

State Medical Board of Ohio

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med.ohio.gov

May 8, 2013

Katherine L. Richmond, D.O.
12813 Littleton Road
Garfield Heights, OH 44125

RE: Case No. 12-CRF-089

Dear Doctor Richmond:

Please find enclosed certified copies of the Entry of Order; the Report and Recommendation of Siobhan R. Clovis, Esq., Hearing Examiner, State Medical Board of Ohio; and an excerpt of draft Minutes of the State Medical Board, meeting in regular session on May 8, 2013, including motions approving and confirming the Report and Recommendation as the Findings and Order of the State Medical Board of Ohio.

Section 119.12, Ohio Revised Code, may authorize an appeal from this Order. Such an appeal must be taken to the Franklin County Court of Common Pleas.

Such an appeal must be commenced by the filing of a Notice of Appeal with the State Medical Board and the Franklin County Court of Common Pleas. The Notice of Appeal must set forth the Order appealed from and state that the State Medical Board's Order is not supported by reliable, probative, and substantive evidence and is not in accordance with law. The Notice of Appeal may, but is not required to, set forth the specific grounds of the appeal. Any such appeal must be filed within fifteen (15) days after the mailing of this notice and in accordance with the requirements of Section 119.12, Ohio Revised Code.

THE STATE MEDICAL BOARD OF OHIO



J. Craig Strafford, M.D., M.P.H.
Secretary

JCS:jam
Enclosures

CERTIFIED MAIL NO. 91 7199 9991 7032 2854 9930
RETURN RECEIPT REQUESTED

mailed 5-9-13

CERTIFICATION

I hereby certify that the attached copy of the Entry of Order of the State Medical Board of Ohio; Report and Recommendation of Siobhan R. Clovis, Esq., State Medical Board Hearing Examiner; and excerpt of draft Minutes of the State Medical Board, meeting in regular session on May 8, 2013, including motions approving and confirming the Findings of Fact, Conclusions and Proposed Order of the Hearing Examiner as the Findings and Order of the State Medical Board of Ohio; constitute a true and complete copy of the Findings and Order of the State Medical Board in the matter of Katherine L. Richmond, D.O., Case No. 12-CRF-089, as it appears in the Journal of the State Medical Board of Ohio.

This certification is made by authority of the State Medical Board of Ohio and in its behalf.



J. Craig Stafford, M.D., M.P.H.
Secretary

(SEAL)

May 8, 2013

Date

BEFORE THE STATE MEDICAL BOARD OF OHIO

IN THE MATTER OF

*

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CASE NO. 12-CRF-089

KATHERINE L. RICHMOND, D.O.

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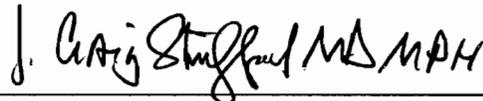
ENTRY OF ORDER

This matter came on for consideration before the State Medical Board of Ohio on May 8, 2013.

Upon the Report and Recommendation of Siobhan R. Clovis, Esq., State Medical Board Hearing Examiner, designated in this Matter pursuant to R.C. 4731.23, a true copy of which Report and Recommendation is attached hereto and incorporated herein, and upon the approval and confirmation by vote of the Board on the above date, the following Order is hereby entered on the Journal of the State Medical Board of Ohio for the above date.

It is hereby ORDERED that the certificate of Katherine L. Richmond, D.O., to practice osteopathic medicine and surgery in the State of Ohio shall be PERMANENTLY REVOKED.

This Order shall become effective immediately upon the mailing of the notification of approval by the Board.



J. Craig Strafford, M.D., M.P.H.
Secretary

(SEAL)

May 8, 2013
Date

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BEFORE THE STATE MEDICAL BOARD OF OHIO

In the Matter of	*	
	*	Case No. 12-CRF-089
Katherine L. Richmond, D.O.,	*	
	*	Hearing Examiner Clovis
Respondent.	*	

REPORT AND RECOMMENDATION

Basis for Hearing

In a Notice of Opportunity for Hearing (“Notice”) dated September 12, 2012, the State Medical Board of Ohio (“Board”) notified Katherine L. Richmond, D.O., that it proposed to determine whether to take disciplinary action against her certificate based on allegations that Dr. Richmond had voluntarily surrendered her Drug Enforcement Administration Certificate of Registration and had violated, in a number of ways, her January 12, 2011, Step I Consent Agreement with the Board.

The Board further alleged that Dr. Richmond’s acts, conduct, and/or omissions establish:

- “[t]he revocation, suspension, restriction, reduction, or termination of clinical privileges by the United States department of defense or department of veterans affairs or the termination or suspension of a certificate of registration to prescribe drugs by the drug enforcement administration of the United States department of justice,” as that clause is used in Section 4731.22(B)(24), Ohio Revised Code;
- “[c]ommission of an act that constitutes a felony in this state, regardless of the jurisdiction in which the act was committed,” as that clause is used in Section 4731.22(B)(10), Ohio Revised Code, to wit: Practicing Osteopathy without Certificate, in violation of Section 4731.43, Ohio Revised Code, which is a felony under Section 4731.99(A), Ohio Revised Code;
- “Failure to cooperate in an investigation conducted by the board under division (F) of this section, including failure to comply with a subpoena or order issued by the board or failure to answer truthfully a question presented by the board at a deposition or in written interrogatories,” as that clause is used in Section 4731.22(B)(34), Ohio Revised Code; and

- “[v]iolation[s] of the conditions of limitation placed by the board upon a certificate to practice,” as that clause is used in Section 4731.22(B)(15), Ohio Revised Code.

Finally, the Board advised Dr. Richmond of her right to request a hearing in this matter, and the Board received Dr. Richmond’s request for a hearing on September 18, 2012. (State’s Exhibits (“St. Exs.”) 1A, 1B)

Appearances

Mike DeWine, Attorney General, and Kyle C. Wilcox, Assistant Attorney General, for the State of Ohio. Dr. Richmond did not appear, nor did she send a representative to appear on her behalf.

Hearing Date: January 7, 2013

PROCEDURAL ISSUES

Minutes before her hearing was scheduled to begin, Dr. Richmond called the Board and reported that she would be unable to attend due to car trouble. She did not request a continuance of the hearing. (Hearing Transcript (“Tr.”) at 5-6) After the hearing, the Hearing Examiner issued an entry holding the record open for a written submission from Dr. Richmond to be filed on or before January 31, 2013, in order to give her another opportunity to respond to the Board’s allegations. Dr. Richmond never responded, and the record closed on January 31, 2013.

SUMMARY OF THE EVIDENCE

All exhibits and the transcript, even if not specifically mentioned, were thoroughly reviewed and considered by the Hearing Examiner prior to preparing this Report and Recommendation.

1. Katherine L. Richmond, D.O., was granted a license to practice osteopathic medicine and surgery in the State of Ohio by means of an April 17, 1996, Consent Agreement between herself and the Board (the “1996 Consent Agreement”). (St. Ex. 2 at 2-9)
2. In the 1996 Consent Agreement, Dr. Richmond conceded that she had suffered from and been treated for opiate dependency. The Board acknowledged that Dr. Richmond had received treatment and maintained her sobriety since 1992. Accordingly, the Board granted Dr. Richmond a license subject to certain probationary terms which were to remain in force for at least three years. (St. Ex. 2 at 2-3, 8)
3. In April 1999, Dr. Richmond was released from the probationary terms upon her license. (St. Ex. 2 at 11)

4. On or about September 29, 2010, Dr. Richmond admitted to Board representatives that she had relapsed by consuming alcohol. She further admitted that she had been unlawfully obtaining and using pain medications. On or about October 29, 2010, Gregory Collins, M.D., of the Cleveland Clinic, a Board-approved treatment provider, determined after a 72-hour evaluation of Dr. Richmond that she was impaired in her ability to practice osteopathic medicine and surgery according to acceptable and prevailing standards of care, and that she required treatment for her impairment. (St. Ex. 2 at 11-12)

5. On January 12, 2011, Dr. Richmond and the Board entered into a Step I Consent Agreement under Section 4731.22(B), Ohio Revised Code (the "Step I Consent Agreement"), in lieu of further disciplinary proceedings based upon her impairment in violation of Section 4731.22(B)(26) of the Ohio Revised Code. The Step I Consent Agreement remains in effect. Among the agreed conditions are the following:
 - Dr. Richmond's license was suspended indefinitely, but not for less than ninety days (Paragraph 1);
 - Dr. Richmond was required to abstain from the personal use or possession of drugs, except those prescribed, dispensed, or administered to her by an authorized physician with full knowledge of Dr. Richmond's history of chemical dependency (Paragraph 3);
 - Dr. Richmond was required to provide authorization, through appropriate written consent forms, for disclosure to the Board of any evaluative reports, summaries, and records, of whatever nature, by any and all parties who provided treatment or evaluation for her chemical dependency or related conditions, or for purposes of compliance with the Step I Consent Agreement (Paragraph 6);
 - Dr. Richmond was required to submit quarterly declarations to the Board, stating whether or not she had complied with the Step I Consent Agreement (Paragraph 7);
 - Dr. Richmond was required to appear in person for an interview before the full Board or its designated representative once every three months (Paragraph 8);
 - Dr. Richmond was required to submit to random urine screenings for drugs and alcohol at least four times per month, or as otherwise directed by the Board (Paragraph 9); and
 - Dr. Richmond was required to participate in an alcohol and drug rehabilitation program, such as A.A., N.A., C.A., or Caduceus no less than three times per week (Paragraph 13).

(St. Ex. 2 at 12-17, 21)

Violations of Paragraph 1 – License Suspension

6. Dawn Marie Smith testified that she works as a Board enforcement investigator, and that she had investigated and interviewed Dr. Richmond about the allegations of Dr. Richmond's prescribing controlled substances during her license suspension. (Tr. at 40-43)
7. On June 30, 2011, Dr. Richmond admitted to Ms. Smith that before the imposition of her license suspension, she had written controlled-substance pain-medication prescriptions with the intent to provide them to her patients during her suspension. (Tr. at 49-51)
8. Dr. Richmond further admitted to Ms. Smith that she had arranged for one of her patients, Patient 1 (who is not a healthcare professional), to distribute the prescriptions at a charge of \$75.00 each. (Tr. at 50-51, 53-54)
9. As part of her investigation, Ms. Smith interviewed Patient 2, a patient of Dr. Richmond's, and Patient 2's mother. Patient 2 provided a written statement that she had been advised that Dr. Richmond was out of the office not because of a license suspension, but rather because she was taking a medical leave of absence. She further stated that she had paid the charge of \$75 apiece for prescriptions provided by Patient 1 during Dr. Richmond's absence. She also stated that she had been required by Patient 1 to submit urine before receiving one of her prescriptions. (St. Ex. 8; Tr. at 44-46)
10. Dr. Richmond explained to Ms. Smith that she had asked Patient 1 to obtain urine samples from patients in order to create the appearance that patients were being monitored and drug-tested, but Patient 1 had been dumping the urine samples without any testing. (Tr. at 53)
11. On October 3, 2011, Ms. Smith served an Investigative Subpoena Duces Tecum upon Dr. Richmond, requiring the production of 19 of Dr. Richmond's patient records on or before October 14, 2011. On October 13, 2011, Dr. Richmond produced 15 of the requested files. Dr. Richmond has never produced the remaining four files. (St. Ex. 4; Tr. at 56-57, 62-63, 67-68)

Violations of Paragraph 3 – Failure to Abstain from Drugs

12. Paragraph 3 of the Step I Consent Agreement requires Dr. Richmond to abstain from drugs not properly prescribed by a practitioner with knowledge of Dr. Richmond's history. In the event that Dr. Richmond were to use a controlled substance, carisprodol, or tramadol, the Step I Consent Agreement requires Dr. Richmond to provide the Board, within seven days, a written report stating the identity of the prescriber, the name of the drug, the medical purpose of the prescription, the date the drug was initially received, and the dosage, amount, number of refills, and directions for use. Within 30 days, she must further provide the Board with a copy of the written prescription or other written verification from the prescriber, stating the dosage, amount, number of refills, and directions for use. (St. Ex. 2 at 12-13)

13. Despite Paragraph 3 of the Step I Consent Agreement, Dr. Richmond has tested positive for using controlled substances on the following occasions, without providing any written documentation to show that her use of the drugs was not a violation:

- On June 23, 2011, Dr. Richmond tested positive for hydromorphone and morphine;
- On December 30, 2011, January 5 and 12, 2012, and February 23, 27, and 29, 2012, Dr. Richmond tested positive for hydromorphone;
- On January 21 and 25, 2012, Dr. Richmond tested positive for hydromorphone and methadone.

(St. Ex. 5 at 5, 11-13; Tr. at 36-37)

Violations of Paragraph 6 – Failure to Provide Authorizations

14. On November 18, 2011, January 6, 2012, and March 12, 2012, the Board sent Dr. Richmond written requests for record releases so that the Board could obtain copies of her medical records from two treating physicians. (St. Ex. 10, 11; Tr. at 64-67)
15. Cheryl Pokorny, an attorney for the Board, testified that she had sent these written requests to Dr. Richmond in order to obtain medical records to find out if Dr. Richmond's drug screens were consistent with properly prescribed medications, and also to determine (as Dr. Richmond had claimed) whether or not Dr. Richmond had suffered health issues that prevented her from complying with her Step I Consent Agreement. (Tr. at 33, 64-66)
16. Ms. Pokorny testified that Dr. Richmond has never provided the requested releases. (Tr. at 66-68)

Violations of Paragraph 7 – Failure to Submit Quarterly Declarations

17. Danielle Bickers, Compliance Supervisor for the Board, testified that she monitors licensees, like Dr. Richmond, who are subject to Consent Agreements with the Board. She explained that quarterly declarations, such as those required in Paragraph 7 of Dr. Richmond's Step I Consent Agreement, must be filed by the licensee, stating whether or not he or she is complying with the terms of the Consent Agreement. (Tr. at 13, 30-31)
18. Ms. Bickers testified that Dr. Richmond has never provided any quarterly declarations, including those due on April 1, 2011, July 1, 2011, October 1, 2011, and January 1, 2012. (Tr. at 31)

Violations of Paragraph 8 – Failure to Appear

19. Ms. Bickers further testified that, despite the requirement that she appear in person before the Board every three months, Dr. Richmond has only appeared once, in October 2011. (Tr. at 32)

20. Ms. Bickers further testified that Dr. Richmond sometimes excused her failures to appear (as well as other violations of the Step I Consent Agreement) by claiming that she was hospitalized, or otherwise suffering medical problems, or that her car was broken down, but she has never provided any records of a hospitalization. (Tr. at 33-34)

Violations of Paragraph 9 – Failure to Provide Random Urine Screenings

21. Paragraph 9 of the Step I Consent Agreement requires daily call-ins to a Board-approved drug testing facility and collection site, which shall be used for all of the required random urine screenings. There is a global contract between the Board and each such facility, requiring a daily call-in procedure, a reliable witness of the specimen receipt, and random collection. The drug testing panel utilized must be acceptable to the Secretary of the Board, and it must include Dr. Richmond's drugs of choice. (St. Ex. 2 at 14-15; Tr. at 16-17)
22. Paragraph 9 of the Consent Agreement further requires Dr. Richmond to submit, at her expense and on each day selected, urine specimens for drug and/or alcohol analysis. All submitted specimens must be negative, except for any substances properly prescribed to Dr. Richmond in accordance with the Step I Consent Agreement. Failure to timely submit specimens by the time and date requested constitutes a violation of the Step I Consent Agreement. (St. Ex. 2 at 14-15; Tr. at 16-17)
23. Ms. Bickers explained that Dr. Richmond was permitted to call on the telephone or log in through the internet for her daily check-in to FirstLab, the Board-approved drug testing facility used by Dr. Richmond. Ms. Bickers testified about State's Exhibit 5, which is a calendar provided to the Board by FirstLab to document Dr. Richmond's check-ins and drug-testing results. She explained that the calendar shows if Dr. Richmond called or logged in to FirstLab, and the time of each such call or login. The calendar shown the required drug testing days and panels, and whether the results were positive or negative. State's Exhibit 5 covers the time period of February 24, 2011, through March 3, 2012. (St. Ex. 5; Tr. at 18-20)
24. Dr. Richmond failed to contact FirstLab for her daily required check-in on the following dates: February 24-28, 2011; March 1-14, 21, 24-27 and 30, 2011; April 2-4, 8, 14, 16, 18, 21, 24 and 30, 2011; May 20, 21, 23 and 29, 2011; June 1, 4, 5, 14, 20, 26 and 27, 2011; July 3, 8 and 16-17, 19-31, 2011; August 1-31, 2011; September 1-3, 5-9, 11, 13, 17-18 and 20-22, 2011; October 1, 2011; November 19, 2011; December 2, 4, 22 and 24, 2011; January 29, 2012; and February 9, 18 and 26, 2012. (St. Ex. 5; Tr. at 20)
25. Further, Dr. Richmond checked in late to FirstLab on the following dates: March 15, 20 and 29, 2011; May 1, 2011; July 2, 2011; September 10 and 23, 2011; October 2, 2011; November 12, 2011; and December 8, 17, 25 and 26, 2011; January 3, 2012; and February 19, 2012. (St. Ex. 5; Tr. at 21)
26. The following are dates upon which Dr. Richmond was scheduled to submit a urine specimen, but she failed to submit one, either because she failed to check in or she checked in late:

February 24 and 28, 2011; March 7, 12, 21, 24 and 25, 2011; April 30, 2011; July 16, 26 and 28, 2011; August 1, 12, 19 and 26, 2011; September 7 and 13, 2011; December 2, 8 and 17, 2011; and January 3, 2012. (St. Ex. 5; Tr. at 22-23)

27. On the following dates, Dr. Richmond timely called her drug testing facility, but failed to provide the requested urine specimen: April 7, 11 and 19, 2011; May 10, 13, 16 and 17, 2011; June 2, 3, 21 and 22, 2011; July 11 and 12, 2011; September 29, 2011; October 4, 13 and 26, 2011; November 1, 17 and 22, 2011; December 8, 17 and 23, 2011; January 4, 2012; and February 8 and 21, 2012. (St. Ex. 5; Tr. at 23-24)
28. Ms. Bickers testified that the Board had directed FirstLab to test Dr. Richmond for ethyl glucuronide (“EtG”) and ethyl sulfonamide (“EtS”), which are components of alcohol. Dr. Richmond chose to test under a drug panel that did not include these components, despite the explicit instructions through her daily check-in, on the following dates: June 23, 2011; September 30, 2011; October 25, 2011; and January 5 and 25, 2012. (Tr. at 24-26)
29. Four urine specimens are required each month. During the following months, Dr. Richmond failed to meet this requirement: March, April, May, June, July, August, September, October and November, 2011; and February 2012. (St. Ex. 5; Tr. at 26-27)
30. On the following dates, Dr. Richmond timely checked in and was instructed to provide a urine specimen, but she waited a day or more to provide the specimen, in violation of the Step I Consent Agreement:

<u>Scheduled to test</u>	<u>Provided test</u>
October 13, 2011	October 14, 2011
December 8, 2011	December 9, 2011
December 21, 2011	December 22, 2011
December 23, 2011	December 30, 2011
February 21, 2012	February 23, 2012

(St. Ex. 5; Tr. at 26-29)

31. On June 23 and December 22, 2011, Dr. Richmond provided urine specimens, but failed to do so under observation by a reliable witness, in violation of the Step I Consent Agreement.
32. Lastly, Dr. Richmond provided urine specimens testing positive for prohibited substances, without documentation of any proper prescriptions for any of the substances, on the following dates: June 23 and 30, 2011; September 30, 2011; December 9, 13, 22 and 30, 2011; January 5, 12, 21 and 25, 2012; and February 23, 27 and 29, 2012. (St. Ex. 5; Tr. at 29-30)

Violations of Paragraph 13 – Failure to Attend Rehabilitation Program

33. Paragraph 13 of the Step I Consent Agreement requires Dr. Richmond to submit acceptable documentary evidence that she is attending the required rehabilitation meetings each week,

such as meeting attendance logs. The evidence must be provided to the Board by the due date for each quarterly declaration. (St. Ex. 2 at 17)

34. Dr. Richmond has never provided the Board with any evidence that she has complied with Paragraph 13 of her Step I Consent Agreement. (Tr. at 34-35)

Surrender of DEA Registration

35. On January 20, 2012, Dr. Richmond voluntarily surrendered her Drug Enforcement Administration (“DEA”) Certificate of Registration. As part of the surrender, she executed a document consenting to the revocation of her DEA Certificate of Registration by the DEA Administrator, and in which she adopted the statement “[i]n view of my alleged failure to comply with the Federal requirements pertaining to controlled substances, and as an indication of my good faith in desiring to remedy any incorrect or unlawful practices on my part[.]” (St. Ex. 3)

FINDINGS OF FACT

1. On January 20, 2012, Katherine L. Richmond, D.O., voluntarily surrendered her Drug Enforcement Administration Certificate of Registration (“DEA Registration”). Dr. Richmond executed a document consenting to the revocation of her DEA Registration by the DEA Administrator. In the document, she affirmed that she was surrendering the DEA Registration “[i]n view of [her] alleged failure to comply with the Federal requirements pertaining to controlled substances, and as an indication of [her] good faith in desiring to remedy any incorrect or unlawful practices on [her] part[.]”
2. On January 12, 2011, Dr. Richmond entered into a Step I Consent Agreement with the Board (“2011 Step I Consent Agreement”) in lieu of further disciplinary proceedings based upon her violation of Sections 4731.22(B)(26), Ohio Revised Code. Under the terms of the 2011 Step I Consent Agreement, Dr. Richmond’s license to practice medicine and surgery was indefinitely suspended, but not less than ninety days. On June 30, 2011, Dr. Richmond admitted to a Board representative that, prior to the commencement of her indefinite suspension, she had written prescriptions for controlled substances for many of her patients, with the intent that the prescriptions would be filled while she was suspended. Dr. Richmond retained the services of Patient 1, a non-physician, to distribute the prescriptions to the patients during her suspension. Dr. Richmond authorized Patient 1 to require patients to pay \$75.00 for each pre-written prescription. Pursuant to this authorization and while Dr. Richmond’s license was suspended, Patient 1 distributed the prescriptions Dr. Richmond had written, including but not limited to prescriptions for Patient 2. Patient 1 collected \$75.00 for each prescription distributed while Dr. Richmond’s license was suspended, including payments from Patient 2 for prescriptions. Dr. Richmond also authorized Patient 1 to obtain urine samples from patients to maintain an appearance of proper procedure, although Dr. Richmond admitted to a Board representative that the urine

samples were destroyed and not tested. Patient 2 stated that she was required to submit a urine specimen for one of her prescriptions while Dr. Richmond was suspended.

3. On October 3, 2011, a Board representative served Dr. Richmond with an Investigative Subpoena Duces Tecum, requiring that she produce to the Board 19 patient records. The patient records were to be produced on or before October 14, 2011. On October 13, 2011, Dr. Richmond produced 15 of the 19 subpoenaed patient records. She has never produced the remaining four patient records.
4. Dr. Richmond's 2011 Step I Consent Agreement remains in effect.
 - (a) Paragraph 9 of the 2011 Step I Consent Agreement requires Dr. Richmond to submit to random urine screenings for drugs and alcohol at least four times per month, or as otherwise directed by the Board. The drug testing panel utilized must be acceptable to the Secretary of the Board, and must include Dr. Richmond's drugs of choice.

Paragraph 9 also requires that all screenings for drugs and alcohol shall be conducted through a Board-approved drug testing facility and collection site pursuant to the global contract between said facility and the Board, and that the screening process include a daily call-in procedure.

Paragraph 9 further requires that Dr. Richmond submit, at her expense and on each day selected, urine specimens for drug and/or alcohol analysis. All specimens submitted by Dr. Richmond are required to be negative, except for those substances prescribed, administered, or dispensed to Dr. Richmond in conformance with the terms, conditions and limitations set forth in the 2011 Step I Consent Agreement. The refusal or failure to submit a specimen on a selected date constitutes a violation of the 2011 Step I Consent Agreement.

Additionally, paragraph 9 requires that Dr. Richmond ensure that the urine screening process performed through the drug testing facility requires a daily call-in procedure; that the urine specimens are obtained on a random basis; and that the giving of the specimen is witnessed by a reliable person.

- (i) Despite the requirements of the 2011 Step I Consent Agreement, Dr. Richmond failed to call in at all on the following dates:

- February 24-28, 2011; March 1-14, 21, 24-27 and 30, 2011; April 2-4, 8, 14, 16, 18, 21, 24 and 30, 2011; May 20, 21, 23 and 29, 2011; June 1, 4, 5, 14, 20, 26 and 27, 2011; July 3, 8 and 16-17, 19-31, 2011;¹ August 1-31, 2011; September 1-3, 5-9, 11, 13, 17-18 and 20-22, 2011; October 1, 2011;

¹ The notice alleged that Dr. Richmond had failed to call in from July 16 through 31, 2011; however, the evidence indicates that Dr. Richmond called in on July 18, 2011.

November 19, 2011; December 2, 4, 22 and 24, 2011; January 29, 2012;
and February 9, 18 and 26, 2012.

- (ii) Additionally, despite the requirements of the 2011 Step I Consent Agreement, Dr. Richmond called in late on or about the following dates:
- March 15, 20 and 29, 2011; May 1, 2011; July 2, 2011; September 10 and 23, 2011; October 2, 2011; November 12, 2011; and December 8, 17, 25 and 26, 2011; January 3, 2012; and February 19, 2012.
- (iii) Further, despite the requirements of the 2011 Step I Consent Agreement, Dr. Richmond called in late and/or failed to call in at all on dates scheduled for her to provide a urine specimen, resulting in no specimen being collected on the following dates:
- February 24 and 28, 2011; March 7, 12, 21, 24 and 25, 2011; April 30, 2011; July 16, 26 and 28, 2011; August 1, 12, 19 and 26, 2011; September 7 and 13, 2011; December 2, 8 and 17, 2011; and January 3, 2012.²
- (iv) Additionally, despite the requirements of the 2011 Step I Consent Agreement, Dr. Richmond called in and was notified to submit a urine specimen, yet failed to comply on the following dates:
- April 7, 11 and 19, 2011; May 10, 13, 16 and 17, 2011; June 2, 3, 21 and 22, 2011; July 11 and 12, 2011; September 29, 2011; October 4, 13 and 26, 2011; November 1, 17 and 22, 2011; December 8, 17 and 23, 2011; January 4, 2012;³ and February 8 and 21, 2012.
- (v) Further, despite the requirements of the 2011 Step I Consent Agreement, on each of the following dates, being June 23, 2011; September 30, 2011; October 25, 2011; and January 5 and 25, 2012, Dr. Richmond failed to comply with the direction to select a drug testing panel for her urine specimen which tests for ethyl glucuronide (“EtG”) and ethyl sulfonamide (“EtS”). While she provided the urine specimens, she chose the wrong drug testing panels on each occasion.
- (vi) Additionally, despite the requirements of the 2011 Step I Consent Agreement, Dr. Richmond failed to provide at least four urine specimens per month during the months of March, April, May, June, July, August, September, October and November, 2011; and February 2012.

² The notice includes the date of October 26, 2011, in this allegation, but the evidence establishes that, although Dr. Richmond did not submit a specimen on that date, she did actually call in on time.

³ The notice includes January 3, 2012, in this allegation; however, the evidence shows that she called in late that day, as reflected in Finding of Fact 4(a)(iii), above.

- (vii) Further, despite the requirements of the 2011 Step I Consent Agreement, on each of the following occasions, Dr. Richmond called in and was notified that she was required to submit a urine specimen, but she failed to provide a specimen until the following day or a later day:

<u>Scheduled to test</u>	<u>Provided test</u>
October 13, 2011	October 14, 2011
December 8, 2011	December 9, 2011
December 21, 2011	December 22, 2011
December 23, 2011	December 30, 2011
February 21, 2012	February 23, 2012

- (viii) Further, despite the requirements of the 2011 Step I Consent Agreement, the urine specimen Dr. Richmond provided on each of the following dates tested positive for a prohibited substance, but she failed to provide documentation that the prohibited substance had been prescribed for her by a physician:

- June 23 and 30, 2011; September 30, 2011; December 9, 13, 22 and 30, 2011; January 5, 12, 21 and 25, 2012; and February 23, 27 and 29, 2012.

- (b) Paragraph 7 of the 2011 Step I Consent requires Dr. Richmond to submit quarterly declarations to the Board, stating whether she has complied with all the conditions of the 2011 Step I Consent Agreement. The quarterly declarations are due on the first day of every third month,

Dr. Richmond failed to submit her quarterly declarations that were due in April, July, and October 2011, and in January, 2012.

- (c) Paragraph 8 of the 2011 Step I Consent Agreement requires Dr. Richmond to appear in person for an interview before the full Board or its designated representative every three months.

Dr. Richmond failed to appear for her quarterly appearances on April 12, 2011; July 12, 2011; August 9, 2011; January 10, 2012; February 7, 2012; and March 13, 2012.

- (d) Paragraph 13 of the 2011 Step I Consent Agreement requires Dr. Richmond to participate in an alcohol and drug rehabilitation program, such as A.A., N.A., C.A., or Caduceus, no less than three times per week.

Paragraph 13 of the 2011 Step I Consent Agreement also requires Dr. Richmond to submit acceptable documentary evidence of continuing compliance with this program, including submission to the Board of meeting attendance logs, which must be received in the Board's offices no later than the due date for her quarterly declarations.

Despite the requirements of the 2011 Step I Consent Agreement, Dr. Richmond has failed to submit any documentation that she has undertaken and maintained participation in an alcohol and drug rehabilitation program no less than three times per week.

- (e) Paragraph 3 of the 2011 Step I Consent Agreement requires Dr. Richmond to abstain completely from the personal use or possession of drugs, except those prescribed, dispensed or administered to her by another authorized by law who has full knowledge of her history of chemical dependency. Further, in the event that Dr. Richmond is prescribed, dispensed or administered any controlled substance, carisoprodol, or tramadol, she is required to notify the Board in writing within seven days, providing the Board with the identity of the prescriber; the name of the drug she received; the medical purpose for which she received said drug; the date such drug was initially received; and the dosage, amount, number of refills, and directions for use. Further, within thirty days of the date said drug is so prescribed, dispensed, or administered to her, Dr. Richmond is required to provide the Board with either a copy of the written prescription or other written verification from the prescriber, including the dosage, amount, number of refills, and directions for use.

Dr. Richmond has taken controlled substances as shown by the following test results, but has never documented any appropriate prescriptions as required by Paragraph 3 of the 2011 Step I Consent Agreement:

Dr. Richmond's June 23, 2011, urine specimens tested positive for hydromorphone and morphine.

Dr. Richmond's urine specimens collected on December 30, 2011, January 5 and 12, 2012, and February 23, 27 and 29, 2012, each tested positive for hydromorphone.

Dr. Richmond's January 21 and 25, 2012, urine specimens each tested positive for hydromorphone and methadone.

- (f) Paragraph 6 of the 2011 Step I Consent Agreement requires Dr. Richmond to provide authorization, through appropriate written consent forms, for disclosure of evaluative reports, summaries, and records, of whatever nature, by any and all parties that provide treatment or evaluation for her chemical dependency or related conditions, or for purposes of her compliance with the 2011 Step I Consent Agreement.

On November 18, 2011, and January 6, 2012, the Board sent Dr. Richmond letters requesting that she complete, execute and return releases, so that the Board could obtain copies of her medical records regarding her prescribed medications. Dr. Richmond had claimed that she had been unable to fulfill the requirements of the 2011 Step I Consent Agreement because she had been hospitalized, although she has

failed to provide any copies of documentation that supports her claims. Dr. Richmond has never returned to the Board the completed and executed releases.

5. The evidence is insufficient to support a finding that, despite the requirements of the 2011 Step I Consent Agreement, Dr. Richmond provided urine specimens on June 23 and December 22, 2011 that were not observed by a reliable person.

CONCLUSIONS OF LAW

1. The acts, conduct, and/or omissions of Katherine L. Richmond, D.O., as set forth the first Finding of Fact constitute “[t]he revocation, suspension, restriction, reduction, or termination of clinical privileges by the United States Department of defense or department of veterans affairs or the termination or suspension of a certificate of registration to prescribe drugs by the drug enforcement administration of the United States department of justice,” as that clause is used in Section 4731.22(B)(24), Ohio Revised Code.
2. Dr. Richmond’s acts, conduct, and/or omissions as set forth in the second Finding of Fact, individually and/or collectively, constitute “[c]ommission of an act that constitutes a felony in this state, regardless of the jurisdiction in which the act was committed,” as that clause is used in Section 4731.22(B)(10), Ohio Revised Code, to wit: Practicing Osteopathy without Certificate, in violation of Section 4731.43, Ohio Revised Code. A violation of Section 4731.43, Ohio Revised Code, constitutes a felony pursuant to Section 4731.99(A), Ohio Revised Code.
3. Dr. Richmond’s acts, conduct, and/or omissions as set forth in Findings of Fact 3 and 4(f), individually and/or collectively, constitute “[f]ailure to cooperate in an investigation conducted by the board under division (F) of this section, including failure to comply with a subpoena or order issued by the board or failure to answer truthfully a question presented by the board at a deposition or in written interrogatories,” as that clause is used in Section 4731.22(B)(34), Ohio Revised Code.
4. Dr. Richmond’s acts, conduct, and/or omissions as set forth in Findings of Fact (4)(a) through (4)(f), individually and/or collectively, constitute a “[v]iolation of the conditions of limitation placed by the board upon a certificate to practice,” as that clause is used in Section 4731.22(B)(15), Ohio Revised Code.

Rationale for Proposed Order

Dr. Richmond used a layperson as her proxy to dole out pain pill prescriptions for cash after her medical license had been suspended under her Step I Consent Agreement. Furthermore, she has violated in numerous respects, and on many occasions, her Step I Consent Agreement with the Board. She has made no serious effort to defend these actions or to mitigate her responsibility.

Accordingly, the Hearing Examiner recommends permanent revocation of Dr. Richmond's license.

PROPOSED ORDER

It is hereby ORDERED that the certificate of Katherine L. Richmond, D.O., to practice osteopathic medicine and surgery in the State of Ohio shall be PERMANENTLY REVOKED.

This Order shall become effective immediately upon the mailing of the notification of approval by the Board.

A handwritten signature in black ink that reads "Siobhan R. Clovis" followed by a stylized flourish or set of initials.

Siobhan R. Clovis, Esq.
Hearing Examiner

State Medical Board of Ohio

30 E. Broad Street, 3rd Floor, Columbus, OH 43215-6127

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EXCERPT FROM THE DRAFT MINUTES OF MAY 8, 2013

REPORTS AND RECOMMENDATIONS AND PROPOSED FINDINGS AND PROPOSED ORDERS

Dr. Steinbergh announced that the Board would now consider the Reports and Recommendations appearing on its agenda.

Dr. Steinbergh asked whether each member of the Board had received, read and considered the hearing records; the Findings of Fact, Conclusions of Law, Proposed Orders, and any objections filed in the matters of: Michael M. Kamrava, M.D.; Christopher L. Demas, M.D.; Gary Allan Dunlap, D.O.; and Katherine L. Richmond, D.O.

A roll call was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Bechtel	- aye
	Ms. Elsass	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Sethi	- aye
	Dr. Talmage	- aye
	Mr. Gonidakis	- aye
	Mr. Kenney	- aye
	Dr. Soin	- aye

Dr. Steinbergh asked whether each member of the Board understands that the disciplinary guidelines do not limit any sanction to be imposed, and that the range of sanctions available in each matter runs from dismissal to permanent revocation. A roll call was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Bechtel	- aye
	Ms. Elsass	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Sethi	- aye
	Dr. Talmage	- aye
	Mr. Gonidakis	- aye
	Mr. Kenney	- aye
	Dr. Soin	- aye

Dr. Steinbergh noted that, in accordance with the provision in section 4731.22(F)(2), Ohio Revised Code, specifying that no member of the Board who supervises the investigation of a case shall participate in

further adjudication of the case, the Secretary and Supervising Member must abstain from further participation in the adjudication of any disciplinary matters. In the matter before the Board today, Dr. Strafford served as Secretary, Dr. Bechtel served as Supervising Member, and Dr. Talmage served as Secretary and/or Acting Supervising Member

Dr. Steinbergh reminded all parties that no oral motions may be made during these proceedings.

The original Reports and Recommendations shall be maintained in the exhibits section of this Journal.

.....
KATHERINE L. RICHMOND, D.O., Case No. 12-CRF-089
.....

Mr. Gonidakis exited the meeting prior to this discussion.

.....
Dr. Ramprasad moved to approve and confirm Ms. Clovis' Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Katherine L. Richmond, D.O. Ms. Elsass seconded the motion.
.....

A vote was taken on Dr. Ramprasad's motion to approve:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Bechtel	- abstain
	Ms. Elsass	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Sethi	- aye
	Dr. Talmage	- abstain
	Mr. Kenney	- aye
	Dr. Soin	- aye

The motion to approve carried.

State Medical Board of Ohio

30 E. Broad Street, 3rd Floor, Columbus, OH 43215-6127

Richard A. Whitehouse, Esq.
Executive Director

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med.ohio.gov

September 12, 2012

Case number: 12-CRF- 089

Katherine L. Richmond, D.O.
12813 Littleton Road
Garfield Hts., Ohio 44125

Dear Doctor Richmond:

In accordance with Chapter 119., Ohio Revised Code, you are hereby notified that the State Medical Board of Ohio [Board] 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 you or place you on probation for one or more of the following reasons:

- (1) On or about January 20, 2012, you voluntarily surrendered your Drug Enforcement Administration Certificate of Registration [DEA Registration]. As part of this surrender, you executed a document wherein you checked the box that stated "[i]n view of my alleged failure to comply with the Federal requirements pertaining to controlled substances, and as an indication of my good faith in desiring to remedy any incorrect or unlawful practices on my part[.]" In that same document, you consented to the revocation of your DEA Registration by the DEA Administrator.
- (2) On or about January 12, 2011, you entered into a Step I Consent Agreement with the Board [January 2011 Step I Consent Agreement] in lieu of further disciplinary proceedings based upon your violation of Sections 4731.22(B)(26), Ohio Revised Code. Under the terms of the January 2011 Step I Consent Agreement, your license to practice medicine and surgery was indefinitely suspended, but not less than ninety days. In a meeting with a Board representative on or about June 30, 2011, you admitted to the Board representative that, prior to the commencement of your indefinite suspension, you wrote prescriptions for controlled substances for many of your patients, and that you intended that the prescriptions would be filled during the months of January through April 2011, while your license was suspended. You retained the services of Patient 1, a non-physician, to distribute

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the prescriptions to the patients during your suspension. You authorized Patient 1 to require some or all of your patients to pay \$75.00 to receive the prescription(s) you had written. Under your authorization and while your license was suspended, Patient 1 distributed prescriptions you had written, including but not limited to prescriptions for Patient 2; Patient 1 also collected \$75.00 from patients at the time the patients received the prescriptions during the months of January through April 2011, while your license was suspended, including but not limited to payments from Patient 2. During this same time period, you also authorized Patient 1 to obtain urine samples from patients, although you admitted to the Board representative that the urine samples were destroyed and not tested. Patient 2 stated that, during the time your license was suspended during the months of January through April 2011, on one or more occasions, she was required to provide a urine sample to Patient 1 in order to obtain her prescription. (Patients 1 and 2 are identified on the attached Patient Key, which is confidential and not subject to public disclosure pursuant to Section 4731.22(F)(5), Ohio Revised Code.)

- (3) On or about October 3, 2011, a representative of the Board served on you an Investigative Subpoena Duces Tecum, requiring that you produce to the Board nineteen patient records. The patient records were to be produced on or before October 14, 2011. On or about October 13, 2011, you produced to the board patient records for fifteen of the subpoenaed patient records. You failed to produce four patient records required to be produced by the Investigative Subpoena Duces Tecum as of October 14, 2011, and have not produced the four patient records as of March 26, 2012.
- (4) The January 2011 Step I Consent Agreement, identified above in paragraph (2), remains in effect.
 - (a) Paragraph 9 of the January 2011 Step I Consent Agreement requires you to submit to random urine screenings for drugs and alcohol at least four times per month, or as otherwise directed by the Board. That provision also requires that the drug testing panel utilized must be acceptable to the Secretary of the Board, and shall include your drug(s) of choice.

Paragraph 9 also requires that all screenings for drugs and alcohol shall be conducted through a Board-approved drug testing facility and collection site pursuant to the global contract between said facility and the Board, and that the screening process requires a daily call-in procedure.

Paragraph 9 further requires that you submit, at your expense and on the day selected, urine specimens for drug and/or alcohol analysis. All specimens submitted by you are required to be negative, except for those

substances prescribed, administered, or dispensed to you in conformance with the terms, conditions and limitations set forth in the January 2011 Step I Consent Agreement. Refusal or failure to submit specimens on the day you are selected constitutes a violation of the January 2011 Step I Consent Agreement.

Additionally, paragraph 9 requires that you ensure that the urine screening process performed through the drug testing facility requires a daily call-in procedure; that the urine specimens are obtained on a random basis; and that the giving of the specimen is witnessed by a reliable person.

- (i) Despite the requirements of the January 2011 Step I Consent Agreement, you failed to call in at all on or about the following dates:
 - February 24-28, 2011; March 1-14, 21, 24-27 and 30, 2011; April 2-4, 8, 14, 16, 18, 21, 24 and 30, 2011; May 20, 21, 23 and 29, 2011; June 1, 4, 5, 14, 20, 26 and 27, 2011; July 3, 8 and 16-31, 2011; August 1-31, 2011; September 1-3, 5-9, 11, 13, 17-18 and 20-22, 2011; October 1, 2011; November 19, 2011; December 2, 4, 22 and 24, 2011; January 29, 2012; and February 9, 18 and 26, 2012.
- (ii) Additionally, despite the requirements of the January 2011 Step I Consent Agreement, you called in late on or about the following dates:
 - March 15, 20 and 29, 2011; May 1, 2011; July 2, 2011; September 10 and 23, 2011; October 2, 2011; November 12, 2011; and December 8, 17, 25 and 26, 2011; January 3, 2012; and February 19, 2012.
- (iii) Further, despite the requirements of the January 2011 Step I Consent Agreement, you called in late and/or failed to call in at all on dates scheduled for you to provide a urine specimen, resulting in no specimen being collected on or about the following dates:
 - February 24 and 28, 2011; March 7, 12, 21, 24 and 25, 2011; April 30, 2011; July 16, 26 and 28, 2011; August 1, 12, 19 and 26, 2011; September 7 and 13, 2011; October 26, 2011; December 2, 8 and 17, 2011; and January 3, 2012.

- (iv) Additionally, despite the requirements of the January 2011 Step I Consent Agreement, you called in and were notified that you were required to submit a urine specimen, yet you failed to submit a urine specimen on or about the following dates:
- April 7, 11 and 19, 2011; May 10, 13, 16 and 17, 2011; June 2, 3, 21 and 22, 2011; July 11 and 12, 2011; September 29, 2011; October 4, 13 and 26, 2011; November 1, 17 and 22, 2011; December 8, 17 and 23, 2011; January 3 and 4, 2012; and February 8 and 21, 2012.
- (v) Further, despite the requirements of the January 2011 Step I Consent Agreement, on or about June 23, 2011; September 30, 2011; October 25, 2011; and January 5 and 25, 2012, you called in and were advised to select an option which tests for ethyl glucuronide [EtG] and ethyl sulfonamide [EtS], when you provided your urine specimen. Despite the requirement to select that option, you selected a different option which does not test for EtG or EtS.
- (vi) Additionally, despite the requirements of the January 2011 Step I Consent Agreement, you failed to provide at least four urine specimens per month during the months of March, April, May, June, July, August, September, October and November, 2011; and February 2012.
- (vii) Further, despite the requirements of the January 2011 Step I Consent Agreement, you called in and were notified that you were required to submit a urine specimen, but you did not provide a specimen until the following day or a later day:

<u>Scheduled to test</u>	<u>Provided test</u>
October 13, 2011	October 14, 2011
December 8, 2011	December 9, 2011
December 21, 2011	December 22, 2011
December 23, 2011	December 30, 2011
February 21, 2012	February 23, 2012

- (viii) Additionally, despite the requirements of the January 2011 Step I Consent Agreement, although you provided a urine specimen on the following dates, the specimen was not observed when it was provided: June 23, 2011, and December 22, 2011.

(ix) Further, despite the requirements of the January 2011 Step I Consent Agreement, the urine specimen you provided on the following dates tested positive for a prohibited substance and you failed to provide documentation that the prohibited substance had been prescribed for you by a physician:

- June 23 and 30, 2011; September 30, 2011; December 9, 13, 22 and 30, 2011; January 5, 12, 21 and 25, 2012; and February 23, 27 and 29, 2012.

(b) Paragraph 7 of the January 2011 Step I Consent requires you to submit quarterly declarations to the Board, stating whether there has been compliance with all the conditions of the January 2011 Step I Consent Agreement. The quarterly declarations are due on the first day of every third month.

Despite the requirements of the January 2011 Step I Consent Agreement, you failed to submit quarterly declarations that were due in or around April 2011, July 2011, October 2011 and January 2012.

(c) Paragraph 8 of the January 2011 Step I Consent Agreement requires you to appear in person for an interview before the full Board or its designated representative every three months.

Despite the requirements of the January 2011 Step I Consent Agreement, you failed to appear for your quarterly appearances on or about April 12, 2011; July 12, 2011; August 9, 2011; January 10, 2012; February 7, 2012; and March 13, 2012.

(d) Paragraph 13 of the January 2011 Step I Consent Agreement requires you to participate in an alcohol and drug rehabilitation program, such as A.A., N.A., C.A., or Caduceus, no less than three times per week.

Paragraph 13 of the January 2011 Step I Consent Agreement also requires you to submit acceptable documentary evidence of continuing compliance with this program, including submission to the Board of meeting attendance logs, which must be received in the Board's offices no later than the due date for your quarterly declarations.

Despite the requirements of the January 2011 Step I Consent Agreement, you have failed to submit any documentation that you have undertaken and maintained participation in an alcohol and drug rehabilitation program no less than three times per week.

- (e) Paragraph 3 of the January 2011 Step I Consent Agreement requires you to abstain completely from the personal use or personal possession of drugs, except those prescribed, dispensed or administered to you by another authorized by law who has full knowledge of your history of chemical dependency. Further, in the event that you are prescribed, dispensed or administered any controlled substance, carisoprodol, or tramadol, you are required to notify the Board in writing within seven days, providing the Board with the identity of the prescriber; the name of the drug you received; the medical purpose for which you received said drug; the date such drug was initially received; and the dosage, amount, number of refills, and directions for use. Further, within thirty days of the date said drug is so prescribed, dispensed, or administered to you, you are required to provide the Board with either a copy of the written prescription or other written verification from the prescriber, including the dosage, amount, number of refills, and directions for use.

Despite the foregoing provision, you have taken controlled substances, although you have failed to provide to the Board the written documentation required by the foregoing provision. Examples include, but are not limited to, the following:

Urine specimens provided by you on or about June 23, 2011, tested positive for hydromorphone and morphine, although the Board did not receive documentation that these substances had been prescribed for you.

Further, urine specimens provided by you on or about December 30, 2011, January 5 and 12, 2012, and February 23, 27 and 29, 2012, tested positive for hydromorphone, although the Board did not receive documentation that this substance had been prescribed for you.

Additionally, urine specimens provided by you on or about January 21 and 25, 2012, tested positive for hydromorphone and methadone, although the Board did not receive documentation that these substances had been prescribed for you.

- (f) Paragraph 6 of the January 2011 Step I Consent Agreement requires you to provide authorization, through appropriate written consent forms, for disclosure of evaluative reports, summaries, and records, of whatever nature, by any and all parties that provide treatment or evaluation for your chemical dependency or related conditions, or for purposes of complying with the January 2011 Step I Consent Agreement.

On or about November 18, 2011, and January 6, 2012, the Board sent you letters requesting that you complete, execute and return releases, so that the Board could obtain copies of your records from your primary care physician and your pain management physician regarding medications prescribed to you. You claimed you were unable to fulfill the requirements of the January 2011 Step I Consent Agreement because you were hospitalized, which occurred at times after visiting your primary care physician, although you have failed to provide copies of documentation that supports your claims. As of March 23, 2012, you have failed to return to the Board the completed and executed releases.

Your acts, conduct, and/or omissions as alleged in paragraph (1) above constitute “[t]he revocation, suspension, restriction, reduction, or termination of clinical privileges by the United States department of defense or department of veterans affairs or the termination or suspension of a certificate of registration to prescribe drugs by the drug enforcement administration of the United States department of justice,” as that clause is used in Section 4731.22(B)(24), Ohio Revised Code.

Further, your acts, conduct, and/or omissions as alleged in paragraph (2) above, individually and/or collectively, constitute “[c]ommission of an act that constitutes a felony in this state, regardless of the jurisdiction in which the act was committed,” as that clause is used in Section 4731.22(B)(10), Ohio Revised Code, to wit: Practicing Osteopathy without Certificate, in violation of Section 4731.43, Ohio Revised Code. Further, pursuant to Penalties, Section 4731.99(A), Ohio Revised Code, a violation of Section 4731.43, Ohio Revised Code, constitutes a felony.

Further, your acts, conduct, and/or omissions as alleged in paragraphs (3) and (4)(f) above, individually and/or collectively, constitute “Failure to cooperate in an investigation conducted by the board under division (F) of this section, including failure to comply with a subpoena or order issued by the board or failure to answer truthfully a question presented by the board at a deposition or in written interrogatories,” as that clause is used in Section 4731.22(B)(34), Ohio Revised Code.

Additionally, your acts, conduct, and/or omissions as alleged in paragraphs (4)(a) through (4)(f) above, individually and/or collectively, constitute a “[v]iolation of the conditions of limitation placed by the board upon a certificate to practice,” as that clause is used in Section 4731.22(B)(15), 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 you 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,



J. Craig Strafford, M.D., M.P.H.
Secretary

JCS/CDP/sgb
Enclosures

CERTIFIED MAIL #91 7199 9991 7031 2767 3590
RETURN RECEIPT REQUESTED

**IN THE MATTER OF
KATHERINE L. RICHMOND, D.O.**

12-CRF-089

**SEPTEMBER 12, 2012, NOTICE OF
OPPORTUNITY FOR HEARING -
PATIENT KEY**

**SEALED TO
PROTECT PATIENT
CONFIDENTIALITY AND
MAINTAINED IN CASE
RECORD FILE.**

BEFORE THE STATE MEDICAL BOARD OF OHIO

IN THE MATTER OF

*

* Case No. 12-CRF-041

KATHERINE L. RICHMOND, D.O.

*

ORDER AND ENTRY

On April 11, 2012, the State Medical Board of Ohio issued a Notice of Opportunity for Hearing to Katherine L. Richmond, D.O., based on the alleged surrender of Dr. Richmond's Drug Enforcement Administration Certificate of Registration, her alleged practice of osteopathic medicine while her license was suspended, her alleged failure to cooperate in an investigation conducted by the Board, and her alleged violations of the conditions of limitation placed on her license under the terms of a January 2011 Step I Consent Agreement. If proven, the foregoing would constitute grounds for disciplinary action pursuant to Sections 4731.22(B)(24), 4731.22(B)(10), 4731.22(B)(34) and 4731.22(B)(15), Ohio Revised Code.

Subsequently, the Board determined Dr. Richmond submitted a request for hearing based upon the above referenced charges on May 3, 2012; however, the Board failed to acknowledge receipt of the request and schedule a hearing within seven to fifteen days of the request, as is required by Section 119.07, Ohio Revised Code.

Therefore, it is hereby ORDERED that the Notice of Opportunity for Hearing issued to Katherine L. Richmond, D.O., on April 11, 2012, be and is hereby DISMISSED WITHOUT PREJUDICE.

This Order is entered by the State Medical Board of Ohio and on its behalf.

So ORDERED this 11th day of September 2012.

(SEAL)

J. Craig Strafford MD

J. Craig Strafford, M.D., M.P.H.
Secretary

11 Sept 2012

Date

Mark Bechtel MD

Mark A. Bechtel, M.D.
Supervising Member

11 Sept 2012

Date

CERTIFIED MAIL NO. 91 7199 9991 7030 3310 7240
RETURN RECEIPT REQUESTED

State Medical Board of Ohio

30 E. Broad Street, 3rd Floor, Columbus, OH 43215-6127



Richard A. Whitehouse, Esq.
Executive Director

(614) 466-3934
med.ohio.gov

April 11, 2012

Case number: 12-CRF-041

Katherine L. Richmond, D.O.
12813 Littleton Road
Garfield Hts., Ohio 44125

Dear Doctor Richmond:

In accordance with Chapter 119., Ohio Revised Code, you are hereby notified that the State Medical Board of Ohio [Board] 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 you or place you on probation for one or more of the following reasons:

- (1) On or about January 20, 2012, you voluntarily surrendered your Drug Enforcement Administration Certificate of Registration [DEA Registration]. As part of this surrender, you executed a document wherein you checked the box that stated "[i]n view of my alleged failure to comply with the Federal requirements pertaining to controlled substances, and as an indication of my good faith in desiring to remedy any incorrect or unlawful practices on my part[.]" In that same document, you consented to the revocation of your DEA Registration by the DEA Administrator.
- (2) On or about January 12, 2011, you entered into a Step I Consent Agreement with the Board [January 2011 Step I Consent Agreement] in lieu of further disciplinary proceedings based upon your violation of Sections 4731.22(B)(26), Ohio Revised Code. Under the terms of the January 2011 Step I Consent Agreement, your license to practice medicine and surgery was indefinitely suspended, but not less than ninety days. In a meeting with a Board representative on or about June 30, 2011, you admitted to the Board representative that, prior to the commencement of your indefinite suspension, you wrote prescriptions for controlled substances for many of your patients, and that you intended that the prescriptions would be filled during the months of January through April 2011, while your license was suspended. You retained the services of Patient 1, a non-physician, to distribute

Mailed 4-12-12

the prescriptions to the patients during your suspension. You authorized Patient 1 to require some or all of your patients to pay \$75.00 to receive the prescription(s) you had written. Under your authorization and while your license was suspended, Patient 1 distributed prescriptions you had written, including but not limited to prescriptions for Patient 2; Patient 1 also collected \$75.00 from patients at the time the patients received the prescriptions during the months of January through April 2011, while your license was suspended, including but not limited to payments from Patient 2. During this same time period, you also authorized Patient 1 to obtain urine samples from patients, although you admitted to the Board representative that the urine samples were destroyed and not tested. Patient 2 stated that, during the time your license was suspended during the months of January through April 2011, on one or more occasions, she was required to provide a urine sample to Patient 1 in order to obtain her prescription. (Patients 1 and 2 are identified on the attached Patient Key, which is confidential and not subject to public disclosure pursuant to Section 4731.22(F)(5), Ohio Revised Code.)

- (3) On or about October 3, 2011, a representative of the Board served on you an Investigative Subpoena Duces Tecum, requiring that you produce to the Board nineteen patient records. The patient records were to be produced on or before October 14, 2011. On or about October 13, 2011, you produced to the board patient records for fifteen of the subpoenaed patient records. You failed to produce four patient records required to be produced by the Investigative Subpoena Duces Tecum as of October 14, 2011, and have not produced the four patient records as of March 26, 2012.
- (4) The January 2011 Step I Consent Agreement, identified above in paragraph (2), remains in effect.
 - (a) Paragraph 9 of the January 2011 Step I Consent Agreement requires you to submit to random urine screenings for drugs and alcohol at least four times per month, or as otherwise directed by the Board. That provision also requires that the drug testing panel utilized must be acceptable to the Secretary of the Board, and shall include your drug(s) of choice.

Paragraph 9 also requires that all screenings for drugs and alcohol shall be conducted through a Board-approved drug testing facility and collection site pursuant to the global contract between said facility and the Board, and that the screening process requires a daily call-in procedure.

Paragraph 9 further requires that you submit, at your expense and on the day selected, urine specimens for drug and/or alcohol analysis. All specimens submitted by you are required to be negative, except for those

substances prescribed, administered, or dispensed to you in conformance with the terms, conditions and limitations set forth in the January 2011 Step I Consent Agreement. Refusal or failure to submit specimens on the day you are selected constitutes a violation of the January 2011 Step I Consent Agreement.

Additionally, paragraph 9 requires that you ensure that the urine screening process performed through the drug testing facility requires a daily call-in procedure; that the urine specimens are obtained on a random basis; and that the giving of the specimen is witnessed by a reliable person.

- (i) Despite the requirements of the January 2011 Step I Consent Agreement, you failed to call in at all on or about the following dates:
 - February 24-28, 2011; March 1-14, 21, 24-27 and 30, 2011; April 2-4, 8, 14, 16, 18, 21, 24 and 30, 2011; May 20, 21, 23 and 29, 2011; June 1, 4, 5, 14, 20, 26 and 27, 2011; July 3, 8 and 16-31, 2011; August 1-31, 2011; September 1-3, 5-9, 11, 13, 17-18 and 20-22, 2011; October 1, 2011; November 19, 2011; December 2, 4, 22 and 24, 2011; January 29, 2012; and February 9, 18 and 26, 2012.
- (ii) Additionally, despite the requirements of the January 2011 Step I Consent Agreement, you called in late on or about the following dates:
 - March 15, 20 and 29, 2011; May 1, 2011; July 2, 2011; September 10 and 23, 2011; October 2, 2011; November 12, 2011; and December 8, 17, 25 and 26, 2011; January 3, 2012; and February 19, 2012.
- (iii) Further, despite the requirements of the January 2011 Step I Consent Agreement, you called in late and/or failed to call in at all on dates scheduled for you to provide a urine specimen, resulting in no specimen being collected on or about the following dates:
 - February 24 and 28, 2011; March 7, 12, 21, 24 and 25, 2011; April 30, 2011; July 16, 26 and 28, 2011; August 1, 12, 19 and 26, 2011; September 7 and 13, 2011; October 26, 2011; December 2, 8 and 17, 2011; and January 3, 2012.

- (iv) Additionally, despite the requirements of the January 2011 Step I Consent Agreement, you called in and were notified that you were required to submit a urine specimen, yet you failed to submit a urine specimen on or about the following dates:
- April 7, 11 and 19, 2011; May 10, 13, 16 and 17, 2011; June 2, 3, 21 and 22, 2011; July 11 and 12, 2011; September 29, 2011; October 4, 13 and 26, 2011; November 1, 17 and 22, 2011; December 8, 17 and 23, 2011; January 3 and 4, 2012; and February 8 and 21, 2012.
- (v) Further, despite the requirements of the January 2011 Step I Consent Agreement, on or about June 23, 2011; September 30, 2011; October 25, 2011; and January 5 and 25, 2012, you called in and were advised to select an option which tests for ethyl glucuronide [EtG] and ethyl sulfonamide [EtS], when you provided your urine specimen. Despite the requirement to select that option, you selected a different option which does not test for EtG or EtS.
- (vi) Additionally, despite the requirements of the January 2011 Step I Consent Agreement, you failed to provide at least four urine specimens per month during the months of March, April, May, June, July, August, September, October and November, 2011; and February 2012.
- (vii) Further, despite the requirements of the January 2011 Step I Consent Agreement, you called in and were notified that you were required to submit a urine specimen, but you did not provide a specimen until the following day or a later day:

<u>Scheduled to test</u>	<u>Provided test</u>
October 13, 2011	October 14, 2011
December 8, 2011	December 9, 2011
December 21, 2011	December 22, 2011
December 23, 2011	December 30, 2011
February 21, 2012	February 23, 2012

- (viii) Additionally, despite the requirements of the January 2011 Step I Consent Agreement, although you provided a urine specimen on the following dates, the specimen was not observed when it was provided: June 23, 2011, and December 22, 2011.

(ix) Further, despite the requirements of the January 2011 Step I Consent Agreement, the urine specimen you provided on the following dates tested positive for a prohibited substance and you failed to provide documentation that the prohibited substance had been prescribed for you by a physician:

- June 23 and 30, 2011; September 30, 2011; December 9, 13, 22 and 30, 2011; January 5, 12, 21 and 25, 2012; and February 23, 27 and 29, 2012.

(b) Paragraph 7 of the January 2011 Step I Consent requires you to submit quarterly declarations to the Board, stating whether there has been compliance with all the conditions of the January 2011 Step I Consent Agreement. The quarterly declarations are due on the first day of every third month.

Despite the requirements of the January 2011 Step I Consent Agreement, you failed to submit quarterly declarations that were due in or around April 2011, July 2011, October 2011 and January 2012.

(c) Paragraph 8 of the January 2011 Step I Consent Agreement requires you to appear in person for an interview before the full Board or its designated representative every three months.

Despite the requirements of the January 2011 Step I Consent Agreement, you failed to appear for your quarterly appearances on or about April 12, 2011; July 12, 2011; August 9, 2011; January 10, 2012; February 7, 2012; and March 13, 2012.

(d) Paragraph 13 of the January 2011 Step I Consent Agreement requires you to participate in an alcohol and drug rehabilitation program, such as A.A., N.A., C.A., or Caduceus, no less than three times per week.

Paragraph 13 of the January 2011 Step I Consent Agreement also requires you to submit acceptable documentary evidence of continuing compliance with this program, including submission to the Board of meeting attendance logs, which must be received in the Board's offices no later than the due date for your quarterly declarations.

Despite the requirements of the January 2011 Step I Consent Agreement, you have failed to submit any documentation that you have undertaken and maintained participation in an alcohol and drug rehabilitation program no less than three times per week.

- (e) Paragraph 3 of the January 2011 Step I Consent Agreement requires you to abstain completely from the personal use or personal possession of drugs, except those prescribed, dispensed or administered to you by another authorized by law who has full knowledge of your history of chemical dependency. Further, in the event that you are prescribed, dispensed or administered any controlled substance, carisoprodol, or tramadol, you are required to notify the Board in writing within seven days, providing the Board with the identity of the prescriber; the name of the drug you received; the medical purpose for which you received said drug; the date such drug was initially received; and the dosage, amount, number of refills, and directions for use. Further, within thirty days of the date said drug is so prescribed, dispensed, or administered to you, you are required to provide the Board with either a copy of the written prescription or other written verification from the prescriber, including the dosage, amount, number of refills, and directions for use.

Despite the foregoing provision, you have taken controlled substances, although you have failed to provide to the Board the written documentation required by the foregoing provision. Examples include, but are not limited to, the following:

Urine specimens provided by you on or about June 23, 2011, tested positive for hydromorphone and morphine, although the Board did not receive documentation that these substances had been prescribed for you.

Further, urine specimens provided by you on or about December 30, 2011, January 5 and 12, 2012, and February 23, 27 and 29, 2012, tested positive for hydromorphone, although the Board did not receive documentation that this substance had been prescribed for you.

Additionally, urine specimens provided by you on or about January 21 and 25, 2012, tested positive for hydromorphone and methadone, although the Board did not receive documentation that these substances had been prescribed for you.

- (f) Paragraph 6 of the January 2011 Step I Consent Agreement requires you to provide authorization, through appropriate written consent forms, for disclosure of evaluative reports, summaries, and records, of whatever nature, by any and all parties that provide treatment or evaluation for your chemical dependency or related conditions, or for purposes of complying with the January 2011 Step I Consent Agreement.

On or about November 18, 2011, and January 6, 2012, the Board sent you letters requesting that you complete, execute and return releases, so that the Board could obtain copies of your records from your primary care physician and your pain management physician regarding medications prescribed to you. You claimed you were unable to fulfill the requirements of the January 2011 Step I Consent Agreement because you were hospitalized, which occurred at times after visiting your primary care physician, although you have failed to provide copies of documentation that supports your claims. As of March 23, 2012, you have failed to return to the Board the completed and executed releases.

Your acts, conduct, and/or omissions as alleged in paragraph (1) above constitute “[t]he revocation, suspension, restriction, reduction, or termination of clinical privileges by the United States department of defense or department of veterans affairs or the termination or suspension of a certificate of registration to prescribe drugs by the drug enforcement administration of the United States department of justice,” as that clause is used in Section 4731.22(B)(24), Ohio Revised Code.

Further, your acts, conduct, and/or omissions as alleged in paragraph (2) above, individually and/or collectively, constitute “[c]ommission of an act that constitutes a felony in this state, regardless of the jurisdiction in which the act was committed,” as that clause is used in Section 4731.22(B)(10), Ohio Revised Code, to wit: Practicing Osteopathy without Certificate, in violation of Section 4731.43, Ohio Revised Code. Further, pursuant to Penalties, Section 4731.99(A), Ohio Revised Code, a violation of Section 4731.43, Ohio Revised Code, constitutes a felony.

Further, your acts, conduct, and/or omissions as alleged in paragraphs (3) and (4)(f) above, individually and/or collectively, constitute “Failure to cooperate in an investigation conducted by the board under division (F) of this section, including failure to comply with a subpoena or order issued by the board or failure to answer truthfully a question presented by the board at a deposition or in written interrogatories,” as that clause is used in Section 4731.22(B)(34), Ohio Revised Code.

Additionally, your acts, conduct, and/or omissions as alleged in paragraphs (4)(a) through (4)(f) above, individually and/or collectively, constitute a “[v]iolation of the conditions of limitation placed by the board upon a certificate to practice,” as that clause is used in Section 4731.22(B)(15), 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 you 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,



J. Craig Strafford, M.D., M.P.H.
Secretary

JCS/CDP/flb
Enclosures

CERTIFIED MAIL #91 7199 9991 7030 3383 3309
RETURN RECEIPT REQUESTED

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**STEP I
CONSENT AGREEMENT
BETWEEN
KATHERINE L. RICHMOND, D.O.,
AND
THE STATE MEDICAL BOARD OF OHIO**

This Consent Agreement is entered into by and between Katherine L. Richmond, D.O., [Dr. Richmond], and the State Medical Board of Ohio [Board], a state agency charged with enforcing Chapter 4731., Ohio Revised Code.

Dr. Richmond enters into this Consent Agreement being fully informed of her rights under Chapter 119., Ohio Revised Code, including the right to representation by counsel and the right to a formal adjudicative hearing on the issues considered herein.

BASIS FOR ACTION

This Consent Agreement is entered into on the basis of the following stipulations, admissions and understandings:

- A. The Board is empowered by Section 4731.22(B), Ohio Revised Code, to limit, revoke, suspend a certificate, refuse to register or reinstate an applicant, or reprimand or place on probation the holder of a certificate for violation of Section 4731.22(B)(26), Ohio Revised Code, for “impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice.”
- B. The Board enters into this Consent Agreement in lieu of formal proceedings based upon the violation of Section 4731.22(B)(26), Ohio Revised Code, as set forth in Paragraph E below, and expressly reserves the right to institute formal proceedings based upon any other violations of Chapter 4731. of the Revised Code, whether occurring before or after the effective date of this Agreement.
- C. Dr. Richmond is licensed to osteopathic practice medicine and surgery in the State of Ohio, License number 34.006407.
- D. Dr. Richmond states that she also is licensed to practice osteopathic medicine and surgery in the State of Michigan.
- E. Dr. Richmond admits that, after entering into a Consent Agreement with the Board in or around April 1996 related to opiate dependency, she was released from probation in or around April 1999. Dr. Richmond further admits that, on or about September 29, 2010, during an interview with representatives of the Board, Dr. Richmond admitted that she

had consumed alcohol on or about May 6, 2010. Dr. Richmond admits that, upon reflection, the correct date of her alcohol consumption is May 6, 2009. Further, Dr. Richmond admits that her consumption of alcohol constitutes a relapse pursuant to Rule 4731-16-02, Ohio Administrative Code.

Dr. Richmond states that she has been treated for chronic pain and has received medications that contain oxycodone and hydromorphone. Dr. Richmond admits that, in or around fall 2009, her physician may have written prescriptions for hydromorphone in addition to her regular monthly prescriptions. Dr. Richmond also admits that in her own medical practice patients have returned medications to her, including oxycodone and tramadol, and that she did not keep or maintain documentation to track in the format required by law the quantity of medication she accepted and/or destroyed, although she states that she did keep some documentation, but she admits that she did not keep that documentation where required in her office.

Further, Dr. Richmond admits that on or about October 19, 2010, the Board ordered her to undergo a 72-hour evaluation related to, *inter alia*, her prescription drug usage, which resulted in a determination by Gregory Collins, M.D., of the Cleveland Clinic, a Board-approved treatment provider, that Dr. Richmond is currently impaired in her ability to practice osteopathic medicine and surgery according to acceptable and prevailing standards of care at this time, and that treatment is required.

AGREED CONDITIONS

Wherefore, in consideration of the foregoing and mutual promises hereinafter set forth, and in lieu of any formal proceedings at this time, Dr. Richmond knowingly and voluntarily agrees with the Board to the following terms, conditions and limitations:

SUSPENSION OF CERTIFICATE

1. The certificate of Dr. Richmond to practice osteopathic medicine and surgery in the State of Ohio shall be SUSPENDED for an indefinite period of time, but not less than ninety days.

Obey all Laws

2. Dr. Richmond shall obey all federal, state, and local laws.

Sobriety

3. Dr. Richmond shall abstain completely from the personal use or personal possession of drugs, except those prescribed, dispensed or administered to her by another so authorized by law who has full knowledge of Dr. Richmond's history of chemical dependency.

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Further, in the event that Dr. Richmond is so prescribed, dispensed or administered any controlled substance, carisoprodol, or tramadol, Dr. Richmond shall notify the Board in writing within seven days, providing the Board with the identity of the prescriber; the name of the drug Dr. Richmond received; the medical purpose for which she received said drug; the date such drug was initially received; and the dosage, amount, number of refills, and directions for use. Further, within thirty days of the date said drug is so prescribed, dispensed, or administered to her, Dr. Richmond shall provide the Board with either a copy of the written prescription or other written verification from the prescriber, including the dosage, amount, number of refills, and directions for use.

4. Dr. Richmond shall abstain completely from the use of alcohol.

Absences from Ohio

5. Dr. Richmond shall obtain permission from the Board for departures or absences from Ohio. Such periods of absence shall not reduce the probationary term, unless otherwise determined by motion of the Board for absences of three months or longer, or by the Secretary or the Supervising Member of the Board for absences of less than three months, in instances where the Board can be assured that probationary monitoring is otherwise being performed. Further, the Secretary and Supervising Member of the Board shall have the discretion to grant a waiver of part or all of the monitoring terms set forth in this Consent Agreement for occasional periods of absence of fourteen days or less. In the event that Dr. Richmond resides and/or is employed at a location that is within fifty miles of the geographic border of Ohio and any of its contiguous states, Dr. Richmond may travel between Ohio and that contiguous state without seeking prior approval of the Secretary or Supervising Member provided that Dr. Richmond is able to otherwise maintain full compliance with all other terms, conditions and limitations set forth in this Consent Agreement.

Releases; Quarterly Declarations and Appearances

6. Dr. Richmond shall provide authorization, through appropriate written consent forms, for disclosure of evaluative reports, summaries, and records, of whatever nature, by any and all parties that provide treatment or evaluation for Dr. Richmond's chemical dependency or related conditions, or for purposes of complying with this Consent Agreement, whether such treatment or evaluation occurred before or after the effective date of this Consent Agreement. To the extent permitted by law, the above-mentioned evaluative reports, summaries, and records are considered medical records for purposes of Section 149.43 of the Ohio Revised Code and are confidential pursuant to statute. Dr. Richmond further agrees to provide the Board written consent permitting any treatment provider from whom she obtains treatment to notify the Board in the event she fails to agree to or comply with any treatment contract or aftercare contract. Failure to provide such consent, or revocation of such consent, shall constitute a violation of this Consent Agreement.

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7. Dr. Richmond shall submit quarterly declarations under penalty of Board disciplinary action and/or criminal prosecution, stating whether there has been compliance with all the conditions of this Consent Agreement. The first quarterly declaration must be received in the Board's offices on the first day of the third month following the month in which this Consent Agreement becomes effective, or as otherwise requested by the Board. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.
8. Dr. Richmond shall appear in person for an interview before the full Board or its designated representative during the third month following the effective date of this Consent Agreement. Subsequent personal appearances must occur every three months thereafter, and/or as otherwise requested by the Board. If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.

Drug & Alcohol Screens; Drug Testing Facility and Collection Site

9. Dr. Richmond shall submit to random urine screenings for drugs and alcohol at least four times per month, or as otherwise directed by the Board. Dr. Richmond shall ensure that all screening reports are forwarded directly to the Board on a quarterly basis. The drug testing panel utilized must be acceptable to the Secretary of the Board, and shall include Dr. Richmond's drug(s) of choice.

Dr. Richmond shall abstain from the use of any substance and the consumption of poppy seeds or any other food or liquid that may produce a low level positive result in a toxicology screen. Dr. Richmond acknowledges that she understands that the consumption or use of such substances, including but not limited to substances such as mouthwash or hand cleaning gel, may cause a positive drug screen that may not be able to be differentiated from intentional ingestion, and therefore such consumption or use is prohibited under this Consent Agreement.

All such urine screenings for drugs and alcohol shall be conducted through a Board-approved drug testing facility and collection site pursuant to the global contract between said facility and the Board, that provides for the Board to maintain ultimate control over the urine screening process and to preserve the confidentiality of all positive screening results in accordance with Section 4731.22(F)(5), Ohio Revised Code, and the screening process shall require a daily call-in procedure. Further, in the event that the Board exercises its discretion, as provided in Paragraph 10 below, to approve urine screenings to be conducted at an alternative drug testing facility and/or collection site or a supervising physician, such approval shall be expressly contingent upon the Board retaining ultimate control over the urine screening process in a manner that preserves the aforementioned confidentiality of all positive screening results.

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Dr. Richmond shall submit, at her expense and on the day selected, urine specimens for drug and/or alcohol analysis. All specimens submitted by Dr. Richmond shall be negative, except for those substances prescribed, administered, or dispensed to her in conformance with the terms, conditions and limitations set forth in this Consent Agreement. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected or in such manner as the Board may request, shall constitute a violation of this Consent Agreement.

Further, within thirty days of the effective date of this Consent Agreement, Dr. Richmond shall enter into the necessary financial and/or contractual arrangements with the Board-approved drug testing facility and/or collection site in order to facilitate the urine screening process in the manner required by this Consent Agreement. Further, Dr. Richmond shall promptly provide to the Board written documentation of completion of such arrangements, including a copy of any contract entered into between Dr. Richmond and the Board-approved drug testing facility and/or collection site. Dr. Richmond's failure to timely complete such arrangements, or failure to timely provide written documentation to the Board of completion of such arrangements, shall constitute a violation of this Consent Agreement.

Dr. Richmond shall ensure that the urine screening process performed through the Board-approved drug testing facility and/or collection site requires a daily call-in procedure; that the urine specimens are obtained on a random basis; and that the giving of the specimen is witnessed by a reliable person. In addition, Dr. Richmond and the Board-approved drug testing facility and collection site shall assure that appropriate control over the specimen is maintained and shall immediately inform the Board of any positive screening results.

Dr. Richmond shall ensure that the Board-approved drug testing facility and/or collection site provides quarterly reports to the Board, in a format acceptable to the Board, verifying whether all urine screens have been conducted in compliance with this Consent Agreement, and whether all urine screens have been negative.

In the event that the Board-approved drug testing facility and/or collection site becomes unable or unwilling to serve as required by this Consent Agreement, Dr. Richmond must immediately notify the Board in writing, and make arrangements acceptable to the Board, pursuant to Paragraph 10 below, as soon as practicable. Dr. Richmond shall further ensure that the Board-approved drug testing facility and/or collection site also notifies the Board directly of its inability to continue to serve and the reasons therefore.

Dr. Richmond acknowledges that the Board expressly reserves the right to withdraw its approval of any drug testing facility and/or collection site in the event that the Secretary and Supervising Member of the Board determine that the drug testing facility and/or collection site has demonstrated a lack of cooperation in providing information to the Board or for any other reason.

10. Dr. Richmond and the Board agree that it is the intent of this Consent Agreement that Dr. Richmond shall submit her urine specimens to the Board-approved drug testing facility and collection site chosen by the Board. However, in the event that utilizing said Board-approved drug testing facility and/or collection site creates an extraordinary hardship upon Dr. Richmond, as determined in the sole discretion of the Board, then subject to the following requirements, the Board may approve an alternate drug testing facility and/or collection site, or a supervising physician, to facilitate the urine screening process for Dr. Richmond:
 - a. Within thirty days of the date upon which Dr. Richmond is notified of the Board's determination that utilizing the Board-approved drug testing facility and/or collection site constitutes an extraordinary hardship upon Dr. Richmond, she shall submit to the Board in writing for its prior approval the identity of either an alternate drug testing facility and collection site, or the name of a proposed supervising physician, to whom Dr. Richmond shall submit the required urine specimens. In approving a facility, entity, or an individual to serve in this capacity, the Board will give preference to a facility located near Dr. Richmond's residence or employment location, or to a physician who practices in the same locale as Dr. Richmond. Dr. Richmond shall ensure that the urine screening process performed through the alternate drug testing facility and/or collection site, or through the supervising physician, requires a daily call-in procedure; that the urine specimens are obtained on a random basis; and that the giving of the specimen is witnessed by a reliable person. In addition, Dr. Richmond acknowledges that the alternate drug testing facility and collection site, or the supervising physician, shall assure that appropriate control over the specimen is maintained and shall immediately inform the Board of any positive screening results.
 - b. Dr. Richmond shall ensure that the alternate drug testing facility and/or collection site, or the supervising physician, provides quarterly reports to the Board, in a format acceptable to the Board, verifying whether all urine screens have been conducted in compliance with this Consent Agreement, and whether all urine screens have been negative.
 - c. In the event that the designated alternate drug testing facility and/or collection site, or the supervising physician, becomes unable or unwilling to so serve, Dr. Richmond must immediately notify the Board in writing. Dr. Richmond shall further ensure that the previously designated alternate drug testing facility and collection site, or the supervising physician, also notifies the Board directly of the inability to continue to serve and the reasons therefore. Further, in order to ensure that there will be no interruption in her urine screening process, upon the previously approved alternate drug testing facility, collection site, or supervising physician becoming unable to serve, Dr. Richmond shall immediately commence urine screening at the Board-approved drug testing facility and collection site

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chosen by the Board, until such time, if any, that the Board approves a subsequent alternate drug testing facility, collection site, or supervising physician, if requested by Dr. Richmond.

- d. The Board expressly reserves the right to disapprove any entity or facility proposed to serve as Dr. Richmond's designated alternate drug testing facility and/or collection site, or any person proposed to serve as her supervising physician, or to withdraw approval of any entity, facility or person previously approved to so serve in the event that the Secretary and Supervising Member of the Board determine that any such entity, facility or person has demonstrated a lack of cooperation in providing information to the Board or for any other reason.
11. All screening reports required under this Consent Agreement from the Board-approved drug testing facility and/or collection site, or from the alternate drug testing facility and/or collection site or supervising physician, must be received in the Board's offices no later than the due date for Dr. Richmond's quarterly declaration. It is Dr. Richmond's responsibility to ensure that reports are timely submitted.
12. The Board retains the right to require, and Dr. Richmond agrees to submit, blood, urine, breath, saliva and/or hair specimens for screening for drugs and alcohol, for analysis of therapeutic levels of medications that may be prescribed for Dr. Richmond, or for any other purpose, at Dr. Richmond's expense upon the Board's request and without prior notice. Dr. Richmond's refusal to submit a specimen upon request of the Board shall result in a minimum of one year of actual license suspension. Further, the collection of such specimens shall be witnessed by a representative of the Board, or another person acceptable to the Secretary or Supervising Member of the Board.

Rehabilitation Program

13. Within thirty days of the effective date of this Consent Agreement, Dr. Richmond shall undertake and maintain participation in an alcohol and drug rehabilitation program, such as A.A., N.A., C.A., or Caduceus, no less than three times per week. Substitution of any other specific program must receive prior Board approval.

Dr. Richmond shall submit acceptable documentary evidence of continuing compliance with this program, including submission to the Board of meeting attendance logs, which must be received in the Board's offices no later than the due date for Dr. Richmond's quarterly declarations.

14. Immediately upon completion of any required treatment for chemical dependency, Dr. Richmond shall enter into an aftercare contract with a Board-approved treatment provider and shall maintain continued compliance with the terms of said aftercare contract, provided that, where the terms of the aftercare contract conflict with the terms of this Consent Agreement, the terms of this Consent Agreement shall control.

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CONDITIONS FOR REINSTATEMENT

15. The Board shall not consider reinstatement or restoration of Dr. Richmond's certificate to practice osteopathic medicine and surgery until all of the following conditions are met:
 - a. Dr. Richmond shall submit an application for reinstatement or restoration, as appropriate, accompanied by appropriate fees, if any.
 - b. Dr. Richmond shall demonstrate to the satisfaction of the Board that she can resume practice in compliance with acceptable and prevailing standards of care under the provisions of her certificate. Such demonstration shall include but shall not be limited to the following:
 - i. Certification from a treatment provider approved under Section 4731.25 of the Revised Code that Dr. Richmond has successfully completed any required inpatient treatment, including at least twenty-eight days of inpatient or residential treatment for chemical abuse/dependence, as set forth in Rules 4731-16-02 and 4731-16-08, Ohio Administrative Code, completed consecutively.
 - ii. Evidence of continuing full compliance with, or successful completion of, a post-discharge aftercare contract with a treatment provider approved under Section 4731.25 of the Revised Code. Such evidence shall include, but not be limited to, a copy of the signed aftercare contract. The aftercare contract must comply with rule 4731-16-10 of the Administrative Code.
 - iii. Evidence of continuing full compliance with this Consent Agreement.
 - iv. Two written reports indicating that Dr. Richmond's ability to practice has been assessed and that she has been found capable of practicing according to acceptable and prevailing standards of care. The reports shall be made by physicians knowledgeable in the area of addictionology and who are either affiliated with a current Board-approved treatment provider or otherwise have been approved in advance by the Board to provide an assessment of Dr. Richmond. Further, the two aforementioned physicians shall not be affiliated with the same treatment provider or medical group practice. Prior to the assessments, Dr. Richmond shall provide the evaluators with copies of patient records from any evaluations and/or treatment that she has received, and a copy of this Consent Agreement. The reports from the evaluators shall include any recommendations for treatment, monitoring, or supervision of Dr. Richmond, and any conditions, restrictions, or limitations that should be

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imposed on Dr. Richmond's practice. The reports shall also describe the basis for the evaluator's determinations.

All reports required pursuant to this paragraph shall be based upon examinations occurring within the three months immediately preceding any application for reinstatement. Further, at the discretion of the Secretary and Supervising Member of the Board, the Board may request an updated assessment and report if the Secretary and Supervising Member determine that such updated assessment and report is warranted for any reason.

- v. In the event that the Board initiates future formal proceedings against Dr. Richmond, including but not limited to issuance of a Notice of Opportunity for Hearing, Dr. Richmond shall be ineligible for reinstatement until such proceedings are fully resolved by ratification by the Board of a subsequent Consent Agreement or issuance by the Board of a final Board Order.
- c. Dr. Richmond shall enter into a written consent agreement including probationary terms, conditions and limitations as determined by the Board within 180 days of the date upon which all the above-specified conditions for reinstatement or restoration have been completed or, if the Board and Dr. Richmond are unable to agree on the terms of a written Consent Agreement, then Dr. Richmond further agrees to abide by any terms, conditions and limitations imposed by Board Order after a hearing conducted pursuant to Chapter 119. of the Ohio Revised Code. The Board shall provide notice to Dr. Richmond that said hearing has been scheduled, advising Dr. Richmond of her hearing rights, and stating the date, time, and location of the hearing at which the Board will present its evidence, after which the Board will make a determination of the matter by Board Order.

Further, upon reinstatement of Dr. Richmond's certificate to practice osteopathic medicine and surgery in this state, the Board shall require continued monitoring which shall include, but not be limited to, compliance with the written consent agreement entered into before reinstatement or with conditions imposed by Board Order after a hearing conducted pursuant to Chapter 119. of the Revised Code. Moreover, upon termination of the consent agreement or Board Order, Dr. Richmond shall submit to the Board for at least two years annual progress reports made under penalty of Board disciplinary action or criminal prosecution stating whether Dr. Richmond has maintained sobriety.

- 16. In the event that Dr. Richmond has not been engaged in the active practice of osteopathic medicine and surgery for a period in excess of two years prior to application for reinstatement, the Board may exercise its discretion under Section 4731.222, Ohio Revised Code, to require additional evidence of Dr. Richmond's fitness to resume practice.

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REQUIRED REPORTING BY LICENSEE

17. Within thirty days of the effective date of this Consent Agreement, Dr. Richmond shall provide a copy of this Consent Agreement to all employers or entities with which she is under contract to provide health care services (including but not limited to third party payors) or is receiving training; and the Chief of Staff at each hospital where she has privileges or appointments. Further, Dr. Richmond shall promptly provide a copy of this Consent Agreement to all employers or entities with which she contracts to provide health care services, or applies for or receives training, and the Chief of Staff at each hospital where she applies for or obtains privileges or appointments. In the event that Dr. Richmond provides any health care services or health care direction or medical oversight to any emergency medical services organization or emergency medical services provider, within thirty days of the effective date of this Consent Agreement Dr. Richmond shall provide a copy of this Consent Agreement to the Ohio Department of Public Safety, Division of Emergency Medical Services. Further, Dr. Richmond shall provide the Board with one of the following documents as proof of each required notification within thirty days of the date of each such notification: (1) the return receipt of certified mail within thirty days of receiving that return receipt, (2) an acknowledgement of delivery bearing the original ink signature of the person to whom a copy of the Consent Agreement was hand delivered, (3) the original facsimile-generated report confirming successful transmission of a copy of the Consent Agreement to the person or entity to whom a copy of the Consent Agreement was faxed, or (4) an original computer-generated printout of electronic mail communication documenting the email transmission of a copy of the Consent Agreement to the person or entity to whom a copy of the Consent Agreement was emailed.

18. Within thirty days of the effective date of this Consent Agreement, Dr. Richmond shall provide a copy of this Consent Agreement to the proper licensing authority of any state or jurisdiction in which she currently holds any professional license, as well as any federal agency or entity, including but not limited to the Drug Enforcement Agency, through which she currently holds any license or certificate. Dr. Richmond further agrees to provide a copy of this Consent Agreement at time of application to the proper licensing authority of any state in which she applies for any professional license or reinstatement of any professional license. Further, Dr. Richmond shall provide the Board with one of the following documents as proof of each required notification within thirty days of the date of each such notification: (1) the return receipt of certified mail within thirty days of receiving that return receipt, (2) an acknowledgement of delivery bearing the original ink signature of the person to whom a copy of the Consent Agreement was hand delivered, (3) the original facsimile-generated report confirming successful transmission of a copy of the Consent Agreement to the person or entity to whom a copy of the Consent Agreement was faxed, or (4) an original computer-generated printout of electronic mail communication documenting the email transmission of a copy of the Consent Agreement to the person or entity to whom a copy of the Consent Agreement was emailed.

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19. Dr. Richmond shall promptly provide a copy of this Consent Agreement to all persons and entities that provide Dr. Richmond chemical dependency treatment or monitoring. Further, Dr. Richmond shall provide the Board with one of the following documents as proof of each required notification within thirty days of the date of each such notification: (1) the return receipt of certified mail within thirty days of receiving that return receipt, (2) an acknowledgement of delivery bearing the original ink signature of the person to whom a copy of the Consent Agreement was hand delivered, (3) the original facsimile-generated report confirming successful transmission of a copy of the Consent Agreement to the person or entity to whom a copy of the Consent Agreement was faxed, or (4) an original computer-generated printout of electronic mail communication documenting the email transmission of a copy of the Consent Agreement to the person or entity to whom a copy of the Consent Agreement was emailed.
20. Dr. Richmond shall notify the Board in writing of any change of principal practice address or residence address within thirty days of such change.

DURATION/MODIFICATION OF TERMS

The above-described terms, conditions and limitations may be amended or terminated in writing at any time upon the agreement of both parties. In the event that the Board initiates future formal proceedings against Dr. Richmond, including but not limited to issuance of a Notice of Opportunity for Hearing, this Consent Agreement shall continue in full force and effect until such time that it is superseded by ratification by the Board of a subsequent Consent Agreement or issuance by the Board of a final Board Order.

In the event that any term, limitation, or condition contained in this Consent Agreement is determined to be invalid by a court of competent jurisdiction, Dr. Richmond and the Board agree that all other terms, limitations, and conditions contained in this Consent Agreement shall be unaffected.

FAILURE TO COMPLY

If, in the discretion of the Secretary and Supervising Member of the Board, Dr. Richmond appears to have violated or breached any term or condition of this Consent Agreement, the Board reserves the right to institute formal disciplinary proceedings for any and all possible violations or breaches, including but not limited to, alleged violations of the laws of Ohio occurring before the effective date of this Consent Agreement.

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ACKNOWLEDGMENTS/LIABILITY RELEASE

Dr. Richmond acknowledges that she has had an opportunity to ask questions concerning the terms of this Consent Agreement and that all questions asked have been answered in a satisfactory manner.

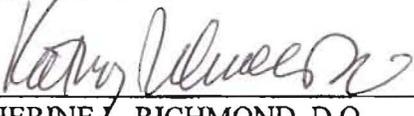
Any action initiated by the Board based on alleged violations of this Consent Agreement shall comply with the Administrative Procedure Act, Chapter 119., Ohio Revised Code.

Dr. Richmond hereby releases the Board, its members, employees, agents, officers and representatives jointly and severally from any and all liability arising from the within matter.

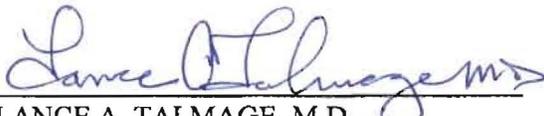
This Consent Agreement shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. Further, this information may be reported to appropriate organizations, data banks and governmental bodies. Dr. Richmond acknowledges that her social security number will be used if this information is so reported and agrees to provide her social security number to the Board for such purposes.

EFFECTIVE DATE

It is expressly understood that this Consent Agreement is subject to ratification by the Board prior to signature by the Secretary and Supervising Member and shall become effective upon the last date of signature below.



KATHERINE L. RICHMOND, D.O.



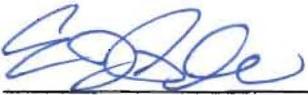
LANCE A. TALMAGE, M.D.
Secretary

1/10/11

DATE

1-12-11

DATE



ERIC J. PLINKE
Attorney for Dr. Richmond



RAYMOND J. ALBERT
Supervising Member

1/11/11

DATE

1/12/11

DATE

STEP I CONSENT AGREEMENT
KATHERINE L. RICHMOND, D.O.
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Cheryl D. Pokorny
CHERYL D. POKORNY
Enforcement Attorney

January 11, 2011
DATE

**CONSENT AGREEMENT
BETWEEN
KATHERINE L. RICHMOND, D.O.
AND
THE STATE MEDICAL BOARD OF OHIO**

This CONSENT AGREEMENT is entered into by and between KATHERINE L. RICHMOND, D.O., and THE STATE MEDICAL BOARD OF OHIO, a state agency charged with enforcing Chapter 4731., Ohio Revised Code.

KATHERINE L. RICHMOND, D.O., enters into this Agreement being fully informed of her rights under Chapter 119., Ohio Revised Code, including the right to representation by counsel and the right to a formal adjudicative hearing on the issues considered herein.

This CONSENT AGREEMENT is entered into on the basis of the following stipulations, admissions and understandings:

- A. THE STATE MEDICAL BOARD OF OHIO is empowered by Section 4731.22(B)(26), Ohio Revised Code, to limit, revoke, suspend a certificate, refuse to register or reinstate an applicant, or reprimand or place on probation the holder of a certificate for "impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice."
- B. THE STATE MEDICAL BOARD OF OHIO enters into this CONSENT AGREEMENT in lieu of formal proceedings based upon the violation of Section 4731.22(B)(26), Ohio Revised Code, as set forth in Paragraph D below, and expressly reserves the right to institute formal proceedings based upon any other violations of Chapter 4731. of the Revised Code, whether occurring before or after the effective date of this Agreement.
- C. KATHERINE L. RICHMOND, D.O., is applying for licensure to practice osteopathic medicine and surgery in the State of Ohio.
- D. KATHERINE L. RICHMOND, D.O., ADMITS that she has suffered from opiate dependency.

DOCTOR RICHMOND further ADMITS that she received inpatient treatment at The Cleveland Clinic, a Board approved treatment facility in Cleveland, Ohio, from October 21, 1992, to November 24, 1992.

DOCTOR RICHMOND further ADMITS that she received subsequent treatment at The Gables in Rochester, Minnesota, from December 30, 1992, to March 30, 1993.

DOCTOR RICHMOND STATES and THE STATE MEDICAL BOARD OF OHIO ACKNOWLEDGES that DOCTOR RICHMOND has submitted documentation from Earthrise Recovery Services in Chagrin Falls, Ohio, that she successfully attended and completed Group Aftercare, has participated in individual counseling sessions since her discharge from The Gables in March 1993, and has maintained sobriety since 1992.

Wherefore, in consideration of the foregoing and mutual promises hereinafter set forth, and in lieu of any formal proceedings at this time, KATHERINE L. RICHMOND, D.O., shall be granted a certificate to practice osteopathic medicine and surgery in the State of Ohio, and knowingly and voluntarily agrees with THE STATE MEDICAL BOARD OF OHIO, (hereinafter BOARD), to the following PROBATIONARY terms, conditions and limitations:

1. DOCTOR RICHMOND shall obey all federal, state and local laws, and all rules governing the practice of medicine in Ohio;
2. DOCTOR RICHMOND shall submit quarterly declarations under penalty of BOARD disciplinary action or criminal prosecution, stating whether there has been compliance with all the conditions of this CONSENT AGREEMENT. The first quarterly declaration must be received in the Board's offices on the first day of the third month following the month in which the consent agreement becomes effective, provided that if the effective date is on or after the 16th day of the month, the first quarterly declaration must be received in the Board's offices on the first day of the fourth month following. Subsequent quarterly declarations must be received in the BOARD's offices on or before the first day of every third month;
3. DOCTOR RICHMOND shall appear in person for quarterly interviews before the BOARD or its designated representative, or as otherwise directed by the BOARD.

If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled. (Example: The first quarterly appearance is scheduled for February, but based upon the doctor's serious personal illness she is permitted to delay appearance until April. The next appearance will still be scheduled for May, three months after the appearance as originally scheduled.) Although the BOARD will normally give DOCTOR RICHMOND written notification of scheduled appearances, it is DOCTOR RICHMOND's responsibility to know when personal appearances will occur. If she does not receive written notification from the BOARD by the end of the month in which the appearance should have occurred, DOCTOR RICHMOND shall immediately submit to the BOARD a written request to be notified of her next scheduled appearance;

4. In the event that DOCTOR RICHMOND should leave Ohio for three (3) continuous months, or reside or practice outside the State, DOCTOR RICHMOND must notify the BOARD in writing of the dates of departure and return. Periods of time spent outside Ohio will not apply to the reduction of this period under the CONSENT AGREEMENT, unless otherwise determined by motion of the BOARD in instances where the BOARD can be assured that probationary monitoring is otherwise being performed;
5. In the event DOCTOR RICHMOND is found by the Secretary of the Board to have failed to comply with any provision of this agreement, and is so notified of that deficiency in writing, such period(s) of noncompliance will not apply to the reduction of the probationary period under the CONSENT AGREEMENT;
6. DOCTOR RICHMOND shall abstain completely from the personal use or possession of drugs, except those prescribed, dispensed or administered to her by another so authorized by law who has full knowledge of DOCTOR RICHMOND's history of chemical dependency;
7. DOCTOR RICHMOND shall abstain completely from the use of alcohol;
8. DOCTOR RICHMOND shall submit to random urine screenings for drugs and alcohol on a bi-weekly basis or as otherwise directed by the BOARD. DOCTOR RICHMOND shall ensure that all screening reports

are forwarded directly to the BOARD on a quarterly basis. The drug testing panel utilized must be acceptable to the Secretary of the Board;

Within thirty (30) days of the effective date of this Agreement, DOCTOR RICHMOND shall submit to the BOARD for its prior approval the name of a supervising physician to whom DOCTOR RICHMOND shall submit the required urine specimens. The supervising physician shall ensure that the urine specimens are obtained on a random basis, that the giving of the specimen is witnessed by a reliable person, and that appropriate control over the specimen is maintained. In addition, the supervising physician shall immediately inform the BOARD of any positive screening results;

DOCTOR RICHMOND shall ensure that the supervising physician provides quarterly reports to the BOARD, on forms approved or provided by the BOARD, verifying whether all urine screens have been conducted in compliance with this CONSENT AGREEMENT, whether all urine screens have been negative, and whether the supervising physician remains willing and able to continue in his responsibilities.

In the event that the designated supervising physician becomes unable or unwilling to so serve, DOCTOR RICHMOND must immediately notify the BOARD in writing, and make arrangements acceptable to the BOARD for another supervising physician as soon as practicable. DOCTOR RICHMOND shall further ensure that the previously designated supervising physician also notifies the BOARD directly of the inability to continue to serve and the reasons therefor;

All screening reports and supervising physician reports required under this paragraph must be received in the BOARD's offices no later than the due date for DOCTOR RICHMOND's quarterly declaration. It is DOCTOR RICHMOND's responsibility to ensure that reports are timely submitted;

9. The BOARD retains the right to require, and DOCTOR RICHMOND agrees to submit, blood or urine specimens for analysis upon request and without prior notice. DOCTOR RICHMOND's refusal to submit a blood or urine specimen upon request of the BOARD shall result in a minimum of one year of actual license suspension;
10. Within thirty (30) days of the effective date of this CONSENT AGREEMENT, DOCTOR RICHMOND shall submit for the BOARD's

prior approval the name of a monitoring physician, who shall monitor DOCTOR RICHMOND and provide the BOARD with quarterly reports on the doctor's progress and status. DOCTOR RICHMOND shall ensure that such reports are forwarded to the BOARD on a quarterly basis. In the event that the designated monitoring physician becomes unable or unwilling to serve in this capacity, DOCTOR RICHMOND must immediately so notify the BOARD in writing, and make arrangements acceptable to the BOARD for another monitoring physician as soon as practicable. DOCTOR RICHMOND shall further ensure that the previously designated monitoring physician also notifies the BOARD directly of the inability to continue to serve and the reasons therefor;

All monitoring physician reports required under this paragraph must be received in the BOARD's offices no later than the due date for DOCTOR RICHMOND's quarterly declaration. It is DOCTOR RICHMOND's responsibility to ensure that reports are timely submitted;

11. Within thirty (30) days of the effective date of this CONSENT AGREEMENT, DOCTOR RICHMOND shall undertake and maintain participation in an alcohol and drug rehabilitation program, such as A.A., N.A., or Caduceus, approved in advance by the BOARD specifically for DOCTOR RICHMOND, no less than three (3) times per week. Substitution of any specific program must receive prior BOARD approval.

DOCTOR RICHMOND shall submit with each quarterly declaration required under Paragraph 2 of this CONSENT AGREEMENT acceptable documentary evidence of continuing compliance with this program;

12. DOCTOR RICHMOND shall maintain continued compliance with the terms of the aftercare contract entered into with her treatment provider, provided, that where terms of the aftercare contract conflict with terms of this Agreement, the terms of this Agreement shall control;
13. DOCTOR RICHMOND shall provide continuing authorization, through appropriate written consent forms, for disclosure by her treatment provider to the BOARD, to treating and monitoring physicians, and to others involved in the monitoring process, of information necessary for them to fulfill their respective duties and obligations;
14. Within thirty (30) days of the effective date of this Agreement, DOCTOR RICHMOND shall provide a copy of this CONSENT

AGREEMENT to all employers or entities with which she is under contract to provide physician services or is receiving training; and the Chief of Staff at each hospital where she has privileges or appointments. Further, DOCTOR RICHMOND shall provide a copy of this consent agreement to all employers or entities with which she contracts to provide physician services, or applies for or receives training, and the chief of staff at each hospital where she applies for or obtains privileges or appointments; and

15. Within thirty (30) days of the effective date of this Agreement, DOCTOR RICHMOND shall provide a copy of this CONSENT AGREEMENT by certified mail, return receipt requested, to the proper licensing authority of any state or jurisdiction in which he currently holds a license to practice. DOCTOR RICHMOND further agrees to provide a copy of this CONSENT AGREEMENT by certified mail, return receipt requested, at time of application to the proper licensing authority of any state in which she applies for licensure or reinstatement of licensure. Further, DOCTOR RICHMOND shall provide this BOARD with a copy of the return receipt as proof of notification within thirty (30) days of receiving that return receipt.
16. DOCTOR RICHMOND AGREES that if any declaration or report required by this agreement is not received in the BOARD's offices on or before its due date, DOCTOR RICHMOND shall cease practicing beginning the day next following receipt from the BOARD of notice of non-receipt, either by writing, by telephone, or by personal contact until the declaration or report is received in the BOARD offices. Any practice during this time period shall be considered unlicensed practice in violation of Section 4731.41 of the Revised Code.
17. DOCTOR RICHMOND AGREES that if, without prior permission from the BOARD, she fails to submit to random screenings for drugs and alcohol at least frequently as required by Paragraph 8 of this CONSENT AGREEMENT, she shall cease practicing immediately upon receipt from the BOARD of notice of the violation and shall refrain from practicing for thirty (30) days for the first instance of a single missed screen. Practice during this time period shall be considered unlicensed practice in violation of Section 4731.41 of the Revised Code.
18. DOCTOR RICHMOND AGREES that if she fails to participate in an alcohol and drug rehabilitation program at least as frequently as required by Paragraph 11 of this CONSENT AGREEMENT, she shall cease

practicing immediately upon receipt from the BOARD of notice of the violation, and shall refrain from practicing for fifteen (15) days following a first missed meeting. Practice during this time period shall be considered unlicensed practice in violation of Section 4731.41 of the Revised Code.

This Agreement shall remain in force for a minimum of three (3) years prior to any request for termination of said Agreement. Otherwise, the above described terms, limitations and conditions may be amended or terminated in writing at any time upon the agreement of both parties.

If, in the discretion of the Secretary and Supervising Member of THE STATE MEDICAL BOARD OF OHIO, DOCTOR RICHMOND appears to have violated or breached any term or condition of this Agreement, THE STATE MEDICAL BOARD OF OHIO reserves the right to institute formal disciplinary proceedings for any and all possible violations or breaches, including, but not limited to, alleged violations of the laws of Ohio occurring before the effective date of this Agreement.

If the Secretary and Supervising Member of the BOARD determine that there is clear and convincing evidence that DOCTOR RICHMOND has violated any term, condition or limitation of this CONSENT Agreement, DOCTOR RICHMOND agrees that the violation, as alleged, also constitutes clear and convincing evidence that her continued practice presents a danger of immediate and serious harm to the public for purposes of initiating a summary suspension pursuant to Section 4731.22(D), Ohio Revised Code.

DOCTOR RICHMOND acknowledges that she has had an opportunity to ask questions concerning the terms of this Agreement and that all questions asked have been answered in a satisfactory manner.

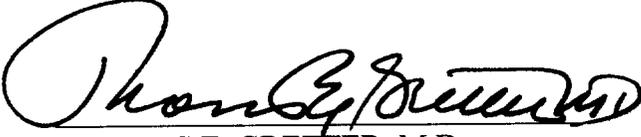
Any action initiated by the BOARD based on alleged violations of this CONSENT AGREEMENT shall comply with the Administrative Procedure Act, Chapter 119., Ohio Revised Code.

DOCTOR RICHMOND hereby releases THE STATE MEDICAL BOARD OF OHIO, its members, employees, agents, officers and representatives jointly and severally from any and all liability arising from the within matter.

This CONSENT AGREEMENT shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. It is expressly understood that this CONSENT AGREEMENT is subject to ratification by the BOARD prior to signature by the Secretary and Supervising Member and that it shall become effective upon the last date of signature below.

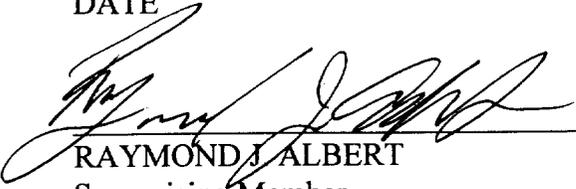
Further, this information may be reported to appropriate organizations, data banks and governmental bodies.


KATHERINE L. RICHMOND, D.O.

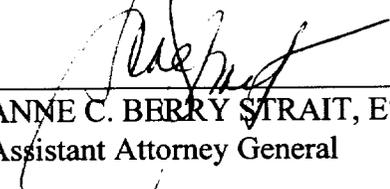

THOMAS E. GREYTER, M.D.
Secretary

4-9-96
DATE

4/17/96
DATE


RAYMOND J. ALBERT
Supervising Member

4/17/96
DATE


ANNE C. BERRY STRAIT, ESQ.
Assistant Attorney General

4/17/96
DATE