



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

RE: John P. Moulton, MD
Docket No.: 07-01-A-1091MD
Document: Statement of Charges

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
APR 03 2007
Adjudicative Clerk Office

In the Matter of

JOHN P. MOULTON, MD
Credential No. MD00015837

Docket No. 07-01-A-1091MD

STATEMENT OF CHARGES

Respondent

The Health Services Consultant, on designation by the Medical Quality Assurance Commission (Commission) makes the allegations below, which are supported by the evidence contained in program file number 2005-11-0031MD. The patient referred to in this Statement of Charges is identified in the attached Confidential Schedule.

1: ALLEGED FACTS

1.1 On June 3, 1977, the state of Washington issued Respondent a credential to practice as a physician and surgeon. Respondent's credential is currently active.

1.2 Respondent is board certified in psychiatry. Respondent provided psychiatric treatment to Patient A at various times from April through July 2005. Respondent's care of Patient A included treating Patient A in April 2005 and June 2005 when Patient A was twice admitted to the psychiatric department of a hospital where Respondent practices (Hospital 1).

1.3 Respondent and Patient A developed personal and romantic feelings for each other during one of Patient A's 2005 hospital admissions. During the June admission, Respondent entered into a personal and romantic relationship with Patient A.

1.4 At the end of the June admission, Respondent arranged for Patient A's transfer to a different hospital (Hospital 2). Respondent took Patient A to his church, where they attended a sermon holding hands. Respondent then took Patient A to the airport so she could transfer to the new hospital. There, Respondent engaged in sexual contact with Patient A by pulling her toward him and kissing her on the lips.

1.5 While Patient A was at Hospital 2, she and Respondent engaged in a personal and romantic correspondence.

1.6 Following Patient A's discharge from Hospital 2 in late June 2005, Respondent continued his romantic relationship with Patient A. They dated and had sexual contact, although not intercourse. While on dates, they drank wine even though Patient A had a history of alcohol abuse and possible dependency. During this time, Respondent continued to be Patient A's psychiatrist, seeing her at least once in his office and billing her for a psychotherapy appointment on July 8, 2005.

1.7 Patient A returned to her home state in early July 2005. Respondent and Patient A continued their relationship through personal and romantic correspondence that lasted until August 2005, when their respective spouses learned of the affair. During this time, Respondent and Patient A planned to meet and engage in sexual intercourse.

2: ALLEGED VIOLATIONS

2.1 Based on the Alleged Facts, Respondent has committed unprofessional conduct in violation of RCW 18.130.180(1), (4), and (24), which provide 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:

(1) The commission of any act involving moral turpitude, dishonesty, or corruption relating to the practice of the person's profession, whether the act constitutes a crime or not.

...

(4) Incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed.

...

(24) Abuse of a client or patient or sexual contact with a client or patient;

...

2.2 The above violations provide grounds for imposing sanctions under RCW 18.130.160.

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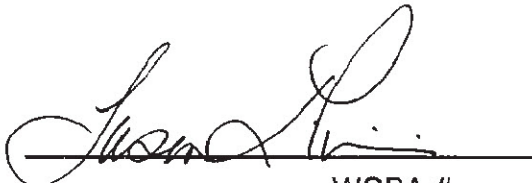
3: NOTICE TO RESPONDENT

The charges in this document affect the public health, safety and welfare. The Health Services Consultant of the Commission directs that a notice be issued and served on Respondent as provided by law, giving Respondent the opportunity to defend against these charges. If Respondent fails to defend against these charges, Respondent shall be subject to discipline pursuant to RCW 18.130.180 and the imposition of sanctions under RCW 18.130.160.

DATED: April 3, 2007.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE
COMMISSION


ERIN OBENLAND
HEALTH SERVICES CONSULTANT


SUSAN L. PIERINI, WSBA # 17714
ASSISTANT ATTORNEY GENERAL

FOR INTERNAL USE ONLY:

PROGRAM NO. 2005-11-0031MD

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





STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

RE: John P. Moulton MD
Master Case No.: M2007-58790
Docket No.: 07-01-A-1091MD
Document: Modification Order

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:

Information regarding an individual's health care, including where they received health care services, their medical condition, care provided, etc., pursuant to RCW 42.56.360 (Public Records Disclosure) and RCW 70.02.020 (Medical Records – Health Care Information Access and Disclosure)

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

In the Matter of

JOHN P. MOULTON, MD
Credential No. MD00015837

Respondent

**No. M2007-58790
(Docket No. 07-01-A-1091MD)**

**STIPULATED FINDINGS OF
FACT, CONCLUSIONS OF LAW
AND AGREED ORDER ON
MODIFICATION**

The Medical Quality Assurance Commission (Commission), through Peter J. Harris, Department of Health Staff Attorney, and Respondent, represented by counsel, Donna Moniz, stipulate and agree to the following:

Section 1: PROCEDURAL STIPULATIONS

1.1 On November 29, 2007, the Commission entered a Stipulated Findings of Fact, Conclusions of Law and Agreed Order (November 29, 2007 Agreed Order) in this matter regarding Respondent's license to practice as a physician and surgeon.

1.2 The November 29, 2007 Agreed Order required Respondent to submit to a psycho-sexual evaluation, and it allows the Commission to modify its terms and conditions based on the evaluator's assessment and recommendations.

1.3

[REDACTED]

has determined that the November 29, 2007 Agreed Order should be modified in certain respects. Also, Respondent has requested modification of the supervision requirements in Paragraph 4.4(B) to allow for the possibility that, in any given week, Respondent may not have the opportunity to see two (2) female patients, in which case his supervisor could not observe his interactions with two female patients. In addition, Respondent has requested modification of the November 29, 2007 Agreed Order to state what will occur if there are periods of time when, due to vacations, business trips, or other absences, Respondent cannot timely comply with the supervision and therapy requirements of the November 29, 2007 Agreed Order and this Stipulated Findings of Fact, Conclusions of Law, and Agreed Order on Modification (Agreed Order on Modification).

1.4 The parties agree to resolve this matter by means of this Agreed Order on Modification.

1.5 Respondent waives the opportunity for a hearing on the request for modification provided that the Commission accepts this Agreed Order on Modification.

1.6 Respondent understands that this Agreed Order on Modification is not binding unless and until it is signed and accepted by the Commission.

1.7 If the Commission accepts this Agreed Order on Modification, it is subject to the federal reporting requirements pursuant to Section 1128E of the Social Security Act and 45 CFR Part 61, RCW 18.130.110 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 If the Commission rejects this Agreed Order on Modification, Respondent waives any objection to the participation at hearing of any Commission members who heard the Agreed Order on Modification presentation.

Section 2: FINDINGS OF FACT

The State and Respondent stipulate to the following facts:

2.1 Respondent [REDACTED]

Paragraph 4.2 of the November 29, 2007 Agreed Order.

2.2 [REDACTED]

2.3 [REDACTED]

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Section 3: CONCLUSIONS OF LAW

The State and Respondent agree to the entry of the following Conclusions of Law:

3.1 The Commission has jurisdiction over Respondent and over the subject matter of this proceeding. Chapter 18.130 RCW, the Uniform Disciplinary Act, governs the discipline of physicians licensed by the Commission.

3.2 The Commission may, in its discretion, modify the November 29, 2007 Agreed Order by entering this Agreed Order on Modification.

Section 4: AGREED ORDER

Based on the Findings of Fact and Conclusions of Law, Respondent agrees to the following modifications of the November 29, 2007 Agreed Order (**all additions to Paragraphs 4.4 and 4.7 of that order appear in bold, italic type**):

4.1 Paragraph 4.4 of the November 29, 2007 Agreed Order is modified to read:

4.4 **Supervision.** During the probationary period, Respondent shall be supervised in his practice pursuant to the following terms:

A. Starting on the effective date of this Agreed Order, Respondent shall be supervised by the Chief of Psychiatry at the hospital where he currently practices. Respondent shall provide the name of that person to the Compliance Officer. If a different person fills that position while this Agreed Order is in effect, Respondent shall immediately identify that person to the Compliance Officer, provide the person with a copy of this Agreed Order, and obtain his or her agreement to fulfill the supervision responsibilities described in this Paragraph 4.4. If for any reason the Chief of Psychiatry is unable to supervise Respondent pursuant to these terms, Respondent may propose an alternative supervisor. The Commission reserves the right to accept or reject any such proposal.

B. The supervisor shall monitor Respondent by observing on a weekly basis his treatment of and interactions, ***including conversations and nonverbal behavior***, with a minimum of two (2) female patients. ***If Respondent does not see two female patients in any given week, the supervisor shall observe Respondent's interaction with one female patient during that week, if Respondent sees a female patient in that***

week. In any week in which Respondent does not see two female patients, the supervisor shall make reasonable efforts to observe Respondent's interactions with additional female patients in subsequent weeks, to the extent possible, so that, ultimately, the supervisor observes on average two such interactions per week. These observations shall be for the purpose of assuring that Respondent maintains appropriate boundaries. At least once a week, Respondent shall meet with his supervisor to review all of Respondent's cases, discuss the maintenance of appropriate boundaries, and address any questions or concerns the supervisor or Respondent might have. At each supervisory session, Respondent shall report on whether he is experiencing personal attraction to any patient, whether he has made personal disclosures to any patient, and whether he has engaged in any physical contact with a patient other than contact necessary to perform a procedure, such as electroconvulsive therapy, or briefly shaking a patient's hand when greeting or saying goodbye to a patient. The supervisor shall instruct Respondent in the appropriate manner of managing any problem that may arise regarding his interactions and relationships with patients. In addition, the supervisor shall address with Respondent, and review with him the professional literature regarding, the effect of alcohol use on depressed patients and on depressed patients taking antidepressant medications. The supervisor shall document these sessions and provide copies to the Commission as described in Paragraph 4.4(C).

C. Respondent shall ensure that the supervisor submits quarterly reports to the Compliance Officer regarding Respondent's practice and his professionalism and ethics in working with patients. ***The supervisor shall enclose with each report the documentation of his supervisory sessions with Respondent during that reporting period.***

The first report will be due on January 2, 2008. The supervisor shall send reports for the duration of Respondent's probation.

D. If the supervisor has concerns that Respondent has violated the conditions of this Agreed Order or has engaged in any behavior which is unethical or could place a client or the public at risk, the supervisor shall immediately report such concerns to the Commission.

E. ***Respondent shall provide copies of the evaluator's report and this Agreed Order on Modification to his supervisor within one (1) week of the effective date of this Order.***

4.2 Paragraph 4.7 of the November 29, 2007 Agreed Order is modified to read:

4.7 **Therapy.**

A. Respondent shall continue in therapy, ***and he and his provider shall follow the recommendations set forth in Dr. Rawlings' report, which is incorporated by reference. Respondent shall see a therapist four (4) times per month.*** The provider shall report to the Commission's designee once every three (3) months regarding Respondent's compliance with the therapy regimen, starting on the first day of the first month after the effective date of this Agreed Order. ***Each report shall include summaries of the discussion of issues described in Dr. Rawlings' recommendations.*** Reports should be sent to Department of Health, Medical Quality Assurance Commission, P.O. Box 47866, Olympia, WA 98504-7866.

B. ***Respondent shall provide a copy of Dr. Rawlings' report and this Agreed Order on Modification to his therapist within one (1) week of the effective date of this Order.***

C. ***Before terminating therapy, Respondent shall complete an independent, psychosexual evaluation with Dr. Les Rawlings or, if Dr. Rawlings is not available, with another evaluator chosen by the Commission or its designee. The purposes of the evaluation shall be to assess Respondent's progress through therapy and to determine whether it is appropriate to terminate therapy.***

1. ***Any such evaluation shall include, but not necessarily be limited to, the following components:***
 - a. ***An updated history of the Respondent, including social, developmental, medical, and psychological and/or psychiatric aspects.***
 - b. ***Appropriate and sufficient testing to obtain an update on the mental status of the Respondent.***
 - c. ***A review of the November 29, 2007 Agreed Order, the evaluation report obtained pursuant to that order, this Agreed Order on Modification, materials previously supplied by the Commission, and any supplemental materials that the Commission, in its discretion, might supply.***
 - d. ***A review of any other physical, psychiatric, psychological, sociological, or other relevant information provided by the Respondent.***
 - e. ***A review of any other factors and information that the evaluator deems appropriate.***
 - f. ***A full and detailed discussion of any diagnosis of the Respondent, and a report on the evaluator's assessments, conclusions, and any recommendations regarding the termination or continuance of therapy.***
2. ***In any such report, the evaluator shall:***
 - a. ***Provide a psychiatric diagnosis of the Respondent, if any, and fully assess and evaluate all relevant mental and emotional conditions.***
 - b. ***Describe the evaluation process and Respondent's cooperation in that process.***
 - c. ***State whether, in the evaluator's opinion, Respondent should terminate therapy.***
 - d. ***If the evaluator believes Respondent should continue in therapy, the evaluator shall recommend conditions for continued therapy.***

3. If the evaluator is concerned that Respondent has violated the conditions of the November 29, 2007 Agreed Order or this Agreed Order on Modification, or has engaged in any behavior which may place clients or the public at risk, the evaluator shall immediately report such concerns to the Commission or its representative.

4. The evaluator will send the report to the Commission's designee. The Commission may, at its discretion, modify this Agreed Order based on the evaluator's assessment and recommendations, including any recommendation that Respondent can safely terminate or should continue in therapy. The Commission will give the Respondent notice and an opportunity to be heard regarding any such modification. However, Respondent will not be allowed at that time to dispute the evaluation process, the evaluator's assessment or recommendations, or the terms of the November 29, 2007 Agreed Order or this Agreed Order on Modification.

4.3 The following new provisions are added to the November 29, 2007 Agreed Order:

A. Respondent is prohibited from having physical contact with any patient other than that which is necessary to perform a procedure, such as electroconvulsive therapy. Respondent may briefly shake patients' hands when greeting or saying goodbye to patients.

B. Respondent should not make personal disclosures to patients. Personal disclosure means telling the patient anything about himself other than information regarding his professional qualifications.

C. Respondent shall not continue to transport a former patient to and from church. He may arrange for someone else to help her. The patient is 89 years old.

D. Respondent shall not practice psychiatry in a private outpatient setting.

E. The Commission and Respondent acknowledge that due to vacations, business trips, or other absences, circumstances may arise where Respondent cannot see his therapist four (4) times in any given month, meet with his supervisor once a week, or have his supervisor observe his interactions with two (2) female patients per week. Respondent shall notify the compliance officer in writing of any such absences, in advance if possible. Subject to approval by the Commission's designee, the supervision and therapy requirements shall be stayed during periods when, due to such absences, Respondent cannot meet with or be observed by his supervisor or see his therapist so long as Respondent is otherwise in compliance at the time. Stayed periods of supervision shall be added to the end of the five-year probation period. However, if, due to absences, Respondent is unable to fulfill the supervision and/or therapy requirements for more than four weeks during any twelve (12) month period, the Commission's designee shall exercise the discretion to either (a) allow for an additional stay of the requirement or (b) require Respondent to obtain a new supervisor and/or therapist in the manner described in the November 29, 2007 Agreed Order.

4.4 All other terms and conditions of the November 29, 2007 Agreed Order shall remain in full force and effect.


Section 5: FAILURE TO COMPLY

Protection of the public requires practice under the terms and conditions imposed in this order. Failure to comply with the terms and conditions of this order may result in suspension of the credential after a show cause hearing. If Respondent fails to comply with the terms and conditions of this order, the Commission may hold a hearing to require Respondent to show cause why the credential should not be suspended. Alternatively, the Commission may bring additional charges of unprofessional conduct under RCW 18.130.180(9). In either case, Respondent will be afforded notice and an opportunity for a hearing on the issue of non-compliance.


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Section 6: ACCEPTANCE

I, JOHN P. MOULTON, MD, Respondent, have read, understand and agree to this Agreed Order on Modification. This Agreed Order on Modification may be presented to the Commission without my appearance. I understand that I will receive a signed copy if the Commission accepts this Agreed Order on Modification.


JOHN P. MOULTON, MD
RESPONDENT

DATE 5/16/08


DONNA MONIZ, WSBA#12762
ATTORNEY FOR RESPONDENT

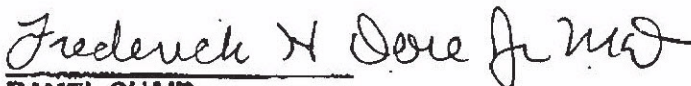
DATE 5-20-08

Section 7: ORDER

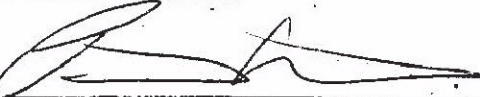
The Commission accepts and enters this Stipulated Findings of Fact, Conclusions of Law and Agreed Order on Modification.

DATED: May 22, 2008.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE COMMISSION


FREDERICK H. DORE JR. MD
PANEL CHAIR

PRESENTED BY:


PETER J. HARRIS, WSBA #24631
DEPARTMENT OF HEALTH STAFF ATTORNEY

DATE 5-22-08



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

RE: John P. Moulton, MD
Master Case number: M2007-58790
Docket No.: 07-01-A-1091MD
Document: Modification Order

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:

Information regarding an individual's health care, including where they received health care services, their medical condition, care provided, etc., pursuant to RCW 42.56.360 (Public Records Disclosure) and RCW 70.02.020 (Medical Records – Health Care Information Access and Disclosure)

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

In the Matter of

JOHN P. MOULTON, MD
Credential No. MD00015837

Respondent

No. M2007-58790
{Docket No. 07-01-A-1091MD}

**STIPULATED FINDINGS OF
FACT, CONCLUSIONS OF LAW
AND SECOND AGREED ORDER
ON MODIFICATION**

The Medical Quality Assurance Commission (Commission), through Peter J. Harris, Department of Health Staff Attorney, and Respondent, represented by counsel, Donna Moniz, stipulate and agree to the following:

Section 1: PROCEDURAL STIPULATIONS

1.1 On November 29, 2007, the Commission entered a Stipulated Findings of Fact, Conclusions of Law and Agreed Order (Agreed Order) in this matter regarding Respondent's license to practice as a physician and surgeon.

1.2 On May 22, 2008, the Commission entered a Stipulated Findings of Fact, Conclusions of Law and Agreed Order on Modification (Modification Order).

1.3 Respondent has petitioned for further modification of the Agreed Order and for modification of the Modification Order. Specifically, Respondent requests:

1.3.1 Modification of Paragraph 4.7 of the Agreed Order, as modified in Paragraph 4.2 of the Modification Order, [REDACTED]

1.3.2 Modification of Paragraph 4.8 of the Agreed Order to allow Respondent to appear before the Commission annually instead of semi-annually.

1.4 The parties agree to resolve this matter by means of this Stipulated Findings of Fact, Conclusions of Law and Second Agreed Order on Modification (Second Modification Order).

1.5 Respondent waives the opportunity for a hearing on the request for modification provided that the Commission accepts this Second Modification Order.

1.6 Respondent understands that this Second Modification Order is not binding unless and until it is signed and accepted by the Commission.

1.7 If the Commission accepts this Second Modification Order, it will be reported to the Health Integrity and Protection Databank (45 CFR Part 61), and it may be reported to the National Practitioner Databank (45 CFR Part 60) and elsewhere as required by law. It is a public document and will be placed on the Department of Health's website and otherwise disseminated as required by the Public Records Act (Chapter 42.56 RCW) and the Uniform Disciplinary Act, RCW 18.130.110.

1.8 If the Commission rejects this Second Modification Order, Respondent waives any objection to the participation at hearing of any Commission members who heard its presentation.

Section 2: FINDINGS OF FACT

The State and Respondent stipulate to the following facts:

2.1 As modified by the Modification Order, Paragraph 4.7 of the Agreed Order requires Respondent to

2.2

2.3

2.4 Paragraph 4.8 of the Agreed Order requires Respondent to appear before the Commission every six months to present proof of his compliance with its terms. Pursuant to that paragraph, the Commission can, in its discretion, change the intervals between compliance appearances.

2.5 Respondent has appeared semiannually before the Commission three times since entry of the Agreed Order. Each time, the Commission has found Respondent to be in compliance with the Agreed Order terms. The Commission can exercise its discretion and change the frequency of Respondent's compliance appearances, subject to the Commission's right to increase the frequency of appearances if warranted

Section 3: CONCLUSIONS OF LAW

The State and Respondent agree to the entry of the following Conclusions of Law:

3.1 The Commission has jurisdiction over Respondent and over the subject matter of this proceeding. Chapter 18.130 RCW, the Uniform Disciplinary Act, governs the discipline of physicians licensed by the Commission.

3.2 The Commission may, in its discretion, modify the Agreed Order and the Modification Order by entering this Agreed Order on Modification.

Section 4: AGREED ORDER

Based on the Findings of Fact and Conclusions of Law, Respondent agrees to the following modifications of the Agreed Order and the Modification Order:

4.1 The Commission modifies Paragraph 4.7 of the Agreed Order, as modified by Paragraph 4.2 of the Modification Order, to require Respondent to see a therapist biweekly. All other terms of that paragraph shall remain in effect as described in the Modification Order. Respondent shall provide a copy of this Second Modification Order to his therapist. The therapist shall notify the Commission if the therapist has any concerns about Respondent's progress in or compliance with therapy, or if the therapist believes for any reason that Respondent would benefit from more frequent therapy.

4.2 The Commission modifies Paragraph 4.8 of the Agreed Order to require Respondent to appear annually before the Commission to present proof of his compliance.

Respondent's next compliance appearance will be scheduled for the June 2010 meeting. The Commission has the discretion to change the frequency of Respondent's compliance appearances if the Commission determines that such a change is warranted.

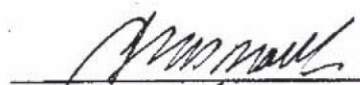
4.3 All other terms and conditions of the Agreed Order as modified by the Modification Order shall remain in full force and effect.

Section 5: FAILURE TO COMPLY

Protection of the public requires practice under the terms and conditions imposed in this order. Failure to comply with the terms and conditions of this order may result in suspension of the credential after a show cause hearing. If Respondent fails to comply with the terms and conditions of this order, the Commission may hold a hearing to require Respondent to show cause why the credential should not be suspended. Alternatively, the Commission may bring additional charges of unprofessional conduct under RCW 18.130.180(9). In either case, Respondent will be afforded notice and an opportunity for a hearing on the issue of non-compliance.

Section 6: ACCEPTANCE

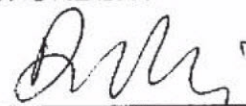
I, JOHN P. MOULTON, MD, Respondent, have read, understand and agree to this Agreed Order on Modification. This Agreed Order on Modification may be presented to the Commission without my appearance. I understand that I will receive a signed copy if the Commission accepts this Agreed Order on Modification.



JOHN P. MOULTON, MD
RESPONDENT

11-25-09

DATE



DONNA MONIZ, WSBA#12762
ATTORNEY FOR RESPONDENT

11-30-09

DATE

Section 7: ORDER

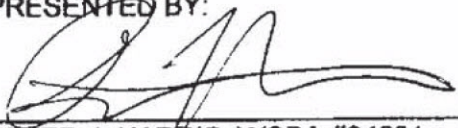
The Commission accepts and enters this Stipulated Findings of Fact, Conclusions of Law and Agreed Order on Modification.

DATED: December 3, 2009.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE COMMISSION

Frederick H. Dore MD
PANEL CHAIR

PRESENTED BY:


PETER J. HARRIS, WSBA #24631
DEPARTMENT OF HEALTH STAFF ATTORNEY
12-3-09
DATE



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

RE: John P. Moulton
Docket No.: 07-01-A-1091MD
Document: Stipulated Findings of Fact, Conclusion of Law and Agreed Order

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: **NONE**

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

In the Matter of

JOHN P. MOULTON, MD
Credential No. MD00015837

Respondent

Docket No. 07-01-A-1091MD

**STIPULATED FINDINGS OF FACT,
CONCLUSIONS OF LAW AND
AGREED ORDER**

The Medical Quality Assurance Commission (Commission), through Peter J. Harris, Department of Health Staff Attorney, and Respondent, represented by counsel, Donna Moniz, stipulate and agree to the following:

1. PROCEDURAL STIPULATIONS

1.1 On April 3, 2007, the Commission issued a Statement of Charges against Respondent.

1.2 In the Statement of Charges, the Commission alleges that Respondent violated RCW 18.130.180(1), (4), and (24).

1.3 Respondent understands that the State is prepared to proceed to a hearing on the allegations in the Statement of Charges.

1.4 Respondent understands that if the allegations are proven at a hearing, the Commission has the authority to impose sanctions pursuant to RCW 18.130.160.

1.5 Respondent has the right to defend against the allegations in the Statement of Charges by presenting evidence at a hearing.

1.6 Respondent waives the opportunity for a hearing on the Statement of Charges provided that the Commission accepts this Stipulated Findings of Fact, Conclusions of Law and Agreed Order. (Agreed Order)

1.7 The parties agree to resolve this matter by means of this Agreed Order.

1.8 Respondent understands that this Agreed Order is not binding unless and until it is signed and accepted by the Commission.

1.9 If the Commission accepts this Agreed Order, it is subject to the federal reporting requirements pursuant to Section 1128E of the Social Security Act and 45 CFR Part 61, RCW 18.130.110 and any other applicable interstate/national reporting

requirements. It is a public document and will be available on the Department of Health web site.

1.10 If the Commission rejects this Agreed Order, Respondent waives any objection to the participation at hearing of any Commission members who heard the Agreed Order presentation.

2. FINDINGS OF FACT

The State and Respondent stipulate to the following facts:

2.1 On June 3, 1977, the state of Washington issued Respondent a credential to practice as a physician and surgeon. Respondent's credential is currently active.

2.2 Respondent is board certified in psychiatry. Respondent provided psychiatric treatment to Patient A at various times from April through July 2005. Respondent's care of Patient A included treating Patient A in April 2005 and June 2005 when Patient A was twice admitted to the psychiatric department of a hospital where Respondent practices. (Hospital 1)

2.3 Respondent and Patient A developed personal and romantic feelings for each other during Patient A's June 2005 hospital admission.

2.4 Respondent arranged for Patient A's transfer to a different hospital (Hospital 2). Respondent took Patient A to his church, where they attended a sermon holding hands. Respondent then took Patient A to the airport so she could transfer to the new hospital. There, Respondent engaged in sexual contact with Patient A by kissing her on the lips.

2.5 While Patient A was at Hospital 2, she and Respondent exchanged personal, romantic correspondence.

2.6 Following Patient A's discharge from Hospital 2 in late June 2005, Respondent continued his personal relationship with Patient A. They dated and engaged in romantic, physical contact, although not intercourse. While on dates, they drank wine even though Patient A had a history of alcohol abuse and possible dependency. Although Respondent had informed Patient A, prior to Patient A's transfer to Hospital 2, that he could no longer act as her physician, he saw her once for a medication review appointment on July 8, 2005.

2.7 Patient A returned to her home state in early July 2005. Respondent and Patient A continued their relationship through personal and romantic correspondence that lasted until August 2005, when their respective spouses learned of the relationship. During this time, Respondent and Patient A discussed possibly having a sexual relationship in the future.

2.8 Mitigating factors apply to this case. Around the time his relationship with Patient A ended, Respondent entered therapy to work on issues that may have been instrumental in his crossing professional and personal boundaries. Respondent is continuing in therapy. Respondent has also taken steps toward taking responsibility for his actions by admitting to and discussing his transgressions with his family and professional colleagues. He has resigned from the practice where he formerly had a patient load of over 500, and he now practices only in an in-patient hospital setting. At the time his relationship with Patient A ended, Respondent repeatedly apologized to Patient A and her husband.

3. CONCLUSIONS OF LAW

The State and Respondent agree to the entry of the following Conclusions of Law:

3.1 The Commission has jurisdiction over Respondent and over the subject matter of this proceeding.

3.2 Respondent has committed unprofessional conduct in violation of RCW 18.130.180(1), (4), and (24).

3.3 The above violations provide grounds for imposing sanctions under RCW 18.130.160.

4. AGREED ORDER

Based on the Findings of Fact and Conclusions of Law, Respondent agrees to entry of the following Agreed Order:

4.1 **Disposition of Credential.** Respondent's credential to practice as a physician and surgeon in the state of Washington is placed on **PROBATION** for five (5) years from the effective date of this Agreed Order. If the Commission allows Respondent to remain in practice following the psycho-sexual evaluation referenced below, and if Respondent otherwise fully complies with the terms of this Agreed Order, Respondent

may petition for modification or early termination of the order after three (3) years, as described in Paragraph 4.9.

4.2 **Psycho-Sexual Evaluation; Modification by the Commission Based on the Evaluator's Assessment.**

- A. Within sixty (60) days of the effective date of this Agreed Order, Respondent shall submit to a psycho-sexual evaluation by either Dr. Les Rawlings or Dr. Robert Wheeler. The evaluator must not have any significant prior personal, therapeutic, professional, or business relationship with Respondent.
- B. To assist in the evaluation, Respondent shall provide the evaluator with a copy of this Agreed Order and any releases for information that the evaluator might request. The Commission or its designee shall provide the evaluator with the investigation report and those materials obtained during the investigation of this case and discovery that the Commission or its designee deems appropriate.
- C. The evaluator shall conduct a complete and thorough assessment, including a review of Respondent's mental health history and Respondent's actions that resulted in this case. The assessment shall include, but not necessarily be limited to, the following components:
 - 1. A complete history of the Respondent, including social, developmental, medical, and psychological and/or psychiatric aspects.
 - 2. Appropriate and sufficient testing to fully evaluate the mental status of the Respondent.
 - 3. A review of this Agreed Order and materials supplied by the Commission.
 - 4. A review of any other physical, psychiatric, psychological, sociological, or other relevant information provided by the Respondent.
 - 5. A review of any other factors and information that the evaluator deems appropriate.

6. A full and detailed discussion of any diagnosis of the Respondent, and a report on the evaluator's assessments, conclusions, and any recommendations for conditions, restrictions and/or treatment which supplement those described in this Agreed Order.

D. In the evaluator's report, the evaluator shall:

1. Provide a psychiatric diagnosis of the Respondent, if any, and fully assess and evaluate all relevant mental and emotional conditions.

2. Describe the evaluation process and Respondent's cooperation in that process.

3. State whether, in the evaluator's opinion, Respondent can practice as a physician, and specifically as a psychiatrist, without posing an unreasonable risk of harm to the public or patients.

4. State an opinion regarding Respondent's capacity to participate in treatment if treatment is indicated.

5. Outline any recommendations for conditions, restrictions and/or treatment which supplement those described in this Agreed Order.

6. If the evaluator believes Respondent can ^{remain in} ~~return to~~ practice without posing an unreasonable risk of harm to the public, the evaluator shall recommend practice restrictions and conditions that the evaluator believes should be imposed to enable Respondent to care for patients with reasonable skill and safety.

7. If the evaluator does not state that Respondent can ^{remain in} ~~return to~~ practice without posing an unreasonable risk of harm to the public, the evaluator shall make recommendations, if any, for steps Respondent might take to increase the likelihood that Respondent can safely return to practice in the future.

E. If the evaluator is concerned that Respondent has violated the conditions of this Agreed Order or has engaged in any behavior which may place clients or the public at risk, the evaluator shall immediately report such concerns to the Commission or its representative.

F. The evaluator will send the report to the Commission's designee.

The Commission may, at its discretion, modify this Agreed Order based on

the evaluator's assessment and recommendations, including any finding that Respondent cannot practice without posing an unreasonable risk of harm to patients or the public. The Commission will give the Respondent notice and the opportunity to be heard regarding any such modification. However, Respondent will not be allowed at that time to dispute the evaluation process, the evaluator's assessment or recommendations, or the terms of this Agreed Order.

4.3 **Dissemination of the Agreed Order.** Respondent is currently employed to practice psychiatry only in an in-patient hospital setting on a part-time basis. This is in addition to the charitable services he occasionally provides. Within two (2) weeks of the effective date of this Agreed Order, Respondent shall provide a copy to the Chief of Psychiatry, the Chief of the Medical Staff, and the head of nursing services at the hospital where Respondent works, as well as to the chairperson or similar authority of each organization for which Respondent provides charitable psychiatric or other medical services. Respondent also must provide a copy of this Agreed Order to each individual subsequently hired or appointed to these positions within thirty (30) days of the date Respondent becomes aware that the person has started in the new position. Respondent shall maintain a list of every person to whom he has provided a copy of this Agreed Order, including the person's name, title, work address and telephone number, and the date on which the copy was delivered, and he shall update the list as needed. Respondent shall provide a copy of the original list to the Commission's designee within six (6) weeks of the effective date of this Agreed Order. Respondent shall provide the Commission's designee with copies of the any updates at the time of the compliance appearances referenced in Paragraph 4.8

4.4 **Supervision.** During the probationary period, Respondent shall be supervised in his practice pursuant to the following terms:

A. Starting on the effective date of this Agreed Order, Respondent shall be supervised by the Chief of Psychiatry at the hospital where he currently practices. Respondent shall provide the name of that person to the Compliance Officer. If a different person fills that position while this Agreed Order is in effect, Respondent shall immediately identify that person to the Compliance Officer, provide the

person with a copy of this Agreed Order, and obtain his or her agreement to fulfill the supervision responsibilities described in this Paragraph 4.4. If for any reason the Chief of Psychiatry is unable to supervise Respondent pursuant to these terms, Respondent may propose an alternative supervisor. The Commission reserves the right to accept or reject any such proposal.

B. The supervisor shall monitor Respondent by observing on a weekly basis his treatment of and interactions with a minimum of two (2) female patients. These observations shall be for the purpose of assuring that Respondent maintains appropriate boundaries. At least once every month, the supervisor shall meet with Respondent to discuss Respondent's maintenance of proper boundaries and any questions or concerns that the supervisor or Respondent might have regarding that subject.

C. Respondent shall ensure that the supervisor submits quarterly reports to the Compliance Officer regarding Respondent's practice and his professionalism and ethics in working with patients. The first report will be due on January 2, 2008. The supervisor shall send reports for the duration of Respondent's probation.

D. If the supervisor has concerns that Respondent has violated the conditions of this Agreed Order or has engaged in any behavior which is unethical or could place a client or the public at risk, the supervisor shall immediately report such concerns to the Commission.

4.5 **Change in Employment.** While he is on probation, Respondent may not change his employment and practice location without prior approval of the Commission. The Commission reserves the right to deny any request by Respondent to move his practice. If the Commission allows Respondent to practice in a different setting, Respondent may not move to the new setting until: (a) Respondent has a new supervisor; (b) Respondent has provided a copy of this Agreed Order to the supervisor; (c) the supervisor has agreed to serve in that capacity pursuant to Paragraph 4.4; and (d) the Commission has approved of the supervisor.

4.6 **Ethics Training.** Within six (6) months of the effective date of this Agreed Order, Respondent shall attend and successfully complete either (a) the ProBE Program offered by the Center for Personalized Education for Physicians or (b) the Vanderbilt

Medical Center, Center for Professional Health course entitled "Maintaining Proper Boundaries". Unsatisfactory performance in the course Respondent chooses to take will constitute non-compliance with the terms of this Agreed Order. This continuing medical education shall be in addition to mandatory continuing education hours required for license renewal.

4.7 **Therapy.** Respondent shall continue in therapy until his treatment provider notifies the Commission's designee that it would be appropriate to end treatment. The provider shall report to the Commission's designee once every three (3) months regarding Respondent's compliance with the therapy regimen, starting on the first day of the first month after the effective date of this Agreed Order. Reports should be sent to Department of Health, Medical Quality Assurance Commission, P.O. Box 47866, Olympia, WA 98504-7866. This requirement is in addition to any other treatment that the evaluator might recommend.

4.8 **Compliance Appearances.** Respondent shall appear in person before the Commission six (6) months from the effective date of this Order, or as soon thereafter as the Commission's schedule permits, and shall present proof that Respondent is complying with the Order. Respondent shall subsequently appear for the duration of this Agreed Order at six (6) month intervals or at such other intervals as the Commission may in its discretion authorize. The Commission will give Respondent notice of the compliance hearings. If Respondent is found to be out of compliance with this Order, the Commission may impose additional sanctions under RCW 18.130.160 to protect the public.

4.9 **Petition for Termination or Modification of this Agreed Order.** Respondent may petition for early termination or modification of this Agreed Order no earlier than three (3) years from its effective date if Respondent has been in full compliance during that three (3) year period and has fulfilled all of the terms of this order. Respondent shall appear in person at a hearing on the petition. At the hearing, the Department may present opposing evidence to be considered by the Commission. After considering the petition and the evidence presented, the Commission will have sole discretion to grant or deny Respondent's petition.

4.10 **Fine.** Respondent shall pay a fine of three thousand (\$3,000.00) within six (6) months of the effective date of this Agreed Order. 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, P.O. Box 1099, Olympia, WA 98507-1099. Failure to pay the fine within six (6) months shall constitute a violation of this Agreed Order.

4.11 **Respondent to Obey the Law.** Respondent shall obey all federal, state and local laws and all administrative rules governing the practice of the profession in Washington.

4.12 **Compliance Costs.** Respondent is responsible for all costs of complying with this Agreed Order.

4.13 **Effect of any Future Violation.** If Respondent violates any provision of this Agreed Order in any respect, the Commission may take further action against Respondent's credential.

4.14 **Change of Address.** Respondent shall inform the Program and the Adjudicative Service Unit, in writing, of changes in Respondent's residential and/or business address within thirty (30) days of the change.

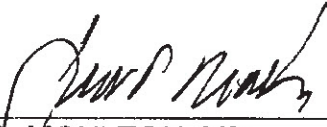
4.15 **Effective Date.** The effective date of this Agreed Order is the date the Adjudicative Service Unit places the signed Agreed Order into the U.S. mail. If required, Respondent shall not submit any fees or compliance documents until after the effective date of this Agreed Order.

5. FAILURE TO COMPLY

Protection of the public requires practice under the terms and conditions imposed in this order. Failure to comply with the terms and conditions of this order may result in suspension of the credential after a show cause hearing. If Respondent fails to comply with the terms and conditions of this order, the Commission may hold a hearing to require Respondent to show cause why the credential should not be suspended. Alternatively, the Commission may bring additional charges of unprofessional conduct under RCW 18.130.180(9). In either case, Respondent will be afforded notice and an opportunity for a hearing on the issue of non-compliance.


6. ACCEPTANCE

I, JOHN P. MOULTON, Respondent, have read, understand and agree to this Agreed Order. This Agreed Order may be presented to the Commission without my appearance. I understand that I will receive a signed copy if the Commission accepts this Agreed Order.



JOHN P. MOULTON, MD
RESPONDENT

11-29-07

DATE


DONNA MONIZ, WSBA#12762
ATTORNEY FOR RESPONDENT

11-29-07

DATE

7: ORDER

The Commission accepts and enters this Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

DATED: November 29, 2007

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE
COMMISSION

Frederick H. Gore Jr MD
PANEL CHAIR

PRESENTED BY:


PETER J. HARRIS, WSBA #24631
DEPARTMENT OF HEALTH STAFF ATTORNEY

11-29-07
DATE

FOR INTERNAL USE ONLY:

PROGRAM NO. 2005-11-0031MD

STIPULATED FINDINGS OF FACT,
CONCLUSIONS OF LAW AND AGREED ORDER
DOCKET NO. 07-01-A-1091MD

PAGE 11 of 11

AO - REV. 10-05



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

RE: John P. Moulton, MD
Master Case No.: M2007-58790
Document: Order of Release

Regarding your request for information about the above-named practitioner; attached is a true and correct copy of the document on file with the State of Washington, Department of Health, Adjudicative Clerk Office. These records are considered Certified by the Department of Health.

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: **NONE**

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 Privacy Officer, Department of Health, P.O. Box 47890, Olympia, WA 98504-7890.



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

RE: John P. Moulton, MD
Master Case No.: M2007-58790
Document: Agreed Order

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

In the Matter of the License to Practice
as a Physician and Surgeon of

JOHN P. MOULTON, MD
License No. MD00015837

Respondent.

**Docket No. 07-01-A-1091MD
No. M2007-58790**

**TERMINATION OF
AGREED ORDER**

This matter comes before the Medical Quality Assurance Commission (Commission), on Respondent's petition to terminate the Stipulated Findings of Fact, Conclusions of Law and Agreed Order dated November 29, 2007, as modified on May 22, 2008 and December 3, 2009. The Commission, having reviewed the record, enters the following Order.

1: PROCEDURAL BACKGROUND

1.1 On June 3, 1977, the Commission entered Stipulated Findings of Fact, Conclusions of Law and Agreed Order dated November 29, 2007 (Agreed Order). The Commission subsequently entered Stipulated Findings of Fact, Conclusions of Law and Agreed Order on Modification dated May 22, 2008 and Stipulated Findings of Fact, Conclusions of Law and Second Agreed Order on Modification dated December 3, 2009.

1.2 On or about June 17, 2011, Respondent filed a petition to terminate the Agreed Order, as modified.

1.3 This Order will be reported to the Health Integrity and Protection Databank (HIPDB) (45 CFR Part 61), and elsewhere as required by law. HIPDB will report this Stipulation to the National Practitioner Databank (45 CFR Part 60).

1.4 This Order is a public document. It will be placed on the Department of Health's website, disseminated via the Commission's listserv, and disseminated according to the Uniform Disciplinary Act (Chapter 18.130 RCW). It is subject to disclosure under the Public Records Act, Chapter 42.56 RCW, and shall remain part of Respondent's file according to the state's records retention law and cannot be expunged.

2: FINDINGS OF FACT

2.1 On June 3, 1977, the state of Washington issued Respondent a license to practice as a physician. Respondent is board certified in Psychiatry by the American Board of Psychiatry and Neurology. Respondent's license is currently active.

2.2 On or about June 17, 2011, Respondent filed a petition to terminate the Agreed Order, as modified.

2.3 Respondent has substantially complied with the terms and conditions of the Agreed Order, as modified.

3: CONCLUSIONS OF LAW

Based on the Findings of Fact, the Commission makes the following Conclusions of Law:

3.1 The Commission has jurisdiction over Respondent and over the subject matter of this proceeding.

3.2 Respondent's petition to terminate the Agreed Order was properly brought before the Commission.

3.3 Respondent's request to terminate the Commission's oversight and monitoring pursuant to the Agreed Order, as modified, should be granted.

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4: ORDER

Based on the Findings of Fact and Conclusions of Law, the Commission enters the following ORDER.

4.1 The Commission GRANTS Respondent's petition and the Commission's oversight and monitoring of Respondent pursuant to the Agreed Order, as modified, is terminated.

DATED: August 4, 2011.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE COMMISSION

Ellen Harder PA-C
ELLEN HARDER, PA-C, PANEL CHAIR

PRESENTED BY:

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