

Patient I

2.48 On or about October 25, 2019, Respondent performed a full abdominoplasty on Patient I, a female patient in her mid-50s, as well as liposuction on her abdominal area. Respondent used oral sedation and nitrous oxide for the three and a half hour procedure rather than general anesthesia or intravenous sedation. In particular, Respondent should have established intravenous access for emergency management. An anesthesiologist or certified registered nurse anesthetist should have been present. Patient I was a poor risk for having this type of procedure at this type of facility using this type of anesthetic. Respondent did not consult Patient I's primary care provider.

2.49 Prior to performing the procedure, Respondent did not obtain an adequate medical history or perform an adequate physical examination. Respondent's medical records for Patient I do not include documentation of a true physical examination. The "History and Physical Examination" form does not actually contain all the key components of a standard current pre-procedural history and physical exam, including a history of present illness, family history, social history, a complete physical examination, diagnostic studies, and assessment/plan. Patient I's reported previous liver test results or abnormalities should have prompted Respondent to request liver function or enzyme tests and to inquire further about Patient I's medical history. The labs ordered by Respondent did not include liver function tests.

2.50 Respondent's records relating to the procedure are lacking. The procedure note does not include standard components such as pre- and post-operative diagnosis, type of anesthesia and sedation, location of incisions, devices and techniques used for liposuction, what type of closure was done and materials used, how hemostasis was achieved, how the umbilicus was dissected and relocated, or any specimen for pathology. The chart contained no rationale for, or times of administering, a reversal agent more than once. Vital signs should have been noted more frequently than every fifteen minutes. The time listed for the end of the procedure on Patient I's medical records is the same as her discharge time, so there was no allowance for recovery time, or post-operative monitoring before discharge. No clear discharge planning or procedure was in place, and no post-operative monitoring was recorded. Patient I should have been monitored for at least 30-

60 minutes post-operatively, particularly due to the high amount of oral sedative administered.

2.51 At a post-operative visit three days after the procedure, Patient I was having difficulty breathing and had an oxygen saturation level of 88%. Respondent did not address this appropriately, offer Patient I supplemental oxygen, or call an ambulance. Patient I died two days later due to multi-system organ failure, septic shock, and aspiration pneumonia.

3. CONCLUSIONS OF LAW

The Commission and Respondent agree to the entry of the following Conclusions of Law.

3.1 The Commission has jurisdiction over Respondent and over the subject matter of this proceeding.

3.2 Respondent has committed unprofessional conduct in violation of RCW 18.130.180(4), (7), (10), and (14) and WAC 246-919-853, -854, -856, -857, -858, and -860.

3.3 The above violations provide grounds for imposing sanctions under RCW 18.130.160.

4. AGREED ORDER

Based on the Findings of Fact and Conclusions of Law, Respondent agrees to entry of the following Agreed Order.

4.1 **Compliance Orientation.** Respondent must complete a compliance orientation in person or by telephone within **sixty (60) days** of the effective date of this Agreed Order. Respondent must contact the Compliance Unit at the Commission by calling (360) 236-2763, or by sending an email to: Medical.compliance@wmc.wa.gov within **twenty (20) days** of the effective date of this Agreed Order. Respondent must provide a contact phone number where Respondent can be reached for scheduling purposes.

4.2 **Probation.** Upon the effective date of this Agreed Order, the Commission places Respondent's license on probation. Respondent may petition to modify this Agreed Order and end the requirements of this Paragraph after **three (3) years** have passed from the effective date.