

**STATE OF TENNESSEE  
DEPARTMENT OF HEALTH**

|                                  |   |                                   |
|----------------------------------|---|-----------------------------------|
| <b>IN THE MATTER OF:</b>         | ) |                                   |
|                                  | ) |                                   |
| <b>State Of Tennessee</b>        | ) | <b>BEFORE THE TENNESSEE BOARD</b> |
| <b>Department Of Health</b>      | ) | <b>OF MEDICAL EXAMINERS</b>       |
|                                  | ) |                                   |
| <b>vs.</b>                       | ) | <b>CASE NO.: 200501863</b>        |
|                                  | ) |                                   |
| <b>Donald D. Gold, Jr., M.D.</b> | ) |                                   |
| <b>Respondent</b>                | ) |                                   |
| <b>License # 9580</b>            | ) |                                   |

**CONSENT ORDER**

This matter came to be heard before the Board of Medical Examiners at its November 6 , 2007 meeting pursuant to an agreement reached in a duly authorized screening panel proceeding. The State was represented by Matthew J. Scanlan, Assistant General Counsel. The Respondent's presence was waived by the Board's Medical Director but he represented himself at his screening panel appearance. After consideration of the presentations of counsel, the Board found as follows:

**FINDINGS OF FACT**

1. The Respondent, by signing this Order, waived the right to a contested case hearing and any and all rights to judicial review in this matter.
  
2. The Respondent agrees that presentation to and consideration of this Order by the Board for ratification and all matters divulged during that process shall not constitute unfair disclosure such that the Board or any of its members shall be prejudiced to the extent that requires their disqualification from hearing this matter should this Order not be ratified. Likewise, all matters, admissions and statements disclosed or exchanged during the attempted ratification process shall not be used against the Respondent in any subsequent proceeding unless independently entered into evidence or introduced as admissions.
  
3. The Respondent inappropriately prescribed medications to a patient with whom he had a personal relationship. Respondent further attempted to detoxify this patient with Methadone without proper DEA certification and without registering with the State of Tennessee.

## **CONCLUSIONS OF LAW**

4. The facts as found in paragraph 3 of the Findings of Fact in this Order are sufficient to establish violation by the Respondent of: Tennessee Code Annotated, § 63-6-214 (b)(1) Unprofessional, dishonorable, or unethical conduct and Tennessee Code Annotated, § 63-6-214 (b)(12) Dispensing, prescribing or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity, or disease, or in amounts and/or for durations not medically necessary, advisable or justified for a diagnosed condition.

## **REASONS FOR DECISION**

5. This action was taken to protect the public health, safety and welfare.

Therefore, it is **ORDERED** as follows:

6. Respondent is placed on probation for a period not less than five years and until Respondent has completed all the requirements of paragraphs 7 through 9.
7. Within 2 months of the date of entry of this order, that the Respondent has had an evaluation of his mental and physical capabilities to safely practice medicine in relation to his addiction and any other illnesses from which he may suffer performed by the Vanderbilt Comprehensive Assessment Program (VCAP) or another assessment program approved by the Board or the Board's Medical Director; that he has caused the written evaluation report to be sent directly to the Board's Medical Director; and he has taken steps to implement all recommendations resulting from that evaluation. He need not have completed all recommendations that are continuing in nature but he must have at least started to comply with all such recommendations and completed all others.
8. Within one (1) year of the date of entry of this order, Respondent shall complete must complete the Vanderbilt Center for Professional Health course *Prescribing Controlled Drugs* or a similar course approved by the Board or its consultant. Within one (1) year of the date of entry of this order, Respondent shall also complete courses on Boundary Issues and Medical Practice Management approved by the board or its consultant.

9. Respondent shall pay all costs, up to one-thousand five-hundred (\$1,500.00) dollars, associated with this matter.
10. Upon successful completion of the probation, and before such probation may be lifted, the Respondent must petition and appear, pursuant to rule 0880-2-.12 (2), for an Order of Compliance.
11. Respondent shall pay the actual cost and reasonable costs of prosecuting this case to the extent allowed by law. TENN. CODE ANN § 63-6-2149(k). These costs will be established by an affidavit of Costs prepared and submitted by counsel for the Department. Any and all costs shall be paid within thirty (30) days from the issuance of the Affidavit of Costs by submitting a **certified check, cashier's check, or money order** payable to the **State of Tennessee**, which shall be mailed or delivered to: **Disciplinary Coordinator, The Division of Health Related Boards, Tennessee Department of Health, Heritage Place, 227 French Landing, Suite 201, Nashville, Tennessee 37243**. A notation shall be placed on said check that it is payable for the costs of Donald D. Gold, Jr.

So **ORDERED** this the 6<sup>th</sup> day of November, 2007 by the Tennessee Board of Medical Examiners.

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Panel Chairperson  
Tennessee Board of Medical Examiners

Approved for entry by:

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**Donald D. Gold, Jr., M. D.**  
706 East Wood Street  
Paris, TN 38242

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**Date**

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**Matthew J. Scanlan**  
Assistant General Counsel  
State of Tennessee  
Department of Health  
Office of General Counsel  
220 Athens Way, Suite 210  
Nashville, Tennessee 37243  
(615) 741-1611

**CERTIFICATE OF SERVICE**

The undersigned hereby certifies that a true and correct copy of this document has been served upon all interested parties, or their counsel, by delivering same to their offices or by placing a true and correct copy of same in the United States mail, postage prepaid.

This \_\_\_\_ day of \_\_\_\_\_, 2007.

BY: \_\_\_\_\_  
Assistant General Counsel  
Tennessee Department of Health