

BEFORE THE BOARD OF MEDICAL EXAMINERS
 OF THE STATE OF NEVADA

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In the Matter of Charges and Complaint

Case No. 22-8666-2

Against:

FILED

MICHAEL SCOTT MALL, M.D.,

MAY - 5 2022

Respondent.

NEVADA STATE BOARD OF
 MEDICAL EXAMINERS
 By: 

COMPLAINT

The Investigative Committee¹ (IC) of the Nevada State Board of Medical Examiners (Board), by and through Donald K. White, J.D., Senior Deputy General Counsel and attorney for the IC, having a reasonable basis to believe that Michael Scott Mall, M.D. (Respondent) violated the provisions of Nevada Revised Statutes (NRS) Chapter 630 and Nevada Administrative Code (NAC) Chapter 630 (collectively, the Medical Practice Act), hereby issues its Complaint, stating the IC's charges and allegations as follows:

1. Respondent was at all times relative to this Complaint a medical doctor holding an active license to practice medicine in the State of Nevada (License No. 6074). Respondent was originally licensed by the Board on July 1, 1990.

2. Patient A was an approximately forty-six (46) year old female at the time of the events in question. 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.

3. Respondent treated Patient A from on or about March 2012, to on or about October 2018, to manage her chronic cervical and lumbar spine pain, as well as other musculoskeletal pain that she was experiencing.

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¹ The Investigative Committee of the Nevada State Board of Medical Examiners, at the time this formal Complaint was authorized for filing on November 15, 2019, was composed of Board members Mr. M. Neil Duxbury, Aury Nagy, M.D., and Michael C. Edwards, M.D., FACS.

1 4. Respondent's medical records regarding the treatment of Patient A failed to contain
2 therapeutic goals utilizing opioid pain medication to treat her chronic pain.

3 5. Patient A passed away on or about October 27, 2018, due to oxycodone toxicity.

4 **COUNT I**

5 **NRS 630.306(1)(b)(3) - Violation of a Provision of Chapter 639 of Nevada Revised Statutes**
6 **Governing Prescribing Controlled Substances**

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

9 2. NRS 630.306(1)(b)(3) provides that a violation of the of a provision of NRS 639
10 that is applicable to a licensee who is a practitioner, as defined in NRS 639.0125 constitutes
11 grounds for initiating disciplinary action.

12 3. NRS 639.23913² provides in pertinent part that a practitioner is required to, among
13 other things, review the treatment plan, determine whether continuation of treatment using the
14 controlled substance is medically appropriate, and develop and document the revised treatment
15 plan, if needed, for a patient who has used the controlled substance for ninety (90) consecutive
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18 ² **NRS 639.23913 Requirements for prescribing certain controlled substances to patients who have
19 used controlled substance for 90 consecutive days; revised treatment plan required for such prescription.**

20 1. Before prescribing a controlled substance listed in schedule II, III or IV to continue the treatment of pain of a
21 patient who has used the controlled substance for 90 consecutive days or more, a practitioner, other than a
22 veterinarian, must:

21 (a) Require the patient to complete an assessment of the patient's risk for abuse, dependency and addiction that
22 has been validated through peer-reviewed scientific research;

22 (b) Conduct an investigation, including, without limitation, appropriate hematological and radiological studies, to
23 determine an evidence-based diagnosis for the cause of the pain;

23 (c) Meet with the patient, in person or using telehealth, to review the treatment plan established pursuant to
24 paragraph (c) of subsection 1 of NRS 639.23911 to determine whether continuation of treatment using the controlled
25 substance is medically appropriate; and

24 (d) If the patient has been prescribed a dose of 90 morphine milligram equivalents or more of an opioid per day
25 for 90 days or longer, consider referring the patient to a specialist.

25 2. If, after conducting a review of the treatment plan and considering referral of the patient to a specialist
26 pursuant to paragraphs (c) and (d) of subsection 1, the practitioner decides to continue to prescribe a dose of 90
27 morphine milligram equivalents or more of the opioid per day, the practitioner must develop and document in the
28 medical record of the patient a revised treatment plan, which must include, without limitation, an assessment of the
increased risk for adverse outcomes.

3. For the purposes of this section, the daily dose of a controlled substance must be calculated in accordance
with the most recent guidelines prescribed by the Centers for Disease Control and Prevention of the United States
Department of Health and Human Services.

1 days or more. Respondent failed to develop and review a treatment plan analyzing whether the
2 continued prescription of high doses of opioid pain medication was appropriate for Patient A.

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

5 **COUNT II**

6 **NRS 630.3062(1)(a) - Failure to Maintain Proper Medical Records**

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 630.3062(1)(a) provides that the “failure to maintain timely, legible, accurate
10 and complete medical records relating to the diagnosis, treatment and care of a patient” constitute
11 grounds for initiating discipline against a licensee.

12 7. Respondent failed to maintain accurate and complete medical records relating to
13 the diagnosis, treatment and care of Patient A when he failed to document his medical analysis, or
14 document a coherent and reasonably safe treatment plan when prescribing high doses of controlled
15 substances to Patient A.

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

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

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

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

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

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


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

DATED this 5th day of May, 2022.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: 

DONALD K. WHITE, J.D.
Senior Deputy General Counsel
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Attorney for the Investigative Committee

VERIFICATION


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STATE OF NEVADA)
 : ss.
COUNTY OF WASHOE)

Bret W. Frey, M.D., 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 5th day of May, 2022.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: 

BRET W. FREY, M.D.
Chairman of the Investigative Committee