BEFORE THE GEORGIA COMPOSITE MEDICAL BOARD STATE OF GEORGIA

IN THE MATTER OF:

JAN 1 0 2013

DANA SIBILSKY, MD,

DOCKET NUMBER

License No. 48721,

10090028

Respondent

ORDER TERMINATING PUBLIC CONSENT ORDER

WHEREAS, the Georgia Composite Medical Board ("Board") entered a Public Consent Order in the above-styled matter on October 23, 2009, which lifted a suspension of Respondent's license to practice medicine and placed the license on a period of probation subject to terms and conditions; and

WHEREAS, Respondent has petitioned to terminate the probation period; and

WHEREAS, the Board has determined that the Respondent has complied with all the terms of the Public Consent Order;

NOW, THEREFORE, IT IS HEREBY ORDERED that Public Consent Order, Docket No. 10090028 be TERMINATED.

SO ORDERED, this 11th day of January, 2013.

GEORGIA COMPOSITE MEDICAL BOARD

BY:

WILLIAM J. DUTLER, MD

Chairperson

ATTEST:

LASHARN HUGHES

Executive Director

(BOARD SEAL)

GEORGIA COMPOSITE BEFORE THE GEORGIA COMPOSITE MEDICAL BOARD

STATE OF GEORGIA

EORGIA

IN THE MATTER OF:

DANA LYNN SIBILSKY, M.D., License No. 48721,

License No. 48721, Respondent. OCT 23 2009

DOCKET NUMBER

DOCKET NO. 1009 0028

PUBLIC CONSENT ORDER LIFTING SUSPENSION

By agreement of the Georgia Composite Medical Board ("Board") and Dana Lynn Sibilsky, M.D. ("Respondent") the following disposition of this matter is entered pursuant to the provisions of O.C.G.A. § 50-13-13(a)(4).

FINDINGS OF FACT

1.

Respondent is licensed to practice medicine in the State of Georgia, and was so licensed at all times relevant to the matters asserted herein.

2.

Respondent provided medical care to patient J.P. from in or about November 2006 until July 16, 2008. Medical records show that patient J.P. had a history of alcohol addiction and had completed treatment for dependence when he began treatment with Respondent. Medical records indicate Respondent treated patient J.P. for depression with anti-depressant medication but the patient continued to complain of headaches. Medical records show patient J.P. informed Respondent that his depression was secondary to back pain and was relieved by pain medication. Respondent agreed to treat the patient's pain until he could be seen at a pain clinic.

Medical records show that on or about February 13, 2008 Respondent began prescribing Oxycodone 30mg t.i.d. to patient J.P. on a monthly basis until July 16, 2008. In a written statement provided to the Board, Respondent stated that after she began treating patient J.P.'s pain she "was warned by his insurance agent that he was getting pain drugs from multiple doctors. On his July 16, 2008 appointment I confronted him on this and he denied it.... He did, at that appointment, say he had an appointment at a pain clinic and I agreed to cover his meds until then. However, after he left my office, two pharmacies called and again told me Mr. P continued and tried to get multiple sets of pain meds. Thus it was that day I wrote his letter dismissing him."

4.

Respondent's medical records do not reflect telephone calls to Respondent from the insurance company or family members nor do they reflect attempts by Respondent to verify her patient's appointment at a pain clinic. Medical records indicate that Respondent provided J.P. with two (2) prescriptions for Oxycodone 30mg #180 (#90 per prescription) on July 16, 2008; the next day patient J.P. overdosed and died. According to the certified Medical Examiner's Report, Office of the Medical Examiner, Gwinnett County, the manner of J.P.'s death was suicide, the cause of death was the combined toxic effects of Oxycodone and Verapamil [the latter not prescribed to J.P. by Respondent]; the concentration of each of these medications was in a range reported to be lethal, and no alcohol was detected.

5.

Respondent provided psychiatric care to patient S.D. beginning in or about December 2007. In or about August 2008 Respondent engaged in a sexual relationship with patient S.D. Respondent admitted to having a "personal, social, and romantic" relationship with patient S.D. in or about August and September 2008, and that she terminated the physician-patient

relationship in order to enter into a personal relationship with patient S.D. When patient S.D. ended the relationship after a brief time, Respondent continued to contact her via email.

6.

On or about April 6, 2009, Respondent was ordered by the Board to obtain a mental/physical examination. Respondent obtained an examination on or about April 12-16, 2009. The results of the examination indicated Respondent was not safe to practice medicine and recommended further evaluation and treatment. Accordingly, on or about April 28, 2009, Respondent's license was suspended indefinitely pursuant to the terms of a Public Consent Order, Docket No. 10090028.

7.

After the suspension of her medical license on April 28, 2009, Respondent continued to prescribe medication, including controlled substances, to patients contrary to the provisions of the Public Consent Order. Respondent wrote the prescriptions prior to the effective date of the Public Consent Order, but mailed them to patients after the effective date of the Public Consent Order. When Respondent's prescribing was brought to her attention, she stopped mailing prescriptions immediately. Respondent has stated that her prescribing during that period was based on her misunderstanding of the terms of the Public Consent Order and her misunderstanding of the law.

8.

Respondent's Public Consent Order required Respondent to enter Board approved treatment and to comply with any recommended follow-up treatment and care. Accordingly, Respondent entered into treatment with a Board approved psychiatrist and has been compliant with all recommendations for continuing care. Respondent has advocacy from her treating psychiatrist who has stated that she is safe to return to the practice of medicine.

Respondent admits the above findings of fact and waives any further findings of fact with respect to the above-styled matter.

CONCLUSIONS OF LAW

Respondent's conduct constitutes sufficient grounds for the Board to exercise its disciplinary authority and to impose sanctions on Respondent's license to practice medicine under O.C.G.A. Ch. 34, T. 43, <u>as amended</u>, O.C.G.A. § 43-1-19(a) and the Rules of the Georgia Composite Medical Board. Respondent waives any further conclusions of law with respect to this matter.

ORDER

The Board, having considered the particular facts and circumstances of this case, hereby orders and the Respondent hereby agrees as follows:

1.

Beginning on the effective date of the Consent Order, the suspension of Respondent's license shall be lifted and Respondent's license shall be placed on probation until terminated by a written order of the Board, subject to the following terms and conditions:

- (a) <u>Treatment/Aftercare</u>. Respondent shall continue to abide by all terms of her Contract for Maintenance Treatment dated August 13, 2008, with Behavioral Medicine Institute of Atlanta, Inc. ("BMI") or other Board approved treatment provider. Failure of Respondent to comply with any of the terms of her Contract for Maintenance Treatment or to discontinue such maintenance treatment at BMI or other Board approved treatment provider shall subject Respondent's license to summary suspension, pending further proceedings.
- (b) <u>Therapy</u>. Respondent shall enter therapy on a regular basis of no less than twice per month with a therapist acceptable to the Board. Such therapy shall be in addition to

Respondent's meetings or sessions in connection with the aforementioned Contract for Maintenance Treatment and shall encompass areas or issues separate from those surrounding professional boundary issues.

- (c) <u>Professional Group</u>. Respondent shall continue to attend professional group meetings at least twice per month in accordance with her Contract for Maintenance Treatment.
- (d) Supervision and Monitoring. Respondent shall designate an acceptable workplace supervising ("supervising") physician who will supervise her work and an acceptable treating ("monitoring") physician with whom she will continue therapeutic care and who will monitor any medications prescribed to Respondent. Respondent shall provide a copy of this Order to both the supervising and the monitoring physicians. Within ten (10) days of the effective date of this Order or, as to the supervising physician, prior to returning to the practice of medicine, Respondent shall submit or cause to be submitted written statements from her supervising and monitoring physicians to the Board stating he/she has read this Order and agrees to act as Respondent's supervising/monitoring physician. By executing this Consent Order, Respondent specifically consents to her supervising and monitoring physicians reporting upon Respondent's condition or behavior, notwithstanding any privilege provided by state or federal law. The Board shall maintain the confidentiality of the information received from Respondent's supervising and monitoring physicians to the extent provided by O.C.G.A.§§ 43-34-8(a)(13)(B) and 43-34-8(e). Respondent shall obtain prior written Board approval for any change in supervising and monitoring physicians.
- (e) <u>Quarterly Reports</u>. Respondent shall submit or cause to be submitted quarterly reports from her supervising and monitoring physicians regarding her performance and mental/physical condition by March 31, June 30, September 30 and December 31 of each

calendar year, including a report on any medication being prescribed to Respondent. Failure to submit or have such reports submitted in a timely manner shall be considered a violation of the Consent Order. It is expected that said supervising and monitoring physicians shall be in communication with each other and will immediately report any change in Respondent's condition which would render Respondent unable to practice with reasonable skill and safety to patients. Respondent specifically consents to her supervising and monitoring physicians or any other facility where Respondent obtains medical treatment reporting to the Board on Respondent's condition, notwithstanding any privilege provided by state or federal law. The Board shall maintain the confidentiality of the information received to the extent provided by O.C.G.A. §§ 43-34-8(a)(13)(B) and 43-34-8(e).

- (f) Practice Restrictions.
- (1) Type of Practice. Respondent shall not practice medicine as a solo practitioner and shall only work in a group practice or as otherwise approved by the Board. Respondent shall make her request for Board approval in writing <u>prior to</u> returning to the practice of medicine. Respondent shall not practice medicine until she receives Board approval. If Respondent subsequently seeks to change employment in her practice of medicine, Respondent must submit a written request for Board approval and receive such approval prior to any change.
- (2) <u>Specialty Area</u>. Respondent's practice of medicine shall be limited to the practice of psychiatry. Respondent shall not practice pain management or treat any patients for pain.
- (g) <u>DEA Restriction</u>. There shall be no restrictions on the legitimate prescribing, administering, ordering or dispensing of controlled substances in the usual course of Respondent's practice. However, until further order of the Board, Respondent shall adhere to the following protocol in regard to the use of her DEA permit:

- (1) For all controlled substances as defined by the Federal or Georgia Controlled Substances Act prescribed by Respondent during the probation period, Respondent shall utilize the system outlined in paragraph (a) immediately below if Respondent writes prescriptions or paragraph (b) immediately below if Respondent utilizes an electronic prescription system:
- a. <u>Triplicate Prescriptions</u>. Respondent shall utilize a triplicate prescription system such that each prescription for such a controlled substance written by Respondent shall be sequentially numbered and copies distributed as follows: original to patient, one copy to the Board, and one copy to the patient's chart. Respondent shall not begin renumbering when she reaches 1000 but shall continue to number sequentially. The copies for the Board shall be mailed or delivered to the Board by Respondent once per quarter. A copy of Respondent's dispensing records shall be provided to the Board upon request for all controlled substances dispensed by her or on her order; or
- b. Electronic Prescriptions. If Respondent is employed by a medical practice that utilizes an electronic medical records system and no prescriptions are written outside of the electronic system, on a quarterly basis Respondent shall submit or cause to be submitted to the Board a certified, printed copy of all prescriptions for controlled substances prescribed by Respondent. If Respondent dispenses any controlled substances, a copy of Respondent's dispensing records shall be provided to the Board upon request for all controlled substances dispensed by her or on her order. If Respondent requests and receives approval for a change in her employment in the practice of medicine and begins working at a location where there is no electronic prescription system, Respondent shall notify the Board in writing and shall utilize a Board approved triplicate prescription system as set forth in paragraph (a) above.

- (2) <u>Prescription Log.</u> During the probationary period, Respondent shall personally maintain for inspection a contemporaneous log (separate from her clinical records or the clinical records of other health care providers) of all controlled substances prescribed, administered, dispensed, or ordered by Respondent. The log shall include the date, patient name, drug, strength, quantity, and refill status, on a form approved by the Board. The log shall also include the diagnosis and the reasons for prescribing, administering, dispensing, or ordering each drug. The Board shall be authorized to inspect Respondent's prescription log. If Respondent's prescription log fails to comply with the requirements of this Consent Order, the Board is authorized to summarily suspend Respondent's license, pending a hearing.
- (3) Record Keeping. Prior to prescribing, administering, ordering or dispensing any controlled substances, Respondent shall detail fully the history obtained, examination performed and diagnosis reached in the particular patient's file. Respondent shall specifically record all physical data of the patient and shall detail the exact nature of Respondent's evaluation of the patient. In addition to this requirement, Respondent agrees to comply with all record keeping requirements of the Board as found in the laws and rules.
- (h) Course in Appropriate Prescribing. In addition to the continuing education required of all licensees, Respondent shall provide the Board with evidence, within one (1) year of the effective date of this Order, of having successfully completed the mini-residency program entitled "Appropriate Prescribing of Controlled Substances" sponsored by the Mercer University Southern School of Pharmacy.
- (i) <u>Further Evaluation</u>. At any time during the period of probation, the Board shall have the authority to order Respondent to undergo a physical or mental evaluation by physicians

designated by the Board. Respondent shall execute such releases as may be required for the Board to obtain the results of such evaluations.

- (j) <u>Personal Physician</u>. Respondent shall obtain a personal physician and obtain regular medical care, such as yearly examinations.
- (k) <u>Periods of Residency Outside Georgia and Periods When Not Actively Practicing</u>

 <u>Medicine</u>. In the event Respondent should leave Georgia to reside or practice outside of Georgia for periods longer than thirty (30) consecutive days, Respondent shall notify the Board in writing of the dates of departure and return. Periods of residency or practice outside of Georgia as well as periods when Respondent is not actively engaged in practicing as a physician will not apply to the reduction of Respondent's probation period, except as approved by the Board.
- (l) <u>Residency Within Georgia</u>. Respondent shall advise the Board of any change in her residency within Georgia within ten (10) days of making the change.
- (m) Abide By Laws, Rules and Terms. Respondent shall abide by all State and Federal laws regulating her practice as a physician or relating to drugs, the Rules and Regulations of the Georgia Composite Medical Board and the terms of the Consent Order and probation. If Respondent shall fail to abide by such laws, rules or terms, or if it should appear from monitoring reports submitted to the Board that Respondent is otherwise unable to practice with reasonable skill and safety to patients, or should Respondent violate the criminal laws of the state, including any term of monitoring, if any, Respondent's license shall be subject to further discipline, including revocation, upon substantiation thereof after notice and hearing, and if revoked, the Board in its discretion may determine that the license should be permanently revoked and not subject to reinstatement. Respondent further agrees that any violation of the Consent Order shall be deemed to be sufficient to authorize the Board to order summary

suspension of Respondent's license, pending further proceedings, pursuant to the provisions of the Georgia Administrative Procedure Act, O.C.G.A. § 50-13-18(c)(1), or any other statute authorizing emergency action, but Respondent understands that Respondent shall be entitled to an expedited hearing to substantiate such violation(s), if the Board exercises such right.

- (n) <u>Disclosure</u>. In addition to other disclosures required by the Consent Order, Respondent shall supply a copy of the Consent Order, once approved and docketed, and within ten (10) days from receipt of the docketed copy by Respondent, to each hospital or other institution in Georgia where Respondent maintains staff privileges of any kind, and to any person with whom Respondent is associated in practice, including other physicians or physician's assistants or to any person or entity for whom Respondent is employed as a physician in the State of Georgia. Respondent shall also be required to disclose the existence of and provide a copy of the Consent Order to such individuals or entities in connection with any future application for institutional appointment, associated practice, utilization of a physician's assistant, or employment as a physician in the State of Georgia while the Consent Order is in effect. By executing the Consent Order, Respondent specifically consents to any such individuals or entities reporting to the Board information which would affect Respondent's ability to practice medicine with reasonable skill and safety to patients, notwithstanding any privilege provided by state or federal law. Respondent shall document compliance with the condition of monitoring utilizing the form attached hereto as Attachment A or a substantially similar form.
- (o) <u>Termination of Probation</u>. Respondent shall not be eligible to petition for termination of probation until ten (10) years from the effective date of this Consent Order. At such time, Respondent may petition for termination by certifying under oath before a notary public that she

has complied with all conditions of probation and by providing documentation supporting discharge from monitoring, including, but not limited to, a written statement from Respondent's supervisor and monitoring physician that said supervisor and monitoring physician agree with terminating probation. The Georgia Composite Medical Board shall review and evaluate the practice of Respondent prior to lifting probation. At such time, the Board shall be authorized, but is not required, to terminate probation. If the Board denies the Respondent's petition for termination of probation, Respondent may petition for termination of probation on an annual basis thereafter. In any event, the Consent Order shall remain in effect pending a final determination by the Board and notification that the probation period has terminated.

2.

This Consent Order and its dissemination shall constitute a **public reprimand** of the Board.

3.

Respondent understands that pursuant to O.C.G.A. Title 43, Chapter 34A, the contents of this order shall be placed on Respondent's Physician Profile. Furthermore, by executing this Consent Order, Respondent hereby agrees to permit the Board to update her Physician's Profile reflecting this Consent Order.

4.

Respondent acknowledges that she is represented by counsel and that she has read the Consent Order and understands its contents. Respondent understands that she has a right to a hearing, and freely, knowingly, and voluntarily waives that right. Respondent understands that the Consent Order will not become effective until approved and docketed by the Georgia

Composite Medical Board. Respondent further understands and agrees that a representative of the Department of Law may be present during the presentation of the Consent Order to the Board and that the Board shall have the authority to review the investigative file and all relevant evidence in considering the Consent Order. Respondent further understands that the Consent Order, once approved, shall constitute a public record which may be disseminated as a disciplinary action of the Board. However, if the Consent Order is not approved, it shall not constitute an admission against interest in the proceeding, or prejudice the right of the Board to adjudicate the matter. Respondent consents to the terms and conditions contained herein.

Approved, this 23 day of October, 2009.

GEORGIA COMPOSITE MEDICAL BOARD

BY:

JOHN T. PERRY, M.D.

Chairnerson

Respondent

(BOARD SEAL)

ATTEST:

Executive Director

CONSENTED TO

[As to the signature of Dr. Sibilsky:] Sworn to and subscribed before me this by day of October, 2009.

NOTARY PURIAL My Commission Expires:

THOMAS D. BEVER, ESQ

Attorney for Respondent

BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMPLE BY THE STATE OF GEORGIA

IN THE MATTER OF:
DANA LYNN SIBILSKY, M.D.,
License No. 48721,
Respondent.

APR 2 8 2009

DOCKET NO.

10090028

PUBLIC CONSENT ORDER

By agreement of the Composite State Board of Medical Examiners (Board) and Dana Lynn Sibilsky, M.D. (Respondent) the following disposition of this matter is entered pursuant to the provisions of O.C.G.A. § 50-13-13(a)(4).

FINDINGS OF FACT

1.

Respondent is licensed to practice medicine in the State of Georgia, and was so licensed at all times relevant to the matters asserted herein.

2.

On or about April 6, 2009, Respondent was required by the Board to obtain a mental/physical examination. Respondent obtained an examination at Ridgeview Institute ("Ridgeview") on or about April 12-16, 2009.

3.

The results of the examination from Ridgeview state that Respondent is not safe to practice medicine due to issues surrounding physician/patient boundaries and Respondent's current mental and/or physical abilities and recommends further evaluation and treatment.

4.

For the purposes of entering into this Consent Order, Respondent does not contest the findings of fact above. Respondent understands that by doing so, she is not admitting the truth of any of the findings or acknowledging any impropriety, but is agreeing that the Board may enter an order based on the findings without the necessity of receiving evidence in support thereof. Respondent makes no admission herein and reserves the right to contest allegations against her in any civil, criminal or other proceedings.

CONCLUSIONS OF LAW

Respondent's conduct constitutes sufficient grounds for the Board to exercise its disciplinary authority and to impose sanctions on Respondent's license to practice medicine under O.C.G.A. Ch. 34, T. 43, <u>as amended</u>, O.C.G.A. § 43-1-19(a) and the Rules of the Composite State Board of Medical Examiners. Respondent waives any further conclusions of law with respect to this matter.

ORDER

The Board, having considered the particular facts and circumstances of this case, hereby orders and the Respondent hereby agrees as follows:

1.

Respondent agrees that her license to practice medicine shall be suspended indefinitely and that she shall not practice medicine in Georgia until further order of the Board. If Respondent practices medicine in the State of Georgia without prior express written permission of the Board, Respondent's license shall be subject to revocation, upon substantiation thereof.

2.

Respondent shall enter Board approved treatment for issues surrounding physician/patient boundaries and Respondent's current mental and/or physical abilities.

Following discharge from treatment, Respondent shall comply with any recommended follow-up care, including a continuing care program, as may be suggested by her treating physician, and/or shall comply with further recommendations of the Board. Respondent shall execute a release so that the Board may obtain the results and records relating to any of Respondent's evaluation(s) and/or treatment.

3

During the period of suspension, Respondent shall inform the Board in writing of any change in her address of record within ten (10) days of the change.

4.

Respondent may not petition to have the suspension of her license to practice medicine in the State of Georgia lifted until she has received professional advocacy to return to the practice of medicine from an advocate acceptable to the Board. Prior to the Board considering Respondent's petition to have the suspension lifted, the Board shall review and evaluate the Respondent's current condition and her compliance with obtaining treatment approved by the Board. The Board may require Respondent to meet personally with the Board or any committee thereof. The Board may require the Respondent to demonstrate to the satisfaction of the Board that she has maintained current knowledge, skill and proficiency in the practice of medicine. The Board may require the Respondent to submit proof of current cognitive functioning, continuing education and/or the passage of an examination such as SPEX or other competency assessments. Respondent acknowledges that when considering her petition the Board has the authority to review any investigative file relating to the Respondent. The Board shall have the discretion to lift the suspension of Respondent's license to practice medicine in the State of Georgia, to place upon Respondent's license any conditions that the Board

may deem appropriate, or to deny the petition to have the suspension lifted. In no case, however, will a denial of such petition or request, or the placing of conditions upon the license, be considered a contested case as defined by O.C.G.A. Title 50, the Georgia Administrative Procedure Act.

5.

This Consent Order shall constitute a public reprimand and may be disseminated by the Board as a public disciplinary action.

6.

During the period of suspension, the Respondent shall continue to pay the license renewal fee by and before each expiration date, as established by the Board. Failure to pay the license renewal fee shall be grounds for the administrative revocation of Respondent's license without a hearing, as provided by O.C.G.A. 43-1-19(1), with reinstatement within the discretion of the Board. Respondent acknowledges that when considering the reinstatement of an administratively revoked license, the Board has the authority to review any investigative file relating to the Respondent.

7.

Respondent also understands that pursuant to O.C.G.A. Title 43, Chapter 34A, the contents of this order shall be placed on her Physician's Profile. Furthermore, by executing this Consent Order, the Respondent hereby agrees to permit the Board to update the Physician's Profile reflecting this Consent Order.

8.

Respondent acknowledges that she is represented by counsel and that she has read and understands the contents of this Consent Order. Respondent understands that she has the right to a hearing in this matter, and Respondent freely, knowingly and voluntarily waives such right by entering into this Consent Order. Respondent

understands that this Consent Order will not become effective until approved by the Composite State Board of Medical Examiners and docketed by the Executive Director of the Board. Respondent further understands and agrees that a representative of the State Department of Law may be present during the presentation of this Consent Order and that the Board shall have the authority to review the investigative file and all relevant evidence in considering this Consent Order. Respondent further understands that this Consent Order, once approved, shall constitute a public record which may be disseminated as a disciplinary action of the Board. If this Consent Order is not approved, it shall not constitute an admission against interest in this proceeding, or prejudice the ability of the Board to adjudicate this matter. Respondent consents to the terms and sanctions contained herein.

Approved, this <u>28</u> day of April, 2009.

COMPOSITE STATE BOARD OF **MEDICAL EXAMINERS**

President ATTEST:

> DANA LYNN SIBILSKY, M.D. Respondent

(BOARD SEAL)

CONSENTED TO:

[As to Dr. Sibilsky's signature:]

Sworn to and subscribed before me day of 2009.

NOTARY PUBLIC

My commission expires NOTARY PUBLIC

Attorney for Respondent