

# WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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STATE OF WISCONSIN  
BEFORE THE MEDICAL EXAMINING BOARD

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IN THE MATTER OF DISCIPLINARY  
PROCEEDINGS AGAINST:

DOUGLAS COREY,	FINAL DECISION AND ORDER
RESPONDENT	LS0112211MED

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The State of Wisconsin, Medical Examining Board, having considered the above-captioned matter and having reviewed the record and the Proposed Decision of the Administrative Law Judge, makes the following:

ORDER

NOW, THEREFORE, it is hereby ordered that the Proposed Decision annexed hereto, filed by the Administrative Law Judge, shall be and hereby is made and ordered the Final Decision of the State of Wisconsin, Medical Examining Board.

The rights of a party aggrieved by this Decision to petition the department for rehearing and the petition for judicial review are set forth on the attached "Notice of Appeal Information."

Dated this 20<sup>th</sup> day of March, 2002.

Darold Treffert, Chairperson  
Medical Examining Board

STATE OF WISCONSIN  
BEFORE THE MEDICAL EXAMINING BOARD

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IN THE MATTER OF THE DISCIPLINARY  
PROCEEDINGS AGAINST:

DOUGLAS O. COREY, M.D.,	PROPOSED DECISION AND ORDER
RESPONDENT	LS0112211MED

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PARTIES

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

Christy L. Biersteker, R.N.Douglas O. Corey, M.D.  
3409 Harmony La. Apt. 4  
Stevens Point, WI 54481

John R. Zwieg

Department of Regulation and Licensing

Division of Enforcement

P.O. Box 8935

Madison, Wisconsin 53708-8935

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#### PROCEDURAL HISTORY

A hearing on the complainant's motion for default and order pursuant to Wis. Admn. Code §§ RL 2.09 (3), (4) and RL 2.14 in the above-captioned matter was held on January 29, 2002, before Administrative Law Judge William A. Black. The Division of Enforcement appeared by Attorney John R. Zwieg. The respondent, Douglas O. Corey, M.D. did not appear at the hearing or file papers in opposition thereto. The respondent did not file an answer to the complaint. Based upon the moving papers of the complainant the motion for default and order is granted and the undersigned administrative law judge recommends that the Medical Examining Board adopt as its final decision in this matter, the following Findings of Fact, Conclusions of Law, and Order.

#### FINDINGS OF FACT

1. The respondent, Douglas O. Corey, M.D., date of birth August 3, 1947, is currently licensed and registered to practice medicine and surgery by the Wisconsin Medical Examining Board in the state of Wisconsin pursuant to license number 27952, which was first granted October 31, 1986.
2. The respondent's last address reported to the Department of Regulation and Licensing is 3409 Harmony Lane, Apt. 4, Stevens Point, WI 54481.
3. The respondent's registration of his license to practice medicine and surgery expired on October 31, 1999, and has not been renewed since that date. Wis. Stats. § 448.07(1)(a), prohibits an unregistered physician from practicing medicine in this state.
4. On February 24, 2000, the Board issued a final decision and order against the respondent in disciplinary proceeding LS 9910221 MED. Among other things, the order prevented the respondent from renewing his license to practice medicine and surgery in the state of Wisconsin until he provided proof sufficient to the Board that he had taken and satisfactorily completed a two day education program in medical record keeping approved by the Board.
5. In that earlier disciplinary matter, LS 9910221 MED, the respondent was found to have engaged in conduct which tended to constitute a danger to his patients, in violation of Wis. Admn. Code § MED 10.02(2)(h), based on the following:
  - a. The respondent was employed as a psychiatrist providing services to patients in the Mental Health Department of the Rice Clinic Medical Center (RCMC) in Stevens Point, Wisconsin from August 15, 1994 to May 30, 1996.
  - b. During the respondent's employment at RCMC, he failed to make records of his patient's clinical visits which a minimally competent physician would have made.
6. On December 10, 1999, a hearing was conducted in disciplinary proceeding LS 9910221 MED. During the hearing, the respondent testified that:
  - a. For many years, he has been diagnosed with obsessive-compulsive disorder, with features of obsessive-compulsive personality disorder.
  - b. Since August of 1998, he has chosen not to practice medicine because of his concern that the disorder might interfere with his ability to practice medicine.
  - c. He believed that his obsessive-compulsive disorder may have contributed to his failure to keep adequate records from August 15, 1994 to May 30, 1996.
7. During the hearing, the respondent testified that because of his disorder, he often did not open his mail for months at a time.
8. On March 2, 2000, the Board's Order of February 24, 2000 was served on the respondent by mail. The respondent informed the department monitor that he did not read the order until July 29, 2001, almost 17 months after it was sent.

9. In a letter dated August 1, 2001 to the department monitor, the respondent wrote:

- a. That he was going to try to complete a course in medical record keeping in November, to comply with the Board's Order of February 24, 2000. [To this date, the respondent has not sought the Board's approval of any course as required by the order and has not notified the Board that he has completed any course.]
- b. "Enclosed are some of the obsessions which have overwhelmed me. These have impaired my thinking and judgment, but have not necessarily rendered me incompetent."
- c. "I am ready to try again to overcome my obsessions. I am very fearful that I may not be successful for this prolonged current episode is my third. My level of functioning is decreased. I sit in solitude reading, watching TV and playing strategic computer games as I attempt to avoid my own thoughts. When I do white (sic) down some of my obsession, I rewrite them over and over."

10. The respondent was served with the present complaint according to statute on December 21, 2001 and has failed to file an answer to the complaint.

11. The complainant's motion for default and order was served upon the respondent according to statute on January 18, 2002.

12. The respondent did not file opposing papers to the complainant's motion for default and order.

#### CONCLUSIONS OF LAW

1. The Medical Examining Board has jurisdiction in this matter pursuant to Wis. Stats. § 448.02(3).
2. By failing to file an Answer as required by Wis. Admn. Code § RL 2.09, the respondent is in default under Wis. Admn. Code § RL 2.14.
3. The allegations contained in the complaint are deemed admitted under Wis. Admn. Code § RL 2.09 (3).
4. The respondent's conduct constitutes unprofessional conduct as defined by Wis. Admn. Code § MED 10.02(2)(i), for practicing or attempting to practice in 1994-1996 when unable to do so with reasonable skill and safety to patients and subjects the respondent to discipline pursuant to Wis. Stats. § 448.02(3).

#### ORDER

1. The respondent's license to practice medicine and surgery in the state of Wisconsin is hereby suspended until he has provided proof sufficient to the Board that he does not suffer from any psychiatric or psychological condition which interferes with his ability to practice medicine and surgery with reasonable skill and safety to patients. Such proof shall include:

- a. The respondent having undergone, at his own expense, a complete evaluation of his psychological and cognitive functioning, performed by mental health care professionals.
- b. The practitioner or practitioners performing the evaluation must have been approved by the Board or its designee, prior to the evaluation being performed.
- c. The Division of Enforcement shall provide the evaluator(s) and the respondent with those portions of the investigative files which the Division believes may be of assistance in performing the evaluation. The respondent may provide the evaluator(s) and the Division with any information the respondent believes will be of assistance in performing the evaluation.
- d. The respondent shall authorize the evaluator(s) to provide the Board, or its designee, with the evaluation report and all materials used in performing the evaluation and shall provide the Board, or its designee, and the Division with the opportunity to discuss the evaluation and findings with the evaluator(s).
- e. The evaluator(s) rendering opinions to a reasonable degree of professional certainty that the respondent can practice with reasonable skill and safety to patients and public.

2. If the Board decides to end the suspension of the respondent's license to practice medicine and surgery, the Board may limit the respondent's license in any manner necessary to address issues raised by the facts of this case and by the evaluation, including, but not limited to:

- a. Psychotherapy, or other treatment, at the respondent's expense, by a mental health practitioner approved by the Board, or its designee, to address specific treatment goals, with periodic reports to the Board by the practitioner.

b. Additional professional education in any identified areas of deficiency.

c. Restrictions on the nature of practice or practice setting or requirements for supervision of practice, by a professional approved by the Board, with periodic reports to the Board by the supervisor.

3. Requests for approval of evaluators and any proof of the respondent's condition shall be mailed, faxed or delivered to:

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

4. All other terms and conditions of the Board's February 24, 2000 Final Decision and Order shall remain in effect.

5. Costs are not assessed.

#### OPINION

Section RL 2.14 of the Wisconsin Administrative Code provides that a respondent who fails to answer a complaint is in default. If found to be in default, the disciplinary authority may make findings and enter an order on the basis of the complaint and other evidence against the respondent. In this case, the respondent did not file an answer to the above-captioned complaint. As a result, the respondent is in default.

It is well established that the objectives of professional discipline include the following: (1) to promote the rehabilitation of the licensee; (2) to protect the public; and (3) to deter other licensees from engaging in similar conduct. *State v. Aldrich*, 71 Wis. 2d 206, 209 (1976). Punishment of the licensee is not an appropriate consideration. *State v. McIntyre*. 41 Wis. 2d 481, 485 (1969).

There is nothing in the record to suggest that imposing any discipline short of that proposed would have a rehabilitative effect on respondent. Absent some mitigating evidence (of which none has been presented), imposing anything less than a suspension under the indicated conditions would not aid in deterrence, but more importantly, not protect the public. The protection of the public is the paramount goal of professional discipline in this case. Therefore, the discipline proposed remains as the only way in which to safeguard the public by requiring that the respondent establish to the board the ability to practice with reasonable skill and safety to patients.

Dated: February 5, 2002

William Anderson Black