

BEFORE THE STATE BOARD OF MEDICAL EXAMINERS
STATE OF COLORADO

STIPULATION AND FINAL AGENCY ORDER

IN THE MATTER OF THE DISCIPLINARY PROCEEDING REGARDING THE LICENSE
TO PRACTICE MEDICINE IN THE STATE OF COLORADO OF MARCY COOPER, M.D.,
LICENSE NUMBER 37992,

Respondent.

IT IS HEREBY STIPULATED and agreed by and between Inquiry Panel B ("Panel") of
the Colorado State Board of Medical Examiners ("Board") and Marcy Cooper, M.D.
("Respondent") as follows:

JURISDICTION AND CASE HISTORY

1. Respondent was licensed to practice medicine in the state of Colorado on July 22, 1999, and was issued license number 37992, which Respondent has held continuously since that date.
2. The Panel and the Board have jurisdiction over Respondent and over the subject matter of this proceeding.
3. On November 21, 2005, the Panel reviewed case number 2006-000203B. The Panel thereupon referred the matter to the Attorney General pursuant to § 12-36-118(4)(c)(IV), C.R.S.
4. It is the intent of the parties and the purpose of this Stipulation and Final Agency Order ("Order") to provide for a settlement of all matters set forth in case number 2006-000203B without the necessity of holding a formal disciplinary hearing. This Order constitutes the entire agreement between the parties, and there are no other agreements or promises, written or oral, which modify, interpret, construe or affect this Order.
5. Respondent understands that:
 - a. Respondent has the right to be represented by an attorney of the Respondent's choice, and Respondent is so represented in this matter;
 - b. Respondent has the right to a formal disciplinary hearing pursuant to § 12-36-118(5), C.R.S.
 - c. By entering into this Order, Respondent is knowingly and voluntarily giving up the right to a hearing, admits the facts contained in this Order, and relieves the Panel of its burden of proving such facts; and

d. Respondent is knowingly and voluntarily giving up the right to present a defense by oral and documentary evidence, and to cross-examine witnesses who would testify on behalf of the Panel.

6. Respondent suffers from anxiety and mood disorders that were aggravated in March 2005 by a number of serious stressors in her life. Her symptoms have improved with treatment and her psychosocial stressors have diminished. She has been evaluated by the Colorado Physician Health Program ("CPHP"), which has concluded that from a medical and psychiatric perspective, Respondent is able to practice medicine with reasonable skill and safety to patients in the context of ongoing treatment and monitoring.

7. The Panel does not have evidence that Respondent's condition has jeopardized her patients.

8. Respondent specifically agrees that the Panel is authorized by § 12-36-117(1)(o), C.R.S. and § 12-36-118(5)(g)(III), C.R.S. to order the conditions set forth in this Order.

TREATMENT MONITORING

9. Except as provided below, for a period of five years following the effective date of this Order, Respondent shall comply with any and all evaluation and/or treatment ordered or recommended by the Colorado Physician Health Program ("CPHP"). CPHP shall function as the "treatment monitor" as that term is used in this Order. Such evaluation and/or treatment may include but shall not be limited to medical and/or psychological testing and/or evaluations, and/or medical and/or psychological treatment. As part of the evaluation process, CPHP may have to contact collateral sources of information. Upon CPHP's request, Respondent shall cooperate with requests that she execute releases to allow CPHP to receive information from collateral sources.

10. Throughout this monitoring period, all instructions and/or recommendations to Respondent by CPHP shall constitute terms of this Order. Failure to comply with such instructions and/or recommendations shall constitute a violation of this Order.

11. CPHP shall submit quarterly written reports to the Panel. The reports shall briefly describe Respondent's treatment with CPHP. The reports shall also state whether Respondent is in compliance with this Order. If at any time CPHP has reasonable cause to believe that Respondent has violated the terms of this Order, is unable to practice with skill and with safety to patients or has committed unprofessional conduct as defined in § 12-36-117(1), CPHP shall immediately inform the Panel.

12. CPHP shall review the quarterly reports of Respondent's practice monitor. CPHP shall provide such information to Respondent's practice monitor as deemed appropriate or warranted by CPHP. CPHP shall order any further evaluation or treatment as may be warranted by the contents of the practice monitor's quarterly reports.

13. Within 30 days of the effective date of this Order, Respondent shall complete an unrestricted release permitting CPHP to disclose to the Panel all privileged information concerning Respondent in its possession, including information generated by other sources. Any revocation of such release by Respondent shall constitute a violation of this Order. In the event

Respondent does revoke such release, CPHP may, due to confidentiality concerns, feel compelled to refuse to acknowledge Respondent's participation in CPHP. CPHP's refusal to acknowledge Respondent's participation with that organization shall constitute a violation of this Order.

14. Within 30 days of the effective date of this Order, Respondent shall complete a release permitting CPHP to disclose to the Panel privileged information concerning Respondent in its possession, including information incorporating information generated by other sources, to Respondent's practice monitor. Any revocation of such release by Respondent shall constitute a violation of this Order.

15. It is the responsibility of the Respondent to provide information to CPHP in a timely and complete manner and to assure that CPHP's reports are timely and complete.

PRACTICE MONITORING

16. The Panel does not have evidence that Respondent's condition has jeopardized her patients. Nevertheless, Respondent has agreed to the practice monitoring provisions set forth in this Order to provide assurance to the Panel that Respondent's anxiety and mood disorders and life stressors are not impacting her practice of medicine.

17. Except as provided below, for a one year period of time following the effective date of this Order, a "practice monitor" shall monitor Respondent's medical practice as set forth below.

18. Within 30 days of the effective date of this Order, Respondent shall nominate, in writing, a proposed practice monitor for the Panel's approval. The nominee shall be a physician licensed by the Board and currently practicing medicine in Colorado. The nominee shall have no financial interest in Respondent's practice of medicine. The nominee must be knowledgeable in and have clinical experience in Respondent's area of practice (child psychiatry) and must be a board-certified psychiatrist. If the Respondent has privileges at hospitals, it is preferred, but not required, that the nominee have privileges at as many of those same hospitals as possible. The Board shall not have disciplined the nominee.

19. Respondent's nomination for practice monitor shall set forth how the nominee meets the above criteria. With the written nomination, Respondent shall submit a letter signed by the nominee as well as a current *curriculum vitae* of the nominee. The letter from the nominee shall contain a statement from the nominee indicating that the nominee has read this Order and understands and agrees to perform the obligations set forth herein. The nominee must also state that the nominee can be fair and impartial in the review of the Respondent's practice.

20. If a practice monitor nominated by the Respondent is not approved by the Panel, the Respondent shall nominate another practice monitor within thirty days of the mailing of a letter notifying Respondent of the Panel's decision.

21. Respondent shall direct CPHP to provide the practice monitor with a copy of CPHP's evaluation and CPHP's quarterly reports to the Panel.

22. Within 30 days of the approval of Respondent's nominee for practice monitor, Respondent shall complete a release permitting Respondent's practice monitor to communicate with CPHP concerning any information obtained while monitoring Respondent's practice. Any revocation of such release by Respondent shall constitute a violation of this Order.

23. Upon approval by the Panel, the practice monitor shall perform the following for twelve consecutive months:

a. Each month, Respondent shall provide the practice monitor with a list of all patient's treated that month, and each patient's diagnoses ("Respondent's Case List").

b. Each month, the practice monitor shall review Respondent's Case List and shall choose five patients' cases to review that month ("the Five Monthly Cases"). The practice monitor shall select the Five Monthly Cases by selecting those cases that are, in the practice monitor's opinion, most likely to assist the practice monitor to assess whether Respondent's practice of psychiatry meets generally acceptable standards of practice and whether Respondent's practice of psychiatry is affected by Respondent's own psychiatric issues, personality style and/or response to stress.

c. The practice monitor shall select the Five Monthly Cases without input from the Respondent, and Respondent shall not attempt to influence the practice monitor's selection of the Five Monthly Cases.

d. Each month, the practice monitor shall review the patient charts of the Five Monthly Cases.

e. Each month, the practice monitor shall meet in person with Respondent to discuss the Five Monthly Cases. Respondent and the practice monitor shall discuss Respondent's evaluation of, current treatment of and treatment plan for each patient included in the Five Monthly Cases.

f. The practice monitor shall submit quarterly written reports to the Panel and shall provide copies of those quarterly reports to CPHP.

g. The practice monitor's quarterly written reports shall include the following:

i. a description of each of the cases reviewed;

ii. as to each case reviewed, a statement as to whether Respondent is practicing medicine in accordance with generally accepted standards of medical practice; and

iii. as to each case reviewed, a statement as to whether it appears that Respondent's psychiatric issues, personality style or response to stress are

impacting Respondent's ability to practice medicine with reasonable skill and safety to the patient.

24. If at any time the practice monitor believes Respondent is not in compliance with this Order, is unable to practice with skill and safety to patients, or has otherwise committed unprofessional conduct as defined in § 12-36-117(1), C.R.S., the practice monitor shall immediately inform the Panel.

25. It is the responsibility of the Respondent to assure that the practice monitor's reports are timely and complete. Failure of the practice monitor to perform the duties set forth above may result in a notice from Board staff requiring the nomination of a new practice monitor. Upon such notification, Respondent shall nominate a new practice monitor according to the procedure set forth above. Respondent shall nominate the new monitor within 30 days of such notice. Failure to nominate a new monitor within 30 days of such notification shall constitute a violation of this Order.

DISCRETIONARY EARLY TERMINATION FROM PRACTICE MONITORING

26. Six months after the commencement of practice monitoring, Respondent may petition the Panel for early termination of practice monitoring. The parties agree that the Panel's decision regarding such a petition shall be made at the sole discretion of the Panel. Respondent hereby waives the right to appeal the Panel's decision on this issue.

DISCRETIONARY EARLY TERMINATION FROM TREATMENT MONITORING

27. Two years after the commencement of treatment monitoring, Respondent may petition the Panel for early termination of treatment monitoring. The parties agree that the Panel's decision regarding such a petition shall be made at the sole discretion of the Panel. Respondent hereby waives the right to appeal the Panel's decision on this issue.

OUT OF STATE PRACTICE

28. Respondent may wish to leave Colorado and practice in another state. At any time, whether to practice out of state, or for any other reason, Respondent may request that the Board place Respondent's license on inactive status as set forth in § 12-36-137, C.R.S. Upon the approval of such request, Respondent may cease to comply with the conditions of this Order. Unless Respondent's license is inactive, Respondent must comply with all provisions of this Order, irrespective of Respondent's location. The period of time during which Respondent's practice is subject to practice and/or treatment monitoring will be tolled for any period of time Respondent's license is inactive.

29. Respondent may resume the active practice of medicine at any time as set forth in § 12-36-137(5), C.R.S. In addition to any other legal requirements, Respondent shall be permitted to resume the active practice of medicine only after CPHP provides an updated evaluation of Respondent and Respondent resumes treatment monitoring. Further, unless Respondent has already satisfactorily completed the practice monitor requirement set forth above, Respondent shall be permitted to resume the active practice of medicine only after approval of a practice monitor nominated as provided above.

OTHER TERMS

30. The terms of this Order were mutually negotiated and determined.

31. Both parties acknowledge that they understand the legal consequences of this Order; both parties enter into this Order voluntarily; and both parties agree that no term or condition of this Order is unconscionable.

32. All costs and expenses incurred by Respondent to comply with this Order shall be the sole responsibility of Respondent, and shall in no way be the obligation of the Board or Panel.

33. So that the Board may notify hospitals of this agreement pursuant to § 12-36-118(13), C.R.S., Respondent presently holds privileges at the following hospitals:

none

34. This Order and all its terms shall have the same force and effect as an order entered after a formal hearing pursuant to § 12-36-118(5)(g)(III), C.R.S. except that it may not be appealed. Failure to comply with the terms of this Order may be sanctioned by the Inquiry Panel as set forth in § 12-36-118(5)(g)(IV), C.R.S. This Order and all its terms also constitute a valid board order for purposes of § 12-36-117(1)(u), C.R.S. In addition to any other sanction that may be imposed, failure to comply with the terms of this Order shall toll the period of time during which Respondent is subject to monitoring.

35. This Order shall be admissible as evidence at any future hearing before the Board.

36. During the pendency of any action arising out of this Order, the obligations of the parties shall be deemed to be in full force and effect and shall not be tolled.

37. This Order shall be effective upon approval by the Panel and signature by a Panel member. Respondent acknowledges that the Panel may choose not to accept the terms of this Order and that if the Order is not approved by the Panel and signed by a Panel member, it is void.

38. Upon becoming effective, this Order shall be open to public inspection and publicized pursuant to the Board's standard policies and procedures. Additionally, this Order shall be reported the Federation of State Medical Boards, the National Practitioner Data Bank/Healthcare Integrity and Protection Data Bank and as otherwise required by law.

Marcy Cooper
Marcy Cooper, M.D.

The foregoing was acknowledged before me this 23 day of January,
2006 by Marcy Cooper, M.D.

Kathleen A. Champion
NOTARY PUBLIC

State of Colorado, Kathleen A. Champion, Notary Public
Signed before me on State of Colorado
My Commission Expires 1/31/2007
Notary Public _____

THE FOREGOING Stipulation and Final Agency Order is approved and effective this
23 day of January, 2006.

FOR THE COLORADO STATE BOARD OF
MEDICAL EXAMINERS
INQUIRY PANEL B

Paul E. Culp, D.O.
Effective Feb. 10, 2006.

APPROVED AS TO FORM:

FOR THE RESPONDENT

SILVER & DEBOSKEY



GARY B. BLUM, 3892
Silver & DeBoskey

Attorneys for the Respondent

**1801 York Street
Denver, Colorado 80206
Telephone: (303) 399-3000
FAX: (303) 399-2650**

FOR THE BOARD OF MEDICAL EXAMINERS

JOHN SUTHERS
Attorney General



CLAUDIA BRETT GOLDIN, 23116*
First Assistant Attorney General
Business and Licensing Section

**Attorneys for the Colorado State
Board of Medical Examiners
Inquiry Panel B**

**1525 Sherman Street, 5th Floor
Denver, Colorado 80203
Telephone: 303-866-5463
FAX: 303-866-5395
*Counsel of Record**

BEFORE THE STATE BOARD OF MEDICAL EXAMINERS
STATE OF COLORADO

AMENDED STIPULATION AND FINAL AGENCY ORDER

IN THE MATTER OF THE DISCIPLINARY PROCEEDING REGARDING THE LICENSE
TO PRACTICE MEDICINE IN THE STATE OF COLORADO OF MARCY COOPER, M.D.,
LICENSE NUMBER 37992,

Respondent.

IT IS HEREBY STIPULATED and agreed by and between Inquiry Panel B ("Panel") of
the Colorado State Board of Medical Examiners ("Board") and Marcy Cooper, M.D.
("Respondent") as follows:

JURISDICTION AND CASE HISTORY

1. Respondent was licensed to practice medicine in the state of Colorado on July 22, 1999 and was issued license number 37992, which Respondent has held continuously since that date.
2. The Panel and the Board have jurisdiction over Respondent and over the subject matter of this proceeding.
3. Effective January 23, 2006, Respondent and the Panel entered a Stipulation and Final Agency Order ("Order") pursuant to which Respondent's license was placed on probation for a period of five years. The terms of the Order remain in effect, except as modified by the terms of this Amended Stipulation and Final Agency Order ("Amended Order").
4. The Panel, having reviewed case number 2006-004351-B, on February 7, 2007 referred the matter to the Attorney General pursuant to § 12-36-118(4)(c)(IV), C.R.S.
5. It is the intent of the parties and the purpose of this Amended Order to provide for settlement of all matters set forth in case number 2006-004351-B without the necessity of holding a formal disciplinary hearing. This Amended Order, along with such elements of the original Order as remain unmodified, constitutes the entire agreement between the parties, and there are no other agreements or promises, written or oral, which modify, interpret, construe or affect this Amended Order.
6. Respondent understands that:
 - a. Respondent has the right to be represented by an attorney of the Respondent's choice, and is so represented;

- b. Respondent has the right to a formal disciplinary hearing pursuant to § 12-36-118(5), C.R.S.;
- c. By entering into this Amended Order, Respondent knowingly and voluntarily gives up the right to a hearing, admits the facts contained in this Amended Order, and relieves the Panel of its burden of proving such facts;
- d. By entering into this Amended Order, Respondent knowingly and voluntarily gives up the right to present a defense by oral and documentary evidence and to cross-examine witnesses who would testify on behalf of the Panel; and
- e. By entering into this Amended Order, Respondent knowingly and voluntarily waives the right to seek judicial review of this Amended Order.

7. Respondent specifically admits and agrees that:

- a. Pursuant to the terms of the Order, Respondent's practice was reviewed by a practice monitor, who on or about May 4, 2006 reviewed charts for 15 of Respondent's patients and expressed concern about those charts.
- b. On review of the charts, the Board obtained information, some of which, if established and unrebutted at hearing, would indicate that Respondent's charts were missing essential entries and fell below the generally accepted standards of medical practice.
- c. Respondent denies any allegations that she falsified any patient records or charts.

8. Respondent admits that the conduct described above meets the following definitions of unprofessional conduct set forth in § 12-36-117(1), C.R.S. except that Respondent does not admit to any "falsifying" or "repeatedly making incorrect essential entries" in her patient records:

§ 12-36-117(1)(cc) – Falsifying or repeatedly making incorrect essential entries or repeatedly failing to make essential entries on patient records.

9. Based upon the above, the Panel is authorized by § 12-36-118(5)(g)(III), C.R.S., to modify the terms of the Order via the imposition of the terms of this Amended Order.

PROBATIONARY TERMS

10. Respondent's license to practice medicine shall remain on probation for the remainder of the five-year term imposed by the Order. The terms of this Amended Order as set forth below shall become terms of Respondent's probation, and shall run concurrently with any remaining terms of the Order.

11. This period of probation shall be tolled for any period of time during which Respondent is not in compliance with the Order or with this Amended Order, as determined by the Board.

12. No term of this Amended Order shall operate to relieve Respondent of the obligation to comply with and successfully complete the terms of the Order.

PRACTICE MONITORING: AFFILIATED MONITORING, INC.

13. Within thirty (30) days of the effective date of this Amended Order, Respondent shall enter into a contract with Affiliated Monitors, Inc. ("AMI") for the development and implementation of an Assessment, Monitoring Services Program and, as deemed necessary by AMI, a Compliance Program as further described below. AMI shall monitor Respondent's medical practice throughout the remainder of the probationary period.

14. Respondent shall sign any and all releases necessary to facilitate unrestricted communications between AMI and the Panel. Respondent shall also complete any and all unrestricted releases as are necessary to permit AMI to disclose to the Panel information generated by other sources. Respondent shall execute the first of these releases within thirty (30) days of the effective date of this Amended Order, and shall thereafter timely execute any further such releases as requested by AMI. Respondent shall not revoke such releases prior to restoration by the Board of her full, unrestricted license pursuant to the terms of this Amended Order. Any failure to execute such a release or any premature revocation of such a release shall constitute a violation of this Amended Order.

AMI Assessment

15. Respondent shall undergo a comprehensive practice assessment through AMI in order to evaluate Respondent's competency, record-keeping and any other issues related to the practice of medicine (the "AMI Assessment"). AMI may in its discretion communicate with the Respondent, the Respondent's attorney, the Panel, the Board's staff or the Panel's attorney to identify potential areas of concern or for any other purpose.

16. The AMI Assessment shall include but need not be limited to a review by a monitor selected by AMI ("the Monitor"). The Monitor shall review between fifteen (15) and twenty-five (25) randomly selected cases as determined appropriate by AMI. For each case, the Monitor shall review the patient charts and shall interview the Respondent on topics related to the AMI Assessment. Following the AMI Assessment, the Monitor shall perform the additional functions outlined below.

17. The Monitor selected by AMI shall have expertise in the outpatient practice of child and adolescent psychiatry. AMI may in its discretion select a different Monitor who meets the criteria set forth in this paragraph at any time during the probationary period.

18. Respondent shall complete the AMI Assessment within 90 days of the effective date of this Amended Order.

19. Following completion of the AMI Assessment, Respondent shall cause AMI to send to the Panel a copy of the AMI Assessment report.

20. Within 60 days of the date on which the AMI Assessment is completed, Respondent and the Monitor shall submit to the Panel for its review and approval a Plan of Correction identifying any remedial steps to be taken in response to any deficiencies or concerns identified in the AMI Assessment.

AMI Monitoring

21. Following the completion of the AMI Assessment and continuing for the remainder of the probationary period, the Monitor shall perform the following:

a. Each month, the Monitor shall visit all the offices at which Respondent practices medicine and review ten patient charts maintained by Respondent. The Monitor shall make reasonable efforts to ensure that the chart selection is random. The Monitor is authorized to review such other medical records maintained by Respondent as the Monitor deems appropriate.

b. Each month, the Monitor shall interview Respondent as appropriate.

22. Each month, following review of the patient charts and interview of Respondent, the Monitor shall review whether Respondent is practicing medicine in accordance with generally accepted standards of medical practice, whether Respondent is appropriately documenting essential entries in patient charts, and whether Respondent is timely and successfully implementing the Plan of Correction, if applicable.

23. All instructions issued by AMI shall constitute terms of this Amended Order. Respondent shall comply with all AMI instructions during the remainder of the probationary term. Respondent's timely compliance with the AMI Assessment, Plan of Correction, Monitor's requests, and with any of AMI's orders, recommendations, instructions and contract terms shall constitute terms of this Amended Order. Respondent shall cooperate fully with AMI and shall timely make available any documents and information requested by AMI or the Monitor.

24. If at any time AMI believes Respondent is not in compliance with this Amended Order, is unable to practice with skill and safety to patients, or has otherwise committed unprofessional conduct as defined in § 12-36-117(1), C.R.S., AMI shall immediately inform the Panel.

25. AMI shall provide quarterly reports to the Board setting forth the findings of the Monitor and, if applicable, describing whether Respondent is timely and successfully implementing the Plan of Correction.

DISCRETIONARY EARLY TERMINATION FROM PRACTICE MONITORING

26. If, following the AMI Assessment, no deficiencies are identified in Respondent's practice, then Respondent may petition the Panel for early termination of practice monitoring. The parties agree that the Panel's decision regarding such a petition shall be made at the sole discretion of the Panel. Respondent hereby waives the right to appeal the Panel's decision on this issue.

27. If the AMI Assessment does identify deficiencies in Respondent's practice and Respondent successfully completes any Plan of Correction, then Respondent may petition the Panel for early termination of practice monitoring. The parties agree that the Panel's decision regarding such a petition shall be made at the sole discretion of the Panel. Respondent hereby waives the right to appeal the Panel's decision on this issue.

28. Any remaining terms of probation as set forth in the original Order shall remain in effect for the duration of the probationary period.

29. The provisions in this Amended Order related to early termination of practice monitoring shall supersede any provisions in the original Order related to early termination of any aspect of probation.

TERMINATION OF PROBATION

30. Upon the expiration of the probationary period, as extended by the addition of any time during which probation was tolled, Respondent may request restoration of her license to unrestricted status. If Respondent has complied with the terms of probation, including but not limited to successful completion of the Plan of Correction, such release shall be granted by the Panel in the form of written notice.

OTHER TERMS

31. The terms of this Amended Order were mutually negotiated and determined.

32. Both parties acknowledge that they understand the legal consequences of this Amended Order, both parties enter into this Amended Order voluntarily, and both parties agree that no term or condition of this Amended Order is unconscionable.

33. All costs and expenses incurred by Respondent to comply with this Amended Order shall be the sole responsibility of Respondent, and shall in no way be the obligation of the Board or Panel.

34. Respondent shall obey all state and federal laws while the terms of this Amended Order are in effect.

35. So that the Board may notify hospitals of this agreement pursuant to § 12-36-118(13), C.R.S., Respondent states that she presently holds privileges at the following hospitals:

None

36. This Amended Order and all its terms shall have the same force and effect as an order entered after a formal hearing pursuant to § 12-36-118(5)(g)(III), C.R.S., except that it may not be appealed. Failure to comply with the terms of this Amended Order may be sanctioned by the Inquiry Panel as set forth in § 12-36-118(5)(g)(IV), C.R.S. This Amended Order and all its terms also constitute a valid board order for purposes of § 12-36-117(1)(u), C.R.S. In addition to any other sanction that may be imposed, failure to comply with the terms of this Amended Order shall toll any probationary period imposed by this Amended Order.

37. This Amended Order shall be admissible as evidence at any future hearing before the Board.

38. During the pendency of any action arising out of this Amended Order, the obligations of the parties shall be deemed to be in full force and effect and shall not be tolled.

39. This Amended Order shall be effective upon approval by the Panel and signature by a Panel member. Respondent acknowledges that the Panel may choose not to accept the terms of this Amended Order and that if the Amended Order is not approved by the Panel and signed by a Panel member, it is void.

40. Upon becoming effective, this Amended Order shall be open to public inspection, publicized pursuant to the Board's standard policies and procedures. Additionally, this Amended Order shall be reported to the National Practitioner Data Bank/Healthcare Integrity and Protection Data Bank ("NPDB"), to the Federation of State Medical Boards, and otherwise as required by law. The report to NPDB shall be reported under code 1296 – extension of previous action, with no basis for action code required.

Marcy Cooper, M.D.
MARCY COOPER, M.D.

The foregoing was acknowledged before me this 9th day of April,
2008, by Marcy Cooper, M.D.

Christopher A. E.
NOTARY PUBLIC

1-31-2012
Commission expiration date

The foregoing Amended Stipulation and Final Agency Order is approved and effective this
17th day of April, 2008.

FOR THE COLORADO STATE BOARD OF
MEDICAL EXAMINERS

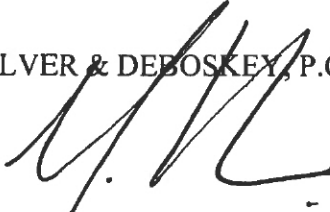
INQUIRY PANEL B

[Signature]

APPROVED AS TO FORM:

FOR MARCY COOPER, M.D., RESPONDENT

SILVER & DEBOSKEY, P.C.

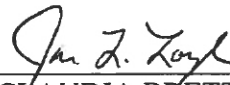


GARY BLUM, #3892

Attorney for Marcy Cooper, M.D.,
Respondent
1801 York Street
Denver, CO 80206
Telephone: (303) 399-3000
FAX: (303) 399-2650

FOR THE BOARD OF MEDICAL
EXAMINERS

JOHN W. SUTHERS
Attorney General



CLAUDIA BRETT GOLDIN, #23116
First Assistant Attorney General
JASON L. LOUGHMAN, #32991
Assistant Attorney General
Business and Licensing Section
Attorneys for the Colorado Board of
Medical Examiners, Inquiry Panel B
1525 Sherman Street, 7th Floor
Denver, Colorado 80203
Telephone: (303) 866-4500
FAX: (303) 866-5395