

# NORTH CAROLINA VETERINARY MEDICAL BOARD

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March 2, 2021

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335 Huffine Mill Trail  
McLeansville, NC 27301

*Certified Mail, Return Receipt Requested*

*Letter of Reprimand  
Board Rule 21 NCAC 66.0601(h)*

Re: Complaint No. 2020025-1  
Shannon Bowen

Dear Dr. Oliver:

This letter explains the decision of the N.C. Veterinary Medical Board through its Committee on Investigations No. 1 on the complaint against you by Ms. Shannon Bowen of Franklinville. As explained below, the decision is to issue you a letter of reprimand pursuant to Board Rule 21 NCAC 66.0601(h).

## Board Investigative Procedure

Written complaints to the Veterinary Medical Board are investigated pursuant to the Veterinary Practice Act [North Carolina General Statute § 90-179 *et seq.*] and the Board Administrative Rules [21 NCAC 66.0101 *et seq.*]. Board Rule 21 NCAC 66.0601, copy enclosed, governs the investigation. This complaint was assigned to the Board's Committee on Investigations No. 1, which reviewed all relevant materials in this file, including medical records, to determine whether there is probable cause that you violated the Veterinary Practice Act and/or Board Rules on the issues presented. As part of its investigation the Committee interviewed Ms. Bowen and your former employee Crystal Bennett. The information they provided was very helpful to the Committee in determining the facts of the case.

Summary of Complaint – Received 5/9/2020

Shannon Bowen's complaint (received by the Board 5/9/20) alleges negligence and gross neglect in your care and treatment of her female hound, Jenna, age 13. The complaint is summarized as follows.

- On 4/13/20 you performed lipoma removal surgery on Jenna at Benessere Animal Hospital in Greensboro ("Benessere") which you operated under agreement with George Edward Robinson, DVM. On 4/15 Jenna was discharged. She did well, started eating, and by Friday, 4/17, she was not acting as sore as previously.
- By 4/18 one of the lipoma surgical sites had opened and looked as though some of the stitches had pulled through Jenna's skin. The skin was dark at the edges of the surgery area. Benessere was not open so Ms. Bowen sent you a Facebook message with the picture of the area of the dog that concerned her. Ms. Bowen asked whether Jenna's condition would be all right until Monday.
- Ms. Bowen returned Jenna to Benessere early on Monday, 4/20. She learned later that day you trimmed the dead skin and pulled it back together but an area about the size of a fifty-cent piece remained open. You wanted to keep Jenna to allow her to rest and heal. Based on that information Ms. Bowen agreed to leave Jenna at Benessere.
- On 4/23, in an 8:20 a.m. Facebook message sent to Ms. Bowen, you wrote that Jenna was progressing, but healing slowly because of her hyperthyroid condition. Ms. Bowen writes that Jenna actually was "hypothyroid." You represented that Jenna should be ready to go home on Saturday, 4/26.
- Between Monday, 4/20, and Wednesday, 4/29, Ms. Bowen called Benessere 11 times inquiring about Jenna. She was never told anything by the staff other than that Jenna was doing fine. The only communication she had from you during this period was the 4/23 Facebook message.
- In response to Ms. Bowen's calls, the employees said that she could come visit. Ms. Bowen had not tried to see Jenna previously because Jenna was an older dog and she did not want to stress her by seeing her and then not bring her home.

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- On 4/30 Ms. Bowen arrived at Benessere around 11:30 a.m. and was directed by the receptionist to go to the back of the facility where the staff would bring Jenna out. When Ms. Bowen first observed Jenna, the dog was walking slowly, a condition that Ms. Bowen thought resulted from her being sore, as well as being confined to a cage for several days. When Jenna got closer, Ms. Bowen noticed a very strong smell.

- Benessere employee Crystal Bennett said to Ms. Bowen that if she did not take Jenna away from Benessere, the dog would die. She further stated that “under those bandages” Jenna was “split open on her stomach, legs and side,” was oozing pus and had infection. She said Ms. Bowen needed to remove her that day. Ms. Bowen was dumbfounded, although she did notice that Jenna’s bandages were covered with pus and smelled awful.

- Ms. Bowen had not been informed during Jenna’s stay that there was any issue with her recovery other than that the dog had a fifty-cent piece area open from the original lipoma surgery.

- You then came outside and said that Jenna was doing good and was healing. Ms. Bowen responded that the dog smelled like death, and the bandages were nasty, with pus leaking from them. She said to you that no one had told her that her dog had “split open,” nor that her stomach, side and leg were open. You said that by reason of COVID-19, stress with employees and a friend’s being diagnosed with breast cancer, you had failed to tell her, characterizing that failure as a lack of communication. When Ms. Bowen questioned why Jenna had not been cleaned for that day, you said that she would get a bandage change that afternoon.

- Ms. Bowen decided that she would take Jenna somewhere else. You were almost adamant that she not take Jenna to another facility, saying that no other places were performing wound care, and that any other veterinarian would tell her to euthanize Jenna. You then said that it was Ms. Bowen’s fault that the dog was the way she was because Jenna had been allowed to eat mulch at the Bowens’ home. Ms. Bowen replied that Jenna’s condition had nothing to do with mulch.

- You went back inside the facility. Ms. Bowen, with the assistance of Benessere employees, placed Jenna in the car. Benessere office manager Christine Wooten also said that Ms. Bowen should remove Jenna from the facility.

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- Ms. Bowen took Jenna directly to CVS-Greensboro where the veterinarians worked on the dog for several hours, beginning at 1:00 p.m. The CVS veterinarians gave Ms. Bowen a high estimate of costs for further treatment, as well as a grave prognosis. She decided to seek a second opinion. CVS staff administered two doses of morphine and cleaned Jenna up very well and applied bandages prior to Ms. Bowen's taking her home.

- Early on 5/1 Ms. Bowen took Jenna to Pointe South Animal Hospital ("Pointe South") in Randleman. Dr. Clint Berdeen advised Ms. Bowen that there was nothing he could do. Because Jenna had been bandaged, the first time Ms. Bowen saw her wounds was at Pointe South. There were necrotic areas and everything was "flapped open." Ms. Bowen elected to have Jenna euthanized because treatment would have been long and painful.

- Had Ms. Bowen known earlier of Jenna's condition, the dog's outcome may have been different. You prevented Ms. Bowen from doing anything differently by not informing her of Jenna's condition.

- Ms. Bowen obtained the Benessere medical/patient records for Jenna. She believes they were altered. She had also obtained Jenna's records from a Benessere employee. Those records show the medication her dog received and the feeding schedule. The records you sent do not agree with the records Ms. Bowen obtained from the employee.

- Crystal Bennett advised Ms. Bowen that Jenna was denied veterinary care on 4/22, a day you were away from Benessere. Ms. Bennett emailed you that Jenna's leg was splitting open, and she asked that Dr. Tyler Perkins, the facility's relief veterinarian, be allowed to look at Jenna. However, you advised Ms. Bennett that Dr. Perkins was not to look at Jenna and that you did not need for him to be involved. Similarly, you were off work on 4/29 and the relief veterinarian was not allowed to treat Jenna that day.

- Ms. Bowen has been informed that during Jenna's stay you falsely stated to another veterinarian that Jenna "had a non-compliant owner."

- When Jenna was euthanized on 5/1, she had such bad pressure sores that a bone was showing through the bottom of one of her feet.

- Your copy of the Benessere medical records shows that Jenna's last bandage change was on 4/28. For two days thereafter, prior to Ms. Bowen's arrival on 4/30, Jenna sat "in a nasty, pus-filled bandage," preventing her healing.

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- Ms. Bowen was informed that you trimmed dying skin off of Jenna without using numbing medication or anesthesia.

*Enclosures*

- Ms. Bowen enclosed with her complaint a copy of Jenna's 4/30 Emergency Visit to CVS. The report, issued under the name of CVS Staff Veterinarian Bastian Parsons, DVM, included the following "wound descriptions" as part of the examination findings with respect to Jenna:

1. Left flank: approx. 6cm cr-cd x 2cm ds-vt x 4cm deep open wound. Marked to severe purulent discharge within and around wound. Necrotic tissue at wound edges and deep inside. Damage does not appear to extend into muscle layer. Moderate SQ pocketing (not really tunneling). Foul odor to discharge.

2. Right inguinal region: On abdomen, defect is approximately from caudal abdominal nipple to near pubis from midline to cranial thigh/near flank. On limb, defect is from medial stifle to caudal body wall, 2cm wide distal up to 6cm wide proximal. The wounds are contiguous so the entire inguinal region, proximal thigh, and caudal right abdomen is one open wound. Some sutures and staples remain (dehiscd), there is severe purulent discharge within and around wound, severe necrosis to superficial tissues.

3. Left hind distal limb: <1cm skin defect over the medial malleolus of tibia with mild purulent discharge, extends to the ligament/bone level. (surgical wound? pressure sore?)

4. Left hind foot: <1cm defect with black necrotic skin near toe pad of digit 2 – necrotic section is adhered to deeper tissues including plantar tendons. (pressure sore?)

- Ms. Bowen also enclosed the Benessere records for Jenna, which were printed on 5/6.

- Additional materials she enclosed are:

1. A copy of a letter from Dr. Clint Berdeen of Pointe South summarizing his findings at Jenna's presentation on 5/1. He noted that after discussing options with Ms. Bowen

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and “with a grave prognosis due to the infection, healing difficulties and general pain associated with the wounds,” [she] “agreed on humane euthanasia. Euthanasia was performed at that time.”

2. A copy of a Facebook message from you to Ms. Bowen on 4/23, which was your only communication to her.

3. Other Facebook messages to you and a picture of the Benessere drop-off sheet on 4/20 confirming Ms. Bowen approved treatment for Jenna. One photograph shows a sheet where writing on the form was marked through to indicate that Jenna did not wear her Elizabethan collar following the initial surgery and prior to 4/20. Ms. Bowen contends that this edited form is false because Jenna did in fact wear the Elizabethan collar following discharge and before she re-presented to you.

4. Other medical records.

5. Numerous photographs of Jenna, including those taken at CVS on 4/30, at Pointe South on 5/1, and photographs of Jenna taken by one or more Benessere employees during her stay.

6. A copy of text messages on 4/22 from Crystal Bennett to you advising that Jenna’s leg was opening up, and a response text from you to Ms. Bennett advising that she not allow Dr. Tyler Perkins to look at the leg that day when you were not at work.

*Your Response – Received 6/3/2020*

You responded to Ms. Bowen’s complaint by letter from your attorney, Natalia K. Isenberg, received 6/3/20, summarized below.

On 4/9/20 you first saw Jenna, a female canine hound, age 12 years, 10 months for an examination and surgical consultation regarding removal of three large masses that were impeding her mobility. The dog had underlying hypothyroidism and chronic long-standing damaged skin in addition to massive lipomas. Ms. Bowen declined referral to a specialist. She was advised that following surgery an Elizabethan collar as well as restricted activity would be critical.

Ms. Bowen dropped Jenna off on 4/13. The surgery was performed that day. Jenna was discharged to home on 4/15 with an Elizabethan collar and with instructions to keep her in a confined area, limit activity and allow only controlled leash walking and short walks for

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elimination. An appointment for recheck and Penrose drain removal was scheduled for 4/18. Ms. Bowen did not present Jenna for the 4/18 (Saturday) appointment.

On Monday 4/20 Ms. Bowen presented Jenna to Benessere for treatment. All three of the dog's incisions were open. Ms. Bowen indicated that Jenna might have been able to lick her incisions with a soft e-collar. In addition to the open areas along both incisions on her right thigh and inguinal area, part of the Penrose drain was missing. Jenna reportedly had had normal activity, water consumption and elimination. She had been restricted to the owner's backyard where she walked the fence line while the owner watched. Jenna had diarrhea with mulch in it and she vomited bile. It appeared that Jenna had likely accessed mulch through the fence in the yard.

You suspected non-compliance by Ms. Bowen with activity restrictions, as evidenced by the open incisions and mulch-filled diarrhea. The wounds appeared healthy with good vascularization. Ms. Bowen consented to anesthesia and surgical wound debridement and reclosure. Ms. Bowen understood that Jenna was to be hospitalized to ensure activity was restricted and to facilitate wound care.

On 4/21 Jenna was placed under anesthesia and her wounds were repaired. She received antibiotics and IV fluids and was fitted with a hard Elizabethan collar. You called Ms. Bowen to advise that Jenna was awake and stable and would remain at Benessere for observation and activity restriction for three to five days. You said that you would call Ms. Bowen when Jenna was ready to be discharged. The dog was comfortable, walked without assistance and urinated normally.

On 4/22 a small amount of serous drainage was observed from Jenna's Penrose drains. She was able to walk outside, but had diarrhea with small amounts of mulch. She vomited a small amount of yellow bile and was willing only to eat a small amount of canned low-fat food with hand feeding. You suspected the "amoxiclav" might be upsetting her stomach and therefore you stopped it and discontinued "CRI" and "switched to pain LRS with 86 ml/hour repeated Cerenia IV, Cefazolin, slow IV and Enrofloxacin, slow IV." You prescribed Onsior and Cerenia.

On 4/23 Jenna had diarrhea in the cage. She had opened up the incisions and had "pushed her hard e-collar into her wound." The incisions "were completely open" and the tissue between the incisions had been "cannibalized" by Jenna, making the two wounds into a very large wound, extending from her right thigh to midline abdomen. Jenna had eaten the Penrose drains.

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The open wound on Jenna's left dorsal lumbar area was 4.5 inches deep. The tissue was well vascularized.

You were unable to reclose the wounds. Jenna was not a good candidate for skin grafts because of her size and her hypothyroid status. You determined it was best to perform serial wound care and bandage changes to promote healing by second intention. You cleaned and debrided the wounds and removed loose sutures and the remnants of Penrose drains. You applied Manuka honey and a separate layer of silver sulfadiazine 1% cream mixed with 10 units of regular insulin to promote tissue growth. You packed the deepest areas with sterile lap pads and applied Press-and-Seal wrap and Elasticon to maintain a moist healing environment for the wound bed. You placed a longer Elizabethan collar, the length of which would not allow Jenna to maneuver the edge of the collar into a wound.

On 4/23 you informed Ms. Bowen that Jenna had opened and damaged all her incisions. You advised there was insufficient tissue to close the wounds and that Jenna would be receiving wound care. You noted to Ms. Bowen that the wounds were far too extensive and complicated to manage at home. Ms. Bowen indicated that she understood.

On 4/24 Jenna received daily treatments for wounds with IV fluids and IV antibiotics. She continued to experience diarrhea and was transferred into the wound care tub. Her dirty bandages were removed and she was cleaned off. A large wound extended from her right medial thigh to midline abdomen, a 14" to 21" wound on the left dorsal lumbar area that was opened 3"x4" and 3.1" deep. You applied honey mixed with insulin to promote rapid tissue regrowth. You repacked the deepest areas in both the right inguinal area and the left dorsal lumbar area with sterile lap pads. Long-term Webmax suture loops were placed along wound margins for pulling edges towards each other for serial bandage changed and wound care. The wounds were covered with Press-and-Seal wrap and secured with Elasticon and Vetwrap. You continued Cefazolin by slow intravenous administration, and Enrofloxacin.

On 4/25 Jenna had diarrhea but was wagging her tail and was willing to eat GI canned food. She was transferred to the wound care tub. Dirty bandages were removed. The wounds were cleaned with dilute Betadine. There was light tan excaudate. The wound edges and bed had healthy granulation tissue. Measurements of the wound were 13" x 22.2" extending from right medial thigh to midline abdomen. The wound on the left dorsal lumbar area was open 3" x 4" and 3" deep. Manuka honey and a separate layer of silver sulfadiazine 1% cream, mixed with 10 units of insulin, were applied. Sterile lap pads were replaced in the deepest areas. Long-term suture



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loops were placed along wound margins. The wounds were covered with Press-and-Seal wrap and secured with Elasticon and Vetwrap. Cefazolin and Enrofloxacin were continued by slow IV.

On 4/26 Jenna was transferred to the wound care tub. The cleaning and bandage change regimen was repeated. The larger wound measured 12.5" x 20.8". The left dorsal wound was open 3" x 3.5" and 3" deep. The honey and silver sulfadiazine 1% cream and insulin were applied. Sterile pads were repacked. Long-term suture loops were placed around wound margins. Press-and-Seal wrap secured with Elasticon and Vetwrap was applied. The same medications were continued.

Jenna was wagging her tail on 4/27 and willing to eat food. There was no further diarrhea. She was transferred to the wound care tub for the bandage removal and the wound cleaning regimen. The measurements of the wounds were 12.2" x 20.2" and the left wound was 2.9" x 3.6" and 3" deep. The Manuka honey and silver sulfadiazine 1% cream with insulin were again applied and repacked as usual with changed bandages. The wounds were addressed as previously. Antibiotics were continued.

On 4/27 Ms. Bowen called to check on Jenna and requested a call back. You respond that you returned her call and left a voice mail explaining that Jenna was "not anywhere near ready to go home," and that she still needed "extensive wound care." You added in the message that Jenna was making slow progress and that you and your staff were supporting her, doing daily wound care and bandage change as needed. In the message you also invited Ms. Bowen to make an appointment to visit and review the conditions and care.

On 4/28 the wounds were cleaned and bandages were changed. The wounds continued to heal. The primary wound measured 12" x 19.9" and the left side wound was 2.8" x 3.9" and 2.8" deep. Honey, sulfadiazine cream and insulin were applied and the wounds were rebandaged.

On 4/29 the wounds were continued to be cleaned and they measured 11" x 18" with deep pocket fold and the wound on the left dorsal lumbar area was opened 2.75" and 3.75" and 2.8" deep. The same treatment for the wound care was continued.

On 4/30 Ms. Bowen arrived at Benessere without an appointment or prior notice and expressed the wish to take Jenna for a second opinion. You said Ms. Bowen was free to do so but you advised against removing Jenna from wound care without first bandaging the wounds and having a referral to a hospital that would take her. You believed you were sufficiently competent

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to continue treatment at the facility. You advised Ms. Bowen not to remove Jenna unless it was to go to a hospital for wound care and that the hospital might request an upfront deposit and might recommend euthanasia. Jenna was receiving IV fluids and antibiotics. You encouraged Ms. Bowen to contact CVS (Greensboro). Ms. Bowen then requested that you continue taking care of Jenna. You recommended that Ms. Bowen return after you completed your surgery so you could show her how to take care of Jenna's wounds. Ms. Bowen agreed and said she would leave. You asked your assistant Crystal Bennett to return Jenna to the facility to have her bandages changed.

You instructed Ms. Bennett to retrieve Jenna and return her to the hospital cage. You subsequently learned that instead Ms. Bennett falsely told Ms. Bowen that Jenna's care was being neglected and recommended that she remove Jenna from your care. You were not informed of Jenna's discharge until after you requested that Jenna be submitted for further treatment. Then you were told that Ms. Bowen had discharged her from care. You did not see Jenna further or have further communications with Ms. Bowen other than to provide requested medical records.

The next part of your response is your comments on treatment at CVS-Greensboro. You note that Dr. Parsons expressed concern, given Jenna's lack of response to treatment, that there might be an underlying disease complicating things. Dr. Parsons noted Ms. Bowen's plan to take Jenna to another veterinarian and to try wet-to-dry bandages. He thought this plan was not advisable because it might prolong Jenna's pain and suffering. Her condition would be prolonged and painful with no guarantee of resolution, and there might be underlying issues, including cancer, other than lipoma, causing poor healing, Cushing's disease or other undiagnosed problems.

You allege that Crystal Bennett falsely told the police that you were mistreating animals and that you had assaulted her. You cooperated with the police investigation which determined that there was no criminal activity and that Ms. Bennett's allegations were unfounded. It is unfortunate that Ms. Bowen based her evaluation of care on false information provided by Ms. Bennett, who is not credible. The Benessere medical records indicate the wounds were improving, although slowly. The records indicate that Ms. Bowen was contacted about the wounds re-opening.

The records show that following the surgery Jenna opened her own wounds while at home at some point between 4/15 and 4/20. Under your care, Jenna's incisions were closed, but unfortunately Jenna further "cannibalized" her own wounds. She received daily treatments and care for her wounds and her status was communicated to Ms. Bowen.

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You included a number of documents and records with your response including Benessere patient medical records for Jenna.

Medical Records

The Committee reviewed medical records for Jenna from Benessere, CVS-Greensboro and Pointe South.

Shannon Bowen's Reply – Received 6/15/2020

Ms. Bowen filed a reply to your response, received 6/15/20, summarized as follows.

- Jenna was not seen by you on 4/9 for a consultation to remove all three lipomas. The consultation was to determine if the fatty lipoma on her stomach area could be removed. That lipoma, while not causing harm to Jenna, was becoming larger, and Ms. Bowen wanted a veterinarian's opinion about removing it to ensure the dog's comfort.
- Contrary to your response, you never offered the option to talk to a specialist. You said you could remove all three of the lipomas at one time. Ms. Bowen said do it only if it could be done. You said you would do it only if it were safe and you would perform an ultrasound on Jenna's abdomen and blood work prior to surgery.
- Your examination was brief. You did not go into detail about Jenna's wearing a post-surgery Elizabethan collar or activity restrictions. You designated April 13 for the surgery. You did not mention an "assessment plan" that indicated labs would need to be run if hypothyroidism was confirmed and, if confirmed, that condition would need to be treated to facilitate healing and support optimal health. Ms. Bowen only became aware of the plan through your medical records.
- Ms. Bowen questions why you conducted the surgery if the hypothyroid condition was not yet controlled. Ms. Bowen questions why Jenna was not placed on thyroid medication one to two months before your attempting surgery. You falsely respond that a number of other things were reviewed with Ms. Bowen. The entire visit with you lasted only about four or five minutes. Humane euthanasia was never mentioned and had never been considered by Ms. Bowen.

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- Ms. Bowen dropped Jenna off at Benessere on 4/13. Surgery was performed on 4/14. Ms. Bowen was not informed of blood work results. Jenna was discharged with a soft, blue Elizabethan collar and her leash. An employee brought the dog out to Ms. Bowen with a bag of medication and paperwork. Neither the employee nor anyone else at Benessere went over anything with Ms. Bowen at discharge.

- Nothing was said at Benessere to Ms. Bowen either before or after Jenna's discharge that a return appointment for removal of the Penrose drain had been scheduled. Ms. Bowen knew nothing about the appointment you scheduled. Ms. Bowen resents that you imply that she is a "bad" owner of a pet for missing an appointment of which she was not aware.

- Although Ms. Bowen asked the employee at discharge for the results of Jenna's blood work and urinalysis, the assistant did not provide them.

- Jenna's life at home was uneventful. Although she did not eat for the first three days despite being offered a variety of foods, she drank well and urinated as usual. She had very limited activity. She wore the soft blue Elizabethan collar the entire time. On Sunday Ms. Bowen changed the Elizabethan collar to a hard, plastic collar because Jenna kept getting the soft one in her water. However, Jenna never once had either collar off the entire time she was at home.

- Someone at Benessere deleted the word "not" on Jenna's 4/20 paperwork to try to make it appear that Jenna had had the Elizabethan collar off at home.

- On 4/20 the Benessere receptionist, Tracy, was the only person with whom Ms. Bowen spoke. Ms. Bowen wrote on the paperwork presented to Tracy that Jenna needed the opened surgical area resealed and she authorized that anything deemed necessary should be done.

- Ms. Bowen learned from an employee on the afternoon of 4/20 that Benessere was going to keep Jenna for a few more days to ensure she continued to heal and stay quiet.

- Ms. Bowen was informed late in the afternoon of 4/20 that Jenna had had the surgery, but the Benessere medical records show that it was performed on 4/21. The anesthesia log, however, indicates the surgery was 4/20.

- Other discrepancies in Jenna's medical records include an entry that an 18-gauge catheter was placed on the day of the surgery, but the surgery monitor sheet shows that no catheter was placed and subcutaneous fluids were given. An apparent error is that Jenna was on the pain

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relief medication, Onsior, for more than three days, but its use is intended for a maximum of three days.

- Ms. Bowen questions the accuracy of the entry that states that all three incisions were open and part of the Penrose drain was missing when Jenna presented to you on 4/20. While Jenna was at home following surgery only one incision was open. The drain was cared for two to three times a day that weekend and the drain was fine when Jenna was cleaned on Sunday night. At that time the incision requiring treatment consisted of only one small opening.

- While Jenna was at Benessere from 4/20 through 4/30 you never spoke with Ms. Bowen. The only communication from you was one Facebook message. On 4/30 she spoke with you shortly before she removed Jenna from your care.

- Another record error indicates that a new, longer Elizabethan collar was placed on Jenna on 4/23. However, on 4/30 Jenna was wearing the same Elizabethan collar that she had been wearing when Ms. Bowen presented her to Benessere on 4/20. The collars could not have been switched in anticipation of Ms. Bowen's arrival on 4/30 because no one knew she was coming to the facility.

- Ms. Bowen questions the truthfulness of the message she received from someone at Benessere at 8:21 a.m. on 4/23 that Jenna was eating, drinking and making progress. If this were the case, then why did you put in the medical record that Jenna had opened all her incisions and cannibalized herself while digging the "cone" into her incisions. You knew that Jenna was not in the best shape a few days after surgery, so why did you continue to not tell Ms. Bowen the truth. Had you done so she could have gotten Jenna some help.

- On 4/22 you denied Jenna help from Dr. Perkins, the staff veterinarian at Benessere on your day off. Crystal Bennett advised you in a text message that Jenna's leg had started to open up. Jenna endured unneeded pain and suffering. You denied her the care she needed.

- You caused Jenna pain by trimming dying skin from the wounds without anesthesia.

- Your medical notes reflect that you cleaned Jenna on 4/22 and 4/29, but those were your days off. Ms. Bowen questions how you could treat Jenna on your days off. Ms. Bowen believes Dr. Perkins advised the police investigating the matter that you did not treat Jenna on 4/22 or 4/29. Ms. Bowen does not believe that you came to Benessere on those days and treated the

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dog's wounds. Also, a note was added in the medical records your attorney furnished which was not present in the original records. This note indicated that while you were not scheduled to work that day, you treated the wounds. Ms. Bowen questions the accuracy of this note.

- You failed to give Jenna medication for diarrhea that your records indicate she had from 4/22 until 4/25.
- Another false statement is the record entry that you called Ms. Bowen on 4/27. That did not happen. You never left a message or called Ms. Bowen except for the Facebook message on 4/23. Ms. Bowen's telephone records confirm that you never contacted her.
- On 4/30 Ms. Bowen was not aware of Jenna's condition. She noticed a strong, pungent smell coming from her and her bandages were soaked with pus. Ms. Bennett said that she was afraid that Jenna was going to die. Ms. Bowen was dumbfounded at this statement because in each of the 11 times she had called Benessere, she was told that Jenna was doing fine.
- On 4/30 when you came out to speak with Ms. Bowen you said Jenna's bandages would be changed that afternoon. When Ms. Bowen said that she wanted to take Jenna for a second opinion, you were adamant that she not remove Jenna from your care. You said no one else was doing wound care and that "everyone else" would tell Ms. Bowen to euthanize Jenna. You claimed that you had Jenna "halfway" healed. Then you said you would not be charging Ms. Bowen for services provided to Jenna.
- During this conversation on 4/30 you said you wished you had taken pictures when Jenna presented on 4/20 because she looked so much better. Ms. Bowen said to you that no one had told her that Jenna's stomach and legs were splitting open. You looked surprised but did not ask Ms. Bowen how she knew this. You blamed your "lack of communication" with Ms. Bowen on COVID-19, stress with employees and someone being diagnosed with breast cancer.
- In the 4/30 conversation you told Ms. Bowen that she could not have been taking care of Jenna because the dog had "pooped some mulch" when she came to Benessere on 4/20. Ms. Bowen explained to you that although there was mulch in the yard, Jenna was "watched like a hawk" and did not eat mulch when she came home after the surgery. Ms. Bowen acknowledges that Jenna might have eaten some mulch a couple of days prior to the original surgery. However, even had Jenna eaten some mulch prior to the surgery, the mulch ultimately did not result in Jenna's being in the condition that she was in on 4/30. The dog's rear leg was double its size and she smelled "like death."

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- You then blamed Jenna, and said her condition resulted from her not walking and because of her lying around and urinating and lying in it. Ms. Bowen questions why a very vulnerable dog with open skin wounds was being left to lie in urine. Ms. Bowen, who has worked for years in a veterinary practice, knows the difference between the smell of urine and the smell of decay. Jenna's smell was not urine.

- Ms. Bowen never said to you on 4/30 that she would drive around until she found a veterinarian. Neither CVS nor NCSU-College of Veterinary Medicine were mentioned, nor was a payment plan with CVS mentioned. You never offered to call CVS for Ms. Bowen or obtain a referral for Jenna to go elsewhere. You never said anything about getting Jenna a proper bandage. You did not encourage Ms. Bowen to contact CVS and in fact told Ms. Bowen that you were the only one doing wound care.

- The most flagrant lie in your response is that you said you apologized for not explaining the wounds better and said you reminded Ms. Bowen that you told her about Jenna's incision being wide open. Ms. Bowen's phone records confirm you never called her.

- With the help of Crystal Bennett and office manager Christine Wooten, Ms. Bowen loaded Jenna into her Jeep and took her to CVS. There, CVS employees took the dog inside on a stretcher because she could not walk well, even though she could stand.

- The CVS veterinarians and staff worked on Jenna from approximately 1:20 p.m. until 5:30 p.m. They photographed Jenna and her wounds. Ms. Bowen enclosed the photographs which show Jenna's "nasty and disgusting" condition. Ms. Bowen had not asked the veterinarians to take these photographs, which they later sent her. She was not able to see the extent of the wounds until the following morning when she presented Jenna to Pointe South.

- The CVS veterinarians determined there was dehiscence and infection of the surgical wounds including catastrophic areas of the skin. They recommended wound vacs, although you had previously said Jenna did not need a wound vac. Certain bandages were recommended. CVS gave a grave prognosis and a cost for treatment of between \$8,000.00 and \$12,000.00. Jenna received two doses of morphine at CVS because she was in a lot of pain. Ms. Bowen asked the CVS veterinarians to clean Jenna and rebandage her. Ms. Bowen was unsure whether she could afford to spend the treatment costs, so she called her local veterinarian Pointe South for a second opinion appointment for the following morning. At this point Ms. Bowen still

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had not seen the wounds and did not know their severity because Jenna was discharged from CVS with temporary bandages.

- At home Ms. Bowen observed that Jenna's footpads had pieces of hair and flesh hanging off of them as well as some spots on her legs. Her legs were double the size of what they should have been.

- At 8:00 a.m. on 5/1 Ms. Bowen presented Jenna to Pointe South in Greensboro. The bandages were removed. Ms. Bowen then realized why CVS veterinarians gave a grave prognosis, because Jenna's entire stomach area and leg area were gaped open. Jenna was non-ambulatory. Your statement that Ms. Bowen knew Jenna's condition all along is a "blatant lie," because had she known of it, she would have removed the dog from your care at the beginning.

- Ms. Bowen decided to end Jenna's pain and suffering with euthanasia.

- Jenna would be alive today if you had not "butchered her and taken off all three of the fatty lipomas plus the thickened area on her side." You failed to provide appropriate veterinary medicine on every level of care.

#### Decision of Committee on Investigations No. 1

The members of Committee on Investigations No. 1 reviewed the information presented in this file, consisting of well over 200 pages of material. The Committee also considered the information provided by its interviews of Ms. Bowen and your former employee Crystal Bennett.

Following review and discussion, the Committee finds that there are ample facts to establish probable cause that you violated N.C.G.S. § 90-187.8(c)(6) by the following acts of incompetence in the practice of veterinary medicine:

1. You Failed to Competently Treat Jenna after Her Follow-Up Surgery on 4/20/20 During the Ten Days She was in Your Care.

On 4/13/20 you performed lipoma removal surgery on Jenna at your facility, Benessere Animal Hospital ("Benessere"). On Wednesday 4/15, Jenna was discharged. At home Ms. Bowen complied with your post-surgery instructions of maintaining an Elizabethan collar on the dog and restricting her activity. Unfortunately, by Saturday, 4/18 one of the lipoma surgical sites had



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opened, and apparently some of the stitches had pulled through Jenna's skin. The skin was dark at the edges of the surgery area.

Early on Monday 4/20 Ms. Bowen returned Jenna to Benessere for repair of this open surgical site. It is not clear whether the surgery took place on the afternoon of 4/20 or on 4/21, but during the procedure you trimmed the dead skin and pulled it back together, leaving open an area about the size of a fifty-cent piece. Ms. Bowen agreed to leave Jenna at Benessere to rest and heal.

Jenna remained at Benessere under your care from Monday 4/20 through approximately noon on 4/30, when Ms. Bowen removed her from your care against your wishes. During those approximately ten days Ms. Bowen called Benessere inquiring about Jenna's condition 11 times. You never spoke with or communicated with her about Jenna other than one Facebook message you sent in the early morning of 4/23.

Ms. Bowen included with her complaint a copy of the 4/23 Facebook message she received from you. Although some of the message is illegible, the substance of it is clear. You wrote:

Jenna's spirits are good and she is eating and drinking. Her healing is slow because of her hyperthyroidism and fatty tissue. She is making progress. I would like to hang on to her until Saturday. I think if we can keep her movement to a minimum a few more days she will be on her way and not have more healing complications.

The Committee has concluded that this was your only direct communication with Ms. Bowen about Jenna's condition between 4/20 and 4/30. Nevertheless, in your response to the complaint you wrote that:

Dr. Oliver informed owner that Jenna had opened and damaged all of her incisions. There was not enough tissue to close the wounds and she would be receiving wound care. Dr. Oliver noted that wounds were far too extensive and complicated to manage at home and owner indicated she understood.

Similarly, your medical record entry for 4/23 includes the following:

Notified client that Jenna's wounds were completely open and we would have to help them heal slowly from bottom up. We may be able to buy more complete closure as wound contracts with healing but for now must remain hospitalized as wounds are far too extensive and complicated to manage at home. Client stated she understands.

There are many inconsistencies and inaccuracies in your medical record, as Ms. Bowen's complaint and reply and accompanying materials illustrate. Many of those are hard for the Committee to reconcile, but on this issue, the Committee finds that your recollection of your communication with Ms. Bowen on 4/23 is faulty, as is your medical record note. The Committee finds that the only information you provided was the Facebook message, and further there was no communication from Ms. Bowen to you that she "understood."

The Committee cannot conclude whether these misstatements in your response are the result of your faulty recollection or incompetent recordkeeping, but the Committee's findings on this point further illustrate that your communications with Ms. Bowen about the condition of her dog were an act of incompetence in the practice of veterinary medicine.

When Ms. Bowen called the facility during these ten days, the limited information she received from staff members that Jenna was doing well and progressing well. That information was inaccurate. Jenna in fact was not progressing well and her wounds were increasing in scope and severity.

The Committee finds that your care of Jenna during this time reflects a continuing pattern of neglect and a lack of observation and attention to her condition. Your care included a number of acts of incompetence, as follows:

- You failed to determine at least by 4/21 the cause of the dehiscence and infection at the original surgical sites.
- You failed to address why the wounds were not healing.
- You failed to offer a culture and sensitivity tests at least by 4/22.

- At least by Friday, 4/24, you failed to refer Jenna for wound care. It is clear that she needed more treatment than you were providing. You should have recognized that further professional assessment was necessary.

- You failed to regularly and adequately communicate with Shannon Bowen about Jenna's increasingly deteriorating condition and her lack of healing. The single Facebook message you sent on 4/23 was totally inadequate and, as noted above, varies significantly from what you presented in your response as to what you say you communicated. She should have been provided accurate information in order to decide whether to seek other care, including specialized wound care.

- You failed to keep the wounds consistently clean and with fresh bandages. Although your medical record entries affirm that bandages were changed almost daily, information provided to the Committee by Crystal Bennett, as well as the condition of the wounds found by CVS staff on 4/30, undercuts the accuracy of those entries about bandage changes. For example, although the bandages may have been changed on Monday, 4/27, it appears they were not changed on 4/28, 4/29 and on the morning of 4/30. On 4/30 the bandages appeared to Ms. Bowen to be soaked with foul-smelling pus.

- On 4/22 the information provided to the Committee is that you were not at Benessere because that was your day off. Crystal Bennett requested by text message that you permit your relief veterinarian at the facility, Dr. Tyler Perkins, to look at an area on one of Jenna's legs that had started to dehisce. Your response was that Dr. Perkins should not examine or evaluate the dog's leg. Your failure to allow Dr. Perkins to do so was an act of incompetence. It has been hard for the Committee to reconcile Ms. Bennett's statements to the Committee with your response that you in fact treated the dog that day, even though it was your day off.

- Your neglect and the severity of Jenna's wounds are prominently reflected in the photographs taken at CVS on 4/30 and at Pointe South on the morning of 5/1. The CVS doctors worked on Jenna for several hours and applied fresh bandages. The wounds appeared very infected with pus and exudate. The graphic descriptions of the wounds by the CVS veterinarians as set forth specifically on Page 5, above, in the summary of Ms. Bowen's complaint, confirmed the dog's condition and your lack of competent treatment.

Ms. Bowen took Jenna home from CVS on 4/30 and early the next morning she sought a second opinion from Dr. Clint Berdeen at Pointe South Animal Hospital in Randleman. At this

presentation Ms. Bowen saw for the first time Jenna's unbandaged wounds. Dr. Berdeen found that Jenna could not stand using her rear legs and had to be carried into the Pointe South facility on a stretcher. Her wounds were "open, infected and necrotic with mucopurulent discharge." He found that the primary wound covered Jenna's entire abdominal area with a large flap of skin hanging open. The abdominal musculature was exposed. The dog's right leg had a large open wound with severe edema and seepage all along the leg.

Dr. Berdeen discussed options with Ms. Bowen and, as CVS doctors had communicated to her the previous afternoon, Dr. Berdeen gave Ms. Bowen a grave prognosis for Jenna because of infection, healing difficulties and the general pain associated with the wounds. Ms. Bowen consented to Dr. Berdeen performing humane euthanasia.

2. *You Failed to Competently Maintain Accurate Medical Records for Jenna.*

A significant issue presented to Committee No. 1 in this case has been trying to determine the accuracy of your medical record entries, primarily because Ms. Bowen has cited so many instances of what she has characterized as inaccurate and false statements. The Committee finds that you failed to maintain an accurate medical record for Jenna's stay at Benessere, and that failure was an additional act of incompetence. The errors in the medical record which constitute incompetent acts include the following:

(a) The record entries for 4/24, 4/25, 4/26, 4/27, 4/28 and 4/29 are all identical. It appears that you intentionally duplicated each of these days. Even if the entry for 4/24 is accurate, the Committee finds that it is not credible that virtually identical entries for the days 4/25 through 4/29 accurately reflect your treatment of Jenna.

(b) It appears that on 4/22 and 4/29 you were not at Benessere because those were your days off. The medical record entries for those days imply that you provided those treatments and the Committee does not find these entries completely credible. Moreover, information provided by Crystal Bennett is that her means of contacting you that day was by text message. The Committee cannot reconcile the statement in your response that you provided treatment to Jenna on 4/22.

(c) As noted earlier in this decision, your medical record for 4/23 detailing a communication with Ms. Bowen does not conform to the documentation she provided, namely the Facebook communication she received early that morning. The Committee finds this record

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entry was not accurate, including specifically that portion of the entry that you informed Ms. Bowen of Jenna's condition and she understood it. It is clear that Ms. Bowen was not aware of Jenna's condition until 4/30. Had she been, it is very likely she would have removed the dog from your care well before that day.

Letter of Reprimand

Based upon the foregoing findings of probable cause of violations of N.C.G.S. § 90-187.8(c)(6), and pursuant to Board Rule 21 NCAC 66.0601(h), the Committee issues you this letter of reprimand.

The investigation is concluded. The Board has approved the Committee's decision on Ms. Bowen's complaint.

Very truly yours,



George G. Hearn  
Attorney for the Board

GGH/vdw  
Enclosure

cc: Ms. Shannon Bowen  
Natalia K. Isenberg, Esq.  
Board Members  
Tod J. Schadler, DVM, Executive Director