

BEFORE THE GEORGIA COMPOSITE MEDICAL BOARD

STATE OF GEORGIA **GEORGIA COMPOSITE
MEDICAL BOARD**

IN THE MATTER OF:

JOHN MARK ROWLES, M.D.,
License No. 39927

Respondent.

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DOCKET NO. JUL 09 2009

DOCKET NUMBER

2010006

PUBLIC CONSENT ORDER

By agreement of the Georgia Composite Medical Board ("Board") and JOHN MARK ROWLES, M.D. ("Respondent"), the following disposition of the matter is entered pursuant to the provisions of O.C.G.A. § 50-13-13(a)(4).

FINDINGS OF FACT

1.

Respondent is licensed to practice medicine in the State of Georgia and was licensed as such at all times relevant to the matters stated herein.

2.

Medical records show that on or about 1/10/06, patient V.A., a 15 year old male with a diagnosis of severe mental retardation and autism, was admitted to GRH's Adolescent Unit on a MR111 from the Gwinnett Hospital System Emergency Department ("GHSED") after being medically cleared. Medical records show patient V.A. was treated at the GHSED for self-injurious behavior, impetigo, and had basic lab work done. Medical records show that upon arrival at GRH, patient V.A. was evaluated by Chun Ng, M.D. and a nursing note indicates patient V.A. was trying to bite himself and bang his head, and was verbally uncommunicative due to mutism. Medical records show Dr. Ng's admission orders included routine doses of Risperdal (an antipsychotic medication), Haloperidol (an antipsychotic medication) as needed

(prn), Diphenhydramine (an anticholinergic medication) prn, and Zyprexa (an antipsychotic medication), one time dose.

3.

Medical records show that patient V.A. remained hospitalized for thirteen (13) days under the care of Dr. Ng, and that over those thirteen (13) days, the patient's medical condition deteriorated significantly. Medical records reflect the patient was noticed to have minimal intake of food or fluids and this was met with increasing doses of antipsychotic medication and the addition of an antidepressant/antianxiety medication (mirtazapine) for the treatment of suspected anxiety. Medical records show that late in the course of the hospitalization when nurses suspected the patient might have an ear infection, Dr. Ng consulted a physician's assistant to examine the patient; the examination was difficult due to the patient's agitation but ultimately was unable to see any evidence of infection.

4.

Medical records show that on 1/22/06 patient V.A. was transferred to Hughes Spalding Hospital for medical intervention as he had become lethargic and unable to ambulate on his own. Medical records show that prior to transfer, the on-call physician at GRH was called by nursing staff to evaluate the patient and found the patient to be lethargic, tachycardic, with an elevated temperature, and dry oral membranes; there was no pediatric cuff available to assess blood pressure, and the physician was unable to get blood from the patient's finger to perform an accucheck.

5.

Medical records show that upon transfer the EMS providers noted the patient to be found on the floor in a fetal position, having severe dehydration and "extreme possible

neglect/abuse". Medical records further show EMS noted the patient had a swollen wrist; many bruises and sores; a pale possibly broken tooth and dried blood on his teeth; poor hygiene; cool, dry skin with "very poor" turgor; dilated and sunken eyes; dry, pale, white membranes; and the patient's body was "abnormally rigid". Medical records show that patient V.A. was admitted to Hughes Spalding Hospital on 1/22/06 and discharged on 2/27/06. Medical records show that during his stay at Hughes Spalding Hospital, patient V.A. was diagnosed with septic shock; dehydration; malnutrition; 6 skin abscesses requiring surgical intervention; osteomyelitis; renal failure; and hepatic dysfunction.

6.

In or about 2006, Respondent was the Clinical (Medical) Director at Georgia Regional Hospital, Atlanta, GA. ("GRH"). In a letter to the Board dated August 21, 2007, Respondent stated, "[M]y involvement in this case was solely in my role as Clinical (Medical) Director of Georgia Regional Hospital/Atlanta. I did not have any specific knowledge of this case until after the patient had already been discharged. I was responsible for establishing hospital policies and procedures in accordance with Georgia laws and Department of Human Resources policies, **for monitoring the quality of care** and taking action to improve care when necessary and for setting staffing patterns for all clinical disciplines except Nursing." (Emphasis added). Respondent also noted in his August 21, 2007 letter that "[t]his was a very difficult, challenging and unusual case, complicated by the patient's inability to verbalize complaints or to cooperate with evaluation and treatment. Following the patient's transfer to Hughes Spaulding I appointed a Serious Incident Review Committee.... They identified a number of opportunities for improvement, which have been implemented."

7.

On or about May 9, 2008, a Public Consent Order was docketed by the Board whereby Chun Lee Ng, M.D., the physician responsible for the direct care of patient V.A. at GRH, agreed to the imposition of sanctions upon his license. Dr. Ng also admitted to factual findings that his diagnosis, treatment, and recordkeeping concerning patient V.A. were all below the minimum standards of accepting and prevailing medical practice.

8.

The Board approved peer reviewer who reviewed the treatment of patient V.A. and concluded that the treatment of patient V.A. departed from and failed to conform to the minimum standards of acceptable and prevailing medical practice as outlined in the Public Consent Order, *In the Matter of Chun Lee Ng, M.D.*, Docket No. 20080056, also reviewed Respondent's role as Clinical (Medical) Director, including a state job description for Clinical Director and policies and procedures submitted to the Board by Respondent. The peer reviewer concluded that while Respondent's duties and responsibilities as Clinical Director included, but were not limited to, the following, they were not followed regarding patient V.A: reviews patients' clinical records to ensure that care and treatment provided were consistent with established standards; supervises staff activities to ensure that established standards of care and treatment are maintained; ensures coordination of staff activities with other services; oversees medical treatment programs and maintains standards; and make regular rounds to observe professional services and to ensure compliance with hospital policies and procedures.

9.

Respondent acknowledges and accepts responsibility that inadequate procedures were in place to properly supervise Dr. Ng's clinical care of patient V.A. and that

inadequate policies and procedures were in place to address problems incident to a recurring shortage of nursing staff and communications issues between professional staff to ensure optimal patient care.

10.

Respondent admits the above findings of fact and waives any further findings of fact with respect to the above-styled matter.

CONCLUSIONS OF LAW

Respondent's conduct constitutes sufficient grounds for the Board to exercise its disciplinary authority and to impose sanctions on Respondent's license to practice medicine in the State of Georgia under O.C.G.A. Chs. 1 and 34, T. 43, as amended. Respondent hereby waives any further conclusions of law with respect to the above-styled matter.

ORDER

The Georgia Composite Medical Board, having considered the particular facts and circumstances of this case, hereby orders, and Respondent hereby agrees, to the following terms:

1.

Respondent shall obtain twenty (20) hours of Board approved continuing medical education ("CME") in the area of administrative medicine or medical ethics in addition to the CME required of all Georgia physicians. Prior to obtaining the CME, Respondent shall submit the title of the course(s) he plans to attend and information concerning the course(s) to the Board for approval. Respondent shall submit proof of completion of said additional twenty (20) hours to the Board within one year from the docketing of this order.

2.

Use of Physician Assistant or Nurse Practitioner. There shall be no restriction on Respondent's ability to employ or supervise P.A.s and/or N.P.s in his practice of medicine. Respondent shall not utilize P.A.s or N.P.s to perform tasks which are otherwise prohibited by the terms of this Consent Order, or otherwise utilize the services of the P.A or N.P. in such a way as to circumvent any restriction, term or condition outlined herein.

3.

Respondent shall submit to the Board a fine of two thousand five hundred dollars (\$2,500.00) to be paid in full by cashier's check or money order made payable to the Georgia Composite Medical Board within ninety (90) days of the effective date of this Consent Order. Failure to pay the entire amount by the 90th day shall be considered a violation of this Order and shall result in further sanctioning of Respondent's license, including revocation, upon substantiation thereof.

4.

In addition to the fine required in paragraph three (3) of this Consent Order, Respondent shall pay administrative fees in the amount of five hundred ninety dollars (\$590.00) as reimbursement to the Board of expenses incurred in the investigation of this matter, which expenses do not include time spent by the investigative division of the Board. Said fees shall be payable by certified check or money order to the Georgia Composite Medical Board within thirty (30) days of the effective date of this Consent Order. Failure to pay the entire amount by the 30th day shall be considered a violation of this Consent Order and shall result in further sanctioning of Respondent's license, including revocation, upon substantiation.

5.

This Consent Order and dissemination thereof shall be considered a public reprimand of Respondent by the Board.

6.

Respondent understands that pursuant to O.C.G.A. Title 43, Chapter 34A, the contents of this order shall be placed on Respondent's Physician Profile. Furthermore, by executing this Consent Order, Respondent hereby agrees to permit the Board to update the Physician's Profile reflecting this Consent Order.

7.

Respondent shall abide by all State and Federal laws regulating his practice as a physician or relating to drugs, the Rules and Regulations of the Georgia Composite Medical Board and the terms of the Consent Order, outpatient treatment, and probation. If Respondent shall fail to abide by such laws, rules or terms, or if it should appear from reports submitted to the Board that Respondent is otherwise unable to practice with reasonable skill and safety to patients, or should Respondent violate the criminal laws of the state, including any term of probation, if any, Respondent's license shall be subject to further discipline, including revocation, upon substantiation thereof after notice and hearing, and if revoked, the Board in its discretion may determine that the license should be permanently revoked and not subject to reinstatement. Respondent further agrees that any violation of the Consent Order during any probationary period shall be deemed to be sufficient to authorize the Board to order summary suspension of Respondent's license, pending further proceedings, pursuant to the provisions of the Georgia Administrative Procedure Act, O.C.G.A. § 50-13-18(c)(1), or any other statute

authorizing emergency action, but Respondent understands that Respondent shall be entitled to an expedited hearing to substantiate such violation(s), if the Board exercises such right.

8.

Respondent acknowledges that he has read this Consent Order and understands its contents. Respondent understands that he has the right to a hearing in this matter and freely, knowingly and voluntarily waives that right by entering into this Consent Order. Respondent understands and agrees that a representative of the Department of Law may be present during the Board's consideration of this Consent Order and that the Board shall have the authority to review the investigative file and all relevant evidence in considering this Consent Order. Respondent further understands that this Consent Order will not become effective until approved and docketed by the Georgia Composite Medical Board. Respondent understands that this Consent Order, once approved and docketed, shall constitute a public record, evidencing disciplinary action by the Board. However, if this Consent Order is not approved, it shall not constitute an admission against interest in this proceeding, or prejudice the right of the Board to adjudicate this matter. Respondent hereby consents to the terms and sanctions contained herein.

Approved, this _____ day of _____, 2009.

GEORGIA COMPOSITE MEDICAL BOARD

(BOARD SEAL)

BY: _____

JOHN T. PERRY, M.D.

Chair

ATTEST: _____
LASHARN HUGHES
Executive Director

[signatures continued on next page]

[As to Dr. Rowles's signature]
Sworn to and subscribed before me
this 15 day of July, 2009.

Chandra Jordan
NOTARY PUBLIC
My commission expires:



John Mark Rowles
JOHN MARK ROWLES, M.D.
Respondent

Frances E. Cullen
FRANCES E. CULLEN, ESQ.
Attorney for Respondent