

BEFORE THE BOARD OF MEDICAL EXAMINERS
 OF THE STATE OF NEVADA

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In the Matter of Charges and Complaint

Case No. 24-45123-1

Against:

FILED

MATTHEW ELLIOT APEL, M.D.,

MAY 31 2024

Respondent.

NEVADA STATE BOARD OF
 MEDICAL EXAMINERS

By: Smal

COMPLAINT

The Investigative Committee¹ (IC) of the Nevada State Board of Medical Examiners (Board), by and through Alexander J. Hinman, Deputy General Counsel and attorney for the IC, having a reasonable basis to believe that Matthew Elliot Apel, 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. 16424). Respondent was originally licensed by the Board on April 19, 2016, with a specialty in surgery.

2. Patient A² was a thirty-eight (38) year-old female at the time of the events at issue.

3. On September 7, 2016, Respondent evaluated Patient A for discharge following gastric band removal and revision to a sleeve gastrectomy performed by another surgeon the day before.

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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, was composed of Board members Chowdhury H. Ahsan, M.D., Ms. Pamela J. Beal, and Irwin B. Simon, M.D., FACS.

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 4. On September 12, 2016, at Patient A's second postoperative clinic presentation,
2 Patient A was experiencing dehydration and was seen by Respondent. Patient A was treated with
3 IV fluids, IV medications, and prescribed oral steroids.

4 5. On September 14, 2016, Patient A was scheduled for an upper endoscopy with
5 Respondent as she was not progressing as expected and continued to remain intolerant to adequate
6 oral fluid intake. No physical examination nor vital signs were documented.

7 6. On September 15, 2016, Respondent performed an upper endoscopy procedure and
8 diagnosed a partial obstruction at the proximal gastric sleeve. Respondent then took Patient A to
9 the operating room for surgery that same day and performed reduction and repair of a re-herniated
10 sleeve, evacuation of a localized abscess, omentopexy of the sleeve to prevent twisting, and an
11 upper endoscopy thereafter.

12 7. Respondent only prescribed one dose of preoperative prophylactic antibiotics.
13 Furthermore, despite the identification of a localized abscess in a revisional bariatric case with
14 complications, he did not prescribe postoperative antibiotics, place a surgical drain, nor properly
15 evaluate Patient A prior to discharge.

16 8. As revisional bariatric surgery is of elevated risk and this was Patient A's second
17 revisional procedure only nine (9) days postoperatively; a higher level of care and evaluation was
18 necessary.

19 9. As noted above, Patient A was prescribed steroids preoperatively by Respondent
20 which could potentially impair healing and should have been taken into consideration in his plan
21 of care for Patient A.

22 10. The postoperative record does not reveal an actual examination by Respondent, but
23 rather a template inserted into the discharge summary that is inconsistent with a post-surgical
24 assessment that would be standard in such a patient.

25 11. On information and belief, Respondent did not evaluate Patient A prior to
26 discharge. Further, Respondent did not order any postoperative laboratory tests which may have
27 suggested the beginning of abnormalities associated with perforation following his complex
28 revisional procedure.

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WHEREFORE, the Investigative Committee 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 determines there has been a violation or violations of the Medical Practice Act committed by Respondent;


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 31st day of May, 2024.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: 
ALEXANDER J. HINMAN
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Attorney for the Investigative Committee

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VERIFICATION

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 31st day of May, 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