



# The Application of Artificial Intelligence (AI) in Healthcare; An Interview With MayaMD.AI Founders

**By: Rachel V. Rose, JD, MBA**

## Overview

By now, you’ve heard the term Artificial Intelligence (“AI”). Simply stated, AI is intelligence demonstrated by machines, whereby natural intelligence (typically referred to as “IQ”) is displayed by humans and animals. According to John McCarthy, a leading authority at Stanford, “[i]t is the science and engineering of making intelligent machines, especially intelligent computer programs. It is related to the similar task of using computers to understand human intelligence, but AI does not have to confine itself to methods that are biologically observable.”<sup>1</sup>

So, what is the potential for AI in healthcare? First and foremost, it should be noted that AI is a compliment to and not a substitution for traditional person-to-person medical care. According to a publication posted by the U.S. Department of Health and Human Services (“HHS”):

Artificial intelligence can help transform healthcare by improving diagnosis, treatment, and the delivery of patient care. Researchers in academia, the private sector, and government have gained increasing access to large amounts of health data and high-powered, AI-ready computing systems. These powerful tools can greatly improve doctors’ abilities to diagnose their patients’ medical issues, classify risk at a patient level by drawing on the power of population data, and provide much-needed support to clinics and hospitals in under-resourced areas.<sup>2</sup>

Additionally, as noted in its February 2020 publication, *A.I. Application and Security Implications in the Healthcare Industry*, HHS cites data from Accenture, which estimates AI in healthcare will be a \$6.6 billion market by 2021.<sup>3</sup> Needless to say, AI is here to stay.

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## MISSION STATEMENT

The Nevada State Board of Medical Examiners protects the public and serves the State of Nevada by ensuring that only well-qualified, competent physicians, physician assistants, practitioners of respiratory care and perfusionists receive licenses to practice in Nevada. The Board responds with expediency to complaints against our licensees by conducting fair, complete investigations that result in appropriate action. In all Board activities, the Board shall place the interests of the public before the interests of the medical profession and encourage public input and involvement to help educate the public as we improve the quality of medical practice in Nevada.

# BOARD NEWS

## NEW LICENSING SOFTWARE SYSTEM

The Board has a new licensing software system. Licensees may now create a login through the Licensee Portal on the Board's website, to update their address or request a written license verification, among other things. Applicants for licensure may now apply online.

The Board also has a new payment processing system, and can no longer accept payment by personal or business check for any items. The Board now accepts payment by cashier's check, money order or credit card only.

## 2021 LICENSURE RENEWAL

**MEDICAL DOCTORS:** Pursuant to Nevada Revised Statute 630.30665, you are required to submit to the Nevada State Board of Medical Examiners the requisite in-office surgery reporting form for the period of January 1, 2019 through December 31, 2020, **prior** to renewing your license in 2021, and you will be required to attest on your renewal application that you are in compliance with the reporting requirements of NRS 630.30665. Forms are available on the Board's website at [www.medboard.nv.gov](http://www.medboard.nv.gov).

**Information regarding renewal of licensure for all licensees of the Board will be provided in the Board's April Newsletter.**

At the direction of Governor Sisolak, the Nevada State Board of Medical Examiners office will be closed to the public until further notice. For assistance during this time, please email [nsbme@medboard.nv.gov](mailto:nsbme@medboard.nv.gov).

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## THE LAS VEGAS OFFICE HAS MOVED

The Board's Las Vegas office has relocated to 325 E. Warm Springs Road, Suite 225, Las Vegas, Nevada 89119. Telephone and fax numbers remain the same.

### BOARD MEMBERS

Rachakonda D. Prabhu, MD, *President*

Mr. M. Neil Duxbury, *Vice President*

Ms. April Mastroluca, *Secretary-Treasurer*

Victor M. Muro, MD

Aury Nagy, MD

Michael C. Edwards, MD, FACS

Weldon Havins, MD, JD, LLM

Ms. Maggie Arias-Petrel

Bret W. Frey, MD

Edward O. Cousineau, JD, *Executive Director*

### **NOTIFICATION OF ADDRESS CHANGE, PRACTICE CLOSURE AND LOCATION OF RECORDS**

Pursuant to NRS 630.254, all licensees of the Board are required to "maintain a permanent mailing address with the Board to which all communications from the Board to the licensee must be sent." A licensee must notify the Board in writing of a change of permanent mailing address within 30 days after the change. Failure to do so may result in the imposition of a fine or initiation of disciplinary proceedings against the licensee.

Please keep in mind the public address you provide will be viewable by the public on the Board's website.

Additionally, if you close your practice in Nevada, you are required to notify the Board in writing within 14 days after the closure, and for a period of 5 years thereafter, keep the Board apprised of the location of the medical records of your patients.

In light of the increasing utilization of AI in healthcare, I contacted Christian Haberman, MBA, a business school classmate of mine, as well as Dr. Vipindas Chengat, his fellow co-founder of MayaMD.AI,<sup>4</sup> a Nevada corporation, in order to gain a practical understanding of AI in healthcare. The purpose of this article is not to address various regulatory considerations, nor is it an endorsement of any particular AI platform; rather, it is to give physicians and other providers an understanding of how AI works and how it is being deployed from a practical standpoint in a variety of clinical settings and disease management scenarios.

### Q&A

**RR: The use of AI appears to have “exploded” in recent years. From your perspective, what led to its increased use in healthcare and why did you co-found MayaMD?**

**VC/CH:** AI has been utilized in healthcare for many decades actually, but more recently, and especially this past decade, it’s taken off for a few reasons. There’s so much excitement around its potential, and along with that has come a tsunami of money invested in this space. The EHR has been a real game changer, as well as the processing speed of computers today. All of this momentum and data collection has created a kind of perfect storm for growth. We believe this is a new chapter and an exciting time in the healthcare industry.

**RR: What are the different types of solutions that various AI companies like MayaMD offer?**

**VC/CH:** This is where AI gets so exciting and shows unlimited potential. Right now we are witnessing some major breakthroughs, like in radiology, how AI is assisting lab evals and in some cases actually out performing human efforts. At MayaMD, we use AI to help patients and providers receive timely and appropriate triage and care coordination insight. In turn, patients receive the appropriate care and providers can use their time and financial resources more efficiently and effectively. Way too much time and money are spent on patients receiving care at facilities where it’s not efficient for either the patient or the provider. We hope to alter this behavior with our AI solution acting like a digital front door for triage, creating a more convenient and user-friendly patient experience. Our AI engine, MayaMD, can collect over 25 decision points in less than 90 seconds from the patient via our app. With this data it creates a secure, shareable clinical note with differentials sorted by probability, suggested labs, physical signs, and triage with maps to the nearest provider. This e-note can be instantly sent to the patient's provider, so that on the other end, the provider has the intake done in seconds -- saving documentation time, which has been the bane of clinics today.

Locally, here in Las Vegas, we are just starting some AI projects with a nephrologist group, helping to educate and manage their patients with chronic kidney disease (CKD). Our clinical engine is versatile and customizable; therefore, we can create chronic disease management algorithms very quickly for just about any condition. Working with this local nephrology group, we are creating treatment, as well as health literacy algorithms, that can be used not only just for patients with CKD in Las Vegas, but anywhere. It’s exciting indeed.

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**RR: How can AI be utilized in value-based or patient-centered care, which is the cornerstone of Accountable Care Organizations (“ACOs”), as well as the Affordable Care Act (“ACA”)?**

**VC/CH:** AI can be a real game changer and positive asset for ACOs since the key objectives include trying to optimize performance and improve patient outcomes by delivering high quality care. By utilizing AI machine learning to better understand a patient population, ACOs can structure their programs and infrastructure to support patients in an effective and efficient manner. For example, using data insight to reduce unnecessary Emergency Room visits and costly readmissions, as well as implementing preventive treatment programs to minimize expensive reactionary procedures, which may have been avoided. With more data insight, clinicians can get ahead of the treatment curve to ideally manage their patients’ health more effectively. AI data insight can allow a clinician to behave more proactively, which is ideal for all of us.

**RR: It is my understanding that the American Medical Association is providing grants for companies to work with universities. How does MayaMD hope to utilize the grant to explore AI in relation to diagnosis error rates?**

**VC/CH:** We actually had four leading universities and a national organization, the Society to Improve Diagnosis in Medicine (SIDM), support us for an AMA grant last year. This grant enabled us to create a clinical reasoning curriculum for students, which integrates into our platform. With this educational program we hope to help students understand cognitive bias and how it relates to diagnosis error. We work with some top medical universities and try to improve students’ clinical reasoning and diagnostic accuracy. It’s energizing, and it is just in its infancy.

**RR: During COVID-19, telehealth utilization became necessary to continue care when possible. How can AI integrate with and be utilized in tandem with telemedicine? And, how does this differ from its application to in-person treatment?**

**VC/CH:** AI applications during the pandemic have been quite useful, from simple symptom checking algorithms used in chatbots to more complex things where patient data is being analyzed using machine learning to help us better understand risk factors and safety protocols. The engine captures appropriate patient history in less than a minute, which can improve efficiency of telehealth visits. The tool can also perform a “pre-triage” and determine if a particular symptom or symptoms are appropriate for a teleconsultation or whether the patient would require an Emergency Room visit.

**RR: What is some practical advice for providers who want to integrate AI either into their practice or enable their patients to utilize it to potentially improve disease outcomes?**

**VC/CH:** One of the biggest challenges is the lack of structure in EHR data. Most of the EHRs are modified billing systems and are not designed to assist with clinical decision making. A lot of times, there is too much noise in the data or lack of completeness. MayaMD can change that. AI can help to capture data in a structured format, which can subsequently be used in an efficient manner by the machine learning algorithms.

But if a physician is uncertain as to where to start incorporating AI into a practice, then start small, learn to crawl, walk, and then eventually run. It is suggested to review one's health system or practice and select a few areas where a physician feels AI could help improve performance. Then, form a team to manage the research, vendor selection, and cost benefit analysis, as well as the crucial workflow integration. It's definitely beneficial to have some fantastic data insights that AI can allow, but you need internal buy-in or utilization to get a return. We recommend that clinics take an incremental approach for implementation.

## Conclusion

While AI is not a panacea and is not perfect, it can be used as another tool for both providers and patients to improve clinical outcomes. Additionally, because of its predictive nature (depending on the sample size and variables), it may be helpful in managing large-scale issues, such as COVID-19. Hopefully, this article provided a bit more insight into this evolving area of technology and its intersection with healthcare.

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<sup>1</sup> Stanford University, *What is AI?/Basic Questions*, <http://jmc.stanford.edu/artificial-intelligence/what-is-ai/index.html> (last visited Nov. 14, 2020).

<sup>2</sup> Center for Open Data Enterprise, *Sharing and Utilizing Health Data for AI Applications – Roundtable Report* (2019), <https://www.hhs.gov/sites/default/files/sharing-and-utilizing-health-data-for-ai-applications.pdf>.

<sup>3</sup> HHS, *A.I. Application and Security Implications in the Healthcare Industry* (Feb. 6, 2020), <https://www.hhs.gov/sites/default/files/ai-application-and-security-implications-in-healthcare-industry.pdf?language=en>

<sup>4</sup> MayaMD.AI, <https://mayamd.ai/about-us/> (last visited Nov. 14, 2020).

Rachel V. Rose – Attorney at Law, PLLC (Houston, Texas) - advises clients on healthcare, cybersecurity and *qui tam* matters. She also teaches bioethics at Baylor College of Medicine. She has consecutively been named by *Houstonia Magazine* as a Top Lawyer (Healthcare) and to the National Women Trial Lawyers - Top 25. She can be reached at [rvrose@rvrose.com](mailto:rvrose@rvrose.com).

*Disclaimer: The opinions expressed in the article are those of the authors, and do not necessarily reflect the opinions of the Board members or staff of the Nevada State Board of Medical Examiners.*

# Electronic Death Registry System (EDRS) – Getting Access in Preparation of a Passing Patient

**By: Shana Rhinehart, Management Analyst - I, Nevada Office of Vital Records**

There are steps you should take before your patient passes. The first is to understand the law regarding death certificate timeliness, your responsibilities, and the tools available to make your part of the death certificate process easier, faster, and less stressful.

The law states that death certificates must be complete within 72 hours from death or discovery (NRS 440.490). In an ideal world, the funeral home starts the record within 24 hours and assigns the medical certifier. The medical certifier has 24 hours to complete the medical information and sign. The remaining 24 hours is for registrars to review and sign. Somewhere in these 72 hours, the family has to confirm details about the decedent to the funeral home.

## What do you need to know about death certificates?

1. Anyone who has terminally ill patients, works at a hospice/rehabilitation facility, specializes in geriatrics, or works in an emergency room should have access to the EDRS.

**Before** the death occurs, get your access to the EDRS, install it on your PC, and take the training for physicians.

2. The timeline to sign is very tight.

Physicians only have 24 hours to sign the death record once it has been assigned to them (NRS 440.415(4)). If the record is rejected, physicians have an additional 24 hours to correct and re-sign (NAC 440.160(4)).

3. What are you responsible for on the death record?

Certifiers are responsible for the following: date of birth, date of death, time of death, cause of death, and the social security number. You are responsible for any corrections to this information.

4. How to determine if the death certificate is your responsibility or belongs to the Coroner/Medical Examiner?

Responsibility is covered in-depth during the physician's training sponsored by the Office of Vital Records. System training occurs via Teams and takes one hour.

5. How to install and navigate the existing EDRS?

The existing EDRS is old and has specific system requirements. You cannot just click on the link, enter your login, and expect the system to function. You must pre-install the system requirements in 3 simple steps (included with your login information). While the Office of Vital Records is looking into a new or upgraded system that does not require any downloads and works on multiple browsers, this will take some time. In the meantime, the Office of Vital Records offers installation assistance appointments and training. Please contact us via email at [OVRHELP@health.nv.gov](mailto:OVRHELP@health.nv.gov).

6. Who can sign a death record?

Medical Doctors (MD), Doctors of Osteopathy (DO) and Advanced Practice Registered Nurses (APRN).

7. Can I have my assistant enter the information for me to review and sign?

Yes. Vital Records created system roles for your assistant. Your assistant must have their own separate login. Please have your assistant contact our office for access.

**Disclaimer: The opinions expressed in the article are those of the author, and do not necessarily reflect the opinions of the Board members or staff of the Nevada State Board of Medical Examiners.**

# Use of Potentially Impairing Medications a Risk to Aviation

In our December 2014 newsletter, the Board shared a report by the National Transportation Safety Board (NTSB) and findings that emphasize the importance of routinely discussing with patients the effect that their diagnosed medical conditions or use of certain impairing drugs may have on their ability to safely operate a vehicle in any mode of transportation, including aviation. The use by pilots of potentially impairing medications still poses a significant safety risk. Accordingly, the Board would like to again share the key findings of the NTSB's report with our licensees, and reemphasize their professional obligations under Nevada law in addressing these risks.

## **First Step - Understanding Drug Use and Accident Risk**

The NTSB studied the prevalence of drug use by pilots who died in crashes, and found an upward trend in the use of both potentially impairing medications and illicit drugs. Almost all of the crashes studied – 96 percent – were in general aviation, not commercial aviation.

"I think that the key take-away from this study for every pilot is to think twice about the medications you're taking and how they might affect your flying," said NTSB Acting Chairman Christopher A. Hart. "Many over-the-counter and prescription drugs have the potential to impair performance, so pilots must be vigilant to ensure that their abilities are in no way compromised before taking to the skies."

The study analyzed toxicology results for 6,677 pilots who died in aircraft accidents between 1990 and 2012. None of the pilots who died in large airline accidents had recently used illicit drugs, though some had been using potentially impairing medications.

Over the period studied, the proportion of pilots testing positive for drugs with impairment potential nearly doubled from about 11 percent to almost 23 percent. The most common impairing drug was a sedating antihistamine (diphenhydramine) found in many cold and allergy medications as well as sleep aids.

Study authors emphasized that it could not be stated with certainty that more pilots are actually flying impaired. While the study noted that the greater use of medications pointed to an increasing risk of impairment, it stressed that further research is needed to better understand the relationship between drug use and accident risk. Since 1990, the NTSB cited pilot impairment as a cause or contributing factor in about 3 percent of fatal accidents, a figure that was relatively stable over the study period.

Importantly, the study explained that it was difficult to ascertain whether a pilot who tested positive was actually impaired at the time of the accident. However, the study did say that, in increasing numbers of accidents, pilots chose to fly after taking potentially impairing drugs, suggesting that some pilots are either unaware of the risks that such drugs present or consider such risks acceptable.

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Illicit drug use was relatively uncommon among the study population, increasing from 2.4 percent of pilots who died in accidents in the 1990s to around 4 percent by 2012, largely due to increasing marijuana use.

The study included 6 safety recommendations, all related to gathering better information about impairment in transportation or urging better dissemination of information on potentially impairing drugs to pilots and others.

In addition to the safety recommendations, the NTSB issued a safety alert urging pilots to consult medical professionals about the potentially impairing effects of any drug that they are taking, carefully read medication dosing instructions, and to refrain from flying if they feel impaired in any way.

### **Nevada Practitioners Must Address the Risks Related to the Use of Controlled Substances When Prescribing Them to Patients**

Nevada law establishes requirements for practitioners who prescribe controlled substances in Nevada Revised Statutes (NRS) Chapter 639. NRS 639.23911 requires that practitioners prescribing controlled substances listed in schedule II, III, or IV for the treatment of pain, “[p]erform an evaluation and risk assessment of the patient” and “[o]btain informed consent” from the patient or patient’s legal guardian as required by NRS 639.23912. Part of the informed consent must include discussion of “[t]he potential risks and benefits of treatment using the controlled substance” and “[p]roper use of the controlled substance.” While these provisions do not specifically address the ability of a patient to safely operate a vehicle in any mode of transportation while taking controlled substances, such is an obvious risk of use of controlled substances about which physicians and physicians assistants should be aware and that should be included in informed consents and discussed in the consenting process. Failure of a physician or physician assistant to follow the requirements contained in NRS Chapter 639 with regard to prescribing is grounds for the Board to initiate disciplinary action against a physician or physician assistant pursuant to NRS 630.306(1)(b)(3).

In addition, in Nevada Administrative Code (NAC) 630.187, the Board has adopted the *Guidelines for the Chronic Use of Opioid Analgesics* published by the Federation of State Medical Boards, which are available at: [https://www.fsmb.org/siteassets/advocacy/policies/opioid\\_guidelines\\_as\\_adopted\\_april-2017\\_final.pdf](https://www.fsmb.org/siteassets/advocacy/policies/opioid_guidelines_as_adopted_april-2017_final.pdf). On the top of page 9 of the *Guidelines*, “risk of impaired motor skills (affecting driving and other tasks)” is mentioned as an item that doctors “may” include in informed consent when prescribing opioids, as well as a more general reference recommending that the risks and benefits of opioids and potential side effects of opioid use be included in informed consent.

Accordingly, Nevada law establishes that Nevada practitioners should address the risks to public safety of their patients using impairing medications while operating motor vehicles and aircraft.

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Complete NTSB Safety Study, available at: <https://www.nts.gov/safety/safety-studies/Documents/SS1401.pdf>.

Office of Public Affairs - 490 L'Enfant Plaza, S.W., Washington, DC 20594

# Nevada Healthcare Boards: Violations of Public Records Act and Inaccessibility of Licensee Information

*By: Stephanie Quan, OMSII; squan2@student.touro.edu*

*Ryliezl Abby Reyes, OMSII; rreyes14@student.touro.edu*

*Joseph P. Hardy, MD, Associate Dean for Clinical Education; joseph.hardy@tun.touro.edu*  
*Touro University Nevada College of Osteopathic Medicine*

## **Abstract**

The Nevada Public Records Act (codified in NRS Chapter 239) enables the public's right to inspect, copy or receive a copy of records and non-confidential information regarding healthcare providers. Because each Nevada healthcare board is an independent entity, there is inconsistent compliance with NRS Chapter 239. This study determines the extent of the inconsistencies in the availability and accessibility of public records, identifies inadequacies in the statutes with regard to public records, and proposes potential amendments to the statutes to address the inconsistencies and deficiencies found. Ten healthcare boards were included in this study and evaluated on 1) detailedness of individual practice acts; 2) compliance with NRS Chapter 239; and 3) quality, quantity, and ease of access to public records, particularly licensee information. Seven out of ten healthcare boards were in violation of NRS Chapter 239 and there was high a variability in the ease of access to public records and the types of information on licensees made available. We found a potential correlation between more comprehensive statutory guidelines on handling of public records and greater accessibility of public records. We propose that the Nevada Legislature enact specific amendments to each of the healthcare board's individual practice acts and to NRS Chapter 239 to ensure availability of relevant, non-confidential information regarding licensees which the public can utilize to select and evaluate healthcare providers. The proposed amendments should establish detailed provisions for maintenance of a comprehensive website and raise the penalty for any violation from a civil penalty to a misdemeanor charge. These proposed changes to Nevada law will aid in improving transparency and healthcare consumer protection in Nevada.

***For more information, please contact the authors.***

## Additional Credit Available for Completion of Certain Continuing Medical Education Courses

Physicians and physician assistants that take continuing education courses on the diagnosis of rare diseases, geriatrics and gerontology, and on the recent developments, research and treatment of Alzheimer's disease or other forms of dementia will receive twice the number of hours actually spent in the continuing education course, up to a maximum additional credit of four total hours for all subjects during that biennial licensing period.

For example, if a physician or physician assistant takes a continuing education course on the diagnosis of rare diseases that includes four classroom hours, he or she may receive credit for a total of eight hours toward the continuing medical education required to renew his or her license. However, if a physician or physician assistant takes a continuing education course on the research and treatment of Alzheimer's disease that includes five classroom hours, he or she may only receive credit for nine hours, which includes five classroom hours plus the maximum four hours of additional credit, toward the continuing medical education required to renew his or her license. Similarly, a physician or physician assistant who takes a continuing education course in geriatrics and gerontology that includes four classroom hours and a continuing education course in the diagnosis of rare diseases that includes two classroom hours, may receive credit for a total of ten hours toward the continuing medical education required to renew his or her license, which includes four hours for the geriatrics and gerontology course, two hours for the diagnosis of rare diseases course, and the maximum four hours of additional credit.

For more information, please review NAC 630.155 and NAC 630.357, as amended by LCB File No. R086-19 and effective as of December 29, 2020. A link to this regulation is available on the Board's website by clicking the link titled "R086-19" at <http://medboard.nv.gov/About/Governing-Statutes-and-Regulations/>.

**WHOM TO CALL IF YOU  
HAVE QUESTIONS**

Management: Edward O. Cousineau, JD  
Executive Director  
Sarah A. Bradley, JD, MBA  
Deputy Executive Director  
Donya Jenkins  
Finance Manager  
Administration: Laurie L. Munson, Chief  
Legal: Robert Kilroy, JD  
General Counsel  
Licensing: Lynnette L. Daniels, Chief  
Investigations: Ernesto Diaz, Chief

**2021 BME MEETING & HOLIDAY  
SCHEDULE**

**January 1** – New Year’s Day  
**January 18** – Martin Luther King, Jr. Day  
**February 15** – Presidents’ Day  
**March 5** – Board meeting (Las Vegas)  
**May 31** – Memorial Day  
**June 4** – Board meeting  
**July 5** – Independence Day (observed)  
**September 6** – Labor Day  
**September 10** – Board meeting  
**October 29** – Nevada Day  
**November 11** – Veterans’ Day  
**November 25 & 26** – Thanksgiving Day & Family Day  
**December 3** – Board meeting (Las Vegas)  
**December 24** – Christmas (observed)  
**December 31** – New Year’s Day 2022 (observed)

**Nevada State Medical Association**

5355 Kietzke Lane  
Suite 100  
Reno, NV 89511  
775-825-6788  
<http://www.nvdoctors.org>

**Clark County Medical Society**

2590 East Russell Road  
Las Vegas, NV 89120  
702-739-9989 phone  
702-739-6345 fax  
<http://www.clarkcountymedical.org>

**Washoe County Medical Society**

5355 Kietzke Lane  
Suite 100  
Reno, NV 89511  
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775-825-0785 fax  
<http://www.wcmsnv.org>

**Nevada State Board of Pharmacy**

985 Damonte Ranch Pkwy, Ste. 206  
Reno, NV 89521  
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775-850-1444 fax  
<http://bop.nv.gov/>  
[pharmacy@pharmacy.nv.gov](mailto:pharmacy@pharmacy.nv.gov)

**Nevada State Board of Osteopathic Medicine**

2275 Corporate Circle, Ste. 210  
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**Nevada State Board of Nursing**

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*Unless otherwise noted, Board meetings are held at the Reno office of the Nevada State Board of Medical Examiners and videoconferenced to the conference room at the Las Vegas office of the Nevada State Board of Medical Examiners, 325 E. Warm Springs Road, Suite 225, in Las Vegas.*

# DISCIPLINARY ACTION REPORT

**ADDO-QUAYE, Bernard K., M.D. (9413)**  
**North Las Vegas, Nevada**

Summary: Alleged engaging in conduct that violated Pharmacy Board regulations.

Charges: One violation of NRS 630.306(1)(b)(3) [engaging in conduct which is in violation of a regulation adopted by the State Board of Pharmacy].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Dr. Addo-Quaye violated NRS 630.306(1)(b)(3), as set forth in the First Amended Complaint, and imposed the following discipline against him: (1) public reprimand; (2) \$500.00 fine; (3) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter.

**BRUCE, Victor R., M.D. (18273)**  
**North Las Vegas, Nevada**

Summary: Alleged engaging in conduct that violated Pharmacy Board regulations.

Charges: One violation of NRS 630.306(1)(b)(3) [engaging in conduct which is in violation of a regulation adopted by the State Board of Pharmacy].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Dr. Bruce violated NRS 630.306(1)(b)(3), as set forth in the First Amended Complaint, and imposed the following discipline against him: (1) public reprimand; (2) \$500.00 fine; (3) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter; (4) Dr. Bruce shall undergo either an independent peer review examination or a Physician Assessment and Clinical Education (PACE) examination to assess his current clinical competency to practice medicine. The examination shall be conducted pursuant to NRS 630.318, shall be conducted by a provider approved by the Board in advance, and the examiner shall, within 60 days of completion of the examination, render an opinion and report to the Board. The examination and report shall be performed at Dr. Bruce's sole expense. (5) Dr. Bruce shall remain prohibited from writing prescriptions until further order of the Board.

**CANDRILLI, Melissa T., RRT (RC1511)**  
**North Las Vegas, Nevada**

Summary: Alleged inability to practice respiratory therapy with reasonable skill and safety, willful and intentional false statement in renewal of license, and failure to timely notify the Board of Medical Examiners of a change in her permanent mailing address.

Charges: One violation of NRS 630.306(1)(a) [inability to practice respiratory therapy with reasonable skill and safety because of illness, a mental or physical condition or the use of alcohol, drugs, narcotics or any other substance]; one violation of NAC 630.540(1) [willfully and intentionally making a false or fraudulent statement in renewing a license]; one violation of NRS 630.306(1)(j) [failure to notify the Board, in writing, within 30 days, of a change in her permanent mailing address].

Disposition: On December 4, 2020, the Board found Ms. Candrilli violated NRS 630.306(1)(a) and NAC 630.540(1), as alleged in Counts I and II of the Complaint, and imposed the following discipline against her: (1) Ms. Candrilli's license to practice respiratory care in Nevada shall remain suspended until further order of the Board; (2) public reprimand; (3) total fines in the amount of \$3,000.00; (4) she enter, within 30 days, a 5-year contract with Professional Recovery Network (PRN) for treatment of alcohol and substance abuse disorder and any other issues determined upon examination, and she undergo periodic drug and alcohol testing as directed by PRN to assure her complete abstinence from mood-altering substances for the duration of her contract with PRN; (5) she undergo a psychiatric examination by PRN within 60 days; (6) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter, pursuant to the Memorandum of Costs. Count III of the Complaint had been dismissed at the time of the hearing on the matter.

**HOSALKAR, Harish S., M.D. (15200)**  
**San Diego, California**

Summary: Disciplinary action taken against Dr. Hosalkar's medical license in California and alleged failure to timely

report said disciplinary action to the Nevada State Board of Medical Examiners.

Charges: One violation of NRS 630.301(3) [disciplinary action taken against his medical license in another state]; one violation of NRS 630.306(1)(k) [failure to report in writing, within 30 days, disciplinary action taken against him by another state].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Dr. Hosalkar violated NRS 630.301(3), as set forth in Count I of the Complaint, and imposed the following discipline against him: (1) public reprimand; (2) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter. Count II of the Complaint was dismissed with prejudice.

**HYSON, Morton I., M.D. (6062)**  
**Las Vegas, Nevada**

Summary: Alleged failure to maintain appropriate medical records relating to his treatment of two patients and knowing or willful failure to comply with an order of an investigative committee of the Board of Medical Examiners.

Charges: Two violations of NRS 630.3062(1)(a) [failure to maintain timely, legible, accurate and complete medical records relating to the diagnosis, treatment and care of a patient]; one violation of NRS 630.3065(2)(a) [knowingly or willfully failing to comply with an order of a committee designated by the Board to investigate a complaint against a licensee].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Dr. Hyson violated NRS 630.3062(1)(a) (2 counts) and NRS 630.3065(2)(a), as set forth in the Complaint, and imposed the following discipline against him: (1) public reprimand; (2) \$1,000.00 fine; (3) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter; (4) Dr. Hyson shall keep a female chaperon employed and present during all of his female patient encounters and document such chaperon within the medical records.

*Continued on page 14*

**MIRKIA, Kiarash L., M.D. (12548)****Las Vegas, Nevada**

Summary: Alleged malpractice.

Charges: One violation of NRS 630.301(4) [malpractice].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Dr. Mirkia violated NRS 630.301(4), as set forth in the Complaint, and imposed the following discipline against him: Dr. Mirkia shall be prohibited from performing general surgery in Nevada until further order of the Board. Dr. Mirkia's license placed on probation for a period of time not less than 24 months, subject to various terms and conditions. The terms and conditions include the following: (1) public reprimand; (2) \$3,000.00 fine; (3) 20 hours of continuing medical education (CME), in addition to his statutory CME requirements for licensure; (4) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter; (5) he shall complete a Physician Assessment and Competency Evaluation (PACE) Program examination of his clinical competency and a Fitness for Duty (FFD) examination. The examination shall be conducted pursuant to NRS 630.318, shall be conducted by a provider approved by the Board in advance, and the examiner shall, within 60 days of completion of the examination, render an opinion and report to the Board. The examination and report shall be performed at Dr. Mirkia's sole expense. (6) Dr. Mirkia shall not supervise any physician assistant or collaborate with any advanced practice registered nurse in Nevada during the probationary period.

**O'NEILL, Anne L., M.D. (12894)****Las Vegas, Nevada**

Summary: Alleged malpractice and failure to maintain appropriate medical records relating to her treatment of two patients.

Charges: Two violations of NRS 630.301(4) [malpractice]; two violation of NRS 630.3062(1)(a) [failure to maintain timely, legible, accurate and complete medical records relating to the diagnosis, treatment and care of a patient].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement

by which it found Dr. O'Neill violated NRS 630.301(4) (2 counts), as set forth in Count I of the Complaint in Case No. 20-34134-1 and Count I of the Complaint in Case No. 20-34134-2, and imposed the following discipline against her: (1) public reprimand; (2) total fines in the amount of \$2,000.00; (3) 10 hours of continuing medical education (CME), in addition to her statutory CME requirements for licensure (4) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter; (5) Dr. O'Neill agrees to refrain from performing breast reconstruction surgeries in Nevada, including, but not limited to, TRAM flap, DIEP flap, SIEA flap, latissimus dorsi flap, tissue expansion procedures, breast implants, nipple and areola reconstruction, autologous fat grafting procedures, revision procedures on existing breast implants, breast augmentations, breast lift with implants, any revision aesthetic breast surgery, or any other breast reconstruction procedures in Nevada until further order of the Board. Count II of the Complaint in Case No. 20-34134-1 and Count II of the Complaint in Case No. 20-34134-2 were dismissed with prejudice.

**ROSLER, Hans-Jorg W., M.D. (10364)****Las Vegas, Nevada**

Summary: Alleged knowing or willful failure to comply with a regulation of the Board of Medical Examiners.

Charges: one violation of NRS 630.3065(2)(a) [knowingly or willfully failing to comply with a regulation of the Board].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Dr. Rosler violated NRS 630.3065(2)(a), as set forth in the Second Amended Complaint, and imposed the following discipline against him: (1) public reprimand; (2) 10 hours of continuing medical education (CME), in addition to his statutory CME requirements for licensure; (3) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter.

**SILVER, Frank P., M.D. (2641)****Las Vegas, Nevada**

Summary: Alleged failure to adequately supervise a medical assistant and engaging in conduct that violated Pharmacy Board regulations.

Charges: One violation of NRS 630.306(1)(r) [failure to adequately supervise a medical assistant pursuant to regulations of the Board]; one violation of NRS 630.306(1)(b)(3) [engaging in conduct which is in violation of a regulation adopted by the State Board of Pharmacy].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Dr. Silver violated NRS 630.306(1)(r) and NRS 630.306(1)(b)(3), as set forth in the First Amended Complaint, and imposed the following discipline against him: (1) public reprimand; (2) \$500.00 fine; (3) 3 hours of continuing medical education (CME), in addition to his statutory CME requirements for licensure (4) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter; (5) Dr. Silver shall remain in his specialty of gynecology and infertility and with his pre-existing and established patients provide injectable fillers upon request; Dr. Silver shall not engage in any medical spa related activities with any unlicensed individuals or entities.

**TROCHE, Jose R., PA (545)****Las Vegas, Nevada**

Summary: Alleged inappropriate personal relationship with a patient.

Charges: One violation of NRS 630.301(9) [engaging in conduct that brings the medical profession into disrepute].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Mr. Troche violated NRS 630.301(9), as set forth in the Complaint, and imposed the following discipline against him: (1) public reprimand; (2) 15 hours of continuing medical education (CME), in addition to his statutory CME requirements for licensure; (3) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter.

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**WALL, Victoria K., M.D. (12154)**

**Las Vegas, Nevada**

Summary: Alleged engaging in conduct that violated Pharmacy Board regulations, misrepresentation in renewal of license, and unlawful prescribing of controlled substances.

Charges: One violation of NRS 630.306(1)(b)(3) [engaging in conduct which is in violation of a regulation adopted by the State Board of Pharmacy]; one violation of NRS 630.304(1) [obtaining, maintaining or renewing or attempting to obtain, maintain or renew a license to practice medicine by bribery, fraud or misrepresentation or by any false, misleading inaccurate or incomplete statement]; four violations of NRS 630.306(1)(c) [administering, dispensing or prescribing any controlled substance, or any dangerous drug as defined in chapter 454 of NRS, to or for himself or to others except as authorized by law].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Dr. Wall violated NRS 630.306(1)(b)(3), NRS 630.304(1) and NRS 630.306(1)(c), as set forth in Counts I, II and III of the Complaint, and imposed the following discipline against her: (1) public reprimand; (2) total fines in the amount of \$1,500.00; (3) 22.5 hours of continuing medical education (CME), in addition to her statutory CME requirements for licensure (4) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter. Counts IV, V and VI of the Complaint were dismissed with prejudice.

eight violations of NRS 630.3062(1)(a) [failure to maintain timely, legible, accurate and complete medical records relating to the diagnosis, treatment and care of a patient]; one violation of NRS 630.3065(2)(a) [knowingly or willfully failing to comply with an order of a committee designated by the Board to investigate a complaint against a licensee].

Disposition: On December 4, 2020, the Board accepted a Settlement Agreement by which it found Dr. Washinsky violated NRS 630.306(1)(b)(2) (3 counts), as set forth in Counts I, III and V of the Complaint, NRS 630.3062(1)(a) (3 counts), as set forth in Counts II, IV and VI of the Complaint, and NRS 630.3065(2)(a), as set forth in Count XVII of the Complaint, and imposed the following discipline against him: (1) public reprimand; (2) \$2,500.00 fine; (3) 20 hours of live, in-person continuing medical education (CME), in addition to his statutory CME requirements for licensure; (4) reimbursement of the Board's fees and costs associated with investigation and prosecution of the matter; (5) Dr. Washinsky shall immediately use E-prescribing protocols as set forth in NRS 639.23535, which requires a prescription for a controlled substance must be given to a pharmacy by electronic transmission in accordance with the regulations adopted by the Nevada Board of Pharmacy, and Dr. Washinsky shall be subject to unannounced inspections and random monitoring of his prescribing controlled substances to his patients. The remaining counts of the Complaint were dismissed with prejudice.

**WASHINSKY, Richard D., M.D. (6547)**

**Las Vegas, Nevada**

Summary: Alleged engaging in conduct which the Board has determined is a violation of the standards of practice established by regulation of the Board, failure to maintain appropriate medical records related to Dr. Washinsky's treatment of 8 patients, and knowing or willful failure to comply with an order of an investigative committee of the Board of Medical Examiners.

Charges: Eight violations of NRS 630.306(1)(b)(2) [engaging in conduct which the Board has determined is a violation of the standards of practice established by regulation of the Board];

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# Public Reprimands Ordered by the Board

December 11, 2020

Bernard Addo-Quaye, M.D.  
c/o Maria Nutile, Esq.  
Nutile Law  
7395 S. Pecos Road, Suite 103  
Las Vegas, NV 89120

**Re: In the Matter of Charges and Complaint Against Bernard Kofi Addo-Quaye, M.D.  
BME Case No. 20-19197-1**

Dr. Addo-Quaye:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated Nevada Revised Statute (NRS) 630.306(1)(b)(3), as set forth in the Complaint. For the same, you shall pay the fees and costs related to the investigation and prosecution of this matter; you shall pay a fine of five-hundred dollars (\$500.00); and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

December 11, 2020

Victor Bruce, M.D.  
c/o John Hunt, Esq.  
Clark Hill, PLC  
3800 Howard Hughes Pkwy., Suite 500  
Las Vegas, NV 89169

**Re: In the Matter of Charges and Complaint Against Victor Ronald Bruce, M.D.  
BME Case No. 20-12252-1**

Dr. Bruce:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated NRS 630.306(1)(b)(3), as set forth in the First Amended Complaint. For the same you shall pay a five-hundred dollar (\$500.00) fine; you shall reimburse the Board's fees and costs incurred in the investigation and prosecution of this matter; you shall undergo either an independent peer review examination or a Physician Assessment and Clinical Education (PACE) examination to assess your current clinical competency to practice medicine, the examination shall be conducted pursuant to NRS 630.318, shall be conducted by a provider approved by the Board in advance, and the examiner shall, within sixty (60) days of completion of the examination, render an opinion and report to the Board, the examination and report shall be performed at your sole expense; you shall remain prohibited from writing prescriptions until further order of the Board; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

December 23, 2020

Melissa Teresa Candrilli  
6416 Night Owl Bluff  
North Las Vegas, NV 89084

**Re: In the Matter of Charges and Complaint Against MELISSA TERESA CANDRILLI  
NSBME Case No. 19-33868-1**

Melissa Teresa Candrilli:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) found, by a preponderance of the evidence, that you violated NRS 630.306(1)(a), inability to practice respiratory therapy with reasonable skill and safety because of illness, a mental or physical condition or the use of alcohol, drugs, narcotics or any other substance (Count I), and NAC 630.540, willful and intentional false statement in renewal of license (Count II), as alleged in the formal Complaint filed against you in the aforementioned case.

In accord with the Board's findings, the Board ordered as follows: your license to practice respiratory care in Nevada shall remain suspended until further order of the Board; you shall pay fines in the total amount of three thousand dollars (\$3,000.00); you shall enter, within thirty (30) days, a five (5) year contract with Professional Recovery Network (PRN) for treatment of alcohol and substance abuse disorder and any other issues determined upon examination, and undergo periodic drug and alcohol testing as directed by PRN to assure your complete abstinence from mood-altering substances for the duration of your contract with PRN; you shall undergo a psychiatric examination by PRN within sixty (60) days; you shall reimburse the Board's fees and costs incurred in the investigation and prosecution of this case; you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

*Continued on page 17*

December 11, 2020

Harish Hosalkar, M.D.  
c/o Raymond McMahon, Esq.  
Doyle, Schafer, McMahon  
5440 Trabuco Road  
Irvine, CA 92620

**Re: In the Matter of Charges and Complaint Against Harish S. Hosalkar, M.D.  
BME Case No. 20-41820-1**

Dr. Hosalkar:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated NRS 630.301(3), as set forth in Count I of the Complaint. For the same you shall reimburse the Board's fees and costs incurred in the investigation and prosecution of this matter; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

December 11, 2020

Morton Hyson, M.D.  
c/o Katherine Turpin, Esq.  
John H. Cotton & Associates  
7900 West Sahara Avenue, Suite 200  
Las Vegas, NV 89117

**Re: In the Matter of Charges and Complaint Against Morton Isaac Hyson, M.D.  
BME Case No. 20-8616-1**

Dr. Hyson:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board)

accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated NRS 630.3062(1)(a) (two counts) and NRS 630.3065(2)(a), as set forth in the Complaint. For the same you shall pay a one thousand dollar (\$1,000.00) fine; you shall reimburse the Board's fees and costs incurred in the investigation and prosecution of this matter; you shall keep a female chaperon employed and present during all of your female patient encounters and document such chaperon within the medical records; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

December 11, 2020

Kiarash Mirkia, M.D.  
c/o Keith Weaver, Esq.  
Lewis, Brisbois, Bisgaard & Smith, LLP  
6385 South Rainbow Blvd., Suite 600  
Las Vegas, NV 89118

**Re: In the Matter of Charges and Complaint Against Kiarash L. Mirkia, M.D.  
BME Case No. 20-32904-1**

Dr. Mirkia:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order

finding you violated NRS 630.301(4), as set forth in the Complaint. For the same you shall pay a fine in the amount of three thousand dollars (\$3,000.00); you shall pay the Board's fees and costs incurred in the investigation and prosecution of this matter; you shall be prohibited from performing general surgery in Nevada until further order of the Board; your license to practice medicine in Nevada shall be placed on probation for a period of time not less than twenty-four (24) months, subject to various terms and conditions; you shall complete twenty (20) hours of continuing medical education (CME), the aforementioned hours of CME shall be in addition to any CME requirements that are regularly imposed upon you as a condition of licensure in the State of Nevada; you shall complete a Physician Assessment and Competency Evaluation (PACE) Program examination of your clinical competency and a Fitness for Duty (FFD) examination, the examination shall be conducted pursuant to NRS 630.318, shall be conducted by a provider approved by the Board in advance, and the examiner shall, within sixty (60) days of completion of the examination, render an opinion and report to the Board, the examination and report shall be performed at your sole expense; you shall not supervise any physician assistant or collaborate with any advanced practice registered nurse in Nevada during the probationary period; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

Continued on page 18

December 11, 2020

Anne O'Neill, M.D.  
c/o LeAnn Sanders, Esq.  
Alverson, Taylor & Sanders  
6605 Grand Montecito Pkwy., Suite 200  
Las Vegas, NV 89149

**Re: In the Matter of Charges and Complaint Against Anne O'Neill, M.D. BME Case Nos. 20-34134-1 and 20-34134-2**

Dr. O'Neill:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated NRS 630.301(4) (two counts), as set forth in Count I of the Complaint in Case No. 20-34134-1 and Count I of the Complaint in Case No. 20-34134-2. For the same you shall pay fines in the total amount of two thousand dollars (\$2,000.00); you shall reimburse the Board's fees and costs incurred in the investigation and prosecution of the cases in this matter; you shall complete ten (10) hours of continuing medical education (CME), the aforementioned hours of CME shall be in addition to any CME requirements that are regularly imposed upon you as a condition of licensure in the State of Nevada; you shall refrain from performing breast reconstruction surgeries in Nevada, including, but not limited to, TRAM flap, DIEP flap, SIEA flap, latissimus dorsi flap, tissue expansion procedures, breast implants, nipple and areola reconstruction, autologous fat grafting procedures, revision procedures on existing breast implants, breast augmentations, breast lift with implants, any revision aesthetic breast surgery, or any other breast reconstruction procedures in Nevada until further order of the Board; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which

has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

December 11, 2020

Hans-Jorg W. Rosler, M.D.  
c/o Danielle Woodrum, Esq.  
Lewis, Brisbois, Bisgaard & Smith, LLP  
6385 S. Rainbow Blvd., Suite 600  
Las Vegas, NV 89118

**Re: In the Matter of Charges and Complaint Against Hans-Jorg Rosler M.D. BME Case No. 19-26862-1**

Dr. Rosler:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated NRS 630.3065(2)(a), as set forth in the Second Amended Complaint. For the same you shall pay the Board's fees and costs incurred in the investigation and prosecution of this matter; you shall complete ten (10) hours of continuing medical education (CME) relating to the supervision of physician assistants, the aforementioned hours of CME shall be in addition to any CME requirements that are regularly imposed upon you as a condition of licensure in the State of Nevada; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

December 11, 2020

Frank Silver, M.D.  
c/o Valerie I. Fujii, Esq.  
Law Offices of Valerie I. Fujii & Associates  
704 S. 6<sup>th</sup> Street  
Las Vegas, NV 89101

**Re: In the Matter of Charges and Complaint Against Frank P. Silver M.D. BME Case No. 20-4041-1**

Dr. Silver:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated NRS 630.306(1)(r) and NRS 630.306(1)(b)(3), as set forth in the First Amended Complaint. For the same you shall pay the Board's fees and costs incurred in the investigation and prosecution of this matter; you shall pay a fine of five hundred dollars (\$500.00); you shall complete three (3) hours of continuing medical education (CME) relating to injectable fillers, the aforementioned hours of CME shall be in addition to any CME requirements that are regularly imposed upon you as a condition of licensure in the State of Nevada; you shall remain in your specialty of gynecology and infertility, and with your pre-existing and established patients provide injectable fillers upon request; you shall not engage in any medical spa related activities with any unlicensed individuals or entities; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

Continued on page 19

December 11, 2020

Jose Troche, PA  
c/o Alia Najjar, M.D., Esq.  
Nutile Law  
7395 S. Pecos Road, Suite 103  
Las Vegas, NV 89120

**Re: In the Matter of Charges and Complaint Against Jose Ramon Troche, PA  
BME Case No. 20-303-1**

Mr. Troche:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated NRS 630.301(9), as set forth in the Complaint. For the same you shall reimburse the Board's fees and costs incurred in the investigation and prosecution of this matter; you shall complete fifteen (15) hours of continuing medical education (CME) relating to Medical Ethics and Professional Boundaries, the aforementioned hours of CME shall be in addition to any CME requirements that are regularly imposed upon you as a condition of licensure in the State of Nevada; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

December 11, 2020

Victoria Wall, M.D.  
c/o Baron D. Harmon, Esq.  
FDDB Law  
30 E. North Avenue  
Northlake, IL 60164

**Re: In the Matter of Charges and Complaint Against Victoria K. Wall M.D.  
BME Case No. 20-18832-1**

Dr. Wall:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case.

In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated NRS 630.306(1)(b)(3), NRS 630.304(1) and NRS 630.306(1)(c), as set forth in Counts I, II and III of the Complaint. For the same, you shall pay the costs and expenses related to the investigation and prosecution of this matter; you shall pay of fine of one thousand five hundred dollars (\$1500.00); you shall complete twenty-two and one half (22.5) hours of continuing medical education (CME) within the next six (6) months, the aforementioned hours of CME shall be in addition to any CME requirements that are regularly imposed upon you as a condition of licensure in the State of Nevada; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

December 11, 2020

Richard Washinsky, M.D.  
c/o Kevin Murphy, Esq.  
Murphy Jones, APC  
2855 La Casita Avenue  
Las Vegas, NV 89120

**Re: In the Matter of Charges and Complaint Against Richard D. Washinsky M.D.  
BME Case No. 20-8462-1**

Dr. Washinsky:

On December 4, 2020, the Nevada State Board of Medical Examiners (Board) accepted the Settlement Agreement (Agreement) between you and the Board's Investigative Committee in relation to the formal Complaint filed against you in the aforementioned case. In accordance with its acceptance of the Agreement, the Board entered an Order finding you violated NRS 630.306(1)(b)(2) (three counts), as set forth in Counts I, III and V of the Complaint, NRS 630.3062(1)(a) (three counts), as set forth in Counts II, IV and VI of the Complaint, and NRS 630.3065(2)(a), as set forth in Count XVII of the Complaint. For the same you shall pay the Board's fees and costs incurred in the investigation and prosecution of this matter; you shall pay of fine of two thousand and five hundred dollars (\$2500.00); you shall take twenty (20) hours of live, in-person continuing medical education (CME) related to best practices in the prescribing of controlled substances within the four (4) months, the aforementioned hours of CME shall be in addition to any CME requirements that are regularly imposed upon you as a condition of licensure in the State of Nevada; you shall immediately use E-prescribing protocols as set forth in NRS 639.23535, which requires a prescription for a controlled substance must be given to a pharmacy by electronic transmission in accordance with the regulations adopted by the Nevada Board of Pharmacy; you shall be subject to unannounced inspections and random monitoring of prescribing controlled substances to your patients; and you shall be publicly reprimanded.

Accordingly, it is my unpleasant duty as President of the Board to formally and publicly reprimand you for your conduct which has brought professional disrespect upon you and which reflects unfavorably upon the medical profession as a whole.

Sincerely,

Rachakonda D. Prabhu, M.D., President  
Nevada State Board of Medical Examiners

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NEVADA STATE BOARD OF MEDICAL EXAMINERS

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Reno, NV 89521