

COMMONWEALTH OF MASSACHUSETTS

Suffolk, SS.

BOARD OF REGISTRATION  
IN MEDICINE

Adjudicatory Case No.

04-11-xx

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In the Matter of )

CHANTAL NOUVELLON, D.O. )  
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**STATEMENT OF ALLEGATIONS**

The Board of Registration in Medicine (the "Board") has reason to believe that Chantal Nouvellon, D.O. (the "Respondent") has engaged in conduct that calls into question her ability to practice medicine and has committed misconduct in the practice of medicine.

1. The Respondent was born on June 21, 1960. She graduated from the New England College of Osteopathic Medicine in 1991 and has been licensed to practice medicine in Massachusetts under certificate number 154583 since 1997. Her medical specialties are psychiatry and child psychiatry. She has privileges at the Carney Hospital, where she works part time in outpatient psychiatric care. She also has a part time psychiatric practice in Arlington, Massachusetts.

2. The Respondent operated Jardin D'Enfants Francais, which was classified by the Massachusetts Office for Child Care Services ("OCCS") as a family childcare home (the "Daycare Center"). In May 2002, the Respondent began a private psychiatry practice by the

name of Counseling Connection of Arlington (the "Psychiatric Practice"). The Daycare Center and the Psychiatric Practice were located at the Respondent's home in Arlington, Massachusetts.

3. In July 2002, at the age of two years and two months, Patient A was enrolled in the Day Care Center.

4. On or about August 2, 2002, the Respondent met with Patient A's mother (the "Mother"). The Respondent informed the Mother that she had diagnosed Patient A with attention deficit hyperactivity disorder ("ADHD"). The Respondent informed the Mother that because of Patient A's hyperactivity he would not be allowed to continue to be enrolled in the Day Care Center unless he was medicated. The Respondent prescribed .025 mg of Clonidine to be taken by Patient A in the morning.

5. Clonidine, which is a hypotensive agent, is a Schedule IV controlled substance.

6. On or about September 9, 2002, the Respondent prescribed 2.5 mg of Ritalin to be taken by Patient A at 7:30 am. She also continued to prescribe .025 mg of Clonidine, which was to be taken at 11:15 am.

7. Ritalin, which is a central nervous system stimulant, is a Schedule II controlled substance.

8. Shortly before September 14, 2002, the Respondent increased the prescribed dosage of Ritalin to be administered to Patient A to 5 mg. The Clonidine dose was increased to .05 mg for approximately 2 days and then decreased to .025 mg. As of September 14, 2002, Patient A was receiving 5 mg of Ritalin and .025 mg of Clonidine per day.

9. The Mother administered the Ritalin to Patient A at home, before she left for the Day Care Center.

10. The Mother kept some of the Clonidine pills at home and gave the rest to the Respondent to administer to Patient A at the Daycare Center.

11. The Respondent or one of her employees administered the Clonidine to Patient A at the Daycare Center prior to naptime.

12. On February 3, 2003, Patient A accidentally ingested approximately eight .1 mg tablets of Clonidine at the Day Care Center. The Respondent transported Patient A to the Mt. Auburn Hospital, in her vehicle.

13. Following the incident, the Mother decided that she would no longer send Patient A to the Respondent's Daycare Center.

14. The Respondent went to the Mother's home on the evening of February 12, 2003. She presented the Mother with papers to sign. The Respondent informed the Mother that she would have to sign the papers in order to get a refund of the tuition that she had paid in advance. The Mother signed the papers as requested.

15. One of the papers the Mother signed on February 12, 2003 was a release of claims. Another was a Consent for Medication, which was backdated to August 6, 2002.

16. On February 13, 2003, OCCS summarily suspended the Respondent's license to operate a family childcare facility.

17. The Respondent's diagnosis and treatment of Patient A did not conform to the accepted standards of medical care in the following respects:

a. The Respondent did not document in the medical record that she informed the Mother of options other than prescribing Ritalin and Clonidine, such as psychosocial interventions including a change in Day Care setting.

b. The Respondent did not document in the medical record that she informed the Mother of either the lack of controlled studies supporting the efficacy of Clonidine and Ritalin or the potential side effects of these medications.

c. The Respondent did not document in the medical record that she obtained a cardiovascular history, or baseline measures of blood pressure, pulse and a baseline EKG prior to prescribing Clonidine to Patient A.

d. The Respondent did not document in the medical record detailed and specific information as to whether Patient A's alleged hyperactivity at the Day Care was observed in an ongoing manner in environments outside of the school.

e. The Respondent's acting in a dual role as a childcare provider and a psychiatrist to Patient A created a conflict of interest.

f. The Respondent comprised the integrity of Patient A's medical record by back dating the Mother's consent to medication.

#### **LEGAL BASIS FOR PROPOSED RELIEF**

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 which places into question her ability to practice medicine, including but not limited to practicing medicine with negligence on repeated occasions.

Pursuant to 243 CMR 1.03(5)(a)(18), the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician has committed misconduct in the practice of 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

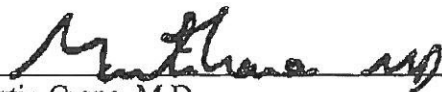
The Board is authorized and empowered to order appropriate disciplinary action, which may include revocation or suspension of the Respondent's license to practice medicine. The Board may also order, in addition to or instead of revocation or suspension, one or more of the following: admonishment, censure,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

By the  
Board of Registration in Medicine,

Date: April 21, 2004

  
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Martin Crane, M.D.  
Chairman

notified via  
certified mail  
4/21/2004 SD

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**CONSENT ORDER**

Chantal Nouvellon, D. O. (the "Respondent") and Complaint Counsel, agree that the Board of Registration in Medicine (the "Board") may issue this Consent Order, in lieu of convening an adjudicatory hearing, with all of the force and effect of a Final Decision within the meaning of 801 CMR 1.01(11)(d). The Respondent admits to the findings of fact specified below and agrees that the Board may make the conclusions of law and impose the sanctions set forth below.

**FINDINGS OF FACT**

1. The Respondent was born on June 21, 1960. She graduated from the New England College of Osteopathic Medicine in 1991 and has been licensed to practice medicine in Massachusetts under certificate number 154583 since 1997. Her medical specialties are psychiatry and child psychiatry. She has privileges at the Carney Hospital, where she works part time in outpatient psychiatric care. She also has a part time psychiatric practice in Arlington, Massachusetts.

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17. The Respondent's diagnosis and treatment of Patient A did not conform to the accepted standards of medical care in the following respects:



