LICENSE NO. G4795

IN THE MATTER OF

THE LICENSE OF

HENRY RHINEHART ARMSTRONG, M.D.

BEFORE THE

TEXAS MEDICAL BOARD

AGREED ORDER

On the 28 day of August, 2015, came on to be heard before the Texas Medical Board (the Board), duly in session, the matter of the license of Henry Rhinehart Armstrong, M.D. (Respondent).

On April 20, 2015, Respondent appeared in person, without counsel 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 Margaret C. McNeese, M.D., a member of the Board, and Penny Angelo, a member of a District Review Committee (Panel). Margie Johnson represented Board staff.

BOARD CHARGES

Board staff charged that Respondent failed to provide proper care and treatment for a patient who suffered a stroke and died after Respondent stopped his Coumadin therapy. In addition, Respondent failed to maintain an adequate medical record for the patient. The patient was an 85-year-old man with multiple medical problems.

BOARD HISTORY

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

On June 27, 2014, the Board entered a Remedial Plan requiring Respondent to complete four hours of continuing medical education in the topic of ethics and/or risk management. This action was based on Respondent’s failure to file a death certificate in a timely manner.

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. G4795. Respondent was originally issued this license to practice medicine in Texas on August 27, 1983. Respondent is not licensed to practice in any other state.
   c. Respondent is primarily engaged in the practice of Internal Medicine. Respondent is not board certified.
   d. Respondent is 58 years of age.

2. **Specific Panel Findings:**
   a. The patient resided in a nursing home where he was under the care of another physician for approximately two years before being transferred to Respondent’s care.
   b. Among the patient’s many medications, the patient had been maintained on chronic Coumadin therapy. The patient’s records do not indicate the reason for initiation of Coumadin therapy, but do indicate that Coumadin therapy was continued due to a history of atrial fibrillation.
   c. Sometime after Respondent resumed the patient’s care, Respondent signed a licensed vocational nurse’s verbal order to discontinue the patient’s Coumadin therapy. There is no documentation of provisions for alternative therapies for stroke prevention in the record. Two months later, the patient suffered a stroke and eventually died.
   d. Respondent failed to document his reason for discontinuing the patient’s anticoagulant therapy.
3. **Mitigating Factors:**

In determining the appropriate sanctions in this matter, the Panel considered the following mitigating factors:

a. Although a family member indicated that the patient had been on anticoagulant therapy for ten years for treatment of venous thromboembolism (VTE), details regarding VTE and the need for chronic anticoagulant therapy were not available to Respondent.

b. There was poor communication between Respondent and the facility.

c. Respondent no longer works at that facility.

d. Respondent was instrumental in revising office procedures to notify physicians of patient test results and patient communications.

e. The patient had a Do Not Resuscitate order, so after the stroke, his treatment plan included supportive care only.

f. Respondent was remorseful and upset over his actions.

g. 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 rule adopted under this Act, specifically, Board Rule 165.1, failure to maintain an adequate medical record.

3. Section 164.051(a)(6) of the Act authorizes the Board to take disciplinary action against Respondent based on Respondent’s failure to practice medicine in an acceptable professional manner consistent with public health and welfare as defined by Board Rules.
190.8(1)(A), failure to treat a patient according to the generally accepted standard of care; 190.8(1)(B), negligence in performing medical services; 190.8(1)(C), failure to use proper diligence in one's professional practice; and 190.8(1)(D), failure to safeguard against potential complications.

4. 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.

5. 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 at least eight hours of continuing medical education (CME) approved for Category I credits by the American Medical Association, divided as follows: four hours in the topic of anti-coagulation therapy and four hours in the topic of medical recordkeeping; each approved in writing, in advance by the Executive Director or her designee. To obtain approval for the course, Respondent shall submit in writing to the Compliance Department information on the course, to include at least a reasonably detailed description of the course content and faculty, as well as the course location and dates of instruction. Respondent shall submit documentation of attendance and successful completion of this requirement to the Compliance Department on or before the expiration of the time limit set forth for completion of the course. The CME requirements set forth in this paragraph shall be in addition to all other CME required for licensure maintenance.

2. Respondent shall pay an administrative penalty in the amount of $3,000 within 90 days of the date of the entry of this Order. The administrative penalty shall be paid in a single payment by cashier's check or money order payable to the Texas Medical Board and shall be submitted to the Board for routing so as to be remitted to the Comptroller of Texas for deposit in the general revenue fund. Respondent's failure to pay the administrative penalty as ordered shall
constitute grounds for further disciplinary action by the Board, and may result in a referral by the Executive Director of the Board for collection by the Office of the Attorney General.

3. At all times while Respondent is under the terms of this Order, 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 pending an application for privileges, applies for privileges, or otherwise practices. Within 30 days of first being contacted by the Compliance Division of the Board following entry of this Order, Respondent shall provide to the Compliance Division of the Board documentation, including proof of delivery, showing that the Order was delivered to all such facilities.

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

5. Respondent shall cooperate fully with the Board and Board staff, including Board attorneys, investigators, compliance officers, consultants, and other employees or agents of the Board in any way involved in investigating, reviewing, or monitoring 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.

6. 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).
7. 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.

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

9. 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, 2, and 3.

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.

SIGNATURE PAGES FOLLOW
I, HENRY RHINEHART ARMSTRONG, 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: August 20, 2015.

Henry Rhinehart Armstrong, M.D.  
Respondent

STATE OF  
COUNTY OF Dallas

SWORN TO AND ACKNOWLEDGED BEFORE ME, the undersigned Notary Public, on this day of August, 2015.

Signature of Notary Public

CATHY D. CASTON  
Notary Public  
STATE OF TEXAS  
My Comm. Exp. August 7, 2017
SIGNED AND ENTERED by the presiding officer of the Texas Medical Board on this 28 day of August, 2015.

[Signature]

Michael Arambula, M.D., Pharm.D., President
Texas Medical Board