

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

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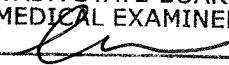
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5 **In the Matter of Charges and**
6 **Complaint Against**
7 **ROGER R. MEHTA, M.D.,**
8 **Respondent.**

Case No. 19-38522-1

FILED

OCT 15 2019

NEVADA STATE BOARD OF
MEDICAL EXAMINERS

By: 

9
10 **FIRST AMENDED COMPLAINT**

11 The Investigative Committee¹ (IC) of the Nevada State Board of Medical Examiners
12 (Board), by and through Robert Kilroy, Esq., General Counsel and attorney for the IC, having a
13 reasonable basis to believe that Roger R. Mehta, M.D. (Respondent) violated the provisions of
14 Nevada Revised Statutes (NRS) Chapter 630 and Nevada Administrative Code (NAC) Chapter 630
15 (collectively, the Medical Practice Act), hereby issues its formal First Amended Complaint
16 (Complaint), stating the IC's charges and allegations as follows:

17 1. Respondent was at all times relative to this Complaint a medical doctor holding an
18 active license to practice medicine in the State of Nevada (License No. 14004). Respondent was
19 licensed by the Board on July 6, 2011.

20 2. Patient A's true identity is not disclosed herein to protect his privacy, but is
21 disclosed in the Patient Designation served upon Respondent along with a copy of this Complaint.

22 3. On June 30, 2012, Patient A, a 57-year-old male with an initial complaint of a one-
23 month history of right hip pain radiating to the leg, was seen in urgent care, wherein an X-Ray
24 was ordered. Patient A was referred to Orthopedics. An MRI result led to an evaluation and a
25 referral to pain management. The patient was seen by Respondent, wherein labs were ordered,
26 including findings of an abnormal elevated liver function test. Patient A was told of a need to
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28 ¹ The Investigative Committee (IC) of the Nevada State Board of Medical Examiners (Board) at the time this formal
First Amended Complaint was authorized for filing, was composed of Board members Mr. M. Neil Duxbury
Chairman and Aury Nagy, M.D., and Michael Edwards, M.D., FACS.

1 repeat the lab test in a year. Patient A returned in three months with rapid weight loss and
2 neurologic abnormality leading to an evaluation by a neurologist, who ordered additional labs and
3 MRIs. Prior to the neurologist's evaluation, Patient A was admitted to the hospital and diagnosed
4 with metastatic cancer, leading to admission to hospice.

5 4. On October 16, 2012, Patient A was seen by Respondent with a complaint of
6 nocturia, continued his treatment of lower back pain, requested a referral to physical therapy for
7 knee pain, and wanted medicine for insomnia. Patient A's weight was 209 lbs; Plan: PT referral,
8 Trazodone; Labs: ordered and returned results were normal except AST 0, ALT 97, ALKP 132,
9 PSA 4.2.

10 5. On October 18, 2012, Patient A was sent a letter, which stated the PSA was mildly
11 elevated – no action required and LFT elevated – not clinically significant – repeat in one year.

12 6. On December 17, 2012, Patient A was seen by Respondent with a complaint of
13 rapid weight loss, bilateral feet edema, and lethargy. Patient A's weight was 200 lbs – physical
14 exam was within normal limits except neurologic examination with a positive Romberg.

15 7. On December 26, 2012, pursuant to a previous referral, Patient A was seen by the
16 neurologist with progressive weight loss, leg weakness and gait difficulty. Reviewed labs: LFT
17 elevated, TSH, B12, CBC w/in limits.

18 8. On December 27, 2012, Patient A was admitted into St. Rose Siena with an
19 inability to stand for a prolonged time due to weakness, and reported a 50-lb. weight loss in two
20 months. Patient A was evaluated with continued elevated LFT. A CT scan of the head showed a
21 destructive bone lesion in the right frontal lobe – suspected metastatic disease. A CT scan of the
22 chest, abdomen and pelvis indicated a necrotic mass centered in the right kidney measuring
23 greater than 25 cm diameter, which encompassed the entire right kidney and suprarenal space,
24 invading the right hepatic lobe of the liver, porta hepaticus and pancreatic head. There was
25 continuous bulky retroperitoneal adenopathy and an obstruction of the infra renal inferior vena
26 cava. Overall, the findings were most compatible with renal cell carcinoma.

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COUNT I

NRS 630.301(4)

(Malpractice)

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

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

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

12. As demonstrated by, but not limited to, the above-outlined facts, Respondent failed to use the reasonable care, skill or knowledge ordinarily used under similar circumstances when he rendered medical services to Patient A.

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

COUNT II

NRS 630.3062(1)(a)

(Failure to Maintain Complete Medical Records)

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

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

16. Respondent failed to maintain complete medical records relating to the diagnosis, treatment and care of Patient A, by failing to document his actions when he treated Patient A, whose medical records were not timely, legible, accurate and complete.

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

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COUNT III

NRS 630.306(1)(b)(2)

(Violation of Standards of Practice Established by Regulation)

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

19. Violation of a standard of practice adopted by the Board is grounds for initiating disciplinary action against a licensee pursuant to NRS 630.306(1)(b)(2).

20. 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.

21. Respondent failed to timely seek consultation with regard to Patient A's medical condition and Respondent should have consulted with an appropriate care provider to address the Patient A's medical condition.

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

WHEREFORE, the Investigative Committee prays:

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

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

3. That the Nevada State Board of Medical Examiners determine what sanctions to impose if it determines there has been a violation or violations of the Medical Practice Act committed by Respondent;

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

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 15 day of October, 2019.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: 
Robert Kilroy, Esq., General Counsel
Attorney for the Investigative Committee

VERIFICATION

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

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

10 Dated this 15th day of October, 2019.

11 INVESTIGATIVE COMMITTEE OF THE
12 NEVADA STATE BOARD OF MEDICAL EXAMINERS

13 M. NEIL DUXBURY

14 M. Neil Duxbury, Chairman
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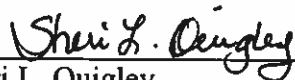
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CERTIFICATE OF MAILING

I hereby certify that I am employed by Nevada State Board of Medical Examiners and that on the 15th day of October, 2019, I served a filed copy of the FIRST AMENDED COMPLAINT, via USPS e-certified return receipt mail to the following:

Roger R. Mehta, M.D.
3211 Bluegill Way, Unit C
Henderson, NV 89014
(702) 578-7560

Dated this 15th day of October, 2019.



Sheri L. Quigley
Legal Assistant