

BEFORE THE STATE MEDICAL BOARD OF OHIO

IN THE MATTER OF :
:
WILLIAM JOHN STEFANICH, D.O. :

ORDER AND ENTRY

On or about August 13, 2003, notice was issued to William John Stefanich, D.O., that the State Medical Board of Ohio intended to consider disciplinary action against his license to practice osteopathic medicine and surgery in the State of Ohio. The Board having subsequently been notified of Dr. Stefanich's demise on or about July 24, 2004, it is hereby ORDERED that the above referenced matter be and is hereby dismissed at MOOT.

Lance A. Talmage, M.D.
Lance A. Talmage, M.D.
Secretary

SEAL

7/26/04
Date



State Medical Board of Ohio

77 S. High St., 17th Floor • Columbus, OH 43215-6127 • (614) 466-3934 • Website: www.state.oh.us/med/

August 13, 2003

William John Stefanich, D.O.
842 Shoreham Drive
Newark, Ohio 43055

Dear Doctor Stefanich:

In accordance with Chapter 119., Ohio Revised Code, you are hereby notified that the State Medical Board of Ohio intends to determine whether or not to limit, revoke, permanently revoke, suspend, refuse to register or reinstate your certificate to practice osteopathic medicine and surgery, or to reprimand or place you on probation for one or more of the following reasons:

- (1) In the routine course of your practice, you undertook the treatment of Patient 1 as identified on the attached confidential Patient Key. (The Patient Key is confidential and is to be withheld from public disclosure).
 - (a) In your medical office on or about April 8, 1997, you performed surgery relating to a thrombotic hemorrhoid on Patient 1. On or about May 5, 1997, after identifying that Patient 1 had presented with two large external hemorrhoid tags, you performed surgery on Patient 1 in your medical office to remove those tags. On or about May 8, 1997, Patient 1 presented to the emergency room at Licking Memorial Hospital, Newark, Ohio, complaining that she was unable to move her bowels and that she was in pain. During surgery to correct Patient 1's condition, it was discerned that Patient 1's anal opening had been sutured closed and that a wide area of Patient 1's anoderm was missing, as well as some of her skin.
 - (b) On or about August 5, 1996, and again on or about August 19, 1996, you administered Bicillin to Patient 1 for treatment of urinary tract infections, although Bicillin is not indicated for treatment of urinary tract infections. Further, on or about August 5, 1996, you administered Bicillin parenterally at the same time you prescribed Bactrim, and on or about August 19, 1996, you administered Bicillin parenterally at the same time you prescribed oral tetracycline, even though the contemporaneous administration of Bicillin with either Bactrim or tetracycline was inappropriate for this patient on these dates. Further, in treating Patient 1 for recurrent urinary tract infections on or about August 5 and August 19, 1996, you failed to obtain a urine culture to determine antibiotic susceptibility, and failed to document a genito-urinary examination to identify any other medical conditions that could produce similar symptoms.

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- (c) You administered injections of Lincomycin to Patient 1 in addition to oral penicillin for Patient 1's ear and pharynx infections, even though the administration of these medications together is redundant. Further, at the time of your treatment of Patient 1, antibiotics other than Lincomycin were available and more effective for treatment of ear, nose and throat infections. Finally, your medical record fails to provide support for the use of injectable antibiotic medication for Patient 1.
- (2) In the routine course of your practice, you undertook the treatment of Patient 2 as identified on the attached confidential Patient Key. (The Patient Key is confidential and is to be withheld from public disclosure).
- (a) On or about February 25, 1997, Patient 2 presented to your office with the complaint that he had been passing large amounts of mucous in his stool. Patient 2, who was approximately 68 years old at that time, reported that he had a personal medical history of diverticulitis and a family history of cancer. On or about March 12, 1997, you again examined Patient 2, who reported that he continued to pass mucus via his rectum. Despite Patient 2's reported symptoms and family history of cancer, and despite your office policies concerning the administration of a sigmoidoscopy or colonoscopy in patients over age 50 and the administration of annual fecal occult blood tests, you did not pursue a more definitive evaluation of Patient 2's condition, including a rectal or abdominal examination or a test for blood in the stool. On or about March 27, 1997, Patient 2 presented to the emergency room at Licking Memorial Hospital, complaining of abdominal distention and profuse diarrhea, and exhibiting an elevated white blood cell count. Patient 2 was subsequently diagnosed with toxic megacolon related to developing complications from diverticulitis, which had resulted in a bowel obstruction, and surgery was performed for a total abdominal colectomy and ileostomy. The emergent conditions under which Patient 2's surgery was performed placed Patient 2 at a higher risk.
- (b) On or about February 25, 1997, at the time Patient 2 presented to your office with the symptoms referred to in Paragraph (2)(a) above, you prescribed Azulfidine to Patient 2 based upon the patient's history without a documented examination or without pursuing the exact nature of Patient 2's medical condition.

Your acts, conduct, and/or omissions as alleged in Paragraphs (1)(b), (1)(c), and (2)(b) above, individually and/or collectively, constitute "[f]ailure to use reasonable care discrimination in the administration of drugs, or failure to employ acceptable scientific methods in the selection of drugs or other modalities for treatment of disease," as those clauses are used in Section 4731.22(B)(2), Ohio Revised Code, as in effect prior to March 9, 1999.

Further, your acts, conduct, and/or omissions as alleged in Paragraphs (1) and (2), above, individually and/or collectively, constitute "[a] departure from, or the failure to conform to,

minimal standards of care of similar practitioners under the same or similar circumstances, whether or not actual injury to a patient is established," as that clause is used in Section 4731.22(B)(6), Ohio Revised Code.

Pursuant to Chapter 119., Ohio Revised Code, you are hereby advised that you are entitled to a hearing in this matter. If you wish to request such hearing, the request must be made in writing and must be received in the offices of the State Medical Board within thirty days of the time of mailing of this notice.

You are further advised that, if you timely request a hearing, you are entitled to appear at such hearing in person, or by your attorney, or by such other representative as is permitted to practice before this agency, or you may present your position, arguments, or contentions in writing, and that at the hearing you may present evidence and examine witnesses appearing for or against you.

In the event that there is no request for such hearing received within thirty days of the time of mailing of this notice, the State Medical Board may, in your absence and upon consideration of this matter, determine whether or not to limit, revoke, permanently revoke, suspend, refuse to register or reinstate your certificate to practice osteopathic medicine and surgery or to reprimand or place you on probation.

Please note that, whether or not you request a hearing, Section 4731.22(L), Ohio Revised Code, provides that "[w]hen the board refuses to grant a certificate to an applicant, revokes an individual's certificate to practice, refuses to register an applicant, or refuses to reinstate an individual's certificate to practice, the board may specify that its action is permanent. An individual subject to a permanent action taken by the board is forever thereafter ineligible to hold a certificate to practice and the board shall not accept an application for reinstatement of the certificate or for issuance of a new certificate."

Copies of the applicable sections are enclosed for your information.

Very truly yours,



Lance A. Talmage, M.D.
Secretary

LAT/blt
Enclosures

CERTIFIED MAIL # 7000 0600 0024 5142 0607
RETURN RECEIPT REQUESTED