

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

DILIP KUMAR TANNAN, M.D.,
RESPONDENT.

:
:
:
:
:

FINAL DECISION AND ORDER

00039 1-1

Division of Legal Services and Compliance Case No. 13 MED 091

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

Dilip Kumar Tannan, M.D.
555 South Washburn
Oshkosh, WI 54904

Wisconsin Medical Examining Board
P.O. Box 8366
Madison, WI 53708-8366

Division of Legal Services and Compliance
Department of Safety and Professional Services
P.O. Box 7190
Madison, WI 53707-7190

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 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 Dilip Kumar Tannan (dob August 14, 1956), is licensed in the state of Wisconsin to practice medicine and surgery, having license number 26504-20, first issued on October 26, 1984, with registration current through October 31, 2015. Respondent's most recent address on file with the Wisconsin Department of Safety and Professional Services (Department) is 555 South Washburn, Oshkosh, Wisconsin 54904. Respondent has no prior disciplinary history with the Board.

2. On February 17, 2009, Respondent began providing care to Patient A, a man born in 1971. At this initial visit, the patient's chief complaint was pain in his shoulder and neck from a fall from a ladder the previous summer. Respondent recorded the patient's temperature and

blood pressure, but no pulse, height, or weight was recorded. The patient also reported difficulty falling asleep because of pain, and to being scheduled for shoulder surgery in April. The patient reported his current medications as Effexor XR[®] 150 mg, oxycodone 7.5 mg, and Ambien[®] 10 mg. Upon exam, Respondent noted a markedly restricted range of motion in the left shoulder, and a decreased range of motion in the cervical spine, and diagnosed the patient with cervical spondylosis and "left shoulder." No plan was indicated, nor is there any record of prescriptions issued.

3. The patient returned to care on March 9, 2009. Respondent charted: "neck pain unchanged. Range of motion markedly restricted. Also has low back pain since January. oxycodone IR 5 mg #12. oxycodone CR 1 at HS, #60. Impression: cervical spondylosis, back pain. MRI, C-spine." During a March 31, 2009 visit, Respondent charted: "Moderate neck pain and left shoulder pain. Passive range of motion ok. Left shoulder: history of FX? Abduction greater than 90° painful. Neck: decreased range of motion. oxycodone IR 5, QID, #120. oxycodone CR 10, BID, #60. Impression is cervical spondylosis, back pain. Schedule MRI, cervical and left shoulder."

4. The patient returned to care on April 23, 2009. Respondent recorded the patient's temperature and blood pressure. No other vital signs were charted. At visits on May 26th and July 9th, Respondent similarly failed to document evidence that a complete history was taken. During the July 9th visit, Patient A reported that Respondent's order for a MRI of his C-spine had been approved by his insurance company and was scheduled. On the same date, Respondent printed a 2008 MRI report of the patient's cervical spine, without contrast. The radiologist's impression was: "1. Mild multilevel cervical spine degenerative changes are noted without disc herniation, cord impingement or compression or significant foraminal narrowing. 2. Slight reversal of cervical lordosis. This may be positional, or related to muscular spasm. 3. Mucosal thickening within the maxillary sinuses, right greater than left. This is incompletely characterized in this study."

5. Continuing through October 2013 (when Respondent terminated Patient A from his care for violating a Medication Agreement/Contract), Patient A returned to Respondent's care on an almost monthly basis, during which time Respondent continued to address Patient A's various complaints and conditions.

6. Throughout the course of treating Patient A, Respondent employed several actions required by the standard of minimal competence such as having a prescribing agreement¹; conducting random urine drug screens; making referrals to pain or other specialists; recommending non-narcotic treatment modalities (such as use of a TENS unit, physical therapy, chiropractic care) and other alternatives to opioid therapy. However, Respondent did not record his plan of care or the reason for delaying some of these actions and the medical chart does not consistently document the steps taken to ensure patient compliance.

7. During the above-referenced time frame, Patient A's chart reflects multiple instances where Respondent:

¹ The Medication Agreement/Contract signed by the patient refers to discussion of drug side effects, risk of substance abuse and the goals of narcotic drug therapy.

- did not document evidence that the patient's vital signs were obtained or recorded; that a physical exam was conducted, or that an adequate record of assessment or plan of treatment was completed.
 - did not adequately record discussions with Patient A or confirm that Patient A was complying with his treatment recommendations and/or referrals to other specialists;
 - did not record notes of discussions with the patient about diagnostic or other report findings, and similarly failed to include a copy of MRI report(s) in the patient chart.
 - did not record explanations in the patient charts for numerous increases/decreases or other modifications to the patient's controlled substance prescriptions (primarily oxycodone IR & ER, Xanax[®], Opana[®], and Lidoderm[®] patches).
 - did not perform a substance abuse history or risk evaluation or document that functional goals were established.
 - did not routinely engage in random urine screens, assess the efficacy of continued opioid therapy, or engage in other such measures to ensure the appropriate and continued use of opioid therapy in the treatment of pain.
 - engaged in "cut and paste" charting, together with very brief entries which do not provide adequate explanation of the treatment plan.
8. Charts of nine other of Respondent's patients were examined, all of which exhibited deficiencies or issues similar to those identified in Patient A's chart.
9. Respondent neither admits nor denies having failed to meet a professional standard with respect to any patient, at any time, but in resolution of this matter, Respondent consents to the entry of the following Conclusions of Law and Order
10. Pending this investigation, Respondent has satisfactorily completed the following Category I continuing medical education:
- Intensive Course in Controlled Substance Prescribing, Case Western Reserve University School of Medicine (31.5 hrs).
 - Intensive Course in Medical Documentation, Case Western Reserve University School of Medicine (14.5 hrs).

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, Respondent Dilip Kumar Tannan, M.D., violated Wis. Admin. Code § Med 10.02(2)(za) (Nov. 2002), by failing to maintain a patient health care record consistent with the requirements of Wis. Admin. Code ch. Med 21.

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

ORDER

1. The attached Stipulation is accepted.
2. Respondent Dilip Kumar Tannan, M.D., is REPRIMANDED.
3. The Board recognizes the above education as being equivalent to what it would have ordered, in this case. None of the above education may be used to satisfy any continuing education requirements that have been or may be instituted by the Board or Department.
4. Within nine months from the date of this Order, Dilip Kumar Tannan, M.D., shall pay COSTS of this matter in the amount of \$3, 041.67.
5. 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:

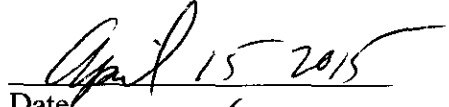
Department Monitor
Division of Legal Services and Compliance
Department of Safety and Professional Services
P.O. Box 7190, Madison, WI 53707-7190
Telephone (608) 267-3817; Fax (608) 266-2264
DSPSMonitoring@wisconsin.gov

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 costs as ordered or fails to submit proof of successful completion of the ordered education as set forth above, Respondent's license (no. 26504-20) 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

STATE OF WISCONSIN
BEFORE THE MEDICAL EXAMINING BOARD

IN THE MATTER OF DISCIPLINARY :
PROCEEDINGS AGAINST :
 :
DILIP KUMAR TANNAN, M.D., :
RESPONDENT. : 0003911

Division of Legal Services and Compliance Case No. 13 MED 091

Respondent Dilip Kumar Tannan, M.D., and the Division of Legal Services and Compliance, Department of Safety and Professional Services stipulate as follows:

1. This Stipulation is entered into as a result of a pending investigation by the Division of Legal Services and Compliance. Respondent consents to the resolution of this investigation by Stipulation.

2. Respondent understands that by signing this Stipulation, Respondent voluntarily and knowingly waives the following rights:

- the right to a hearing on the allegations against Respondent, at which time the State has the burden of proving those allegations by a preponderance of the evidence;
- the right to confront and cross-examine the witnesses against Respondent;
- the right to call witnesses on Respondent's behalf and to compel their attendance by subpoena;
- the right to testify on Respondent's own behalf;
- the right to file objections to any proposed decision and to present briefs or oral arguments to the officials who are to render the final decision;
- the right to petition for rehearing; and
- all other applicable rights afforded to Respondent under the United States Constitution, the Wisconsin Constitution, the Wisconsin Statutes, the Wisconsin Administrative Code, and other provisions of state or federal law, subject to paragraph 5 below.

3. Respondent is aware of Respondent's right to seek legal representation and is represented by Attorney Jeremy T. Gill of Nash, Spindler, Grimstad & McCracken, LLP.

4. Respondent neither admits nor denies having failed to meet a professional standard with respect to any patient, at any time, but agrees to the attached Final Decision and Order to resolve this investigation.

5. Respondent agrees to the adoption of the attached Final Decision and Order by the Wisconsin Medical Examining Board (Board). The parties to the Stipulation consent to the entry of the attached Final Decision and Order without further notice, pleading, appearance or consent of the parties. Respondent waives all rights to any appeal of the Board's order, if

Stipulation
In the matter of disciplinary proceedings against
Dilip K. Tannan, M.D., Case No. 13 MED 091

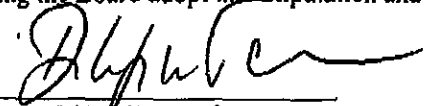
adopted in the form as attached. However, Respondent does not intend to waive his right to contest the findings and conclusions of the attached Final Decision and Order in any subsequent proceeding brought by any other State Agency or any Federal Agency, including but not limited to the Drug Enforcement Administration.

6. If the terms of this Stipulation are not acceptable to the Board, the parties shall not be bound by the contents of this Stipulation, and the matter shall then be returned to the Division of Legal Services and Compliance for further proceedings. In the event that the Stipulation is not accepted by the Board, the parties agree not to contend that the Board has been prejudiced or biased in any manner by the consideration of this attempted resolution.

7. The parties to this Stipulation agree that the attorney or other agent for the Division of Legal Services and Compliance and any member of the Board ever assigned as an advisor in this investigation may appear before the Board in open or closed session, without the presence of Respondent, for purposes of speaking in support of this agreement and answering questions that any member of the Board may have in connection with deliberations on the Stipulation. Additionally, any such advisor may vote on whether the Board should accept this Stipulation and issue the attached Final Decision and Order.

8. Respondent is informed that should the Board adopt this Stipulation, the Board's Final Decision and Order is a public record and will be published in accordance with standard Department procedure.

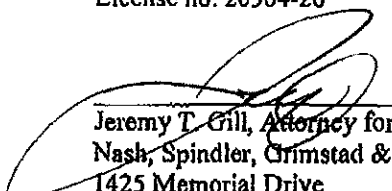
9. The Division of Legal Services and Compliance joins Respondent in recommending the Board adopt this Stipulation and issue the attached Final Decision and Order.



Dilip K. Tannan, M.D., Respondent
555 South Washburn
Oshkosh, WI 54904
License no. 26504-20

4-9-15

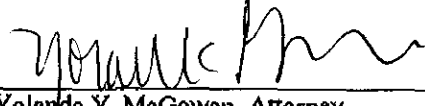
Date



Jeremy T. Gill, Attorney for Respondent
Nash, Spindler, Grimstad & McCracken, LLP
1425 Memorial Drive
Manitowoc, WI 54220

4/9/15

Date



Yolanda Y. McGowan, Attorney
Division of Legal Services and Compliance
P.O. Box 7190
Madison, WI 53707-7190

4/10/15

Date