

### **Arizona Medical Board**

1740 W. Adams St., Suite 4000 • Phoenix, Arizona 85007

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# FINAL MINUTES FOR BOARD REVIEW COMMITTEE B TELECONFERENCE MEETING Held on Thursday, February 11, 2021 1740 W. Adams St., Board Room A • Phoenix, Arizona

#### Committee Members

Edward G. Paul, M.D., Chair Jodi A. Bain, M.A., J.D., LL.M. David C. Beyer, M.D., F.A.C.R., F.A.S.T.R.O. Laura Dorrell, M.S.N., R.N. Gary R. Figge, M.D. Shiva K. Y. Gosi, M.D.

#### **GENERAL BUSINESS**

#### A. CALL TO ORDER

Chairman Paul called the Committee's meeting to order at 8:03 a.m. and read aloud the Board's Mission: "To protect public safety through the judicious licensing, regulation and education of all allopathic physicians."

#### **B. ROLL CALL**

The following Committee members participated in the virtual meeting: Chairman Paul, Ms. Bain, Dr. Beyer, Ms. Dorrell, Dr. Figge and Dr. Gosi.

#### **ALSO PRESENT**

The following Board staff participated in the virtual meeting: James Silva, Investigator; Kathleen Coffer, M.D., Internal Medical Consultant; Ingrid Haas, M.D., Internal Medical Consultant; and, Amy Skaggs, Staff Investigational Review Committee ("SIRC") Coordinator. Mary D. Williams, Assistant Attorney General ("AAG") was also present.

#### C. OPENING STATEMENTS

The Committee recognized and welcomed the Board's newest member, Dr. Gosi.

#### D. PUBLIC STATEMENTS REGARDING MATTERS LISTED ON THE AGENDA

No individuals addressed the Committee during the Public Statements.

#### E. APPROVAL OF MINUTES

• December 3, 2020 Board Review Committee B Teleconference

The Committee observed that Chairman Paul and Dr. Gosi were not present at the December 2020 meeting.

MOTION: Dr. Figge moved for the Committee to approve the December 3, 2020 Board Review Committee B Teleconference.

SECOND: Dr. Beyer

VOTE: The following Committee members voted in favor of the motion: Ms. Bain, Dr. Beyer, Dr. Figge and Ms. Dorrell. The following Committee members abstained: Chairman Paul and Dr. Gosi.

VOTE: 4-yay, 0-nay, 2-abstain, 0-recuse, 0-absent.

**MOTION PASSED** 

#### **LEGAL MATTERS**

#### F. FORMAL INTERVIEWS

1. THIS CASE WAS PULLED FROM THE AGENDA.

#### G. FORMAL INTERVIEWS

#### 1. MD-20-0476A, RANDALL J. REID, M.D., LIC. #40550

Dr. Reid and Attorney James Ledbetter participated in the virtual meeting during the Committee's consideration of this matter, made statements and answered Committee members' questions.

Board staff, Dr. Haas, summarized that this matter involved a 72 year-old female patient (ST) who was seen by Dr. Reid for bladder prolapse. The Medical Consultant ("MC") reviewed the patient's care and raised the concern that the initial procedure was not properly performed by Dr. Reid resulting in small bowel perforation and a transected ureter that required numerous additional studies and procedures with complications.

Mr. Ledbetter presented an opening statement to the Board and Dr. Reid's position that the evidence in this case did not establish that the ureteral injury was caused by Dr. Reid. Dr. Beyer questioned the physician regarding whether he was able to visualize the ureter during the initial procedure when he was working the stalk of the ovary to find the base. Dr. Reid explained that the dissection was well away from the pelvic side wall and confirmed that he was able to see the ureter. Dr. Reid also explained that the issue with the serosa that required the general surgeon's assistance occurred over the small bowel and not over the colon and that it was not accurately captured in the general surgeon's report. Dr. Beyer also questioned the physician regarding what he believed caused the two bowel perforations that were identified six days after the patient's initial surgery. Dr. Reid stated that the pathologist reviewed the slide after the fact and found no evidence of serosal tear or sharp injury, but did identify chronic active serositis. In response to further questioning by Dr. Beyer, Dr. Reid explained that a frozen section was not done at the time of surgery due to the limited resources available to him in the rural area, and that he was unable to identify the left ovary as the entire left adnexa appeared to be missing.

Dr. Beyer questioned Dr. Haas on her thoughts regarding the initial surgery and how it contributed to the ureteral injury subsequently identified after the patient underwent additional procedures. Dr. Haas explained that the concern raised in this case related to the physician's failure to remove the mass when carrying out a procedure to remove the mass. She recognized that the physician at the time was of the impression that the mass was malignant and worked down the stalk located right on top of the ureter. She stated that while the two CT scans obtained after the initial surgery did not identify urine in the abdomen, it did show right ureteral dilatation up to the level of the pelvic side wall. She also pointed out that the urine was retroperitoneal when the ureteral injury was identified, and the surgeon may not have seen it leaking into the abdominal cavity since they were working on the bowel at that time.

Dr. Figge commented that the standard of care required the physician to identify the ovary and remove both of them given the inability to do frozen sections to determine malignancy. Dr. Reid reiterated that adnexal structures were absent and given the patient's history of hysterectomy, he concluded that the ovary had been removed. Dr. Figge questioned the physician regarding whether he examined the whole bowel to determine that there were no other injuries. Dr. Reid stated that he did run the bowel that he could see from the incision and noted no serosal injuries, and that the gynecological oncologist he works with preferred that once malignancy is identified, patients are

referred to him for further exploratory surgery. In response to Chairman Paul's line of questioning, Dr. Reid stated that he did consult with specialists and exhausted other treatment remedies with the patient prior to proceeding with surgery, including urology consultation and cardiac clearance. Chairman Paul recognized that bowel injury is a known potential complication for the type of surgery that was performed and questioned how often Dr. Reid encountered similar complications in his practice. Dr. Reid reported that he has had it happen twice over the course of his career in medicine.

During closing comments, Mr. Ledbetter stated that Dr. Reid is a very thorough, candid and diligent physician. He stated that Dr. Reid consulted with specialists prior to proceeding with surgery for this patient, and that when an issue was identified intraoperatively, he obtained the assistance of a general surgeon. He asked the Board to consider dismissing the case or issuing a non-disciplinary sanction to resolve this matter.

Dr. Beyer stated that he struggled with this case and that he could not find that the initial surgery performed by Dr. Reid directly contributed to the small bowel injury subsequently identified after the patient underwent additional surgery with a different surgeon. For this reason, he spoke in favor of dismissing the investigation.

MOTION: Dr. Beyer moved for dismissal.

SECOND: Dr. Figge

Dr. Figge spoke in support of dismissal and stated that while the documentation in the records could have been better, he did not find that the physician engaged in unprofessional conduct in this matter. He stated that finding a violation of the Medical Practice Act in this case would not lend anything further to the Board's mission to protect the public. He also noted that Dr. Reid has no prior Board history. Dr. Gosi spoke in favor of dismissal and thanked Dr. Reid for providing medical services to a community where specialty coverage is not always readily available. Chairman Paul stated that he agreed with other members' comments and spoke in favor of the motion. Ms. Dorrell echoed Dr. Gosi's comments and thanked Dr. Reid for explaining the challenges when working in a rural setting.

VOTE: The following Committee members voted in favor of the motion: Chairman Paul, Ms. Bain, Dr. Beyer, Ms. Dorrell, Dr. Figge and Dr. Gosi. VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 0-absent. MOTION PASSED

#### **CONSENT AGENDA**

## H. APPROVAL OF DRAFT FINDINGS OF FACT, CONCLUSIONS OF LAW AND ORDER

1. MD-20-0255A, ROSS A. MCARTHUR, M.D., LIC. #31910

The Committee observed that an updated version of the draft was submitted for the Board's review, which included the issuance of a Letter of Reprimand with the One Year Probation. Dr. Figge noted that the Committee considered this matter at its previous meeting and spoke in favor of approving the draft Order.

MOTION: Dr. Figge moved for the Committee to approve the draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and One Year Probation. Dr. McArthur shall be required to utilize a Board-approved proctor to overread a minimum of 30 MRI and CT scan images, at his expense and for the duration of Probation. In the event that the physician does not interpret more than 30 images in a given month, then all images shall be reviewed. Dr. McArthur shall cause the proctor to submit quarterly reports to the Board, at his expense. Dr. McArthur shall not request Probation termination until one year from the effective date of the Board's Order and shall be accompanied by documentation from the proctor supporting the request for Probation termination.

SECOND: Ms. Bain

VOTE: The following Committee members voted in favor of the motion: Chairman

Paul, Ms. Bain, Dr. Beyer, Ms. Dorrell, Dr. Figge and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

**MOTION PASSED** 

#### **GENERAL BUSINESS**

#### I. DISCUSSION REGARDING DEBRIEFING ON COMMITTEE PROCESSES

The Committee recognized that the Board's teleconference scheduled for the following day had a similar topic agendized regarding the current meeting processes for further discussion among the full Board.

#### J. ADJOURNMENT

MOTION: Dr. Figge moved for the Committee to adjourn.

SECOND: Ms. Bain

VOTE: The following Committee members voted in favor of the motion: Chairman Paul,

Ms. Bain, Dr. Beyer, Ms. Dorrell, Dr. Figge and Dr. Gosi. VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED

The Committee's meeting adjourned at 9:23 a.m.



Patricia E. McSorley, Executive Director