

IN THE MATTER OF
THE LICENSE OF
BRYAN E. BLEDSOE, D.O.

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BEFORE THE
TEXAS STATE BOARD
OF MEDICAL EXAMINERS

AGREED ORDER

On this the 28 day of March, 2003, 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 E. BLEDSOE, D.O. (hereinafter "Respondent"). On October 18, 2002 Respondent appeared in person at an Informal Settlement Conference/Show Compliance Proceeding in response to a letter of invitation from the staff of the Board. Victoria White, J.D. represented Board staff.

The Board was represented at the Informal Settlement Conference/Show Compliance Proceeding by Patricia Blackwell, member of the Board and Kevin R. Smith, member of the District Review Committee. Upon recommendation of the Board's representatives, 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

1. The Board has jurisdiction over the subject matter and Respondent. Respondent received all notice, which may be required by law and by the rules of the Board. All jurisdictional requirements have been satisfied under TEX. OCC. CODE ANN. Subtitle B (Vernon 2002), (hereinafter the "Act"). By entering into this Agreed Order, Respondent waives any defect in the notice and any further right to notice or hearing.

2. 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:

"A. 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.

B. 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.

C. 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.

D. 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.

E. Respondent maintains that his use of hydrocodone began as a prescription from another physician for a legitimate medical condition, a herniated lumbar disc.

F. 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."

3. Respondent admitted to relapsing and admitted to obtaining Hydroment by writing fictitious prescriptions since September 1999.

4. In September of 2001, Respondent entered into an Agreed Order that suspended his license for six (6) months until he would be able to demonstrate evidence of sobriety and requests in writing to have the suspension stayed.

5. On October 18, 2002, Respondent provided evidence that he voluntarily admitted himself to Metro Atlanta Recovery Residency (MARR).

6. He provided proof that he successfully completed the program at MARR.

7. Respondent produced accurate AA Logs.

8. Respondent produced evidence of his success in AA including a letter from his AA Sponsor.

9. The panel found that Respondent provided sufficient evidence of recovery and displayed a willingness to comply with the Board.

CONCLUSIONS OF LAW

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

1. 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.

2. Respondent has committed a prohibited act or practice within the meaning of Section 164.052(a)(5) of the Act based upon unprofessional or dishonorable conduct that is likely to deceive or defraud the public or injure the public.

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

4. Sections 164.001(a)(1) and 164.001(b)(3) of the Act authorize the Board to suspend Respondent's license.

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 of Fact and Conclusions of Law, the Board ORDERS that Respondent's Texas license is hereby SUSPENDED. The suspension is immediately stayed and Respondent is placed on PROBATION under the following terms and conditions for ten (10) years from the date of the signing of this Order by the presiding officer of the Board:

1. 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 the treating physician provides a copy of Respondent's medical record 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.

2. Respondent shall submit himself for appropriate examinations, including screening for alcohol or drugs either through a urine, 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. Should the Respondent test positive for alcohol, dangerous drugs or controlled substances that have not been prescribed by another physician and properly reported to the Board in accordance with paragraph 1. of the Agreed Order, that shall constitute a violation of this Order. After a committee of the Board or a panel of Board representatives, has considered the information related to the Respondent's violation of this provision and determined that Respondent has not fulfilled the requirements of this provision, Respondent's medical license shall be immediately REVOKED pursuant to correspondence to Respondent from the Executive Director of the Board indicating that a committee of the Board representatives, has considered the information related to Respondent's violation of this provision and has determined that Respondent has violated the Order. THIS REVOCATION SHALL BE EFFECTIVE WITHOUT THE NEED OF A HEARING OR OTHER ADMINISTRATIVE DUE PROCESS UNDER THE ACT OR THE ADMINISTRATIVE PROCEDURE ACT, AND RESPONDENT SPECIFICALLY WAIVES ANY SUCH HEARING OR DUE PROCESS. Respondent shall be notified of any revocation by certified mail, return receipt requested to Respondent's last known address on file with the Board.

3. 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.

4. Within thirty (30) days of the signing of this Order by the presiding officer of the Board, Respondent shall undergo a complete examination by a physician approved in advance in writing by the Executive Director of the Board, and Respondent shall undergo continuing care and treatment by the approved physician for the treatment of any condition which, without adequate treatment, could adversely affect Respondent's ability to safely practice medicine.

Respondent shall authorize and request in writing that the approved physician provide written periodic reports no less than once each quarter during Respondent's treatment which reflect the status of Respondent's physical and mental condition, as well as Respondent's efforts at cooperation with treatment. Respondent shall authorize and request in writing that the approved physician provide such other written or oral reports as Board representatives and staff may request regarding Respondent's care and treatment within seven (7) days of the request. Respondent shall follow all recommendations of the approved physician to the extent that the recommendations are consistent with the terms of this Order as determined by the Board. Respondent shall not unilaterally withdraw from treatment, and shall request and authorize in writing that the approved physician report to the Board within forty-eight (48) hours any unilateral withdrawal from treatment by Respondent. A copy of this Order shall be provided by Respondent to the approved physician as a reference for evaluation and treatment, and as authorization for the physician to provide to the Board any and all records and reports related to the evaluation and treatment conducted pursuant to this paragraph. Upon request, Respondent shall execute any and all releases for medical records necessary to effectuate the provisions of this paragraph and this Order. Respondent shall authorize and request in writing that the approved physician provide written periodic reports no less than quarterly during Respondent's treatment which reflect the status of Respondent's physical and mental condition, as well as Respondent's efforts at cooperation with treatment. Such reports are due March 1, June 1, September 1 and December 1 or more often if desired by the chairman or requested by the Board or Board staff. Respondent shall authorize and participate in alcohol or drug screens directed by the approved physician and shall authorize in writing the approved physician to immediately provide the positive results of any such screens to Board staff. Respondent shall authorize and request in writing that the approved physician immediately provide such other written or oral reports as Board representatives and staff may request regarding Respondent's care and treatment. Respondent shall follow all recommendations of the approved physician to the extent that the recommendations are consistent with the terms of this Order as determined by the Board. Respondent shall not unilaterally withdraw from treatment, and shall request and authorize in writing that the approved physician immediately reports to the Board any

unilateral withdrawal from treatment by Respondent. Respondent shall provide a copy of this Order to the approved physician as a reference for evaluation and treatment, and as authorization for the physician to provide to the Board any and all records and reports related to the evaluation and treatment conducted pursuant to this paragraph. Respondent shall execute any and all releases for medical records necessary to effectuate the provisions of this paragraph.

5. Respondent's unilateral withdrawal from evaluation, treatment, or medical care required by this Order shall constitute unprofessional and dishonorable conduct, a violation of this Order, and grounds for disciplinary action under the Act.

6. In addition to any other requirements in this Order, Respondent shall submit to alcohol and drug screens by any of the physicians or other healthcare professionals required and authorized to evaluate or treat Respondent pursuant to the terms of this Order. A copy of this Order shall be provided by Respondent to the approved healthcare professionals as authorization for the healthcare professionals to provide to the Board any and all records and reports related to the evaluation and treatment of Respondent to include, but not limited to, immediate transmission of the results of any drug or alcohol screens which may indicate Respondent has ingested alcohol or drugs in violation of this Order. Respondent shall execute any releases of medical records necessary to effectuate the provisions of this paragraph. Respondent's failure to promptly submit to such screens, or a test result, which indicates that Respondent has ingested alcohol or drugs in violation of the terms of this Order, shall constitute professional and dishonorable conduct, a violation of this Order, and grounds for disciplinary action under the Act.

7. Respondent shall immediately notify in writing the Director of Compliance for the Board or a Board Compliance Officer upon discontinuation for any reason of any care and treatment required by the terms of this Order.

8. Respondent shall not unilaterally withdraw from the evaluation, care, or treatment required by this Order, and shall request and authorize in writing that Respondent's physician or any other individuals involved in Respondent's care and treatment immediately report to the Board any unilateral withdrawal from treatment by Respondent.

9. The Respondent shall continue to participate in the activities and programs of Alcoholics Anonymous (AA), or any other substantially similar program which has been approved in writing by the Executive Director of the Board, on a regular basis of not less than three (3) a week. Respondent shall maintain documentation as to the number; the locations of meetings attended and make such documentation available to the Board staff upon request.

10. Respondent shall continue to participate in the activities of a county or state medical society committee on physician health and rehabilitation, including participation in weekly meetings, if any. Respondent shall request in writing that the chairman of the committee or the chairman's designee make written reports of Respondent's attendance and participation in the committee's activities on March 1, June 1, September 1, and December 1 of each year, or more often if desired by the chairman or requested by the Board or Board staff. The chairman shall be provided with a copy of this Order by Respondent and authorized in writing by Respondent to report both orally and in writing to the Board or Board staff on Respondent's rehabilitation efforts or failure to adequately participate in committee activities. Respondent shall also immediately submit to drug and alcohol screens upon the request of the chairman of the committee or the chairman's designee, and shall authorize in writing the chairman or the chairman's designee to transmit the results of such screens to the Board staff.

11. Separate from patient records, Respondent shall maintain a file consisting of a copy of every prescription written by Respondent for dangerous drugs with addictive potential or potential for abuse by date issued. This file of prescription copies shall be available for inspection by compliance officers, investigators, and other representatives of the Board during regular office hours without notice to Respondent. Respondent shall not telephone to a pharmacy any prescription or refill of such drugs. In the event Respondent is subsequently authorized to prescribe any controlled substances, the requirements of this paragraph shall also apply to all prescriptions by Respondent for controlled substances.

12. Except as otherwise provided for by the terms of this Order, Respondent shall not treat or otherwise serve as a physician for Respondent's immediate family, and Respondent shall not prescribe, dispense, administer or authorize controlled substances,

dangerous drugs with addictive potential or potential for abuse, or alcohol to Respondent or Respondent's immediate family. Respondent may self-administer or administer to Respondent's immediate family only such drugs and alcohol as prescribed by other physician for a legitimate medical purpose and in compliance with the orders and directions of such physician.

13. For any office-based practice, Respondent shall maintain adequate medical records on all patient office visits, consultations, surgeries performed, drugs provided, and treatment rendered by Respondent. These records will include at a minimum, the patient's name and address, vital signs and statistics, chief complaints, history and physical findings, diagnosis and basis for diagnosis, treatment plan for each patient visit or operative procedure, a notation of all medications prescribed or otherwise provided to the patient including the quantity, dosage, and rationale for providing the medications, and detailed records of all follow-up visits. Each visit shall be noted in the patient record and dated accordingly. Respondent shall make all patient medical records available for inspection and copying upon the oral or written request of Board consultants, investigators, compliance officers, attorneys, monitoring physicians or the Executive Director of the Board.

13. For an institutional-based practice, Respondent shall comply with all provisions of the Act and Board Rules that address the adequacy of medical records. Respondent shall maintain a record, which shows the hospital emergency department(s) where he provides emergency medical care to patients, and the date(s) on which he provided patient care at each hospital emergency department. Upon the request of Board staff, including but not limited to, Board consultants, investigators, compliance officers, attorneys, monitoring physicians or the Executive Director of the Board, Respondent shall provide a copy of this record within ten (10) days of receipt of such request.

14. Respondent shall obtain at least fifty (50) hours per year of Continuing Medical Education (CME) approved for Category I credits by the American Medical Association or by the American Osteopathic Association. Upon request Respondent shall submit to the Board proof of the prior year's CME attendance by the Order's anniversary date. Upon request Respondent shall submit proof to the Board of CME hours attended in the current year even though such may not meet the 50-hour requirement. A copy of

the attendance certificate issued or a detailed report, which can be readily verified by the Board, shall satisfy this requirement.

15. The time period of this Order shall be extended for any period of time, in which Respondent subsequently resides or practices outside the State of Texas, is in official retired status with the Board, or for any period during which Respondent's license is subsequently cancelled for nonpayment of licensure fees. If Respondent leaves Texas to live or practice elsewhere, Respondent shall immediately notify the Board in writing of the dates of Respondent's departure from and subsequent return to Texas. Upon Respondent's return to practice in Texas or Respondent's relicensure, Respondent shall be required to comply with the terms of this Order for the period of time remaining on the Order when Respondent left the practice of medicine in Texas, retired, or had his license cancelled for nonpayment of licensure fees and shall pay all fees for reinstatement or renewal of a license covering the period of extension or tolling.

16. Respondent shall comply with all the provisions of the Act, and other statutes regulating the Respondent's practice, as required by law.

17. 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 Verification 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.

18. 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, and/or rescind the probation and enforce the Board's original Order pursuant to Section 164.103 of the Act.

19. The above-referenced conditions shall continue in full force and effect without opportunity for amendment, except for clear error in drafting, for 12 months following entry of this Order. If, after the passage of the 12-month period, 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.

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INTENTIONALLY BLANK

THIS ORDER IS A PUBLIC RECORD.

I, BRYAN E. BLEDSOE, 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: Feb 3 2002. 2003



BRYAN E. BLEDSOE, ~~M.D.~~ D.O.
RESPONDENT

STATE OF Texas

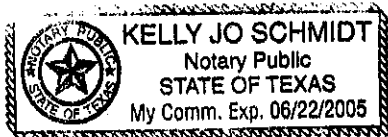
COUNTY OF Ellis

BEFORE ME, the undersigned Notary Public, on this day personally appeared BRYAN E. BLEDSOE, M.D. 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 3 day of February, ~~2002~~ 2003

Kelly J. Schmidt
Signature of Notary Public

(Notary Seal)



Kelly J. Schmidt
Printed or typed name of Notary Public

My commission expires: 6-22-2005

SIGNED AND ENTERED by the presiding officer of the Texas State Board of Medical Examiners on this 28 day of March, ~~2002~~ 2003.

Lee S. Anderson

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