

COMMONWEALTH OF MASSACHUSETTS

SUFFOLK, ss

BOARD OF REGISTRATION
IN MEDICINE

ADJUDICATORY CASE NO.

02-58-DALA

In the Matter of)

Deborah A Sichel, M.D.)
_____)

STATEMENT OF ALLEGATIONS

The Board of Registration in Medicine (the Board) has reason to believe that Deborah A Sichel (the Respondent) has engaged in fraudulent conduct to obtain access to medical records of individuals who were not her patients; that she obtained access to one of those records; and that she improperly disseminated information contained in that medical record thereby breaching the patient's confidentiality. The Board has reason to believe that in reviewing her own medical record, the Respondent improperly removed portions of that record and did not return those portions until requested to do so by hospital staff. The Board also has reason to believe that the Respondent fraudulently procured renewal of her license to practice medicine by falsely answering question 23 of her 2001-2003 Physician Registration Renewal Application.

BACKGROUND

1. The Respondent was born on June 9, 1952. She is a psychiatrist and is certified by the American Board of Medical Specialties in psychiatry and neurology. She is a 1975 graduate of the University of Witwaterstrand Medical School in South Africa. She

has been licensed to practice medicine in Massachusetts under registration number 43923 since February 16, 1979. She is not licensed to practice medicine in any other state. The Respondent is currently engaged in a private psychiatric group practice in Wellesley, Massachusetts, subject to a Board ordered Workplace Monitoring Agreement. She has no hospital privileges.

2. On March 20, 2002, the Respondent signed a Voluntary Agreement Not To Practice Medicine, which was approved by the Board on March 21, 2002. The Board terminated that Agreement on October 2, 2002, and on that date the Board accepted Respondent's Workplace Monitoring Agreement.

FACTUAL ALLEGATIONS

COUNT I

3. On or about October 2, 2001, the Respondent went to the Health Information Management Department (the Department) at Newton Wellesley Hospital (NWH). The Respondent requested the medical records of two patients. Respondent indicated that she was a health care provider for these patients. At the time of the request, the Respondent had not been a member of the medical staff of NWH since May 2001. She was not a treating psychiatrist for either of these patients and she did not have releases for access to these records.

4. The Respondent was denied access to one of the requested medical records (Record A), since it was in a "locked file" and approval of the Department was required for its release. Upon a review of the record, it was determined by staff in the Department that the Respondent was not the physician named in the file and therefore the file was not released to the Respondent.

5. The other medical record that the Respondent requested (Record B) was released to her. The Respondent was not a health care provider for this patient. Record B belonged to a patient who had filed a complaint with the Board against the Respondent's husband. The Respondent communicated information in Record B to hospital administrators and to her husband.

6. The Respondent breached the confidentiality of the patient whose medical information was contained in Record B.

7. In a letter dated March 20, 2002, NWH filed a report pursuant to M.G.L. c. 112 §5F in regard to the above incident.

COUNT II

8. On or about October 2, 2001, the Respondent went to the Department at NWH and requested her own medical record. When she returned the record to the staff of the Department, it was loose and out of order, and some pages from the record were missing

9. The Respondent was asked by the staff of the Department to return the missing pages from the record. The Respondent subsequently returned those parts of the record.

10. In a letter dated March 20, 2002, NWH filed a report pursuant to M.G.L. c. 112 §5F in regard to the above incident.

COUNT III

11. On March 15, 2002, the Respondent called NWH and spoke with the doctor that was covering for the hospital's Chief Medical Officer. The Respondent stated that there was going to be an article about her husband in The Boston Globe the next day; and that she was so humiliated that she wanted to shoot her husband, her children and herself.

12. The recipient of the phone call contacted the Administrator on Call who then contacted the Newton Police Department.

13. Newton police officers went to the Respondent's home. When the police arrived the Respondent was upset, and told them to leave. She told the police officers that the only way to deal with what was going to be stated in the newspapers the next day was to kill her family. The Respondent agreed to go to NWH to be evaluated.

14. The Respondent was evaluated at NWH. The Respondent informed the evaluator that she was under tremendous stress and that she called NWH to get support. She said that she made a rash statement to convey stress and reach out for support, but that the statement was taken literally and the police were called. The evaluator found her to be stable without intent to harm herself or others, and she was discharged home.

15. In a letter dated March 20, 2002, NWH filed a report pursuant to M.G.L. c. 112 §5F in regard to the above incident.

COUNT IV

16. On her 2001-2003 Massachusetts Physician Registration Renewal Application dated June 4, 2001, the Respondent inaccurately answered "no" to question 23 which asked, whether in the past two years:

Have you been diagnosed with or do you have a medical condition which in any way limits or impairs your ability to practice medicine?

17. In January 2000, the Respondent took time off from her practice due to a depressive disorder.

LEGAL BASIS FOR PROPOSED RELIEF

Pursuant to 243 CMR 1.03(5)(a)(10), the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician has engaged in conduct that has the capacity to deceive or defraud.

Pursuant to G.L. c. 112, §5(c) and 243 CMR 1.03(5)(a)3 the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician has engaged in conduct that places into question her competence to practice medicine.

Pursuant to Raymond v. Board of Registration in Medicine, 387 Mass. 708 (1982), and Levy v. Board of Registration in Medicine, 378 Mass. 519 (1979), the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician has engaged in conduct which undermines public confidence in the integrity of the medical profession or which shows lack of good moral character.

Pursuant to 243 CMR 1.03(5)(a)1, the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician has fraudulently procured the renewal of his license to practice medicine.

Pursuant to G.L. c. 112 §5(h) and 243 CMR 1.03(5)(a)(11), the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician has violated a rule or regulation of the Board.

The Board has jurisdiction over this matter pursuant to G.L. c. 112 §§5, 61 and 62. This adjudicatory proceeding will be conducted in accordance with the provisions of G.L. c. 30A and 801 CMR 1.01 et seq.

NATURE OF RELIEF SOUGHT

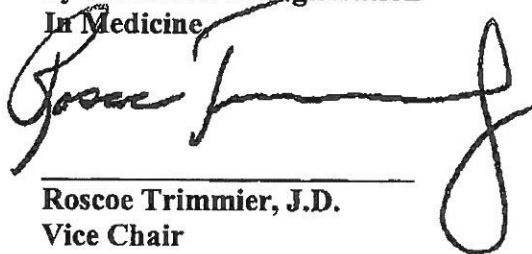
The Board is authorized and empowered to order appropriate disciplinary action, which may include the revocation or suspension of the Respondent's license to practice medicine. In addition to or instead of revocation or suspension, the Board may also order one or more of the of the following: admonishment, censure, reprimand, fine, the performance of uncompensated public service, a course of education or training, or restrictions on the Respondent's practice of medicine.

ORDER

Wherefore, it is hereby **ORDERED** that the Respondent show cause why she should not be disciplined for the conduct described herein.

Dated: 12/18/02

By the Board of Registration
In Medicine



Roscoe Trimmier, J.D.
Vice Chair

*Notified by certified mail
12/18/02*

COMMONWEALTH OF MASSACHUSETTS

MIDDLESEX, ss

BOARD OF REGISTRATION IN
MEDICINE
ADJUDICATORY CASE NO.
02-58-DALA

In the Matter of
Deborah Sichel, M.D.

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PROBATION AGREEMENT

I. COMPLIANCE WITH AGREEMENT

The Respondent agrees that violation of this Probation Agreement, including such provisions which survive this Agreement, shall constitute sufficient grounds for the immediate suspension of the Respondent's license to practice medicine, or any such lesser sanction as the Board may deem fit to impose, without prior notice to the Respondent. The Respondent hereby waives any claim or defense to any subsequent action by the Board to suspend the Respondent's license or impose such other lesser sanction, for any such violation or violations, except that the Respondent shall be entitled to defend against the assertion of a violation of this Agreement. The Respondent acknowledges and agrees that by entering into this Agreement, the Respondent is relinquishing important procedural and substantive rights.

II. PARTIES

The parties to this Probation Agreement are the Board of Registration in Medicine (the "Board") and Deborah Sichel, M.D. (the "Respondent").

III. JURISDICTION

The parties agree that the Board has the authority to enter into this Probation Agreement, and that the Board may enforce the terms of this Agreement in accordance with applicable laws and regulations and the provisions of this Agreement.

IV. CONDITIONS OF PROBATION

During the probationary period, which shall be effective on the date the Board accepts this Agreement, the Respondent shall comply with each of the following requirements:

A. The Respondent agrees to undergo monitoring by the Board until at least five years from the date on which the Board approves this Probation Agreement and for such further period thereafter as the Board shall for reasonable cause order. At the Board's discretion, any periods during which the Respondent is not practicing medicine, during the probationary period, may extend the probationary period.

B. The Respondent shall refrain from use of all controlled substances, unless such medication has been specifically prescribed by a treating physician for a legitimate medical purpose and in the usual course of the treating physician's medical practice.

C. The Respondent shall immediately notify the Board in writing any time that any treating physician writes a prescription for the Respondent for a controlled substance in Schedules II through IV, inclusive.

D. The Respondent shall not prescribe any controlled substances in Schedules II, III and IV (243 CMR 2.07(19)), to herself or any member of her family and agrees that this provision contained in this sentence will survive the probationary period. Respondent shall adhere to all laws and regulations pertaining to the dispensing, administration and distribution of controlled substances.

E. The Respondent has entered into a contract, dated March 5, 2010 , and in a form acceptable to the Board, with the Physician Health Services ("PHS") of the Massachusetts Medical Society. The Respondent agrees to abide fully by all terms of this contract. This contract includes a provision that PHS will promptly inform the Board of any lapse or violation of its terms by the Respondent, and the contract provides for any necessary waivers of privilege or

confidentiality by the Respondent. PHS shall submit quarterly reports to the Board which detail the Respondent's compliance with this contract.

F. The Respondent shall be under the care of a licensed or certified healthcare professional(s) who shall submit written reports, including reports on all missed sessions, to the Board or its designee as often as the Board deems necessary but in any event at least once every three months. Copies of these attendance reports shall be part of the quarterly report that PHS submits to the Board. The healthcare professional(s) shall immediately notify the Board by telephone whenever, in his/her professional judgment, the Respondent poses a potential danger to the health, safety and welfare of the Respondent's patients. In addition, the healthcare professional(s) shall immediately notify the Board by telephone and in writing in the event that the Respondent terminates treatment, or is non-compliant with the treatment plan. In the event that the healthcare professional(s) notifies the Board that the Respondent poses a danger to the health, safety or welfare of the Respondent's patients, or terminates treatment, the Board may obtain any and all information, reports and records for a period not to exceed ninety (90) days prior to the date of said notification from the healthcare provider(s) concerning the Respondent. The Respondent hereby waives any privileges concerning such information, reports, records and disclosures to the Board. The healthcare professional(s) shall confirm in writing, within ten (10) days of the Board's acceptance of this agreement, his/her agreement and undertaking with respect to the obligations set forth in this

Agreement, and shall notify the Board if the Respondent withdraws any waiver filed in connection with this Agreement. The Respondent may not terminate treatment with, or change the identity of the healthcare professional(s) without prior Board approval. The Respondent has chosen Carolyn Stone, Ed.D. and Michael Mufson, M.D. as the healthcare professionals who shall fulfill the monitoring requirements of this paragraph.

G. The Respondent shall file, within thirty (30) days of the execution of this Probation Agreement, written releases and authorizations sufficiently broad in scope so as to allow the Board to obtain any and all medical and laboratory reports, treating physicians' reports and records concerning the Respondent's treatment during the probationary period.

H. All agreements whereby third parties are to provide written reports, releases, records or any other information to the Board under this Probation Agreement shall be submitted to the Board for approval within thirty (30) days after the Probation Agreement is approved by the Board. All such releases and agreements must, in addition to waiving any relevant state law privileges or immunities, provide the Board with access to all material covered by 42 CFR, Part 2, and the Criminal Offender Records Information (CORI) Act, so-called, M.G.L. c. 6, ss. 167-178; all such releases and agreements must provide that the released party shall notify the Board if any waiver is withdrawn. In the event that any such releases or waivers are not sufficient to obtain access to any

information which the Board in its discretion considers relevant, the Respondent agrees to obtain personally such information and furnish it to the Board, to the extent permitted by law.

I. In the event that the Respondent seeks licensure to practice medicine in another state, the Respondent shall notify the Board of such fact and shall disclose to the licensing authority in such state her status with this Board. The Respondent shall submit to the Board copies of all correspondence and application materials submitted to another state's licensing authority.

J. In the event the Respondent should leave Massachusetts to reside or practice out of the state, the Respondent shall promptly notify the Board in writing of the new location as well as the dates of departure and return. Periods of residency or practice outside Massachusetts will not apply to the reduction of any period of the Respondent's probationary licensure, unless the Respondent enters into a monitoring agreement, approved by the Board, in the new location.

K. The Respondent shall appear before the Board or a committee of its members at such times as the Board may request, upon reasonable advance notice, commensurate with the gravity or urgency of the need for such meeting as determined by the Board or such committee.

L. The Respondent shall notify and provide, within ten (10) days of acceptance of this Probation Agreement by the Board, a complete copy of this Agreement with all exhibits and attachments by certified mail, return receipt requested, or by hand delivery to the following designated entities: any in- or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which she practices medicine; any in- or out-of-state health maintenance organization with whom she has privileges or any other kind of association; any state agency, in- or out-of-state, with which she has a provider contract; any in- or out-of-state medical employer, whether or not she practices medicine there; and the state licensing boards of all states in which she has any kind of license to practice medicine. The Respondent shall also provide this notification to any such designated entities with which she becomes associated for the duration of this Probation Agreement. The Respondent is further directed to certify to the Board within ten (10) days that she has complied with this directive. The Board expressly reserves the authority to independently notify, at any time, any of the entities designated above, or any other affected entity, of any action it has taken.

M. The Respondent may engage in the practice of medicine under conditions that the Board may impose. The Respondent shall engage in the practice of medicine only at the following location, Arbour Hospital in Boston, Massachusetts. The Respondent has selected Dr. Anthony Raynes to monitor her practice at Arbour Hospital. Until the Board, upon petition of Respondent,

orders otherwise, Respondent shall be monitored by Dr. Raynes. Said monitoring shall be pursuant to the transitional practice plan submitted with the Respondent's Petition to Stay Suspension.

N. The Respondent, and not the Board, shall be responsible for the payment of any fee or charge occasioned by the Respondent's compliance with this Probation Agreement.

O. The Respondent may request that the Board modify any of the conditions set forth above. The Board may, in its discretion, grant such modification. Except for requests for modifications related to the identity of the health care professional referenced in Paragraphs F, and the Respondent's employment, the Respondent may make such a request not more than once in any one year period, nor any sooner than one year from the date of this Probation Agreement.

V. TERMINATION OF PROBATION

A. If the Respondent complies with her obligations as set forth above, the Board, at the expiration of the five-year period, shall, upon petition by the Respondent, terminate the Respondent's probationary period and probation with the Board, unless the Respondent's probation is extended in accordance with paragraph IV(A).

B. If the Respondent fails to comply with her obligations as set forth above, the Respondent's license to practice medicine may be immediately suspended, as agreed in Section I.

June 4th, 2012
Date

6/6/12
Date

[Signature]
Respondent

[Signature]
Attorney for the Respondent

Accepted this 20 day of June, 2012, by the Board of Registration in Medicine.

[Signature]
Thea L. James, M.D.
Acting Chair
Board of Registration in Medicine

COMMONWEALTH OF MASSACHUSETTS

MIDDLESEX, SS:

Board of Registration in Medicine
Adjudicatory No: 02-58-DALA

In the Matter of)
)
Deborah Sichel, M.D.)
)
Registration No)

RESIGNATION

I, Deborah Sichel, M.D., being duly sworn, depose and state:

1. I desire to resign my license to practice medicine in the Commonwealth of Massachusetts pursuant to the terms of 243 CMR 1.05(5)(a).
2. My resignation is tendered voluntarily.
3. I realize that this resignation is a final act that deprives me of all privileges of resignation and is not subject to reconsideration or judicial review.
4. I am not currently licensed to practice medicine in any other state and will make no attempt to seek licensure elsewhere.
5. I understand that my resignation is a disciplinary action that is reportable to any national data-reporting agency, pursuant to G.L.c. 112, §2.

Signed under the penalties of perjury this 14 day of April, 2013.

Deborah Sichel, M.D.
DEBORAH SICHEL, M.D.

Then personally appeared before me the above-named Deborah Sichel, M.D. who signed the foregoing resignation in my presence and acknowledged said resignation to be her free act and deed.

DATED: 4/17/13

Notary Public
My Commission Expires:



COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN MEDICINE

Middlesex, ss.

Adjudicatory Case No. 02-58-DALA

In the Matter of)
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Deborah Sichel, M.D.)
_____)

Order

On the date referenced below, at a duly convened meeting of the Board of Registration in Medicine (the "Board"), the Board considered the statement of the above-named physician setting forth the terms of resignation attached hereto and pursuant to 243 CMR 1.05(5)(a), during the pendency of the above-captioned proceeding.

Having determined that the resignation is in conformity with the requirements of 243 CMR 1.05(5)(a), the Board voted to accept the resignation, effective as of April 24, 2013.

The Respondent shall provide a complete copy of this Resignation and Order within (10) days by certified mail, return receipt requested, or by hand delivery to the following designated entities: any in- or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which he practices medicine; any in- or out-of-state health maintenance organization with whom he has privileges or any other kind of association; any state agency, in- or out-of-state, with which he has a provider contract; any in- or out-of-state medical employer, whether or not she practices medicine there; and the state licensing boards of all states in which she has any kind of license to practice medicine, and the Drug Enforcement Administration Boston Diversion Group and the DPH Drug Control Program. The Respondent shall also provide this notification to any such designated entities with which she becomes associated for the duration of this Resignation and Order. The Respondent is further directed to certify to the Board within ten (10) days that he has complied with this directive.

Date: April 24, 2013

Candace Lapidus Sloane MD
Candace Lapidus Sloane, M.D.
Board Chair

SENT CERTIFIED MAIL 4/24/13 (mg)