



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
Olympia, Washington 98504

RE: Garrett C. Daum, MD  
Docket No.: 07-07-A-1118MD  
Document: Statement of Allegations

Regarding your request for information about the above-named practitioner, certain information may have been withheld pursuant to Washington state laws. While those laws require that most records be disclosed on request, they also state that certain information should not be disclosed.

The following information has been withheld:

The identity of the complainant if the person is a consumer, health care provider, or employee, pursuant to RCW 43.70.075 (Identity of Whistleblower Protected) and/or the identity of a patient, pursuant to RCW 70.02.020 (Medical Records - Health Care Information Access and Disclosure)

If you have any questions or need additional information regarding the information that was withheld, please contact:

Customer Service Center  
P.O. Box 47865  
Olympia, WA 98504-7865  
Phone: (360) 236-4700  
Fax: (360) 586-2171

You may appeal the decision to withhold any information by writing to the Deputy Secretary, Department of Health, P.O. Box 47890, Olympia, WA 98504-7890.

**STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
MEDICAL QUALITY ASSURANCE COMMISSION**

**FILED**  
**OCT 19 2007**  
Adjudicative Clerk Office

In the Matter of

**GARRETT C. DAUM, MD**  
Credential No. MD00040757

Respondent

**Docket No. 07-07-A-1118MD**

**STATEMENT OF ALLEGATIONS  
AND SUMMARY OF EVIDENCE**

The Health Services Consultant, on designation by Medical Quality Assurance Commission (Commission), makes the allegations below, which are supported by evidence contained in program file number 2006-08-0020MD. The patients referred to in this Statement of Allegations and Summary of Evidence are identified in the attached Confidential Schedule.

**1. ALLEGED FACTS**

1.1 On January 28, 2002, the state of Washington issued Respondent a credential to practice as a Physician and Surgeon. Respondent is board certified in psychiatry and geriatric psychiatry. Respondent's credential is active.

1.2 Respondent was employed by Central Washington Comprehensive Mental Health (CWCMH) in Yakima, WA, from February 2005 to June 2006. Respondent provided patient services at two CWCMH locations.

1.3 CWCMH medical and nursing staff employees used a form entitled "Mental Health Record of Service (Service Record) to document billing codes, progress notes, and other consult-related information.

1.4 Respondent consulted with Patient A on May 8, 2006. The Service Record progress notes state, "See Dictated Note," and was signed by Respondent. However, Respondent did not dictate a note to supplement the Service Record for that consultation.

1.5 Respondent consulted with Patient B on March 29, 2006. The Service Record progress notes state, "See Dictated Note," and was signed by Respondent. However, Respondent did not dictate a note to supplement the Service Record for that consultation.

1.6 Respondent consulted with Patient B on May 3, 2006. However, Respondent did not complete a Service Record for that consultation.

1.7 Respondent consulted with Patient C on March 29, 2006. The Service Record progress notes state, "See Dictated Note," and was signed by Respondent. However, Respondent did not dictate a note to supplement the Service Record for that consultation.

1.8 Respondent consulted with Patient D on March 29, 2006. The Service Record progress notes state, "See Dictated Note," and was signed by Respondent. However, Respondent did not dictate a note to supplement the Service Record for that consultation.

## 2. SUMMARY OF EVIDENCE

2.1 Respondent's written statement dated November 9, 2006.

2.2 Medical records for Patients A, B, C, and D, and investigative materials in Program Case File Number 2006-08-0020MD.

## 3. ALLEGED VIOLATIONS

3.1 The facts alleged in Section 1, if proven, would constitute unprofessional conduct in violation of RCW 18.130.180(4), which provides in part:

**RCW 18.130.180 Unprofessional conduct.** The following conduct, acts, or conditions constitute unprofessional conduct for any license holder or applicant under the jurisdiction of this chapter:

...

(4) Incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed. The use of a nontraditional treatment by itself shall not constitute unprofessional conduct, provided that it does not result in injury to a patient or create an unreasonable risk that a patient may be harmed;

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#### 4. NOTICE TO RESPONDENT

4.1 The Commission has determined that this case may be appropriate for resolution through a Stipulation to Informal Disposition pursuant to RCW 18.130.172(2). A proposed Stipulation to Informal Disposition is attached, which contains the disposition the Commission believes is necessary to address the conduct alleged in this Statement of Allegations and Summary of Evidence.

4.2 If Respondent agrees that the disposition imposed by the Stipulation to Informal Disposition is appropriate, Respondent should sign and date the Stipulation to Informal Disposition and return it within 14 days to the Department of Health Legal Service Unit at PO Box 47873, Olympia, WA 98504-7873.

4.3 If Respondent does not agree that the terms and conditions contained in the Stipulation to Informal Disposition are appropriate, Respondent should contact Lawrence J. Berg, Department of Health Staff Attorney, PO Box 47873, Olympia, WA 98504-7873, (360) 236-4695, within 14 days.

4.4 If Respondent does not respond within 14 days, the Commission will assume Respondent has declined to resolve the allegations by means of a Stipulation to Informal Disposition.

4.5 If Respondent declines to resolve the allegations by means of a Stipulation to Informal Disposition pursuant to RCW 18.130.172(2), the Commission may proceed to formal disciplinary action against Respondent by filing a Statement of Charges, pursuant to RCW 18.130.172(3).

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4.6 The cover letter enclosed with this Statement of Allegations and Summary of Evidence was mailed to the name and address currently on file for Respondent's credential. Respondent must notify, in writing, the Commission if Respondent's name and/or address changes.

DATED: August 15, 2007.

STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
MEDICAL QUALITY ASSURANCE  
COMMISSION

  
ERIN OBENLAND  
HEALTH SERVICES CONSULTANT

  
LAWRENCE J. BERG, WSBA#22334  
DEPARTMENT OF HEALTH STAFF ATTORNEY

FOR INTERNAL USE ONLY:

PROGRAM NO. 2006-08-0020MD

## CONFIDENTIAL SCHEDULE

**This information is confidential and is NOT to be released without the consent of the individual or individuals named herein. RCW 42.56.240(1)**

Patient A

Patient B

Patient C

Patient D





STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
Olympia, Washington 98504

RE: Garrett C. Daum, MD  
Docket No.: 07-07-A-1118MD  
Document: Stipulation to Informal Disposition

Regarding your request for information about the above-named practitioner, certain information may have been withheld pursuant to Washington state laws. While those laws require that most records be disclosed on request, they also state that certain information should not be disclosed.

The following information has been withheld:

Respondent's residential address, including street, city, and zip code pursuant to RCW 42.56.350(2)

If you have any questions or need additional information regarding the information that was withheld, please contact:

Customer Service Center  
P.O. Box 47865  
Olympia, WA 98504-7865  
Phone: (360) 236-4700  
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**STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
MEDICAL QUALITY ASSURANCE COMMISSION**

In the Matter of

**GARRETT C. DAUM, MD**  
Credential No. MD00040757

Respondent

**Docket No. 07-07-A-1118MD**

**STIPULATION TO INFORMAL  
DISPOSITION**

**1. STIPULATION**

The parties to the above-entitled matter stipulate as follows:

1.1 Garrett C. Daum, MD, Respondent, is informed and understands that the Health Services Consultant of the Medical Quality Assurance Commission (Commission), on designation by the Commission, has made the following allegations.

A. On January 28, 2002, the state of Washington issued Respondent a credential to practice as a Physician and Surgeon. Respondent is board certified in psychiatry and geriatric psychiatry. Respondent's credential is active.

B. Respondent was employed by Central Washington Comprehensive Mental Health (CWCMH) in Yakima, WA, from February 2005 to June 2006. Respondent provided patient services at two CWCMH locations.

C. CWCMH medical and nursing staff employees used a form entitled "Mental Health Record of Service (Service Record) to document billing codes, progress notes, and other consult-related information.

D. Respondent consulted with Patient A on May 8, 2006. The Service Record progress notes state, "See Dictated Note," and was signed by Respondent. However, Respondent did not dictate a note to supplement the Service Record for that consultation.

E. Respondent consulted with Patient B on March 29, 2006. The Service Record progress notes state, "See Dictated Note," and was signed by Respondent. However, Respondent did not dictate a note to supplement the Service Record for that consultation.

**ORIGINAL**

F. Respondent consulted with Patient B on May 3, 2006. However, Respondent did not complete a Service Record for that consultation.

G. Respondent consulted with Patient C on March 29, 2006. The Service Record progress notes state, "See Dictated Note," and was signed by Respondent. However, Respondent did not dictate a note to supplement the Service Record for that consultation.

H. Respondent consulted with Patient D on March 29, 2006. The Service Record progress notes state, "See Dictated Note," and was signed by Respondent. However, Respondent did not dictate a note to supplement the Service Record for that consultation.

1.2 Respondent is informed and understands that a finding of unprofessional conduct based on the alleged facts, if proven, would constitute grounds for discipline pursuant to RCW 18.130.180(4).

1.3 The parties wish to resolve this matter by means of a Stipulation to Informal Disposition pursuant to RCW 18.130.172(1).

1.4 Respondent agrees to be bound by the terms and conditions of the Stipulation to Informal Disposition (Stipulation).

1.5 This Stipulation is of no force and effect and is not binding on the parties unless and until it is accepted by the Commission.

1.6 Respondent does not admit any of the allegations in the Statement of Allegations and Summary of Evidence or in paragraph 1.1 above. This Stipulation shall not be construed as a finding of unprofessional conduct or inability to practice.

1.7 This Stipulation is not formal disciplinary action. However, it is subject to the federal reporting requirements pursuant to Section 1128E of the Social Security Act and 45 CFR Part 61 and any other applicable interstate/national reporting requirements. It is a public document and will be available on the Department of Health web site.

1.8 This Stipulation is releasable to the public upon request pursuant to the Public Records Act, chapter 42.56 RCW. The Statement of Allegations and Summary of Evidence and the Stipulation to Informal Disposition shall remain part of Respondent's file and cannot be expunged.

1.9 The Commission agrees to forego further disciplinary proceedings concerning the allegations contained in paragraph 1.1 above.

1.10 Respondent agrees to successfully complete the terms and conditions of this informal disposition.

1.11 Respondent is advised and understands that a violation of the provisions of Section 2 of this Stipulation, if proved, would constitute grounds for discipline under RCW 18.130.180 and the imposition of sanctions under RCW 18.130.160.

## **2. INFORMAL DISPOSITION**

Pursuant to RCW 18.130.172(2) and based upon the above stipulation, the parties agree to the following Informal Disposition.

2.1 Respondent must successfully complete a minimum of four hours of Category 1 CME, pre-approved by the Commission or its designee, in the area of Documentation. Course-work must be completed within 12 months of the effective date of this Stipulation. Respondent must provide proof of completing course-work to the Commission within 30 days of completion.

2.2 Respondent shall reimburse investigative costs to the Commission in the amount of \$1000.00 which must be received by the Commission within 90 days from the effective date of this Stipulation. Failure to timely pay the reimbursement violates this Stipulation. The fine shall be paid by certified or cashier's check or money order, made payable to the Department of Health and mailed to the Department of Health, Medical Quality Assurance Commission Program, P.O. Box 1099, Olympia, WA 98507-1099.

2.3 Respondent shall obey all federal, state and local laws and all administrative rules governing the practice of the profession in Washington.

2.4 Respondent shall assume all costs of complying with this Stipulation to Informal Disposition.

2.5 If Respondent violates any provision of this Stipulation to Informal Disposition in any respect, the Commission may take further action against Respondent's credential.

2.6 Respondent shall inform the Commission and the Adjudicative Service Unit in writing, of changes in his residential and/or business address within 30 days of such change.

2.7 The effective date of this Stipulation to Informal Disposition is that date the Adjudicative Services Unit places the signed order into the U.S. mail. Respondent shall not submit any fees or compliance documents until after the effective date of the Stipulation.

### 3. ACKNOWLEDGMENT

I, GARRETT C. DAUM, Respondent, certify that I have read this Stipulation to Informal Disposition in its entirety; that my counsel of record, if any, has fully explained the legal significance and consequence of it; that I fully understand and agree to all of it; and that it may be presented to the Commission without my appearance. If the Commission accepts the Stipulation to Informal Disposition, I understand that I will receive a signed copy.

\* New  
address



  
GARRETT C. DAUM, M.D.  
RESPONDENT

8-27-07  
DATE

\_\_\_\_\_, WSBA #  
ATTORNEY FOR RESPONDENT

\_\_\_\_\_  
DATE

#### 4. ACCEPTANCE

The Commission accepts this Stipulation to Informal Disposition. All parties shall be bound by its terms and conditions.

DATED: October 17, 2007.

STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
MEDICAL QUALITY ASSURANCE  
COMMISSION

Judy Tobin  
PANEL CHAIR

PRESENTED BY:

Lawrence J. Berg  
LAWRENCE J. BERG, WSBA#22334  
DEPARTMENT OF HEALTH STAFF ATTORNEY

October 17, 2007  
DATE

FOR INTERNAL USE ONLY:

PROGRAM NO. 2006-08-0020MD



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
Olympia, Washington 98504

RE: Garrett C. Daum, MD  
Master Case No.: M2007-61975  
Docket No.: 07-07-A-1118MD  
Document: Release from Stipulation to Informal Disposition

Regarding your request for information about the above-named practitioner, certain information may have been withheld pursuant to Washington state laws. While those laws require that most records be disclosed on request, they also state that certain information should not be disclosed.

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STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

MEDICAL QUALITY ASSURANCE COMMISSION  
P.O. Box 47866, Olympia, Washington 98504-7866

FILED  
JUN 02 2009  
Adjudicative Clerk

June 1, 2009

Garrett C. Daum, MD

Re: Master Case No.: M2007-61975  
Docket No.: 07-07-A-1118MD  
ILRS Case No.: 2006-53596  
Program Case No.: 2006-08-0020MD  
Credential No.: MD 40757

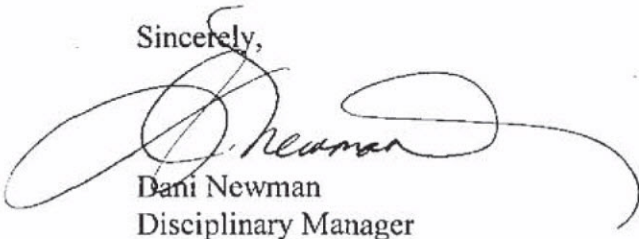
Dear Dr. Daum:

This letter is to officially inform you and other interested parties that the Medical Quality Assurance Commission has released you from the requirements of the *Stipulation to Informal Disposition (STID)* signed on October 17, 2007. You have demonstrated satisfactory compliance with the terms and conditions of the agreement. You are now released from the requirements of the STID effective upon receipt of this letter.

The Department of Health Medical Quality Assurance Commission wishes you well in your future endeavors as a physician and surgeon.

If you have any questions concerning this matter, please contact Angela Bucci, Compliance Officer at (360).236-2763 or write to the Department of Health, Medical Quality Assurance Commission, PO Box 47866, Olympia, WA 98504-7866.

Sincerely,



Dani Newman  
Disciplinary Manager

cc: Adjudicative Service Unit