

IN THE MATTER OF H-4172 § BEFORE THE  
THE LICENSE OF § TEXAS STATE BOARD  
BRYAN EDWARD BLEDSOE, D.O. § OF MEDICAL EXAMINERS

AGREED ORDER

On this the 7<sup>th</sup> day of September 2001, came on to be heard before the Texas State Board of Medical Examiners (hereinafter "the Board"), duly in session the matter of the license of Bryan Edward Bledsoe, D.O. (hereinafter "Respondent"). By the signature of Respondent on this Order, Respondent waived the right to appear at an Informal Settlement Conference/Show Compliance Proceeding pursuant to TEX. OCC. CODE ANN. Subtitle B §§154.052 - 054, 164.007, and 164.061 (Vernon 2000) and all rights pursuant to TEX. GOV'T CODE ANN. §§ 2001.051 - 0.54 (West Pamph. 1999), including, but not limited to the right to notice and hearing, and instead agrees to the entry of this Order to resolve the matters addressed herein. Jon E. Porter represented Board staff.

Upon recommendation of the Board's staff and with the consent of Respondent, the Board makes the following Findings of Fact and Conclusions of Law and enters this Order as set forth herein:

FINDINGS OF FACT

A. On April 10, 1999, Respondent and the Board entered into a Confidential Nonpublic Agreed Rehabilitation Order, whereby Respondent's license was restricted for five (5) years under certain terms and conditions, based, in part, on the following Findings of Facts:

"4. On March 15, 1998, Respondent reported to the Board that he had intemperately used hydrocodone orally for a period of two years. He reported he was at that time taking an opiate antagonist and was beginning an outpatient program for treatment of substance abuse. Respondent also requested assistance in

negotiating a non-disciplinary rehabilitative order to facilitate his recovery.

5. Respondent was enrolled in an evening outpatient substance abuse program at Timberlawn Mental Health System from March 18, 1998, to April 30, 1998. The discharge summary from that program diagnosed Respondent with Opioid dependency. Timberlawn listed the following as primary goals for Respondent: (a) develop stress management skills to avoid relapse; (b) learn disease concept specific to opioid abuse; and (c) obtain sponsor and learn recovery principles.
6. Respondent had been hospitalized at Arlington Memorial Hospital from March 2, 1998, to March 4, 1998, for shortness of breath and anemia possibly related to his opiate use and recent weight loss. The medical records also indicate Respondent has a history of migraine headaches.
7. Since at least March 1998, Respondent has been receiving therapy from psychiatrist Edgar P. Nace, M.D. Respondent reported to Dr. Nace that he experienced a relapse in late August or early September of 1998, some 5 months after leaving treatment at Timberlawn.
8. Respondent maintains that his use of hydrocodone began as a prescription from another physician for a legitimate medical condition, a herniated lumbar disc.
9. Since his relapse, Respondent reports participation in Texas Medical Association's Random Drug Screening Program. Respondent reports all screens since September 1998 have been negative."

B. Respondent is not currently in the active practice of medicine.

C. Respondent admits to relapsing and admitted to obtaining Hydromont by writing fictitious prescriptions since September 1999.

#### CONCLUSIONS OF LAW

Based on the above Findings of Fact, the Board concludes the following:

1. Respondent is subject to action by the Board under Sections 164.051(a)(4)(C) and 164.056 of the Act due to Respondent's inability to practice medicine with reasonable skill and safety to patients because excessive use of drugs, narcotics, chemicals, or another substance.
2. Respondent has committed a prohibited act or practice within the meaning of Section 164.052(a)(4) of the Act by using alcohol or drugs in an intemperate manner that, in the Board's opinion, could endanger a patient's life.
3. Respondent has committed a prohibited act or practice within the meaning of Sections 164.052(a)(5) and 164.053(a)(4) of the Act by writing false or fictitious prescriptions for dangerous drugs as defined by Chapter 483, Health and Safety Code, controlled substances scheduled in Chapter 481, Health and Safety Code or controlled substances scheduled in the Comprehensive Drug Abuse Prevention and Control Act of 1970 (21 U.S.C Section 801 et seq.).
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. Sections 164.001(a)(1) and 164.001(b)(3) of the Act authorize the Board to suspend Respondent's license.

#### ORDER

Based on the above Findings of Fact and Conclusions of Law, the Board **ORDERS** that Respondent's Texas medical license is hereby **SUSPENDED** until he can demonstrate with objective evidence no less than six months of sobriety and until such time as Respondent requests in writing to have the suspension stayed. Furthermore, Respondent must personally appear before the Board and provide sufficient and objective evidence and information which in the discretion of the Board adequately

indicates that Respondent is physically, mentally, and otherwise competent to safely practice medicine.

Before, Respondent may petition for termination of the suspension, Respondent must admit himself into an in-patient drug treatment center, to be approved in advanced by the Executive Director of the Board. Respondent shall submit his request to the Director of Compliance. Prior to the hearing being set, Respondent shall sign a release to have a complete copy of his medical records from the treatment center sent directly to the Board.

Objective evidence to show Respondent is physically, mentally, and otherwise competent to safely practice medicine shall include at a minimum, but shall not be limited to, complete legible copies of medical records and reports of psychological and neuropsychiatric evaluations conducted during in-patient treatment, addressing Respondent's current mental and physical status and clearly indicating that Respondent is able to safely practice medicine. Such records, reports, and evaluations shall specifically address any potential or actual impairment of Respondent due to substance abuse or an organic mental condition, and shall address any tendencies toward compulsive behavior, relapse, recidivism, or recurrence in regard to the possibility of actions, conditions, or misconduct similar to that described in the preceding findings of fact.

Respondent shall provide a copy of this Order to the treatment center as a reference for the evaluations. Respondent shall execute any and all releases for medical records necessary to effectuate the provisions of this paragraph.

Upon discharge from the treatment center, Respondent shall provide a copy of any aftercare agreement Respondent enters into. Respondent must comply with the terms and conditions of the aftercare agreement and present to the Board evidence of compliance with said agreement.

Upon an adequate showing before the Board that Respondent is able to safely practice medicine, the suspension of Respondent's license shall be stayed and Respondent shall be placed on probation under such terms and conditions and for a length of time as is determined by the Board.

The Board further ORDERS:

1. Within seven (7) days of the adoption of this Order, Respondent shall surrender to the appropriate agency Respondent's Drug Enforcement Administration (DEA) Controlled Substances Registration Certificate and Texas Department of Public Safety (DPS) Controlled Substances Registration Certificate, and shall promptly sign the appropriate DEA and DPS forms to accomplish the cancellation of these registrations. Respondent shall not attempt to reregister or otherwise obtain Controlled Substances Registrations without prior written authority from the Board. Such authority may be granted upon Respondent's petition to the Board and through a personal appearance before the Board, a committee of the Board, or authorized Board representatives. The granting of such authority is discretionary with the Board and shall not control any decision by DEA or DPS in regard to granting or denying any application by Respondent for the return of controlled substance registrations.

2. Respondent shall abstain from the consumption of alcohol, dangerous drugs, or controlled substances in any form unless prescribed by another physician to Respondent for a legitimate and documented therapeutic purpose.

In the event that Respondent receives alcohol, dangerous drugs, or controlled substances from another physician for the purpose of treating Respondent, Respondent shall cause the treating physician to report in writing to the Board, within forty-eight (48) hours, the medical condition being treated, the substance prescribed, dispensed or administered, the amount of such substance and any refills authorized, or shall have the treating physician provide the Board with a copy of Respondent's medical record which substantially reflects this information.

Respondent shall give the treating physician a copy of this Order and shall ensure that the treating physician makes a report to the Board or that a copy of Respondent's medical record is provided by the treating physician to the Board.

Respondent shall immediately report by telephone to Respondent's compliance officer or the Director of Compliance, to be followed by a letter within twenty-four (24) hours, an explanation of any incident in which Respondent ingests any alcohol, controlled substances, or dangerous drugs in any manner not prescribed by another physician for a legitimate and therapeutic medical purpose.

3. Respondent shall submit himself for appropriate examinations, including screening for alcohol or drugs either through a urine, breath, blood, or hair specimen, at the request of a representative of the Board, without prior notice, to determine chemically through laboratory analysis that Respondent is free of prohibited drugs and alcohol. Respondent shall pay for the costs of these chemical analyses. A positive screen for drugs or alcohol consumed in violation of the terms of this Order, or a refusal to submit to random screenings shall constitute a violation of this Order and may result in further disciplinary action pursuant to the Act.

4. Respondent shall be solely responsible for the payment of all costs and charges by any facility which conducts screens on Respondent pursuant to this Order to determine whether or not Respondent has ingested alcohol or drugs in violation of the terms set forth herein. Respondent shall promptly pay all such costs and charges. Respondent's failure to promptly pay the legitimate costs and charges associated with such screens shall constitute unprofessional and dishonorable conduct, a violation of this Order, and grounds for disciplinary action under the Act.

5. To verify that Respondent has complied with and is in compliance with the terms and conditions of this Order, Respondent shall fully cooperate with the Board and the Board staff, including but not limited to, Board attorneys, investigators, compliance officers, consultants, and other such 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 cooperate as required by this paragraph and the terms of this Order shall constitute a basis for disciplinary action against Respondent pursuant to the Act.

6. Upon request by the Board or a member of the Board staff, Respondent shall immediately execute, and provide as needed, any and all medical releases as may be requested by the Board or Board staff to obtain copies of medical treatment records of Respondent to include, but not limited to, any such releases required to obtain treatment records of Respondent protected by 42 U.S.C. §290dd-2 (1998), and any subsequent amendments. Failure to execute and provide such releases shall constitute a basis for disciplinary action against Respondent pursuant to the Act.

7. Respondent shall inform the Board in writing of any change of Respondent's office or mailing address within ten (10) days of the address change. This information shall be submitted to the Permits Department and the Director of Compliance for 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.

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

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.

I, BRYAN EDWARD BLEDSOE, D.O., 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: Aug. 14, 2001.

  
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BRYAN EDWARD BLEDSOE, D.O.  
RESPONDENT

STATE OF \_\_\_\_\_

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§  
§

COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned Notary Public, on this day personally appeared Bryan Edward Bledsoe, D.O. known to me to be the person whose name is subscribed to this instrument, an Agreed Order, and who after being by me duly sworn, on oath, stated that he executed the same for all purposes expressed therein.

Given under my hand and official seal and office this 14<sup>th</sup> day of August, 2001.



Signature of Notary Public

(Notary Seal)

GAIL M. VIA

Printed or typed name of Notary Public

My commission expires: \_\_\_\_\_

Notary Public, Gwinnett County  
My Commission Expires November 27, 2003

SIGNED AND ENTERED by the presiding officer of the Texas State Board of Medical Examiners on this 7<sup>th</sup> day of September ~~2000~~. 2001



Lee S. Anderson, M.D.  
President, Texas State Board of  
Medical Examiners