

BEFORE THE IOWA BOARD OF MEDICINE

IN THE MATTER OF THE STATEMENT OF CHARGES AGAINST

DAVID B. ROBINSON, M.D., RESPONDENT

FILE No. 02-14-323

STATEMENT OF CHARGES AND SETTLEMENT AGREEMENT
(Combined)

COMES NOW the Iowa Board of Medicine (Board) and David B. Robinson, M.D., (Respondent), on October 28, 2016, and pursuant to Iowa Code sections 17A.10(2) and 272C.3(4) and 653 IAC 25.3, enter into this combined Statement of Charges and Settlement Agreement.

STATEMENT OF CHARGES

1. **Iowa Medical License:** Respondent was issued Iowa medical license no. 41096 on June 11, 2013. Respondent's Iowa medical license went inactive due to nonrenewal on January 1, 2016.
2. **Jurisdiction:** The Board has jurisdiction in this matter pursuant to Iowa Code Chapters 147, 148 and 272C.

COUNT I

3. **Unprofessional Conduct:** Respondent is charged pursuant to Iowa Code sections 147.55(3) and 272C.10(3) and 653 IAC 23.1(4) with engaging in unprofessional conduct in violation of the laws and rules governing the practice of medicine in Iowa.

STATEMENT OF MATTERS ASSERTED

4. **Practice Setting:** Respondent is an Iowa-licensed physician who formerly practiced neurology in Iowa City, Iowa, and currently practices in Brunswick, Maine.

5. **Unprofessional Conduct - Violating Appropriate Professional Boundaries:** The Board alleges that Respondent engaged in unprofessional conduct and violated appropriate professional boundaries in violation of the laws and rules governing the practice of medicine in Iowa. The Board alleges that Respondent engaged in sexual relations with a female co-worker and later prescribed non-controlled medications to her on multiple occasions between September 2013 and March 2014 without performing appropriate examinations and without maintaining appropriate medical records while practicing medicine in Iowa City, Iowa.

6. **Comprehensive Evaluation:** Respondent successfully completed a comprehensive unprofessional conduct and professional boundaries evaluation at a Board-approved evaluation program on February 29, 2016.

SETTLEMENT AGREEMENT

7. **CITATION AND WARNING:** Respondent is hereby **CITED** for engaging in unprofessional conduct and violating appropriate professional boundaries in violation of the laws and rules governing the practice of medicine in Iowa. Respondent is hereby **WARNED** that engaging in such conduct in the future may result in further disciplinary action against his Iowa medical license.

8. **CIVIL PENALTY:** Respondent shall pay a **\$5,000 civil penalty** 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.

9. **FIVE YEARS PROBATION:** Respondent is placed on **probation for a period of five (5) years**. Should Respondent practice medicine under his Iowa medical license in the future he shall fully comply with the following terms and conditions:

- A. **Board Monitoring Program:** Respondent shall establish a monitoring program with the Board's Compliance Monitor, Iowa Board of Medicine, 400 SW 8th Street, Suite C, Des Moines, IA 50309-4686, Ph. 515-281-5525, prior to practicing medicine under his Iowa medical license. Respondent shall meet with his Compliance Monitor within 30 days. Respondent shall promptly and fully comply with all requirements of the monitoring program.

B. Compliance with Evaluation Program Recommendations: Respondent shall fully comply with all recommendations made by the Board-approved evaluation program including, but not limited to, the following:

- 1) Respondent shall participate in a Board-approved day treatment/residential treatment program for unprofessional conduct and professional boundaries. Respondent shall fully comply with all recommendations made by the Board-approved treatment program.
- 2) Respondent shall establish an ongoing relationship with a primary care provider to address his medical needs.

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 physician or counselor for Board-approval and participate in Board-approved 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.
- 2) Respondent shall continue counseling until his discharge is approved by the Board.
- 3) The counselor shall 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.
- 4) Respondent is responsible for all costs associated with the counseling.

F. **Worksite Monitoring Program:** Respondent shall establish a worksite monitoring program with the Board under the following terms and conditions.

- 1) Respondent shall submit for approval the name of a physician who regularly observes and/or supervises him in the practice of medicine.
- 2) The Board shall provide a copy of all Board orders relating to this matter to the worksite monitor.
- 3) The worksite monitor shall provide a written statement indicating that they have read and understand this Order and agrees to serve under the terms of this Order.

- 4) The worksite monitor shall agree to inform the Board immediately if there is evidence of sexual misconduct, unprofessional conduct or a violation of the terms of this Order.
 - 5) The worksite monitor may be asked to appear before the Board in-person, or by telephone or video conferencing. Such appearances shall be subject to the waiver provisions of 653 IAC 24.2(5)(e)(3).
 - 6) The worksite monitor shall submit quarterly reports to the Board not 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 of this order. 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 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 \$200 to the Board each quarter for the duration of this Order to cover the Board's monitoring expenses. The monitoring fee shall be received with each quarterly report. 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.

10. Respondent shall demonstrate that he has shared a copy of this order with all medical licensing boards where he holds a license, whether active or not, within thirty (30) days of the date of this order.

11. Respondent shall demonstrate that he has shared a copy of this order with all hospitals, clinics and/or agencies where Respondent is employed as a physician within thirty (30) days of the date of this order.

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

13. Respondent agrees that the State's counsel may present this Order to the Board for consideration.

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

15. Respondent understands that by entering into this Order, he has a right to be represented by legal counsel, voluntarily waives any rights to a contested case hearing on the allegations in the Statement of Charges, and waives any objections to the terms of this Order.

16. Respondent understands that by entering into this Order, 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.

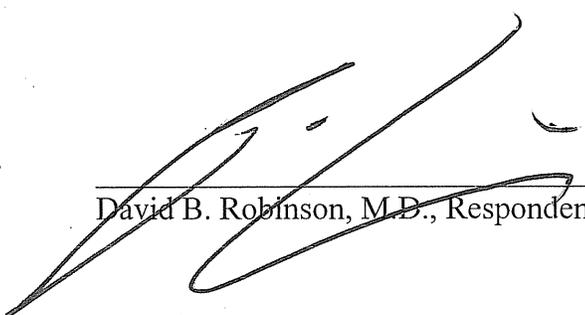
17. Periods of residence or practice outside the state of Iowa and periods in which Respondent does not practice medicine or fails to comply with the terms established in this Order shall not apply to the duration of this Order unless Respondent obtains prior written approval from the Board.

18. Respondent understands that the Board is required by Federal law to report this Order to the National Practitioner Data Bank.

19. This Order becomes a public record available for inspection and copying upon execution in accordance with the requirements of Iowa Code Chapters 17A, 22 and 272C.

20. This Order is subject to approval of 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.



David B. Robinson, M.D., Respondent

Subscribed and sworn to before me on Sept 16, 2016.

Notary Public, State of Maine

Aliece J. Stevens
Notary, Sagadahoc County
My Commission Expires
1/26/2023

This Order is approved by the Board on October 28, 2016.



Diane L. Clark, R.N., M.A., Chair
Iowa Board of Medicine
400 SW 8th Street, Suite C
Des Moines, Iowa 50309-4686