A Martin

BEFORE THE BOARD OF MEDICAL EXAMINERS OF THE STATE OF NEVADA

* * * * *

In the Matter of Charges and Complaint

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|| FRANK P. SILVER, M.D,

Respondent.

FILED NOV - 6 2020 NEVADA STATE BOARD OF MEDICAL EXAMINERS By:

Case No. 20-4041-1

COMPLAINT

The Investigative Committee (IC)¹ of the Nevada State Board of Medical Examiners (Board), by and through Robert Kilroy, J.D., General Counsel and attorney for the IC, having a reasonable basis to believe that Frank P. Silver, M.D. (Respondent), violated the provisions of Nevada Revised Statutes (NRS) Chapter 630 and the Nevada Administrative Code (NAC) Chapter 630 (collectively Medical Practice Act), hereby issues its Complaint (Complaint), stating the IC's charges and allegations as follows:

Respondent's Licensure Status

1. Respondent is currently licensed in active status (License No. 2641), and has been licensed by the Board since August 8, 1972. Respondent is a medical doctor specializing in gynecology and infertility. At all times alleged herein, Respondent was licensed in an active status by the Board pursuant to the provisions of the Medical Practice Act.

Statement of Nevada Law Applicable to "Medical Spas" and "Medical Doctors"

Delegating Practitioners, Medical Assistants, and the Unlicensed Practice of Medicine

2. Pursuant to NRS 630.400(1)(d), it is unlawful for any person to practice medicine without being licensed by the Board under NRS Chapter 630, or by another medical professional licensing board pursuant to NRS Chapters 631 to 637, inclusive, 639, or 640.

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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 Wayne Hardwick, M.D., Chairman, Mr. M. Neil Duxbury and Aury Nagy, M.D.

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3. Pursuant to NRS 630.020, the "practice of medicine" means either (1) to diagnose, 1 treat, correct, prevent or prescribe for any human disease, ailment, injury, infirmity, deformity or 2 other condition, physical or mental, by any means or instrumentality, including, but not limited to, 3 4 the performance of an autopsy, or (2) to apply principles or techniques of medical science in the 5 diagnosis or the prevention of any such conditions, or (3) to perform any of the acts described in 6 subsections (1) and (2) by using equipment that transfers information concerning the medical 7 condition of the patient electronically, telephonically or by fiber optics, including, without 8 limitation, through telehealth, from within or outside this State or the United States, or (4) to offer, 9 undertake, attempt to do or hold oneself out as able to do any of the acts described in subsections (1) and (2). 10

4. Pursuant to NRS 630.305(1)(e), a Nevada physician or physician assistant (practitioner) may not aid, assist, employ or advise, directly or indirectly, any unlicensed person to engage in the practice of medicine contrary to the provisions of the Medical Practice Act, and doing so is grounds for initiating disciplinary action or denying licensure.

5. Pursuant to the Medical Practice Act, the only means by which a practitioner may lawfully aid, assist, employ or advise, directly or indirectly, an unlicensed person to engage in the practice of medicine is by delegating specific tasks to an adequately supervised and trained "medical assistant." Pursuant to NRS 630.0129, a "medical assistant" means a person who (a) performs clinical tasks under the supervision of a physician or physician assistant; and (b) does not hold a license, certificate or registration issued by a professional licensing or regulatory board in this State to perform such clinical tasks; and the term does not include a person who performs only administrative, clerical, executive or other nonclinical tasks.

23 6. Pursuant to NRS 630.306(1)(r), a practitioner must supervise adequately a medical
24 assistant, and failing to do so is grounds for initiating disciplinary action or denying licensure.

Pursuant to NAC 630.830, a delegating practitioner is professionally responsible
for the safety and performance of each task which is delegated to a medical assistant. Pursuant to
NAC 630.810(1), a delegating practitioner may not delegate tasks to a medical assistant unless: (a)
the delegating practitioner knows that the medical assistant possesses the knowledge, skill and

1 training to perform the task safely and properly; (b) the medical assistant is not required to be 2 certified or licensed to perform that task; (c) the medical assistant is employed by the delegating 3 practitioner or the medical assistant and the delegating practitioner are employed by the same employer; and (d) the employer of the medical assistant has complied with the requirements of 4 5 subsection 2 as they relate to the task.

8. Pursuant to NAC 630.820, a delegating practitioner may not supervise remotely a 6 medical assistant, except in a specific case of emergency in a rural area.²

9. Except as otherwise provided in NAC 630.820, pursuant to NAC 630.810, if a medical assistant is delegated a task which involves an "invasive procedure,"³ the delegating practitioner must be immediately available to exercise oversight in person while the medical assistant performs the task.

The term "medical director" is not recognized or defined under any Nevada law or 10. regulation pertaining to the professional conduct and responsibility of licensed medical professionals, and no law authorizes so-called "medical directors" to violate or circumvent the aforementioned statutes and regulations of the Medical Practice Act.

Accordingly, pursuant to NRS 630.400(1)(d), NRS 630.305(1)(e), 11. and NRS 630.0129, and NAC 630.800 to NAC 630.840:

If a practitioner, whether by serving as a so-called "medical director" or by 18 a. some other relationship or circumstance, aids, assists, employs or advises, directly or 19 indirectly, any unlicensed person to engage in the practice of medicine, then the practitioner 20 may lawfully do so only by delegating tasks to an adequately supervised, competent and properly 21 trained medical assistant. 22

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² Remote supervision of a medical assistant is prohibited unless: (a) the patient is located in a rural area; (b) 24 the delegating practitioner is physically located a significant distance from the location where the task is to be performed; (c) the delegating practitioner determines that the exigent needs of the patient require immediate attention; 25 (d) the patient and the delegating practitioner previously established a practitioner-patient relationship; and (e) the delegating practitioner is immediately available by telephone or other means of instant communication during the 26 performance of the task by the medical assistant. As used in NAC 630.820, "rural area" means any area in this State other than Carson City or the City of Elko, Henderson, Reno, Sparks, Las Vegas or North Las Vegas. 27

³ The Medical Practice Act does not define "invasive procedure," however, NAC 449.9733, pertaining to Medical Facilities, defines "invasive procedure" as "a medical procedure involving entry into the human body by 28 puncture or incision or by insertion of an instrument,"

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b. If a practitioner, whether by serving as a so-called "medical director" or by
some other relationship or circumstance, aids, assists, employs or advises, directly or
indirectly, any unlicensed person to engage in the practice of medicine, and if the practitioner
has not done so by delegating specific tasks to an adequately supervised, competent and properly
trained medical assistant, then: (1) that unlicensed person has violated NRS 630.400(1)(d), by
practicing medicine without a license; and (2) that practitioner has violated NRS 630.305(1)(e),
and is subject to discipline for aiding and assisting the unlicensed practice of medicine.

c. If a practitioner delegates a medical task to a medical assistant, whether by serving as a so-called "medical director" or by some other relationship or circumstance, then the practitioner remains professionally responsible for the safety and performance of each task, and remains professionally responsible for ensuring that the proper employment relationships exist, that the medical assistant is properly knowledgeable, trained and skilled, that the medical assistant is adequately supervised, and that the practitioner is nearby to supervise the specific medical tasks delegated, and, if it is an invasive medical task, then he or she must be immediately available to exercise oversight in person while the medical assistant performs the task.

d. If a practitioner delegates a medical task to a medical assistant, whether by serving as a so-called "medical director" or by some other relationship or circumstance, and if the practitioner fails to adequately supervise that medical assistant as required under the circumstances, then that physician or physician assistant has violated NRS 630.306(1)(r), and is subject to discipline for failing to adequately supervise a medical assistant.

22 Cosmetologists, "Medical Spas", "Medical Estheticians," & Unlicensed Practice of Medicine

12. Pursuant to NRS 644A.030, a licensed "cosmetologist" is not authorized by such license to practice medicine in any way. Rather, a licensed cosmetologist is authorized to perform only non-medical, cosmetological services, such as cleansing, stimulating or massaging the scalp or cleansing or beautifying the hair by the use of cosmetic preparations, antiseptics, tonics, lotions or creams, cutting, trimming or shaping the hair, removing hair by the use of electrolysis, depilatories, waxing, or sugaring, except for the permanent removal of hair with needles,

manicuring nails, massaging the skin, giving facials, and other miscellaneous non-medical, 1 cosmetological services. Likewise, pursuant to NRS 644A.065, a licensed "esthetician" is not 2 3 authorized to practice medicine in any way. Instead, pursuant to NRS 644A.075, a licensed esthetician is licensed to engage in "[b]eautifying, massaging, cleansing or stimulating the skin of 4 5 the human body by the use of cosmetic preparations, antiseptics, tonics, lotions or creams or any device, electrical or otherwise, for the care of the skin," "[a]pplying cosmetics, eyelash extensions 6 7 or eyelashes to any person, tinting eyelashes and eyebrows, eyelash perming and lightening hair on the body," and "[r]emoving superfluous hair from the body of any person by the use of 8 9 depilatories, waxing, tweezers or sugaring."

13. Pursuant to NAC 644A.790 a cosmetologist and esthetician is further explicitly 10 prohibited from performing "invasive procedures," which is defined as "an act that affects the 11 structure or function of the skin other than the uppermost layers of the skin," and which for the 12 sake of regulating the practice of cosmetologists and estheticians includes, without limitation, (a) 13 the application of electricity for the sole purpose of contracting a muscle, (b) the application of a 14 topical lotion, cream or other substance which affects anything other than the uppermost layers of 15 the skin, (c) the penetration of the skin by needles, and (d) the abrasion of the skin below the 16 uppermost layers of the skin. 17

18 14. There is no such license as "medical esthetician"⁴ or "medical cosmetologist" authorized by any Nevada law or issued by any Nevada sanctioned professional licensing body. The term "medical esthetician" is not recognized or defined under any Nevada law or regulation pertaining to the professional conduct and responsibility of licensed medical professionals, and no law authorizes cosmetologists or estheticians to violate or circumvent the aforementioned statutes and regulations of the Nevada Medical Practice Act by referring to themselves as "medical estheticians" or "medical cosmetologists."⁵

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⁴ Esthetician is sometimes spelled "aesthetician." Nevada law in NRS Chapter 644A refers to "esthetician," 27 and, accordingly, this spelling is used throughout this Complaint.

⁵ In fact, use of the title "medical esthetician" or "medical cosmetologist" by individuals licensed by the 28 Nevada State Board of Cosmetology (NSBC) is prohibited in Nevada. It is grounds for disciplinary action by the NSBC if a licensee uses the term "expert," "advanced," or "medical" in connection with the description of his or her practice. See NAC 644A.870(2).

15. Accordingly, a Nevada licensed cosmetologist or esthetician may not practice medicine in any way, or perform invasive medical procedures or medical services of any kind, except as a "medical assistant" to a Nevada licensed medical professional, i.e., either as the medical assistant of a Nevada licensed physician or physician assistant pursuant to NRS 630.0129, et. seq., and NAC 630.800 to NAC 630.830, as described above, or similarly as another type of professional "assistant," "hygienist," "technician," or other such designation, who is delegated tasks by and under the direct supervision of another medical professional who is duly licensed pursuant to NRS 631 to 637, inclusive, 639, or 640.

16. If a cosmetologist or esthetician practices or purports to practice medicine in any way, unless he or she acts as a medical assistant and is delegated tasks and is properly supervised by a professional medical practitioner, then he or she is violating NRS 630.400(1)(d) by practicing medicine without a license.

Nevada Pharmacy Laws Regarding Dangerous Drugs and Hypodermic Devices

17. NRS 630.306(1)(b)(3) provides that engaging in conduct that violates a regulation adopted by the Nevada State Board of Pharmacy (Pharmacy Board) is grounds for initiating disciplinary action against a licensee.

Pursuant to NRS 454.201, a "dangerous drug" is "any drug, other than a controlled 18. 17 substance, unsafe for self-medication or unsupervised use, and includes, the following, (1) any 18 drug which has been approved by the Food and Drug Administration for general distribution and 19 bears the legend: 'Rx Only'; (2) procaine hydrochloride with preservatives and stabilizers 20 (Gerovital H3) in injectable doses and amygdalin (laetrile) which have been licensed by the State 21 Board of Health for manufacture in this State but have not been approved as drugs by the Food 22 and Drug Administration; or (3) any drug which, pursuant to the Board's regulations, may be sold 23 only by prescription because the Board has found those drugs to be dangerous to public health or 24 25 safety."

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19. Pursuant to NRS 454.316 and NRS 454.321, it is unlawful to possess, dispense or furnish a dangerous drug except when furnished to the person by a pharmacist pursuant to a legal prescription or by a practitioner.

20. Pursuant to NRS 454.009, a "hypodermic" device is "any syringe, needle, instrument, device or implement intended or capable of being adapted for the purpose of administering drugs by subcutaneous, intramuscular or intravenous injection."

21. Pursuant to NRS 454.510, it is unlawful for any person to have in his or her possession or under his or her control any hypodermic device (that is restricted by federal law to sale by or on the order of a physician), unless the person has acquired possession of such device in accordance with the provisions of NRS 454.480 to NRS 454.530, inclusive, that is, by sale from a licensed pharmacist, on the prescription of a physician or other practitioner, which prescription is filled as required by NRS 639.236, and may be refilled as authorized by the prescriber.

Accordingly, pursuant to NRS 454.009, NRS 454.201, NRS 454.316, NRS 454.321
 and NRS 454.510, a Nevada licensed cosmetologist and/or aesthetician is not permitted by
 Nevada law to possess, control, access, prescribe, administer, and/or dispense dangerous drugs or
 hypodermic devices, except as a medical assistant under the direct supervision of a Nevada
 licensed physician, physician assistant, or other licensed medical professional, and then only if
 otherwise permitted and in compliance with laws of regulating pharmacies and pharmaceuticals.

19 23. NAC 639.742(1) provides that a practitioner who wishes to dispense controlled 20 substances or dangerous drugs must apply to the Pharmacy Board for a certificate of registration 21 to dispense controlled substances or dangerous drugs. A practitioner must submit a separate 22 application for each site of practice, including, without limitation, telepharmacy, remote site or 23 satellite consultation site, from which the practitioner wishes to dispense controlled substances or 24 dangerous drugs.

25 24. NAC 639.742(2) provides that if a facility from which the practitioner intends to
26 dispense dangerous drugs or controlled substances is not wholly owned and operated by the
27 practitioner, the owner or owners of the facility must also submit an application to the Pharmacy
28 Board for a license to do so.

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25. NAC 639.742(3) provides, in pertinent part, that a dispensing practitioner and, if

applicable, the owner or owners of the facility, shall ensure that:

(a) All drugs are ordered by the dispensing practitioner;

(b) All drugs are received and accounted for by the dispensing practitioner;

(c) All drugs are stored in a secure, locked room or cabinet to which the dispensing practitioner has the only key or lock combination;

(d) All drugs are dispensed in accordance with NAC 639.745.⁶

(e) No prescription is dispensed to a patient unless the dispensing practitioner is on-site at the facility;

(f) All drugs are dispensed only to the patient personally at the facility;

(g) The price of each drug dispensed to a patient is separately itemized on any bill or statement provided to the patient.

(h) All drugs are dispensed only for medically necessary purposes and according to prevailing standards of care for practitioners practicing in the specialty claimed or practiced by the dispensing practitioner; and

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13 ⁶ NAC 639.745 Duties of certain practitioners concerning dispensing of controlled substances and dangerous drugs. (NRS 639.070, 639.0727) 1. Each practitioner who is registered with the Board to dispense controlled 14 substances and dangerous drugs, including, without limitation, a dispensing practitioner, and who dispenses such products for use by the practitioner's patients outside his or her presence shall: (a) Keep complete, accurate and 15 readily retrievable records of each controlled substance and dangerous drug purchased and dispensed. The record for each such product dispensed to a patient must include: (1) The name of the patient and, if not readily available from 16 (2) The name, strength and quantity of the prescribed controlled the practitioner's records, the patient's address; (4) The date the prescription was issued; and (5) A substance or dangerous drug; (3) The directions for use; 17 (b) Maintain a separate file for the records concerning the purchase of each controlled unique identifying number. substance listed in schedule II and a separate file for the records concerning the dispensing of each controlled 18 substance listed in schedule II. Each prescription for a controlled substance or dangerous drug must be maintained in a separate file pursuant to the requirements set forth in NAC 453.480. (c) Keep all controlled substances and 19 dangerous drugs in a locked storage area. Access to the storage area must be restricted to the persons described in (d) Ensure that each package or container, in which a controlled substance is dispensed, except NRS 453.375. 20 samples in the manufacturer's packages, is clearly labeled pursuant to the requirements set forth in NRS 639.2801. (e) Ensure that the package or container in which a controlled substance or dangerous drug is dispensed complies with (f) Be deemed to be a pharmacy as that term is used in NAC 639.926 21 all state and federal packaging requirements. 2. A practitioner may dispense dangerous drugs or controlled substances only and shall comply with that section. 22 after the patient has been informed by the practitioner that the patient may request a written prescription and have it 3. A record regarding the dispensing of a controlled substance filled at another location of the patient's choosing. or dangerous drug made and kept pursuant to this section must be maintained on paper or in a computer. If the record 23 (a) Maintained on paper, the record must: (1) Include all the information required to be on the prescription is: pursuant to NRS 639.2353 and NAC 453.440; (2) Set forth on the front of the prescription a certification initialed 24 and dated by the patient that the patient has been informed by the practitioner in accordance with subsection 2 and that the patient has agreed to have the practitioner dispense the controlled substance or dangerous drug; and (3) Be 25 serially numbered and kept in numerical order in a single file for all dispensing practitioners, including, without (a) limitation, physician assistants and advanced practice registered nurses, practicing at the same location. 26 Maintained in a computer, the record must: (1) Include all the information required to be on the prescription pursuant to NRS 639.2353 and NAC 453.440; (2) Contain a certification, either in the computer or a separate paper 27 document, initialed and dated by the patient that the patient has been informed by the practitioner in accordance with subsection 2 and that the patient has agreed to have the practitioner dispense the controlled substance or dangerous 28 (3) Be searchable for any item required by paragraph (a) of subsection 1 to be included in the record. drug; and

1 2	(i) The certificate for each dispensing technician employed at the facility is displayed in the room or cabinet in which drugs are stored.		
3	26. NAC 639.742(4)(a) to NAC 639.742(b) provides, in part, that with regard to the		
4	filling and dispensing of a prescription at a facility, only the dispensing practitioner or a		
5	dispensing technician may enter the room or cabinet in which drugs are stored, or remove drugs		
6	from stock.		
7	27. NAC 639.945(1) provides, in pertinent part, that the following acts or practices by		
8	a holder of any license, certificate or registration issued by the Pharmacy Board or any employee		
9	of any business holding any such license, certificate or registration are declared to be, specifically		
10	but not by way of limitation, unprofessional conduct and conduct contrary to the public interest:		
11	(a) Manufacturing, compounding, selling, dispensing or permitting to be manufactured, compounded, sold or dispensed substandard		
12	drugs or preparations.		
13	(b) Except as otherwise provided in NRS 639.2583 to 639.2808, inclusive, for substitutions of generic drugs, dispensing or causing		
14	to be dispensed a different drug or brand of drug in place of the drug or brand of drug ordered or prescribed, unless the express		
15	permission of the orderer or prescriber is obtained and, in the case of a written prescription, unless the following information is		
16	recorded on the prescription by the person obtaining permission: (1) The date on which the permission was granted; (2) The name of the practitioner granting the		
17	permission;		
18	 (3) The name of the person obtaining the permission; (4) The name of the drug dispensed; and (5) The name of the menufacture of the 		
19	(5) The name of the manufacturer or distributor of the drug		
20	 (c) Using secret formulas. (d) Except as otherwise provided by subsection 2 of 		
21	NRS 639.2396, failing strictly to follow the instructions of the person writing, making or ordering a prescription or chart order as		
22	to its filling or refilling, the content of the label of the prescription or giving a copy of the prescription or chart order to any person		
23	except as permitted by law. (e) Failing to confer with the person writing, making or ordering a		
24	prescription or chart order if there is an error or omission in it which should be questioned.		
25	(f) Operating a pharmacy at a location other than the location at which the pharmacy is licensed to operate.		
26	(g) Supplying or diverting drugs, biologicals, medicines, substances or devices which are legally sold in pharmacies or by		
27	wholesalers, so that unqualified persons can circumvent any law pertaining to the legal sale of such articles.		
28	(h) Performing or in any way being a party to any fraudulent or deceitful practice or transaction.(i) Performing any of his or her duties as the holder of a license,		
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1 business or an entity licensed by the Board, in an incompetent, unskillful or negligent manner. 2 (j) Aiding or abetting a person not licensed to practice pharmacy in the State of Nevada. 3 (k) Performing any act, task or operation for which licensure, certification or registration is required without the required license, 4 certificate or registration. (1) Violating any term or condition of a subpoena or order issued 5 by the Board or the staff of the Board. (m) Failing to provide any document, data or information that is 6 required to be made and maintained pursuant to chapters 453, 454, 585 and 639 of NRS and chapters 453, 454, 585 and 639 of NAC 7 to a member of the Board or a member of the staff of the Board upon his or her request. 8 (n) Dispensing a drug as a dispensing practitioner of a patient with whom the dispensing practitioner does not have a bona fide 9 therapeutic relationship. (o) Prescribing a drug as a prescribing practitioner to a patient 10 with whom the prescribing practitioner does not have a bona fide therapeutic relationship. 11 NAC 639.945(2) provides that the owner of any business or facility licensed, 28. 12 certified or registered by the Pharmacy Board is responsible for the acts of all personnel in his or 13 14 her employ. 29. NAC 639.945(3) provides that, for purposes of applying Pharmacy Board 15 a bona-fide therapeutic relationship between the patient and practitioner shall be 16 regulations. deemed to exist if the patient was examined in person, electronically, telephonically or by fiber 17 optics, by the practitioner within the 6 months immediately preceding the date the practitioner 18 dispenses or prescribes a drug to the patient and, as a result of the examination, the practitioner 19 20 diagnosed a condition for which a given drug therapy is prescribed. Accordingly, any physician or physician assistant who-whether by serving as a 21 30. so-called "medical director" of, or by furnishing dangerous drugs or hypodermic devices to, or by 22 some other relationship or circumstance with any "medical spa" wherein dangerous drugs or 23

certificate or registration issued by the Board, or as the owner of a

hypodermic devices are possessed, controlled, accessed, prescribed, administered, and/or
dispensed—engages in conduct that violates any regulation adopted by the Pharmacy Board,
including but not limited to NAC 639.742(1)-(3), (4)(a)-(b), or 639.945(1)-(3), has violated
the Nevada Medical Practice Act and is subject to discipline by the Board.

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Respondent's Medical Directorship of Sandra Bledsoe

31. At all relevant times alleged herein, Respondent was an OB/GYN in Las Vegas, Nevada.

32. On or about July 15, 2015, Respondent entered into an agreement (Agreement) with an individual identified as Sandra Bledsoe (Bledsoe). This Agreement allowed Bledsoe to inject Botox, Juvaderm and B12 Vitamin Complex to cosmetic clients, and Respondent acted as supervising physician/Medical Director for VIP Faces, located at 1900 East Desert Inn Road, Las Vegas, Nevada 89169, which was located within the offices of the Desert Inn Women's Clinic. Desert Inn Medical Center owned and operated Desert Inn Women's Clinic at that time. This Agreement provided VIP Faces would pay Desert Inn Medical Center one thousand dollars (\$1,000.00) per month for utilization of two rooms for VIP Faces to perform cosmetic injections using Botox and Juvederm. Also, VIP Faces agreed to refer to Respondent weight loss patients if requested by the client. As Medical Director of VIP Faces, Respondent would examine some, but not all, of VIP Faces clients.

On February 24, 2016, the Board's investigators and investigators from the 15 33. Pharmacy Board inspected VIP Faces located at 1900 E. Desert Inn Road, Las Vegas, NV. 16 Bledsoe was not present during this inspection. However, Respondent was present and stated the 17 following: that he was the supervising physician/Medical Director of VIP Faces, which was 18 owned by Bledsoe, whom he had known for about a year. Unlike his other OB-GYN patients, 19 Respondent did not have a physician-patient relationship with Bledsoe's VIP Faces cosmetic 20 patients. Respondent also stated that he did not examine Bledsoe's cosmetic patients and saw 21 them as they came out of VIP Faces rooms. Respondent did not establish a bona-fide medical 22 relationship with Bledsoe's clients unless they requested other medical care, such as weight-loss 23 or gynecology. If a client requested a weight-loss program, then Respondent would examine the 24 patient and prescribe Phentermine as part of their weight loss program. Inspectors found in a 25 refrigerator one used vial of Botox one hundred (100) units with approximately fifty (50) units 26 remaining and two more unopened boxes of Botox units. Respondent admitted that he allowed 27 Bledsoe to act like a medical assistant in ordering products from drug makers Allergan and 28

McKesson utilizing Respondent's DEA number, but did not know exactly how much Bledsoe was
 ordering for VIP Faces' use or her own personal use.

34. Bledsoe routinely injected clients with Botox, and Juvederm without Respondent's medical supervision, and without Respondent's medical orders or instructions. Bledsoe also injected B-12 vitamin for clients after approval by Respondent. VIP Faces held itself out to the public as a "medical spa" "specializing" in injectable cosmetic procedures and "medical" weight-loss.

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35. Respondent was not a manager, agent, officer or employee of VIP Faces.

36. Respondent had no ownership or member interest in VIP Faces, but he had a contractual authority, pursuant to the aforementioned Agreement. Respondent had a statutory duty to manage the medical-related affairs of VIP Faces in compliance with the Medical Practice Act.

37. Neither Bledsoe nor other independent contractors of VIP Faces was employed by Respondent during the time Respondent served as Medical Director of VIP Faces.

38. At all times relevant to the facts alleged herein, neither Bledsoe, nor her independent contractors of VIP Faces was licensed by any Nevada professional licensing board pursuant to NRS chapters 630 to 637, inclusive, 639 or 640 or licensed to practice medicine in the State of Nevada.

39. Other than Respondent as Medical Director no person in any way affiliated with
VIP Faces held a medical license issued by the Nevada Medical Board.

40. Bledsoe was neither a Nevada licensed cosmetologist nor a Nevada licensed
esthetician.

41. During Respondent's supervision as Medical Director pursuant to the Agreement,
VIP Faces' records failed to indicate that Respondent adequately supervised, contacted or
consulted Bledsoe.

42. Respondent has been licensed in active status (License No. PD00433) by the
Pharmacy Board since September 12, 2013, to dispense prescription drugs at the following
location: 1900 E. Desert Inn Road, Suite B, Las Vegas, Nevada 89169.

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OFFICE OF THE GENERAL COUNSEL Nevada State Board of Medical Examiners 9600 Gateway Drive Reno, Nevada 89521 (775) 688-2559 43. Respondent prescribed prescription-strength Botox; the aforementioned drugs and
 hypodermic devices are available only by prescription, and are dangerous drugs as defined by
 NRS 454.201. However, Respondent failed to supervise the amounts ordered and received by VIP
 Faces, as Bledsoe solely controlled their possession.

44. As a result, Respondent, negligently through his lack of supervision, provided the aforementioned dangerous drugs and hypodermic devices in the sole possession, custody and control to Bledsoe.

45. During Respondent's agreement as Medical Director of VIP Faces, Bledsoe provided medical treatment, and/or prescriptions, and/or administered controlled and/or dangerous drugs and/or utilized hypodermic devices, to VIP Faces' patients.

46. During Respondent's supervision pursuant to the Agreement, the conduct by Bledsoe constitutes the practice of medicine in Nevada.

47. During Respondent's supervision pursuant to the Agreement on the date of inspection, VIP Faces' medical records contained no entries for patient history, notes, examination findings, procedures performed, or therapeutic procedures performed by Respondent, unless the patient was referred by VIP Faces for weight loss or other gynological procedures.

48. During Respondent's supervision pursuant to the Agreement, Bledsoe at her
discretion, ordered Botox and Juvederm prescribed by Respondent for utilization at VIP Faces
without adequate supervision by Respondent.

49. Botox and Juvederm were stored in a secure, locked room or cabinet to which
the Respondent and Bledsoe had access to. Respondent did not supervise Bledsoe's access to
these dangerous drugs and/or hypodermic devices.

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50. Botox is introduced hypodermically, that is, subcutaneously.

51. During Respondent's supervision as Medical Director pursuant to the Agreement,
Bledsoe injected the aforementioned dangerous drugs and utilized hypodermic devices without a
dispensing license as required by the Pharmacy Board.

52. During Respondent's supervision as Medical Director pursuant to the Agreement,
 Respondent was not always present when Bledsoe injected the aforementioned dangerous drugs.

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53. During Respondent's supervision as Medical Director pursuant to the Agreement,
 Respondent neither received personally nor accounted for personally the dangerous drugs and/or
 hypodermic devices utilized for injections administered by Bledsoe.

a. The dangerous drugs and the use of hypodermic devices were not dispensed in accordance with NAC 639.745. Respondent did not have a bona-fide therapeutic relationship with some of the VIP Faces patients at issue.

b. Respondent personally did not inject the drugs dispensed in VIP Faces' two rooms, Respondent failed to assure through supervision that they were dispensed only for medically necessary purposes and according to prevailing standards of care, nor did he assure that a certificate for each dispensing technician employed at the facility was displayed in the room or cabinet in which drugs were stored.

54. Respondent failed to adequately supervise Bledsoe to ensure that she possessed the knowledge, skill, and training to perform injections on clients and/or patients safely and properly.

<u>COUNT I</u>

NRS 630.306(1)(r): Failure to Adequately Supervise

55. All of the allegations in the above paragraphs are hereby incorporated as if fully set forth herein.

18 56. NRS 630.306(1)(r) provides that a failure to supervise adequately a medical
19 assistant pursuant to the regulations of the Board is an act that constitutes grounds for initiating
20 disciplinary action against a licensee.

57. By the conduct described herein, Respondent failed to supervise adequately, or
supervise properly Bledsoe, and any contractors of VIP Faces in their performance of medical
tasks as Medical Director pursuant to the Agreement.

58. By reason of the foregoing, Respondent is subject to discipline by the Nevada
State Board of Medical Examiners as provided in NRS 630.352.

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1	<u>COUNT II</u>		
2	NRS 630.306(1)(b)(3): Engaging in Conduct That Violated Pharmacy Board Regulations		
3	59. All of the allegations in the above paragraphs are hereby incorporated as if fully set		
4	forth herein.		
5	60. NRS 630.306(1)(b)(3) provides that engaging in conduct that violates a regulation		
6	adopted by the Pharmacy Board is grounds for initiating disciplinary action against a licensee.		
7	61. By the conduct described herein, Respondent engaged in conduct that violates		
8	regulations adopted by the Pharmacy Board, specifically including, but not limited to		
9	NAC 639.742(1)-(3), (4)(a)-(b), and NAC 639.945(1)-(3).		
10	62. By reason of the foregoing, Respondent is subject to discipline by the Nevada State		
11	Board of Medical Examiners as provided in NRS 630.352.		
12	WHEREFORE, the IC prays:		
13	1. That the Nevada State Board of Medical Examiners give Respondent notice of the		
14	charges herein against him and give him notice that he may file an answer to the Complaint herein		
15	as set forth in NRS 630.339(2) within twenty (20) days of service of the Complaint;		
16	2. That the Nevada State Board of Medical Examiners set a time and place for a		
17	formal hearing after holding an Early Case Conference pursuant to NRS 630.339(3);		
18	3. That the Nevada State Board of Medical Examiners determine the sanctions it will		
19	impose if it finds Respondent violated the Medical Practice Act;		
20	4. That the Nevada State Board of Medical Examiners make, issue and serve upon the		
21	Respondent, in writing, its findings of fact, conclusions of law and order, which shall include the		
22	sanctions imposed; and,		
23	5. That the Nevada State Board of Medical Examiners take such other and further		
24	action as may be just and proper in these premises.		
25	Dated this day of DDV, 2020.		
26	INVESTIGATIVE COMMITTEE OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS		
27	6/ 6.1		
28	By: Robert Kilroy, Esq., J.D., General Counsel Attorney for the Investigative Committee		
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	1	VERIFICATION	
	2	STATE OF NEVADA)	
	3	COUNTY OF WASHOE)	i
	4	Mr. M. Neil Duxbury, having been duly sworn, hereby deposes and states under penalty of	
	5	perjury that he is the Chairman of the Investigative Committee of the Nevada State Board of	
	6	Medical Examiners that authorized the Complaint against the Respondent herein; that he has read	
	7	the foregoing Complaint; and that based upon information discovered in the course of the	
	8	investigation into a complaint against Respondent, he believes that the allegations and charges in	
	9	the foregoing Complaint against Respondent are true, accurate and correct.	
	10	DATED this <u>6th</u> day of November, 2020.	1
ners	11	INVESTIGATIVE COMMITTEE OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS	:
Exami	12	M. NEIL TWBURN	
te Board of Medical 9600 Gateway Drive Reno, Nevada 89521 (775) 688-2559	13		
te Board of Medical 9600 Gateway Drive Reno, Nevada 89521 (775) 688-2559	14	M. Neil Duxbury, Chairman	
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Nevada State Board of Medical Examiners 9600 Gateway Drive Reno, Nevada 89521 (775) 688-2559	16		
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ISSUDOT TRANSP. Silver, M.D. 1	OF THE ada State Boa 9600 G Reno, (77	7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 20 21 22 23 24 25 26 27	704 S. 6th Street Las Vegas, NV 89101 Certified Mail Receipt No.: 9171 9490 09 35 0241 618184 DATED this <u>Can</u> day of November, 2020. Mercedes Fuentes, Legal Assistant	
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1	BEFORE THE BOARD OF MEDICAL EXAMINERS		
2	OF THE STATE OF NEVADA		
3	* * * *		
4			
5	In the Matter of Charges and Complaint	Case No. 20-4041-1	
6	Against	FILED	
7	FRANK P. SILVER, M.D.,	DEC - 4 2020	
8	Respondent.	NEVADA STATE BOARD OF MEDICAL EXAMINERS	
9		By:	
10	<u>SETTLEMENT</u>	AGREEMENT	
11	The Investigative Committee (IC) of the Nevada State Board of Medical Examiners		
12	(Board), by and through Robert G. Kilroy, Esq., General Counsel for the Board and attorney for		
13	the IC, and Frank P. Silver, M.D. (Respondent), a licensed physician in Nevada, assisted by his		
14	attorney, Valarie I. Fujii, Esq., of the Law Offices of Valarie I. Fujii & Associates, hereby enter		
15	into this Settlement Agreement (Agreement) based on the following: ¹		
16	A. BACKGROUND		
17	1. Respondent is a medical doctor currently licensed in active status by the Board		
18	pursuant to Chapter 630 of the Nevada Revised Statutes (NRS) and Chapter 630 of the Nevada		
19	Administrative Code (NAC) (collectively, the Medical Practice Act) to practice medicine in Nevada.		
20	His license was originally issued on August 8, 1972	2 (License No. 2641).	
21	2. On November 17, 2020, in Case N	o. 20-8462-1, the IC filed a formal First Amended	
22	Complaint (Complaint) charging Respondent with violating the Medical Practice Act. Specifically,		
23	the Complaint alleges one (1) violation of NRS 630.306(1)(r), Failure to Adequately Supervise		
24	Medical Assistant Medical Assistant (Count I), and one (1) violation of NRS 630.306(1)(b)(3),		
25	Engaging in Conduct That Violated Pharmacy Board Regulations (Count II).		
26			

All agreements and admissions made by Respondent are solely for final disposition of this matter and any subsequent related administrative proceedings or civil litigation involving the Board and Respondent. Therefore, Respondent's agreements and admissions are not intended or made for any other use, such as in the context of another state or federal government regulatory agency proceeding, state or federal civil or criminal proceeding, any state or federal court proceeding, or any credentialing or privileges matter.

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

4. Respondent was properly served with a copy of this Complaint, has reviewed and
understands this Complaint, and has had the opportunity to consult with competent counsel
concerning the nature and significance of this Complaint.

Respondent is hereby advised of his rights regarding this administrative matter, and of 6 5. his opportunity to defend against the allegations in the Complaint. Specifically, Respondent has 7 certain rights in this administrative matter as set out by the United States Constitution, the Nevada 8 9 Constitution, the Medical Practice Act, the Nevada Open Meeting Law (OML), which is contained in NRS Chapter 241, and the Nevada Administrative Procedure Act (APA), which is contained in 10 NRS Chapter 233B. These rights include the right to a formal hearing on the allegations in the 11 Complaint, the right to representation by counsel, at his own expense, in the preparation and 12 13 presentation of his defense, the right to confront and cross-examine the witnesses and evidence against him, the right to written findings of fact, conclusions of law and order reflecting the final decision of 14 15 the Board, and the right to judicial review of the Board's order, if the decision is adverse to him.

6. Respondent understands that, under the Board's charge to protect the public by regulating the practice of medicine, the Board may take disciplinary action against Respondent's license, including license probation, license suspension, license revocation and imposition of administrative fines, as well as any other reasonable requirement or limitation, if the Board concludes that Respondent violated one or more provisions of the Medical Practice Act.

7. Respondent understands and agrees that this Agreement, by and between 21 Respondent and the IC, is not with the Board, and that the IC will present this Agreement to the 22 Board for consideration in open session at a duly noticed and scheduled meeting, Respondent 23 understands that the IC shall advocate for the Board's approval of this Agreement, but that the 24 25 Board has the right to decide in its own discretion whether or not to approve this Agreement. If the Board does not agree and approve this Agreement, then Respondent may rescind this 26 Agreement in its entirely. Respondent understands and agrees that if the Board approves this 27 28 Agreement, then the terms and conditions enumerated below shall be binding and enforceable

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1 upon him and the Board.

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B. TERMS & CONDITIONS

NOW, THEREFORE, in order to resolve the matters addressed herein, i.e., the matters
with regard to the Complaint, Respondent and the IC hereby agree to the following terms and
conditions:

Jurisdiction. Respondent is, and at all times relevant to the Complaint has been, a
 physician licensed to practice medicine in Nevada subject to the jurisdiction of the Board as set
 forth in the Medical Practice Act.

9 2. <u>Representation by Counsel/Knowing, Willing and Intelligent Agreement</u>. 10 Respondent acknowledges he is represented by counsel, and wishes to resolve the matters 11 addressed herein with said counsel. Respondent agrees that if representation by counsel in this 12 matter materially changes prior to entering into this Agreement and for the duration of this 13 Agreement, that counsel for the IC will be timely notified of the material change. Respondent 14 agrees that he knowingly, willingly and intelligently enters into this Agreement after deciding to 15 have a full consultation with and upon the advice of legal counsel.

3. 16 Waiver of Rights. In connection with this Agreement, and the associated terms 17 and conditions, if the Board approves this Agreement, and all conditions, then Respondent knowingly, willingly and intelligently waives all rights in connection with this administrative 18 matter. Respondent hereby knowingly, willingly and intelligently waives all rights arising under 19 20 the United States Constitution, the Nevada Constitution, the Medical Practice Act, the OML, the 21 APA, and any other legal rights that may be available to him or that may apply to him in 22 connection with the administrative proceedings resulting from the Complaint filed in this matter, 23 including defense of the Complaint, adjudication of the allegations set forth in the Complaint, and imposition of any disciplinary actions or sanctions ordered by the Board. Respondent agrees to 24 25 settle and resolve the allegations of the Complaint as set out by this Agreement, without a hearing or any further proceedings and without the right to judicial review. 26

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4. Acknowledgement of Reasonable Basis to Proceed. As of the time of entering 1 2 into this Settlement Agreement, the allegations of the Complaint remain unproven. Respondent acknowledges that the IC believes it has a reasonable basis to allege that Respondent engaged in 3 conduct that is grounds for discipline pursuant to the Medical Practice Act. The IC acknowledges 4 Respondent is not admitting that the IC's claims/counts as alleged in the Complaint have merit 5 and Respondent is agreeing to resolve this matter to avoid the costs of hearing and potential 6 subsequent litigation. Respondent asserts if this matter were to proceed to hearing, he has 7 evidence, witnesses, expert witness(es) and defenses to the counts/claims alleged in the 8 Complaint, but for the purposes of resolving the matter and for no other purpose, Respondent 9 waives the presentation of evidence, witnesses, expert witnesses, and defenses in order to 10 effectuate this Agreement. 11

5. <u>Consent to Entry of Order</u>. In order to resolve this Complaint pending against
 Respondent, Respondent hereby agrees that the Board may issue an order finding that Respondent
 engaged in conduct that is grounds for discipline pursuant to the Medical Practice Act. Accordingly,
 the following terms and conditions are hereby agreed upon:

a. Respondent admits to Count I (NRS 630.306(1)(r), Failure to Adequately
Supervise Medical Assistant Medical Assistant), and Count II (NRS 630.306(1)(b)(3), Engaging in
Conduct That Violated Pharmacy Board Regulations).

b. Respondent will pay the costs and expenses incurred in the investigation and prosecution of the above-referenced matter within six (6) months of the Board's acceptance, adoption and approval of this Agreement, the current amount being three thousand one-hundred and forty-five dollars and forty-four cents (\$3145.44). not including any costs that may be necessary to finalize this Agreement. Respondent shall make six (6) monthly payments of \$524.24, with the first payment due on December 18, 2020, and last payment tendered no later than June 4, 2021.

c. Respondent shall pay a fine of five hundred dollars (\$500.00) within sixty
(60) days of the Board's acceptance, adoption and approval of this Agreement.

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This Agreement shall be reported to the appropriate entities and parties as d. required by law, including, but not limited to, the National Practitioner Data Bank.

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Respondent shall receive a Public Letter of Reprimand. e.

f. Any other claims arising from the following Board Investigation #15-4 15840, from which involved Respondent's association with Bledsoe/VIP Faces from 2015-2018, 5 shall be dismissed with prejudice. 6

Respondent shall take three (3) hours of continuing medical education 7 g. (CME) related to best practices for injectable fillers within the next three (3) months from the date 8 9 of the Board's acceptance, adoption and approval of this Agreement. The aforementioned hours of CME shall be in addition to any CME requirements that are regularly imposed upon 10 Respondent as a condition of licensure in the State of Nevada and shall be approved by the Board 11 12 prior to their completion.

Respondent shall remain in his specialty of gynecology and infertility and 13 h. with his pre-existing and established patients provide injectable fillers upon request; Respondent 14 shall not engage in any medical spa related activities with any unlicensed individuals or entities. 15

6. Release From Liability. In execution of this Agreement, Respondent understands 16 and agrees that the State of Nevada, the Board, and each of its members, staff, counsel, 17 18 investigators, experts, peer reviewers, committees, panels, hearing officers, consultants and agents 19 are immune from civil liability for any decision or action taken in good faith in response to information acquired by the Board. NRS 630.364(2)(a). Respondent agrees to release the State of 20 Nevada, the Board, and each of its members, staff, counsel, investigators, experts, peer reviewers, 21 committees, panels, hearing officers, consultants and agents from any and all manner of actions, 22 causes of action, suits, debts, judgments, executions, claims and demands whatsoever, known and 23 unknown, in law or equity, that Respondent ever had, now has, may have or claim to have, against 24 any or all of the persons, government agencies or entities named in this paragraph arising out of, 25 or by reason of, this investigation, this Agreement or the administration of the case referenced 26 herein. 27

7. <u>Procedure for Adoption of Agreement</u>. The IC and counsel for the IC shall recommend approval and adoption of the terms and conditions of this Agreement by the Board in resolution of this Complaint. In the course of seeking Board acceptance, approval and adoption of this Agreement, counsel for the IC may communicate directly with the Board staff and the adjudicating members of the Board.

Respondent acknowledges that such contacts and communications may be made or 6 conducted ex parte, without notice or opportunity to be heard on his part until the public Board 7 8 meeting where this Agreement is discussed, and that such contacts and communications may 9 include, but may not be limited to, matters concerning this Agreement, the Complaint and any and all information of every nature whatsoever related to this matter. The IC and its counsel agree that 10 Respondent and/or Counsel for the Respondent may appear at the Board meeting where this 11 Agreement is discussed and, if requested, respond to any questions that may be addressed to the 12 13 IC or the IC's counsel.

8. Effect of Acceptance of Agreement by Board. In the event the Board accepts, approves and adopts this Agreement, the Board shall issue a final order, making this Agreement an order of the Board, and, pending full compliance with the terms herein, the case shall be closed and all remaining claims arising out of the Complaint shall be dismissed with prejudice. If Board does not accept the settlement terms of this Agreement, then the Respondent may withdraw his admissions(s) within this Agreement and may rescind the Agreement in its entirety.

9. 20 Effect of Rejection of Agreement by Board. In the event the Board does not accept, approve and adopt this Agreement, this Agreement shall be null, void and of no force and 21 22 effect except as to the following agreement regarding adjudications: (1) Respondent agrees that, 23 notwithstanding rejection of this Agreement by the Board, nothing contained in this Agreement and nothing that occurs pursuant to efforts of the IC to seek the Board's acceptance of this 24 Agreement shall disqualify any member of the adjudicating panel of the Board from considering 25 this Agreement and from participating in disciplinary proceedings against Respondent, including 26 27 adjudication of this case; and (2) Respondent further agrees that he shall not seek to disqualify any 28 such member absent evidence of bad faith.

10. **Binding Effect.** If approved by the Board, Respondent understands that this Agreement is a binding and enforceable contract upon Respondent and the Board. 2

Forum Selection Clause. The parties agree that in the event either party is 3 11. required to seek enforcement of this Agreement in district court, the parties consent to such 4 jurisdiction and agree that exclusive jurisdiction shall be in the Eighth Judicial District Court, 5 State of Nevada, Clark County. 6

Attorneys' Fees and Costs. The parties agree that in the event an action is 7 12. commenced in district court to enforce any provision of this Agreement, the prevailing party shall 8 be entitled to recover reasonable attorneys' fees and costs. 9

Failure to Comply With Terms. Should Respondent fail to comply with any term 10 13. or condition of this Agreement once the Agreement has been accepted, approved and adopted by 11 12 the Board, the IC shall be authorized to immediately suspend Respondent's license to practice 13 medicine in Nevada pending an Order To Show Cause Hearing, which will be duly noticed. Failure to comply with the terms of this Agreement, including failure to pay any fines, costs, 14 expenses or fees owed to the Board, is a failure to comply with an order of the Board, which may 15 result in additional disciplinary action being taken against Respondent. NRS 630.3065(2)(a). 16

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Further, Respondent's failure to remit payment to the Board for monies agreed to be paid as a 1 condition of this Agreement may subject Respondent to civil collection efforts. 2 3 DATED this 21 day of N2020. 4 5 INVESTIGATIVE COMMITTEE OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS 6 7 By: Robert Kilroy, Esq., General Counsel 8 Attorney for the Investigative Committee 9 10 DATED this 24th day of November, 2020. 11 12 VALARIE I. FUJII & ASSOCIATES 13 Valarie Ase Ficjii By: 14 Valarie I. Fujii, Esq. 15 Attorneys for Respondent 16 DATED this 2 Cday of NovEMD, 2020. 17 18 19 Frank P. Silver, M.D., Respondent 20 21 22 23 24 25 26 27 28 8

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	1	ORDER	
	2	IT IS HEREBY ORDERED, that the foregoing Settlement Agreement (Case No. 20-4041-1)	
	3	was approved and accepted by the Nevada State Board of Medical Examiners on the 4th day of	
	4	December, 2020, with the final total amount of costs due of three thousand one hundred forty-five	
	5	dollars and forty-four cents (\$3,145.44)	
	6	DATED this <u>Utn</u> day of December, 2020.	
	7		
	8	Dhatty Achallson	
	9	Rachakonda D. Prabhu, M.D., President Nevada State Board of Medical Examiners	
SEL	10		
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