PHYSICIAN IMPAIRMENT PROGRAM

The Diversion Program for Impaired Physicians began on January 1, 1980. The law creating this program established four criteria for participation in the program: alcohol and/or other drug abuse, mental or physical disorder. These four criteria are explicit and specific. The program diverts the physician with one or more of these impairments from disciplinary action based on these impairments. The program is not designed to be an escape hatch from disciplinary actions outside of these four categories, even though one or more of these impairments are present or have occasioned a negligent act. In other words, the diversion program does not change any systems already established, but provides an alternative or procedural change in dealing with physicians who fall into the four categories.

The program provides some answers to the frustration arising from a series of confrontations with an impaired physician. The process frequently follows a course of friendly confrontation, promises to amend ways, more confrontations and serious warnings, more promises, and finally, formal disciplinary action.

The diversion program is based on early identification and referral. It is not only an alternative to disciplinary action, but an alternative to the many personal sacrifices of colleagues, family, and friends the impaired physician causes and manipulates.

It takes time to develop an impairment when alcohol and other drug abuse is involved. Part of the impairment is the unwillingness to admit it, even when it becomes obvious, and to vehemently deny it when confronted. This denial can exist within the system in which the impaired physician works. Many and varied excuses, unreal rationalizing and explanations produce answers that deny impairment. Impairment grows in delay and postponement.

Ideally, it is hoped that all physicians will be so aware of the Diversion Program for Impaired Physicians (which is highly confidential) that the very first confrontation with impaired physicians will trigger the idea and the alternative that the program offers.

If you would like more information, call Jerry Becker at (916) 920-6393 during days and (916) 344-4669 or (415) 525-8682 during evenings or weekends.

PROFESSIONAL PERFORMANCE PILOT PROJECT

The Professional Performance Pilot Project is now officially underway. This program was mandated by AB 3063, a bill enacted in the fall of 1978, requiring the Division of Medical Quality of the Board of Medical Quality Assurance to establish a pilot program to ensure the competence of California’s physicians. This is to be accomplished by developing a system of exception reporting for identifying substandard medical care through the application of objective screening criteria.

A major feature of the program is that the law explicitly provides for cooperation between the local Medical Quality Review Committees and existing local quality assurance organizations. The law also provides certain legal protections to encourage the exchange of relevant information among participating groups, such as hospitals peer review committees, county medical societies, and health insurance plans.

Three Medical Quality Review Committee Districts have been selected as sites for this two-year project: District I (Northern California); District IV (San Francisco); and District VII (Santa Clara). A Project Director is now on board, each MQRC has set up a Liaison Committee for the project, and a Technical Advisory Committee of nationally recognized experts in the field of medical quality assurance has been appointed.

The Professional Performance Pilot Project will provide a unique opportunity to maximize the effectiveness of both public and private sector quality assurance programs. The MQRCs and the Technical Advisory Committee are currently working together to plan local orientation sessions to explain the philosophy and operational logistics of the Pilot Project to local quality assurance groups. It is anticipated that the project will be characterized by active voluntary participation and support from local hospital medical staffs and hospital organizations in the districts.
THE PHYSICIAN'S RESPONSIBILITY TO GIVE A WRITTEN RECORD OF IMMUNIZATIONS ADMINISTERED

In Action Report Number 10 dated April, 1979, an article on immunization records cited Health and Safety Code Section 3387 and Administrative Code, Section 6065, which require that persons or organizations administering vaccines must supply the patient with a written record of the immunizations. This legal requirement applies only to immunizations required for school entry in California and given to persons under 18 years of age. Immunizations against poliomyelitis, diphtheria, pertussis, tetanus, measles, and (as of January, 1980) mumps and rubella are required for entry to private schools and pre-kindergarten programs in this state. Children already enrolled in a California school at kindergarten level or higher as of January 1, 1980 are exempt from the mumps/rubella requirement.

As proof of immunizations for school entry, the month and year of each vaccine dose, by vaccine type, must be presented. To facilitate this process, the standard California Immunization Record is available to vaccine providers free from county health departments or the State Department of Health Services, Immunization Unit, 2151 Berkeley Way, Berkeley, CA 94704.

LEGAL DEFINITION OF THE PRACTICE OF MEDICINE

In recent years, the Board has noted that Section 2141 of the Business and Professions Code is no longer totally appropriate to meet the needs of changes in medicine. The vagueness of the statute has created problems for practitioners, patients and government. Examples of changes in medicine include technical innovations, the rise of unforeseen and unsettling ethical dilemmas and the demands by consumers for a more active role in their own health care.

To examine this issue, the Board was able to interest three foundations in funding a study of the legal definition of medicine in California. Coupled with Board contingency funds, a study was conceptually approved in late 1979.

To ensure objectivity, a decision was made to employ an independent firm to conduct the study. Requests for proposals were received from four firms and the contract ultimately awarded to Public Affairs Research Group (PARG). PARG is managed by Jerome Evans, who has a long history of experience in directing research projects and a practical knowledge of state government in California. Mr. Evans will be directing a study which will include the involvement of experts in health care, economics, political science, medical history, philosophy, ethics, public policy and health planning in a series of colloquia and public hearings.

The study is to be completed by June 30, 1981.

MARIJUANA MEDICAL RESEARCH PROGRAM

In Action Report Number 13 dated January, 1980, the phone number for the Research Advisory Panel was incorrectly shown as (415) 552-1325. The correct number is (415) 557-1325. Also, the program is expected to be operational in the Spring of 1980, rather than in a year as stated in the previous article.

DISCIPLINARY ACTIONS OCTOBER 1, 1979-DECEMBER 31, 1979

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Code Number</th>
<th>Date</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apaplasa, Robert J., M.D.</td>
<td>Los Angeles</td>
<td>G-4587</td>
<td>October 15, 1979</td>
<td>Stipulated Decision. Inability to properly control his self-use of drugs in that for the past several years he has unlawfully obtained Talwin by deceit and subterfuge for the purpose of self-administration. Revoked.</td>
</tr>
<tr>
<td>Bower, George Judson, M.D.</td>
<td>Redding</td>
<td>A09261</td>
<td>October 18, 1979</td>
<td>Stipulated Decision. Felony conviction for one count of grand theft and one count of filing false Medi-Cal claims. Submitted a large number of false billings for purported psychotherapy treatments which she did not render. Revoked.</td>
</tr>
<tr>
<td>Boyce, Lancy L., Jr., M.D.</td>
<td>Fresno</td>
<td>C-24418</td>
<td>November 5, 1979</td>
<td>Stipulated Decision. Clearly excessive prescribing of Demerol to a patient resulting in addiction, a seizure disorder, and multiple absences requiring surgery. Prescribed excessive dosages of Talwin to another patient; and to a third patient, an excessive prescribing of a variety of drugs, resulting in drug dependency. Revoked.</td>
</tr>
<tr>
<td>Babin, George William, Jr., M.D.</td>
<td>Sacramento</td>
<td>G-34795</td>
<td>October 18, 1979</td>
<td>Stipulated Decision. Felied to keep records of his purchase and disposition of Demerol and Morphine Sulfate. Failed to produce drug records to agents, as required by statutes regulating controlled drugs. Revoked.</td>
</tr>
<tr>
<td>Bryson, Elmer, Jr., M.D.</td>
<td>National City</td>
<td>A-14625</td>
<td>October 15, 1979</td>
<td>Stipulated Decision. Inability to properly control his self-use of drugs in that for the past several years he has unlawfully obtained Talwin by deceit and subterfuge for the purpose of self-administration. Revoked.</td>
</tr>
<tr>
<td>Ditman, Keith S., M.D.</td>
<td>Beverly Hills</td>
<td>A-12803</td>
<td>November 5, 1979</td>
<td>Stipulated Decision. Clearly excessive prescribing of Schedule II controlled drugs by a psychiatrist to known addicts. Furnished drugs in a grossly negligent and incompetent manner. Irregularities in written prescriptions, including postdating. Failed to file report with Attorney General after prescribing Schedule II drugs to known addict, as required by law. Revoked.</td>
</tr>
<tr>
<td>Ditman, Keith S., M.D.</td>
<td>Beverly Hills</td>
<td>A-12803</td>
<td>October 15, 1979</td>
<td>Stipulated Decision. Clearly excessive prescribing of Schedule II controlled drugs by a psychiatrist to known addicts. Furnished drugs in a grossly negligent and incompetent manner. Irregularities in written prescriptions, including postdating. Failed to file report with Attorney General after prescribing Schedule II drugs to known addict, as required by law. Revoked.</td>
</tr>
</tbody>
</table>
Duncan, John Jolly, M.D. (A07836)—Los Angeles
2399.5, 2391.5, 2384 B&P
Stipulated Decision. Prescribed dangerous drugs without a good faith prior examination and medical indication therefor to persons not under his treatment for a pathology or condition. Convicted in criminal court of violating a state statute. Revoked, stayed, 7 years probation on terms and conditions.
December 6, 1979

Simon, George V., M.D. (G-23786)—Concord
2411 B&P
Stipulated Decision. Ophthalmologist made a misleading affidavit to licensing agency stating that from personal knowledge he verified that the applicant for a dispensing optician license had the required 5 full years of fitting experience, when in truth the physician actually knew the applicant less than 5 years. Public Reprimand. December 10, 1979

Taylor, Kent S., M.D. (A-11265)—Exeter
2361(e), (g) B&P
General practitioner assigned to an obstetrical practice in a group clinic was grossly negligent and/or incompetent in his surgery or treatment of certain obstetrical patients. Revoked, stayed, 15 years probation on terms and conditions. November 7, 1979

Thurtle, Robert J., M.D. (C-23747)—Livermore
Violance of Probation
Failed to undergo psychiatric examination in violation of terms of probation granted under prior disciplinary decision. Probation order of June 29, 1978, amended, placed on 10 years probation, suspended from practice until he undergoes a psychiatric examination, original order remains in effect in all other respects. November 5, 1979

Weisel, Orest, M.D. (A-23042)—Stockton
2361 B&P
Unprofessional conduct: persistent improper advances toward female hospital nurses. 30 days suspension, stayed, 1 year probation. October 11, 1979

CORRECTION
Action Report No. 12—October 1979
Contained a summary stating that Gordon S. Goel, M.D., of Los Angeles was disciplined for aiding an unlicensed person in the practice of medicine and permitting that person to conduct a medical business under the name of Asian Medical Center, which respondent represented was his medical fictitious name.

This was an incorrect description of the actual offense admitted to in the stipulation agreement negotiated by the parties in settlement of the case.

The correct summary should have read as follows:

Goel, Gordon S., M.D. (A-23054)—Los Angeles
2393 B&P
Stipulated Decision. Failed to apply for or obtain a valid permit to do business under a fictitious name ("Asian Medical Center"), as required by the Medical Practice Act. Suspending 30 days, stayed, 1 year probation. May 4, 1979
PHYSICIAN RESPONSIBILITY
The Board of Medical Quality Assurance and the California Medical Association have issued a joint statement to assist physicians, individually and collectively, to meet their responsibilities of professional self-regulation.

The joint statement is available in the form of a booklet and was distributed to physicians in January.

Included in the booklet is a series of steps that a physician should take when there is concern regarding a peer's practice, behavior or well-being. In addition, excerpts of relevant liability laws are also discussed to overcome concerns of physicians who may be hesitant about involvement because of personal liability.

All physicians are strongly encouraged to obtain and read the statement. Copies may be obtained by writing or calling the Board of Medical Quality Assurance, 1430 Howe Avenue, Sacramento, CA 95825 (916) 920-6393.

January 1980 MQRC Appointments

**District I**
- William Pike, D.C.
- Jerome Weinbaum, M.D. (reappointment)

**District II**
- Victoria Servantez, LVN (reappointment)
- Nancy Vignadamo, R.N. (reappointment)
- Henry Go, M.D. (reappointment)

**District III**
- Bruce Reyes, D.C.

**District IV**
- Robert Palmer, M.D. (reappointment)

**District V**
- John Wilson, D.C.
- Thomas Richmond, M.D. (reappointment)
- Margaret Amouroux (public member)

**District VI**
- Dennis Swanson, D.C.
- Carol Whiteside (public member—reappointment)

**District VII**
- Todd Tomihiro, R.Ph. (reappointment)
- Aidan Gough, J.D. (reappointment—public member)

**District VIII**
- Clyde Shick, D.C.

**District IX**
- Harold Barber, Jr., D.C.
- Roger Vargas, M.D. (reappointment)

**District X**
- Thomas Hawley, D.C.

**District XI**
- Mary Boyden “Boots” Jones, P.T.
- Edward Passaro, Jr., M.D.
- Jack Moore, M.D. (reappointment)

**District XII**
- Marie Reeves, R.N. (reappointment)
- Jerilyn Kaibel, D.C.
- Gladys Whipple, M.D. (reappointment)

**District XIII**
- Hiram Diaz (reappointment—public member)
- Perry Pugno, M.D.
- Edmund Dombrowski, M.D.

**District XIV**
- Robert Palmer, M.D. (reappointment)

**District XV**
- Leonard Goldberg, D.C.
- Judith Jorgensen, M.D.
- Paul Jagger, M.D. (reappointment)
- Richard Butcher, M.D. (reappointment)
- Charles Umansky, M.D.
- Eli Layon, M.D. (reappointment)
- Merkel Harris (reappointment—public member)
- Marguerite Schwarzman (reappointment—public member)

**Board of Medical Quality Assurance**
- Fredrick G. Quevedo, M.D.
- Effective 12/31/79 (Burbank)
- Division of Licensing

RADIOLOGIC ACT
A medical license does not automatically authorize a physician and surgeon either to use or supervise the use of X-rays on human beings, unless he or she also is certified by the State Department of Health Services as an X-ray Supervisor and Operator.

Employment of a Certified Radiologic Technologist or a Limited Permit X-ray Technician to operate the equipment does not satisfy physician's X-ray certification requirement.

Radiologic technologists who possess a certificate issued by the American Registry of Radiologic Technologists must also have a Certified Radiologic Technologist certificate issued by the State Department of Health Services, before functioning as radiologic technologists in California.

Further information regarding certification requirements can be obtained through the State Department of Health Services, Radiologic Health Section, 714 P Street, Sacramento, CA 95814; (916) 445-6695.