State of Rhode Island Department of Health Board of Medical Licensure & Discipline



IN THE MATTER OF: Muhammad S Akhtar M.D. License number MD 09655 Complaint number C170863, 171712

## CONSENT ORDER

The Rhode Island Board of Medical Licensure and Discipline (hereinafter "Board") has reviewed and investigated the above referenced complaints pertaining to Dr. Mohammad S. Akhtar (hereinafter "Respondent") through its Investigative Committee. The Board makes the following:

## FINDINGS OF FACT

- Respondent has been a licensed physician in the State of Rhode Island since December 8<sup>th</sup>, 1997. Respondent graduated from King Edward Medical College in 1986.
   Respondent's office is located at 999 South Broadway, East Providence, Rhode Island, and his primary specialty is Hematology/Oncology.
- 2. A complaint was reported to the Board by the Office of the State Medical Examiner.

  Patient A had a fatal overdose of fentanyl while under the care of respondent. The fentanyl that caused the fatal overdose was not prescribed by Respondent.
- 3. The Investigative Committee reviewed the above referenced complaint and the affected

patient's medical records, and interviewed the Respondent.

4. Patient A was treated by Respondent for low back pain, anxiety, as well as other medical conditions.

- Respondent prescribed Vicodin® (an opioid) as well as Xanax® (a benzodiazepine) on a
  continuous basis to help manage patient A's pain and anxiety as set forth in patient A's
  chart.
- The Board also received a complaint from the Board of Pharmacy regarding Respondents
  prescribing of controlled substances to other patients under Respondents care.
- 7. The Investigative Committee reviewed the medical records provided by Respondent of Patient A, as well as other Patients. The Investigative Committee concluded the medical records did not contain adequate documentation of a treatment plan, specifically; there was not documentation of what objectives were used to determine treatment success, or pain relief, or changes in physical or psychosocial function, or diagnostic evaluations or other planned treatments.
- 8. The Investigative Committee concluded the medical records did not contain adequate documentation of educating the patient about the adverse risk of taking alcohol, or other psychoactive medications, specifically benzodiazepines, or tolerance, addiction, overdose or death. There was no documentation that it was the patient's responsibility to safeguard the medication and keep in a secure location. There was no documentation of educating the patient about safeguarding the medication or appropriate disposal options.
- 9. The Investigative Committee concluded after review of the medical records for the aforementioned patients, the medical records did not include sufficient documentation of these patients adherence with any medication treatment plan; specifically, if pain,

function, or quality of life have improved or diminished using objective evidence; and if continuation or modification of medications for pain management treatment is necessary based on the practitioner's evaluation of progress towards treatment objectives.

- 10. In addition, The Investigative Committee noted, that an applicable the regulation requires "For patients the practitioner is maintaining on continuous opioid therapy for pain for six (6) months or longer, the practitioner shall review information from the prescription monitoring program (PMP) at least every twelve (12) months.

  Documentation of that review shall be noted in the patient's medical record." The investigative committee did not see regular review as well as documentation of this review of the Prescription Drug Monitoring Program (PDMP) in the medical record.
- 11. The Investigative Committee concluded the medical record for the other patients did include documentation of appropriate patient education, storage and disposal.
- 12. Respondent has violated Rules and Regulations for Pain Management, Opioid Use and the Registration of Distributors of Controlled Substances in Rhode Island [R21-28-CSD] sections 3.2 (Documentation of Treatment Plan), 3.4 (Patient Education/Consent), 3.7

## Based on the foregoing, the parties agree as follows:

Periodic Review and 3.12 Long Acting Opioids.

- 1. Respondent admits to the jurisdiction of the Board.
- Respondent has agreed to this Consent Order and understands that it is subject to final approval of the Board, and this Consent Order is not binding on Respondent until final ratification by the Board.
- 3. If ratified by the Board, Respondent hereby acknowledges and waives:

a. The right to appear personally or by counsel or both before the Board;

- b. The right to produce witnesses and evidence on his behalf at a hearing;
- c. The right to cross examine witnesses;
- d. The right to have subpoenas issued by the Board;
- e. The right to further procedural steps except for those specifically contained herein;
- f. Any and all rights of appeal of this Consent Order; and
- g. Any objection to the fact that this Consent Order will be presented to the Board for consideration and review.
- h. Any objection that this Consent Order will be reported to the National Practitioner Date Bank, Federation of State Medical Boards as well as posted on the department's public web site.
- 4. Respondent agrees to pay upon ratification of this Consent Order an administrative fee to the Board with a check for \$1881.00 dollars made payable to the Rhode Island General Treasurer for costs associated with investigating the above-referenced complaint. Respondent will send notice of compliance with this condition to <a href="mailto:DOH.PRCompliance@health.ri.gov">DOH.PRCompliance@health.ri.gov</a> within 30 days of mailing the above referenced payment.
- 5. Respondent hereby agrees to this reprimand on his physician license.
- 6. Respondent agrees to take within nine (9) months of the ratification of this order a

  Board approved CME in Controlled substance prescribing, such as the Vanderbilt
  course. Respondent will send notice of compliance with this condition to

<u>DOH.PRCompliance@health.ri.gov</u> within 30 days of his successful completion of his CME.

- 7. Respondent agrees to retain a mutually acceptable Board approved physician monitor within 30 days of ratification of this order to review compliance with the above referenced regulations. The monitor will review at least 5 medical records monthly for 12 months. The monitor will send reports of the monitoring within 15 days of completion to <a href="mailto:DOH.PRCompliance@health.ri.gov">DOH.PRCompliance@health.ri.gov</a>.
- 8. In the event that any term of this Consent Order is violated, after it is signed and accepted, the Director of the Department of Health shall have the discretion to impose further disciplinary action, including immediate suspension of Respondent's license. If the Director imposes further disciplinary action, Respondent shall be given notice and shall have the right to request an administrative hearing within twenty (20) days of the suspension and/or further discipline. The Director of the Department of Health shall also have the discretion to request an administrative hearing after notice to Respondent of a violation of any term of this Consent Order. The Board may suspend

Respondent's license, or impose further discipline, for the remainder of Respondent's licensing period if the alleged violation is proven by a preponderance of evidence.

Signed this [¶

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Mohammad S Akhiar M.D.

Ratified by the Board of Medical Licensure and Discipline on the 10th day of 0ctober 2018.

Nicole Alexander-Scott, M.D., M.P.H.

Director

Rhode Island Department of Health

3 Capitol Hill, Room 401

Providence, Rhode Island 02908