

# 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	:	<b>FINAL DECISION AND ORDER</b>
	:	LS0110171MED
JOHN A. FERRIS, M.D.,	:	
RESPONDENT	:	

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

John A. Ferris, MD  
123 Hospital Dr. #206  
Watertown, WI 53098

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

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

The prosecutor and respondent 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 now reviewed this Stipulation, and approves it.

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

FINDINGS OF FACT

- Respondent is John Anthony Ferris, M.D., dob 4/23/44, who is licensed as a physician and surgeon in Wisconsin pursuant to license #33626, first granted on 8/19/92. Respondent’s address of record is 123 Hospital Dr #206, Watertown, WI 53098. Respondent is a family practitioner in solo practice.
- Respondent did, on multiple occasions in 2001, consume C-IV controlled substances without a prescription

from another authorized prescriber.

3. Respondent maintained office samples of controlled substances for dispensing to patients and has dispensed such samples to patients, but failed to conduct a biennial inventory, and has not maintained records of receipt of such substances; his dispensing log is also incomplete.
4. Respondents represents to the Board that he has removed all controlled substances samples from his office.
5. Respondent has, in October, 2001, undergone a comprehensive residential evaluation, which resulted in a finding that he is not chemically dependent, but has a diagnosis of anxiety disorder. Specific recommendations for therapy were made for the benefit of respondent and his practice. The Board finds that implementing these recommendations is necessary to ensure the safety of patient and public.
6. A review of several of respondent's patient health care records revealed that he was not current in his charting practices, and that he had prescribed controlled substances to persons who were untruthful with him, in large amounts and without adequately charted medical justification.
7. Respondent did, on May 29-31, 2002, satisfactorily complete the three-day (20.5 hours) course entitled "Prescribing Controlled Drugs: Critical Issues and Common Pitfalls" at The Center for Professional Health at Vanderbilt University Medical Center.
8. Respondent did, on 7/24/02, take the Special Purpose Examination (SPEX) and achieve a score of 81.
9. On 11/7/02, respondent's application for Oklahoma licensure as a physician was initially denied by the Oklahoma State Board of Medical Licensure & Supervision, but was on April 10, 2003, granted to the extent of his being permitted to practice in a setting recommended by the evaluators described in ¶5, above.
10. Since October, 2001, respondent has participated in therapy and has made some progress in achieving the goals of the recommendations of the October, 2001, evaluation.

#### CONCLUSIONS OF LAW

- A. The Wisconsin Medical Examining Board has jurisdiction to act in this matter pursuant to §448.02(3), Wis. Stats. and is authorized to enter into the attached Stipulation pursuant to §227.44(5), Wis. Stats.
- B. The conduct described in ¶2, above, violated §961.38(5), Wis. Stats. The conduct described in ¶3, above violated 21 CFR §§1304.11 and 1304.21, and §§ Med 10.02(2)(z) and 17.05(2), Wis. Adm. Code. For respondent to practice without following the recommendations of the evaluation described in ¶5, above, would constitute a violation of § Med 10.02(2)(i), Wis. Adm. Code. All of this constitutes unprofessional conduct within the meaning of the Code and statutes.

#### ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED, that the attached Stipulation is accepted, and the Interim Order entered in this matter is terminated.

IT IS FURTHER ORDERED, that the license to practice medicine and surgery of John A. Ferris, MD, is LIMITED in the following respect: respondent shall not possess in his office or directly dispense and controlled substance, including any sample, to any person, and shall not possess in any other place, or consume, any controlled substance except consistent with a prescription for him by another authorized prescriber for a legitimate medical purpose. Respondent may prescribe and order controlled substances in the ordinary course of legitimate practice.

IT IS FURTHER ORDERED that effective on the date of this Order, the license to practice medicine and surgery of respondent is SUSPENDED for a period of not less than five (5) years. The suspension is STAYED for a period of three months, conditioned upon compliance with the conditions and limitations outlined below.

- a. Respondent may apply for consecutive three (3) month extensions of the stay of suspension, which shall be granted upon acceptable demonstration of compliance with the conditions and limitations imposed on the respondent for rehabilitation and practice during the prior three (3) month period. "Three months" means until the third regular Board meeting after the meeting at which any stay of suspension is granted.
- b. The Board may without hearing deny an application for extension of the stay, or commence other appropriate action, upon receipt of information that respondent has violated any of the terms or conditions of this Order. If the Board denies the petition by the respondent for an extension, the Board shall afford an opportunity for hearing in accordance with the procedures set forth in ch. RL 1, Wis. Adm. Code upon timely receipt of a request for hearing.
- c. Upon a showing by respondent of successful compliance for a period of five years of active practice with the terms of this order and compliance with all other terms of this Order, the Board may grant a petition by respondent for return of full licensure, except that the Board may continue the order set forth in the second paragraph of this Order, above, permanently. (See ¶22, below.)
- d. The applications for stays of suspension, and all required reports under this Order, shall be due on the twentieth day of the month preceding the expiration of the stay, and each three months thereafter, for the period that this Order remains in effect. Failure to submit an application by the due date may result in the Board declining to consider the application for stay, and the suspension becoming effective.

IT IS FURTHER ORDERED, that the license to practice medicine and surgery of respondent is LIMITED as set forth in §448.02(3)(e), Wis. Stats., and as follows:

1. Respondent shall not engage in the practice of medicine and surgery in any capacity unless in full compliance with the rehabilitation and treatment programs specified and approved under this Order. Respondent shall forthwith surrender all indicia of registration to the Department by mail or in person, and the Department shall then issue limited registration credentials to respondent. Respondent shall also surrender all indicia of registration to any agent of the Department who requests them.

#### REHABILITATION, MONITORING AND TREATMENT

##### Treatment Required

2. The rehabilitation program shall include and respondent shall participate in individual and/or group therapy sessions to address all the issues raised in the evaluation described in the Findings of Fact, for the first year of the stayed suspension upon a schedule as recommended by the supervising physician or therapist, but not less than once monthly. Such therapy shall be conducted by the supervising physician or therapist, or another qualified physician or therapist as designated by the supervising physician or therapist and

acceptable to the Board. The supervising physician and therapist shall be provided with a copy of the evaluation forthwith by respondent, who shall certify that he has done so when he applies for a stay.

After the first year of stayed suspension, this requirement for therapy sessions may be modified only upon written petition, and a written recommendation by the supervising physician or therapist expressly supporting the modifications sought. A denial of such petition for modification shall not be deemed a denial of the license under §§227.01(3) or 227.42, Wis. Stats., or ch. RL 1, Wis. Adm. Code, and shall not be subject to any right to further hearing or appeal.

#### Supervising Health Care Provider

3. Respondent shall obtain a Supervising Health Care Provider acceptable to the Board for the full term of this limited license. Respondent shall forthwith furnish the Supervising Health Care Provider with a copy of this Order, showing the signature and date. The Supervising Health Care Provider shall be responsible for coordinating respondent's rehabilitation, drug monitoring and treatment program as required under the terms of this Order, and shall immediately report any relapse, violation of any of the terms and conditions of this Order, and any suspected unprofessional conduct, to the Department Monitor. The Supervising Health Care Provider may designate another qualified health care provider acceptable to the Board to exercise the duties and responsibilities of the Supervising Health Care Provider in his or her absence. In the event that a supervising Health Care Provider is unable or unwilling to serve as Supervising Health Care Provider, the Board shall in its sole discretion select a successor Supervising Health Care Provider.

#### Sobriety

4. Respondent shall abstain from all personal use of controlled substances as defined in §961.01(4), Stats. except when necessitated by a legitimate medical condition and then only with the prior approval of the Supervising Health Care Provider.
5. Respondent shall abstain from all personal use of alcohol, except as expressly permitted by the Supervising Health Care Provider.
6. Respondent shall in addition refrain from the consumption of over-the-counter medications or other substances which may mask consumption of controlled substances or of alcohol, or which may create false positive screening results, or which may interfere with respondent's treatment and rehabilitation. Respondent shall report all medications and drugs, over-the-counter or prescription, taken by respondent to the Supervising Health Care Provider within 24 hours of ingestion or administration, and shall identify the person or persons who prescribed, dispensed, administered or ordered said medications or drugs. Within 24 hours of a request by the Supervising Health Care Provider or the Board or its designee, respondent shall provide releases which comply with state and federal laws authorizing release of all health care records by the person who prescribed, dispensed, administered or ordered this medication for respondent. These releases shall also authorize the Supervising Health Care Provider, the Board or its designee to discuss respondent's health care with the person who prescribed, dispensed, administered or ordered this medication. The terms of this paragraph shall not be deemed to modify or negate respondent's obligations as set forth in this Order.

#### Department Monitor

7. The Department Monitor is the individual designated by the Board as its agent to coordinate compliance with the terms of this Order, including receiving and coordinating all reports and petitions, and requesting additional monitoring and surveillance. The Department Monitor may be reached as follows:

Department Monitor  
Department of Regulation & Licensing  
Division of Enforcement  
P.O. Box 8935  
Madison, WI 53708-8935  
FAX (608) 266-2264  
TEL. (608) 267-3817

[department.monitor@drl.state.wi.us](mailto:department.monitor@drl.state.wi.us)

#### Releases

8. Respondent shall provide and keep on file with the Supervising Health Care Provider, all treatment facilities and personnel, laboratories and collections sites current releases which comply with state and federal laws authorizing release of all urine, blood and hair specimen screen results and medical and treatment records and reports to, and permitting the Supervising Health Care Provider and all treating physicians and therapists to disclose and discuss the progress of respondent's treatment and rehabilitation with the Board or any member thereof, or with any employee of the Department of Regulation and Licensing acting under the authority of the Board. Copies of these releases shall be filed simultaneously with the Department Monitor.

#### Drug Screens

9. Within thirty (30) days from the date of the signing of this Order, respondent shall enroll and begin participation in a drug monitoring program which is approved by the department pursuant to Wis. Adm. Code § RL 7.11, ("Approved Program").
10. The Department Monitor, Board or Board designee shall provide respondent with a list of Approved Programs, however, respondent is solely responsible for timely enrollment in any such Approved Program.
11. Unless otherwise ordered by the Board, the Approved Program shall require the testing of urine specimens at a frequency of not less than 24 times per year.
12. The Department Monitor, Board or Board designee shall determine the tests to be performed upon the urine specimens.
13. Respondent shall comply with all requirements for participation in drug and alcohol monitoring established by the Approved Program, including but not limited to;
  - (a) contact with the Approved Program as directed on a daily basis, including weekends and holidays, and;
  - (b) production of a urine specimen at a collection site designated by the Approved Program within five (5) hours of notification of a test.
14. The Board in its discretion without a hearing and without further notice to respondent may modify this Order to require the submission of hair or breath specimens or that any urine or hair specimen be furnished in a directly witnessed manner.
15. All expenses of enrollment and participation in the Approved Program shall be borne by respondent. Respondent shall keep any account for such payments current in all respects.
16. For purposes of further Board action under this Order it is rebuttably presumed that all confirmed positive test results are valid. Respondent has the burden of proof to establish by a preponderance of the evidence an error in collection, testing or other fault in the chain of custody which causes an invalid confirmed positive

test result.

#### Required Reporting by Supervising Health Care Provider, and laboratories

17. The Supervising Health Care Provider shall report immediately to the Department Monitor in the Department of Regulation and Licensing, Division of Enforcement by FAX or telephonic communication: any relapse, any violation of the terms and conditions of this Order, and any failure of respondent to provide a urine, blood or hair specimen within five (5) hours from the time it was requested; or of any inability of respondent to make the daily telephone call. The laboratory shall immediately report all urine specimens suspected to have been tampered with and all urine, blood or hair specimens which are positive or suspected positive for controlled substances or alcohol to the Department Monitor, and to the Supervising Health Care Provider.
18. The approved program shall within 48 hours of completion of each drug or alcohol analysis provide the report from all specimens requested of respondent under this Order to the Department Monitor (regardless of whether the laboratory analysis of the specimen was positive or negative for controlled substances, their metabolites or alcohol). Each report shall state the date and time the specimen was requested; the date and time the specimen was collected; the results of the tests performed to detect tampering; and the results of the laboratory analysis for the presence of controlled substances and alcohol.
19. The Supervising Health Care Provider shall submit formal written reports to the Department Monitor in the Department of Regulation and Licensing, Division of Enforcement, P.O. Box 8935, Madison, Wisconsin 53708-8935 on a quarterly basis, as directed by the Department Monitor. These reports shall assess Respondent's progress in the drug and alcohol treatment program and summarize the results of the urine, blood or hair specimen analyses. The Supervising Health Care Provider shall report immediately to the Department Monitor any violation or suspected violation of the Board's Final Decision and Order.

#### Required reporting by Respondent

20. Respondent is responsible for compliance with all of the terms and conditions of this Final Decision and Order. It is the responsibility of respondent to promptly notify the Department Monitor, of any relapse or suspected violations of any of the terms and conditions of this Order, including any failures of the Supervising Health Care Provider, treatment facility, monitoring program, or collection sites to conform to the terms and conditions of this Order.

#### Facility approval

21. If the Board determines that the Supervising Health Care Provider, treatment facility, monitoring program, or collection sites have failed to satisfy the terms and conditions of this Final Decision and Order, the Board may, at its sole discretion, direct that respondent continue treatment and rehabilitation under the direction of another Supervising Health Care Provider, treatment facility, monitoring program, or collection site which will conform to the terms and conditions of this Final Decision and Order.

#### PETITIONS FOR MODIFICATION OF TERMS

22. Respondent shall appear before the Board at least annually to review the progress of treatment and rehabilitation. Respondent may petition the Board for modification of the terms of this limited license and the Board shall consider respondent's petitions at the time it meets with respondent to review the progress of rehabilitation. Any such petition shall be accompanied by a written recommendation from respondent's Supervising Health Care Provider expressly supporting the specific modifications sought. Denial of the petition in whole or in part shall not be considered a denial of a license within the meaning of §227.01(3)(a), Stats.

and respondent shall not have a right to any further hearings or proceedings on any denial in whole or in part of the petition for modification of the limited license.

After five years of continuous active professional practice under this Order and without relapse, upon satisfactory restitution of any losses caused by respondent's conduct which led to this Order, and upon recommendation of the Supervising Health Care Provider and Professional Mentor, respondent may petition the Board for a termination of all limitations on the license set forth in this paragraph, and restoration of an unlimited license (but the Board may continue the order set forth in the second paragraph of this Order, above). Such restoration shall be in the sole discretion of the Board, and denial of the petition in whole or in part shall not be considered a denial of a license within the meaning of §227.01(3)(a), Stats. and respondent shall not have a right to any further hearings or proceedings on any denial in whole or in part of the petition for termination of the limitations in part or in full and restoration of unlimited or less limited licensure.

#### EXPENSES OF TREATMENT AND MONITORING

23. Respondent shall be responsible for all costs and expenses incurred in conjunction with the monitoring, screening, supervision and any other expenses associated with compliance with the terms of this Order.

#### PRACTICE LIMITATIONS

24. Respondent shall not treat himself or any member of his immediate family, except in an emergency where other medical intervention is not available, and then only for the purposes of permitting safe transfer to the care of another provider.

#### Professional Mentor

25. Respondent shall practice only under the supervision of a designated Professional Mentor approved by the Board and in a work setting pre-approved by the Board or its designated agent.
26. Respondent shall obtain a Professional Mentor acceptable to the Board. The Professional Mentor shall be the individual responsible for supervision of respondent's practice of medicine and surgery during the time this Order is in effect. Supervision shall include weekly meetings, review of charts selected by the Professional Mentor, and any other actions deemed appropriate by the Professional Mentor to determine that respondent is practicing in a professional and competent manner. The Professional Mentor may designate another qualified physician or other health care provider acceptable to the Board to exercise the duties and responsibilities of the Professional Mentor in an absence of more than three weeks. In the event that the Professional Mentor is unable or unwilling to continue to serve as respondent's professional mentor, the Board may in its sole discretion select a successor Professional Mentor. The Professional Mentor shall have no duty or liability to any patient or third party, and the Mentor's sole duty is to the Board.

#### Reporting Required

27. Respondent shall arrange for his Professional Mentor to provide formal written reports to the Department Monitor in the Department of Regulation and Licensing, Division of Enforcement, P.O. Box 8935, Madison, Wisconsin 53708-8935 on a quarterly basis, as directed by the Department Monitor. These reports shall assess Respondent's work performance.
28. Respondent's Professional Mentor shall immediately report to the Department Monitor and the respondent's Supervising Health Care Provider any conduct or condition of the respondent which may constitute unprofessional conduct, a violation of this Order, or a danger to the public or patient.
29. It is the responsibility of respondent to promptly notify the Department Monitor of any suspected violations of any of the terms and conditions of this Order, including any failures of the Professional Mentor to conform to the terms and conditions of this Order.



Change in Address or Work Status

30. Respondent shall report to the Board any change of employment status, residence, address or telephone number within five (5) days of the date of a change.
31. Respondent shall furnish a copy of this Order to all present employers immediately upon issuance of this Order, and to any prospective employer when respondent applies for employment as a health care provider.

IT IS FURTHER ORDERED, that respondent shall pay the COSTS of investigating and prosecuting this matter, in the amount of \$8,500, no later than October 31, 2003.

IT IS FURTHER ORDERED, that pursuant to §448.02(4), Wis. Stats., if the Board determines that there is probable cause to believe the respondent has violated any term of this Final Decision and Order, the Board may order that the license and registration of respondent be summarily suspended pending investigation of the alleged violation. Upon request of the Department Monitor or a prosecuting attorney, the Board's Monitoring Liaison or Board Chair may terminate a stay of suspension until the next meeting of the Board, after giving respondent notice of an alleged violation and the opportunity to be heard.

Dated this June 18<sup>th</sup>, 2003.

WISCONSIN MEDICAL EXAMINING BOARD

Alfred Franger

A Member of the Board