OFFICE OF THE GENERAL COUNSEL
Nevada State Board of Medical Examiners
9600 Gateway Drive
Reno, Nevada 89521
(775) 688-2559

BEFORE THE BOARD OF MEDICAL EXAMINERS OF THE STATE OF NEVADA

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In the Matter of Charges and Complaint Against: **SHANE VICTOR ABDUN-NUR, M.D.** **Respondent.**	**Case No. 24-45727-1**

FILED
MAY 20 2024
NEVADA STATE BOARD OF MEDICAL EXAMINERS
By:

COMPLAINT

The Investigative Committee[1] (IC) of the Nevada State Board of Medical Examiners (Board), by and through William P. Shogren, Deputy General Counsel and attorney for the IC, having a reasonable basis to believe that Shane Victor Abdun-Nur, 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. 16748). Respondent was originally licensed by the Board on October 10, 2016.

2. Patient A[2] was a forty-one (41) year old female at the time of the events at issue.

3. On December 12, 2019, Respondent performed an anterior cervical discectomy and fusion on Patient A. Prior to this date, Patient A had met with Respondent regarding complaints of continuing pain in her neck, shoulders, and upper limbs, and opted to proceed with the surgery to address these issues.

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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 Bret W. Frey, M.D., Chowdhury H. Ahsan, M.D., Ph.D., FACC, and Col. Eric D. Wade (Ret.).

[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.

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4. On December 20, 2019, Patient A presented to Respondent's office for a post-operative visit and met with a physician assistant who was under Respondent's supervision. The physician assistant found pupillary asymmetry and ptosis of the right eye, which were suggestive of Horner's Syndrome. The physician assistant also noted a positive Hoffman test and a positive clonus test, both indicating possible spinal cord injury. Patient A also demonstrated finger adduction and a definite weakness in her right biceps and triceps.

5. That same day, the physician assistant spoke with Respondent about his examination of Patient A. Despite Patient A's results suggesting an intraspinal problem, Respondent did not recommend, order, or refer Patient A for an immediate diagnostic magnetic resonance imaging (MRI) of the cervical spine. Instead, Respondent recommended and helped arrange a diagnostic MRI of the cervical spine to be completed on December 23, 2019.

6. On December 23, 2019, after completion of the MRI, Respondent reviewed and discussed the MRI results with Patient A. Respondent noted that the MRI of the cervical spine showed an anterior epidural hematoma, with associated stenosis.

7. Patient A's medical notes at the time indicated that Patient A was taking Fluoxetine, an antidepressant, on and before December 23, 2019. Fluoxetine is an anticoagulant and can increase operative and post-operative bleeding.

8. After confirming the presence of an epidural hematoma on December 23, 2019, Respondent did not note or document that he recommended Patient A to discontinue Fluoxetine immediately.

9. On December 24, 2019, Patient A returned to the operating room for decompression via a C5-C7 laminectomy and attempted removal of the anterior epidural hematoma. A small amount of an anterior clot was removed, as well as a posterior epidural hematoma.

10. Immediately after the operation, Patient A confirmed improved strength and sensation in all limbs compared to pre-operative condition, but not to the same level prior to December 12, 2019.

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11. After discharge in December 2019, Patient A showed a slow improvement in conditions, but continued with upper limb weakness, gait abnormality, swallowing problems, decreased tongue sensation and oral pharynx, and tremors in her upper right limb.

COUNT I

NRS 630.301(4) - Malpractice

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

13. NRS 630.301(4) provides that malpractice of a physician is grounds for initiating disciplinary action against a licensee.

14. 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."

15. 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 rendering medical services to Patient A, by (1) failing to recommend, order, or refer Patient A for an immediate diagnostic MRI of the cervical spine on December 20, 2019, despite Patient A's clinical results from that date strongly suggesting cord irritation or compression; and (2) failing to recommend or order Patient A discontinue her use of Fluoxetine, an anticoagulant which can increase operative and post-operative bleeding, on and after December 23, 2019, despite confirming Patient A's epidural hematoma on December 23, 2019.

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

COUNT II

NRS 630.3062(1)(a) - Failure to Maintain Complete Medical Records

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

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18. 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.

19. Respondent failed to maintain timely, legible, accurate, and complete medical records relating to the diagnosis, treatment and care of Patient A, by failing to correctly document a recommendation, order, or referral for Patient A to obtain an immediate diagnostic MRI of the cervical spine on December 20, 2019, and by failing to correctly document a recommendation or order for Patient A to discontinue use of Fluoxetine on or after December 23, 2019.

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

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

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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 20th day of May, 2024.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

By: _____

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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 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 20th day of May, 2024.

INVESTIGATIVE COMMITTEE OF THE
NEVADA STATE BOARD OF MEDICAL EXAMINERS

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