

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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STATE OF WISCONSIN
BEFORE THE MEDICAL EXAMINING BOARD

IN THE MATTER OF DISCIPLINARY :
PROCEEDINGS AGAINST :
: FINAL DECISION AND ORDER
JAMES TUREK, M.D., :
RESPONDENT. :

ORDER 0002357

Division of Legal Services and Compliance¹ Case No. 12 MED 167

The parties to this action for the purpose of Wis. Stat. § 227.53 are:

James Turek, M.D.
800 Kenyon Road, Suite 220
Fort Dodge, IA 50501

Wisconsin Medical Examining Board
P.O. Box 8935
Madison, WI 53708-8935

Division of Legal Services and Compliance
Department of Safety and Professional Services
P.O. Box 8935
Madison, WI 53708-8935

The parties in this matter agree to the terms and conditions of the attached Stipulation as the final disposition of this matter, subject to the approval of the Wisconsin Medical Examining Board (Board). The Board has reviewed this Stipulation and considers it acceptable.

Accordingly, the Board in this matter adopts the attached Stipulation and makes the following Findings of Fact, Conclusions of Law and Order.

FINDINGS OF FACT

1. Respondent James Turek, M.D., (dob November 2, 1960) is licensed in the State of Wisconsin to practice medicine and surgery, having license number 20-36531, first issued on April 28, 1995 and current through October 31, 2013. Respondent's most recent address on file with the Wisconsin Department of Safety and Professional Services (Department) is 800 Kenyon Road, Suite 220, Fort Dodge, Iowa 50501.

¹ The Division of Legal Services and Compliance was formerly known as the Division of Enforcement.

2. On January 15, 2008, Patient A presented to Respondent at the Monroe Clinic for a pelvic ultrasound and consult. She had been referred to Respondent by her nurse practitioner for evaluation of a pelvic mass and pain with intercourse. The ultrasound revealed a 6 cm fibroid. Respondent discussed treatment options with Patient A who elected to undergo a total abdominal hysterectomy and left salpingo oophorectomy. The procedures were scheduled for February 6, 2008, to be performed by Respondent.

3. On February 4, 2008, Patient A presented to Respondent for a pre-operative history and physical. She had a history of a known fibroid and resultant heavy periods with anemia. Respondent discussed with Patient A the options and she chose to proceed with the total abdominal hysterectomy and left salpingo oophorectomy. Patient A signed the informed consent form on that date, authorizing Respondent to perform the hysterectomy and left salpingo oophorectomy.

4. On February 6, 2008, Patient A presented to Respondent at the Monroe Clinic for the planned total abdominal hysterectomy and left salpingo oophorectomy procedures. Respondent's operative report reflects that during the hysterectomy portion of the surgery, a "small incidental cystotomy" occurred on the patient's right side. Respondent repaired the injury with "two layers of 2-0 Chromic in the standard fashion." The surgery ended at approximately 10:59 a.m. and Patient A was transferred to the PACU.

5. At 12:05 p.m., that same day, nursing notes reflect that Respondent was informed of decreased urine output. Respondent ordered that the I.V. fluid be changed to Lactated Ringer's solution.

6. At 4:50 p.m., nursing notes reflect that the patient had no urine output and a bladder scanned revealed 11 ml of fluid in patient's bladder. Patient A reported feeling abdominal pressure. Respondent was notified of the same and gave an order that 500 ml of IV fluid bolus be given.

7. At 5:35 p.m., nursing notes reflect that the 500 ml bolus was complete and that Patient A continued to report pressure but that it did feel better. At 6:00 p.m., the nurse notified Respondent of the patient's report of abdominal pressure feeling better.

8. At 8:10 p.m., nursing notes reflect that Patient A's pain was an "8" (out of 10) and that she had pressure over her bladder area like she has to urinate. No urine was noted in the foley tubing.

9. At 8:50 p.m., Respondent was advised that Patient A had no urine output despite fluid intake of 1440 ml.

10. At 9:10 p.m., Respondent ordered Lasix (a diuretic) for Patient A.

11. At 10:15 p.m., Respondent was advised that Patient A still had no urine output. Respondent's plan was to "watch longer."

12. At 10:40 p.m., Respondent was advised that Patient A had no urine output. He informed the nurse he would be in to evaluate Patient A.

13. At 10:55 p.m., Respondent performed an ultrasound on Patient A. The results are not noted in the patient's medical chart.

14. At 11:10 p.m., Respondent ordered a STAT CT of the abdomen and pelvis as well as CBC, BUN and creatinine tests.

15. At 11:50 p.m., Respondent was advised of the lab results which included an elevated creatinine level of 2.1 mg/DL.

16. On February 7, 2008, at 12:30 a.m., Patient A was seen by a urologist for evaluation of anuria. He noted that her creatinine level was 2.1 mg/DL and that the CT scan showed uptake of the contrast by the kidneys but no excretion of the contrast in to the collecting systems. He recommended an abdominal exploration with ureterolysis to remove attending obstruction, believed to be a stitch, and placement of ureteral stents. The procedure was scheduled to be performed emergently due to incipient renal failure.

17. At 1:35 a.m., that same day, the urologist began surgery to correct the bilateral ureteral obstruction. Intraoperatively, the urologist inspected the patient's bladder and noted that the trigone was "puckered up by the cystotomy stitch." He removed the "cystotomy stitches and prior repair sutures" and noted that the injury to the trigone was just distal to the right ureteral orifice and extended past the left ureteral orifice so that the cystotomy ended just proximal to the left ureteral orifice. After removing all the stitches, the urologist was able to identify the ureters and placed indwelling ureteral catheters in both ureters. He noted that the patient was then observed to be "making excellent amounts of urine, consistent with release of obstruction."

18. In performing the hysterectomy on February 6, 2008, Respondent failed to properly place the sutures in the trigone, failed to recognize that the stitches were obstructing both ureters and the extent of damage during surgery, and failed to call a urologist for assistance during the surgery to repair the problem.

19. In resolution of this matter, Respondent consents to the entry of the following Conclusions of Law and Order.

CONCLUSIONS OF LAW

1. The Wisconsin Medical Examining Board has jurisdiction to act in this matter pursuant to Wis. Stat. § 448.02(3), and is authorized to enter into the attached Stipulation pursuant to Wis. Stat. § 227.44(5).

2. By the conduct described in the Findings of Fact, James Turek, M.D., has engaged in unprofessional conduct pursuant to Wis. Admin. Code § MED 10.02(2)(h) for conduct which tends to constitute a danger to the health, welfare, or safety of patient or public.

3. As a result of the above conduct, James Turek, M.D., is subject to discipline pursuant to Wis. Stat. § 448.02(3).

ORDER

1. The attached Stipulation is accepted.
2. Respondent James Turek, M.D., is REPRIMANDED.
3. The license to practice medicine and surgery issued to James Turek, M.D., (license number 20-36531) is LIMITED as follows:
 - a. Within 120 days of the date of this Order, Respondent shall successfully complete the American Urogynecologic Society Review seminar on May 2-3, 2013 in Austin, Texas.
 - b. Respondent shall submit proof of successful completion of the education in the form of verification from the institution providing the education to the Department Monitor at the address stated below. None of the education completed pursuant to this requirement may be used to satisfy any continuing education requirements that have been or may be instituted by the Board or Department, and also may not be used in future attempts to upgrade a credential in Wisconsin.
 - c. This limitation shall be removed from Respondent's license and Respondent will be granted a full, unrestricted license after satisfying the Board or its designee that Respondent has successfully completed all of the ordered education.
4. Within 90 days from the date of this Order, James Turek, M.D., shall pay COSTS of this matter in the amount of \$1,327.00.
5. Request of approval of courses, proof of successful course completion and payment of costs (made payable to the Wisconsin Department of Safety and Professional Services) shall be sent by Respondent to the Department Monitor at the address below:

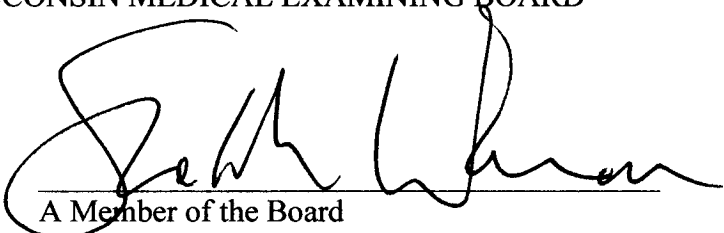
Department Monitor
Division of Legal Services and Compliance
Department of Safety and Professional Services
P.O. Box 8935, Madison, WI 53708-8935
Telephone (608) 267-3817; Fax (608) 266-2264
DSPSMonitoring@wisconsin.gov


6. Violation of any of the terms of this Order may be construed as conduct imperiling public health, safety and welfare and may result in a summary suspension of Respondent's license. The Board in its discretion may in the alternative impose additional conditions and limitations or other additional discipline for a violation of any of the terms of this Order. In the event Respondent fails to timely submit payment of the costs as ordered or fails to submit proof of successful completion of the ordered education as set forth above, Respondent's license (no. 20-36531) may, in the discretion of the Board or its designee, be SUSPENDED,

without further notice or hearing, until Respondent has complied with payment of the costs and completion of the education.

7. This Order is effective on the date of its signing.

WISCONSIN MEDICAL EXAMINING BOARD

by: 
A Member of the Board


Date