Numerous veterinary publications have included articles about “firing” clients. This article is not intended as a review of all the circumstances under which a veterinarian in California might want to terminate an established Veterinary-Client-Patient Relationship (“VCPR”). Those circumstances vary, but often involve clients who were rude, non-compliant, demanding, and refused to pay for services. In a nutshell, a veterinarian can choose his or her clients as long as there are non-discriminatory reasons for terminating the relationship. The important factor is not “why” the client can be fired, but “how” and “when” the relationship can be terminated.

When clients are “fired” at an inappropriate time or in an inappropriate manner, the issue becomes one of “patient abandonment.” Allegations of patient abandonment can result in civil liability or administrative action. This article is not intended as a summary of the liability associated with patient abandonment, but briefly, a veterinarian could incur liability for negligence or for unprofessional conduct for patient abandonment. The following discussion is intended to provide guidance to California veterinarians regarding the proper way to “fire” a client and avoid charges of patient abandonment.

The California Veterinary Medicine Practice Act does not specifically address patient abandonment. Consequently, it is necessary to look towards other statutes and publications for guidance on this issue.

CALIFORNIA BUSINESS AND PROFESSIONS CODE SECTIONS 1680 AND 1950.5 REGARDING DENTISTS AND DENTAL HYGIENISTS

California Business and Professions Code sections 1680 (Dentists) and 1950.5 (Dental Hygienists) specifically provide definitions of patient abandonment, which is considered unprofessional conduct.

Section 1680(u) and 1950.5(s) provide in pertinent part: “Unprofessional conduct by a person licensed under this chapter is defined as, but is not limited to...the abandonment of the patient by the licensee, without written notice to the patient that treatment is to be discontinued and before the patient has ample opportunity to secure the services of another dentist, registered dental hygienist, registered dental hygienist in alternative practice, or registered dental hygienist in extended functions and provided the health of the patient is not jeopardized.”

A document entitled, Your Guide to California Dental Practice Act Compliance (March 2010), states that “It is unprofessional conduct to abandon a patient without written notice that treatment is to be discontinued, and before the patient has opportunity to secure the services of another dentist. It is recommended for the dentist to send the patient a certified letter terminating the relationship, with the reasons for the termination, an explanation that the dentist will remain available to the patient for no more than 30 days on an emergency basis or until the patient has found a new dentist.”

Under these statutes, the essential steps which must be taken in order to avoid patient abandonment are 1) provide written notice by certified letter that treatment is to be discontinued; and 2) allow sufficient time for the client to obtain the services of another dentist or hygienist; and 3) continue care to ensure that there is no harm to the health of the patient.

MEDICAL BOARD OF CALIFORNIA

The California Medical Practice Act does not contain a provision similar to the statutes for dentists and dental hygienists. Section 2234, which sets forth what may be included in charges of unprofessional conduct, does not specifically include patient abandonment. However, the Medical Board of California’s website contains a section entitled Terminating/Severing Physician/Patient Relationship, which states as follows:

Although a physician is allowed to sever or terminate the patient/physician relationship, in order to avoid allegations of patient abandonment (unprofessional conduct), a physician should notify patients of the following in writing when the physician wishes to discontinue care:

The last day the physician will be available to render medical care, assuring the patient has been provided at least 15 days of emergency treatment and prescriptions before discontinuing the physician’s availability.

Alternative sources of medical care, i.e., refer patient to other physicians, by name, or to the local medical society’s referral service.

The information necessary to obtain the medical records compiled during the patient’s care (whom to contact, how and where).

In addition, the Medical Board of California Consumer Complaint Form has a section entitled, “Office Practice,” which includes patient abandonment, and there is a specific jury instruction for medical negligence called Abandonment of Patient. That jury instruction, CACI 509 provides as follows:

[Name of plaintiff] claims [name of defendant] was negligent because [he/she] did not give [name of patient] enough notice before withdrawing from the case. To succeed, [name of plaintiff] must prove both of the following:
1. That [name of defendant] withdrew from [name of patient]’s care and treatment; and

2. That [name of defendant] did not provide sufficient notice for [name of patient] to obtain another medical practitioner.

However, [name of defendant] was not negligent if [he/she] proves that [name of patient] consented to the withdrawal or declined further medical care.

These references also stress the importance of written notice to the client. In addition, the Medical Board of California states that the patient must be given emergency treatment and prescriptions, referral to other treating physicians and the information regarding how to obtain a copy of the patient’s medical record.

**AMERICAN MEDICAL ASSOCIATION OPINION 8.115**

The American Medical Association issued the following Opinion in 1996: Physicians have an obligation to support continuity of care for their patients. While physicians have the option of withdrawing from a case, they cannot do so without giving notice to the patient, the relatives, or responsible friends sufficiently long in advance of withdrawal to permit another medical attendant to be secured.

This Opinion also stresses the importance of notice to the patient and sufficient time for the patient to find another physician.

**PRINCIPALS OF VETERINARY MEDICAL ETHICS OF THE AVMA AND THE CVMA CODE OF VETERINARY ETHICS**

The AVMA and CVMA ethics documents do not specifically address patient abandonment, but provide guidance on termination of the VCPR.

The CVMA Code of Veterinary Ethics, Guidelines to Professional Behavior, states that “Veterinarians may choose whom they will serve. Once they have undertaken care of a patient, they must not neglect the patient. In an emergency, however, they should render service to the best of their ability.”

Section II E of the Principals of Veterinary Medical Ethics of the AVMA states:

Veterinarians may choose whom they will serve. Both the veterinarians and the client have the right to establish or decline a Veterinarian-Client-Patient Relationship (See Section III) and to decide on treatment. The decision to accept or decline treatment and related cost should be based on adequate discussion of clinical findings, diagnostic techniques, treatment, likely outcome, estimated cost, and reasonable assurance of payment. Once the veterinarians and the client have agreed, and the veterinarians have begun patient care, they may not neglect their patient and must continue to provide professional services related to that injury or illness within the previously agreed limits. As subsequent needs and costs for patient care are identified, the veterinarians and client must confer and reach agreement on the continued care and responsibility for fees. If the informed client declines further care or declines to assume responsibility for the fees, the VCPR may be terminated by either party.

Section II F also provides:

In emergencies, veterinarians have an ethical responsibility to provide essential services for animals when necessary to save life or relieve suffering, subsequent to client agreement. Such emergency care may be limited to euthanasia to relieve suffering, or to stabilization of the patient for transport to another source of animal care.

These documents suggest that a veterinarian can not neglect a patient with whom they have a VCPR with respect to treatment that has been agreed upon for a specific injury or illness.

The AVMA document states that the VCPR may be terminated by either party as subsequent needs and costs are identified and the owner declines the additional care or refuses to pay additional fees. The AVMA document does not address the situation where the animal needs ongoing treatment and the owner agrees to the treatment, but the veterinarian wants to terminate the VCPR. In that case, it appears that the veterinarian is bound to continue with the treatment for that specific injury or illness. In addition, section F suggests that veterinarians are bound to provide some level of emergency care “to save life or relieve suffering, subsequent to client agreement.”

**SUMMARY**

In the absence of specific statutory guidance regarding patient abandonment in the veterinary setting, the prudent veterinarian should follow the guidance provided by the professional organizations, in addition to the specific statutory provisions for dentists and physicians. Specifically, a veterinarian cannot fire a client during treatment for a specific injury or illness when the client has consented to the treatment. Once the treatment has been completed, the veterinarian can fire the client if the client does not consent to additional treatment. The veterinarian has an obligation to provide emergency care to “save life or relieve suffering” subsequent to client agreement.

Following the provision of the agreed-upon care for the specific illness, injury or emergency, the veterinarian can terminate the relationship, but should follow the steps set forth in the statutes and guidance for dentists and physicians. Those steps include the provision of written notice sent by certified mail clearly stating the reasons for the termination and the date of the termination, referral information to other veterinarians, details regarding how to obtain a copy of the medical records and a statement that the veterinarian will continue to provide emergency treatment and prescriptions between the date of the notice and the date of termination. The date of termination should not be less than 15 days from the date of the notice. By following these steps, the veterinarian should be able to avoid the consequences of allegations of patient abandonment and possible civil and administrative liability.

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1 There is no federal or state law comparable to 42 U.S.C. 1395dd (EMTALA) or California Health and Safety Code section 1317 and, consequently, no cause of action similar to what is provided by those code sections.