

BEFORE THE IOWA BOARD OF MEDICINE

IN THE MATTER OF THE STATEMENT OF CHARGES AGAINST

PAUL D. ANDERSON, D.O., RESPONDENT

File Nos. 02-04-683 & 02-08-300

SETTLEMENT AGREEMENT

COMES NOW the Iowa Board of Medicine (Board), and Paul D. Anderson, D.O., (Respondent), and on February 4, 2010, and pursuant to Iowa Code sections 17A.10(2) and 272C.3(4)(2007), enter into this Settlement Agreement to resolve this matter.

1. Respondent was issued Iowa license No. 01929 on July 1, 1982.
2. Respondent's Iowa license is active and will next expire on November 1, 2010.
3. The Board has jurisdiction pursuant to Iowa Code chapters 147, 148 and 272C.

STATEMENT OF THE MATTERS ASSERTED

4. Respondent formerly practiced psychiatry in Spencer, Iowa.
5. Respondent engaged in alcohol and marijuana abuse.
6. Respondent engaged in sexual misconduct with one patient over fifteen years ago.
7. Respondent voluntarily discontinued the practice of medicine over two years ago and agreed not to return to the practice of medicine until this matter is resolved.

8. On May 21, 2009, the Board filed formal disciplinary charges against Respondent for engaging in substance abuse, unprofessional conduct and sexual misconduct.

SETTLEMENT AGREEMENT

9. **CITATION AND WARNING:** Respondent is hereby **CITED** for engaging in substance abuse, unprofessional conduct and sexual misconduct in the practice of medicine. Respondent is hereby **WARNED** that engaging in such conduct in the future may result in further disciplinary action, including revocation of his Iowa medical license.

10. **PROFESSIONAL BOUNDARIES:** Respondent shall fully comply with appropriate professional boundaries. Respondent shall not engage in personal, sexual or romantic relationships with current or former patients.

11. **INDEFINITE SUSPENSION:** Respondent's Iowa medical license shall be **suspended indefinitely**. Respondent shall not engage in any aspect of the practice of medicine during the period of suspension. Respondent shall not seek reinstatement of his Iowa medical license until he fully complies with the following terms and conditions:

A. **Substance Abuse Evaluation:** Respondent shall complete a comprehensive substance abuse evaluation at a Board-approved program and receive a recommendation that he is safe to return to the practice of medicine. Respondent shall ensure that a copy of the evaluation report is forwarded to the Board directly from the assessment program. Respondent shall fully comply with all recommendations of the assessment program and is responsible for all costs associated with the evaluation.

- B. Sexual Misconduct Evaluation:** Respondent shall complete a comprehensive sexual misconduct evaluation at a Board-approved assessment program and receive a recommendation that he is safe to return to the practice of medicine. Respondent shall ensure that a copy of the evaluation report is forwarded to the Board directly from the assessment program. Respondent shall fully comply with all recommendations of the assessment program and is responsible for all costs associated with the evaluation.
- C. Clinical Competency Evaluation:** Respondent shall complete a comprehensive clinical competency evaluation at a Board-approved assessment program and receive a recommendation that he is safe to return to the practice of medicine. Respondent shall ensure that a copy of the evaluation report is forwarded to the Board directly from the assessment program. Respondent shall fully comply with all recommendations of the assessment program and is responsible for all costs associated with the evaluation.
- D. Professional Ethics Program:** Respondent shall successfully complete the Professional/Problem Based Ethics (PROBE) program sponsored by the Ethics Group, LLC, of Summit, New Jersey. Respondent shall cause a report to be sent the Board directly from PROBE at the conclusion of the program. Respondent is responsible for all costs associated with the ethics program.

E. **Civil Penalty:** Respondent shall pay a **\$5,000** civil penalty. The civil penalty shall be made payable to the Treasurer of Iowa, and mailed to the executive director of the Board. The civil penalty shall be deposited into the State General Fund.

12. **INDEFINITE PROBATION:** Should the Board choose to reinstate Respondent's Iowa medical license in the future, Respondent shall be placed on **indefinite probation** subject to the following terms and conditions:

A. **Monitoring Program:** Respondent shall establish a monitoring program with Shantel Billington, Compliance Monitor, Iowa Board of Medicine, 400 SW 8th Street, Suite C, Des Moines, IA 50309-4686, Ph.#515-281-3654. Respondent shall fully comply with all requirements of the monitoring program.

B. **Compliance with Assessment Program Recommendations:** Respondent shall fully comply with all recommendations made by the assessment program.

C. **Alcohol Prohibition:** Respondent shall not consume alcohol.

D. **Controlled or Prescription Drug Restriction:** Respondent shall not use any controlled or prescription drug unless the controlled or prescription drug has been prescribed for Respondent's use by another qualified treating health care provider. Respondent shall provide the Board written notice within 72 hours of the use of any controlled or prescription drug. Respondent shall inform any qualified treating health care provider of his history of substance abuse prior to receiving any prescription drug.

- E. **Drug Screening Program:** Respondent shall fully comply with the Board's drug screening program. Respondent shall provide random blood or urine specimens when required and provide random blood or urine specimens on demand by an agent of the Board. The specimens shall be used for drug and alcohol screening, all costs of which shall be paid by Respondent.
- F. **Substance Abuse Counseling:** Respondent shall submit to the Board for approval the name and CV of a substance abuse counselor.
- (1) The counselor shall submit written quarterly reports concerning Respondent's progress no later than 1/20, 4/20, 7/20 and 10/20 of each year of this Order.
 - (2) Respondent shall continue with counseling until discharged by the Board-approved counselor and until Respondent's discharge from counseling is approved by the Board.
 - (3) Respondent shall meet with his Board-approved counselor as frequently as recommended by the counselor and approved by the Board.
Respondent is responsible for all costs associated with counseling.
- G. **Substance Abuse Meetings:** Respondent shall attend at least twelve Alcoholics Anonymous (AA) or a similar substance abuse meetings monthly, and not less than two each week. Respondent shall obtain documentation of attendance and include copies of this documentation with his quarterly reports.
Respondent shall have at least weekly contact with his AA sponsor.

H. **Sexual Misconduct Counseling:** Respondent shall submit to the Board for approval the name and CV of a sex addiction specialist to provide counseling.

(1) The counselor shall submit written quarterly reports concerning Respondent's progress no later than 1/20, 4/20, 7/20 and 10/20 of each year of this Order.

(2) Respondent shall continue with counseling until discharged by the Board-approved counselor and until Respondent's discharge from counseling is approved by the Board.

(3) Respondent shall meet with his Board-approved counselor as frequently as recommended by the counselor and approved by the Board.

Respondent is responsible for all costs associated with the counseling.

I. **Sexual Misconduct Meetings:** Respondent shall attend at least one Sex Addicts Anonymous meeting each week (SAA). Respondent shall obtain documentation of attendance and include copies of this documentation with his quarterly reports.

J. **Chaperone Requirement:** Respondent shall have a Board-approved female healthcare professional chaperone continually present while treating all female patients. The chaperone shall clearly document her continued presence in each patient's chart. The Board will provide all chaperones with a copy of all Board Orders in this matter. All chaperones shall provide a written statement to the Board indicating that they have read the Board Orders and agree to inform the

Board immediately if there is any evidence of inappropriate sexual behavior or professional misconduct.

K. Principles of Medical Ethics, Staff Surveillance Forms and Patient Satisfaction Surveys:

- (1) Respondent shall post the Principles of Medical Ethics in his medical practice as directed by the Board.
- (2) Respondent shall utilize Staff Surveillance Forms in his medical practice as directed by the Board.
- (3) Respondent shall utilize Patient Satisfaction Surveys in his medical practice as directed by the Board.

L. Worksite Monitor: Respondent shall submit for Board approval the name of a physician who regularly observes and/or supervises Respondent in the practice of medicine to serve as worksite monitor. The Board shall provide a copy of all Board orders relating to this matter to the worksite monitor. The worksite monitor shall provide a written statement indicating that they have read and understand this Order and agrees to serve under the terms of this Order. The worksite monitor shall agree to inform the Board immediately if there is evidence of professional misconduct, sexual misconduct, substance abuse or a violation of the terms of this Order. The worksite monitor shall submit quarterly reports to the Board no later than 1/20, 4/20, 7/20 and 10/20 of each year of this Order.

- M. **Quarterly Reports:** Respondent shall file sworn quarterly reports attesting to his compliance with all the terms and conditions of this Order not later than 1/10, 4/10, 7/10 and 10/10 of each year of this Order.
- N. **Board Appearances:** Respondent shall make an appearance before the Board annually or upon request. Respondent shall be given written notice of the date, time and location for the appearances. Such appearances shall be subject to the waiver provisions of 653 IAC 24.2(5)(d).
- O. **Monitoring Fee:** Respondent shall make a payment of \$100 to the Board each quarter for the duration of this Order to cover the Board's monitoring expenses in this matter. The monitoring fee shall be received by the Board with each quarterly report required under this Order. The monitoring fee shall be sent to: Shantel Billington, Compliance Monitor, Iowa Board of Medicine, 400 SW 8th Street, Suite C, Des Moines, IA 50309-4686. The check shall be made payable to the Iowa Board of Medicine. The monitoring fee shall be considered repayment receipts as defined in Iowa Code section 8.2.
12. Respondent shall obey all federal, state and local laws, and all rules governing the practice of medicine in Iowa.
13. Respondent voluntarily submits this Order to the Board for consideration.
14. This Order constitutes the resolution of a contested case proceeding.
15. In the event Respondent violates or fails to comply with any of the terms or conditions of this Order, the Board may initiate action to suspend or revoke Respondent's

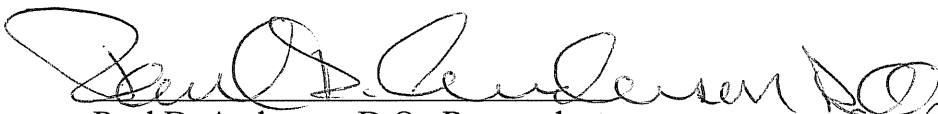
Iowa medical license or to impose other license discipline as authorized in Iowa Code Chapters 148 and 272 and 653 IAC 24.

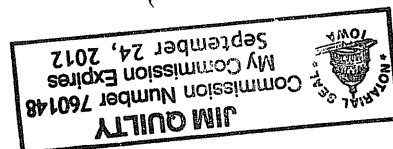
16. Periods of residence or practice outside the state of Iowa shall not apply to the duration of this Order unless Respondent obtains prior written approval from the Board. Periods in which Respondent does not practice medicine or fails to comply with the terms established in this Order shall not apply to the duration of this Order unless Respondent obtains prior written approval from the Board.

17. Respondent understands that by entering into this combined Statement of Charges and Settlement Agreement, Respondent cannot obtain a copy of the investigative file. Pursuant to Iowa Code section 272C.6(4), a copy of the investigative file may only be provided to a licensee after a Statement of Charges is filed but before the final resolution of those charges.

18. This Order is subject to approval by the Board. If the Board fails to approve this Order, it shall be of no force or effect to either party.

19. The Board's approval of this Order shall constitute a **Final Order** of the Board.

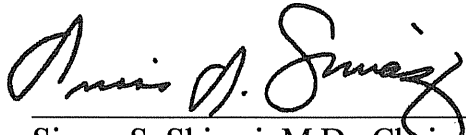

Paul D. Anderson, D.O., Respondent



Subscribed and sworn to before me on 2-3, 2010.

Notary Public, State of .

This Order is approved by the Board on February 4, 2010.

A handwritten signature in black ink, appearing to read "Siros S. Shirazi". The signature is written in a cursive style and is positioned above a horizontal line.

Siros S. Shirazi, M.D., Chairman
Iowa Board of Medicine
400 SW 8th Street, Suite C
Des Moines, Iowa 50309-4686

BEFORE THE IOWA BOARD OF MEDICINE

IN THE MATTER OF THE STATEMENT OF CHARGES AGAINST

PAUL D. ANDERSON, D.O., RESPONDENT

File Nos. 03-04-683 & 03-08-300

STATEMENT OF CHARGES

COMES NOW the Iowa Board of Medicine on May 21, 2009, and files this Statement of Charges pursuant to Iowa Code section 17A.12(2). Respondent was issued Iowa medical license no. 01929 on July 1, 1982. Respondent's Iowa medical license is active and will next expire on November 1, 2010.

A. TIME, PLACE AND NATURE OF HEARING

1. Hearing. A disciplinary contested case hearing shall be held on July 7, 2009, before the Board. The hearing shall begin at 8:30 a.m. and shall be located in the conference room at the Board office at 400 SW 8th Street, Suite C, Des Moines, Iowa.

2. Answer. Within twenty (20) days of the date you are served this Statement of Charges you are required by 653 IAC 24.2(5)(d) to file an Answer. In that Answer, you should state whether you will require a continuance of the date and time of the hearing.

3. Presiding Officer. The Board shall serve as presiding officer, but the Board may request an Administrative Law Judge make initial rulings on prehearing matters, and be present to assist and advise the Board at hearing.

4. Hearing Procedures. The procedural rules governing the conduct of the hearing are found at 653 IAC 25. At hearing, you will be allowed the opportunity to respond to the charges against you, to produce evidence on your behalf, cross-examine witnesses, and examine any documents introduced at hearing. You may appear personally or be represented by counsel at your own expense. If you need to request an alternative time or date for hearing, you must review the requirements in 653 IAC 25.16. The hearing may be open to the public or closed to the public at the discretion of the Respondent.

5. Prosecution. The office of the Attorney General is responsible for representing the public interest (the State) in this proceeding. Pleadings shall be filed with the Board and copies should be provided to counsel for the State at the following address: Theresa O'Connell Weeg, Assistant Attorney General, Iowa Attorney General's Office, 2nd Floor, Hoover State Office Building, Des Moines, Iowa 50319.

6. Communications. You may not contact board members by phone, letter, facsimile, e-mail, or in person about this Notice of Hearing. Board members may only receive information about the case when all parties have notice and an opportunity to participate, such as at the hearing or in pleadings you file with the Board office and serve upon all parties in the case. You should direct any questions to Kent M. Nebel, J.D., the Board's Legal Director at 515-281-7088 or to Assistant Attorney General Theresa O'Connell Weeg at 515-281-6858.

B. LEGAL AUTHORITY AND JURISDICTION

7. Jurisdiction. The Board has jurisdiction in this matter pursuant to Iowa Code chapters 17A, 147, 148, and 272C.

8. Legal Authority: If any of the allegations against you are founded, the Board has authority to take disciplinary action against you under Iowa Code chapters 17A, 147, 148, and 272C and 653 IAC 25.

9. Default. If you fail to appear at the hearing, the Board may enter a default decision or proceed with the hearing and render a decision in your absence, in accordance with Iowa Code section 17A.12(3) and 653 IAC 25.20.

C. SECTIONS OF STATUTES AND RULES INVOLVED

COUNT I

10. Respondent is charged pursuant to Iowa Code sections 147.55(4), 148.6(2)(h) and 272C.10(4) and 653 IAC 23.1(6) with substance abuse which may impair his ability to practice medicine with reasonable skill and safety.

COUNT II

11. Respondent is charged pursuant to Iowa Code section 147.55(3) and 653 IAC sections 23.1 (4) and (5) with engaging in unethical or unprofessional conduct and/or engaging in inappropriate sexual misconduct in the practice of medicine.

D. STATEMENT OF MATTERS ASSERTED

12. Respondent is an Iowa-licensed psychiatrist who formerly practiced in Spencer, Iowa. Respondent has not practiced medicine since June 25, 2007.

13. On July 30, 1981, Respondent entered into an Informal Agreement with the Board and he was granted a temporary Iowa medical license for a period of one year subject to substance abuse monitoring requirements.

14. The Board received information which raised serious concerns that Respondent has a long history of substance abuse. The Board alleges that Respondent suffers from substance abuse which may impair his ability to practice medicine with reasonable skill and safety, including but not limited to the following:

- A. Respondent has a forty-year history of daily marijuana use, including growing marijuana at his personal residence;
- B. Respondent has an extensive history of hallucinogen abuse which resulted in a prolonged episode of hallucinogen-induced intermittent psychosis, including hearing voices and paranoia; and
- C. Respondent's substance abuse has resulted in anger management problems, including yelling and the use of profanity in his medical practice.

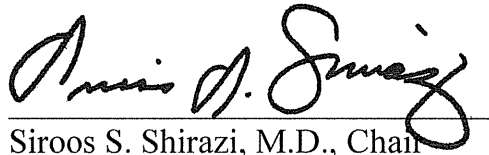
15. The Board recently received information which indicates that Respondent engaged in sexual misconduct with one of his psychiatric patients about fifteen years ago.

E. SETTLEMENT

16. Settlement. This matter may be resolved by settlement agreement. The rules governing the Board's settlement process are found at 653 IAC 25. If you are interested in pursuing settlement, please contact Kent M. Nebel, J.D., Legal Director at 515-281-7088.

F. PROBABLE CAUSE FINDING

17. On May 21, 2009, the Iowa Board of Medicine found probable cause to file this Statement of Charges.

A handwritten signature in black ink, reading "Siroos S. Shirazi". The signature is written in a cursive style and is positioned above a horizontal line.

Siroos S. Shirazi, M.D., Chair
Iowa Board of Medicine
400 SW 8th Street, Suite C
Des Moines, Iowa 50309-4686

