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IN THE MATTER OF		BEFORE THE ALABAMA STATE BOARD OF MEDICAL EXAMINERS
MARY FI IZARETH TRAYNOR, M.D.	)	

## **ORDER**

This matter is before the Alabama State Board of Medical Examiners on a request by Mary Elizabeth Traynor, M.D. for removal of the voluntary restriction placed on her certificate of qualification for a license to practice medicine in Alabama on January 20, 1989. The Alabama State Board of Medical Examiners hereby finds that Mary Elizabeth Traynor, M.D. is qualified to possess and unrestricted certificate of qualification and license to practice medicine in the State of Alabama.

Therefore, it is the ORDER of the Alabama Board of Medical Examiners that the voluntary restriction currently attached to the certificate of qualification and license to practice medicine, number 4019, of Mary Elizabeth Traynor, M.D. be removed and that all restrictions heretofore entered against her certificate of qualification and license to practice medicine in Alabama be terminated and that the certificate of qualification and license be reinstated to full, unrestricted status.

ENTERED this 17th day of Ganuary, 1996.

William M. Lightfoot, M.D. Chairman Alabama Board of Medical Examiners STATE OF ALABAMA
MONTGOMERY COUNTY

## VOLUNTARY RESTRICTION ON CERTIFICATE OF QUALIFICATION TO PRACTICE MEDICINE

The undersigned, Mary E. Traynor, M.D. does hereby voluntarily request and consent that the following restriction be placed upon her Certificate of Qualification for a license to practice medicine in Alabama. This restriction is voluntarily entered upon by me in connection with an investigation of the State Board of Medical Examiners into my prescribing and dispensing of controlled substances.

I understand that this voluntary restriction shall continue in force and effect until modified, amended or terminated by the Board of Medical Examiners at my request. I further understand and acknowledge that this voluntary restriction shall constitute a public record and may be released by the State Board of Medical Examiners to any state licensing board, hospital, medical liability insurance carrier, or any other persons, firms, or corporations with an legitimate interest in obtaining information concerning my licensure status in the State of Alabama.

I understand and agree that any violation by me of the terms, conditions, and requirements set forth in this Voluntary Restriction shall, if established after notice and hearing, be grounds for the imposition of disciplinary sanction on my license to practice medicine in the State of Alabama by the Medical Licensure Commission of Alabama, or may be grounds for the revocation or restriction of my Alabama Controlled Substance Registration Certificate by the State Board of Medical Examiners.

During the period of this restriction, I voluntarily consent and agree that I will not supply, furnish, prescribe, administer, or dispense any controlled substance of any type or in any quantity to Charles Duckett. I further agree that in the event that the said Charles Duckett shall require controlled substances for any legitimate medical purpose, I will refer him to a qualified physician for treatment of such medical condition.

ENTERED this 20th of January, 1989.

Mary E. Traynor, M.D.