocation.	
4		STATUTORY PROVISIONS
5	8.	Section 4021 defines "controlled substance" to mean "any substance listed in Chapter
6	2 (comme	ncing with Section 11053) of Division 10 of the Health and Safety Code."
7	9.	Section 4022 provides:
8		"Dangerous drug" or "dangerous device" means any drug or device unsafe for self-use in humans or animals, and includes the following:
9 10		(a) Any drug that bears the legend: "Caution: federal law prohibits dispensing without prescription," "Rx only," or words of similar import.
11		(b) Any device that bears the statement: "Caution: federal law restricts this device
12		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
13		use of the device.
14		(c) Any other drug or device that by federal or state law can be lawfully dispensed
15		only on prescription or furnished pursuant to Section 4006.
16	10.	Section 4024, subdivision (b), defines "dispense" to include the furnishing of drugs or
17	devices di	rectly to a patient by a veterinarian acting within the scope of his or practice.
18	11.	Section 4169 provides, in relevant part:
19		(a) A person or entity shall not do any of the following:
20		
21		(3) Purchase, trade, sell, or transfer dangerous drugs that the person knew or
22		reasonably should have known were misbranded, as defined in Section 111335 of the Health and Safety Code.
23	12.	Section 4170 provides, in relevant part:
24		(a) No prescriber shall dispense drugs or dangerous devices to patients in his or her
25		office or place of practice unless all of the following conditions are met:
26		
27		(2) The dangerous drugs or dangerous devices are necessary in the treatment of the
28		condition for which the prescriber is attending the patient.
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13	3. Section 4829.5 states:
	(a) Each time a veterinarian initially prescribes, dispenses, or furnishes a dangerous drug, as defined in Section 4022, to an animal patient in an outpatient
	setting, the veterinarian shall offer to provide, in person or through electronic means, to the client responsible for the animal, or his or her agent, a consultation
	that includes the following information:
	(1) The name and description of the dangerous drug.
	(2) Route of administration, dosage form, dosage, duration of drug therapy, the duration of the effects of the drug, and the common severe adverse effects associated with the use of a short-acting or long-acting drug.
	(3) Any special directions for proper use and storage.
	(4) Actions to be taken in the event of a missed dose.
	(5) If available, precautions and relevant warnings provided by the drug's manufacturer, including common severe adverse effects of the drug.
	(b) If requested, a veterinarian shall provide drug documentation, if available.
	(c) A veterinarian may delegate to a registered veterinary technician or veterinar assistant the task of providing the consultation and drug documentation required by this section.
	(d) It shall be noted in the medical record of the animal patient if the consultation described in this section is provided or declined by the client or his or her agent.
14	4. Section 4854 requires all premises where veterinary medicine, veterinary dentistry,
veterina	ry surgery is being practiced, and all instruments, apparatus and apparel used in
connect	ion with those practices, to be kept clean and sanitary at all times, and conform to those
minimu	m standards established by the Board.
1:	5. Section 4855 requires a veterinarian, as required by regulation of the Board, to keep
written	record of all animals receiving veterinary services, and provide a summary of that recor
to the o	wner of animals receiving veterinary services, when requested.
10	5. Section 4883 states, in relevant part:
	The board may deny, revoke, or suspend a license or assess a fine as provided in Section 4875 for any of the following:
	(c) Violation or attempting to violate, directly or indirectly, any of the provisions of this chapter [the Veterinary Medicine Practice Act].
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1	(g) Unprofessional conduct, that includes, but is not limited to, the following:
2	
3	(3) A violation of any federal statute, rule, or regulation or any of the
4	statutes, rules, or regulations of this state regulating dangerous drugs or controlled substances.
5	
6 7	(i) Fraud, deception, negligence, or incompetence in the practice of veterinary medicine.
8	(j) Aiding or abetting in any acts that are in violation of any of the provisions of this chapter [the Veterinary Medicine Practice Act].
9	
10	(o) Violation, or the assisting or abetting violation, of any regulations
11	adopted by the board pursuant to this chapter [the Veterinary Medicine Practice Act].
12	17. Health and Safety Code section 11190 states, in relevant part:
13	
14	(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
15	the Business and Professions Code, the prescriber shall record and maintain the following information:
16	(A) Full name, address, and the telephone number of the ultimate user or research
17 18	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.
19	(B) The prescriber's category of licensure and license number; federal controlled
20	substance registration number; and the state medical license number of any prescriber using the federal controlled substance registration number of a government-exempt facility.
21	(C) NDC (National Drug Code) number of the controlled substance dispensed.
22	<ul><li>(D) Quantity of the controlled substance dispensed.</li></ul>
23	(E) ICD-9 (diagnosis code), if available.
24	(F) Number of refills ordered.
25	(G) Whether the drug was dispensed as a refill of a prescription or as a first-time
26	request.
27	(H) Date of origin of the prescription.
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1	(2) (A) Each prescriber that dispenses controlled substances shall provide the
2 3	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.
4	(d) This section shall become operative on January 1, 2005.
5	(e) The reporting requirement in this section for Schedule IV controlled substances shall not apply to any of the following:
6 7	(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.
8 9	(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
10	2005.
11	(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
12	substance, in a format set by the Department of Justice pursuant to regulation, shall be on a monthly basis for all of the following:
13	(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.
14	(2) The administration or dispensing of a controlled substance in accordance with
15 16	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	18. Health and Safety Code section 111345 states: "Any drug or device is misbranded if
18	any word, statement, or other information required by or under this part to appear on the label or
19	labeling is not prominently placed on the label or labeling with conspicuousness, as compared
20	with other words, statements, designs, or devices in the labeling, and in terms as to render it likely
21	to be read and understood by the ordinary individual under customary conditions of purchase and
22	use."
23	19. Health and Safety Code section 111395, subdivision (a), provides that any drug is
24	misbranded if it is an imitation of another drug.
25	20. Health and Safety Code section 111440 states: "It is unlawful for any person to
26	manufacture, sell, deliver, hold, or offer for sale any drug or device that is misbranded."
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1	21. Health and Safety Code section 111500 states, in relevant part, that a veterinarian	
2	may personally furnish his or her own patient with drugs as are necessary in the treatment of the	
3	condition for which he or she attends the patient provided that the drug is properly labeled to	
4	show all the information required in Section 111480 except the prescription number.	
5	22. Health and Safety Code section 11153, subdivision (a) states:	
6	(a) A prescription for a controlled substance shall only be issued for a	
7	legitimate medical purpose by an individual practitioner acting in the usual course of his or her professional practice. The responsibility for the proper processing of controlled substances is upon	
8	the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests	
9	with the pharmacist who fills the prescription. Except as authorized by this division, the following are not legal prescriptions: (1) an order	
10	purporting to be a prescription which is issued not in the usual course of professional treatment or in legitimate and authorized research; or	
11	(2) an order for an addict or habitual user of controlled substances, which is issued not in the course of professional treatment or as part of	
12	an authorized narcotic treatment program, for the purpose of providing the user with controlled substances, sufficient to keep him or her	
13	comfortable by maintaining customary use.	
14	REGULATORY PROVISIONS	
15	23. California Code of Regulations (CCR), title 4, section 1867, subsection (b), prohibits	
16	the possession and/or use on the premises of a facility under the jurisdiction of the California	
17	Horse Racing Board (CHRB) of any drug, substance, or medication by a veterinarian that has not	
18	been approved by the United States Food and Drug Administration for use in the United States.	
19	24. CCR, title 16, section 2030 states, in relevant part:	
17	24. CCR, the 10, section 2050 states, in relevant part.	
	All fixed premises where veterinary medicine and its various branches are being	
20	All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or	
20 21	All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those	
20 21 22	All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or possess the following minimum standards:	
<ul><li>20</li><li>21</li><li>22</li><li>23</li></ul>	All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or	
<ul> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> </ul>	All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or possess the following minimum standards: (f) The veterinary premises shall meet the following standards:	
<ol> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> </ol>	All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or possess the following minimum standards:	
20 21 22 23 24 25 26 27	<ul> <li>All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or possess the following minimum standards:</li> <li></li> <li>(f) The veterinary premises shall meet the following standards:</li> <li></li> <li>(3) The disposal of waste material shall comply with all applicable state, federal,</li> </ul>	
<ol> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> </ol>	<ul> <li>All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or possess the following minimum standards:</li> <li></li> <li>(f) The veterinary premises shall meet the following standards:</li> <li></li> <li>(3) The disposal of waste material shall comply with all applicable state, federal,</li> </ul>	
<ol> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> </ol>	<ul> <li>All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or possess the following minimum standards:</li> <li></li> <li>(f) The veterinary premises shall meet the following standards:</li> <li></li> <li>(3) The disposal of waste material shall comply with all applicable state, federal,</li> </ul>	

1 2	(6) All drugs and biologicals shall be maintained, administered, dispensed and prescribed in compliance with state and federal laws.
2	25. CCR, title 16, section 2030.05, subsection (b), states that the Licensee Manager is
4	responsible for ensuring that the premises for which he/she is manager complies with the
5	requirements in sections 4853, 4854, 4855 and 4856. The Licensee Manager is responsible for
6	ensuring that the physical and operational components of a premises meet the minimum standards
7	of practice as set forth in CCR, title 16, sections 2030 through 2032.5.
8	26. CCR, title 16, section 2032.1 provides, in relevant part:
9	(a) It is unprofessional conduct for a veterinarian to administer, prescribe,
10	dispense or furnish a drug, medicine, appliance, or treatment of whatever nature for the prevention, cure, or relief of a wound, fracture or bodily
11	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 retient is a wild animal or the current is
12	and the client, except where the patient is a wild animal or the owner is unknown.
13	(b) A veterinarian-client-patient relationship shall be established by the following:
14	(1) The client has authorized the veterinarian to assume responsibility for
15 16	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
17 18	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
19	medically appropriate and timely visits to the premises where the animals are kept, and
20	(3) The veterinarian has assumed responsibility for making medical
21	judgments regarding the health of the animal and has communicated with the client a course of treatment appropriate to the circumstance.
22	(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
23	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
24	drug.
25 26	(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.
27	(e) No person may practice veterinary medicine in this state except within
28	the context of a veterinarian-client-patient relationship or as otherwise
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1	permitted by law. A veterinarian-client-patient relationship cannot be established solely by telephonic or electronic means.	
2	established solery by telephonic of electronic means.	
3	27. CCR, title 16, section 2032.3 provides, in relevant part:	
4	(a) Every veterinarian performing any act requiring a license pursuant to the	
5	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:	5
6		
7	(4) Except for herds or flocks, age, sex, breed, species, and color of the animal.	
8	(1) Except for herds of flocks, uge, sex, breed, species, and color of the animal.	
9		_1 _
10	(6) A history or pertinent information as it pertains to each animal, herd, or floch medical status.	ĊS
11	(7) Data, including that obtained by instrumentation, from the physical examination.	
12		
13	(8) Treatment and intended treatment plan, including medications, dosages, rout of administration, and frequency of use.	e
14		
15	(10) Diagnosis or assessment prior to performing a treatment or procedure.	
16	(11) If relevant, a prognosis of the animal's condition.	
17 18	(12) All medications and treatments prescribed and dispensed, including strengt dosage, route of administration, quantity, and frequency of use.	h,
19	(13) Daily progress, if relevant, and disposition of the case.	
20	28. CCR, title 16, section 2032.35 states, "Altering or modifying the medical record	of
21	any animal, with fraudulent intent, or creating any false medical record, with fraudulent intent,	
22	constitutes unprofessional conduct in accordance with Business and Professions Code section	
23	4883(g)."	
24	29. CCR, title 16, section 2032.4 states:	
25	(a) General anesthesia is a condition caused by the administration of a drug or combination of drugs sufficient to produce a state of	
26	unconsciousness or dissociation and blocked response to a given pain or alarming stimulus.	
27 28	(b) When administering general anesthesia, a veterinarian shall comply with the following standards:	
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1		(1) Within twelve (12) hours prior to the administration of a general anesthetic, the animal patient shall be given a physical examination by a
2 3		licensed veterinarian appropriate for the procedure. The results of the physical examination shall be documented in the animal patient's medical records.
4		(2) An animal under general anesthesia shall be observed for a length of time appropriate for its safe recovery.
5		(3) Provide respiratory monitoring including, but not limited to,
6 7		observation of the animal's chest movements, observation of the rebreathing bag, or respirometer.
8		(4) Provide cardiac monitoring including, but not limited to, the use of a stethoscope, pulseoximeter or electrocardiographic monitor.
9		(5) When administering general anesthesia in a hospital setting, a
10		veterinarian shall have resuscitation or rebreathing bags of appropriate volumes for the animal patient and an assortment of endotracheal tubes readily available.
11		(6) Records for procedures involving general anesthesia shall include a
12 13		description of the procedure, the name of the surgeon, the type of sedative and/or anesthetic agents used, their route of administration, and their strength if available in more than one strength.
14	30.	Code of Federal Regulations, title 21, section 1304.22, in relevant part:
15		
16		(a) Describe for discovery and responsible Each remain resistand or
17		(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
18		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
19		or volume of such finished form dispensed, including the name and address of the person to whom it was dispensed, the date of dispensing,
20		the number of units or volume dispensed, and the written or typewritten name or initials of the individual who dispensed or administered the
21		substance on behalf of the dispenser. In addition to the requirements of this paragraph, practitioners dispensing gamma-hydroxybutyric acid under
22		a prescription must also comply with § 1304.26.
23	31.	Code of Federal Regulations, title 21, section 1317.05 states in relevant part:
24		(a) <i>Practitioner inventory</i> . Any registered practitioner in lawful possession
25		of a controlled substance in its inventory that desires to dispose of that substance shall do so in one of the following ways:
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27		(2) Promptly deliver that controlled substance to a reverse distributor's
28		registered location by common or contract carrier pick-up or by reverse distributor pick-up at the registrant's registered location;
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1	32.	Code of Federal Regulations, title 21, section 1317.95, subdivision (a) states:
2		The destruction of any controlled substance shall be in accordance with
3		the following requirements:
4		(a) <i>Transfer to a person registered or authorized to accept controlled</i> <i>substances for the purpose of destruction.</i> If the controlled substances are
5 6		transferred to a person registered or authorized to accept the controlled substances for the purpose of destruction, two employees of the transferring registrant shall load and unload or observe the loading and
7		unloading of any controlled substances until transfer is complete.
		<u>COST RECOVERY</u>
8	33.	Section 125.3 provides that the Board may request the administrative law judge to
9	direct a lice	entiate found to have committed a violation or violations of the licensing act to pay a
10	sum not to	exceed the reasonable costs of the investigation and enforcement of the case.
11		DRUG CLASSIFICATIONS
12	34.	Acepromazine, commonly known as Ace, is a tranquilizer used in horses.
13	Acepromaz	zine is restricted for use by, or on the order of a licensed veterinarian and is a
14	dangerous	drug pursuant to section 4022.
15	35.	Adequan, see polysulfated glycosaminoglycan.
16	36.	Banamine, see flunixin meglumine.
17	37.	Baytril, see enrofloxacin.
18	38.	Block, generic term used to describe a regional nerve block using a local anesthetic
19	administere	ed to the area or nerve serving the area to block painful sensation.
20	39.	<i>Bute,</i> see phenylbutazone.
21	40.	Bute-Cort is a topical cream used as a sweat (to sweat a horse leg is to apply a
22	therapeutic	compound under a plastic film and wrapping the leg for a period of time). It is a
23	compounde	ed product that contains phenylbutazone, DMSO, hydrocortisone, diclofenac or
24	variations t	hereof in different concentrations depending on the compounding source. Bute-Cort is
25	a dangerou	s drug pursuant to section 4022.
26	41.	Butorphanol, an injectable narcotic pain medication, is sold under the tradenames
27	Torbugesic	and Dolorex. Butorphanol is restricted for use by or on the order of a licensed
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1	veterinarian and is a Schedule IV controlled substance pursuant to Health and Safety Code		
2	section 11057, subdivision (c)(3). It is a dangerous drug pursuant to section 4022.		
3	42. <i>Butorphanol tartrate,</i> sold under the brand name Torbugesic, is a narcotic used in		
4	horses to treat pain. Butorphanol tartrate is restricted for use by or on the order of a licensed		
5	veterinarian and is a dangerous drug pursuant to section 4022 and a Schedule IV controlled		
6	substance pursuant to Health and Safety Code section 11057, subdivision (c)(3). Detomidine		
7	hydrochloride and butorphanol tartrate may be used in combination to sedate equine patients and		
8	is commonly abbreviated as Dorm/Torb.		
9	43. <i>Calcium gluconate</i> is an injectable in the treatment of hypocalcemic conditions.		
10	Calcium gluconate is a dangerous drug pursuant to section 4022.		
11	44. <i>Chloramphenicol Paste</i> an antibiotic compounded into a paste used to treat infection		
12	in the horse. It is a dangerous drug pursuant to section 4022.		
13	45. Dantrolene suspension, used in the control of exertional rhabdomyolysis (tying up) in		
14	horses. It is not commercially available as a suspension, but is as an oral capsule and as an		
15	injectable and must be prepared by a compounding pharmacist. The compounded preparation is		
16	not FDA approved. It is a dangerous drug pursuant to section 4022.		
17	46. Dantrium Suspension see Dantrolene.		
18	47. <i>Detomidine hydrochloride</i> , sold under the tradename Dormosedan, is a sedative used		
19	in horses. Detomidine hydrochloride is restricted for use by or on the order of a licensed		
20	veterinarian and is a dangerous drug pursuant to section 4022. Detomidine hydrochloride and		
21	butorphanol tartrate may be used in combination to sedate equine patients and is commonly		
22	abbreviated as Dorm/Torb.		
23	48. <i>Dimethyl sulfoxide</i> , commonly known as DMSO, is approved by the FDA for topical		
24	use on horses, but has been used off-label to treat inflammatory conditions. When given		
25	intravenously, it is an unapproved dangerous drug pursuant to section 4022.		
26	49. DMSO, see dimethyl sulfoxide.		
27	50. <i>Dorm/Ace,</i> see detomidine hydrochloride and acepromazine.		
28	51. <i>Dorm/Torb</i> , see detomidine hydrochloride and butorphanol tartrate.		
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1	52.	<i>E-SE</i> is a combination product containing vitamin E and selenium given by injection
2	for the trea	atment of myositis related clinical signs. E-SE is a dangerous drug pursuant to section
3	4022. See	also selenium-tocopherol.
4	53.	EIPH is an abbreviation for exercise induced pulmonary hemorrhage.
5	54.	Electrolytes, electrically charged minerals found in the body that are essential
6	compound	s of life. Electrolyte therapy if given intravenously in fluid form is a dangerous drug
7	pursuant to	p section 4022.
8	55.	Electrolyte + Fluid Therapy is an undefined mixture of IV fluids and electrolytes
9	given via t	he jugular vein. Electrolyte + Fluid Therapy is a dangerous drug pursuant to section
10	4022.	
11	56.	Enrofloxacin, sold under the brand name Baytril, is a broad spectrum bactericidal
12	antibiotic	used to treat infections requiring long-term treatment. Enrofloxacin is restricted for use
13	by or on th	ne order of a licensed veterinarian and is a dangerous drug pursuant to section 4022.
14	57.	Entrolyte HE is an oral electrolyte supplement.
15	58.	EPM Drench is a compounded drug containing various drugs specific to the
16	compound	ing formula used in the treatment of Equine Protozoal Myeloencephalitis, a
17	neurologic	cal disease of horses caused by the protozoan, Sarcocystis neurona. EPM Drench is a
18	dangerous	drug pursuant to section 4022.
19	59.	Equimax, see ivermectin/praziquantel.
20	60.	Estrone, sold under the brand names Estragyn, Kestrin, and Theelin, is an estrogen
21	medication	n used in menopausal hormone therapy. Estrone is a dangerous drug pursuant to section
22	4022.	
23	61.	Entrolyte packet is a nutritional supplement for veterinary use only.
24	62.	Equimax, see ivermectin and praziquantel.
25	63.	EqStim is a biologic used as an injectable adjunct therapy for equine respiratory
26	disease. It	t is a biologic and is not a dangerous drug pursuant to section 4022.
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		(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

*Estradiol* is a female hormone used in horses for behavior modification as well as to
 tighten the ligaments involved with intermittent proximal patellar upward fixation. It is a
 compounded product. It is a dangerous drug pursuant to section 4022.

- 65. *Estrone*, sold under the brand names Estragyn, Kestrin, and Theelin, is an estrogen
  medication used in menopausal hormone therapy in humans and for EIPH in horses. It is
  commercially unavailable and obtained only by compounding pharmacies. Estrone is a
  dangerous drug pursuant to section 4022.
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66. *Euthasol*, see sodium pentobarbital/phenytoin sodium.

9 67. *Flu EHV 4/1*, a horse vaccine for the prevention of Equine Influenza (EIV) and for
10 the prevention of Equine Rhinopneumonitis due to Equine Herpes Virus types 1 and 4. It is not a
11 dangerous drug pursuant to section 4022.

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68. *Fluid Therapy* is a term used to describe the administration of physiologic liquids to an animal. The fluids may contain electrolytes and other substances mixed into the fluids, such as vitamins. A drug administered by fluid therapy is a dangerous drug pursuant to section 4022.

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

*Furosemide*, sold under the brand names of Lasix or Salix, is a diuretic used in horse
racing as an anti-bleeding medication to prevent exercise-induced pulmonary hemorrhage in
horses running at high speed and has long been considered a performance enhancing drug in the
horse racing industry. Furosemide is available by prescription only and is a dangerous drug
pursuant to section 4022.

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71. *GastroGard*, a tradename for omeprazole, is used in the treatment and prevention of gastric ulcers in horses. It is a dangerous drug pursuant to section 4022.

72. *Gelocast* is a trade name for medicated gauze impregnated with zinc oxide and
calamine paste used in the treatment of lower leg conditions in the horse. It is not a dangerous
drug pursuant to section 4022.

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73. Gentamycin, also known as Gentocin or Gent, is an antibiotic. It is a dangerous drug 1 2 pursuant to section 4022. 74. *Glycopyrrolate*, a long acting anti-cholinergic drug used to reduce salivary, nasal, 3 respiratory tract and stomach secretions. It also functions to control heart rate (bradycardia). It is 4 a dangerous drug pursuant to section 4022. 5 75. Hyaluronate sodium, sold under the brand name Legend, is an intravenous injectable 6 solution used in horses to treat joint dysfunction associated with equine osteoarthritis. Federal 7 law restricts the use of hyaluronate sodium to use by or on the order of a licensed veterinarian. 8 9 Hyaluronate sodium is a dangerous drug pursuant to section 4022. 10 76. Influenza/Rhinopneumonitis vaccine is administered to control the spread of influenza and Rhinopneumonitis, which cause highly contagious respiratory infections in horses who travel 11 frequently. 12 77. Ivermectin/praziquantel, sold under the brand name Equimax, is a dewormer used in 13 horses to control parasites. 14 78. Jug means to administer via the jugular vein of the horse, often used in conjunction 15 with DMSO, Vits, Vitamin-Electrolyte, Fluid Therapy, and other drugs. 16 79. *Ketamine* is a Schedule III controlled substance pursuant to Health and Safety Code 17 section 11056, subdivision (g), and is a dangerous drug pursuant to section 4022. 18 80. 19 Ketofen, see ketoprofen. 81. Ketoprofen, sold under the brand name Ketofen, is an injectable NSAID used for the 20 alleviation of inflammation and pain associated with musculoskeletal disorders in horses. 21 Ketoprofen is a dangerous drug pursuant to section 4022. 22 82. Lasix, see furosemide. 23 83. Legend, see hyaluronate sodium. 24 84. *Methocarbamol*, sold under the brand name Robaxin-V, is a potent skeletal muscle 25 relaxant, and federal law restricts this drug to use by or on the order of a licensed veterinarian. 26 Methocarbamol is a dangerous drug pursuant to section 4022. 27 85. *Metronidazole*, an antibiotic, is a dangerous drug pursuant to section 4022. 28 15 (VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

86. *Midazolam*, sold under the tradename Versed, is a benzodiazepine sedative used in 1 2 horses. Midazolam is restricted for use by or on the order of a licensed veterinarian and is a Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision 3 (c)(3). It is a dangerous drug pursuant to section 4022. 4 87. Naquasone, see trichlormethiazide/dexamethasone. 5 88. Otomax is the trade name for an antibiotic/antifungal/anti-inflammatory ointment 6 containing gentamicin sulfate, betamethasone valerate, and clotrimazole. It is a dangerous drug 7 pursuant to section 4022. 8 9 89. *Panolog* is a trade name for a combination topical/otic preparation containing nystatin, 10 neomycin sulfate, thiostrepton, triamcinolone acetonide in an ointment form. It is a dangerous drug pursuant to section 4022. 11 90. *Penicillin*, also known as Pen or Pen-G, is an antibiotic. It is a dangerous drug 12 pursuant to section 4022. 13 14 91. Phenylbutazone, commonly known as Bute and sold as Butazolidin, is an NSAID used to treat lameness in horses. It is commonly administered by IV and oral routes. 15 Phenylbutazone is a dangerous drug pursuant to section 4022. When phenylbutazone is 16 combined with an undefined corticosteroid, the combination is commonly referred to as Bute-17 Cort and used as a topical sweat. Bute-Cort is a dangerous drug pursuant to section 4022. 18 92. 19 Polysulfated glycosaminoglycan, sold under the brand name Adequan, is used for the intramuscular treatment of non-infectious degenerative and/or traumatic joint dysfunction and 2021 associated lameness of the carpal and hock joints in horses. Polysulfated glycosaminoglycan is a dangerous drug pursuant to section 4022. 22 93. Robaxin, see methocarbamol. 23 94. Romifidine hydrochloride, sold under the brand name Sedivet, is an injectable horse 24 25 sedative. Romifidine hydrochloride is a dangerous drug pursuant to section 4022. 95. Rompun, see xylazine. 26 96. Salix, see furosemide. 27 97. Sedivet is a trade name for romifidine hydrochloride. See romifidine hydrochloride. 28 16 (VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

98. *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.

99. *Silvadene Cream* is the trade name for *silver sulfadiazine* a topical antibacterial used in wound treatment. It is a prescription drug and is a dangerous drug pursuant to section 4022.
 100. *SMZ*, see trimethoprim-sulfamethazine.

8 101. Sodium pentobarbital and phenytoin sodium solution, commonly referred to as
9 Euthanasia Solution, sold under the tradenames Beuthanasia-D and Euthasol, is used to cause
10 humane, painless, and rapid euthanasia of animals. Sodium pentobarbital and phenytoin sodium
11 solution is restricted by federal law for use by or on the order of a licensed veterinarians, is a
12 Schedule III controlled substance pursuant to Health and Safety Code section 11056, subdivision
13 (c)(1)(C), and is a dangerous drug pursuant to section 4022.

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

19 103. *Surpass Cream*, a brand name for diclofenamic acid, is an anti-inflammatory topical
20 cream. Surpass is a dangerous drug pursuant to section 4022.

21 104. *Tetanus toxoid*, commonly referred to as Tetanus Vac, is a core equine vaccine to
22 protect horses from development of tetanus.

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105. *Tetracycline* is an antibiotic and a dangerous drug pursuant to section 4022.

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106. *Thiamine* is an essential B vitamin used in horses for carbohydrate metabolism.

107. *Torbugesic*, see butorphanol tartrate.

108. *Tribrissen*, also known as Trib, see trimethoprim-sulfadiazine.

27 109. *Trichlormethiazide/dexamethasone*, commonly known as Tri Dex and Naquasone, is
28 a diuretic and corticosteroid combination used in mild swellings of the distal limbs in horses. It is

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- not commercially available and is a compounded product only. Trichlormethiazide/ dexamethasone is a dangerous drug pursuant to section 4022.
- 110. Thyro-L Thyroxine, also known as levothyroxine, is sold under the trade name of 3 Thyro-L (levothyroxine sodium powder USP). Thyro-L is not approved by the FDA. The label of 4 5 Thyro-L shows indications for treatment of specific disease, supplies doses, contraindications, and bears the federal legend, "Federal law restricts this product to use by or on the order of a 6 licensed veterinarian". In as much it is a misbranded drug under federal [21 USC § 331 and 21 7 USC § 352(w)] and California State law [BPC § 4169]. Other commercially available forms of 8 9 levothyroxine powder for equine use are marketed as branded or generic products. None of the 10 marketed levothyroxine powder products are FDA approved. Thyro-L, levothyroxine, and branded levothyroxines are dangerous drugs as defined under Section 4022. 11
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111. Torb, see butorphanol.

13 112. *Torbugesic*, also called Torb is a trade name for butorphanol. See butorphanol.
14 113. *Trimethoprim-sulfadiazine*, sold as Uniprim and Tribrissen, is an oral antibiotic used
15 in horses to treat systemic bacterial infections. Trimethoprim-sulfadiazine is restricted for use by
16 or on the order of a licensed veterinarian and is a dangerous drug pursuant to section 4022.

17 114. *Vetera Gold* is an equine vaccine for the prevention of Influenza, Herpes Virus,
18 Eastern and Western Encephalomyelitis, West Nile Virus, and Tetanus. It is a biologic and is not
19 a dangerous drug pursuant to section 4022.

20 115. *Vitamins*, commonly referred to as Vit Booster or Vits, are injectable nutritive
21 supplements used in horses and are dangerous drugs pursuant to section 4022.

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

24 117. *Vits*, refers to unknown vitamin(s) injected and are a dangerous drug pursuant to
25 section 4022.

26 118. West Nile virus vaccine is a vaccine administered to horses to prevent arbovirus
27 encephalitis.

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1	FACTUAL ALLEGATIONS
2	119. Respondent Baker is the managing licensee for Respondent EMC in Cypress, CA and
3	operates a mobile unit from Respondent EMC's fixed premises.
4	120. On or about August 22, 2019, a Board Inspector performed a routine inspection of the
5	mobile unit operated by Respondent Baker. The Board Inspector observed deficiencies in drug
6	logs and medical records.
7	121. On or about May 15, 2020, Board Subject Matter Expert, Dr. James Howard, DVM,
8	inspected the fixed premises of Respondent EMC. There were no veterinarians on the premises
9	during the inspection.
10	122. During the inspection, Dr. Howard requested equine medical records. Staff at
11	Respondent EMC printed the requested records.
12	123. Dr. Howard repeatedly inquired if the printed records were the entirety of the medical
13	record for the individual horses. Respondent EMC staff confirmed that the printed records were
14	the entirety of the medical records for each horse.
15	124. In February 2021, the Board received an anonymous complaint concerning the unsafe
16	treatment of equine patients by multiple veterinarians. The Board initiated an investigation based
17	on the anonymous complaint. As part of its investigation, the Board received equine medical
18	records from Respondent and/or his representative.
19	FIRST CAUSE FOR DISCIPLINE
20	(Negligence)
21	125. Respondent Baker is subject to disciplinary action under section 4883, subdivision (i),
22	for negligence in the practice of veterinary medicine. Respondent Baker prescribed, dispensed, or
23	administered a drug, medication, appliance, application, or treatment to animal patients without
24	performing an examination and forming a diagnosis of any condition that required treatment, as
25	follows:
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	126. Between January 4, 2019 and July 16, 2020, without performing an examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
3	dispensed, or administered the following medications to equine patient P.L. <sup>1</sup> :
4	a. Lasix AM;
5	b. Bute-Cort;
6	c. Dorm/Torb;
7	d. Silvadene Cream;
8	e. Surpass Cream;
9	f. Block;
10	g. Sedivet;
11	h. Equimax;
12	i. Naquasone;
13	j. Bute;
14	k. Tetanus toxoid;
15	1. Cryotherapy;
16	m. Otomax;
17	n. Panalog;
18	o. Thyro-L;
19	p. Baytril;
20	q. Legend;
21	r. Methocarbamol;
22	s. Vitamin/Electrolytes;
23	t. Vitamins;
24	u. Gelocast;
25	v. Thiamine;
26	w. Calcium;
27	x. Penicillin;
28	<sup>1</sup> Initials are used to protect the identities of the equine patients.
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1	y. Gentamycin; and
2	z. Acepromazine.
3	127. On or about March 4, 2020, without performing an appropriate examination and
4	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
5	dispensed, or administered Adequan IM to equine patient F.
6	128. On or about March 4, 2020, without performing an appropriate examination and
7	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
8	dispensed, or administered the following medications to equine patient G.B.:
9	a. Adequan IM;
10	b. Sedivet;
11	c. Gel-Cast.
12	129. On or about March 4, 2020, without performing an appropriate examination and
13	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
14	dispensed, or administered the following medications to equine patient E.:
15	a. Adequan IM;
16	b. Estrone Injection;
17	c. Ketofen;
18	d. Legend IV.
19	130. On or about March 7, 2020, without performing an appropriate examination and
20	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
21	dispensed, or administered Lasix AM to equine patient D.
22	131. On or about March 7, 2020, without performing an appropriate examination and
23	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
24	dispensed, or administered Bute-Cort to equine patient W.V.
25	132. On or about March 7, 2020, without performing an appropriate examination and
26	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
27	dispensed, or administered Sedivet to equine patient G.W.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATIO

1	133. On or about March 7, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
3	dispensed, or administered Sedivet to equine patient S.D.
4	134. On or about March 7, 2020, without performing an appropriate examination and
5	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
6	dispensed, or administered the following medications to equine patient S.W.:
7	a. Dorm/Torb;
8	b. Tetanus Vaccine;
9	c. Caslicks <sup>2</sup> .
10	135. On or about March 7, 2020, without performing an appropriate examination and
11	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
12	dispensed, or administered the following medications to equine patient D.Z.:
13	a. Dorm/Torb;
14	b. Tetanus Vaccine;
15	c. Caslicks.
16	136. On or about March 12, 2020, without performing an appropriate examination and
17	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
18	dispensed, or administered Acepromazine Tabs to equine patient C.C.
19	137. On or about March 12, 2020, without performing an appropriate examination and
20	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
21	dispensed, or administered the following medications to equine patient D.S.:
22	a. Acepromazine Tabs;
23	b. Equimax;
24	c. Influenza/Rhinopneumonitis vaccine.
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28	<sup>2</sup> A surgical procedure performed on mares to close the upper part of the vulva and keep the reproductive tract clean.
	22
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	138. On or about March 12, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
3	dispensed, or administered Acepromazine Tabs to equine patient D.K.
4	139. On or about March 12, 2020, without performing an appropriate examination and
5	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
6	dispensed, or administered the following medications to equine patient B.F.:
7	a. Acepromazine Tabs;
8	b. West Nile Vaccine.
9	140. On or about March 13, 2020, without performing an appropriate examination and
10	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
11	dispensed, or administered the following medications to equine patient R.D.:
12	a. Dorm/Torb;
13	b. Shockwave Therapy.
14	141. On or about March 12, 2020, without performing an appropriate examination and
15	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
16	dispensed, or administered the following medications to equine patient A.:
17	a. Adequan IM;
18	b. Sedivet.
19	142. On or about March 12, 2020, without performing an appropriate examination and
20	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
21	dispensed, or administered Adequan IM to equine patient E.R.
22	143. On or about March 12, 2020, without performing an appropriate examination and
23	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
24	dispensed, or administered Adequan IM to equine patient H.V.
25	144. On or about March 12, 2020, without performing an appropriate examination and
26	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
27	dispensed, or administered Adequan IM to equine patient A.M.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATIO

1	145. On or about March 14, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
3	dispensed, or administered a Gel-Cast to equine patient C.
4	146. On or about March 14, 2020, without performing an appropriate examination and
5	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
6	dispensed, or administered Entrolyte H.E. to equine patient M.G.
7	147. On or about March 16, 2020, without performing an appropriate examination and
8	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
9	dispensed, or administered Sedivet to equine patient G.W.
10	148. On or about March 16, 2020, without performing an appropriate examination and
11	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
12	dispensed, or administered a Vitamin Booster to equine patient E.R.
13	149. On or about March 16, 2020, without performing an appropriate examination and
14	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
15	dispensed, or administered a Vitamin Booster to equine patient A.C.
16	150. On or about March 16, 2020, without performing an appropriate examination and
17	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
18	dispensed, or administered a Vitamin Booster to equine patient H.V.
19	151. On or about March 16, 2020, without performing an appropriate examination and
20	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
21	dispensed, or administered a Vitamin Booster to equine patient S.S.
22	152. On or about March 16, 2020, without performing an appropriate examination and
23	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
24	dispensed, or administered the following medications to equine patient M.M.:
25	a. Sedivet;
26	b. Vitamin Booster.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	153. On or about March 13, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
3	dispensed, or administered a Thiamine Injection to equine patient S.H.
4	154. On or about March 13, 2020, without performing an appropriate examination and
5	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
6	dispensed, or administered a Thiamine Injection to equine patient K.
7	155. On or about March 13, 2020, without performing an appropriate examination and
8	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
9	dispensed, or administered the following medications to equine patient L.S.:
10	a. Bute-Cort;
11	b. Thiamine Injection.
12	156. On or about March 14, 2020, without performing an appropriate examination and
13	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
14	dispensed, or administered Adequan IM to equine patient T.O.
15	157. On or about March 14, 2020, without performing an appropriate examination and
16	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
17	dispensed, or administered Adequan IM to equine patient C.G.
18	158. On or about March 14, 2020, without performing an appropriate examination and
19	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
20	dispensed, or administered Adequan IM to equine patient F.H.
21	159. On or about March 14, 2020, without performing an appropriate examination and
22	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
23	dispensed, or administered Adequan IM to equine patient D.F.
24	160. On or about March 19, 2020, without performing an appropriate examination and
25	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
26	dispensed, or administered Acepromazine Tabs to equine patient E.M.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATIO

1	161. On or about March 16, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
3	dispensed, or administered Sedivet to equine patient M.
4	162. On or about March 19, 2020, without performing an appropriate examination and
5	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
6	dispensed, or administered Baytril Injection to equine patient S.I.
7	163. On or about March 19, 2020, without performing an appropriate examination and
8	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
9	dispensed, or administered Adequan IM to equine patient H.P.
10	164. On or about March 19, 2020, without performing an appropriate examination and
11	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
12	dispensed, or administered Adequan IM to equine patient G.B.
13	165. On or about March 19, 2020, without performing an appropriate examination and
14	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
15	dispensed, or administered Adequan IM to equine patient H.G.
16	166. On or about March 19, 2020, without performing an appropriate examination and
17	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
18	dispensed, or administered the following medications to equine patient G.N.:
19	a. Adequan IM;
20	b. Gel-Cast;
21	c. Lasix AM.
22	167. Between July 10, 2020 and August 7, 2020, without performing an examination and
23	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
24	dispensed, or administered the following medications to equine patient W .:
25	a. Dantrium suspension;
26	b. Vitamins;
27	c. Ketofen;
28	d. EqStim;
	26
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	e. Estrone;
2	f. Fluid therapy;
3	g. Dorm/Torb;
4	h. Silvadene Cream; and
5	i. Thyro-L
6	168. Between July 14, 2020 and August 7, 2020, without performing an examination and
7	forming a diagnosis of any condition that required treatment, Respondent Baker prescribed,
8	dispensed, or administered the following medications to equine patient C.M.:
9	a. Acepromazine;
10	b. Naquasone;
11	c. Sedivet;
12	d. Shockwave therapy;
13	e. Dorm/Torb; and
14	f. Thyro-L.
15	SECOND CAUSE FOR DISCIPLINE
16	(Unprofessional Conduct – Dispensing Dangerous Drugs Without Medical Necessity)
16 17	<b>(Unprofessional Conduct – Dispensing Dangerous Drugs Without Medical Necessity)</b> 169. Respondent Baker is subject to disciplinary action for unprofessional conduct under
17	
17	169. Respondent Baker is subject to disciplinary action for unprofessional conduct under
17 18	169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision $(g)(3)$ , for violating section 4170, subdivision $(a)(2)$ in that Respondent
17 18 19	169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2) in that Respondent Baker dispensed unnecessary dangerous drugs to equine patients as follows:
17 18 19 20	<ul> <li>169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2) in that Respondent Baker dispensed unnecessary dangerous drugs to equine patients as follows:</li> <li>170. Between January 4, 2019 and July 16, 2020, without performing an appropriate</li> </ul>
17 18 19 20 21	<ul> <li>169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2) in that Respondent Baker dispensed unnecessary dangerous drugs to equine patients as follows:</li> <li>170. Between January 4, 2019 and July 16, 2020, without performing an appropriate examination and forming a diagnosis of any condition that required treatment, Respondent Baker</li> </ul>
<ol> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> </ol>	<ul> <li>169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2) in that Respondent Baker dispensed unnecessary dangerous drugs to equine patients as follows:</li> <li>170. Between January 4, 2019 and July 16, 2020, without performing an appropriate examination and forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the following unnecessary dangerous drugs to equine patient P.L.:</li> </ul>
<ol> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> </ol>	<ul> <li>169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2) in that Respondent Baker dispensed unnecessary dangerous drugs to equine patients as follows:</li> <li>170. Between January 4, 2019 and July 16, 2020, without performing an appropriate examination and forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the following unnecessary dangerous drugs to equine patient P.L.: <ul> <li>a. Lasix AM;</li> </ul> </li> </ul>
<ol> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> </ol>	<ul> <li>169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2) in that Respondent Baker dispensed unnecessary dangerous drugs to equine patients as follows:</li> <li>170. Between January 4, 2019 and July 16, 2020, without performing an appropriate examination and forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the following unnecessary dangerous drugs to equine patient P.L.: <ul> <li>a. Lasix AM;</li> <li>b. Bute-Cort;</li> </ul> </li> </ul>
<ol> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> </ol>	<ul> <li>169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2) in that Respondent Baker dispensed unnecessary dangerous drugs to equine patients as follows:</li> <li>170. Between January 4, 2019 and July 16, 2020, without performing an appropriate examination and forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the following unnecessary dangerous drugs to equine patient P.L.: <ul> <li>a. Lasix AM;</li> <li>b. Bute-Cort;</li> <li>c. Dorm/Torb;</li> </ul> </li> </ul>
<ol> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> </ol>	<ul> <li>169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2) in that Respondent Baker dispensed unnecessary dangerous drugs to equine patients as follows:</li> <li>170. Between January 4, 2019 and July 16, 2020, without performing an appropriate examination and forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the following unnecessary dangerous drugs to equine patient P.L.: <ul> <li>a. Lasix AM;</li> <li>b. Bute-Cort;</li> <li>c. Dorm/Torb;</li> <li>d. Silvadene Cream;</li> </ul> </li> </ul>
<ol> <li>17</li> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> </ol>	<ul> <li>169. Respondent Baker is subject to disciplinary action for unprofessional conduct under section 4883, subdivision (g)(3), for violating section 4170, subdivision (a)(2) in that Respondent Baker dispensed unnecessary dangerous drugs to equine patients as follows:</li> <li>170. Between January 4, 2019 and July 16, 2020, without performing an appropriate examination and forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the following unnecessary dangerous drugs to equine patient P.L.: <ul> <li>a. Lasix AM;</li> <li>b. Bute-Cort;</li> <li>c. Dorm/Torb;</li> <li>d. Silvadene Cream;</li> <li>e. Surpass Cream;</li> </ul> </li> </ul>

1	g. Equimax;
2	h. Naquasone;
3	i. Bute;
4	j. Cryotherapy;
5	k. Otomax;
6	1. Panalog;
7	m. Thyro-L;
8	n. Baytril;
9	o. Legend;
10	p. Methocarbamol;
11	q. Vitamin/Electrolytes;
12	r. Vitamins;
13	s. Gelocast;
14	t. Thiamine;
15	u. Calcium;
16	v. Penicillin;
17	w. Gentamycin; and
18	x. Acepromazine.
19	171. On or about March 4, 2020, without performing an appropriate examination and
20	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
21	Adequan IM, an unnecessary dangerous drug to equine patient F.
22	172. On or about March 4, 2020, without performing an appropriate examination and
23	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the
24	following unnecessary dangerous drugs to equine patient G.B.:
25	a. Adequan IM;
26	b. Sedivet.
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	28 (VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	173. On or about March 4, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the
3	following unnecessary dangerous drugs to equine patient E.:
4	a. Adequan IM;
5	b. Estrone Injection;
6	c. Ketofen;
7	d. Legend IV.
8	174. On or about March 7, 2020, without performing an appropriate examination and
9	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed Lasix
10	AM, an unnecessary dangerous drug to equine patient D.
11	175. On or about March 7, 2020, without performing an appropriate examination and
12	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed Bute-
13	Cort, an unnecessary dangerous drug to equine patient W.V.
14	176. On or about March 7, 2020, without performing an appropriate examination and
15	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
16	Sedivet, an unnecessary dangerou drugs to equine patient G.W.
17	177. On or about March 7, 2020, without performing an appropriate examination and
18	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
19	Sedivet, an unnecessary dangerous drug to equine patient S.D.
20	178. On or about March 7, 2020, without performing an appropriate examination and
21	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
22	Dorm/Torb, an unnecessary dangerous drug to equine patient S.W.
23	179. On or about March 7, 2020, without performing an appropriate examination and
24	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
25	Dorm/Torb, an unnecessary dangerous drug to equine patient D.Z.
26	180. On or about March 12, 2020, without performing an appropriate examination and
27	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
28	Acepromazine Tabs, an unnecessary dangerous drug to equine patient C.C.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	181. On or about March 12, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
3	Acepromazine Tabs, an unnecessary dangerous drug to equine patient D.S.
4	182. On or about March 12, 2020, without performing an appropriate examination and
5	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
6	Acepromazine Tabs, an unnecessary dangerous drug to equine patient D.K.
7	183. On or about March 12, 2020, without performing an appropriate examination and
8	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
9	Acepromazine Tabs, an unnecessary dangerous drug to equine patient B.F.
10	184. On or about March 13, 2020, without performing an appropriate examination and
11	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
12	Dorm/Torb, an unnecessary dangerous drug to equine patient R.D.
13	185. On or about March 12, 2020, without performing an appropriate examination and
14	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the
15	following unnecessary dangerous drugs to equine patient A .:
16	a. Adequan IM;
17	b. Sedivet.
18	186. On or about March 12, 2020, without performing an appropriate examination and
19	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
20	Adequan IM, an unnecessary dangerous drug to equine patient E.R.
21	187. On or about March 12, 2020, without performing an appropriate examination and
22	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
23	Adequan IM, an unnecessary dangerous drug to equine patient H.V.
24	188. On or about March 12, 2020, without performing an appropriate examination and
25	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
26	Adequan IM, an unnecessary dangerous drug to equine patient A.M.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	189. On or about March 16, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the
3	following unnecessary dangerous drugs to equine patient G.W.:
4	a. Adequan IM;
5	b. Sedivet.
6	190. On or about March 16, 2020, without performing an appropriate examination and
7	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed a
8	Vitamin Booster, an unnecessary dangerous drug to equine patient E.R.
9	191. On or about March 16, 2020, without performing an appropriate examination and
10	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed a
11	Vitamin Booster, an unnecessary dangerous drug to equine patient A.C.
12	192. On or about March 16, 2020, without performing an appropriate examination and
13	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed a
14	Vitamin Booster, an unnecessary dangerous drug to equine patient H.V.
15	193. On or about March 16, 2020, without performing an appropriate examination and
16	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed a
17	Vitamin Booster, an unnecessary dangerous drug to equine patient S.S.
18	194. On or about March 16, 2020, without performing an appropriate examination and
19	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the
20	following unnecessary dangerous drugs to equine patient M.M.:
21	a. Sedivet;
22	b. Vitamin Booster.
23	195. On or about March 13, 2020, without performing an appropriate examination and
24	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed Bute-
25	Cort, an unnecessary dangerous drug to equine patient L.S.
26	196. On or about March 14, 2020, without performing an appropriate examination and
27	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
28	Adequan IM, an unnecessary dangerous drug to equine patient T.O.
	31
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	197. On or about March 14, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
3	Adequan IM, an unnecessary dangerous drug to equine patient C.G.
4	198. On or about March 14, 2020, without performing an appropriate examination and
5	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
6	Adequan IM, an unnecessary dangerous drug to equine patient F.H.
7	199. On or about March 14, 2020, without performing an appropriate examination and
8	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
9	Adequan IM, an unnecessary dangerous drug to equine patient D.F.
10	200. On or about March 19, 2020, without performing an appropriate examination and
11	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
12	Acepromazine Tabs, an unnecessary dangerous drug to equine patient E.M.
13	201. On or about March 16, 2020, without performing an appropriate examination and
14	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
15	Sedivet, an unnecessary dangerous drug to equine patient M.
16	202. On or about March 19, 2020, without performing an appropriate examination and
17	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed a
18	Baytril Injection, an unnecessary dangerous drug to equine patient S.I.
19	203. On or about March 19, 2020, without performing an appropriate examination and
20	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
21	Adequan IM, an unnecessary dangerous drug to equine patient H.P.
22	204. On or about March 19, 2020, without performing an appropriate examination and
23	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
24	Adequan IM, an unnecessary dangerous drug to equine patient G.B.
25	205. On or about March 19, 2020, without performing an appropriate examination and
26	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed
27	Adequan IM, an unnecessary dangerous drug to equine patient H.G.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATIO

1	206. On or about March 19, 2020, without performing an appropriate examination and
2	forming a diagnosis of any condition that required treatment, Respondent Baker dispensed the
3	following unnecessary dangerous drugs to equine patient G.N.:
4	a. Adequan IM;
5	b. Lasix AM.
6	207. Between July 10, 2020 and August 7, 2020, without performing an appropriate
7	examination and forming a diagnosis of any condition that required treatment, Respondent Baker
8	dispensed the following unnecessary dangerous drugs to equine patient W.:
9	a. Dantrium suspension;
10	b. Vitamins;
11	c. Ketofen;
12	d. EqStim;
13	e. Estrone;
14	f. Fluid therapy;
15	g. Dorm/Torb;
16	h. Silvadene Cream; and
17	i. Thyro-L.
18	208. Between July 14, 2020 and August 7, 2020, without performing an appropriate
19	examination and forming a diagnosis of any condition that required treatment, Respondent Baker
20	dispensed the following unnecessary dangerous drugs to equine patient C.M.:
21	a. Acepromazine;
22	b. Naquasone;
23	c. Sedivet;
24	d. Dorm/Torb; and
25	e. Thyro-L.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	THIRD CAUSE FOR DISCIPLINE
2	(Unprofessional Conduct – Prescribing Controlled Substances Without Medical Necessity)
3	209. Respondent Baker is subject to disciplinary action for unprofessional conduct under
4	section 4883, subdivision (g)(3), for violations of Health and Safety Code section 11153,
5	subdivision (a), for prescribing controlled substances without a legitimate medical purpose, as
6	follows:
7	210. On or about March 7, 2020, without performing an examination and forming a
8	diagnosis of any condition that required treatment, Respondent Baker prescribed Detomidine
9	Hydrochloride and Butorphanol Tartrate (Dorm/Torb) to equine patient S.W. without a legitimate
10	medical purpose. Butorphanol Tartrate is a Schedule IV controlled substance.
11	211. On or about March 7, 2020, without performing an examination and forming a
12	diagnosis of any condition that required treatment, Respondent Baker prescribed Detomidine
13	Hydrochloride and Butorphanol Tartrate (Dorm/Torb) to equine patient D.Z. without a legitimate
14	medical purpose. Butorphanol Tartrate is a Schedule IV controlled substance.
15	212. On or about March 13, 2020, without performing an examination and forming a
16	diagnosis of any condition that required treatment, Respondent Baker prescribed Detomidine
17	Hydrochloride and Butorphanol Tartrate (Dorm/Torb) to equine patient R.D. without a legitimate
18	medical purpose. Butorphanol Tartrate is a Schedule IV controlled substance.
19	FOURTH CAUSE FOR DISCIPLINE
20	(Unprofessional Conduct – Failure to Establish Veterinarian-Client-Patient Relationship)
21	213. Respondent Baker is subject to disciplinary action for unprofessional conduct under
22	section 4883, subdivisions (g) and (o), and CCR, title 16, section 2032.1, subsection (a).
23	Respondent Baker did not establish a veterinarian-client-patient relationship (VCPR) before
24	administering, prescribing, dispensing, or furnishing a drug, medicine, application, or treatment,
25	as follows:
26	214. As set forth in paragraphs 125 through 212 above, incorporated here by reference,
27	Respondent Baker prescribed, dispensed, or administered drugs to equine patients, without
28	establishing a veterinarian-client-patient relationship with the patients. Respondent Baker failed
	34
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

to: (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.

215. On or about March 4, 2020, Respondent Baker also applied a Gel-Cast to equine
patient G.B. Before providing treatment, Respondent Baker did not: (1) perform and/or
document an examination of G.B.; (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 Baker failed to establish the required VCPR before treating
G.B.

216. On or about March 7, 2020, Respondent Baker also performed a Caslicks procedure
on equine patient S.W. Before providing treatment, Respondent Baker did not: (1) perform
and/or document an examination of S.W.; (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 Baker failed to establish the required VCPR before
treating S.W.

217. On or about March 13, 2020, Respondent Baker also performed Shockwave Therapy
on equine patient R.D. Before providing treatment, Respondent Baker did not: (1) perform and/or
document an examination of R.D.; (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 Baker failed to establish the required VCPR before treating
R.D.

218. On or about March 14, 2020, Respondent Baker also applied two Gel-Casts to equine
patient C. Before providing treatment, Respondent Baker did not: (1) perform and/or document
an examination of C.; (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 Baker failed to establish the required VCPR before treating C.
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1	FIFTH CAUSE FOR DISCIPLINE
2	(Negligence and Recordkeeping – General Anesthesia)
3	219. Respondent Baker is subject to disciplinary action for negligence and record keeping
4	under section 4883, subdivisions (i) and (o), for violations of CCR, title 16, section 2032.4,
5	subsection (b), for failing to comply with requirements when administering general anesthesia.
6	220. Specifically, on or about the following dates of treatment for the following equine
7	patients, Respondent Baker failed to document a physical examination within 12 hours of a
8	general anesthetic as required under CCR, title 16, section 2032.4, subsection (b)(1), and failed to
9	document the route of administration of anesthetics as required under CCR, title 16, section
10	2032.4, subsection (b)(6):
11	a. January 28, 2019, February 2, 2019, March 25, 2019, March 27, 2019, May 16,
12	2019, October 2, 2019, October 4, 2019, November 7, 2019, January 15, 2020,
13	July 16, 2020, equine patient P.L.;
14	b. March 4, 2020, equine patient G.B.;
15	c. March 7, 2020, equine patient G.W.;
16	d. March 7, 2020, equine patient S.D.;
17	e. March 7, 2020, equine patient S.W.;
18	f. March 7, 2020, equine patient D.Z.;
19	g. March 13, 2020, equine patient R.D.;
20	h. March 12, 2020, equine patient A.;
21	i. March 16, 2020, equine patient G.W.;
22	j. March 16, 2020, equine patient M.M.;
23	k. March 16, 2020, equine patient M;
24	1. July 30, 2020, July 31, 2020, August 7, 2020, equine patient C.M; and
25	m. August 7, 2020, equine patient W.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	SIXTH CAUSE FOR DISCIPLINE
2	(Violation of Practice Act and Board Regulations - Recordkeeping)
3	221. Respondent Baker is subject to disciplinary action for violating the Veterinary
4	Medicine Practice Act (Practice Act) and regulations adopted by the Board, under section 4883,
5	subdivisions (c) and (o), for failing to keep written records containing information required under
6	section 4855 and CCR, title 16, section 2032.3, for equine patients receiving veterinary services,
7	as follows:
8	222. The Patient History Reports for equine patient P.L., dated between January 4, 2019
9	and July 16, 2020, failed to include the follow information:
10	a. A history or pertinent information as it pertains to the equine patient's medical status
11	as required under CCR, title 16, section 2032.3, subsection (a)(6);
12	b. Data, including that obtained by instrumentation, from the physical examination of
13	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
14	c. Treatment and intended treatment plan, including medication dosages and route of
15	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
16	d. A diagnosis or assessment prior to performing a treatment or procedure, as required
17	under CCR, title 16, section 2032.3, subsection (a)(10);
18	e. A prognosis of the equine patient's condition, as required under CCR, title 16,
19	section 2032.3, subsection (a)(11).
20	223. The Patient History Report for equine patient F., dated March 4, 2020, failed to
21	include the following information:
22	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
23	16, section 2032.3, subsection (a)(4);
24	b. A history or pertinent information as it pertains to the equine patient's medical
25	status as required under CCR, title 16, section 2032.3, subsection (a)(6);
26	c. Data, including that obtained by instrumentation, from the physical examination of
27	the equine patient as required under CCR, title 16, section 2032.3, subsection
28	(a)(7);
	37
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	d. Treatment and intended treatment plan, including medication dosages and route of
2	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
3	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
4	under CCR, title 16, section 2032.3, subsection (a)(10);
5	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
6	section 2032.3, subsection (a)(11).
7	224. The Patient History Report for equine patient G.B., dated March 4, 2020, failed to
8	include the following information:
9	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
10	16, section 2032.3, subsection (a)(4);
11	b. A history or pertinent information as it pertains to the equine patient's medical status
12	as required under CCR, title 16, section 2032.3, subsection (a)(6);
13	c. Data, including that obtained by instrumentation, from the physical examination of
14	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
15	d. Treatment and intended treatment plan, including medication dosages and route of
16	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
17	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
18	under CCR, title 16, section 2032.3, subsection (a)(10);
19	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
20	section 2032.3, subsection (a)(11).
21	225. The Patient History Report for equine patient E., dated March 4, 2020, failed to
22	include the following information:
23	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
24	16, section 2032.3, subsection (a)(4);
25	b. A history or pertinent information as it pertains to the equine patient's medical status
26	as required under CCR, title 16, section 2032.3, subsection (a)(6);
27	c. Data, including that obtained by instrumentation, from the physical examination of
28	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
	38
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	d. Treatment and intended treatment plan, including medication dosages and route of
2	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
3	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
4	under CCR, title 16, section 2032.3, subsection (a)(10);
5	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
6	section 2032.3, subsection (a)(11).
7	226. The Patient History Report for equine patient D., dated March 7, 2020, failed to
8	include the following information:
9	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
10	16, section 2032.3, subsection (a)(4);
11	b. A history or pertinent information as it pertains to the equine patient's medical status
12	as required under CCR, title 16, section 2032.3, subsection (a)(6);
13	c. Data, including that obtained by instrumentation, from the physical examination of
14	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
15	d. Treatment and intended treatment plan, including medication dosages and route of
16	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
17	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
18	under CCR, title 16, section 2032.3, subsection (a)(10);
19	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
20	section 2032.3, subsection (a)(11).
21	227. The Patient History Report for equine patient W.V., dated March 7, 2020, failed to
22	include the following information:
23	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
24	title 16, section 2032.3, subsection (a)(4);
25	b. A history or pertinent information as it pertains to the equine patient's medical status
26	as required under CCR, title 16, section 2032.3, subsection (a)(6);
27	c. Data, including that obtained by instrumentation, from the physical examination of
28	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
	39
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	d. Treatment and intended treatment plan, including medication dosages and route of
2	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
3	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
4	under CCR, title 16, section 2032.3, subsection (a)(10);
5	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
6	section 2032.3, subsection (a)(11).
7	228. The Patient History Report for equine patient G.W., dated March 7, 2020, failed to
8	include the following information:
9	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
10	title 16, section 2032.3, subsection (a)(4);
11	b. A history or pertinent information as it pertains to the equine patient's medical status
12	as required under CCR, title 16, section 2032.3, subsection (a)(6);
13	c. Data, including that obtained by instrumentation, from the physical examination of
14	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
15	d. Treatment and intended treatment plan, including medication dosages and route of
16	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
17	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
18	under CCR, title 16, section 2032.3, subsection (a)(10);
19	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
20	section 2032.3, subsection (a)(11).
21	229. The Patient History Report for equine patient S.D., dated March 7, 2020, failed to
22	include the following information:
23	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
24	title 16, section 2032.3, subsection (a)(4);
25	b. A history or pertinent information as it pertains to the equine patient's medical status
26	as required under CCR, title 16, section 2032.3, subsection (a)(6);
27	c. Data, including that obtained by instrumentation, from the physical examination of
28	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	d. Treatment and intended treatment plan, including medication dosages and route of
2	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
3	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
4	under CCR, title 16, section 2032.3, subsection (a)(10);
5	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
6	section 2032.3, subsection (a)(11).
7	230. The Patient History Report for equine patient S.W., dated March 7, 2020, failed to
8	include the following information:
9	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
10	16, section 2032.3, subsection (a)(4);
11	b. A history or pertinent information as it pertains to the equine patient's medical status
12	as required under CCR, title 16, section 2032.3, subsection (a)(6);
13	c. Data, including that obtained by instrumentation, from the physical examination of
14	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
15	d. Treatment and intended treatment plan, including medication dosages and route of
16	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
17	e. Records for surgical procedures, including a description of the procedure and the
18	route of administration and strength of sedative/anesthetic agents used, as required
19	under CCR, title 16, section 2032.3, subsection (a)(9);
20	f. A diagnosis or assessment prior to performing a treatment or procedure, as required
21	under CCR, title 16, section 2032.3, subsection (a)(10);
22	g. A prognosis of the equine patient's condition, as required under CCR, title 16,
23	section 2032.3, subsection (a)(11).
24	231. The Patient History Report for equine patient D.Z., dated March 7, 2020, failed to
25	include the following information:
26	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
27	title 16, section 2032.3, subsection (a)(4);
28	
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	b. A history or pertinent information as it pertains to the equine patient's medical status
2	as required under CCR, title 16, section 2032.3, subsection (a)(6);
3	c. Data, including that obtained by instrumentation, from the physical examination of
4	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
5	d. Treatment and intended treatment plan, including medication dosages and route of
6	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
7	e. Records for surgical procedures, including a description of the procedure and the
8	route of administration and strength of sedative/anesthetic agents used, as required
9	under CCR, title 16, section 2032.3, subsection (a)(9);
10	f. A diagnosis or assessment prior to performing a treatment or procedure, as required
11	under CCR, title 16, section 2032.3, subsection (a)(10);
12	g. A prognosis of the equine patient's condition, as required under CCR, title 16,
13	section 2032.3, subsection (a)(11).
14	232. The Patient History Report for equine patient C.C., dated March 12, 2020, failed to
15	include the following information:
16	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
17	16, section 2032.3, subsection (a)(4);
18	b. A history or pertinent information as it pertains to the equine patient's medical status
19	as required under CCR, title 16, section 2032.3, subsection (a)(6);
20	c. Data, including that obtained by instrumentation, from the physical examination of
21	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
22	d. Treatment and intended treatment plan, including medication dosages and route of
23	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
24	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
25	under CCR, title 16, section 2032.3, subsection (a)(10);
26	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
27	section 2032.3, subsection (a)(11);
28	
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	g. Strength, dosage, route of administration, and frequency of use for drugs dispensed,
2	as required under CCR, title 16, section 2032.3, subsection (a)(12).
3	233. The Patient History Report for equine patient D.S., dated March 12, 2020, failed to
4	include the following information:
5	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
6	16, section 2032.3, subsection (a)(4);
7	b. A history or pertinent information as it pertains to the equine patient's medical status
8	as required under CCR, title 16, section 2032.3, subsection (a)(6);
9	c. Data, including that obtained by instrumentation, from the physical examination of
10	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
11	d. Treatment and intended treatment plan, including medication dosages and route of
12	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
13	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
14	under CCR, title 16, section 2032.3, subsection (a)(10);
15	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
16	section 2032.3, subsection (a)(11);
17	g. Strength, dosage, route of administration, and frequency of use for drugs dispensed,
18	as required under CCR, title 16, section 2032.3, subsection (a)(12).
19	234. The Patient History Report for equine patient D.K., dated March 12, 2020, failed to
20	include the following information:
21	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
22	16, section 2032.3, subsection (a)(4);
23	b. A history or pertinent information as it pertains to the equine patient's medical status
24	as required under CCR, title 16, section 2032.3, subsection (a)(6);
25	c. Data, including that obtained by instrumentation, from the physical examination of
26	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
27	d. Treatment and intended treatment plan, including medication dosages and route of
28	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
2	under CCR, title 16, section 2032.3, subsection (a)(10);
3	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
4	section 2032.3, subsection (a)(11);
5	g. Strength, dosage, route of administration, and frequency of use for drugs dispensed,
6	as required under CCR, title 16, section 2032.3, subsection (a)(12).
7	235. The Patient History Report for equine patient B.F., dated March 12, 2020, failed to
8	include the following information:
9	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
10	title 16, section 2032.3, subsection (a)(4);
11	b. A history or pertinent information as it pertains to the equine patient's medical status
12	as required under CCR, title 16, section 2032.3, subsection (a)(6);
13	c. Data, including that obtained by instrumentation, from the physical examination of
14	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
15	d. Treatment and intended treatment plan, including medication dosages and route of
16	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
17	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
18	under CCR, title 16, section 2032.3, subsection (a)(10);
19	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
20	section 2032.3, subsection (a)(11);
21	g. Strength, dosage, route of administration, and frequency of use for drugs dispensed,
22	as required under CCR, title 16, section 2032.3, subsection (a)(12).
23	236. The Patient History Report for equine patient R.D., dated March 13, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
26	title 16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	237. The Patient History Report for equine patient A., dated March 12, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
12	title 16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	238. The Patient History Report for equine patient E.R., dated March 12, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
26	16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	239. The Patient History Report for equine patient H.V., dated March 12, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
12	16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	240. The Patient History Report for equine patient A.M., dated March 12, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
26	16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	241. The Patient History Report for equine patient C., dated March 14, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
12	title 16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	242. The Patient History Report for equine patient M.G., dated March 14, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
26	title 16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
	47
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	243. The Patient History Report for equine patient G.W., dated March 16, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
12	title 16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	244. The Patient History Report for equine patient E.R., dated March 16, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
26	title 16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
	48
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	245. The Patient History Report for equine patient A.C., dated March 16, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
12	title 16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	246. The Patient History Report for equine patient H.V., dated March 16, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
26	title 16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
	49
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	247. The Patient History Report for equine patient S.S., dated March 16, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
12	title 16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	248. The Patient History Report for equine patient M.M., dated March 16, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
26	title 16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
	50
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	249. The Patient History Report for equine patient S.H., dated March 13, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
12	16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	250. The Patient History Report for equine patient K., dated March 13, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
26	16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
	51
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	251. The Patient History Report for equine patient L.S., dated March 13, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
12	16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	252. The Patient History Report for equine patient T.O., dated March 14, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
26	16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
	52
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	253. The Patient History Report for equine patient C.G., dated March 14, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
12	16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	254. The Patient History Report for equine patient F.H., dated March 14, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
26	16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
	53
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11).
9	255. The Patient History Report for equine patient D.F., dated March 14, 2020, failed to
10	include the following information:
11	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
12	16, section 2032.3, subsection (a)(4);
13	b. A history or pertinent information as it pertains to the equine patient's medical status
14	as required under CCR, title 16, section 2032.3, subsection (a)(6);
15	c. Data, including that obtained by instrumentation, from the physical examination of
16	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
17	d. Treatment and intended treatment plan, including medication dosages and route of
18	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
19	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
20	under CCR, title 16, section 2032.3, subsection (a)(10);
21	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
22	section 2032.3, subsection (a)(11).
23	256. The Patient History Report for equine patient E.M., dated March 19, 2020, failed to
24	include the following information:
25	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
26	16, section 2032.3, subsection (a)(4);
27	b. A history or pertinent information as it pertains to the equine patient's medical status
28	as required under CCR, title 16, section 2032.3, subsection (a)(6);
	54
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Data, including that obtained by instrumentation, from the physical examination of
2	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
3	d. Treatment and intended treatment plan, including medication dosages and route of
4	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
5	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
6	under CCR, title 16, section 2032.3, subsection (a)(10);
7	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
8	section 2032.3, subsection (a)(11);
9	g. Strength, dosage, route of administration, and frequency of use for drugs dispensed,
10	as required under CCR, title 16, section 2032.3, subsection (a)(12).
11	257. The Patient History Report for equine patient S.I., dated March 19, 2020, failed to
12	include the following information:
13	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
14	16, section 2032.3, subsection (a)(4);
15	b. A history or pertinent information as it pertains to the equine patient's medical status
16	as required under CCR, title 16, section 2032.3, subsection (a)(6);
17	c. Data, including that obtained by instrumentation, from the physical examination of
18	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
19	d. Treatment and intended treatment plan, including medication dosages and route of
20	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
21	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
22	under CCR, title 16, section 2032.3, subsection (a)(10);
23	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
24	section 2032.3, subsection (a)(11).
25	258. The Patient History Report for equine patient H.P., dated March 19, 2020, failed to
26	include the following information:
27	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
28	16, section 2032.3, subsection (a)(4);
	55
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	b. A history or pertinent information as it pertains to the equine patient's medical status
2	as required under CCR, title 16, section 2032.3, subsection (a)(6);
3	c. Data, including that obtained by instrumentation, from the physical examination of
4	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
5	d. Treatment and intended treatment plan, including medication dosages and route of
6	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
7	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
8	under CCR, title 16, section 2032.3, subsection (a)(10);
9	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
10	section 2032.3, subsection (a)(11).
11	259. The Patient History Report for equine patient G.B., dated March 19, 2020, failed to
12	include the following information:
13	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
14	16, section 2032.3, subsection (a)(4);
15	b. A history or pertinent information as it pertains to the equine patient's medical status
16	as required under CCR, title 16, section 2032.3, subsection (a)(6);
17	c. Data, including that obtained by instrumentation, from the physical examination of
18	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
19	d. Treatment and intended treatment plan, including medication dosages and route of
20	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
21	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
22	under CCR, title 16, section 2032.3, subsection (a)(10);
23	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
24	section 2032.3, subsection (a)(11).
25	260. The Patient History Report for equine patient H.G., dated March 19, 2020, failed to
26	include the following information:
27	a. Age, sex, breed, species, and color of the equine patient as required under CCR,
28	title 16, section 2032.3, subsection (a)(4);
	56
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	b. A history or pertinent information as it pertains to the equine patient's medical status
2	as required under CCR, title 16, section 2032.3, subsection (a)(6);
3	c. Data, including that obtained by instrumentation, from the physical examination of
4	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
5	d. Treatment and intended treatment plan, including medication dosages and route of
6	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
7	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
8	under CCR, title 16, section 2032.3, subsection (a)(10);
9	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
10	section 2032.3, subsection (a)(11).
11	261. The Patient History Report for equine patient G.N., dated March 19, 2020, failed to
2	include the following information:
13	a. Age, sex, breed, species, and color of the equine patient as required under CCR, title
4	16, section 2032.3, subsection (a)(4);
15	b. A history or pertinent information as it pertains to the equine patient's medical status
6	as required under CCR, title 16, section 2032.3, subsection (a)(6);
17	c. Data, including that obtained by instrumentation, from the physical examination of
18	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
19	d. Treatment and intended treatment plan, including medication dosages and route of
20	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
21	e. A diagnosis or assessment prior to performing a treatment or procedure, as required
22	under CCR, title 16, section 2032.3, subsection (a)(10);
23	f. A prognosis of the equine patient's condition, as required under CCR, title 16,
24	section 2032.3, subsection (a)(11).
25	262. The Patient History Reports for equine patient W., dated between July 10, 2020 and
26	August 7, 2020, failed to include the following information:
27	a. Data, including that obtained by instrumentation, from the physical examination of
28	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
	57
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	b. Treatment and intended treatment plan, including medication dosages and route of
2	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
3	c. A diagnosis or assessment prior to performing a treatment or procedure, as required
4	under CCR, title 16, section 2032.3, subsection (a)(10);
5	d. A prognosis of the equine patient's condition, as required under CCR, title 16,
6	section 2032.3, subsection (a)(11); and
7	e. Medications dispensed including strength, dosage, route of administration, and
8	frequency of use, as required under CCR, title 16, section 2032.3, subsection (a)(12).
9	263. The Patient History Reports for equine patient C.M., dated between July 14, 2020 and
10	August 7, 2020, failed to include the following information:
11	a. A history or pertinent information as it pertains to the equine patient's medical status
12	as required under CCR, title 16, section 2032.3, subsection (a)(6);
13	b. Data, including that obtained by instrumentation, from the physical examination of
14	the equine patient as required under CCR, title 16, section 2032.3, subsection (a)(7);
15	c. Treatment and intended treatment plan, including medication dosages and route of
16	administration, as required under CCR, title 16, section 2032.3, subsection (a)(8);
17	d. A diagnosis or assessment prior to performing a treatment or procedure, as required
18	under CCR, title 16, section 2032.3, subsection (a)(10);
19	e. A prognosis of the equine patient's condition, as required under CCR, title 16,
20	section 2032.3, subsection (a)(11); and
21	f. Medications dispensed including strength, dosage, route of administration, and
22	frequency of use, as required under CCR, title 16, section 2032.3, subsection (a)(12).
23	SEVENTH CAUSE FOR DISCIPLINE
24	(Unprofessional Conduct – Misbranded Drugs; Compounded Imitation Drugs)
25	264. Respondent Baker is subject to disciplinary action for unprofessional conduct under
26	section 4883, subdivision (g)(3), for violations of section 4169, subdivision (a)(3), and Health and
27	Safety Code sections 111395, subdivision (a), and 111440, for the manufacture, sale, delivery,
28	
	58
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	holding, or offering for sale, drugs that were imitations of commercially available drugs, and
2	therefore misbranded, as follows:
3	a. On or about August 6, 2019, Respondent Baker delivered Thyro-L to equine
4	patient P.L.;
5	b. On or about March 4, 2020, Respondent Baker delivered an Estrone Injection
6	to equine patient E.;
7	c. On or about March 7, 2020, Respondent Baker delivered Bute-Cort to equine
8	patient W.V.;
9	d. On or about March 16, 2020, Respondent Baker delivered a Vitamin Booster
10	to equine patient E.R;
11	e. On or about March 16, 2020, Respondent Baker delivered a Vitamin Booster
12	to equine patient A.C.;
13	f. On or about March 16, 2020, Respondent Baker delivered a Vitamin Booster
14	to equine patient H.V.;
15	g. On or about March 16, 2020, Respondent Baker delivered a Vitamin Booster
16	to equine patient S.S.;
17	h. On or about March 16, 2020, Respondent Baker delivered a Vitamin Booster
18	to equine patient M.M.;
19	i. On or about March 13, 2020, Respondent Baker delivered Bute-Cort to equine
20	patient L.S.;
21	j. On or about August 7, 2020, Respondent Baker delivered Thyro-L to equine
22	patient C.M.;
23	k. On or about August 7, 2020, Respondent delivered Thyro-L to equine patient
24	W.
25	////
26	////
27	////
28	////
	59

1	EIGHTH CAUSE FOR DISCIPLINE
2	(Violation of Practice Act and Board Regulations and Unprofessional Conduct –
3	Minimum Standards for Drugs and Biologics)
4	265. Respondent Baker is subject to disciplinary action for unprofessional conduct under
5	section 4883, subdivisions (c), (g)(3), and (o), for failing to comply with minimum standards
6	under section 4854 and CCR, title 16, sections 2030, subsection (f)(6), and 2030.05, subsection
7	(b). Respondent Baker failed to ensure that all drugs and biologics at Respondent EMC's
8	premises were maintained, administered, dispensed, and prescribed with state and federal laws, as
9	follows:
10	266. Numerous misbranded drugs that were ordered, maintained, administered, and/or
11	dispensed were present at Respondent EMC's premises. Misbranded drugs included:
12	glycopyrrolate, and gentamycin ophthalmic from Buy Rite Drugs, a non-resident compounding
13	pharmacy lacking license to ship into California; Stop Two, an unlicensed injectable from
14	Immuvet; and EPM Drench, drug name toltrazuril, prescribed and compounded by a veterinarian
15	unlicensed in the state of California.
16	NINTH CAUSE FOR DISCIPLINE
17	(Violation of Practice Act and Board Regulations –
18	Minimum Standards for Medical Waste)
19	267. Respondent Baker is subject to disciplinary action for unprofessional conduct under
20	sections 4883, subdivisions (c) and (o), for failing to comply with minimum standards under
21	section 4854, and CCR, title 16, sections 2030, subsection (f)(3), and 2030.05, subsection (b).
22	Respondent Baker failed to ensure compliance at Respondent EMC's premises regarding the
23	disposal of waste material, as follows:
24	a. Controlled substances are maintained in a locked room with undefined security,
25	key, and personnel access;
26	b. Respondent failed to properly reverse distribute expired controlled drugs or
27	provide a detailed protocol for same;
28	
	60
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	c. Use of an "RX Destroyer" <sup>3</sup> to dispose of expired controlled drugs which is not a
2	proper means of disposal for expired controlled drugs.
3	TENTH CAUSE FOR DISCIPLINE
4	(Unprofessional Conduct – Misbranded Drugs; Labeling Requirements)
5	268. Respondent Baker is subject to disciplinary action for unprofessional conduct under
6	section 4883, subdivision (g)(3), for violations of section 4169, subdivision (a)(3), and Health and
7	Safety Code sections 111345, subdivision (a), 111440, and 111500, for the manufacture, sale,
8	delivery, holding, or offering for sale, drugs that were improperly labeled, and therefore misbranded,
9	as follows:
10	a. Gentamycin Ophthalmic and Glycopyrrolate, from Buy Rite Drugs, a
11	compounding pharmacy in Alabama, labeling lacked proper beyond use dates;
12	b. Stop Two by Immuvet is not FDA approved and bears a counterfeit National
13	Drug Code <sup>4</sup> as well as label claims to treat or mitigate a specific disease; and
14	c. EMP Drench by Vet Med, Inc. This drug was compounded on the order of a
15	veterinarian in Kentucky from a compounding pharmacy in South
16	Carolina. While this may have been legitimate on behalf of the Kentucky
17	veterinarian for his specific patient needs, for the drug to be prescribed in
18	Kentucky and end up in the working stock of a California veterinarian with the
19	Kentucky veterinarian's name on the label is a violation of labeling requirements
20	and thus is misbranded.
21	ELEVENTH CAUSE FOR DISCIPLINE
22	(Violation of Practice Act and Board Regulations and Unprofessional Conduct –
23	Schedule III and IV Drug Record)
24	269. Respondent Baker is subject to disciplinary action for unprofessional conduct under
25	section 4883, subdivisions (c), (g)(3), and (o), for failing to comply with sections 4854 and 4855,
26	
27	<sup>3</sup> RX Destroyer is a brand name pharmaceutical waste disposal system. <sup>4</sup> Once approved, drugs are identified and reported using a unique, three-segment number
28	called the National Drug Code (NDC) which serves as the FDA's identifier for drugs. Drugs that are not approved by the FDA are not issued a NDC.
	61
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	Health and Safety Code section 11190, subdivision (c)(1), and CCR, title 16, sections 2030,
2	subsection (f)(6), and 2030.05, subsection (b). Respondent Baker failed to ensure maintenance of
3	records of dispensed Schedule III and Schedule IV drugs, as follows:
4	a. Failure to keep proper dispensation/administration logs and biennial inventory for
5	Torbugesic and Midazolam, both of which are Schedule IV controlled substances;
6	and
7	b. Failure to keep proper dispensation/administration logs and biennial inventory for
8	Ketamine and Euthasol, both of which are Schedule III controlled substances.
9	TWELFTH CAUSE FOR DISCIPLINE
10	(Violation of Practice Act and Board Regulations and Unprofessional Conduct –
11	Minimum Standards for Drug Logs)
12	270. Respondent Baker is subject to disciplinary action for unprofessional conduct, under
13	section 4883, subdivisions (c), (g)(3), and (o), for failing to comply with sections 4854 and 4855,
14	Code of Federal Regulations, title 21, section 1304.22, subsection (c), and CCR, title 16, sections
15	2030, subsection (f)(6), and 2030.05, subsection (b). Respondent Baker failed to ensure compliance
16	with minimum standards for maintenance of drug logs, as follows: Respondent EMC's drug logs for
17	Euthasol, Ketamine, and Midazolam lack required terminal patient administration. Respondent
18	EMC's drug logs for Torbugesic contain no patient specific terminal administrations. Respondent
19	EMC's biennial inventories fail to account for any partial bottles, or expired controlled drugs
20	awaiting reverse distribution.
21	THIRTEENTH CAUSE FOR DISCIPLINE
22	(Unprofessional Conduct – Possession or Use of Prohibited Drugs)
23	271. Respondent Baker is subject to disciplinary action for unprofessional conduct under
24	section 4883, subdivision (g)(3), for violating CCR, title 4, section 1867, subsection (b). Respondent
25	Baker possessed a drug, substance, or medication that has not been approved by the FDA for use
26	in the United States, as follows:
27	a. On or about January 24, 2019, Respondent Baker used Bute-Cort in the
28	treatment of equine patient P.L.;
	62
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	b. On or about March 25, 2019 and April 20, 2019, Respondent Baker used
2	Naquasone Paste in the treatment of equine patient P.L.;
3	c. On or about August 6, 2019, Respondent Baker used Thyro-L in the treatment
4	of equine patient P.L.
5	d. On or about March 4, 2020, Respondent Baker used an Estrone Injection in
6	the treatment of equine patient E.;
7	e. On or about March 7, 2020, Respondent Baker used Bute-Cort in the
8	treatment of equine patient W.V.;
9	f. On or about March 7, 2020, Respondent Baker used a Vitamin Booster in the
10	treatment of equine patient A.C;
11	g. On or about March 7, 2020, Respondent Baker used a Vitamin Booster in the
12	treatment of equine patient F.M.;
13	h. On or about March 7, 2020, Respondent Baker used a Vitamin Booster in the
14	treatment of equine patient M.S.;
15	i. On or about March 7, 2020, Respondent Baker used a Vitamin Boosters in the
16	treatment of equine patient K.K.;
17	j. On or about March 7, 2020, Respondent Baker used Stop 20 <sup>5</sup> in the treatment
18	of equine patient S.U.;
19	k. On or about March 16, 2020, Respondent Baker used a Vitamin Booster in the
20	treatment of equine patient E.R;
21	1. On or about March 16, 2020, Respondent Baker used a Vitamin Booster in the
22	treatment of equine patient A.C.;
23	m. On or about March 16, 2020, Respondent Baker used a Vitamin Booster in the
24	treatment of equine patient H.V.;
25	n. On or about March 16, 2020, Respondent Baker used a Vitamin Booster in the
26	treatment of equine patient S.S.;
27	
28	<sup>5</sup> Stop 20 is the oral version of Stop Two, which is injected.
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1	o. On or about March 16, 2020, Respondent Baker used a Vitamin Booster in the
2	treatment of equine patient M.M.;
3	p. On or about March 13, 2020, Respondent Baker used Bute-Cort in the
4	treatment of equine patient L.S.;
5	q. On or about July 10, 2020, Respondent Baker used Dantrium suspension in
6	the treatment of equine patient W.;
7	r. On or about July 21, 2020, Respondent Baker used Naquasone Paste in the
8	treatment of equine patient C.M.;
9	s. On or about July 23, 2020, Respondent Baker used Estrone injection in the
10	treatment of equine patient W.;
11	t. On or about August 7, 2020, Respondent Baker used Thyro-L in the treatment
12	of equine patient W.;
13	u. On or about August 7, 2020, Respondent Baker used Thyro-L in the treatment
14	of equine patient C.M.
15	FOURTEENTH CAUSE FOR DISCIPLINE
16	(Violation of Practice Act – Failure to Provide Required Drug Consultations)
17	272. Respondent Baker is subject to disciplinary action for violating the Practice Act under
18	section 4883, subdivision (c), for failing to offer to provide and note in the medical record the
19	required drug consultation for prescribed, dispensed, or furnished dangerous drugs as required
20	under section 4829.5, subdivisions (a) and (d), as follows:
21	a. On or about January 24, 2019, Respondent Baker treated equine patient P.L. with
22	Bute Cort without offering to provide and note in the medical record the required
23	drug consultation;
24	b. On or about March 1, 2019, Respondent Baker treated equine patient P.L. with
25	Surpass Cream without offering to provide and note in the medical record the
26	required drug consultation;
27	
28	
	64
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	с.	On or about March 25, 2019 and April 20, 2019, Respondent Baker treated equine
2		patient P.L. with Naquasone paste without offering to provide and note in the
3		medical record the required drug consultation;
4	d.	On or about April 20, 2019, November 11, 2019 and November 18, 2019
5		Respondent Baker treated equine patient P.L. with Bute paste without offering to
6		provide and note in the medical record the required drug consultation;
7	e.	On or about July 18, 2019, Respondent Baker treated equine patient P.L. with
8		Otomax without offering to provide and note in the medical record the required
9		drug consultation;
10	f.	On or about July 18, 2019, Respondent Baker treated equine patient P.L. with
11		Panolog without offering to provide and note in the medical record the required
12		drug consultation;
13	g.	On or about July 18, 2019, Respondent Baker treated equine patient P.L. with
14		Silvadene Cream without offering to provide and note in the medical record the
15		required drug consultation;
16	h.	On or about August 6, 2019, Respondent Baker treated equine patient P.L. with
17		Thyro-L powder without offering to provide and note in the medical record the
18		required drug consultation;
19	i.	On or about December 18, 2019, Respondent Baker treated equine patient P.L.
20		with Acepromazine tablets without offering to provide and note in the medical
21		record the required drug consultation;
22	j.	On or about December 27, 2019, Respondent Baker treated equine patient P.L.
23		with Panolog ointment without offering to provide and note in the medical record
24		the required drug consultation;
25	k.	On or about March 12, 2020, Respondent Baker treated equine patient C.C. with
26		Acepromazine Tabs without offering to provide and note in the medical record the
27		required drug consultation;
28		
		65
		(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	1 l. On or about March 12, 2020, Respondent Baker treate	d equine patient D.S. with
2	2 Acepromazine Tabs without offering to provide and no	ote in the medical record the
3	3 required drug consultation;	
4	4 m. On or about March 12, 2020, Respondent Baker treate	d equine patient D.K. with
5	5 Acepromazine Tabs without offering to provide and no	ote in the medical record the
6	6 required drug consultation;	
7	7 n. On or about March 12, 2020, Respondent Baker treate	d equine patient B.F. with
8	8 Acepromazine Tabs without offering to provide and no	ote in the medical record the
9	9 required drug consultation;	
10	10 o. On or about March 7, 2020, Respondent Baker treated	equine patient W.V. with
11	11   Bute-Cort without offering to provide and note in the next sector.	medical record the required
12	12 drug consultation;	
13	p. On or about March 13, 2020, Respondent Baker treate	d equine patient L.S. with
14	14   Bute-Cort without offering to provide and note in the next sector.	medical record the required
15	15 drug consultation;	
16	q. On or about March 19, 2020, Respondent Baker treate	d equine patient E.M. with
17	17 Acepromazine Tabs without offering to provide and no	ote in the medical record the
18	18 required drug consultation;	
19	19 r. On or about July 10, 2020, Respondent Baker treated of	equine patient W. with
20	20 Dantrium suspension without offering to provide and a	note in the medical record
21	21 the required drug consultation;	
22	s. On or about July 14, 2020, Respondent Baker treated of	equine patient C.M. with
23	23 Acepromazine tablets without offering to provide and	note in the medical record
24	24 the required drug consultation;	
25	t. On or about July 21, 2020, Respondent Baker treated of	equine patient C.M. with
26	26 Naquasone paste without offering to provide and note	in the medical record the
27	27 required drug consultation;	
28	28	
	66	
	(VINCENT A. BAKER and EQUINE MEDI	CAL CENTER) ACCUSATION

1	u. On or about July 30, 2020, Respondent Baker treated equine patient C.M. with
2	Thyro-L powder without offering to provide and note in the medical record the
3	required drug consultation;
4	v. On or about August 7, 2020, Respondent Baker treated equine patient W. with
5	Silvadene Cream without offering to provide and note in the medical record the
6	required drug consultation; and
7	w. On or about August 7, 2020, Respondent Baker treated equine patient W. with
8	Thyro-L powder without offering to provide and note in the medical record the
9	required drug consultation.
10	FIFTEENTH CAUSE FOR DISCIPLINE
11	(Violation of Practice Act and Board Regulations; Recordkeeping – Licensee Manager)
12	273. Respondent Baker is subject to disciplinary action for violations of the Practice Act
13	and regulations adopted by the Board under section 4883, subdivisions (c) and (o), for failing to
14	ensure recordkeeping compliance with sections 4829.5, subdivision (d), 4854 and 4855, and
15	CCR, title 16, sections 2030.05, subsection (b), 2032.3, and 2032.4. Respondent Baker failed to
16	ensure the medical records maintained at Respondent EMC complied with minimum standards
17	for recordkeeping, as follows:
18	274. As the licensee manager for EMC, Respondent is responsible for ensuring the
19	operational components and practices of EMC meet the minimum standards of practice for
20	recordkeeping. As such, Respondent is responsible for the following recordkeeping violations by
21	the following veterinarians practicing at EMC:
22	275. Except where otherwise indicated, Dr. J. Wade Byrd failed to include the following
23	information in the following equine patient's Patient History Report: Failed to document the age,
24	sex, breed, species, and color of the animal (CCR 2032.3(a)(4)); Failed to document a patient
25	history (CCR 2032.3(a)(6)); Failed to document a physical examination (CCR 2032.3(a)(7));
26	Failed to establish a Veterinarian-Client-Patient relationship by virtue of an examination of the
27	animal (CCR 2032.1(b)(2)); Failed to document doses of medication administered (CCR
28	2032.3(a)(8)); Failed to document the route of administration of drugs administered (CCR
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	2032.3(a)(8)); Failed to document a treatment plan (CCR 2032.3(a)(8)); Failed to document a
2	diagnosis for the patient (CCR 2032.3(a)(10)); and Failed to state a prognosis for the patient
3	(CCR 2032.3(a)(11)):
4	a. On or about March 7, 2020, for equine patient H.M;
5	b. On or about March 7, 2020, for equine patient U.S. In addition to the above
6	failures, Dr. Wade failed to document surgical and anesthetic records (CCR
7	2032.3(a)(9)), failed to document a physical examination within 12 hours of a
8	general anesthetic (CCR 2032.4(b)(1)), and failed to document the route of
9	administration of anesthetics (CCR 2032.4(b)(6)) for equine patient U.S.;
10	c. On or about March 12, 2020, for equine patient T.C.;
11	d. On or about March 17, 2020, for equine patient R.B.;
12	e. On or about March 12, 2020, for equine patient B.C.; <sup>6</sup>
13	f. On or about March 12, 2020, for equine patient H.M.; <sup>6</sup>
14	g. On or about March 12, 2020, for equine patient M.D.; <sup>6</sup>
15	h. On or about March 12, 2020, for equine patient Q.; <sup>6</sup>
16	i. On or about March 17, 2020, for equine patient H.C. In addition to the above
17	failures, Dr. Wade failed to document a required drug consultation for dispensed
18	drugs (BPC 4829.5(d)); <sup>7</sup>
19	j. On or about March 17, 2020, for equine patient R.C. In addition to the above
20	failures, Dr. Wade failed to document a required drug consultation for dispensed
21	drugs (BPC 4829.5(d)); <sup>7</sup>
22	k. On or about March 17, 2020, for equine patient A.F.; <sup>7</sup>
23	1. On or about March 17, 2020, for equine patient M.A.; <sup>8</sup>
24	m. On or about March 17, 2020, for equine patient M.J. <sup>8</sup>
25	
26	<sup>6</sup> These four horses all under the care of trainer Carla Gaines all received the treatment "Adequan IM" on the same day with no medical indication in the medical record.
27 28	<ul> <li><sup>7</sup> These three horses all under the care of trainer Carla Gaines all received the treatment "DMSO Jug, Bute Inj, and Methocarbamol Inj" on dates close in time with no medical indication in the medical record.</li> <li><sup>8</sup> These two horses both under the care of trainer Jack Carava both received the treatment "DMSO Jug and Estrone Inj" on the same day with no medical indication in the medical record.</li> </ul>
	68
	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	276. Except where otherwise indicated, Dr. Ryan Carpenter failed to include the following
2	information in the following equine patient's Patient History Report: Failed to document the
3	client's address (CCR 2032.3(a)(2)); Failed to document the age, sex, breed, species, and color of
4	the animal (CCR 2032.3(a)(4)); Failed to document a patient history (CCR 2032.3(a)(6)); Failed
5	to document a physical examination (CCR 2032.3(a)(7)); Failed to establish a Veterinarian-
6	Client-Patient relationship by virtue of an examination of the animal (CCR 2032.1(b)(2)); Failed
7	to document doses of medication administered (CCR 2032.3(a)(8)); Failed to document the route
8	of administration of drugs administered (CCR 2032.3(a)(8)); Failed to document a treatment plan
9	(CCR 2032.3(a)(8)); Failed to document a diagnosis for the patient (CCR 2032.3(a)(10)); and
10	Failed to state a prognosis for the patient (CCR 2032.3(a)(11)):
11	a. On or about March 12, 2020, for equine patient V.S.; <sup>9</sup>
12	b. On or about March 12, 2020, for equine patient B.H.; <sup>9</sup>
13	c. On or about March 12, 2020, for equine patient J.; <sup>9</sup>
14	d. On or about March 15, 2020, for equine patient L.W.;
15	e. On or about March 16, 2020, for equine patient B. In addition to the above failures,
16	Dr. Carpenter failed to document surgical and anesthetic record (CCR
17	2032.3(a)(9)); failed to document a physical examination within 12 hours of a
18	general anesthetic (CCR 2032.4(b)(1)); and failed to document the route of
19	administration of anesthetics (CCR 2032.4(b)(6));
20	f. On or about March 14, 2020, for equine patient M.W. In addition to the above
21	failures, Dr. Carpenter failed to document laboratory reports and interpretation
22	(CCR 2032.3(a)(7)) but he did document the route of the administration of drugs
23	(CCR 2032.3(a)(8)).
24	g. On or about March 14, 2020, for equine patient I.L. Dr. Carpenter failed to
25	comply with most of the requirements listed above. However, he did comply with
26	all aspects of CCR 2032.3(a)(8);
27	<sup>9</sup> These three horses all under the care of trainer Doug O'Neill all received the treatment "Bute, Electrolytes
28	+ Vits, Adequan, Methocarbamol" on the same day with no medical indication in the medical record.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	h. On or about March 15, 2020, for equine patient M.K.;
2	i. On or about March 17, 2020, for equine patient M.H.; <sup>10</sup>
3	j. On or about March 17, 2020, for equine patient W.S.; <sup>10</sup>
4	k. On or about March 15, 2020, for equine patient L.H.
5	277. Dr. Sara Jones failed to include the following information in the following equine
6	patient's Patient History Report <sup>11</sup> : Failure to document the client's address (CCR 2032.3(a)(2));
7	Failure to document the age, sex, breed, species, and color of the animal (CCR 2032.3(a)(4));
8	Failure to document a history (CCR 2032.3(a)(6)); Failure to document a physical examination
9	(CCR 2032.3(a)(7)); Failure to establish a VCPR by virtue of an examination of the animal (CCR
10	2032.1(b)(2)); Failure to document doses (CCR 2032.3(a)(8)); Failure to document a treatment
11	plan (CCR 2032.3(a)(8)); Failure to document a diagnosis (CCR 2032.3(a)(10)); Failure to state a
12	prognosis (CCR 2032.3(a)(11)); Failure to document the strength, dosage, route of administration,
13	quantity, and frequency of use for drugs dispensed (CCR 2032.3(a)(12)); and Failure to document
14	a required drug consultation for dispensed drugs (BPC 4829.5(d)):
15	a. On or about March 12, 2020, for equine patient C.D.;
16	b. On or about March 15, 2020, for equine patient G.;
17	c. On or about March 15, 2020, for equine patient B.L.;
18	d. On or about March 15, 2020, for equine patient S.;
19	e. On or about March 15, 2020, for equine patient G.D.;
20	f. On or about March 15, 2020, for equine patient A.R.;
21	g. On or about March 15, 2020, for equine patient T.C.;
22	h. On or about March 15, 2020, for equine patient S.L.;
23	i. On or about March 15, 2020, for equine patient H.A.; and
24	j. On or about March 16, 2020, for equine patient B.R.
25	<sup>10</sup> These two horses both under the care of trainer Baffert both received the treatment "Methocarbamol Inj,
26	Bute Inc, E-SE" on the same day with no medical indication in the medical record. However the medical record for each of these horses did comply with CCR 2032.3(a)(2), listing the client's address.
27	<sup>11</sup> Confidential Track Reports submitted to the California Horse Racing Board indicate Dr. Jones as the treating veterinarian for these patients at these dates and times. However, on the Patient History Reports it appears
28	that Respondent EMC billed the treatments under the name of Respondent Baker.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	278. In addition, Dr. Jones failed to include the following information in the following
2	equine patient's Patient History Report <sup>12</sup> : Failure to document the client's address (CCR
3	2032.3(a)(2)); Failure to document the age, sex, breed, species, and color of the animal (CCR
4	2032.3(a)(4)); Failure to document a history (CCR 2032.3(a)(6)); Failure to document a physical
5	examination (CCR 2032.3(a)(7)); Failure to establish a VCPR by virtue of an examination of the
6	animal (CCR 2032.1(b)(2)); Failure to document doses (CCR 2032.3(a)(8)); Failure to document
7	a treatment plan (CCR 2032.3(a)(8)); Failure to document a diagnosis (CCR 2032.3(a)(10)); and
8	Failure to state a prognosis (CCR 2032.3(a)(11)):
9	a. On or about March 3, 2020, for equine patient Y.W.;
10	b. On or about March 3, 2020, for equine patient T.T.;
11	c. On or about March 3, 2020, for equine patient S.M.;
12	d. On or about March 6, 2020, for equine patient M.B.;
13	e. On or about March 6, 2020, for equine patient A.H.; and
14	f. On or about March 16, 2020, for equine patient B.R. In addition to the above
15	failures, Dr. Jones failed to document laboratory reports and interpretation as
16	required. (CCR 2032.3 (a)(7).) However, Dr. Jones did properly document the
17	doses of treatments.
18	279. Dr. Cathleen Canfield failed to include the following information in the following
19	equine patient's Patient History Report: Failed to document the age, sex, breed, species, and color
20	of the animal (CCR 2032.3(a)(4)); Failed to document a patient history (CCR 2032.3(a)(6));
21	Failed to document a physical examination (CCR 2032.3(a)(7)); Failed to establish a VCPR by
22	virtue of an examination of the animal (CCR 2032.1(b)(2)); Failed to document doses of
23	medication administered (CCR 2032.3(a)(8)); Failed to document the route of administration of
24	drugs administered (CCR 2032.3(a)(8)); Failed to document a treatment plan (CCR 2032.3(a)(8));
25	Failed to document a diagnosis for the patient (CCR 2032.3(a)(10)); and Failed to state a
26	prognosis for the patient (CCR 2032.3(a)(11)):
27	<sup>12</sup> Confidential Track Reports submitted to the CHRB indicate Dr. Jones as the treating
28	veterinarian for these patients at these dates and times. However, on the Patient History Reports it appears that Respondent EMC billed the treatments under the name of Respondent Baker.
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	a. On or about March 4, 2020, for equine patient F.; and
2	b. On or about March 4, 2020, for equine patient G.B.
3	280. In addition, Dr. Canfield failed to include the following information in the following
4	equine patient's Patient History Report: Failed to document the age, sex, breed, species, and color
5	of the animal (CCR 2032.3(a)(4)); Failed to document a patient history (CCR 2032.3(a)(6));
6	Failed to document a physical examination (CCR 2032.3(a)(7)); Failed to document a treatment
7	plan (CCR 2032.3(a)(8)); Failed to document a diagnosis for the patient (CCR 2032.3(a)(10));
8	Failed to state a prognosis for the patient (CCR 2032.3(a)(11)): and Failed to document strength,
9	dosage, route of administration, quantity, and frequency of use for drugs dispensed, (CCR 2032.3
10	(a)(12)):
11	a. On or about April 7, 2019, for equine patient K.T.;
12	b. On or about June 14, 2019, September 2, 2019, and September 20, 2019, for
13	equine patient G.R.; and
14	c. On or about January 11, 2020 and January 12, 2020, for equine patient J.T.
15	VETERINARY PREMISES REGISTRATION
16	281. Pursuant to section 4853.6, if the Board suspends or revokes Veterinarian License
17	Number VET 10550 issued to Respondent Baker, the Board shall suspend or revoke Veterinary
18	Premises Registration Number HSP 3171 issued to Respondent Baker, as managing licensee of
19	Respondent EMC.
20	<u>PRAYER</u>
21	WHEREFORE, Complainant requests that a hearing be held on the matters alleged in this
22	Accusation, and that following the hearing, the Board issue a decision:
23	1. Revoking or suspending Veterinarian License Number VET 10550, issued to Vincent
24	A. Baker;
25	2. Revoking or suspending Premises Registration Number HSP 3171, issued to Equine
26	Medical Center;
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28	////
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION

1	3.	3. Ordering Vincent A. Baker and Equine Medical Center to pay the Veterinary Medical		
2	Board the reasonable costs of the investigation and enforcement of this case, pursuant to Business			
3	and Professions Code section 125.3;			
4	4.	4. Assessing a fine against Vincent A. Baker not in excess of \$5,000 for any of the		
5	causes specified in Business and Professions Code section 4883; and			
6	5.	5. Taking such other and further action as deemed necessary and proper.		
7				
8	DATED:	December 17, 2021	Signature on File JESSICA SIEFERMAN	
9			Executive Officer	
10 11			Veterinary Medical Board Department of Consumer Affairs State of California	
11			Complainant	
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	(VINCENT A. BAKER and EQUINE MEDICAL CENTER) ACCUSATION			