New York State Board for Professional Medical Conduct



Commissioner of Health

433 River Street, Suite 303 Troy, New York 12180-2299 • (518) 402-0863

Patrick F. Carone, M.D., M.P.H.

Chair

Ansel R. Marks, M.D., J.D.

Executive Secretary

October 20, 1998

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

William Jackson, RPA 2436 High Avenue Vestal, New York 13850

RE: License No. 005302

Dear Mr. Jackson:

Enclosed please find Order #BPMC 98-246 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect October 20, 1998.

If the penalty imposed by the Order is a surrender, revocation or suspension of this license, you are required to deliver to the Board the license and registration within five (5) days of receipt of the Order.

Board for Professional Medical Conduct New York State Department of Health Hedley Park Place, Suite 303 433 River Street Troy, New York 12180

Sincerely,

Ansel R. Marks, M.D., J.D.
Executive Secretary

Board for Professional Medical Conduct

Enclosure

cc: Catherine A. Gale, Esq.

Catherine A. Gale and Associates

PO Box 97

Fayetteville, New York 13066-0097

Anthony M. Benigno, Esq.

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

IN THE MATTER

: CONSENT

OF

: AGREEMENT

WILLIAM A. JACKSON, R.P.A.

: AND ORDER

: BPMC # 98-246

-----X

STATE OF NEW YORK)

COUNTY OF BROOME)

WILLIAM A. JACKSON, R.P.A., states:

That on or about January 23, 1996 I was licensed to practice as a registered physician's assistant in the State of New York, having been issued license number 005302 by the New York State Education Department.

My current address is 2436 High Avenue, Vestal, NY 13850, and I will advise the Director of the Office of Professional Medical Conduct of any change of my address.

I understand that the New York State Board for Professional Medical Conduct has charged me with three specifications of professional misconduct as set forth in the Statement of Charges, annexed hereto, made a part hereof, and marked as Exhibit A.

I agree not to contest the allegations contained in the first specification, in full satisfaction of the charges against me. I hereby agree to the following penalty:

Five years probation with the attached conditions and terms of probation. See Exhibit B.

I further agree that the Consent Order for which I hereby apply shall impose a condition that, except during periods of actual suspension, I maintain current registration of my license with the New York State Education Department Division of Professional Licensing Services, and pay all registration fees.

This condition shall be in effect beginning thirty days after the effective date of the Consent Order and continuing until the full term of the Order has run, and until any associated period of probation and all probation terms have been completed and satisfied. I hereby stipulate that any failure by me to comply with such condition shall constitute misconduct as defined by New York State Education Law §6530(12) and/or (29).

I agree that in the event that I am charged with professional misconduct in the future, this agreement and order shall be admitted into evidence in that proceeding.

I hereby make this Application to the State Board for Professional Medical Conduct (the Board) and request that it be granted.

I understand that, in the event that this Application is not granted by the Board, nothing contained herein shall be binding upon me or construed to be an admission of any act of misconduct

alleged or charged against me, such Application shall not be used against me in any way and shall be kept in strict confidence during the pendency of the professional misconduct disciplinary proceeding; and such denial by the Board shall be made without prejudice to the continuance of any disciplinary proceeding and the final determination by the Board pursuant to the provisions of the Public Health Law.

I agree that, in the event the Board grants my Application, as set forth herein, an order of the Chairperson of the Board shall be issued in accordance with same. I agree that such order shall be effective as of the date of the personal service of this order upon me, upon mailing of this order to me at the address set forth in this agreement or to my attorney by certified mail, or upon transmission via facsimile to me or my attorney, whichever is earliest.

I am making this Application of my own free will and accord and not under duress, compulsion or restraint of any kind or manner. In consideration of the value to me of the acceptance by the Board of this Application, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive any right I may have to contest the Consent Order for which I hereby apply, whether administratively or judicially, and ask that the Application be granted.

AFFIRMED:

ZLLIAM A JACKSON, R.P.

The undersigned agree to the attached application of the Respondent and to the proposed penalty based on the terms and conditions thereof. $\,$

Octobe 1, 1928

Attorney for Respondent

DATE: October 5, 1998

ANTHONY M. BENIGNO ASSISTANT COUNSEL

Bureau of Professional Medical Conduct

DATE: (Ctober 9, 1998

ANNE F. SAILE DIRECTOR

Office of Professional Medical Conduct

STATE OF NEW YORK : DEPARTMENT OF HEALTH STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT IN THE MATTER

> OF CONSENT

WILLIAM A. JACKSON, R.P.A. : ORDER

Upon the proposed agreement of WILLIAM A. JACKSON, R.P.A., (Respondent) for Consent Order, which application is made a part hereof, it is agreed to and

ORDERED, that the application and the provisions thereof are hereby adopted and so ORDERED, and it is further

ORDERED, that this order shall be effective as of the date of the personal service of this order upon Respondent, upon mailing of this order to Respondent at the address set forth in this agreement or to Respondent's attorney by certified mail, or upon transmission via facsimile to Respondent or Respondent's attorney, whichever is earliest.

SO ORDERED.

DATED: 10/15/98

Chairperson

State Board for Professional

Medical Conduct

EXHIBIT A

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

IN THE MATTER : STATEMENT

OF : OF

WILLIAM A. JACKSON, R.P.A. : CHARGES

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WILLIAM A. JACKSON, R.P.A., M.D., the Respondent, was authorized to practice medicine in New York State on January 23, 1996 the issuance of license number 005302 by the New York State Education Department. The Respondent is currently registered with the New York State Education Department to practice medicine for the period January 23, 1996, through December 31, 1998, with a registration address of 2436 High Avenue, Vestal, NY 13850.

FACTUAL ALLEGATIONS

- A. On or about February 25, 1998, while employed as a Registered Physician Assistant at the United Medical Associates in Binghampton, New York, Respondent administered a dose of Nubain to himself at work without any prescription or medical justification.
- B. Beginning in approximately February of 1997 and continuing through February 25, 1998, Respondent administered Nubain and Esgic to himself at work while employed as a Registered Physician Assistant at the United Medical Associates

in Binghampton, New York. Respondent administered said drugs without any prescription or medical justification.

- C. Beginning in approximately February of 1997 and continuing through February 25, 1998, Respondent habitually consumed alcoholic beverages as well as habitually used Nubain and Fioricet without any prescription or medical justification.
- D. Beginning in approximately February of 1997 and continuing through approximately February 25, 1998 Respondent called in prescriptions for his wife to the Medicine Shoppe Pharmacy in Binghampton, New York informing the pharmacy that certain physicians had prescribed the drug when in fact no physician had prescribed the drug. He picked up the prescriptions himself and paid for them in cash.
- E. Beginning in approximately February of 1997 and continuing through approximately February 25, 1998 Respondent called in prescriptions for fictitious patients to the Medicine Shoppe Pharmacy in Binghampton, New York. He picked up the prescriptions himself and paid for them in cash.

SPECIFICATIONS OF MISCONDUCT

FIRST SPECIFICATION BEING A HABITUAL ABUSER OF ALCOHOL OR DRUGS

Respondent is charged with committing professional

misconduct as defined in N.Y. Education Law section 6530(8) (McKinney Supp. 1998) by being a habitual abuser of alcohol, or being dependent on or a habitual user of narcotics, barbiturates, amphetamines, hallucinogens, or other drugs having similar effects as alleged in the facts of the following:

1. The facts in paragraphs A, B, C, D, and/or E.

SECOND SPECIFICATION

PRACTICING WHILE IMPAIRED

Respondent is charged with committing professional misconduct as defined in N.Y. Education Law section 6530(7) by practicing the profession while impaired by alcohol, drugs, physical disability, or mental disability as alleged in the following:

2. The facts in paragraphs A, B, and/or C.

THIRD SPECIFICATION

FRAUDULENT PRACTICE

Respondent is charged with committing professional misconduct as defined in N.Y. Education Law section 6530(2) (McKinney Supp. 1998) by practicing the profession of medicine fraudulently as alleged in the facts of the following:

3. The facts in paragraphs D and/or E.

DATED: October 6 , 1998

Albany, New York

Deputy Counsel

Bureau of Professional

Medical Conduct

EXHIBIT "B"

TERMS OF PROBATION

- 1. Respondent shall conduct himself/herself in all ways in a manner befitting his/her professional status, and shall conform fully to the moral and professional standards of conduct and obligations imposed by law and by his/her profession;
- Respondent shall submit written notification to the New York State Department of Health (NYSDOH), addressed to the Director, Office of Professional Medical Conduct (OPMC), New York State Department of Health, Hedley Park Place, 4th Floor, 433 River Street, Troy, New York 12180-2299; said notice is to include a full description of any employment and practice, professional and residential addresses and telephone numbers within or without New York State, and any and all investigations, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty days of each action;
- 3. Respondent shall fully cooperate with and respond in a timely manner to requests from OPMC to provide written periodic verification of Respondent's compliance with the terms of this Order. Respondent shall personally meet with a person designated by the Director of OPMC as requested by the Director.
- 4. Any civil penalty not paid by the date prescribed herein shall be subject to all provisions of law relating to debt collection by New York State. This includes but is not limited to the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of permits or licenses [Tax Law section 171(27); State Finance Law section 18; CPLR section 5001; Executive Law section 32].
- 5. The period of probation shall be tolled during periods in which Respondent is not engaged in the active practice of medicine in New York State. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in or intends to leave the active practice of medicine in New York State for a period of thirty (30) consecutive days or more. Respondent shall then notify the Director again prior to any change in that status. The period of probation shall resume and any terms of probation which were not fulfilled shall be fulfilled upon Respondent's return to practice in New York State.

- 6. Respondent's professional performance may be reviewed by the Director of OPMC. This review may include, but shall not be limited to, a review of office records, patient records and/or hospital charts, interviews with or periodic visits with Respondent and his/her staff at practice locations or OPMC offices.
- 7. Respondent shall maintain legible and complete medical records which accurately reflect the evaluation and treatment of patients. The medical records shall contain all information required by State rules and regulations regarding controlled substances.

IMPAIRMENT MONITORING

- 8. a. Respondent shall remain drug/alcohol free.
 - b. Respondent shall remain active in self help groups such as, but not limited to, Narcotics Anonymous, Alcoholics Anonymous and Caduceus.
 - c. Respondent shall notify all treating physicians of his/her history of alcohol/chemical dependency. Respondent shall advise OPMC of any controlled or moodaltering substance given or prescribed by treating physicians.
 - d. Respondent shall practice only when monitored by qualified health care professional monitors ("sobriety monitor", "practice supervisor" and "therapist") proposed by Respondent and approved, in writing, by the Director of OPMC. Monitors shall not be family members or personal friends, or be in professional relationships which would pose a conflict with monitoring responsibilities.
 - e. Respondent shall ensure that the monitors are familiar with Respondent's drug/alcohol dependency and with the terms of this Order. Respondent shall cause the monitors to report any deviation from compliance with the terms of this Order to OPMC. Respondent shall cause the monitors to submit required reports on a timely basis.
 - f. Respondent shall submit, at the request of a monitor, to random, unannounced observed blood, breath and/or urine screens for the presence of drugs/alcohol. This monitoring will be on a random, seven-days a week, twenty-four hours a day basis. Respondent shall report for a drug screen within four (4) hours of being contacted by the monitor. Respondent shall cause the monitor to report to OPMC within 24 hours if a test is

refused or delayed by Respondent or a test is positive for any unauthorized substance.

- g. Respondent shall meet with a sobriety monitor on a regular basis who will submit quarterly reports to OPMC certifying Respondent's sobriety. These reports are to include a) forensically valid results of all drug/alcohol monitoring tests to be performed at a frequency of no less than eight times per month for the first 12 months of the period of probation, then at a frequency to be proposed by the sobriety monitor and approved by OPMC and b) an assessment of self-help group attendance(e.g., AA/NA/Caduceus, etc.), 12 step progress, etc.
- h. Respondent shall practice medicine only when supervised in his/her medical practice. The practice supervisor shall be on-site at all locations, unless determined otherwise by the Director of OPMC. Respondent shall not practice medicine until a practice supervisor has been approved. Respondent shall ensure that the practice supervisor is in a position to regularly observe and assess Respondent's medical practice. Respondent shall cause the practice supervisor to report within 24 hours any suspected impairment, inappropriate behavior, questionable medical practice or possible misconduct to OPMC.
- i. Respondent shall cause the practice supervisor to review Respondent's practice regarding the prescribing, administering, dispensing, inventorying, and disposal of controlled substances.
- j. Respondent shall cause the practice supervisor to submit quarterly reports to OPMC regarding the quality of Respondent's medical practice, including the evaluation and treatment of patients, physical and mental condition, time and attendance or any unexplained absences from work, prescribing practices, and compliance or failure to comply with any term of probation.
- k. Respondent shall continue in counseling or other therapy with a therapist as long as the therapist determines is necessary, or for the period of time dictated in the Order.
- 1. Respondent shall cause the therapist to submit a proposed treatment plan and quarterly reports to OPMC certifying whether Respondent is in compliance with the treatment plan. Respondent shall cause the therapist to report to OPMC within 24 hours if Respondent leaves treatment against medical advice, or displays any symptoms of a suspected or actual relapse.
- m. Respondent shall comply with any request from OPMC to

obtain an independent psychiatric/chemical dependency evaluation by a health care professional proposed by the Respondent and approved, in writing, by the Director of OPMC.

10. Respondent shall comply with all terms, conditions, restrictions, and penalties to which he/she is subject pursuant to the Order and shall assume and bear all costs related to compliance. Upon receipt of evidence of noncompliance with, or any violation of these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding and/or any such other proceeding against Respondent as may be authorized pursuant to the law.