

BEFORE THE STATE MEDICAL BOARD OF OHIO

IN THE MATTER OF :

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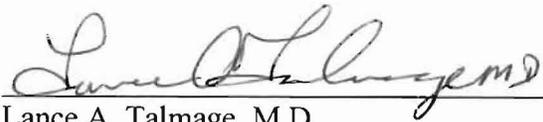
KIRA SCHOFIELD, M.D. :

**ENTRY OF ORDER**

On June 6, 2011, Kira Schofield, M.D., executed a Surrender of her license to practice medicine and surgery in Ohio with consent to revocation, which document is attached hereto and fully incorporated herein.

Wherefore, upon ratification by the Board of the surrender, it is hereby ORDERED that Certificate No. 35-067598 authorizing Kira Schofield, M.D., to practice medicine and surgery in the state of Ohio be permanently REVOKED.

This Order is hereby entered upon the Journal of the State Medical Board of Ohio for the 9<sup>th</sup> day of June 2011, and the original thereof shall be kept with said Journal.



Lance A. Talmage, M.D.  
Secretary

(SEAL)

June 9, 2011  
Date

STATE OF OHIO  
THE STATE MEDICAL BOARD  
PERMANENT SURRENDER OF CERTIFICATE  
TO PRACTICE MEDICINE AND SURGERY

**Do not sign this agreement without reading it. An individual who permanently surrenders a certificate issued by the Board is forever thereafter ineligible to hold a certificate to practice or to apply to the Board for reinstatement of the certificate or issuance of any new certificate. You are permitted to be accompanied, represented and advised by an attorney, at your own expense, before deciding to sign this voluntary agreement.**

I, Kira Schofield, M.D., am aware of my rights to representation by counsel, the right of being formally charged and having a formal adjudicative hearing, and do hereby freely execute this document and choose to take the actions described herein.

I, Kira Schofield, M.D., admit that I am no longer able to perform my duties as a physician as the result of physical disabilities, which disabilities also impact my mental health. Accordingly, I do hereby voluntarily, knowingly, and intelligently surrender my certificate to practice medicine and surgery, License #35.067598, to the State Medical Board of Ohio [Board], thereby relinquishing all rights to practice medicine and surgery in Ohio.

I understand that as a result of the surrender herein I am no longer permitted to practice medicine and surgery in any form or manner in the State of Ohio.

I agree that I shall be ineligible for, and shall not apply for, reinstatement or restoration of certificate to practice medicine and surgery License #35.067598 or issuance of any other certificate pursuant to the authority of the State Medical Board of Ohio, on or after the date of signing this Permanent Surrender of Certificate to Practice Medicine and Surgery. Any such attempted reapplication shall be considered null and void and shall not be processed by the Board.

I hereby authorize the State Medical Board of Ohio to enter upon its Journal an Order permanently revoking my certificate to practice medicine and surgery, License #35.067598, in conjunction with which I expressly waive the provision of Section 4731.22(B), Ohio Revised Code, requiring that six (6) Board Members vote to revoke said certificate, and further expressly and forever waive all rights as set forth in Chapter 119., Ohio Revised Code, including but not limited to my right to counsel, right to a hearing, right to present evidence, right to cross-examine witnesses, and right to appeal the Order of the Board revoking my certificate to practice medicine and surgery.

Permanent Surrender of Certificate  
Kira Schofield, M.D.

I, Kira Schofield, M.D., hereby release the Board, its members, employees, agents, officers and representatives jointly and severally from any and all liability arising from the within matter.

This document 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. I, Kira Schofield, M.D., acknowledge that my social security number will be used if this information is so reported and agree to provide my social security number to the Board for such purposes.

I stipulate and agree that I am taking the action described herein in lieu of formal disciplinary proceedings pursuant to Sections 4731.22(B)(19), Ohio Revised Code, and I understand that because of my decision not to submit to a Board-ordered evaluation on or about May 2, 2011, a default legal presumption was established of violation of Sections 4731.22(B)(19) and (B)(26), Ohio Revised Code, by operation of law.

**EFFECTIVE DATE**

It is expressly understood that this Permanent Surrender of Certificate 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.

Kira Schofield MD  
KIRA SCHOFIELD, M.D.

Lance A. Talmage MD  
LANCE A. TALMAGE, M.D.  
Secretary

June 6, 2011  
DATE

6-9-11  
DATE

Karen A. Carroll  
KAREN A. CARROLL  
Attorney for Dr. Schofield

Raymond J. Albert MD  
RAYMOND J. ALBERT *by authorization*  
Supervising Member

June 6, 2011  
DATE

June 8, 2011  
DATE

(signature on next page)

Permanent Surrender of Certificate  
Kira Schofield, M.D.

*Cheryl D. Pokorny*  
CHERYL D. POKORNY  
Enforcement Attorney

*6/2/11*  
\_\_\_\_\_  
DATE

CONFIDENTIAL  
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**CONSENT AGREEMENT  
BETWEEN  
KIRA (KISLAN) SCHOFIELD, M.D.  
AND  
THE STATE MEDICAL BOARD OF OHIO**

This CONSENT AGREEMENT is entered into by and between KIRA (KISLAN) SCHOFIELD, M.D. and THE STATE MEDICAL BOARD OF OHIO, a state agency charged with enforcing Chapter 4731., Ohio Revised Code.

KIRA (KISLAN) SCHOFIELD, M.D. 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 is empowered by Section 4731.22(B)(3), 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 "a plea of guilty to, or a judicial finding of guilt of, a violation of any federal or state law regulating the possession, distribution, or use of any drug."
- C. THE STATE MEDICAL BOARD OF OHIO is empowered by Section 4731.22(B)(11), 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 "a plea of guilty to, or a judicial finding of guilt of, a misdemeanor committed in the course of practice."

**CONSENT AGREEMENT  
KIRA (KISLAN) SCHOFIELD, M.D.  
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- D. THE STATE MEDICAL BOARD OF OHIO enters into this CONSENT AGREEMENT in lieu of formal proceedings based upon the violation of Sections 4731.22(B)(26),(B)(3), and (B)(11), Ohio Revised Code, 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.
- E. KIRA (KISLAN) SCHOFIELD, M.D. has applied for a certificate to practice medicine and surgery in the State of Ohio.
- F. KIRA (KISLAN) SCHOFIELD, M.D. ADMITS that on or about January 22, 1991, in the Court of Common Pleas of Allegheny County, Pennsylvania, she entered a plea of guilty to two misdemeanors of Distribution by a Practitioner to a Drug Dependent Person in violation of 35 P.S. Section 780-113(a)(13) which entailed the distribution of a controlled substance to herself. Pursuant to her plea agreement, DOCTOR SCHOFIELD surrendered her D.E.A. Certificate of Registration for a specified period.
- G. KIRA (KISLAN) SCHOFIELD, M.D. further ADMITS that she completed in-patient treatment in October of 1991 at Riverside Hospital in Columbus, Ohio a Board approved treatment provider, for habitual or excessive use of drugs. DOCTOR SCHOFIELD became addicted to Tylenol with Codeine and Xanax following treatment for migraine headaches.
- F. KIRA (KISLAN) SCHOFIELD, M.D. further ADMITS that she has been actively involved with out-patient chemical dependency treatment with the Professionals Education Network in Monroeville, Pennsylvania, since November of 1991 and with the Physicians Health Program administered by the Pennsylvania Health Society. DOCTOR SCHOFIELD has been compliant with aftercare and has abstained from the use of any drugs or alcohol since October 4, 1991.

Wherefore, in consideration of the foregoing and mutual promises hereinafter set forth, and in lieu of any formal proceedings at this time, KIRA (KISLAN) SCHOFIELD, M.D. shall be granted a certificate to practice 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:

**CONSENT AGREEMENT  
KIRA (KISLAN) SCHOFIELD, M.D.  
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1. DOCTOR SCHOFIELD shall obey all federal, state and local laws, and all rules governing the practice of medicine in Ohio;
2. DOCTOR SCHOFIELD shall submit written declarations every six (6) months under penalty of BOARD disciplinary action or criminal prosecution, stating whether there has been compliance with all the conditions of this CONSENT AGREEMENT including a specific statement as to whether she has maintained sobriety as that term is used in Rule 4731-16-01(E), Ohio Administrative Code;
3. DOCTOR SCHOFIELD shall appear in person for annual interviews before the BOARD or its designated representative, or as otherwise directed by the BOARD;
4. DOCTOR SCHOFIELD 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 SCHOFIELD's history of chemical dependency;
5. DOCTOR SCHOFIELD shall abstain completely from the use of alcohol;
6. The BOARD retains the right to require, and DOCTOR SCHOFIELD agrees to submit, blood or urine specimens for analysis upon request and without prior notice;
7. DOCTOR SCHOFIELD shall contact an appropriate impaired physicians committee, approved by the BOARD, to arrange for assistance in recovery or aftercare;
8. Within thirty (30) days of the effective date of this Agreement, DOCTOR SCHOFIELD shall provide a copy of this CONSENT AGREEMENT to all employers or entities with which she

CONSENT AGREEMENT  
KIRA (KISLAN) SCHOFIELD, M.D.  
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contracts to provide physician services or receive training; and the Chief of Staff at each hospital where she has, applies for, or obtains privileges or appointments.

This Agreement shall remain in force for a minimum of two (2) 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 SCHOFIELD appears to have violated or breached any terms or conditions 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.

DOCTOR SCHOFIELD 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 SCHOFIELD 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 shall become effective upon the last date of signature below.

2025 RELEASE UNDER E.O. 14176  
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Further, this information may be reported to appropriate organizations, data banks and governmental bodies.

Kira (Kislan) Schofield MD

KIRA (KISLAN) SCHOFIELD, M.D.

8-30-94  
DATE

Carla S. O'Day MD

CARLA S. O'DAY, M.D.  
Secretary

9/14/94  
DATE

Raymond J. Albert

RAYMOND J. ALBERT  
Supervising Member

9/14/94  
DATE

Anne C. Berry Strait

ANNE C. BERRY STRAIT, ESQ.  
Assistant Attorney General

9/14/94  
DATE