

1 4. The American Society of Anesthesiology (ASA) has published a position statement
2 on “Anesthetic Care During Interventional Pain Procedures for Adults”³ and the concomitant risk
3 of procedural sedation not only includes the general risks of anesthesia but also the additional risk
4 of nerve damage, as these procedures are in close proximity to neural and vital structures. The
5 standard of care requires that a patient be able to give feedback regarding needle placement and
6 pain and monitoring of level consciousness. During high dose propofol anesthesia or deep
7 sedation, patient feedback cannot be solicited.

8 5. Respondent failed to document any medical rationale or necessity for using deep
9 sedation anesthesia during the procedure.

10 6. On August 30, 2019, at 11:16 a.m., Patient A was taken to the operating room and
11 placed on the procedure table. Respondent, without any documented discussion with the doctor
12 performing the TESI injections, then began administering deep sedation anesthesia. Patient A
13 ultimately received three (3) successive doses of IV Propofol (100mg each), while the other doctor
14 performed the TESI procedures on Patient A’s right T6-7 and T7-8 vertebrae.⁴

15 7. The procedure ended at 11:31 a.m., and the anesthesia time noted by Respondent
16 was fifteen (15) minutes from anesthesia start to finish. Respondent opines that Patient A “must
17 have awakened to some degree at least twice during the procedure...” otherwise there would have
18 been no reason to have administered an additional two (2) doses of IV Propofol (100mg).

19 8. After the procedure, when Patient A regained consciousness, she complained of
20 pain, numbness, and tingling. The physician that performed the TESI’s, then took Patient A back
21 to the OR and, for reasons not documented, performed an SI joint injection using conscious
22 sedation, and then ordered an MRI.

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25 ³ “Anesthetic Care During Interventional Pain Procedures for Adults,” states “[e]xamples of procedures that
26 typically do not require sedation but are not limited to epidural steroid injections, epidural blood patch, trigger point
injections, injections into the shoulder, hip, knee, facet, and sacroiliac joints, and occipital nerve blocks.” (Emphasis
added.)

27 ⁴ Medicare (CMS) guidelines for performing TESI confirms the avoidance of deep sedation or general
28 anesthesia, stating “[u]se of Moderate or Deep Sedation, General Anesthesia, and Monitored Anesthesia (MAC) is
usually unnecessary, or rarely indicated for these procedures and therefore, not considered medically reasonable and
necessary.” “Even in patients with a needle phobia and anxiety, typically oral anxiolytics suffice. In exceptional and
unique cases, documentation must clearly establish the need for such sedation in the specific patient.”

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

4 18. Respondent failed to maintain complete medical records relating to the diagnosis,
5 treatment and care of Patient A, by failing to correctly document his actions when he treated
6 Patient A, by, among other things, not documenting any medical rationale or medical necessity for
7 using anesthesia during the procedure. Thus, Respondent’s medical records were not timely,
8 legible, accurate, and complete.

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

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

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

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

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

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

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

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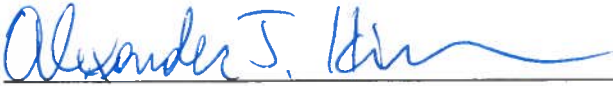
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6. That the Board take such other and further action as may be just and proper in these premises.

DATED this 11th day of July, 2024.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: 

ALEXANDER J. HINMAN
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Attorney for the Investigative Committee

OFFICE OF THE GENERAL COUNSEL
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VERIFICATION


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STATE OF NEVADA)
 : ss.
COUNTY OF CLARK)

Chowdhury H. Ahsan, M.D., Ph.D., FACC, 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 11th day of July, 2024.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: 

CHOWDHURY H. AHSAN, M.D., PH.D., FACC
Chairman of the Investigative Committee

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CERTIFICATE OF SERVICE

I hereby certify that I am employed by the Nevada State Board of Medical Examiners and that on the 15th day of July, 2024, I served a file-stamped copy of the foregoing **COMPLAINT** and a true and correct copy of the **PATIENT DESIGNATION**, via USPS Certified Mail, postage pre-paid, to the following parties:

DAVID MICHAEL ROSS, M.D.
P.O. Box 80906
Las Vegas, NV 89180
Respondent

Tracking No.: 9171 9690 0935 0254 6113 49

DATED this 15th day of July, 2024.



MERCEDES FUENTES
Legal Assistant
Nevada State Board of Medical Examiners