

1 **BEFORE THE ARIZONA MEDICAL BOARD**

2 In the Matter of

3 **ANCA M. MARAS, M.D.**

4 Holder of License No. 13103  
5 For the Practice of Medicine  
6 In the State of Arizona.

Case No. MD-04-0567A

**CONSENT AGREEMENT FOR  
DECREE OF CENSURE AND  
PROBATION**

7 **CONSENT AGREEMENT**

8 By mutual agreement and understanding, between the Arizona Medical Board  
9 ("Board") and Anca M. Maras, M.D. ("Respondent"), the parties agreed to the following  
10 disposition of this matter.

11 1. Respondent has read and understands this Consent Agreement and the  
12 stipulated Findings of Fact, Conclusions of Law and Order ("Consent Agreement").  
13 Respondent acknowledges that she has the right to consult with legal counsel regarding  
14 this matter and has done so or chooses not to do so.

15 2. By entering into this Consent Agreement, Respondent voluntarily  
16 relinquishes any rights to a hearing or judicial review in state or federal court on the  
17 matters alleged, or to challenge this Consent Agreement in its entirety as issued by the  
18 Board, and waives any other cause of action related thereto or arising from said Consent  
19 Agreement.

20 3. This Consent Agreement is not effective until approved by the Board and  
21 signed by its Executive Director.

22 4. The Board may adopt this Consent Agreement of any part thereof. This  
23 Consent Agreement, or any part thereof, may be considered in any future disciplinary  
24 action against Respondent.

25

1           5. This Consent Agreement does not constitute a dismissal or resolution of other  
2 matters currently pending before the Board, if any, and does not constitute any waiver,  
3 express or implied, of the Board's statutory authority or jurisdiction regarding any other  
4 pending or future investigation, action or proceeding. The acceptance of this Consent  
5 Agreement does not preclude any other agency, subdivision or officer of this State from  
6 instituting other civil or criminal proceedings with respect to the conduct that is the subject  
7 of this Consent Agreement.

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

14           7. Upon signing this agreement, and returning this document (or a copy thereof) to  
15 the Board's Executive Director, Respondent may not revoke the acceptance of the  
16 Consent Agreement. Respondent may not make any modifications to the document. Any  
17 modifications to this original document are ineffective and void unless mutually approved  
18 by the parties.

19           8. If the Board does not adopt this Consent Agreement, Respondent will not  
20 assert as a defense that the Board's consideration of this Consent Agreement constitutes  
21 bias, prejudice, prejudgment or other similar defense.

22           9. This Consent Agreement, once approved and signed, is a public record that will  
23 be publicly disseminated as a formal action of the Board and will be reported to the  
24 National Practitioner Data Bank and to the Arizona Medical Board's website.

1           10. If any part of the Consent Agreement is later declared void or otherwise  
2 unenforceable, the remainder of the Consent Agreement in its entirety shall remain in  
3 force and effect.

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

8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

*Anca Maras, M.D.*

Dated: 11. 7. 07

ANCA M. MARAS, M.D.

**FINDINGS OF FACT**

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

4           2.     Respondent is the holder of license number 13103 for the practice of  
5 allopathic medicine in the State of Arizona.

6           3.     The Board initiated case number MD-04-0567A after receiving notification of  
7 a malpractice lawsuit involving Respondent's care and treatment of a fifty-seven year-old  
8 male patient ("RB").

9           4.     In March 2000, RB sustained a spinal injury as a result of a fall down an  
10 elevator shaft during construction. RB subsequently underwent a decompressive  
11 laminectomy and an instrumented posterior fusion at an Illinois hospital. RB then returned  
12 to Arizona.

13          5.     The screws inserted in RB's spine began to bend and the fusion failed within  
14 nine months of the initial surgery. On November 21, 2000, two orthopaedic surgeons  
15 recommended RB undergo an anterior corpectomy and strut reconstruction/fusion in order  
16 to support the spine and decompress the bone.

17          6.     On December 5, 2000, RB underwent surgery at the hospital under the care  
18 of the orthopaedic surgeons and Respondent, an anesthesiologist. The surgery began at  
19 8:24 a.m. RB suffered a large and rapid amount of blood loss at approximately 12:00. By  
20 12:30, RB had been given 11 liters of fluid, which is treatment for hypotension; however,  
21 Respondent documented normal blood pressures and pulses.

22          7.     The nursing record shows at 12:55, there was a decrease in RB's blood  
23 pressure and an increase in his pulse during the surgery, which is consistent with  
24 hypotension. However, Respondent documented normal vital signs, an increase in blood  
25 pressure and a decrease in heart rate. By 2:30 p.m., Respondent gave RB 24 liters of

1 volume replacement to maintain his blood pressure; however, Respondent did not obtain  
2 laboratory tests to check RB's blood loss, including hemoglobin and hematocrit levels. By  
3 3:00 p.m., Respondent gave RB 27 liters of volume replacement, but she did not obtain  
4 laboratory tests to check RB's blood loss until 4:10 p.m. At approximately 5:00 p.m., RB  
5 had bradycardia, suffered cardiac arrest and died.

6 8. Although in the medical malpractice lawsuit the jury did not find Respondent  
7 responsible for the death of patient RB, the Board medical consultant who reviewed the  
8 case has opined that Respondent did not meet the standard of care in her treatment of  
9 RB.

10 9. The standard of care requires a physician to timely obtain appropriate  
11 laboratory tests.

12 10. Respondent deviated from the standard of care because she failed to timely  
13 obtain appropriate laboratory tests for RB until after RB had received 27 liters of volume  
14 replacement.

15 11. The standard of care requires a physician to adequately monitor, assess and  
16 treat the patient's blood loss and hemoglobin and hematocrit levels.

17 12. Respondent deviated from the standard of care because she failed to  
18 adequately monitor and treat RB's blood loss and assess his hemoglobin and hematocrit  
19 levels.

20 13. Respondent's failure to adequately assess RB's blood loss through  
21 appropriate laboratory testing could have resulted in RB bleeding to death.

22 14. A physician is required to maintain adequate legible medical records  
23 containing, at a minimum, sufficient information to identify the patient, support the  
24 diagnosis, justify the treatment, accurately document the results, indicate advice and  
25 cautionary warnings provided to the patient and provide sufficient information for another

1 practitioner to assume continuity of the patient's care at any point in the course of  
2 treatment. A.R.S. § 32-1401(2). Respondent's records were inadequate because she  
3 failed to maintain accurate medical records. Although Respondent treated RB with  
4 treatment consistent with hypotension, she documented RB had normal interoperative  
5 blood pressures and pulses.

#### 6 CONCLUSIONS OF LAW

7 1. The Board possesses jurisdiction over the subject matter hereof and over  
8 Respondent.

9 2. The conduct and circumstances described above constitute unprofessional  
10 conduct pursuant to A.R.S. §32-1401(27)(e) (“[f]ailing or refusing to maintain adequate  
11 records on a patient.”) and A.R.S. §32-1401(27)(q) (“[a]ny conduct or practice that is or  
12 might be harmful or dangerous to the health of the patient or the public.”).

#### 13 ORDER

14 IT IS HEREBY ORDERED THAT:

15 1. Respondent is issued a Decree of Censure for failure to timely obtain  
16 appropriate laboratory tests, for failure to adequately monitor and treat a patient's blood  
17 loss and assess the patient's hemoglobin and hematocrit levels and for failure to maintain  
18 adequate medical records.

19 2. Respondent is placed on Probation for **five years** with the following terms  
20 and conditions:

21 A. Respondent shall submit quarterly declarations under penalty of perjury on  
22 forms provided by the Board, stating whether there has been compliance with all  
23 conditions of probation. The declarations shall be submitted on or before the 15th of  
24 March, June, September and December of each year, beginning on or before March,  
25 2008.

1 B. Respondent shall practice in a group setting that allows effective consultation  
2 when needed for patient safety.

3 C. Respondent shall be subjected to random periodic chart reviews to assure  
4 adequate documentation.

5 D. **Obey All Laws.** Respondent shall obey all state, federal and local laws, and  
6 all rules governing the practice of medicine in Arizona.

7 E. **Tolling.** In the event Respondent should leave Arizona to reside or practice  
8 outside the State or for any reason should Respondent stop practicing medicine in  
9 Arizona, Respondent shall notify the Executive Director in writing within ten days of  
10 departure and return or the dates of non-practice within Arizona. Non-practice is defined  
11 as any period of time exceeding thirty days during which Respondent is not engaging in  
12 the practice of medicine. Periods of temporary or permanent residence or practice outside  
13 Arizona or of non-practice within Arizona, will not apply to the reduction of the probationary  
14 period.

15 3. This Order is the final disposition of case number MD-04-0567A.  
16 DATED AND EFFECTIVE this 16<sup>th</sup> day of December 2007.

18 ARIZONA MEDICAL BOARD

20 (SEAL)

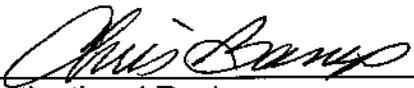
21 By: Amanda Diehl  
22 Amanda Diehl  
23 <sup>AO</sup> Interim Executive Director  
24 Deputy  
25

1 ORIGINAL of the foregoing filed  
2 this 14<sup>th</sup> day of December 2007 with:

3 Arizona Medical Board  
4 9545 E. Doubletree Ranch Road  
5 Scottsdale, AZ 85258

6 EXECUTED COPY of the foregoing mailed  
7 this 14<sup>th</sup> day of December 2007 to:

8 Anca M. Maras, M.D.  
9 Address of Record

10   
11 \_\_\_\_\_  
12 Investigational Review  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25