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STATE OF WISCONSIN
BEFORE THE MEDICAL EXAMINING BOARD

IN THE MATTER OF THE DISCIPLINARY	:	
PROCEEDINGS AGAINST	:	
	:	FINAL DECISION AND
	:	ORDER AS TO RESPONDENT
DANIEL W. LOPEZ-TAN M.D., AND	:	
ANILKUMAR DONIPARTHI, M.D.,	:	DANIEL W. LOPEZ-TAN, M.D.
	:	LS0512143MED
RESPONDENTS.	:	

[Division of Enforcement Case 04 MED 485]

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

Daniel W. Lopez-Tan, M.D
Pewaukee Medical Group
1155 Quail Ct.
Pewaukee, WI 53072

Division of Enforcement
Department of Regulation and Licensing
1400 East Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935

State of Wisconsin
Medical Examining Board
Department of Regulation & Licensing
1400 East Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935

PROCEDURAL HISTORY

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

Accordingly, the Board in this matter adopts the attached Stipulation and makes the following:

FINDINGS OF FACT

1. Daniel W. Lopez-Tan, M.D., (DOB 08/05/65) is duly licensed and currently registered to practice medicine

and surgery in the state of Wisconsin pursuant to license # 35095 which was granted on January 20, 1994.

2. Respondent's most recent address on file with the Department of Regulation and Licensing is Pewaukee Medical Group, 1155 Quail Ct., Pewaukee, WI 53072.
3. At all times relevant to this action, Respondent was working as a physician in Wisconsin.
4. Respondent specializes in internal medicine.
5. At all times relevant hereto, Respondent was providing medical coverage for Patient JP, a nursing home resident and patient of Anilkumar Doniparthi M.D.
6. On April 17, 2002, Patient JP, a 67 year old female nursing home resident was hospitalized at Columbia Hospital, Milwaukee, WI, for psychiatric evaluation and treatment. During the course of that hospitalization the patient was diagnosed with superficial ulcerations on her legs by Gregory Mathews, M.D.
7. On April 23, 2002, Patient JP was discharged to the Wisconsin Lutheran Care Center, a nursing home facility.
8. At the time of discharge Dr. Mathews noted that although the ulcerations were likely to heal without incident and antibiotic treatment was not indicated at that time, he recommended that they be monitored for possible infection due to the patient's compromised immune system from her existing conditions of lung cancer, ITP and diabetes. Patient was discharged with triple antibiotic ointment to be applied topically each day.
9. On April 25, 2002, the patient's legs were noted to have severe edema with pitting of 1-2+. A lump, which was swollen, red and painful, was noted on the patient's left outer ankle. The nursing home staff notified Anilkumar Doniparthi, M.D., the patient's primary care physician. Dr. Doniparthi ordered an x-ray, CBC and uric acid level.
10. The laboratory analysis was performed on April 26, 2002, and indicated a WBC of 25.5, red blood distribution width of 14.7, platelet count of 142,000, and mean platelet volume of 12.4. The segmented neutrophils were at 77 and the lymphocytes at 9. Uric acid was normal at 4.0.
11. On April 26, 2002, Respondent was providing medical coverage for Dr. Doniparthi and was contacted by telephone by staff from the nursing home with the laboratory results.
12. Based on these results, Respondent ordered Darvocet for pain, a repeat CBC and uric acid to be done in three days, and closer monitoring to consider treating a possible cellulitis. No other treatment was prescribed by Respondent on April 26, 2002.
13. Respondent did not make further inquiry of the nursing home staff of the patient's condition on April 26.
14. Respondent did not examine the patient on April 26 to evaluate her condition.
15. On April 29, 2002, the patient complained of significant leg pain, especially on the left. Both the right and left lower legs were red and swollen. The left leg had open weeping wounds.
16. The repeat CBC performed on April 29, noted the WBC was 23.4, RBC width was 14.8, segmented neutrophils were 76, and lymphocytes were 13.
17. The laboratory results and patient condition were provided to Dr. Doniparthi by telephone. He ordered oral antibiotics for probable cellulitis. Lasix, K Due and Percocet were also ordered. Repeat blood work and Doppler studies were ordered for the next day.

18. The condition of Patient JP's left lower leg continued to deteriorate on April 29 and 30th.

19. The patient was transferred to St. Joseph's Hospital Emergency Department on April 30 on order of Dr. Doniparthi for treatment of a hypoglycemic episode.

20. During evaluation by emergency room staff on April 30, the patient was diagnosed with hypoglycemia, leukocytosis, hyperkalemia, and possible sepsis. The patient was noted to have lower extremity cellulitis. The patient's left leg was noted with significant edema, a significant cyanotic dark area on the ankle and the peripheral pulses were decreased.

21. The patient was admitted to the hospital and treated with vancomycin and cefepime.

22. An infectious disease consultation obtained on April 30 diagnosed left leg cellulitis with possible deeper soft-tissue infection and leukocytosis.

23. On May 5, 2002, , a consulting vascular specialist diagnosed the patient with skin gangrene of the left ankle secondary to diabetes and severe vascular ischemia with sepsis secondary to skin gangrene and severe lower extremity peripheral vascular disease. Amputation of the lower left leg was recommended because the patient was not a candidate for aggressive vascular treatment with no potential for healing of the wounds or saving of the left lower leg.

24. After consultation with the family, the patient was transferred to hospice care and died of sepsis on May 4, 2002.

25. Respondent's conduct, as herein described, fell below the minimum standards of competence established in the profession in that he failed to properly evaluate the patient and failed to order oral antibiotics for treatment of the patient's cellulitis.

26. Respondent's conduct as set forth in paragraph 25 above created the unacceptable risk to Patient JP that his cellulitis would not be promptly and appropriately treated and the infectious process could worsen and develop into a life-threatening condition.

CONCLUSIONS OF LAW

1. The Wisconsin Medical Examining Board has jurisdiction to act in this matter, pursuant to Wis. Stat. § 448.03 (2), and is authorized to enter into the attached Stipulation and Order, pursuant to Wis. Stat. § 227.44(5).

2. Respondent's conduct in failing to properly evaluate the patient and failing to order oral antibiotics for treatment of the patient's cellulitis, constitutes a violation of Wis. Stat. § 448.03 (2) and Wisconsin Administrative Code § MED 10.02 (2) (h).

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED that the stipulation of the parties as attached hereto, is accepted;

IT IS FURTHER ORDERED that the license of Daniel W. Lopez-Tan, M.D., Respondent, to practice medicine and surgery in the State of Wisconsin is hereby LIMITED as follows:

1. Within one (1) year of the effective date of this Order, Dr. Lopez-Tan shall obtain twenty (20) hours of continuing education in the area of infectious disease specifically in the area of the diagnosis and treatment of infectious skin conditions. The courses attended in satisfaction of this requirement shall be courses that require the physical presence of the attendees at the location where the course is being conducted. Courses conducted via the internet or by other electronic means of communication or courses conducted by correspondence or through a home study program shall not satisfy this

requirement. The courses may not be used in satisfaction of the statutory CME requirement.

2. Dr. Lopez-Tan shall be responsible for locating the course/s required under this Order, for providing adequate course descriptions to the Department Monitor and for obtaining pre-approval of the course/s from the Wisconsin Medical Examining Board prior to commencement of the programs. The Board may reject in whole or in part any educational opportunity which is nominated by Dr. Lopez-Tan when, in the Board's judgment, the syllabus or description of the course or other educational opportunity is insufficient to fulfill the purpose for which Dr. Lopez-Tan nominates it by reason of the educational opportunity's scope, content, method of instruction, or degree of participation required of students. The Board shall not unreasonably deny an educational opportunity suggested by Dr. Lopez-Tan.

3. Within 30 days after the course/s identified in paragraph one above are concluded, Dr. Lopez-Tan shall file with the Wisconsin Medical Examining Board certifications from the sponsoring organization of his attendance at the required course/s.

4. All costs of the educational programs shall be the responsibility of the Dr. Lopez-Tan.

IT IS FURTHER ORDERED that:

5. Respondent shall pay costs in this matter in the amount of nineteen hundred (\$1900.00) payable to the Department of Regulation and Licensing within sixty days of the effective date of this Order.

6. Submission of all required documentation and payment of costs shall be mailed to:

Department Monitor
Division of Enforcement
Department of Regulation and Licensing
P.O. Box 8935
Madison, WI 53708-8935
Telephone (608) 267-3817
Fax (608) 266-2264

7. 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 pay costs as ordered or fails to comply with the ordered continuing education the Respondent's license (#35095) SHALL BE SUSPENDED, without further notice or hearing, until Respondent has complied with the terms of this Order.

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

State of Wisconsin
Medical Examining Board

By: Alfred L. Franger, MD
A Member of the Board

December 14, 2005
Date