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North Carolina Medical Board

Venkata Jonnalagadda, MD: President | John W. Rusher, MD: President-Elect | Michaux R. Kilpatrick, MD: Secretary/Treasurer

May 25, 2021

Via Attorney of Record

Jodell Kay Allen, M.D. A Woman's Choice of Charlotte 421 North Wendover Road Charlotte, NC 28211

Dear Dr. Allen:

The North Carolina Medical Board ("Board") has concluded its investigation regarding your care of Patient A. It is the Board's decision not to commence formal proceedings against your license. However, the Board voted to issue you this public letter of concern. The Board does not consider a public letter of concern to be a disciplinary action or a limitation or restriction on your license.

The Board is concerned that you performed a second trimester abortion procedure on Patient A, a 31 year old female, at a free-standing clinic. Patient A had a history notable for heroin use, current methadone use for six years, and five prior pregnancies. During the dilation and evacuation procedure you diagnosed a uterine perforation, stopped the procedure, and called 911 for emergency transportation to the nearest hospital. Upon arrival at the hospital Patient A was hemodynamically unstable. Patient A underwent exploratory laparotomy in the operating room. Findings at the time of surgery included a uterine laceration. Patient A recovered and was discharged from the hospital 2 days later.

The Board had your treatment of Patient A reviewed by an independent medical expert. The reviewing expert was critical of your care of Patient A in two areas. The reviewing expert noted that the preoperative assessment and decision to perform Patient A's abortion in a free-standing clinic, the administration and documentation of physician administered analgesia and anesthesia, and the lack of an emergency preparedness plan for transfer to a hospital were below standard of care.

Regarding your diagnosis, preoperative assessment and treatment, the medical expert felt the gestational age of 19 weeks and the history of methadone use made it imperative that Patient A have excellent cervical dilation prior to the initiation of the abortion procedure. Standard of care for a woman at 19 weeks would be to place at least 3-4 Dilapan-S dilators and for those dilators to remain in place for at least 6 hours. Further, the reviewing expert noted that based on Patient A's heroin and methadone history, the standard of care in North Carolina would be to refer Patient A to a facility where she could have monitored anesthesia care.

The reviewing expert also opined that your documentation of the procedure was so inadequate that it is unclear whether you followed the standard steps of the procedure and met that standard of care in North Carolina. For example, the reviewing expert noted that Patient A had at least one prior cesarean delivery, but it was unclear from the medical record whether Patient A had other cesarean deliveries prior to the abortion procedure. Confusingly, in your response to the Board, you state that you had no knowledge of Patient A's prior cesarean and abruption history. Additionally, the reviewing expert noted that the standard of care in North Carolina would be to have an indwelling catheter in place for this procedure. In the present case, there is no documentation of how the sedation and analgesia were given to Patient A, and there was no documentation that an indwelling catheter was placed.

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The Board is concerned that your care of Patient A may have failed to conform to the standards of acceptable and prevailing medical practice in North Carolina. The Board urges you to take steps to ensure the conduct giving rise to the Board's concerns does not happen again. Otherwise, the Board may vote to commence formal disciplinary proceedings against your license. If that happens, this letter may be entered into evidence in determining the appropriate discipline.

This letter is a public record within the meaning of Chapter 132 of the North Carolina General Statutes and is subject to public inspection and dissemination as required by that law. It will be reported to the Federation of State Medical Boards.

Sincerely,

enkata Jonnalagadda, M.D.

VJ/BB/wl

Consent and Waiver

I, Jodell Kay Allen, M.D., would like to resolve this matter without the need for more formal

proceedings and consent to the Board's issuance of this public letter of concern in resolution of the above matter. I hereby waive any requirement under any law or rule that this public letter of concern be served on me. Consented to this the 12 day of maxJodell Kay Allen, M.D. State of \\(\subseteq \tag{\mathcal{L}} County of Mickelembur 1, Harries Wisa Marks, do hereby certify that Jodell Kay Allen, M.D. personally appeared before me this day and acknowledged the due execution of the foregoing instrument. Witness my hand and official seal this the 12 day of <u>lay</u>, 2021. NOTARY PUBLIC (Official Seal) Necklenburg County, NC My Comm. Exp. October 16, 2021

My Commission Expires: 10/16/2021