

IN THE MATTER OF * BEFORE THE
ELSA I. CORREA, M.D. * STATE BOARD OF PHYSICIAN
Respondent * QUALITY ASSURANCE
License Number: D20136 * Case Number: 94-0945
* * * * *

CONSENT ORDER

PROCEDURAL BACKGROUND

The State Board of Physician Quality Assurance (the "Board"), on September 28, 1994, voted to charge Elsa I. Correa, M.D. (the "Respondent") (D.O.B. 1/8/41), License Number D20136, under the Maryland Medical Practice Act (the "Act"), Md. Code Ann., Health Occ. §14-404(a)(3) (1991).

Specifically, the Board charged that the Respondent:

- (3) Is guilty of immoral or unprofessional conduct in the practice of medicine.

The Respondent was notified of these charges through service on her attorney on March 1, 1995. A hearing was scheduled for this matter before the Office of Administrative Hearings for June 14, 1995.

On April 5, 1995, a conference was held before the Board Case Resolution Conference (the "CRC"). As a result of negotiations entered into after the CRC, the Respondent agreed to enter into this Consent Order, consisting of Procedural Background, Findings of Fact, Conclusions of Law and Order.

FINDINGS OF FACT

1. At all times relevant, the Respondent was and is licensed to practice medicine in the State of Maryland.

2. On or about November 13, 1987, a female patient (hereinafter known as "Patient A")¹ was referred for psychotherapy and medical management to the Respondent, a psychiatrist practicing in the Baltimore metropolitan area. Patient A's referring psychiatrist had diagnosed Patient A with another episode of her chronic illness, bipolar affective disorder (Type II).

3. On or about January 15, 1988, Patient A commenced psychiatric treatment with the Respondent.

4. Approximately one year later, during December 1988, the Respondent discontinued scheduled psychiatric treatment sessions with Patient A.

5. During the period described above, the Respondent provided psychiatric services to Patient A on at least 25 patient visits. These sessions ranged from 25 minutes to 50 minutes in length, and were conducted at the Respondent's office. During these sessions, the Respondent evaluated Patient A's psychiatric condition and provided individual psychotherapy and psychopharmacologic management of Patient A's condition. The Respondent prescribed a series of psychotropic medications for Patient A, such as Nortriptyline, Desipramine and Halcion; and other medications, such as Synthroid, a thyroid replacement medication.

¹Patient names are not used in this Consent Order. The Respondent has been made aware of the identity of this individual.

6. Prior to the time the Respondent ceased providing psychiatric care to Patient A, and afterward, the Respondent instigated professionally inappropriate contacts with Patient A, in which the Respondent divulged extensive information to Patient A, including, but not limited to, facts about her personal life, and her business and professional activities.

7. After the cessation of scheduled psychiatric office visits in December 1988, the Respondent continued to initiate significant personal and social contacts with Patient A. In addition, the Respondent continued to discuss with Patient A personal information, inner thoughts and feelings, and other issues Patient A revealed initially during scheduled psychotherapy sessions.

8. Through her progressive instigation of personal and social contacts with Patient A, the Respondent involved Patient A in various aspects of the Respondent's personal, family, business and professional life. These contacts initially included extensive telephone contacts, having lunches with Patient A, and utilizing Patient A's expertise in business matters for the Respondent's business and professional ventures. The Respondent solicited Patient A's expertise in real estate matters for the purchase of an office facility.

9. The Respondent also involved Patient A in extensive social contacts with the Respondent's family, and also encouraged Patient A to become involved in those contacts. These contacts included the Respondent's involving Patient A in the wedding of her

daughter, socializing with Patient A at both the Respondent's house and Patient A's house, and involving Patient A in her home life and the lives of the Respondent's husband and children.

10. The Respondent borrowed the sum of twenty-five thousand dollars (\$25,000.00) from Patient A in July 1989 to facilitate her purchase of an office property. The Respondent had agreed to pay Patient A back in full in February 1990, so that Patient A could use these funds for mortgage payments for her home. The Respondent then defaulted on this loan in February 1990. As a direct result of the Respondent's default on this loan, Patient A suffered extreme financial hardship, incurring significant expenses and losses. Patient A was forced to obtain legal representation to recover the expenses related to her financial losses. In addition, the Respondent's default on this loan caused Patient A to experience severe emotional distress and significant expenditures of time in recovering these financial losses.

11. Patient A traveled with the Respondent to San Francisco, California in September 1989, where the Respondent attended a psychiatric conference. The Respondent socialized with Patient A during this trip.

12. The Respondent borrowed the sum of two thousand five hundred dollars (\$2500.00) from Patient A in February 1991 to pay off personal debts.

13. When a psychiatrist provides psychiatric services to a patient, the psychiatrist has the sole responsibility to safeguard the psychotherapeutic relationship, given the psychiatrist's

fiduciary obligation to the patient, and the patient's emotional vulnerability, diminished capacity, and the transference emotions mobilized during psychotherapy. The psychiatrist must diligently guard against exploiting information furnished by the patient, and should not use the unique position of power afforded to him/her by the psychotherapeutic situation to influence the patient in a way not directly relevant to legitimate treatment goals. A psychiatrist has a duty and obligation not to act in a manner which exploits the patient, or in a manner which promotes the gratification or needs of the psychiatrist.

14. In involving Patient A in extensive personal and social contacts, and the act of borrowing money, and the subsequent default on this obligation, the Respondent engaged in immoral and unprofessional conduct in the practice of psychiatry and medicine. By progressively involving Patient A in increasing social and personal contacts, and by borrowing large sums of money from Patient A, the Respondent exploited Patient A for her own gratification, and in a manner inconsistent with any legitimate treatment goals. The Respondent caused Patient A to experience great emotional distress as a result of her exposure to the Respondent, as well as significant financial losses.

15. The Respondent understands and acknowledges that her conduct toward Patient A constitutes immoral and unprofessional conduct in the practice of psychiatry and medicine. The Respondent further acknowledges that she violated the fiduciary obligation she owed to Patient A, who suffered from a chronic mental illness. The

Respondent acknowledges that in involving Patient A in personal and social contacts, she gratified her needs at the expense of any treatment gains Patient A may have made during psychotherapy with the Respondent.

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, the Board concludes that the Respondent committed prohibited acts under the Act, H.O. §14-404(a)(3). Accordingly, the Board concludes as a matter of law that the Respondent is guilty of immoral and unprofessional conduct in the practice of psychiatry and medicine.

ORDER

Based on the foregoing Findings of Fact and Conclusions of Law, it is this 28 day of June, 1995, by a majority of the full authorized membership of the Board considering this case:

ORDERED that the Respondent's license to practice medicine in the State of Maryland is hereby **SUSPENDED** for a period of **ONE (1) YEAR**, effective July 28, 1995; and be it further

ORDERED that the Respondent shall pay restitution to Patient A in the sum of Twenty-Two Thousand Sixty-Six Dollars (\$22,066.00), to be paid on or before August 25, 1995. The Respondent shall pay this sum to Patient A in one lump sum by certified check through her legal counsel, who will contact Patient A to arrange for receipt of the restitution. The Respondent understands and agrees that in the event that she fails to pay this complete sum of restitution within the time period described above, the Board,

without notice or an opportunity for a hearing, will REVOKE the Respondent's license to practice medicine in the State of Maryland. After the Respondent submits payment of restitution to Patient A, the Respondent will advise the Board, in writing, through its Compliance division, that she has complied with this condition of the Consent Order; and be it further

ORDERED that within thirty (30) days of the execution of this Consent Order by the Board, the Respondent shall be evaluated by a Board approved psychiatrist selected by the Respondent from a list of psychiatrists who have been approved and recommended by the Maryland Psychiatric Society Peer Review Committee (the "MPS PRC"), under the direction of Anne C. Lewis, M.D. The MPS PRC will initially provide the Respondent with the names of three (3) evaluating psychiatrists, taking into account the cost of this evaluation, and any professional and/or personal conflicts that may exist. In the event that any such conflicts exist, the MPS PRC agrees to supply the Respondent with additional names of psychiatrists to facilitate this evaluation. The evaluating psychiatrist shall receive a copy of this Consent Order, the original Complaint and charging document, and may receive any other materials in the Board file at the discretion of the Board. This evaluating psychiatrist shall submit his/her written report to the Board regarding this evaluation within fifteen (15) business days after the Respondent's evaluation. The Respondent shall be responsible for all costs associated with this evaluation; and be it further

ORDERED that the Respondent, within thirty (30) days of the execution of this Consent Order by the Board, shall participate in psychotherapy with a psychiatrist (the "treating psychiatrist") who has been approved by the Board, subject to the following terms and conditions:

1. The Respondent shall participate in psychotherapy with the treating psychiatrist for at least one (1) hour per week², or more frequently if ordered by the treating psychiatrist. The Respondent shall participate in psychotherapy for a period of at least one (1) year;

2. The Respondent shall select the treating psychiatrist from a list of three (3) psychiatrists who have been approved and recommended by the MPS PRC under the direction of Anne C. Lewis, M.D., taking into account any professional and/or personal conflicts that may exist. In the event that any such conflicts exist, the MPS PRC agrees to supply the Respondent with additional names of psychiatrists to facilitate this treatment. The psychiatrist shall have a background and understanding of, and sufficient training in psychiatrist-patient boundary issues;

3. The treating psychiatrist shall submit written reports to the Board Compliance division on a monthly basis indicating whether the Respondent: (a) is attending the psychotherapy sessions as ordered; and (b) is paying for these sessions pursuant to the

²It is understood that one (1) psychotherapy hour is construed as approximately 50 minutes in length.

agreement reached between the Respondent and the treating psychiatrist;

4. The treating psychiatrist shall receive this Consent Order, the original Complaint and charging document, and may receive other materials in the Board file at the direction of the Board;

5. The Respondent shall be responsible for all costs associated with psychotherapy with the treating psychiatrist; and be it further

ORDERED that the Respondent, during the period of active suspension imposed above, shall enroll in and successfully complete a Board approved medical ethics course. This course shall be in addition to any continuing medical education credit requirements mandated for medical licensure in Maryland. The Respondent shall be responsible for all costs associated with enrollment in this medical ethics course;

AND BE IT FURTHER ORDERED that at the end of the ONE (1) YEAR period of active suspension of the Respondent's medical license imposed above, the Respondent may petition the Board for reinstatement of her medical license. Prior to petitioning for reinstatement, and at the conclusion of the one (1) year period of suspension, the Respondent shall be re-evaluated by the original evaluating psychiatrist, who will evaluate the Respondent to determine what, if any, treatment gains she has accomplished as a result of the psychotherapy, and her current fitness to return to the practice of medicine. The evaluating psychiatrist shall also

be required to make recommendations regarding what, if any, additional conditions shall be placed on the Respondent's license in the event that she is reinstated to the practice of medicine. The Respondent agrees to comply with these conditions in the event that she is reinstated by the Board. The evaluating psychiatrist shall submit a written final evaluation to the Board which addresses these issues within fifteen (15) business days of the evaluation. The Respondent shall be responsible for all costs associated with this re-evaluation by the evaluating psychiatrist; and be it further

ORDERED that in the event that the Board reinstates the Respondent's medical license, the Respondent shall be placed on PROBATION for a period of THREE (3) YEARS, subject to the following terms and conditions:

1. The Respondent's treating psychiatrist shall recommend whether any further psychotherapy is necessary during the period of probation. The Respondent shall comply with the recommendations of her treating psychiatrist with regard to participating in further psychotherapy;

2. The Respondent's psychiatric and medical practice shall be supervised by a psychiatric supervisor on a weekly basis for TWO (2) YEARS. The Respondent shall select a psychiatric supervisor from a list of psychiatrists who have been recommended by the MPS PRC under the direction of Anne C. Lewis, M.D., and endorsed by the Board. The psychiatric supervisor shall supervise all of the Respondent's professional work with patients, with special

attention to psychiatrist-patient boundary issues. The Respondent shall comply with all recommendations made by the psychiatric supervisor with respect to her practice of psychiatry and medicine. The Respondent shall arrange for and be subject to supervision by the psychiatric supervisor prior to engaging in the practice of psychiatry and medicine in the event that she is approved for reinstatement. The psychiatric supervisor shall submit quarterly written reports to the Board's Compliance division regarding the content of the psychiatric supervision including, but not limited to, the Respondent's: clinical practice; boundary issues; ability to identify and address problems; ability to practice independently; cooperation with the supervisor; and attendance. The Board reserves the right to require more frequent reports from the psychiatric supervisor if, in its discretion, it determines that more frequent reports are necessary. After the TWO (2) YEAR period of mandatory psychiatric supervision, the psychiatric supervisor shall submit to the Board's Compliance division a written report which addresses whether any further psychiatric supervision is necessary. The Respondent agrees to comply with the recommendations of the psychiatric supervisor with regard to further psychiatric supervision. The Respondent shall be responsible for all costs associated with this psychiatric supervision;

3. The Respondent shall be subject to annual peer reviews conducted through the Peer Review Management Committee of the Medical and Chirurgical Faculty of Maryland and performed by the

MPS PRC, following the first and second year after reinstatement of licensure. The Peer Review Committee assigned shall receive a copy of this Consent Order, the original Complaint and charging document, and may receive any other materials in the Board file at the discretion of the Board; and be it further

ORDERED that after conclusion of the probationary period imposed under this Consent Order, the Respondent may petition the Board for termination of her probationary status without any further conditions or restrictions. If the Respondent has satisfactorily complied with all conditions of probation, and there are no outstanding complaints regarding the Respondent's practice, the Respondent may petition the Board for termination of probation without any conditions or restrictions after the THREE (3) YEAR period of probation imposed under this Consent Order; and be it further

ORDERED that pursuant to Md. Code Ann., State Gov't §10-226(c) and COMAR 10.32.05, the Respondent is subject to summary suspension if an investigation or peer review indicates to the Board that there is a substantial likelihood of a risk of serious harm to public health, safety or welfare by the Respondent; and be it further

ORDERED that if the Respondent violates any of the terms of the Respondent's probation, the Board, after notice and a hearing, and a determination of violation, may lift the stay of suspension and may impose any other disciplinary sanctions it deems

appropriate, said violation of probation being proved by a preponderance of evidence; and be it further

ORDERED that the Respondent shall be responsible for all costs incurred under this Consent Order; and be it further

ORDERED that this Consent Order is considered a public document pursuant to Md. Code Ann., State Gov't §10-611 et seq.

6/28/95

Date



Israel H. Weiner, M.D.

Chair

Maryland State Board of
Physician Quality Assurance


CONSENT

I, Elsa I. Correa, M.D., acknowledge that I am represented by legal counsel, and I have had the opportunity to consult with counsel before entering into signing this document. By this consent, I hereby admit the Findings of Fact and Conclusions of Law, and submit to the foregoing Consent Order consisting of fifteen (15) pages.

I acknowledge the validity of this Consent Order as if entered after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to all other substantive and procedural protections provided by law. I acknowledge the legal authority and the jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I also affirm that I am waiving my right to appeal any adverse ruling of the Board that might have followed any such hearing.

I sign this Consent Order after having an opportunity to consult with counsel, without reservation, and I fully understand and comprehend the language, meaning and terms of this Consent Order.

6-12-95
Date


Elsa I. Correa, M.D.

STATE OF MARYLAND

CITY/COUNTY OF Baltimore

I HEREBY CERTIFY that on this 12th day of June,
1995, before me, Notary Public of the State and City/County
aforesaid, personally appeared Elsa I. Correa, M.D., and made oath
in due form of law that the foregoing Consent was her voluntary act
and deed.

AS WITNESSETH my hand and notarial seal.

Heather McLaughlin
Notary Public

My Commission Expires: 12-31-96