

**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
BOARD OF MEDICINE**

**IN RE:**

**REHANA A. HUSSAIN, M.D.**

**License No.: MD200128**

**Respondent:**

:  
:  
:  
:  
:  
:  
:  
:  
:

**CONSENT ORDER**

This matter comes before the District of Columbia Board of Medicine (the “Board” or “D.C. Board”) pursuant to the Health Occupations Revision Act (HORA). D.C. Official Code § 3-1201.01, *et seq.* (2009), authorizes the Board to regulate the practice of Medicine in the District of Columbia. The Board has broad jurisdiction to regulate the practice of medicine and to impose a variety of disciplinary sanctions upon a finding of a violation of the HORA. D.C. Official Code, § 3-1201.03; *Mannan v. District of Columbia Board of Medicine*, 558 A.2d 329, 333 (D.C.1989). The Council of the District of Columbia, in amending the HORA, “intended to strengthen enforcement of its licensing laws.” *Davidson v. District of Columbia Board of Medicine*, 562 A.2d 109, 113 (D.C.1989). And the HORA “was designed to ‘address modern advances and community needs *with the paramount consideration of protecting the public interest.*’” *Joseph v. District of Columbia Board of Medicine*, 587 A.2d 1085, 1088 (D.C.1991) (*quoting* Report of the D.C. Council on Consumer and Regulatory Affairs on Bill 6-317, at 7 (November 26, 1985)) (emphasis added by court).



## Background

Respondent has been licensed to practice medicine in the District of Columbia since November 16, 1994. Respondent is also licensed to practice in Maryland.

On December 30, 2013, the Maryland State Board of Physicians (the "Maryland Board") issued a Final Decision and Order suspending Respondent's license to practice medicine (with an immediate stay), and placing Respondent on probation for no less than three years, among other disciplinary sanctions. Respondent was disciplined by the Maryland Board for Respondent's failure to meet appropriate standards of care for the delivery of quality medical care and for failing to keep adequate medical records. The matter was brought to the Maryland Board's attention on behalf of "Patient A," a patient of Respondent's who committed suicide while under Respondent's care.

In its Final Decision and Order, the Maryland Board found that Respondent's violations of standard of quality care were numerous and included: 1) failure to develop a treatment plan and to utilize state-of-the-art psychopharmacology to stabilize the patient, whom Respondent diagnosed with multiple mental and emotional disorders, including bipolar disorder, schizoaffective disorder, panic disorder and psychosis; 2) use of Cogentin with Zyprexa, an atypical antipsychotic with a low risk of causing extrapyramidal symptoms ("EPS"); 3) failure to consider Cogentin as a possible culprit or exacerbating factor in Patient A's recurring gastrointestinal complaints and to explore its potential discontinuation in an attempt to alleviate the symptoms; 4) passive medication management of Patient A, generally, despite Patient A's noncompliance with the psychiatric medication regimen; and 5) failure to timely and adequately address Patient A's apparent alcohol abuse and to conduct appropriate, intermittent suicide risk

assessments in order to evaluate the patient's risk for suicide. The Maryland Board also noted that its determinations would be the same no matter whether Patient A committed suicide or not.

The Maryland Board further determined that shortcomings in Respondent's recordkeeping included: 1) the presence of Patient A's mother during treatment sessions; 2) a clear medication record reflecting the patient's medication history; 3) a rationale for the multiple modifications made to Patient A's medication regimen; 4) when medications were discontinued, increased, or decreased; 5) that Respondent prescribed Topamax and Trileptal in 2003; 6) prescriptions by other physicians, for example, Prednisone; 7) Patient A's medical and hospital care by other providers for other clinical problems; and 8) Respondent's referral of the patient for neurological consultation. The Maryland Board found that Respondent's failure to keep adequate medical records was substandard, so much so that the inadequacies, in and of themselves, violated the standard of quality of care.

Following the issuance of the Final Decision and Order, the Maryland Board, by an order dated May 21, 2014, terminated the stayed suspension that was originally imposed in the Final Decision and Order. In terminating the stayed suspension, the Maryland Board continued Respondent's probation for a minimum period of three years. Accordingly, the Board takes reciprocal action based on the sanctions imposed in the May 21, 2014 order.

The instances of unsatisfactory standard of care and failure to keep adequate medical records for which Respondent was disciplined by the Maryland Board constitute conduct that may be sanctioned under the HORA, as well. *See* D.C. Official Code § 3-1205.14(a)(3), (24).

On March 26, 2014, the D. C. Board considered the Maryland Board's action against Respondent's Maryland license. The D.C. Board determined that Respondent's conduct in the instances of failure to conform to standards of care and failure to adequately keep records

warranted reciprocal imposition of a sanction against Respondent's District of Columbia license to practice medicine. On June 25, 2014, the Board further considered Respondent's request to terminate the stayed suspension that was originally imposed by the Maryland Board.

Accordingly, the D.C. Board has determined to issue the instant Consent Order to Respondent in lieu of formally issuing a Notice of Intent to Take Disciplinary Action under 17 DCMR §§ 4100 *et seq.*

### Conclusions of Law

The D.C. Board is authorized under the HORA to take reciprocal action when a Respondent has been disciplined by a licensing authority of another jurisdiction for conduct that would be grounds for Board action. D.C. Official Code § 3-1205.14(a)(3). The HORA provides, in pertinent part,

Each board, subject to the right of a hearing as provided by this subchapter, on an affirmative vote of a quorum of its appointed members may take one or more of the disciplinary actions provided in subsection (c) of this section against any applicant for a license, registration, or certification, an applicant to establish or operate a school of nursing or nursing program, or a person permitted by this subchapter to practice a health occupation regulated by the board in the District who is **disciplined by a licensing or disciplinary authority...of any jurisdiction for conduct that would be grounds for disciplinary action under this section.** (emphasis added).

D.C. Official Code § 3-1205.14(a)(3).

Respondent's failure to conform to standards of care and prevailing practice is in violation of the District of Columbia Municipal Regulations ("DCMR"). Title 17 DCMR § 4612.8 provides that "A licensed physician shall conform to the prevailing standards of acceptable medical practice as determined by the Board." Furthermore, the HORA provides, in pertinent part:

Each board, subject to the right of a hearing as provided by this subchapter, on an affirmative vote of a quorum of its appointed members may take one or more of

the disciplinary actions...against any person permitted by this subchapter to practice a health occupation regulated by the board in the District who **violates any provision of this chapter or rules and regulations issued pursuant to this chapter.** (emphasis added)

D.C. Official Code §3-1205.14(a)(24). Thus, Respondent's contravention of 17 DCMR § 4612.8 violates D.C. Official Code §3-1205.14(a)(24), as well.

Respondent's failure to keep adequate records is in violation of the HORA, which provides, in pertinent part:

Each board, subject to the right of a hearing as provided by this subchapter, on an affirmative vote of a quorum of its appointed members may take one or more of the disciplinary actions...against any person permitted by this subchapter to practice a health occupation regulated by the board in the District who **fails to keep adequate medical records, as determined by a review of a board.** (emphasis added)

D.C. Official Code §3-1205.14(37). Respondent's failure to adequately keep records is also in violation of 17 DCRM § 4616.14, which requires that a physician shall keep accurate and complete records that include medical history and physical examination; diagnostic, therapeutic, and laboratory results; treatment objectives; treatments; and medications, including date, type, dosage, and quantity prescribed. Thus, Respondent's contravention of 17 DCMR 4616.14 also violates D.C. Official Code §3-1205.14(a)(24), as well.

Accordingly, Respondent's conduct and performance provided the D.C. Board with a basis in law and fact to warrant reciprocal action.

### **ORDER**

Based upon the foregoing, it is by the District of Columbia Board of Medicine hereby, **ORDERED**, that Respondent shall be placed on **PROBATION** for a MINIMUM period of **THREE YEARS**, to commence on December 30, 2013, and to be terminated at such time as Respondent's probation with the Maryland Board is terminated; and it is further

**ORDERED**, that Respondent shall comply with all terms of the Maryland Order dated May 21, 2014, and a failure to comply with any term of the Maryland Order dated May 21, 2014, shall be a violation of this Consent Order; and it is further

**ORDERED**, that, within nine (9) months of signing this Consent Order, Respondent shall submit proof of having completed three (3) Board-approved continuing medical education (“CME”) courses as follows:

- 1) One (1) CME course in appropriate and state-of-the-art psychopharmacology;
- 2) One (1) CME course in proper methods for evaluating and treating potentially suicidal patients;
- 3) One (1) CME course in medical recordkeeping;
- 4) CME courses completed in satisfaction of Respondent’s Final Decision and Order issued by the Maryland Board on December 30, 2013 may be submitted to satisfy the CME requirement of this Consent Order;
- 5) All CME courses submitted in satisfaction of this Consent Order shall comply with the requirements of 17 DCMR § 4607, which shall have been obtained not earlier than January 1, 2013, and of which no portion shall be counted towards Respondent’s fulfillment of continuing medical education credits for license renewal period ending December 31, 2014 or any subsequent license renewal period; and
- 6) Proof of CME credit hours shall be submitted to Lisa Robinson, Licensing Specialist, Board of Medicine, 899 North Capitol Street, NE, 2<sup>nd</sup> Floor, Washington, D.C. 20002; and it is further

**ORDERED**, that one (1) year after Respondent satisfactorily completes the requisite CME courses, the Board, at its discretion, shall perform a chart review, and if indicated, a peer review of Respondent's practice; and it is further;

**ORDERED**, that Respondent shall comply with all laws, rules, and regulations of the District of Columbia; and it is further

**ORDERED**, that if Respondent fails to satisfactorily fulfill the terms of this Consent Order the D.C. Board may issue a notice of intent to take formal disciplinary action against Respondent's license.

DISTRICT OF COLUMBIA BOARD OF MEDICINE

25 Feb 2015  
Date

Janis M. Orlowski (Vice chair)  
By: Janis M. Orlowski, M.D., M.A.C.P.  
For Chairperson

**CONSENT OF RESPONDENT**

- My signature on the foregoing Consent Order signifies my acceptance of the terms and conditions of the Consent Order and my agreement to be bound by its provisions. Rh (initial)
- I acknowledge the validity of this Consent Order, as if made after a hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my behalf, and to all other substantive and procedural due process protections provided by the laws of the District of Columbia and the United States of America. Rh (initial)
- I expressly acknowledge that by signing this Consent Order, I am voluntarily waiving my right to require the Board to charge me through a notice of intent to take disciplinary action with a violation of this agreement and to require the government to prove such violation by a preponderance of the evidence before suspending my license based upon the failure to satisfactorily fulfill the terms of the Consent Order. Rh (initial)

• I also expressly acknowledge by signing this Consent Order, I am waiving my right to confront witnesses, give testimony, to call witnesses on my behalf, and to other substantive and procedural due process protections provided by the laws of the District of Columbia and the United States of America. Rh. (initial)

• I further expressly acknowledge that by signing this Consent Order, I am waiving my right to appeal this Consent Order, as well as waiving any and all rights, whatsoever, I would have to challenge or appeal that Board's decision to suspend my license based on the failure to satisfactorily fulfill the terms of the Consent Order. Rh. (initial)

• I acknowledge that in the event that the Board suspends my license based on the failure to satisfactorily fulfill the terms of the Consent Order, my sole remedy and recourse will be to respond within the time period set forth in this Consent Order with proof of my compliance and that if I fail to do so, my sole remedy and recourse will be to comply with the terms of this Consent Order to the satisfaction of the Board. Rh. (initial)

• I have had an opportunity to review this document and to consult with my own legal counsel. I choose willingly to sign this Consent Order, and I understand its meaning and effect. Rh. (initial)

2/16/2015  
Date

Rehana A. Hussain, M.D.  
Rehana A. Hussain, M.D., License No. MD21028

Sworn to and subscribed before me this 16 day of Feb, 2015.

Amrik Singh Nagi  
Notary Public  
My Commission Expires: **AMRIK SINGH NAGI**  
**NOTARY PUBLIC STATE OF MARYLAND**  
My Commission Expires September 17, 2016

**This Consent Order shall be deemed a public document and shall be distributed as appropriate.**