LICENSE NO. E-0920

IN THE MATTER OF

THE LICENSE OF

WILLIAM RAILEIGH FRANCIS, JR., M.D.

BEFORE THE

TEXAS MEDICAL BOARD

AGREED ORDER

On the 29th day of August, 2014, came on to be heard before the Texas Medical Board (the Board), duly in session, the matter of the license of William Raleigh Francis, Jr., (Respondent).

On May 30, 2014, Respondent appeared in person, with counsel, Simon W. “Trey” Hendershot, III, at an Informal Show Compliance Proceeding and Settlement Conference in response to a letter of invitation from the staff of the Board. The Board’s representatives were Wynne M. Snootts, M.D. and David Baucom, members of the Board (Panel). Heather R. E. Pierce represented Board staff.

BOARD CHARGES

Board staff charged that Respondent failed to adequately document the medical records as to his medical reasoning for prescribing of narcotics to one patient.

BOARD HISTORY

Respondent has previously been the subject of disciplinary action by the Board.

On November 30, 2007 an Agreed Order (2007 Order) was entered restricting Respondent’s practice to a non-surgical practice. The action was based on Respondent’s neurological condition that affected the use of his right hand which affected his abilities as a surgeon.

On February 5, 2010, the 2007 Order was terminated based on Respondent’s having completed two years of full compliance and having only non-surgical involvement in a group practice. The termination was granted due to the Board’s recommendation for Respondent to be referred to the Texas Physician’s Health Program (TXPHP).
Upon the recommendation of the Board’s representatives and with the consent of Respondent, the Board makes the following Findings and Conclusions of Law and enters this Agreed Order.

**FINDINGS**

The Board finds the following:

1. **General Findings:**
   a. Respondent received all notice required by law. All jurisdictional requirements have been satisfied. Respondent waives any defect in notice and any further right to notice or hearing under the Medical Practice Act, Title 3, Subtitle B, Texas Occupations Code (the Act) or the Rules of the Board.
   b. Respondent currently holds Texas Medical License No. E-0920. Respondent was originally issued this license to practice medicine in Texas on August 18, 1973. Respondent is not licensed to practice in any other state.
   c. Respondent is primarily engaged in the practice of Orthopedic Surgery. Respondent is board certified by the American Board of Orthopedic Surgery, a member of the American Board of Medical Specialties.
   d. Respondent is 65 years of age.

2. **Specific Panel Findings:**
   a. Respondent failed to adequately document his treatment provided to the patient.
   b. Respondent’s medical records lacked sufficient detail regarding providing the rationale in continuing to prescribe medications to the patient after referring her to two pain management specialists for treatment and for the length of time that he continued treatment for the patient’s chronic pain after making the referrals (approximately 6 to 7 months).

3. **Mitigating Factors:**
   a. The specialist’s records corroborated Respondent’s responses to the Board’s investigation and presentation at the Informal Settlement Conference (ISC), and provided support for his course of treatment, indicating that he met the standard of care.
b. A review of the records showed that Respondent’s entire course of treatment was reasonable and designed to treat the patient’s sources of pain, which were scoliosis (causing chronic pain in the thoracic region) and spondylolisthesis (the latter causing chronic pain in the lumbar region). Respondent treated the patient with hydrotherapy, massage, electrical stimulation, ultrasound, and a protocol of medications to help her progress in the physical therapy regimen. The medications prescribed were anti-inflammatories, opioids (initially tramadol, then hydrocodone-based), and muscle relaxants in reasonable dosages.

c. When confronted with signs of possible drug seeking (he discovered that the patient was filling prescriptions at more than one pharmacy, repeated requests for refills), he counseled the patient and referred the patient to two pain management specialists (one of whom recommended continuing narcotics with injections), continued prescribing in between specialist appointments for injections, but tapered the hydrocodone dosages with concurrent prescriptions for Tramadol.

d. Respondent terminated care when the patient failed to comply with Respondent’s treatment plan and recommendations to continue specialist treatment.

e. In determining the appropriate sanctions in this matter, the Panel considered that Respondent has cooperated in the investigation of the allegations related to this Agreed Order. Respondent neither admits nor denies the information given above. To avoid further investigation, hearings, and the expense and inconvenience of litigation, Respondent agrees to the entry of this Agreed Order and to comply with its terms and conditions.

CONCLUSIONS OF LAW

Based on the above Findings, the Board concludes that:

1. The Board has jurisdiction over the subject matter and Respondent pursuant to the Act.

2. Section 164.051(a)(3) of the Act authorizes the Board to take disciplinary action against Respondent based on Respondent’s violation of a Board rule, specifically Board Rule 165.1(a), failure to maintain proper medical records.
3. Section 164.001 of the Act authorizes the Board to impose a range of disciplinary actions against a person for violation of the Act or a Board rule.

4. Section 164.002(a) of the Act authorizes the Board to resolve and make a disposition of this matter through an Agreed Order.

ORDER

Based on the above Findings and Conclusions of Law, the Board ORDERS that Respondent shall be subject to the following terms and conditions:

1. Within one year from the date of the entry of this Order, Respondent shall enroll in and successfully complete the medical recordkeeping course offered by the University of California San Diego Physician Assessment and Clinical Education (PACE) program, or an equivalent course approved in advance by the by the Executive Director or their designee. To obtain approval for a course other than the PACE course, Respondent shall submit in writing to the Compliance Division of the Board information on the course, to include at least a reasonably detailed description of the course content, faculty, course location, and dates of instruction. Respondent shall submit documentation of attendance and successful completion of this requirement to the Compliance Division of the Board on or before the expiration of the time limit set forth for completion of the course.

2. Respondent shall give a copy of this Order to all hospitals, nursing homes, treatment facilities, and other health care entities where Respondent has privileges, has applied for privileges, applies for privileges, or otherwise practices. Within thirty days of entry of this Order Respondent shall provide documentation, including proof of delivery, to the Compliance Division of the Board that the Order was delivered to all such facilities.

3. Respondent shall comply with all the provisions of the Act and other statutes regulating the Respondent's practice.

4. Respondent shall fully cooperate with the Board and the Board staff, including Board attorneys, investigators, compliance officers, consultants, and other employees or agents of the Board in any way involved in investigation, review, or monitoring associated with Respondent's compliance with this Order. Failure to fully cooperate shall constitute a violation of this order and a basis for disciplinary action against Respondent pursuant to the Act.
5. Respondent shall inform the Board in writing of any change of Respondent’s office or mailing address within 10 days of the address change. This information shall be submitted to the Registration Department and the Compliance Department of the Board. Failure to provide such information in a timely manner shall constitute a basis for disciplinary action by the Board against Respondent pursuant to the Act. Respondent agrees that 10 days notice of a Probationer Show Compliance Proceeding to address any allegation of non-compliance of this Agreed Order is adequate and reasonable notice prior to the initiation of formal disciplinary action. Respondent waives the 30-day notice requirement provided by §164.003(b)(2) of the Medical Practice Act and agrees to 10 days notice, as provided in 22 Texas Administrative Code §187.44(4).

6. Any violation of the terms, conditions, or requirements of this Order by Respondent shall constitute unprofessional conduct likely to deceive or defraud the public, or to injure the public, and shall constitute a basis for disciplinary action by the Board against Respondent pursuant to the Act.

7. Respondent shall be permitted to supervise and delegate prescriptive authority to physician assistants and advanced practice nurses and to supervise surgical assistants.

8. This Order shall automatically terminate upon Respondent’s submission of sufficient evidence to the Compliance Division of the Board that Respondent successfully completed the requirements ordered in Ordering Paragraph Nos. 1 and 2.

RESPONDENT WAIVES ANY FURTHER HEARINGS OR APPEALS TO THE BOARD OR TO ANY COURT IN REGARD TO ALL TERMS AND CONDITIONS OF THIS AGREED ORDER. RESPONDENT AGREES THAT THIS IS A FINAL ORDER.
THIS ORDER IS A PUBLIC RECORD.

[SIGNATURES PAGES TO FOLLOW.]
I, WILLIAM RAILEIGH FRANCIS, JR., M.D., HAVE READ AND UNDERSTAND THE FOREGOING AGREED ORDER. I UNDERSTAND THAT BY SIGNING, I WAIVE CERTAIN RIGHTS. I SIGN IT VOLUNTARILY. I UNDERSTAND THIS AGREED ORDER CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

DATED: July 14, 2014.

[Signature]

WILLIAM RAILEIGH FRANCIS, JR., M.D.
Respondent

STATE OF Texas

COUNTY OF Montgomery

SWORN TO AND ACKNOWLEDGED BEFORE ME, the undersigned Notary Public, on this 14th day of July, 2014.

[Signature]

Signature of Notary Public
SIGNED AND ENTERED by the presiding officer of the Texas Medical Board on this 29th day of August, 2014.

Irvin E. Zeitler, Jr., D.O., President
Texas Medical Board