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1203 Front Street
Raleigh, North Carolina 27609-7533

Mailing:
P.O. Box 20007
Raleigh, North Carolina 27619-0007

Telephone: (919) 326-1100
Fax: (919) 326-1131
Email: info@ncmedboard.org
Web: www.ncmedboard.org

May 26, 2015

Via Certified Mail, Return Receipt Requested

Joseph Lawrence Godfrey, M.D.
Catawba Psychiatric Services, PLLC
100 Glenway Street, Suite A
Belmont, NC 28012

Dear Dr. Godfrey:

The North Carolina Medical Board (“Board”) has concluded its investigation regarding your care and management of Patient A. Although the Board decided not to commence formal proceedings against your license, it did vote to issue you this public letter of concern and require that you take continuing medical education (“CME”) related to pediatric psychiatric care.

On May 14, 2014, you performed a psychiatric evaluation on a three-year-old patient (“Patient A”). Patient A’s mother complained of problems with attention, erratic sleep schedule, and aggression towards Patient A’s younger sibling. You diagnosed Patient A with attention deficit hyperactivity disorder (“ADHD”), prescribed two psychostimulant medications for ADHD, and advised Patient A’s mother that he should return to you in one month.

You next saw Patient A on September 16, 2014, who presented with complaints of trouble sleeping, diminished appetite, and diminished energy level. You noted that Patient A’s mother consulted another physician who discontinued one of the ADHD medications because the dosage was considered too high for Patient A. You then discontinued both of the medications that you had initially prescribed for Patient A and started Patient A on a third psychostimulant medication for ADHD.

Patient A returned to you on October 28, 2014, and you discontinued the third medication you prescribed, and prescribed a fourth psychostimulant medication for ADHD. You also prescribed two new antidepressant medications at dosages recommended for an adult. Within 48 hours of taking these three prescriptions, Patient A became ill and was hospitalized due to an altered mental status.

In November 2014, the Board received complaints regarding the care you provided to Patient A from two of Patient A’s treating physicians. Patient A’s medical records were sent to an independent medical expert who specializes in child psychiatry. This independent medical expert opined that all aspects of your care of Patient A were below the acceptable and prevailing standard of care in North Carolina. Specifically, this expert opined as follows:

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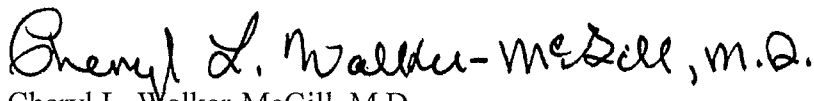
1. You did not conduct a complete and thorough evaluation of Patient A. The diagnosis of ADHD in a three year old requires collateral information including a full medical evaluation which you did not pursue.
2. Your medication choices for Patient A were below the standard of practice. Stopping one medication and starting a combination of three medications at adult dosage levels caused serious iatrogenic side effects requiring hospitalization.

As part of this public letter of concern, the Board requires that you complete an onsite comprehensive review course of pediatric psychiatric diagnoses and treatment including ADHD, consisting of at least fifteen hours of Category 1 CME. The CME course must be approved by the Board's Office of Medical Director and be completed within six (6) months of the date of this letter. You are required to notify the Board's Director of Complaints of your completion of the required CME. Failure to timely complete the required CME may result in the Board initiating public disciplinary proceedings pursuant to N.C. Gen. Stat. § 90-14(a)(6).

The Board urges you to take steps to prevent a recurrence of the conduct described above. Otherwise, the Board may vote to commence formal disciplinary proceedings against your license to practice medicine. If that happens, this letter may be entered into evidence in determining the appropriate discipline.

This letter is a public record within the meaning of Chapter 132 of the North Carolina General Statutes and is subject to public inspection and dissemination as required by that law.

Sincerely,


Cheryl L. Walker-McGill, M.D.
Board President

CWM/PFB/bjs