BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of **TOSEEF M. KHAN, M.D.** Holder of License No. 33176 For the Practice of Allopathic Medicine In the State of Arizona.	Case No. MD-14-0232A **ORDER FOR LETTER OF REPRIMAND; AND CONSENT TO THE SAME**

Toseef M. Khan, M.D. ("Respondent"), elects to permanently waive any right to a hearing and appeal with respect to this Order for a Letter of Reprimand admits the jurisdiction of the Arizona Medical Board ("Board"); and consents to the entry of this Order by the Board.

FINDINGS OF FACT

1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.

2. Respondent is the holder of license number 33176 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-14-0232A after receiving Respondent's self-report of a malpractice settlement regarding his care and treatment of a 4 year-old male patient ("AW") alleging that Respondent failed to properly interpret an ultrasound, resulting in a delay in treatment of a testicular torsion and removal of the left testicle.

4. On July 11, 2005, AW was brought to the emergency room ("ER") with complaints of abdominal pain as well as pain and swelling involving the left testicle.

5. An ultrasound exam was performed by the ultrasound technician at the hospital, and the radiologic report was provided by Respondent via teleradiography. Respondent's report concluded that there was no evidence of testicular torsion and slight heterogeneity to the epididymis, epididymitis was to be considered. Respondent mentioned in the body of the report that the testes were normal in size and echogenicity

and slight heterogeneity of left epididymis, which was asymmetrically larger. Respondent found that there was no vascularity. AW was discharged from the ER with instructions for treatment of acute epididymitis with Keflex 250mg three times a day. It was recommended that AW follow up with his primary provider the next day.

6. The following morning, AW was seen again by his pediatrician, complaining of persistent pain. AW was then referred to and examined in the ER based on the pediatrician's observation of a swollen and painful left testicle. AW was referred for ultrasound examination of the scrotum. The ultrasound examination showed infarction of the left testicle with a normal right testicle. The report stated that the left testicle was enlarged relative to the right, measuring 1.5x1.5x1.3cm and the right testicle measured 1.1x0.8x1.4cm. The left testicle was described as heterogeneous in echotexture with scattered areas of hypoechogenicity suspicious for necrosis. A Doppler study showed some parenchymal flow as well as hyperemia of the peripheral scrotal tissues. AW subsequently underwent a left orchiectomy to remove a necrotic left testicle, as well as a right orchiopexy.

7. Respondent failed to mention pertinent findings in his interpretation of the ultrasound, including enlargement of AW's left testicle, echogenicity of the left testicle decreased compared to right, reduced perfusion to the left testicle, and enlarged left epididymis with no hyperemia to suggest epididymitis. These are early signs of testicular torsion, conceivably reversible with detorsion of the testicle.

8. The standard of care required Respondent to promptly perform an ultrasound examination of the patient's scrotum and prompt interpretation by the radiologist. Respondent deviated from the standard of care by failing to properly interpret AW's ultrasound examination of July 11, 2005.

6. AW was harmed by Respondent's inaccurate interpretation of the ultrasound in that his left testicle lost its vascular supply and became necrotic. AW required surgery for removal of his left testis and underwent orchipexy of the right testicle to prevent future torsion.

CONCLUSIONS OF LAW

a. The Board possesses jurisdiction over the subject matter hereof and over Respondent.

b. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(q) ("[a]ny conduct that is or might be harmful or dangerous to the health of the patient or the public.").

ORDER

IT IS HEREBY ORDERED THAT:

Respondent is issued a Letter of Reprimand.

DATED AND EFFECTIVE this 5th day of February, 2015.

ARIZONA MEDICAL BOARD

By Patricia E. McSorley
Patricia E. McSorley
Interim Acting Executive Director

CONSENT TO ENTRY OF ORDER

1. Respondent has read and understands this Consent Agreement and the stipulated Findings of Fact, Conclusions of Law and Order ("Order"). Respondent acknowledges he has the right to consult with legal counsel regarding this matter.

2. Respondent acknowledges and agrees that this Order is entered into freely and voluntarily and that no promise was made or coercion used to induce such entry.

3. By consenting to this Order, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge this Order in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Order.

4. The Order is not effective until approved by the Board and signed by its Executive Director.

5. All admissions made by Respondent are solely for final disposition of this matter and any subsequent related administrative proceedings or civil litigation involving the Board and Respondent. Therefore, said admissions by Respondent are not intended or made for any other use, such as in the context of another state or federal government regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or any other state or federal court.

6. Upon signing this agreement, and returning this document (or a copy thereof) to the Board's Executive Director, Respondent may not revoke the consent to the entry of the Order. Respondent may not make any modifications to the document. Any modifications to this original document are ineffective and void unless mutually approved by the parties.

7. This Order is a public record that will be publicly disseminated as a formal disciplinary action of the Board and will be reported to the National Practitioner's Data Bank and on the Board's web site as a disciplinary action.

8. If any part of the Order is later declared void or otherwise unenforceable, the remainder of the Order in its entirety shall remain in force and effect.

9. If the Board does not adopt this Order, Respondent will not assert as a defense that the Board's consideration of the Order constitutes bias, prejudice, prejudgment or other similar defense.

10. Any violation of this Order constitutes unprofessional conduct and may result in disciplinary action. A.R.S. § § 32-1401(27)(r) ("[v]iolating a formal order, probation, consent agreement or stipulation issued or entered into by the board or its executive director under this chapter.") and 32-1451.

DATED: 1-2-2015

TOSEEF M. KHAN, M.D.

EXECUTED COPY of the foregoing mailed this 5th day of February, 2015 to:

Toseef M. Khan, M.D.
Address of Record

ORIGINAL of the foregoing filed this 5th day of February, 2015 with:

Arizona Medical Board
9545 E. Doubletree Ranch Road
Scottsdale, AZ 85258

Mary Baker
Board Staff