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K.B.M.L.

COMMONWEALTH OF KENTUCKY
BOARD OF MEDICAL LICENSURE
CASE NO. 2184

IN RE: THE LICENSE TO PRACTICE OSTEOPATHY IN THE COMMONWEALTH OF KENTUCKY HELD BY AMAN K. PATEL, D.O, LICENSE NO. C0692, 1289 BOURLAND ROAD, KELLER, TEXAS 76248

EMERGENCY ORDER OF SUSPENSION

The Kentucky Board of Medical Licensure (“the Board”), acting by and through its Inquiry Panel B, considered this matter at its January 16, 2025 meeting. At that meeting, Inquiry Panel B considered a Panel Memorandum from Billy Madden, Medical Investigator, dated December 10, 2024; e-mail correspondence from the Interstate Medical Licensure Compact Commission, dated October 23, 2024; *Order for Summary Suspension of License to Practice Medicine*, Case No. 2225-0050 A (Maryland State Board of Physicians), ordered October 23, 2024; email response from Dr. Aman Patel, dated November 22, 2024; and Notice of Board Action to Dr. Patel from the Texas Medical Board, Investigation Log No. 25-1411, dated October 24, 2024.

Having considered this information and being sufficiently advised, Inquiry Panel B enters the following EMERGENCY ORDER OF SUSPENSION, in accordance with KRS 311.592(1) and 13B.125(1):

FINDINGS OF FACT

Pursuant to KRS 13B.125(2) and based upon the information available to it, Inquiry Panel B concludes there is probable cause to make the following Findings of Fact, which support this Emergency Order of SUSPENSION:

1. At all relevant times, Aman K. Patel, D.O., was licensed by the Board and through the provisions of the Interstate Medical Licensure Compact to practice osteopathy in the Commonwealth of Kentucky.
2. The licensee’s medical specialty is interventional cardiology.

3. The licensee's state of principle license is Texas.
4. On or about October 23, 2024, the licensee's license to practice medicine in the State of Maryland, a member board of the Interstate Medical Licensure Compact, became suspended pursuant to an *Order for Summary Suspension of License to Practice Medicine*, Case No. 2225-0050 A (Maryland State Board of Physicians) based, in part, upon the following investigative findings:

- Staff Member A

Staff Member A was a female clinical staff member at the Facility's location, who started working with the Respondent in or around mid-February 2024. The first day Staff Member A worked with the Respondent, the Respondent asked for a hug from her, which she described as "a really tight squeeze." Subsequently, Staff Member A worked with the Respondent at least two times per week, during which time the Respondent would frequently hug Staff Member A.

Beginning in or around late-February 2024, the Respondent began kissing Staff Member A without consent when they met in the hallway or in the Respondent's office. As time went on, the Respondent's harassing conduct became more aggressive. The Respondent would frequently pull Staff Member A's head back by her hair and forcefully kissed her face and neck. The Respondent also began groping Staff Member A's breasts and buttocks. On these occasions, Staff Member A would tell the Respondent to leave her alone, but the Respondent would refuse.

On or about April 30, 2024, around early afternoon, Staff Member A went to the Respondent's office to discuss a patient and to drop off some paperwork. While Staff Member A was talking to the Respondent in his office, the Respondent got up and closed the door. The Respondent then pulled Staff Member A towards him and began kissing her neck in an aggressive manner and groping her breasts and buttocks. Staff Member A pushed the Respondent away, but he pulled her back towards him. At one point, the Respondent grabbed Staff Member A's hair and pulled her head towards his genitals, which were exposed. Staff Member A attempted to push the Respondent away but was unable to do so. The Respondent then had Staff Member A perform oral sex on him. After the Respondent had finished, Staff Member A quickly left his room and went to a nearby bathroom to vomit. Later that day, the Respondent sent Staff Member A a sexually explicit text message regarding details of the incident in his office.

After April 30, 2024, the Respondent continued to aggressively kiss Staff Member A and grope her breasts and buttocks whenever they worked together. On or about May 21, 2024, Staff Member A was at her desk when the Respondent came up to her, pulled her hair and aggressively kissed her lips and groped her breasts. While

kissing Staff Member A, the Respondent bit her lips, which left a cut and a bruise. Staff Member A fought off the Respondent by giving him a hard punch in the arm and telling him to leave her alone.

[...]

[W]hen asked whether he ever had a sexual encounter with Staff Member A, the Respondent stated, “Consensual, yes.” The Respondent admitted that Staff Member A had performed oral sex on him in his office at the Facility. The Respondent further admitted that he had on more than one occasion pulled Staff Member A’s hair, including on this occasion.

- Staff Member B

Staff Member B was an administrative staff member at the Facility’s location. As an administrative staff member, Staff Member B only had occasional interactions with the Respondent in the office. On or about April 25, 2024, the Respondent called Staff Member B to his office and gave her a hug. Staff Member B did not take offense to the hug until when the Respondent “proceeded to latch onto my face and beginning [sic] trying to make out with me and that’s [sic] when I froze up ...” Staff Member B attempted to break away from the Respondent while telling him that she had a boyfriend, but the Respondent simply said, “one more minute.” Staff member B attempted to push the Respondent away, but he pushed her against the wall while attempting to unzip his pants. Staff Member B was able to push the Respondent away and quickly leave his office.

Later that same day, on or about April 25, 2024, Staff Member B was alone in the telephone room when the Respondent entered and closed the door. Staff Member B initially thought the Respondent was going to apologize to her, when he “jumped onto me and shoved me right into the wall with his hand around my neck and trying to grope my breasts as I looked him dead in the face and told him NO.” At that time, someone had knocked on the door, and the Respondent whispered to Staff Member B to “wait and be quiet.” Staff Member B waited a moment longer and quickly left the room to go home. Later that day, Staff Member B received a text message from the Respondent asking, “what are you doing tonight,” and stating, “I would love to have you and please keep things within you, you will feel good too.”

[...]

When asked about any incidents involving Staff Member B, the Respondent admitted to kissing her once in his office, during which his genitals were exposed. The Respondent further admitted that he later sent a text message to Staff member B asking her to keep the incident “a secret.”

- Staff Member C

Staff Member C was a clinical staff member at the Facility's location. Staff Member C worked with the Respondent on one occasion, which occurred on May 2, 2024. On that day, Staff Member C was at her desk when she received a call from the Respondent asking if he could see her in his office. When Staff Member C went to the Respondent's office, the Respondent told Staff Member C that he had been watching her, thought she was beautiful and offered to take care of her.

The Respondent proceeded to hug Staff Member C, at which time Staff Member C pushed him away and told him they were at work. The Respondent then grabbed Staff Member C, pulled her close to him, and started kissing her all over her neck. While doing so, the Respondent exposed his genitals and told her, "come handle some business for him, or take the stress off of him." Staff Member C was able to leave the Respondent's office before anything else happened.

[...]

When asked about any incidents involving Staff Member C, the Respondent admitted to kissing her during which his genitals were exposed. The Respondent further admitted that he and Staff Member C "had a kiss and she had a bruise, and it looks like people made a big deal."

- Staff Member D

Staff Member D was a clinical staff member at the Facility's location. Staff Member D worked with the Respondent when the Respondent began his employment at the Facility. Initially, Staff Member D had a cordial working relationship with the Respondent and reported receiving two to three hugs from him per week, which Staff Member D thought were innocuous. On or about March 21, 2024, Staff Member D received a hug from the Respondent that was so tight that she received a bruise on her collarbone from the stethoscope she was wearing.

On or about April 26, 2024, at approximately 5:30 p.m., Staff Member D stopped in the Respondent's office to drop off some studies and discuss patient care with him. As Staff Member D was leaving the Respondent's office, he proceeded to hug her. When Staff Member D pushed him away, the Respondent grabbed Staff Member D's face and sucked intently on her lips. Staff Member D shook her head and attempted to leave the Respondent's office when the Respondent grabbed her wrist, pulled her close to him, and shut the door. The Respondent grabbed Staff Member D's face and began kissing her. Staff Member D shook her head and ran out of the Respondent's office to a nearby bathroom.

The Respondent again hugged Staff Member D, grabbed her face and began kissing her on or about the late afternoon of May 9, 2024, when Staff Member D went into his office to discuss patient care.

On or about May 16, 2024, in the late afternoon, Staff Member D stopped by the Respondent's office to drop off some electrocardiograms when the Respondent grabbed and squeezed Staff Member D's left breast, on which she recently had a medical procedure performed. Staff Member D screamed from the pain and kicked the Respondent in the left hip.

[...]

Finally, when the Board compliance analyst asked the Respondent about Staff Member D, the Respondent admitted to kissing her "Maybe a couple of times ...".

5. On or about October 24, 2024, the Texas Medical Board suspended the licensee's medical license (Investigation Log No. 25-1411) based upon the Maryland State Board's findings of unprofessional conduct, including sexual harassment.
6. This Board received notice of the licensee's suspension of his Maryland license via a report from the Federation of State Medical Boards. The licensee did not report or provide a copy of the Maryland action within ten days as required by 201 KAR 9:081(9)(2)(a)(2).
7. On or about November 21, 2024, the licensee provided a written response via email. He stated that he is being evaluated by a Texas Physicians Health Program. The licensee also states he was recently evaluated by a forensic psychiatrist who diagnosed him with hypersexual disorder.

CONCLUSIONS OF LAW

Pursuant to KRS 13B.125(2) and based upon the information available, Inquiry Panel B finds there is probable cause to support the following Conclusions of Law, which serve as the legal bases for this Emergency Order of Suspension:

1. The licensee's Kentucky osteopathic license is subject to regulation and discipline by this Board.
2. KRS 311.592(1) provides that the Board may issue an emergency order suspending, limiting, or restricting a physician's license at any time an inquiry panel has probable cause to believe

that a) the physician has violated the terms of an order placing him on probation; or b) a physician's practice constitutes a danger to the health, welfare and safety of his patients or the general public.

3. There is probable cause to believe that the licensee has violated KRS 311.595(12) and (17).
4. Article X(3) of the Interstate Medical Licensure Compact provides,

If disciplinary action is taken against a physician by a member board not in the state of principal license, any other member board may deem the action conclusive as to matter of law and fact decided, and: Impose the same or lesser sanctions against the physician so long as such sanctions are consistent with the Medical Practice Act of that state[.]

5. The Inquiry Panel concludes there is probable cause to believe this physician's practice constitutes a danger to the health, welfare and safety of his patients or the general public.
6. The Board may draw logical and reasonable inferences about a physician's practice by considering certain facts about a physician's practice. If there is proof that a physician has violated a provision of the Kentucky Medical Practice Act in one set of circumstances, the Board may infer that the physician will similarly violate the Medical Practice Act when presented with a similar set of circumstances. Similarly, the Board concludes that proof of a set of facts about a physician's practice presents representative proof of the nature of that physician's practice in general. Accordingly, probable cause to believe that the physician has committed certain violations in the recent past presents probable cause to believe that the physician will commit similar violations in the near future, during the course of the physician's medical practice.
7. The United States Supreme Court has ruled that it is not a violation of the federal Due Process Clause for a state agency to temporarily suspend a license, without a prior evidentiary hearing, so long as 1) the immediate action is based upon a probable cause finding that there is a present danger to the public safety; and 2) the statute provides for a prompt post-deprivation hearing.

Barry v. Barchi, 443 U.S. 55, 61 L.Ed.2d 365, 99 S.Ct. 2642 (1979); *FDIC v. Mallen*, 486 U.S. 230, 100 L.Ed.2d 265, 108 S.Ct. 1780 (1988) and *Gilbert v. Homar*, 117 S.Ct. 1807 (1997).
Cf. KRS 13B.125(1).


KRS 13B.125(3) provides that the Board shall conduct an emergency hearing on this emergency order within ten (10) working days of a request for such a hearing by the licensee. The licensee has been advised of his right to a prompt post-deprivation hearing under this statute.

EMERGENCY ORDER OF SUSPENSION

Based upon the foregoing Findings of Fact and Conclusions of Law, Inquiry Panel B, hereby ORDERS that the license to practice medicine in the Commonwealth of Kentucky held by AMAN K. PATEL, D.O., is SUSPENDED and Dr. Patel is prohibited from performing any act which constitutes the “practice of medicine,” as that term is defined by KRS 311.550(10) – the diagnosis, treatment, or correction of any and all human conditions, ailments, diseases, injuries, or infirmities by any and all means, methods, devices, or instrumentalities – until the resolution of the Complaint setting forth the allegations discussed in this pleading or until such further Order of the Board.

Inquiry Panel B further declares that this is an EMERGENCY ORDER, effective immediately.

SO ORDERED this 22nd day of January, 2025.



DALE E. TONEY, M.D.
CHAIR, INQUIRY PANEL B

CERTIFICATE OF SERVICE

I certify that the original of this Emergency Order of Suspension was delivered to Mr. Michael S. Rodman, Executive Director, Kentucky Board of Medical Licensure, 310 Whittington Parkway, Suite 1B, Louisville, Kentucky 40222; and copies were mailed via certified mail return-receipt requested to the licensee, Aman K. Patel, D.O., License No. C0692, 1289 Bourland Road, Keller, Texas 76248 on this 22nd day of January, 2025.



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