# BEFORE THE GEORGIA COMPOSITE MEDICAL BOARD STATE OF GEORGIA

IN THE MATTER OF:

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GEORGIA COMPOSITE
MEDICAL BOARD

DANIEL GOLIGHTLY, M.D., License No. 12470.

DOCKET NO .:

APR 1 3 2022

Respondent.

DOCKET NUMBER:

# PUBLIC CONSENT ORDER

By agreement of the Georgia Composite Medical Board ("Board") and DANIEL GOLIGHTLY, M.D. ("Respondent"), the following disposition of this disciplinary matter is entered pursuant to the provisions of the Georgia Administrative Procedure Act, O.C.G.A § 50-13-13 as amended.

# 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 facts stated herein.

2.

#### Patient C.D.

On or about October 20, 2018, the Board received a complaint regarding Respondent's prescribing of controlled substances. Specifically, the concern expressed was that Respondent continued to prescribe patient "C.D." Xanax (alprazolam) despite knowledge that the patient had a history of prescription drug abuse. From in or about September of 2015, through January of 2019, patient C.D. was treated by Respondent opiate dependency and anxiety disorder.

Respondent's treatment included, inter alia, prescribing Suboxone 8mg or Alprazolam 1mg thirty (30) times from on or about February 20, 2017 to January 14, 2019. Respondent's medical care

of C.D. was evaluated by a Board-approved peer reviewer who concluded that Respondent's diagnosis, treatment and/or records departed from and failed to conform to the minimal standards of acceptable and prevailing medical practice in the following ways:

- Failure to document a comprehensive initial psychiatric assessment prior to initiating and maintaining treatment;
- No documented diagnosis that correlates with the prescription of Xanax;
- Continued prescription of buprenorphine with benzodiazepines without a
  documented plan to reduce the dose and/or frequency of the benzodiazepine, or an
  attempt to use non-addictive medications first;
- Failure to obtain a corroborative history from a friend or family member to confirm that the patient is using medications appropriately.

3.

#### Patient J.N.

Patient J.N. was seen by Respondent between 2014 and 2019 for anxiety disorder, depression, and pain. Respondent's treatment included, inter alia, the use of opioid medications to high doses of benzodiazepines, along with other psychotropic medications. Respondent's medical care of J.N. was evaluated by a Board-approved peer reviewer who concluded that treatment departed from and failed to conform to the minimal standards of acceptable and prevailing medical practice in the following ways:

- Little, if any, mention of recommendations for psychotherapy for treatment of anxiety;
- Regarding the choice, dosing and combination of medications, the treatment does not meet minimal standards of care;
- No records of Respondent attempting to wean or reduce or minimize the use of berzodiazepines;
- Prescription of 6mg of Xanax a day, with concurrent opioid medication, is an
  unusually high dose and beyond the maximum dosage for anxiety disorders;
- Failure to routinely and regularly check urine drug screens and/or review outside records to corroborate patient's report of back pain.

# Patient H.K.

From in or about June of 2017, through August of 2018, patient H.K. was treated by Respondent for opiate dependency, anxiety disorder, and insomnia. Respondent's treatment included, inter alia, prescribing buprenorphine-naloxone and benzodiazepines. Respondent's medical care of H.K. was evaluated by a Board-approved peer reviewer who concluded that Respondent's diagnosis, treatment and/or records departed from and failed to conform to the minimal standards of acceptable and prevailing medical practice in the following ways:

- The dosage and continued prescribing of scheduled/controlled medications to treat addiction, anxiety, and insomnia after inconsistent confirmatory urine drug testing;
- Continued prescription of Suboxone after confirmatory urine drug screen results showed a relapse of heroin, morphine, and hydromorphone without a documented discussion with the patient regarding the drug screen results;
- Increased frequency of Xanax after a documented failure by patient to follow the treatment plan;
- Prescription of a benzodiazepine with Suboxone without documented attempts to minimize usage or outline a plan for cessation, or attempt other non-additive medication first;
- Failure to address concurrent use of oxycodone interspersed with Suboxone use with patient.

**5**.

Respondent admits the above findings of fact and waives further findings and agrees to the entry of this Order in order to resolve the pending allegations.

### CONCLUSIONS OF LAW

Respondent's conduct constitutes sufficient grounds for the Board to exercise disciplinary authority under O.C.G.A. Chs. 1 and 34, T. 43, as amended, and the Rules of the Georgia Composite Medical Board. Respondent waives any further conclusions of law with respect to the above-styled matter.

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# ORDER

The Board, having considered the particular facts and circumstances of this case, hereby ordered, and Respondent hereby agrees to the following:

1.

Within six (6) months of the effective date of this Consent Order, Respondent shall provide to the Board evidence that he has completed the following continuing medical education (CME):

- a. A mini-residency program entitled "Appropriate Prescribing of Controlled Substances" sponsored by the Mercer University Southern School of Pharmacy, or a similar course pre-approved by the Board; and said (CME) shall be in addition to the CME required license renewal. Failure to provide written evidence of successful completion of the CME within six (6) months of the effective date of this Consent Order shall be considered a violation of this Consent Order and shall result in further sanctioning of Respondent's license, upon substantiation thereof.
- b. A Board approved course on medical record documentation. This requirement shall be deemed satisfied upon the Board's receipt of evidence of successful completion of the course; and said (CME) shall be in addition to the CME required license renewal. Failure to provide written evidence of successful completion of the CME within six (6) months of the effective date of this Consent Order shall be considered a violation of this Consent Order and shall result in further sanctioning of Respondent's license, upon substantiation thereof.

2.

This Consent Order and the dissemination thereof shall constitute a public reprimand to the Respondent for his conduct.

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

4.

Approval of this Order by the Board shall in no way be construed as condoning Respondent's conduct and, except as provided herein, shall not be construed as a waiver of any of the lawful rights of the Board.

5.

Respondent acknowledges that he has read and understands the contents of this Consent Order. Respondent understands that he 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 further understands and agrees 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 and docketed, shall constitute a public record and may be disseminated as such. 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 understands that this Consent Order will not become effective until approved and docketed by the Georgia Composite Medical Board. Respondent consents to the terms contained herein.

(signatures on following page)



GEORGIA COMPOSITE MEDICAL BOARD

BY:

DESPINA DALTON, M.D.

Chairperson

ATTEST:

DANIEL R. DORSEY

**Executive Director** 

CONSENTED TO:

DANIEL GOLIGHTLY, M.I.

Respondent

AS TO THE SIGNATURE OF DANIEL GOLIGHTLY, M.D.:

Sworn to and subscribed before me this, 38 day of March, 2022.

NOTARY PUBLIC

May Commission Expires
ARLENE J KISH

Notary Public - State of Georgia Fulton County

My Commission Expires Jan 14, 2024