BEFORE THE BOARD OF MEDICAL EXAMINERS

IN THE STATE OF ARIZONA

In the Matter of

WILLIAM PRETLOW, M.D.

Holder of License No. **6561**
For the Practice of Medicine
In the State of Arizona.

Board Case No. MD-00-0637

FINDINGS OF FACT, CONCLUSIONS OF LAW AND ORDER

(Letter of Reprimand and Probation)

This matter was considered by the Arizona Board of Medical Examiners ("Board") at its public meeting on February 6, 2002. William Pretlow, M.D., ("Respondent") appeared before the Board with legal counsel, Sigurds Krolls, for a formal interview pursuant to the authority vested in the Board by A.R.S. § 32-1451(I). 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. 6561 for the practice of medicine in the State of Arizona.

3. The Board initiated case number MD-00-0637 after receiving a complaint regarding Respondent's care and treatment of a patient ("Patient").

4. Patient initially presented to Respondent in July of 1999. Respondent prescribed pain-killers for Patient, including Darvon, Percodan, Vicodin, Codeine sulfate and Demerol. The complainant alleged that Respondent did so despite Patient's informing Respondent that Patient was at high risk for addiction.

5. During the time Respondent treated Patient, Patient also received care at local emergency rooms for various medical problems, including a drug overdose. Patient was treated in May of 2000 for opiate dependence.

6. After Respondent was discharged from treatment for opiate dependence Respondent continued to prescribe narcotics for Patient.

7. In September 2000, Patient expired. Autopsy results indicated that there was Meperidine and Propoxyphene intoxication. A review of pharmacy records conducted during the investigation of this case revealed excessive prescriptions for Propoxyphene written by Respondent.

8. Respondent testified that there was a letter in Patient's chart regarding Patient's addiction problem, but Respondent claimed he never saw the letter and it was never brought to his attention.

9. However, Respondent also testified that Patient mentioned that he had a high risk for addiction, but that this seemed less relevant to Respondent as Patient's serious medical problems progressed.

10. Respondent indicated that he has changed his prescribing practice and is now prescribing long-acting narcotics rather than short-acting because short-acting narcotics have more abuse potential. Also, Respondent indicated that any patient who is on chronic narcotic large dose therapy is referred to an outside consultant to verify the need for narcotic use.

11. The Board queried Respondent regarding his knowledge of other providers in Respondent's office prescribing to Patient. Respondent indicated that a nurse practitioner in his office was also prescribing for Patient and, because of lack of documentation and the prescriptions being in the back of the file, it was difficult for him to determine how much narcotics Patient was getting.

12. Respondent indicated that he now writes the number of narcotics he is giving in the chart and his office no longer employs the nurse practitioner, so the lack of communication between Respondent and the nurse practitioner is no longer a problem.

13. Respondent testified that he would write the medication dose in his patient's chart, but not the amount prescribed because he was relying on a third party to summarize and document his prescribing. Respondent testified that he now takes responsibility for documenting all prescriptions himself.

14. Respondent testified that there was a problem with Patient's care and part of the problem was lack of appropriate documentation.

15. Respondent testified that it was an oversight on his part that when Patient indicated he was a high risk for addiction that he did not ask Patient if Patient had ever undergone treatment for addiction.

16. The Board noted that a review of Respondent's records regarding Patient's visit reflect only a brief to nonexistent physical examination.

CONCLUSIONS OF LAW

1. 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 7, 9, 11 and 13 through 16 constitute unprofessional conduct pursuant to A.R.S. § § 32-1401(25)(j) "[p]rescribing, dispensing or administering any controlled substance or prescription-only drug for other than accepted therapeutic purposes;" and 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:

1. Respondent is issued a Letter of Reprimand for prescribing narcotic pain medications to a patient without documenting an appropriate evaluation; for failure to document medications prescribed and for excessive prescribing of medication that contributed to the death of a patient.

2. Respondent is placed on probation for one year with the following terms and conditions:

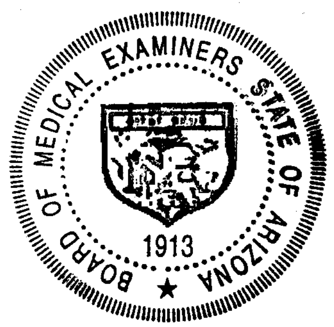
a) Respondent shall obtain 30 hours of Board staff pre-approved Category I Continuing Medical Education (CME) as follows: 20 hours in chronic pain management and 10 hours in recordkeeping. Respondent shall provide Board staff with satisfactory proof of attendance. The CME hours shall be in addition to those hours required for biennial renewal of Respondent's medical license.

RIGHT TO PETITION FOR REVIEW

Respondent is hereby notified that he has the right to petition for a rehearing. Pursuant to A.R.S. § 41-1092.09, as amended, the petition for rehearing must be filed with the Board's Executive Director within thirty (30) 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. Service of this order is effective five (5) days after date of mailing. If a motion for rehearing is not filed, the Board's Order becomes effective thirty-five (35) days after it is mailed to Respondent.

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

DATED this 10th day of April, 2002.



BOARD OF MEDICAL EXAMINERS
OF THE STATE OF ARIZONA

By Claudia Foutz
CLAUDIA FOUTZ
Executive Director

ORIGINAL of the foregoing filed this
10th day of April, 2002 with:

The Arizona Board of Medical Examiners
9545 East Doubletree Ranch Road
Scottsdale, Arizona 85258

Executed copy of the foregoing
mailed by U.S. Certified Mail this
10th day of April, 2002 to:

Sigurds Krolls
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Executed copy of the foregoing mailed this
10th day of April, 2002, to:

William Pretlow, M.D.
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Copy of the foregoing hand-delivered this
10th day of April, 2002, to:

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