

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. 22-27891-1

6 **Against:**

FILED

7 **GEORGE PETER CHAMBERS, M.D.**

SEP 21 2022

8 **Respondent.**

NEVADA STATE BOARD OF
MEDICAL EXAMINERS
By: 

9
10 **COMPLAINT**

11 The Investigative Committee¹ (IC) of the Nevada State Board of Medical Examiners
12 (Board), by and through Brandee Mooneyhan, J.D., Deputy General Counsel and attorney for the
13 IC, having a reasonable basis to believe that George Peter Chambers, M.D., (Respondent) violated
14 the provisions of Nevada Revised Statutes (NRS) Chapter 630 and Nevada Administrative Code
15 (NAC) Chapter 630 (collectively, the Medical Practice Act), hereby issues its Complaint, stating the
16 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. 10476). Respondent was
19 originally licensed by the Board on April 30, 2003, and specializes in obstetrics and gynecology.

20 2. As noted by the Committee on Ethics of the American College of Obstetricians and
21 Gynecologists (ACOG), the "relationship between obstetrician-gynecologists and their
22 patients . . . requires a high level of trust and professional responsibility," because the practice of
23 this medical specialty "includes interactions in times of intense emotion and vulnerability for
24 patients and involves sensitive physical examinations and medically necessary disclosure of
25 private information about symptoms and experiences." See AGOC Committee Opinion No. 796,
26 *Sexual Misconduct* (January 2020).

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28 ¹ 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 Victor M. Muro, M.D., Chowdhury H. Ahsan,
M.D., Ph.D., FACC, and Ms. Pamela J. Beal.

1 3. Physician behavior, gestures, or expressions that are seductive, sexually suggestive,
2 disrespectful of patient privacy, or sexually demeaning to a patient constitute sexual impropriety,
3 and are a form of physician sexual misconduct. *Id.*

4 4. In professional settings, “obstetrician-gynecologists should strictly avoid sexual
5 innuendo, sexually suggestive humor, and sexually provocative remarks,” and even in nonclinical
6 communication with current patients, should maintain professional boundaries. *Id.*

7 PATIENT A

8 5. Patient A² was a thirty-six (36) year-old female at the time of the events at issue.

9 6. Patient A sought surgical repair of a damaged perineum, and Patient A’s regular
10 gynecologist referred Patient A to Respondent for consultation. Patient A presented to
11 Respondent’s medical office on November 17, 2020, for the desired consultation.

12 7. After telling Patient A to undress for a physical examination, Respondent told
13 Patient A to keep her personal cellular phone nearby, as he would be using it to take pictures
14 during the examination.

15 8. During the course of Patient A’s examination, Respondent used Patient A’s cellular
16 phone to take approximately twelve (12) photographs of Patient A’s vaginal and anal areas.

17 9. Among the photographs taken by Respondent on November 17, 2020, is a
18 photograph of him inserting four (4) fingers in Patient A’s vagina.

19 10. Of the approximately twelve (12) photographs he took of Patient A on
20 November 17, 2020, Respondent directed her to send two (2) of the photos, which showed her
21 vulva, to his cellular phone via text message.

22 11. The photograph of Respondent inserting four (4) fingers into Patient A’s vagina
23 was not one of the photographs he asked her to text to him.

24 12. Patient A was uncomfortable texting the pictures to Respondent’s cellular phone, in
25 part because she had no assurances that the data was being exchanged securely, how the pictures
26 might be used, or who might have access to them once they were sent.

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

1 Nonetheless, Patient A did as Respondent directed and sent the two (2) photographs via text
2 message to the phone number Respondent provided.

3 13. In his medical record of the November 17, 2020, encounter, Respondent indicated
4 that he inserted two (2) fingers in Patient A's vagina, stating: "On sizing the introital opening with
5 my two examining fingers, the vagina opened to a width of 7cm horizontally and vertically."

6 14. In his response to a request for information in the IC's investigation of this matter,
7 Respondent repeated his assertion that he inserted only two (2) fingers in Patient A's vagina
8 during the November 17, 2020, encounter, stating that he "inserted one finger into her vagina" in
9 his evaluation of her pelvic floor muscles, and "then inserted [his] two examining fingers to check
10 the tonicity of her pubococcygeus muscles by asking her to squeeze her vagina."

11 15. Respondent did not document in the medical record, nor inform the IC during its
12 investigation, that during the November 17, 2020, encounter with Patient A, he inserted four (4)
13 fingers into her vagina.

14 16. After his physical examination of Patient A, Respondent informed Patient A that
15 during the examination, he had attempted to "fist" her, that is, insert his entire hand into her
16 vagina, *see Artemie v. State*, No. A-10463, 2011 WL 5904452, at *8 (Alaska Ct. App. Nov. 23,
17 2011), but had been unable to insert his entire hand, and he showed her how much of his hand he
18 had been able to insert.

19 17. Respondent also showed Patient A the two (2) photographs that she had texted him,
20 which he had printed following the physical examination, and used them to explain the procedures
21 he proposed to perform on her. Respondent included the two (2) photographs in Patient A's
22 medical record.

23 18. After her encounter with Respondent on November 17, 2020, Patient A suffered
24 pain and tenderness in her genital area.

25 19. The other approximately ten (10) photographs Respondent took of Patient A's
26 vaginal and rectal area, which he did not direct her to send to him, were not for purposes of
27 medical examination or treatment.

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1 28. Respondent's behavior in telling Patient A that he had attempted to "fist" her was
2 humiliating and sexually demeaning to Patient A and thus adversely affected the quality of care
3 rendered to her.

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

6
7 **COUNT III**

8 **NRS 630.306(1)(b)(1) – Engaging in Conduct Intended to Deceive**

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

11 31. NRS 630.306(1)(b)(1) provides that "engaging in any conduct, which is intended to
12 deceive" constitutes grounds for initiating disciplinary action against a physician.

13 32. Respondent's statement in the medical record of his encounter with Patient A on
14 November 17, 2020, that he measured Patient A's introital opening with "two examining fingers"
15 and his failure to otherwise document that he had inserted four (4) fingers into Patient A's vagina
16 during that encounter was calculated to conceal that he had inserted four (4) fingers into Patient
17 A's vagina.

18 33. Respondent's statement in his response to the IC's investigative inquiry that he had
19 inserted no more than two (2) fingers into Patient A's vagina during the November 17, 2020,
20 encounter was calculated to conceal that Respondent had inserted four (4) fingers into Patient A's
21 vagina.

22 34. By knowingly making statements designed to conceal that he had inserted four (4)
23 fingers into Patient A's vagina during his November 17, 2020, encounter with her, Respondent
24 engaged in conduct intended to deceive the Board or any other authority examining his record of
25 the encounter.

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

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COUNT IV

NRS 630.3062(1)(a) – Failure to Maintain Accurate Medical Records

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

37. 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” constitute grounds for initiating discipline against a licensee.

38. Respondent failed to maintain accurate and complete medical records relating to the diagnosis, treatment and care of Patient A when he failed to document in the record of his November 17, 2020, encounter with her that he had inserted four (4) fingers into her vagina during the encounter.

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

PATIENT B

40. Patient B³ was a thirty-five (35) year-old female at the time of the events at issue.

41. Patient B was a patient of Respondent for several years, and had an appointment with him on October 29, 2018.

42. During his October 29, 2018, encounter with Patient B, Respondent explained that he would pay her or other patients one thousand dollars (\$1,000) to allow him to take, or arrange for the taking of, nude photographs of the patient(s), ostensibly to use in an advertisement for his services.

43. The nude photographs for which Respondent offered to pay Patient B or other patients were not for purposes of medical examination or treatment.

44. Telling Patient B during a medical encounter that he would pay her or other patients one thousand dollars (\$1,000) to pose for nude photographs that were not for purposes of medical examination or treatment was sexually suggestive and/or sexually demeaning to Patient B and violated the professional boundaries of a medical encounter between a doctor and a patient.

³ Patient B’s true identity is not disclosed herein to protect her privacy, but is disclosed in the Patient Designation served upon Respondent along with a copy of this Complaint.

COUNT V

NRS 630.301(7) – Engaging in Conduct That Violates the Trust of a Patient and Exploits the Relationship With the Patient for Financial or Other Personal Gain

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

46. NRS 630.307(7) provides that “engaging in conduct that violates the trust of the patient and exploits the relationship between the physician and the patient for financial or other personal gain” constitutes grounds for initiating discipline against a physician.

47. In expressing to Patient B in the midst of a medical encounter that he would pay her or other patients one thousand dollars (\$1,000) to pose for nude photographs for Respondent to use for purposes other than for medical examination or treatment, Respondent violated Patient B’s trust and exploited his relationship with her in order to realize financial or other personal gain for himself.

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

PATIENT C

49. Patient C⁴ was a twenty-seven (27) year-old female at the time of the events at issue.

50. Patient C visited Respondent’s practice in 2019 for routine gynecological care and to address dysmenorrhea and pelvic pain.

51. At an encounter on or about October 15, 2019, Patient C mentioned to Respondent that she was struggling financially.

52. After the October 15, 2019, encounter, Respondent told Patient C he was seeking models to participate in a photography session in which photos would be taken of the model’s vaginal area and nude body, ostensibly for inclusion in Respondent’s “portfolio” of work and/or an advertisement. Respondent offered to pay Patient C one thousand dollars (\$1,000) to

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⁴ Patient C’s true identity is not disclosed herein to protect her privacy, but is disclosed in the Patient Designation served upon Respondent along with a copy of this Complaint.

1 participate in such a photography session, as well as give her a thumb drive with the “boudoir”
2 photos resulting from the session.

3 53. Patient C thought it was odd that Respondent was soliciting photographs of her
4 vaginal area as representative of his work because he had never performed any cosmetic
5 procedure on her genitals.

6 54. The nude photographs for which Respondent offered to pay Patient C were not for
7 purposes of medical examination or treatment.

8 55. Offering to pay Patient C one thousand dollars (\$1,000) to pose for nude
9 photographs that were not for purposes of medical examination or treatment was sexually
10 suggestive and/or sexually demeaning to Patient C and violated the professional boundaries of a
11 medical encounter between a doctor and a patient.

12 **COUNT VI**

13 **NRS 630.301(7) – Engaging in Conduct That Violates the Trust of a Patient and Exploits the**
14 **Relationship With the Patient for Financial or Other Personal Gain**

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

17 57. NRS 630.307(7) provides that “engaging in conduct that violates the trust of the
18 patient and exploits the relationship between the physician and the patient for financial or other
19 personal gain” constitutes grounds for initiating discipline against a physician.

20 58. In offering to pay Patient C one thousand dollars (\$1,000) to pose for nude
21 photographs for Respondent to use for purposes other than for appropriate medical examination or
22 treatment, Respondent violated Patient C’s trust and exploited his relationship with her in order to
23 realize financial or other personal gain for himself.

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

26 **PATIENTS A, B, AND C**

27 60. As set forth by the above-outlined facts, Respondent has demonstrated a pattern of
28 failing to use the reasonable care, skill, or knowledge ordinarily used by obstetrician-

1 gynecologists in good standing by repeatedly engaging in sexual improprieties with more than one
2 patient.

3 61. As set forth by the above-outlined facts, Respondent repeatedly exploited his
4 relationships with patients and violated patients' trust by engaging in sexual improprieties that
5 constitute sexual misconduct.

6 62. Respondent's repeated acts of sexual misconduct and violations of the Medical
7 Practice Act as set forth above undermine the public's trust and respect for the medical profession
8 and thereby bring the medical profession into disrepute.

9 **COUNT VII**

10 **NRS 630.306(1)(g) – Continual Failure to Practice Medicine Properly**

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

13 64. NRS 630.306(1)(g) provides that "continual failure to exercise the skill or diligence
14 or use the methods ordinarily exercised under the same circumstances by physicians in good
15 standing practicing in the same specialty or field" constitutes grounds for initiating discipline
16 against a physician.

17 65. By repeatedly engaging in sexual misconduct with Patients A, B, and C, as set forth
18 above, Respondent has continually failed to exercise the skill and diligence and use the methods
19 ordinarily exercised under the same circumstances by physicians in good standing practicing in his
20 field of obstetrics and gynecology.

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

23 **COUNT VIII**

24 **NRS 630.301(9) – Disreputable Conduct**

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

27 68. NRS 630.301(9) provides that engaging in conduct that brings the medical
28 profession into disrepute constitutes grounds for initiating discipline against a physician.

1 69. As demonstrated by the above-outlined facts, by repeatedly engaging in sexual
2 misconduct and by repeatedly violating his patients' trust and exploiting his relationship with
3 them, Respondent engaged in conduct that brings the medical profession into disrepute.

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

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

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

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

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

14 4. That the Board award fees and costs for the investigation and prosecution of this
15 case as outlined in NRS 622.400;

16 5. That the Board make, issue and serve on Respondent its findings of fact,
17 conclusions of law and order, in writing, that includes the sanctions imposed; and

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

20 DATED this 21st day of September, 2022.

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

23 By: Brandee Mooneyhan

24 BRANDEE MOONEYHAN, J.D.

25 Deputy General Counsel

26 9600 Gateway Drive

27 Reno, NV 89521

28 Tel: (775) 688-2559

Email: mooneyhanb@medboard.nv.gov

Attorney for the Investigative Committee

1 VERIFICATION


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

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

11 DATED this 21 day of September, 2022.

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

14 By:

15 
16 VICTOR M. MURO, M.D.
17 *Chairman of the Investigative Committee*