

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

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5)
6 **In the Matter of Charges and**)

7 **Complaint Against**)

8 **ABDUL-SAMI SIDDIQUI, M.D.,**)

9)
10 **Respondent.**)
11 _____)

Case No. 10-12158-1

FILED

OCT 21 2010

**NEVADA STATE BOARD OF
MEDICAL EXAMINERS**
By: 

12 **COMPLAINT**

13 The Investigative Committee of the Nevada State Board of Medical Examiners (Board),
14 composed of Charles N. Held, M.D., Chairman, Theodore B. Berndt, M.D., Member, and
15 Valerie J. Clark, BSN, RHU, LUTCF, Member, at the time of the authorization of filing this formal
16 complaint, by and through Edward O. Cousineau, Deputy Executive Director for the Board and
17 counsel for the Investigative Committee, having a reasonable basis to believe that
18 Abdul-Sami Siddiqui, M.D., hereinafter referred to as "Respondent," has violated the provisions of
19 Nevada Revised Statutes (NRS) Chapter 630, hereby issues its formal Complaint, stating the
20 Investigative Committee's charges and allegations, as follows:

21 1. Respondent license to practice medicine is currently active, and at all times
22 alleged herein, Respondent was licensed by the Board, pursuant to the provisions of Chapter 630
23 of the NRS.

24 2. In November of 2009, Respondent accepted the entry of an order by the Texas
25 Medical Board which imposed an administrative penalty against him in the amount of \$4,000.00.
26 The administrative penalty was based upon Respondent's submission of false or misleading
27 statement on two applications for licensure in the state of Texas, more specifically, Respondent's
28 failure to report an arrest for domestic battery which occurred in 1996. (See Exhibit 1)

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VERIFICATION

STATE OF NEVADA)
 : ss.
COUNTY OF DOUGLAS)

Charles N. Held, 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 21st day of October, 2010.



Charles N. Held, M.D.

EXHIBIT

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**ORDER IMPOSING
ADMINISTRATIVE PENALTY**

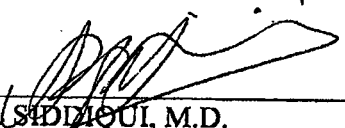
ABDUL SIDDIQUI, M.D.	Applicant for Texas Medical License
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The Texas Medical Board (TMB) has determined that Abdul Siddiqui, M.D. ("the Respondent") is in violation of Texas Occupations Code §164.052(a)(1), based on the submission of a false or misleading statement in two applications for full licensure regarding his failure to report his 1996 arrest for domestic battery that was subsequently dismissed with no action taken. TMB hereby grants Respondent's application for a license and imposes an administrative penalty for this violation, as authorized by Section 165.001, Texas Occupations Code and Board rules §§187.75-82.

The amount of the imposed penalty is \$4,000.00. Payment of this penalty is due no later than 60 days after the Respondent receives notice of this Order. The administrative penalty shall be paid in a single payment by cashier's check or money order payable to the Texas Medical Board and shall be submitted to the Executive Director of the Board for routing so as to be remitted to the Comptroller of Texas for deposit in the general revenue fund. Respondent's failure to pay the administrative penalty as ordered shall constitute grounds for further disciplinary action by the Board, and may result in a referral by the Executive Director of the Board for collection by the Office of the Attorney General.

RESPONDENT WAIVES ANY FURTHER HEARINGS OR APPEALS TO THE BOARD OR TO ANY COURT IN REGARD TO ALL TERMS AND CONDITIONS OF THIS AGREED ORDER. RESPONDENT AGREES THAT THIS IS A FINAL ORDER.

THIS ORDER IS A PUBLIC RECORD. I, ABDUL SIDDIQUI, M.D., HAVE READ AND UNDERSTAND THIS AGREED ORDER. I UNDERSTAND THAT BY SIGNING, I WAIVE CERTAIN RIGHTS. I SIGN IT VOLUNTARILY. I UNDERSTAND THIS AGREED ORDER CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.




ABDUL SIDDIQUI, M.D.
Respondent

CERTIFICATE OF MAILING

I hereby certify that I am employed by Nevada State Board of Medical Examiners and that on 21st day of October 2010; I served a file copy of the COMPLAINT, Original Settlement, Waiver and Consent Agreement along with Fingerprint Information, by mailing via USPS certified mail to the following:

Abdul-Sami Siddiqui, M.D.
P.O. Box 363159
North Las Vegas, NV 89036

Dated this 21st day of October 2010.



Angelia L. Donohoe
Legal Assistant