

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
D E P A R T M E N T O F H E A L T H

Safe and Healthy Lives in Safe and Healthy Communities

**BOARD OF MEDICAL LICENSURE AND
DISCIPLINE**

No. C04-076

**IN THE MATTER OF
JASON A. BERSTEIN, M.D.
License Number MD 7620**

Consent Order

Pursuant to R.I. Gen. Laws §5-37-5.2, 1956, as amended, (2002 Reenactment) a notification was received by the Board of Medical Licensure and Discipline from Woman and Infants hospital regarding the resignation from staff of Jason A. Berstein, M.D. (“Respondent”). This matter was referred to an Investigating Committee of the board for review and recommendation. The following are findings of fact and conclusions of law:

FINDINGS OF FACTS AND CONCLUSIONS OF LAW

1. The Respondent is a physician who has been licensed to practice medicine in Rhode Island since 1989. He practices in the specialty of Obstetrics and Gynecology and has been Board Certified since 1992. He is a graduate of Brown Medical School.
2. The Woman and Infants Hospital notified the Board that the Respondent had resigned his clinical privileges on November 12, 2003 in order to avoid “corrective action”.

3. The Division of Facilities Regulation of the Department of Health undertook an investigation of the facts and circumstances surrounding the resignation and found the following: A 33 year-old woman was admitted to the hospital for evaluation of a six month history of abdominal pain and excessive uterine bleeding not caused by menstruation. A previous diagnostic evaluation revealed “pelvic adhesions with the uterus adherent to the anterior abdominal wall.” A hysterectomy and bilateral oophorectomy was undertaken by the Respondent and another Obstetrician.
4. The operative report documented an estimated blood loss of 1000cc (The average for an operation of this type is approximately 79cc). At 8:10 pm in the evening, the patient’s blood pressure dropped to 80/50 and hemoglobin dropped to 7.4 g/dl and she appeared pale suggesting possible post-operative intra-peritoneal bleeding. A house officer assessed the patient and consulted with the Respondent who agreed that 2 units of packed red blood cells [PRBC] for transfusion and an intravenous fluids would be given. At 2:20 am, the house officer was called again due to the patient’s decreased urine output. At this time her blood pressure was 101/70 with a hemoglobin of 8.6. The patient was again given two units of PRBC and her hemoglobin increased to 10.4. The Respondent who planned to continue to monitor the input and output saw her.
5. Approximately 2 hours later, the patient’s hemoglobin was 7.8 and her blood pressure was 90/40-60. Respondent documented that the patient’s hemoglobin was stable and documented plans to continue to monitor.

6. Three hours later, another physician was called by the house officer because nursing had expressed concern over the patient's status. This evaluation revealed a diffusely tender and distended abdomen. The patient complained of pain upon inspiration. Her blood pressure was 40-100/40-70. She was stabilized emergently and then taken to surgery where she underwent an exploratory laparotomy. She was found to have 2500ccs of blood in the abdomen.
7. The Board finds that the Respondent failed to recognize and treat a postoperative hemorrhage in an appropriate and timely fashion. Further, the Respondent falsified documentation in the medical record indicating an examination that was not done with findings that were incorrect.
8. The Board finds the Respondent guilty of "unprofessional conduct" in violation of R.I.G.L. § 5-37-5.1(14) and (19) for making willful misrepresentations in treatments and failing to conform to the minimal standards of acceptable practice.

The parties agree as follows:

Respondent admits to the jurisdiction of the Board.

- (1) 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 in his behalf at a hearing;
 - c. The right to cross examine witnesses;
 - d. The right to have subpoenas issued by the Board;

