

BEFORE THE BOARD OF MEDICAL EXAMINERS
OF THE STATE OF NEVADA

* * * * *

In The Matter of Charges and)
Complaint Against)
JOCELYN QUEBRAL IVIE, M.D.,)
Respondent.)

Case No. 11-30615-1

FILED

FEB 22 2011

NEVADA STATE BOARD OF
MEDICAL EXAMINERS
By: *[Signature]*

COMPLAINT

The Investigative Committee of the Nevada State Board of Medical Examiners, comprised of Charles N. Held, M.D., Chairman, Theodore B. Berndt, M.D., Member, and Valerie J. Clark, Member, at the time it approved and authorized the filing of this complaint having a reasonable basis to believe that Jocelyn Quebral Ivie, M.D., hereinafter referred to as Respondent, has violated the provisions of NRS Chapter 630, hereby issues its formal Complaint, stating the Investigative Committee's charges and allegations, as follows:

1. Respondent's license is currently in active status (License No. 11553), and has been so licensed since August 1, 2005 by the Nevada State Board of Medical Examiners pursuant to the provisions of Chapter 630 of the Nevada Revised Statutes.

2. Patient A was a thirty year old (30) female at the time of the incidents in question. Her true identity is not disclosed to protect her privacy, but her identity is disclosed in the Patient Designation served on Respondent along with a copy of this Complaint.

3. On or about April 11, 2005, Patient A when 39 weeks pregnant presented to Respondent's office for a non-stress test on April 11, 2005. Patient A demonstrated a fetal heart rate between 160 and 175 bpm with two decelerations down to 130 to 150 bpm for ninety (90) to one hundred ten seconds (110) and two uterine contractions. As a result, Patient A was admitted to the hospital at around 1830 hours that evening.

1 4. At 1900 hours, the fetal heart rate decelerated to as low as 60 bpm lasting at least
2 one minute. For seventeen (17) straight hours, the fetal heart rate remained tachycardic with little
3 or no variability. Periodic variable decelerations also occurred that should have alerted the
4 physician(s) and/or staff to problems with the fetus.

5 5. At this point, an examination should have been performed with an artificial rupture
6 of membranes to induce labor. This would have demonstrated whether the baby would tolerate
7 labor. If not, a cesarean delivery ("C-section") should have been performed.

8 6. As the patient continued to be monitored, there never was a reassuring fetal heart
9 rate. It included a flat tachycardic fetal heart beat with poor to no variability and intermittent
10 decelerations.

11 7. At 0730 hours on April 12, 2005, Dr. Ivie took over care of Patient A at the
12 hospital. She performed an examination and reviewed the fetal heart rate tracing.

13 8. The baby showed a thick meconium and an abnormal presentation of face mentum
14 anterior. This abnormal presentation makes delivery very difficult. Respondent should have taken
15 immediate action to deliver the baby by C-section.

16 9. Instead, Respondent continued to observe Patient A's labor that showed a continued
17 deteriorating fetal condition. Significant deep variable decelerations with contractions and a flat
18 fetal heart rate persisted from 1040 hours to 1140 hours on April 12, 2005.

19 10. A little later at 1200 hours, Patient A had minimal cervical change, and the baby
20 still exhibited a face presentation. Despite this, Respondent began Pitocin to make labor stronger.
21 This was contraindicated in the presence of the acute fetal distress.

22 11. That same day at 1600 hours, Respondent performed another examination on
23 Patient A. The cervix was dilated to 5 c.m., and the abnormal face presentation remained. At this
24 time, Respondent finally scheduled the C-section.

25 12. Unfortunately, the baby's heart finally gave up at this late hour. After twenty-one
26 (21) hours of observed non-reassuring fetal heart tracing, the baby's heart stopped. An emergency
27 C-section was carried out, and neonatal death resulted.

28 ///

Count I

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

4 14. Nevada Administrative Code Section 630.040 defines malpractice as the failure of
5 a physician, in treating a patient, to use the reasonable care, skill, or knowledge ordinarily used
6 under similar circumstances.

7 15. Nevada Revised Statute Section 630.301(4) provides that malpractice is grounds
8 for initiating disciplinary action against a licensee.

9 16. Respondent failed to use the reasonable care, skill, or knowledge ordinarily used
10 under the same or similar circumstances when she failed and omitted to order the delivery by C-
11 section on April 11, 2005 at 1900 hours or at anytime thereafter; failed to deliver the baby on April
12 12, 2005 at 0730 hours after the examination and review of the heart tracing; ordered Pitocin for
13 Patient A when it was contraindicated in the presence of this acute fetal distress.

14 17. By reason of the foregoing, Respondent is subject to discipline by the Nevada State
15 Board of Medical Examiners as provided in Section 630.352 of the Nevada Revised Statutes.

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

17 1. That the Nevada State Board of Medical Examiners give Respondent notice of the
18 charges herein against her and give her notice that she may file an answer to the Complaint herein
19 as set forth in Section 630.339 of the Nevada Revised Statutes within twenty (20) days of service
20 of the Complaint.

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

23 3. That the Nevada State Board of Medical Examiners determine what sanctions it
24 determines to impose if it determines there has been a violation or violations of the Medical
25 Practice Act (Nevada Revised Statutes Chapter 630) committed by Respondent;

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

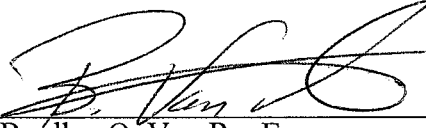
OFFICE OF THE GENERAL COUNSEL
Nevada State Board of Medical Examiners
1105 Terminal Way #301
Reno, Nevada 89502
(775) 688-2559

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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 22nd day of February, 2011.

THE NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: 
Bradley O. Van Ry, Esq.
Deputy General Counsel and Attorney for the Investigative
Committee

VERIFICATION

1 STATE OF NEVADA)
2 : ss.
3 COUNTY OF DOUGLAS)

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

11 Dated this 22nd day of February, 2011.


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14 _____
15 CHARLES N. HELD, M.D.

CERTIFICATE OF MAILING

I hereby certify that I am employed by Nevada State Board of Medical Examiners and that on 14th day of March 2011; I served a file copy of the Complaint, Patient Designation & Fingerprint Information by mailing via USPS certified return receipt mail to the following:

Jocelyn Ivie, M.D.
5320 S. Rainbow Blvd., #186
Reno, NV 89118

Dated this 14th day of March 2011.



Angelia L. Donohoe
Legal Assistant

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