## A. FILE CLOSED PRIOR INVESTIGATION (BEFORE)

<table>
<thead>
<tr>
<th>BT1</th>
<th>Advertising that is a technical violation</th>
</tr>
</thead>
<tbody>
<tr>
<td>BT2</td>
<td>Aged or outdated complaints</td>
</tr>
<tr>
<td>BT3</td>
<td>Billing and fee disputes except as designated by disciplining authority</td>
</tr>
<tr>
<td>BT4</td>
<td>Communication and personality issues</td>
</tr>
<tr>
<td>BT5</td>
<td>Complainant withdrew</td>
</tr>
<tr>
<td>BT6</td>
<td>If allegations are true, no violation of law occurred</td>
</tr>
<tr>
<td>BT7</td>
<td>Insufficient information</td>
</tr>
<tr>
<td>BT8</td>
<td>Issues which have been otherwise resolved. Explain resolution: (Detail corrective action: practitioner is already revoked; ongoing monitoring, etc.)</td>
</tr>
<tr>
<td>BT9</td>
<td>Lack of complaint credibility</td>
</tr>
<tr>
<td>BT10</td>
<td>No Jurisdiction</td>
</tr>
<tr>
<td>BT11</td>
<td>No violation at the time the event occurred</td>
</tr>
<tr>
<td>BT12</td>
<td>Profession-Specific Threshold Explain:</td>
</tr>
<tr>
<td></td>
<td>a) Violating confidentiality</td>
</tr>
<tr>
<td></td>
<td>b) Inappropriate delegation to unlicensed person that does not involve invasive procedures or piercing of skin (e.g., RN instructs NA to apply skin cream)</td>
</tr>
<tr>
<td></td>
<td>c) Failure to supervise resulting in no harm or minor harm to a patient</td>
</tr>
<tr>
<td></td>
<td>d) Isolated incidents which suggest little or no patient harm, not likely to reoccur</td>
</tr>
<tr>
<td>BT13</td>
<td>Referral to another program or agency</td>
</tr>
<tr>
<td>BT14</td>
<td>Risk minimal, not likely to reoccur</td>
</tr>
<tr>
<td>BT15</td>
<td>Time practice on an expired credential for a period of time accepted by the disciplining authority</td>
</tr>
<tr>
<td>BT16</td>
<td>Unidentified complainant, client or patient name and no allegations of significant harm or potential harm</td>
</tr>
<tr>
<td>BT17</td>
<td>Additional issues</td>
</tr>
</tbody>
</table>

## B. SCOPE OF INVESTIGATION AUTHORIZED:

- □ Entire Complaint
- □ Limit
- □ Focus
- □ Expanded

**Notes:**

**D. PRIORITY:**
- □ A (risk of immediate danger)
- □ B (serious risk)
- □ C (Moderate risk)
- □ D (Minor risk)
- □ E (technical evidence)

## E. CLOSED AFTER INVESTIGATION

- □ Application Investigation Only-License granted without conditions.
- □ A1-Care rendered was within standard of care
- □ A2-Complainant withdrew
- □ A3-Complaint - Unique closure
- □ A5-Evidence does not support a violation
- □ A7-Mistaken identity
- □ A8-No Jurisdiction
- □ A11-No Whistleblower
- □ A12-Risk minimal, not likely to reoccur

Further Explanation (if any):

## F. SEXUAL MISCONDUCT CASES RCW 18.130.062

- □ Authorized Investigation yes.no
- □ Retain by MQAC, clinical or standard of care issues, do not refer
- □ Set as Priority A yes/no
- □ Refer cases to Secretary for non clinical issues

## G. RECONSIDERATION

- □ Request Approved.
- □ Request Denied.
MQAC REVIEW
Case Number: 2014-7771

Date: September 10, 2014
Presented by: George Heye, MD

**Respondent:** PENTLICKY, SARA, MD
**King County**

**Complainant:** 1 - Name - Whistleblower Regarding Health Ca...

**CASE SUMMARY**

**The Respondent:**
- Board Certified: OBSTETRICS AND GYNECOLOGY
- DOB: 05-02-1978
- Licensed since: 07-19-2013
- Expiration date: 05-02-2016
- Medical School: 2006—Sidney Kimmel Med Coll at Thomas Jefferson U; Philadelphia, PA

**The Complainant:** A 49-year-old female patient

**Malpractice Settlement:**

**The Complaint:** The complainant writes that when she was about 34 weeks pregnant she went to a major hospital to have fetal heart tones checked since she had recently suffered trauma to her stomach and back. The respondent apparently performed a vaginal ultrasound and then reportedly said: "You con, I will see you in a cell". The patient was not comfortable with the ultrasound as performed and told the respondent it was not like the other two she had had in the past (presumably abdominal). Respondent asked her if she wanted respondent to do another ultrasound but the complainant said she would go to another hospital where she could get an ethical ultrasound done.

**RCM Review**

**Prior Cases:**

None.

**Recommendation:**


Medical Quality Assurance Commission
CMT
Review of Cases

CMT Date/ Panel Members/ Decision:

MQAC CMT - SEPTEMBER 17, 2014
Richard Brantner, MD, Chair
Mark Johnson, MD
Mike Concannon, JD
DECISION: CLOSED PRIOR TO INVESTIGATION

Case No.: 2014-7771

The attached pages were reviewed:

144-147
MQAC REVIEW
Case Number: 2014-7771

Date: September 10, 2014
Presented by: George Heye, MD

Respondent: PENTLICKY, SARA, MD
King County

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RCM Review

Prior Cases:
None.

Recommendation:
Hamilton, Cindy (DOH)

From: DOH OS MQAC
Sent: Tuesday, August 26, 2014 4:14 PM
To: DOH MQAC Medical Complaints
Subject: FW. Complaint against Dr. Sara B. Pentlicky
Attachments: Letter about complaint Dr. Sara B. Pentlicky.docx

Joe Mihelich
Health Services Consultant 1
Medical Quality Assurance Commission
PO BOX 47666
Olympia WA 98504
360-236-2767 phone
360-236-2795 Fax
Website: www.doh.wa.gov/Medical
Email: joe.mihelich@doh.wa.gov

From: Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70...
Sent: Tuesday, August 26, 2014 3:55 PM
To: DOH OS MQAC
Subject: Complaint against Dr. Sara B. Pentlicky
August 26, 2014

Medical Quality Assurance Commission

Intake Coordinator

P O Box 47866

Olympia, WA

47866

To Whom It May Concern:

My name is [Name] - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1). Will you please accept this letter as a complaint against Dr. Sara B. Pentlucky? She works at Harborview medical center located at 325 9th Ave Seattle, WA 98104. The telephone at her office is (206) 520-5000. The date of my appointment was on August 25, 2014 at 1:00 pm.

My first visit to Harborview medical center was on August 25, 2014 as a new patient. Upon my arrival I was asked to sign for consent for treatment by the receptionist Davalyn. I explained to Davalyn that I did not feel comfortable signing the signature pad without first reading over the information that I was consenting to. The receptionist gave me the hard copies to read. Before I could finish reading the information, and sign the documents a nurse came out to tell me to come back to their office. I explained to the nurse that I am pregnant, and that I need to have an ultra sound done because I was stomped in my stomach, and back area. I further explained, that I have not felt the movement of the fetus since I was injured.

I told the nurse that I knew that I was due around October 10, 2014, and that I was having a girl. I also told her that I had two ultra sounds done so I know for sure that I am pregnant. The nurse asked me to do a urine test. I explained to her that the last urine test that I did for some reason was showing up negative, but I know for sure that I am still pregnant. I explained that I was concerned that there was something wrong with the fetus because of the trauma that I had sustained. I asked if I could please see a doctor, and have the ultra sound done. I also shared with her that I needed written confirmation of my pregnancy.

The nurse told me that I could see the doctor. I was switched to another room, and when the female that came into the office that presented herself as a doctor I asked her if she was a doctor. I explained that I wanted to make sure because she was not dressed like a doctor, and that she had nothing on that
displayed her credentials. The doctor then left the room and reentered the room wearing a doctors jacket and she had on a badge that said the name Sara Pentlicky MD on it. I shared the same information with the doctor that I shared with the nurse. Dr. Pentlicky then told me that she would do the ultra sound. I have had ultra sounds done in the past so I know what the procedure is. However, to my dismay the procedure that the doctor used was not the right one. She placed a clear substance on something that felt like a dill doe literally, and then she proceeded to enter my vagina with it moving it inside of me in a circular motion. When she finished I explained to her that I wanted an ultra sound done and that what she had just done was not an ultra sound. When she finished the procedure it made me start to spot bleed a little. The doctor then shocked me by saying, “you can I will see you in a cell”. I was so shocked by what she said I could not even respond at first. I then told her that I know for sure that I am pregnant, and that I know that I am having a girl, and that I have had two ultra sounds done. I told her before I left the office that I was not nuts. Dr. Pentlicky asked me what I wanted her to do. I responded that wanted the ultra sound done right. Dr. Pentlicky then responded if you want me to do then I do another ultra sound. I said to her that is ok I will go to another hospital where I can get an ethical ultrasound done. The doctor then nodded her head. I left the hospital after that. I never even signed the consent forms for treatment because, the nurse asked me to come into the office before I could finish reading the information.

Will you please have someone investigate this situation? I was very offended by the way that I was treated. In addition to the fact that she called me a con, and told me that she would see me in a jail cell, and I had done nothing wrong. I am a victim of identity theft, and I think that maybe she might have mistaken me for someone else. Even if that was the case no professional licensed competent doctor should treat any patient in the manner in which I was treated. I do believe that Dr. Pentlicky should be counseled for the way that she treated me. I also believe that she should be counseled for what she said to me. I also overheard tell one of her co-workers that lce or Cleo got fucked. All of that was very unethical, and unprofessional too. I did call on August 26, 2014 to the patient relations department at Harbor view and I left a voice message about what happened. The voice message was left on a Kathy Flaherty I was told that she was the manager. Will you please have someone contact me at . I would like to inform you that she did turn her badge around so that I could not see her name before I left. I do hope that this was not the real doctor if it was I think that she needs some time off. Thank you for your help, and kindness regarding this situation. My email address is.

Sincerely,
### Case View Screen

<table>
<thead>
<tr>
<th>Case</th>
<th>2014-7771 (PUBLIC, Internal)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Status</td>
<td>Intake</td>
</tr>
<tr>
<td>Respondent ID</td>
<td>1080465</td>
</tr>
<tr>
<td>Respondent</td>
<td>Sara Pentlicky</td>
</tr>
<tr>
<td>Credential</td>
<td>MD, MD 603597/76</td>
</tr>
<tr>
<td>Address</td>
<td>Public Mail</td>
</tr>
<tr>
<td>Complainant ID</td>
<td>1150528</td>
</tr>
<tr>
<td>Complainant</td>
<td>Name: Whistleblower</td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
</tr>
<tr>
<td>• Action Items</td>
<td></td>
</tr>
<tr>
<td>• Resolution</td>
<td></td>
</tr>
<tr>
<td>• Participants</td>
<td></td>
</tr>
<tr>
<td>• Priority History</td>
<td></td>
</tr>
<tr>
<td>• HIPDB Reports</td>
<td></td>
</tr>
<tr>
<td>• TimeTracker</td>
<td></td>
</tr>
</tbody>
</table>

#### Alleged Issues
- Patient Care
- Case Nature
- Standard of Care/Services

#### Action Items

<table>
<thead>
<tr>
<th>Type</th>
<th>Assigned To</th>
<th>Activity</th>
<th>Track Time</th>
<th>Due</th>
<th>Effective</th>
<th>Completed</th>
<th>Order Signed</th>
<th>Created</th>
<th>User</th>
</tr>
</thead>
</table>

**Target:** Sara Pentlicky

**Warning:**
- Warning Type: CASE PENDING
- Warning Effective Date: 09/10/2014
- Suppress License Print: NO
- Warning: 2014-7771

**Status Changed To:** Intake

**Action Info:**
- Complaint Source: Patient/Client/Resident
- Possible Imminent Danger?: No
- Single Complaint Process Coordination Needed?: No

---

http://elicense/caseView.asp?CasIdnt=224883

9/10/2014
Name and Mailing Address
SARA BETH PENTLICKY MD
UNITC
2042 EASTLAKE AVE E
SEATTLE WA 98102-3594

Primary Office Address
PLANNED PARENTHOOD OF THE GREAT NORTHEAST
2001 E MADISON ST
SEATTLE WA 98122-2959

Phone U N K N O W N

Birth date 05/02/1978

Physician's major professional activity OFFICE BASED PRACTICE

Self-designated practice specialty OBSTETRICS & GYNECOLOGY (primary)
UNSPECIFIED (secondary)

Self-designated practice specialties (SDPS) listed on the AMA Physician Profile do not imply recognition or endorsement of any field of medical practice by the Association nor does it imply verification by a member board of the American Board of Medical Specialties (ABMS) or that the physician has been trained or has special competence to practice the SDPS.

AMA membership status NON MEMBER

All information from this point forward is provided by the primary source

Current and/or historical NPI information

<table>
<thead>
<tr>
<th>National Provider Identifier (NPI)</th>
<th>Enumeration date</th>
<th>Deactivation date</th>
<th>Reactivation date</th>
<th>Replacement number</th>
<th>Last reported date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1740456649</td>
<td>05/01/2008</td>
<td>NOT RPTD</td>
<td>NOT RPTD</td>
<td>NOT RPTD</td>
<td>08/23/2014</td>
</tr>
</tbody>
</table>

Current and/or historical medical school

SIDNEY KIMMEL MED COLL AT THOMAS JEFFERSON UNIV. PHILADELPHIA PA 19107
Degree Awarded: Yes
Degree Year: 2006
Current and/or historical post graduate medical training programs accredited by the Accreditation Council for Graduate Medical Education (ACGME)

Beginning with the 2010 cycle of the National GME Census, post-graduate training segments will include the name of the program attended in addition to the sponsoring institution. Program-level information prior to 2010 will not be available for reporting. Future training dates, as reported by the program, should be interpreted as "in progress" or "current" with the projected date of completion.

Post-graduate training performed at accredited osteopathic institutions or in Canada are updated on the AMA Physician Masterfile only upon verification by the program. US licensing authorities accept graduate medical education from both entities as equivalent to training performed in a US program accredited by ACGME.

Sponsoring Institution: UNIV OF KY COLL OF MED
Sponsoring State: KENTUCKY
Program name: UNIVERSITY OF KENTUCKY COLLEGE OF MEDICINE PROGRAM
Specialty: OBSTETRICS & GYNECOLOGY
Dates: 07/2006 - 06/2010 (Verified)

If you have discrepant information, please submit a Request for Investigation to the AMA so that we may verify the information with the primary source(s). See the last page of this Profile for instructions on how to report a data discrepancy.

Current and/or historical medical licensure

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>MD/DO</th>
<th>Date granted</th>
<th>Expiration date</th>
<th>Status</th>
<th>License type</th>
<th>Last reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDAHO</td>
<td>MD</td>
<td>03/31/2014</td>
<td>06/30/2015</td>
<td>ACTIVE</td>
<td>UNLIMITED</td>
<td>08/15/2014</td>
</tr>
<tr>
<td>WASHINGTON</td>
<td>MD</td>
<td>07/19/2013</td>
<td>05/02/2016</td>
<td>ACTIVE</td>
<td>UNLIMITED</td>
<td>08/21/2014</td>
</tr>
<tr>
<td>PENNSYLVANIA</td>
<td>MD</td>
<td>05/24/2010</td>
<td>12/31/2014</td>
<td>ACTIVE</td>
<td>UNLIMITED</td>
<td>07/23/2014</td>
</tr>
<tr>
<td>KENTUCKY</td>
<td>MD</td>
<td>07/01/2007</td>
<td>06/30/2010</td>
<td>INACTIVE</td>
<td>RESIDENT</td>
<td>08/03/2010</td>
</tr>
</tbody>
</table>

ECFMG Certification

Applicant Number:

The Educational Commission for Foreign Medical Graduates (ECFMG) applicant identification number does not imply current ECFMG certification status. To verify ECFMG status, contact the ECFMG Certification Verification Service online at https://cwonline2.ecfmg.org/
# U.S. Drug Enforcement Administration (DEA)

<table>
<thead>
<tr>
<th>DEA number</th>
<th>Schedule</th>
<th>Expiration date</th>
<th>Last Reported date</th>
<th>Address</th>
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</thead>
<tbody>
<tr>
<td>XXXXXXXX190</td>
<td>22N 33N 4 5</td>
<td>03/31/2016</td>
<td>08/05/2014</td>
<td>Planned Parenthood Of The Great Northwes, 2001 E Madison St, Seattle, WA 98122-2959</td>
</tr>
</tbody>
</table>

*Only the last three characters of active DEA numbers are displayed.*

Many states require their own controlled substances registration/license. Please check with your state licensing authority for requirement information as the AMA does not maintain this information.

### Specialty Board Certification

Specialty Board Certification(s) by one or more of the 24 boards recognized by the American Board of Medical Specialties (ABMS) and the American Medical Association (AMA) through the Liaison Committee on Specialty Boards, as reported by the ABMS:

The AMA Physician Profile has been designated by the ABMS as an Official ABMS Display Agent of Member Board Certification data. Therefore, the ABMS Board Certification information on the AMA Physician Profile is considered a designated equivalent source in regard to credentialing standards set forth by Joint Commission. The AMA is also an NCQA-approved source for verification of medical school, postgraduate medical training, ABMS Board certification, and Federal DEA registration.

Certifying board: **AMERICAN BOARD OF OBSTETRICS AND GYNECOLOGY**
Certificate: **OBSTETRICS & GYNECOLOGY**
Certificate type: **GENERAL**

<table>
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<tr>
<th>Duration</th>
<th>Effective Date</th>
<th>Expiration Date</th>
<th>Reverification Date</th>
<th>Occurrence</th>
<th>Last Reported Date</th>
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<tbody>
<tr>
<td>TIME LIMITED</td>
<td>12/31/2013</td>
<td>12/31/2014</td>
<td>RE-CERT</td>
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<td>08/05/2014</td>
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<tr>
<td>Duration</td>
<td>Effective Date</td>
<td>Expiration Date</td>
<td>Reverification Date</td>
<td>Occurrence</td>
<td>Last Reported Date</td>
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<td>----------------</td>
<td>-----------------</td>
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<td>------------</td>
<td>-------------------</td>
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<tr>
<td>TIME LIMITED</td>
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<td>INITIAL(**))</td>
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<td>08/05/2014</td>
</tr>
</tbody>
</table>

For certification dates, a default value of "01" appears in the day or month field if data were not provided to AMA. Please contact the appropriate specialty board directly for this information.

This information is proprietary data maintained in a copyrighted database compilation owned by the American Board of Medical Specialties (ABMS). Copyright 2014 American Board of Medical Specialties. All rights reserved.

**Action notifications**

To date, there have been no actions reported to the AMA by any US state licensing agency.

To date, there have been no Medicare/Medicaid sanctions reported to the AMA by the Department of Health and Human Services.

To date, there have been no federal sanctions reported to the AMA by any branch of the US military, the Veteran's Administration or the US Public Health Service.
Additional Information

To date, there is no additional information for this physician on file.

The content of the AMA Physician Profile is intended to assist with credentialing. An organization's appropriate use of the data contained in the AMA Physician Masterfile meets selected primary source verification requirements of the Joint Commission, the Accreditation Association for Ambulatory Health Care (AAAHC) and the American Accreditation Health Care Commission (AAHCC)/Utilization Review Accreditation Commission (URAC). The AMA Physician Masterfile is also an NCQA-approved source for verification of medical school, post-graduate medical training, ABMS Board Certification and federal DEA registration.

If any of the data in this Profile is believed to be incorrect, please log onto our website (www.ama-assn.org/go/amaprofiles) and go to the order detail page. Select the ‘D’ following the physician’s name and enter the data in question. Or you can mark the issues on a copy of the profile and mail or fax to:

American Medical Association
Division of Database Products
Attn: Physician Products Portfolio
AMA Plaza
330 N. Wabash Ave., Suite 39300
Chicago, IL 60611-5885

Fax: (312) 464-5900

If you have any questions or need additional information about the AMA Physician Profile Service, please call (800) 665-2882.
NOTICE

WAC 246-15-030, procedures for filing, investigation, and resolution of whistleblower complaints.

(1)(b) Instructs that staff will affix a permanent cover to the letter of complaint or other form of notice in the complaint file, noting the statutory citation concerning protecting the identity of the complainant.

(3)(c) Ensure upon case closure, that the permanent cover affixed in subsection (1)(c) of this section will remain.

RCW 43.70 provides that the identity of a whistleblower who complains in good faith to the Department of health about the improper quality of care by a health care provider as defined in RCW 43.72.010 **shall remain confidential**.

Pursuant to the above RCW and WAC it is staff’s duty to see that the complainant’s name or any information which may identify the complainant is not disclosed.

NOTICE
September 24, 2014

RE: Sara Pentlicky, MD
Case No.: 2014-7771MD

Dear Sara Pentlicky,

Thank you for your recent letter in which you expressed concerns regarding an allegation of unprofessional conduct.

A panel of the Medical Quality Assurance Commission reviewed the issues raised in your report and determined they do not meet the criteria established for cases which are to be investigated. Specifically, the complaint lacked credibility. As a result, this case has been closed. You may request reconsideration within 30 days of receiving this letter if you have new information to submit.

Thank you for bringing your concerns to the attention of the Medical Quality Assurance Commission. If you have any questions, please call me at (360)236-2758 or contact me by email at melissa.mceachron@doh.wa.gov.

Sincerely,

Melissa McEachron, Projects Manager
Medical Quality Assurance Commission
September 24, 2014

Sara Pentlicky, MD
2042 Eastlake Ave E
Unit C
Seattle, WA 98102-3594

RE: Sara Pentlicky, MD
Case No.: 2014-7771MD

Dear Dr. Pentlicky:

The Medical Quality Assurance Commission received a complaint. A panel of the Commission reviewed the complaint and determined that it did not meet the criteria established for cases which are to be investigated. Therefore, this complaint file has been closed.

You have the right to request any information contained in the file. However, please note that the state whistleblower law, RCW 43.70.075, prohibits disclosure of the complainant's identity in cases where a whistleblower waiver has not been obtained. Consequently, any information you might obtain through a public disclosure request would not contain specific details of the complaint. If you would like a summary of the case or other materials in the file, please submit a written request for a copy to the Department of Health, Public Disclosure & Records Center, PO Box 47865, Olympia, WA 98504-7865 or fax to (360)586-2171. Their email address is PDRC@doh.wa.gov. Their main phone number is 360-236-4836.

Because the complaint file was closed without an investigation, the existence of this complaint is not releasable through the automated voice response system or in response to telephone inquiries. However, the complaint is subject to written public disclosure requests (RCW 18.130.095 and RCW 42.17). Even though this complaint file has been closed, you have the right to voluntarily submit a written statement which will become part of the file and will be provided in response to any public disclosure request.

As stated in paragraph 2 above, if you wish to request a summary of this complaint, please contact the Public Disclosure & Records Center directly. If you have any questions, other than requesting a copy of the complaint or inquiring what the complaint is about, please call me at (360)236-2775, or contact me by email at denise.gruchalla@doh.wa.gov.

Sincerely,

Denise J. Gruchalla, Chief Investigator
Department of Health
Medical Quality Assurance Commission
From: DOH OS MQAC
Sent: Tuesday, August 26, 2014 4:14 PM
To: DOH MQAC Medical Complaints
Subject: FW Complaint against Dr. Sara B. Pentlicky
Attachments: Letter about complaint Dr. Sara B. Pentlicky.docx

Joe Mihelich
Health Services Consultant 1
Medical Quality Assurance Commission
PO BOX 47866
Olympia WA 98504
360-236-2767 phone
360-236-2795 Fax
Website: www.doh.wa.gov/Medical
Email: joe.mihelich@doh.wa.gov

From: DOH OS MQAC
Sent: Tuesday, August 26, 2014 3:56 PM
To: DOH OS MQAC
Subject: Complaint against Dr. Sara B. Pentlicky
August 26, 2014

Medical Quality Assurance Commission
Intake Coordinator
P O Box 47866
Olympia, WA
47866

To Whom It May Concern:

My name is [Name]. Will you please accept this letter as a complaint against Dr. Sara B. Pentlicky? She works at Harborview medical center located at 325 9th Ave Seattle, WA 98104. The telephone at her office is (206) 520-5000. The date of my appointment was on August 25, 2014 at 1:00 pm.

My first visit to Harborview medical center was on August 25, 2014 as a new patient. Upon my arrival I was asked to sign for consent for treatment by the receptionist Davaly. I explained to Davaly that I did not feel comfortable signing the signature pad without first reading over the information that I was consenting to. The receptionist gave me the hard copies to read. Before I could finish reading the information, and sign the documents a nurse came out to tell me to come back to their office. I explained to the nurse that I am pregnant, and that I need to have an ultrasound done because I was stumped in my stomach, and back area. I further explained, that I have not felt the movement of the fetus since I was injured.

I told the nurse that I knew that I was due around October 10, 2014, and that I was having a girl. I also told her that I had two ultrasound done so I know for sure that I am pregnant. The nurse asked me to do a urine test. I explained to her that the last urine test that I did for some reason was showing up negative, but I know for sure that I am still pregnant. I explained that I was concerned that there was something wrong with the fetus because of the trauma that I had sustained. I asked if I could please see a doctor, and have the ultrasound done. I also shared with her that I needed written confirmation of my pregnancy.

The nurse told me that I could see the doctor. I was switched to another room, and when the female that came into the office that presented herself as a doctor I asked her if she was a doctor. I explained that I wanted to make sure because she was not dressed like a doctor, and that she had nothing on that
displayed her credentials. The doctor then left the room and reentered the room wearing a doctors jacket and she had on a badge that said the name Sara Pentlicky MD on it. I shared the same information with the doctor that I shared with the nurse. Dr. Pentlicky then told me that she would do the ultra sound. I have had ultra sounds done in the past so I know what the procedure is. However, to my dismay the procedure that the doctor used was not the right one. She placed a clear substance on something that felt like a dill doe literally, and then she proceeded to enter my vagina with it moving it inside of me in a circular motion. When she finished I explained to her that I wanted an ultra sound done and that what she had just done was not an ultra sound. When she finished the procedure it made me start to spot bleed a little. The doctor then shocked me by saying, “you can I will see you in a cell”. I was so shocked by what she said I could not even respond at first. I then told her that I know for sure that I am pregnant, and that I know that I am having a girl, and that I have had two ultra sounds done. I told her before I left the office that I was not nuts. Dr. Pentlicky asked me what I wanted her to do. I responded that wanted the ultra sound done right. Dr. Pentlicky then responded if you want me to do then I do another ultra sound. I said to her that is ok I will go to another hospital where I can get an ethical ultrasound done. The doctor then nodded her head. I left the hospital after that. I never even signed the consent forms for treatment because, the nurse asked me to come into the office before I could finish reading the information.

Will you please have someone investigate this situation? I was very offended by the way that I was treated. In addition to the fact that she called me a con, and told me that she would see me in a jail cell, and I had done nothing wrong. I am a victim of identity theft, and I think that maybe she might have mistaken me for someone else. Even if that was the case no professional licensed competent doctor should treat any patient in the manner in which I was treated. I do believe that Dr. Pentlicky should be counseled for the way that she treated me. I also believe that she should be counseled for what she said to me. I also overheard teli one of her co-workers that Lee or Clee got fucked. All of that was very unethical, and unprofessional too. I did call on August 26, 2014 to the patient relations department at Harbor view and I left a voice message about what happened. The voice message was left on a Kathy Flaherty I was told that she was the manager. Will you please have someone contact me at [Name]. I would like to inform you that she did turn her badge around so that I could not see her name before I left. I do hope that this was not the real doctor if it was I think that she needs some time off. Thank you for your help, and kindness regarding this situation. My email address is [Email].

Sincerely,
Complaint Form

Today’s Date: 9-8-14

1. Your Information

Name: __________________________________________________________

Address: ______________________________________________________

City: __________________________ State: ___________________________ Zip: _______________

Phone: Home: (_____) _______ Work: (_____) _______

Cell Phone: ________________ E-mail: ____________________________

2. Information about the Physician (MD) or Physician Assistant

Name of Physician (MD) or Physician Assistant: PENTLICKY, SARA 2014-2771MD

Clinic or Facility: Harborview Medical Center

Address: 325 9th Ave

City: Seattle State: Wa Zip: 98104

3. Patient Information

Full name: ______________________________________________________

Date of Birth: _________________________________________________

Date of incident: 8-25-14 @ 1:00 pm

DOH 657-116 Rev. October 2010
4. Scheduling problems or personality conflicts are usually not within the Commission's ability to take action.

5. Reports involving fee for fee disputes or insurance claims are only investigated if there appears to be fraud involved.

6. Please describe your complaint in the space below. Include the names, title and phone number of any witnesses that were involved in the complaint.

7. Please attach any supporting documentation or additional information you may have.

You may submit a complaint to the Medical Commission by mail, fax or email at:

Medical Quality Assurance Commission
Intake Coordinator
PO Box 47866
Olympia, WA 98504-7866
Fax: 360.586.4573

Please describe your complaint in the space below. Include names, titles and phone numbers of any witnesses. Please attach copies of documents to support your complaint. You may mail, email or fax this form to the Medical Quality Assurance Commission at the physical address, email address, or fax number above.

I went to the Women's Clinic at Harborview Medical Center on 8-25-14 at 1:00 p.m. I had requested that I see a doctor on the office visit why I made the appointment. Because I
answered an ultrasound done. I had trauma done to my domestic area. Dr. Pentlucky called me out of my way. The doctor
called me a cop and told me that she
would see me in a jail cell. The doctor did
got give me an ultrasound. The doctor
was very unethical and unprofessional. Please
see the attached letter that explains
the incident. Please contact me at

Please include additional sheets as necessary.
August 26, 2014

Medical Quality Assurance Commission
Intake Coordinator
P O Box 47866
Olympia, WA
47866

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Sincerely,

[Name] - Whistleblower Regarding Health Care Provider or Health Facility - RCW 43.70.07}

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1 Privilege / Exemption reason used:

1 -- "Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1)"

( 36 instances )

Redacted pages:

Page 2, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 1 instance
Page 4, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 1 instance
Page 5, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 1 instance
Page 6, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 2 instances
Page 7, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 2 instances
Page 8, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 4 instances
Page 15, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 2 instances
Page 17, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 1 instance
Page 18, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 1 instance
Page 19, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 2 instances
Page 20, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 4 instances
Page 21, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 8 instances
Page 22, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 3 instances
Page 23, Name - Whistleblower Regarding Health Care Provider or Health Care Facility - RCW 43.70.075(1), RCW 42.56.070(1), 2 instances
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