## BEFORE THE BOARD OF MEDICAL EXAMINERS OF THE STATE OF NEVADA

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In the Matter of Charges and

**Complaint Against:** 

JOSE HIRAM ALVAREZ, M.D.,

Respondent.

Case No. 21-28177-2

FILED

JAN 19 2022

NEVADA STATE BOARD OF MEDICAL EXAMINERS By:

### FIRST AMENDED COMPLAINT

The Investigative Committee<sup>1</sup> (IC) of the Nevada State Board of Medical Examiners (Board), by and through Donald K. White, J.D., General Counsel and attorney for the IC, and Ian J. Cumings, J.D., Deputy General Counsel and attorney for the IC, having a reasonable basis to believe that Jose Hiram Alvarez, 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. 10765). Respondent was originally licensed by the Board on December 5, 2003. Respondent's specialty is listed as Obstetrics/Gynecology on the Board's website. Cosmetic surgery is not a specialty therein obstetrics and gynecology
- 2. Patient A, Patient B and Patient C's true identities are not disclosed herein to protect their privacy but was disclosed in the Patient Designation, which was served upon Respondent along with a copy of the original Complaint. The Patient Designations have not been altered.
- 3. On August 20, 2018, Patient A presented and consented for Respondent to perform the following procedures: suction-assisted liposuction of the abdomen, flank, and back;

<sup>&</sup>lt;sup>1</sup> 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 Wayne Hardwick, M.D., Aury Nagy, M.D., and Mr. M. Neil Duxbury.

abdominoplasty pannus removal, and a fat transfer to the buttock. Respondent used tumescent anesthesia for all the procedures and acted as Surgeon and Anesthesiologist during Patient A's surgery. Within the patient's history and physical examinations, Patient A's medical records lacked the standard measurements and details typically noted in cosmetic plastic surgery evaluations.

- 4. On August 8, 2018, Patient B presented and consented for Respondent to perform the following procedures: suction-assisted liposuction of the abdomen, flank, and back; abdominoplasty pannus removal, and a fat transfer to the buttock. Respondent used tumescent anesthesia for all the procedures and acted as Surgeon and Anesthesiologist for Patient B's care. As with Patient A., within Patient B's medical records lacked the standard measurements and details typically noted in cosmetic plastic surgery evaluations.
- 5. On January 8, 2018, Patient C presented and consented for Respondent to perform the following procedures: suction-assisted liposuction of the abdomen, flank and back; abdominoplasty pannus removal, and a fat transfer to the buttock. Respondent used tumescent anesthesia for all the procedures and acted as surgeon and anesthesiologist for Patient C's care. Patient C's medical record lacked the standard measurements and details typically noted in cosmetic plastic surgery evaluations.
- 6. Respondent is not certified by a specialty board of the American Board of Medical Specialties, as required by NRS 630.160, to perform plastic surgery. Cosmetic surgery is a subspecialty of plastic surgery. Respondent's training consisted of workshops, and he received certificates of completion in cosmetic surgery. Performing abdominoplasties, brachioplasties, breast augmentations, and fat transfer procedures, require these procedures to be performed under general anesthesia with a board-certified Anesthesiologist or Certified Registered Nurse Anesthetist (CRNA) present (Emphasis added). Liposuction procedures are generally acceptable with the use of tumescent anesthesia; however, the other procedures performed by Respondent required the use of a general anesthesia with a board-certified Anesthesiologist or CRNA present. Neither were present during the surgeries on Patients A, B or C by Respondent. Respondent has no documentation regarding his training and/or experience for performing in brachioplasties, abdominoplasties or fat transfer to the buttocks.

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### **COUNTS I-III**

### NRS 630.301(4) (Malpractice)

- 7. All of the allegations contained in the above paragraphs are hereby incorporated by reference as though fully set forth herein.
- 8. NRS 630.301(4) provides that malpractice of a physician is grounds for initiating disciplinary action against a licensee.
- 9. 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.
- 10. 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 provided medical services to Patients A, B and C, because Respondent lacked the requisite training in plastic surgery to single-handedly perform liposuctions, breast augmentations, brachioplasties, fat transfers, and abdominoplasties, and, because Respondent improperly used tumescent anesthesia when performing abdominoplasties, brachioplasties, breast augmentations, and fat transfer procedures.
- 11. By reason of the foregoing, Respondent is subject to discipline by the Board as provided in NRS 630.352.

### **COUNTS IV-VI**

### NRS 630.306(1)(e) (Practice Beyond Scope of License)

- 12. All the allegations contained in the above paragraphs are hereby incorporated by reference as though fully set forth herein.
- NRS 630.306(1)(e) provides that practicing or offering to practice beyond the scope 13. permitted by law or performing services which the Licensee knows or has reason to know that he or she is not competent to perform, or which are beyond the scope of his or her training is grounds for initiating disciplinary action against a licensee.

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- As demonstrated by, but not limited to the above-outlined facts, Respondent's 14. specialty is listed as Obstetrics/Gynecology under NRS 630.160. Respondent is not a board-certified Plastic Surgeon and has only received instruction in cosmetic surgery from workshops and therefore lacks the requisite training in plastic and cosmetic surgery to perform liposuctions, breast augmentations, brachioplasties, fat transfers, and abdominoplasties.
- By reason of the foregoing, Respondent is subject to discipline by the Board as 15. provided in NRS 630.352.

### **COUNTS VII-IX**

### NRS 630.3062(1)(a) (Failure to Maintain Proper Medical Records)

- All of the allegations contained in the above paragraphs are hereby incorporated by 16. reference as though fully set forth herein.
- 17. 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.
- Respondent failed to maintain accurate and complete medical records relating to 18. the diagnosis, treatment and care of Patient A, B and C by failing to document his actions and noting the standard measurements and details typically noted in cosmetic plastic surgery evaluations when he treated Patients A, B and C.
- By reason of the foregoing, Respondent is subject to discipline by the Board as 19. provided in NRS 630.352.

## WHEREFORE, the Investigative Committee prays:

- That the Board give Respondent notice of the charges herein against him and give 1. 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;
- That the Board set a time and place for a formal hearing after holding an Early 2. Case Conference pursuant to NRS 630.339(3);
- That the Board determine what sanctions to impose if it determines there has been 3. a violation or violations of the Medical Practice Act committed by Respondent;

# OFFICE OF THE GENERAL COUNSEL Nevada State Board of Medical Examiners

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- 4. That the Board award fees and costs for the investigation and prosecution of this case as outlined in NRS 622.400;
- 5. That the Board make, issue and serve on Respondent its findings of fact, conclusions of law and order, in writing, that includes the sanctions imposed; and
- 6. That the Board take such other and further action as may be just and proper in these premises.

DATED this And any of January, 2022.

INVESTIGATIVE COMMITTEE OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS

By:

DONALD K. WHITE, J.D. Senior Deputy General Counsel

9600 Gateway Drive Reno, NV 89521 Tel: (775) 688-2559

Email: dwhite@medboard.nv.gov

Attorney for the Investigative Committee

## OFFICE OF THE GENERAL COUNSEL Nevada State Board of Medical Examiners

## **VERIFICATION**

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 Amended Complaint against the Respondent herein; that he has read the foregoing Amended 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 Amended Complaint against Respondent are true, accurate and correct.

DATED this 1946 DATED this 1940 DATED this 194

INVESTIGATIVE COMMITTEE OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS

By:

BRET W. REY, M.D.

Chairman of the Investigative Committee