NEW YORK STATE DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

IN THE MATTER

OF

JORGE PEREZ, M.D.

ORDER AND
NOTICE OF
HEARING

TO: JORGE PEREZ, M.D. 213 14TH Street Palisades Park, New Jersey 07650

The undersigned, Antonia C. Novello, M.D., M.P.H., Dr.P.H., Commissioner of Health, after an investigation, upon the recommendation of a Committee on Professional Medical Conduct of the State Board for Professional Medical Conduct, and upon the Statement of Charges attached hereto and made a part hereof, has determined that the continued practice of medicine in the State of New York by JORGE PEREZ, M.D., Respondent, constitutes an imminent danger to the health of the people of this state.

It is therefore:

ORDERED, pursuant to N.Y. Pub. Health Law §230(12), that effective immediately JORGE PEREZ, M.D., Respondent, shall not practice medicine in the State of New York. This Order shall remain in effect unless modified or vacated by the Commissioner of Health pursuant to N.Y. Pub. Health Law §230(12).

PLEASE TAKE NOTICE that a hearing will be held pursuant to the provisions of N.Y. Pub. Health Law §230, and N.Y. State Admin. Proc. Act §§301-307 and 401. The hearing will be conducted before a committee on professional conduct of the State Board for Professional Medical Conduct on May 2, 2003 at 10:00 a.m., at the offices of the New York State Health Department, 5 Penn Plaza, New York, New York, 6th Floor, and at such other adjourned dates, times and places as the committee may direct. The Respondent may file an answer to the Statement of

Charges with the below-named attorney for the Department of Health.

At the hearing, evidence will be received concerning the allegations set forth in the Statement of Charges, which is attached. A stenographic record of the hearing will be made and the witnesses at the hearing will be sworn and examined. The Respondent shall appear in person at the hearing and may be represented by counsel. The Respondent has the right to produce witnesses and evidence on his behalf, to issue or have subpoenas issued on his behalf for the production of witnesses and documents and to cross-examine witnesses and examine evidence produced against him. A summary of the Department of Health Hearing Rules is enclosed. Pursuant to §301(5) of the State Administrative Procedure Act, the Department, upon reasonable notice, will provide at no charge a qualified interpreter of the deaf to interpret the proceedings to, and the testimony of, any deaf person.

The hearing will proceed whether or not the Respondent appears at the hearing. Scheduled hearing dates are considered dates certain and, therefore, adjournment requests are not routinely granted. Requests for adjournments must be made in writing to the New York State Department of Health, Division of Legal Affairs, Bureau of Adjudication, Hedley Park Place, 433 River Street, Fifth Floor South, Troy, NY 12180, ATTENTION: HON. TYRONE BUTLER, DIRECTOR, BUREAU OF ADJUDICATION, and by telephone (518-402-0748), upon notice to the attorney for the Department of Health whose name appears below, and at least five days prior to the scheduled hearing date. Claims of court engagement will require detailed affidavits of actual engagement. Claims of illness will require medical documentation.

At the conclusion of the hearing, the committee shall make findings of fact, conclusions concerning the charges sustained or dismissed, and, in the event any of the charges are sustained, a determination of the penalty or sanction to be imposed or appropriate action to be taken. Such determination may be reviewed by the administrative review board for professional medical conduct.

THESE PROCEEDINGS MAY RESULT IN A DETERMINATION THAT YOUR LICENSE TO PRACTICE MEDICINE IN NEW YORK STATE BE REVOKED OR SUSPENDED, AND/ORTHAT YOU BE FINED OR SUBJECT TO OTHER SANCTIONS SET FORTH IN NEW YORK PUBLIC HEALTH LAW §230-a. YOU ARE URGED TO OBTAIN AN ATTORNEY TO REPRESENT YOU IN THIS MATTER.

DATED:

Albany, New York

April2/,2003

ANTONIA C. NOVELLO, M.D., M.P.H.,

Dr.P.H.

Commissioner

New York State Health Department

Inquiries should be directed to:

Daniel Guenzburger
Associate Counsel
N.Y.S. Department of Health
Division of Legal Affairs
5 Penn Plaza, 6th Floor
New York, New York

SECURITY NOTICE TO THE LICENSEE

The proceeding will be held in a secure building with restricted access. Only individuals whose names are on a list of authorized visitors for the day will be admitted to the building

No individual's name will be placed on the list of authorized visitors unless written notice of that individual's name is provided by the licensee or the licensee's attorney to one of the Department offices listed below.

The written notice may be sent via facsimile transmission, or any form of mail, but must be received by the Department **no less than two days prior to the date** of the proceeding. The notice must be on the letterhead of the licensee or the licensee's attorney, must be signed by the licensee or the licensee's attorney, and must include the following information:

Licensee's Name	Date of Proceeding
Name of person to be adm	itted
Status of person to be adm (Licensee, Attorney, Memb	er of Law Firm, Witness, etc.)
Signature (of licensee or lic	censee's attorney)

This written notice must be sent to:

New York State Health Department Bureau of Adjudication Hedley Park Place 433 River Street, Fifth Floor South Troy, NY 12180

Fax: 518-402-0751

NEW YORK STATE DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

> IN THE MATTER OF JORGE PEREZ, M.D.

STATEMENT

OF

CHARGES

JORGE PEREZ, M.D., the Respondent, was authorized to practice medicine in New York State on or about October 26, 1990, by the issuance of license number 184454 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about August 11, 2001, 6:00 P.M., Patient A, a 38 year old male, presented to the Emergency Room of Wyckoff Heights Medical Center, Brooklyn, New York, ("Wyckoff ER") with a chief complaint of diffuse abdominal pain and nausea from the night before. The Patient's abdomen was distended and he had a significantly elevated white blood count of 16, 400. Respondent assumed responsibility for the care of Patient A around 7:00 P.M, approximately an hour after admission to the Wyckoff ER. On or about August 12, 2:40 A.M. the Respondent discharged Patient A with a diagnosis of abdominal pain, food intolerance and urinary tract infection. He prescribed Cipro and ordered follow up with the Patient's primary care physician.

(Patient A and the other patients are identified in the annexed appendix.)
Respondent deviated from medically accepted standards in that he:

- 1. Failed to adequately evaluate Patient A, including but not limited to failing to:
 - a. Order a reexamination of the Patient 's vital signs.
 - b. Perform a repeat physical examination.
 - c. Order further imaging studies, including an abdominal Cat Scan and/or ultrasound examination.
- 2. Inappropriately ordered the administration of Toradol.
- 3. Inappropriately diagnosed urinary tract infection.
- 4. Failed to order a surgical consult
- 5. Inappropriately discharged Patient A.
- B. On or about February 7, 2001, 2:25 P.M., Patient B, a 31 year old female, presented to the Bronx Lebanon Hospital Emergency Room by ambulance after a fainting episode. The Patient's history included end-stage renal disease for which she was maintained on dialysis, HIV infection, hypertension and asthma. At approximately 2:45 P.M. the patient went into cardiac arrest. She was pronounced dead at 3:25 P.M. Respondent deviated from medically accepted standards in that:

- 1. At the time Respondent initially examined the patient, he:
 - Failed to take an adequate history, including failing to ascertain and/or note the last date of renal dialysis.
 - b. Failed to order an EKG.
 - c. Failed to order continuous cardiac monitoring.
- 2. Respondent failed to administer sodium bicarbonate, calcium and/or other anti-hyperkalemic medication.
- Failed to comply with Advanced Cardiac Life Support protocols, including but not limited to inappropriately ventilating the Patient through a mechanical rather than manual means of ventilation.
- C. On or about February 8, 1999, Patient C, a 46 year old male, presented to the Bronx Lebanon ER by ambulance with a complaint of shortness of breath for one week. Patient D had a history of AIDS and asthma. The Respondent concluded that the patient was in acute distress secondary to shortness of breath. He ordered mechanical ventilation and intravenous saline at 125 ml/hour. Patient C developed progressive bradycardia and hypotension and went into full cardiac arrest. Respondent deviated from medically accepted standards in that he:

- 1. Failed to administer appropriate medical treatment for asthma.
- 2. Failed to appropriately treat the Patient's hypotension and bradycardia...
- 3. Failed to comply with Basic and Advanced Cardiac Life Support protocols, including but not limited to:
 - a. Failing to appropriately assess the adequacy of oxygenation.
 - b. Failing to appropriately confirm the proper placement of the endotracheal tube.
 - c. Inappropriately administering intravenous fluids.
 - d. Inappropriately ventilating the Patient through a mechanical rather than manual means of ventilation
 - e. Inappropriately defibrilating the Patient.
 - f. Failing to order:
 - i. Beta-agonist medication.
 - ii. Sodium bicarbonate
 - iii. Atropine.
 - iv. Epinephrine.
 - v. Intravenous steroids.
- D. On or about September 28, 1999 Patient D, a 50 year old male, presented to

the Bronx Lebanon ER with a complaint of abdominal pain for four months.

Respondent performed a physical examination and ordered an abdominal x-ray. Respondent deviated from medically accepted standards in that he:

- 1. Failed to take an adequate history.
- 2. Failed to perform an adequate physical examination, including failing to perform a rectal exam.
- 3. Failed to order appropriate laboratory studies.
- 4. Inappropriately ordered Toradol.
- 5. Inappropriately discharged the patient with a primary diagnosis of constipation.

SPECIFICATION OF CHARGES

FIRST SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(3) by practicing the profession of medicine with negligence on more than one occasion as alleged in the facts of two or more of the following:

1. A, A1, A1(a), A1(b), A1(c) A2, A3, A4, A5, B, B1, B1(a), B1(b), B1(c), B2, B3, C, C1, C2, C3, C3(a), C3(b), C3(c), C3(d),

C3(e), C3(f), C3(f)(i), C3(f)(ii), C3(f)(iii), C3(f)(iv), C3(f)(v), D, D1, D2, D3, D4, and or D5.

SECOND SPECIFICATION

INCOMPETENCE ON MORE THAN ONE OCCASION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(5) by practicing the profession of medicine with incompetence on more than one occasion as alleged in the facts of two or more of the following:

A, A1, A1(a), A1(b), A1(c) A2, A3, A4, A5, B, B1, B1(a), B1(b), B1(c), B2, B3, C, C1, C2, C3, C3(a), C3(b), C3(c), C3(d), C3(e), C3(f), C3(f)(i), C3(f)(ii), C3(f)(iii), C3(f)(iv), C3(f)(v), D, D1, D2, D3, D4, and/or D5.

THIRD THROUHGH SEVENTH SPECIFICATIONS GROSS NEGLIGENCE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(4) by practicing the profession of medicine with gross negligence on a particular occasion as alleged in the facts of the following:

- 3. A, A1, A1(a), A1(b), A1(c), A2, A3, A4, and/or A5.
- 4. B, B1, B1(a), B1(b), B1(c), B2, and/or B3.
- C, C1, C2, C3, C3(a), C3(b), C3(c), C3(d), C3(e), C3(f),
 C3(f)(i), C3(f)(ii), C3(f)(iii), C3(f)(iv), and/or C3(f)(v).
- 6. D, D1, D2, D3, D4, and/or D5.

SEVENTH SPECIFICATION

GROSS INCOMPETENCE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(6) by practicing the profession of medicine with gross incompetence as alleged in the facts of the following:

A, A1, A1(a), A1(b), A1(c) A2, A3, A4, A5, B, B1, B1(a), B1(b), B1(c), B2, B3, C, C1, C2, C3, C3(a), C3(b), C3(c), C3(d), C3(e), C3(f), C3(f)(i), C3(f)(ii), C3(f)(iii), C3(f)(iv), C3(f)(v), D, D1, D2, D3, D4, and/or D5.

DATED:

April 17, 2003 New York, New York

Roy Nemerson

Deputy Counsel Bureau of Professional

Medical Conduct