STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF PROFESSIONAL LICENSING
BOARD OF MEDICINE
DISCIPLINARY SUBCOMMITTEE

In the Matter of

VIJAYA C RAMESH, M.D. License No. 43-01-055604,

File No. 43-20-002139

Respondent.

CONSENT ORDER AND STIPULATION

CONSENT ORDER

On July 30, 2021, the Department of Licensing and Regulatory Affairs executed an Administrative Complaint charging Respondent with violating the Public Health Code, MCL 333.1101 *et seq*.

The parties have stipulated that the Disciplinary Subcommittee (DSC) of the Michigan Board of Medicine may enter this Consent Order. The DSC of the Michigan Board of Medicine has reviewed this Consent Order and Stipulation and agrees that the public interest is best served by resolution of the outstanding Complaint.

Therefore, IT IS FOUND that the facts alleged in the Complaint are true and constitute violations of MCL 333.16221(a), (w), and MCL 333.7303a(4). Counts II, III and IV, alleging violations of MCL 333.16221(b)(i), (b)(vi), and (c)(iv), are dismissed with prejudice.

Accordingly, IT IS ORDERED that for the cited violations of the Public Health Code:

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Respondent is FINED \$1,000.00, to be paid to the State of Michigan within

6 months of the effective date of this Order. Respondent shall direct payment to the

Department of Licensing and Regulatory Affairs, Enforcement Division,

Compliance Section, P.O. Box 30189, Lansing, MI 48909. The fine shall be paid by

check or money order, made payable to the State of Michigan, and shall clearly display

File Number 43-20-002139.

If Respondent violates any provision of this Order the DSC may take

disciplinary action pursuant to Mich Admin Code, R 338.1632 and MCL 333.16221(h).

This Order shall be effective 30 days from the date signed by the Board, as

set forth below.

MICHIGAN BOARD OF MEDICINE

Chairperson, Disciplinary Subcommittee

Dated: November 16, 2022

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STIPULATION

Respondent does not contest the allegations of fact and law in the

Complaint. Respondent understands that, by pleading no contest, Respondent does not

admit the truth of the allegations but agrees the DSC of the Michigan Board of Medicine

may treat the allegations as true for the resolution of the complaint and may enter an

order treating the allegations as true. Therefore, the DSC finds that the facts alleged in

the Complaint are true and constitute violations of MCL 333.16221(a), (w), and MCL

333.7303a(4). Counts II, III and IV, alleging violations of MCL 333.16221(b)(i), (b)(vi), and

(c)(iv), are dismissed with prejudice.

1.

2. Respondent understands and intends that by signing this Stipulation,

Respondent is waiving the right, pursuant to the Public Health Code, the rules

promulgated thereunder, and the Administrative Procedures Act, MCL 24.201 et seq, to

require the Department to prove the charges set forth in the Complaint by presentation of

evidence and legal authority, and Respondent is waiving the right to appear with an

attorney and such witnesses as Respondent may desire to present a defense to the

charges.

3. This matter is a public record required to be published and made

available to the public pursuant to the Michigan Freedom of Information Act, MCL 15.231

et seq., and this action will be reported to the National Practitioner Data Bank and any

other entity as required by state or federal law.

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- 4. Ali Moiin, MD, served as conferee and supports this resolution. Dr. Moiin and the Department took the following factors into consideration in the formulation of this Order:
 - a. Respondent does not have a disciplinary history.
 - b. In a compliance conference with a Bureau representative and a Board conferee, Respondent stated that she has implemented procedures to correct the deficiencies identified in the complaint, including adding prompts and other indicators to her recordkeeping system and ensuring MAPS is checked more consistently.
 - c. Respondent stated that around half of her practice involves children with AD/HD, which accounts for her high stimulant prescribing numbers. Respondent also detailed her treatment of patients with benzodiazepines and indicated that many of them have complex symptoms but are mostly stable.
 - d. Respondent submitted evidence of completing nearly 28 hours of continuing education in record keeping, ethics and liability related to record keeping, controlled substance prescribing, pain management, and monitoring for abuse and diversion.
- 5. A Department representative or Dr. Moiin may discuss this matter with the DSC and recommend acceptance of the resolution set forth in this Order.
- 6. This proposal is conditioned upon acceptance by the DSC. Respondent and the Department expressly reserve the right to further proceedings without prejudice should the Order be rejected.

Signatures on the next page

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AGREED TO BY:

Forrest Pasanski, Director
Enforcement Division
Bureau of Professional Licensing

Dated: 8-31-2022

AGREED TO BY:

Vijaya C. Ramesh, M.D.
Respondent

Dated: 8-31-2022

AGREED TO BY:

AGREED TO BY:

AGREED TO BY:

Agree D TO

ses/pc

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF PROFESSIONAL LICENSING BOARD OF MEDICINE DISCIPLINARY SUBCOMMITTEE

In the Matter of

VIJAYA C RAMESH, M.D. License No. 43-01-055604,

File No. 43-20-002139

Respondent.

ADMINISTRATIVE COMPLAINT

The Michigan Department of Licensing and Regulatory Affairs, by Forrest Pasanski, Director, Enforcement Division, Bureau of Professional Licensing, complains against Respondent Vijaya Ramesh, M.D. as follows:

- 1. The Michigan Board of Medicine is an administrative agency established by the Public Health Code, MCL 333.1101 *et seq*. Pursuant to MCL 333.16226, the Board's Disciplinary Subcommittee (DSC) is empowered to discipline licensees for Code violations.
- 2. Respondent is currently licensed to practice medicine in the state of Michigan. Respondent also holds an active controlled substance license.
- 3. At times relevant to this Complaint, Respondent was engaged in private practice in Dearborn, Michigan.
- 4. Alprazolam (e.g. Xanax), a schedule 4 controlled substance, is a benzodiazepine used to treat anxiety disorders and panic disorder. Alprazolam is a commonly abused and diverted drug, particularly in its 1 mg and 2 mg dosages.

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- 5. Amphetamine salts (e.g., Adderall) are schedule 2 controlled substances.
- 6. Clonazepam (e.g. Klonopin), a schedule 4 controlled substance, is a commonly abused and diverted benzodiazepine used to treat seizures, panic disorder, and akathisia.

MAPS Data

7. The Department reviewed data from the Michigan Automated Prescription System (MAPS), the State of Michigan's prescription monitoring program, which gathers data regarding controlled substances dispensed in Michigan. MAPS data revealed that Respondent ranked among Michigan's highest-volume prescribers of commonly abused and diverted controlled substances in 2019, 2020 and the first two quarters of 2021:

Drug	2019	2020	2021 Q1	2021 Q2
Adderall (all)	16	14	17	20
All Controlled Substances	6	9	14	22
Alprazolam 1mg	3	3	2	2
Alprazolam 2mg	11	12	38	92
Clonazepam (all)	3	4	7	6
Stimulants	19	17	20	25

- 8. On or about March 4, 2019, Respondent registered for MAPS access. From her registration date through June 30, 2020, records show that she requested MAPS reports on patients around 27% of the time prior to authorizing a new controlled substance prescription.
- 9. MAPS records show that Respondent frequently prescribed dangerous combinations of controlled substances, including a benzodiazepine with a stimulant.

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Interview of Respondent

- 10. As part of an investigation of Respondent's prescribing practices, the Department received and analyzed medical records of eight (8) of Respondent's patients: AH¹, CD, SD, CL, DD, JG, LS, and AT.
- 11. On or about December 30, 2020, a Department investigator interviewed Respondent, who stated the following:
 - a. She sees approximately 100 patients, during the hours of noon to 6 pm, 5 days per week.
 - b. She was unfamiliar with what drugs were typically diverted.
 - c. She indicated that urine drug screens were done randomly. The investigator noted that there were no urine drug screens in any of the patient records provided to the Department.
 - d. She completes informed consents and develops treatment plans and goals with all of her patients. The investigator noted that there were none of these documents in any of the patient records provided to the Department.
 - e. She attempts to reduce dosages for controlled substances with all of her patients. The investigator noted that there was not any documentation in any of the patient records provided to the Department that showed this.

Expert Overview of Respondent's Practice

- 12. An expert reviewed the individual medical files Respondent produced and discovered the following deficiencies consistently across files:
 - (a) Respondent failed to document the chief complaint and history of the present illness.
 - (b) Respondent failed to document informed consent prior to initiating treatment and prescribing controlled substances.
 - (c) Respondent failed to document addressing the overdose risk of controlled substances with his patients.

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¹ Initials are used to protect patient privacy.

(d) Respondent failed to document obtaining and reviewing a MAPS report prior to prescribing a controlled substance.

(e) Respondent failed to document a rationale for prescribing controlled

substances.

(f) Respondent failed to document any urine drug screenings for patients

that were prescribed controlled substances.

(g) Respondent prescribed dangerous combinations of benzodiazepines

and stimulants and failed to document the rationale.

(h) Respondent prescribed dangerous dosages of benzodiazepines and

stimulants and failed to document the rationale.

(i) Respondent's overall care of patients was negligent and below the

minimum standard of care.

(j) Respondent's overall documentation and practices related to controlled

substances demonstrated excessive, dangerous, and unsafe

prescribing and did not appear to be for legitimate medical care.

COUNT I

Respondent's conduct constitutes a violation of a general duty, consisting

of negligence or failure to exercise due care, including negligent delegation to or

supervision of employees or other individuals, or a condition, conduct, or practice that

impairs, or may impair, the ability safely and skillfully to engage in the practice of the

health profession in violation of MCL 333.16221(a).

COUNT II

Respondent's conduct, as set forth above, demonstrates Respondent's

"departure from, or failure to conform to, minimal standards of acceptable and prevailing

practice for the health profession, whether or not actual injury to an individual occurs",

and accordingly "incompetence," in violation of MCL 333.16221(b)(i).

Administrative Complaint

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COUNT III

Respondent's conduct demonstrates Respondent's lack of a "propensity . . .

to serve the public in the licensed area in a fair, honest, and open manner," MCL

338.41(1), and accordingly a lack of "good moral character," in violation of MCL

333.16221(b)(vi).

COUNT IV

Respondent's conduct, as set forth above, constitutes selling, prescribing,

giving away, or administering drugs for other than lawful diagnostic or therapeutic

purposes, in violation of MCL 333.16221(c)(iv).

COUNT V

Respondent failed to obtain and review a MAPS report prior to prescribing

a controlled substance, contrary to MCL 333.7303a(4) and in violation of MCL

333.16221(w).

RESPONDENT IS NOTIFIED that, pursuant to MCL 333.16231(8),

Respondent has 30 days from the date of receipt of this Complaint to submit a written

response to the allegations contained in it. Pursuant to section 16192(2) of the Code,

Respondent is deemed to be in receipt of the complaint three (3) days after the date of

mailing listed in the attached proof of service. The written response shall be submitted by

email to the Department of Licensing and Regulatory Affairs, Bureau of Professional

Licensing to BPL-DMS@michigan.gov. If unable to submit a response by email,

Respondent may submit by regular mail to the Department of Licensing and Regulatory

Affairs, Bureau of Professional Licensing, P.O. Box 30670, Lansing, MI 48909.

Administrative Complaint

Respondent's failure to submit an answer within 30 days is an admission of all Complaint allegations. If Respondent fails to answer, the Department shall transmit this complaint directly to the Board's Disciplinary Subcommittee to impose a sanction pursuant to MCL 333.16231(9).

		MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS		
Dated:	7/30/2021	andrew Hudson signing for		
		By: Forrest Pasanski, Director Enforcement Division Bureau of Professional Licensing		
eae/nc				

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