

## WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



### Wisconsin Department of Safety and Professional Services Access to the Public Records of the Reports of Decisions

This Reports of Decisions document was retrieved from the Wisconsin Department of Department of Safety and Professional Services website. These records are open to public view under Wisconsin's Open Records law, sections 19.31-19.39 Wisconsin Statutes.

#### Please read this agreement prior to viewing the Decision:

- The Reports of Decisions is designed to contain copies of all orders issued by credentialing authorities within the Department of Safety and Professional Services from November, 1998 to the present. In addition, many but not all orders for the time period between 1977 and November, 1998 are posted. Not all orders issued by a credentialing authority constitute a formal disciplinary action.
- Reports of Decisions contains information as it exists at a specific point in time in the Department of Safety and Professional Services data base. Because this data base changes constantly, the Department is not responsible for subsequent entries that update, correct or delete data. The Department is not responsible for notifying prior requesters of updates, modifications, corrections or deletions. All users have the responsibility to determine whether information obtained from this site is still accurate, current and complete.
- There may be discrepancies between the online copies and the original document. Original documents should be consulted as the definitive representation of the order's content. Copies of original orders may be obtained by mailing requests to the Department of Safety and Professional Services, PO Box 8935, Madison, WI 53708-8935. The Department charges copying fees. *All requests must cite the case number, the date of the order, and respondent's name as it appears on the order.*
- Reported decisions may have an appeal pending, and discipline may be stayed during the appeal. Information about the current status of a credential issued by the Department of Safety and Professional Services is shown on the Department's Web Site under "License Lookup."  
The status of an appeal may be found on court access websites at:  
<http://ccap.courts.state.wi.us/InternetCourtAccess> and <http://www.courts.state.wi.us/wscqa>.
- Records not open to public inspection by statute are not contained on this website.

**By viewing this document, you have read the above and agree to the use of the Reports of Decisions subject to the above terms, and that you understand the limitations of this on-line database.**

**Correcting information on the DSPS website:** An individual who believes that information on the website is inaccurate may contact the webmaster at [web@drl.state.wi.gov](mailto:web@drl.state.wi.gov)

STATE OF WISCONSIN  
BEFORE THE MEDICAL EXAMINING BOARD

---

IN THE MATTER OF :  
DISCIPLINARY PROCEEDINGS AGAINST : **FINAL DECISION AND ORDER**  
: :  
JESSE O. VEGAFRIA, M.D., :  
RESPONDENT. : **ORDER 0001561**

---

Division of Enforcement Case #11 MED 41

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

Jesse O. Vegafria, MD  
3240 Woodhill Ct  
West Bend WI 53095-9223

Wisconsin Medical Examining Board  
P.O. Box 8935  
Madison, WI 53708-8935

Department of Safety and Professional Services  
Division of Enforcement  
P.O. Box 8935  
Madison, WI 53708-8935

PROCEDURAL HISTORY

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 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. Respondent Jesse Occena Vegafria, M.D. (dob 11/27/1934) is and was at all times relevant to the facts set forth herein a physician and surgeon licensed in the State of Wisconsin pursuant to license # 17088, first granted on 2/6/1970. Respondent is an anesthesiologist currently specializing in pain management, in solo practice. He is not certified by any board recognized by the American Board of Medical Specialties.

2. Respondent provided care and treatment to patient A for her injuries after a traffic accident in November, 2010. Respondent initially provided both injections, and pain medication in the form of oxycodone with acetaminophen; he then provided acupuncture, and moxibustion.

The patient saw Respondent once a week for about 8-10 weeks. He treated her lower neck and upper back. On 1/31/11, while at Respondent's office, Respondent asked her to work part time for him and said that he would pay her cash. She did not accept this offer.

3. Patient A has reported that on 2-7-11, during the course of her treatment at Respondent's office Respondent made inappropriate comments to her of a sexual nature and also engaged in inappropriate physical contact with her of a sexual nature. Respondent neither admits nor denies the allegations of Patient A.

4. There was no therapeutic purpose to Respondent's actions.

5. Respondent provided care and treatment to patient B in 2007. Patient B was in a car accident in 2006 and had severe back pain as a result. The Hartford Hospital referred her to Respondent.

6. The patient had an acupuncture and moxibustion treatment by Respondent in October, 2007, and scheduled another one for 2 weeks later. Respondent was the only person at the clinic and there were no assistants or clerical staff.

7. Before the second appointment, patient B called Respondent and told him the treatment was not covered by insurance and she needed to cancel as she didn't have the money. Respondent told her she should just come and he would not charge her.

8. Patient B has reported that during her second appointment for treatment in October 2007, Respondent made inappropriate comments to her of a sexual nature and also engaged in inappropriate physical contact with her of a sexual nature. Respondent neither admits nor denies the allegations of Patient B.

9. About a month and a half later, the patient called Respondent and made another appointment because she had extreme back pain and the acupuncture treatment worked. She told Respondent she didn't have money to pay and Respondent told her she didn't need money.

10. Patient B has reported that during her third appointment for treatment, Respondent made inappropriate comments to her of a sexual nature, engaged in inappropriate personal conversations with her, and also engaged in inappropriate physical contact with her of a sexual nature. Respondent neither admits nor denies the allegations of Patient B.

11. There was no therapeutic purpose to Respondent's actions.

12. Patient A and patient B do not know each other.

13. On 1/26/09, Respondent began providing care to patient C, a man born in 1983. Respondent charted: "Low back pain & sciatica. Started about 2 yrs ago after he fell...He was under pain management treatment in Milwaukee but would like to get his treatment closer to home. At present he is on methadone 20mg TID & Lyrica 75mg at bedtime. This treatment is not getting him relief. He will be weaning and discontinuing from methadone. Physical exam

showed marked pain in lumbosacral facet joint, more the right with sciatic pain also on the right. The pain from the right sciatic radiates down to right leg. There is numbness on lateral side of the right leg.” The patient's 8/18/08 MRI report was reviewed, showing (1) L4–5 and L5–S1 degenerative disc disease causing biforaminal stenosis at L5–S1, and (2) L5-S1 facet degeneration. Respondent performed a L5-S1 facet joint injection with Marcaine® 0.25% 5.0ml and Sarapin® 5.0ml, without fluoroscopic guidance. Respondent also provided acupuncture treatments to the patient. Pharmacy records show that 50 methadone 10mg were dispensed to the patient, on Respondent's prescription; there is no notation of a prescription in Respondent's progress note.

14. There is no medication sheet in Respondent's chart.

15. The patient returned to care on 2/6/09, and reported that his back pain was much better. Exam showed less pain to palpation at L4-L5 facet joint. Respondent performed another L4-L5 facet joint injection, without fluoroscopic guidance. Respondent also provided acupuncture treatments to the patient. Respondent charted a prescription for 180 methadone, 20mg TID (10mg tablet) “prescribed to wean him from his narcotic addiction until he will be able to get into addiction clinic.” Respondent is not registered as a narcotic treatment program, or otherwise authorized to prescribe methadone as a treatment for addiction.

16. On 2/12/09, Respondent prescribed methadone 10 mg, #78, take two, TID. There is no progress note associated with this chart entry.

17. On 3/4/09, Respondent prescribed 180 methadone 10mg, 2 tabs TID, and charted: “He said he cannot work & function without methadone.” There is no progress note associated with this chart entry.

18. Pharmacy records reveal that on 3/27/09, 180 methadone 10mg, were dispensed to the patient, on Respondent's prescription. There is no record of this prescription in Respondent's chart.

19. On 4/14/09, Respondent prescribed methadone 10 mg, take two, TID, #100. There is no progress note associated with this chart entry. Pharmacy records revealed that this prescription was filled, on that day.

20. On 4/23/09, Respondent prescribed 100 methadone 10mg 2-3 tabs TID. There is no progress note associated with this chart entry

21. On 5/5/09, Respondent prescribed 180 methadone 10mg 2-3 tabs TID. Respondent charted: “[Patient] is going to get rehabilitation treatment for his medical problem.” There is no progress note associated with this chart entry. Pharmacy records reveal that this prescription was dispensed on that day.

22. Pharmacy records reveal that on 5/22/09, 180 methadone 10mg, 2-3 tabs TID, were dispensed to the patient, on Respondent's prescription. There is no record of this prescription in Respondent's chart.

23. On 6/1/09, Respondent prescribed 80 methadone 10mg, 2-3 tabs TID, There is no progress note associated with this chart entry. Pharmacy records reveal that were dispensed to the patient on that day.

24. On 6/8/09. Respondent charted: "I told [patient] that I am not going to give him another prescription but see another clinic that will take care of his addiction problem." Notwithstanding this statement, Respondent prescribed 40 methadone 10mg 2-3 tabs TID. There is no progress note associated with this chart entry.

25. On 6/16/09, Respondent prescribed 100 methadone 10mg 2-3 tabs TID, and charted: "He has not seen another Dr. to take care of his medical problem." There is no progress note associated with this chart entry. Pharmacy records show that the prescription was dispensed on that date.

26. The patient returned to care on 6/29/09. Respondent charted that the patient complained of severe back pain. Exam showed severe pain & tenderness in the lumbo-sacral joint on palpation. Marked tenderness in the 4th, 5th lumbar and 1st sacral areas on the (R) side. Facet joint injection to right and left lumbosacral facet joint were performed, without fluoroscopic guidance. Respondent prescribed 100 methadone 10mg 2-3 tabs TID. Pharmacy records reveal that this prescription was dispensed to the patient on that day.

27. Pharmacy records reflect that on 7/2/09, 100 methadone 10 mg tablets, take 2-3, TID, were dispensed to the patient on Respondent's prescription. There is no record of this prescription in Respondent's chart.

28. On 7/9/09, Respondent charted that he prescribed 78 methadone 10mg 2-3 tabs TID. "He was given only 22 tabs." Pharmacy records reflect that this prescription was dispensed, in full on that day. There is no progress note associated with this chart entry.

29. On 7/16/09, Respondent charted that he prescribed 50 methadone 10mg 2-3 tabs TID. There is no progress note associated with this chart entry.

30. The patient returned to care on 7/21/09. Respondent charted: "Aaron has a hard time looking for a doctor to take care of his addicting problem. I told him that I will be giving him a prescription of methadone which his previous doctor prescribed. He said he will be seeing another doctor this coming Tuesday. He has been bothering me for methadone prescription. This will be the last time I will prescribed [sic] him." Respondent then prescribed 40 methadone 10mg 2-3 tabs TID.

31. On 7/28/09, Respondent charted: "He is going to be seen by another doctor that will take care of his treatment for addiction problem in [sic] August 17, 2009." Respondent then prescribed 180 methadone 10mg 2-3 tabs TID. There is no progress note associated with this chart entry.

32. On 8/7/09, Respondent charted: "[Patient] is back in the office today. He would like another prescription of methadone to last him until he is seen & treated at SHH Pain Clinic." There is no progress note associated with this chart entry.

33. On 9/8/09, Respondent charted: "patient is here to get his charts. He is going to be treated in Fond du Lac hospital." There is no progress note associated with this chart entry. Pharmacy records reveal that 180 methadone 10mg were dispensed on that day, on Respondent's prescription. There is no record of this prescription in Respondent's chart.

34. On 9/28/09, Respondent charted: "[patient] came, he needs 100 methadone 10mg until he sees his new doctor." There is no progress note associated with this chart entry.

35. On 10/8/09, Respondent charted: "[Patient] needs 180 methadone for 1 month supply until seen by his doctor." Respondent charted that he prescribed 180 methadone 10mg 2-3 tabs TID. There is no progress note associated with this chart entry.

36. On 10/26/09, Respondent charted: "[Patient] is going to see a new doctor in one month. He needs 180 tablets." Respondent then prescribed 180 methadone 10mg 2-3 tabs TID. There is no progress note associated with this chart entry.

37. On 11/5/09, Respondent charted: "[Patient] came today. He is going to North Carolina for his job & will be away for 3 weeks. He needs his methadone treatment pills. Respondent then prescribed 180 methadone 10mg 2-3 tabs TID. There is no progress note associated with this chart entry.

38. On 11/24/09, Respondent charted: "[Patient] is working out of state & needs his medicine." Respondent prescribed 270 methadone 10mg 2-3 tabs TID. Pharmacy records revealed that this prescription was dispensed that same day, at a local pharmacy. There is no progress note associated with this chart entry.

39. On 12/3/09, Respondent charted: "[Patient's] prescription was washed in the laundry pant & was destroyed. He needs a replacement prescription. The pharmacist at K-Mart will call me that he did not give & fill the prescription of 270 tablets that I gave [patient] on 11/24/09." There is no progress note associated with this chart entry.

40. On 12/10/09, Respondent charted: "[Patient] is going out of state for his work & needs 20 days for his prescription until he sees another doctor." Respondent then prescribed 180 methadone 10mg 2-3 tabs TID. Respondent charted that he talked to the pharmacist where the patient gets his prescription filled, but did not name the pharmacist or pharmacy. There is no progress note associated with this chart entry.

41. On 12/22/09, Respondent charted: "[Patient] needs his methadone to function at work. He is running out of pills the end of this month. One hundred methadone 10mg prescribed until he sees another pain specialist who will take care of him. He cannot function at work without his methadone. I talk to his pharmacist about his problem." Respondent then issued a prescription

for 100 methadone 10mg. There is no progress note associated with this chart entry, and neither the pharmacist nor the pharmacy was named.

42. The patient returned to care on 1/4/10. Respondent charted: "[patient] back is hurting and cannot find another doctor to take care because he has pre-existing disease and his health insurance doesn't cover the cost. Now he is asking me if I could treat his hurting back. Exam showed severe pain in the right lumbosacral joint (L4-S1) on palpation. The area was prepped with Betadine and alcohol. Marcaine .25%, 5.0 mL, and Sarapin 5.0 mL mixed and injected in the right lumbosacral joint. Patient tolerated the procedure well. He also would to get a prescription for his methadone treatment." Respondent then prescribed 180 methadone 10mg 2 tabs TID. "His dosage is diminished to wean him from methadone treatment." Pharmacy records reflect that this prescription was dispensed as written, on that day.

43. The patient returned to care on 1/25/10. Respondent charted: "[Patient] called for treatment of his back pain. Exam showed severe pain in right lumbosacral joint on palpation. This area was prepped with Betadine and alcohol. Marcaine .25%, 5.0 mL, and Sarapin 5.0 mL mixed and injected in the right lumbosacral joint (L5-S1). Patient tolerated the procedure well. He is working out of state and needs the methadone to relieve pain and function in his work. He is starting to wean his methadone from 3 TID to 2 TID. He is trying to get treatment for his methadone addiction but has to insurance coverage for 3 months before he gets treatment. He is given prescription for one month" Respondent then prescribed 180 methadone 10mg 2 tabs TID for pain.

44. On 2/12/10, Respondent charted: "[Patient] called for his back and knee pain. His back is feeling a little better but his right knee is bothering him more. He will come next week for injection treatment of his right knee. He would like prescription for his methadone 10mg #270, 2-3 tabs." Pharmacy records reflect that 270 methadone 10mg were dispensed to the patient that day, on Respondent's prescription. There is no progress note associated with this chart entry.

45. On 2/24/10, Respondent charted: "[Patient] was only given 90 tabs by pharmacist in the last prescription. His pharmacist called me about that. He was given a prescription of methadone 10 mg tablets, 180, today." Neither the pharmacist nor the pharmacy was named.

46. On 3/5/10, Respondent charted: "[Patient] is going out of town to North Carolina for his job and needs his medicine. He is given a prescription of methadone 10 mg tablets, #180, 2-3 tablet, TID. I talk to his pharmacist at Kmart." Pharmacy records reflect that this prescription was dispensed on that day. There is no progress note associated with this chart entry.

47. On 3/22/10, Respondent wrote note on memo pad to Dr. Jared Brendan stating "I will no longer be prescribing Methadone to [patient]. He will obtain it from Dr. Brendan as of 4/20/10." Respondent charted: "[Patient] is going to be seen by Dr. Jared Brendan in one month and will continue his treatment. He is given a prescription of one month supply methadone 10 mg, 270, 2-3 tablets, TID."

48. On 4/5/10, Respondent charted: "[Patient] came to get methadone prescription because his girlfriend tore the prescription I prescribed 3/22/10 when pharmacist did not filled [sic]

because she came 2 days before it was supposed to filled. I talked to the pharmacist and he told me that prescription was not filled. He is going to see a doctor who will wean him from methadone this month. I gave a prescription of methadone 10 mg, 180, 2 tablets, TID. I talked to his girlfriend personally in the office and she told me that she tore the prescription into pieces and threw it out."

49. On 4/20/10, Respondent charted: "[Patient] is going to his grandmother's funeral in California. He has not seen a doctor to cover the methadone withdrawal treatment that he is going to have. He needs the methadone to be able to function and I give him methadone 10mg. tab, 180, 2 tablets TID." There is no progress note associated with this chart entry.

50. On 4/29/10, Respondent charted: "patient is going back to California tomorrow & will need his methadone 10mg #60. He is getting injection and acupuncture for his right knee that is hurting so much. He had arthroscopic treatment of right knee in 2008. There is pain & tenderness in the medial and lateral side of the right knee with moderate swelling. The area was prepped with Betadine and alcohol. Marcaine .5%, 5.0 mL, and Sarapin 5.0 mL mixed and injected in the articular and periarticular joint of the medial side of the right knee. He is leaving for California tomorrow and will need his methadone 10 mg, 60, 2, TID, until May 16, when he comes back here."

51. On 5/12/10, Respondent charted that he refilled the patient's prescription for 180 methadone, 10mg 2 TID. There is no progress note associated with this chart entry.

52. On 5/27/10, Respondent charted: "[Patient] will be lowering his dose to 4 tablets a day starting next month. He will be weaned down until he is off this drug. It is terrible that some doctors started him with this drug. This will be his last prescription of 2-3 tab TID." Respondent then prescribed 180 methadone 10mg 2-3 TID. There is no progress note associated with this chart entry.

53. On 6/8/10, Respondent charted: "[Patient] told me that he lost prescription that I give him 5/27/10 when he went up north. His pharmacist called me this morning that I could write him a replacement of that last prescription. I wrote him a replacement 180 methadone 10mg 2-3 TID. He is going to see a doctor who will be giving him methadone. I told him I am not going to continue giving him." Neither the pharmacist nor the pharmacy is named, and there is no progress note associated with this chart entry.

54. On 6/18/10, Respondent charted that he prescribed 180 methadone 10mg 2-3 TID. "He said he is going to see Dr. Saini [*pain specialist*] next month." There is no progress note associated with this chart entry.

55. On 7/1/10, Respondent charted: "[Patient] will see his doctor will be taking care of his methadone treatment this month. He is given a 20 days prescription supply." Respondent then prescribed 180 methadone 10mg 2-3 TID. There is no progress note associated with this chart entry.



56. On 7/19/10, Respondent charted: "Will see Dr. Saini Aug 16, 2010." Respondent then prescribed 180 methadone 10mg 2-3 TID. There is no progress note associated with this chart entry.

57. On 8/2/10, Respondent charted: "Will see Dr. Saini Aug 16, 2010." 180 methadone 10mg 2-3 TID. There is no progress note associated with this chart entry.

58. On 8/16/10, Respondent charted: "[Patient] will not be able to see Dr. Saini but will be seeing another doctor in 2 weeks. He needs 2 weeks supply." Respondent then prescribed 180 methadone 10mg 2-3 TID. There is no progress note associated with this chart entry. Pharmacy records reflect that this was dispensed on that day.

59. On 8/25/10, Respondent charted: "[Patient] came to the office to tell me his prescription for methadone 10 mg #90 was stolen from his locker. He reported to police and the pharmacist about his stolen prescription. He needs replacement for this until he sees pain specialist to take care of him. Going to see Dr. Hasad in Milwaukee. A replacement prescription given." Respondent then prescribed 90 methadone 10mg 2-3 TID. There is no progress note associated with this chart entry.

60. On 9/7/10, Respondent charted: "[Patient] is going to be seen by Dr. Hasad the 4th of Oct. He needs methadone 10 mg until then. He is going to have injection for his back pain in 9/10/10." Respondent then prescribed 180 methadone 10mg 2-3 TID. There is no progress note associated with this chart entry.

61. The patient returned to care on 9/20/10. Respondent charted: "[Patient] called, his back pain is hurting so bad, needs treatment. Exam today showed severe pain & tenderness in the right lumbosacral joint at L4-L5 level. This area was prepped with Betadine and alcohol. Marcaine .25%, 5.0 mL, and Depo-Medrol 40 mg mixed and injected in the right lumbosacral joint at L4-05 level transforaminally. Patient tolerated the procedure well. He is going to see Dr. Hasad for his methadone treatment and rehabilitation in [sic] October 14, 2010." Respondent prescribed 270 methadone 10mg 2-3 TID "until he sees Dr. Hasad." Pharmacy records reflect that this prescription was dispensed, in full, at a local K-mart pharmacy.

62. On 10/4/10, Respondent charted: "David Guse the pharmacist at K-Mart in Hartford call that [patient] got only 135 tabs last time and needs a prescription of another 135 tabs. A prescription 135 tablets given today." Pharmacy records reflect that this prescription was filled at a local Walgreen pharmacy.

63. On 10/11/10, and again on 10/18/10, Respondent's chart reflects that he prescribed 90 methadone 10mg 2-3 TID. There are no progress note associated with these chart entries.

64. On 10/25/10, Respondent charted: "Will be seeing his doctor on the 12<sup>th</sup> of November, 2010. I am giving him a prescription of methadone 10 mg, #90, 2, TID." There is no progress note associated with this chart entry.

65. On 11/23/10, Respondent charted: "[Patient] is now cutting down his methadone 10 mg, one tablet TID. Tab 90 one month and his last prescription from me." Respondent then prescribed 90 methadone 10mg, one TID for one month. There is no progress note associated with this chart entry. Pharmacy records reflect that this prescription was dispensed, in full, on that day.

66. On 11/26/10, pharmacy records reflect that 90 methadone 10mg, 1 TID, were dispensed to the patient on Respondent's prescription. There is no record of this prescription in Respondent's chart.

67. On 12/14/10, Respondent charted: "[Patient's] doctor cannot see him until 14<sup>th</sup> of January, 2011. I am giving him methadone 10 mg tab, 60, 1 tablet, BID." Respondent then prescribed 60 methadone 10mg, one BID. There is no progress note associated with this chart entry.

68. The patient returned to care on 1/4/11. Respondent charted: "[Patient] called he will see doctor at end of the month for his medical rehab treatment. His back is hurting today and needs treatment. Exam showed severe pain and tenderness in the lumbosacral joint at L4, L5, & S1 levels on palpation at the right side. This area was prepped with Betadine and alcohol. Marcaine .50%, 6 mL, and Discus Compositum one ampule mixed and injected in the right lumbosacral joint at L4-L5 and L5-S1 level transforaminally. Patient tolerated the procedure." Respondent prescribed 60 methadone 10mg, 1 BID.

69. On 1/12/11, Respondent charted: "[Patient] and pharmacist called this morning to write 38 methadone 10mg tabs because [patient] was not given the full 60 tabs in that last prescription. Methadone 10mg tab, 38, one tablet BID." There is no progress note associated with this chart entry, and neither the pharmacist nor the pharmacy is named.

70. The patient returned to care on 1/20/11. Respondent charted: "[Patient] is going to be seen by a rehab doc in the middle of February. He will need about 90 tablets of methadone before he sees him. Methadone 10 mg tab, #90, one tablet 2-3 times a day. His back hurting so bad. Exam showed severe pain (7/10 scale) at the right lumbosacral joint at L5-S1 level on palpation. This area was prepped with Betadine and alcohol. Marcaine .5% 5.0 mL and Discus Compositum one ampule mixed and injected in the right lumbosacral joint at L5-S1 level transforaminally. Patient tolerated the procedure well". Pharmacy records reflect that the prescription was dispensed in full on that day.

71. On 1/27/11, Respondent charted: "[Patient] was given only 28 methadone tabs by pharmacy because they were short in supply. He needs 52 tablets, one tablet, 2-3 a day." Pharmacy records reflect that 52 methadone 10mg, 1 BID- TID, were dispensed to the patient on Respondent's prescription that day. There is no progress note associated with this chart entry.

72. The patient returned to care on 2/2/11. Respondent charted: "[Patient] is having back pain. Exam showed severe pain in the right lumbosacral joint on palpation. This area was prepped with Betadine and alcohol. Marcaine .50% 5.0 mL and Discus Compositum one ampule mixed and injected in the right lumbosacral joint at L3-L5 transforaminally. Patient tolerated the

procedure well. He getting out of town in his work for 3 weeks and need the methadone 10mg #120 1-2 tablets 2-3 a day."

73. On 3/9/11, Respondent charted: "[Patient] needs 9 days before he will be seeing his doctor to care for treatment and needs methadone 10 mg #32." There is no progress note associated with this chart entry.

74. On 3/18/11, Respondent charted: "[patient] won't be able to see the doctor who will take care of him until 1 month." Respondent then prescribed 90 methadone 10mg, 2 BID. There is no progress note associated with this chart entry.

75. On 3/25/11, Respondent charted: "Pharmacy in Hartford (K-mart) only gave him 22 tabs and [patient] needs a prescription for 68 tablets." Pharmacy records reflect that 68 methadone 10mg were dispensed to the patient, on Respondent's prescription, that day. There is no progress note associated with this chart entry.

76. On 4/1/11, Respondent charted: "[Patient] needs 38 tabs before see his new doctor." Respondent then prescribed 28 methadone 10mg, take 2 BID.

77. The patient returned to care on 4/8/11. Respondent charted: "He will not be able to see his new doctor who will take care of his methadone treatment for another two months. He is given methadone 10 mg tablets, #90, two tablets BID. His lower back is hurting so bad. Exam showed severe pain in the left lumbosacral joint on palpation. This area is prepped with Betadine and alcohol. Marcaine .25% 5.0 mL and Sarapin 5.0 mL mixed and injected in the left lumbosacral joint transforaminally at L4-L5 level. Patient tolerated the procedure well."

78. The patient returned to care on 4/22/11. Respondent charted: "[Patient] called his back pain is bothering him and needs treatment. Exam showed severe pain in the right lumbosacral joint on palpation. This area was prepped with Betadine and alcohol. Marcaine 0.50% 5.0 mL and Depo-Medrol 40 mg mixed and injected in the right lumbosacral joint at L4-05 level transforaminally. Patient tolerated the procedure well. He needs his methadone 10 mg, 90 tablets, two tablets BID."

79. On 5/2/11, Respondent charted: "[Patient] is leaving for Illinois in his job and needs refill for his methadone 10mg tab, #90, 2 tablets BID." There is no progress note associated with this chart entry.

80. The patient returned to care on 5/17/11. Respondent charted: "[Patient] called his back pain is hurting so bad. Exam showed severe pain in the right lumbosacral joint on palpation. This area was prepped with Betadine and alcohol. Marcaine .50% 5.0 mL and Sarapin 5.0 mL mixed and injected in the right lumbosacral joint at L4-L5 transforaminally. Patient tolerated the procedure well." Respondent prescribed 90 methadone 10mg 2 BID.

81. On 5/23/11, Respondent charted: "The patient was only given 45 tabs by pharmacist in the above prescription and needs another prescription of 45 tablets to complete the 90 tablets."

Pharmacy records reflect that 45 methadone 10mg were dispensed to the patient on that day on Respondent's prescription. There is no progress note associated with this chart entry.

82. The patient returned to care on 5/31/11. Respondent charted: "[Patient] called, his low back is hurting so bad after he lifted heavy weights at his job. Exam showed severe pain & tenderness in the right lumbosacral joint on palpation. Both his knees and legs are hurting. The right lumbosacral joint was prepped with Betadine and alcohol. Marcaine .50% 5.0 mL and Sarapin 5.0 mL mixed and injected in the right lumbosacral joint at L4-L5 transforaminally. The patient tolerated the procedure well." Respondent prescribed 45 methadone 10mg 2 BID.

83. The patient returned to care on 6/6/11. Respondent charted: "[Patient] came to the office, his lower back is hurting. Exam showed pain and tenderness in the right lumbosacral joint at L5-S1 level on palpation. This area was prepped with Betadine and alcohol. Marcaine .50% 5.0 mL and Sarapin 5.0 mL mixed and injected in the right lumbosacral joint at L5-S1 level transforaminally. Patient tolerated the procedure well. Methadone 10 mg tablets, #90, take 2 tabs BID."

84. On 6/17/11, Respondent charted: "[Patient's] dad died in California and he is going there. He needs his methadone refilled. A prescription date 6/20/11 will be given for methadone 10mg tab 90, 2 tab BID." There is no progress note associated with this chart Entry.

85. On 6/28/11, Respondent charted: "[Patient] is going up north for 1 week and he needs his methadone refilled." Respondent then prescribed 90 methadone 10mg, take 2 BID. There is no progress note associated with this chart entry.

86. On 7/11/11, and again on 7/22/11, Respondent prescribed 90 methadone 10mg, take 2 BID, on each occasion charting "[Patient] needs his methadone." There is no progress note associated with either chart entry.

87. On 8/4/11, Respondent charted: "[patient] need his methadone 10 mg tab #90, one tablet TID for pain, reduced in the daily dosage." There is no progress note associated with this chart entry.

88. The patient returned to care on 8/17/11. Respondent charted: "[Patient's] back is hurting bad. Exam showed severe pain in the right lumbosacral joint on palpation." [*note: no more in note*]

89. On 8/31/11, a physician with whom Respondent shares office space, charted in Respondent's chart: "Patient cannot come because of work schedule. Mother and sister here to get prescription of methadone. Given 1 week methadone take 2, BID 10 mg,. Discussion w/ sister pathology base on x-ray report of LBP and need for epidural injection of steroid. Schedule for 7<sup>th</sup> of September approved by the patient's boss at work."

90. The next chart entry is dated 9/28/11. Respondent charted: "[Patient's] methadone dose now reduced to methadone 10 mg once a day for pain. He will be given 3 weeks supply. methadone 10mg tab #21 one daily for pain." There is a "Contract for Controlled Substance

Prescriptions" which purports to name the physician with whom Respondent shares office space, but is signed by Respondent and patient on this day. The document provides that the patient will use only one prescriber, that lost scripts will not be replaced, and that the patient is to bring in containers of all medications prescribed each time seen even if no medication is remaining. There is no provision restricting the patient to only 1 pharmacy.

91. On 10/17/11, Respondent charted: "[Patient] is working in New Orleans and would like refill of methadone prescription." Respondent prescribed 30 methadone 10mg one daily for pain. There is no progress note associated with this chart entry.

92. On 10/24/11, Respondent charted: "New prescription given in replacement for the above prescription which was discarded by the pharmacy for wrong date. I talked to Sarah Newman in Walgreen pharmacy in Fond du Lac, telephone 920-xxx-xxxx."

### CONCLUSIONS OF LAW

A. The Wisconsin Medical Examining Board has jurisdiction to act in this matter pursuant to Wis. Stat. § 448.02(3), and is authorized to enter into the attached Stipulation pursuant to Wis. Stat. § 227.44(5).

B. The conduct described above violated Wis. Adm. Code § Med 10.02(2)(h) and (zd). Such conduct constitutes unprofessional conduct within the meaning of the Code and statutes.

### ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED, that the attached Stipulation is accepted.

IT IS FURTHER ORDERED, that the SURRENDER of the registration of Jesse O. Vegafria, M.D., Respondent, is ACCEPTED.

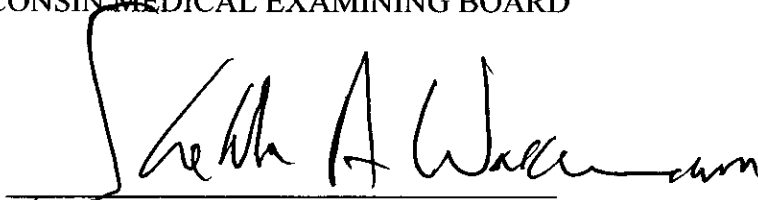
IT IS FURTHER ORDERED, that Respondent shall not practice medicine or surgery in Wisconsin, without being currently registered.

IT IS FURTHER ORDERED, that the COSTS of investigating and prosecuting this matter of \$4,100, are waived, but Respondent shall pay them in full if he ever applies or petitions for reinstatement, or if he ever applies for any other credential issued by the Department, or any Board attached to the Department.

Dated this May 16, 2012.

WISCONSIN MEDICAL EXAMINING BOARD

by:

  
a member of the Board

akt