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BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

BALBIR C. SHARMA, M.D.

Holder of License No. 14499 For the Practice of Allopathic Medicine In the State of Arizona. Case No. MD-18-1202A

ORDER FOR LETTER OF REPRIMAND AND PROBATION WITH PRACTICE RESTRICTION; AND CONSENT TO THE SAME

Balbir C. Sharma, M.D. ("Respondent") elects to permanently waive any right to a hearing and appeal with respect to this Order for Letter of Reprimand and Probation with Practice Restriction; admits the jurisdiction of the Arizona Medical Board ("Board"); and consents to the entry of this Order by the Board.

FINDINGS OF FACT

- 1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.
- 2. Respondent is the holder of license number 14499 for the practice of allopathic medicine in the State of Arizona.
- 3. The Board initiated case number MD-18-1202A after receiving a complaint regarding Respondent's care and treatment of a 57 year-old male patient ("RA") who was seen in Respondent's private office-based practice in Tempe, alleging in appropriate prescribing and medication management; failure to properly examine patient; and failure to maintain adequate records.
- 4. In addition to his private practice, Respondent also practices at Arizona State Hospital, which utilizes a team approach to the practice of medicine.
- 5. RA was an established patient of Respondent's office with a history of opioid dependence and anxiety disorder, for which Respondent prescribed Suboxone 8mg/2mg daily and Lexapro 20mg daily. Beginning with RA's September 15, 2015 visit through

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November28, 2018, Respondent documented telephonic encounters with RA and continued to prescribe him Suboxone.

BD was a 40 year-old female who was an established patient of Respondent's office. BD had a past medical history of opioid dependence, anxiety, depression and attention deficit disorder ("ADD") for which Respondent prescribed BD medications that included lorazepam 0.5mg daily, Suboxone 2/0.5mg 2 films daily and Adderall 20mg three times daily.

- 7. SN was a 53 year-old female who was an established patient of Respondent's office. SN had a past medical history of anxiety, depression and ADD for which Respondent prescribed medications including clonazepam 1mg three times daily, Adderall 20mg three times daily and trazodone 300mg daily.
- 8. EB was a 28 year-old male who was an established patient of Respondent's office. Respondent prescribed EB medications including Suboxone 8/2mg twice daily.
- 9. SS was a 64 year-old female patient who was a member of Respondent's immediate family. SS had a past medical history of depression, diabetes type 2, left sided hemiplegia status-post stroke, and dysthymic disorder. Respondent prescribed SS medications including Depakote ER 500mg twice daily, phenytoin 50mg daily, Baclofen 10mg three times daily, Celexa 40mg daily, Remeron 30mg at night and Vimpat.
- 10. The standard of care requires a physician to appropriately prescribe and manage medications and prohibits a physician from prescribing Suboxone without adequately examining or evaluating a patient. Respondent deviated from this standard of care in his treatment of patient RA by prescribing Suboxone without providing appropriate medical management and by prescribing Suboxone without adequately examining or evaluating the patient.

- 11. The standard of care prohibits a physician from prescribing a combination of Suboxone, benzodiazepines and Adderall without a clinical rationale; and from providing multiple early prescription refills without justification. Respondent deviated from this standard of care in his treatment of BD by prescribing a combination of Suboxone, benzodiazepines and Adderall without a clinical rationale; and by providing early prescription refills without justification.
- 12. The standard of care prohibits a physician from providing early prescription refills without justification. Respondent deviated from this standard of care in his treatment of patient SN by providing multiple early prescription refills without justification.
- 13. The standard of care prohibits a physician from prescribing Suboxone without a clinical rationale and from providing early prescription refills without justification. Respondent deviated from this standard of care in his treatment of patient EB by prescribing Suboxone without a clinical rationale and by providing early prescription refills without justification.
- 14. The standard of care prohibits a physician from prescribing a controlled substance to immediate family members. Respondent deviated from this standard of care by prescribing Vimpat to his spouse, SS.
- 15. There was the potential for patient harm in that Respondent continued to prescribe controlled substances to RA without evaluation or examination for three years, Respondent continued to prescribe for BD a combination of controlled substances over an extended period of time with the high risk of adverse interactions and abuse, SN was at high risk of adverse interactions and abuse, EB was at high risk of overdose and abuse and SS was at high risk of adverse interactions.

CONCLUSIONS OF LAW

- a. The Board possesses jurisdiction over the subject matter hereof and over Respondent.
- b. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(e) ("Failing or refusing to maintain adequate records on a patient.").
- c. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(14)(h) ("Prescribing or dispensing controlled substances to members of the physician's immediately family.").
- d. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(r) ("Committing any conduct or practice that is or might be harmful or dangerous to the health of the patient or the public.").

ORDER

IT IS HEREBY ORDERED THAT:

- 1. Respondent is issued a Letter of Reprimand.
- 2. Respondent is placed on Probation for a period of ten (10) years with the following terms and conditions:

a. Practice Restriction

Respondent is prohibited from engaging in private and/or solo practice of medicine in the State of Arizona as set forth in A.R.S. § 32-1401(22) until receiving permission from the Board to do so. Respondent may continue to practice at Arizona State Hospital. Respondent shall cause the Arizona State Hospital to submit annual reports to the Board confirming his employment status, at the Respondent's expense.

In the event Respondent is no longer employed by Arizona State Hospital, Respondent may request Board pre-approval of any future employer. Respondent's

request for approval shall be placed on the Board's next agenda, provided a complete submission is received by Board staff no less than 30 days prior to the Board meeting. Respondent's submission shall provide the Board with the name of his potential future employer, intended scope of practice and affirmation that the employer agrees to provide the Board with annual reports as previously provided by the Arizona State Hospital. The Board has sole discretion to approve Respondent's potential future employment, and may require any combination of education, examinations and/or evaluations in order to determine whether Respondent will be safe to practice medicine within the proposed scope of practice for the potential future employment.

b. Obey All Laws

Respondent shall obey all state, federal and local laws, all rules governing the practice of medicine in Arizona, and remain in full compliance with any court ordered criminal probation, payments and other orders.

c. <u>Tolling</u>

In the event Respondent should leave Arizona to reside or practice outside the State or for any reason should Respondent stop practicing medicine in Arizona, Respondent shall notify the Executive Director in writing within ten days of departure and return or the dates of non-practice within Arizona. Non-practice is defined as any period of time exceeding thirty days during which Respondent is not engaging in the practice of medicine. Periods of temporary or permanent residence or practice outside Arizona or of non-practice within Arizona, will not apply to the reduction of the probationary period.

d. Probation Termination

Prior to the termination of Probation, Respondent must submit a written request to the Board for release from the terms of this Order. Respondent's request for release will be placed on the next pending Board agenda, provided a complete submission is received

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by Board staff no less than 30 days prior to the Board meeting. Respondent's request for release must provide the Board with evidence establishing that he has successfully satisfied all of the terms and conditions of this Order. The Board has the sole discretion to determine whether all of the terms and conditions of this Order have been met or whether to take any other action. The Board may require any combination of education, examinations and/or evaluations in order to determine whether or not Respondent is safe to prescribe controlled substances and the Board may continue the Practice Restriction and Probation or take any other action consistent with its statutory and regulatory authority.

3. The Board retains jurisdiction and may initiate new action against Respondent based upon any violation of this Order. A.R.S. § 32-1401(27)(s).

DATED AND EFFECTIVE this <u>24</u> day of <u>August</u>, 2021.

ARIZONA MEDICAL BOARD

Patricia E. McSorlev **Executive Director**

CONSENT TO ENTRY OF ORDER

- 1. Respondent has read and understands this Consent Agreement and the stipulated Findings of Fact, Conclusions of Law and Order ("Order"). Respondent acknowledges he has the right to consult with legal counsel regarding this matter.
- 2. Respondent acknowledges and agrees that this Order is entered into freely and voluntarily and that no promise was made or coercion used to induce such entry.
- 3. By consenting to this Order, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge

this Order in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Order.

- 4. The Order is not effective until approved by the Board and signed by its Executive Director.
- 5. All admissions made by Respondent in this Order are solely for final disposition of this matter and any subsequent related administrative proceedings or civil litigation involving the Board and Respondent. Therefore, said admissions by Respondent are not intended or made for any other use, such as in the context of another state or federal government regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or any other state or federal court.
- 6. Notwithstanding any language in this Order, this Order does not preclude in any way any other State agency or officer or political subdivision of this state from instituting proceedings, investigating claims, or taking legal action as may be appropriate now or in the future relating to this matter or other matters concerning Respondent, including but not limited to, violations of Arizona's Consumer Fraud Act. Respondent acknowledges that, other than with respect to the Board, this Order makes no representations, implied or otherwise, about the views or intended actions of any other state agency or officer or political subdivisions of the State relating to this matter or other matters concerning Respondent.
- 7. Upon signing this agreement, and returning this document (or a copy thereof) to the Board's Executive Director, Respondent may not revoke the consent to the entry of the Order. Respondent may not make any modifications to the document. Any modifications to this original document are ineffective and void unless mutually approved by the parties.

- 8. This Order is a public record that will be publicly disseminated as a formal disciplinary action of the Board and will be reported to the National Practitioner's Data Bank and on the Board's web site as a disciplinary action.
- 9. If any part of the Order is later declared void or otherwise unenforceable, the remainder of the Order in its entirety shall remain in force and effect.
- 10. If the Board does not adopt this Order, Respondent will not assert as a defense that the Board's consideration of the Order constitutes bias, prejudice, prejudgment or other similar defense.
- 11. This Order supersedes any and all Consent Agreements previously entered into by Respondent and the Board regarding this matter.
- 12. Any violation of this Order constitutes unprofessional conduct and may result in disciplinary action. A.R.S. § § 32-1401(27)(s) ("[v]iolating a formal order, probation, consent agreement or stipulation issued or entered into by the board or its executive director under this chapter.") and 32-1451.
 - 13. Respondent has read and understands the conditions of probation.

	DATED:	July 6, 2021	
BALBIR C. BARMA, M.D.			

1	EXECUTED COPY of the foregoing mailed this <u>24</u> day of <u>046</u> , 2021 to:
2	J
3	Holly R. Gieszl, Esq. THE GIESZL FIRM
4	3200 North Central Ave. Suite 1500 Phoenix, Arizona 85012
5	Attorney for Respondent
6	ORIGINAL of the foregoing filed this <u>ay</u> day of <u>()</u> , 2021 with:
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8	Arizona Medical Board 1740 West Adams, Suite 4000
9	Phoenix, Arizona 85007
10	mightlessus
11	Board staff
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