

BEFORE THE MINNESOTA

BOARD OF MEDICAL PRACTICE

In the Matter of the Medical License of Bryan J. Bergh, M.D. Year of Birth: 1955 License Number: 32,374

STIPULATION AND ORDER

IT IS HEREBY STIPULATED AND AGREED, by and between Bryan John Bergh, M.D. ("Respondent"), and the Complaint Review Committee ("Committee") of the Minnesota Board of Medical Practice ("Board") as follows:

- 1. During all times herein, Respondent has been and now is subject to the jurisdiction of the Board from which he holds a license to practice medicine and surgery in the State of Minnesota.
- 2. Respondent has been advised by Board representatives that he may choose to be represented by legal counsel in this matter. Respondent has chosen to be represented by John B. Casserly, Geraghty O'Loughlin & Kenney, P.A., 55 East Fifth Street, St. Paul, Minnesota 55101 (651) 291-1177. At the conference, the Committee was represented by Karen D. Olson, Deputy Attorney General. The Committee is now represented by Keriann L. Riehle, Assistant Attorney General, 445 Minnesota Street, Suite 1400, St. Paul, Minnesota 55101, (651) 757-1449.

FACTS

- 3. For the purpose of this Stipulation, the Board may consider the following facts as true:
- a. Respondent was licensed by the Board to practice medicine and surgery in the State of Minnesota on January 21, 1989. Respondent is board certified in psychiatry and neurology with a sub-certification in psychiatry and child and adolescent psychiatry.
- b. On November 7, 2017, the Board received a report alleging Respondent increased dosages on medications which resulted in tremors and weakness in a patient with preexisting end-stage renal disease ("ESRD") requiring dialysis treatment.
- c. Based upon the report, the Board initiated an investigation into Respondent's care of the patient. The investigation revealed:
- i. The patient was put on amantadine for weight loss by another provider.
- ii. In October and December 2013, Respondent increased the patient's amantadine. Respondent did not communicate with a nephrology specialist to review the increased dosages.
- iii. The patient was hospitalized three times and experienced acute hypoxic respiratory failure requiring intubation and admission to the intensive care unit.
- iv. The amantadine dosing was 14 times the appropriate level for a patient with ESRD.
- d. On June 20, 2019, Respondent met with the Committee to discuss his care of the patient. Respondent did not dispute that the patient was toxic from the amantadine.

Respondent stated he did not realize that, because of the patient's renal status, the patient's system could not manage the amantadine at the level prescribed.

STATUTES

4. The Committee views Respondent's practices as inappropriate in such a way as to require Board action under Minn. Stat. § 147.091, subd. 1(k) (conduct that departs from or fails to conform to the minimal standards of acceptable and prevailing medical practice) and (s) (inappropriate prescribing or failing to properly prescribe a drug), and Respondent agrees that the conduct cited above constitutes a reasonable basis in law and fact to justify the disciplinary action under this statute.

REMEDY

- 5. Upon this Stipulation and all of the files, records, and proceedings herein, and without any further notice or hearing herein, Respondent does hereby consent that the Board may make and enter an Order disciplining Respondent and conditioning Respondent's license to practice medicine and surgery in the State of Minnesota as follows:
 - a. Respondent is **REPRIMANDED**.
- b. Within twelve months of the date of this Order, Respondent shall successfully complete pre-approved coursework in pharmacology with a focus on psychiatric prescribing in medically complex cases.
- c. Within three months of completion of the coursework, Respondent shall write and submit a short paper, for review and approval by the Committee, discussing what he has learned from the coursework, reflecting on how he may have treated the patient differently, and how he has implemented the knowledge into his practice.

- d. Upon submission of satisfactory evidence demonstrating completion of the terms and conditions of this Order, Respondent may petition for reinstatement of an unconditional license.
- 6. Within ten days of signing the Stipulation to this Order, Respondent shall provide the Board with a list of all hospitals and skilled nursing facilities at which Respondent currently has medical privileges, a list of all states in which Respondent is licensed or has applied for licensure, and the addresses and telephone numbers of Respondent's residences. The information shall be sent to the Executive Director, Minnesota Board of Medical Practice, University Park Plaza, 2829 University Avenue S.E., Suite 500, Minneapolis, Minnesota 55414-3246.
- 7. In the event Respondent resides or practices outside the State of Minnesota, Respondent shall promptly notify the Board in writing of the location of his residence and all work sites. Periods of residency or practice outside of Minnesota will not be credited toward any period of Respondent's suspended, limited, or conditioned license in Minnesota unless Respondent demonstrates that practice in another state conforms completely with Respondent's Minnesota license to practice medicine.
- 8. If Respondent shall fail, neglect, or refuse to fully comply with each of the terms, provisions, and conditions herein, the Committee shall schedule a hearing before the Board. The Committee shall mail Respondent a notice of the violation alleged by the Committee and of the time and place of the hearing. Respondent shall submit a response to the allegations at least three days prior to the hearing. If Respondent does not submit a timely response to the Board, the allegations may be deemed admitted.

At the hearing before the Board, the Committee and Respondent may submit affidavits made on personal knowledge and argument based on the record in support of their positions. The evidentiary record before the Board shall be limited to such affidavits and this Stipulation and Order. Respondent waives a hearing before an administrative law judge and waives discovery, cross-examination of adverse witnesses, and other procedures governing administrative hearings or civil trials.

At the hearing, the Board will determine whether to impose additional disciplinary action, including additional conditions or limitations on Respondent's practice, or suspension or revocation of Respondent's license.

- 9. In the event the Board in its discretion does not approve this settlement, this Stipulation is withdrawn and shall be of no evidentiary value and shall not be relied upon nor introduced in any disciplinary action by either party hereto except that Respondent agrees that should the Board reject this Stipulation and if this case proceeds to hearing, Respondent will assert no claim that the Board was prejudiced by its review and discussion of this Stipulation or of any records relating hereto.
- 10. Respondent waives any further hearings on this matter before the Board to which Respondent may be entitled by Minnesota or United States constitutions, statutes, or rules and agrees that the Order to be entered pursuant to the Stipulation shall be the final Order herein.
- 11. Respondent hereby acknowledges that he has read and understands this Stipulation and has voluntarily entered into the Stipulation without threat or promise by the Board or any of its members, employees, or agents. This Stipulation contains the entire agreement between the parties, there being no other agreement of any kind, verbal or otherwise, which varies the terms of this Stipulation.

Dated: 9 11 19 BRYAN J. BERGH, M.D. Respondent	Dated: 9-14-19 FOR THE COMMITTEE
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ORDER

Upon consideration of this Stipulation and all the files, records, and proceedings herein, IT IS HEREBY ORDERED that the terms of this Stipulation are adopted and

implemented by the Board this /H/h day of September, 2019.

MINNESOTA BOARD OF MEDICAL PRACTICE

By: Rud Mark