

1 **IN THE SUPREME COURT OF THE STATE OF NEVADA**
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3 KOFI SARFO, M.D.,
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5 Appellant,
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7 vs.

8 THE NEVADA STATE BOARD OF
9 MEDICAL EXAMINERS,
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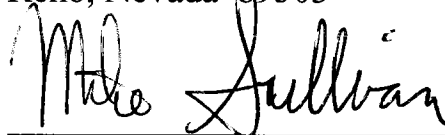
11 Respondent.
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Supreme Court No. 73117

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13 **RESPONDENT'S ANSWERING BRIEF**
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These representations are made so that the justices of the Court may evaluate possible disqualifications or recusal.

Respondent Nevada State Board of Medical Examiners is a government agency. The undersigned counsel appeared on behalf of this Respondent before the District Court, and is expected to appear on behalf of Respondent in this appeal.

Dated this 22nd day of November, 2017.

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3 This matter is properly before the Supreme Court, unless this Court
4 chooses to exercise its discretion to have this case assigned to the Court of
5 Appeals. This appeal does not implicate any of the issues which would
6 presumptively assign it to the Court of Appeals under NRAP 17(b). This
7 appeal concerns a constitutional claim, but the issues are similar to the issues
8 already decided by this Court in *Hernandez v. Bennett-Haron*, 128 Nev. 580,
9 287 P.3d 305 (2012). The issue in this appeal is whether appellant's due
10 process rights were violated by the investigation performed by Respondent
11 pursuant to NRS Chapter 630's statutory mandates. This Court has already
12 held that due process protections do not attach to fact-finding functions of an
13 agency. *See Hernandez*, 128 Nev. at 592-93, 287 P.3d at 314.

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STATEMENT OF THE ISSUES

1. Whether the District Court abused its discretion in denying appellant's preliminary injunction after finding that appellant cannot prevail on the merits of his due process claims because due process protections do not attach to fact-finding functions of administrative agencies where there is no adjudication of legal rights?

2. Whether the District Court abused its discretion in awarding attorney fees to Respondent under NRS 18.010(2)(b), where Respondent prevailed in defeating the injunction on the ground that the underlying claim has no merit, and where there is evidence in the record that the lawsuit was brought without reasonable ground and maintained to harass Respondent?

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1 *Haron*, 128 Nev. 580, 287 P.3d 305 (2012), the District Court held that due
2 process protections do not attach to fact-finding and investigatory functions of
3 an administrative agency, and that the I.C.'s order to Dr. Sarfo to produce
4 records was consistent with the investigatory function of the Board. This
5 appeal follows.
6
7

8 **FACTUAL BACKGROUND**

9 **I. THE BOARD'S INVESTIGATORY FUNCTIONS**

10 To fully understand the conduct of which Dr. Sarfo complains, it is
11 important to understand the distinction between the two types of complaints
12 which come before the Board: (1) a "complaint" filed by a member of the
13 public, alleging wrongful conduct on the part of a physician; and (2) a
14 "formal complaint" filed by the Board against the physician which results in
15 an adjudicative hearing. Dr. Sarfo's appeal challenges the Board's
16 procedures in investigating the merits of the first type of complaint.
17
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19 "[A]ny person may file with the Board a complaint against a
20 physician." NRS 630.307(1). When a member of the public complains about
21 a physician, the Board must designate a committee to "review each complaint
22 and conduct an investigation to determine if there is a reasonable basis for the
23 complaint" (i.e., the I.C.). NRS 630.311(1). The I.C. "may issue orders to
24 aid its investigation." *Id.* In addition, the I.C. "may issue subpoenas to
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1 compel the . . . production of books, X-rays, medical records or any other
2 item within the scope of Rule 45 of the Nevada rules of Civil Procedure.”
3
4 NRS 630.140(1)(b). The subpoena must identify the “name of the witness
5 and specifically identify the . . . medical records or other papers which are
6 required to be produced.” NAC 630.475(1).
7

8 The “proceedings of the committee” investigating the complaint are
9 “confidential.” NRS 630.311(3). The complaint made against the physician
10 “and other information compiled as a result of the investigation conducted to
11 determine whether to initiate disciplinary action” are also confidential. NRS
12 630.336(4).
13
14

15 Importantly, *no adjudication of the physician’s right to practice*
16 *medicine is made during this investigation.* Instead, the I.C. is only
17 authorized to determine whether (1) the complaint is frivolous, or (2) “there is
18 a reasonable basis for the complaint.” NRS 630.311(2). Thus, the I.C. acts as
19 a fact finder and reports its findings to the Board.
20
21

22 If the I.C. determines that there is a reasonable basis for the complaint,
23 it “may” file a “formal complaint” with the Board. *Id.* Once the formal
24 complaint is filed, the physician and the Board proceed through an
25 adjudicative process which provides notice, opportunity to be heard, and
26 subsequent judicial review. *See* NRS 630.339 – NRS 630.356. A physician
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1 may be disciplined by the Board under his or her license only after an
2 extensive hearing procedure and full adjudication before the Board. *See* NRS
3 630.352. A physician may seek judicial review of any final order entered by
4 the Board. NRS 630.356(1).
5

6 **II. THE INVESTIGATION OF DR. SARFO**

7

8 On March 14, 2017, the I.C. served Sarfo with an order to produce
9 medical records. *See* 1 Joint Appendix (“JA”) 35. The order identified the
10 witness (Dr. Sarfo), and specifically sought “complete copies of any all
11 medical records” of the five identified patients. *Id.*
12

13 Accompanying the order was a letter from the I.C. informing Dr. Sarfo
14 of the nature of the allegations against him and the pending investigation. *Id.*
15 at 32-33. As the letter explained, a complaint had been filed against Dr. Sarfo
16 which alleged that:
17

18 [Y]our medical records have poor documentation, failed to keep
19 legible, accurate and complete medical records and you may be billing
20 for services not rendered. Furthermore, it is alleged that your patient
21 notes/billings appears to make services potentially fabricated and then
22 billing for services not rendered.

23 *Id.* at 32. The letter also identified the five patients whose medical records had
24 been alleged to be deficient. *Id.*
25

26 The I.C. also informed Dr. Sarfo in the letter that it could “make no
27 determination as to whether or not there has been a violation of the Medical
28

1 Profession Act, prior to the completion of our investigation.” *Id.* The I.C.
2 specifically requested that Dr. Sarfo respond to the allegations. *Id.*
3

4 On March 16, 2017, Dr. Sarfo informed the I.C. that he would not
5 respond or comply with the order because he believed that the order violated
6 his due process rights. *Id.* at 38-39. Dr. Sarfo further complained that the
7 I.C.’s request for all of the medical records of these five patients was
8 I.C.’s request for all of the medical records of these five patients was
9 overbroad because it was not limited in time. *Id.*
10

11 **III. THE DISTRICT COURT DENIES DR. SARFO’S REQUEST**
12 **FOR A PRELIMINARY INJUNCTION PROHIBITING**
13 **COMPLIANCE WITH THE SUBPOENA.**

14 Dr. Sarfo filed an Emergency Petition for Writ of Mandamus or
15 Prohibition in the Eighth Judicial District Court, which sought to prevent the
16 I.C. from enforcing its request for medical records on the ground that the
17 I.C.’s request and refusal to disclose the identity of the complainant violated
18 Dr. Sarfo’s due process rights. *Id.* at 2-23. He simultaneously sought
19 injunctive relief prohibiting enforcement of the order. *Id.* at 71-99.
20

21 While the injunctive relief motion was being briefed, the Board and Dr.
22 Sarfo entered into a stipulation in which the Board agreed to initially accept
23 two-years’ worth of medical records for each of the five patients. *Id.* at 147-
24 150. The Board reserved its right to seek additional records, pending the
25 results of its initial review. *Id.* at 148. Dr. Sarfo compiled these records onto
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1 a CD-ROM, and brought the records with him to the hearing on the motion
2 for preliminary injunction. 2 JA 244.
3

4 At the hearing on Dr. Sarfo's motion for a preliminary injunction, the
5 District Court found:

6
7 When I look at [NRS] 63[0].11[1] and it's
8 clear that it says that the Board shall review
9 complaints and conduct an investigation, and that's
10 what they're doing at this point. So, I'm seeing
11 they're complying with 63[0].11[1]. I'd have a
12 different take on the *Hernandez* matter because
13 *Hernandez*, we looked at general fact finding versus
14 adjudication of legal rights. And I think when we
15 have adjudication of legal rights, that's when due
16 process kicks in. So, I think *Hernandez* is
17 dispositive of this particular issue today. And, so,
18 I'm going to deny the Motion for Preliminary
19 Injunction based upon those reasons here.

20 *Id.* at 262.

21 Thus, the District Court denied Dr. Sarfo's request for a preliminary
22 injunction because it held that Dr. Sarfo could not prevail on the merits of his
23 underlying writ petition. *Id.* at 267. The District Court found that the Board
24 "is empowered to issue the order of which Dr. Sarfo complains, the
25 investigation itself is confidential, and the Board is prohibited from disclosing
26 to Dr. Sarfo the identity of the person who filed the complaint, or the actual
27 complaint disclosing such" under NRS 630.140(1), NRS 630.311(1), and
28 NRS 630.336(4). *Id.* The District Court further found that the I.C. "has no

1 authority to adjudicate any legal rights,” and is merely “tasked with gathering
2 facts and investigating whether there is any merit to the complaint filed with
3 the Board against a physician.” *Id.* at 268. Relying on *Hernandez*, the
4 District Court found that the I.C.’s activities do not implicate any due process
5 rights because they are merely “fact-finding and investigatory exercises.” *Id.*
6 Finally, the District Court also found that the public interest weighed in favor
7 of the Board, given its “statutory duty to protect the public by investigating all
8 complaints filed against a physician by members of the public, and issuing
9 enforceable orders to aid its investigation.” *Id.* Accordingly, it denied Dr.
10 Sarfo’s request for an injunction.
11

12 **IV. ATTORNEY FEES**

13 Dr. Sarfo appealed the District Court’s denial of his request for a
14 preliminary injunction on May 22, 2017. *Id.* at 359-60. Three days later, the
15 Board filed a motion seeking attorney fees and costs against Dr. Sarfo under
16 NRS 18.010(2)(b), and against his counsel, Jacob Hafter, Esq., under NRS
17 7.085. *Id.* at 289-305.
18

19 On June 28, 2017, the Court issued a minute order granting the Board’s
20 request for fees against Dr. Sarfo, but denying it against Mr. Hafter. *Id.* at
21 357-58. The minute order directed the Board to prepare and submit a
22 proposed order upon service of the minute order. *Id.* at 358. Dr. Sarfo did
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1 not appeal the minute order. The final order regarding attorney fees was not
2 entered until November 15, 2017. *See* Respondents Appendix (“RA”) at 1-5.
3

4 **SUMMARY OF THE ARGUMENT**

5 The District Court did not abuse its discretion in denying Dr. Sarfo’s
6 motion for a preliminary injunction because Dr. Sarfo cannot prevail on the
7 merits of his due process claim. Dr. Sarfo argues that he has been deprived of
8 due process by the investigation of the Board. However, to bring a due
9 process challenge, Dr. Sarfo must show that a protected property interest is at
10 stake. Because no formal complaint has been filed against Dr. Sarfo to
11 initiate a disciplinary proceeding, Dr. Sarfo’s medical license is not at stake
12 and Dr. Sarfo cannot suffer an infringement of a property interest sufficient to
13 support a due process challenge.
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18 In addition, this Court has held that due process protections do not
19 attach to the fact-finding and investigatory functions of state administrative
20 agencies. *Hernandez*, 128 Nev. at 592-93, 287 P.3d at 314. Dr. Sarfo
21 challenges the investigatory functions of the I.C., which cannot take any
22 disciplinary action against Dr. Sarfo under his license; only the full Board
23 itself can do that, after a full hearing and formal adjudication.¹ Under NRS
24 Chapter 630, the Board may discipline Dr. Sarfo under his license only if a
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28 ¹The Board may also take disciplinary action against a physician if the
physician enters into a settlement agreement which is approved by the Board.

1 formal complaint is filed upon completion of the I.C.'s investigation, and then
2 after a full hearing before the Board occurs. No member of the I.C. who
3 participated in the investigation is permitted to render a decision during the
4 hearing process. The I.C.'s investigation, and its lawful order to produce
5 medical records, is unequivocally an investigative – not adjudicatory –
6 function. Thus, the District Court correctly found that this Court's holding in
7 *Hernandez v. Bennett-Haron*, 128 Nev. 580, 287 P.3d 305 (2012) governs this
8 case and defeats Dr. Sarfo's claims. Application of the *Hernandez* case to the
9 facts of this appeal is consistent with the holdings of other states addressing
10 similar challenges made by physicians to medical board investigations.
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15 Finally, Dr. Sarfo cannot demonstrate a threat of irreparable harm
16 sufficient to support a request for injunctive relief. Because no formal
17 disciplinary proceeding has been commenced, Dr. Sarfo's medical license is
18 not currently at stake and any threat of harm of losing his license is purely
19 speculative. Furthermore, the law is clear that a threat to reputation or the
20 ability to earn income, alone, is not "irreparable harm." For these reasons, the
21 District Court's order should be affirmed.
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24
25 Regarding attorney fees, Dr. Sarfo's challenge to the District Court's
26 award of attorney fees is not properly before this Court because Dr. Sarfo
27 never independently appealed either the minute order or the formal order.
28

1 Should this Court choose to address these arguments, the District Court did
2 not abuse its discretion in awarding the Board attorney fees under NRS
3 18.010(2)(b). Contrary to Dr. Sarfo's contention, the Board is a "prevailing
4 party" because it succeeded on a significant issue in the litigation, i.e.,
5 obtaining a ruling that Dr. Sarfo's underlying writ petition fails as a matter of
6 law. Furthermore, there is substantial evidence in the record demonstrating
7 that this lawsuit was brought merely to harass the Board. Accordingly, the
8 District Court's order should be affirmed.

12 ARGUMENT

13 **I. THE DISTRICT COURT DID NOT ABUSE ITS DISCRETION** 14 **IN DENYING DR. SARFO'S MOTION FOR A PRELIMINARY** 15 **INJUNCTION.**

16 **A. STANDARD OF REVIEW**

17 This Court reviews district court orders denying motions for
18 preliminary injunctions for an abuse of discretion. *Univ. & Cmty. Coll. Sys.*
19 *of Nev. v. Nevadans for Sound Gov't*, 120 Nev. 712, 721, 100 P.3d 179, 187
20 (2004). "Factual determinations will be set aside only when clearly erroneous
21 or not supported by substantial evidence, but questions of law are reviewed de
22 novo." *Id.*

23 A preliminary injunction is only available "upon a showing that the
24 party seeking it enjoys a reasonable probability of success on the merits and
25 that the defendant's conduct, if allowed to continue, will result in irreparable
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1 harm for which compensatory damages is an inadequate remedy.” *Sobol v.*
2 *Capital Mgmt.*, 102 Nev. 444, 446, 726 P.2d 335, 337 (1986); *see also* NRS
3 33.010. The court must “weigh the potential hardships to the relative parties,
4 and the public interest” in determining whether to grant injunctive relief.
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6 *Univ. & Cmty. Coll. Sys. of Nev.*, 120 Nev. at 721, 100 P.3d at 187.
7

8 **B. DR. SARFO CANNOT PREVAIL ON THE MERITS.**

9 The District Court did not abuse its discretion in denying Dr. Sarfo’s
10 motion for a preliminary injunction because: (1) no property interest is at
11 stake during an agency’s preliminary investigation that supports a due process
12 challenge; (2) due process does not attach to administrative agency
13 investigation and fact-finding functions; and (3) the Board is prohibited by
14 statute from providing Dr. Sarfo with a copy of the actual complaint.
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18 **1. No Property Interest Is at Stake During an Agency’s**
19 **Preliminary Investigation that Supports a Due Process**
20 **Challenge.**

21 Because no formal complaint has been filed against Dr. Sarfo, Dr.
22 Sarfo lacks standing to assert a due process challenge as his medical license is
23 not currently at stake. To bring a due process challenge, the party must show
24 that a protected property interest is implicated. *Board of Regents of State*
25 *Coll. v. Roth*, 408 U.S. 564, 571, 92 S. Ct. 2701, 2706 (1972); *see also*
26 *Hernandez*, 128 Nev. at 587, 287 P.3d at 310 (recognizing that the
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1 similarities between the Federal and State Constitutions allowed the Court to
2 look to federal precedent for guidance in due process challenges). Although
3 Nevada has recognized that a license to practice medicine is a protectable
4 property interest, *Minton v. Bd. of Med. Exam'rs*, 110 Nev. 1060, 1082, 881
5 P.2d 1339, 1354 (1994) (disapproved on other grounds by *Nassiri v.*
6 *Chiropractic Physicians' Bd.*, 130 Nev., Adv. Op. 27, 327 P.3d 487 (2014)),
7 Dr. Sarfo cannot show that his license to practice medicine is at risk because
8 the I.C. has no authority to take disciplinary action against Dr. Sarfo's license.
9

10 A procedural due process challenge to a medical board's investigation
11 of a physician is not a novel concept. These challenges are uniformly rejected
12 because no property interest in a license is at stake when the medical board is
13 merely investigating the merits of a complaint filed against a physician by a
14 member of the public. *See, e.g., Smith v. Bd. of Med. Quality Assurance*, 248
15 Cal. Rptr. 704, 710 (Ct. App. 1988); *Alexander D. v. State Bd. of Dental*
16 *Exam'rs*, 282 Cal. Rptr. 201, 204 (Ct. App. 1991); *Humenansky v. Minn. Bd.*
17 *of Med. Examiners*, 525 N.W. 2d 559, 566 (Minn. Ct. App. 1994).
18

19 In *Smith*, the California Court of appeals rejected a physician's
20 argument that the California Board of Medical Quality Assurance's
21 investigation of a complaint of incompetence against the physician violated
22 his procedural due process rights because the board's "proceedings were
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1 conducted to determine whether there was reasonable cause to believe that
2 Smith was an incompetent physician,” and the investigation “was not a
3 disciplinary proceeding and Smith’s license was not immediately at stake.”
4 248 Cal. Rptr. at 710. The Court reasoned that “[u]ntil a formal accusation is
5 filed against a physician [by the Board], his or her license is valid.” *Id.*
6 Similarly in *Alexander D.*, the California Court of Appeals rejected a dentist’s
7 argument that the California Board of Dental Examiners violated the dentist’s
8 due process rights when it investigated a complaint of mental incompetency
9 filed against the dentist because his “property interest or license” was not at
10 stake in the preliminary investigatory proceedings. 282 Cal. Rptr. at 204.

11
12 In *Humenansky*, the Minnesota Court of Appeals rejected the argument
13 that a physician’s due process rights were violated by the Minnesota Board of
14 Medical Examiner’s investigation against her because “Humenansky’s license
15 to practice medicine is not immediately at stake in [the] investigatory
16 proceeding.” 525 N.W.2d at 566. Although licenses to practice medicine are
17 also recognized as a property right in Minnesota, the Minnesota court found
18 that the investigation had a pure “investigatory purpose” under the relevant
19 Minnesota statutes, and that the board “has not yet decided to pursue
20 discipline against Humenansky.” *Id.* Because the physician faced “no
21 potential discipline until the board begins formal adjudicatory proceedings,”
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1 the Court found that the physician's license was not at risk so as to support a
2 due process challenge. *Id.*

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4 Similarly, here, Dr. Sarfo's license to practice medicine remains valid
5 and unimpaired during the pending of the I.C.'s investigation. *See* NRS
6 Chapter 630. The I.C. has not yet decided whether there is merit to the
7 complaint against Dr. Sarfo that would warrant the I.C. filing of a formal
8 complaint, which would initiate a formal disciplinary proceeding. The I.C.
9 has no authority to revoke or take any other such disciplinary action against
10 Dr. Sarfo's medical license; instead, Dr. Sarfo may only be disciplined by the
11 Board itself (not the I.C.) after an extensive hearing process. *See* NRS
12 630.352(1) (prohibiting the I.C. from participating in the decision making
13 process). Because Dr. Sarfo's license is valid and unimpaired, Dr. Sarfo
14 cannot demonstrate an infringement upon a protectable interest sufficient to
15 support a due process challenge.² Thus, Dr. Sarfo's due process challenge
16 fails.
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26 ² Nor can Dr. Sarfo argue that the investigation places a "stigma" upon him
27 that affects his medical license. "Injury to reputation alone is not a liberty
28 interest protected under the Fourteenth Amendment." *Neal v. Fields*, 429
F.3d 1165, 1167 (8th Cir. 2005) (holding that an investigation of a nurse by
the nursing board did not violate the nurse's procedural due process rights).

1 **2. Due Process Does Not Attach to Administrative Agency**
2 **Investigations and Fact-Finding Functions.**

3 The Nevada Constitution prohibits the deprivation of property without
4 due process of law. Nev. Const. art. 1, § 8(5). However, due process is
5 limited in the context of administrative agency proceedings. *See Hernandez*,
6 128 Nev. at 587, 287 P.3d at 310-311. “When a government agency is
7 conducting proceedings, due process mandates that the protections afforded
8 depend on whether the proceedings result in a binding adjudication or a
9 determination of legal rights, in which case due process protections are
10 greater.” *Id.* “***Such protections, however, need not be made available in***
11 ***proceedings that merely involve fact-finding or investigatory exercise by the***
12 ***government agency.***” *Id.* at 587, 287 P.3d at 311 (emphasis added).
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17 In *Hernandez*, this Court held that the county coroner’s investigation of
18 officer-involved deaths to determine whether excessive force was used did
19 not trigger due process rights because the county coroner merely acted as an
20 investigator and was not tasked with adjudicating formal disciplinary
21 proceedings of the officers involved in the incident. *Id.* at 313-314. In
22 reaching this holding, this Court relied on the substantial body of federal law
23 which provides that “investigations conducted by administrative agencies,
24 even though they may lead to criminal prosecutions, do not trigger due
25 process rights.” *Aponte v. Calderon*, 284 F.3d 184, 193 (1st Cir. 2002). The
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1 federal courts reason that “when governmental action does not partake of an
2 adjudication, as for example, when a general fact-finding investigation is
3 being conducted, it is not necessary that the full panoply of judicial
4 procedures be used.” *Hannah v. Larche*, 363 U.S. 420, 442, 80 S. Ct. 1502,
5 1514-15 (1960); *see also S.E.C. v. Jerry T. O’Brien, Inc.*, 467 U.S. 735, 742,
6 104 S. Ct. 2720, 2725 (1984) (holding that due process rights are not invoked
7 in the context of administrative investigations and investigatory subpoenas if
8 no legal rights are adjudicated).

9
10 Unlike the county coroner in *Hernandez*, the I.C. has the ability to file a
11 formal complaint to initiate an adjudicatory proceeding before the Board. *See*
12 NRS 630.311(2). However, the I.C. cannot participate in the decision-making
13 process on that complaint. NRS 630.352(1). Even where administrative
14 agencies have statutory authority to both investigate and initiate adjudicatory
15 proceedings, federal and state courts uniformly hold that no due process
16 protections attach to the investigatory portion of an agency’s process ***unless***
17 ***and until*** a formal adjudication is commenced. *See Ramirez-De Leon v.*
18 *Mujica-Cotto*, 345 F. Supp. 2d 174, 188 (D.P.R. 2004) (“This means that
19 investigations, alone, do not trigger due process rights; there must also be an
20 adjudication.”); *see also U.S. v. E. River Hous. Corp.*, 90 F. Supp. 3d 118,
21 136-37 (S.D.N.Y. 2015) (holding that no due process rights attached during
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1 the HUD's investigation of a charge of discrimination, until after the HUD
2 initiated a formal adjudicatory proceeding); *S.E.C. v. OKC Corp.*, 474 F.
3 Supp. 1031, 1041 (N.D. Tex. 1979) (holding that a defendant does not have
4 full due process rights until the SEC, pursuant to its investigation, either files
5 a complaint or makes a criminal reference); *In re Petition of Atty. Gen. for*
6 *Investigative Subpoenas*, 736 N.W.2d 594, 602 (Mich. Ct. App. 2007)
7 (holding that subpoenas issued pursuant to the department of Public Health's
8 investigation did not implicate due process unless and until the department
9 filed a formal complaint initiating an adjudicatory process).

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11 As these courts explain, using subpoena power to conduct an
12 investigation does not implicate due process rights because investigation
13 alone "cannot result in an adjudication of respondent's legal rights." *In re*
14 *Petition of Atty. Gen.*, 736 N.W.2d at 602. Thus, these courts reason that it is
15 irrelevant that subsequent adjudicatory action may be taken as a result of the
16 investigation because any subsequent adjudication will require notice and a
17 hearing, which afford the respondent due process. *Id.*; *see also Aponte*, 284
18 F.3d at 193 ("For plaintiffs to be held legally responsible, they would have to
19 be found guilty after a formal adjudication during which full due process
20 rights would attach.").

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1 And, when it comes to medical boards which have the authority to both
2 investigate and initiate adjudicatory proceedings like the Board in Nevada,
3 courts overwhelmingly reject the contention that physicians are entitled to the
4 full panoply of due process during the investigatory period. *See, e.g., Gray v.*
5 *Sup. Ct.*, 23 Cal. Rptr. 3d 50, 54 (Ct. App. 2005) (noting that a physician
6 cannot bring a due process challenge until formal charges were filed against
7 him by the medical board); *Gilmore v. Composite State Bd. of Med. Exam'rs*,
8 254 S.E.2d 365, 366 (Ga. 1979) (holding that a physician was not “denied due
9 process because he is not permitted to participate in selecting the documents
10 to be collected by the investigator or to participate in the deliberations prior to
11 the decision to initiate proceedings against him”); *Humenansky*, 525 N.W.2d
12 at 566 (holding that a physician was not entitled to due process protections
13 during the preliminary investigation of a complaint against her); *In re*
14 *Ambrose*, No. A-1271-04T5, 2005 WL 3730513, at *6 (N.J. Super. Ct. App.
15 Div. Feb. 3, 2006) (holding that a physician was not entitled to full due
16 process protections during the state medical board committee’s investigation
17 of a complaint against him).

18 Here, the I.C. has no authority to adjudicate any legal rights. *See* NRS
19 630.311(1); NRS 630.352(1). It is tasked with gathering evidence and
20 investigating whether there is any merit to a complaint filed against a
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1 physician. *Id.* As the I.C. specifically explained to Dr. Sarfo, it “makes no
2 determination as to whether or not there has been a violation of the Medical
3 Practice Act, prior to the completion of our investigation.” 1 JA 32. The
4 I.C.’s role is simply to determine whether there is any merit to the complaint
5 against a physician which would warrant the filing of a formal complaint.
6
7 NRS 630.311(2). However, once that formal complaint is filed, the matter
8 comes before the full Board for a formal hearing process which indisputably
9 affords due process. *See* NRS 630.339-630.356. The I.C. cannot participate
10 in that adjudicatory process. NRS 630.352(1).
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13 No formal complaint has been filed against Dr. Sarfo for the concerns
14 noted in the subpoena. The Board is merely in the investigatory stages to
15 determine if there is any merit to the complaint against Dr. Sarfo.
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17 Accordingly, Dr. Sarfo’s due process challenge fails because due process is
18 not implicated by the preliminary investigations of the Board. The District
19 Court’s order should be affirmed.
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22 **3. The Board is Not Authorized to Disclose the** 23 **Complaint.**

24 Even if Dr. Sarfo were entitled to the full panoply of due process
25 protections at this investigatory stage, Dr. Sarfo cannot dispute the fact that
26 the I.C.’s letter satisfies the minimum due process requirements by providing
27 him with notice of the specific allegations against him and an opportunity to
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1 refute those allegations. *See* 1 JA 32-35; *see also Browning v. Dixon*, 114
2 Nev. 213, 217, 954 P.2d 741, 743 (1998) (holding that due process requires
3 notice and an opportunity to be heard). Instead, Dr. Sarfo contends that his
4 due process rights have somehow been violated because the Board refused to
5 disclose a copy of the actual complaint to Dr. Sarfo.
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8 NRS 630.336(4) states plainly that any complaint filed with the Board
9 is “confidential.” NRS Chapter 630 does not define “confidential,” nor does
10 it specify whether “confidential” means “confidential” from the licensee (i.e.,
11 Dr. Sarfo). However, the meaning of “confidential” can hardly be doubted in
12 this context, and the Board has interpreted this phrase to mean confidential
13 from the physician being investigated. “[A]n administrative agency charged
14 with the duty of administering an act is impliedly clothed with the power to
15 construe the relevant laws and set necessary precedent to administrative
16 action, and the construction placed on a statute by the agency charged with
17 the duty of administering it is entitled to deference.” *Nev. Pub. Emp’ees Ret.*
18 *Bd. v. Smith*, 129 Nev., Adv. Op. 65, 310 P.3d 560, 564 (2013). If the
19 interpretation falls within the statute’s language, this Court will defer to the
20 agency’s interpretation of the statute. *Wynn Las Vegas, L.L.C. v. Baldonado*,
21 129 Nev., Adv. Op. 78, 311 P.3d 1179, 1182 (2013).
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1 Nothing in the language of NRS 630.336(4) indicates that complaints
2 must be disclosed to the physician being investigated; thus, the Board's
3 interpretation is reasonable and consistent with statutory language.
4 Furthermore, the Board's interpretation is consistent with Legislative intent.
5 *See Nev. State Democratic Party v. Nev. Republican Party*, 256 P.3d 1, 10
6 n.10 (Nev. 2011) (holding that deference is given to an agency's
7 interpretation of its governing statutes if the interpretation "does not conflict
8 with legislative intent"). NRS 630.336(4) was added to NRS Chapter 630 in
9 2003 by Senate Bill 250. During a hearing, proponents of the bill explained
10 that the confidential language was intended to keep the identity of the person
11 filing the complaint confidential:
12

13 Section 25 allows people to bring complaints to the
14 board with immunity. That immunity gives people
15 the ability to voice concerns that may be irrelevant
16 and frivolous.

17 Hearing on S.B. 250 before Sen. Comm. on Commerce & Labor, 72d Reg.
18 Sess. (April 11, 2003). Thus, the proponent of the bill explained that
19 "[e]verybody should have a reasonable expectation of privacy whether a
20 licensee *or a citizen.*" *Id.* (Emphasis added).
21

22 The Board's interpretation is also consistent with holdings from
23 courts interpreting similar statutes. These courts have consistently interpreted
24 "confidential" to mean that the medical board is required to keep a complaint
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1 confidential from the *medical professional being investigated*. See, e.g., *Tex.*
2 *State Bd. of Chiropractic Exam'rs v. Abbott*, 391 S.W.3d 343, 349 (Tex. App.
3 2013) (holding that its similar statute was enacted “to make the Board’s
4 investigation files confidential and privileged and not subject to inspection by
5 members of the public in general *or the chiropractor under investigation in*
6 *particular*” (emphasis added)).

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9 For example, in *Atkins v. Guest*, the New York Court rejected a
10 physician’s argument that he must be provided the actual complaint filed
11 against him by a member of public before he should be required to respond to
12 a subpoena. 607 N.Y.S.2d 655, 656 (N.Y. App. Div. 1994). Relying on a
13 statute similar to NRS 630.336(4), the court found that the complaint was
14 confidential *from* the physician because “[c]onfidentiality can serve to
15 prevent harassment of the complainants or the patients involved.” *Id.*

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19 Similarly, in *Levin v. Guest*, the New York Court also rejected a
20 physician’s petition to quash a medical records subpoena because the New
21 York Medical Board refused to disclose the identity of the complainant, the
22 complaint, or even the nature of the allegations against the doctor. 492
23 N.Y.S.2d 749, 751 (N.Y. App. Div. 1985). The court agreed with the medical
24 board that disclosure of a complaint will result in “an important source of
25 information drying up,” because “[i]f the names of the complainants are made
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1 known to the petitioner, especially at this early investigational stage, the
2 complainants may be subject to various types of harassment, including
3 lawsuits, however groundless.” *Id.*

5 The concern for harassment is very real, and has already occurred in
6 this case. Dr. Sarfo admits he contacted the patients at issue for an
7 explanation of why they are implicated in the Investigative Committee’s
8 investigation. 1 JA 28. If the Board is required to disclose the complaint and
9 identity of each person who files a complaint to the physician, the Board’s
10 ability to regulate the medical profession will be severely undermined
11 because common sense suggests that patients will be more hesitant to report
12 concerns if their complaint and identity will be disclosed to the subject
13 physician.
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15 Dr. Sarfo does not cite to any authority which would require the Board
16 to disclose the complaint and/or the identity of the complainant to him. The
17 judicial discipline cases on which he relies are not cases in which the *judicial*
18 *officer* being investigated demanded disclosure of a complaint, but are instead
19 cases in which a member of the public sought access to confidential
20 investigation files. *See, e.g., Kamasinski v. Jud. Review Council*, 797 F.
21 Supp. 1083, 1085 (D. Conn. 1992) (balancing the interests of a state resident
22 who wanted access to prior disciplinary complaints against a judge with the
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1 judge's interest in maintaining the confidentiality of these proceedings); *First*
2 *Am. Coal. v. Jud. Inquiry & Rev. Bd.*, 784 F.2d 467, 477 (3d Cir. 1986)
3
4 (rejecting requests by newspaper reporters and media owners to have judicial
5 discipline records disclosed to the press); *People, ex. rel. Ill. Jud. Inquiry Bd.*
6 *v. Hartel*, 380 N.E.2d 801, 803 (Ill. 1978) (rejecting request of sheriff and
7 county prosecutor seeking records of a judicial disciplinary committee in a
8 pending criminal investigation against a judge); *Whitehead v. Nev. Comm'n*
9 *on Jud. Discipline*, 111 Nev. 70, 101-123, 893 P.2d 866, 886-898 (1995)
10
11 (analyzing a judge's request that his investigation files remain confidential,
12 amid allegations of a "leak" to the public by certain individuals involved in
13 the disciplinary proceeding). Accordingly, the Board is not required to
14 provide Dr. Sarfo with a copy of the actual complaint. NRS 630.336(4).
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17 **C. DR. SARFO CANNOT DEMONSTRATE IRREPARABLE**
18 **HARM**

19 The District Court's order should also be affirmed because Dr. Sarfo
20 cannot demonstrate that the I.C.'s order to produce records will result in
21 irreparable harm.³ In his motion, Dr. Sarfo identified two types of irreparable
22 harm: (1) potential discipline, and (2) the inability to continue to practice
23 medicine if discipline does occur. 1 JA 94-95. Neither of these harms is
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27 ³ See, e.g., *Saavedra-Sandoval v. Wal-Mart Stores, Inc.*, 126 Nev. 592, 599,
28 245 P.3d 1198, 1202 (2010) ("This court will affirm a district court's order if
the district court reached the correct result, even if for the wrong reason.").

1 “irreparable.” “Irreparable harm is an injury for which compensatory damage
2 is an inadequate remedy.” *Excellence Cmty. Mgmt., LLC v. Gilmore*, 131
3 Nev., Adv. Op. 38, 351 P.3d 720, 723-24 (Nev. 2015) (internal quotations
4 omitted). Irreparable harm does not exist “upon the bare possibility of an
5 injury, or upon any unsubstantial or unreasonable apprehension of it.”
6 *Sherman v. Clark*, 4 Nev. 138, 142 (1868). Thus, “injunctive relief is not
7 available in the absence of actual or threatened injury, loss or damage.”
8 *Berryman v. Int’l Bhd. of Elec. Workers*, 82 Nev. 277, 280, 416 P.2d 387,
9 388, (1966). “The injury, too, must be real, and not merely theoretical.”
10 *Sherman*, 4 Nev. at 142.

11 Dr. Sarfo’s contention that discipline will result in “irreparable harm” is
12 purely speculative. Because no formal complaint has been filed against Dr.
13 Sarfo, there is no disciplinary proceeding. As noted above, Dr. Sarfo’s
14 medical license remains valid and active while an investigation is pending.
15 See NRS Chapter 630; see also *Smith*, 248 Cal. Rptr. 704 (“Until a formal
16 accusation is filed against a physician, his or her license is valid.”); *Alexander*
17 *D.*, 282 Cal. Rptr. at 204 (holding that a dentist’s license to practice was not
18 immediately at stake in an investigation of his or her fitness to practice
19 dentistry); *Humenansky*, 525 N.W. 2d at 566 (holding that the physician’s
20 “license to practice medicine is not immediately at stake in this investigatory
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1 proceeding” because “the board has not yet decided to pursue discipline
2 against Humenansky”).

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4 Dr. Sarfo’s license will only be put at risk *if* the I.C. determines that the
5 complaint is supported by reasonable grounds sufficient to warrant the filing
6 of a formal complaint, and *if* the I.C. determines that the filing of a formal
7 complaint is necessary to protect the public. NRS 630.311(2). Dr. Sarfo
8 admits that most of these investigations do not result in formal disciplinary
9 proceedings, given that of the six complaints made against him between 2010
10 and 2014, only one resulted in disciplinary action. *See* 1 JA 26-29. Thus, Dr.
11 Sarfo’s alleged “irreparable harm” is merely speculative and does not warrant
12 injunctive relief.
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16 In addition, any effect that the mere investigation or threat of discipline
17 may have on Dr. Sarfo’s ability to practice medicine is not irreparable harm.
18 “[I]rreparable injury does not include the loss of income, inability to find
19 other employment, or financial distress.” *E.E.O.C. v. City of Janesville*, 630
20 F.2d 1254, 1259 (7th Cir. 1980); *see also Ogunleye v. Arizona*, 66 F. Supp. 2d
21 1104, 1111 (D. Ariz. 1999) (holding that “[l]oss of employment . . . is
22 generally not sufficient to demonstrate ‘irreparable injury’”); *Ahmad v. Long*
23 *Island Univ.*, 18 F. Supp. 2d 245, 248 (E.D.N.Y. 1998) (holding that “loss of
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1 reputation, loss of income and difficulty in finding other employment – do not
2 constitute ‘irreparable harm’ necessary to obtain a preliminary injunction”).
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4 Although Dr. Sarfo cites to *Chudacoff v. University Medical Center of*
5 *Southern Nevada*, 649 F.3d 1143 (9th Cir. 2011) as support for his
6 “irreparable harm” contention, nothing in that case supports Dr. Sarfo’s
7 contention that the “threat” of a disciplinary proceeding is irreparable harm.
8 That case does not concern injunctive relief. Instead, it analyzes the propriety
9 of § 1983 claims that were asserted against a hospital and its staff. *See id.*
10 Thus, Dr. Sarfo does not identify any threat of irreparable harm, and the
11 District Court properly denied his request for a preliminary injunction. The
12 District Court must be affirmed.
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16 **D. THE PUBLIC INTEREST OUTWEIGHS THE**
17 **POTENTIAL HARM TO SARFO.**

18 Finally, the public interest outweighs any threat of harm to Dr. Sarfo,
19 further supporting the District Court’s denial of his request for injunctive
20 relief. Nevada has an express interest in ensuring that “only competent
21 persons practice medicine.” NRS 630.003(1)(a). The Board was formed
22 “[f]or the protection and benefit of the public” and tasked with determining
23 the “continuing competency of physicians.” NRS 630.003(1)(b). “The
24 purpose of licensing physicians . . . is to protect the public health and safety
25 and the general welfare of the people of this State,” and a license to practice
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1 medicine “is a revocable privilege.” NRS 630.045. Accordingly, a
2 physician’s right to practice his profession “must yield to the paramount right
3 of the government to protect the public health by any rational means.”
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5 *Kassabian v. State Bd. of Med. Exam’rs*, 68 Nev. 455, 464, 235 P.3d 327, 331
6 (1951) (internal quotations omitted).⁴
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8 Courts addressing challenges similar to Dr. Sarfo’s all find that the
9 government’s interest in protecting the public outweighs any potential harm
10 to the physician. These courts correctly reason that “[t]he government’s
11 interest in protecting the public from unsafe or incompetent practitioners
12 would be severely impacted if every preliminary investigation had to be
13 conducted with full due process protections.” *Humenansky*, 525 N.W.2d at
14 567; *see also In re Ambrose*, No. A-1271-04T5, 2005 WL 3730513, at *6
15 (N.J. Super. Ct. App. Div. Feb. 3, 2006) (holding that “requiring the Board to
16 provide Dr. Ambrose with full due process rights in preliminary proceedings .
17 . . . would severely undermine the Board’s ability to . . . protect[] the public’s
18 health and safety”). Thus, the public interest clearly outweighs Dr. Sarfo’s
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23 ⁴ *See also Humenansky*, 525 N.W.2d at 567 (“When a conflict arises between
24 a physician’s right to pursue a medical profession and the state’s right to
25 protect its citizenry, the physician’s right must yield to the state’s power to
26 prescribe reasonable rules and regulations in order to protect the state’s
27 people from incompetent and unfit practitioners.”); *In re Polk*, 449 A.2d 7, 14
28 (N.J. 1982) (“The right of physicians to practice their profession is necessarily
subordinate” to the government’s “paramount obligation to protect the general
health of the public.”); *Thompson v. Tex. State Bd. of Med. Exam’rs*, 570
S.W.2d 123, 128 (Tex. Civ. App. 1978) (holding that a physician’s right to
practice medicine is subordinate to state’s police power).

1 interest in this matter, warranting denial of a preliminary injunction. The
2 District Court's order should be affirmed.⁵
3

4 **II. THE DISTRICT COURT DID NOT ABUSE ITS DISCRETION**
5 **IN AWARDING ATTORNEY FEES.**

6 **A. THE ORDER ON FEES IS NOT PROPERLY ON APPEAL.**

7 Dr. Sarfo admits that there was no order entered on attorney fees as of
8 the date of his filing of the opening brief.⁶ See AOB, p. 44. He further admits
9 that he never separately appealed the minute order. See *id.* An order
10 awarding attorney fees must be separately appealed. See *Campos-Garcia v.*
11 *Johnson*, 130 Nev., Adv. Op. 64, 331 P.3d 890, 891 (2014); see also NRAP
12 3A(b)(8). Dr. Sarfo may not simply "amend" his notice of appeal; instead, he
13 must separately appeal the order awarding attorney fees. Because no such
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18 ⁵ Dr. Sarfo spends considerable time discussing the holding of this Court in
19 *Tate v. State Bd. of Med. Exam'rs*, 131 Nev., Adv. Op. 67, 356 P.3d 506
20 (Nev. 2015). See AOB, pp. 32-34. However, the *Tate* case is irrelevant to the
21 issues before this Court. Similarly, Dr. Sarfo's prior disciplinary history is
22 irrelevant as to the issue of whether the Board's investigation being
23 challenged on this appeal violated Dr. Sarfo's due process rights. If Dr. Sarfo
24 felt the prior investigations violated his due process rights at the time they
were conducted, the appropriate time to challenge those investigations would
have been while they were pending.

25 ⁶ The Eighth Judicial District Court never provided electronic notice to the
26 Board's counsel that a minute order was entered. The Board did not receive
27 "notice" until Dr. Sarfo provided the minute order in his appendix, and the
28 Board has since promptly filed an order with the Eighth Judicial District
Court. The Board has provided that order in their appendix for this Court's
review.

1 appeal was taken, the District Court's award of attorney fees is not properly
2 before this Court.

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4 **B. REGARDLESS, THE DISTRICT COURT DID NOT
ABUSE ITS DISCRETION.**

5 Mindful of this Court's docket and limited resources, the Board is
6
7 willing to argue the merits of Dr. Sarfo's improper "appeal" of the District
8 Court's order on attorney fees, should this Court choose to consider it. This
9 Court reviews a district court's award of attorney fees for an abuse of
10 discretion. *Berkson v. LePome*, 126 Nev. 492, 504, 245 P.3d 560, 568 (2010).

12 On appeal, Dr. Sarfo does not attack the District Court's application of
13 the *Brunzell* factors or the amount of fees awarded. *See* AOB, pp. 44-50.
14 Instead, he argues that (1) the Board is not a prevailing party under NRS
15 18.010(2)(b), and (2) that his lawsuit was not "frivolous." *Id.* Neither of
16 these contentions have merit.

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19 **1. The Board is a "Prevailing Party."**

20 The District Court did not abuse its discretion in finding that the Board
21 was a prevailing party because the Board succeeded on the significant issue in
22 the litigation. 2 JA 357-58; RA 1-5. Under NRS 18.010(2)(b), a court may
23 award attorney fees to the "prevailing party" if the court finds that the claims
24 were "brought or maintained without reasonable ground." In Nevada, a
25 prevailing party may be a respondent/defendant. *Valley Elec. Ass'n v.*

1 *Overfield*, 121 Nev. 7, 10, 106 P.3d 1198, 1200 (2005). “A party prevails if
2 it success on *any significant issue*.” *Las Vegas Metro. Police Dep’t v.*
3 *Blackjack Bonding, Inc.*, 131 Nev., Adv. Op. 10, 343 P.3d 608, 615 (Nev.
4 2015) (internal quotations omitted).

5
6 “To be a prevailing party, a party need not succeed on every issue.” *Id.*
7
8 Furthermore, when a ruling on an injunction reaches the merits of the
9 underlying claims, a defeat of the injunction is sufficient to “satisfy the
10 prevailing-party test.” *Davis v. Abbott*, 781 F.3d 207, 214 (5th Cir. 2015)
11 (internal quotations and alterations omitted); *see also Maine Sch. Admin. Dist.*
12 *No. 35 v. Mr. R.*, 321 F.3d 9, 15 (1st Cir. 2003) (“Thus, interlocutory orders
13 that confer substantive injunctive relief often have been viewed as sufficient
14 to carry the weight of a fee award.”).

15
16 Here, the Board prevailed in defeating Dr. Sarfo’s request for
17
18 injunctive relief after the District Court found that Dr. Sarfo cannot prevail on
19 the merits of his underlying claim. 1 JA 267-68. This is, in effect, a ruling
20 that Dr. Sarfo’s underlying claim is meritless and also fails. The Board is
21 clearly a prevailing party because it defeated Dr. Sarfo’s writ petition by
22 defeating his request for injunctive relief. Accordingly, the District Court did
23 not abuse its discretion in awarding attorney fees.
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1 **2. Dr. Sarfo’s Lawsuit was “Frivolous.”**

2 The District Court also did not abuse its discretion in finding that Dr.
3
4 Sarfo’s lawsuit was brought or maintained without reasonable ground. Under
5 NRS 18.010(2)(b), attorney fees are properly awarded when the claim is
6 unsupported by evidence or law. *Allianz Ins. Co. v. Gagnon*, 109 Nev. 990,
7 996, 860 P.2d 720, 724 (1993); *see also Singhaviroj v. Bd. of Educ. Of Town*
8 *of Fairfield*, 17 A.3d 1013, 1023 (Conn. 2011) (“A claim is frivolous when,
9 viewed objectively, it may be said to have no reasonable chance of success,
10 and present no valid argument to modify the law.” (Internal quotations
11 omitted)). An award of fees is also appropriate when there is evidence in the
12 record supporting a finding that the claims were brought merely to harass the
13 opposing party. *Semenza v. Caughlin Crafted Homes*, 111 Nev. 1089, 1095,
14 901 P.2d 684, 687 (1995).
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19 Here, the District Court found that Dr. Sarfo’s due process challenge
20 was brought without reasonable ground because it is directly governed by the
21 *Hernandez* case, which clearly states that no due process attaches to
22 preliminary fact-finding investigations of an administrative agency. 1 JA
23 268. Thus, Dr. Sarfo’s claims were meritless and unsupported by law.
24
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26 The District Court further correctly found that Dr. Sarfo’s lawsuit was
27 brought merely to harass the Board because it was filed against an agency that
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1 was merely performing its statutorily mandated duties. 2 JA 357; RA 1-5.
2
3 Dr. Sarfo himself admits that his claims were prosecuted merely to harass the
4 Board, as he admits that he “prevailed” when the Board entered into the
5 stipulation with him, yet continued to prosecute this litigation. AOB, p. 46.
6
7 In addition, there was ample evidence before the Board that (1) Dr. Sarfo and
8 his counsel were talking with other doctors about replicating Dr. Sarfo’s
9 lawsuit *after* the District Court found that Dr. Sarfo could not prevail on the
10 merits of his claim; (2) Dr. Sarfo offered up to the District Court on a CD-
11 ROM the very medical records he claimed were too “burdensome” to produce
12 in his due process challenge; and (3) Dr. Sarfo and his counsel made
13 numerous statements to the District Court (and now this Court) about their
14 desire to challenge the Board’s lawful regulation of physicians. *See* 2 JA
15 298-301. The District Court’s order was amply substantiated, and it did not
16 abuse its discretion in awarding attorney fees to the Board under NRS
17 18.010(2)(b). Its order must be affirmed.
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22 CONCLUSION

23 For the foregoing reasons, the Board respectfully requests that this
24 Court affirm the District Court’s denial of Dr. Sarfo’s request for injunctive
25 relief. Should this Court choose to consider Dr. Sarfo’s improper appeal of
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27
28

1 the award of attorney fees, the Board further requests that this Court affirm
2 the District Court's award of fees to the Board.

3
4 DATED this 22nd day of November, 2017.

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8 Reno, Nevada 89503

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1 **CERTIFICATE OF COMPLIANCE PURSUANT TO RULE 28.2**

2 1. I hereby certify that this Respondents' Answering Brief complies
3
4 with the formatting requirements of NRAP 32(a)(4), the typeface
5 requirements of NRAP 32(a)(5), and the type style requirements of NRAP
6 32(a)(6) because: this brief has been prepared in a proportionally spaced
7
8 typeface using Microsoft Word 10 in 14 font and Times New Roman type.

9 2. I further certify that this brief complies with the page- or type-
10 volume limitations of NRAP 32(a)(7) because, excluding the parts of the brief
11 exempted by NRAP 32(a)(7)(C), it is proportionately spaced, has a typeface
12 of 14 points or more, and contains 7,315 words.
13

14
15 3. Finally, I hereby certify that I have read this answering brief, and to the
16 best of my knowledge, information, and belief, it is not frivolous or
17 interposed for any improper purpose. I further certify that this brief complies
18 with all applicable Nevada Rules of Appellate Procedure, in particular NRAP
19 28(e)(1), which requires every assertion in the brief regarding matters in the
20 record to be supported by a reference to the page and volume number, if any,
21 of the transcript or appendix where the matter relied on is to be found. I
22 understand that I may be subject to sanctions in the event that the
23

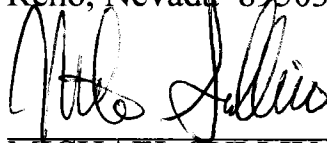
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1 accompanying brief is not in conformity with the requirements of the Nevada
2 Rules of Appellate Procedure.

3
4 DATED this 22nd day of November, 2017.

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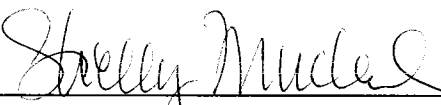
1 **CERTIFICATE OF SERVICE**

2 Pursuant to NRAP 25, I certify that I am an employee of ROBISON,
3 SIMONS, SHARP & BRUST, and that on this date I caused to be served a
4 true copy of the attached **RESPONDENT'S ANSWERING BRIEF** on all
5 parties to this action by the method(s) indicated below:
6

7
8 X by using the Court's CM/ECF Electronic Notification
9 System addressed to:

10 Jacob L. Hafter, Esq.
11

12
13 DATED this 22nd day of November, 2017.
14

15 
16 _____
17 Employee of Robison, Simons, Sharp & Brust
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