

RHODE ISLAND BOARD OF MEDICAL LICENSURE AND DISCIPLINE

IN THE MATTER OF:
Todd E. Handel, MD
License No.: MD10599
Complaint No.: C23-0032

CONSENT ORDER

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

FINDINGS OF FACT

1. Todd E. Handel, MD (“Respondent”) was issued a medical license by the State of Rhode Island on June 13, 2001.
2. On or about January 4, 2023, a Complaint was filed against Respondent in connection with notice received by the Board of a settlement payment made on behalf of Respondent regarding a malpractice claim. The claim related to an epidural steroid injection that was administered by Respondent on November 30, 2020, resulting in a spinal cord infarction.
3. On April 14, 2023, Respondent provided the Board with a response to the Complaint. Respondent likewise appeared before the Board on two occasions, first on September 27, 2023 and then on March 27, 2024.
4. The Board procured a copy of the relevant medical records pertaining to the procedure that was performed on November 30, 2020. Based upon a review of the medical records, as well as the information provided by Respondent, the Board’s Investigative Committee determined that the patient had previously received multiple epidural injections from Respondent for chronic pain, without incident. On November 30, 2020, the record indicates that upon injecting a particulate steroid, triamcinolone, the patient reported weakness in both legs and no sensation below the waist. Respondent held patient for post-procedure observation for 6

hours and, when no improvement in symptoms occurred, Respondent called 9-1-1 and had the patient transported to an emergency room for further assessment.

5. In his response, Respondent explained that the spinal cord infarction sustained by the patient is a rare but known complication that can result from the procedure that was performed. Respondent further explained that he observed the patient appropriately and closely during the 6-hour post-procedure period and, further, that the patient did not request to be transferred to the emergency room as he felt safe in the ambulatory area. When it was determined that the patient was not improving neurologically, Respondent called 9-1-1 to have the patient transported to an emergency room. Respondent also stated that had the patient been transported sooner to the emergency room, there would have been no medical benefit since there is no known treatment to remediate the spinal cord infarction. Respondent explained that it is common for a patient's legs to feel numb following a steroid injection and that it can take up to 4 – 6 hours for a patient's strength to return to their legs.

6. The Board reviewed the medical record and determined that there was documentation in the operative summary that, upon arrival in the recovery room after the procedure, the patient had "weakness in both legs" and "no sensation below the waist." There was no documentation concerning the patient offered and/or declining to be transported to an emergency room at an earlier time. The medical references only one set of vital signs taken of the patient and no neurological exam was performed during the 6-hour observation period following the procedure. The Investigative Committee concluded that the diagnosis of spinal cord infarction should have been apparent when the patient reported an immediate loss of sensation below the waist and an increased level of weakness in the legs; the patient should have been transported to an emergency room much sooner for evaluation. The Investigative

Committee found that the delay in in transferring the patient to an emergency room, and the lack of contemporaneous documentation of the patient's vital signs during recovery, formed the basis for its probable cause determination of unprofessional conduct, in violation of R.I. Gen. Laws § 5-37-5.1(19).

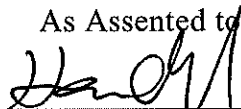
Based upon the foregoing, the Parties agree as follows:

1. Respondent admits to and agrees to remain under the jurisdiction of the Board.
2. The parties acknowledge that this Consent Order does not represent a full adjudication on the merits. Respondent agrees to the entry of this Consent Order and understands that it is subject to final approval of the Board and 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;
 - g) any objection to the fact that this Consent Order will be presented to the Hearing Committee for consideration and review; and
 - h) 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.
4. Respondent is hereby issued a reprimand by the Board as well as the imposition of administrative fees in the amount of \$1,100.00 and a fine in the amount of \$1,000.00. The

fees and fines 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.PRCCompliance@health.ri.gov within thirty (30) days of submitting the above-referenced payment.

5. In the event that any term of this Consent Order is violated, after ratification and approval, the Director of the Department of Health 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 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 Director of the Department of Health 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 Director 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 22nd day of October 2024.



Todd E. Handel, MD

Ratified by the Medical Licensure and Discipline Board on the 13th day of
November 2024.

Staci A. Inchausti