

**STATE OF RHODE ISLAND
DEPARTMENT OF HEALTH
BOARD OF MEDICAL LICENSURE AND DISCIPLINE**

**IN THE MATTER OF:
VINCENT J. ZIZZA, D.O.
License Number DO00487
BMLD Case Numbers C12-720, C13-764A, C13-601, C13-811**

CONSENT ORDER

Vincent J. Zizza, D.O. (hereinafter "Respondent") is licensed as a physician in Rhode Island. The Board of Medical Licensure and Discipline (hereinafter the "Board") through its investigating committee voted after review of the complaints to find that Respondent should be subject to this Consent Order and the Board makes the following:

FINDINGS OF FACT

1. Respondent is a licensed physician in the State of Rhode Island and was issued his license on February 11, 1998. He graduated from the University of New England College of Osteopathic Medicine in 1992. He was board certified in urology in 2007, and he has hospital privileges at Kent County, Roger Williams, Miriam and Saint Joseph's Hospitals. His office is located at Tri-County Urology, Suite 301, 176 Toll Gate Road, Warwick, Rhode Island.
2. Regarding BMLD Complaint Number C12-720, the patient had a large bladder mass that was difficult to completely resect because of size and location. Multiple modalities were used to treat the tumor without success. The Respondent ultimately offered a radical cystectomy. The patient did seek out another opinion from a Boston urologist, who ultimately did resect the tumor endoscopically.

Patient did have recurrent tumor even while being treated by the Boston urologist despite a multimodal approach using mitomycin immediately post-operative and then BCG/Intron as an outpatient.

3. The Board consulted with a urologist to perform an expert review of BMLD Complaint Number C12-720, and the expert noted that Respondent recognized that residual disease remained after the first surgery so he performed a second surgery. The expert said Respondent's operation reports "do not clearly indicate tumor location or mention involvement of the trigone but suggest technically difficult resection." Surgical pathology reported "low grade, superficially invasive" T1. Tumor was not involved in the muscle specimen.
4. In Respondent's support, said the Board's expert, "the surgical pathology results may have misled him and, due to multiple factors, this patient may eventually come to cystectomy" but the management of this case did not "follow the recommended sequence of bladder cancer care."
5. Regarding BMLD Complaint Number C12-720, Respondent is in civil violation of Rhode Island General Laws § 5-37-5.1(19) for failure to conform to the minimum standards of acceptable and prevailing practice in Respondent's area of expertise.
6. Regarding BMLD Complaint Number C13-764A, Patient B, *alias*, is a female who was appropriately diagnosed on February 23, 2012, with a six (6) centimeter left renal mass pre-operatively by CT scan, which was noted as an incidental finding while patient was being evaluated for pancreatitis. Patient was appropriately scheduled for left radical nephrectomy on March 20, 2012.

7. On March 20, 2012, Patient B signed consent for anesthesia and procedure. The consent form is a template which does not document risk/benefit discussion regarding the proposed procedure, nor evidence of patient understanding of the procedure or of risk and benefits.
8. Patient B's left kidney was removed as planned. Soon into the procedure, it became evident that an injury to the spleen occurred, which is a known complication. Patient B's complication was recognized promptly and appropriately treated by Respondent and a surgical assistant.
9. Respondent's post-operative notes, specifically POD#1 and POD#2, are sparse and lack the minimally required medical documentation to explain patient's hospital course, complication, general assessment and plan.
10. Regarding BMLD Complaint Number C13-764A, Respondent is in civil violation of Rhode Island General Laws § 5-37-5.1(19) for failure to conform to the minimum standards of acceptable and prevailing practice in Respondent's area of expertise.
11. Regarding BMLD Complaint Number C13-601, the patient had a right radical nephrectomy for large renal mass. The appropriate preoperative measures were taken including using a cell saver. The tumor was adhered to the liver and some trauma was encountered during the nephrectomy and patient did have significant blood loss. After consideration with two anesthesiologists, Respondent decided to transfer patient to Rhode Island Hospital (RIH) for higher level of care. Respondent did contact and arrange the transfer to RIH. Initially the patient was on pressors to maintain blood pressure. However about an hour prior to transfer

the pressors were weaned. The Respondent did leave prior to the ultimate transfer, but did visit patient several times in recovery room and spoke with family and had recent contact with the accepting physician at Rhode Island Hospital. The patient was stable maintaining own blood pressure and alert prior to Respondent leaving hospital.

12. Regarding BMLD Complaint Number C13-601, Respondent is in civil violation of Rhode Island General Laws § 5-37-5.1(19) for failure to conform to the minimum standards of acceptable and prevailing practice in Respondent's area of expertise.
13. Regarding BMLD Complaint Number C13-811, Patient D, *alias*, is a male patient with a history of hematuria [red blood cells in urine]. Respondent sent Patient D for imaging that revealed a three (3) centimeter mass at the posterior wall of the bladder. In April of 2012, Patient D had transurethral resection [surgical removal through the urethra] of the mass.
14. After the surgery, Respondent investigated the possibility of performing a bladder perforation because during surgery there had been question of a perforation in the bladder's posterior wall. Post-operative evaluation by Respondent showed an extra-peritoneal perforation and not an intra-peritoneal perforation. Patient subsequently recovered and was discharged home after an appropriate time of healing.
15. It was not clear from the informed consent form or medical record that Patient D was adequately counseled regarding risks, benefits and complications of proposed procedures.

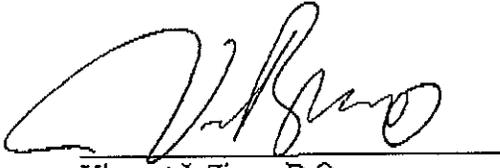
16. Regarding BMLD Complaint Number C13-811, Respondent is in civil violation of Rhode Island General Laws § 5-37-5.1(19) for failure to conform to the minimum standards of acceptable and prevailing practice in Respondent's area of expertise.

Based on the foregoing, the parties agree as follows:

1. Respondent admits to the jurisdiction of the Board;
2. Respondent has reviewed this Consent Order and understands that it is subject to final approval of the Board; and this Consent Order is not binding on Respondent until final ratification by the Board;
3. If ratified by the Board, Respondent hereby acknowledges and waives:
 - a. The right to appear personally or by counsel or both before the Board;
 - b. The right to produce witnesses and evidence on his behalf at a hearing;
 - c. The right to cross examine witnesses;
 - d. The right to have subpoenas issued by the Board;
 - e. The right to further procedural steps except for those specifically contained herein;
 - f. Any and all rights of appeal of this Consent Order; and
 - g. Any objection to the fact that this Consent Order will be presented to the Board for consideration and review.
3. Respondent hereby agrees to this Reprimand by the Board based on the findings above.

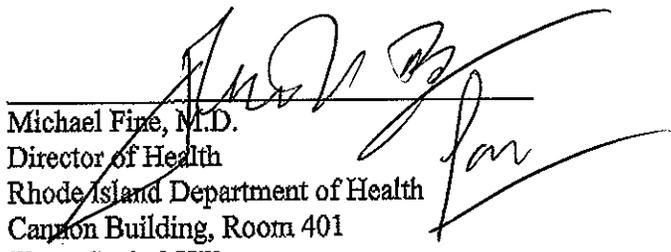
4. Respondent agrees to pay an administrative fee to the Board for costs associated with investigating this complaint. Respondent shall submit to the Board within sixty (60) days a check made payable to the Rhode Island General Treasury for the amount of \$2800.00.
5. Respondent shall within next twelve months attend and complete eight hours of Board-approved continuing medical education in cancer diagnosis in addition to the regular hours required for renewal of his physician license.
6. Respondent shall attend and complete Board-approved course in medical recordkeeping within the next six months.
7. Respondent shall have a Board-approved monitor review a random sample of ten charts per quarter and have the monitor report any concerns to the Board within thirty days of the end of each quarter. This monitoring shall occur for one year.
8. In the event that any conditions of this Consent Order are violated after it is signed and accepted, the Director of the Department of Health shall have the discretion to impose further disciplinary action, including summarily suspending the Respondent's license to practice medicine in the State of Rhode Island. If the Director suspends such license, Respondent shall be given notice and shall have the right to request an administrative hearing within twenty (20) days of the suspension. The Director of the Department of Health shall also have the discretion to request an administrative hearing after notice to Respondent of any violation of this Consent Order. The Administrative Hearing Officer may suspend Respondent's license for the remainder of Respondent's probationary period if the alleged violation is proven by a preponderance of evidence.

Signed this 8th day of July, 2014.



Vincent J. Zizza, D.O.

Ratified by the Board of Medical Licensure and Discipline on the 9 day of July, 2014.



Michael Fine, M.D.
Director of Health
Rhode Island Department of Health
Cannon Building, Room 401
Three Capitol Hill
Providence, RI 02903
Tel. (401) 222-2231
Fax (401) 222-6548