

May 10, 2012
FOR IMMEDIATE RELEASE

Summary of April 19-20, 2012, Board Meeting

The following is a summary of April 19-20, 2012, meeting of the Iowa Board of Medicine.

Cases Reviewed: The Board reviewed 130 cases.

New Investigative Cases: The Board reviewed 55 new investigative cases.

Combined Statement of Charges and Settlement Agreements: Upon a determination by the Board that probable cause exists to take formal disciplinary action, the Board and the licensee may enter into a combined Statement of Charges and Settlement Agreement to resolve the matter. A combined Statement of Charges and Settlement Agreement contain the allegations of the Board and the sanctions.

The Board approved 6 Combined Statement of Charges and Settlement Agreements.

1. An Iowa-licensed physician who practices family medicine in La Crosse, Wisconsin, entered into a combined Statement of Charges and Settlement Agreement with the Board on April 19, 2012. On May 2, 2011, the physician entered into a Public Consent Order with the Georgia Composite Medical Board (Georgia Board). The Georgia Board alleged that the physician failed to conform to the minimal standards of acceptable and prevailing practice of medicine in her treatment of a female pregnant patient. The Georgia Board prohibited the physician from practicing obstetrics and/or gynecology until she completed forty (40) hours of continuing medical education (CME) in the areas of obstetrics and gynecology. The physician was also ordered to pay a \$7,500 fine. On November 16, 2011, the Wisconsin Medical Examining Board issued the physician a reprimand and ordered her to pay costs in the amount of \$1,000. The Iowa Board charged the physician with being disciplined in Georgia and Wisconsin. Under the terms of the Settlement Agreement, the Iowa Board issued the physician a public reprimand and ordered her to pay a \$1,000 fine.

2. An Iowa-licensed physician who practices general medicine in Iowa City, Iowa, entered into a combined Statement of Charges and Settlement Agreement with the Board on April 19, 2012. The Board charged the physician with prescribing excessive controlled substances to multiple patients in Iowa City, Iowa, in 2010 and 2011. Under the terms of the Settlement Agreement, the Board issued the physician a public reprimand and ordered him to pay a \$5,000 fine. The Board also prohibited the physician from prescribing controlled substances for the treatment of chronic pain and placed him on probation subject to Board monitoring for a period of five years.
3. An Iowa-licensed physician who practices obstetrics and gynecology in Washington, Iowa, entered into a combined Statement of Charges and Settlement Agreement with the Board on April 19, 2012. The Board charged the physician with failing to conform to the minimal standard of acceptable and prevailing practice of medicine in Iowa. The Board alleged that four patients suffered urologic injuries during three hysterectomies and a trans-obturator sling procedure performed by the physician between January 2007 and March 2008 and that she inappropriately prescribed a medication to two patients in September 2007 and March 2008, respectively. Under the terms of the Settlement Agreement, the Board issued the physician a public reprimand and ordered her to pay a \$5,000 fine. The Board also placed the physician on probation subject to Board monitoring for a period of five years.
4. An Iowa-licensed physician who practices family medicine in Mount Pleasant, Iowa, entered into a combined Statement of Charges and Settlement Agreement with the Board on April 19, 2012. The Board charged the physician with failing to provide appropriate obstetrical care to a female patient in Mount Pleasant, Iowa, in December 2007. The Board alleged that the physician failed to go to the hospital to examine the patient in a timely manner and failed to timely diagnose and manage the patient's pre-term labor. Under the terms of the Settlement Agreement, the Board issued the physician a public reprimand and ordered him to pay a \$2,500 fine. The physician also agreed to complete a Board-approved education program for advanced obstetrical care for family practice physicians and submit a written corrective action plan which describes what he has learned from this case and the steps he has taken to avoid similar concerns in the future.
5. An Iowa-licensed physician who practices internal medicine in Bradenton, Florida, entered into a combined Statement of Charges and Settlement Agreement with the Board on April 19, 2012. The Board charged the physician with inappropriately prescribing medications, including controlled substances, to a family friend in West Des Moines, Iowa, in April 2011, without establishing an appropriate physician-patient relationship and without maintaining appropriate medical records. Under the terms of the Settlement Agreement, the Board issued the physician a public reprimand and ordered her to pay a \$2,500 fine and complete a Board-approved professional ethics program.
6. An Iowa-licensed physician who formerly practiced child and adolescent psychiatry in Des Moines, Iowa, entered into a combined Statement of Charges and Settlement Agreement with the Board on April 19, 2012. The Board charged the physician with engaging in sexual misconduct when he engaged in a sexual relationship with a former female psychiatric patient between 2007 and 2010. The former female patient was in her late 20s when the inappropriate relationship began. Under the terms of the Settlement Agreement, The physician surrendered his Iowa medical license, received a public reprimand and agreed to pay a \$10,000 fine.

Settlement Agreements: After the Board has determined that probable cause exists to take formal disciplinary action and formal disciplinary charges have been filed, the Board and the licensee may enter into a Settlement Agreement to resolve the pending disciplinary charges rather than hold a formal disciplinary hearing.

The Board approved 1 Settlement Agreement.

1. An Iowa-licensed physician who formerly practiced family medicine in Ackley, Iowa, entered into a Settlement Agreement with the Board on April 19, 2012. On January 13, 2012, the Board charged the physician with engaging in a sexual relationship with a female patient in 1993 and another female patient in 2010. The Board also alleged that the physician inappropriately prescribed controlled substances to the second female patient without maintaining appropriate medical records, performed an inappropriate physical examination on another female patient and made inappropriate sexual comments and sexual advances toward another female who was not a patient. Finally, the Board alleged that the physician failed to comply with a Board investigation and/or a Board subpoena in a timely manner. Under the terms of the Settlement Agreement, The physician surrendered his Iowa medical license, received a public reprimand and paid a \$7,500 fine.

Confidential Evaluation Orders: If the Board receives evidence that a physician may suffer from physical, neurological, mental condition or substance abuse, the Board may issue a confidential evaluation order requiring the physician to complete an appropriate evaluation at a Board-approved program. Additionally, if the Board receives evidence that a physician lacks the appropriate knowledge or ability to practice medicine with reasonable skill or safety or that a physician has failed to provide appropriate care to patients, the Board may issue a confidential order requiring the physician to complete a competency evaluation at a Board-approved competency assessment program.

The Board voted to issue 2 confidential Evaluation Orders due to the following areas of concern:

1. The Board received information which indicates that a physician engaged in a pattern of unprofessional conduct and/or disruptive behavior in the practice of medicine. The Board ordered the physician to complete a comprehensive physical, neuropsychological, mental health, unprofessional conduct and/or disruptive behavior evaluation.
2. The Board received information which indicates that a physician was convicted of driving under the influence of alcohol. The Board ordered the physician to complete a comprehensive physical, neuropsychological, mental health and substance abuse evaluation.

Confidential Letters of Warning or Education: When the Board determines that probable cause does not exist to take formal disciplinary action the Board may send a confidential, non-disciplinary letter to a licensee expressing concerns and requesting that a licensee take corrective action, including further medical education.

The Board voted to issue 18 confidential Letters of Warning or Education due to the following areas of concern:

1. Concerns that the physician engaged in a pattern of disruptive behavior.
2. Concerns about complications following bariatric surgery.

3. Concerns about complications following a sinus injection.
4. Concerns about failure to obtain written informed consent prior to surgery.
5. Concerns that the physician abandoned patients when he left the hospital without notifying patients or staff.
6. Concerns that the physician mismanaged complications during gallbladder surgery.
7. Concerns that the physician is over-utilizing endoscopic procedures.
8. Concerns about the physician's pain management and medical records.
9. Concerns about delayed diagnosis of lung cancer.
10. Concerns about delayed diagnosis of breast cancer.
11. Concerns that the physician failed to maintain medical records for seven years.
12. Concerns about the physician's delayed response to the Board's investigation.
13. Concerns about the physician's treatment of a complex psychiatric patient.
14. Concerns about complications during hernia surgery.
15. Concerns that the physician failed to report a DUI on his renewal application.
16. Concerns that the physician misread a CT scan.
17. Concerns that the physician failed to maintain timely medical records.
18. Concerns that the physician was reprimanded for practicing medicine in South Dakota with an inactive medical license.

Board Appearances: The Board may ask a licensee to appear before the Board to discuss concerns when the Board determines that a face-to-face meeting will assist the Board during the investigative process.

1. Concerns that a physician utilized pre-signed prescriptions.
2. Concerns that the physician is over-utilizing endoscopic procedures.
3. Concerns about the physician's pain management and medical records.

Monitoring Committee: The Monitoring Committee monitors licensees who have been disciplined by the Board and require monitoring.

The Monitoring Committee reviewed 11 cases.

Screening Committee: The Screening Committee reviews cases that are lower priority and have not been investigated by the Board to determine whether investigation is warranted.

The Screening Committee reviewed 23 cases.

Licensure Committee: The Licensure Committee is a committee reviews initial license applications, renewals and reinstatements other licensure policies and issues. Most license applications are approved by Board staff without Licensure Committee review. However, some applications raise concerns about an applicant and the Licensure Committee must review the matter to determine whether a license should be granted, renewed or reinstated.

The Licensure Committee reviewed 15 licensure applications or requests to consider licensure options. Four permanent licenses were granted, one inquiry on what licensure options were available for a physician were reviewed, six applicants were asked to withdraw their applications, one applicant was required to place their license on an inactive status and two applicants were requested to provide additional information. The Licensure Committee will start the licensure denial process for one applicant.

The Licensure Committee approved five Letters of Warning that were issued due to concerns that the applicants failed to provide truthful, accurate or complete information on the license application.

Other Board action:

Administrative rules: The Board approved notices of intended action to amend the following administrative rules:

- 653 IAC chapter 22, mandatory reporting. The proposed amendment requires licensees to report any action taken which results in a limitation, restriction, suspension or revocation of their hospital privileges or any voluntary limitation, restriction, suspension of hospital privileges to avoid a hospital investigation or hospital investigation.
- 653 Chapter 23, grounds for discipline. The proposed amendment gives the Board authority to impose discipline for a licensee's failure to report any action taken which results in a limitation, restriction, suspension or revocation of their hospital privileges or any voluntary limitation, restriction, suspension of hospital privileges to avoid a hospital investigation or hospital investigation.

A public hearing on the noticed amendments is scheduled for 4 p.m. June 19, 2012, at the Board's office.

Annual organizational meeting:

- Officers elected for May 1, 2012, through April 30, 2013, are Colleen Stockdale, M.D., West Burlington, chair; Jeffrey Snyder, M.D., Crescent, vice chair; and Hamed Tewfik, M.D., Iowa City, secretary.
- The Board approved a 2013 meeting schedule: January 10-11, March 7-8, April 25-26, June 27-28, August 29-30, October 24-25, December 19-20.
- Board recognized 4 members who are completing their Board service on April 30: Tom Drew, Des Moines; Analisa Haberman, D.O., Mason City; Ambreen Mian, Ames; Siroos Shirazi, M.D., Iowa City.

A press release describing public disciplinary action taken by the Board was distributed and posted on the Board's Website on April 25, 2012. If you have questions about this summary or Board's disciplinary action press release, please contact Kent Nebel, Legal Director, at (515) 281-7088 or kent.nebel@iowa.gov.