MANUAL OF PENALTY
GUIDELINES FOR LICENSED PHYSICIANS
AND SURGEONS

The Connecticut Medical Examining Board
The Connecticut Department of Public Health

2005
The Connecticut Medical Examining Board and the Department of Public Health play separate and distinct roles in disciplining physicians. The Practitioner Investigations Unit (PIU) of the Department of Public Health is responsible for receiving and investigating complaints concerning licensed physicians. As part of the investigative process, the PIU obtains all relevant records, interviews necessary witnesses, and obtains an expert opinion from a physician having the same specialty as the licensee who is being investigated. At the conclusion of the investigation, the supervisor of the PIU determines which cases will proceed to a hearing, and which cases will be dismissed. If the supervisor of the PIU determines that the evidence is sufficient to warrant disciplinary action, the matter is referred to the Department’s Legal Office for prosecution. A formal disciplinary action is initiated by a Statement of Charges. Prior to issuing a Statement of Charges, however, the physician is afforded an opportunity to show compliance with the governing statutes.

The Board is responsible for presiding over disciplinary hearings and rendering final decisions. Hearings are presided over by a three-person panel consisting of the following: at least one member of the Medical Examining Board; one public member who may be either a board member or hearing panelist (who is not a board member and is appointed to a list of panelists by the Commissioner of the Department); and, one physician or physician assistant who is on the list of non-board hearing panelists. See, P.A. 05-275, §18, revising §20-8a(c) of the Connecticut General Statutes. The panel receives advice from an Assistant Attorney General. At the conclusion of the hearing, the panel meets to determine its findings on the allegations, and a Proposed Memorandum of Decision is written. The parties are provided with a copy of the Proposed Memorandum of Decision, and are given an opportunity to request oral argument before a final decision is rendered by the entire Board. At any time prior to issuance of the final Decision, the parties may choose to settle the case. Settlement documents are referred to as “Consent Orders,” and must be approved by the Board.

This Manual consists of two parts:

- Part One - Disciplinary Guidelines: This section consists of (1) the terms used by the Board to impose a penalty on a license, and (2) the recommended minimum and maximum penalties for each type of violation, with reference to the specific terms.

- Part Two - Non-Disciplinary Terms: This section includes additional standard terms, of a non-disciplinary nature, that may be included in final Decisions.
Additional copies of this document are available on the Department’s web page at: www.dph.state.ct.us under “Boards and Commissions” with specific reference to the Medical Examining Board. Copies are also available upon written request to:

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PART ONE

DISCIPLINARY GUIDELINES
PART ONE – DISCIPLINARY GUIDELINES

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DISCIPLINARY GUIDELINES

Physical illness or loss of motor skill, including but not limited
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Emotional disorder or mental illness (§20-13c(2))

Abuse or excessive use of drugs, including alcohol, narcotics
or chemicals (§20-13c(3)).

Negligent conduct in the practice of medicine (§20-13c(4)).

Illegal conduct in the practice of medicine (§20-13c(4)).

Incompetent conduct in the practice of medicine (§20-13c(4)).

Alteration of medical records (§20-13c(4)).

Sexual misconduct (§20-13c(4)).

Possession, use, prescription for use, or distribution of controlled
substances or legend drugs, except for therapeutic or other medically
proper purposes (§20-13c(5)).

Misrepresentation or concealment of a material fact in obtaining
or reinstating a license to practice medicine (§20-13c(6)).

Failure to adequately supervise a physician assistant (§20-13c(7)).

Failure to fulfill any obligation resulting from participation in the
National Health Service Corps (§20-13c(8)).

Failure to maintain professional liability insurance or other indemnity
against liability for professional malpractice as provided in §20-11b(a)
(§20-13c(9)).

Failure to provide information requested by the Department for
purposes of completing a health care provider profile, as required
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1 All references are to the Connecticut General Statutes unless otherwise stated.
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PART ONE – DISCIPLINARY GUIDELINES

INTRODUCTION

These disciplinary guidelines have been devised to promote consistency in sanctions imposed by the Board, to lend credibility to the disciplinary process, and to aid the Board in its ultimate goal of protecting the public. These Guidelines are used for reference and guidance only and are not binding regulations of the Board or Department. The Board recognizes that individual matters present unique sets of circumstances which merit individual consideration.

Upon a finding of good cause following a hearing, §19a-17(a) of the General Statutes authorizes the Board to order one or more of the following (in order of increasing severity): (1) assess a civil penalty; (2) issue a letter of reprimand or censure a licensee (3) place a practitioner on a probationary status and require regular reports on the matters that are the basis of probation and/or require that the practitioner pursue further professional education in those areas that are the basis for the probation; (4) place limitations on the practitioner’s practice; (5) suspend the license; and, (6) revoke the license. The “Disciplinary Terms” set forth herein, includes the language used to impose these disciplinary terms.

After a violation has been established, in determining the penalty, the Board will consider whether the physician’s continued practice without restriction and/or probation will pose a danger to the public.

- If the Board determines that a restriction and/or probation is not required to protect the public health and safety, a civil penalty and/or reprimand or censure may be ordered.
- If the Board determines that a restriction and/or probation is required to protect the public health and safety, the restriction and/or probation shall address the matters which are the basis of the disciplinary action.
- If the Board determines that the physician’s continued immediate practice would pose a danger to the public health and safety, a suspension or revocation shall be ordered. Revocation may be ordered when the Board determines that the public health and safety would be endangered if the physician continues to practice and a restriction and/or probation is insufficient to ensure the public health and safety.

During the penalty determination phase of its deliberations, the Board may consider factors including but not limited to:

- Whether the physician’s conduct was a unique event or part of a pattern of misconduct
- Whether the physician’s conduct reflects a lack of judgment that poses a risk in other situations
- Whether the physician has a history of prior disciplinary actions
- Whether the physician’s conduct was based in whole or in part upon dishonest or selfish motives
• Whether the physician in the course of the investigation or proceeding submitted false evidence, false statements, or engaged in other deceptive practices during the disciplinary process
• Whether the physician refused to acknowledge the wrongful nature of the conduct
• Whether the physician engaged in willful or reckless misconduct
• The extent of the patient’s or victim’s vulnerability
• Whether and the extent to which the public health and safety would be endangered if the physician continues to practice

During the penalty determination phase of its deliberations, the Board will also consider mitigating and other factors in determining whether to deviate from these guidelines. Mitigating and other factors may include, but are not limited to:

• The extent to which the physician takes responsibility for his or her actions
• The physician’s willingness to cooperate in rehabilitation
• Whether a procedure was an emergency or was scheduled in advance
• The remoteness of prior discipline
• Interim rehabilitation or remedial measures
• The absence of a prior disciplinary record
• Full cooperation with the Board and/or Department
• Physical or mental disability or impairment
• Absence of a dishonest or selfish motive
• Restitution for victims

These Guidelines establish minimum and maximum penalties for violations of the standard of practice. Any deviation from these Guidelines shall be accompanied by a statement of the reason for the deviation, including any mitigating or other facts.

In lieu of proceeding through a hearing resulting in a Memorandum of Decision, licensees may enter into a Consent Order. Since Consent Orders are settlement documents with negotiated terms, the Guidelines do not apply to Consent Orders. See, P.A. 05-275.

Licensees may also enter into a voluntary surrender of a license or an agreement not to renew or reinstate a license. Since these documents do not require a Board-issued order, they are not described in this document. Additionally, in lieu of the Department requesting that the Board summarily suspend a license, a physician may voluntarily agree to cease practicing for a designated period of time by executing an “Interim Consent Order” (ICO). Since an ICO is not a final order of the Board, it is also not described herein.

These guidelines may be revised, from time to time, as the Board and Department deem appropriate.
DISCIPLINARY TERMS

1. **Civil Penalty**
   Respondent shall pay a civil penalty of $_______ dollars by certified or cashier’s check payable to “Treasurer, State of Connecticut.” The check shall reference the Petition Number on the face of the check, and shall be payable within thirty days of the effective date of this Decision.

2. **Reprimand**
   Respondent’s license number _____ to practice as a physician and surgeon in the State of Connecticut is hereby reprimanded.

3. **Censure**
   Respondent’s license number _____ to practice as a physician and surgeon in the State of Connecticut is hereby censured.

4. **Revocation**
   Respondent’s license number _____ to practice as a physician and surgeon in the State of Connecticut is hereby revoked.

5. **Suspension**
   Commencing on _______, respondent’s license shall be suspended for a period of [with said suspension immediately stayed/stayed after a period of ________]. [If actual suspension is three months or longer: All three originals of respondent’s license shall be provided to the Department’s Legal Office within ten days of the effective date of this Order.]

6. **Probation**
   [Concurrently/Following said suspension,] [R/r]espondent’s license shall be placed on probation, commencing on _______, for a period of ________ under the following terms and conditions:

   a. **Therapy**
      Within two weeks of the commencement of probation, respondent shall submit to the Department for its pre-approval, the name of a licensed psychiatrist or psychologist (“the therapist”) who has agreed to provide therapy to respondent, and respondent shall participate in regularly scheduled therapy with the therapist at [his/her] own expense.

      (1) Respondent shall provide a copy of this Decision to the therapist.

      (2) The therapist shall furnish written confirmation to the Department of his or her engagement in that capacity and receipt of a copy of this Decision within fifteen (15) days of receipt.
(3) If the therapist determines that therapy is no longer necessary, that a reduction in frequency of therapy sessions is warranted, or that respondent should be transferred to another therapist, the therapist shall advise the Department, and the Department shall pre-approve said termination of therapy, reduction in frequency of therapy sessions, and/or respondent's transfer to another therapist.

(4) The therapist shall submit reports ______ for the ______ of probation; ______ for the ______ of probation; and, ______ for the ______ of probation, which shall address, but not necessarily be limited to, respondent's ability to practice medicine [in an alcohol and substance free state] safely and competently. Said reports shall continue until the therapist determines that therapy is no longer necessary or the period of probation has terminated.

(5) The therapist shall immediately notify the Department in writing if the therapist believes respondent’s continued practice poses a danger to the public, or if respondent discontinues therapy and/or terminates his or her services.

b. Alcohol/Drug Screens

Commencing no later than _______, and during the entire probationary period, respondent shall refrain from the ingestion of illegal substances and alcohol in any form, and the ingestion, inhalation, injection or other use of any controlled substance and/or legend drug unless prescribed or recommended for a legitimate purpose by a licensed health care professional authorized to prescribe medications. In the event a medical condition arises requiring treatment utilizing controlled substances, legend drugs, or alcohol in any form, respondent shall notify the Department and, upon request, provide such written documentation of the treatment as is deemed necessary by the Department.

(1) During the first two years of the probationary period, respondent shall submit to two random observed urine screens weekly for alcohol, illegal drugs, controlled substances, and legend drugs; during the third and fourth years, [she/he] shall submit to such screens on a weekly basis; and, during the fifth year, [she/he] shall submit to such screens on a monthly basis. Respondent shall submit to such screens on a more frequent basis if requested to do so by the therapist, the Department, or the Board. Said screens shall be administered by a facility approved by the Department. All such random screens shall be legally defensible in that the specimen donor and chain of custody shall be identified throughout the screening process. All laboratory reports shall state that the chain of custody procedure has been followed.

(2) Respondent shall cause to have the facility provide monthly reports to the Department on the urine screens for alcohol, illegal substances, controlled substances and legend drugs. All such screens shall be
negative for alcohol, controlled substances, and legend drugs, except for medications prescribed by respondent's physician. If respondent has a positive urine screen, the facility shall immediately notify the Department. All positive random drug and alcohol screens shall be confirmed by gas chromatograph/mass spectrometer testing.

(3) Respondent understands and agrees that if respondent fails to submit a urine sample when requested to do so, such missed screen shall be deemed a positive screen.

(4) Respondent shall notify each of his or her health care professionals of all medications prescribed for [him/her] by any and all other health care professionals.

(5) The Department shall immediately notify the Board if respondent fails to comply with the screening requirements or has a positive screen.

c. **AA/NA Meetings**

Commencing on _________, respondent shall attend "anonymous" or support group meetings on an average of _________ times per month, and shall provide monthly reports to the Department concerning [his/her] record of attendance.

d. **Reporting Arrests**

During the period of probation, respondent shall report to the Department any arrest under the provisions of Connecticut General Statutes section 14-227a. Such report shall occur within fifteen (15) days of such event.

e. **Employer Reports**

Respondent shall provide [his/her] chief of service, employer, partner and/or associate at any hospital, clinic, partnership and/or association at which [she/he] practices, is employed or with which [she/he] is affiliated or has privileges, with a copy of this Decision within fifteen (15) days of its effective date; and, respondent shall cause to have his/her chief of service, employer, partner and/or associate provide confirmation to the Department of receipt of the Decision within 15 days thereafter. If respondent changes employment at any time during the probationary period, respondent shall provide [his/her] new chief of service, employer, partner and/or associate as described herein with a copy of this Decision, within fifteen (15) days of commencement of [employment/_______] at a new facility, and shall cause the new employer to provide the Department with confirmation of [his/her] receipt of the Decision within fifteen days thereafter. Respondent agrees to provide __________ reports from any and all of [his/her] [employer/_______] for the ________ of probation; and, ____________ for the remainder of the probationary period, stating that respondent is practicing with reasonable skill and safety [and in an alcohol and substance-free state].
f. **No Solo Practice**

During the period of probation, respondent shall only practice as a physician and surgeon in an office and practice setting that includes other physicians.

g. **Approval of Employment**

Respondent shall obtain written approval from the Board prior to any change in employment.

h. **Physical Health**

Respondent shall, at their own expense, undergo a physical examination by a physician pre-approved by the Department ("the initial examination").

1. No later than _______, respondent shall submit to the Department for its pre-approval, the name of a physician licensed in Connecticut ("the physician") who will perform the initial examination to assess respondent's physical health.

2. Within seven days of the Department's approval of the physician, respondent shall provide the physician with a copy of this Order.

3. The initial examination shall be completed no later than 30 days after the Department has approved the physician. The initial examination shall include any additional testing the physician deems necessary. Respondent shall fully cooperate with all requests made by the physician.

4. Respondent shall continue in treatment by the physician on a ____ basis (or more frequently at the discretion of said physician) for purposes of assessing respondent's physical health; and, respondent shall undergo any further examinations the physician deems necessary.

5. Respondent shall ensure that the complete results of the initial examination and any subsequent examinations are submitted by the physician directly to the Department within fourteen days of completion of the examination. The report of the initial examination shall also document that respondent timely provided the physician with a copy of this Order.

6. The physician shall submit written reports to the Department on a ____ basis stating that respondent can practice as a physician and surgeon with reasonable skill and safety. If the physician reaches any other conclusion, such finding shall constitute a violation of this Order.
i. **Psychiatric Evaluation**

Respondent shall, at their own expense, undergo a psychiatric evaluation by a psychiatrist pre-approved by the Department ("the psychiatrist").

1. No later than ______, respondent shall submit to the Department for its pre-approval, the name of a psychiatrist licensed in Connecticut who will perform a complete psychiatric evaluation of respondent.

2. Within seven days of the Department’s approval of the psychiatrist, respondent shall provide the psychiatrist with a copy of this Order, any and all previous psychiatric evaluations of respondent, any reports received by the Drug Control Division of the Department of Consumer Protection, any prior therapist reports, any relevant employer reports, and any reports received from the police or any other authority.

3. The psychiatric evaluation shall be completed no later than 90 days after the Department has approved the psychiatrist. The psychiatric evaluation shall include psychological testing and, if requested by the psychiatrist, a complete neuropsychological testing. Respondent shall fully cooperate with all requests made by the psychiatrist.

4. Respondent shall ensure that the complete results of the evaluation are submitted by the psychiatrist directly to the Department within fourteen days of completion. The results shall also document that respondent provided the psychiatrist with a copy of this Order, and any other documents identified herein. The evaluator shall conclude that respondent can safely practice as a physician without having any further restrictions on their license. If the psychiatrist reaches any other conclusion, such finding shall constitute a violation of this Order.

j. **Psychiatric evaluation prior to termination of probation**

Within the final six months of the probationary period, respondent shall, at their own expense, undergo a psychiatric evaluation by a psychiatrist pre-approved by the Department (“the psychiatrist”).

1. Respondent shall fully cooperate with all requests made by the psychiatrist. The psychiatric evaluation shall include psychological testing and, if requested by the psychiatrist, a complete neuropsychological testing.

2. Respondent shall provide the psychiatrist with a copy of this Order, any and all previous psychiatric evaluations of respondent, reports received by the Drug Control Division of the Department of Consumer Protection, the Department's monitoring file including all therapist and employer reports, and any reports received from the police or any other
authority. The evaluation report provided to the Department by the psychiatrist shall include a confirmation of the psychiatrist’s receipt of the foregoing documents to the extent that they exist.

(3) Respondent shall ensure that the evaluation report is provided by the psychiatrist directly to the Department at least thirty days before the probationary period terminates.

(4) The psychiatrist shall conclude that respondent can safely practice medicine without having any further restrictions on [his/her] license. If the psychiatrist reaches any other conclusion, such finding shall constitute a violation of this Order.

k. Monitoring of Records

No later than _______, respondent shall submit to the Department for its pre-approval, the name of a physician licensed in Connecticut (“monitor”) who, at respondent’s expense, will conduct a [monthly/quarterly] random review of __ percent or ___ of respondent’s patient records, created or updated during the probationary period, whichever is the larger number. Within fifteen days of the Department’s approval, respondent shall provide the monitor with a copy of this Decision. Respondent shall cause the monitor to confirm receipt of this Decision within fifteen days after [she/he] has received the Decision. In the event respondent has ___ or fewer patients, the monitor shall review all of respondent's patient records.

(1) Respondent's monitor shall meet with respondent not less than once every _________ for the _________ of the probationary period [and _________ for the remainder of the probationary period].

(2) The monitor shall have the right to monitor respondent's practice by any other reasonable means which he or she deems appropriate. Respondent shall fully cooperate with the supervisor in providing such monitoring.

(3) Respondent shall be responsible for providing written monitor reports directly to the Department _________ for the _________ of the probationary period [and _________ for the remainder of the probationary period]. Such monitor reports shall include documentation of dates and durations of meetings with respondent, number and a general description of the patient records and patient medication orders and prescriptions reviewed, additional monitoring techniques utilized, and statement that respondent is practicing with reasonable skill and safety.

l. Practice Monitor

No later than _______, respondent shall submit to the Department for its pre-approval, the name of a physician licensed in Connecticut (“practice monitor”). Within fifteen days of the Department’s approval, respondent shall
provide the monitor with a copy of this Decision. Respondent shall cause the monitor to confirm receipt of this Decision within fifteen days after [she/he] has received the Decision. Respondent's practice shall be supervised at all times by the practice monitor.

(1) Respondent's practice monitor shall meet with [him/her] not less than ____ for the ________ of the probationary period [and ________ for the remainder of the probationary period].

(2) The practice monitor shall have the right to monitor respondent's practice by any other reasonable means which he or she deems appropriate. Respondent shall fully cooperate with the practice monitor in providing such monitoring.

(3) Respondent shall be responsible for providing written practice monitor reports directly to the Department ____________ for the ________ of the probationary period [and ________ for the remainder of the probationary period]. Such reports shall include documentation of dates and durations of meetings with respondent, number and a general description of the patient records and patient medication orders and prescriptions reviewed, additional monitoring techniques utilized, and a statement that respondent is practicing with reasonable skill and safety.

m. **Chaperone present during exams**

Respondent shall have [a female/another] employee ("chaperone") present during any examination or treatment of a [female/male] patient.

(1) For each such appointment, respondent shall maintain as part of the patient’s medical record, the name of the chaperone, and the patient’s and chaperone's signatures attesting to the presence of the chaperone on said date.

(2) Respondent shall permit the Department to conduct random, unannounced reviews of all records identified in paragraph ___ above, as well as the patient log of appointments, to ensure compliance with this provision.

n. **Training and Education**

(1) Within the first _______ of the probationary period, respondent shall attend and successfully complete a course in __________, pre-approved by the Board. Within ______ of the completion of such coursework, respondent shall provide the Department with proof, to the Department’s satisfaction, of the successful completion of such course(s).
(2) Respondent shall not perform __________ until [she/he] has provided proof to the satisfaction of the Department of completion of such coursework required in paragraph ___ above.

(3) Within thirty days of the effective date of this Decision, respondent shall have [his/her] ability to perform ________________ evaluated at ____ by a ______________ approved by the Board (“the evaluator”).

(4) If the evaluator recommends retraining, respondent shall successfully comply with all such recommendations within the timeframe established by the evaluator.

(5) Respondent shall not perform any __________ until such time as the evaluator either reports to the Department that (1) there are no deficiencies in respondent’s ability to perform __________, or (2) respondent has successfully completed the retraining.

o. Direct Practice Supervision

[Within 14 days after completing the coursework required in paragraph ___ above/No later than ___], respondent shall submit to the Department for pre-approval, the name of a physician who will be present for and observe the first [number] [procedure] respondent performs. After observing ___ such procedures, the supervisor shall, within ________ days, report to the Department that he or she has personally observed ___ such procedures, and that such procedures were performed with reasonable skill and safety.

Thereafter, respondent may perform ______ without direct supervision. If the supervisor reports that such procedures were not performed with reasonable skill and safety, respondent shall continue to be barred from performing such procedure without supervision until the supervisor reports that he or she has personally observed respondent perform ______ such procedures, and that such procedures were performed with reasonable skill and safety.

p. Taking of the SPEX examination

During the ___ of the probationary period, respondent shall successfully complete the Special Purpose Examination of the Federation of State Medical Boards, and provide proof of successful completion of the examination to the Department.

q. Skill assessment

During the ______ of the probationary period, respondent shall successfully obtain and complete an individual evaluation of her/his medical skills from a facility or institution (i.e., Institute for Physician Evaluation, Philadelphia, Pennsylvania or Center for Personalized Education for Physicians, Aurora, Colorado), pre-approved by the Department (hereinafter “Evaluating Facility”). Respondent shall cause the Evaluating Facility to submit its evaluation report directly to the Department.
7. **Cease and desist order**

The Board orders respondent to immediately cease and desist from practicing as a physician and surgeon.

8. **Permanent restriction**

Respondent’s license to practice medicine is hereby permanently restricted in that respondent shall permanently refrain from ________.

9. **Action taken by another state’s licensing authority**

   a. In the event respondent fully complies with and completes the terms and conditions of the disciplinary action ordered by the __________ Board, in Order No. __________ before beginning practice in Connecticut, respondent’s license number __________ to practice medicine and surgery in Connecticut is hereby placed on probation for a period of __________ from the date [she/he] commences practicing in this State.

   b. In the event respondent begins practice in Connecticut before [she/he] has fully complied with and/or completed the terms and conditions of the ____ Order, the term of respondent’s probation in Connecticut shall be ______, plus the uncompleted term of the ______ Order [as well as any unfulfilled community service requirements].

   c. During the period of probation, respondent’s Connecticut license shall be subject to the following terms and conditions:

       [Insert terms.]

10. **Surrender of Drug Registrations (use if license suspended at least one year)**

    Within ten days of the effective date of this Order, respondent agrees to surrender to the issuing authorities, [his/her] state and federal Controlled Substance Registrations.

11. **Surrender/Reinstatement of Controlled Substance Registrations**

    Within ten days of the effective date of this Order, respondent shall surrender to the issuing authorities, [his/her] state and federal Controlled Substance Registrations. Respondent shall not reapply for [his/her] state or federal controlled substance registrations for the first ___ years of the probationary period. If during the first ___ years of the probationary period, the Drug Control Division of the Department of Consumer Protection (hereinafter “Drug Control”) approves respondent to reapply for [his/her] state controlled substance registration, respondent may then request that the Board modify this Order to permit [him/her] to submit such application to Drug Control. If the Board agrees to so modify this Order, and respondent obtains said registrations, respondent’s controlled substance prescribing, ordering, and dispensing practices shall be monitored __________ by a licensed physician pre-approved by the
Department (hereinafter “supervisor”) for a period of ____, upon issuance of said registrations, as set forth below. If the probationary period has already terminated at the time respondent obtains such registrations, the probationary period shall be extended or reinstated to ensure that the _________ period of monitoring is completed. If the probationary period is extended or reinstated to comply with this provision, no other terms of probation shall be extended or reinstated. During this period of monitoring, respondent shall:

a. Maintain a log of all controlled substances dispensed to patients as well as all prescriptions for controlled substances, both written and authorized by phone.

b. Maintain copies of all orders placed to wholesalers for controlled substances, as well as records of receipts.

c. Monitoring of records (6k above)
DISCIPLINARY GUIDELINES

The following Guidelines identify general types of violations with reference to the statutory citation, and the minimum and maximum penalties for each type of violation. The numbers in the parentheses refer to the paragraph numbers of the terms found on pages 10 through 19 of this Manual. Actual penalties may fall anywhere between the recommended minimum and maximum.

PHYSICAL ILLNESS OR LOSS OF MOTOR SKILL, INCLUDING BUT NOT LIMITED TO, DETERIORATION THROUGH THE AGING PROCESS (§20-13c(1))

Minimum: Probation (6)
Maximum: Revocation (4)

EMOTIONAL DISORDER OR MENTAL ILLNESS (§20-13c(2))

Minimum: Probation (6)
Maximum: Revocation (4)

ABUSE OR EXCESSIVE USE OF DRUGS, INCLUDING ALCOHOL, NARCOTICS, OR CHEMICALS (§20-13c(3))

Minimum: Probation (6)
Maximum: Revocation (4)

NEGLIGENT CONDUCT IN THE PRACTICE OF MEDICINE (§20-13c(4))

Minimum: Civil penalty (1)
Maximum: Revocation (4)

ILLEGAL CONDUCT IN THE PRACTICE OF MEDICINE (§20-13c(4))

Minimum: Civil penalty (1)
Maximum: Revocation (4)

INCOMPETENT CONDUCT IN THE PRACTICE OF MEDICINE (§20-13c(4))

Minimum: Probation (6)
Maximum: Revocation (4)

ALTERATION OF MEDICAL RECORDS (§20-13c(4))

Minimum: Civil penalty (1)
Maximum: Revocation (4)
SEXUAL MISCONDUCT (§20-13c(4))
Minimum: Probation (6)
Maximum: Revocation (4)

POSSESSION, USE, PRESCRIPTION FOR USE, OR DISTRIBUTION OF
CONTROLLED SUBSTANCES OR LEGEND DRUGS, EXCEPT FOR
THERAPEUTIC OR OTHER MEDICALLY PROPER PURPOSES (§20-13c(5))
Minimum: Civil penalty (1)
Maximum: Revocation (4)

MISREPRESENTATION OR CONCEALMENT OF A MATERIAL FACT IN
OBTAINING OR REINSTATING A LICENSE TO PRACTICE MEDICINE (§20-
13c(6))
Minimum: Civil penalty (1)
Maximum: Revocation (4)

FAILURE TO ADEQUATELY SUPERVISE A PHYSICIAN ASSISTANT (§20-
13c(7))
Minimum: Civil penalty (1)
Maximum: Reprimand (2) and/or censure (3)

FAILURE TO FULFILL ANY OBLIGATION RESULTING FROM
PARTICIPATION IN THE NATIONAL HEALTH SERVICE CORPS (§20-13c(8))
Minimum: Civil penalty (1)
Maximum: Reprimand (2) and/or censure (3)

FAILURE TO MAINTAIN PROFESSIONAL LIABILITY INSURANCE OR OTHER
INDEMNITY AGAINST LIABILITY FOR PROFESSIONAL MALPRACTICE AS
PROVIDED IN §20-11b(a) (§20-13c(9))
Minimum: Civil penalty (1)
Maximum: Revocation (4)

FAILURE TO PROVIDE INFORMATION REQUESTED BY THE DEPARTMENT
FOR PURPOSES OF COMPLETING A HEALTH CARE PROVIDER PROFILE,
AS REQUIRED BY §20-13j (§20-13c(10))
Minimum: Civil penalty (1)
Maximum: Probation until information is provided (6 with modification)
ENGAGING IN ANY ACTIVITY FOR WHICH ACCREDITATION IS REQUIRED UNDER §19a-690 OR §19a-691 (MRI AND ANESTHESIA ACCREDITATION) WITHOUT THE APPROPRIATE ACCREDITATION REQUIRED BY §19a-690 OR §19a-691(§20-13c(11))

Minimum: Civil penalty (1)
Maximum: Revocation (4)

FAILURE TO PROVIDE EVIDENCE OF ACCREDITATION REQUIRED UNDER §19a-690 OR §19a-691 (MRI AND ANESTHESIA ACCREDITATION) AS REQUESTED BY THE DEPARTMENT PURSUANT TO §19a-690 or §19a-691 (§20-13c(12))

Minimum: Civil penalty (1)
Maximum: Probation until evidence is provided (6, with modification)

VIOLATION OF ANY PROVISION OF CHAPTER 370 OR ANY REGULATION ESTABLISHED UNDER CHAPTER 370 (§20-13c(13))

Minimum: Civil penalty (1)
Maximum: Revocation (4)

AIDING AND ABETTING THE UNLICENSED PRACTICE OF MEDICINE (§20-13c(4) in conjunction with §20-9)

Minimum: Cease and desist (7)
Maximum: Revocation (4)

THE UNLICENSED PRACTICE OF MEDICINE (§20-13c(13) in conjunction with §20-9)

Minimum: Cease and desist (7)
Maximum: Cease and desist (7)

ACTION BASED ON DISCIPLINARY ACTION TAKEN IN ANOTHER JURISDICTION (§19a-17a(7)(B) in conjunction with appropriate section from §20-13c, based on nature of the violations that formed the basis of the action taken in the other jurisdiction)

Minimum: Civil penalty (1)
Maximum: Revocation (4)

FAILURE TO REPORT TO THE DEPARTMENT ANY DISCIPLINARY ACTION SIMILAR TO AN ACTION SPECIFIED IN §19a-17(a) TAKEN AGAINST THE LICENSEE BY ANOTHER JURISDICTION (§20-13d(d))

Minimum: Reprimand (2) and/or censure (3)
Maximum: Revocation (4)
FAILURE TO TIMELY RENEW A LICENSE (§20-14b))

Minimum: Civil penalty (1)
Maximum: Revocation (4)

UNLAWFUL DELEGATION TO UNLICENSED PERSONS (§20-13c(4) in conjunction with §20-9)

Minimum: Civil penalty (1)
Maximum: Revocation (4)

FAILURE TO REPORT A PHYSICIAN WHO HAS ENGAGED IN CONDUCT THAT MAY ENDANGER THE PUBLIC HEALTH AND SAFETY (§20-13d(a))

Minimum: Civil penalty (1)
Maximum: Revocation (4)

PRACTICING WHILE UNDER SUSPENSION (§20-13c(4))

Minimum: Revocation (4)
Maximum: Revocation (4)

VIOLATION OF PROBATION (§20-13c(4))

Minimum: Extension of probation (6, with modification)
Maximum: Revocation (4)

FAILURE TO COMPLY WITH MEDICAL EDUCATION REQUIREMENTS (P.A. 05-275, sec. 24)

Minimum: Civil penalty (1)
Maximum: Probation (6)
PART TWO

NON-DISCIPLINARY TERMS
# PART TWO - NON-DISCIPLINARY TERMS

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PART TWO – NON-DISCIPLINARY TERMS

In addition to disciplinary terms, Decisions also include a number of non-disciplinary provisions concerning, e.g., costs, effective date, etc., as set forth herein.

1. **Address for submission of reports**

   All correspondence and reports are to be addressed to:

   Bonnie Pinkerton, Nurse Consultant  
   Department of Public Health  
   Division of Health Systems Regulation  
   410 Capitol Avenue, MS #12HSR  
   P.O. Box 340308  
   Hartford, CT 06134-0308

   Ms. Pinkerton may also be contacted at the following email address:  
   bonnie.pinkerton@po.state.ct.us

2. **Schedule for submission of reports**

   All reports required by the terms of this Decision shall be due according to a schedule to be established by the Department of Public Health.

3. **Comply with all state and federal laws**

   Respondent shall comply with all state and federal statutes and regulations applicable to [his/her] licensure.

4. **Costs**

   Respondent shall pay all costs necessary to comply with this Decision.

5. **Periods of unemployment or practice out of state**

   **For standard of care cases, having a probationary period:** In the event respondent is not employed as a physician for periods of thirty (30) consecutive days or longer, or is employed as a physician for less than twenty (20) hours per week, or is employed outside of the State of Connecticut, respondent shall notify the Department in writing. Such periods of time shall not be counted in reducing the probationary period covered by this Decision.

6. **Legal Notice**

   Legal notice shall be sufficient if sent to respondent’s last known address of record reported to the Office of Practitioner Licensing and Certification of the Healthcare Systems Branch of the Department.
7. **Bearing on criminal liability**

This document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the Bureau Chief of the Division of Criminal Justice’s Statewide Prosecution Bureau.

8. **Compliance with regulations re closure of office**

Respondent shall comply with the provisions of §19a-14-44 of the Regulations of Connecticut State Agencies governing the closure of [his/her] office and the discontinuance of practice.