



Complaints and the Investigation Process

The Nevada Veterinary Board was created in 1919 by the Nevada State Legislature for the protection of the public and their animals. It is composed of eight members appointed by the Governor. The rules and regulations promulgated by the Board and the Nevada Legislature can be found in Chapter 638 of the Nevada Revised Statutes (NRS) leg.state.nv.us/nrs/nrs-638.html and Nevada Administrative Code (NAC) leg.state.nv.us/nac/nac-638.html

Step 1



A Complaint is Submitted...

Complaints can be submitted by consumers/pet owners, licensees or practice employees, and other states agencies. When submitting a complaint, it is important to include as much relevant information as possible, including names, dates, times, and documentation when available. You will have an opportunity to speak to the investigator later in the investigative process. The complaint form can be found [here](#).

Step 2



Collecting Information

Once a complaint is received, notice is sent to the subject of the complaint to provide a response and medical records. Requests for medical records are also sent to other treating veterinarians or hospitals to ensure that the investigation is thorough and shows a full picture of patient care.

Step 3



Investigation and Assessment

The investigator takes all medical records, diagnostics imaging, statements, invoices, and other documentation and drafts a report-called a complaint assessment. The investigator will also reach out to the consumer/pet owner, licensed staff, and other relevant witnesses to conduct interviews regarding the case.

Step 4



Committee Review and Ruling

The case review (medical records, complaint assessment, and interview information)is redacted to ensure the ruling is made without prior knowledge of licensees. The committee may rule on a case by dismissal or disciplinary action. The committee may also request more information to be represented to the committee at the next meeting. Committees meet monthly, and all parties will be notified following the committee ruling.

Step 5



Possible Actions

Dismissed cases remain confidential and are closed. For disciplinary actions, staff will draft the proposed letter of reprimand to present to the licensee for settlement. If the licensee agrees to the terms, the reprimand will be reviewed by the full Board and will go into affect following the Board's vote to accept the reprimand. If a licensee does not choose to accept the settlement offer, the case proceeds to hearing. If a hearing goes forward, the consumer is noticed to attend and provide testimony. Settled discipline is publicly available on the Board website.



State of Nevada Board of Veterinary Medical Examiners

Send Form to:

4600 Kietzke Lane, Bldg. O, #265, Reno, NV 89502 (775)

688-1788 phone / (775) 688-1808 fax

Email: vetbdinfo@vetboard.nv.gov

Consumer Complaint

YOUR INFORMATION		VETERINARIAN(S), VETERINARY TECHNICIAN(S) NAMED IN COMPLAINT	
Name: _____		Name(s): _____	
Address: _____		_____	
City: _____ State: _____ Zip: _____		Facility Name: _____	
Daytime Phone# _____ Evening Phone # _____		Facility Address: _____	
Best number and time to call: _____		City: _____ State: _____ Zip: _____	
Email Address: _____		Date(s) of Treatment: _____	
ANIMAL'S INFORMATION			
Animal's Name: _____		Breed/Age/Sex: _____	Neutered or Spayed? Yes <input type="checkbox"/> No <input type="checkbox"/>
COMPLAINT			
Please tell us what happened, including, dates/times, names (if known), and what procedures occurred. Attach any documents you think will help the investigation (invoices, messages, or records). You may also add pages if needed to explain your concerns. _____ _____ _____ _____ _____ _____ _____ _____ _____ _____			

Have you discussed this complaint with the individual you are filing the complaint against? Yes No

If necessary, will you testify at a hearing regarding this complaint? Yes No

Did you seek care from another veterinarian or veterinary practice? Yes No

If so, please list their name and/or veterinary facility. We may need to request information for our investigation.

Name

Veterinary Facility

By submitting this complaint, I affirm that the information provided reflects my honest, good-faith account of events to the best of my knowledge and belief. I understand that the accuracy and completeness of the information I provide may affect how this complaint is reviewed and evaluated.

If I used any assistive technologies, including translation services or artificial intelligence tools, I acknowledge that I am responsible for reviewing the content before submission and confirming that it accurately represents my personal experience and statements. I understand that submitting information that is inaccurate, incomplete, or not reviewed by me may limit the ability of the Board to assess my complaint and may affect the outcome or consideration of this matter.

Signature

Date