## New York State Board for Professional Medical Conduct



Barbara A. DeBuono, M.D., M.P.H. Commissioner of Health

433 River Street, Suite 303 Troy, New York 12180-2299 • (518) 402-0863

Patrick F. Carone, M.D., M.P.H.

Chair

Ansel R. Marks, M.D., J.D.

Executive Secretary

September 1, 1998

## CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Saul Izaguirre-Salinas, M.D. 1130 Pelham Parkway South Bronx, New York 10461

RE:

License No. 105004

Dear Dr. Izaguirre-Salinas:

Enclosed please find Order #BPMC 98-199 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect **September 1, 1998.** 

If the penalty imposed by the Order is a surrender, revocation or suspension of this license, you are required to deliver to the Board the license and registration within five (5) days of receipt of the Order.

Board for Professional Medical Conduct New York State Department of Health Hedley Park Place, Suite 303 433 River Street Troy, New York 12180

Sincerely.

Ansel R. Marks, M.D., J.D.

Executive Secretary

Board for Professional Medical Conduct

Enclosure

cc:

Daniel M. Shapiro, Esq.

Shapiro, Uchman & Myers, P.C.

220 Old Country Road

Mineola, New York 11501-4280

Marcia E. Kaplan, Esq.

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

# IN THE MATTER OF SAUL IZAGUIRRE-SALINAS, M.D.

CONSENT
AGREEMENT
AND
ORDER
BPMC #98-199

STATE OF NEW YORK	)	SS.
COUNTY OF	)	

SAUL IZAGUIRRE-SALINAS, M.D., being duly sworn, deposes and says:

That on or about May 14, 1958, I was licensed to practice as a physician in the State of New York, having been issued License No. 105004 by the New York State Education Department.

My current address is 1130 Pelham Parkway South, Bronx, N.Y. 10461, and I will advise the Director of the Office of Professional Medical Conduct of any change of my address.

I understand that the New York State Board for Professional Medical Conduct has charged me with one specification of professional misconduct.

A copy of the Statement of Charges is annexed hereto, made a part hereof, and marked as Exhibit "A".

I admit guilt to the First Specification, in full satisfaction of the charges against me. I hereby agree to the following penalty:

A six month suspension, stayed, with one year of probation under the terms in Exhibit B.

I further agree that the Consent Order for which I hereby apply shall impose a condition that, except during periods of actual suspension, I maintain current registration of my license with the New York State Education Department Division of Professional Licensing Services, and pay all registration fees. This condition shall be in effect beginning thirty days after the effective date of the Consent Order and continuing until the full term of the Order has run, and until any associated period of probation and all probation terms have been completed and satisfied. I hereby stipulate that any failure by me to comply with such condition shall constitute misconduct as defined by New York State Education Law §6530(29)(McKinney Supp 1998).

I agree that in the event I am charged with professional misconduct in the future, this agreement and order shall be admitted into evidence in that proceeding.

I hereby make this Application to the State Board for Professional Medical Conduct (the Board) and request that it be granted.

I understand that, in the event that this Application is not granted by the Board, nothing contained herein shall be binding upon me or construed to be an admission of any act of misconduct alleged or charged against me, such Application shall not be used against me in any way and shall be kept in strict confidence during the pendency of the professional misconduct disciplinary proceeding; and such denial by the Board shall be made without prejudice to the continuance of any disciplinary proceeding and the final determination by the Board pursuant to the provisions of the Public Health Law.

I agree that, in the event the Board grants my Application, as set forth herein, an order of the Chairperson of the Board shall be issued in accordance with same. I agree that such order shall be effective upon issuance by the

Board, which may be accomplished by mailing, by first class mail, a copy of the Consent Order to me at the address set forth in this agreement, or to my attorney, or upon transmission via facsimile to me or my attorney, whichever is earliest.

I am making this Application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner. In consideration of the value to me of the acceptance by the Board of this Application, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive any right I may have to contest the Consent Order for which I hereby apply, whether administratively or judicially, and ask that the Application be granted.

M.D.

Sworn to before me this ≁n dav ofaugus⊁. 1998

The undersigned agree to the attached application of the Respondent and to the proposed penalty based on the terms and conditions thereof.

DATE: 8/10/98

DATE: 8/14/98

DATE: 8/18/98

DANIEL M. SHAPIRO, ESQ. Attorney for Respondent

MARCIA E. KAPLAN Associate Counsel
Bureau of Professional
Medical Conduct

Director

Office of Professional Medical Conduct

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

## IN THE MATTER **OF**

SAUL IZAGUIRRE-SALINAS, M.D.

CONSENT ORDER

Upon the proposed agreement of SAUL IZAGUIRRE-SALINAS, M.D. (Respondent) for Consent Order, which application is made a part hereof, it is agreed to and

ORDERED, that the application and the provisions thereof are hereby adopted and so ORDERED, and it is further

ORDERED, that this order shall be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of the Consent Order to Respondent at the address set forth in this agreement or to Respondent's attorney by certified mail, or upon transmission via facsimile to Respondent or Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: 8/25/98

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#### EXHIBIT "A"

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

#### IN THE MATTER

**OF** 

SAUL IZAGUIRRE SALINAS, M.D.

STATEMENT OF CHARGES

SAUL IZAGUIRRE SALINAS, M.D., the Respondent, was authorized to practice medicine in New York State on or about May 14, 1958, by the issuance of license number 105004 by the New York State Education Department.

### **FACTUAL ALLEGATIONS**

- A. On or about March 24, 1997, Respondent performed a sigmoid colon resection and incisional hernia repair on Patient A, an 81 year old woman at Westchester Square Medical Center, Bronx, New York.
  - Respondent failed to perform an appropriate work-up in that he failed to visualize the supposed tumor prior to surgery by colonoscopy or sigmoidoscopy.
  - 2. Respondent failed to admit Patient A to the hospital for pre-op bowel prep after the patient had failed to adequately prepare herself for a colonoscopy performed on or about March 21, 1997.
  - 3. Respondent failed to cancel the non-emergency surgery after a sigmoidoscopy in the operating room showed that Patient A's colon was grossly unprepared for the surgery.
  - 4. Respondent proceeded with the laparotomy after failing to visualize the presence of a tumor.

- 5. Respondent failed to confirm the presence of a tumor in the sigmoid colon by palpation prior to dividing the mesenteric blood supply to the colon.
- 6. Respondent performed a primary anastomosis in the presence of a grossly unprepared colon.
- 7. Respondent failed to attempt to extract the fecal bolus transanally prior to closing the abdomen.

# SPECIFICATION OF CHARGES FIRST SPECIFICATION GROSS NEGLIGENCE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law §6530(4)(McKinney Supp. 1998) by practicing the profession of medicine with gross negligence as alleged in the facts of the following:

1. Paragraph A.

DATED:

July , 1998

New York, New York

ROY NEMERSON
Deputy Counsel
Bureau of Professional
Medical Conduct

#### EXHIBIT "B"

### Terms of Probation

- 1. Respondent shall conduct himself in all ways in a manner befitting his professional status, and shall conform fully to the moral and professional standards of conduct and obligations imposed by law and by his profession.
- 2. Respondent shall submit written notification to the New York State Department of Health addressed to the Director of the Office of Professional Medical Conduct, New York State Department of Health, 433 River Street, Suite 303, Troy, NY 12180-2299; said notice is to include a full description of any employment and practice, professional and residential addresses and telephone numbers within or without New York State, and any and all investigations, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty days of each action.
- 3. Respondent shall fully cooperate with and respond in a timely manner to requests from OPMC to provide written periodic verification of Respondent's compliance with the terms of this Order. Respondent shall personally meet with a person designated by the Director of OPMC as requested by the Director.
- 4. Any civil penalty not paid by the date prescribed herein shall be subject to all provisions of law relating to debt collection by New York State. This includes but is not limited to the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of permits or licenses [Tax Law section 171(27)]; State Finance Law section 18; CPLR section 5001; Executive Law section 32].
- 5. The period of probation shall be tolled during periods in which Respondent is not engaged in the active practice of medicine in New York State. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in or intends to leave the active practice of medicine in New York State for a period of thirty (30) consecutive days or more. Respondent shall then notify the Director again prior to any change in that status. The period of probation shall resume and any terms of probation which were not fulfilled shall be fulfilled upon Respondent's return to practice in New York State.
- 6. Respondent's professional performance may be reviewed by the Director of OPMC. This review may include, but shall not be limited to, a review of office records, patient records and/or hospital charts, interviews with or periodic visits with Respondent and his staff at practice locations or OPMC offices. Respondent shall fully cooperate in the review process.
- 7. Respondent shall maintain legible and complete medical records which accurately reflect the evaluation and treatment of patients. The medical records shall contain all information required by State rules and regulations regarding controlled substances.

Respondent shall comply with all terms, conditions, restrictions, limitations and penalties to which he is subject pursuant to the Order and shall assume and bear all costs related to compliance. Upon receipt of evidence of noncompliance with, or any violation of these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding and/or any such other proceeding against Respondent as may be authorized pursuant to the law.