

1 **BEFORE THE BOARD OF MEDICAL EXAMINERS**
2 **OF THE STATE OF NEVADA**

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6 **In the Matter of Charges and**) **Case No. 12-11024-1**
7 **Complaint Against**)
8 **THOMAS NELSON ABDELLA, M.D.,**)
9 **Respondent.**)

FILED

AUG 20 2012

NEVADA STATE BOARD OF
MEDICAL EXAMINERS

By: 

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11
12 **COMPLAINT**

13 The Investigative Committee of the Nevada State Board of Medical Examiners (Board), composed
14 at the time of filing of Thomas B. Berndt, M.D., Chairman,
15 Valerie J. Clark, BSN, RHU, LUTCF, Member, and Michael J. Fischer, M.D., Member, by and
16 through Erin L. Albright, Esq., Attorney for the Investigative Committee and Deputy General
17 Counsel, having a reasonable basis to believe that Thomas Abdella, M.D. (Respondent), violated
18 the provisions of Nevada Revised Statutes(NRS) Chapter 630 (Medical Practice Act), hereby
19 issues its formal Complaint, stating the Investigative Committee's charges and allegations as
20 follows:

21 1. Respondent is currently licensed in active status (License No. 7589), and has been
22 so licensed since October 12, 1995 by the Board pursuant to the provisions of the
23 Medical Practice Act.

24 2. Patient A was a forty-three (43)-year-old female at the time of the incident in
25 question. Her true identity is not disclosed in this Complaint to protect her identity, but her
26 identity is disclosed in the Patient Designation served on Respondent along with a copy of this
27 Complaint.

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OFFICE OF THE GENERAL COUNSEL
Nevada State Board of Medical Examiners
1105 Terminal Way #301
Reno, Nevada 89502
(775) 688-2559

1 3. On June 17, 2005, Patient A had a gestational age of approximately 34 weeks when
2 she presented to the emergency room at the University Medical Center (hereinafter "UMC") in
3 Las Vegas, Nevada, complaining of abdominal pressure, difficulty breathing, bilateral lower
4 extremity edema and spotting. She was admitted to UMC with a diagnosis of maternal
5 tachycardia and preeclampsia.

6 4. After Patient A was admitted, her blood pressure was 165/115, there was protein in
7 her urine, and she suffered from a severe headache. Further testing also diagnosed Patient A with
8 anemia and dyspnea. Approximately fourteen (14) hours after the patient was admitted to UMC,
9 Respondent personally reviewed Patient A's chart and did not order induced labor.

10 5. On June 18, 2005, Patient A's blood pressure was 164/88, her urine output was
11 very low, and she still complained of a headache. Respondent personally reviewed Patient A's
12 chart a second time and, again, did not order induced labor.

13 6. On June 19, 2005, Patient A's twenty-four (24)-hour urine protein test showed
14 seven (7) grams of protein. Her blood pressure ranged from 122-160/70-99. Patient A still
15 suffered from a severe headache. In addition, her oxygen saturation was decreased. Respondent
16 personally reviewed Patient A's chart a third time and, again, did not order induced labor.

17 7. On June 20, 2005, Patient A was diagnosed with sudden onset pulmonary edema.
18 Approximately twenty-two (22) minutes after Patient A was diagnosed with sudden onset
19 pulmonary edema, emergency Caesarean section delivery of the unborn baby was initiated.

20 8. During the emergency Caesarean section delivery of the unborn baby, Patient A
21 suffered a cardiac arrest and died. The Clark County Coroner cited Patient A's cause of death as
22 preeclampsia.

23 9. After resuscitation efforts for Patient A failed, the unborn baby was delivered via
24 Caesarean section. The baby suffered Hypoxia Induced Encephalopathy. As a result, the baby
25 suffered permanent mental and physical disabilities.

26 10. During Patient A's four (4)-day hospital stay, Respondent made four (4) written
27 entries in the patient's chart. Three (3) of the four (4) entries are untimed. All four (4) entries are
28 illegible, either in part or in whole, and are incomplete.

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COUNT I

(Malpractice)

11. All of the allegations contained in the above paragraphs are hereby incorporated by reference as though fully set forth herein.

12. Nevada Administrative Code (NAC) 630.040 defines malpractice as the failure of a physician, in treating a patient, to use the reasonable care, skill, or knowledge ordinarily used under similar circumstances.

13. NRS 630.301(4) provides that malpractice of a physician is grounds for initiating disciplinary action against a licensee.

14. Respondent failed to use reasonable care, skill or knowledge ordinarily used under similar circumstances when he failed to recognize Patient A was suffering from severe preeclampsia and that her unborn child must be immediately delivered to prevent the mother and/or unborn baby from dying or suffering permanent mental and/or physical damage.

15. By reason of the foregoing, Respondent is subject to discipline by the Board as provided in NRS 630.352.

COUNT II

(Medical Records Violation)

16. All of the allegations in the above paragraphs are hereby incorporated as if fully set forth herein.

17. NRS 630.3062(1) provides that the failure to maintain timely, legible, accurate and complete medical records relating to the diagnosis, treatment and care of a patient is grounds for initiating discipline against a licensee.

18. Respondent failed to maintain accurate and/or complete medical records relating to the diagnosis, treatment and care of Patient A when he wrote incomplete, untimed and/or illegible entries in Patient A’s chart.

19. By reason of the foregoing, Respondent is subject to discipline by the Board as provided in NRS 630.352.

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WHEREFORE, the Investigative Committee prays:

1. That the Board gives Respondent notice of the charges herein against him and give him notice that he may file an answer to the Complaint herein as set forth in NRS 630.339(2) within twenty (20) days of service of the Complaint;
2. That the Board sets a time and place for a formal hearing after holding an Early Case Conference pursuant to NRS 630.339(3);
3. That the Board determines the sanctions it will impose if it finds Respondent violated the Medical Practice Act;
4. That the Board makes, issues and serves on Respondent, in writing, its findings of facts, conclusions of law and order, which shall include the sanctions imposed; and
5. That the Board takes such other and further action as may be just and proper in these premises.

DATED this 20th day of August, 2012.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: 
Erin L. Albright, Esq.
Deputy General Counsel
Attorney for the Investigative Committee

OFFICE OF THE GENERAL COUNSEL
Nevada State Board of Medical Examiners
1105 Terminal Way #301
Reno, Nevada 89502
(775) 688-2559

VERIFICATION

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STATE OF NEVADA)
 : ss.
COUNTY OF WASHOE)

Theodore B. Berndt, M.D., hereby deposes and states under penalty of perjury under the laws of the state of Nevada that he is the Chairman of the Investigative Committee of the Nevada State Board of Medical Examiners that authorized the foregoing Complaint against the Respondent herein; that he has read the foregoing Complaint; and that based upon information discovered during the course of the investigation into a complaint against Respondent, that he believes the allegations and charges in the foregoing Complaint against Respondent are true, accurate and correct.

Dated this 20th day of August, 2012.

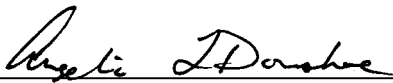
Theodore B. Berndt
Theodore B. Berndt, M.D.

CERTIFICATE OF SERVICE

I hereby certify that I am employed by Nevada State Board of Medical Examiners and that on 20th day of August 2012, I served a filed copy of the Complaint, Patient Designation & Fingerprint information via USPS e-certified mail return receipt to the following:

Thomas Abdella, M.D.
3196 S. Maryland Pkwy., #209
Las Vegas, NV 89109

Dated this 20th day of August 2012.



Angelia L. Donohoe
Legal Assistant

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