

WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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STATE OF WISCONSIN
BEFORE THE MEDICAL EXAMINING BOARD

IN THE MATTER OF THE DISCIPLINARY :
PROCEEDINGS AGAINST :
 :
 : FINAL DECISION AND ORDER
JAMES A. SHAPIRO, M.D., :
 : LS0907153MED
RESPONDENT. :

[Division of Enforcement Case No. 06 MED 236]

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

James A. Shapiro, M.D.
6308 Eighth Ave., Suite 505
Kenosha, WI 53143

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

Wisconsin Medical Examining Board
Department of Regulation and 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. James A. Shapiro, M.D., Respondent herein, whose date of birth is April 26, 1958, is duly licensed to practice medicine and surgery in the State of Wisconsin under license number 30618, which was granted on July 26, 1989.
2. Respondent's last known address filed with the Department of Regulation and Licensing is 6308 Eighth Ave., Suite 505, Kenosha, WI 53143.
3. Respondent's practice specialty is in orthopedics.
4. At all times relevant to this matter, Respondent provided medical care and treatment to a 70 year old female patient, HH.
5. On October 3, 2000, Respondent performed a total hip arthroplasty on patient HH.
6. A post operative radiograph taken on October 3 revealed the distal portion of the hip prosthesis to be centrally positioned within the proximal femur with no evidence of cortical disruption. The acetabular component was not well seen on radiograph.
7. Following the arthroplasty, Patient HH was discharged on October 10, 2000. to a nursing home for rehabilitation.
8. Respondent's progress notes between October 5th and October 8th reflected the patient complaining of a feeling of "rolling around" in her right hip and that her right leg felt shorter than her left.

9. Respondent's discharge summary of October 9, 2000, noted that it was difficult for him to obtain exact leg lengths due to the patient's obesity and, in particular, the looseness of the areolar tissue. The discharge summary also reflects that the patient complained of some slipping of the hip postoperatively, but there was no evidence of dislocation.

10. On December 7, 2000, Respondent examined the patient who again complained of pain in her hip along with a feeling of slipping in the hip. Respondent ordered physical therapy to obtain leg measurements and order shoe lifts as appropriate.

11. Leg measurements of patient HH taken by the physical therapist on December 19, 2000, were noted at 75 cm. of the right leg and 79 cm of the left leg.

12. On February 5, 2001, Respondent again examined the patient who continued to complain of pain in her right hip, particularly when she rolled onto it. She also stated that she did not feel comfortable placing weight on the hip. Up until and through February 5, 2001, the patient did not report excessive levels of pain. Respondent assessed slow but steady progress, including progress in physical therapy, and the plan was to continued aggressive therapy. Respondent also ordered a dietician for weight loss consultation. Respondent did not order a radiograph of the hip at this time.

13. On March 7, 2001, Respondent received a letter from Chiappetta Shoes and Pedorthic Services which stated that the patient had received shoes with a 1.5 inch lift in the right shoe pursuant to the direction of the physical therapist.

14. Patient HH was discharged from the nursing home facility on April 20, 2001.

15. Respondent next evaluated the patient on August 9, 2001, at which time patient HH reported a fall in May, 2001. Respondent noted the patient had a gait where she sunk into her right leg with each step and needed a walker for stability. Respondent ordered a radiograph of the right hip which revealed a hip dislocation of some duration which Respondent believed would have occurred at some time after hospital discharge on October 10, 2000.

16. Respondent referred the patient to another physician to evaluate the patient for corrective surgery which the patient successfully underwent.

17. Subsequent to this event, Respondent successfully completed the following continuing education: 15 hours of continuing education from the American Association of Hip and Knee Surgeons including the diagnosis and treatment of dislocations; 3 hours of continuing education entitled "Achieving Stability and Leg Length Equality in Total Hip Arthroplasty. Respondent also successfully completed an examination given by the American Academy of Orthopedic Surgeons entitled "Adult Reconstructive Surgery of the Hip and Knee" which is given 10 continuing education credits. Respondent has also attended several continuing education courses in complex case controversies and revisions in hip and knee arthroplasty in the past two years.

18. Respondent failed to order a radiograph of Patient HH's right hip at the February 5, 2001 examination when the patient's condition required radiographic evaluation.

19. Respondent's failure to order a radiograph of Patient HH's right hip at the February 5, 2001 examination created the unacceptable risk that the cause of the patient's ongoing pain and uneven gait would not be diagnosed and treated in a timely manner.

20. Respondent believes that patient HH's post operative response to treatment, physical condition, including her obesity and severe arthritis in both knees which resulted in her delayed response to physical therapy and her need for a walker and on occasion a wheelchair, contributed to his failure to recognize the cause of the patient's pain and uneven gait.

CONCLUSIONS OF LAW

1. The Wisconsin Medical Examining Board has jurisdiction over this matter pursuant to Wis. Stat. § 448.02(3), and has authority to enter into this stipulated resolution of this matter pursuant to Wis. Stat. § 227.44(5).

2. Respondent's conduct as set forth in paragraphs 18 and 19 above constitutes a violation of Wis. Stats. sec. 448.02 (3) and Wis. Admin. Code sec. MED 10.02 (2) (h).

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED:

1. Respondent is reprimanded by the Wisconsin Medical Examining Board.

2. The Wisconsin Medical Examining Board recognizes the educational courses Respondent has completed set out in paragraph 17 above and does not believe additional reeducation is required.

3. Respondent shall, within 90 days of the date of this Order, pay to the Department of Regulation and Licensing the costs of this proceeding in the amount of \$1555.00 pursuant to Wis. Stat. § 440.22(2).

4. Payment of costs shall be sent to:

Department Monitor
Department of Regulation and Licensing
Division of Enforcement
1400 East Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935
Fax (608) 266-2264
Telephone (608) 267-3817

5. In the event that Respondent fails to pay costs as ordered, Respondent's license SHALL BE SUSPENDED, without further notice or hearing, until Respondent has complied with the terms of this Order.

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

Wisconsin Medical Examining Board

By: Gene Musser MD
A Member of the Board

7/15/09
Date