

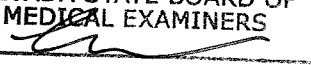
OFFICE OF THE GENERAL COUNSEL
Nevada State Board of Medical Examiners
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**BEFORE THE BOARD OF MEDICAL EXAMINERS
OF THE STATE OF NEVADA**

* * * * *

**In the Matter of Charges and
Complaint Against
THOMAS DANIEL O'GARA, M.D.,
Respondent.**

Case No. 18-9747-1

FILED
MAR - 8 2018
NEVADA STATE BOARD OF
MEDICAL EXAMINERS
By: 

COMPLAINT

The Investigative Committee¹ (IC) of the Nevada State Board of Medical Examiners (Board), hereby issues this formal Complaint against Thomas Daniel O’Gara, M.D. (hereinafter referred to as Dr. O’Gara or Respondent), a licensed physician in Nevada. After investigating this matter, the IC has a reasonable basis to believe that Respondent has violated provisions of Nevada Revised Statutes (NRS) Chapter 630 and Nevada Administrative Code (NAC) Chapter 630 (collectively, the Medical Practice Act).

The IC alleges the following facts:

1. Respondent is a medical doctor currently licensed in active status (License No. 5533). Respondent was issued his license from the Board on July 1, 1987, pursuant to NRS Chapter 630.

Count I – Patient A

NRS 630.306(1)(b)(2) (Violation of Standards of Practice)

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

3. Respondent treated Patient A for chronic pain with opioid analgesics. Patient A’s true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient Designation served upon Respondent along with a copy of this Complaint.

¹ The Investigative Committee of the Nevada State Board of Medical Examiners, at the time the filing of a complaint was approved, was composed of Rachakonda D. Prabhu, M.D., Ms. Sandy Peltyn, and Victor M. Muro, M.D.

1 4. Violation of a standard of practice adopted by the Board is grounds for disciplinary
2 action pursuant to NRS 630.306(1)(b)(2).

3 5. The Board adopted by reference the *Model Policy on the Use of Opioid Analgesics*
4 *in the Treatment of Chronic Pain*, July 2013, published by the Federation of State Medical Boards
5 of the United States, Inc. (Model Policy).

6 6. Pursuant to NAC 630.230(1)(k), a licensee shall not engage in the practice of
7 writing prescriptions for controlled substances to treat acute pain or chronic pain in a manner that
8 deviates from the policies set forth in the *Model Policy on the Use of Opioid Analgesics in the*
9 *Treatment of Chronic Pain* adopted by reference in NAC 630.187.

10 7. On information and belief, Respondent wrote prescriptions to Patient A for opioid
11 analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

14 **Count II – Patient A**

15 **NRS 630.3062(1) (Failure to Maintain Complete Medical Records)**

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

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

21 11. Respondent failed to maintain complete medical records relating to the diagnosis,
22 treatment and care of Patient A, by failing to document his actions in complying with the Model
23 Policy, including, but not limited to, failing to document the following: physical examinations
24 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;
25 support for his diagnoses with physical examination findings; treatment objectives to evaluate
26 treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation
27 of opioid therapy.
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1 12. By reason of the foregoing, Respondent is subject to discipline by the Board as
2 provided in NRS 630.352.

3 **Count III – Patient B**

4 **NRS 630.306(1)(b)(2) (Violation of Standards of Practice)**

5 13. All of the allegations in the above paragraphs are hereby incorporated by reference
6 as though fully set forth herein.

7 14. Respondent treated Patient B for chronic pain with opioid analgesics. Patient B’s
8 true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient
9 Designation served upon Respondent along with a copy of this Complaint.

10 15. On information and belief, Respondent wrote prescriptions to Patient B for opioid
11 analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

14 **Count IV – Patient B**

15 **NRS 630.3062(1) (Failure to Maintain Complete Medical Records)**

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

18 18. Respondent failed to maintain complete medical records relating to the diagnosis,
19 treatment and care of Patient B, by failing to document his actions in complying with the Model
20 Policy, including, but not limited to, failing to document the following: physical examinations
21 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;
22 support for his diagnoses with physical examination findings; treatment objectives to evaluate
23 treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation
24 of opioid therapy.

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

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1 **Count V – Patient C**

2 **NRS 630.306(1)(b)(2) (Violation of Standards of Practice)**

3 20. All of the allegations in the above paragraphs are hereby incorporated by reference
4 as though fully set forth herein.

5 21. Respondent treated Patient C for chronic pain with opioid analgesics. Patient C's
6 true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient
7 Designation served upon Respondent along with a copy of this Complaint.

8 22. On information and belief, Respondent wrote prescriptions to Patient C for opioid
9 analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

12 **Count VI – Patient C**

13 **NRS 630.3062(1) (Failure to Maintain Complete Medical Records)**

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

16 25. Respondent failed to maintain complete medical records relating to the diagnosis,
17 treatment and care of Patient C, by failing to document his actions in complying with the Model
18 Policy, including, but not limited to, failing to document the following: physical examinations
19 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;
20 support for his diagnoses with physical examination findings; treatment objectives to evaluate
21 treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation
22 of opioid therapy.

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

25 **Count VII – Patient D**

26 **NRS 630.306(1)(b)(2) (Violation of Standards of Practice)**

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

1 28. Respondent treated Patient D for chronic pain with opioid analgesics. Patient D's
2 true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient
3 Designation served upon Respondent along with a copy of this Complaint.

4 29. On information and belief, Respondent wrote prescriptions to Patient D for opioid
5 analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

8 **Count VIII – Patient D**

9 **NRS 630.3062(1) (Failure to Maintain Complete Medical Records)**

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

12 32. Respondent failed to maintain complete medical records relating to the diagnosis,
13 treatment and care of Patient D, by failing to document his actions in complying with the Model
14 Policy, including, but not limited to, failing to document the following: physical examinations
15 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;
16 support for his diagnoses with physical examination findings; treatment objectives to evaluate
17 treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation
18 of opioid therapy.

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

21 **Count IX – Patient E**

22 **NRS 630.306(1)(b)(2) (Violation of Standards of Practice)**

23 34. All of the allegations in the above paragraphs are hereby incorporated by reference
24 as though fully set forth herein.

25 35. Respondent treated Patient E for chronic pain with opioid analgesics. Patient E's
26 true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient
27 Designation served upon Respondent along with a copy of this Complaint.

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Count XII – Patient F

NRS 630.3062(1) (Failure to Maintain Complete Medical Records)

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

46. Respondent failed to maintain complete medical records relating to the diagnosis, treatment and care of Patient F, by failing to document his actions in complying with the Model Policy, including, but not limited to, failing to document the following: physical examinations before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics; support for his diagnoses with physical examination findings; treatment objectives to evaluate treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation of opioid therapy.

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

Count XIII – Patient G

NRS 630.306(1)(b)(2) (Violation of Standards of Practice)

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

49. Respondent treated Patient G for chronic pain with opioid analgesics. Patient G's true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient Designation served upon Respondent along with a copy of this Complaint.

50. On information and belief, Respondent wrote prescriptions to Patient G for opioid analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

Count XIV – Patient G

NRS 630.3062(1) (Failure to Maintain Complete Medical Records)

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

1 53. Respondent failed to maintain complete medical records relating to the diagnosis,
2 treatment and care of Patient G, by failing to document his actions in complying with the Model
3 Policy, including, but not limited to, failing to document the following: physical examinations
4 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;
5 support for his diagnoses with physical examination findings; treatment objectives to evaluate
6 treatment progress; monitoring and adapting his treatment plan progress toward discontinuation of
7 opioid therapy.

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

10 **Count XV – Patient H**

11 **NRS 630.306(1)(b)(2) (Violation of Standards of Practice)**

12 55. All of the allegations in the above paragraphs are hereby incorporated by reference
13 as though fully set forth herein.

14 56. Respondent treated Patient H for chronic pain with opioid analgesics. Patient H's
15 true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient
16 Designation served upon Respondent along with a copy of this Complaint.

17 57. On information and belief, Respondent wrote prescriptions to Patient H for opioid
18 analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

21 **Count XVI – Patient H**

22 **NRS 630.3062(1) (Failure to Maintain Complete Medical Records)**

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

25 60. Respondent failed to maintain complete medical records relating to the diagnosis,
26 treatment and care of Patient H, by failing to document his actions in complying with the Model
27 Policy, including, but not limited to, failing to document the following: physical examinations
28 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;

1 support for his diagnoses with physical examination findings; treatment objectives to evaluate
2 treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation
3 of opioid therapy.

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

6 **Count XVII – Patient I**

7 **NRS 630.306(1)(b)(2) (Violation of Standards of Practice)**

8 62. All of the allegations in the above paragraphs are hereby incorporated by reference
9 as though fully set forth herein.

10 63. Respondent treated Patient I for chronic pain with opioid analgesics. Patient I's
11 true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient
12 Designation served upon Respondent along with a copy of this Complaint.

13 64. On information and belief, Respondent wrote prescriptions to Patient I for opioid
14 analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

17 **Count XVIII – Patient I**

18 **NRS 630.3062(1) (Failure to Maintain Complete Medical Records)**

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

21 67. Respondent failed to maintain complete medical records relating to the diagnosis,
22 treatment and care of Patient I, by failing to document his actions in complying with the Model
23 Policy, including, but not limited to, failing to document the following: physical examinations
24 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;
25 support for his diagnoses with physical examination findings; treatment objectives to evaluate
26 treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation
27 of opioid therapy.

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

3 **Count XIX – Patient J**

4 **NRS 630.306(1)(b)(2) (Violation of Standards of Practice)**

5 69. All of the allegations in the above paragraphs are hereby incorporated by reference
6 as though fully set forth herein.

7 70. Respondent treated Patient J for chronic pain with opioid analgesics. Patient J’s
8 true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient
9 Designation served upon Respondent along with a copy of this Complaint.

10 71. On information and belief, Respondent wrote prescriptions to Patient J for opioid
11 analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

14 **Count XX – Patient J**

15 **NRS 630.3062(1) (Failure to Maintain Complete Medical Records)**

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

18 74. Respondent failed to maintain complete medical records relating to the diagnosis,
19 treatment and care of Patient J, by failing to document his actions in complying with the Model
20 Policy, including, but not limited to, failing to document the following: physical examinations
21 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;
22 support for his diagnoses with physical examination findings; treatment objectives to evaluate
23 treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation
24 of opioid therapy.

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

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1 **Count XXI – Patient K**

2 **NRS 630.306(1)(b)(2) (Violation of Standards of Practice)**

3 76. All of the allegations in the above paragraphs are hereby incorporated by reference
4 as though fully set forth herein.

5 77. Respondent treated Patient K for chronic pain with opioid analgesics. Patient K’s
6 true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient
7 Designation served upon Respondent along with a copy of this Complaint.

8 78. On information and belief, Respondent wrote prescriptions to Patient K for opioid
9 analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

12 **Count XXII – Patient K**

13 **NRS 630.3062(1) (Failure to Maintain Complete Medical Records)**

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

16 81. Respondent failed to maintain complete medical records relating to the diagnosis,
17 treatment and care of Patient K, by failing to document his actions in complying with the Model
18 Policy, including, but not limited to, failing to document the following: physical examinations
19 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;
20 support for his diagnoses with physical examination findings; treatment objectives to evaluate
21 treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation
22 of opioid therapy.

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

25 **Count XXIII – Patient L**

26 **NRS 630.306(1)(b)(2) (Violation of Standards of Practice)**

27 83. All of the allegations in the above paragraphs are hereby incorporated by reference
28 as though fully set forth herein.

1 84. Respondent treated Patient L for chronic pain with opioid analgesics. Patient L's
2 true identity is not disclosed herein to protect his or her privacy, but is disclosed in the Patient
3 Designation served upon Respondent along with a copy of this Complaint.

4 85. On information and belief, Respondent wrote prescriptions to Patient L for opioid
5 analgesics to treat chronic pain in a manner that deviated from the Model Policy.

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

8 **Count XIV – Patient L**

9 **NRS 630.3062(1) (Failure to Maintain Complete Medical Records)**

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

12 88. Respondent failed to maintain complete medical records relating to the diagnosis,
13 treatment and care of Patient L, by failing to document his actions in complying with the Model
14 Policy, including, but not limited to, failing to document the following: physical examinations
15 before prescribing opioid analgesics; queries of the PMP before prescribing opioid analgesics;
16 support for his diagnoses with physical examination findings; treatment objectives to evaluate
17 treatment progress; monitoring and adapting his treatment plan; progress toward discontinuation
18 of opioid therapy.

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

21 **WHEREFORE**, the Investigative Committee prays:

22 1. That the Nevada State Board of Medical Examiners give Respondent notice of the
23 charges herein against him and give him notice that he may file an answer to the Complaint herein
24 as set forth in NRS 630.339(2) within twenty (20) days of service of the Complaint;

25 2. That the Nevada State Board of Medical Examiners set a time and place for a
26 formal hearing after holding an Early Case Conference pursuant to NRS 630.339(3);

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3. That the Nevada State Board of Medical Examiners determine what sanctions to impose if it determines there has been a violation or violations of the Medical Practice Act committed by Respondent;


4. That the Nevada State Board of Medical Examiners make, issue and serve on Respondent its findings of fact, conclusions of law and order, in writing, that includes the sanctions imposed; and

5. That the Nevada State Board of Medical Examiners take such other and further action as may be just and proper in these premises.

DATED this 8 day of March, 2018.

INVESTIGATIVE COMMITTEE OF
THE NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: _____


Robert Kilroy, Esq., General Counsel
Aaron Bart Fricke, Esq., Deputy General Counsel
Attorneys for the Investigative Committee

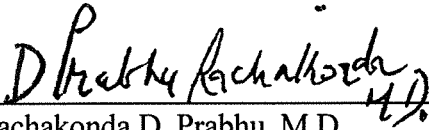
VERIFICATION

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STATE OF NEVADA)
 : ss.
COUNTY OF CLARK)

Rachakonda D. Prabhu, 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 authorized the Complaint against the Respondent herein; that he has read the foregoing Complaint; and that based upon information discovered in the course of the investigation into a complaint against Respondent, he believes that the allegations and charges in the foregoing Complaint against Respondent are true, accurate, and correct.

DATED this 8th day of March, 2018.



Rachakonda D. Prabhu, M.D.