

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

3 * * * * *

4
5 **In the Matter of Charges and Complaint**
6 **Against**
7 **DHAVAL JASVANTBHAI SHAH, M.D.,**
8 **Respondent.**

Case No. 20-32539-1

FILED

MAR 16 2020

NEVADA STATE BOARD OF
MEDICAL EXAMINERS
By: 

9
10 **COMPLAINT**

11 The Investigative Committee (IC)¹ of the Nevada State Board of Medical Examiners
12 (Board), by and through Aaron Bart Fricke, Esq., Senior Deputy General Counsel and attorney for
13 the IC, having a reasonable basis to believe that Dhaval Jasvantbhai Shah, M.D. (Respondent),
14 violated the provisions of Nevada Revised Statutes (NRS) Chapter 630 and Nevada Administrative
15 Code (NAC) Chapter 630 (collectively, the Medical Practice Act), hereby issues its Complaint,
16 stating the IC's 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. 12305).
19 Respondent was licensed by the Board on June 15, 2007.

20 2. Respondent at all times relative to this Complaint practiced in the areas of
21 infectious diseases and internal medicine, in Las Vegas, Nevada.

22 **A. Respondent's Malpractice and Failure to Maintain Complete and Accurate Records**

23 3. Patient A was a 73-year-old male at the time of the incidents in question. His name
24 is not disclosed in this Complaint to protect his identity, but his identity is disclosed in the Patient
25 Designation contemporaneously served on Respondent with a copy of this Complaint.

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28 ¹The 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 Mr. M. Neil Duxbury, Chairman, Aury Nagy, M.D., and
Michael C. Edwards, M.D., FACS.

1 4. Patient A was admitted to Mountain View Hospital in Las Vegas, Nevada, and was
2 undergoing treatment for Methicillin-resistant Staphylococcus Aureus (MRSA) infection and
3 endocarditis, among other conditions, when Respondent assumed responsibility for treating
4 Patient A’s MRSA infection on January 29, 2020, until Patient A’s death on February 6, 2020.

5 **COUNT I**

6 **NRS 630.301(4) (Malpractice)**

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

9 6. NRS 630.301(4) provides that malpractice is grounds for disciplinary action against
10 a licensee.

11 7. NAC 630.040 defines malpractice, for the purposes 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 8. Respondent failed to use the reasonable care, skill and knowledge ordinarily used
15 under similar circumstances, including but not limited to the conduct described herein, when he
16 failed to ensure that appropriate antibiotics were ordered for and being administered to Patient A,
17 while Patient A was under his care from January 29, 2020, until February 6, 2020.

18 9. 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) (Failure to Maintain Accurate and Complete Medical Records)**

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

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

27 12. Respondent failed to maintain accurate and complete medical records regarding his
28 treatment of Patient A from January 29, 2020, until February 6, 2020.

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

3 **B. Respondent's Responsibility For His Supervisee Physician Assistant's Misconduct**

4 14. At all times relevant to this Complaint, Respondent supervised Clinton Anderson,
5 PA-C, a physician assistant licensed by the Board (Anderson), pursuant to a formal notice of
6 supervision provided to the Board in accord with NAC 630.360(4), wherein Respondent certified
7 that he had read and was aware of all provisions of the Medical Practice Act concerning his duties
8 as a supervising physician.

9 15. Pursuant to NAC 630.370, as Anderson's supervising physician, Respondent is
10 responsible for all the medical activities of Anderson, including his treatment of Patient A and
11 maintenance of medical records for his treatment of Patient A.

12 16. Pursuant to NAC 630.375, Anderson is considered to be, and is deemed the agent
13 of, Respondent in the performance of all medical activities, including his treatment of Patient A
14 and maintenance of medical records for his treatment of Patient A.

15 **COUNT III**

16 **NRS 630.301(4) (Malpractice – Respondeat Superior)**

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

19 18. NAC 630.380(1)(f) provides that malpractice in the performance of medical
20 services is grounds for initiating disciplinary action against a physician assistant.

21 19. Additionally, NAC 630.380(1)(m) provides that violation of a provision of NRS
22 630.301 to 630.3065, inclusive, is grounds for initiating disciplinary action against a physician
23 assistant.

24 20. NRS 630.301(4) provides that malpractice is grounds for disciplinary action against
25 a licensee.

26 21. NAC 630.040 defines malpractice, for the purposes of NRS Chapter 630, as the
27 failure of a physician, in treating a patient, to use the reasonable care, skill, or knowledge
28 ordinarily used under similar circumstances.

1 22. Anderson failed to use the reasonable care, skill and knowledge ordinarily used
2 under similar circumstances, including but not limited to the conduct described herein, when he
3 failed to ensure that appropriate antibiotics were ordered for and being administered to Patient A,
4 while Patient A was under his care from January 29, 2020, until February 6, 2020.

5 23. Pursuant to NAC 630.370 and 630.375, Respondent is professionally responsible
6 for his agent Anderson's malpractice.

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

9 **COUNT IV**

10 **NRS 630.3062(1)(a)**

11 **(Failure to Maintain Accurate and Complete Medical Records – Respondeat Superior)**

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

14 26. NAC 630.380(1)(m) provides that violation of a provision of NRS 630.301 to
15 630.3065, inclusive, is grounds for initiating disciplinary action against a physician assistant.

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

19 28. Anderson failed to maintain accurate and complete medical records regarding his
20 treatment of Patient A from January 29, 2020, until February 6, 2020.

21 29. Pursuant to NAC 630.370 and 630.375, Respondent is professionally responsible
22 for his agent Anderson's failure to maintain accurate and complete medical records.

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

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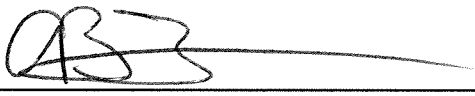
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WHEREFORE, the IC prays:

1. That the Board 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 Board set a time and place for a formal hearing after holding an Early Case Conference pursuant to NRS 630.339(3);
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;
4. That the Board make, issue and serve on Respondent its findings of fact, conclusions of law and order, in writing, to include sanctions to be imposed; and
5. That the Board take such other and further action as may be just and proper in these premises.

DATED this 16 day of March, 2020.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: 
Aaron Bart Fricke, Esq., Senior Deputy General Counsel
Attorney for the Investigative Committee

VERIFICATION

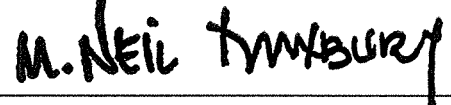
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STATE OF NEVADA)
 : ss.
COUNTY OF WASHOE)

Mr. M. Neil Duxbury, 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 16th day of March, 2020.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS



M. Neil Duxbury, Chairman

OFFICE OF THE GENERAL COUNSEL
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