Adverse Actions Report March 2023 – April 2023

The digital edition of the *Forum* presents a two-month report of recent adverse actions. This report does not include non-adverse action such as reentry agreements or relief of consent order obligations. To view all public actions, visit www.ncmedboard.org/BoardActions.

Name/license #/location	Date of action	Cause of action	Board action
ANNULMENTS			
NONE			
SUMMARY SUSPENSIONS			
NONE			
REVOCATIONS			
NONE			
SUSPENSIONS			
ALLEN, Jodell Kay, MD (201501512)	03/15/2023	MD was found unresponsive in her car. When emergency personnel arrived at the scene of the accident, MD's car was running and found to be in drive. Inside her vehicle, several empty syringes and a butterfly needle were observed. A spot of blood was observed on her forearm coming from what appeared to be an injection mark. The Board issued an Order for Examination requiring MD to submit to a comprehensive examination based this incident and suspicion of possible diversion. MD presented to North Carolina Professionals Health Program (NCPHP). MD's urine drug screen tested positive for ethanol and benzodiazepines. NCPHP recommended a residential treatment program to address MD's self-report of abuse of	Indefinite Suspension

		opiates, benzodiazepines and alcohol. MD successfully completed the program in October 2022 and signed a five-year monitoring contract with NCPHP.	
LIMITATIONS/CONDITIONS			
AMBROZY, AGATHA ZOFIA, DO (RTL200559) Greenville, NC	04/17/2023	In March 2021, DO underwent an assessment with the North Carolina Professionals Health Program (NCPHP), which found she may have a Mild Alcohol Use Disorder and recommended a one-year abstinence contract, which DO signed. However, in September 2021, DO admitted to consuming alcohol while attending a wedding in Poland. The Board ordered DO to submit for a comprehensive assessment. DO was diagnosed with Moderate Alcohol Use Disorder. After completing residential treatment, DO was deemed safe to practice by NCPHP and signed a five-year monitoring contract with NCPHP.	Non-Disciplinary Consent Order; DO shall maintain her current contract with NCPHP and abide by its terms
FARMER, Justin Levi, MD (201301482) Charlotte, NC	04/10/2023	MD self-reported to the Board that he resigned from his employment in lieu of being terminated after testing positive for	License reinstated subject to terms and conditions

		alcohol while at work. The Board's investigation revealed that MD arrived at a hospital where he held privileges and prepared anesthetic processes for two patients scheduled for cardiac procedures. Staff noticed an odor of alcohol from MD. A breathalyzer and urine drug screen showed alcohol in his system. At the request of the Board, MD voluntarily surrendered his license. He successfully completed inpatient treatment and signed a five-year monitoring contract with NCPHP. MD is currently in compliance with his NCPHP contract.	
GRAHAM, Charles Daniel, DO (202102893) Valdese, NC	03/28/2023	DO has a history of alcohol use disorder more specifically described in Consent Orders issued in September 2021 and February 2023. In October 2022, after a relapse, DO voluntarily surrendered his license to practice medicine in NC. DO has not practiced medicine since that time. Based on DO's relapse from his alcohol use disorder recovery, his license was indefinitely suspended in February 2023. During the Board's March 2023 meeting, DO met with a panel of Board members to discuss concerns	License reinstated with terms and conditions

		regarding his alcohol use disorder, relapse, and reinstatement application. DO is currently in compliance with his NCPHP monitoring contract and NCPHP supports the reinstatement of his medical license.	
HOUSTON, Robert Edgar, MD (201801226) Virginia Beach, VA	04/13/2023	In March 2022, MD entered into a Consent Order with the Board that indefinitely suspended his license to practice medicine retroactively to June 2021. MD was also licensed to practice medicine by the Virginia Medical Board. At the time MD received his NC medical license, he had a diagnosis of opioid use disorder. He was in compliance with his North Carolina Professionals Health Program (NCPHP) monitoring contract and his Virginia Health Practitioners Monitoring Program (VHPMP) monitoring contract. In May 2021, MD relapsed by inappropriately obtaining and using an opioid. In June 2021, he self-reported his relapse to NCPHP. MD has not practiced medicine since June 2021. After his relapse MD successfully completed inpatient treatment. He currently has monitoring contracts with NCPHP and VHPMP and is in compliance with	License reinstated with terms and conditions

		both contracts. In February 2022, MD became certified as a specialist in Addiction Medicine by the American Board of Preventative Medicine.	
ONIFER, Dana John, MD (202300496) Jacksonville, NC	03/06/2023	MD applied for a license to practice medicine in NC. From approximately May 2005 to August 2022, MD was employed as a physician with the United States Navy. MD has a history of being treated for alcohol use disorder and compulsive behavior. Around April 2021, MD self-referred to a military based Substance Abuse Rehabilitation Program to address his alcohol use and he completed treatment. In September 2021, MD self-referred to the North Carolina Professionals Health Program (NCPHP) for a comprehensive assessment. In November 2021, the Wisconsin Medical Examining Board reprimanded MD based on concerns that MD incorrectly entered the dosage amount for low dose aspirin to a Patient to help prevent preterm labor, intrauterine growth restriction, and preeclampsia in twin gestation for an expectant mother. In April 2022, he signed a five-year monitoring contract with NCPHP.	License issued with terms and conditions

		MD has maintained compliance with his NCPHP monitoring contract.	
REPRIMANDS			
BEVILACQUA, Anthony Michael, DO (201902810) Chesapeake, VA	04/20/2023	Action based on another Board's action. DO was Reprimanded by Virginia Board of Medicine in January 2023 based on his treatment of a patient. During arthroscopic surgery for a left biceps tenodesis to correct Patient's shoulder instability and recurrent dislocations. DO failed to properly identify the biceps tendon and misidentified the radial nerve as the biceps tendon. Consequently, DO cut the radial nerve and implanted that, rather than the biceps tendon, into the humerus. As a result, the patient experienced severe pain, absence of radial nerve function, impairment of finger flexion, and impairment of wrist, finger, and thumb extension. Patient required corrective surgery, which included nerve grafting and tendon transfers.	Reprimand
CLARK, Jeffrey Alan, PA-C (000101710) Whiteville, NC	04/13/2023	Unprofessional conduct; PA began a sexual relationship with a patient prior to discharging her as his patient and prior to securing her another provider. This violates the ethics of the	Reprimand

		profession.	
DOSS, William Lafayette, III, MD (009501527) Portsmouth, VA	04/17/2023	Action based on another Board's action. In July 2022, MD entered into a Consent Order with the Virginia Board of Medicine (Virginia Board) in which he was reprimanded and required to provide that Board with written proof that he had completed at least 15 continuing medical education (CME) credit hours in the subject of chronic pain management. In September 2022, the Virginia Board terminated the Consent Order terms and conditions and indicated that MD had completed all the required CME.	Reprimand
HARRELL, Jeffrey S., PA-C (001006103) Hickory, NC	03/23/2023	PA practiced as a physician assistant in Midlothian, Virginia. PA reported to the Board on his license renewal that he had been arrested and plead guilty to misdemeanor solicitation of prostitution in June 2021. In March 2022, PA was reprimanded by the Virginia Medical Board because, in March 2021, PA was the sole provider working at an urgent care clinic when he sent a text message soliciting prostitution to an undercover law enforcement officer. According to documentation provided by the clinic, PA abruptly left and did not return to	Reprimand; PA shall not treat female patients until he has complied with all treatment recommendations

		the clinic. As a result, several patients had to be referred elsewhere or have their appointments canceled. PA has a prior regulatory history with NCMB. In May 2021, the Board took reciprocal action on PA's license after learning that in September 2020 the Virginia Board reprimanded PA based on allegations that he prescribed to a patient with whom it appeared he had an intimate relationship. The Virginia Board's Consent Order also included findings of PA inappropriately prescribing phentermine to a second female patient. As a result of PA's Board history and his arrest for solicitation of prostitution, the Board ordered PA to undergo a comprehensive examination. The examination team recommended that PA complete a Board-approved, in person, intensive treatment program addressing inappropriate and disruptive behavior among physicians, including sexual and non-sexual boundary concerns, as well as general professional issues.	

PAVIOL, Scott Maurice, MD (201302216) Charlotte, NC	04/11/2023	In an attempt to help a relative obtain a prescription for a non-controlled substance compound pain cream for external use, MD instructed one of his staff to order the compound from the pharmacy in the name of the advanced practice provider (APP) he supervised. MD acknowledges that he did not ask the APP for permission to prescribe this medication using the APP's name. In addition, the APP never saw or examined MD's relative to determine whether the compound was medically necessary. MD also acknowledges that he had previously prescribed non-controlled substance medications to this same relative and that none of these prescriptions were documented. MD attended an intensive Continuing Medical Education course in medical ethics and boundaries.	Reprimand
DENIALS OF LICENSE/APPROVAL			
SMITH, Heather Marie, PA (SMIT2KUKAG) Mill Springs, NC	04/28/2023	The Board's decision to deny PA's application for a license is based on actions taken against PA	Denial of PA licensure

		by other state Medical Boards. Additionally, PA failed to disclose a 2020 denial of licensure in Tennessee.	
SURRENDERS			
NONE			
PUBLIC LETTERS OF CONCERN			
BARNES, Richard Ray, Jr., MD (201502346) La Porte, IN	03/07/2023	The Board is concerned that MD's treatment of a sixty-two-year-old female (Patient) who presented with nausea and severe and sudden pain on her right side to an emergency department where MD was the treating physician, may have fallen below the standard of care in NC. MD evaluated Patient and ordered full lab panels including a urinalysis and CT scan of her abdomen and pelvis. The urinalysis showed leukocyte esterase (an enzyme present in white blood cells) and other labs were remarkable for high blood sugar and mildly low sodium levels. The CT showed findings consistent with inflammation and infection of the kidney. MD discharged Patient to home with a diagnosis of flank pain, hyperglycemia, and a	Public Letter of Concern

		urinary tract infection. She returned to the ED by ambulance hours later with weakness, fatigue, low blood pressure, vomiting, fever, and altered mental state. Patient went into cardiac arrest and despite resuscitation efforts, she died. The Board had MD's treatment of Patient reviewed by an independent medical expert. MD failed to recognize that Patient had complicated pyelonephritis despite consistent clinical evidence of its presence. The Board's reviewing expert opined that MD should have treated Patient with an IV antibiotic before she initially left the ED, particularly in the setting of Patient's risk for an adverse outcome. While the expert notes that MD prescribed an outpatient antibiotic, given the very early morning hours that Patient was discharged, he should have ensured that the intended treatment was available and could be taken in a timely manner.	

BENTON, Cammy Renae, MD, (200301203) Huntersville, NC	03/17/2023	The Board reviewed medical records of a patient who presented to MD's practice via telehealth visit with an advanced practice provider under MD's supervision, in August 2021. The Board, concerned that MD's care of the patient may have failed to conform to the standards of acceptable and prevailing medical practice in NC, requested 14 additional patient records to better evaluate MD's telehealth practice. The Board, with the assistance of an outside medical expert, found that MD routinely failed to properly document patient history, physical exams, diagnosis, and treatment in patient records.	Public Letter of Concern; Required to complete CME in medical record documentation and establishing a differential diagnosis

BURKE, Jerry Wayne, MD (202300558) Kernersville, NC	03/20/2023	In August 2018, a 73-year-old male presented to MD for a chest CT scan with IV contrast. Patient's medical history included left lower lobectomy for a 3.2 cm pulmonary adenocarcinoma performed three and a half years earlier. When interpreting the results of the scan, MD failed to identify a large left and a moderate right pulmonary emboli when looking for recurrent malignancy.	Public Letter of Concern
KUO, Timothy, MD (200501810) Huntersville, NC	04/24/2023	In September 2019 a 68-year-old female (Patient) who was diagnosed with breast cancer and underwent a right breast lumpectomy and sentinel lymph node biopsy presented to MD for further treatment. After additional testing MD determined the best treatment course was adjuvant chemotherapy with radiation therapy to be postponed until after completion of chemotherapy. A week following, Patient's first round of chemotherapy she suffered severe febrile neutropenia and was hospitalized for severe septic shock and later died. The Board is concerned that MD's care of Patient may have	Public Letter of Concern

		failed to conform to the standards of acceptable and prevailing medical practice in North Carolina. If Patient had received primary prophylaxis, she might not have developed severe febrile neutropenia and the subsequent typhlitis infection, which caused her death.	
MARCHUK, Jerome M., MD (000018800) Mooresville, NC	03/22/2023	MD performed surgery to repair a hernia and patent processus vaginalis in a two-year-old male patient. During the surgery MD observed "a huge amount of tubular tissue representing a huge patent processus vaginalis or sliding hernia ..." What MD observed was actually an extension of the bladder sliding down the inguinal canal from underneath the pubis. MD corrected the hernia, closed the processus vaginalis defect, and made a scrotal incision to drain the right hydrocele and fix the testicle into the scrotum. The following day, Patient was seen in an emergency room with post-operative complications. He was admitted to the hospital and underwent an operation that revealed a bladder rupture, which was repaired. The Board's reviewing expert criticized MDs failure to	Public Letter of Concern

		employ a laparoscope during the inguinal hernia repair to evaluate whether a contralateral hernia existed. If MD had employed a laparoscope, he would have likely been able to differentiate the bladder from the tunica vaginalis, and thus may have more appropriately closed the bladder in layers to help prevent postoperative leakage.	
MITCHELL, John Albert, MD (201500244) Mt. Pleasant, SC	04/3/2023	The Board is concerned that MD's care of a patient may have fallen below the standards of care in NC. A sixty-two-year-old, non-smoking male (Patient) was referred to MD for a pulmonary consult after a computerized tomography (CT) scan revealed a mass-like substance with the appearance of air-filled passageways into the lungs surrounded by fluid-filled airspaces in the left lung, concerning for malignancy. MD treated Patient for atypical pneumonia, and later for a fungal infection of the lungs. Six months after treatment, a repeat CT scan showed an increase in size and number of nodules and noted that "the appearance most resembles adenocarcinoma." MD performed repeated bronchoscopy with	Public Letter of Concern

		bronchial wash and ordered repeated CT scans over successive months. When Patient experienced severe spinal pain, a lung biopsy revealed metastatic lung cancer. Patient died three years after first seeing MD. MD failed to perform lung biopsies to rule out cancer after CT scans showed abnormalities that could have been indicative of cancer.	
PALASTRO, Wendy Harold, MD (202300840) San Francisco, CA	04/13/2023	The Board is concerned that MD's care of an 86-year-old female with known Type 2 Diabetes with seizure-like activity and altered mental status may have failed to conform to the standards of acceptable and prevailing medical practice in NC when she failed to monitor and manage the patient's blood sugar, despite having recorded prior high glucose readings and having been aware of patient's diabetic history.	Public Letter of Concern
SUTTON, Frank Morrison, MD (200301065) Morrisville, NC	03/17/2023	The Board is concerned that after consuming alcoholic beverages during a concert at a local public venue, MD was uncooperative with event security personnel resulting in law	Public Letter of Concern

		enforcement involvement. While resisting law enforcement requests to leave the venue, MD pulled away resulting in one of the officers falling to the ground. As a result of the fall, the officer sustained a head laceration that required 11 stitches.	
TARIQ, Farzana, MD (202300558) Raleigh, NC	03/09/2023	Action based on another Board's action. The Board is concerned that in May 2018, MD entered into a Consent Order with the Michigan Board of Medicine that reprimanded her Michigan medical license and fined her $1,500. This action was based on findings that in April 2017, MD inappropriately obtained two tablets of a controlled substance anxiety medication for her personal use. The Board notes that MD currently has active medical licenses in Michigan and Virginia.	License issued with Public Letter of Concern
MISCELLANEOUS ACTIONS			
NONE			
CONSENT ORDERS AMENDED			
NONE			
TEMPORARY/DATED LICENSES: ISSUED, EXTENDED, EXPIRED, OR REPLACED BY FULL LICENSES			
NONE			
COURT APPEALS/STAYS			
NONE			
DISMISSALS			
NONE			