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## NEVADA STATE BOARD OF PHARMACY

985 Damonte Ranch Pkwy Ste 206 – Reno, NV 89521

## APPLICATION FOR AUTHORITY TO DISPENSE DRUGS

Registration Fee: \$300.00 (non-refundable money order or cashier's check only)

**This application is for physicians only. APRN's or PA's have their own dispensing applications.**New Dispensing Location ☒Address Change ☐ (Requires Fee and New Application)

Current Dispensing License # \_\_\_\_\_

Do you, as a dispensing practitioner or in conjunction only with other practitioners, wholly own your practice? Yes ☒ No ☐If no, please complete the Application for Non-Practitioner Dispensing Site Owners as required by NAC 639.742 (2).I will be dispensing ☒ controlled substances ☐ dangerous drugs or ☐ both. Must check a box.If you dispense controlled substances, a controlled substance registration and DEA is required for the address listed on this application.

First: Kimberly Middle: \_\_\_\_\_ Last: Adams Degree: MD

Practice Name (if any): Total Wellness Family Medicine

Nevada Address: 5225 S. Durango Dr., Las Vegas, NV 89113 Suite #: \_\_\_\_\_

(This must be a practicing Nevada address, we will not issue a license to a home address or to a PO Box only)

PO Box: \_\_\_\_\_ SS#: \_\_\_\_\_ Sex: ☐ M or ☒ F

E-mail address: kadams.lasvegas@yahoo.com

Date of Birth: \_\_\_\_\_

City: Las Vegas State: NV Zip Code: 89113

Nevada Work Telephone: 702-253-9355 Nevada Fax: 702-253-0009

Practitioner License Number: C510685 Specialty: Family Practice/Obesity

**You must be licensed with your respective BOARD before we will process this application.****Been diagnosed or treated for any mental illness, including alcohol or substance abuse, or physical condition that would impair your ability to perform the essential functions of your license?** Yes No ☐ ☒1. Been charged, arrested or convicted of a felony or misdemeanor in any state? ☐ ☒2. Been the subject of an administrative action whether completed or pending in any state? ☒ ☐3. Had your license subjected to any discipline for violation of pharmacy or drug laws in any state? ☒ ☐**If you marked YES to any of the numbered questions (1-3) above, include the following information & provide documentation:**

Board Administrative Action:	State	Date:	Case #:		
<b>Please see attached</b>		/ /			
Criminal Action:	State	Date:	Case #:	County	Court
		/ /			

The undersigned practitioner, licensed to practice his or her profession in the State of Nevada, applies to the Board of Pharmacy for authorization to dispense, for profit, controlled substances or dangerous drugs or both, to his or her own patients, in the manner allowed and as required by Nevada and Federal law.

I hereby certify that the answers given in this application are true and correct to the best of my knowledge. I understand that the approval of this application provides me alone with the authority to dispense controlled substance or dangerous drugs or both to my own patients at the address stated on the application. I further understand that I may not delegate this authority to any other person. I further agree to abide by all statutes, rules or regulations governing practitioner dispensing and understand that a violation of any such statute, rules or regulations may be grounds for suspension or revocation of this permit of authorization.

Original Signature, no copies or stamps accepted. Date

**Board Use Only**

Received:

Amount:

300.00

Entity#

**Include with the Application for Authority to Dispense Drugs****Practitioner Dispensing  
Controlled Substance Waiver Form**

Each dispensing practitioner must complete this form. Do not submit for a group.

Print Name: KIMBERLY A. ADAMS

Address: 5225 S DURANGO DRIVE

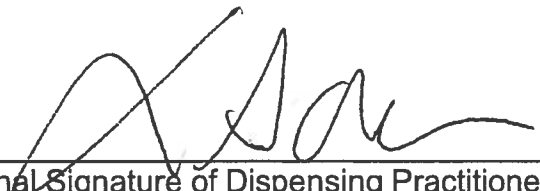
City: LAS VEGAS State: NV Zip: 89113

Telephone: 702-253-9355

☒ I will be dispensing controlled substances at the address listed above and I understand that I am required and submit data to the Prescription Controlled Substance Abuse Prevention Task Force weekly as required by NAC 639.745 [1(f)].

☐ I will not be dispensing controlled substances at the address listed above. If I choose to dispense controlled substances in the future, I must contact the Nevada State Board of Pharmacy to modify my license.

By signing and dating this waiver form, I certify that the information provided is true.

  
Original Signature of Dispensing Practitioner

6-5-19  
Date

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EXHIBIT PAGE ONLY

## EXHIBIT 1

**Attachment to Application for Authority to Dispense Controlled Substances**  
**Kimberly Adams, M.D.**

I responded in the affirmative to Question No. 2 and Question No. 3. This attachment will set forth my explanations for those affirmative responses and provide the documentation requested.

**Question No. 2:** Have you been the subject of an administrative action whether completed or pending in any state?

I am currently involved in one pending investigation by the Nevada State Board of Medical Examiners ("BME"). This case is in the investigation stage only. No formal complaint has been filed and I have not been disciplined. The BME has designated this investigation as BME Case No. 19-18531.

I was advised of this investigation by the BME via an investigation letter dated February 20, 2019. That letter is attached hereto as Exhibit 1. Please note that BME investigations are confidential pursuant to statute (NRS 630.311(3); NRS 630.336(4)), but I am providing this information in the interests of full disclosure and am aware that NRS 630.336(6) allows the BME to provide this information to the Nevada State Board of Pharmacy ("BOP") anyway.

The BME's investigation letter contained allegations by a former patient concerning routine drug screening that my office performs. This patient alleged she was not told she would be undergoing a drug screen and then later told her insurance required one.

The allegations were false. It is my office policy to potentially screen patients for controlled substances and other medications. This patient was advised of this policy and a sign is posted in my office confirming this is the policy. The patient knew she was being drug screened and consented to it on two occasions. She later changed her mind and decided she should not have consented, so complained to the Board.

I responded to the investigation letter on March 19, 2019. As well as providing my explanation as to what had actually occurred, I also provided the BME with my complete chart for the patient. As explained in my response, the patient was aware of the drug testing policy and consented to it two times. After changing her mind about it, she then sent me multiple harassing emails and faxed letters from an attorney who is not licensed to practice in Nevada threatening legal action against me. As the physician-patient relationship had broken down at that point, I appropriately discharged her with a letter providing the usual 30 days notice of discharge.

As noted above, this investigation is still pending. If desired, my response to the BME may be obtained from the BME or the BOP may request it from my attorney, L. Kristopher Rath of Hutchison & Steffen.

**Question No. 3:** Had your license been subjected to any discipline for violation of pharmacy or drug laws in any state?

As the BOP is aware, on May 1, 2019, the BOP sent me a cease and desist letter regarding the dispensing of controlled substances. A copy of that letter is attached hereto as Exhibit 2. I was assessed a \$5,000 fine for dispensing controlled substances without a dispensing license. I have paid that fine.

This issue arose because I relied upon incorrect information provided to me by my supplier, who is a major pharmaceutical supplier. My supplier had assured me that they would advise me on how to be fully compliant with all BOP rules and regulations. I already had a controlled substances registration with the BOP and my supplier did not inform me that I also needed a dispensing license. As a Board certified obesity and family medicine physician, I relied on my supplier to advise me of such requirements, as this is within their expertise. In fact, I contacted the supplier twice to confirm with them that I was compliant with all BOP rules and regulations and they assured me that I was.

When I received the BOP letter of May 1, 2019, the supplier then confirmed with me that they had failed to advise me of the need for a dispensing license. My attorney has forwarded these emails to BOP counsel already.

I understand that the dispensing license was my ultimate responsibility, even though I unwittingly relied on bad advice. As such, I stopped dispensing on receipt of BOP's letter and went ahead and paid the full fine. I am proceeding with my dispensing application now to serve my patients the correct way and comply with BOP rules and regulations.

To the extent that this matter is also considered an "administrative action" per Question No. 2, this explanation and Exhibit 2 should also be considered part of my response to Question No. 2.

## NEVADA STATE BOARD OF MEDICAL EXAMINERS

6010 S. Rainbow Blvd., Bldg. A, Ste. 2  
Las Vegas, NV 89118

Rachakonda D. Prabhu, M.D.  
Board President

Edward O. Cousineau, J.D.  
Executive Director



February 20, 2019

Kimberly Adams, M.D.  
9640 W. Tropicana Ave., Ste. 116  
Las Vegas, NV 89147

**RE: BME CASE #: 19-18531**

**PATIENT: Mr. \_\_\_\_\_ J. \_\_\_\_\_ ; DOB: \_\_\_\_\_**

Dear Dr. Adams:

We have received information and a complaint regarding your medical treatment of the above named patient. The complaint alleges your care and treatment of the patient may have fallen below the standard of care.

It is alleged:

1. The patient presented to you on or around August 27, 2018, to establish a physician/patient relationship.
2. You requested the patient to perform an in office urine sample and gave her a referral to obtain lab work. However, you failed to inform the patient she was being drug tested, and neglected to have the patient sign a consent form for the test.

It is further alleged:

3. The patient presented to you on or around October 25, 2018, for a follow-up visit regarding her blood work and urine test, as well as an examination for a lump in her armpit.
4. Again, you requested the patient to perform an in office urine sample. Your nurse advised the patient the urine sample was for medication and toxicology testing, and her insurance requested urine tests be performed. However, the patient has never been prescribed any medications by you, and therefore you are performing unnecessary testing.
5. The patient contacted her insurance company and was advised they do not request or demand drug testing.

Furthermore, it is alleged:

6. The patient attempted to contact you via email through your online portal. The patient wrote you on October 25, 2018, November 30, 2018, December 4, 2018, and December 5, 2018. However, you have failed to return the patient's messages, leaving the patient abandoned.
7. On or around January 9, 2019, you sent the patient a letter informing her you were no longer able to continue as her physician due to her "Conduct, and/or treatment of physician and/or staff."

According to these allegations, you may have violated the Nevada Medical Practice Act, Nevada Revised Statutes, Chapters 629 and 630, and Nevada Administrative Code, Chapters 629 and 630 (NMPA).

In order to determine whether or not there has been a violation of the NMPA, please provide a written response to each allegation noted above, as well as complete health care records for the aforesaid patient. Include copies of any imaging, x-ray or other films that were produced during treatment of this patient. Please include any further information you believe would be useful for the Board to make a determination in this matter. Please reply to this request within 21 calendar days.

Please return the health care records with the signed Custodian of Records Affidavit, enclosed herewith. If you are not a custodian of the patient records, please indicate where the health care records can be obtained.

The Nevada State Board of Medical Examiners investigates all information received concerning possible violations of the NMPA. We make no determination as to whether or not there has been a violation of the NMPA until a thorough investigation is completed. As a physician under investigation by the Board, you are required by the NMPA to provide the requested information, and your cooperation is not subject to the whistle-blower protections provided to physicians in NRS 630.364(3).

Please be advised that if the particular allegations referenced above did occur, and depending on the facts and circumstances, then you may have violated the NMPA, specifically including but not limited to: NRS 630.301(4),(7), NAC 630.040 & NRS 630.304(7).

Respectfully,



Kati Payton  
Investigator  
Las Vegas Office



**The Investigative Committee of the Board of  
Medical Examiners of the State of Nevada**

\* \* \* \* \*

In the Matter of the Investigation of: )

)

**Kimberly Adams, MD** )

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License No. 9848 )

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Case No. 19-18531

**ORDER TO PRODUCE HEALTH CARE RECORDS**

The Investigative Committee (IC) of the Board of Medical Examiners of the State of Nevada sends greetings to:

**Kimberly Adams, MD  
9640 W. Tropicana Ave., Ste. 116  
Las Vegas, NV 89147**

Pursuant to the authority of Nevada Revised Statute (NRS) 630.311(1), the IC directs you to produce and deliver to the Nevada State Board of Medical Examiners, the materials as set forth in this Order:

1. Properly authenticated and complete copies of any and all health care records of  
M      J      DOB:      , from January 1, 2018, through the present  
date.
2. The name and contact information for any entity, facility, or person that you believe may  
possess the health care records of M      J;      DOB:      , from January  
1, 2018, through the present date.

Said records shall be provided to an investigator of the Nevada State Board of Medical Examiners within 21 days of service of this Order (Investigation Division, Attn. Kati Payton,  
Nevada State Board of Medical Examiners, 6010 S. Rainbow Blvd., Building A, Suite 2, Las Vegas,  
Nevada 89118). Failure to comply and produce said records in the aforesaid manner may subject you to potential disciplinary action, to include a violation of NRS 630.3065(2)(a) and NRS

1 630.3062(4); further, the Investigative Committee may seek administrative sanctions as set forth in  
2 NRS 630.352.

3 Additionally, compliance with this order is deemed compulsory and shall not be deemed to  
4 be cooperation subject to the protections provided to a physician pursuant to NRS 630.364(3).

5 Dated this 20<sup>th</sup> day of February, 2019.

6 NEVADA STATE BOARD OF MEDICAL EXAMINERS  
7 INVESTIGATIVE COMMITTEE

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9 Wayne Hardwick, M.D., Chairman  
10 Nevada State Board of Medical Examiners  
11 Investigative Committee  
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## EXHIBIT 2



NEVADA STATE BOARD OF PHARMACY  
**OFFICE OF THE GENERAL COUNSEL**

WRITER'S DIRECT DIAL: (775) 850-1110 • EMAIL: pedwards@pharmacy.nv.gov • FAX: (775) 850-1111

May 1, 2019

**VIA CERTIFIED U.S. MAIL AND ELECTRONIC MAIL**

Kimberly Adams, M.D.  
5225 S. Durango Dr.  
Las Vegas, NV 89113  
totalwellness@lvcoxmail.com

***Re: CEASE and DESIST/CITATION: Unlicensed Prescribing and Dispensing***

Dear Dr. Adams:

The Nevada State Board of Pharmacy (Board) has determined that you prescribed and dispensed controlled substances and dangerous drugs for Nevada patients without a valid dispensing practitioner registration. This constitutes a violation of Nevada law, including NRS 639.0727, NRS 639.100 and NAC 639.742 through 639.745.

You are hereby ordered pursuant to NRS 639.2895(1) to CEASE and DESIST dispensing controlled substances and dangerous drugs for Nevada patients. This letter shall also serve as a CITATION pursuant to NRS 639.2895(2) for your unlicensed practice. The Board has assessed you an administrative fine of five thousand dollars (\$5,000.00) pursuant to NRS 639.2895(3).

You must pay this administrative fine within 30 days of receipt of this citation, or otherwise contact Board staff to request an alternative payment plan. Payment must be by *cashier's check, certified check or money order* made payable to "State of Nevada, Office of the Treasurer," to be received at the Board's Reno office, located at 985 Damonic Ranch Parkway, Suite 206, Reno, NV 89521.

You have the right to appeal this citation, if you choose, by showing the Board at a public hearing that your conduct complied with Nevada law. *See* NRS 639.2895(2); NRS 233B.121. If you choose to exercise that right, the Board has scheduled time at its next regularly scheduled Board Meeting on Wednesday, June 5, 2019, at 9:00 AM at Hyatt Place, 1790 E. Plumb Ln., Reno, Nevada for that hearing to occur. In order to have your appeal heard, you must submit a written request for hearing along with a statement of the basis for your appeal to Board Staff at its Reno office no later than 30 days after receipt of this letter.

The hearing on your appeal is a public meeting pursuant to NRS 241.033 and 241.034, at which the Board may, without further notice, take administrative action against you if the Board determines that such administrative action is warranted after considering your character, alleged misconduct, professional competence, or physical or mental health. The Board at its discretion may go into closed session to consider your character, alleged misconduct, professional

20190501.CEASE K ADAMS

competence, or physical or mental health. You may attend any closed session, have an attorney or other representative of your choosing present during any closed session, and present written evidence, provide testimony, and present witnesses relating to your character, alleged misconduct, professional competence, or physical or mental health during any closed session.

Please also be aware that the forgoing does not preclude further investigation or the filing of criminal charges, and that Board Staff may seek appropriate attorney's fees and costs.

If you have any questions, please do not hesitate to contact me at 775-850-1440 or [pedwards@pharmacy.nv.gov](mailto:pedwards@pharmacy.nv.gov).

Sincerely, .

Best regards,

A handwritten signature in dark ink, appearing to read "S. Paul Edwards". The signature is fluid and cursive, with a large initial "S" and a stylized "P" for "Paul".

S. Paul Edwards  
General Counsel  
Nevada State Board of Pharmacy