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

IN THE MATTER OF: *

BADR OWEIS, D.V.M. *
LICENSE NO. 2099 DOCKET NO. 09-61
*
BELTWAY ANIMAL CLINIC & HOSPITAL
LICENSE NO. 03-104 *

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DECISION AND ORDER

The State Board of Veterinary Medical Examiners ("Board") is the State licensing authority that oversees the practice of veterinary medicine in Maryland. Under the Veterinary Practice Act, Md. Code Ann., Agric. Art., §2-301 et seq., the Board may prescribe reasonable standards for the practice of veterinary medicine, including conduct and ethics. The Board also may discipline a veterinarian who violates a law or regulation governing the practice of veterinary medicine in this State. In addition, the Board may suspend or revoke a hospital license if the owner fails to maintain the facility properly. Md. Code Ann., Agric. Art., §2-304.1. As noted more fully below, the Board has determined that Badr Oweis, D.V.M. ("Dr. Oweis"), the owner of Beltway Animal Clinic & Hospital ("Beltway"), located at 612 Edmondson Avenue, Catonsville, Maryland 21228, failed to maintain this facility properly and, for this reason, suspends its license for six months, effective February 1, 2010; however, as provided in the attached Order, on, near, or about the close of the first three months of this suspension, Dr. Oweis may request the Board to conditionally stay any remaining portion of the suspension period and conditionally permit him to re-open the facility, which the Board may do, if certain terms and conditions have been met and, in this event, place the facility and Dr. Oweis, as its owner, on probation for eighteen months.

In a Notice of Agency Action, dated August 31, 2009, the Board charged Dr. Oweis, the owner of Beltway, with:

A. Failing to maintain a sanitary hospital facility as required by COMAR 15.14.03.02A-G;

B. Failing to post in a conspicuous location his license registration and the hospital's license as required by COMAR 15.14.03.01-2A & C;

C. Failing to post notice that Beltway does not provide 24-hour supervision by a paid employee physically in the hospital as required by COMAR 15.14.01.16;

D. Failing to maintain adequate lighting as required by COMAR 15.14.03.05G;

E. Failing to properly dispose of sharps and instruments as required by COMAR 15.14.03.02H1; and

F. Failing to maintain a clean and sanitary surgical area as required by COMAR 15.14.03.04A-B.

On December 10, 2009, the Board conducted a hearing in this matter. Dr. Chris H. Runde, the Board's President, presided over the hearing. The following Board members were present: John L. Heizer, D.V.M., Vice President, Reggie R. Cox, D.V.M.; Secretary, Steven W. Kurtz, D.V.M., David L. Handel, D.V.M., Kimberly J. Cutchins, and Bernadette Morrissey Wood. Thomas F. Filbert, Assistant Attorney General, served as counsel to the Board. Claudia A. Diamond, Assistant Attorney General, presented evidence on the Board's behalf. Jeremy R. Krum, Esq. and Stephen L. Miles, Esq. represented Dr. Oweis.

Before the hearing, the Board, on its own initiative, consolidated the above-captioned matter with three other cases pending against Dr. Oweis, charging him with unprofessional conduct, providing substandard care to an animal, and maintaining substandard patient records. After Dr. Runde opened the proceedings, Mr. Krum, on behalf of Dr. Oweis, motioned to have each of the four cases heard separately, arguing that they did not involve a common subject matter. The Board granted the motion with respect to the above-captioned matter, ordering that it be heard separately from the remaining three cases.

During the course of the hearing in this matter, Ms. Diamond dismissed the charge

against Dr. Oweis alleging that he had failed to post notice that Beltway does not provide 24-hour supervision by a paid employee physically in the hospital as required by COMAR 15.14.01.16.

EXHIBITS

The following exhibits were introduced at the hearing:

Board Exhibit # 1: Inspection Report of Dr. Oweis' hospital conducted on January 28, 2009;

Board Exhibit # 2: Photograph portraying hospital exterior and sign;

Board Exhibit # 3: Photograph portraying hospital exterior (front view);

Board Exhibit # 4: Photograph portraying hospital exterior and front door, showing a missing door knob;

Board Exhibit # 5: Photograph portraying hospital exterior and front door, showing a missing door knob;

Board Exhibit # 6: Photograph portraying hospital interior (waiting area), showing a missing door knob;

Board Exhibit # 7: Photograph portraying hospital interior (waiting area), showing a missing door knob;

Board Exhibit # 8: Photograph portraying hospital exterior and vehicles;

Board Exhibit # 9: Photograph portraying hospital exterior;

Board Exhibit # 10: Photograph portraying hospital exterior, showing a boarded window;

Board Exhibit # 11A: Photograph portraying hospital interior (waiting area), showing aquariums;

Board Exhibit # 11B: Photograph portraying hospital interior (waiting area);

Board Exhibit # 11C: Photograph portraying hospital interior (examination room), showing numerous items on an examination table (including an adding machine and machine tape);

Board Exhibit # 12: Photograph portraying hospital interior (examination room), showing numerous items placed/stacked on: (a) counter top (including small refrigerator), (b) book shelves, and (c) cupboards;

Board Exhibit # 13: Photograph portraying hospital interior (examination room), showing numerous items placed/stacked on: (a) the examination table (including adding machine and machine tape), (b) a counter top (including small refrigerator), (c) book shelves, and (d) cupboards;

Board Exhibit # 14: Photograph portraying hospital interior (examination room), showing numerous items placed/stacked on: (a) a counter top (including small refrigerator), (b) book shelves, and (c) cupboards;

Board Exhibit # 15: Photograph portraying hospital interior (surgery), showing numerous items placed/stacked on: (a) the surgical table, and (b) a counter top (including open bottles);

Board Exhibit # 16: Photograph portraying hospital interior (surgery), showing numerous items placed/stacked on: (a) the surgical table, and (b) a computer table (including dirty keyboard);

Board Exhibit # 17: Photograph portraying hospital interior (surgery), showing: (a) numerous items placed/stacked on a counter top, and (b) a vacuum cleaner;

Board Exhibit # 18: Photograph portraying hospital interior (surgery), showing numerous items placed/stacked on a counter top (including uncapped syringes);

Board Exhibit # 19: Photograph portraying hospital interior (surgery), showing numerous items placed/stacked on a surgical table;

Board Exhibit # 20: Photograph portraying hospital interior (surgery), showing: (a) numerous items placed on, in, or under two cabinets (including hedge clippers, rusted surgical implements, and a dog's uterus kept in a bottle of formaldehyde (showing a pyometra, or an accumulation of pus within the uterus)), and (b) a dirty floor;

Board Exhibit # 20A: Photograph portraying hospital interior (surgery), showing: (a) numerous items placed in or under a cabinet (including hedge clippers, rusted surgical implements, and binders), and (b) a dirty floor;

Board Exhibit # 21: Photograph portraying hospital interior (surgery), showing a vacuum, a rusty air exchange vent, a trash can without a liner, and a rotting threshold;

Board Exhibit # 22: Photograph portraying hospital interior (surgery), showing numerous

items placed on a counter top (including an uncapped used syringe);

Board Exhibit # 23: Photograph portraying hospital interior (surgery), showing numerous items placed on a counter top (including uncapped used syringes);

Board Exhibit # 23A: Photograph portraying hospital interior (surgery), showing a counter top and sink;

Board Exhibit # 24: Photograph portraying hospital interior (surgery), showing numerous items placed on a computer desk (including dirty keyboard) and shelving (including an adding machine);

Board Exhibit # 25: Photograph portraying hospital interior (examination room), showing numerous items placed on a desk top;

Board Exhibit # 26: Photograph portraying hospital interior (stairway to kennel/storage area);

Board Exhibit # 27: Photograph portraying hospital interior (stairway to kennel/storage area);

Board Exhibit # 27A: Photograph portraying hospital interior (refrigerator in kennel/storage area), showing food, open food containers, and medicines;

Board Exhibit # 28: Photograph portraying hospital interior (refrigerator in kennel/storage area), showing food, open food containers, and medicines, and dirty shelving;

Board Exhibit # 29: Photograph portraying hospital interior (refrigerator in kennel/storage area), showing food, open food containers, and medicines, and dirty shelving;

Board Exhibit # 30: Photograph portraying hospital interior (refrigerator in kennel/storage area), showing food, open food containers, and medicines, and dirty shelving;

Board Exhibit # 31: Photograph portraying hospital interior (kennel/storage area);

Board Exhibit # 32: Photograph portraying hospital interior (kennel area);

Board Exhibit # 33: Photograph portraying hospital interior (kennel area);

Board Exhibit # 34: Photograph portraying hospital interior (kennel area), showing items

stored in kennels (including boxes of papers stored in kennel area), and a hole in the ceiling;

Board Exhibit # 35: Photograph portraying hospital interior (kennel area), showing items stored in kennels (including boxes of papers stored in kennel area), and a hole in the ceiling;

Board Exhibit # 36: Photograph portraying hospital interior (kennel area), showing items stored in kennels, and a dirty floor;

Board Exhibit # 37: Photograph portraying hospital interior (kennel/storage area), showing dirty sink;

Board Exhibit # 38: Photograph portraying hospital interior (kennel/storage area), showing stacked kennels (without animals);

Board Exhibit # 39: Photograph portraying hospital interior (kennel/storage area), showing sagging ceiling and holes or openings in ceiling;

Board Exhibit # 40: Photograph portraying hospital interior (kennel/storage area), showing shop-vacs, shelving, a refrigerator, and a dirty floor;

Board Exhibit # 41: Photograph portraying hospital interior (stairs leading from kennel/storage area), showing windows covered with black plastic; and

Board Exhibit #42: Typed report prepared by Board Inspector, Lawrence Blickman, pertaining to his January 28, 2009 inspection of Dr. Oweis' facility.

Dr. Oweis objected to Board Exhibits 2-10. These exhibits generally consisted of photographs that portrayed the hospital's exterior. Dr. Oweis argued that they were not relevant to the charges filed against him. In ruling on Dr. Oweis' objection, the Board noted that these photographs were relevant only with respect to the one charge alleging that Dr. Oweis failed to maintain a sanitary hospital facility as required by COMAR 15.14.03.02A-G; and that even with respect to this one charge, that they only had limited relevance. Dr. Oweis noted a similar objection to Board Exhibits 26 and 27. These exhibits were photographs of the hospital's interior, depicting the stairwell that led to the kennel/storage area. The Board sustained Dr. Oweis' objection to Board Exhibit 26.

Although the Board overruled Dr. Oweis' objection to Board Exhibit 27, it did so with the same caveat it noted for Board Exhibits 2-10. Finally, Dr. Oweis objected to Board Exhibit 39. This exhibit was a photograph of the hospital's kennel area, depicting duct work and a hole and some sagging in the ceiling. The Board likewise ruled that this photograph had limited relevance.

Dr. Oweis had collectively marked as Respondent # 1 for identification purposes eleven photographs of his hospital. All were recent photographs, that is, photographs that he had taken within the immediate two-week period preceding the Board's December 10, 2009 hearing. Dr. Oweis offered testimony concerning what they portrayed (which the Board considered). Specifically, Dr. Oweis testified that some photographs showed that his hospital had adequate lighting; and that other photographs showed (at least on the day they were taken) that the examination room was clean and that he had taken corrective measures to make sure that his facility is sanitary. Dr. Oweis, however, did not introduce the actual photographs into evidence.

DISCUSSION

The Board's inspector, Lawrence Blickman, testified that he conducted an announced inspection of Dr. Oweis' facility, noting that after speaking to Dr. Oweis on January 23, 2009, the two agreed that he would inspect the facility on January 28, 2009. On this point, Mr. Blickman testified that he ordinarily conducts unannounced inspections of hospital facilities, but that he did not do so in this instance because he was unable to gain entry to Dr. Oweis' hospital when he visited the facility unannounced on January 7, 8, 14, and 15, 2009. The fact that Mr. Blickman conducted an announced inspection of Dr. Oweis' facility is significant, given that Dr. Oweis had several days' advance notice of the Board inspection – something that most hospital owners ordinarily do not receive – and thus, several days' time to clean the hospital and otherwise make it neat and uncluttered. Despite the advance notice, however, when Mr. Blickman inspected the hospital on January 28, 2009, much of it was dirty. It also was not neat.

Instead, it was cluttered with numerous items that prevented the facility from being kept clean (that is, washed, scrubbed, vacuumed, mopped, or swept, using detergents and disinfectants, so as to keep the facility free of dirt, debris, and other harmful contaminants).

Specifically, Mr. Blickman testified that much of the facility was not clean; and that several rooms, including the examination room, the surgery, and the kennel/storage area, were dirty, not neat, but instead, as noted, cluttered with numerous items. During his inspection of the hospital, Mr. Blickman took numerous photographs of the facility. Some photographs portrayed the exterior of Dr. Oweis' facility; most, however, portrayed the hospital's interior, including the waiting area, the examination room, the surgery, and the storage/kennel area. The photographic evidence most relevant to this disciplinary action, that being, the photographs of the hospital's interior, corroborated Mr. Blickman's testimony that portions of the hospital and, in particular, the examination room, the surgery, and the kennel/storage area, were dirty, not neat, but instead, cluttered with various items that kept it from being sanitary.

Mr. Blickman testified that the examination room served as Dr. Oweis' office too, and that, as a result, the room, generally speaking, including the examination table, book shelves, a cupboard, and counter top, were cluttered with office equipment, books, and papers. Photographs 11C, 12, 13, 14, and 25 portrayed the hospital's examination room on January 28, 2009. These photographs show numerous items placed/stacked on:

(a) A counter top, including a small refrigerator,

(b) Book shelves,

(c) Cupboards,

(d) A desk, and most disturbingly,

(e) The examination table, including an adding machine and machine tape.

Mr. Blickman's testimony concerning the sanitary condition of the surgery was even more disturbing. He testified that the surgical floor was dirty; and that the threshold leading to an adjacent room was dirty and rotting. Like the examination room, Mr. Blickman observed that much of the surgery was cluttered with various items –

including, notably, uncapped used syringes. Photographs 16, 17, 18, 19, 20, 20A, 21, 22, 23, 23A, and 24 portrayed the hospital's surgery on January 28, 2009. These photographs show numerous items placed/stacked:

(a) On the surgical table,

(b) On a counter top (including uncapped used syringes and open bottles),

(c) On a computer table (including dirty keyboard),

(d) On shelving (including an adding machine), and

(e) On, in, or under two cabinets, including hedge clippers, rusted surgical implements, binders, and a dog's uterus kept in a bottle of formaldehyde (showing a pyometra, or an accumulation of pus within the uterus).

They also show: (a) a vacuum cleaner, (b) a dirty floor, (c) a rusty air exchange vent, (d) a trash can without a liner, and (e) a rotting threshold. Many of these items simply do not belong in a surgery and prevented it from being kept clean (that is, as noted, washed, scrubbed, vacuumed, mopped, or swept, using detergents and disinfectants, so as to keep the facility free of dirt, debris, and other harmful contaminants). Finally, concerning the surgery, Mr. Blickman testified that it did not contain an artificial respiration device.

Mr. Blickman's testimony about the condition of the kennel/storage area similarly showed that this area was dirty and cluttered. Photographs 34, 35, and 36 show numerous stacked boxes of papers stored in the kennel area. Photographs 36 and 40 show a dirty floor in the kennel/storage area. Photograph 37 shows a dirty sink in the kennel area. Photographs 27A, 28, 29, and 30 show the interior of a refrigerator housed in the kennel/storage area (containing medications, food, and open containers of food) that is not clean, but instead, filthy or otherwise unsanitary.

In stark contrast to the testimony of Mr. Blickman, Dr. Oweis opined that the hospital was clean, neat, and orderly on the date it was inspected. Dr. Oweis further testified that the hospital was cleaned after each shift. Dr. Oweis' opinion and testimony on this issue, however, simply was not credible. Indeed, contrary to Dr. Oweis' opinion, much of the hospital was dirty and disorderly; and given the clutter that Mr. Blickman observed throughout the hospital (corroborated by the photographs of the hospital's

interior), it is simply inconceivable that Dr. Oweis cleaned the facility after each shift. He certainly could not have cleaned the facility, that is, washed, scrubbed, vacuumed, mopped, or swept, using appropriate detergents, so as to keep it free of dirt, debris, and harmful contamination – as required under COMAR 15.14.03.02. Indeed, it was Dr. Oweis' opinion that his hospital was sanitation compliant on the date of inspection that is most disturbing – and needs to change if his hospital is to meet the minimal sanitation standards required of such facilities in the future.

As to the remaining charges, there was insufficient evidence to show that Dr. Oweis violated:

a. COMAR 15.14.03.02.C (keeping bedding in animal cages clean and dry);
b. COMAR 15.14.03.02.D (keeping animal cages clean and dry);
c. COMAR 15.14.03.02.E (keeping animal cages sanitized);
d. COMAR 15.14.03.02.F (requiring that waste containers and implements be maintained in a sanitary condition);
e. COMAR 15.14.03.02.G (requiring that medical wastes be handled in accordance with COMAR 26.13.11 and 10.06.06); and
f. COMAR 15.14.03.05G (requiring that the facility have certain lighting).

Finally, there was insufficient evidence to show that Dr. Oweis violated COMAR 15.14.03.01-2A & C (requiring that the hospital license and the veterinarian's registration be posted in a conspicuous location). Dr. Oweis posted his veterinary registration and the hospital's license on the wall of his examination room which, as previously noted, also served as his office. Although Dr. Oweis' use of this room is quite problematic, and the posting of his hospital license and registration is not ideal, these items still were posted in a sufficiently conspicuous location.

FINDINGS OF FACTS

1. Dr. Oweis, a licensed veterinary practitioner in this State, is, and was at the time of the incidents described in the above-captioned matter, the owner of Beltway Animal Clinic & Hospital located at 612 Edmondson Avenue, Catonsville, Maryland 21228.

2. On or about January 28, 2009, the Board's inspector, Lawrence Blickman, conducted an announced inspection of Dr. Oweis' facility. Ordinarily, the Board conducts unannounced inspections of veterinary hospitals. However, because Mr. Blickman was unable to gain entry to Dr. Oweis' hospital earlier that month, the Board opted to conduct an announced inspection of the facility. Specifically, on January 7, 8, 14, and 15, 2009, Mr. Blickman visited Dr. Oweis' facility to inspect it, but, on each occasion, could not gain entry to the hospital. For this reason, Mr. Blickman, on January 23, 2009, contacted Dr. Oweis by telephone, and the two agreed that he would inspect the hospital five days later, on January 28, 2009. Despite the five days' advance notice of the inspection, much of the hospital was not properly maintained in a sanitary condition.

3. On the day of the inspection, the examination room was not clean, but dirty. Additionally, it was not neat, but instead, cluttered with numerous items that prevented this room from being kept clean (that is, washed, scrubbed, vacuumed, mopped, or swept, using detergents and disinfectants, so as to keep it free of dirt, debris, and other harmful contaminants). The examination room also served as Dr. Oweis' office too, and, as a result, the room, generally speaking, including the examination table, book shelves, a cupboard, and counter top, were cluttered with office equipment, books, and papers. There were numerous items placed/stacked on:

(a) A counter top, including a small refrigerator,

(b) Book shelves,

(c) Cupboards,

(d) A desk, and most disturbingly,

(e) The examination table, including an adding machine and machine tape.

4. The surgery also was not clean, but dirty. Likewise, it was not neat, but instead, cluttered with numerous items that prevented this room from being kept clean (that is, washed, scrubbed, vacuumed, mopped, or swept, using detergents and disinfectants, so as to keep it free of dirt, debris, and other harmful contaminants). The surgical floor was dirty; the threshold leading to an adjacent room was dirty and rotting. There were

numerous items placed/stacked:

(a) On the surgical table,

(b) On a counter top (including uncapped used syringes and open bottles),

(c) On a computer table (including dirty keyboard),

(d) On shelving (including an adding machine), and

(e) On, in, or under two cabinets, including hedge clippers, rusted surgical implements and binders, and a dog's uterus kept in a bottle of formaldehyde (showing a pyometra, or an accumulation of pus within the uterus).

The surgery also contained: (a) a vacuum cleaner, (b) a rusty air exchange vent, and (c) a trash can without a liner. In addition, the surgery did not contain an artificial respiration device.

5. Used uncapped syringes were lying on a counter in the surgery and had not been disposed of in a rigid, tightly-lidded container impervious to puncture.

6. In addition, the kennel/storage area was not clean, but dirty. It too was not neat, but instead, cluttered with numerous items that prevented this room from being kept clean (that is, washed, scrubbed, vacuumed, mopped, or swept, using detergents and disinfectants, so as to keep it free of dirt, debris, and other harmful contaminants). The kennel/storage area floor was dirty. The kennel area also contained numerous stacked boxes of papers. The refrigerator housed in the kennel/storage area, used to store medications, food, and open containers of food, was not clean, but instead, filthy or otherwise unsanitary.

7. On the day of the inspection, there were no animals being kept at the facility. There was insufficient evidence to show that animal cages, and bedding for the animals, had not been kept clean and dry. Likewise, there was insufficient evidence to show the facility's lighting was not adequate. Finally, although the hospital's license and his registration were not ideally located, there was insufficient evidence to show that Dr. Oweis had failed to properly display them.

CONCLUSIONS OF LAW

Based on the foregoing findings of fact, the Board determines that:

1. Dr. Oweis, the owner of Beltway Animal Clinic & Hospital, located at 612 Edmondson Avenue, Catonsville, Maryland 21228, is guilty of violating the following provisions of COMAR 15.14.03.02:
    a. Regulation .02A (requiring that the animal facility be kept clean);
    b. Regulation .02B (requiring that the facility be neat and uncluttered; and be washed, scrubbed, vacuumed, mopped, or swept, using detergents and disinfectants, so as to keep it free of dirt, debris, and other harmful contaminants);

2. Dr. Oweis is guilty of violating COMAR 15.14.03.02H1, requiring proper disposal of sharps.

3. Dr. Oweis is guilty of violating COMAR 15.14.03.04A and B, requiring that the surgery be clean and sanitary, and requiring that it be properly equipped (such as being equipped with an artificial respiration device).

4. Dr. Oweis is not guilty of violating the following provisions of COMAR 15.14.03.02:
    a. Regulation .02C (keeping bedding in animal cages clean and dry);
    b. Regulation .02D (keeping animal cages clean and dry);
    c. Regulation .02E (keeping animal cages sanitized);
    d. Regulation .02F (requiring that waste containers and implements be maintained in a sanitary condition); and
    e. Regulation .02G (requiring that medical wastes be handled in accordance with COMAR 26.13.11 and 10.06.06).

5. Dr. Oweis is not guilty of violating COMAR 15.14.03.05G, requiring that the facility have certain lighting.

6. Dr. Oweis is not guilty of violating COMAR 15.14.03.01-2A & C, requiring that the hospital license and the veterinarian's registration be posted in a conspicuous location.

ORDER

Based on the foregoing findings of fact and conclusions of law, the Board, on this 28th day of January, 2010, hereby ORDERS:

1.) That the hospital license for Beltway Animal Clinic & Hospital (License No. 03-104), located at 612 Edmondson Avenue, Catonsville, Maryland 21228 is suspended for six months, which suspension shall take effect on February 1, 2010;

2.) That on, near, or about the close of the first three-months of this suspension, Dr. Oweis may request the Board to conditionally stay any remaining portion of the suspension period and conditionally permit him to re-open the facility, which the Board may do, if it finds that the terms and conditions specified below are met:

a.) Dr. Oweis has demonstrated to the Board's satisfaction that he has:

(i) Cleaned the facility, paying particular attention to the examination room, the surgery, and the kennel/storage room, ridding the hospital and these rooms of clutter (so that the facility, in general, and these rooms, in particular, may be washed, scrubbed, vacuumed, mopped, or swept, using appropriate detergents and disinfectants, to keep the facility and these rooms free of dirt, debris, and harmful contamination);

(ii) Properly equipped the surgery; and

(iii) Separated the office from the examination room;

b.) The facility passes Board inspection; and

c.) Dr. Oweis has specified in writing to the Board the days and core hours that the facility is regularly open to enable the Board, if need be, to conduct an unannounced inspection of the facility; and

3.) That unless and until the terms and conditions specified in paragraph 2, above, are

met, Dr. Oweis may not re-open the facility;

4.) That in the event that the Board conditionally stays any portion of the six-month suspension it imposed and conditionally permits Dr. Oweis to re-open the facility, that beginning on the date that this event occurs, Beltway Animal Clinic & Hospital and Dr. Oweis, as the hospital's owner, are placed on probation for a period of eighteen months, on the following terms and conditions:

a.) The facility shall be kept open at all times for Board inspection during the days and core hours that he has specified (except, however, the facility may be closed if Dr. Oweis provides the Board at least 24 hours advance notice of its closure, and specifies the period of time that it will be closed);

b.) The facility shall be kept clean, neat, and uncluttered, as set forth in COMAR 15.14.03; and

c.) If re-inspected, the facility shall pass inspection.

STATE BOARD OF VETERINARY
MEDICAL EXAMINERS

1-28-2010
Date

Chris H. Runde, D.V.M.
President, State Board of Veterinary
Medical Examiners
50 Harry S. Truman Parkway
Annapolis, MD 21401

cc: Badr E. Oweis, D.V.M.
Stephen L. Miles, Esquire
Jeremy R. Krum, Esquire
Members,State Board of
Veterinary Medical Examiners

Attach: Notice of Right to Appeal