

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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STATE OF WISCONSIN
MEDICAL EXAMINING BOARD
BEFORE THE PODIATRISTS AFFILIATED CREDENTIALING BOARD

IN THE MATTER OF	:	
DISCIPLINARY PROCEEDINGS AGAINST	:	FINAL DECISION AND ORDER
	:	FOR REMEDIAL EDUCATION
STEPHEN D. WEISSMAN, D.P.M.,	:	
RESPONDENT.	:	ORDER 0001958

Division of Enforcement Case #11 POD 3

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

Stephen D. Weissman, DPM
2300 N Mayfair Rd, Suite 295
Milwaukee WI 53226

Wisconsin Medical Examining Board/Podiatrists Affiliated Credentialing Board
P.O. Box 8935
Madison, WI 53708-8935

Department of Safety and Professional Services
Division of Enforcement
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 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

1. Respondent Stephen D. Weissman, D.P.M. (dob 11/10/46), is and was at all times relevant to the facts set forth herein a podiatric physician and surgeon licensed in the State of Wisconsin pursuant to license #744, first granted on 12/20/96. Respondent is also licensed in Florida, and has been licensed in Pennsylvania, Ohio, Texas, New Jersey, and New York.

2. On January 5, 2011, respondent examined the feet of patient M, a woman born in 1956. Respondent recommended a bunionectomy with two osteotomies on the right foot, and scheduled this for January 11, 2011.

3. On January 11, 2011, the patient appeared and was prepared for the procedure.

4. Following the procedure, respondent created two chart notes. One was prepared from a template, and recites the following:

After the usual aseptic technique, and anesthesia infiltration of (10cc 2% Xylocaine, 5 cc Marcaine and 0cc Kenalog), was performed around the 1st metatarsal head, right foot. A longitudinal incision was made over the base of the 1st proximal phalanx tibial surface.

Ostectomy

A rotary bone saw was carefully inserted into the incision at the base of the proximal phalanx. At a slow speed, a portion of the hypertrophied head of the first metatarsal bone, tibial side was removed. A bone rasp was inserted into the operative area to help remove the bone paste and tissue fragments. Bone work was performed with the use of a fluoroscope intraoperatively.

Bone paste and tissue fragments were removed from the operative area by pressure extrusion. Wound edges were approximated.

Patient then had three petit mal seizures.

A sterile compression dressing was applied right foot.

5. A second chart note was dictated, and states the following:

Surgery was begun on the patient. During the surgery she was given approximately 12 cc of Xylocaine 2% and 4 to 5 cc of Marcaine 0.5%. An incision was made, soft tissues were dissected and the medial portion of the first metatarsal head was removed. The patient proceeded to have three petit mal seizures. The surgery was discontinued. A suture was placed. A dressing was placed. The patient was stabilized and when we set her up, she felt dizzy and nauseous, so she was kept in a semi-Trendelenburg position. We called her family doctor, he suggested that we sent her to the emergency room and that is what proceeded to happen.

6. At a subsequent interview with Board staff, Respondent stated that he gave standard injections of lidocaine and bupivacaine, and tested the patient's foot to assure anesthesia. Notwithstanding this, shortly after the procedure began, the patient reported pain. Additional anesthetic was administered, and time allowed for this to take effect. Respondent then resumed the procedure. When the rotary bone saw was inserted and bone removal begun, the patient's foot jerked away, and she curled into a fetal position. The nurse reported that the patient was having a seizure; subsequently two additional seizure-like behaviors were reported in rapid succession. No significant amount of bony material was removed. Respondent then irrigated the incision, and closed the wound with a suture and/or sterile compression dressing. Following a telephone conference with the patient's primary care physician, an ambulance was called and the patient was transported to a hospital emergency room.

7. Respondent did not chart the kind of suture used, the kind of dressing used, or the kind of irrigation. Respondent did not state the length of time spent during the procedure. In fact, no fluoroscope was used, and no significant portion of the metatarsal head was removed. The Board finds that this documentation is incomplete, confusing, is incorrect in part, and would not adequately inform the next provider about what was done for this patient.

CONCLUSIONS OF LAW

A. The Wisconsin Podiatrists Affiliated Credentialing Board has jurisdiction to act in this matter pursuant to Wis. Stat. § 448.675(1), and is authorized to enter into the attached Stipulation pursuant to Wis. Stat. § 227.44(5).

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED that:

1. Stephen D. Weissman, D.P.M. will, within 6 months of the date of this Final Decision and Order for Remedial Education, demonstrate satisfactory completion of 4 hours of continuing education in medical record keeping. The course attended in satisfaction of this Order must be preapproved by the Wisconsin Podiatrists Affiliated Credentialing Board or its designee. Stephen D. Weissman, D.P.M. will be responsible for locating a course satisfactory to the Wisconsin Podiatrists Affiliated Credentialing Board and for obtaining the required approval of the course from the Wisconsin Podiatrists Affiliated Credentialing Board or its designee. Evidence of satisfactory completion will be filed with:

Department Monitor
Department of Safety & Professional Services
Division of Enforcement
1400 East Washington Avenue
P.O. Box 8935
Madison, Wisconsin 53708-8935

All certifications or other documents required to be filed with the Wisconsin Podiatrists Affiliated Credentialing Board will be deemed filed upon receipt by the Department Monitor.

2. Stephen D. Weissman, D.P.M., will be responsible for paying the full cost of attendance at these courses. Stephen D. Weissman, D.P.M., will not apply any of the continuing education credits earned in satisfaction of this Order toward satisfaction of his Wis. Stat. § 448.665, biennial training requirements.

3. 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 comply with the ordered continuing education and/or payment of Costs, the Respondent's license may, in the discretion of the Board or its designee, be **SUSPENDED**, without further notice or hearing, until Respondent has complied with completion of the continuing education or payment of costs, including any accrued interest.

4. Respondent shall pay the Costs of the investigation of this matter in the amount of \$1,500, within 60 days of this Order.

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

WISCONSIN PODIATRISTS AFFILIATED CREDENTIALING BOARD

by:  8/7/2012
a member of the Board

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