

# 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 THE DISCIPLINARY :  
PROCEEDINGS AGAINST : FINAL DECISION AND ORDER  
:  
DAVID M. ISRAELSTAM, M.D., :  
RESPONDENT. : ORDER 0000903

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Division of Enforcement Case No. 08 MED 089

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

David M. Israelstam, M.D.  
5705 Arbor Vitae Place  
Madison, WI 53705

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

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

PROCEDURAL HISTORY

On February 26, 2011, this matter was commenced by the filing and serving of a Notice of Hearing and a Complaint. A hearing has not been held. The parties have agreed 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 adopts the attached Stipulation and makes the following:

FINDINGS OF FACT

1. David M. Israelstam, M.D. (DOB July 20, 1939) is licensed and currently registered to practice medicine and surgery in the State of Wisconsin pursuant to license number 17772-20, which was first granted on October 21, 1971.
2. Respondent's practice specialty is psychiatry and his most recent address on file with the Wisconsin Medical Examining Board is 5705 Arbor Vitae Place, Madison, Wisconsin 53705.
3. Ms. A began seeing Respondent for psychiatric medication management on August 22, 2007, when she was 21 years old and under a guardianship. Respondent initially

prescribed Zoloft, Lexapro, Neurontin, Restoril, Lamictal and Abilify. He saw her monthly and adjusted her medication as necessary. A staff member of the licensed adult family home at which Ms. A resided was present at each of Ms. A's appointments with Respondent. In addition to the medication management, Ms. A was also receiving psychotherapy from another mental health care provider.

4. At the time of the first appointment, Respondent was provided with treatment records containing the following history of Ms. A: Ms. A had suffered physical and sexual abuse by her stepfather, which resulted in her placement in foster care at the age of 5. From age 8 to 10, Ms. A was at Mendota Mental Health Center due to physical aggression and inappropriate sexual advances towards her foster brother. While there, she was diagnosed with ADHD, Post Traumatic Stress Disorder, Opposition/Defiant Disorder, and Reactive Attachment Disorder. She had several unsuccessful community placements. She continued to have many behavioral concerns and emotional impairments. Ms. A had mild cognitive impairments, with an IQ approximately in the range of 68-70. She also had a history of neurofibromatosis.

5. On January 9, 2008, Ms. A had an appointment with Respondent and the administrator of her home was present. At the end of the appointment, Respondent told Ms. A that he knew a young man with Aspergers Syndrome who was looking for a young woman with whom to have a sexual relationship. Respondent asked Ms. A if that was something in which she would be interested. Ms. A said she had a housemate with Aspergers and was not interested. The administrator asked her if she was ready for such a relationship given her sexual abuse history and Ms. A said she was not. Respondent replied that was fine and nothing more was said. After the session, Ms. A said to the administrator, "that was weird" and joked about it.

6. At a multi-team staffing on February 5, 2008, the home's administrator mentioned what had happened at the January 9, 2008 appointment. Ms. A saw Respondent again on February 7, 2008. On February 19, 2008, Ms. A's case manager told Ms. A's guardian what was discussed at the staffing about the January appointment with Respondent. The guardian discussed it with Ms. A and reported that Ms. A was uncomfortable about what had happened and didn't want to see Respondent again. On March 5, 2008, the administrator of Ms. A's home called Respondent's office and cancelled Ms. A's appointment for the next day. She said Ms. A was not comfortable returning and would find another psychiatrist.

7. It was inappropriate for Respondent to ask this patient, in these circumstances, whether she was interested in meeting a young man who was looking for a sexual relationship.

#### Prior Discipline

8. On September 20, 2000, the Board issued a Final Decision and Order in a disciplinary proceeding against Respondent for violating Wis. Admin. Code § MED 10.02(2)(h).

a. The discipline was based on the following: Beginning in January 1994, Respondent provided monthly medication checks to a 36-year-old female patient diagnosed with bi-polar affective disorder and post-traumatic stress syndrome. On August 10, 1995, the patient overdosed on prescription medication in a suicide attempt or gesture and was hospitalized and remained an inpatient until October 12, 1995. While she was hospitalized, Respondent discussed with the patient her history of having been

sexually abused. Respondent hugged her several times while she was in the hospital. During therapy sessions, Respondent told the patient about past relationship problems he had with his mother and ex-wife and current ones he had with his daughter. During an August 18, 2005 session, they had a discussion about sexuality and sexual attraction. Although Respondent asserted he was not expressing sexual interest or attraction toward the patient, she believed he was. After it was brought to his attention, Respondent recognized that his statements to the patient may have caused the patient to believe he was sexually attracted to her.

b. Respondent was reprimanded and required to complete a full day program addressing the issue of health care provider – patient relationship boundaries. It was determined that Respondent had satisfied the educational requirement by having taken, during 1996, 1997 and 1999, four courses with boundary related content, which totaled 33.5 category I credits.

#### Assessment and Education

9. On May 13, 2011, Respondent voluntarily underwent a neuropsychological evaluation by Dr. Bruce Hermann, a psychologist in the Neuropsychology Section of the Neurology Department of the University of Wisconsin Hospital and Clinics. Dr. Hermann concluded Dr. Israelstam's mental status is intact and there is no evidence of any neuropsychological deficits that would interfere with his ability to practice medicine.

10. At the recommendation of the Division of Enforcement, on May 25 – 27, 2011, Respondent took and completed Professional Boundaries Program, a 38.75 AMA PRA Category I credit program offered by Physicians Assessment and Clinical Education (PACE) at the University of California – San Diego. The post course assessment by its directors said that Respondent successfully completed the course and displayed personal and professional responsibility growth and development by actively participating in all aspects of the program and satisfactorily meeting all tasks, assignments, and objectives. Respondent reported to the Division that he found the course to be excellent and interesting.

#### CONCLUSIONS OF LAW

1. 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 and Order, pursuant to Wis. Stat. § 227.44(5).

2. Respondent, by engaging in the conduct set out above, has committed negligence in treating a patient and is subject to discipline pursuant to Wis. Stat. § 448.02(3)(c).

#### ORDER

1. David M. Israelstam, M.D., Respondent, is hereby Reprimanded for the above conduct.

2. Due to Respondent having successfully completed, on May 25-27, 2011, the 38.75 AMA PRA Category I credit Professional Boundaries Program offered by Physicians Assessment and Clinical Education (PACE) at the University of California – San Diego, no

additional education or training will be ordered. Respondent is prohibited from applying any of these hours of education toward satisfaction of the continuing education required during the November 1, 2009 through October 31, 2011 registration biennium.

3. Respondent shall, within 180 days of the date of this Order, pay to the Department of Regulation and Licensing the costs of this proceeding in the amount of \$1,775.00 pursuant to Wis. Stat. § 440.22(2).

4. All payments, requests and evidence of completion of the education required by this Order shall be mailed, faxed or delivered to:

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

5. Violation of any of the terms of this Order may be construed as conduct imperiling public health, safety and welfare and may result in a summary suspension of Respondent's license. The Board in its discretion may in the alternative impose additional conditions and limitations or other additional discipline for a violation of any of the terms of this Order. In the event Respondent fails to timely submit payment of the costs as ordered, the Respondent's license may, in the discretion of the Board or its designee, be SUSPENDED, without further notice or hearing, until Respondent has complied with payment of the costs or completion of the continuing education.

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

MEDICAL EXAMINING BOARD

By: Shaila MD MHA Date 6/14/11  
A Member of the Board Date SK