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STATE OF WISCONSIN
BEFORE THE MEDICAL EXAMINING BOARD

IN THE MATTER OF THE DISCIPLINARY :
PROCEEDINGS AGAINST :
 : FINAL DECISION AND ORDER
DONALD F. STONEFELD, M.D., : Case No. LS0508171MED
RESPONDENT. :

[Division of Enforcement Case No. 02 MED 315]

The parties to this action for the purposes of Wis. Stat. § 227.53 are:

Donald F. Stonefeld, M.D.
1120 Woodland Drive
Rhineland, WI 54501

Division of Enforcement
Department of Regulation and Licensing
1400 East Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935

Wisconsin Medical Examining Board
Department of Regulation and Licensing
1400 East Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935

PROCEDURAL HISTORY

A disciplinary complaint and notice of hearing were filed with an Administrative Law Judge and served upon the Respondent on August 17, 2005. A hearing on the allegations is scheduled for March 7-9, 2006.

The parties in this matter agree to the terms and conditions of the attached Stipulation as the final decision of this matter, subject to the approval of the Wisconsin Medical Examining Board. The Board has reviewed this Stipulation and considers it acceptable.

Accordingly, the Board in this matter adopts the attached Stipulation and makes the following:

FINDINGS OF FACT

1. Donald F. Stonefeld, M.D., Respondent, date of birth March 3, 1936, is licensed and currently registered by the Medical Examining Board to practice medicine and surgery in the state of Wisconsin, pursuant to license number 35255, which was first granted March 25, 1994.
2. Respondent's last address reported to the Department of Regulation and Licensing is 1120 Woodland Drive, Rhineland, WI 54501.
3. Respondent specializes in the area of psychiatry.
4. During the events of this matter, Respondent was the medical director at Gogebic County Community Mental Health (CMH) in Wakefield, Michigan, where he worked approximately three days per week. At that facility, Respondent's responsibilities included providing prescription services, supervision of medical care, counseling and case management.

5. On May 3, 2002, Ms. A, who was then 50 years old, went to CMH seeking mental health services. Ms. A had previously received in-patient treatment for depression at CMH in 1984 and in-patient treatment there in 1993 for treatment of Bipolar Disorder.

6. Ms. A was seen by a clinical social worker and reported a history of Bipolar Disorder, for which she was taking medication, with the last manic episode a month earlier. She also reported chronic Post Traumatic Stress Disorder from childhood sexual abuse and physical abuse. She also reported she had been separated from her husband for a year and was in a sexual relationship with another man.

7. The clinical social worker diagnosed Bipolar I Disorder, Kleptomania, Alcohol Abuse in full remission for 8 years. He recommended that Ms. A begin psychotherapy with him, to which she agreed. He also referred Ms. A to Respondent for a psychiatric consultation.

8. Ms. A saw Respondent on May 23, 2002, for the psychiatric consultation. Respondent reviewed Ms. A's treatment record and they discussed: her strong urge to shoplift, her history of Bipolar Disorder, obsessive/compulsive behavior and past periods of excessive alcohol consumption, her history of being an incest victim, her frequency of masturbation and other sexual activities. Respondent diagnosed Ms. A with Bipolar Disorder, Post Traumatic Stress Disorder (PTSD) Obsessive/Compulsive Disorder and Personality Disorder, NOS. He reviewed and made adjustments to Ms. A's medications and made a return appointment on June 12 for medication management.

9. Two weeks after the consultation, Respondent called Ms. A at her home. He told Ms. A that he wanted to see her socially, but that in order for them to see each other, she would have to stop being his patient. Ms. A claims she was confused but flattered that Respondent would be attracted to her. Ms. A told Respondent that she would see him at her next appointment on June 12.

10. On June 11, 2002, Respondent again called Ms. A. Ms. A told him she had decided not to have therapy or be his patient because she wanted to see him socially. Respondent told her they would discuss it at her appointment the next day.

11. When Ms. A arrived for her appointment on June 12, 2002, Respondent hugged her. He noted in the record that she was bright and orientated, had no delusions or hallucinations and had decided not to pursue counseling at that time and that she would not be returning. He also provided her with an order for laboratory work to determine her Lithium level, gave her a 3-

month supply of medication and instructed her to follow up on medication with her primary care provider. Then he asked Ms. A if they could get together on Tuesday, June 18, 2002 and Ms. A agreed to do so.

12. Ms. A says that following the June 12 appointment, she became anxious, could not sleep and felt shame about meeting Respondent. Ms. A discussed the situation with friends at that time. Ms. A came to believe that the arranged meeting would be about sex and she had “ugly thoughts.” The morning of June 18, 2002, Respondent called Ms. A and left a recorded message on her answering machine that he would be done with work around 5:00 p.m. and they could get together then. Ms. A says that when she heard the message, she felt nervous, scared and disgusted. She did not return Respondent’s call and never met with him for a personal relationship. Respondent did not call again.

13. Ms. A never returned to CMH after June 12, 2002 because of concerns regarding Respondent. She says she felt she was without a doctor and there was no one else she could see near her community. Ms. A did not seek psychotherapy or other treatment from any mental health care provider until October 16, 2002, when she was admitted as an in-patient for three days at Memorial Medical Center in Ashland, Wisconsin.

14. Respondent’s conduct, as set out above, violated appropriate relationship boundaries between a psychiatrist and the psychiatrist’s patient.

15. By agreement with the Division of Enforcement and at his own expense, Respondent was evaluated in December 2005 by Gary Schoener, a Minneapolis psychologist with extensive experience evaluating health care providers who have had issues with professional boundaries. The January 27, 2006 report of the evaluation concludes to a reasonable degree of professional certainty:

- a. Respondent does not have any psychological disorder.
- b. Respondent, as a result of having taken continuing education in the area of professional boundaries, has a good understanding of the subject and does not require further education in the area.
- c. Respondent can safely practice medicine and surgery without limitation.

CONCLUSIONS OF LAW

1. The Wisconsin Medical Examining Board has jurisdiction over this matter pursuant to Wis. Stat. § 448.02(3) and authority to enter into this stipulated resolution of this matter pursuant to Wis. Stat. § 227.44(5).

2. Respondent violated Wis. Adm. Code § MED 10.02(2)(h) and is therefore subject to discipline pursuant to Wis. Stat. § 448.02(3).

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED:

1. Donald F. Stonefeld, M.D., is hereby REPRIMANDED for the above conduct.
2. Respondent shall, within 60 days of the date of this Order, pay \$3,650.00 to the Department of Regulation and Licensing, which represents the costs of this proceeding.
3. Payment shall be sent to:

Department Monitor
Department of Regulation and Licensing
Division of Enforcement
1400 East Washington Ave.
P.O. Box 8935
Fax (608) 266-2264
Telephone (608) 267-3817
Madison, WI 53708-8935

4. In the event that Respondent fails to pay costs as ordered, Respondent’s license SHALL BE SUSPENDED, without further notice or hearing, until Respondent has complied with the terms of this Order.

5. This Order is effective on the date of its signing.

Wisconsin Medical Examining Board

By: Bhupinder Saini
A Member of the Board

3/15/06
Date