DISCIPLINE & ETHICS REVIEW & DECISIONS <u>Texas Physician Health Program</u> (Probationer/Licensee Violated PHP Agreement & Cases of Concern)

## December 14, 2012

	<b>REMAIN WITH PHP</b>	PA BOARD	CONTINUE
		ACCEPTED	
<ul> <li>1. 11-0341</li> <li><u>Background</u>: <ul> <li>Referral Type: TMB</li> <li>Agreement Term: 10/17/2012 10/16/2013</li> <li>Referral Reason: 2<sup>nd</sup> DUI</li> <li>Sobriety Date: N/A</li> <li>Drug(s) of Choice: Unknown</li> </ul> </li> <li>Issue(s):</li> </ul>	X With the understanding that there is zero tolerance for any future infractions, if so, the case will be returned to the jurisdiction of the Texas Medical Board for further action.		
<u>15506(5)</u> .			
Participant signed an agreement following two DUI convictions, one while in college and the other one more recent ,which resulted in probation and having a breathalyzer installed in his vehicle.			
An evaluation conducted in September 2011at Red Bird Education Programs was inconclusive due to the participant's defensiveness. Recommendations were for continued monitoring and complete abstinence.			
The TXPHP agreement entered into in September 2011 required the participant to undergo a second SUD evaluation by an addictionologist, which was due by October 2011. The evaluation was not received until August 2012, and further evaluation was recommended due to the participant's unwillingness to be honest and forthcoming regarding his drinking the evening before the evaluation.			
A drug screen taken immediately following the evaluation was reported as positive for EtG (912 ng/mL).			

<ul> <li>TXPHP Medical Director required that the participant undergo a 96-hour evaluation within six weeks.</li> <li>On 9/11/2012, participant underwent a 72-hour evaluation at Palmetto Addiction Recovery Center and was recommended to enter into a 1-year agreement and participate in the TXPHP random drug screening program.</li> <li>Participant is currently under a 1 year agreement and is required to have a Work Site Monitor and urine drug screens at a frequency of 24 tests per year.</li> </ul>			
	<b>REMAIN WITH PHP</b>	PA BOARD	CONTINUE
<ul> <li>2. 12-0200</li> <li><u>Background</u>: <ul> <li>Referral Type: TXPHP/DPRC</li> <li>Agreement Term: N/A</li> <li>Referral Reason: Possible Non-therapeutic Prescribing by TXPHP Participants Physician Assistant</li> </ul> </li> <li><u>Issue(s)</u>: <ul> <li>TXPHP participant, with history of alcohol and opiate abuse, tested positive for Codeine (690 ng/mL) on 9/24/2012.</li> </ul> </li> </ul>		ACCEPTED X Interim referral was made back to TMB, ISC pending.	
Participant reports that the positive test was expected. Furthermore, she states that it was on a list of medications provided to TXPHP when she entered into an agreement. TXPHP could not verify that and per the TXPHP Medical Director, participant was advised she will have to forego active practice if she tests positive for opiates again. Participant tested positive for Hydrocodone (376 ng/mL) and 7- Aminoclonazepam (780 ng/mL) on 10/16/2012. Subsequently, participant tested positive for Hydrocodone			

(>2000 pg/mg) and Codeine (331 pg/mg) on a Hairstat 14 test collected on 11/2/2012.	
Participant stated the Codeine was from a cough syrup that she took and ensured a copy of the prescription would be provided to TXPHP.	
On 11/26/2012, a copy of a prescription for Phenergan with Codeine cough syrup, dated 10/15/2012, was provided to TXPHP.	
More importantly, the prescription was written by the participants Physician Assistant, Bonnie Beck, P.AC.	
On 11/29/2012, the case was discussed at TMBs DPRC meeting and it was recommended that Ms. Beck be referred to the PA Board for further action they may deem appropriate.	

Total = 2