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### **State Of Wisconsin**

| Before | The | <b>Medical</b> | <b>Examining</b> | <b>Board</b> |
|--------|-----|----------------|------------------|--------------|
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In the Matter of disciplinary Proceedings :

Against : FINAL DECISION AND ORDER

: LS0109191MED

SANTIAGO L. YLLAS, MD., : LS0205011MED

Respondent.

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Division of Enforcement Case #99 MED 118, 00 MED 255

The parties to this action for the purposes of Wis. Stats. §. 227.53 are:

Santiago L. Yllas, M.D.

2110 Argitte Road

Flatwoods, KY 41139

Wisconsin Medical Examining Board

P. O. Box 8935

Madison, WI 53708-8935

Department of Regulation and Licensing

Division of Enforcement

P. O. Box 8935

Madison, WI 53708-8935

The Wisconsin Medical Examining Board received a Stipulation submitted by the parties to the above-captioned matter. The Stipulation, a copy of which is attached hereto, was executed by Santiago L. Yllas, M.D., personally and by his attorney, Paul Erickson, and by Claudia Berry Miran, attorney for the Department of Regulation and Licensing, Division of Enforcement. Based upon the Stipulation of the parties, the Wisconsin Medical Examining Board makes the following Findings of Fact, Conclusions of Law, and Order.

- 1. Santiago L. Yllas, M.D., was born July 23, 1937. Dr. Yllas' latest address on file with the Department of Regulation and Licensing is 2110 Argitte Road, Flatwoods, KY 41139.
- 2. Dr. Yllas is licensed to practice in the state of Wisconsin as a physician and surgeon pursuant to license #20655. This license was first granted on January 21, 1977. Dr. Yllas is in family practice. His registration is expired as of the date of this order.
- 3. Patient EH, a 64-year-old female, had sustained a right shoulder injury. In addition, she had been experiencing diarrhea off and on for approximately eight months. Respondent saw EH as a new patient for these symptoms on May 11, 1995.

- 4. Patient EH had history of a breast biopsy when approximately 40 years old and family history of breast cancer. Patient EH had no clinical abnormalities during the breast exam. Since her last mammogram was in 1993, Respondent ordered a screening mammogram be done.
- 5. On May 11, 1995, Respondent ordered a right shoulder x-ray and mammogram.
- 6. Patient EH had the right shoulder x-ray and mammogram done at St. Luke's Memorial Hospital in Racine, Wisconsin on May 19, 1995.
- 7. Patient EH received a certified letter from St. Luke's Hospital indicating she should discuss her mammogram results with her physician.
- 8. On June 1, 1995, Patient EH under Respondent's care was scheduled to have a flexible sigmoidoscopy at St. Luke's Hospital as an outpatient.
- 9. On June 1, 1995, while Patient EH was at St. Luke's Hospital, Respondent talked to the x-ray department regarding the results of the mammogram. He was told that it was "essentially within normal limits pending final report". The Respondent and Patient EH discussed the reported results.
- 10. In the June 1, 1995, History and Physical, Respondent noted in the Past History Section: "...Last mammogram in May 1995 and was essentially within normal limits. The patient has some osteoporosis..."
- 11. Patient EH was next seen by Respondent on June 2, 1995, at which time, he discussed the sigmoidoscopy results with her. The next time Patient EH was seen by the Respondent was June 16, 1995. On June 20, 1995, Patient EH did not appear for her scheduled appointment.
- 12. On or before July 20, 1995, Respondent received the first page of the Radiology Report. The Radiology Report read for the Bilateral Screening Mammogram:

"This is a routine screening mammogram. The patient has no current breast complaints according to the given history. Exam shows slight asymmetry of the glandular tissue. The tissue in the retro-areolar region of the right breast is denser than that on the left. In the upper outer quadrant of the right breast is a new cluster of microcalcifications. These microcalcifications are irregularly shaped and sized. These calcifications are new since the previous mammogram from St. Mary's Medical Center dated 6/10/93 and before that 1/31/90. The rest of both breasts show no malignant appearing dominant mass or suspicious microcalcifications."

and for the Right Shoulder:

"Mild diffuse osteopenia is present. There is no evidence of fracture or dislocation. Minimal degenerative change of the glenohumeral joint is present with some minimal spurring along the inferior aspect of the articulating surface of the humeral head. The acromioclavicular joint is normal. There is no evidence of destructive change."

- 13. There was no Impression for either test on the first page of the Radiology Report, and the Radiology Report clearly stated on the bottom of the page, "Continued".
- 14. Respondent failed to follow-up with the Radiologist or St. Luke's Hospital to inquire about the missing page, the contents of that page or the Radiologist's Impressions. Respondent did not obtain a copy of the second page of the Radiology Report until July 18, 1996.
- 15. Respondent failed to act upon any information contained on the first page of the Radiology Report.
- 16. The second page of the Radiology Report obtained from the hospital by the patient bore a print date of July 18, 1996, and contained the following information:

"Impression Mammogram: 1. New cluster of suspicious microcalcifications in the upper outer quadrant of the right breast. These are highly suspicious for malignancy. Needle localization and excision is recommended. Dr. Yllas was called with a quick read report.

Impression Right Shoulder: 1. Mild degenerative changes of the glenohumeral joint."

- 17. Respondent failed to provide follow-up treatment to Patient EH based on the diagnostic tests ordered by him.
- 18. Respondent has also been under investigation for failure to diagnose dehydration in a pediatric patient, CG. Respondent denies any negligence in treating patient CG.
- 19. Since January 30, 2003, the Respondent has taken the following continuing education:
  - a) Common Breast Problems, AAFP Home Study, 5 hours;
  - b) Cancer Survivors, AAFP Home Study, 5 hours;
  - c) Diagnosis and Management of Breast Cancer, Norton Cancer Center, January 31, 2003, 7.5 hours; and
  - d) 8<sup>th</sup> Annual National Comprehensive Cancer Network Conference, March 12-16, 2003, 17.5 hours.

### **CONCLUSIONS OF LAW**

- 1. The Medical Examining Board has jurisdiction in this matter pursuant to § 448.02 (3) (c), Stats.
- 2. The Medical Examining Board has authority to enter into this stipulated resolution without an evidentiary hearing pursuant to § 227.44 (5), Stats.

| 3.       | Failing to  | provide | follow-up   | treatment to | patient EH | after r  | eceiving   | a report | of a |
|----------|-------------|---------|-------------|--------------|------------|----------|------------|----------|------|
| mammo    | ogram that  | showed  | irregularl  | y shaped and | sized micr | ocalcifi | cations in | the righ | t    |
| breast ( | constitutes | neglige | nce in trea | atment under | Wis. Stats | . 448.0  | 2 (3) (c). |          |      |

### **ORDER**

NOW, THEREFORE, IT IS ORDERED that the stipulation of the parties is approved.

IT IS FURTHER ORDERED that:

- 1) Dr. Santiago L. Yllas is hereby REPRIMANDED.
- 2) Dr. Yllas shall pay \$200 toward the costs of investigating and prosecuting this matter.
- 3) Dr. Yllas is required to take 32 hours of Category I continuing education in diagnosis and management of cancer. The courses specified in paragraph 19 above satisfy the education requirement.
- 4) Case #LS 0205011MED (DOE case # 99 MED 118) is hereby closed with no further action.

The rights of a party aggrieved by this Final Decision and Order to petition the Wisconsin Medical Examining Board for rehearing and to petition for judicial review are set forth in the attached "Notice of Appeal Information."

This Order shall become effective on the date of its signing.

By: Alfred Franger 4-25-03

**Secretary** Date