BEFORE THE IOWA BOARD OF MEDICINE

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IN THE MATTER OF THE CONSENT AGREEMENT FOR

ALBERT J. JACKSON, Jr., M.D., RESPONDENT

FILE No. 02-08-352

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TERMINATION ORDER

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Date: February 27, 2009.

1. Respondent was issued Iowa medical license no. 37967 on August 6, 2008.

2. Respondent's Iowa medical license is active and will next expire on September 1, 2010.

3. The Board has jurisdiction in this matter pursuant to Iowa Code Chapters 147, 148 and 272C.

4. On March 18, 2008, Respondent submitted an application for a permanent Iowa medical license and he failed to disclose a guilty plea to criminal damage to property, a Class A Misdemeanor on June 13, 1996, to the Board.

5. On August 6, 2008, Respondent entered into a Consent Agreement with the Board and he was granted a permanent Iowa medical license. Under the terms of the Consent Agreement, Respondent was required to complete a Board-approved ethics program, he was placed on probation for a period of two years and he was issued a Citation and Warning and ordered to pay a $2,500 civil penalty.

6. Respondent has fully complied with all of the requirements established by the Board.

7. The Iowa Board recently voted to terminate the terms and conditions placed on Respondent's Iowa medical license.

THERFORE IT IS HEREBY ORDERED: That the terms and conditions placed upon Respondent's Iowa medical license are terminated, and Respondent's Iowa medical license is returned to its full privileges, free and clear of all restrictions.

IOWA BOARD OF MEDICINE

Yasyn Lee, M.D., Chair
400 SW 8th Street, Suite C
Des Moines, Iowa 50309-4686

07-30-08 11:58 RCVD

BEFORE THE IOWA BOARD OF MEDICINE

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IN THE MATTER OF THE CONSENT AGREEMENT FOR

ALBERT J. JACKSON, Jr., M.D., RESPONDENT

FILE No. 02-08-352

****

CONSENT AGREEMENT

****

COMES NOW the Iowa Board of Medicine (Board) and Albert J. Jackson, Jr., M.D. (Applicant) and enter into the following Consent Agreement. The Board shall issue Applicant a permanent Iowa medical license under the following terms and conditions, which have been imposed with the Applicant's consent.

1. Applicant is hereby granted Iowa permanent license no. 37967 to practice medicine and surgery in Iowa.

2. On June 13, 1996, Applicant pleaded guilty to criminal damage to property, a Class A Misdemeanor in Jackson County, Illinois. Applicant was arrested after he damaged the door to a residence during a domestic dispute. Applicant was placed on probation for a period of two years and ordered to pay $500 restitution and court costs.

3. On March 18, 2008, Applicant submitted an application for a permanent Iowa medical license and he failed to disclose his guilty plea to criminal damage to property, a Class A Misdemeanor on June 13, 1996, to the Board.

4. **CITATION AND WARNING:** Respondent is hereby **CITED** for engaging in unprofessional conduct and failing to provide complete, accurate and truthful information on his application for a permanent Iowa medical license.. 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.

5. **CIVIL PENALTY**: Respondent shall pay a civil penalty in the amount of **$2,500** 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.

6. **ETHICS PROGRAM:** Respondent shall successfully complete the Professional/Problem Based Ethics (PROBE) program sponsored by the Ethics Group, LLC, of Summit, New Jersey, no later than October 1, 2008. Respondent shall cause a report to be sent the Board directly from PROBE at the conclusion of the program. Respondent is responsible for all costs associated with the ethics program.

7. **TWO YEARS PROBATION:** Respondent shall be placed on **probation** for a period of two years subject to the following terms and conditions:

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

B. **Worksite Monitor:** Respondent shall submit for Board approval the name of a physician who regularly observes Respondent in the practice of medicine to serve as worksite monitor. The Board shall share a copy of all Board orders relating to this matter with the worksite monitor. The worksite monitor shall provide a written statement indicating that the monitor has read and understands all Board orders relating to this matter and agrees to act as the worksite monitor under the terms of this agreement. The worksite monitor shall agree to inform the Board immediately if there is evidence that Applicant has engaged in unethical and/or unprofessional conduct. The monitor shall agree to submit quarterly reports to the Board concerning Respondent's progress. The reports shall be filed with the Board not later than 1/20, 4/20, 7/20 and 10/20 of each year of this Order.

C. **Quarterly Reports**: Respondent shall file sworn quarterly reports with the Board attesting to his compliance with the terms of this Order. The reports shall be filed not later than 1/10, 4/10, 7/10 and 10/10 of each year of the Order.

D. **Board Appearances**: Respondent shall make appearances before the Board or a Board committee annually or upon request. Respondent shall be given reasonable notice of the date, time and location for the appearances. Said appearances shall be subject to the waiver provisions of 653 IAC 24.2(5)(d).

E. **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 from Respondent required by this Order. The monitoring fee shall be sent to: Shantel Billington, Compliance Monitor, 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.

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

9. This Consent Agreement constitutes the resolution of a contested case proceeding.

10. In the event Applicant violates or fails to comply with any of the terms or conditions of this Consent Agreement, the Board may initiate action to suspend or revoke the Applicant's Iowa medical license or to impose other license discipline as authorized in Iowa Code chapters 148 and 272 and 653 IAC 12.2.

11. In the event Applicant leaves Iowa to reside or practice outside the state, Applicant shall notify the Board in writing of the dates of departure and return. Periods of residence or practice outside the state of Iowa will not apply to the duration of the Consent Agreement.

12. By entering into this Consent Agreement, Applicant voluntarily waives any rights to a contested case hearing in this matter.

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

14. This Consent Agreement, is subject to approval of the Board. If the Board fails to approve the Order, it shall be of no force or effect to either party.

15. The Board's approval of this Consent Agreement shall constitute a **FINAL ORDER** of the Board.

Albert J. Jackson, Jr., M.D., Applicant

Subscribed and sworn to before me on July 28, 2008.

Notary Public, State of Iowa.

ELIZABETH J. HUFFMAN
COMMISSION NO. 750521
MY COMMISSION EXPIRES
10-31-2010

This Consent Agreement is approved by the Board on August 6, 2008.

Yasyn Lee, M.D., Chairperson
Iowa Board of Medical Examiners
400 SW 8th Street, Suite C
Des Moines, IA 50309-4686