BEFORE THE BOARD OF MEDICAL EXAMINERS

IN THE STATE OF ARIZONA

In the Matter of

PHILIP JAMES, M.D.

Holder of License No. **20691** For the Practice of Medicine In the State of Arizona.

Board Case No. MD-01-0383

FINDINGS OF FACT, CONCLUSIONS OF LAW AND ORDER

(Letter of Reprimand)

On May 1, 2002, Philip James, M.D., ("Respondent") appeared before a Review Committee ("Review Committee") of the Arizona Board of Medical Examiners ("Board") with legal counsel, Gordon Lewis, for a formal interview pursuant to the authority vested in the Review Committee by A.R.S. § 32-1451(Q). The matter was referred to the Board for consideration at its public meeting on July 10, 2002. After due consideration of the facts and law applicable to this matter, the Board voted to issue the following findings of fact, conclusions of law and order.

FINDINGS OF FACT

- 1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.
- 2. Respondent is the holder of License No. 20691 for the practice of medicine in the State of Arizona.
- 3. The Board initiated case number MD-01-0383 after receiving a complaint from Respondent's former patient ("Patient") that Respondent had not disclosed or treated a "hole" of two to three centimeters in her right lung. According to Patient, after being treated by Respondent she moved out of town and another treating physician diagnosed a bacterial infection of the lung that Patient had for some time. According to Patient, the infection was visible on an x-ray Respondent reviewed.

- 4. In his response to the Board, Respondent indicated that he had ordered an x-ray of Patient that was interpreted by a radiologist. The x-ray indicated a lobulated right upper lobe cavity that may have represented sequelae of tuberculosis, coccidioidomycosis, or bacterial infection. According to Respondent, it did not appear to be an active component. Respondent testified that because Patient was not infectious at the time, he decided to closely follow her condition and focus on her main problems of obsessive behavior and anorexia. Respondent also testified that the radiologist did not make a recommendation after reviewing the x-rays.
- 5. A Board Medical Consultant ("Medical Consultant") reviewed the records and opined that in a patient who was immune compromised because of anorexia nervosa, it was essential that the upper lobe cavity be investigated further, regardless of whether the radiologist made any comments. The Medical Consultant also opined that Respondent should have conducted several tests, including a CT scan and applied a TB and coccidioidomycosis skin test, and treated Patient according to the results of those tests. The Medical Consultant also opined that Respondent should have considered a pulmonary consult.
- 6. Respondent testified at the formal hearing that Patient first came to him in December 1999 complaining of ankle swelling. Respondent stated that he took a history and assessed the main presenting complaint in context. Respondent stated that he recommended baseline lab work and a chest x-ray to rule out the worst-case scenario that her mild edema was related to early congestive heart failure. Respondent stated that he was prepared to take some fluid off her legs with a diuretic and remove her from the situation he believed was precipitating the problem. Respondent testified that his plan was to follow up within a week.

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8. Although Respondent testified that he believes he relayed the information to Patient, there is no note in his chart that he did so.

ray should be repeated at regular intervals to ensure stability of the lesion.

Respondent then received the blood work results and the written report

from the radiologist regarding the chest x-ray. Respondent testified that his practice is to

review any and all test results and then either contact the patient himself with the results

by telephone or discuss the results at an appointment. In Patient's case, Respondent's

medical assistant relayed the lab work results to Patient. Patient returned for a follow-up

visit on January 4, 2000 and Respondent believes, that consistent with his practice, he

discussed both the lab results and the chest x-ray. Respondent also believes that based

on his practice his informed Patient that the chest x-ray was not consistent with

congestive heart failure, but revealed a lesion that was consistent with a previous

infection. Respondent testified that he informed Patient of the radiologist's impression

that there was not an active component. Respondent testified that he believes he told

Patient that since she was asymptomatic regarding possible infectious disease that the x-

- 9. In response to a query during the formal interview, Respondent testified that if he faced a similar circumstance today he would probably be more aggressive in his treatment. Respondent also indicated it was an option to request previous chest x-rays to make a comparison to the current x-ray. The Review Committee noted that a CT scan taken approximately one year before Patient saw Respondent showed nothing in the right lobe.
- 10. Respondent was also queried as to improvements to his dictation and documentation of conversations with patients. Respondent noted that he has become more specific in his documentation and tries to delineate more specifically what his assessments are.

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CONCLUSIONS OF LAW

- The Board of Medical Examiners of the State of Arizona possesses jurisdiction over the subject matter hereof and over Respondent.
- 2. The Board has received substantial evidence supporting the Findings of Fact described above and said findings constitute unprofessional conduct or other grounds for the Board to take disciplinary action.
- 3. The conduct and circumstances above in paragraphs 5 and 8 constitute unprofessional conduct pursuant to A.R.S. § § 32-1401(25)(q) "[a]ny conduct or practice that is or might be harmful or dangerous to the health of the patient or the public."

ORDER

Based upon the foregoing Findings of Fact and Conclusions of Law, IT IS HEREBY ORDERED that Respondent is issued a Letter of Reprimand for failure to further evaluate and act on a newly discovered lung cavity.

RIGHT TO PETITION FOR REHEARING OR REVIEW

Respondent is hereby notified that he has the right to petition for a rehearing or review. Pursuant to A.R.S. § 41-1092.09, as amended, the petition for rehearing or review must be filed with the Board's Executive Director within thirty days after service of this Order and pursuant to A.A.C. R4-16-102, it must set forth legally sufficient reasons for granting a rehearing or review. Service of this order is effective five days after date of mailing. If a motion for rehearing or review is not filed, the Board's Order becomes effective thirty-five days after it is mailed to Respondent.

Respondent is further notified that the filing of a motion for rehearing or review is required to preserve any rights of appeal to the Superior Court.

1	DATED this 10 day of July	<u>/,</u> 2002.
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7	ODICINIAL of the foregoing filed this	
8	ORIGINAL of the foregoing filed this day of \(\sigma_{\sigma}\) and \(\sigma_{	
9	The Arizona Board of Medical Examiners	
10	9545 East Doubletree Ranch Road Scottsdale, Arizona 85258	
11		
12	Executed copy of the foregoing	
13	mailed by U.S. Certified Mail this day of, 2002, to:	
14	Gordon Lewis, Esquire	
15	Jennings Strouss & Salmon, PLC	
16	5722 E Placita La Gracias Tucson, Arizona 85750-0001	
17	Executed copy of the foregoing	
18	mailed by U.S. Mail this day of \(\sum_{\curve} \), 2002, to:	
19		
20	Philip B. James, M.D. 4131 N. 24 th Street, Suite B102	
21	Phoenix, Arizona 85016-6231	
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1	Copy of the foregoing hand-delivered this, 2002, to:	
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3	Christine Cassetta Assistant Attorney General Sandra Waitt, Management Analyst Investigations (Investigation File)	
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5	Arizona Board of Medical Examiners 9545 East Doubletree Ranch Road	
6	Scottsdale, Arizona 85258	
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8	Jan Jeoghan	
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