

GRAMA request reply to ██████████ regarding Nicole Irene Riley, MD

In response to your emailed GRAMA records request, dated September 30, 2010, the following information is provided by the Division of Occupational and Professional Licensing.

Nicola Irene Riley, MD was issued license #5665820-1205 to practice as a physician/surgeon and license #5665820-8905 to administer and prescribe controlled substances in Utah on July 14, 2004. Said licenses are current and active with an expiration date of January 31, 2012. There is no record of any disciplinary action being taken with respect to these licenses.

As per your request, we have enclosed a copy of Dr. Riley's application for licensure as a physician/surgeon and to administer and prescribe controlled substances that was submitted to the Division in June 2004. Please note that the copyrighted Federation of State Medical Board packet information which is submitted on behalf of a physician and used by the Division to evaluate an applicant for a physician/surgeon license is NOT being provided as it is not considered a "record" as per Subsection 63G-2-103(22)(b)(iv) and is thus not releasable.

With respect to the above application documents, you will note that all social security numbers have been redacted as they are classified as a "private" record by the Division. You will also note that all home address/telephone numbers have been redacted as they are classified as "exempt" as per Subsection 58-1-106(2).

Please note that any prelitigation/malpractice records relating to Dr. Riley within the Division are classified as "exempt" according to Subsection 78B-3-416(1)(d) and are not releasable.

Your request also inquired about hospital admitting privileges - the Division has no such information or records concerning this information.

Portion of the minutes from the July 14, 2004 Physicians Licensing Board meeting concerning Dr. Riley are enclosed.

The Division also conducted a review of the complaint and/or investigation records concerning complaint/investigation file numbers 44699 and 43644 (Nicola Riley, MD) on October 13, 2010. Copies of records contained in complaint/investigation file numbers 44699 and 43644 have been provided EXCEPT for the following records identified below which are classified as "private" and "protected":

Closed investigation case 44699 - the following documents are enclosed:

- Action Log
- DOPL complaint report, dated May 7, 2009, with redactions made
- May 20, 2009 letter from Irene Woodford, with redactions made

-DOPL licensing system printouts for Nicola Irene Riley with redactions made

-Investigative Report (closing), dated May 20, 2009, with redactions made

Closed investigation case 44699 - the following documents are NOT being provided:

1. Medical records received from complainant

Closed investigation case 43644 - the following documents are enclosed:

-Action Log

-March 9, 2009 letter from Irene Woodford, with redactions made

-DOPL licensing system printouts for Nicola Irene Riley with redactions made

-Investigative Report (closing), dated March 9, 2009, with redactions made

Closed investigation case 43644 - the following documents are NOT being provided:

1. Medical records received from complainant as well as the DOPL online complaint form which contains detailed medical information

The above documents which have not been provided along with redacted information in the above-provided documents have been classified as "private", "protected", and "controlled" and the Division has determined the following provisions of GRAMA apply with respect to these records:

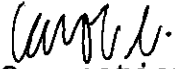
"Private" - 63G-2-302(2)(d): (2) The following records are private if properly classified by a governmental entity: (d) other records containing data on individuals the disclosure of which constitutes a clearly unwarranted invasion of personal privacy.

"Protected" - 63G-2-305(9)(a) through (e) and specifically paragraph (d): (9) records created or maintained for civil, criminal, or administrative enforcement purposes or audit purposes, or for discipline, licensing, certification, or registration purposes if release of the records: (d) reasonably could be expected to disclose the identity of a source which is not generally known outside of government and, in the case of a record compiled in the course of an investigation, disclose information furnished by a source not generally known outside of government if disclosure would compromise the source.

"Controlled" - 63G-2-304(1) and (2)(b): A record is controlled if: (1) the record contains medical, psychiatric, or psychological data about an individual; (2) the governmental entity reasonably believes that: (b) releasing the information would constitute a violation of normal professional practice and medical ethics.

10-14-2010

Carol I.


Division of Occupational and Professional Licensing

Utah State Department of Commerce
DOPL Complaint Report

Date Received: 05/07/2009
Report Taken By: LSA

Complaint No. 44699

Subject:
Nicola Irene Ril y
[Redacted] } Retact

Complainant:
[Redacted] } Retact all-
including name

License No: 5665820-1205
Profession: Physician
Activity: Incompetence/Negligence
Status Code: Unassigned
Investigator Assigned:

Complaint and Narrative

Comp. called to say that her husband [Redacted] has been seeing Dr. Riley for over a year. The comp. said that they are having problems with her husband's oxygen levels dropping below 80 and can't get a hold of Dr. Riley and can't get her to return any phone calls. The comp said that the subj. doesn't keep any records and only has a one-room office with a bed.

The subj. referred the comp's husband to a heart doctor and the comp insisted that he be referred to her heart doctor [Redacted] in March 2009. When they saw [Redacted] he indicated that [Redacted] has the veins of a 16 yr old but his heart is shot. The comp and her husband have been trying to get disability insurance and have been denied because the subj. will not submit the records needed.

The comp feels the subj. is being completely negligent in her capacity as a physician because she doesn't have the patient's interests in mind. The comp. feels that because of her lack of care for her husband and not monitoring his oxygen levels the heart condition was not detected earlier.

A check of LES produced an active license
A check of LES produced one prior complaint (43644 -- unfounded)

Date of Action: [Handwritten]
Action: [Handwritten]
Supervisor Notes:

For Supervisor Use Only



Department of Commerce

Division of Occupational and Professional Licensing

JON M. HUNTSMAN, JR.
Governor

FRANCINE A. GIANI
Executive Director

F. DAVID STANLEY
Division Director

COPY

May 20, 2009

[REDACTED]

Dear [REDACTED]

This letter is to advise you that the complaint filed with the Division regarding Nicola Riley, MD, has been investigated.

In matters regarding the standard of practice of physicians, our agency may only act against a license when a particular physician demonstrates a pattern of negligence, a pattern of incompetence, gross negligence, or gross incompetence.

Dr. Riley sent your husband's medical records to Social Security on May 18, 2009. Dr. Riley always has her attorney review any records prior to being sent out from the office, and this caused the delay in sending them to Social Security.

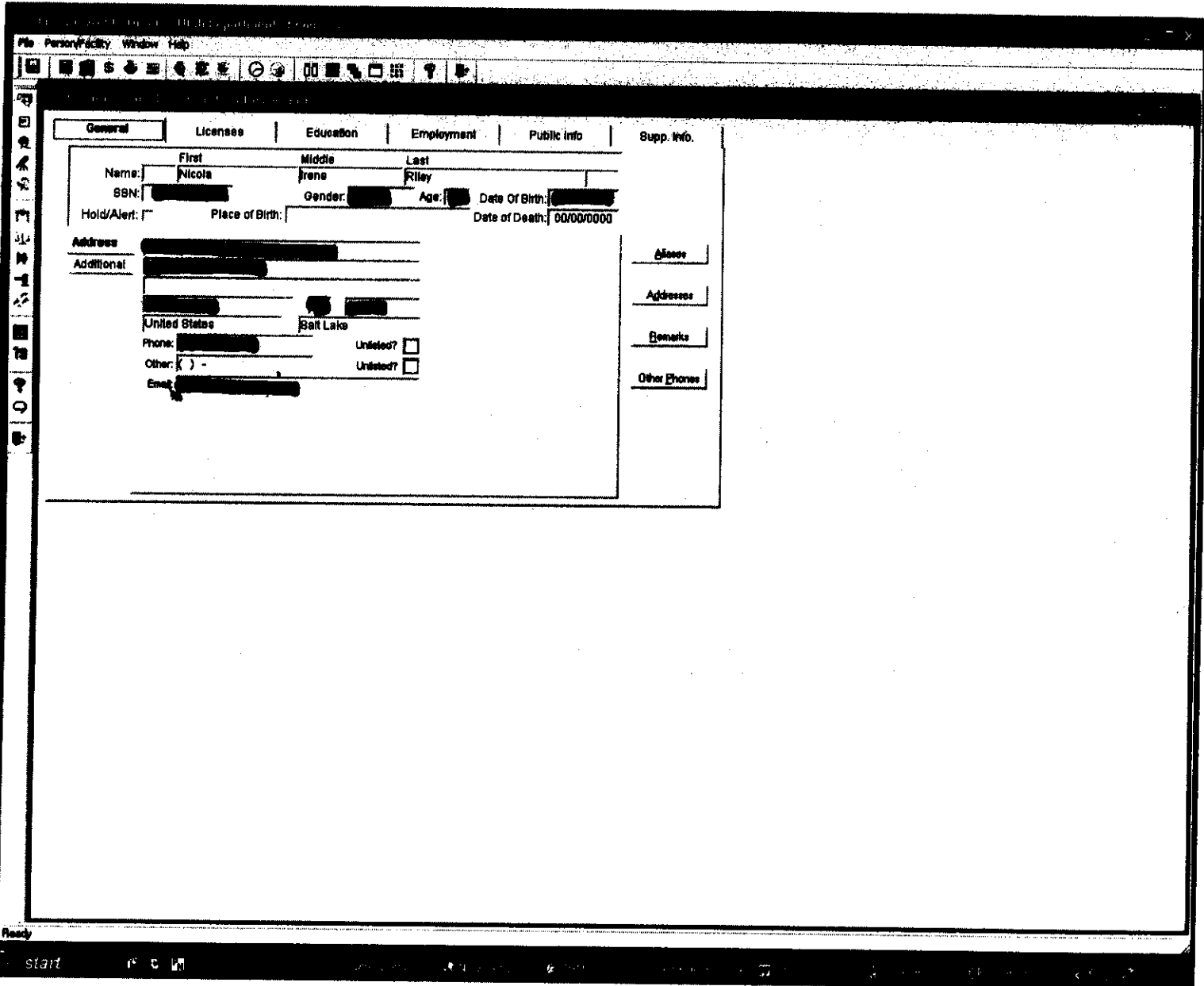
If you believe Dr. Riley committed malpractice in her care of your husband, you may initiate a claim in the courts for damages, as our agency has no authority to determine damages.

Your complaint will be maintained on file in the event other complaints regarding Dr. Riley are filed with the Division. The Division has closed this case.

Thank you for your concern in this matter.

Sincerely,

Irene Woodford
Senior Investigator
Professional Conduct Unit





General **Licenses** Education Employment Public Info Supp. Info.

License #	Type	Status	Expiration	Renewal
5855820-8905	Physician/Surgeon CB - Schedule 2-5	Active		

Address Issue Date: 07/14/2004 **Applicant Number:** 3934882
Detail Obtained By: Utah Residency
Specialties From State/Prov.: From Country:
Supp. info. Expiration Date: 01/31/2010
Additional Date This Status: 07/14/2004 **Last Renewal Date:** 12/18/2007 **Renewal ID:**
CE Credits Reason Changed: License issuance
Date Archived:
Effective Date: 07/14/2004
Last Reprint Date:
Reprint Count: 0

Remarks

Investigative Report
Type: Closing
Case Name: Nicola Riley, MD
Case #: 44699

This record is classified as Private and Protected under the Utah Government Records Management and Access Act, Utah Code Ann. Title 63, Chapter 2, and is provided for law enforcement and regulatory use only.

SYNOPSIS: [REDACTED] filed a complaint with the Division, alleging that Nicola Riley, MD, failed to return phone calls and did not keep records on her husband, [REDACTED], who had been seeing Dr. Riley for over a year. It was also alleged that Dr. Riley failed to submit records needed to obtain disability insurance on [REDACTED]. [REDACTED] also said Dr. Riley only had a one room office with a bed.

ADDITIONAL INFORMATION: On 5/19/09, I (Irene Woodford) met with Dr. Riley in her office at [REDACTED] to discuss the complaint.

Riley saw [REDACTED] on 4 occasions. The first visit was on 7/12/07, to establish care. The second visit was on 9/29/08. [REDACTED]

[REDACTED] Dr. Riley referred [REDACTED] to a gastroenterologist. [REDACTED]

The last visit was 12/17/08. [REDACTED] Dr. Riley referred [REDACTED] to a cardiologist. [REDACTED] did not see [REDACTED] until March 2009. [REDACTED]

Dr. Riley received a letter dated 5/2/09, from the Social Security Disability Determination, requesting information on [REDACTED]. Dr. Riley said she always has her attorney review everything prior to sending records out. The records were sent to Social Security on 5/18/09.

Dr. Riley said [REDACTED] would make appointments for herself and bring [REDACTED] with her. [REDACTED] would then ask Dr. Riley if she would check [REDACTED] so Dr. Riley said there may be a couple of instances where she did not document anything in the medical record regarding [REDACTED].

[REDACTED] is also a patient of Dr. Riley. Dr. Riley said she made one home visit to [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Dr. Riley received a phone call from [REDACTED] on 5/15/09. She spoke with [REDACTED] who told her if she refused to send [REDACTED] records to Social Security, she would get an attorney "to get on her". According to Dr. Riley, [REDACTED] Dr. Riley sent a letter to [REDACTED] on 5/15/09, indicating she was dismissing both [REDACTED] and [REDACTED] from the practice.

Dr. Riley has two exam rooms, an office, and a reception area in her place of business.

FINDINGS: It is recommended this matter be closed as unfounded. The case was discussed with Larry Gooch. [REDACTED] will be advised by letter as to the resolution of this case.

NICOLA RILEY, MD
APPLICATION REVIEW –
INTERVIEW:

Dr. Riley met with the Board to explain her yes answers and to explain why she had failed the examination more than three times. Ms. Buhler made a Motion to approve Dr. Riley for licensure. Dr. Stout seconded the Motion. Dr. Babitz abstained. All other Board members in favor.

PHYSICIAN AND SURGEON LICENSURE REQUIREMENTS CHECKLIST - Revised 12/13/99

NAME: Riley, Nicola LIC. NO.: 56665820

- Physician & Surgeon
 Controlled Substance

***NOTE:

- REINSTATEMENT APPLICATION
CRIS CHECKED Yes; no complaints Has Complaints (Attach Copies)
- APPLICATION TO THE BOARD FOR REVIEW
- Foreign Medical Graduate
 - "Yes" answer on Qualifying Questionnaire 25, 27, 29
 - Interrupted education/training/work history
 - Inconsistent/derogatory Information
 - Failed any exam or combination of exams 3 times or more
 - Non-accredited Post graduate Training Program
- Yes No IS APPLYING BY ENDORSEMENT
- Yes No IS APPLYING BY PROGRESSIVE RESIDENCY with ONLY 12 MONTHS COMPLETED.
 Signed Agreement to surrender license if 24 months of residency is not completed.
- Yes No Has submitted documents to identify education, ECFMG, residency & fellowships, exam scores, FSMB Disciplinary Inquiry form
- APPLICATION APPROVED BY THE DIVISION
Division Representative _____ Date _____
- APPLICATION COMPLETE
Division Representative _____ Date _____
- IDENTIFYING INFORMATION
- Identifying Information entered correctly on LES
 - "Affidavit & Release Authorization" is signed
- FEE - Appropriate fee(s) paid (~~\$150~~ 180)
- GOOD MORAL CHARACTER/NO DISCIPLINE
- Qualifying Questionnaire complete and no "yes" answers 25, 27, 29
 - "FSMB Disciplinary Inquiry" Form with no unfavorable information or FCVS form.
 - AMA verified on computer with no unfavorable information.
 - No derogatory or conflicting information
- EDUCATION
- Has earned a degree of doctor of medicine from a LCME accredited medical school or college.
 - Official transcript documenting degree earned and graduation date in English or FCVS form.

OR

- Has earned a degree of doctor of medicine from a medical school or college located outside of the U.S. or its jurisdictions which at the time of the applicant's graduation, met criteria for LCME accreditation.
 - Official transcript documenting degree earned and graduation date in English or FCVS form.
 - Current ECFMG certification which is valid indefinitely or FCVS form.

RESIDENT TRAINING:

- Has satisfactorily completed 24 months of progressive resident training in a ACGME, RCPSC, or CFPC accredited program in the U.S. or Canada.
 - "Graduate Medical Education or Training Requirement" section complete and consistent with evaluations received
 - Form from the director of each education or training program documenting satisfactory completion
 - Name of Program _____
 - Length of Program in Months _____
-
- Name of Program _____
 - Length of Program in Months _____
-
- Name of Program _____
 - Length of Program in Months _____

EXAMINATIONS:

- "Professional Examinations Requirement" section complete and consistent with scores received.
- Year the last qualifying exam was passed 2003
- Yes No Were any combination or single exams failed 3 times or more?

The examinations which must be passed by all applicants are:

- The FLEX components I and II on which the applicant shall achieve a score of not less than 75 on each component.
 - FSMB Examination and Board Action History Report or FCVS form
 - PART I SCORE _____ PART II SCORE _____

OR

- The NBME Examination Parts I, II and III on which the applicant shall achieve a passing score of not less than 75 on each part.
 - PART I SCORE _____
 - AND
 - PART II SCORE _____
 - AND
 - PART III SCORE _____

OR

- The USMLE, steps 1, 2, and 3 on which the applicant shall achieve a score of not less than 75 on each step.
 - USMLE Certified Transcript of Scores or FCVS form
 - PART I SCORE 80
 - AND
 - PART II SCORE 82
 - AND
 - PART III SCORE 78

OR

- The NBME part I or the USMLE step 1 and the NBME part II or the USMLE step 2 and NBME part III or the USMLE step 3.
 - NBME PART I SCORE _____ or USMLE STEP 1 SCORE _____
 - AND
 - NBME PART II SCORE _____ or USMLE STEP 2 SCORE _____
 - AND
 - NBME PART III SCORE _____ or USMLE STEP 3 SCORE _____

OR

- The FLEX component 1 and the USMLE step 3

- FLEX I SCORE _____
AND
 USMLE STEP 3 SCORE _____
- OR
- The NBME part I or the USMLE Step 1 and the NBME part II or the USMLE Step 2 and the FLEX Component 2
 NBME PART I SCORE _____ or USMLE STEP 1 SCORE _____
AND
 NBME PART II SCORE _____ or USMLE STEP 2 SCORE _____
AND
 FLEX COMPONENT 2 SCORE _____
- OR
- LMCC (Licentiate of the Medical Council of Canada), Parts 1 and 2
 LMCC PART 1 SCORE _____ and LMCC PART 2 SCORE _____
- OR
- STATE EXAM: Verification of License
 State where Taken _____ Year Taken _____

CONTROLLED SUBSTANCE LICENSE

- Submitted appropriate fee (\$90)
- Has valid physician license or is applying for one
- Complete controlled substance section of application
- Official letter from Experior with a minimum passing score of 75 on the Controlled Substance Exam and General Laws Exam.

LICENSE BY PROGRESSIVE RESIDENCY:

EXPERIENCE: Has not actively practiced as a physician
 EDUCATION: No difference in requirements.
 RESIDENT TRAINING:

Yes No Has successfully completed 12 months of resident training in an ACGME approved program in the U.S. or Canada.

Form from the director of each education or training program documenting satisfactory completion.

Name of Program St Marks

Specialty Fam Pract

Time Frame: 10/02-9/03 Length of Program in Months 12

AND
 Yes No Has been accepted in and is successfully participating in progressive resident training in a ACGME approved program within Utah. Hospitals approved in Utah are: UofU, LDS, McKay Dec, St. Marks, and Utah Valley Regional.

Name of Program: St Marks Specialty: Fam Pract

LICENSURE BY ENDORSEMENT

Verification of licensure from every state in which applicant is currently licensed.

_____ _____

_____ _____

Documentation of legal practice of medicine for not less than 6,000 hours during the five years immediately preceding the date of this application.

"FSMB Disciplinary Inquiry" form completed with no unfavorable information.

Nicola Riley MD

2 Case number
43644

DATE

ACTION TAKEN

2/25/09 Rec'd file attempt to contact
3/1/09 kept msg for her to call me

3/3/09 spoke to her

3/9/09 met Dr. Riley.





State of Utah
Department of Commerce

Division of Occupational and Professional Licensing

JON M. HUNTSMAN, JR.
Governor

FRANCINE A. GIANI
Executive Director

F. DAVID STANLEY
Division Director

COPY

March 9, 2009

[REDACTED]
[REDACTED]
[REDACTED]
Dear [REDACTED]

This letter is to advise you that the complaint filed with the Division regarding Nicola Riley, MD, has been investigated and the appropriate action has been taken.

There have been no other complaints regarding Dr. Riley; however, your complaint will be maintained on file in the event others are received.

Thank you for your concern and assistance in this matter.

Sincerely,

Irene Woodford
Senior Investigator
Professional Conduct Unit

Licensee: Nicola Irene Riley (Physician)

License	Education	Employment	Event Info	Supp. Info																																									
<table><tr><td>First Name</td><td>Nicola</td><td>Middle Name</td><td>Irene</td><td>Last Name</td><td>Riley</td></tr><tr><td>DOB</td><td>[REDACTED]</td><td>Gender</td><td>[REDACTED]</td><td>Age</td><td>[REDACTED]</td></tr><tr><td>Place of Birth</td><td>[REDACTED]</td><td>Date of Birth</td><td>[REDACTED]</td><td>Date of Death</td><td>00/00/0000</td></tr><tr><td>Address</td><td colspan="4">[REDACTED]</td></tr><tr><td>City</td><td>[REDACTED]</td><td>State</td><td>[REDACTED]</td><td>Country</td><td>United States</td></tr><tr><td>Phone</td><td>[REDACTED]</td><td>Unlisted?</td><td><input type="checkbox"/></td><td></td><td></td></tr><tr><td>Cell</td><td>[REDACTED]</td><td>Unlisted?</td><td><input type="checkbox"/></td><td></td><td></td></tr></table>					First Name	Nicola	Middle Name	Irene	Last Name	Riley	DOB	[REDACTED]	Gender	[REDACTED]	Age	[REDACTED]	Place of Birth	[REDACTED]	Date of Birth	[REDACTED]	Date of Death	00/00/0000	Address	[REDACTED]				City	[REDACTED]	State	[REDACTED]	Country	United States	Phone	[REDACTED]	Unlisted?	<input type="checkbox"/>			Cell	[REDACTED]	Unlisted?	<input type="checkbox"/>		
First Name	Nicola	Middle Name	Irene	Last Name	Riley																																								
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				Remarks																																									
				Other Phones																																									

Licensee - Nicola Irene Piley (Physician)

Control Registration Employment Public Info Other Info

Address **Issue Date:** 07/14/2004 **Application Number:** 3634882

State **Original State Residency**

Expiration **From Country:**

Supp. Info **Issue State:** 01/31/2010

Additional **Date Take Exam:** 07/14/2004 **Last Renewal Date:** 12/18/2007 **Renewal ID:**

CE Credits **Reasons Changed License Issuance**

Issue State:

Issue Date: 07/14/2004

Last Renewal Date:

Reasons Changed: 0

Remarks

Investigative Report
Type: Closing
Case Name: Nicola Riley, MD
Case #: 43644

This record is classified as Private and Protected under the Utah Government Records Management and Access Act, Utah Code Ann. Title 63, Chapter 2, and is provided for law enforcement and regulatory use only.

SYNOPSIS: [redacted] filed a complaint with the Division, alleging that Dr. Nicola Riley

[redacted]. [redacted] also said Dr. Riley was rude to her daughter, [redacted]

ADDITIONAL INFORMATION: On 3/3/09, I (Irene Woodford) spoke with [redacted] She said

[redacted] At the time of surgery, [redacted]

[redacted] said Dr. Riley has never contacted [redacted] to follow-up on her.

On 3/9/09, I interviewed Dr. Riley in an office at the [redacted]. Dr. Riley obtained her medical degree from the University of Utah in 2002. She completed a family practice residency at St. Mark's hospital with the St. Mark's hospital Family Residency program. She is in solo practice at [redacted] from October 2005 to the present. She has been an independent contractor at [redacted] from September 2005 to the present. She is on-call for the [redacted] 24/7. She performs abortions during the noon hour at the [redacted] and has performed over 3000 abortions in the past 3 years. Dr. Riley is also the Medical Director for [redacted] and [redacted].

Dr. Riley stated that no pills are given to any woman who is greater than 9 weeks gestation. [redacted]