

RHODE ISLAND BOARD OF MEDICAL LICENSURE AND DISCIPLINE

IN THE MATTER OF:

Daniel N. Valicenti, MD

License No.: MD09387

Complaint No.: C23-0694

CONSENT ORDER

The Board of Medical Licensure and Discipline (“Board”) makes the following:

FINDINGS OF FACT

1. Daniel N. Valicenti, MD (“Respondent”) has been licensed to practice medicine in the State of Rhode Island since February 10, 1997.
2. At the time of the filing of the Complaint, Respondent was employed by the State of Rhode Island Department of Corrections at the Adult Correctional Institution (“ACI”) as a physician with a specialty in internal medicine.
3. On or about July 17, 2023, a Complaint was filed by a former inmate (“patient”) of the ACI alleging that Respondent neglected to appropriately manage the type and amount of various medications necessary to treat a medical condition known to exist with the patient.
4. The Board conducted an investigation and Respondent appeared before the Board’s Investigative Committee. The medical records indicate that at the time of his intake at the ACI on March 8, 2021, the patient, a chronic smoker, presented with a complex history of peripheral vascular disease. The patient had undergone a thromboembolectomy with an endovascular intervention shortly before his intake at the ACI. The medical profile and history demonstrated the need for close attention to the administration of anticoagulants to prevent reocclusion of his arteries. The medical records noted that the patient was on Lovenox at the time of his intake and that the medication was to continue while the patient’s prothrombin time-international normalized ratio (“INR”) remained subtherapeutic as the patient’s dose of

coumadin was adjusted. The patient had been undergoing weekly INR testing of his blood prior to incarceration. The medical records indicate that the patient was not receiving his Lovenox as had been prescribed prior to intake. The medical records further indicate that the patient remained at a subtherapeutic INR level for more than one month following his ACI intake.

5. During his appearance, Respondent explained that there were significant barriers to the delivery of medical care at the ACI at the time in question since it occurred during the height of the COVID pandemic, resulting in extreme difficulties in providing care in a correctional facility environment. Respondent also noted that referrals to specialists were adversely impacted by the pandemic. He indicated that medication dosing would ordinarily be conducted at the infirmary but due to the high risk of transmission of COVID-19, medications were provided directly to the prison population for self-administration. Extreme staffing shortages, including a reduction of available nurses, also increased the difficulty in managing the medication of prisoners. Respondent acknowledged that the patient had INR measurements during his first two weeks of incarceration that evinced an increased risk of acute thromboembolism. Respondent also stated that he was concerned with internal bleeding and therefore the Coumadin dosage was adjusted to avoid complications from major gastrointestinal bleeding.

6. Respondent also notes that the patient was sent to the ACI without his medications, and was apparently not actively taking Lovenox. Respondent was not the clinician who initially received the patient and implemented initial orders.

7. Based upon a review of the medical information, the Investigative Committee made a probable cause determination of a violation of R.I. Gen. Laws § 5-37-5.1(19) due to

Respondent's failure to manage the administration of anticoagulant medication necessary to achieve a therapeutic INR and to prevent recurrent arterial thrombosis and deep vein thrombosis.

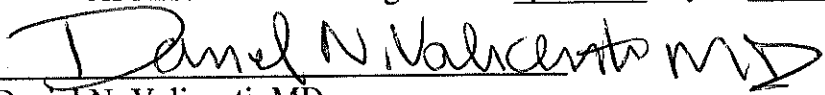
Based upon the foregoing, the Parties agree as follows:

1. Respondent agrees to remain under the jurisdiction of the Board.
2. Respondent understands that the Consent Order is subject to final approval by the Board and is not binding on Respondent until final ratification.
3. The parties acknowledge that this Consent Order does not represent a full adjudication on the merits.
4. 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 reported to the National Practitioner Data Bank and Federation of State Medical Boards and posted to the RI DOH public website.
5. Respondent is hereby issued an order of reprimand by the Board and shall pay administrative fees in the amount of \$1,100.00. No fines have been imposed. The administrative fees must be paid within six (6) months from the ratification of this Consent Order and shall be made payable to the Rhode Island General Treasurer, and delivered to the Rhode Island Department of Health, 3 Capitol Hill, Room 205, Providence, RI 02908, Attn. Jessica DeSanto. Respondent will send notice of compliance of this condition to

DOH.PRCompliance@health.ri.gov within thirty (30) days of submitting the above-referenced payment.

6. Respondent, at his own expense, shall complete and successfully pass a pre-approved course(s) by the Board on the topic of anticoagulation and the treatment of peripheral artery disease. The courses must be completed within six (6) months from the ratification of this Consent Order. Respondent shall be required to comply with the recommendations provided to him in writing from the course(s) described herein.

7. In the event that any term of this Consent Order is violated, after ratification and approval, the Board or its Director shall have the discretion to impose further disciplinary action pursuant to R.I. Gen. Laws §§ 5-37-5.1 through 5-37-6.3. If the Board or its Director imposes further disciplinary action, Respondent shall be given notice and shall have the right to request an administrative hearing within twenty (20) days of further discipline. The Board or its Director shall also have the discretion to request an administrative hearing after notice to Respondent of a violation of any term of this Consent Order. Any administrative hearings, whether initiated by the Board or the Respondent, shall be conducted in accordance with R.I. Gen. Laws §§ 5-37-5.1 through 5-37-6.3 or R.I. Gen. Laws §§ 5-37-8 and 42-35-14(c), the Rules and Regulations for the Licensure and Discipline of Physicians (216-RICR-40-05-1), the Rules and Regulations for Practices and Procedures Before the Rhode Island Department of Health (216-RICR-10-05-4), and applicable provisions of R.I. Gen. Laws Chapter 42-35-1 *et seq.*

As Assented to and Signed this 12th day of September 2024.

Daniel N. Valicenti, MD

Ratified by the Rhode Island Board of Medical Licensure and Discipline on the 9th
day of October 2024.

Staci A. Fischer MD

Staci A. Fischer, MD
Chief Administrative Officer
Rhode Island Board of Medical Licensure and Discipline