

BEFORE THE BOARD OF MEDICAL EXAMINERS
OF THE STATE OF NEVADA

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In The Matter of Charges and )
Complaint Against )
ABDUL-SAMI SIDDIQUI, M.D., )
Respondent. )

Case No. 11-12158-1

FILED

NOV 29 2011

NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: [Signature]

COMPLAINT

The Investigative Committee of the Nevada State Board of Medical Examiners (Board), composed of Charles N. Held, M.D., Theodore B. Berndt, M.D. and Valerie J. Clark, BSN, RHU, LUTCF, at the time of the authorizing of the filing of this Complaint, by and through Edward O. Cousineau, J.D., Deputy Executive Director for the Board and counsel for the Investigative Committee, having a reasonable basis to believe that Abdul-Sami Siddiqui, M.D., hereinafter referred to as "Respondent", has engaged in conduct that is grounds for discipline pursuant to the provisions of NRS Chapter 630, hereby alleges, charges and complains against said Respondent as follows:

1. Respondent was licensed in active status to practice medicine in the state of Nevada on February 26, 1998, by the Board pursuant to the provisions of Chapter 630 of the Nevada Revised Statutes, and at all times addressed herein was so licensed.

2. Respondent indicated specialty with the Board is Internal Medicine with his practice address located in Las Vegas.

3. The true identity of Patients A, B, C, D and E who are the subject of the underlying allegations, are not disclosed herein to protect their privacy, but are disclosed in the Patient Designation served on Respondent along with a copy of this Complaint.

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1           4.       Previous to the preparation of this Complaint, the Board solicited the services of  
2 an independent medical expert to review the medical records of several patients previously  
3 treated by Respondent. The record review included those of Patients A, B, C, D and E.

4           5.       From approximately November of 2004 to June of 2010, Patient A was prescribed  
5 various types of controlled substances by Respondent. A review of Patient A's medical records  
6 by the expert determined that Respondent's prescribing practices for Patient A were excessive  
7 and inconsistent with the appropriate standard of care. Specifically, that Respondent prescribed  
8 significant amounts of controlled substances to Patient A without sufficient medical justification  
9 for Respondent's continued prescribing of controlled substances. Further, Respondent  
10 considered alternative means of treating the patient's pain in very minimal instances. And, the  
11 medical records for Patient A were lacking in adequate documentation to ascertain a diagnosis  
12 which justified the protracting prescribing practices by Respondent.

13          6.       From approximately November of 2004 to September of 2010, Patient B was  
14 prescribed various types of controlled substances by Respondent. A review of Patient B's  
15 medical records by the expert determined that Respondent's prescribing practices for Patient B  
16 were excessive and inconsistent with the appropriate standard of care. Specifically, that  
17 Respondent prescribed significant amounts of controlled substances to Patient B without  
18 sufficient medical justification for Respondent's continued prescribing of controlled substances.  
19 Further, Respondent considered alternative means of treating the patient's pain in very minimal  
20 instances. And, the medical records for Patient B were lacking in adequate documentation to  
21 ascertain a diagnosis which justified the protracting prescribing practices by Respondent.

22          7.       From approximately June of 2004 to October of 2010, Patient C was prescribed  
23 various types of controlled substances by Respondent. A review of Patient C's medical records  
24 by the expert determined that Respondent's prescribing practices for Patient C were excessive  
25 and inconsistent with the appropriate standard of care. Specifically, that Respondent prescribed  
26 significant amounts of controlled substances to Patient C without sufficient medical justification  
27 for Respondent's continued prescribing of controlled substances. Further, Respondent  
28 considered alternative means of treating the patient's pain in very minimal instances. And, the

1 medical records for Patient C were lacking in adequate documentation to ascertain a diagnosis  
2 which justified the protracting prescribing practices by Respondent.

3 8. From approximately June of 2006 to July of 2010, Patient D was prescribed  
4 various types of controlled substances by Respondent. A review of Patient D's medical records  
5 by the expert determined that Respondent's prescribing practices for Patient D were excessive  
6 and inconsistent with the appropriate standard of care. Specifically, that Respondent prescribed  
7 significant amounts of controlled substances to Patient D without sufficient medical justification  
8 for Respondent's continued prescribing of controlled substances. Further, Respondent  
9 considered alternative means of treating the patient's pain in very minimal instances. And, the  
10 medical records for Patient D were lacking in adequate documentation to ascertain a diagnosis  
11 which justified the protracting prescribing practices by Respondent.

12 9. From approximately July of 2005 to September of 2010, Patient E was prescribed  
13 various types of controlled substances by Respondent. A review of Patient E's medical records  
14 by the expert determined that Respondent's prescribing practices for Patient E were excessive  
15 and inconsistent with the appropriate standard of care. Specifically, that Respondent prescribed  
16 significant amounts of controlled substances to Patient E without sufficient medical justification  
17 for Respondent's continued prescribing of controlled substances. Further, Respondent  
18 considered alternative means of treating the patient's pain in very minimal instances. And, the  
19 medical records for Patient E were lacking in adequate documentation to ascertain a diagnosis  
20 which justified the protracting prescribing practices by Respondent.

21 **COUNT I**

22 10. All of the above paragraphs are incorporated by reference as though fully set forth  
23 herein.

24 11. Respondent's prescribing of controlled substances for Patient A constitutes  
25 malpractice. Malpractice is defined at NAC 630.040 as "the failure of a physician, in treating a  
26 patient, to use the reasonable care, skill, or knowledge ordinarily used under similar circumstances."

27 12. By reason of the foregoing, Respondent has violated NRS 630.301(4), and is subject  
28 to discipline as provided by NRS 630.352.

**COUNT II**

13. All of the above paragraphs are incorporated by reference as though fully set forth herein.

14. Respondent's prescribing of controlled substances for Patient B constitutes malpractice. Malpractice is defined at NAC 630.040 as "the failure of a physician, in treating a patient, to use the reasonable care, skill, or knowledge ordinarily used under similar circumstances."

15. By reason of the foregoing, Respondent has violated NRS 630.301(4), and is subject to discipline as provided by NRS 630.352.

**COUNT III**

16. All of the above paragraphs are incorporated by reference as though fully set forth herein.

17. Respondent's prescribing of controlled substances for Patient C constitutes malpractice. Malpractice is defined at NAC 630.040 as "the failure of a physician, in treating a patient, to use the reasonable care, skill, or knowledge ordinarily used under similar circumstances."

18. By reason of the foregoing, Respondent has violated NRS 630.301(4), and is subject to discipline as provided by NRS 630.352.

**COUNT IV**

19. Respondent's prescribing of controlled substances for Patient D constitutes malpractice. Malpractice is defined at NAC 630.040 as "the failure of a physician, in treating a patient, to use the reasonable care, skill, or knowledge ordinarily used under similar circumstances."

20. By reason of the foregoing, Respondent has violated NRS 630.301(4), and is subject to discipline as provided by NRS 630.352.

**COUNT V**

21. Respondent's prescribing of controlled substances for Patient E constitutes malpractice. Malpractice is defined at NAC 630.040 as "the failure of a physician, in treating a patient, to use the reasonable care, skill, or knowledge ordinarily used under similar circumstances."

22. By reason of the foregoing, Respondent has violated NRS 630.301(4), and is subject to discipline as provided by NRS 630.352.

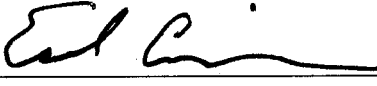
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**WHEREFORE**, the Investigative Committee prays:

1. That the Board fix a time and place for a formal hearing;
2. That the Board gives Respondent notice of the charges herein against him, the time and place set for the hearing, and the possible sanctions against him;
3. That the Board determine what sanctions it deems appropriate to impose for the violation committed by Respondent; and
4. That the Board make, issue and serve on Respondent its findings of facts, conclusions of law and order, in writing, that includes the sanctions imposed.

DATED this 29<sup>th</sup> day of November, 2011.

INVESTIGATIVE COMMITTEE OF THE  
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By:   
Edward O. Cousineau, J.D.  
Attorney for the Investigative Committee of  
The Nevada State Board of Medical Examiners

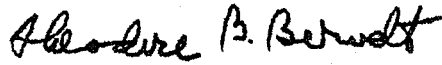
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VERIFICATION

STATE OF NEVADA        )  
                                  : ss.  
COUNTY OF WASHOE    )

THEODORE B. BERNDT, M.D., having been duly sworn, hereby deposes and states under penalty of perjury that he is the Chairman of the Investigative Committee of the Nevada State Board of Medical Examiners that investigated the complaint against Respondent herein; that he has read the foregoing Complaint; and that based upon the results of the Investigative Committee's investigation into a complaint against Respondent, the allegations and charges in the foregoing Complaint against Respondent are true, accurate and correct.

Dated this 29<sup>th</sup> day of November, 2011.

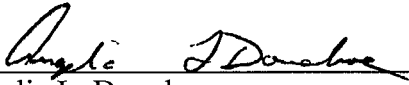
  
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THEODORE B. BERNDT, M.D.

**CERTIFICATE OF MAILING**

I hereby certify that I am employed by Nevada State Board of Medical Examiners and that on 29<sup>th</sup> day of November 2011, I served a file copy of the COMPLAINT, PATIENT DESIGNATION & Fingerprint information via USPS e-certified mail to the following:

Abdul-Sami Siddiqui, M.D.  
PO Box 363159  
North Las Vegas, NV 89036-7159

Dated this 29<sup>th</sup> day of November 2011.

  
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Angelia L. Donohoe  
Legal Assistant

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