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STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF THE SUSPENSION OR REVOCATION OF THE LICENSE OF

MUHAMMAD A. MIRZA, M.D.
LICENSE NO. 25MA07267400

TO PRACTICE MEDICINE AND SURGERY IN THE STATE OF NEW JERSEY

Administrative Action

VERIFIED COMPLAINT

Andrew J. Bruck, Acting Attorney General of the State of New Jersey ("Attorney General"), by Michael Antenucci and Daniel Evan Leef Hewitt, Deputy Attorneys General, with offices located at 124 Halsey Street, P.O. Box 45029, Newark, New Jersey 07101, by way of Verified Complaint says:

GENERAL ALLEGATIONS

I. Parties.

1. Pursuant to N.J.S.A. 52:17A-4(h), Complainant, Attorney General, is charged with the duty and responsibility of enforcing the laws of the State of New Jersey, and, pursuant to N.J.S.A. 45:1-14 to -27, is empowered to initiate disciplinary proceedings against persons licensed by the New Jersey State Board of Medical Examiners ("Board").

2. Pursuant to N.J.S.A. 45:9-1 to -27.9, the Board is charged with the duty and responsibility of regulating the practice of medicine and surgery in the State of New Jersey.

3. Muhammed A. Mirza, M.D. ("Respondent"), at all times relevant hereto, has been licensed by the Board to practice medicine and surgery in the State of New Jersey, with license number 25MA07267400.

4. Respondent, who is board-certified in internal medicine, practices Aesthetic Medicine at various locations throughout the State of New Jersey. Respondent's medical license is currently "Active" and, as of the date of this filing, his primary medical office is located at 870 Pompton Avenue, Cedar Grove, New Jersey 07009.

II. The State's April 23, 2021 Inspection of Respondent's Medical Practice.

5. In or about April 2021, the Enforcement Bureau of the Division of Consumer Affairs ("EB") opened an investigation into the Respondent and Mirza Aesthetics, following the Board's receipt of numerous consumer complaints relating to his practice of Aesthetic Medicine.

6. Patients have alleged, among other things, that Respondent: failed to wear a mask or medical surgical gloves while performing procedures; used high pressure sales tactics; would not disclose what products he was using or show the product's packaging to them; caused physical complications like a lump and seizure; and failed to respond to post-procedure complaints and/or

request for records. (See sworn statements and documents provided by patients M.B., Y.C., and M.N., attached as **Exhibit 1** to the Certification of Deputy Attorney General Michael Antenucci ("Antenucci Cert.").)

7. As part of the EB investigation into Respondent's practice of Aesthetic Medicine, investigators conducted an inspection of his Summit, New Jersey medical office on April 23, 2021. (See the EB's April 23, 2021 "Medical Office Inspection Report" and office photographs attached as **Exhibit 2** to the September 28, 2021 Certification of EB Investigator Winni Quizon ("Quizon Cert."), attached as **Exhibit 2** to Antenucci Cert.)

8. On that date, Respondent's medical office consisted of one large room with a curtain used as a divider between the waiting room/receptionist area and the patient examination/treatment area. (Ibid.)

9. The examination/treatment area had only chairs and a fold-away table, with no medical examination table, and Respondent's supply of injectable fillers were stored in "duffle bags". (Ibid.) No medical storage refrigerators were observed on the premises. (Ibid.)

10. With regard to safety policies and procedures relating to the Covid-19 pandemic, investigators noted, among other things, that Respondent's office: lacked any barrier between the receptionist and the patients; did not require masking, and neither Respondent nor his two employees were wearing face masks when interacting with patients upon the investigators' arrival; did not screen patients for possible Covid-19 exposure, including no taking of temperatures; and lacked social distancing measures and/or staggered appointments to minimize patient-to-patient contact. (Ibid.)

11. On August 24, 2021, Respondent appeared and gave sworn testimony before a Committee of the Board to address his practice of Aesthetic Medicine, the EB's April 23, 2021

inspection, and his practice of medicine in general.[1] (See August 24, 2021, Preliminary Evaluation Committee ("PEC") transcript, attached as **Exhibit 3** to Antenucci Cert.)

III. Respondent's Background and Training in Aesthetic Medicine, and his Practice at "Mirza Aesthetics".

12. Aesthetic Medicine generally consists of the performance of non-invasive, to minimally invasive, cosmetic medical procedures aimed at improving the physical appearance of the human body. (See September 27, 2021 Report of Barry DiBernardo, M.D., F.A.C.S., attached as **Exhibit 4** to Antenucci Cert.) Common aesthetic medical procedures include, but are not limited to: the injection of neurotoxins and dermal fillers; body contouring and treatment of cellulite; and scar management. (Ibid.)

13. In addition to his New Jersey medical license, Respondent has current active medical licenses in New York, Connecticut, and Pennsylvania. (Antenucci Cert., **Exhibit 3** at 11:10-22.) He also has an active license in Tennessee, which he did not disclose to the PEC when asked about his current medical licensure. (Ibid. See also medical licensure documentation from the Tennessee Department of Health, attached as **Exhibit 5** to Antenucci Cert.)

14. In or about 2015, Respondent founded his medical practice, "Mirza Aesthetics". (See "Mirza Aesthetics Catalog of Services", attached as **Exhibit 1** to Quizon Cert.) He has practiced Aesthetic Medicine from approximately 75 Mirza Aesthetics offices located between New Jersey, New York, Pennsylvania, Connecticut, Florida, and Washington D.C. (Ibid.)

15. Respondent confirmed for the PEC that he has office locations throughout New Jersey, New York, Connecticut and Pennsylvania, and that he currently practices out of 34 offices across those states. (Antenucci Cert., **Exhibit 3** at 18:13-16; 20:12-22; 21:14 to 23:3.) However,

[1] The PEC also discussed with Respondent a patient encounter documented in a "Vice News" segment that had been posted to YouTube.com, at https://www.youtube.com/watch?v=w8OrhHj8pOA, on or about April 11, 2019. (See Quizon Cert., **Exhibit 3**.)

he has recently advertised that he practices out of 70 locations in these states. (See Mirza Aesthetics mailer advertisement with coupon valid through November 30, 2021, attached as **Exhibit 6** to Antenucci Cert. See also Mirza Aesthetics coupon search results from Valpak.com, accessed September 28, 2021, attached as **Exhibit 4** to Quizon Cert.)

16. Respondent, through Mirza Aesthetics, advertises and performs a variety of "exclusive" non-surgical, minimally invasive aesthetic medical services including, but not limited to, neurotoxin and dermal filler injection procedures to enhance the appearance of the face, neckline, and buttocks, as well as for breast, vaginal and penile enhancement. (Antenucci Cert., **Exhibit 6**. See also Quizon Cert., **Exhibit 1** and **Exhibit 4**.)

17. Respondent does not have any formal residency or fellowship medical training in either cosmetic plastic surgery, dermatology, urology and/or gynecology, nor is he board-certified in any of these medical specialties. (See Respondent's Curriculum Vitae, attached as **Exhibit 7** to Antenucci Cert. See also **Exhibit 3** at 10:5 to 11:4; 82:21-25.)

18. Respondent completed three years of residency training in internal medicine, and is board-certified in that specialty. (Antenucci Cert., **Exhibit 3** at 10:5-11; 134:2-12.) He does not currently have hospital privileges. (Id. at 17:23-25.)

19. Respondent's training in Aesthetic Medicine consists of "multiple courses from all the manufacturers [of Botox and other injectable dermal fillers] over a period of time." (Id. at 60:2-7.)

20. Respondent also reviewed journal articles and received training in penile enhancement and sexual medicine (including breast and penile injection procedures) from Carlos Mercado, M.D. creator of the "Erectus Shot", and Charles Runels, M.D. of the Cellular Medicine Association ("CMA"), respectively. (Id. at 83:13 to 84:5; 93:20 to 95:7; 130:1-8; 132:2-6.) He

described the coursework as "like a week" long training, with testing and "live demos" for which he received certificates.[2] (Id. at 130:17 to 131:21.)

21. Respondent practices Aesthetic Medicine as a solo practitioner, and he employs a non-medical clerical staff of "four, five employees" who sometimes travel with him to different office locations. (Id. at 18:1-4; 60:22 to 61:6; 110:6 to 112:21.) His primary medical office is located in Cedar Grove, New Jersey, which he owns, and he leases other office space from which he practices in this State.[3] (Id. at 18:6-8; 23:25 to 26:2.)

22. Respondent has a limited set of medical equipment, like "blood pressure cuff, [and] a thermometer." (Id. at 27:12 to 28:9.)

23. Respondent told the PEC that "every single" one of his medical offices is contracted with a registered medical waste disposal company. (Id. at 28:4-9.) However, medical waste management documents (dated between May 1, 2017 to June 12, 2021) produced by Respondent indicate that not all of his advertised New Jersey medical offices have a medical waste disposal contract, nor is each office registered with the New Jersey Department of Environmental Protection as a regulated medical waste generator. (See Respondent's waste management contract with "Stericycle" and his New Jersey Department of Environmental Protection "Regulated Medical Waste Annual Registration" forms, attached as **Exhibit 9** to the Antenucci Cert. See also Quizon Cert., **Exhibit 1**.)

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[2] Following this appearance, Respondent produced to the Attorney General, a "Certificate of Completion" for Dr. Mercado's three-day "Training and Workshop" for "The Erectus Shot", which he completed in May 2016, and "Certificates of Training" from Dr. Runels and the CMA, for four injection procedures (the "Priapus Shot"; the "Vampire Breast Lift"; the "Vampire Face Lift"; and the "Vampire Facial"), all dated August 2021. (See Respondent's Certificates, attached as **Exhibit 8** to Antenucci Cert.)

[3] Respondent does not have "written leases" with all of his locations, and some locations are treated "almost like an Airbnb model where when I go there, I pay the rent and so I don't get stuck with a long-term lease commitment." (Id. at 25:2-6.)

24. Respondent travels from office to office with injectable products (including those that require refrigeration) either "before or . . . on the date" of service, and "[p]retty much no location [of Mirza Aesthetics] has the products at a standalone location all the time." (Antenucci Cert., **Exhibit 3** at 28:10-15; 39:14 to 40:4.)

25. Respondent has "several ship-to locations" but only his "big locations" namely his Cedar Grove office and one Manhattan office are "ship-to" locations that have "standalone supplies." (Id. at 41:7-16; 46:6-18.)

26. Respondent stores injectable products that require refrigeration, like Botox, overnight at his main office or at his home office, both in Cedar Grove. (Id. at 44:17-22; 142:13 to 143:24.)

27. Respondent carries his supply of injectable products to his various office locations using "duffle" style bags and he uses "ice packs" when he is transporting products that require cold storage. (Id. at 35:20 to 38:13; 40:8-14.)

28. Supplies that must be stored at refrigerated temperatures are carried between offices with a thermometer in "a simple biohazard box" packed in "dry ice" or "ice packs" that had been sent to Respondent with the products by the manufacturers. (Id. at 42:21 to 43:3; 47:2-24; 144:2-24.)

29. Respondent may travel to three different offices and see up to, and over, 30 patients in a single day. (Id. at 121:13 to 122:8. See also "Mirza Aesthetics Sign-In Sheet" for the months of August 2020, December 2020, and May 2021,[4] attached as **Exhibit 10** to Antenucci Cert.) He

[4] Calendars produced by Respondent for each of these months, in addition to these sign-in sheets, suggest that he practiced at both out-of-state and New Jersey offices for several days in each of these months. Yet, Respondent only provided the Attorney General daily sign-in sheets for his New Jersey offices. Therefore, daily patient totals for days he practiced at out-of-state and New Jersey offices cannot be precisely calculated.

describes his practice as mostly "a filler practice, very few toxins. . . . 80-percent [of his procedures] are fillers." (Id. at 61:7-18.)

30. Respondent offers patients discount coupons and negotiates the prices of the services he performs. (Id. at 63:2 to 64:25; 66:19 to 67:4; 118:24 to 119:18; 150:22 to 151:10.) He finds that "the bulk of the patients . . . [know] what they are looking for, what kind of product, and what is the scope of the service based on the budget." (Id. at 117:1-24.)

31. In "15 minutes to 30 minutes" Respondent discusses with each patient their medical histories, treatment options and contraindications, obtains their informed consent, performs procedures, and observes the patient post procedure. (Id. at 68:8-15; 115:19 to 116:10; 117:1-24; 118:24 to 120:10; 153:4-15.)

32. When performing injections procedures, Respondent does not "use a reclining chair," and instead performs procedures with patients in "an upright position" in front of him sitting on an examination or a massage table. (Id. at 53:2 to 55:20.)

33. After procedures, patients are told to sit "for at least five to ten minutes," and are given post-procedure instructional care materials, and Respondent's direct telephone number. (Id. at 120:12-25.) He does not follow up with patients "longitudinally" unless "customized follow up" is required, and he instead engages with patients through general "email blasts" after performing procedures on them. (Id. at 79:2-7; 163:20 to 164:24; 166:13-24.)

34. Respondent does not consult with other practitioners or "outsource" patient care "to any other provider" and he also relies on his non-medical staff to take patient phone calls for him while he is performing procedures. (Id. at 75:8 to 76:16; 111:1-7.)

35. Respondent told the PEC he has never been contacted by an emergency room physician relating to the care of any of his patients over the last three years. (Id. at 78:6-16; 169:1 to 170:12; 171:17-25; 172:2 to 173:1.)

36. Respondent does not keep electronic medical records, and all of his patient records are stored at his Cedar Grove office. (Id. at 145:18 to 146:13.) He personally transports his patient records, along with office sign-in sheets, to each office and back to Cedar Grove. (Ibid.)

37. Respondent's "standard" patient file includes a "consent form and the progress note and the credit card, and financial transaction." (Id. at 148:4-13.) He does not include any before and after photos in his patient records for his procedures. (Id. at 141:2-6; 149:21-23; 154:22 to 155:4.)

38. Respondent's "informed consent" document, which is included in his "standard file", is not labeled as such, and it blends an explanation of medical treatment terminology with a "waiver of liability" for "any liability associated with the procedure(s) listed below" performed by Respondent. (Id. at 148:4-13. See also Antenucci Cert., **Exhibit 4**.) Moreover, the form states that the patient "consents to the procedure(s) listed below, performed" by Respondent, yet includes no space where those procedures are written. (Ibid.)

IV. Specific Injectable Dermal Fillers and Aesthetic Medicine Procedures Performed by Respondent.

a. Hyaluronic acid filler

39. Hyaluronic acid ("HA") fillers (commonly known by the brand names Juvéderm, Restylane, and Voluma), are subdermal fillers injected to add more volume to an area of the skin. (Antenucci Cert., **Exhibit 4**.) They are the most common type of filler approved by the U.S. Food and Drug Administration ("FDA"). (Ibid.)

40. If an adverse event occurs with an injection of HA filler like overfilling, or at worst, a vascular occlusion caused by an injection of filler into a blood vessel that results in a blockage of blood-flow, HA filler can be dissolved with the enzyme hyaluronidase (commonly known by the brand name Hylenex), which is injected directly into the blocked vessel. (Ibid.)

41. In case of such an emergency, a large supply of hyaluronidase is required to counteract the adverse reaction, and it requires cold storage, at 2 to 8 degrees Centigrade (35.6 to 46.4 degrees Fahrenheit). (Ibid.) Poor handling and/or any break in the cold storage techniques can render hyaluronidase ineffective. (Ibid.)

b. Collagen polymethyl methacrylate microsphere filler (Bellafill)

42. Collagen polymethyl methacrylate microsphere filler (commonly known by the brand name, Bellafill), is an FDA-approved long-acting subdermal filler (lasting up to five years), and usually much more costly than other fillers. (Ibid.)

43. Unlike other subdermal fillers, Bellafill contains a collagen carrier, to which patients may be allergic. (Ibid.) Therefore, before receiving an injection of Bellafill, a patient is required to undergo skin testing for an allergy to bovine collagen, which the FDA recommends occurs four weeks (about 30 days) before treatment with Bellafill. (Ibid.)

44. Patients who show a hypersensitivity to bovine collagen are ineligible for treatment with Bellafill. (Ibid. See also Bellafill manufacturer's instructions for skin testing, attached as **Exhibit 11** to Antenucci Cert.)

45. Allergies associated with injection of Bellafill in those with a hypersensitivity to bovine collagen may include acute episodes of hypotension, difficulty breathing, tightness in the chest, and/or shortness of breath, or a cystic reaction at the injection site. (Ibid.)

46. Respondent is "one of the largest buyers of Bellafill" in New Jersey. (Antenucci Cert., **Exhibit 3** at 70:22-25.)

47. If Respondent tests a patient for an allergic reaction to Bellafill, he will wait "probably two to three days" after allergy testing to inject the patient with Bellafill. (Id. at 71:8-22; 72:2-9.)

48. Bellafill (like hyaluronidase), requires cold storage, at 2 to 8 degrees Centigrade (35.6 to 46.4 degrees Fahrenheit). (Antenucci Cert., **Exhibit 4**) Poor handling and/or any break in the cold storage techniques can render Bellafill ineffective. (Ibid.)

c. ***Calcium hydroxyapatite (Radiesse)***

49. Calcium hydroxyapatite (commonly known by the brand name Radiesse) is a thicker FDA-approved subdermal filler used to increase volume in the face, and to be used close to the bone for structural changes. (Ibid.) It lasts between 1 to 2 years, but is not indicated in softer or more superficial tissue such as the lips or around the eyes. (Ibid.)

50. Respondent uses Radiesse for non-FDA approved "off label" use as a filler in his nonsurgical penile enhancement and breast lift procedures, and to increase volume near and around the eyes. (Antenucci Cert., **Exhibit 3** at 83:5-11; 84:22 to 85:12; 95:23 to 96:1-9; 124:3-14.)

51. Unlike the HA fillers, Radiesse cannot by dissolved by the enzyme hyaluronidase, or any other drug, in the event of an adverse reaction, like a vascular occlusion. (Ibid.)

52. If Radiesse is injected near the eyes and a vascular occlusion occurs, a patient can suffer abnormal vision or, at worst, permanent blindness. (Ibid.) A vascular occlusion associated with an improper injection of Radiesse to the face or penis may result in permanent tissue loss, wounds and/or scarring. (Ibid.)

53. Radiesse use in the breast tissue is not an accepted practice. (Ibid.) The calcium hydroxylapatite particles of Radiesse are radiopaque and can be visible in radiological mammography screening, potentially interfering with the interpretation of those radiological studies. (Ibid.)

54. For his non-surgical penile enhancement procedures, Respondent uses HA fillers (most commonly Juvéderm or Restylane) that can be reversed in the event of an adverse reaction with an injection of the enzyme hyaluronidase. (Id. at 83:9-11; 84:22 to 85:12.) He will also use Radiesse, which he acknowledges cannot be reversed with hyaluronidase. (Id. at 85:14-19; 95:23 to 96:1-9.)

55. Respondent told the PEC that if "a vascular occlusion [in the penis] with Radiesse, then it could be sucked out . . . surgically . . . by surgical decompression." (Id. at 91:8 to 92:1.)

56. Respondent is not a surgeon and is not qualified to perform surgical decompression, which carries its own risks and is a difficult procedure for even experienced surgeons. (Antenucci Cert., **Exhibit 4**.) Respondent is also not formally trained in urology and does not have an urologist or a specialist with whom he consults in the event a patient suffers an adverse event resulting from his injection of Radiesse into the penis, such as a vascular occlusion. (Ibid. See also Antenucci Cert., **Exhibit 3** at 10:5 to 11:4; 82:21-25; 91:6-21; and **Exhibit 7**.)

57. For his non-surgical breast lift procedures, Respondent uses both HA based fillers (most commonly Juvéderm and Restylane), and Radiesse or the poly-L-lactic acid based filler, Sculptra.[5] (Id. at 123:1 to 124:24; 125:22 to 126:1.)

[5] Sculptra is another subdermal filler that works by a reaction to build more collagen in an area. (Antenucci Cert., **Exhibit 4**.)

58. Respondent's non-surgical breast lift procedures involve only "a few cc of volume," with patients on average getting about "2 to 3 cc [of filler] in each breast," which he acknowledges does not cause "much difference" in terms of breast enhancement. (Id. at 126:11-22; 127:7 to 128:4.)

59. After also acknowledging that the injection of Radiesse into the breast tissue may interfere with the reading of mammography test results versus the minimal amount of breast enhancement resulting from this procedure, he still noted to the PEC that he does this procedure "maybe twice a year at the max." (Id. at 126:5-7; 128:18 to 129:25.)

d. Deoxycholic acid (Kybella)

60. Deoxycholic acid (commonly known by the brand name Kybella), is the first FDA approved fat reduction injection. (Antenucci Cert., **Exhibit 4**.) Kybella works by slowly dissolving fat, and usually requires up to three treatments spaced one month apart for full correction. (Ibid.)

61. Respondent advertises non-surgical "skin tightening" procedures with Kybella. (Antenucci Cert., **Exhibit 3** at 137:17 to 138:2; 139:8-15. See also Quizon Cert., **Exhibit 1**.) He claims his Kybella injection "melts" submental fat, and "once the submental fat is tightened, the neck can look a little better." (Id. at 139:17 to 140:24.)

62. Kybella does not tighten fat, it dissolves it. (Antenucci Cert., **Exhibit 4**.) Risks associated with reducing fat with Kybella, in other than a patient younger than 30, include leaving the skin looking looser due to loss of collagen and elastin with aging. (Ibid.)

e. Ultherapy and CoolSculpting

63. Ultherapy and CoolSculpting are FDA-approved devices for skin tightening and non-surgical fat reduction respectively. (Ibid.)

64. CoolSculpting has two serious complications: fat hypertrophy, where instead of losing fat, one continues to build a thick dense fat; and prolonged and very painful nerve pain. (Ibid.) Although rare, these complications need to be discussed with patients. (Ibid.)

65. In the past, Respondent had offered skin tightening procedures via Ultherapy and CoolSculpting devices. (Antenucci Cert., **Exhibit 3** at 80:5-9; 139:13-15.)

66. Respondent invested approximately $400,000 in four CoolSculpting machines, but claims he is now "outsourcing [that procedure] to other providers." (Id. at 80:10-24.)

67. Respondent's CoolSculpting pre-procedure protocol included "weigh[ing] [the patient], we do the measurements, we review the areas," and he could not recall the potential complications aside from patients getting "some redness, swelling." (Id. at 81:10 to 82:7.)

f. Botulinum toxin (Botox)

68. Botulinum toxin (commonly known by the brand name Botox) is an FDA-approved neurotoxic protein-based drug used to stop muscles from firing to reduce wrinkles. (Antenucci Cert., **Exhibit 4**.) Botox is primarily indicated for use in the face. (Ibid.)

69. Botox (like hyaluronidase and Bellafill), requires cold storage, at 2 to 8 degrees Centigrade (35.6 to 46.4 degrees Fahrenheit). (Ibid.) Poor handling and/or any break in the cold storage techniques can render Botox ineffective. (Ibid.)

COUNT I
(Respondent's injection of Radiesse for aesthetic procedures near patients' eyes.)

70. The General Allegations are repeated and re-alleged as if set forth at length herein.

71. Aesthetic procedures using Radiesse near the eye is considered an "off label" non-FDA approved use. (Ibid.)

72. The use of Radiesse near or around the eye is highly contraindicated since it is a very thick subdermal filler that can cause lumpiness in thin areas of the skin such as eyelids; and

because there are many blood vessels in the area that, if occluded, can cause vision loss or, in severe cases, permanent blindness. (Ibid.)

73. Radiesse, because of its composition, cannot be dissolved with an injection of hyaluronidase (Hylenex) or any other drug, in the event of a vascular occlusion in the blood vessels near or around the eye resulting from an improper injection. (Ibid.)

74. Respondent performs numerous aesthetic medical procedures involving the injection of Radiesse near or around patients' eyes. According to his treatment records, between May 6, 2021 and August 28, 2021, alone, he performed approximately 20 Radiesse eye injection procedures, as follows:

Patient[6]	**Procedure Date**	**Treatment Record Description of Radiesse Eye Procedure**[7]	**Bates Stamp**
L.B.	May 6, 2021	"Double Radiesse – tear trough"	Mirza_Supp_002660-002662
D.R.	May 8, 2021	"tear trough"	Mirza_Supp_00261-002623
J.G.	May 14, 2021	"Double Radiesse x2 under eyes" and "T. trough"	Mirza_Supp_002583-002585
M.P.	June 9, 2021	"tear drops"	Mirza_Supp_003042-003044
C.G.	June 10, 2021	"x2 Double Radiesse – 11's – under eyes"	Mirza_Supp_003000-003002
S.S.	June 19, 2021	"Double Radiesse tear trough – Apple lift"	Mirza_Supp_002870-002872

[6] Pursuant to Board policy, patient initials are being used throughout this Verified Complaint to preserve confidentiality.

[7] In some of the treatment records listed in this chart, Respondent provided aesthetic procedures in addition to the eye procedure listed. The above chart only includes references to Respondent's notations signifying Radiesse eye procedures.

K.R.	June 20, 2021	"tear troughs"	Mirza_Supp_002847-002849
R.A.	June 25, 2021	"Tear trough"	Mirza_Supp_002754-002756
K.M.	June 26, 2021	"Tear Troughs"	Mirza_Supp_002731-002733
N.M.	July 8, 2021	"Apple Lift – Tear trough – Temples"	Mirza_Supp_003503-003505
K.G.	July 8, 2021	"Double Radiesse x 2 syringes – Tear troughs"	Mirza_Supp_003479-003481
M.M.	July 10, 2021	"Tear troughs"	Mirza_Supp_003412-003414
J.Ga.	July 16, 2021	"Double Radiesse – tear drops – Nasolabial folds"	Mirza_Supp_003365-003367
E.A.	July 16, 2021	"Double Radiesse x1 – tear drop"	Mirza_Supp_003362-003364
K.T.	July 23, 2021	"Double Radiesse – Apples – teardrops – (L) Definition"	Mirza_Supp_003238-003240
T.H.-T.	July 31, 2021	"tear troughs"	Mirza_Supp_003119-003121
G.B.	July 31, 2021	"Nasolabial Folds – tear troughs"	Mirza_Supp_003099-003101
K.C.	August 7, 2021	"tear troughs"	Mirza_Supp_003915-003917
G.M.	August 12, 2021	"T. Trough"	Mirza_Supp_003807-003809
M.Ma.	August 28, 2021	"under eye – tear trough (Left + Right)"	Mirza_Supp_003607-003609

(See Respondent's certified treatment records for L.B.; D.R.; J.G.; M.P.; C.G.; S.S.; K.R.; R.A.; K.M.; N.M.; K.G.; M.M.; J.Ga.; E.A.; K.T.; T.H.-T.; G.B.; K.C.; G.M.; and M.Ma., attached as **Exhibit 12** to Antenucci Cert.)

75. Respondent's treatment note for each of the above-referenced patients fails to include any before or after photographs. (Ibid.) Pre- and post-procedure photographs are used throughout Aesthetic Medicine, most commonly for aesthetic procedures of the face, eyes, and breasts. (Antenucci Cert., **Exhibit 4**.)

76. Respondent's treatment records for the above-referenced patients also fail to include any visual map of the face or diagram indicating where on the face near the eye he injected the Radiesse and how the injection was performed, nor are Respondent's treatment notes specific as to the amount of Radiesse injected near or around each patients' eye(s). (Ibid.)

77. Aesthetic medical records documenting injection procedures should be clearly legible and informative, particularly as to what product was injected, as well as to how and where such injections were administered. (Ibid.) Without proper medical recordkeeping, insufficient or uneven aesthetic results from such injection procedures may be difficult to correct. (Ibid.)

78. Respondent's practice of Aesthetic Medicine grossly deviates from accepted standards of care in that specialty because he performs aesthetic procedures in a manner that could cause bodily harm, including but not limited to permanent blindness, allergic reaction, tissue loss, wounds and/or scarring, due to his lack of formal medical training and inadequate knowledge base in this specialty, as well as his deficient storage of supplies, inappropriate selection of an injectable dermal filler, poor record keeping, and an inappropriate office setting. (Ibid.)

79. Respondent's actions described herein constitute gross negligence which endangered the life, health, welfare, safety or property of a person, in violation of N.J.S.A. 45:1-

21(c); repeated acts of negligence, in violation of N.J.S.A. 45:1-21(d); professional or occupational misconduct, in violation of N.J.S.A. 45:1-21(e); and a failure to comply with the provisions of an act or regulation administered by the Board, in violation of N.J.S.A. 45:1-21(h) (namely, the accurate preparation of patient records, pursuant to N.J.A.C. 13:35-6.5(b)); and the failure to be of good moral character as required for licensing as a physician pursuant to N.J.S.A. 45:9-6.

80. Furthermore, Respondent's persistent and ongoing gross deviation from accepted standards of care in Aesthetic Medicine and his violation of Board statutes and regulations places the public's health, safety, and welfare in clear and imminent danger and warrants the temporary suspension of his license to practice medicine and surgery pursuant to N.J.S.A. 45:1-22.

COUNT II
(Respondent's use of Radiesse for penile enhancement procedures.)

81. The General Allegations and those of Count I are repeated and re-alleged as if set forth at length herein.

82. Respondent performs numerous non-surgical penile enhancement procedures. (Antenucci Cert., **Exhibit 4**.)

83. Respondent has no formal urology training and does not have an urologist or specialist with whom he consults regarding these procedures. (Ibid. See also Antenucci Cert., **Exhibit 3** at 10:5 to 11:4; 82:21-25; 91:6-21; and **Exhibit 7**.)

84. Respondent advertises and offers patients non-surgical penile enhancement procedures. (Id. at 83:5-8-11; 84:22 to 85:19; 95:15 to 96:22; 100:5-9. See also Quizon Cert., **Exhibit 1**.)

85. He injects Radiesse (among other fillers) into the penis to achieve non-surgical penile enhancement. (Ibid.)

86. Aesthetic procedures involving the injection of Radiesse into the subdermal tissue of the penis are considered "off label", non-FDA approved, use of this product. (Antenucci Cert., **Exhibit 4**.)

87. The use of Radiesse for non-surgical penile enhancement is highly contraindicated because it is a very thick subdermal filler that, if incorrectly injected into the vascular rich areas of the penis, can cause an occlusion. (Ibid.)

88. A vascular occlusion in the penis can result in a permanent loss of tissue, wounds, and scarring. (Ibid.)

89. Radiesse, because of its composition, also cannot be dissolved with an injection of hyaluronidase (Hylenex) or any other drug, into the blood vessels of the penis in the event of vascular occlusion resulting from an improper injection. (Ibid.)

90. A surgical decompression procedure may be required to relieve the blockage. (Ibid.) This is a difficult procedure, which Respondent is not qualified to perform, and carries inherent risks associated with surgery. (Ibid.)

91. On June 11, 2020, Respondent performed a non-surgical penile enhancement procedure on S.C. that involved the injection of Radiesse (and the HA filler, Juvéderm) subdermally into his penis. (See Respondent's certified treatment record for S.C., attached as **Exhibit 13** to Antenucci Cert. See also Antenucci Cert., **Exhibit 3** at 98:15 to 99:20; 100:11-20.)

92. Pre-procedure, Respondent documents in his "Progress Note" for S.C. his observation that the: "right base of [S.C.'s] penile shaft shows 1x1" nodule hard non-elastic in nature" and that "patient admits trying to self-inject his shaft with unknown substance last week." (Ibid.)

93. Respondent, in spite of these observations, did not consult with an urologist or urge S.C. to do so, and instead proceeded with an injection of "3cc Juvederm . . . and 4cc Radiesse . . . using 26 gauge needle into the subdermal space" of S.C.'s penis. (Antenucci Cert., **Exhibit 13**. See also **Exhibit 3** at 99:11-20.)

94. Approximately 2 to 3 hours after the procedure, S.C. developed a consistent painful erection, which required his hospitalization beginning on June 12, 2020. (See page 487 of Montefiore Medical Center Emergency Department ("Montefiore") treatment record for S.C. (certification pending), attached as **Exhibit 14** to Antenucci Cert.) S.C. was diagnosed with ischemic priapism. (Id. at pages 317; 319; 322.)

95. During S.C.'s hospitalization, a Montefiore emergency department physician spoke with Respondent. (Id. at pages 497; 499.) Respondent disclosed to S.C.'s treating physician that he had only "injected 4cc of Juvederm into [S.C.] yesterday" and he recommended that the emergency department physician inject "a combination of hyaluronidase and mechanical draining of erection with phenylephrine." (Ibid.)

96. Respondent failed to disclose to S.C.'s treating physician his injection of Radiesse for S.C.'s June 11, 2020 non-surgical penile enhancement procedure. (Ibid. See also Antenucci Cert., **Exhibit 13**.)

97. As per Respondent's recitation of S.C.'s procedure history and his recommendation, the emergency department physicians first treated S.C.'s ischemic priapism with hyaluronidase and phenylephrine, and aspirated "~100cc of dark red blood and filler" from S.C.'s penis. (Antenucci Cert., **Exhibit 14** at page 497.)

98. However, this proved ineffective at resolving S.C.'s painful erection, and ultimately S.C. required a distal and proximal corporal surgical decompression procedure and implantation of a shunt into his penis to relieve ongoing symptoms of priapism. (Id. at pages 455; 497.)

99. Respondent's treatment record for S.C. fails to include information regarding any post-procedure complications or dialogue with the patient, nor any communication with emergency department staff at Montefiore. (Antenucci Cert., **Exhibit 13**. See also **Exhibit 3** at 104:1-15. 105:1-21.)

100. Respondent also denied to the PEC that he was ever contacted by S.C.'s emergency department physician, or any physician about his care of any patient over the last three years. (Id. at 78:6-16; 169:1 to 170:12; 171:17-25; 172:2 to 173:1.)

101. Following his hospitalization, and continuing for months after he received Respondent's penile enhancement procedure, S.C. suffered from ongoing pain and an inability to achieve an erection. (See Mt. Sinai Hospital outpatient treatment records for S.C. for treatment dates between August 21, 2020 to October 12, 2020 (certification pending), attached as **Exhibit 15** to Antenucci Cert. See also **Exhibit 4.**)

102. Since his treatment of S.C., Respondent has continued offering Radiesse injections for penile enhancement, as recently as August 17, 2021. These include, but are not limited to, the following:

Patient	**Procedure Date**	**Treatment Record Description of Procedure**	**Bates Stamp**
R.P.	September 1, 2020	"10 Radiesse P-Shot" and "5+5cc R+L Rad subdermal shaft"	Mirza_Supp_001461-001463
I.B.	September 5, 2020	"P Shot – 2 Rad" and "2cc Rad 1+1 R+L subdermal shaft"	Mirza_Supp_001347-001349

J.B.	October 1, 2020	"P Shot . . . 10 Rad" and "5+5cc Rad subdermal shaft"	Mirza_Supp_001426-001428
C.S.	October 7, 2020	"P Shot 3 Rad" and "1.5cc x2 Rad R+L subdermal shaft"	Mirza_Supp_001420-001422
S.H.-I.	October 16, 2020	"P Shot 5 Rad" and "3+3cc R+L subdermal shaft HA-Rad"	Mirza_Supp_003000-003002
I.H.	October 28, 2020	"P shot" and "1cc [illegible] R+L subdermal shaft Rad"	Mirza_Supp_001411-001413
J.C.	November 22, 2020	"10 P Shot Rad" and "5+5cc subdermal Rad R+L subdermal shaft"	Mirza_Supp_001362-001364
M.C.	December 1, 2020	"x8 Radiesse P-Shot" and "4+4cc Rad [lot number] R+L subdermal shaft"	Mirza_Supp_001353-001355
J.R.	December 15, 2020	"P Shot 2 Rad" and "1+1cc Rad R+L subdermal shaft"	Mirza_Supp_001325-001327
J.L.-R.	December 26, 2020	"P Shot 5 Rad" and "3cc + 2cc R+L subdermal shaft Rad [lot number]"	Mirza_Supp_001307-001309
A.O.	July 27, 2021	"P Shot" and "1 Rad 0.5 R+L subdermal shaft"	Mirza_Supp_003569-003571
F.C.	August 17, 2021	"P Shot" Radiesse Lot Numbers A00022010, A00024280	Mirza_Supp_003700-003702

(See Respondent's certified treatment records for patients R.P.; I.B.; J.B.; C.S.; S.H.-I.; I.H.; J.C.; M.C.; J.R.; J.L.-R.; A.O.; and F.C. attached as **Exhibit 16** to Antenucci Cert.)

103. Respondent advertises the "P-Shot" as a non-surgical "platelet rich plasma based injection" to the penis for male enhancement, including "immediate results" for "increased size,

increased circulation, strengthening and straightening and increased sensation and pleasure." (Quizon Cert., **Exhibit 1** at page 86.)

104. Respondent's practice of Aesthetic Medicine grossly deviates from accepted standards of care in that specialty because he performs aesthetic procedures in a manner that caused actual harm to S.C., and could cause bodily harm to others, including but not limited to permanent disfigurement, pain, impotence, tissue loss, wounds and/or scarring, due to his lack of formal medical training and inadequate knowledge base in this specialty, as well as his deficient storage of supplies, inappropriate selection of an injectable dermal filler, poor record keeping, and an inappropriate office setting. (Ibid.)

105. Respondent's actions described herein constitute fraud, deception and/or dishonesty, in violation of N.J.S.A. 45:1-21(b); gross negligence which endangered the life, health, welfare, safety or property of a person, in violation of N.J.S.A. 45:1-21(c); repeated acts of negligence, in violation of N.J.S.A. 45:1-21(d); professional or occupational misconduct, in violation of N.J.S.A. 45:1-21(e); and a failure to comply with the provisions of an act or regulation administered by the Board, in violation of N.J.S.A. 45:1-21(h) (the duty to cooperate with a Board investigative inquiry, pursuant to N.J.A.C. 13:45C-1.4; and the preparation of patient records, pursuant to N.J.A.C. 13:35-6.5(b)); and the failure to be of good moral character as required for licensing as a physician pursuant to N.J.S.A. 45:9-6.

106. Furthermore, Respondent's persistent and ongoing gross deviation from accepted standards of care in Aesthetic Medicine and his violation of Board statutes and regulations places the public's health, safety, and welfare in clear and imminent danger and warrants the temporary suspension of his license to practice medicine and surgery pursuant to N.J.S.A. 45:1-22.

COUNT III
(Respondent's failure to perform required allergy testing associated with his Bellafill procedures.)

107. The General Allegations and those of the preceding Counts are repeated and re-alleged as if set forth at length herein.

108. Bellafill contains a collagen carrier, to which some patients may be allergic. (Antenucci Cert., **Exhibit 4**.) Therefore the FDA requires practitioners to perform a skin allergy test prior to injecting a patient with Bellafill. (Ibid.)

109. If the patient does not suffer a reaction from the allergy testing for 30 days, treatment with Bellafill can proceed. (Ibid.) Patients who show a hypersensitivity to bovine collagen are ineligible for treatment with Bellafill. (Ibid. See also Antenucci Cert., **Exhibit 11**.)

110. Patients injected with Bellafill without proper allergy testing, may suffer allergic reactions including but not limited to acute episodes of hypotension, difficulty breathing, tightness in the chest, and/or shortness of breath, or a cystic reaction at the injection site. (Ibid.)

111. Respondent is "one of the largest buyers of Bellafill" in New Jersey. (Antenucci Cert., **Exhibit 3** at 70:22-25.)

112. Respondent's treatment records support that, between March and April 2021, alone, he performed aesthetic procedures involving an injection of Bellafill on 53 different patients. (See Respondent's certified treatment records for patients S.B.; N.C.; J.R.; C.D.; S.A.; D.S.; L.A.; S.M.; R.R.; P.R.; L.H.; J.L.; S.S.; N.M.; M.P.; L.F.; E.G.; A.K.; M.D.; K.R.; J.C.; J.H.; E.N.; R.G.; M.De.; A.C.; A.P.; L.G.; A.A.; C.T.; D.B.; H.Z.; J.M; L.Ge.; B.K.; K.H.; A.G.; D.P.; G.G.; H.A.; M.G.; T.F.; U.H.; J.Ho.; V.M.; P.N.; G.B.; D.M.; R.A.; W.B.; J.La.; V.G.; and J.P., attached as **Exhibit 17** to Antenucci Cert.)

113. Respondent told the PEC that most of his Bellafill patients have had the allergy testing completed by other doctors. (Antenucci Cert., **Exhibit 3** at 70:16-21; 71:1-7.) However, his treatment records do not indicate by whom, or when his patient received Bellafill allergy testing. (Antenucci Cert., **Exhibit 4** and **Exhibit 17**.)

114. If he administers a Bellafill allergy test, his post-test waiting period is "probably two to three days" before proceeding with the injection. (Antenucci Cert., **Exhibit 3** at 71:8-22; 72:2-9.)

115. Respondent's approach to Bellafill treatment is further illustrated, in part, by his care of patients M.M. and E.R.:

a. On November 1, 2020, M.M. sought treatment from Respondent for her facial scars. (See M.M.'s September 22, 2021 sworn statement, attached as **Exhibit 18** to Antenucci Cert.) She had never received any Bellafill treatment, nor had she had a Bellafill allergy test from another provider. (Ibid.)

b. On the date of treatment M.M. specifically requested treatment with Bellafill, which Respondent agreed to provide, and for which she paid. (Ibid.)

c. Respondent never conducted a Bellafill allergy test, nor even disclosed to M.M. the need for one, and proceeded with what M.M. believed to be an injection of Bellafill. (Ibid.)

d. Respondent would not show M.M. what he was injecting her with, and when asked why she was charged more than she anticipated he told her that he had "mixed" Bellafill with another product for "better results." (Ibid.)

e. Respondent documents that he treated M.M. on November 1, 2020, "Double Radiesse x2 syringe – Nasolabial Folds – Marionette Lines – PDO Threads – Scar

treatment" for $2,000. (See Respondent's certified treatment record for M.M., attached as **Exhibit 19** to Antenucci Cert.)

f. On May 15, 2021, Respondent performed an aesthetic procedure on patient E.R. involving the injection of Bellafill. (See Respondent's certified treatment record for E.R., attached as **Exhibit 20** to Antenucci Cert. See also **Exhibit 10**.)

g. Respondent documents in E.R.'s treatment record, among other procedures "Bellafill – cheeks – high cheeks Left & Right" and that E.R. has a history of Bellafill use with his notation of "established H/O BFill." (Ibid.)

h. Prior to her treatment with Respondent on this date, E.R. had not received any Bellafill treatment from another provider, or Respondent, nor had she had a Bellafill allergy test from another provider, or Respondent. (See E.R.'s September 28, 2021 sworn statement, attached as **Exhibit 21** to Antenucci Cert.) Nevertheless, Respondent injected her with Bellafill. (Ibid.)

116. Respondent's practice of Aesthetic Medicine grossly deviates from accepted standards of care in that specialty because he performs aesthetic procedures in a manner that could cause bodily harm, including but not limited to allergic reactions, tissue loss, wounds and/or scarring, due to his lack of formal medical training and inadequate knowledge base in this specialty, as well as his deficient storage of supplies, inappropriate selection of an injectable dermal filler, poor record keeping, and an inappropriate office setting. (Ibid.)

117. Respondent's actions described herein constitute fraud, deception and/or dishonesty, in violation of N.J.S.A. 45:1-21(b); gross negligence which endangered the life, health, welfare, safety or property of a person, in violation of N.J.S.A. 45:1-21(c); repeated acts of negligence, in violation of N.J.S.A. 45:1-21(d); professional or occupational misconduct, in

violation of N.J.S.A. 45:1-21(e); and a failure to comply with the provisions of an act or regulation administered by the Board, in violation of N.J.S.A. 45:1-21(h) (namely, the accurate preparation of patient records, pursuant to N.J.A.C. 13:35-6.5(b)); and the failure to be of good moral character as required for licensing as a physician pursuant to N.J.S.A. 45:9-6.

118. Furthermore, Respondent's persistent and ongoing gross deviation from accepted standards of care in Aesthetic Medicine and his violation of Board statutes and regulations places the public's health, safety, and welfare in clear and imminent danger and warrants the temporary suspension of his license to practice medicine and surgery pursuant to N.J.S.A. 45:1-22.

COUNT IV
(Respondent's use of Radiesse for breast enhancement procedures.)

119. The General Allegations and those of the preceding Counts are repeated and re-alleged as if set forth at length herein.

120. The use of Radiesse for non-surgical breast enhancement is not an accepted practice in the field of Aesthetic Medicine. (Antenucci Cert., **Exhibit 4**.)

121. The calcium hydroxylapatite particles of Radiesse are radiopaque and may be visible in radiological mammography screening, if injected into the breast tissue, thus having the potential to interfere with the interpretation of those radiological studies. (Ibid.)

122. Use of Radiesse for this purpose is considered a non-FDA approved "off label" use. (Ibid.)

123. Most of Respondent's non-surgical breast enhancement procedures are completed with HA fillers (and sometimes Sculptra), but "if the customer is asking for" Radiesse, he would use it because he did not "see any potential issue." (Antenucci Cert., **Exhibit 3** at 125:11 to 126:1.)

124. Respondent's non-surgical breast enhancement procedures involve "probably a few cc of volume" with the patient on average getting 3 cc of filler per side. (Id. at 126:11-22; 127:7 to 128:4.)

125. Injecting this amount would provide only a minimal, if any, difference in a patient's physical appearance. (Antenucci Cert., **Exhibit 4**.) To achieve an aesthetically noticeable change to breast size, a patient would require hundreds of "ccs" of material, which is typically achieved through surgical fat-grafting or breast augmentation with implants. (Ibid.)

126. On September 20, 2020, Respondent performed a non-surgical breast enhancement procedure on patient M.K. involving Radiesse. (See Respondent's certified treatment record for M.K., attached as **Exhibit 22** to Antenucci Cert.)

127. Respondent's treatment note for M.K. fails to include any before or after photographs. (Ibid.)

128. Pre- and post-procedure photographs are used throughout Aesthetic Medicine, most commonly for aesthetic procedures of the face, eyes, and breasts. (Antenucci Cert., **Exhibit 4**.)

129. Respondent's treatment records for M.K. fail to include any visual map of the breast or diagram indicating where on the breast he injected Radiesse and how the injection was performed, nor are Respondent's treatment notes clear or specific as to the amount of Radiesse injected into the breast tissue. (Ibid.)

130. Aesthetic medical records documenting injection procedures should be clearly legible and informative, particularly as to what product was injected, as well as how and where such injections were administered. (Ibid.) Without proper medical recordkeeping, insufficient or uneven aesthetic results from such injection procedures may be difficult to correct. (Ibid.)

131. Respondent's practice of Aesthetic Medicine grossly deviates from accepted standards of care in that specialty because he performs aesthetic procedures in a manner that could cause bodily harm, including but not limited to allergic reactions, tissue loss, wounds and/or scarring, due to his lack of formal medical training and inadequate knowledge base in this specialty, as well as his deficient storage of supplies, inappropriate selection of an injectable dermal filler, poor record keeping, and an inappropriate office setting. (Ibid.)

132. Respondent's actions described herein constitute fraud, deception and/or dishonesty, in violation of N.J.S.A. 45:1-21(b); gross negligence which endangered the life, health, welfare, safety or property of a person, in violation of N.J.S.A. 45:1-21(c); repeated acts of negligence, in violation of N.J.S.A. 45:1-21(d); professional or occupational misconduct, in violation of N.J.S.A. 45:1-21(e); and a failure to comply with the provisions of an act or regulation administered by the Board, in violation of N.J.S.A. 45:1-21(h) (namely, the accurate preparation of patient records, pursuant to N.J.A.C. 13:35-6.5(b)); and the failure to be of good moral character as required for licensing as a physician pursuant to N.J.S.A. 45:9-6.

133. Furthermore, Respondent's persistent and ongoing gross deviation from accepted standards of care in Aesthetic Medicine and his violation of Board statutes and regulations places the public's health, safety, and welfare in clear and imminent danger and warrants the temporary suspension of his license to practice medicine and surgery pursuant to N.J.S.A. 45:1-22.

WHEREFORE, Complainant demands the entry of an Order:

134. Temporarily suspending Respondent's license to practice medicine and surgery in the State of New Jersey pending the disposition of a plenary hearing on this Verified Complaint;

135. Suspending or revoking Respondent's license to practice medicine and surgery in the State of New Jersey pursuant to N.J.S.A. 45:1-21, following a plenary hearing;

136. Assessing civil penalties against Respondent for each and every separate unlawful act as set forth in the individual counts above, pursuant to N.J.S.A. 45:1-21;

137. Requiring Respondent to pay costs, including investigative costs, attorney's fees and costs, expert and fact witness fees and costs, costs of trial, and transcript costs, pursuant to N.J.S.A. 45:1-25; and

138. Ordering such other and further relief as the Board shall deem just and appropriate under the circumstances.

ANDREW J. BRUCK
ACTING ATTORNEY GENERAL OF NEW JERSEY

By: /s/ Michael Antenucci
Michael Antenucci
Deputy Attorney General

By: /s/ Daniel Evan Leef Hewitt
Daniel Evan Leef Hewitt
Deputy Attorney General

Dated: September 29, 2021