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STATE OF WISCONSIN BEFORE THE MEDICAL EXAMINING BOARD

IN THE MATTER OF THE LICENSE OF

:

FINAL DECISION AND ORDER

RICHARD F. HEARN, M.D.

LS # 0507203MED

:

(03MED508; 04MED143; 04MED417)

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

Richard F. Hearn, M.D. 2368 Quail Hollow Court, Apt. C Delafield, WI 53018

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 & Licensing 1400 East Washington Avenue 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 Wisconsin Medical Examining Board. The Board has reviewed the attached Stipulation and considers it acceptable.

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

FINDINGS OF FACT

- 1. Richard F. Hearn, M.D., Respondent herein, date of birth 9/11/34, was duly licensed as a physician and surgeon in the state of Wisconsin, license #14649. This license was first granted on 7/3/63. Respondent's license was limited effective 7/22/88 and his practice was thereby restricted to emergency medicine.
- 2. Respondent's most recent address on file with the Wisconsin Medical Examining Board is 2368 Quail Hollow Court, Apartment C, Delafield, Wisconsin 53018.
 - 3. At all times relevant to this action, Respondent was practicing as an emergency room physician.
- 4. The Wisconsin Medical Examining Board currently has three cases under investigation, investigative files 03MED508, 04MED143 and 04MED417.
- 5. 03MED508 involves an incident in which a 36 year old patient presented at the emergency room on 4/19/97 with chest pain. Respondent examined the patient. All of the laboratory values were normal except for an elevated cholesterol. The EKG demonstrated some abnormalities. The complaint alleges that Respondent failed to identify and appreciate the significance of these abnormalities. Respondent diagnosed a muscle chest wall strain and discharged the patient from the emergency room with a recommendation to follow up with his regular physician. The patient experienced a myocardial infarction on 7/24/98.
- 6. 04MED143 involves an incident in which a 63 year old patient presented at the emergency room on 9/1/98 with a history of chest discomfort of 3 days duration. Respondent examined the patient. The laboratory studies and the chest x-ray were normal. The EKG demonstrated some abnormalities. The complaint alleges that Respondent failed to identify and appreciate the significance of these abnormalities. Respondent diagnosed a possible allergic reaction and discharged the patient from the emergency room with a recommendation to follow up with his regular physician. The patient experienced a myocardial infarction and died on 9/12/98.
- 7. 04MED417 involves an incident in which a 7 year old patient presented at the emergency room on Friday, 4/21/00, with pain in his left leg, a swollen scrotal area and redness in the scrotal area and left inner thigh. The patient had been diagnosed with chicken pox 3 days previously. Respondent examined the patient. Laboratory studies demonstrated a high white blood count. A testicular ultrasound revealed blood flow to the testicles but a significant amount of surrounding fluid typical of a hydrocele. The examination also disclosed a thickened scrotal wall consistent with an inflammatory process. Respondent diagnosed a swollen scrotum secondary to chicken pox. Respondent discharged the patient from the emergency room with recommendations to apply ice to the scrotum, administer Tylenol for pain and follow up with the patient's regular physician on the following Monday. The patient returned to the emergency room on 4/23/00 with increased scrotal swelling and increased redness into the abdominal area and the inner thighs, bilaterally, bubbles on the scrotum, a swollen penis and increased pain. Respondent examined the patient and diagnosed cellulitis and a bacterial infection secondary to the chicken pox. Respondent had the patient transferred to Children's Hospital where the patient was diagnosed with necrotizing fasciitis secondary to Group A Strep, a complication of the chicken pox. The complaint alleged that Respondent failed to appropriately evaluate, diagnose and treat a developing infection when he examined the patient in the emergency room on 4/21/00.
- 8. Respondent is retired from the practice of medicine and surgery and has been retired since 9/1/02. Respondent, in consideration of his retirement, tenders the voluntary surrender of his current registration and license to practice medicine and surgery in the state of Wisconsin.

CONCLUSIONS OF LAW

1. The Wisconsin Medical Examining Board has jurisdiction to act in this matter, pursuant to Wis. Stat. § 448.02,[smg1] and is authorized to enter into the attached Stipulation and Final Decision and Order, pursuant to Wis. Stat. §

227.44(5).

2. The Wisconsin Medical Examining Board has the authority pursuant to Wis. Stat. § 448.02(5) to negotiate stipulations for the voluntary surrender of Respondent's license and to accept the voluntary surrender of Respondent's license to practice medicine and surgery in the state of Wisconsin as the final resolution of the above referenced investigations.

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED that:

1. The voluntary surrender of Richard F. Hearn's current registration and license to practice medicine and surgery in the state of Wisconsin is hereby accepted as the full and final resolution of pending investigations 03MED508, 04MED143 and 04MED417.

IT IS FURTHER ORDERED that

2. Richard F. Hearn will not make reapplication for a license to practice medicine and surgery in the state of Wisconsin and will not practice or attempt to practice medicine or surgery in the state of Wisconsin at any time in the future.

This Order is effective on the date of its signing. 3. Wisconsin Medical Examining Board

Alfred Franger, MD July 20, 2005 By: A Member of the Board Date

[smg1]THis should be deleted/ changed to a blank