

# PUBLIC

STATE OF NEW YORK                      DEPARTMENT OF HEALTH  
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

BPMC #: 13-113

IN THE MATTER

OF

**NORMAN FRANKLIN WILLIAMS, M.D.**  
**CO-12-11-5741-A**

**COMMISSIONER'S  
SUMMARY  
ORDER**

**TO:    NORMAN FRANKLIN WILLIAMS, M.D.**  
**ADDRESS REDACTED**

The undersigned, Nirav R. Shah, M.D., M.P.H., Commissioner of Health, pursuant to New York Public Health Law §230, upon the recommendation of a Committee on Professional Medical Conduct of the State Board for Professional Medical Conduct, has determined that the duly authorized professional disciplinary agency of another jurisdiction, the State of Illinois, Department of Financial and Professional Regulation, Division of Professional Regulation, has made a finding substantially equivalent to a finding that the practice of medicine by **NORMAN FRANKLIN WILLIAMS, M.D.**, Respondent, New York license number 251866, in that jurisdiction, constitutes an imminent danger to the health of its people, as is more fully set forth in the Order, dated September 27, 2012 and attached papers, attached, hereto, as Appendix "A," and made a part, hereof.

It is, therefore:

ORDERED, pursuant to New York Public Health Law §230(12)(b), that effective immediately, **NORMAN FRANKLIN WILLIAMS, M.D.**, shall not practice medicine in the State of New York or in any other jurisdiction where that practice is predicated on a valid New York State license to practice medicine.

**ANY PRACTICE OF MEDICINE IN THE STATE OF NEW YORK IN VIOLATION OF THIS ORDER SHALL CONSTITUTE PROFESSIONAL MISCONDUCT WITHIN THE MEANING OF NEW YORK EDUCATION LAW §6530(29) AND MAY CONSTITUTE UNAUTHORIZED MEDICAL PRACTICE, A FELONY DEFINED BY NEW YORK EDUCATION LAW §6512.**

This Order shall remain in effect until the final conclusion of a hearing which shall commence within thirty (30) days after the final conclusion of the disciplinary proceeding in Illinois.

The hearing will be held pursuant to the provisions of New York Public Health Law §230, and New York State Administrative Procedure Act §§301-307 and 401. The hearing will be conducted before a committee on professional conduct of the State Board for Professional Medical Conduct on a date and at a location to be set forth in a written Notice of Referral Proceeding to be provided to the Respondent after the final conclusion of the Illinois proceeding. Said written Notice may be provided in person, by mail, or by other means. If Respondent wishes to be provided said written notice at an address other than that set forth above, Respondent shall so notify, in writing, both the attorney whose name is set forth in this Order, and the Director of the Office of Professional Medical Conduct, at the addresses set forth below.

**RESPONDENT SHALL NOTIFY THE DIRECTOR OF THE OFFICE OF PROFESSIONAL MEDICAL CONDUCT, NEW YORK STATE DEPARTMENT OF HEALTH, RIVERVIEW CENTER, SUITE 355, 150 BROADWAY, ALBANY, NY 12204, VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED, OF THE FINAL CONCLUSION OF THE PROCEEDING IMMEDIATELY UPON SUCH**

**CONCLUSION.**

**THESE PROCEEDINGS MAY RESULT IN A DETERMINATION THAT YOUR LICENSE TO PRACTICE MEDICINE IN NEW YORK STATE BE REVOKED OR SUSPENDED AND/OR THAT YOU BE FINED OR SUBJECT TO OTHER SANCTIONS SET FORTH IN NEW YORK PUBLIC HEALTH LAW §230-a. YOU ARE URGED TO OBTAIN AN ATTORNEY TO REPRESENT YOU IN THIS MATTER.**

DATE: Albany, New York  
April 22 2013

**SIGNATURE REDACTED**

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**NIRAV R. SHAH, M.D., M.P.H.**  
Commissioner of Health  
New York State Department of Health

Inquires should be directed to:

Michael G. Bass  
Assistant Counsel  
Bureau of Professional Medical Conduct  
Corning Tower – Room 2512  
Empire State Plaza  
Albany, New York 12237  
(518) 473-4282

# Appendix A

**STATE OF ILLINOIS  
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
DIVISION OF PROFESSIONAL REGULATION**

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION of the State of Illinois,	)	
	)	
v.	)	
Norman F. Williams, M.D., License No. 036.125427, CS License No. 336.086662,	)	Complainant, ) No. 2012-05166 ) ) ) Respondent. )

12 SEP 27 AM 10:40  
CLERK OF COURT

ILL. DEPT. OF FIN. & PROF. REG.

**ORDER**

This matter having come before the Director of the Division of Professional Regulation of the Illinois Department of Financial and Professional Regulation, on a Petition filed by the Chief of Medical Prosecutions of the Division, which requested Temporary Suspension of the Illinois Physician and Surgeon License and Illinois Controlled Substance License of Respondent, Norman F. Williams, M.D., and the Director, having examined the Petition, finds that the public interest, safety and welfare imperatively require emergency action to prevent the continued practice of Norman F. Williams, M.D., Respondent, in that Respondent's actions constitute an immediate danger to the public.

NOW, THEREFORE, I, JAY STEWART, DIRECTOR OF THE DIVISION OF PROFESSIONAL REGULATION of the State of Illinois, hereby ORDER that the Illinois Physician and Surgeon License, License No. 036.125427, and the Illinois Controlled Substance Licenses, License No. 336.086662, of Respondent, Norman F. Williams, M.D., to practice medicine as a Physician and Surgeon in the State of Illinois be **SUSPENDED**, pending proceedings before an Administrative Law Judge at the

Department of Financial and Professional Regulation and the Medical Disciplinary Board  
of the State of Illinois.

I FURTHER ORDER that Respondent shall immediately surrender all indicia of  
licensure to the Department.

DATED THIS 27<sup>th</sup> DAY OF September, 2012.

**DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION of the State of  
Illinois  
Division of Professional Regulation**

SIGNATURE REDACTED

\_\_\_\_\_  
**JAY STEWART**  
Director

Ref: IDFPR Case No. 2012-05166  
License No. 036.125427 and CS License No. 336.086662

**STATE OF ILLINOIS  
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
DIVISION OF PROFESSIONAL REGULATION**

1. DEPT. OF FIN. & PROF. REG. ADP  
FILE

12 SEP 27 AM 10:40

CLERK OF THE COURT

DEPARTMENT OF FINANCIAL AND	)
PROFESSIONAL REGULATION	)
of the State of Illinois,	)
	)
v.	)
Norman F. Williams, M.D.,	)
License No. 036-125427,	)
CS License No. 336-086662,	)
	)
Complainant,	)
	)
	)
Respondent.	)

No. 2012-05166

**NOTICE OF TEMPORARY SUSPENSION**

To: Norman F. Williams, M.D.  
Gastroenterology Consultants  
545 Valley View Dr  
Moline, IL 61265-6138

PLEASE TAKE NOTICE that the Director of the Division of Professional Regulation of the State of Illinois signed the attached ORDER which provides that your Illinois Physician and Surgeon License, License No. 036-125427 and Illinois Controlled Substance License No. 336-086662 are **TEMPORARILY SUSPENDED**. Copies of the ORDER, Petition, Complaint and Affidavits on which it is based, are attached.

FURTHERMORE, on October 10 and October 11, 2012, at 10:00 a.m., the Medical Disciplinary Board of the Department of Financial and Professional Regulation of the State of Illinois will hold a hearing at 100 W. Randolph Street, Suite 9-300, Chicago, Illinois 60601, to determine the truth of the charges set forth in the attached Complaint. At the hearing you will be given an opportunity to present such statements, testimony, evidence and argument as may be pertinent to or in defense to the charges.

It is required that you appear at the hearing unless the matter is continued in advance. Failure to attend the hearing at the time and place as stated above may result in a decision being made, in your absence, to continue the suspension of your license. You have the right to retain counsel to represent you in this matter and, in the opinion of this Department; it is advisable to be represented by a lawyer.

It is required that you file a VERIFIED ANSWER to the attached Complaint with the Department of Financial and Professional Regulation by the date of the hearing.

No CONTINUANCE of a hearing will be granted except at the discretion of the Committee or Board. A written motion for continuance must be served on the Department of Financial and Professional Regulation at least three (3) business days before the date set for the Hearing and must set forth the reasons why holding the hearing on the date indicated will cause undue hardship.

Your ANSWER, your lawyer's APPEARANCE, and all MOTIONS or papers should be filed with the Clerk of the Court of the Department of Financial and Professional Regulation, at 100 W. Randolph Street, Suite 9-300, Chicago, IL 60601.

RULES OF PRACTICE IN ADMINISTRATIVE HEARINGS IN THE DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION BEFORE COMMITTEES OR BOARDS OF SAID DEPARTMENT are accessible at <http://www.idfpr.com/PROFS/Info/Physicians.asp> or available upon request.



**DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION of the State of  
Illinois**

By: SIGNATURE REDACTED

Laura E. Forester  
Chief of Medical Prosecutions

Molly Pankauskas  
711 Law Clerk, Medical Prosecutions  
Illinois Department of Financial and Professional Regulation  
Division of Professional Regulation  
100 West Randolph, Suite 9-300  
Chicago, Illinois 60601  
312/814-7082  
Molly.Pankauskas@illinois.gov

**STATE OF ILLINOIS  
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
DIVISION OF PROFESSIONAL REGULATION**

DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION  
of the State of Illinois,

)  
)  
)  
Complainant, )

v.

Norman F. Williams, M.D.,  
License No. 036.125427,  
CS License No. 336.086662,

)  
)  
)  
Respondent. )

No. 2012-05166

**PETITION FOR TEMPORARY SUSPENSION**

NOW COMES the Complainant, by its Chief of Medical Prosecutions, Laura F. Forester, and Petitions JAY STEWART, Director of the Division of Professional Regulation, Department of Financial and Professional Regulation of the State of Illinois, pursuant to 225 Illinois Compiled Statutes , Section 60/37 to issue an Order for Temporary Suspension of the Illinois Physician and Surgeon License, License No. 036-125427 and the Illinois Controlled Substance License, License No. 336.086662 of Norman F. Williams, M.D., Respondent. In support of said Petition, Petitioner alleges as follows:

1. Respondent is presently the holder of a Certificate of Registration as a Physician and Surgeon in the State of Illinois, License No. 036.125427, and Controlled Substance License No. 336.086662 issued by the Department of Financial and Professional Regulation of the State of Illinois. Said Licenses are presently in Active Status.

2. It has come to the Department's attention that Respondent has allegedly engaged in a pattern of sexually inappropriate conduct and/or behavior with two patients, patient S.W. and patient D.R., while Respondent was responsible for the care, treatment and evaluation of said two patients.
3. Specifically, Respondent allegedly touched patient S.W.'s vagina during an office visit with said patient. Respondent has been charged with the felony offense of criminal sexual assault in that on or about April 5, 2012, Respondent rubbed the labia and clitoris of patient S.W. while she was undergoing a routine appointment at Respondent's office at Gastroenterology Consultants in Moline, Illinois.
4. On September 21, 2012, Respondent was charged with the felony offense of criminal sexual assault in that on or about April 5, 2012, Respondent committed an act of sexual penetration with patient S.W. To wit, Respondent placed his fingers on the vagina of patient S.W. in violation of 720 ILCS 5/11-1.20(a)(1). See Exhibit A.
5. In addition, Respondent allegedly touched patient D.R.'s vagina during an office visit with said patient. Respondent has been charged with the felony offense of criminal sexual assault in that on or about June 29, 2011, Respondent inserted two of his fingers in patient D.R.'s vagina numerous times and rubbed the clitoris of patient D.R. while she was undergoing a follow-up appointment at Respondent's office at Gastroenterology Consultants in Moline, Illinois.
6. On September 21, 2012, Respondent was charged with the felony offense of criminal sexual assault in that on or about June 29, 2011, Respondent committed an act of sexual penetration with patient D.R. To wit, Respondent placed his fingers in the vagina of D.R. in violation of 720 ILCS 5/12-13(a)(1). See Exhibit A.

7. On November 7, 2003, Respondent entered into a Public Consent Order with the Composite State Board of Medical Examiners of the State of Georgia wherein he agreed his Georgia license would be Reprimanded and placed on Probation for a period of five (5) years with conditions, that he would complete specific continuing medical education courses, and that he would pay a fine of twenty thousand dollars (\$20,000.00). Said discipline was based on allegations that Respondent: signed blank prescriptions and made them available for use at a later date by non-physician clinic personnel in the prescribing of controlled substances to patients; directed non-physician personnel to see patients without a physician present and fill in the blank prescriptions previously signed by Respondent with various controlled substances; signed entries on patients' medical charts that were made by non-physician clinic personnel without personally examining or seeing the patients; wrote numerous prescriptions for controlled substances to various members of his family; and failed to keep proper medical records. Respondent violated said Public Consent Order on two separate occasions. See Exhibit B.
8. On April 6, 2010, Respondent entered into a Consent Order with the Department wherein he agreed his Illinois license would be Reprimanded due to the discipline entered by the State of Georgia. See Exhibit C.
9. In addition, it has come to the Department's attention that Respondent has allegedly engaged in a pattern of sexually inappropriate conduct and/or behavior with two other patients, patient D.B. and patient T.J.H., while Respondent was responsible for the care, treatment and evaluation of said two patients. To wit, Respondent allegedly touched patient D.B.'s vagina during an office visit with

said patient on or about August 14, 2012; Respondent allegedly engaged in sexually inappropriate conduct and/or behavior with patient T.J.H. during an office visit with said patient on or about July 10, 2012.

10. Brian Zachariah, M.D., Chief Medical Coordinator of the Illinois Department of Financial and Professional Regulations, Division of Professional Regulation, has been consulted in this matter and believes that the continued practice of medicine by Respondent, Norman F. Williams, M.D., presents an immediate danger to the safety of the public in the State of Illinois. See Exhibit D.

Petitioner further alleges that the public interest, safety and welfare imperatively require emergency action, in that Respondent's continued practice of medicine constitutes an immediate danger to the public.

WHEREFORE, Petitioner prays that the Physician and Surgeon License and Controlled Substance License of Norman F. Williams, M.D. be Temporarily Suspended pending proceedings before the Medical Disciplinary Board of the State of Illinois.

**DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION of the State of  
Illinois**

By: SIGNATURE REDACTED

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Laura E. Forester  
Chief of Medical Prosecutions

Laura E. Forester  
Chief of Medical Prosecutions  
Department of Financial and Professional Regulation  
Division of Professional Regulation  
100 West Randolph, Suite 9-151  
Chicago, Illinois 60601  
312/814-7043

Information 2 Counts

STATE OF ILLINOIS )  
                          ) )  
COUNTY OF ROCK ISLAND )

SS.

12CF0811

IN THE CIRCUIT COURT OF THE  
FOURTEENTH JUDICIAL CIRCUIT  
CRIMINAL DIVISION

COUNT I

In the year of our Lord Two Thousand Twelve

Now, on this day comes into open Court, in his own proper person,  
Mark A. Senko, State's Attorney in and for said County, in the name and  
by the authority of the People of the State of Illinois, and prosecutes in  
this behalf for and on behalf of said People and informs said Court that

Norman F. Williams, DOB: 08/23/46

on the 29th day of June in the year of our Lord Two Thousand Eleven at and within  
said County of Rock Island in the State of Illinois aforesaid, committed the offense  
of CRIMINAL SEXUAL ASSAULT, in that said defendant, committed an act of sexual  
penetration with D.R., DOB: 08-13-1978, in that by the use of force said defendant  
placed his fingers in the vagina of D.R., (MOPDH 1207835)

in violation of 720 ILCS 5/12-13(a) (1)

a CLASS 1 FELONY

FILED in the CIRCUIT COURT  
of ROCK ISLAND COUNTY  
CRIMINAL DIVISION

SEP 21 2012

*Isaac L. Duran*  
Clerk of the Circuit Court



Information 2 Counts

12CF0011

STATE OF ILLINOIS )  
 ) SS.  
COUNTY OF ROCK ISLAND )

IN THE CIRCUIT COURT OF THE  
FOURTEENTH JUDICIAL CIRCUIT  
CRIMINAL DIVISION

COUNT II

And the State's Attorney aforesaid, in the name and by the authority aforesaid of the People of the State of Illinois aforesaid, comes into open Court this day and prosecutes in this behalf for and on behalf of the said People, and further informs said Court that

Norman F. Williams, DOB: 09/23/46

on the 5th day of April in the year of our Lord Two Thousand Twelve at and within said County of Rock Island in the State of Illinois aforesaid, committed the offense of CRIMINAL SEXUAL ASSAULT, in that said defendant, committed an act of sexual penetration with S.W., DOB: 02-05-1957, in that by the use of force said defendant placed his fingers on the vagina of S.W., (MOPD# 1203983) in violation of 720 ILCS 5/11-1.20(a)(1)

a CLASS 1 FELONY

SIGNATURE REDACTED

STATE'S ATTORNEY

MAO/jt

FILED in the CIRCUIT COURT  
of ROCK ISLAND COUNTY  
CRIMINAL DIVISION

SEP 21 2012

*Loach Durbin*  
Clerk of the Circuit Court

IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT  
ROCK ISLAND COUNTY, ILLINOIS

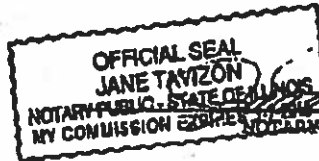
12CF0811

Det. Marcella O'Brien after being duly sworn, on his oath deposes and says that  
the within information against Norman P. Williams, DOB: 08/23/46 is true.

SIGNATURE REDACTED

Subscribed and sworn to before me

SEP 18 2012



SIGNATURE REDACTED

IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT  
ROCK ISLAND COUNTY, ILLINOIS

I, Frank Fuhr Judge of the Circuit Court of the Fourteenth  
Judicial Circuit, Criminal Division, of Rock Island County, Illinois, have examined  
the within information against Norman P. Williams, DOB: 08-23-46 and the sworn  
testimony of Det. Marcella O'Brien thereto and find probable cause to believe that an  
offense was committed and that the named defendant committed it.

SIGNATURE REDACTED

9-18-12, 20

J U D G E

WARRANT TO ISSUE  
BAIL REQUIRED IN THE SUM OF \$ 100,000 (10%)

FILED in the CIRCUIT COURT  
of ROCK ISLAND COUNTY  
CRIMINAL DIVISION

SIGNATURE REDACTED

JUDGE OF SAID COURT

SEP 21 2012

HAD/jt

*Shirley D. Durbin*  
Clark of the Circuit Court



**BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS**

**STATE OF GEORGIA**

**Composite State Board  
Medical Examiners**

**IN THE MATTER OF:**

**OCT 17 2007**

**Norman Franklin Williams, M.D.  
License No. 38651,  
Respondent**

**Docket No. 20040023**

**PUBLIC CONSENT ORDER TERMINATING PROBATION**

WHEREAS, the Composite State Board of Medical Examiners ("Board") entered a Consent Order in the above styled matter on August 3, 2006, which placed Respondent's license to practice medicine in Georgia on probation; and

WHEREAS, Respondent has petitioned to have the probation terminated; and

WHEREAS, the Board has determined that the Respondent has complied with all the terms and conditions of the probation,

NOW, THEREFORE, IT IS HEREBY ORDERED that the probation of Respondent's license to practice medicine in the State of Georgia be TERMINATED.

SO ORDERED, this 4th day of October 2007

**COMPOSITE STATE BOARD OF  
MEDICAL EXAMINERS**

**SIGNATURE REDACTED**

**EDDIE R. CHEEKS, MD  
President**

**(BOARD SEAL)**

**SIGNATURE REDACTED**

**ATTEST: LASHAWN HUGHES  
Executive Director.**



BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS  
Composite State Board  
of Medical Examiners  
STATE OF GEORGIA

AUG 03 2006

IN THE MATTER OF:

NORMAN F. WILLIAMS, M.D.,  
License No. 038651,

Respondent.

\*  
\*  
\*  
\*  
\*

DOCKET NUMBER  
DOCKET NO. 20040023

**SECOND AMENDED PUBLIC CONSENT ORDER**

By agreement of the Composite State Board of Medical Examiners (hereinafter, "Board") and Norman F. Williams, M.D. (hereinafter, "Respondent"), the following disposition of this matter replaces and supersedes prior dispositions entered November 7, 2003 and November 4, 2005, and is entered pursuant to the provisions of O.C.G.A. § 50-13-13(a)(4), as amended.

**FINDINGS OF FACT**

1.

Respondent is licensed to practice medicine in the State of Georgia, and was so licensed at all times relevant to the matters asserted herein.

2.

On or about November 7, 2003; Respondent entered into a Public Consent Order, Docket Number 2004-0049, with the Board, in which Respondent was publicly reprimanded for failure to conform to the minimal standards of acceptable and prevailing medical practice in prescribing amounts of controlled substances to six (6) patients, including some family members, without medical necessity, documentation or examination of the patients prior to the prescriptions being ordered, and for failure to utilize diagnostic testing or consult with pain management physicians regarding treatment options. The amounts of narcotic medications being prescribed by

Respondent were in excessive amounts, and continued use of these medications could have led to habituation or addiction in these patients.

3.

The terms of the November 7, 2003, Public Consent Order placed Respondent on probation for five (5) years with certain terms and conditions, including DEA restrictions, additional continuing medical education (CME) hours, a mini-residency in prescribing, certain practice restrictions and fines totaling twenty thousand dollars (\$20,000.00). Deadlines for additional CME hours and the mini-residency were until November 2005, but fine payments were to begin within six (6) months of November 7, 2003. Respondent failed comply with the CME requirements and failed to make payments of his fine in accordance with the requirements under the Public Consent Order.

4.

On or about October 26, 2004, Respondent wrote to the Board asking for a "pardon" from his Public Consent Order. Respondent explained that his finances were such that he had been unable to pay any portion of the fine imposed by the Board in the November 7, 2003, Public Consent Order.

5.

On November 4, 2005, Respondent entered into an Agreement to Amend Public Consent Order, Docket Number 2004-0049, with the Board (hereinafter, "First Amended Public Consent Order"). In the First Amended Public Consent Order, Respondent agreed to an amendment of paragraph 2 of page 14 of the original Public Consent Order. Specifically, the First Amended Public Consent Order amended the schedule for Respondent's payment of his fine of twenty-thousand dollars (\$20,000.00). Respondent has failed to comply with the payment schedule

provided in the First Amended Public Consent Order; however, Respondent has remitted a payment of \$500.00 to the Board.

6.

Respondent admits the above findings of fact and waives any further findings of fact with respect to the above-styled matter.

#### **CONCLUSIONS OF LAW**

Respondent's conduct constitutes sufficient grounds for the Board to exercise its disciplinary authority and impose sanctions upon Respondent's licensee under O.C.G.A. Ch. 34, T. 43, as amended, O.C.G.A. § 43-1-19(a), and the Rules of the Composite State Board of Medical Examiners. Respondent hereby waives any further findings of law with respect to this matter.

#### **ORDER**

The Composite State Board of Medical Examiners, having considered the particular facts and circumstances of this case, hereby orders, and Respondent hereby agrees, to the following terms of discipline:

1.

Respondent's license to practice medicine in the State of Georgia shall be placed on probation for a period of five (5) years commencing on the effective date of this Second Amended Public Consent Order, until discharged by the Board, with the following terms and conditions:

(a) Triplicate Prescriptions. Respondent shall utilize a triplicate prescriptions system for all controlled substances prescribed by him. Each prescription for such a controlled

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substance written by Respondent shall be sequentially numbered and the copies distributed as follows: original to patient, one copy to the Board, and one copy to the patient's chart. Respondent shall not begin renumbering when he reaches 1000, but shall continue to number sequentially. The copies for the Board shall be mailed or delivered to the Board by Respondent once per quarter. A copy of Respondent's dispensing records shall be provided to the Board upon request for all controlled substances dispensed by him or on his order.

(b) Prescription Log. Respondent shall personally maintain for inspection a contemporaneous log (separate from his clinical records or the clinical records of other health care providers) of all controlled substances and dangerous drugs prescribed, administered, dispensed, or ordered by Respondent. The prescription log shall include the date, patient name, drug, strength, quantity, and refill status, on a form approved by the Board. The prescription log shall also include the diagnosis and the reasons for prescribing, administering, dispensing, or ordering each drug. The Board shall be authorized to inspect Respondent's prescription log. If Respondent's prescription log fails to comply with the requirements of this Second Amended Public Consent Order, the Board is authorized to summarily suspend Respondent's license, pending a hearing.

(c) Record Keeping. Prior to prescribing, administering, ordering or dispensing any controlled substance, Respondent shall detail fully the examination performed and diagnosis reached in the particular patient's file. Respondent shall specifically record all physical data of the patient, and detail the exact nature of Respondent's evaluation of the patient. In addition to this requirement, Respondent agrees to comply with all record keeping requirements of the Board.

(d) Use of Physician's Assistant or Nurse Practitioner. If Respondent employs a physician's assistant and/or nurse practitioner in his practice, Respondent shall not utilize the physician's assistant and/or nurse practitioner to perform tasks which are otherwise prohibited by the terms of this Second Amended Public Consent Order, or otherwise utilize the services of the physician's assistant and/or nurse practitioner in such a way as to circumvent any restriction, term or condition outlined herein. Respondent expressly agrees to disclose this Second Amended Public Consent Order to any physician's assistant or nurse practitioner with whom Respondent employs or associates.

(e) Continuing Medical Education. No later than December 31, 2006, Respondent shall attend and successfully complete the Mini-Residency entitled "Appropriate Prescribing of Controlled Substances" sponsored by The Mercer University Southern School of Pharmacy in Atlanta. Upon successful completion of the Mini-Residency program, Respondent shall submit documentation thereof to the Board.

(f) Inspection/Interviews. During the probationary period, the Medical Director or another Board representative shall periodically review and inspect Respondent's records. The representative is authorized to review and inspect these records at any reasonable time and as often as the representative deems necessary. Respondent shall have the right to be present during such inspection of records and the patients' privacy and confidentiality rights shall be maintained. Respondent shall be available, upon reasonable notice, for personal interviews with the Medical Director or other representative of the Board. Failure of Respondent to be reasonably available for inspection of his records or for personal interviews with a Board representative shall be considered a violation of this Second Amended Public Consent Order.

**(g) Residency Outside Georgia.** In the event Respondent should leave Georgia to reside or practice outside Georgia for periods longer than thirty (30) consecutive days, Respondent shall notify the Board in writing of the dates of departure and return. Periods of residency or practice outside Georgia as well as periods when Respondent is not actively engaged in the practice of medicine or is on inactive licensure status will not apply to the reduction of Respondent's probationary period, except as authorized by the Board. Respondent shall advise the Board of any change in address of record or employment status.

**(h) Disclosure.** In addition to other disclosures required by this Second Amended Public Consent Order, Respondent shall supply a copy of this Second Amended Public Consent Order, once approved and docketed, and within ten (10) days from receipt of the docketed copy by Respondent, to each hospital or other institution in Georgia where Respondent maintains staff privileges of any kind, and to any person with whom Respondent is associated in practice, including other physicians or physician's assistants or to any person or entity for whom Respondent is employed as a physician in the State of Georgia. Respondent shall also be required to disclose the existence of and provide a copy of this Second Amended Public Consent Order to such individuals or entities in connection with any future application for institutional appointment, associated practice, utilization of a physician's assistant, or employment as a physician in the State of Georgia while this Second Amended Public Consent Order is in effect. By executing this Second Amended Public Consent Order, Respondent specifically consents to any such individuals or entities reporting to the Board information which would affect

Respondent's ability to practice medicine with reasonable skill and safety to patients, notwithstanding any privilege provided by state or federal law.

(i) Abide By All Laws. Respondent shall abide by all State and Federal laws regulating the practice of medicine or relating to drugs, the Rules and Regulations of the Composite State Board of Medical Examiners, the terms of any order issued by another lawful licensing authority or consent agreement entered between Respondent and another lawful licensing authority and the terms of this Second Amended Public Consent Order. If Respondent shall fail to abide by such laws, rules, terms or orders, or if it should appear from monitoring reports submitted to the Board that Respondent is otherwise unable to practice medicine with reasonable skill and safety to patients, Respondent's license shall be subject to further discipline, including revocation, upon substantiation thereof after notice and hearing, and if revoked the Board in its discretion may determine that the license should be permanently revoked and not subject to reinstatement. Should another lawful licensing authority or court of competent jurisdiction enter an order revoking Respondent's license or revoking Respondent's probationary status while Respondent is subject to this Second Amended Public Consent Order, Respondent's Georgia license shall stand automatically suspended, effective on the date of such action, pending proceedings for revocation or other action by the Georgia Board.

(j) Termination of Probation. Respondent may petition for termination six (6) months prior to the expiration of his probation by certifying under oath before a notary public that Respondent has complied with all conditions of probation and by providing documentation supporting discharge from probation. The Composite State Board of Medical Examiners shall review and evaluate the practice of Respondent prior to lifting



the probation. At such time, the Board shall be authorized to restore all rights and privileges to Respondent's license, unless the Board has received information that Respondent has not complied with the terms of the probation or has otherwise failed to comply with the laws and rules regulating his practice as a physician. Should the Board determine that reasonable cause exists for maintaining Respondent's license on probationary status, the Board shall notify Respondent of its intent to extend the probationary period, and Respondent may respond to such notice in writing or request an appearance before the Board as in a non-contested case. In any event, this Second Amended Public Consent Order shall remain in effect pending a final determination by the Board and notification that the probationary period has terminated.

2.

\* In addition to the terms and conditions herein, Respondent shall pay a total fine of twenty thousand dollars (\$20,000.00), by certified check or money order to the Board. Of this total fine, Respondent has remitted five-hundred dollars (\$500.00) to the Board. The remaining balance of nineteen-thousand and five-hundred dollars (\$19,500.00) of the total fine shall be suspended, and shall become immediately payable and due on January 1, 2007, if Respondent fails to complete the Mini-Residency requirements, as specified under Paragraph 1(e) of page 5 of this Second Amended Consent Order, by December 31, 2006. If Respondent shall fail to pay any fine pursuant to the terms of this paragraph, Respondent's license shall be subject to revocation, upon substantiation thereof, and shall not be subject to restoration.

3:

This Second Amended Public Consent Order shall be considered a PUBLIC REPRIMAND of Respondent by the Board and may be disseminated as such.

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4.

Within ten (10) days of any request of the Board, Respondent shall promptly supply all information necessary for the reporting of this Second Amended Public Consent Order to the National Practitioner Data Bank, as required by federal law.

5.

Should Respondent fail to meet any term or condition of this Second Amended Public Consent Order as described herein, Respondent's license shall stand automatically suspended until further Order of the Board.

6.

Respondent understands that he has the right to a hearing in this matter, and Respondent freely, knowingly and voluntarily waives such right by entering into this Second Amended Public Consent Order. Respondent further understands and agrees that a representative of the Department of Law may be present during the presentation of this Second Amended Public Consent Order and that the Board shall have the authority to review the investigative file and all relevant evidence in considering this Second Amended Public Consent Order. Respondent understands that this Second Amended Public Consent Order will not become effective until approved by the Composite State Board of Medical Examiners and docketed by the Executive Director, State Examining Boards. Respondent further understands that this Second Amended Public Consent Order, once approved, shall constitute a public record, which may be disseminated as a disciplinary action of the Board. If this Second Amended Public Consent Order is not approved, it shall not constitute an admission against interest in this proceeding, or prejudice the ability of the Board to adjudicate this matter. Respondent consents to the terms and sanctions contained herein.

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Approved, this 3<sup>rd</sup> day of August, 2006.

**COMPOSITE STATE BOARD OF  
MEDICAL EXAMINERS**

(BOARD SEAL)

SIGNATURE REDACTED

BY:

~~M. VINAYAK KAMATH, M.D.~~  
President Joseph C. Finley MD

SIGNATURE REDACTED

ATTEST:

LACHARN HUGHES  
Executive Director

CONSENTED TO:

SIGNATURE REDACTED

NORMAN F. WILLIAMS, M.D.  
Respondent

AS TO THE SIGNATURE OF  
Norman F. Williams, M.D.

Sworn to and Subscribed  
before me this 28 day  
of July 2006.

SIGNATURE REDACTED

NOTARY PUBLIC  
My commission expires:

Notary Public, Worth County, Georgia  
My Commission Expires September 2, 2006

BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS  
Composite State Board  
of Medical Examiners

STATE OF GEORGIA

IN THE MATTER OF:

NORMAN F. WILLIAMS, M.D.,  
License No. 038651,

Respondent.

NOV 04 2005

DOCKET NUMBER  
DOCKET NO. 20040049

AGREEMENT TO AMEND PUBLIC CONSENT ORDER

By agreement of the Composite State Board of Medical Examiners ("Board") and Norman F. Williams, M.D. ("Respondent") the following disposition of this matter amends a prior disposition entered November 7, 2003, and is entered pursuant to the provisions of O.C.G.A. § 50-13-13(a)(4), as amended.

FINDINGS OF FACT

1.

Respondent is licensed to practice medicine in the State of Georgia, and was so licensed at all times relevant to the matters asserted herein.

2.

On or about November 7, 2003, Respondent entered into a Public Consent Order, Docket Number 2004-0049, with the Board, in which he was publicly reprimanded for failure to conform to the minimal standards of acceptable and prevailing medical practice in prescribing amounts of controlled substances to six (6) patients, including some family members, without medical necessity, documentation or examination of the patients prior to the prescriptions being ordered, and for failure to utilize diagnostic testing or consult with pain management physicians regarding treatment options. The amounts of narcotic medications being prescribed by the

Respondent were in excessive amounts, and continued use of these medications could have led to habituation or addiction in these patients.

3.

The terms of the November 7, 2003, Public Consent Order placed Respondent on probation for five (5) years with certain terms and conditions, including DEA restrictions, additional continuing medical education hours (CME's), a mini-residency in prescribing, certain practice restrictions and fines totaling twenty thousand dollars (\$20,000.00). Deadlines for additional CME hours and the mini-residency do not occur until November 2005, but fine payments were to begin within six (6) months of November 7, 2003. Respondent has not made any payment towards his fine.

4.

On or about October 26, 2004, Respondent wrote to the Board asking for a "pardon" from his Public Consent Order. Respondent explained that his finances were such that he had been unable to pay any portion of the fine imposed by the Board in the November 7, 2003, Public Consent Order.

5.

Therefore, paragraph 2 of page 14 of Respondent's Public Consent Order of November 7, 2003, is hereby deleted in its entirety and replaced by the following:

"2.

Respondent shall pay a fine of twenty thousand dollars (\$20,000.00), payable in forty (40) installments by certified check or money order to the Board. The first installment shall be in the amount of five hundred dollars (\$500.00) to be paid within sixty (60) days of the effective date of this Public Consent Order. The remaining thirty-nine (39) payments of five hundred dollars (\$500.00) each are to be paid on a monthly basis, due by the fifteenth (15<sup>th</sup>) day of each month, until paid in full. If Respondent shall fail to pay said fine pursuant to the terms of this paragraph, the Respondent's license shall be subject to revocation, upon substantiation thereof, and shall not be subject to restoration."

6.

Should Respondent fail to meet any term or condition of this Amended Public Consent Order as described herein, or any other term of the November 7, 2003, Public Consent Order [Docket No. 20040049], Respondent's license shall stand automatically suspended until further Order of the Board.

Approved, this 4<sup>th</sup> day of November, 2005.

**COMPOSITE STATE BOARD OF  
MEDICAL EXAMINERS**

(BOARD SEAL)

BY: SIGNATURE REDACTED  
M. VINAYAK KAMATH, M.D.  
President

ATTEST: SIGNATURE REDACTED  
LASHARN HUGHES  
Executive Director  
Composite State Board of Medical Examiners

CONSENTED TO:

SIGNATURE REDACTED  
NORMAN F. WILLIAMS, M.D.  
Respondent

AS TO THE SIGNATURE OF Norman F. Williams, M.D.

Sworn to and Subscribed  
before me this 29 day  
of September 2005.

SIGNATURE REDACTED  
NOTARY PUBLIC  
My commission expires:

BEFORE THE OFFICE OF STATE ADMINISTRATIVE HEARINGS  
STATE OF GEORGIA

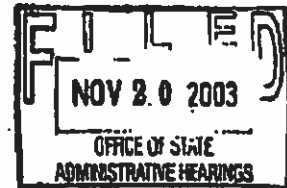
COMPOSITE STATE BOARD OF  
MEDICAL EXAMINERS,  
Petitioner,

v.

NORMAN WILLIAMS M D,

Respondent.

Docket No.: OSAH-CSBME-PHY-0402517-47-SWT



INITIAL DECISION  
ORDER OF DISMISSAL

Inasmuch as Petitioner has withdrawn the request for hearing, the Administrative Law Judge shall enter an order of dismissal. O.C.G.A. § 50-13-40(c); OSAH Rule 616-1-2-.17(1).

IT IS ORDERED that this matter is DISMISSED.

SO ORDERED, this 20<sup>th</sup> day of NOVEMBER 2003.

SIGNATURE REDACTED

~~STEVEN W. TEATE~~  
Administrative Law Judge

Attachment:

Check if a copy of Petitioner's written withdrawal is attached.

Page: 1 of 1

Volume: \_\_\_\_\_ Page: \_\_\_\_\_

X:\CSBME\PHY\decision\PHY AWP .doc 11/19/03

BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS  
STATE OF GEORGIA

Composite State Board  
of Medical Examiners

NOV 07 2003

IN THE MATTER OF:

NORMAN F. WILLIAMS, M.D.,  
License No. 038651,

Respondent.

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\*  
\*  
\*  
\*

DOCKET NUMBER

DOCKET NO.

20040049

**PUBLIC CONSENT ORDER**

By agreement of the Composite State Board of Medical Examiners ("Board") and Norman F. Williams, M.D. ("Respondent") the following disposition of this matter is entered pursuant to the provisions of O.C.G.A. § 50-13-13(a)(4), as amended.

**FINDINGS OF FACT**

1.

Respondent is licensed to practice medicine in the State of Georgia, and was so licensed at all times relevant to the matters asserted herein.

2.

From about June 1998 to approximately February 1999, the Respondent practiced medicine as a Medical Director of a satellite office of The Diet Center located in Fitzgerald, Georgia.

3.

Respondent's conduct failed to conform to the minimal standards of acceptable and prevailing medical practice in the following manner:

(a) In connection with such practice at The Diet Center, the Respondent signed blank prescriptions and made them available for use at a later date by non-physician clinic personnel in the prescribing of controlled substances to patients in violation of O.C.G.A. § 16-13-41(b) and



(h). At the direction of Respondent, these non-physician personnel would see the patients without a physician present and fill in the blank prescriptions previously signed by Respondent with various controlled substances.

(b) Without personally examining or seeing the patients, the Respondent would sign entries on the patients' medical charts, which were made by non-physician clinic personnel.

4.

Between March 1998 and November 2000, Respondent wrote numerous prescriptions for controlled substances to various members of his family including, V.W. AKA V.B.; D.C.; D.C.; and O.O.

5.

Between March 2, 1998 and October 26, 2000, Respondent wrote a minimum of 130 prescriptions for V.W. AKA V.B. for various narcotic medications including Codeine, Stadol, and Lorazepam. Respondent's course of treatment of this patient fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to keep proper medical records for the patient. There are virtually no office notes and no discernable information upon which to make a clear diagnosis. The records fail to provide legitimate indication for the prescriptions provided to the patient;

(b) The patient records do not indicate that Respondent conducted any sort of a physical examination, took a medical history of the patient or did any sort of laboratory examination on the patient prior to prescribing these narcotic medications; and

(c) The amounts of narcotic medications being prescribed by the Respondent was excessive, could lead to habituation or addiction and is not supported or justified by the patient's records.

6.

Between April 1, 1998 and November 3, 2000, Respondent wrote a minimum of 59 prescriptions for D.C. for various narcotic medications including Dexedrine, Codeine, Lorazepam, and Stadol. Respondent's course of treatment of this patient fell below the minimum standards of prevailing medical practices in the following manner:

- (a) Respondent failed to keep proper medical records for the patient. There are virtually no office notes and no discernable information upon which to make a clear diagnosis. The records fail to provide legitimate indication for the prescriptions provided to the patient;
- (b) The medical history of the patient is inadequate to support the narcotics prescribed to the patient;
- (c) There is not sufficient data noted in the patient's medical records regarding a diagnosis of "ADDHD" to prescribe Dexedrine;
- (c) The patient records do not indicate that Respondent conducted any sort of a physical examination on the patient or did any sort of laboratory examination on the patient prior to prescribing these narcotic medications; and
- (c) The amounts of narcotic medications being prescribed by the Respondent was excessive, could lead to habituation or addiction and is not supported or justified by the patient's records.

7.

On or about November 3, 1998 Respondent wrote a prescription to minor patient, D.C. (this is a different patient from the D.C. listed in paragraph 6 above) for Dexedrine. On December 17, 1998, Respondent wrote a prescription to minor patient, D.C. for Codeine. On March 14, 1999 Respondent wrote two prescriptions to minor patient, D. C., for Dexedrine and

on October 24, 2000 Respondent wrote two prescriptions to minor patient, D.C., for Dexedrine. Respondent's course of treatment of this patient fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to keep proper medical records for the patient. There are virtually no office notes and no discernable information which provides a legitimate indication for the prescriptions provided to the patient;

(b) The only medical record for this patient is a note of an exam performed on June 10, 1998 during which it was noted that Respondent would continue previously prescribed Dexedrine for ADDHD. The record does not reflect how long the patient has had ADDHD or how it was diagnosed; and

(c) Respondent failed to provide any medical records at all indicating that this patient was even examined on the dates set forth above and there are no medical records whatsoever to support the prescriptions written on the dates set forth above.

8.

Between October 8, 1998 and October 28, 2000, Respondent wrote at least 11 prescriptions to O.O. for various narcotic medications including Codeine, Stadol, Lorazepam and Dexedrine. Respondent's course of treatment of this patient fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to keep proper medical records for the patient. There are virtually no office notes and no discernable information upon which to make a clear diagnosis. The records fail to provide legitimate indication for the prescriptions provided to the patient;

(b) The patient records do not indicate that Respondent conducted any sort of a physical examination or did any sort of laboratory examination on the patient prior to prescribing these narcotic medications.

(c) Respondent failed to provide any medical records at all indicating that this patient was even examined on the dates on which she was given prescriptions and there are no medical records whatsoever to support why this patient was given these prescriptions for the various narcotic medications mentioned above.

9.

On or about February 5, 2000, Respondent wrote a prescription in V.W. AKA V.E.'s name, for Viagra, however, the prescription was intended for one of her relatives, V.E., in Florida. Respondent failed to maintain any medical records for this relative in Florida, V.E., and did not examine him on the date the prescription was written. Respondent wrote the prescription in V.W. AKA V.E.'s name but mailed the medication to V.E. in Miami, Florida.

10.

Between February 4, 1998 and at least through April 2002, Respondent treated patient, S.A. for chronic migraines/head pain and/or gastric problems.

11.

Respondent's treatment of patient, S.A. fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to document any physical examination at any of the office visits listed in the patients' records other than vital signs;

(b) Respondent failed to order any lab work or x-rays to support the presumed diagnosis or Respondent failed to document such orders and the results of such orders;

(c) Respondent failed to document that he attempted to obtain records from other previous physicians which might contain revealing information of the diagnosis of chronic pain with narcotic dependence;

(d) Respondent continued to prescribe short-acting narcotics with and without barbituates despite early indications that the patient was overusing narcotics; and

(e) Respondent prescribed frequent short-acting narcotics without a firm diagnosis or long-term treatment plan and Respondent made no attempt to consider alternative modalities of pain control such as physical therapy, long acting opiates or acupuncture until August 1998.

12.

Between June 15, 1999 and September 13, 2001, Respondent treated patient, V.J. for dyspepsia and knee, back, and arthritis pain. Patient V.J. was only seen in the Respondent's office on two occasions. The remainder of the treatment was the issuance of prescriptions that were called in based on phone calls received by the Respondent from the patient.

13.

Respondent's treatment of patient, V.J. fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to document any physical examination to establish a diagnosis of arthritis and its severity at the initial visit on June 15, 1999;

(b) Respondent failed to take x-rays or order laboratory tests to support the presumed diagnosis or Respondent failed to document that he ordered x-rays and lab tests and failed to document any results;

(c) The Respondent's treatment record for patient V.J. failed to indicate any further assessment or evaluation of patient's complaint of dyspepsia and the record failed to document any treatment for dyspepsia;

(d) Respondent prescribed Ambien, a sedative/hypnotic medication for pain control without documentation of effect and co-medication use;

(e) Respondent prescribed Oxycontin on a periodic basis and in presumed starting doses that are in excess of the norm. There was no documentation that Respondent gave any consideration to intra-articular steroids or hyaluronic acid injections; and

(f) Respondent prescribed a combination of short-acting narcotics plus benzodiazepines which can result in respiratory depression especially in the presence of alcohol, the use of which was not documented in the patient's record.

14.

Between July 9, 1999 and May 25, 2002, Respondent treated patient, E.J. for low back pain and gastrointestinal complaints. Patient, E.J. was only seen in the Respondent's office on three occasions. The remainder of the treatment was the issuance of prescriptions that were called in based on telephone calls made to the Respondent by the patient.

15.

Respondent's treatment of patient, E.J. fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to take x-rays or order laboratory tests to support the presumed diagnosis or Respondent failed to document that he ordered x-rays and lab tests and failed to document any results;

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- (b) Respondent failed to repeat a physical examination to evaluate the patient for radiculopathy and spinal stenosis;
- (c) The patient was taking coumadin with complaints of severe gastrointestinal symptoms that precluded ASA and NSAID use and there was no documentation in Respondent's treatment records for the patient that a CBC or hemocult was checked;
- (d) Respondent prescribed frequent short-acting narcotics without a firm diagnosis for low back pain that was never fully evaluated or attempts made to establish a long-term treatment plan;
- (e) Respondent's records for the patient did not indicate that Respondent considered alternative modalities of pain control such as physical therapy, long-acting opiates and acupuncture;
- (f) Despite patient complaints, there was no documentation of an evaluation of the patient's gastrointestinal tract by Respondent;
- (g) There was no documentation in the patient records of alcohol or tobacco use and both of these factors were important in the evaluation and management of chronic low back pain and COPD (chronic obstructive pulmonary disease), of which patient had a history;
- (h) Respondent prescribed Tussionex for the patient for sleep without further evaluation of the patient's history of COPD;
- (i) Respondent prescribed duragesic patches in an initial dose of 75 micrograms which was in excess of the usual starting dose for this medication when not on regular narcotics; and
- (j) There was no documentation that Respondent sought the consultation of a pain clinic for treatment of patient's chronic pain.

16.

Respondent admits the above findings of fact and waives any further findings of fact with respect to the above-styled matter.

**CONCLUSIONS OF LAW**

Respondent's conduct constitutes sufficient grounds for the Board to exercise its disciplinary authority and impose sanctions on Respondent as a licensee under O.C.G.A. Ch. 34, T. 43, as amended, O.C.G.A. § 43-1-19(a) and the Rules of the Composite State Board of Medical Examiners. Respondent hereby waives any further findings of law with respect to this matter.

**ORDER**

The Composite State Board of Medical Examiners, having considered the particular facts and circumstances of this case, it is hereby ordered, and Respondent hereby agrees, to the following terms of discipline:

1.

Respondent's license to practice medicine in the State of Georgia shall be placed on probation for a period of five (5) years commencing on the effective date of this Consent Order, until discharged by the Board, with the following terms and conditions:

(a) **DEA Restrictions**. Except as herein provided, Respondent hereby relinquishes his right to prescribe, administer, dispense, order or possess (except as prescribed, administered, or dispensed to Respondent by another person authorized by law to do so) controlled substances as defined by the Federal or Georgia Controlled Substances Act. In the case of a patient being treated by the Respondent as an admitted patient in a hospital setting, Respondent may issue

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orders for controlled substances but he may not administer, dispense or possess controlled substances. Six (6) months from the effective date of this Consent Order, Respondent may request a lifting or modification of this restriction. If the Board approves Respondent's request and lifts this restriction, all prescriptions issued by Respondent after the Board's approval shall be governed by the following terms:

1. Triplicate Prescriptions. Respondent shall utilize a triplicate prescriptions system for all controlled substances prescribed by him. Each prescription for such a controlled substance written by Respondent shall be sequentially numbered and the copies distributed as follows: original to patient, one copy to the Board, and one copy to the patient's chart. Respondent shall not begin renumbering when he reaches 1000, but shall continue to number sequentially. The copies for the Board shall be mailed or delivered to the Board by Respondent once per quarter. A copy of Respondent's dispensing records shall be provided to the Board upon request for all controlled substances dispensed by him or on his order.
2. Prescription Log. Respondent shall personally maintain for inspection a contemporaneous log (separate from his clinical records or the clinical records of other health care providers) of all controlled substances and dangerous drugs prescribed, administered, dispensed, or ordered by Respondent. The prescription log shall include the date, patient name, drug, strength, quantity, and refill status, on a form approved by the Board. The prescription log shall also include the diagnosis and the reasons for prescribing, administering, dispensing, or ordering each drug. The Board shall be authorized to inspect Respondent's prescription log. If Respondent's prescription log fails

to comply with the requirements of this consent order, the Board is authorized to summarily suspend Respondent's license, pending a hearing.

3. Record Keeping. Prior to prescribing, administering, ordering or dispensing any controlled substance, Respondent shall detail fully the examination performed and diagnosis reached in the particular patient's file. Respondent shall specifically record all physical data of the patient, and detail the exact nature of Respondent's evaluation of the patient. In addition to this requirement, Respondent agrees to comply with all record keeping requirements of the Board.

(b) USE OF PHYSICIAN'S ASSISTANT OR NURSE PRACTITIONER. If Respondent employs a physician's assistant and/or nurse practitioner in his practice, Respondent shall not utilize the physician's assistant and/or nurse practitioner to perform tasks which are otherwise prohibited by the terms of this Consent Order, or otherwise utilize the services of the physician's assistant and/or nurse practitioner in such a way as to circumvent any restriction, term or condition outlined herein. Respondent expressly agrees to disclose this consent order to any physician's assistant or nurse practitioner with whom Respondent employs or associates.

(c) CONTINUING MEDICAL EDUCATION. Within two (2) years of the effective date of the Consent Order, Respondent shall attend and successfully complete the Mini-Residency entitled "Appropriate Prescribing of Controlled Substances" sponsored by The Mercer University Southern School of Pharmacy in Atlanta. Upon successful completion of the Mini-Residency program, the Respondent shall submit documentation thereof to the Board.

Additionally, within two (2) years of the effective date of this Consent Order, Respondent shall complete twelve (12) hours of continuing education in the area of bariatric medicine. Respondent shall submit documentation of these additional twelve (12) hours upon successful completion thereof. These requirements shall be in addition to the continuing education requirements set forth in O.C.G.A. § 43-34-3.

(d) INSPECTIONS/INTERVIEWS. During the probationary period, the Medical Director or another Board representative shall periodically review and inspect Respondent's records. The representative is authorized to review and inspect these records at any reasonable time and as often as the representative deems necessary. The Respondent shall have the right to be present during such inspection of records and the patients' privacy and confidentiality rights shall be maintained. The Respondent shall be available, upon reasonable notice, for personal interviews with the Medical Director or other representative of the Board. Failure of the Respondent to be reasonably available for inspection of his records or for personal interviews with a Board representative shall be considered a violation of this Consent Order.

(e) RESIDENCY OUTSIDE GEORGIA. In the event Respondent should leave Georgia to reside or practice outside Georgia for periods longer than thirty (30) consecutive days, Respondent shall notify the Board in writing of the dates of departure and return. Periods of residency or practice outside Georgia as well as periods when respondent is not actively engaged in the practice of medicine or is on inactive licensure status will not apply to the reduction of Respondent's probationary period, except as authorized by the Board. Respondent shall advise the Board of any change in address of record or employment status.

(f) DISCLOSURE. In addition to other disclosures required by this Consent Order, Respondent shall supply a copy of this Consent Order, once approved and docketed, and within ten (10) days from receipt of the docketed copy by Respondent, to each hospital or other institution in Georgia where Respondent maintains staff privileges of any kind, and to any person with whom Respondent is associated in practice, including other physicians or physician's assistants or to any person or entity for whom Respondent is employed as a physician in the State of Georgia. Respondent shall also be required to disclose the existence of and provide a copy of this Consent Order to such individuals or entities in connection with any future application for institutional appointment, associated practice, utilization of a

physician's assistant, or employment as a physician in the State of Georgia while this Consent Order is in effect. By executing this Consent Order, Respondent specifically consents to any such individuals or entities reporting to the Board information which would affect Respondent's ability to practice medicine with reasonable skill and safety to patients, notwithstanding any privilege provided by state or federal law.

(g) ABIDE BY ALL LAWS. Respondent shall abide by all State and Federal laws regulating the practice of medicine or relating to drugs, the Rules and Regulations of the Composite State Board of Medical Examiners, the terms of any order issued by another lawful licensing authority or consent agreement entered between Respondent and another lawful licensing authority and the terms of this Consent Order. If Respondent shall fail to abide by such laws, rules, terms or orders, or if it should appear from monitoring reports submitted to the Board that Respondent is otherwise unable to practice medicine with reasonable skill and safety to patients, Respondent's license shall be subject to further discipline, including revocation, upon substantiation thereof after notice and hearing and if revoked the Board in its discretion may determine that the license should be permanently revoked and not subject to reinstatement. Should another lawful licensing authority or court of competent jurisdiction enter an order revoking Respondent's license or revoking Respondent's probationary status while Respondent is subject to this Consent Order, Respondent's Georgia license shall stand automatically suspended, effective on the date of such action, pending proceedings for revocation or other action by the Georgia Board.

(h) TERMINATION OF PROBATION. Respondent may petition for termination six (6) months prior to the expiration of his probation by certifying under oath before a notary public that Respondent has complied with all conditions of probation and by providing documentation

supporting discharge from probation. The Composite State Board of Medical Examiners shall review and evaluate the practice of Respondent prior to lifting the probation. At such time, the Board shall be authorized to restore all rights and privileges to Respondent's license, unless the Board has received information that Respondent has not complied with the terms of the probation or has otherwise failed to comply with the laws and rules regulating his practice as a physician. Should the Board determine that reasonable cause exists for maintaining Respondent's license on probationary status, the Board shall notify Respondent of its intent to extend the probationary period, and Respondent may respond to such notice in writing or request an appearance before the Board as in a non-contested case. In any event, this Consent Order shall remain in effect pending a final determination by the Board and notification that the probationary period has terminated.

2.

In addition to and in conjunction with any other sanction contained herein, the Respondent shall pay a total fine of \$20,000.00, payable in 4 installments by certified check or money order to the Board. The first installment shall be in the amount of \$5,000.00 to be paid within the first six (6) months of the effective date of this Consent Order. The second installment shall be paid in the amount of \$5,000.00 to be paid within the one (1) year of the effective date of this Consent Order. The third installment shall be in the amount of \$5,000.00 to be paid within eighteen (18) months of the effective date of this Consent Order. The fourth and final installment shall be paid in the amount of \$5,000.00 to be paid within two (2) years of the effective date of this Consent Order. Such installments shall be made to the Composite State Board of Medical Examiners. If the Respondent shall fail to pay said fine pursuant to the

terms of this paragraph, the Respondent's license shall be subject to revocation, upon substantiation thereof, and shall not be subject to restoration.

3.

This Consent Order shall be considered a PUBLIC REPRIMAND of Respondent by the Board and may be disseminated as such.

4.

Within ten (10) days of any request of the Board, the Respondent shall promptly supply all information necessary for the reporting of this Consent Order to the National Practitioner Data Bank, as required by federal law.

5.

Respondent understands that he has the right to a hearing in this matter, and Respondent freely, knowingly and voluntarily waives such right by entering into this Consent Order. Respondent further understands and agrees that a representative of the Department of Law may be present during the presentation of this Consent Order and that the Board shall have the authority to review the investigative file and all relevant evidence in considering this Consent Order. Respondent understands that this Consent Order will not become effective until approved by the Composite State Board of Medical Examiners and docketed by the Executive Director, State Examining Boards. Respondent further understands that this Consent Order, once approved, shall constitute a public record, which may be disseminated as a disciplinary action of the Board. If this Consent Order is not approved, it shall not constitute an admission against interest in this proceeding, or prejudice the ability of the Board to adjudicate this matter. Respondent consents to the terms and sanctions contained herein.

Approved, this 7<sup>th</sup> day of November, 2003.

(BOARD SEAL)

**COMPOSITE STATE BOARD OF  
MEDICAL EXAMINERS**

BY: SIGNATURE REDACTED

GRACE A. DAVIS, M.D., M.P.H.  
President

ATTEST: SIGNATURE REDACTED

NORMAN HUGHES  
Executive Director  
Composite State Board of Medical Examiners

CONSENTED TO:

SIGNATURE REDACTED

NORMAN F. WILLIAMS, M.D.  
Respondent

AS TO THE SIGNATURE OF Norman F.  
Williams, M.D.  
Sworn to and Subscribed  
before me this 27<sup>th</sup> day  
of October 2003.

SIGNATURE REDACTED

NOTARY PUBLIC

My commission expires: 12-27-2004

BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS  
Composite State Board  
of Medical Examiners

STATE OF GEORGIA

AUG 14 2003

IN THE MATTER OF:

NORMAN F. WILLIAMS, M.D.,  
License No. 038651,

Respondent.

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DOCKET NO. 20040023

MATTERS ASSERTED AND  
STATUTES AND RULES INVOLVED

Pursuant to O.G.G.A. § 50-13-13, the Composite State Board of Medical Examiners ("the Board") hereby provides Respondent with the matters asserted and the statutes and rules involved for purposes of disciplinary action against Respondent's license. The matters asserted below constitute sufficient grounds for the imposition of sanctions against Respondent's license to practice medicine.

MATTERS ASSERTED

1.

Respondent is licensed to practice medicine in the State of Georgia and was so licensed at all times relevant to the matters asserted herein.

2.

From about June 1998 to approximately February 1999, the Respondent practiced medicine as a Medical Director of a satellite office of The Diet Center located in Fitzgerald, Georgia.

3.

While practicing as the Medical Director of the Fitzgerald office of The Diet Center, Respondent's conduct failed to conform to the minimal standards of acceptable and prevailing medical practice in the following manner:



(a) In connection with such practice at The Diet Center, the Respondent signed blank prescriptions and made them available for use at a later date by non-physician clinic personnel in the prescribing of controlled substances to patients in violation of O.C.G.A. § 16-13-41. At the direction of Respondent, these non-physician personnel saw the patients without a physician present and filled in the blank prescriptions previously signed by Respondent with various controlled substances. The following patients (their full names will be provided to the Respondent under separate cover) represent a sampling of patients who received pre-signed prescriptions for controlled substances from the Respondent none of whom was ever seen or examined by the Respondent: B.E., M.C., S.N., P.S., M.B., I.H., T.S., and J.P.

(b) Without personally examining or seeing these patients and others, the Respondent signed entries on the patients' medical charts, which were made by non-physician clinic personnel at an earlier time.

4.

Between March 1998 and November 2000, Respondent wrote numerous prescriptions for controlled substances to various members of his family (the family members' full names will be provided to the Respondent under separate cover) including, V.W. AKA V.E., D.C., D.C., and O.O.

5.

Between March 2, 1998 and October 26, 2000, Respondent wrote a minimum of 130 prescriptions for V.W. AKA V.E. for various narcotic medications including Codeine, Stadol, and Lorazepam. Respondent's course of treatment of this patient fell below the minimum standards of prevailing medical practices in the following manner:

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(a) Respondent failed to keep proper medical records for the patient. There were virtually no office notes and no discernable information upon which to make a clear diagnosis. The records failed to provide legitimate indication for the prescriptions provided to the patient;

(b) The patient records did not indicate that Respondent conducted any sort of a physical examination, took a medical history of the patient or did any sort of laboratory examination on the patient prior to prescribing these narcotic medications; and

(c) The amounts of narcotic medications being prescribed by the Respondent was excessive, could lead to habituation or addiction and was not supported or justified by the patient's records.

6.

Between April 1, 1998 and November 3, 2000, Respondent wrote a minimum of 59 prescriptions for D.C. for various narcotic medications including Dexedrine, Codeine, Lorazepam, and Stadol. Respondent's course of treatment of this patient fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to keep proper medical records for the patient. There were virtually no office notes and no discernable information upon which to make a clear diagnosis. The records failed to provide legitimate indication for the prescriptions provided to the patient;

(b) The medical history of the patient was inadequate to support the narcotics prescribed to the patient;

(c) There was not sufficient data noted in the patient's medical records regarding a diagnosis of "ADDHD" to prescribe Dexedrine;

(d) The patient records did not indicate that Respondent conducted any sort of a physical examination on the patient or did any sort of laboratory examination on the patient prior to prescribing these narcotic medications; and

(e) The amounts of narcotic medications being prescribed by the Respondent was excessive, could lead to habituation or addiction and was not supported or justified by the patient's records.

7.

On or about November 3, 1998 Respondent wrote a prescription to minor patient, D.C. (this is a different patient from the D.C. listed in paragraph 6 above) for Dexedrine. On December 17, 1998, Respondent wrote a prescription to minor patient, D.C. for Codeine. On March 14, 1999 Respondent wrote two prescriptions to minor patient, D. C., for Dexodrine and on October 24, 2000 Respondent wrote two prescriptions to minor patient, D.C., for Dexedrine. Respondent's course of treatment of this patient fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to keep proper medical records for the patient. There were virtually no office notes and no discernable information, which provides a legitimate indication for the prescriptions provided to the patient;

(b) The only medical record for this patient was a note of an exam performed on June 10, 1998 during which it was noted that Respondent would continue previously prescribed Dexedrine for ADDHD. The record does not reflect how long the patient has had ADDHD or how it was diagnosed; and

(c) Respondent failed to provide any medical records at all indicating that this patient was even examined on the dates set forth above and there are no medical records whatsoever to support the prescriptions written on the dates set forth above.

8.

Between October 8, 1998 and October 28, 2000, Respondent wrote at least 11 prescriptions to O.O. for various narcotic medications including Codeine, Stadol, Lorazepam and Dexedrine. Respondent's course of treatment of this patient fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to keep proper medical records for the patient. There were virtually no office notes and no discernable information upon which to make a clear diagnosis. The records failed to provide legitimate indication for the prescriptions provided to the patient;

(b) The patient records did not indicate that Respondent conducted any sort of a physical examination or did any sort of laboratory examination on the patient prior to prescribing these narcotic medications.

(c) Respondent failed to provide any medical records at all indicating that this patient was even examined on the dates on which she was given prescriptions and there were no medical records whatsoever to support why this patient was given these prescriptions for the various narcotic medications mentioned above.

9.

On or about February 5, 2000, Respondent wrote a prescription in V.W. AKA V.E.'s name, for Viagra, however, the prescription was intended for one of her relatives, V.E., in Florida. Respondent failed to maintain any medical records for this relative in Florida, V.E., and

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5/

did not examine him on the date the prescription was written. Respondent wrote the prescription in V.W. AKA V.E.'s name but mailed the medication to V.E. in Miami, Florida.

10.

Between February 4, 1998 and at least through April 2002, Respondent treated patient, S.A. for chronic migraines/head pain and/or gastric problems.

11.

Respondent's treatment of patient, S.A. fell below the minimum standards of prevailing medical practices in the following manner:

- (a) Respondent failed to document any physical examination at any of the office visits listed in the patients' records other than vital signs;
- (b) Respondent failed to order any lab work or x-rays to support the presumed diagnosis or Respondent failed to document such orders and the results of such orders;
- (c) Respondent failed to document that he attempted to obtain records from other previous physicians which might contain revealing information of the diagnosis of chronic pain with narcotic dependence;
- (d) Respondent continued to prescribe short-acting narcotics with and without barbituates despite early indications that the patient was overusing narcotics; and
- (e) Respondent prescribed frequent short-acting narcotics without a firm diagnosis or long-term treatment plan and Respondent made no attempt to consider alternative modalities of pain control such as physical therapy, long acting opiates or acupuncture until August 1998.

12.

Between June 15, 1999 and September 13, 2001, Respondent treated patient, V.J. for dyspepsia and knee, back, and arthritis pain. Patient V.J. was only seen in the Respondent's

office on two occasions. The remainder of the treatment was the issuance of prescriptions that were called in based on phone calls received by the Respondent from the patient.

13.

Respondent's treatment of patient, V.J. fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to document any physical examination to establish a diagnosis of arthritis and its severity at the initial visit on June 15, 1999;

(b) Respondent failed to take x-rays or order laboratory tests to support the presumed diagnosis or Respondent failed to document that he ordered x-rays and lab tests and failed to document any results;

(c) The Respondent's treatment record for patient V.J. failed to indicate any further assessment or evaluation of patient's complaint of dyspepsia and the record failed to document any treatment for dyspepsia;

(d) Respondent prescribed Ambien, a sedative/hypnotic medication for pain control without documentation of effect and co-medication use;

(e) Respondent prescribed Oxycontin on a periodic basis and in presumed starting doses that are in excess of the norm. There was no documentation that Respondent gave any consideration to intra-articular steroids or hyaluronic acid injections; and

(f) Respondent prescribed a combination of short-acting narcotics plus benzodiazepines which can result in respiratory depression especially in the presence of alcohol, the use of which was not documented in the patient's record.

14.

Between July 9, 1999 and May 25, 2002, Respondent treated patient, E.J. for low back pain and gastrointestinal complaints. Patient, E.J. was only seen in the Respondent's office on three occasions. The remainder of the treatment was the issuance of prescriptions that were called in based on telephone calls made to the Respondent by the patient.

15.

Respondent's treatment of patient, E.J. fell below the minimum standards of prevailing medical practices in the following manner:

(a) Respondent failed to take x-rays or order laboratory tests to support the presumed diagnosis or Respondent failed to document that he ordered x-rays and lab tests and failed to document any results;

(b) Respondent failed to repeat a physical examination to evaluate the patient for radiculopathy and spinal stenosis;

(c) The patient was taking coumadin with complaints of severe gastrointestinal symptoms that precluded ASA and NSAID use and there was no documentation in Respondent's treatment records for the patient that a CBC or hemocult was checked;

(d) Respondent prescribed frequent short-acting narcotics without a firm diagnosis for low back pain that was never fully evaluated or attempts made to establish a long-term treatment plan;

(e) Respondent's records for the patient did not indicate that Respondent considered alternative modalities of pain control such as physical therapy, long-acting opiates and acupuncture;

(f) Despite patient complaints, there was no documentation of an evaluation of the patient's gastrointestinal tract by Respondent;

(g) There was no documentation in the patient records of alcohol or tobacco use and both of these factors were important in the evaluation and management of chronic low back pain and COPD (chronic obstructive pulmonary disease), of which patient had a history;

(h) Respondent prescribed Tussionex for the patient for sleep without further evaluation of the patient's history of COPD;

(i) Respondent prescribed duragesic patches in an initial dose of 75 micrograms which was in excess of the usual starting dose for this medication when not on regular narcotics; and

(j) There was no documentation that Respondent sought the consultation of a pain clinic for treatment of patient's chronic pain.

#### STATUTES AND RULES INVOLVED

Sanction of Respondent's license is sought pursuant to O.C.G.A. § 43-34-37 (a), which provides that the board shall have authority to refuse to grant a license to an applicant or to discipline a physician licensed under that chapter or any antecedent law upon a finding by the board that the licensee or applicant has:

(2) Knowingly made misleading, deceptive, untrue, or fraudulent representations in the practice of medicine or in any document connected therewith, or practiced fraud or deceit or intentionally made any false statement in obtaining a license to practice medicine, or made a false or deceptive biennial registration with the board;

(7) Engaged in any unprofessional, unethical, deceptive, or deleterious conduct or practice harmful to the public, which conduct or practice need not have resulted in actual injury



to any person. As used in this paragraph, the term "unprofessional conduct" shall include any departure from, or failure to conform to, the minimal standards of acceptable and prevailing medical practice and shall also include, but not be limited to, the prescribing or use of drugs, treatment, or diagnostic procedures which are detrimental to the patient as determined by the minimal standards of acceptable and prevailing medical practice or by rule of the board;

(10) Violated or attempted to violate a law, rule, or regulation of this state, any other state, the board, the United States, or any other lawful authority without regard to whether the violation is criminally punishable, which law, rule, or regulation relates to or in part regulates the practice of medicine, when the licensee or applicant knows or should know that such action is violative of such law, rule, or regulation; or violated a lawful order of the board, previously entered by the board in a disciplinary hearing;

Sanction of the Respondent's license is sought pursuant to the following provisions of former Board Rule 360-2-.09 which were in effect at the time of Respondent's actions as set forth herein:

The Board has the authority to refuse to grant a license to an applicant, or to discipline a physician licensed in Georgia if that physician has engaged in unprofessional conduct. For the purpose of the implementation and enforcement of this rule, unprofessional conduct is defined as, but not limited to, participating in or aiding the following:

(e) Prescribing drugs for a habitual drug user in the absence of substantial medical justification; (See current Board Rule 360-3-.02(1)).

(f) Any departure from, or the failure to conform to, the minimal standards of acceptable and prevailing medical practice. Guidelines to be used by the Board in defining such standards may include, but are not restricted to:

1. **Diagnosis.** Evaluation of a medical problem using means such as history, physical examination, laboratory, and radiographic studies, when applicable.
2. **Treatment.** Use of medications and other modalities based in generally accepted and approved indications, with proper precautions to avoid adverse physical reactions, habituation or addiction.
3. **Records.** Maintenance of records to furnish documentary evidence of the course of the patient's medical evaluation, treatment and response.

(k) Violating statutes and rules relating to or regulating the practice of medicine including but not limited to the following:

1. The Georgia Medical Practices Act (O.C.G.A. T. 43, Ch. 34);
2. The Georgia Controlled Substances Act (O.C.G.A. T. 16, Ch. 13, Art. 2);
3. The Georgia Dangerous Drug Act (O.C.G.A. T. 16, Ch. 13, Art. 3);
4. The Federal Controlled Substances Act (21 U.S.C.A., Ch. 13);
5. Rules of the Composite State Board of Medical Examiners, Ch. 360, Rules and Regulations of the State of Georgia, particularly Rule 360-2-.09;
6. Rules of the Georgia State Board of Pharmacy, Ch. 480, Rules and Regulations of the State of Georgia, in particular those relating to the prescribing and dispensing of drugs, Chapter 480-28;
7. Code of Federal Regulations Relating to Controlled Substances (21 C.F.R. Par. 1306).
8. O.C.G.A. Section 31-9-6.1 (1988) and Board Rules Chapter 360-14, relating to informed consent. (See Current Board Rule 360-3-.03).

Furthermore, O.C.G.A. § 43-34-24.1 provides in pertinent part as follows: "The board shall not be a professional licensing board but shall have with respect to all matters within the jurisdiction of the Composite State Board of Medical Examiners as provided under this chapter the powers, duties, and functions of such licensing boards as provided in Chapter 1 of this title."

Accordingly, sanction of the Respondent's license is also sought pursuant to the following general provisions of O.C.G.A. § 43-1-19(a), as amended:

(2) Knowingly made misleading, deceptive, untrue, or fraudulent representations in the practice of a business or profession license under this title or on any document connected therewith; or practiced fraud or deceit or intentionally made any false statement in obtaining a license to practice the licensed business or profession; or made a false statement or deceptive registration with the board;

(6) Engaged in any unprofessional, immoral, unethical, deceptive, or delictious conduct or practice harmful to the public, which conduct or practice materially affects the fitness of the licensee or applicant to practice a business or profession licensed under this title, or of a nature likely to jeopardize the interest of the public, which conduct or practice need not have resulted in actual injury to any person or be directly related to the practice of the licensed business or profession but shows that the licensee or applicant has committed any act or omission which is indicative of bad moral character or untrustworthiness; unprofessional conduct shall also include any departure from, or the failure to conform to, the minimal reasonable standards of acceptable and prevailing practice of the business or profession licensed under this title;

(8) Violated a statute, law, or any rule or regulation of this state, any other state, the professional licensing board regulating the business or profession licensed under this title, the United States, or any other lawful authority (without regard to whether the violation is criminally punishable), which statute, law, or rule or regulation relates to or in part regulates the practice of a business or profession licensed under this title, when the licensee or applicant knows or should know that such action is violative of such statute, law, or rule; or violated a lawful order of the board previously entered by the board in a disciplinary hearing, consent decree, or license reinstatement.

O.C.G.A. § 16-13-41 provides that when a registered practitioner writes a prescription to cause the dispensing of a schedule II, III, IV or V controlled substance, he shall include the

name and address of the person for whom it is prescribed, the kind and quantity of such controlled substances, the directions for taking, the signature, and the name, address, and federal registration number of the prescribing practitioner. Such prescriptions shall be signed and dated by the prescribing practitioner on the date when issued. This code section further provides that it shall be unlawful for any practitioner to issue any prescription document signed in blank. The issuance of such document signed in blank shall be prima-facie evidence of a conspiracy to violate this article. The possession of a prescription document signed in blank by a person other than the person whose signature appears thereon shall be prima-facie evidence of a conspiracy between the possessor and the signer to violate the provisions of this article.

O.C.G.A. § 43-1-19(d) provides that when a professional licensing board finds that any person is unqualified to be granted a license or finds that any person should be disciplined pursuant to subsection (a) of this Code section or the laws, rules, or regulations relating to the business or profession licensed by the board, the board may take any one or more of the following actions:

- (2) Administer a public or private reprimand, but a private reprimand shall not be disclosed to any person except the licensee;
- (3) Suspend any license for a definite period or for an indefinite period in connection with any condition which may be attached to the restoration of said license;
- (4) Limit or restrict any license as the board deems necessary for the protection of the public;
- (5) Revoke any license;
- (7) Impose a fine not to exceed \$500.00 for each violation of a law, rule, or regulation relating to the licensed business or profession; or
- (8) Impose on a licensee or applicant fees or charges in an amount necessary to reimburse the professional licensing board for the administrative and legal

costs incurred by the board in conducting an investigative or disciplinary proceeding.

O.C.G.A. § 43-1-19(e) provides that in addition to and in addition to and in conjunction with the actions described in subsection (d) of this Code section, a professional licensing board may make a finding adverse to the licensee or applicant but withhold imposition of judgment and penalty; or it may impose the judgment and penalty but suspend enforcement thereof and place the licensee on probation, which probation may be vacated upon noncompliance with such reasonable terms as the board may impose.

**COMPOSITE STATE BOARD  
OF MEDICAL EXAMINERS**

**GRACE V. DAVIS, M.D.  
President**

STATE OF ILLINOIS  
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
DIVISION OF PROFESSIONAL REGULATION

In Re: The Application of )  
Norman F. Williams, M.D. )  
Application No. 036/Cred#3530873 ) Case No. 2010-02104

**CONSENT ORDER**

The Department of Financial and Professional Regulation of the State of Illinois, Division of Professional Regulation by Vladimir Lozovskiy, one of its attorneys, and Norman F. Williams, M.D., Applicant, hereby agree to the following:

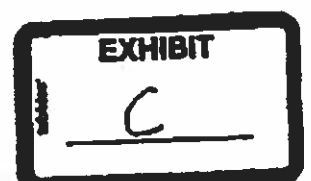
**STIPULATIONS**

The Applicant has made application for issuance of a Physician and Surgeon License as well as Controlled Substance License in the State of Illinois.

The Department is in receipt of information that Applicant was disciplined by Georgia Composite State Board of Medical Examiners for failure to maintain adequate medical records, pre-signing blank prescriptions and inappropriate prescribing of controlled substances. (see attached Department's Exhibit A). The allegations set, if proven to be true, would constitute grounds for suspending, revoking and other discipline of Respondent's license on authority of 225 ILCS 60/22(A)(12).

At all times material to the matter set forth in this Consent Order, the Department of Financial and Professional Regulation of the State of Illinois had jurisdiction over the subject matter and parties herein.

On March 10, 2010, Applicant appeared in person in front the Illinois Medical Licensing Board. Applicant provided evidence and supporting testimony regarding his prior



discipline in Georgia. In addition, Applicant provided evidence that on October 4, 2007, Georgia Composite State Board of Medical Examiners granted full reinstatement of Applicant's medical license (see attached Department's Exhibit B). Finally, during his testimony, Applicant provided information regarding his current practice style and his plans for Illinois.

Applicant has been advised of the right to a hearing, the right to contest denial of his application for license, and the right to administrative review of any Order resulting from a hearing. Applicant knowingly waives each of these rights, as well as any right to administrative review of this Consent Order.

Applicant and the Department have agreed, in order to resolve this matter, that Norman F. Williams, M.D., be permitted to enter into a Consent Order with the Department, providing for the imposition of measures which are fair and equitable in the circumstances and which are consistent with the best interest of the people of the State of Illinois.

#### CONDITIONS

WHEREFORE, the Department, through Vladimir Lozovskiy, its attorney, and Norman F. Williams, M.D., Applicant, agree:

- A. Norman F. Williams, Illinois Physician and Surgeon License shall be issued with the Reprimand;
- B. Norman F. Williams, Illinois Controlled Substance License shall be issued;
- C. This Consent Order shall become effective immediately after it is approved by the Director of the Division of Professional Regulation.

**DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION  
of the State of Illinois**

03-25-2010  
DATE

SIGNATURE REDACTED

\_\_\_\_\_  
Vladimir Lozovskiy  
Attorney for the Department

03-19-2010  
DATE

SIGNATURE REDACTED

\_\_\_\_\_  
Norman F. Williams, M.D., Applicant

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Member, Medical Licensing Board

The foregoing Consent Order is approved in full.

DATED THIS 6<sup>th</sup> day of April, 2010.

**DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION of  
the State of Illinois**

SIGNATURE REDACTED

\_\_\_\_\_  
DONALD W. SEASOCK, ACTING DIRECTOR  
Director of the Division of Professional Regulation

Application No. 036/Cred#3530873/Case No. 2010-02104



**DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION**  
of the State of Illinois

03-25-2010  
DATE

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\_\_\_\_\_  
Vladimir Lozovskiy  
Attorney for the Department

03-19-2010  
DATE

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\_\_\_\_\_  
Norman F. Williams, M.D., Applicant

March 25, 2010  
DATE

SIGNATURE REDACTED

\_\_\_\_\_  
Member, Medical Licensing Board

The foregoing Consent Order is approved in full.

DATED THIS \_\_\_\_\_ day of \_\_\_\_\_, 2010.

**DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION**  
of the State of Illinois

SIGNATURE REDACTED

\_\_\_\_\_  
DONALD W. SEASOCK, ACTING DIRECTOR  
Director of the Division of Professional Regulation

Application No. 036/Cred#3530873/Case No. 2010-02104

**STATE OF ILLINOIS  
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
DIVISION OF PROFESSIONAL REGULATION**

DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION  
of the State of Illinois,  
v.  
Norman F. Williams, M.D.,  
License No. 036.125427,  
CS License No. 336.086662,

)  
)  
) Complainant, )  
)  
)  
)  
)  
) Respondent. )

No. 2012-05166

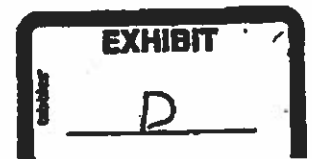
ILL. DEPT. OF FIN. & PROF. REG.  
 CLERK OF THE COURT  
 12 SEP 27 AM 10:41

**AFFIDAVIT OF BRIAN ZACHARIAH, M.D.**

I, Brian Zachariah, M.D., being duly sworn upon oath, deposes and makes this Affidavit on my personal knowledge, and if sworn as a witness in this matter I could competently testify to the following facts:

1. I am a Physician licensed to practice medicine in the State of Illinois. I have been a licensed Physician for approximately twenty six years.
2. I am currently a Chief Medical Coordinator of the Illinois Department of Financial and Professional Regulation, Division of Professional Regulation.
3. I have reviewed Moline Police Department's preliminary Investigative Reports in the Case No. 12-003983 regarding Norman F. Williams, M.D., who is a holder of Illinois Physician and Surgeon License No. 036.125427 and Illinois Controlled Substance License No. 336.086662. Specifically, I learned that Respondent allegedly touched patient S.W.'s vagina during an office visit with said patient. I also learned that Respondent has been charged with the felony offense of criminal sexual assault in that on

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- or about April 5, 2012, Respondent rubbed the labia and clitoris of patient S.W. while she was undergoing a routine appointment at Respondent's office at Gastroenterology Consultants in Moline, Illinois.
4. In addition, I reviewed Moline Police Department's preliminary Investigative Reports in the Case No. 12-007835 regarding Norman F. Williams, M.D. Specifically, I learned that Respondent allegedly touched patient D.R.'s vagina during an office visit with said patient. I also learned that Respondent has been charged with the felony offense of criminal sexual assault in that on or about June 29, 2011, Respondent inserted two of his fingers in patient D.R.'s vagina numerous times and rubbed the clitoris of patient D.R. while she was undergoing a follow-up appointment at Respondent's office at Gastroenterology Consultants in Moline, Illinois.
  5. In addition, I have become aware of information that Respondent has allegedly engaged in a pattern of sexually inappropriate conduct and/or behavior with two other patients, patient D.B. and patient T.J.H., while Respondent was responsible for the care, treatment and evaluation of said two patients. To wit, Respondent allegedly touched patient D.B.'s vagina during an office visit with said patient on or about August 14, 2012; Respondent allegedly engaged in sexually inappropriate conduct and/or behavior with patient T.J.H. during an office visit with said patient on or about July 10, 2012.
  6. Based on the foregoing I am of the opinion of to a reasonable degree of medical certainty that the continued practice of medicine by Norman F. Williams, M.D. presents an

immediate danger to the safety of the public in the State of Illinois.

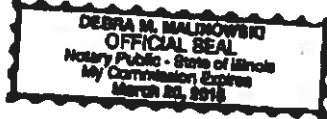
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\_\_\_\_\_  
Brian Zachariah, M.D.  
Affiant

Subscribed and sworn to before me  
this 27<sup>th</sup> day of September 2012.

SIGNATURE REDACTED

\_\_\_\_\_  
NOTARY PUBLIC



**STATE OF ILLINOIS  
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
DIVISION OF PROFESSIONAL REGULATION**

CLERK OF THE COURT

12 SEP 27 AM 10:41

ILL. DEPT. OF FIN. & PROF. REG.

DEPARTMENT OF FINANCIAL AND	)
PROFESSIONAL REGULATION	)
of the State of Illinois,	)
	Complainant, )
v.	)
Norman F. Williams, M.D.,	)
License No. 036.125427,	)
CS License No. 336.086662,	)
	Respondent. )

No. 2012-05166

**AFFIDAVIT OF JANELLE KIRBY-MCPHERON**

I, Janelle Kirby-McPheron, being duly sworn upon oath, depose and make this Affidavit on my personal knowledge, and if sworn as a witness in this matter, I would competently testify to the following facts:

1. I am currently an Investigator in the Medical Investigations Unit of the Division of Professional Regulation of the Illinois Department of Financial and Professional Regulation.
2. In the course of my duties with the Division of Professional Regulation, I was assigned Case No. 2012-05166 to investigate allegations that Respondent has allegedly engaged in the pattern of sexually inappropriate conduct and/or behavior with two patients, patient S.W. and patient D.R., while Respondent was responsible for the care, treatment and evaluation of said two patients.
3. In the course of my investigation, I obtained Moline Police Department's preliminary Investigative Reports in the Case. No. 12-003983 and the Case No. 12-007835.



4. I have prepared investigative reports, true and accurate copies of which are attached hereto as Exhibit D.

5. In the course of my investigation, I also obtained a criminal complaint filed against Respondent in the Fourteenth Judicial Circuit Court, Criminal Division of Rock Island County, Illinois. Said Complaint indicated the following information:

a. On September 21, 2012, Respondent was charged with felony offense of criminal sexual assault in that on or about June 29, 2011, Respondent committed an act of sexual penetration with patient D.R. To wit, Respondent placed his fingers in the vagina of patient D.R., in violation of 720 ILCS 5/12-13(a)(1).

b. On September 21, 2012, Respondent was charged with felony offense of criminal sexual assault in that on or about April 5, 2012, Respondent committed an act of sexual penetration with patient S.W. To wit, Respondent placed his fingers on the vagina of patient S.W., in violation of 720 ILCS 5/11-1.20(a)(1).

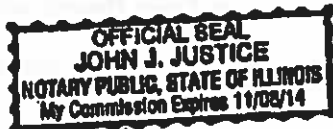
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JANELLE/KIRBY-MCPHERON  
Affiant

Subscribed and sworn to before me  
this 21 day of Sept, 2012.

SIGNATURE REDACTED

NOTARY PUBLIC



**STATE OF ILLINOIS  
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
DIVISION OF PROFESSIONAL REGULATION**

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION of the State of Illinois,	)	
v.	)	
Norman F. Williams, M.D., License No. 036.125427, CS License No. 336.086662,	)	Complainant, )
	)	No. 2012-051266
	)	
	)	Respondent. )

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CLERK OF THE COURT

ILL. DEPT. OF FINANCIAL AND PROFESSIONAL REGULATION

**COMPLAINT**

NOW COMES the DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION, DIVISION OF PROFESSIONAL REGULATION, of the State of Illinois, by its Chief of Medical Prosecutions, Laura E. Forester, and as its COMPLAINT against Norman F. Williams, M.D., Respondent, complains as follows:

**COUNT 1**

1. Respondent is presently the holder of a Certificate of Registration as a Physician and Surgeon in the State of Illinois, License No. 036.125427, and Controlled Substance License No. 336.086662 issued by the Department of Financial and Professional Regulation of the State of Illinois.
2. That the Department has jurisdiction to investigate complaints and to bring this action pursuant to 225 ILCS 60/36.
3. At all pertinent times Respondent was practicing as a Physician and Surgeon in the State of Illinois.
4. On or about September 24, 2012, information came to the Department's attention that Respondent had been charged with the felony offense of criminal sexual assault of two (2) patients.

5. Respondent has been charged with the felony offense of criminal sexual assault in that on or about April 5, 2012, Respondent committed an act of sexual penetration with patient S.W. in that Respondent placed his fingers on the vagina of patient S.W. Complaint attached hereto as Exhibit A.
6. Specifically, on April 5, 2012, patient S.W. presented to Respondent's office at Gastroenterology Consultants in Moline, Illinois for a follow-up visit; patient S.W. suffered from a reaction to medication prescribed by Respondent for her gastroparesis.
7. On April 5, 2012, Respondent examined patient S.W. with no one else present in an exam room at Gastroenterology Consultants in Moline, Illinois.
8. On April 5, 2012, Respondent examined patient S.W.'s breasts due to patient S.W.'s presenting complaint of milk leaking from her breasts.
9. Respondent then asked patient S.W. to lie down on the exam table.
10. Respondent then lowered patient S.W.'s pants so he could examine her lower abdomen.
11. Respondent then pulled patient S.W.'s pants and underwear down further, exposing her genitals.
12. Respondent then began rubbing patient S.W.'s labia and proceeded to move his hand to rub patient S.W.'s clitoris.
13. Patient S.W. jerked as Respondent's hand moved towards her vagina, causing Respondent to immediately stop.
14. Respondent then told patient S.W. that she should make an appointment to see him in three (3) weeks.



15. Respondent was not wearing gloves at any time during the office visit.
16. Respondent failed to provide a gown to patient S.W. at any time during the office visit.
17. Respondent failed to explain why he was touching patient S.W.'s pelvic and vaginal area to patient S.W. at any time during the office visit.
18. Respondent failed to document any information related to a pelvic or vaginal examination and/or touching in patient S.W.'s medical records.
19. Patient S.W. subsequently contacted the Moline Police Department and filed a report.
20. The foregoing acts and/or omissions are grounds for revocation or suspension of a Certificate of Registration pursuant to 225 Illinois Compiled Statutes, Section 60/22 (A), paragraph (5) and (20), relying on the Rules for the Administration of the Medical Practice Act, Title 68, Chapter VII, Subchapter b, Part 1285.240(a) and Part 1285.240(b), and Section 60/22 (A), paragraph (41).

WHEREFORE, based on the foregoing allegations, the DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION, DIVISION OF PROFESSIONAL REGULATION, of the State of Illinois, by Laura E. Forester, its Chief of Medical Prosecutions, prays that the Physician and Surgeon License and Controlled Substance License of Norman F. Williams, M.D., be suspended, revoked, or otherwise disciplined.

**COUNT II**

1. Respondent is presently the holder of a Certificate of Registration as a Physician and Surgeon in the State of Illinois, License No. 036.125427, and Controlled

Substance License No. 336.086662 issued by the Department of Financial and Professional Regulation of the State of Illinois.

2. That the Department has jurisdiction to investigate complaints and to bring this action pursuant to 225 ILCS 60/36.
3. At all pertinent times Respondent was practicing as a Physician and Surgeon in the State of Illinois.
4. On or about September 24, 2012, information came to the Department's attention that Respondent had been charged with the felony offense of criminal sexual assault of two patients.
5. Respondent has been charged with the felony offense of criminal sexual assault in that on or about June 29, 2011, Respondent committed an act of sexual penetration with patient D.R. in that Respondent placed his fingers in the vagina of patient D.R. Complaint attached hereto as Exhibit A.
6. Specifically, on June 29, 2011, patient D.R. presented to Respondent's office at Gastroenterology Consultants in Moline, Illinois for a follow-up visit; patient D.R. had concerns regarding a lump near her anus.
7. On June 29, 2011, Respondent examined patient D.R. with no one else present in an exam room at Gastroenterology Consultants in Moline, Illinois.
8. On June 29, 2011, Respondent told patient D.R. first to undress from the waist down and then to lean over the table and spread her legs.
9. Respondent did not leave the exam room while patient D.R. undressed.
10. Respondent then slid one of his fingers inside her anus.
11. Respondent then proceeded to insert two of his fingers in patient D.R.'s vagina.

12. Patient D.R. asked Respondent why he inserted his fingers into her vagina.
13. Respondent told patient D.R. that he was feeling her muscles.
14. Respondent proceeded to slide two of his fingers in and out of patient D.R.'s vagina approximately five (5) times.
15. Respondent then began to rub patient D.R.'s clitoris.
16. Patient D.R. then jumped and turned around.
17. Respondent again told patient D.R. that he was feeling for the muscle.
18. Respondent then told patient D.R. she could dress.
19. Respondent remained in the exam room while patient D.R. dressed.
20. Respondent then wrote a prescription for patient D.R.
21. Respondent was not wearing gloves at any time during the office visit.
22. Respondent failed to provide a gown to patient D.R. at any time during the office visit.
23. Respondent failed to document any information related to a pelvic or vaginal examination and/or touching in patient D.R.'s medical records.
24. Patient D.R. subsequently contacted the Moline police department and filed a report.
25. The foregoing acts and/or omissions are grounds for revocation or suspension of a Certificate of Registration pursuant to 225 Illinois Compiled Statutes, Section 60/22 (A), paragraph (5) and (20), relying on the Rules for the Administration of the Medical Practice Act, Title 68, Chapter VII, Subchapter b, Part 1285.240(a) and Part 1285.240(b), and Section 60/22 (A), paragraph (41).

WHEREFORE, based on the foregoing allegations, the DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION, DIVISION OF PROFESSIONAL REGULATION, of the State of Illinois, by Laura E. Forester, its Chief of Medical Prosecutions, prays that the Physician and Surgeon License and Controlled Substance License of Norman F. Williams, M.D., be suspended, revoked, or otherwise disciplined.

**DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION, DIVISION OF  
PROFESSIONAL REGULATION, of the State of  
Illinois**

By: SIGNATURE REDACTED

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Laura E. Forester  
Chief of Medical Prosecutions

Laura E. Forester  
Chief of Medical Prosecution Unit  
Department of Financial and Professional Regulation  
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