

**STATE OF TENNESSEE
DEPARTMENT OF HEALTH**

IN THE MATTER OF:)	
)	BEFORE THE TENNESSEE BOARD
CARLOS A. SALGUEIRO, M.D.)	BOARD OF MEDICAL EXAMINERS
RESPONDENT)	
)	CASE NO. 201101649
BLYTHEVILLE, ARKANSAS)	
TENNESSEE LICENSE NO. 28358)	

CONSENT ORDER

Comes now the Division of Health Related Boards of the Tennessee Department of Health ("State"), by and through the Office of General Counsel, and Respondent, Carlos A. Salgueiro, ("Respondent"), and respectfully moves the Tennessee Board of Medical Examiners ("Board") for approval of this Consent Order effecting Respondent's medical license in the State of Tennessee.

The Board is responsible for the regulation and supervision of medical professionals licensed to practice in the State of Tennessee. *See Tennessee Medical Practice Act, Tennessee Code Annotated sections ("TENN. CODE ANN. §§") 63-6-101, et seq.* It is the policy of the Board to require strict compliance with the laws of this State, and to apply the laws so as to preserve the quality of medical care provided in Tennessee. It is the duty and responsibility of the Board to enforce the Tennessee Medical Practice Act in such a manner as to promote and protect the public health, safety and welfare in every practicable way, including disciplining individuals who violate the provisions of TENN. CODE ANN. § 63-6-101, *et seq.* or the Rules and Regulations promulgated by the Board and recorded in the Official Compilation Rules and Regulations of the State of Tennessee ("TENN. COMP. R. & REGS.")

Respondent, by his signature to this Consent Order, waives the right to a contested case hearing and any and all rights to judicial review in this matter. Respondent agrees that presentation to and consideration of this Consent Order by the Board for ratification and all matters divulged during that process shall not constitute unfair disclosure such that the Board or any of its members shall be prejudiced to the extent that requires their disqualification from hearing this matter should this Order not be ratified. Likewise, all matters, admissions and statements disclosed or exchanged during the attempted ratification process shall not be used against Respondent in any subsequent proceeding unless independently entered into evidence or introduced as admissions.

STIPULATIONS OF FACT

1. Respondent has been at all times pertinent hereto licensed by the Board as a medical doctor in the State of Tennessee, having been granted license number 28358 by the Board on August 9, 1996, which currently has an expiration date of November 30, 2012.
2. Respondent was reprimanded by the Missouri State Board of Registration for the Healing Arts for failure to provide a change of address notification within thirty (30) days of moving practice locations.
3. Respondent is subject to disciplinary action under TENN. CODE ANN. § 63-6-214 *et seq.* and TENN. COMP. R & REGS., 0880-2-.12, *et seq.*

GROUNDS FOR DISCIPLINE

The preceding Stipulations of Fact are sufficient to establish that Respondent has violated the following statutes or rules which are part of the Act, TENN. CODE ANN. § 63-6-101, *et seq.* for which disciplinary action before and by the Board is authorized:

4. The facts stipulated in paragraphs 2 through 3, *supra*, constitute a violation of TENN. CODE ANN. § 63-6-214(b)(20):

Disciplinary action against a person licensed to practice medicine by another state or territory of the United States for any acts or omissions that would constitute grounds for discipline of a person licensed in this state.

POLICY STATEMENT

The Tennessee Board of Medical Examiners takes the following action in order to protect the health, safety and welfare of the citizens of the State of Tennessee and ensure that the public confidence in the integrity of the medical profession is preserved.

ORDER

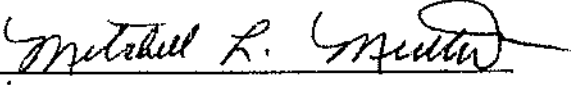
NOW THEREFORE, Respondent, for the purpose of avoiding further administrative action with respect to this cause, agrees to the following:

5. The Tennessee medical license of Carlos A. Salgueiro, M.D., license number 28358, is hereby **REPRIMANDEND** effective the date of entry of this Consent Order.
6. COSTS: Respondent shall pay, pursuant to TENN. CODE ANN. § 63-6-214(k) and Rule 0880-2-.12(1)(j) of the *Official Compilation Rules and Regulations of the State of*

Tennessee, the actual and reasonable costs of prosecuting this case to the extent allowed by law, including all costs assessed by the Office of Investigations, Secretary of State, Administrative Procedures Division as well as the Office of General Counsel. These costs will be established by an Affidavit of Costs prepared and filed by counsel for the Department. The maximum amount for the assessment of costs shall be one thousand dollars (\$1,000.00). Any and all costs shall be paid in full within thirty (30) days from the issuance of the Affidavit of Costs by submitting a **certified check, cashier's check, or money order** payable to the **State of Tennessee**, which shall be mailed or delivered to: **Disciplinary Coordinator, The Division of Health Related Boards, Tennessee Department of Health, 227 French Landing, Suite 201, Heritage Place Metro Center, Nashville, Tennessee 37243**. A notation shall be placed on said check that it is payable for the costs of **CARLOS A. SALGUEIRO, COMPLAINT NO. 201101649**.

7. Respondent understands that this is a formal disciplinary action and will be reported to the Health Integrity and Protection Data Bank (H.I.P.D.B.) and/or similar agency.

This **CONSENT ORDER** was approved by a majority of a quorum of the Tennessee Board of Medical Examiners at a public meeting of the Board and signed this 5th day of Nov, 2011.

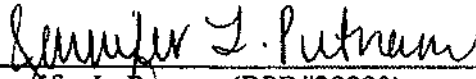

Chairperson
Tennessee Board of Medical Examiners

APPROVED FOR ENTRY:



Carlos A. Salgueiro
RESPONDENT
P. O. Box 305
Blytheville, Arkansas 72316

09-27-2011
DATE



Jennifer L. Putnam (BPR#29890)
Assistant General Counsel
Office of General Counsel
Tennessee Department of Health
220 Athens Way, Suite 210
Nashville, Tennessee 37243
(615) 741-1611

11/10/11
DATE

CERTIFICATE OF SERVICE

The undersigned hereby certifies that a true and correct copy of this document has been served upon Respondent, Carlos A. Salgueiro, M.D., P.O. Box 305, Blytheville, Arkansas 72316 and 208 N. 5th Street, Blytheville Arkansas 72316, by delivering same in the United States Mail, Certified Number 7011 1150 0002 0998 8181 and 7011 1150 0002 0998 8198, return receipts requested, and United States First Class Postage Pre-Paid Mail, with sufficient postage thereon to reach its destination.

This 18TH day of November, 2011.

Jennifer L. Putnam
Jennifer L. Putnam
Assistant General Counsel