

BEFORE THE IOWA BOARD OF MEDICINE

**IN THE MATTER OF THE STATEMENT OF CHARGES AGAINST
MARK O. CARLSON, M.D., RESPONDENT**

FILE No. 02-09-429

**STATEMENT OF CHARGES and SETTLEMENT AGREEMENT
(Combined)**

COMES NOW the Iowa Board of Medicine (Board), and Mark O. Carlson, M.D., (Respondent), on April 9, 2010, and pursuant to Iowa Code sections 17A.10(2) and 272C.3(4), enter in this combined Statement of Charges and Settlement Agreement.

STATEMENT OF CHARGES

1. Respondent was issued Iowa license No. 27247 on July 31, 1989.
2. Respondent's Iowa license is active and will next expire on July 1, 2011.
3. The Board has jurisdiction pursuant to Iowa Code chapters 147, 148 and 272C.

COUNT I

4. Respondent is charged pursuant to Iowa Code sections 147.55(3) and 272C.10(3) and 653 IAC sections 23.1(3) and (4) with engaging in unethical or unprofessional conduct. Engaging in unethical or unprofessional conduct includes, but is not limited to, the committing by a licensee of an act contrary to honesty, justice or good morals, whether the same is committed in the course of the licensee's practice or otherwise and whether committed within this state or elsewhere.

STATEMENT OF THE MATTERS ASSERTED

5. Respondent practices internal medicine in Sioux City, Iowa.

6. On June 9, 2008, Respondent submitted an application for a South Dakota medical license. Thereafter, Respondent acknowledged that he inadvertently failed to disclose the fact that he participated in the Iowa Physician Health Program (IPHP) from December 12, 2001, to October 31, 2003. The South Dakota Board of Medical and Osteopathic Examiners expressed concerns that he had failed to provide complete, accurate and truthful information on his license application. Respondent was subsequently allowed to voluntarily withdraw his application for a South Dakota medical license.

7. The Board alleges that Respondent failed to provide complete, accurate and truthful information on his application for a South Dakota medical license.

SETTLEMENT AGREEMENT

8. **CITATION AND WARNING:** Respondent is hereby **CITED** for failing to provide complete, accurate and truthful information on his application for a South Dakota medical license in violation of the laws and rules governing the practice of medicine in Iowa. Respondent is hereby **WARNED** that such conduct in the future may result in further disciplinary action, including suspension or revocation of his Iowa medical license.

9. **CIVIL PENALTY:** Respondent shall pay a civil penalty in the amount of **\$1,000** within twenty (20) days of the date of this Order. The civil penalty shall be made payable to the Treasurer of Iowa and mailed to the Executive Director of the Board. The civil penalty shall be deposited into the State General Fund.

10. Respondent shall obey all federal, state and local laws, and all rules governing the practice of medicine in Iowa.

11. In the event Respondent violates or fails to comply with any of the terms or conditions of this Order, the Board may initiate action to suspend or revoke Respondent's Iowa medical license or to impose other license discipline as authorized in Iowa Code chapters 148 and 272 and 653 IAC 25.

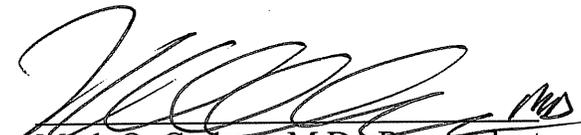
12. This Order constitutes the resolution of a contested case proceeding.

13. Respondent voluntarily submits Order to the Board for consideration.

14. By entering into this Order, Respondent voluntarily waives any rights to a contested case hearing on the allegations contained in the Statement of Charges and waives any objections to the terms of this Settlement Agreement.

15. This Order is subject to approval by the Board. If the Board fails to approve this Settlement Agreement and Final Order, it shall be of no force or effect to either party.

16. The Board's approval of this Order shall constitute a **Final Order** of the Board.


Mark O. Carlson, M.D., Respondent

Subscribed and sworn to before me on April 2, 2010.

Notary Public, State of Iowa.



12/12/12

This Order is approved by the Board on April 9, 2010.

A handwritten signature in black ink, appearing to read "Siroos S. Shirazi". The signature is written in a cursive style with a horizontal line underneath it.

Siroos S. Shirazi, M.D., Chairman
Iowa Board of Medicine
400 SW 8th Street, Suite C
Des Moines, Iowa 50309-4686