

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

LOUIS S. SENO, JR., M.D.,
RESPONDENT.

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FINAL DECISION AND ORDER

00039 12

Division of Legal Services and Compliance Case No. 13 MED 433

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

Louis S. Seno, Jr., M.D.
12203 N. Corporate Parkway
Mequon, WI 53092

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 Louis S. Seno, Jr., M.D., (dob May 31, 1949), is licensed in the state of Wisconsin to practice medicine and surgery, having license number 20090-20, first issued on July 15, 1976, 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 12203 North Corporate Parkway, Mequon, Wisconsin 53092.

Prior discipline.

2. Respondent was previously disciplined in files 89 MED 295 and 92 MED 325. On February 22, 1996, the Board found that Respondent had inappropriately prescribed oxycodone

and meperidine products, all of which are schedule II controlled substances, to a patient. Respondent's license was suspended for 60 days. Respondent was required to complete courses in appropriate prescribing of controlled substances and recordkeeping, and his authority to prescribe controlled substances was limited. Respondent's unlimited license was restored on June 25, 2002.

The instant case.

3. On October 10, 2011, Patient A, a woman born in 1925, was admitted to a skilled nursing facility and was on warfarin because of deep leg vein thrombosis. The patient also had seizure disorder, hypertension, dementia, osteoarthritis, and osteoporosis with a compression fracture of T12. Respondent assumed the care of this patient.

4. On August 26, 2012, the patient was transferred to the hospital due to chest pain and tachycardia. Discharge diagnoses included chest pain secondary to atrial fibrillation, left atrial appendage thrombus, urinary tract infection, and pneumonia.

5. On September 5, 2012, the patient returned to the nursing home. The last international normalized ratio (INR) at the hospital was 2.6. Respondent ordered warfarin 4 mg Monday-Friday and 5 mg on Saturday-Sunday with a follow-up INR on September 10, 2012. Patient was also on phenytoin ER 300 mg Monday-Friday and 200 mg on Saturday-Sunday.

6. On September 10, 2012, INR was 3.5.

7. On September 11, 2012, Respondent ordered one lidocaine patch for lower back pain.

8. On September 12, 2012, Respondent saw Patient A and knew she was not eating, had difficulty swallowing, and had weight loss.

9. On September 13, 2012, Respondent ordered urinalysis with culture and sensitivity if indicated, and a complete blood count and comprehensive metabolic panel.

10. On September 14, 2012, Respondent was advised of the patient's change in condition of being more lethargic, unable to communicate, and sedated. The facility nurse noted that the patient started lidocaine patch BID on September 11, 2012 and was given PRN tramadol 100 mg 2-3 times daily since September 5, 2012. The nurse requested a *stat* order to check phenytoin level which had not been drawn since June 1, 2012 when it was 13.2. Respondent ordered a *stat* phenytoin level; also that the tramadol be decreased to 100 mg BID for pain, and that a dorsal and lumbar spine magnetic resonance imaging (MRI) be performed due to increased back pain.

11. On September 15, 2012, lab tests showed the patient had a yeast infection. Dr. D, the on-call physician, started the patient on fluconazole 150 mg daily for seven days. From September 16, 2012 to September 21, 2012, fluconazole 150 mg was given daily *per* the medication administration record (MAR).

12. On September 18, 2012, Respondent was advised of the patient's change in condition in that she was weaker and leaning to her left side in wheelchair without facial droop.

13. On September 19, 2012, Respondent was advised that the patient fell but was not injured. Respondent ordered monitoring for falls for three days.

14. On September 20, 2012, Respondent was advised that the patient was more lethargic and not wanting to eat. The family thought this was because of tramadol or heart medications. Respondent decreased tramadol to 50 mg BID, decreased diltiazem 120 mg from BID to daily, decreased quetiapine from 25 mg BID to daily, and increased acetaminophen from one 325 mg q 4 hours PRN for pain to two acetaminophen 500 mg q 4 hours PRN.

15. On September 22, 2012, Respondent continued digoxin 0.125 mg daily.

16. On September 23, 2012, the patient had a 2 x 3 cm bruise on her back which was not there the day before. The facility faxed notice of this to Respondent on September 23, 2012 (Sunday).

17. On September 24, 2012, Respondent discontinued tramadol, ordered a digoxin level at next draw, and ordered that the patient may see and follow recommendations of physiatrist Dr. R.

18. On September 25, 2012, Respondent was advised the patient had a 0.5 cm x 0.5 cm scabbed skin tear on her right upper arm and two small bruises by the skin tear of 1.6 cm x 1 cm and 2 cm x 1.4 cm. Respondent ordered normal saline wash followed by oil emulsion followed by gauze bandage roll to right upper arm skin tear until resolved.

19. On September 25, 2012 (Tuesday), the patient's digoxin level was high. Respondent ordered a hold on digoxin for Wednesday and Thursday, recheck digoxin level in two weeks, and resume 0.125 mg on Friday. Respondent also ordered a PT/INR for September 27, 2012.

20. On September 26, 2012, Dr. R identified bruising on the patient's back, breast, and side. He attributed this to the fall. Dr. R ordered chest x-ray, thoracic spine x-rays, acetaminophen 2 tabs q 8 hrs PRN, and cold compresses 10-15 min 1-2 times daily to mid-thoracic back.

21. On September 27, 2012, INR was drawn and showed a result greater than 10 and a PT over 100 seconds. Respondent was advised of bruising to the patient's upper back, side of abdomen, and right breast along with the INR. Respondent ordered warfarin discontinued and to recheck PT/INR on October 1, 2012.

22. On September 28, 2012 at 8 a.m., the patient had slurred speech, mental status changes, was diaphoretic, had sluggish pupil responses, was flaccid, had bruising, temp 99.8, and heart rate of 100. Respondent was notified, and ordered the patient be sent to the emergency

room (ER). Patient A was diagnosed as having a bilateral acute cerebral hemorrhage and was treated with vitamin K 10 mg, six units of plasma, and two units of packed red blood cells.

23. On October 3, 2012, the patient died. The cause of death was bilateral subdural hematoma due to hyper anti-coagulation.

24. Upon interview, Respondent told the Office of Caregiver Quality (OCQ) he saw the September 10, 2012 INR result of 3.5, and wanted the INR to be in this range. Respondent did not know why a follow-up INR was not ordered. Respondent told OCQ he was aware of the patient's extensive bruising. When OCQ asked Respondent why he didn't treat the patient with vitamin K or have an emergency room evaluation when the INR was over 10 on September 27, 2012, Respondent stated, "We didn't want a knee jerk reaction. The hardest thing to do is nothing. In her case I did not believe that the INR level was over 10; it couldn't be right and that is why I stopped the Coumadin and ordered another test. It would not have made a difference if I treated her or not as she had active bleeding. I did fear that she had a subdural hematoma if (treating her) would have prolonged her agony." Respondent told OCQ he did not have any conversations with the patient's family about risks and benefits of treating with vitamin K or sending the patient to the ER for evaluation.

25. A minimally competent physician would, upon being informed that the patient's INR was greater than 10, have ordered immediate administration of vitamin K, or ordered the patient transported to the hospital for treatment and monitoring, or both. If the physician suspected that the INR was inaccurate, he would have ordered it repeated *stat*, not in four days.

26. By failing to take one or more of these actions, Respondent unnecessarily increased the risk of hemorrhage, including death.

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 Louis S. Seno, Jr., M.D., engaged in unprofessional conduct pursuant to Wis. Admin. Code § Med 10.02(2)(h) (1976) by failing to order administration of vitamin K, or, in the alternative, ordering that the patient be transported to the hospital for appropriate treatment and monitoring.

3. As a result of the above conduct, Louis S. Seno, Jr., M.D., is subject to discipline pursuant to Wis. Stat. § 448.02(3).

ORDER

1. The attached Stipulation is accepted.

2. The license to practice medicine and surgery in the state of Wisconsin issued to Respondent Louis S. Seno, Jr., M.D., is **SUSPENDED** for one week, commencing July 3, 2015 and terminating at midnight on July 10, 2015.

3. In response to this investigation, and with preapproval from the Board's designee, Respondent has demonstrated successful completion of the *Anticoagulation Therapy Management Certificate Program*, at the University of Southern Indiana. The program is recognized by the National Certification Board for Anticoagulation Providers and provides 40 hours of continuing education for pharmacists, nurses and nurse practitioners. The program is a six-week interactive internet program, and its stated purpose is to "enable the learner to successfully manage patients receiving anticoagulation therapy based on current therapeutic guidelines and best practice."

4. Within 120 days from the date of this Order, Louis S. Seno, Jr., M.D., shall pay COSTS of this matter in the amount of \$1,600.

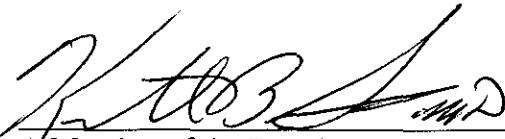
5. Proof of successful course completion and payment of costs (made payable to the Wisconsin Department of Safety and Professional Services) shall be sent by Respondent to the Department Monitor at the address below:

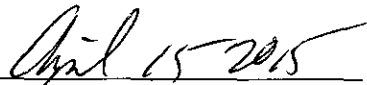
Department Monitor
Division of Legal Services and Compliance
Department of Safety and Professional Services
P.O. Box 7190, Madison, WI 53707-7190
Telephone (608) 267-3817; Fax (608) 266-2264
DSPSMonitoring@wisconsin.gov

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 practices medicine and surgery while his license is suspended, Respondent's license (no. 20090-20) may, in the discretion of the Board or its designee, be SUSPENDED, and/or he will be subject to additional limitations, without further notice or hearing as the Board deems advisable.

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**

**LOUIS S. SENO, JR., M.D.,
RESPONDENT.**

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STIPULATION

00039 12

Division of Legal Services and Compliance Case No. 13 MED 433

Respondent Louis S. Seno, JR., 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.

3. Respondent is aware of Respondent's right to seek legal representation and has been provided an opportunity to obtain legal counsel before signing this Stipulation. Respondent is represented by Gutglass, Erickson, Bonville & Larson.

4. 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 adopted in the form as attached.

5. 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

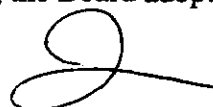
or Legal Services and Compliance for further proceedings. In the event that the Stipulation is not accepted by the Board, the parties agree not to contend that the Board has been prejudiced or biased in any manner by the consideration of this attempted resolution.

6. 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 or Respondent's attorney, 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.

7. 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.

8. Respondent is further informed that should the Board adopt this Stipulation, the Board's Final Decision and Order would constitute an agency finding within the meaning of Wis. Stat. §§ 48.685 and 50.065. Should Respondent wish to work in a Wisconsin DHS-licensed facility in any role, she will need to pass a Rehabilitation Review through DHS prior to commencement of such employment.

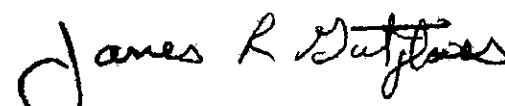
9. The Division of Legal Services and Compliance joins Respondent in recommending the Board adopt this Stipulation and issue the attached Final Decision and Order.



Louis S. Seno, JR., M.D., Respondent
12203 N. Corporate Parkway
Mequon, WI 53092
License no. 20090-20

Date


3/22/15



James R. Gutglass, Attorney for Respondent
Gutglass, Erickson, Bonville & Larson
735 N. Water Street, Suite 1400
Milwaukee, WI 53202

Date

4/6/15



Sandra L. Nowack, Attorney
State Bar Number 1025643
Department of Safety and Professional Services
Division of Legal Services and Compliance
P.O. Box 7190
Madison, WI 53707-7190

Date

4/6/15