

BEFORE THE IOWA BOARD OF MEDICINE

IN THE MATTER OF THE STATEMENT OF CHARGES AGAINST

SAMIR H. HADDAD, M.D., RESPONDENT

File No. 02-07-685

STATEMENT OF CHARGES and SETTLEMENT AGREEMENT
(Combined)

COMES NOW the Iowa Board of Medicine (Board), and Samir H. Haddad, M.D., (Respondent), on 04 - 12, 2010, and pursuant to Iowa Code sections 17A.10(2) and 272C.3(4), file this combined Statement of Charges and Settlement Agreement.

STATEMENT OF CHARGES

1. Respondent was issued Iowa special medical license No. SP-0185 on May 15, 2007, pursuant to Iowa Code chapter 147.2 and 653 IAC 10.4.
2. Respondent's Iowa license went inactive due to nonrenewal June 15, 2008.
3. The Board has jurisdiction pursuant to Iowa Code chapters 147, 148 and 272C.

COUNT I

4. Respondent is charged pursuant to Iowa Code section 147.55(3) and 653 IAC sections 23.1(4) and (5) with engaging sexual misconduct in the practice of medicine.

STATEMENT OF MATTERS ASSERTED

5. Respondent was formerly on the academic staff in the Department of Anesthesia at the University of Iowa Hospitals and Clinics in Iowa City, Iowa.

6. On June 18, 2009, the Board ordered Respondent to complete a comprehensive physical, neuropsychological, mental health and sexual misconduct evaluation pursuant to Iowa Code section 272C.9(1) and 653 IAC 24.4, no later than August 28, 2009. Respondent completed the comprehensive physical, neuropsychological, mental health and sexual misconduct evaluation at a Board-approved program on January 13, 2010. The recommendations made at the conclusion of the evaluation are included in this order.

7. Respondent admitted that he engaged in sexual contact, with the adult daughter of patient who was under his care in the intensive care unit, in his office in May 2007.

SETTLEMENT AGREEMENT

8. **PROFESSIONAL BOUNDARY EVALUATION:** At the direction of the Board, Respondent completed a comprehensive professional sexual misconduct evaluation under direction of Gene G. Abel, M.D., at the Behavioral Medicine Institute of Atlanta in Atlanta, Georgia, on January 11-13, 2010. The recommendations made following the evaluation are included in this order.

9. **CIVIL PENALTY:** Respondent shall pay a civil penalty in the amount of **\$5,000** within twenty 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. **INDEFINITE SUSPENSION:** Respondent's Iowa medical license shall be **indefinitely suspended** on the date of this order. Respondent shall not engage in any aspect of the practice during the period of the suspension. The Board shall not consider reinstatement of Respondent's Iowa medical license unless and until he successfully completes the following terms and conditions:

A. **Professional Boundaries Program:** Prior to seeking reinstatement, Respondent shall complete a Board-approved three-day professional boundaries and ethics program;

B. **Application for Reinstatement:** Respondent must submit an Application for Reinstatement pursuant to Iowa Code chapters 17A, 147, 148 and 272C and 653 IAC 12.40, which demonstrates that the basis for the suspension no longer exists and it is in the public interest to reinstate his Iowa medical license.

11. **CHAPERONE REQUIREMENT:** Respondent shall be **indefinitely prohibited** from treating female patients without having a Board-approved female healthcare professional chaperone continually present. The Board-approved healthcare professional chaperone shall be continually present when the Respondent is providing healthcare services, including but not limited to, patient evaluation, treatment and post-evaluation treatment directions. The chaperone shall clearly document her continued presence in each patient's chart. Respondent shall provide the Board with the names of all persons providing chaperone services for him at all facilities where Respondent practices medicine under his Iowa medical license. The Board will provide all chaperones with a copy of all Board Orders

in this matter. All chaperones shall provide a written statement to the Board indicating that they have read the Board Orders and agree to inform the Board immediately if there is any evidence of inappropriate sexual behavior or professional misconduct. Respondent shall not seek termination of this prohibition for at least one year from the date of this Order.

12. **NOTICE TO EMPLOYERS:** Respondent shall provide the Board the name, address, and contact information of his employment supervisors at any location where Respondent is employed as a physician. The Board shall provide his employment supervisors a copy of all orders relating to this matter. All such individuals shall provide a written statement to the Board indicating they have read and understand the documents related to this matter. All such individuals shall agree to contact the Board immediately upon receipt of evidence that Respondent has engaged in sexual misconduct or unprofessional conduct.

13. **FIVE YEARS PROBATION:** Should the Board choose to reinstate Respondent's Iowa medical license in the future, Respondent shall be placed on **probation for a period of five (5) years** subject to the following terms and conditions:

- A. **Monitoring Program:** Respondent shall contact the Shantel Billington, Monitoring Coordinator, Iowa Board of Medicine, 400 SW 8th Street, Suite C, Des Moines, IA 50309-4686, Ph.#515-281-3654 to establish a Board monitoring program. Respondent shall fully comply with all requirements of the Board monitoring program.
- B. **Compliance with BMI Recommendations:** Respondent shall fully comply with all recommendations made by BMI following the evaluation.

- C. **Polygraph Examinations:** Respondent shall submit to Board-approved polygraph examinations every six months.
- D. **Principles of Medical Ethics, Staff Surveillance Forms and Patient Satisfaction Surveys:**
- 1) Respondent shall post the Principles of Medical Ethics in his medical practice as directed by the Board;
 - 2) Respondent shall utilize Staff Surveillance Forms in his medical practice as directed by the Board; and
 - 3) Respondent shall utilize Patient Satisfaction Surveys in his medical practice as directed by the Board.
- E. **Counseling:** Respondent shall submit the name and CV of an Iowa-licensed counselor for Board-approval and complete Board-approved sexual misconduct counseling under the following terms and conditions:
- 1) Respondent shall meet with his Board-approved counselor as frequently as recommended by the counselor and approved by the Board. All costs shall be Respondent's responsibility;
 - 2) Respondent shall continue counseling until his discharge is approved by the Board; and
 - 3) The counselor shall agree to submit written quarterly reports to the Board concerning Respondent's progress no later than 1/20, 4/20, 7/20 and 10/20 of each year of Respondent's probation;

F. **Physician Mentoring Plan:** Respondent shall submit the name and CV of a physician who regularly works with and observes Respondent in the practice of medicine to serve as physician mentor. The Board shall share a copy of all Board orders relating to this matter with the physician mentor. The physician mentor shall provide a written statement indicating that the mentor has read and understands all Board orders in this matter and agrees to act as the physician mentor under the terms of this Order. The physician mentor shall agree to inform the Board immediately if there is evidence that Respondent has engaged in sexual misconduct or unprofessional conduct.

- 1) The physician mentor shall meet with Respondent at least once each week for a minimum of one hour;
- 2) The physician mentor and Respondent shall discuss issues regarding maintaining appropriate professional boundaries and cultural issues related to the practice of medicine; and
- 3) The physician mentor shall submit written quarterly reports to the Board describing Respondent's progress no later than 1/20, 4/20, 7/20 and 10/20 of each year of this Order.

G. **Quarterly Reports:** Respondent shall file sworn quarterly reports attesting to his compliance with all the terms and conditions of this Order, including attendance at meetings with his counselor. The reports shall be filed not later than 1/10, 4/10, 7/10 and 10/10 of each year of Respondent's probation.

- H. **Board Appearances:** Respondent shall make an appearance before the Board annually or upon request. Respondent shall be given written notice of the date, time and location for the appearances. Such appearances shall be subject to the waiver provisions of 653 IAC 24.2(5)(d).
- I. **Monitoring Fee:** Respondent shall make a payment of \$100 to the Board each quarter for the duration of this Order to cover the Board's monitoring expenses in this matter. The monitoring fee shall be received by the Board with each quarterly report required under this Order. The monitoring fee shall be sent to: Coordinator of Monitoring Programs, Iowa Board of Medicine, 400 SW 8th Street, Suite C, Des Moines, IA 50309-4686. The check shall be made payable to the Iowa Board of Medicine. The monitoring fee shall be considered repayment receipts as defined in Iowa Code section 8.2.
14. Respondent shall obey all federal, state and local laws, and all rules governing the practice of medicine in Iowa.
15. In the event Respondent violates or fails to comply with the terms of this Order, the Board may initiate action to suspend or revoke Respondent's Iowa license or impose other license discipline as authorized in Iowa Code Chapters 148 and 272 and 653 IAC 24.
16. This Order constitutes the resolution of a contested case proceeding.
17. Respondent voluntarily submits this Order to the Board for consideration.
18. Periods of residence or practice outside the state of Iowa shall not apply to the duration of this Order unless Respondent obtains prior written approval from the Board.

Periods in which Respondent does not practice medicine or fails to comply with the terms established in this Order shall not apply to the duration of this Order unless Respondent obtains prior written approval from the Board.

19. Respondent understands that by entering into this combined Statement of Charges and Settlement Agreement, Respondent cannot obtain a copy of the investigative file. Pursuant to Iowa Code section 272C.6(4), a copy of the investigative file may only be provided to a licensee after a Statement of Charges is filed but before the final resolution of those charges.

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

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



Samir H. Haddad, M.D., Respondent

Subscribed and sworn to before me on _____, 2010.

Notary Public, State of *Not available in my old country.*

This Order is approved by the Board on April 14, 2010.



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