

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

3 \* \* \* \* \*

4  
5 **In the Matter of Charges and Complaint**

**Case No. 19-38390-01**

6 **Against**

**FILED**

7 **ASHER SHAHZAD, M.D.,**

**JUL 12 2019**

8 **Respondent.**

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

10 **COMPLAINT**

11 The Investigative Committee (IC)<sup>1</sup> of the Nevada State Board of Medical Examiners  
12 (Board), by and through Jasmine K. Mehta, Esq., Deputy Executive Director and attorney for the IC,  
13 having a reasonable basis to believe that Asher Shahzad, M.D. (Respondent), violated the provisions  
14 of Nevada Revised Statutes (NRS) Chapter 630 and the Nevada Administrative Code (NAC)  
15 Chapter 630 (collectively Medical Practice Act), hereby issues its Complaint, stating the IC's  
16 charges and allegations as follows:

17 1. Respondent was at all times relative to this Complaint a licensed medical doctor  
18 holding an active license to practice medicine in the State of Nevada (License No. 13790).  
19 Respondent was originally licensed by the Board on January 5, 2011.

20 2. Patient A was a 25-year-old female at the time of the incidents in question. Her  
21 name is not disclosed in this Complaint to protect her identity, but her identity is disclosed in the  
22 Patient Designation contemporaneously served on Respondent with a copy of this Complaint.

23 3. At the time of the events in question, Patient A had given birth to premature twins  
24 on or about May 11, 2013.

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28 <sup>1</sup>The Investigative Committee of the Nevada State Board of Medical Examiners, at the time this formal Complaint was authorized for filing, was composed of Board members Wayne Hardwick, M.D., Chairman, Theodore B. Berndt, M.D., and Mr. M. Neil Duxbury.

1           4.       Following discharge from the hospital, on or about May 18, 2013, Patient A  
2 presented to the emergency department with a fever of 101 degrees Fahrenheit. Patient A was  
3 discharged by a doctor other than Respondent with instructions to monitor her condition.

4           5.       On May 23, 2013, Patient A presented with fever, was seen by a doctor other than  
5 Respondent, and was referred to another doctor for evaluation of possible mastitis. The physician  
6 to whom she was referred evaluated her for mastitis on or about May 29, 2013, and referred her to  
7 Dr. Dhaval Shah for an infectious disease evaluation.

8           6.       Upon information and belief, Dr. Shah, at the times relevant to this Complaint, was  
9 Respondent's practice partner or colleague at Clinical Infectious Disease Specialists. From May  
10 31, 2013 through June 12, 2013, Dr. Shah treated Patient A with various antibiotics, including  
11 intravenous antibiotic treatment, for an abdominal wound infection and recurring fever after the  
12 infection had resolved.

13           7.       On June 20, 2013, Patient A was admitted to the hospital with complaints of fever,  
14 weakness, dizziness and confusion. She was seen by Respondent. Respondent determined Patient  
15 A had a fever of unknown origin, but did not consider tuberculosis as part of the differential  
16 diagnosis. Upon information and belief, Respondent allegedly discussed with Patient A and her  
17 husband whether she had been screened for tuberculosis; however, Respondent's medical records  
18 do not reflect any such conversation.

19           8.       From June 20, 2013 through June 28, 2013, Patient A was seen nearly daily by  
20 Respondent. During that time, several imaging studies and laboratory results should have  
21 prompted consideration of tuberculosis. Patient A's chest computed tomography (CT) scans from  
22 June 21, 2013 and June 30, 2013 showed fine reticular interstitial opacities, that, while not  
23 diagnostic of tuberculosis, are consistent with miliary tuberculosis, a potential cause of fevers of  
24 unknown origin. Magnetic resonance imaging (MRI) of Patient A's head and spine on June 23,  
25 2013 and June 24, 2013 showed changes consistent with meningitis, and the leptomeninges  
26 enhancement on the June 24, 2013 MRI is more common with tuberculosis than with  
27 toxoplasmosis, the latter of which Respondent did consider. However, Respondent did not  
28 consider tuberculosis in his differential diagnosis.

1 9. On June 30, 2013, Patient A was transferred to UCLA Medical Center.

2 10. On July 1, 2013, Patient A expired. An autopsy confirmed that Patient A had  
3 *Mycobacterium tuberculosis* complex.

4 **COUNT I**

5 **NRS 630.301(4)**

6 **(Malpractice)**

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

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

11 13. NAC 630.040 defines malpractice for the purpose of NRS chapter 630 as the  
12 failure of a physician, in treating a patient, to use the reasonable care, skill, or knowledge  
13 ordinarily used under similar circumstances.

14 14. Respondent failed to use the reasonable care, skill, or knowledge ordinarily used  
15 under similar circumstances, including but not limited to the conduct described herein, when he  
16 failed to consider tuberculosis in the differential diagnosis of Patient A's symptoms and/or treat  
17 Patient A for tuberculosis.

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

20 **COUNT II**

21 **NRS 630.3062(1)(a)**

22 **(Failure to Maintain Timely, Legible, Accurate and Complete Medical Records)**

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

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

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1 18. In the event that Respondent claims that he discussed tuberculosis risk factors with  
2 Patient A and/or her husband on or about June 20, 2013, and whether she had previously been  
3 screened for tuberculosis, Respondent failed to maintain timely, legible, accurate and complete  
4 medical records relating to the diagnosis, treatment and care of Patient A.

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

7 **WHEREFORE**, the IC prays:

8 1. That the Board give Respondent notice of the charges herein against him and give  
9 him notice that he may file an answer to the Complaint herein as set forth in NRS 630.339(2)  
10 within twenty (20) days of service of the Complaint;

11 2. That the Board set a time and place for a formal hearing after holding an Early  
12 Case Conference pursuant to NRS 630.339(3);

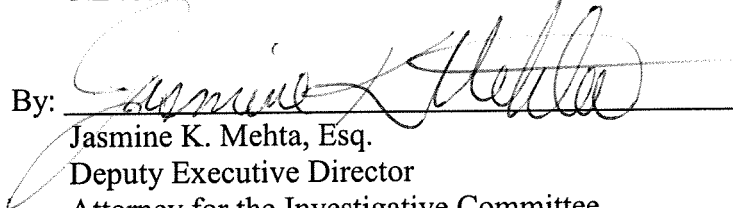
13 3. That the Board determine what sanctions to impose if it finds and concludes that  
14 there has been a violation or violations of the Medical Practice Act committed by Respondent;

15 4. That the Board make, issue and serve on Respondent its findings of fact,  
16 conclusions of law and order, in writing, to include sanctions to be imposed; and

17 5. That the Board take such other and further action as may be just and proper in these  
18 premises.

19 DATED this 12 day of July, 2019.

20  
21 INVESTIGATIVE COMMITTEE OF THE  
22 NEVADA STATE BOARD OF MEDICAL EXAMINERS

23 By:   
24 Jasmine K. Mehta, Esq.  
25 Deputy Executive Director  
26 Attorney for the Investigative Committee  
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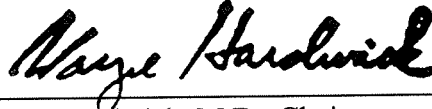
1 VERIFICATION

2 STATE OF NEVADA )  
3 : ss.  
4 COUNTY OF WASHOE )

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

12 Dated this 12<sup>th</sup> day of July, 2019.

13 INVESTIGATIVE COMMITTEE OF THE  
14 NEVADA STATE BOARD OF MEDICAL EXAMINERS

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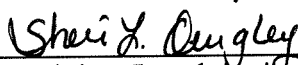
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17 Wayne Hardwick, M.D., Chairman  
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**CERTIFICATE OF MAILING**

I hereby certify that I am employed by Nevada State Board of Medical Examiners and that on the 12<sup>th</sup> day of July, 2019, I served a filed copy of the formal COMPLAINT, via USPS e-certified, return receipt mail to the following:

**Asher Shahzad, M.D.  
1408 Marbella Ridge Court  
Las Vegas, NV 89117**

Dated this 15<sup>th</sup> day of July, 2019.

  
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Sheri L. Quigley, Legal Assistant

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