

January 30, 2014  
**FOR IMMEDIATE RELEASE**

## Summary of January 23-24, 2014, Board Meeting

**The following is a summary of the January 23-24, 2014, meeting of the Iowa Board of Medicine.**

**Cases Reviewed:** The Board reviewed 104 cases.

**New Investigative Cases:** The Board reviewed 48 new investigative cases.

**Statement of Charges:** Upon a determination by the Board that probable cause exists to take formal disciplinary action, the Board may file a Statement of Charges which contains the allegations of the Board.

The Board approved 2 Statements of Charges.

1. A 49-year-old Iowa-licensed physician who currently practices family medicine in Washington, Iowa, had formal disciplinary charges filed against her by the Board on January 24, 2014. On February 12, 2009, the physician entered into a combined Statement of Charges and Settlement Agreement with the Board. The Board charged the physician with failing to provide appropriate treatment to patients with chronic pain and failing to maintain appropriate professional boundaries with patients. The physician voluntarily completed over thirty credit hours of continuing medical education for the appropriate treatment of patients with chronic pain and maintaining appropriate professional boundaries. The physician agreed to be monitored by the Iowa Physician Health Program. The Board placed the physician on probation for a period of five years subject to counseling and monitoring and issued her a Citation and Warning. On August 23, 2012, the Board ordered the physician to complete a comprehensive clinical competency evaluation at the Center for Personalized Education for Physicians (CPEP) in Denver, Colorado, due to concerns about her prescribing practices and her obstetrical care to numerous patients. On December 21, 2012, the physician completed the evaluation and CPEP concluded that she demonstrated areas of need in medical knowledge, clinical judgment and reasoning, and documentation. CPEP recommended that the physician complete a structured, individualized educational intervention which includes an educational preceptor, continuing medical education, self-study and a documentation course and/or coaching. On August 23, 2012, the Board ordered the

physician to complete a comprehensive physical, neuropsychological, mental health and disruptive behavior evaluation at the Professionals Program in Elmhurst, Illinois, due to concerns about her behavior. The physician has failed to complete the evaluation. On January 24, 2014, the Board filed formal disciplinary charges against the physician. The Board alleged that the physician failed to complete the comprehensive physical, neuropsychological, mental health and disruptive behavior evaluation in violation of the August 23, 2012, Confidential Evaluation Order. The Board also alleged that the physician repeatedly violated the standard of care in her treatment of numerous obstetrical patients in Washington, Iowa, between 2005 and 2010. A hearing is scheduled on April 3-4, 2014.

2. A 53-year-old Iowa-licensed physician who currently practices family medicine in Clinton, Iowa, had formal disciplinary charges filed against him by the Board on January 24, 2014. On or about March 29, 2013, the Iowa Department of Human Services (IDHS) terminated the physician's participation as a provider in the Medicaid program. A contested case hearing was held on May 8, 2013. On June 3, 2013, IDHS issued a Final Decision. IDHS upheld the physician's termination from participation in the Medicaid program. IDHS concluded that The physician violated the laws and rules governing participation in the Medicaid program - 42 U.S.C. Section 3120a-7b(d), 42 CFR Section 447.15 and 441 IAC 79.2(2) "f" and "p" - when he charged multiple Medicaid recipients for office visits without submitting the covered services to Medicaid for payment, and the amount charged by The physician was in excess of the amount paid by Medicaid. On January 24, 2014, the Board charged the physician with violating a law which relates to the practice of medicine and engaging in unethical or unprofessional conduct. The Board alleged that the physician violated the laws relating to the Medicaid program. A hearing is scheduled on March 20, 2014.

**Consent Agreements:** If the Board receives information which indicates that a physician has been disciplined by another licensing authority or has violated the laws and rules governing the practice of medicine in another jurisdiction, the Board may require a license applicant to enter into a Consent Agreement in order to obtain an Iowa medical license.

The Board approved 1 Consent Agreement.

1. A 53-year-old Iowa-licensed physician who formerly practiced emergency medicine in Sparta, Wisconsin, entered into a Consent Agreement with the Board on January 24, 2014. On December 22, 2011, the physician was charged with operating a motor vehicle while intoxicated (OWI) in Marathon County, Wisconsin. The resolution of the charges is still pending. On February 17, 2012, the physician reported to work at the emergency department at the Mayo Clinic Health System in Sparta, Wisconsin, while intoxicated. On July 18, 2012, the Wisconsin Medical Examining Board (Wisconsin Board) suspended the physician's Wisconsin medical license due to substance abuse. On February 22, 2013, the Wisconsin Board stayed the suspension and reinstated the physician's Wisconsin medical license subject to drug and alcohol treatment and monitoring. On October 22, 2013, the Illinois Division of Professional Regulation (Illinois Board) placed the physician on indefinite probation subject to substance abuse monitoring based on the Wisconsin disciplinary action. Under the terms of the January 24, 2014, Consent Agreement, the Board issued the physician a permanent Iowa medical license. The Board also issued the physician a Citation and Warning for being disciplined by the Wisconsin and Illinois Boards and referred the physician to the Iowa Physician Health Program (IPHP) for substance abuse monitoring. The physician must fully comply with the requirements established by the IPHP.

**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. A 53-year-old Iowa-licensed male physician who practices family medicine was ordered to complete a confidential comprehensive sexual misconduct and/or professional boundaries evaluation. The Board received information which indicates that the physician engaged in a sexual relationship with a female co-worker who was also his patient. The Board also received information which indicates that the physician engaged in sexual relations with multiple female co-workers, at multiple locations where he was employed, which interfered with, or had the potential to interfere with the co-worker's performance and/or created, or had the potential to create an intimidating, hostile or offensive work environment.
2. A 38-year-old Iowa-licensed female physician who practices family medicine was ordered to complete a confidential comprehensive sexual misconduct and/or professional boundaries evaluation. The Board received information which indicates that the physician engaged in an inappropriate relationship with a male patient.

**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 19 confidential Letters of Warning or Education due to the following areas of concern:

1. Concerns that a physician offered to perform liposuction surgery on a female patient with a history of bulimia and anorexia and other body image problems.
2. Concerns about a physician's surgical complications.
3. Concerns about a physician's prescribing practices and treatment of patients with chronic pain.
4. Concerns that a physician prescribed excessive antibiotics to a patient with kidney disease.
5. Concerns that a physician prescribed improper medications to a patient with a known allergy.
6. Concerns that a physician failed to refer a patient to an oncologist despite evidence of colon cancer.
7. Concerns that a physician failed to admit a young pregnant patient to the hospital.
8. Concerns about a physician's post-operative care.
9. Concerns about a physician's post-operative care.
10. Concerns that a physician prescribed medications to a patient that were contraindicated.

11. Concerns about a physician's communication with a patient and poor medical records.
12. Concerns that a physician prescribed medications to a patient without appropriate monitoring and medical records.
13. Concerns that a physician failed to insist that a very ill patient be admitted to the hospital.
14. Concerns that a physician failed to perform an appropriate physical examination.
15. Concerns that a physician failed to complete a death certificate in a timely manner.
16. Concerns that a physician submitted a false license application in another state.
17. Concerns that a physician engaged in romantic relationships with two co-workers creating an uncomfortable work environment.
18. Concerns that a physician failed to provide appropriate supervision to staff who inappropriately prescribed medication to patients.
19. Concerns that a physician prescribed medications to patients without performing appropriate examinations.

**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.

The Board held 3 appearances due to the following concerns:

1. Concerns about a physician's treatment of a patient with a genital infection.
2. Concerns that a physician offered to perform liposuction surgery on a female patient with a history of bulimia and anorexia and other body image problems.
3. Concerns about a physician's surgical complications.

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

The Monitoring Committee reviewed 4 cases involving physicians who are being monitored by the Board.

**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 30 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 7 licensure applications. Two permanent licenses were granted and two permanent license applications were left open to request further information, one consent agreement was approved to allow for the issuance of a permanent license, and two temporary licenses were issued.

**In other action the Board:**

- Appointed Jeffrey S. Kerber, West Des Moines, to the Iowa Physician Health Committee, effective January 24, 2014.
- Received a statistical report on the Iowa Physician Health Program. On December 31, 2013, there were 79 participants in the program. There were 40 new participants in the program since January 1, 2013, and 41 discharges in the same period.
- Received reports from the Iowa Attorney General's Office on five disciplinary cases and one rule-making case under judicial review in state courts.

**A press release describing public disciplinary action taken by the Board was distributed and posted on the Board's Website on January 28, 2014. If you have questions about this summary or the Board's press release, please contact Kent M. Nebel, J.D., Legal Director, at (515) 281-7088 or [kent.nebel@iowa.gov](mailto:kent.nebel@iowa.gov).**