BEFORE THE BOARD OF MEDICAL EXAMINERS OF THE STATE OF NEVADA

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In The Matter of Charges and

Complaint Against

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KEVIN R. BUCKWALTER, M.D.,

Respondent.

NCase No. 08-12069-1 Normalia 12, 2000 EILED ____ OF THE BOARD

ORDER FOR SUMMARY SUSPENSION OF RESPONDENT'S ABILITY TO PRESCRIBE, ADMINISTER, OR DISPENSE CONTROLLED SUBSTANCES

12 This matter came on for hearing at an emergency meeting of the Nevada State Board of Medical Examiners (Board) convened pursuant to NRS 241.020 and conducted telephonically on 13 the 12th day of November, 2008, to consider the request for summary suspension of Respondent's 14 ability to prescribe, administer, or dispense controlled substances filed herein on 15 November 12, 2008 by the Board's Investigative Committee. A quorum of the members of the 16 Board who constitute the adjudicative panel in this case, consisting of Sohail U. Anjum, M.D., 17 18 Javaid Anwar, M.D., S. Daniel McBride, M.D. and Mr. Van V. Heffner, Board Members, were 19 present telephonically. Edward O. Cousineau, General Counsel for the Board, appeared as 20 counsel for the Investigative Committee.

The adjudicative panel reviewed the Investigative Committee's Complaint, the request for summary suspension contained therein, and the attached exhibit. Upon review of the Complaint, request for summary suspension and attached exhibit, as well as the argument and presentation of counsel for the Investigative Committee, the adjudicative members of the Board find and conclude by a preponderance of evidence:

1. That Respondent is a physician licensed to practice medicine in the State of
Nevada and possesses the ability to prescribe controlled substances without limitation,
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OFFICE OF THE GENERAL COUNSEL 10 Nevada State Board of Medical Examiners 11 12 Reno, Nevada 89502 (775) 688-2559 13 14 15 16

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1 2. That from approximately April 4, 2007 to April 2, 2008, Respondent wrote 2 approximately forty-nine prescriptions for controlled substances for Patient A. The related 3 medical records contain inadequate documentation of Patient A's response to prescribed medications, reasons for medication increases, functional changes or evaluations, or explanation 4 5 or justification as to why Alprazolam therapy was initiated for Patient A or why the therapy was started at the maximum allowable dosage without any titration or trial of a lower prescriptive 6 7 dosage,

3. That from approximately June 29, 2006 through April 4, 2008, Respondent wrote approximately sixty-one prescriptions for controlled substances for Patient B. The related medical records contain inadequate documentation of Patient B's response to the medications, the reasons for increases in the prescriptions, or justification for the initiation of Alprazolam therapy or why the therapy was started at the maximum allowable dosage without any titration or trial of a lower prescriptive dosage,

4. That from approximately January 18, 2007 to April 9, 2008, Respondent wrote approximately seventy-one prescriptions for controlled substances for Patient C. Respondent's medical record keeping relating to the prescribing of controlled substances for Patient C include 17 very minimal record keeping relating to examinations and reasons for medication changes relating to narcotics, benzodiazepines and muscle relaxers, and there are no records relating to 18 19 treatment outcomes, intensity or duration of pain, beyond Patient C's initial presentation, no 20 documentation of changes in ability to function or continued unrelieved pain that justified 21 increases in controlled substance prescriptions,

5. 22 That from approximately May 13, 2004 to December 14, 2005, Respondent wrote approximately thirty-four prescriptions for controlled substances for Patient D. Respondent's 23 24 controlled substances prescribing patterns and associated medical record keeping is severely 25 lacking, and further, Respondent's excessive prescribing of Oxycontin and Kadian to Patient D at 26 the end of Respondent's treatment course, contributed to the death of Patient D, due to 27 Respondent's failure to recognize that Patient D had become narcotic naïve due to a protracted 28 lapse in Patient D's narcotic usage,

6. That unforeseen circumstances have arisen and exist that pose a risk of impairment of the health and safety of the public and that require immediate Board action, especially because the Board's investigation is on-going based upon patient complaints that continue to be received, and which are based upon conduct similar to the conduct described in this Order. Therefore, allowing Respondent to continue to prescribe, administer, or dispense controlled substances presents an unacceptable risk to the citizens of Nevada.

Now therefore, pursuant to NRS 233B.127:

IT IS HEREBY ORDERED that the ability of Respondent, Kevin R. Buckwalter, M.D., to prescribe, administer, or dispense controlled substances in the state of Nevada is hereby suspended pending proceedings for disciplinary action pursuant to the Complaint filed herein and issuance of a final order, or until further order of this Board.

Dated this 12th day of November, 2008.

By:

NEVADA STATE BOARD OF MEDICAL EXAMINERS

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Renee West Secretary-Treasurer

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