BEFORE THE BOARD OF MEDICAL EXAMINERS 1 **OF THE STATE OF NEVADA** 2 * * * * * 3 4 5 In the Matter of Charges and Case No. 18-19369-01 FILED **Complaint Against** 6 7 SEP 1 6 2019 **CHRISTOPHER SEUNG CHOI, M.D.,** NEVADA STATE BOARD OF 8 **Respondent.** 8 9 10 FIRST AMENDED COMPLAINT 11 The Investigative Committee (IC) of the Nevada State Board of Medical Examiners (Board) 12 hereby issues this First Amended Complaint (Complaint) against Christopher Seung Choi, M.D. 13 (Respondent), a licensed physician in Nevada. After investigating this matter, the IC¹ has a 14 reasonable basis to believe that Respondent has violated provisions of Nevada Revised Statutes 15 (NRS) Chapter 630 and the Nevada Administrative Code (NAC) Chapter 630 (collectively the 16 Medical Practice Act). The IC alleges the following facts: 17 1. Respondent was licensed by the Board, pursuant to the provisions of the Medical 18 Practice Act, on September 15, 2000, and at all times relevant to this First Amended Complaint, 19 and is currently licensed in active status (License No. 9589). 20 2. Patient A was a 90-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 First Amended 23 Complaint. 24 At the time of the events in question, Patient A was a resident of a nursing home in 3. 25 Las Vegas, Nevada, and suffered from dementia, among other conditions. Respondent treated 26 certain patients there, including Patient A. 27 The Investigative Committee of the Nevada State Board of Medical Examiners, at the time of filing of this First Amended Complaint was approved, was composed of Board members Mr. M. Neil Duxbury, Chairman, Aury Nagy, 28 M.D., and Michael C. Edwards, M.D., FACS.

OFFICE OF THE GENERAL COUNSEL Nevada State Board of Medical Examiners 9600 Gateway Drive Reno, Nevada 89521 (775) 688-2559 OFFICE OF THE GENERAL COUNSEL Nevada State Board of Medical Examiners 9600 Gateway Drive Reno, Nevada 89521 (775) 688-2559 9

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4. On October 7, 2014, at a location outside of the nursing home, Patient A
 underwent a procedure for installation of a pacemaker, with no apparent complications at that
 time.

5. On October 20, 2014, Patient A complained of pain in her left hip and staff
reported a popping noise from the hip area upon movement of left leg. Respondent ordered an xray, which showed no fracture or acute dislocation.

6. On October 21, 2014, nursing staff noted that Patient A's left foot was cool to the
touch and exhibited skin color changes.

7. On October 21, 2014, a venous duplex ultrasound was performed. It revealed no evidence of a deep vein thrombosis. However, on the same date, an arterial duplex ultrasound revealed "no flow present" in Patient A's left proximal superficial femoral artery, left popliteal artery, left anterior and posterior tibial artery, and left dorsalis pedis artery. The report stated that there was "severe mild atherosclerotic plaquing in the left lower extremity with no detectable flow beyond the distal thigh." Further evaluation with a computed tomography (CT) angiogram was recommended. The results were faxed to Respondent on October 21, 2014.

8. Later that day, Respondent saw Patient A. Respondent did not physically examine
Patient A's lower left leg and foot that day. Respondent did not refer Patient A to a vascular
surgeon for consultation in spite of nursing notes that Patient A's left leg was cool to the touch
and exhibited skin color changes and in spite of Patient A continuing to experience pain in her
left leg.

9. On October 29, 2014, Patient A was taken by ambulance to the emergency
department.

23 10. On October 29, 2014, Patient A underwent an ultrasound of her lower left leg and
 24 an emergency angiograph, which showed total occlusion of the left limb aortic stent graft, left
 25 common iliac, external iliac and common femoral arteries. The attending surgeon's initial
 26 assessment was that the leg would have to be amputated either above or below the knee.

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11. On October 30, 2014, Patient A was taken to surgery for a bilateral, common 2 femoral endarterectomy, left profunda femoral endarterectomy, and a right femoral to left femoral Gore-Tex graft, which surgery was successful and ultimately saved Patient A's leg from amputation.

COUNT I

(Violation of Standards of Practice Established by Regulation)

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

9 13. Violation of a standard of practice adopted by the Board is grounds for disciplinary 10 action pursuant to NRS 630.306(1)(b)(2).

14. NAC 630.210 requires a physician to seek consultation with another provider of health care in doubtful or difficult cases whenever it appears that consultation may enhance the quality of medical services.

14 Respondent failed to timely seek consultation with a vascular surgeon in light of 15. 15 Patient A's cool foot, skin color changes, and arterial duplex ultrasound findings that showed no 16 detectable flow beyond the distal thigh.

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

WHEREFORE, the IC prays:

201. That the Board give Respondent notice of the charges herein against him and give 21 him notice that he may file an answer to the Complaint herein as set forth in NRS 630.339(2) 22 within twenty (20) days of service of the Complaint;

23 That the Board set a time and place for a formal hearing after holding an Early 2. 24 Case Conference pursuant to NRS 630.339(3);

25 3. That the Board determine what sanctions to impose if it finds and concludes that there has been a violation or violations of the Medical Practice Act committed by Respondent; 26

27 4. That the Board make, issue and serve on Respondent its findings of fact, 28 conclusions of law and order, in writing, to include sanctions to be imposed; and

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That the Board take such other and further action as may be just and proper in these 5. premises. gh DATED this _//2 day of September, 2019. INVESTIGATIVE COMMITTEE OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS By: Jasmine K. Mehta, Esq. **Deputy Executive Director** Attorney for the Investigative Committee (775) 688-2559 4 of 5

OFFICE OF THE GENERAL COUNSEL

Ncvada State Board of Medical Examiners 9600 Gateway Drive Reno, Nevada 89521

VERIFICATION

STATE OF NEVADA) : ss. COUNTY OF WASHOE)

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

Dated this <u>16</u>th day of September, 2019.

INVESTIGATIVE COMMITTEE OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS

mybur By:

M. Neil Duxbury, Chairman

	1	CERTIFICATE OF SERVICE	
	2	I hereby certify that I am employed by Nevada State Board of Medical Examiners and on	
	3	this day, I served a filed copy of the FIRST AMENDED COMPLAINT, via USPS e-certified	
	4	return receipt mail to the following:	
	5		
	6	DR. CHRISTOPHER CHOI, M.D.	
	7 8	c/o Eric K. Stryker, Esq. Wilson Elser Moskowitz Edelman & Dicker LLP	
(775) 688-2559	8 9	300 South 4 th Street	
	9 10	Las Vegas, Nevada 89101	
	11	11- 4 0	
	12	DATED this 16 th day of September, 2019.	
	13		
	14	Sheri L. Quigley, Legal Assistant	
	15	Nevada State Board of Medical Examiners	
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