

RHODE ISLAND BOARD OF MEDICAL LICENSURE AND DISCIPLINE

IN THE MATTER OF:

Sajad Zalzal, M.D.

License No. MD16475

Complaint No. C24-0282

**CONSENT ORDER**

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

**FINDINGS OF FACT**

1. The Investigative Committee of the Board met on October 28, 2024. Based upon the interview of Respondent as well as a review of the records, the Committee made a finding of unprofessional conduct pursuant to R.I. Gen. Laws § 5-37-5.1(19) due to the practice of asynchronous telemedicine and the lack of documentation regarding synchronous communications with Rhode Island patients. The Committee also made a finding of unprofessional conduct pursuant to R.I. Gen. Laws § 5-37-5.1(21) on the basis of reciprocity with actions taken in other states against Respondent’s licenses to practice medicine in those states.

2. On March 15, 2024, Respondent entered a Consent Agreement for Licensure with the Board of Licensure in Medicine for the State of Maine. The Maine Board conducted an investigation of medical records for ten (10) Maine patients treated by Respondent and expressed concern regarding Respondent's compliance with the State’s Telehealth Standards of Practice. Respondent agreed to the imposition of a warning with respect to his compliance with Chapter 11 Joint Rule regarding Telehealth Standards of Practice, the requirement of 6 – 10 hours of continuing medical education on telehealth practice and documentation, and following completion of the continuing medical education, the submission of five (5) randomly selected Maine patient medical records to the Board for review. After Respondent’s successful

completion of the continuing medical education requirement, Respondent submitted and the Maine Board reviewed the additional five (5) patient medical records. On January 17, 2025, the Maine Board voted to terminate the Consent Agreement for Licensure without any further continuing medical education, additional chart review, physician monitoring, or other disciplinary action.

3. On February 21, 2024, Respondent entered a settlement agreement with the Missouri State Board of Registration for the Healing Arts. The agreement arose from a written collaborative practice agreement between Respondent and a Missouri nurse practitioner in which the nurse practitioner prescribed a number of medications from a non-resident pharmacy into the state of Missouri based upon an internet questionnaire. The nurse practitioner stated that Respondent was her collaborating physician. However, Respondent did not have a practice physically located in the state of Missouri while he did have a Missouri license. Respondent confirmed that he had not been physically present for the supervision, collaboration and other administrative interactions with the nurse practitioner and that the treatments by the nurse practitioner occurred through a telehealth platform in a virtual location. Applicable Missouri regulations required that a nurse practitioner collaborative practice arrangement with a collaborating physician requires that the nurse practitioner and collaborating physician be continuously present at the same location for a period of at least one month before the collaborating nurse practitioner is allowed to practice without in-person supervision. Respondent was unable to establish his continuous presence for a period of at least one month at the same location with the nurse practitioner before the nurse practitioner began practicing at a location in which the Respondent was not present, in violation of Missouri regulations. As a result, the state of Missouri entered a public reprimand upon Respondent's license.

4. The Board of Medical Licensure and Discipline requested and reviewed ten medical records of Rhode Island residents who were patients of Respondent. The patients respond to a questionnaire which asks why the patient seeks the medications requested. Of the ten patients reviewed, only one record reflected a synchronous video interaction with the patient.

5. The Investigative Committee determined that the asynchronous, non-interactive communications with the patients did not comply with both state of Rhode Island law and telemedicine regulations.

**Based upon the foregoing, the Parties agree as follows:**

1. Respondent admits to and agrees to remain under the jurisdiction of the Board.
2. Respondent agrees to this Consent Order and understands that it is subject to final approval by the Board and is not binding on Respondent until final ratification.
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; 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.
4. Respondent is hereby issued a reprimand upon his Rhode Island license and shall pay administrative fees in the amount of \$1,100.00. The administrative fees must be paid within six (6) months of 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](mailto:DOH.PRCOMPLIANCE@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 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 25th day of June 2025.

  
Sajad Zaizala, M.D.

Ratified by the Board of Medical Licensure and Discipline on the 16<sup>th</sup> day of

July 2025.

Staci A. Fischer

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