DISCIPLINARY PROCESS REVIEW COMMITTEE (DPRC) & DECISIONS

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

February 7, 2013

Cases for Follow-up			
	REMAIN WITH PHP	TMB ACCEPTED	CONTINUE
 1. 12-0303 Background: Referral Type: Self Agreement Term: 10/30/2012 – 11/30/2012 (Retirement Agreement) Referral Reason: Substance Sobriety Date: 4/25/2012 Drug(s) of Choice: Alcohol Issue(s): 9/17/2012: Missed check in. Participant advised he slept through the alarm because he had been up and down all night with his wife who was sick. 10/01/2012: Tested "positive" for codeine (2409 ng/mL), 	REMAIN WITHIH	X Direction to staff to expedite for Temporary Suspension Hearing	CONTINUE
morphine (396 ng/mL), methadone (1957 ng/mL), and methadone metabolite (1612 ng/mL). He advised that these are the medications he takes for his peripheral neuropathy. He stated that he listed these medications on his intake form. I advised that the intake form did not mention the Tylenol w/codeine and that per the TXPHP Medical Director, he was told at intake that he would have to get off the opiates. He stated that the Tylenol 4 he took was a leftover and that it was the last one. 10/04/2012: Tested "positive" for methadone (1326 ng/mL), and methadone metabolite (1161 ng/mL).			

10/08/2012: Checked in late. Wife said he was feverish and not feeling well.	
10/09/2012: Missed check in. Wife advised that he is in ICU with double pneumonia.	
10/15/2012: Missed call. Asked him to email explanation and go and test. He did not email an explanation for the missed call.	
10/16/2012: Missed call. Asked him to email explanation and go and test. He did not email an explanation for the missed call.	
10/18/2012: Tested "positive" for methadone (1120 ng/mL), methadone metabolite (584 ng/mL). TXPHP Medical Director contacted him and advised him that he cannot practice on opiates and that he will be sent a retirement agreement. Retirement agreement was sent on 10/30/12 but not returned.	
10/30/2012: Tested "positive" for methadone (2599 ng/mL), and methadone metabolite (1523 ng/mL).	
11/09/2012: Tested "positive" for methadone (1026 ng/mL), methadone metabolite (715 ng/mL), codeine (749 ng/mL), and hydromorphone (637 ng/mL). Participant does not want to retire and advised the TXPHP Medical Director that he will taper off. Furthermore, TXPHP Medical Director advised that his urine needs to be free of opiates by end of the year.	
11/16/2012: Tested "positive" for methadone (1041 ng/mL) and methadone metabolite (674 ng/mL).	
11/21/2012: Tested "positive" for methadone (1040 ng/mL) and methadone metabolite (537 ng/mL).	
11/26/2012: Tested "positive" for methadone (679 ng/mL), methadone metabolite (441 ng/mL).	
11/29/2012: Case was discussed at DPRC and was recommended to remain with the TXPHP for continued monitoring.	

12/3/2012: Tested "positive" for methadone (534 ng/mL). 12/12/2012: Tested "positive" for methadone (316 ng/mL) and hydrocodone (342 ng/mL). Participant reported the use of hydrocodone for his peripheral neuropathy on the intake form.	
12/18/2012: Missed call. Left him a message and also emailed him requesting that he go and test today and that he also email the explanation for the missed call. Participant did not email a reason for the missed call and did not go test.	
12/20/2012: Tested out of hours. Participant advised that he often has trouble producing a sample by 3 pm so he waits at test site until he is able to produce a sample. Often, this is after the cut-off time. Advised that late tests will be considered positive and that he will need to provide a sample no later than 3 pm. His testing frequency could be increased as a result of this non-compliance. He advised that he drinks plenty of water and tea and does not know what else he can do.	
12/27/2012: Tested "positive" for hydromorphone (3029 ng/mL). Participant reported the use of hydromorphone for his peripheral neuropathy on the intake form.	
12/29/2012: Tested "positive" for hydrocodone (403 ng/mL) and hydromorphone (694 ng/mL).	
12/30/2012: Tested "positive" for hydromorphone (3029 ng/mL).	
1/02/2013: Missed check in and missed test. He stated that his account was suspended due to a credit card issue. Advised him that he should resolve credit card suspension issues on same day so that he is able to determine if he is called to test. In the alternative, he was told he should go and test anyway.	
1/8/2013: Tested out of hours, which resulted in "low creatinine" (18.9 mg/dL; 1.007 SG). Participant does not have any documentation to support an excusal.	
1/10/2013: Tested out of hours. Participant does not have any	

documentation to support an excusal.			
1/15/2013: Test resulted in "low creatinine" (19.3 mg/dL; 1.007 SG)			
1/24/2013: Tested "positive" for hydromorphone (1933 ng/mL).			
New Cases for Discussion			
	REMAIN WITH PHP	TMB ACCEPTED	CONTINUE
2. 11-0246	×		
Background:			
 Referral Type: Self Agreement Term: 5/5/2011 – 5/5/2016 Referral Reason: Substance Sobriety Date: 9/13/2010 Drug(s) of Choice: Alcohol 			
<u>Issue(s)</u> :			
12/27/2012: Tested "positive" for morphine (795 ng/mL).			
1/18/2013: Participant's explanation indicated that perhaps the Polish Christmas desserts he consumed contained poppy seeds and could therefore be the reason for the positive result.			
Participant has been in full compliance and never tested positive prior to the 12/27/2012 result.			
	REMAIN WITH PHP	TMB ACCEPTED	CONTINUE
3. 12-0280		Х	
Background:			
Referral Type: TMB Staff			

 Agreement Term: 7/2/2012 – 7/1/2013 Referral Reason: Substance Sobriety Date: 8/8/2008 Drug(s) of Choice: Alcohol 			
Issue(s):			
9/11/2012: Missed Call: Participant said he left his phone at home but went and tested.			
9/18/2012: Tested "positive" for hydrocodone (353 ng/mL) and hydromorphone (334 ng/mL). Participant had prescription on file for right shoulder sprain/strain.			
11/13/2012: Missed Call: Participant's account was suspended due to a credit card issue and he was unable to check in. Did not go and test.			
12/27/2012: Missed Test: Participant went to Europe without getting vacation waiver approval. Unable to test internationally.			
1/10/2013: "Positive" PEth test result (362 ng/mL).			
1/25/2013: Explanation regarding the "positive" PEth test result was requested.			
1/31/2013: Participant responded by indicating that he did not have an explanation for the "positive" PEth test result. Furthermore, the participant stated that his work schedule has been exceptionally busy, and that he's been doing very well in both his performance as well as his local activity by attending meetings and continuing to work with his sponsor.			
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4. 11-0251		X Set ISC with DPRC member	
Background:		member	
Referral Type: TMB Staff			

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