

BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA

In the Matter of the Petition for ) Early Termination of Probation by:) ) ) ) Thomas Jerome Lancaster, M.D. ) Case No. 26-2009-200817 ) ) Physician's and Surgeon's ) OAH No. 2010070650 Certificate No. G-70162 ) ) ) ) Petitioner. ) ) _____ ) )
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DECISION

The Proposed Decision of Karen J. Brandt, Administrative Law Judge, dated December 22, 2010 is attached hereto. Said decision is hereby amended, pursuant to Government Code section 11517(c)(2)(C), to correct technical or minor changes that do not affect the factual or legal basis of the proposed decision. The proposed decision is amended as follows:

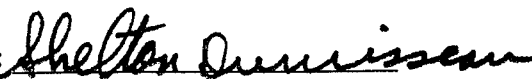
1. Page 1, Case No. 26-2009-20017 is stricken and replaced with Case No. 26-2009-200817.

The Proposed Decision as amended is hereby accepted and adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on February 17, 2011.

IT IS SO ORDERED January 18, 2011.

MEDICAL BOARD OF CALIFORNIA

By:   
Shelton Duruisseau, Ph.D., Chair  
Panel A

BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA

In the Matter of the Petition for Early  
Termination of Probation by:

THOMAS JEROME LANCASTER, M.D.,

Physician and Surgeon's Certificate Number  
G70162

Petitioner.

Case No. 26-2009-20017

OAH No. 2010070650

**PROPOSED DECISION**

This matter was heard before Karen J. Brandt, Administrative Law Judge, Office of Administrative Hearings, State of California, on December 21, 2010, in Sacramento, California.

Jessica Amgwerd, Deputy Attorney General, appeared pursuant to Government Code section 11522.

Thomas Jerome Lancaster, M.D., (petitioner) appeared on his own behalf.

Evidence was received, the record was closed, and the matter was submitted for decision on December 21, 2010.

**FACTUAL FINDINGS**

1. On October 29, 1990, the Medical Board of California (Board) issued Physician and Surgeon's Certificate Number G70162 (license) to petitioner. Petitioner filed a petition dated July 27, 2009, requesting early termination of his five-year probation, which is currently scheduled to end on January 26, 2012.

2. Petitioner is a psychiatrist.

3. On February 14, 2005, an Accusation was filed against petitioner. On March 27, 2006, a First Amended Accusation (First Amended Accusation) was filed against petitioner. On November 21, 2006, petitioner executed a Stipulated Settlement and Disciplinary Order (Stipulated Settlement), which revoked petitioner's license, stayed the

revocation, and placed petitioner's license on probation for five years subject to various terms and conditions. On December 27, 2006, the Board adopted the Stipulated Settlement as its decision and order, effective January 26, 2007.

4. In the Stipulated Settlement, petitioner admitted the truth of the following allegations set forth in the First Amended Accusation: (1) he failed to keep complete chart notes on his treatment of P.H., a 33-year-old female diagnosed with bulimia, depression, mood swings, impulsivity, kleptomania, and borderline personality disorder; (2) he failed to obtain and document P.H.'s psychiatric, medical, and substance abuse history at initial intake and in subsequent office visits; (3) he failed to assess the efficacy and/or side effects of Prozac, Topamax, and Ambien for P.H.; and (4) he proscribed excessive quantities of Ambien to patient R.P., a 37-year-old female diagnosed with depression and fatigue.

5. Pursuant to the Stipulated Settlement, petitioner agreed that he would comply with the standard terms and conditions of probation, and the following optional terms and conditions: (1) annually take 65 hours of continuing education, 40 hours of which had to be approved courses aimed at correcting areas of deficient practice or knowledge; (2) successfully complete a course in prescribing practices; (3) successfully complete a course in medical record keeping; (4) successfully complete a clinical training program equivalent to the Physician Assessment and Clinical Education (PACE) program offered at the University of California, San Diego School of Medicine; (5) have an approved practice monitor; (6) not engage in solo practice; and (7) not engage in clinical psychiatry performed outside his employment with Alta Regional Center (Alta), Sierra Vista Developmental Center (Sierra Vista), Butte County Behavioral Health (Butte County), and Enloe Hospital.

6. Petitioner has complied with the terms and conditions of his probation. He successfully completed the medical record keeping and prescribing courses, and the PACE program. He has taken all the required continuing education. He regularly reviews a variety of psychiatric journals.

7. At the time he was placed on probation, petitioner was working for Alta, Sierra Vista, Butte County, and Enloe Hospital. Petitioner also had a private practice approximately one day a week. The two females (P.H. and R.P.) involved in the allegations set forth in the First Amended Accusation were patients in his private practice.

8. Petitioner now works solely for Butte County, treating out-patient adults and children during the week, and covering a psychiatric health facility on the weekend. At the hearing, petitioner explained that there are safeguards in place to monitor petitioner's work: (1) Butte County has a quality management evaluation program pursuant to which two of his charts are reviewed each month; and (2) the state conducts audits, during which a more extensive review of petitioner's charts is performed. No significant discrepancies were found in any of petitioner's charts that were reviewed during both the quality management reviews and the two state audits that have been conducted since petitioner has been on probation.

9. Since the beginning of probation, petitioner has made the following changes in his practice to ensure continued compliance with the Board's requirements: (1) he conducts two-hour initial intakes for thorough psychiatric evaluations, review of records, and dictation; (2) he uses electronic medical records and hard copies to ensure proper course of treatment; (3) he consults with colleagues for treatment-resistant patients; (4) he sees patients weekly for one-hour follow-ups (especially during the first two months with the initiation of anti-depressants), and once the patients are stable, he monitors them monthly; and on rare occasion, every three months; (5) he requires that his patients obtain regular counseling and therapy during medication management; (6) he ensures that his patients' therapists are involved in their psychiatric treatment, by either being present at visits or providing feedback; (7) he obtains histories and records from other medical providers when pertinent; (8) he stays within PDR guidelines and evidence-based practice; (9) he engages in more preventative measures, such as ordering more labs and EKG's, and engaging in more patient education; and (10) he makes more follow-up telephone calls to patients between visits.

10. During probation, petitioner has been monitored by two practice monitors: Margarita Lema, M.D., and Lynne Pappas, M.D.

11. Dr. Lema is a staff psychiatrist at Butte County. She was petitioner's practice monitor for the first year of his probation. She wrote a letter on petitioner's behalf dated July 27, 2009. She found that petitioner "has shown significant improvement in completing the initial intake notes; including present and past psychiatric history, past medical history, substance abuse history, social and family history and mental status examination." She also found that petitioner "provides accurate diagnosis, differential diagnoses and appropriate treatment plans as well as follow up visits." According to Dr. Lema, there has been "significant improvement in his medication management of children and adolescents." Petitioner has "learned how to use behavioral health resources and other community services such as: psychological testing, educational support and in-home services, etc." Petitioner has used more of the rating scales that Dr. Lema recommended. While Dr. Lema was his practice monitor, petitioner "was always open to advice and would implement it." Even though Dr. Lema is no longer petitioner's practice monitor, he still consults with her regarding transferred patients, and continues to follow her recommendations.

12. Dr. Pappas is petitioner's current practice monitor. She is currently a Child/Adolescent/Adult Psychiatrist at Feather River Hospital. Dr. Pappas wrote a letter on petitioner's behalf dated July 16, 2009. She has known petitioner professionally for over 15 years. She fully supports his petition. According to Dr. Pappas, petitioner "has shown consistency in practicing medicine safely and within the acceptable standard of care." His notes "reflect accurate and thorough history related to diagnosis of present illness, developmental history, medical history, including substance abuse" and "psycho-social history reflecting family and environmental factors affecting the patient and his treatment." Petitioner "appropriately addresses indications for pharmacological intervention and treatment in the use of all medications." He has been "faithful in his consultation" with Dr. Pappas. He is "widely accepting of suggestions offered to assist him in his practice." Dr. Pappas has not observed any violations in petitioner's practice since she became his practice

monitor. Dr. Pappas described petitioner as a "fine physician" who is "caring and diligent." She believes that petitioner has "shown growth" in his practice during his probation.

13. At the hearing, petitioner testified in a candid and humble fashion. He stated that he has learned "a lot" during his probation. He has become "more judicious" in his record keeping. He admitted that he made mistakes in his care of P.H. and R.P. He is making a diligent effort to follow the Board's policy and procedures, as well as the constructive criticism he has received from his practice monitors. He believes that he has made corrections in his practice such that probation monitoring is no longer necessary. He is doing more documentation, spending more time with patients, seeing patients more frequently, and consulting more with his colleagues. He plans to remain in full-time employment with Butte County. He asserted that the county has checks and balances in place to ensure that his practice is adequately monitored. He believes that, as a result of his compliance with the terms and conditions of probation, particularly by participating in the record-keeping course and the PACE program, he has become a better psychiatrist.

14. Petitioner has complied with the terms and conditions of probation. The Deputy Attorney General stated that the Attorney General's Office had no objection to petitioner's petition. When all the evidence is considered, it would not be contrary to public health, safety and welfare to grant petitioner's petition and terminate his probation early.

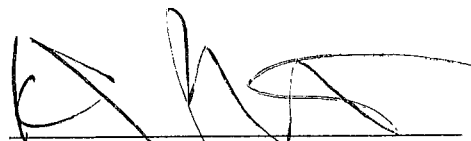
#### LEGAL CONCLUSIONS

As set forth in Findings 13 and 14, petitioner submitted sufficient evidence of rehabilitation to establish that it would not be contrary to public health, safety and welfare to grant his petition and terminate his probation early.

#### ORDER

The petition for early termination of probation filed by Thomas Jerome Lancaster, M.D., is GRANTED.

DATED: December 22, 2010

  
KAREN J. BRANDT  
Administrative Law Judge  
Office of Administrative Hearings