LICENSCE NO. F-6682

IN THE MATTER OF           BEFORE THE

THE LICENSE OF               TEXAS MEDICAL BOARD

THOMAS O. GORE, M.D.

AGREED ORDER

On the 10 day of June, 2016, came on to be heard before the Texas Medical Board (the Board), duly in session, the matter of the license of Thomas O. Gore, M.D. (Respondent).

On December 17, 2015, Respondent appeared in person, with counsel, Mark T. Beaman, 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 John D. Ellis, Jr., J.D., a member of the Board, and Kathy C. Flanagan, M.D., a member of a District Review Committee (Panel). Farhan Khan represented Board Staff.

BOARD CHARGES

Board Staff charged that Respondent failed to appropriately monitor one patient while prescribing narcotic and benzodiazepine medications to the patient, which resulted in multiple hospital admissions for drug overuse.

BOARD HISTORY

Respondent has not previously been the subject of disciplinary action by the Board.

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. F-6682. Respondent was originally issued this license to practice medicine in Texas on August 24, 1980. Respondent is not licensed to practice in any other state.

c. Respondent is primarily engaged in Psychiatry. Respondent is board certified by the American Board of Psychiatry and Neurology.

d. Respondent is 76 years of age.

2. Specific Panel Findings:

a. The Board representatives recognize that given the facts of the patient’s multiple medical problems made her a complicated patient. Respondent lacked attention to detail in his treatment of this patient in regards to the pain medications the patient was taking and authorization of early refills, that he prescribed.

b. Respondent acknowledged that he could have done a better job of conducting his own physical examinations which justified the amount of pain medications he was prescribing to the patient, who was referred to Respondent by her primary care physician.

3. Mitigating Factors:

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

a. Respondent has no prior Board history.

b. 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.

c. Respondent accepts patients by referral only and has done pain management for patients only with psychiatric disorders.
d. The records showed the patient did not escalate in the amounts and dosing of the medications at issue.

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)(1) of the Act authorizes the Board to take disciplinary action against Respondent based on Respondent’s commission of an act prohibited under Section 164.052 of the Act.

3. 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 170.3, failure to adhere to those established guidelines and requirements for the treatment of pain.

4. 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 further defined by Board Rules: 190.8(1)(A), failure to treat a patient according to the generally accepted standard of care; 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.

5. Section 164.053(a)(3) of the Act authorizes the Board to take disciplinary action against Respondent based on his prescribing for or dispensing to a person who the physician knew or should have known was an abuser of narcotic drugs, controlled substances, or dangerous drugs.

6. Section 164.053(a)(5) of the Act authorizes the Board to take disciplinary action against Respondent based on Respondent prescribing or administering a drug or treatment that is nontherapeutic in nature or nontherapeutic in the manner the drug or treatment is administered or prescribed.

7. Section 164.053(a)(6) of the Act authorizes the Board to take disciplinary action against Respondent based on Respondent prescribing, administering, or dispensing in a manner inconsistent with public health and welfare, dangerous drugs as defined by Chapter 483, Health and Safety Code; or controlled substances scheduled in Chapter 481 Health and Safety Code; or controlled substances scheduled in the Comprehensive Drug Abuse Prevention and Control Act of 1970, (21 U.S.C. § 801 et seq.).
8. 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.

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

10. Section 164.002(d) of the Act provides that this Agreed Order is a settlement agreement under the Texas Rules of Evidence for purposes of civil litigation.

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. Respondent shall not treat patients for chronic pain as defined by Board Rule 170.2(4), or engage in the practice of pain management. Respondent shall refer any and all current chronic pain patients to appropriate specialists within 30 days of the date of the entry of this Order.

   Respondent may treat patients for acute pain only. Respondent may prescribe dangerous drugs / controlled substances for the treatment of acute pain to a patient on a one-time basis, for no more than 72 hours, with no refills for any patient.

2. Respondent shall not prescribe narcotic pain medication including opioids as outlined in TAC Rule 195.1 relating to regulation of pain management clinics. Respondent may continue to dispense, but not prescribe, methadone as long as it is being done for treatment of addiction through a facility which undergoes inspections by the Texas Department of State Health Services Substance Abuse Compliance Group and is audited by Drug Enforcement Administration. Dr. Gore has been a medical director at this type of facility which undergoes these inspections and audits since 2011.

3. Within one year from the date of the entry of this Order, Respondent shall enroll in and successfully complete at least 24 hours of CME approved for Category I credits by the American Medical Association, as follows: eight hours in the topic of risk management; eight hours in the topic of prescribing of benzodiazepines (or similar topic); and eight hours in the topic of identifying his risk patients, including those exhibiting drug-seeking behavior, each
approved in writing in advance by the Executive Director or a designee. To obtain approval for the courses, 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.

4. 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 being first 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, that the Order was delivered to all such facilities.

5. The time period of this Order shall be extended for any period of time that:

(a) Respondent subsequently practices exclusively outside the State of Texas; (b) Respondent’s license is subsequently cancelled for nonpayment of licensure fees; (c) this Order is stayed or enjoined by Court Order; or (d) for any period of time longer than 60 consecutive days that Respondent does not actively practice medicine. If Respondent leaves Texas to practice elsewhere or ceases active practice for more than 60 consecutive days, Respondent shall immediately notify the Board in writing. Upon Respondent’s return to active practice or return to practice in Texas, Respondent shall notify the Board in writing. When the period of extension ends, Respondent shall be required to comply with the terms of this Order for the period of time remaining on the Order. Respondent shall pay all fees for reinstatement or renewal of a license covering the period of extension or tolling.

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

7. 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.

8. 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 Act and agrees to 10 days notice, as provided in 22 Texas Administrative Code §187.44(4).

9. 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.

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

11. The above-referenced conditions shall continue in full force and effect without opportunity for amendment, except for clear error in drafting, for one year following the date of the entry of this Order. If, after the passage of the one-year period, Respondent wishes to seek amendment or termination of these conditions, Respondent may petition the Board in writing. The Board may inquire into the request and may, in its sole discretion, grant or deny the petition without further appeal or review. Petitions for modifying or terminating may be filed only once a year thereafter.

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, THOMAS O. GORE, 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: June 9, 2016.

THOMAS O. GORE, M.D.
Respondent

STATE OF TEXAS
COUNTY OF Lubbock

SWORN TO AND ACKNOWLEDGED BEFORE ME, the undersigned Notary Public, on this 9th day of JUNE, 2016.

Signature of Notary Public

(Notary Seal)

BENJAMIN J. SIMS
Notary Public, State of Texas
My Commission Expires 03-31-2017

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SIGNED AND ENTERED by the presiding officer of the Texas Medical Board on this 10th day of June, 2016.

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