



December 5, 2023

Via Attorney of Record

Anika Saron Goodwin, M.D.
160 W. Camino Real #1180
Boca Raton, Florida 33432

Dear Dr. Goodwin:

The North Carolina Medical Board (“Board”) has concluded its investigation regarding your care of Patient A. It is the Board’s decision not to commence formal proceedings against your license at this time. However, the Board voted to issue you this public letter of concern. The Board does not consider a public letter of concern to be a disciplinary action or a limitation or restriction on your license.

On November 4, 2016, Patient A, a 93-year-old male, was referred by a dermatologist for surgical management of a lesion on the right lower ear due to concerns of basal cell carcinoma. On December 1, 2016, you confirmed the lesion location and size, and agreed with the need for surgical excision. On January 19, 2017, Patient A presented to your clinic, and you excised a lesion on Patient A’s right upper ear instead of the planned excision of a lesion on the right lower ear. Pathology confirmed the lesion, which was mistakenly removed from the right upper ear, was negative for basal cell carcinoma.

On February 8, 2017, Patient A underwent another surgery by another provider in which the correct lesion from the right lower ear was removed. The pathology of the lesion confirmed basal cell carcinoma.

The Board is concerned that you failed to properly identify and excise the correct lesion resulting in Patient A having to undergo an additional surgery. The Board notes that the Department of Veterans Affairs Review Panel (“the panel”) acknowledged that systemic deficiencies related to communication between the Dermatology and Plastic Surgery Services in the referral of this patient for evaluation and treatment of a suspicious lesion contributed to this error. The panel further agreed that photographic communication between the two specialties may help to reduce error of wrong site surgery in the future. The panel also noted that information was provided supporting the fact that while the incorrect lesion was removed, it was reasonable to remove this lesion, as diagnosis included an actinic keratosis, which is a premalignant skin lesion. The panel ultimately concluded that you should not be identified as a practitioner who rendered substandard care and thus should not be reported to the National Practitioner Data Bank. Lastly, the Board notes favorably your lack of Board history of complaints.

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The Board urges you to take steps to ensure the conduct giving rise to the Board's concerns does not happen again. Otherwise, the Board may take additional action against your license to practice medicine. If that happens, this letter may be reviewed in determining the appropriate action.

This letter is a public record within the meaning of Chapter 132 of the North Carolina General Statutes and is subject to public inspection and dissemination as required by that law. It will be reported to the Federation of State Medical Boards.

Sincerely,

A handwritten signature in black ink that reads "Christine Khandelwal, D.O." with a stylized flourish at the end.

Christine M. Khandelwal, D.O., MHPE
President

CMK/MJ/bgs

Consent and Waiver

I, Anika Saron Goodwin, M.D., would like to resolve this matter without the need for more formal proceedings and consent to the Board's issuance of this public letter of concern in resolution of the above matter. I hereby waive any requirement under any law or rule that this public letter of concern be served on me.

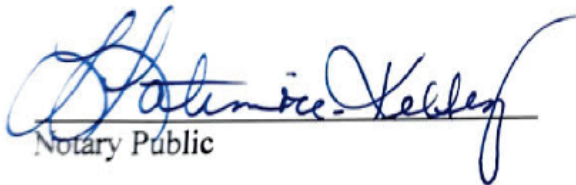
Consented to this the 1 day of December, 2023.


Anika Saron Goodwin, M.D.

State of Georgia
County of Macon Bibb

I, Lesia Latimore-Kelley, do hereby certify that Anika Saron Goodwin, M.D. personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal this the 1st day of December, 2023.


Notary Public

(Official Seal)

My Commission Expires: 2/4/2025

