

1 **BEFORE THE BOARD OF MEDICAL EXAMINERS**
2 **OF THE STATE OF NEVADA**

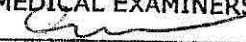
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5 **In The Matter of Charges and**)
6 **Complaint Against**)
7 **RENEE L. NGO, M.D.,**)
8 **Respondent.**)

Case No. 12-28979-1

FILED

JUL 18 2012

NEVADA STATE BOARD OF
MEDICAL EXAMINERS
By: 

10 **COMPLAINT**

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12 The Investigative Committee of the Nevada State Board of Medical Examiners "Board",
13 composed of Benjamin J. Rodriguez, M.D., Beverly A. Neyland, M.D., and
14 Ms. Donna A. Ruthe, by and through Edward O. Cousineau, J.D., Deputy Executive Director for the
15 Board and counsel for the Investigative Committee, having a reasonable basis to believe that
16 Renee L. Ngo, M.D., hereinafter referred to as "Respondent," has engaged in conduct that is grounds
17 for discipline pursuant to the provisions of Nevada Revised Statutes (NRS) Chapter 630, hereby
18 alleges, charges and complains against said Respondent as follows:

19 1. Respondent was licensed in active status to practice medicine in the state of Nevada
20 on April 21, 2004 by the Board pursuant to the provisions of Chapter 630 of the
21 NRS, and at all times addressed herein was so licensed.

22 2. Respondent's indicated specialty with the Board is Psychiatry, with his practice
23 address located in Las Vegas.

24 3. The true identities of Patients A, B, C, D, and E, who are the subject of the
25 underlying allegations, are not disclosed herein to protect their privacy, but are disclosed in the
26 Patient Designation served on Respondent along with a copy of this Complaint.

27 4. Previous to the preparation of this Complaint, the Board solicited the services of

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1 an independent medical expert to review the medical records of several patients treated by
2 Respondent. The record review included those of Patients A, B, C, D, and E.

3 5. In May of 2010, Patient A presented to Respondent with complaints of mild
4 depression. After Patient A's evaluation, Respondent diagnosed Patient A with Bipolar Disorder.
5 It is the opinion of the aforementioned independent medical expert that Respondent's medical
6 documentation is substantially lacking and fails to support his diagnosis of Patient A, and that
7 those medical records that were created by Respondent are nearly or entirely illegible in nature.

8 6. In August of 2010, Patient B presented to Respondent for a psychological
9 evaluation. After Patient B's evaluation, Respondent diagnosed Patient B with Major Depressive
10 Disorder and Post-Traumatic Stress Disorder (PTSD). It is the opinion of the aforementioned
11 independent medical expert that Respondent's medical documentation is substantially lacking and
12 fails to support his diagnosis of Major Depressive Disorder for Patient B.

13 7. From approximately October of 2008 to January of 2011, Patient C was treated by
14 Respondent for Bipolar Disorder. It is the opinion of the aforementioned independent medical
15 expert that during this timeframe, Respondent created minimal medical records related to the care
16 and treatment of Patient C, and those medical records that were created by Respondent are nearly
17 or entirely illegible in nature.

18 8. From approximately August of 2008 to August of 2010, Patient D was treated by
19 Respondent for depression and PTSD. It is the opinion of the aforementioned independent
20 medical expert that during this time frame, Respondent created minimal medical records related to
21 the care and treatment of Patient D, and those medical records that were created by Respondent are
22 nearly or entirely illegible in nature.

23 9. From February of 2006 to January of 2011, Patient E was treated by Respondent for
24 anxiety and depression. It is the opinion of the aforementioned independent medical expert that
25 during this time frame, Respondent created minimal medical records related to the care and
26 treatment of Patient E, and those medical records that were created by Respondent are nearly or
27 entirely illegible in nature.

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1 COUNT I

2 10. All of the above paragraphs are incorporated by reference as though fully set forth
3 herein.

4 11. Section 630.3062(1) of the NRS provides that failure to maintain timely, legible,
5 accurate and complete medical records relating to the diagnosis, treatment and care of a patient is
6 grounds for initiating disciplinary action.

7 12. Respondent violated NRS 630.3062(1) when he failed to maintain adequate and
8 legible medical records related to Patient A and is subject to discipline by the Nevada State Board of
9 Medical Examiners as provided in NRS 630.352.

10 COUNT II

11 13. All of the above paragraphs are incorporated by reference as though fully set forth
12 herein.

13 14. Section 630.3062(1) of the NRS provides that failure to maintain timely, legible,
14 accurate and complete medical records relating to the diagnosis, treatment and care of a patient is
15 grounds for initiating disciplinary action.

16 15. Respondent violated NRS 630.3062(1) when he failed to maintain adequate medical
17 records related to Patient B and is subject to discipline by the Nevada State Board of Medical
18 Examiners as provided in NRS 630.352.

19 COUNT III

20 16. All of the above paragraphs are incorporated by reference as though fully set forth
21 herein.

22 17. Section 630.3062(1) of the NRS provides that failure to maintain timely, legible,
23 accurate and complete medical records relating to the diagnosis, treatment and care of a patient is
24 grounds for initiating disciplinary action.

25 18. Respondent violated NRS 630.3062(1) when he failed to maintain legible medical
26 records related to Patient C and is subject to discipline by the Nevada State Board of Medical
27 Examiners as provided in NRS 630.352.

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