

## WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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## ORDER

NOW, THEREFORE, IT IS ORDERED that JOEL D. LUESKOW is GRANTED a limited PHYSICIAN ASSISTANT LICENSE subject to the following LIMITATIONS, TERMS AND CONDITIONS:

### Sobriety

1. Applicant shall abstain from all personal use of alcohol and controlled substances as defined in Wis. Stat. § 961.01(4), except when prescribed, dispensed or administered by a practitioner for a legitimate medical condition. Applicant shall disclose Applicant's drug and alcohol history and the existence and nature of this Order to the practitioner prior to the practitioner ordering the controlled substance. Applicant shall at the time the controlled substance is ordered immediately sign a release in compliance with state and federal laws authorizing the practitioner to discuss Applicant's treatment with, and provide copies of treatment records to, treatment provider, and the Board or Department Monitor.
2. Applicant shall refrain from the consumption of over-the-counter medications or other substances which may mask consumption of controlled substances or of alcohol, create false positive screening results, or interfere with the Applicant's treatment and rehabilitation.

### Treatment Required

3. The Department reserves the right, based upon reports received, to require Applicant to continue participation in treatment until completion and discharge from his treatment. Applicant shall cooperate with and follow all treatment recommendations of his treatment provider(s). Upon discharge, Applicant shall submit a copy of his discharge summary to the Department Monitor.
4. Applicant shall provide his treatment provider(s) with a copy of this Order.
5. Applicant's treatment provider(s) shall submit formal written reports to the Department Monitor every six (6) months or as directed by the Department Monitor. These reports shall assess the Applicant's progress, compliance and cooperation with treatment. The treatment provider shall report immediately to the Department Monitor any violation or suspected violation of this Order.

### Releases

6. Applicant shall provide and keep on file at all treatment facilities and with personnel, laboratories and collections sites (if applicable), his treatment provider(s) current releases complying with state and federal laws. The releases shall allow the Board, its designee, and any employee of the Department of Regulation and Licensing, Division of Enforcement to: (a) obtain all urine, blood and hair specimen screen results and patient health care and treatment records and reports, and (b) discuss the progress of Applicant's treatment and/or, rehabilitation. Copies of these releases shall immediately be filed with Department Monitor.

### Practice Limitations

7. Applicant shall provide a copy of this Order and all other subsequent orders immediately to supervisory personnel at all settings where the Applicant works or applies to work as a physician assistant currently or in the future.
8. Applicant shall report to the Board the names of all employers and any change of employment status, residence, address or telephone number within five (5) days of the date of a change.
9. It is Applicant's responsibility to arrange for his supervisor(s) to provide work reports to the Department Monitor every six (6) months, or as directed by the Department Monitor. These reports shall describe the Applicant's activities and verify that he is in compliance with the laws governing the practice of a physician assistant and the terms of this Order.

### Reporting Requirements

10. Applicant shall report any arrest or conviction within 48 hours of the arrest or entry of conviction.
11. Applicant is responsible for compliance with all of the terms and conditions of this Order, including the timely submission of reports by others. Applicant shall promptly notify Department Monitor of any suspected violations of any of the terms and conditions of this Order by Applicant.
12. It is the Applicant's responsibility to arrange for his probation agent to provide probation reports to the Department Monitor. These reports shall describe the Applicant's compliance with the terms of his probation. These reports must be provided every six (6) months.

### Department Monitor

13. The Department Monitor is the individual designated by the Board as its agent to coordinate compliance with the terms of this Order. Any requests, petitions, reports or other information required by this Order shall be mailed, faxed or delivered to:

Department Monitor  
Department of Regulation and Licensing  
Division of Enforcement  
1400 E. Washington Ave.  
P.O. Box 8935, Madison, WI 53708-8935  
Telephone (608) 267-3817; Fax (608) 266-2264

### Petitions for Modification/Term of Limitation

14. Applicant may petition the Board for modification of the terms of this Order after completion of two years of practice as a physician assistant in compliance with all terms and

conditions of this Order. Applicant's petition must include his history of employment from the effective date of this Order that states the dates and names of any employer, such employment in total equaling two years of practice. Any such petition shall be accompanied by a written recommendation from Applicant's current employer that includes, among other things, the dates of employment and scope of responsibility. During such employment, and (if applicable) his treatment provider expressly supporting the specific modifications sought. A denial of such a petition for modification shall not be deemed a denial of license under Wis. Stat. §§ 227.01(3) or 227.42, or Wis. Admin. Code Ch. RL 1, and shall not be subject to any right to further hearing or appeal

Costs

15. Applicant shall be responsible for all costs and expenses associated with compliance with the terms of this Order.

Suspension/Additional Discipline

16. In the event Applicant violates any of the terms of this Order as set forth above the Applicant's license may, in the discretion of the Board or its designee, be SUSPENDED without further notice or hearing. 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.

Dated at Madison, Wisconsin this 24<sup>th</sup> day of August, 2015, replacing the Order originally signed the 20<sup>th</sup> day of April, 2011.

MEDICAL EXAMINING BOARD

By: Kenneth Simons, MD  
A Member of the Board 97