

LICENSE NO. E-2483

IN THE MATTER OF
THE LICENSE OF
ROBERT JAMES BROCK, M.D.

BEFORE THE
TEXAS MEDICAL BOARD

AGREED ORDER

On the 1 day of March, 2019, came on to be heard before the Texas Medical Board (the Board), duly in session, the matter of the license of Robert James Brock, M.D. (Respondent).

On December 10, 2018, Respondent appeared in person, with counsel, Hugh Barton, at an Informal Show Compliance Proceeding and Settlement Conference (ISC) in response to a letter of invitation from the staff of the Board. The Board's representatives were Todd Pollock, M.D., and Betty Lou Angelo, both members of a District Review Committee (Panel). Jerry Bergman represented Board staff.

BOARD CHARGES

Board staff charged that Respondent is impaired due to mental health issues. Specifically, Staff alleged that Respondent was unable to efficiently and effectively see and treat his patients without the assistance of a medical scribe.

BOARD HISTORY

Respondent has not previously received a disciplinary order from the Board.

Upon the recommendation of the Board's representatives and with the consent of Respondent, the Board makes the following Findings and Conclusions of Law and enters this Agreed Order.

FINDINGS

The Board finds the following:

1. General Findings:

- a. Respondent received all notice required by law. All jurisdictional requirements have been satisfied. Respondent waives any defect in notice and any further right to notice or hearing under the Medical Practice Act, Title 3, Subtitle B, Texas Occupations Code (the Act) or the Rules of the Board.
- b. Respondent currently holds Texas Medical License No. E-2483. Respondent was originally issued this license to practice medicine in Texas on January 18, 1975.
- c. Respondent is primarily engaged in the practice of psychiatry. Respondent is board certified by the American Board of Psychiatry and Neurology, a member of the American Board of Medical Specialties.
- d. Respondent is 71 years of age.

2. Specific Panel Findings:

The Panel was concerned with Respondent's mental health based on the allegations made against him, and his presentation and responses to questions during his ISC.

3. Mitigating Factors:

In determining the appropriate sanctions in this matter, the Panel considered as mitigating that Respondent has cooperated in the investigation of the allegations related to this Agreed Order. Respondent neither admits nor denies the information given above. To avoid further investigation, hearings, and the expense and inconvenience of litigation, Respondent agrees to the entry of this Agreed Order and to comply with its terms and conditions.

CONCLUSIONS OF LAW

Based on the above Findings, the Board concludes that:

1. The Board has jurisdiction over the subject matter and Respondent pursuant to the Act.
2. Section 164.051(a)(4) of the Act authorizes the Board to take disciplinary action against Respondent based on Respondent's inability to practice medicine with reasonable skill and safety to patients because of (A) illness or (D) as a result of any mental or physical condition.
3. Section 164.001 of the Act authorizes the Board to impose a range of disciplinary actions against a person for violation of the Act or a Board rule.

4. Section 164.002(a) of the Act authorizes the Board to resolve and make a disposition of this matter through an Agreed Order.

5. Section 164.002(d) of the Act provides that this Agreed Order is a settlement agreement under the Texas Rules of Evidence for purposes of civil litigation.

ORDER

Based on the above Findings and Conclusions of Law, the Board ORDERS that Respondent shall be subject to the following terms and conditions:

1. Independent Medical Evaluation. Upon entry of this Order, the Executive Director of the Board will designate a physician who is board certified by the American Board of Psychiatry and Neurology to serve as the Board's evaluating physician. Within 60 days thereafter, Respondent shall submit to and obtain an independent medical evaluation from the evaluating physician, **which shall include both a forensic psychiatric examination and a complete neurological examination.**

- (a) The independent medical evaluation shall be conducted as directed by the Board, including, at a minimum:
 - (1) Social history and background information;
 - (2) History of present illness;
 - (3) Mental status exam;
 - (4) Complete neurological examination;
 - (5) Review of records and other pertinent information;
 - (6) Current diagnosis, if any, including DSM multi-axial diagnosis;
 - (7) Recommendations regarding continued care and treatment.
- (b) The Compliance Division of the Board shall furnish a copy of this Order and any other information it deems pertinent to the evaluating physician, who shall make a full report to the Board regarding the evaluating physician's evaluation of Respondent and recommendations..
- (c) Respondent shall pay all fees charged by the evaluating physician.
- (d) Respondent shall follow all recommendations made by the evaluating physician regarding continued care and treatment.

- (e) Respondent's failure to cooperate with the evaluating physician or failure to follow the evaluating physician's recommendations shall constitute a violation of this Order.
- (f) If the evaluating physician recommends continued care and treatment for Respondent, the Executive Director shall notify the Respondent to submit letters from up to three physicians who agree to serve as Respondent's approved treating physician within 30 days.
 - (1) The letters from proposed treating physician(s) shall state that they:
 - a. have been provided a copy of this Order;
 - b. agree to provide treatment to Respondent; and
 - c. agree to provide periodic reports regarding Respondent's compliance with treatment and rehabilitation to (a) the Compliance Division of the Board or (b) an independent monitoring physician.
 - (2) A proposed treating physician may not be approved unless the proposed treating physician agrees to provide periodic reports either to the Compliance Division of the Board or to an independent monitoring physician.
 - (3) The Executive Director may reject all of the proposed treating physicians and require the submission of additional letters or approve one or more to be the approved treating physician.
 - (4) Respondent shall begin the recommended care and treatment within 30 days after notification of approval of the treating physician.
 - (5) Respondent shall pay all fees charged by the treating physician.
 - (6) Respondent shall follow all recommendations made by the treating physician regarding continued care and treatment.
 - (7) Board staff may furnish to the treating physician any Board information that it determines, in its discretion, may be helpful or required for the treatment of Respondent.
 - (8) The treating physician shall provide periodic written reports no less than quarterly, on March 15, June 15, September 15, and December 15 of each year, during Respondent's treatment, either directly to the Compliance Division of the Board or to an independent monitoring physician. Periodic

reports shall include: (a) current diagnosis; (b) treatment regimen; (c) treatment compliance; (d) follow-up recommendations; and (e) prognosis. The Compliance Division of the Board or an independent monitoring physician may request clarification of periodic reports and may request additional reports.

- (9) The treating physician shall immediately report, either directly to the Compliance Division of the Board or to an independent monitoring physician, any unilateral withdrawal from treatment by Respondent.
- (10) Respondent shall execute any and all releases for medical records and authorizations necessary to effectuate the provisions of this Order.
- (11) Respondent's failure to cooperate with the treating physician or failure to follow the treating physician's recommendations shall constitute a violation of this Order.

2. Monitoring Continued Care and Treatment: During any continued care and treatment, the Board shall monitor Respondent's compliance with treatment and rehabilitation, either directly through the treating physician or through an independent monitoring physician designated by the Executive Director.

- (a) If the approved treating physician agrees to provide reports directly to the Compliance Division of the Board, with the consent of Respondent, the Executive Director may authorize the treating physician to serve in the dual capacity as treating physician for Respondent and monitoring physician for the Board.
- (b) If the approved treating physician does not agree to provide periodic reports to the Compliance Division of the Board, or if Respondent does not consent, or if the Executive Director requires an independent monitoring physician, the Executive Director shall designate a physician who is board certified in psychiatry to serve as the Board's independent monitoring physician. Respondent shall pay all fees charged by an independent monitoring physician.
- (c) An independent monitoring physician may require Respondent to present for a personal interview up to twice each year during treatment.
- (d) Respondent shall authorize the treating physician to provide information necessary for monitoring by the Board, either directly to the Compliance Division

of the Board or through an independent monitoring physician. The information shall be limited to the minimum information necessary to ensure adequate assessment of Respondent's compliance with treatment, rehabilitation, and compliance with the terms of this Order.

- (e) An independent monitoring physician shall provide periodic written reports to the Compliance Division of the Board no less than semi annually, on March 15 and September 15 of each year, during Respondent's treatment. The monitoring reports shall include: (a) current diagnosis; (b) treatment regimen; (c) treatment compliance; (d) follow-up recommendations; and (e) prognosis.
- (f) Board staff may furnish to the monitoring physician any Board information that it determines, in its discretion, may be helpful or required for the effective monitoring of Respondent's compliance with treatment, rehabilitation, and compliance with this Order.
- (g) Respondent's failure to cooperate with the monitoring physician shall constitute a violation of this Order.

3. Upon completion of the evaluation required by Ordering Paragraph No. 1, Respondent shall appear at an Informal Settlement Conference before a panel of Board representatives upon written request mailed to Respondent's last known address on file with the Board at least 10 calendar days before the requested appearance date. Such appearance shall be for the purpose of reporting on and addressing issues related to the evaluation required by Ordering Paragraph No. 1.

4. At all times while Respondent is under the terms of this Order, Respondent shall give a copy of this Order to all hospitals, nursing homes, treatment facilities, and other health care entities in Texas where Respondent has privileges, has pending an application for privileges, applies for privileges, or otherwise practices. Within 30 days of being first contacted by the Compliance Division of the Board following entry of this Order, Respondent shall provide to the Compliance Division of the Board documentation, including proof of delivery that the Order was delivered to all such facilities.

5. Pursuant to Board Rule 189.15, the time period of this Order shall be extended for any period of time that: (a) Respondent subsequently practices exclusively outside the State of Texas; (b) this Order is stayed or enjoined by Court Order; or (c) for any period of time longer

than 60 consecutive days that Respondent does not actively practice medicine and such cessation in practice is NOT due to a suspension of Respondent's license. Respondent shall immediately notify the Board in writing in the event that Respondent leaves Texas to practice elsewhere or ceases active practice for more than 60 consecutive days. Upon Respondent's return to active practice or return to Texas, Respondent shall notify the Board in writing. Upon return to Texas or active practice, Respondent shall be required to comply with the terms of this Order for the period of time remaining on the Order. Respondent shall pay all fees for reinstatement or renewal of a license covering the period of extension or tolling. Tolling shall be in accordance with Board Rule 189.15.

6. Respondent shall comply with all the provisions of the Act and other statutes regulating the Respondent's practice.

7. Respondent shall fully cooperate with the Board and the Board staff, including Board attorneys, investigators, compliance officers, consultants, and other employees or agents of the Board in any way involved in investigation, review, or monitoring associated with Respondent's compliance with this Order. Failure to fully cooperate shall constitute a violation of this order and a basis for disciplinary action against Respondent pursuant to the Act.

8. Respondent shall inform the Board in writing of any change of Respondent's office or mailing address within 10 days of the address change. This information shall be submitted to the Registration Department and the Compliance Department of the Board. Failure to provide such information in a timely manner shall constitute a basis for disciplinary action by the Board against Respondent pursuant to the Act. Respondent agrees that 10 days notice of a Respondent Show Compliance Proceeding to address any allegation of non-compliance of this Agreed Order is adequate and reasonable notice prior to the initiation of formal disciplinary action. Respondent waives the 45-day notice requirement provided by §164.003(b)(2) of the Medical Practice Act and agrees to 10 days notice, as provided in 22 Texas Administrative Code §187.44(4).

9. Any violation of the terms, conditions, or requirements of this Order by Respondent shall constitute unprofessional conduct likely to deceive or defraud the public, or to injure the public, and shall constitute a basis for disciplinary action by the Board against Respondent pursuant to the Act.

10. Respondent shall be permitted to supervise and delegate prescriptive authority to physician assistants and advanced practice nurses and to supervise surgical assistants.

11. The above-referenced conditions shall continue in full force and effect without opportunity for amendment, except for clear error in drafting, for one year following the date of entry of this Order. If, after the passage of one year, Respondent wishes to seek amendment or termination of these conditions, Respondent may petition the Board in writing. The Board may inquire into the request and may, in its sole discretion, grant or deny the petition without further appeal or review. Petitions for modifying or terminating may be filed only once a year thereafter.

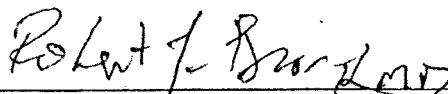
RESPONDENT WAIVES ANY FURTHER HEARINGS OR APPEALS TO THE BOARD OR TO ANY COURT IN REGARD TO ALL TERMS AND CONDITIONS OF THIS AGREED ORDER. RESPONDENT AGREES THAT THIS IS A FINAL ORDER.

THIS ORDER IS A PUBLIC RECORD.

(SIGNATURE PAGES FOLLOW)

I, ROBERT JAMES BROCK, M.D., HAVE READ AND UNDERSTAND THE FOREGOING AGREED ORDER. I UNDERSTAND THAT BY SIGNING, I WAIVE CERTAIN RIGHTS. I SIGN IT VOLUNTARILY. I UNDERSTAND THIS AGREED ORDER CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

DATED: 16 January, 2019.



ROBERT JAMES BROCK, M.D.
Respondent

STATE OF Texas

§
§
§

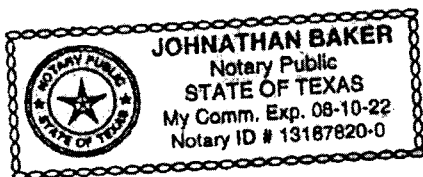
COUNTY OF Bell

SWORN TO AND ACKNOWLEDGED BEFORE ME, the undersigned Notary Public, on this 16 day of January, 2019.

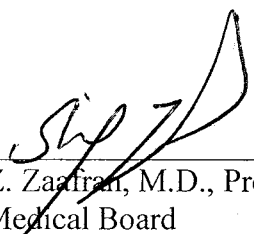


Signature of Notary Public

(Notary Seal)



SIGNED AND ENTERED by the presiding officer of the Texas Medical Board on this
1 day of MARCH, 2019.



Sherif Z. Zafran, M.D., President
Texas Medical Board