



State Medical Board of Ohio

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

November 8, 2006

Mercer Truett Bridges, Jr., M.D.
5259 Vernon Springs Trail
Atlanta, GA 30327

Dear Dr. Bridges:

Please find enclosed a certified copy of the Findings, Order and Journal Entry approved and confirmed by the State Medical Board meeting in regular session on November 8, 2006.

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 setting forth the Order appealed from and the grounds of the appeal must be commenced by the filing of an original Notice of Appeal with the State Medical Board of Ohio and a copy with the Franklin County Court of Common Pleas. 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 of the Ohio Revised Code.

Very truly yours,

A handwritten signature in black ink, appearing to read "Lance A. Talmage".

Lance A. Talmage, M.D.
Secretary

LAT:jam
Enclosures

CERTIFIED MAIL RECEIPT NO. 7004 2510 0006 9801 5042
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Mailed 11-9-06

Mercer Truett Bridges, Jr., M.D.
Page 2

Duplicate Mailing:

1070 Powers Place
Alpharetta, GA 30004

CERTIFIED MAIL RECEIPT NO. 7004 2510 0006 9801 5059
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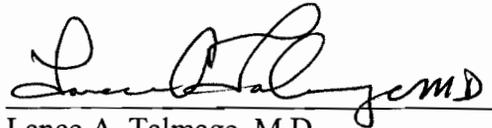
Roy E. Barnes, Esq.
The Barnes Law Group, LLC
P.O. Box 489
Marietta, GA 30061

CERTIFIED MAIL RECEIPT NO. 7004 2510 0006 9801 5066
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CERTIFICATION

I hereby certify that the attached copy of the Findings, Order and Journal Entry approved by the State Medical Board, meeting in regular session on November 8, 2006, constitutes a true and complete copy of the Findings, Order and Journal Entry in the Matter of Mercer Truett Bridges, Jr., M.D., as it appears in the Journal of the State Medical Board of Ohio.

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



Lance A. Talmage, M.D.
Secretary

(SEAL)

November 8, 2006

Date

BEFORE THE STATE MEDICAL BOARD OF OHIO

IN THE MATTER OF

*

*

MERCER TRUETT BRIDGES, JR., M.D.

*

FINDINGS, ORDER AND JOURNAL ENTRY

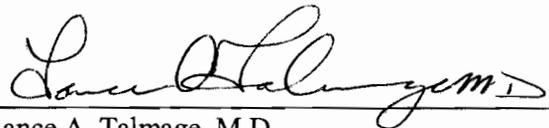
By letter dated September 13, 2006, notice was given to Mercer Truett Bridges, Jr., M.D. that the State Medical Board intended to consider disciplinary action regarding his license to practice medicine and surgery in the State of Ohio, and that he was entitled to a hearing if such hearing was requested within thirty (30) days of the mailing of said notice. In accordance with Section 119.07, Ohio Revised Code, said notice was sent via certified mail, return receipt requested, to the address of record of Dr. Bridges, that being 5259 Vernon Springs Trail, Atlanta, Georgia 30327. A duplicate copy of the notice was sent via certified mail, return receipt requested to 1070 Powers Place, Alpharetta, Georgia 30004.

Signed certified mail receipts were returned to the Medical Board offices documenting proper service of the notice. However, no hearing request has been received from Dr. Bridges and more than thirty (30) days have now elapsed since the mailing of that notice.

WHEREFORE, having reviewed the September 13, 2006, Notice of Opportunity for Hearing, including the following documents of the Georgia Composite State Board of Medical Examiners: the February 3, 2005, Voluntary Surrender; the December 8, 2000, Public Order Terminating Probation; the July 18, 2000, Second Order Modifying Terms; the July 10, 1998, Order Modifying terms; the June 4, 1997, Consent Order; the November 5, 1992, Order Terminating Probation; and the December 7, 1989, Consent Order, as well as the affidavit of Debra L. Jones, Continuing Medical Education and Renewal Officer, which are attached hereto and incorporated herein, the Board hereby finds that there is reliable, probative and substantial evidence to support the allegations as set forth in the Notice of Opportunity for Hearing issued on September 13, 2006. Further, the Board hereby ORDERS that the license of Mercer Truett Bridges, Jr., M.D., to practice medicine and surgery in the State of Ohio be REVOKED.

This Order shall become effective IMMEDIATELY.

This Order is hereby entered upon the Journal of the State Medical Board of Ohio for the 8th day of November 2006 and the original thereof shall be kept with said Journal.



Lance A. Talmage, M.D.
Secretary

(SEAL)

November 8, 2006
Date

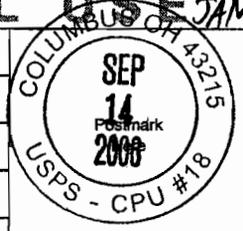
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Total Postage & Fees	\$ 4.08



Sent To
Mercer Truett Bridges, Jr., M.D.
 of **5259 Vernon Springs Trail**
 C **Atlanta, GA 30327**

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>1. To whom should I deliver this mailpiece? If you are responsible for delivery, please check the appropriate box. <input type="checkbox"/> If a residential address, please check this box. <input type="checkbox"/> If a business address, please check this box. <input type="checkbox"/> If a field office, please check this box. (For the return receipt permit.)</p>	<p>1. Is delivery attempted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>2. And, address to: Mercer Truett Bridges, Jr., M.D. 5259 Vernon Springs Trail Atlanta, GA 30327</p>	<p>2. Is delivery attempted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Service type: <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Signature Required</p>
<p>3. Article Number (If using non-service label)</p>	<p>4. Signature of addressee</p>

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<i>CITE -</i>	Postage	\$ 1.83
<i>BRIDGES</i>	Certified Fee	2.40
	Return Receipt Fee (Endorsement Required)	1.85
	Restricted Delivery Fee (Endorsement Required)	
	Total Postage & Fees	\$ 6.08

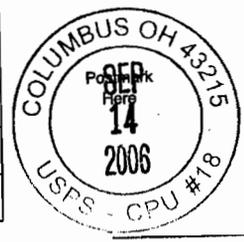
Sent To **Roy E. Barnes, Esq.**

Street, A or PO Box **The Barnes Law Group, LLC**

City, State **P.O. Box 489**
Marietta, GA 30061

PS Form 3800, June 2002 See Reverse for Instructions

7004 2510 0006 9801 8142



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>Roy E. Barnes, Esq. The Barnes Law Group, LLC P.O. Box 489 Marietta, GA 30061</p>	<p><i>[Signature]</i></p> <p>Received by _____</p> <p>Address _____</p> <p>City _____</p>
<p>7004 2510 0006 9801 8142</p>	

PS Form 3800, February 2004 10245-02-000-100

AFFIDAVIT

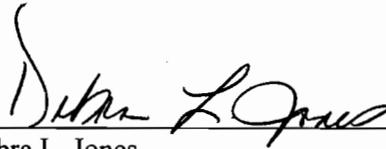
The State of Ohio
Franklin County, SS

I, Debra L. Jones, being duly cautioned and sworn, do hereby depose and say that:

- 1) I am employed by the State Medical Board of Ohio (hereinafter, "The Board")
- 2) I serve the Board in the position of Continuing Medical Education and Renewal Officer.
- 3) In such position I am the responsible custodian of all public licensee records maintained by the Board pertaining to individuals who have received certificates issued pursuant to Chapter 4731., Ohio Revised Code.
- 4) I have this day carefully examined the records of the Board pertaining to Mercer Truett Bridges, Jr., M.D.
- 5) Based on such examination, I have found the address of record of Dr. Bridges to be:

5259 Vernon Springs Trail
Atlanta, Georgia 30327

- 6) Further, Affiant Sayeth Naught.



Debra L. Jones
Continuing Medical Education and Renewal
Officer

Sworn to and signed before me, Barbara A. Jacobs, Notary Public,
this 16th day of October, 2006.



Notary Public

BARBARA ANN JACOBS, ATTORNEY AT LAW
NOTARY PUBLIC, STATE OF OHIO
My commission has no expiration date.
Section 147.03 R.C.



State Medical Board of Ohio

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

September 13, 2006

Mercer Truett Bridges, Jr., M.D.
5259 Vernon Springs Trail
Atlanta, GA 30327

Dear Doctor Bridges:

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 medicine and surgery, or to reprimand you or place you on probation for one or more of the following reasons:

- (1) On or about February 3, 2005, the Composite State Board of Medical Examiners [Georgia Board] accepted the Voluntary Surrender of your license to practice as a physician in the State of Georgia. You executed your Voluntary Surrender on January 25, 2005, thereby acknowledging that said surrender shall have the same effect as a revocation of your license.

Further, on or about December 7, 1989, you entered into, and the Georgia Board approved, a Consent Order [1989 Consent Order]; on or about November 5, 1992, the Georgia Board issued an Order Terminating Probation; and on or about June 4, 1997, you entered into, and the Georgia Board approved, a Consent Order [1997 Consent Order]. Subsequently, the Georgia Board issued an Order Modifying Terms, a Second Order Modifying Terms, and a Public Order Terminating Probation on July 10, 1998, July 18, 2000, and December 8, 2000, respectively. Copies of the Voluntary Surrender, which includes the Georgia Board Acceptance of Surrender; 1989 Consent Order; Order Terminating Probation; 1997 Consent Order; Order Modifying Terms; Second Order Modifying Terms; and Public Order Terminating Probation are attached hereto and incorporated herein.

The Georgia Board Acceptance of Surrender, 1989 Consent Order, and 1997 Consent Order, as alleged in paragraph (1) above, individually and/or collectively, constitute "[a]ny of the following actions taken by the agency responsible for regulating the practice of medicine and surgery, osteopathic medicine and surgery, podiatric medicine and surgery, or the limited branches of medicine in another jurisdiction, for any reason other than the nonpayment of fees: the limitation, revocation, or suspension of an individual's license to practice; acceptance of an individual's license surrender; denial of

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a license; refusal to renew or reinstate a license; imposition of probation; or issuance of an order of censure or other reprimand," as that clause is used in Section 4731.22(B)(22), 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.

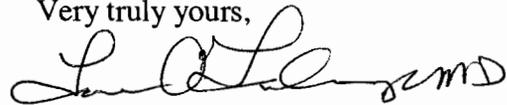
You are further advised that, if you timely request a hearing, you are entitled to appear at such hearing in person, or by your attorney, or by such other representative as is permitted to practice before this agency, or you may present your position, arguments, or contentions in writing, and that at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



Lance A. Talmage, M.D.
Secretary

LAT/blt
Enclosures

CERTIFIED MAIL # 7004 2510 0006 9801 8166
RETURN RECEIPT REQUESTED

Mercer Truett Bridges, Jr., M.D.

Page 3

Duplicate mailing: 1070 Powers Place
Alpharetta, GA 30004

CERTIFIED MAIL # 7004 2510 0006 9801 8159
RETURN RECEIPT REQUESTED

cc: Roy E. Barnes, Esq.
The Barnes Law Group, LLC
P.O. Box 489
Marietta, GA 30061

CERTIFIED MAIL # 7004 2510 0006 9801 8142
RETURN RECEIPT REQUESTED

BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF:)

Mercer Truett Bridges, MD)

License No.: 32520)

DOCKET NO.

FEB 03 2005

DOCKET NUMBER

2005 0102

26 JAN 5 2005

VOLUNTARY SURRENDER

I, Mercer Truett Bridges, MD, holder of License No. 32520, to practice as a physician in the State of Georgia, hereby freely, knowingly, and voluntarily surrender said license to the Board. I hereby acknowledge that this surrender shall have the same effect as a revocation of my license, and I knowingly forfeit and relinquish all right, title and privilege to practice this profession in the State of Georgia, unless and until such time as my license may be reinstated, in the sole discretion of the Board.

I understand that I have a right to a hearing in this matter, and I freely, knowingly, and voluntarily waive such right. I also understand that should any request for reinstatement be entertained by the Board, the Board shall have access to the entire investigative file in this matter.

This surrender shall become effective immediately upon acceptance thereof by the Board. I understand that this document will be considered to be a public record entered as the final disposition of disciplinary proceedings presently pending or which could be brought against me, and that this action shall be considered to be and may be recorded as a final order of the Board.

[Signature]
LICENSEE Mercer Truett Bridges, MD

Sworn to and subscribed before me this 25th day of Jan, 2005.

[Signature]
NOTARY PUBLIC
Commission Expires: _____

Notary Public, Cobb County, Georgia
My Commission Expires February 25, 2006

ACCEPTANCE OF SURRENDER

The Voluntary Surrender of License No. 32520 is hereby accepted by the Board, this 3rd day of February, 2005.

BY: Roland Summers, MD
President
Composite State Board of Medical Examiners

ATTEST: *[Signature]*
LaSharn Hughes, Executive Director
Composite State Board of Medical Examiners

(BOARD SEAL)

**BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS
STATE OF GEORGIA**

IN THE MATTER OF:

**MERCER TRUETT BRIDGES, JR., M.D.)
LICENSE #032520)**

**Composite State Board
of Medical Examiners**

DEC 08 2000

DOCKET NUMBER

97-730

PUBLIC ORDER TERMINATING PROBATION

WHEREAS, the Composite State Board of Medical Examiners ("Board") entered a Public Consent Order in the above-styled matter on June 5, 1997, which placed on probation Respondent's license to practice medicine in the State of Georgia, and

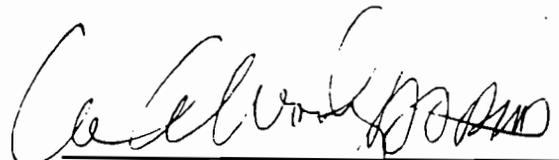
WHEREAS, Respondent has petitioned to have the probation terminated, and

WHEREAS, the Board has determined that the Respondent has complied with all the terms and conditions of the probation,

NOW, THEREFORE, IT IS HEREBY ORDERED that the probation of Respondent's license to practice medicine in the State of Georgia be TERMINATED.

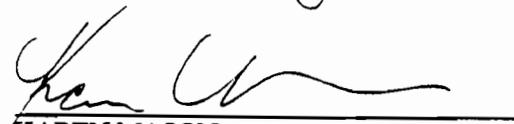
SO ORDERED THIS 8TH DAY OF DECEMBER 2000.

BOARD SEAL



WILLIAM A. WOOLERY, D.O.
President

ATTEST:



KAREN MASON
Executive Director

OHIO STATE MEDICAL BOARD 945

MAR 08 2005

BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS

STATE OF GEORGIA

IN THE MATTER OF:)

Composite State Board
of Medical Examiners

MERCER TRUETT BRIDGES, Jr., M.D.,)
License No. 032520.)

DOCKET NO. 97-730 1 8 2000

Respondent.)

DOCKET NUMBER
97-730

SECOND ORDER MODIFYING TERMS

A Consent Order, Docket No. 97-730, having been docketed in the above-captioned matter on June 5, 1997 (the "Consent Order"), and an Order Modifying Terms (the "Modification Order"), Docket No. 97-730, having been docketed in the above-captioned matter on July 10, 1998, and the Composite State Board of Medical (the "Board"), and Mercer Truett Bridges, Jr., M.D. (the "Respondent") having agreed hereto, it is hereby ordered and agreed as follows:

1.

The Consent Order is hereby further amended by deleting in its entirety from the Section entitled "Order", paragraph 1(i) entitled DEA Restriction, and inserting in its place the following paragraph:

(i) DEA Use. There shall be no restrictions on the legitimate prescribing, administering, ordering or dispensing of Schedule II, II-N, III, III-N, IV and V controlled substances in the usual course of Respondent's practice. In accordance with Board rules, Respondent shall not prescribe, administer, order or dispense controlled substances and/or dangerous drugs for personal or family use. Respondent's use of DEA shall be further governed by the following terms of probation:

1. Triplicate Prescriptions. Respondent shall utilize a triplicate prescriptions system for all Schedule II and II-N controlled substances prescribed by him. Each

OHIO STATE MEDICAL BOARD
MAR 0 8 2005

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BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS
STATE OF GEORGIA

DOCKET NUMBER
97-730

IN THE MATTER OF:
Mercer Truett Bridges, M.D.

*
*
*
*

DOCKET NO. 97-730

LICENSE NO. 035861
032510

ORDER MODIFYING TERMS

The Consent Order previously docketed in this matter on June 5, 1997 is hereby modified as follows:

Respondent shall be allowed to utilize DEA for prescribing Schedule II's and IV's.

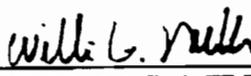
This 10th day of July, 1998.

COMPOSITE STATE BOARD OF MEDICAL EXAMINERS



Sheila Smith, M.D.
BOARD PRESIDENT

ATTEST:


WILLIAM G. MILLER, JR., JOINT SECRETARY
STATE EXAMINING BOARDS

OHIO STATE MEDICAL BOARD

MAR 08 2005

JUN 05 1997

BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS

STATE OF GEORGIA

DOCKET NUMBER

97-731

IN THE MATTER OF:

Mercer Truett Bridges, Jr., M.D.
Medical License No: 032520

DOCKET NO. 97-731

Respondent.

CONSENT ORDER

By agreement of the Composite State Board of Medical Examiners and Mercer Truett Bridges, Jr., M.D., Respondent, the following disposition of this matter is entered pursuant to the provisions of the Georgia Administrative Procedure Act, codified as O.C.G.A §50-13-13(a)(4).

FINDINGS OF FACT

1.

Respondent is licensed to practice medicine in Georgia, but his license is currently suspended.

2.

Respondent was first licensed in Georgia in December, 1989 under a Consent Order because of his chemical dependency on Fentanyl. In mid 1995, Respondent became impaired due to a relapse on Fentanyl. On November 3, 1995, Respondent entered into another Consent Order with the Board in which he agreed that he would not practice until further order of the Board, that he would complete an inpatient treatment program for chemical dependence, and that

STATE OF GEORGIA MEDICAL BOARD

MAR 08 2005

he would completely abstain from the consumption of mood altering substances.

3.

Respondent completed primary treatment for substance use at Ridgeview Institute and enrolled in the Physicians Well-being Program in January 1996. He participates in peer group meetings and has demonstrated good progress in his recovery. Respondent has professional advocacy for the return to the practice of medicine.

4.

Respondent waives any further findings of fact with respect to the above matter. However, Respondent shall be allowed to submit a supplemental statement for the investigative file in explanation and mitigation of the matters stated herein for consideration by the Board prior to its review of this Consent Order.

CONCLUSIONS OF LAW

Respondent's condition and/or prior conduct constitute sufficient grounds for the Board to discipline Respondent's license to practice medicine in the State of Georgia under O.C.G.A. Chs. 1 and 34, T. 43, as amended. Respondent hereby waives any further conclusions of law with respect to the above-styled matter.

ORDER

The Composite State Board of Medical Examiners, having considered the particular facts and circumstances of this case,

OHIO STATE MEDICAL BOARD

MAR 08 2005

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hereby orders, and Respondent hereby agrees, that Respondent may resume the practice of medicine in the State of Georgia, subject to the following terms and conditions:

1.

Commencing on the effective date of this Consent Order, Respondent's license shall be placed on probation until discharged by the Board, with the following terms and conditions of probation:

(a) Practice Limitation. Respondent is permitted to resume the active practice of medicine. However, Respondent shall not return to the practice of anesthesiology without obtaining prior written permission from the Board.

(b) Treatment/Aftercare. Respondent shall remain in treatment or aftercare with Dr. Lenton or another therapist acceptable to the Board. Respondent shall provide the Board with a copy of his continuing aftercare contract. Respondent shall also abide by all terms of his continuing care agreement.

(c) Participation in Support Group. Respondent shall affiliate with and regularly participate in meetings of Alcoholics Anonymous, Narcotics Anonymous, Caduceus Club or another similar support group acceptable to the Board in accordance with his aftercare contract or as otherwise required by the Board.

(d) Abstain from Mood Altering Substances. Respondent shall completely abstain from the consumption of mood altering substances, including alcohol, except as prescribed by a duly

licensed practitioner for a legitimate medical purpose. If such treatment entails the use of narcotics or other potentially addictive substances, a consultation with a Board approved addictionologist shall be obtained at the direction of the medical coordinator.

(e) Supervision and Monitoring. Respondent shall designate an acceptable supervising ("workplace") physician and an acceptable primary care ("monitoring") physician experienced in addictionology, and provide a copy of this Consent Order to both physicians. Such physicians shall sign a statement to be submitted in conjunction with this Consent Order, as evidence having read and understood same and having agreed to serve as Respondent's supervising and monitoring physicians.

(f) Quarterly Reports. Respondent shall submit or cause to be submitted quarterly reports from his supervising and monitoring physicians or therapists regarding his performance mental/physical condition by March 31, June 30, September 30 and December 31, including a report on any medication being prescribed to Respondent. Failure to submit or have such reports submitted in a timely manner shall be considered a violation of this Consent Order. It is expected that said supervising and monitoring physicians shall be in communication with each other and will immediately report any change in Respondent's condition which would render Respondent unable to practice with reasonable skill and safety to patients. By executing this Consent Order Respondent specifically consents to such supervising and

monitoring physicians or any other facility where Respondent obtains medical treatment reporting upon Respondent's condition notwithstanding any privilege provided by state or federal law. Respondent shall obtain prior Board approval through the medical coordinator or executive director for any change in supervising or monitoring physicians.

(g) Random Drug/Alcohol Screens. The Board or its representative or Respondent's supervising or monitoring physicians shall have the authority at any time to order Respondent to undergo random witnessed and immediate drug/alcohol urine, biological fluid or blood screen analysis at Respondent's expense. Proper chain of custody shall be maintained and positive results shall be confirmed by such means as may be required to ensure the validity of such screening.

(h) Further evaluation. At any time during the period of probation, the Board shall also have the authority to order Respondent to undergo a physical or mental evaluation by physicians designated by the Board. Respondent shall execute such releases as may be required for the Board to obtain the results of such evaluations.

(i) DEA Restriction. Respondent shall not possess a DEA permit or any triplicate forms or Federal order forms. Until further order of the Board, Respondent hereby relinquishes his right to prescribe, administer, dispense, order or possess (except as prescribed, administered, or dispensed to the Respondent by another person authorized by law to do so)

controlled substances as defined by the federal or Georgia Controlled Substances Act.

(j) Use of Physician's Assistant. If Respondent employ physician's assistant in his practice, Respondent shall not utilize the physician's assistant to perform tasks which are otherwise prohibited by the terms of this Consent Order, or otherwise utilize the services of the physician's assistant in such a way as to circumvent any restriction, term or condition outlined herein.

(k) Periods of Residency Outside Georgia. In the event Respondent should leave Georgia to reside or practice outside Georgia for periods longer than thirty (30) consecutive days, Respondent shall notify the Board in writing of the dates of departure and return. Periods of residency or practice outside of Georgia as well as periods when Respondent is not actively engaged in the practice of medicine or is on inactive licensure status will not apply to the reduction of Respondent's probationary period, except as authorized by the Board. Respondent shall advise the Board of any change in address of record or employment status.

(l) Abide By Laws, Rules and Terms. Respondent shall abide by all State and Federal laws regulating the practice of medicine or relating to drugs, the Rules and Regulations of the Composite State Board of Medical Examiners and the terms of this Consent Order and probation. If Respondent shall fail to abide by such laws, rules or terms, or if it should appear from

monitoring reports submitted to the Board that Respondent is otherwise unable to practice medicine with reasonable skill and safety to patients, Respondent's license shall be subject to further discipline, including revocation, upon substantiation thereof after notice and hearing, and if revoked, the Board in its discretion may determine that the license should be permanently revoked and not subject to reinstatement.

Respondent further agrees that any violation of this Consent Order shall be deemed to be sufficient to authorize the Board to order summary suspension of Respondent's license, pending further proceedings, pursuant to the provisions of the Georgia Administrative Procedure Act, O.C.G.A. § 50-13-18(c)(1), or any other statute authorizing emergency action, but Respondent understands that Respondent shall be entitled to an expedited hearing to substantiate such violation(s), if the Board exercises such right.

(m) Termination of Probation. Respondent shall not be eligible to petition for termination of probation until Respondent has maintained his sobriety for a period of five years. At such time, Respondent may petition for termination by certifying under oath before a notary public that he has complied with all conditions of probation and by providing documentation supporting discharge from probation. Respondent shall also certify under oath that he has been continuously sober for a period of at least five years. The Composite State Board of Medical Examiners shall review and evaluate the

practice of Respondent prior to lifting the probation. At such time, the Board shall be authorized to restore all rights and privileges incident to the license of Respondent, unless the Board has received information that Respondent has not complied with the terms of probation or has otherwise failed to comply with the laws and rules regulating the practice of medicine. Should the Board determine that reasonable cause exists for maintaining Respondent's license on a probationary status, the Board shall notify Respondent of its intent to extend the probationary period, and Respondent may respond to such notification in writing or request an appearance before the Board or its representative as in a non-contested case. In any event, this Consent Order shall remain in effect pending a final determination by the Board and notification that the probationary period has terminated.

2.

This Consent Order shall be a Public Order and may be disseminated accordingly.

3.

Respondent acknowledges that Respondent has read this Consent Order and understands its contents. Respondent understands that he has the right to appear before the Board on this matter, and freely, knowingly and voluntarily waives such right by entering into this Consent Order. He understands that this Consent Order will not become effective until approved by the Composite State Board of Medical Examiners and docketed by

the Joint Secretary, State Examining Boards. He further understands and agrees that a representative of the Department of Law may be present during presentation of this Consent Order to the Board and that the Board shall have the authority to review the investigative file and all relevant evidence in considering this Consent Order. Respondent further understands that this Consent Order, once approved, shall constitute a public record which may be disseminated as a disciplinary action of the Board. However, if the Consent Order is not approved, it shall not constitute an admission against interest in this proceeding, or prejudice the right of the Board to adjudicate this matter. Respondent consents to the terms and conditions contained herein.

Approved, this 4th day of June, 1997.

COMPOSITE STATE BOARD OF MEDICAL EXAMINERS

BY:

RUNETTE FLOWERS, M.D.
RUNETTE FLOWERS, M.D.
President

(BOARD SEAL)

ATTEST:

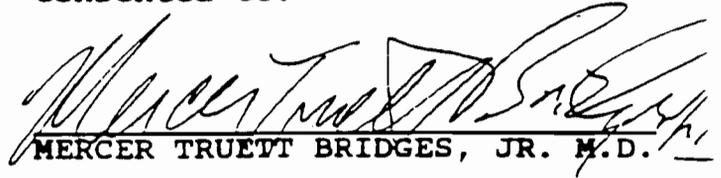
WILLIAM G. MILLER, JR.
WILLIAM G. MILLER, JR.
Joint Secretary
State Examining Boards

OHIO STATE MEDICAL BOARD

MAR 08 2005

Consented to:

Witness of Signature:
Sworn to and subscribed
before me this 25th day


MERCER TRUETT BRIDGES, JR. M.D.


NOTARY PUBLIC
My Commission expires: 7/25/99

MONITORING AND SUPERVISING PHYSICIAN STATEMENT

The undersigned supervising and monitoring physicians acknowledge that they have read the attached Consent Order and agree to serve as Respondent's supervising and monitoring physicians.

Sworn to and subscribed before me this 25th day of April, 1997.

Thomas F. Brumby

NOTARY PUBLIC
My commission expires:

Notary Public, DeKalb County, Georgia
My Commission Expires March 10, 2001

(Signed) FULLIANT
Name: Monitoring
Supervising (Workplace) Physician
Address: ph

Telephone:

Sworn to and subscribed before me this 25th day of April, 1997.

Thomas F. Brumby

NOTARY PUBLIC
My commission expires:

Notary Public, DeKalb County, Georgia
My Commission Expires March 10, 2001

(Signed) FULLIANT
Name:
Supervising (Workplace) Physician
Address:

Telephone:

FILED IN OFFICE
Joint Secretary
State Examining Board

NOV 5 1992

DOCKET NUMBER
89-551

BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS

STATE OF GEORGIA

IN THE MATTER OF:

Mercer Truett Bridges, Jr., M.D.,
License No. 32520,
Respondent.

* DOCKET NO. 89-551
*
* AG NO. 94856-89-ROL
*
*

ORDER TERMINATING PROBATION

The Respondent having demonstrated compliance with the Consent Order entered in this matter and having petitioned for discharge from probation, and the Board being possessed of no information which would warrant extension thereof under the terms of the order, such probation is hereby terminated.

This 5th day of November, 1992.

COMPOSITE STATE BOARD OF MEDICAL EXAMINERS

W. Gordon Irwin, D.O.
President

(BOARD SEAL)

William G. Miller
WILLIAM G. MILLER, JR.
Joint Secretary
State Examining Boards

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DEC 7 1989

BEFORE THE COMPOSITE STATE BOARD OF MEDICAL EXAMINERS
STATE OF GEORGIA

DOCKET NUMBER
89-557

IN THE MATTER OF: *
*
MERCER TRUETT BRIDGES, JR., M.D., * AG FILE NO. 94856-89-ROL
*
Applicant. *

CONSENT ORDER

By agreement of the Composite State Board of Medical Examiners and Mercer Truett Bridges, Jr., M.D., Applicant, the following disposition of this matter is entered pursuant to the provisions of the Georgia Administrative Procedure Act, codified as O.C.G.A. § 50-13-13(a)(4).

FINDINGS OF FACT

1.

The Applicant has applied for a license to practice medicine in Georgia by endorsement of National Board Scores.

2.

In April, 1987, during the second year of a residency program in anesthesiology, Applicant took the drug Fentanyl, a controlled substance, for his own use. After being confronted, Applicant entered a treatment program for chemical dependency at the Impaired Health Professionals Program at Georgia Drug and Alcohol Associates, Smyrna, Georgia. Respondent has continued to participate in an aftercare program under the auspices of Talbott Recovery System.

3.

The Board has received numerous letters in support of the Applicant's application for licensure.

4.

The Applicant waives any further findings of fact with respect to the above matter. However, the Applicant shall be allowed to submit a supplemental statement for the investigative file in explanation and mitigation of the matters stated herein for consideration by the Board prior to its review of this Consent Order.

CONCLUSIONS OF LAW

The Applicant's condition and/or prior conduct constitute sufficient grounds for refusal of a license to practice medicine in the State of Georgia under O.C.G.A. Chs. 1 and 34, T. 43, as amended. The Applicant hereby waives any further conclusions of law with respect to the above-styled matter.

ORDER

The Composite State Board of Medical Examiners, having considered the particular facts and circumstances of this case, hereby orders, and the Applicant hereby agrees, that the Applicant shall be issued a license to practice medicine in the State of Georgia, subject to the following conditions:

1.

Commencing on the effective date of this Consent Order, the Applicant's license shall be placed on probation for five (5) years, with the following terms and conditions of probation:

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(a) The Applicant shall continue to participate in an aftercare program acceptable to the Board. Applicant shall execute an ongoing aftercare contract and provide the Board with a copy of his aftercare agreement/contract.

(b) Applicant shall affiliate with and regularly participate in meetings of Alcoholics Anonymous, Narcotics Anonymous, Caduceus Club or another similar support group acceptable to the Board in accordance with his aftercare contract or as otherwise required by the Board.

(c) The Applicant shall completely abstain from the consumption of mood altering substances, including alcohol, except as prescribed by a duly licensed practitioner for a legitimate purpose.

(d) Until further order of the Board, the Applicant agrees to undergo and be subject to random, witnessed, immediate alcohol/drug screening at his own expense at the request of the Board or its representative, or the Applicant's supervising or monitoring physicians.

(e) At any time during the period of probation, the Board shall also have the authority to order the Applicant to undergo a physical or mental evaluation by physicians OHIO STATE MEDICAL BOARD designated by the Board.

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(f) Applicant shall abide by all terms of his aftercare contract as a condition of probation and supply a copy thereof to the Board.

~~(g) The Applicant may possess a DEA permit. Until further~~
order of the Board, however, the Applicant shall only be

authorized to prescribe, administer, dispense, or order controlled substances for institutionalized patients for consumption on the institutional premises.

(h) Applicant shall provide a copy of this Consent Order to an acceptable supervising ("workplace") physician and an acceptable primary care ("monitoring") physician experienced in addictionology who shall sign a statement to be submitted in conjunction with the Consent Order as evidence of having read and understood same. The Applicant shall submit or cause to be submitted quarterly reports from said supervising and monitoring physicians regarding his performance and mental/physical condition by March 31, June 30, September 30 and December 31, including a report on any medication being prescribed to the Applicant.

Failure to submit or have such reports submitted in a timely manner shall be considered a violation of this Consent Order. It is expected that said supervising and monitoring physicians shall be in communication with each other and will immediately report any change in Applicant's condition which would render Applicant unable to practice with reasonable skill and safety to patients. By executing this Consent Order, Applicant specifically consents to such supervising and monitoring physicians or any other facility where Applicant obtains medical treatment reporting upon Applicant's condition, notwithstanding any privilege provided by state or federal law. Applicant shall obtain prior Board approval through the medical

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coordinator or executive director for any change in supervising or monitoring physicians.

(i) The Applicant shall supply a copy of this Consent Order, once approved and docketed, within 10 days from receipt by Applicant, to each hospital or other institution in Georgia where he maintains staff privileges of any kind, and to any person with whom Applicant is associated in practice, including other physicians and physician's assistant(s) or to any person or entity for whom Applicant is employed as a physician in the State of Georgia.

Applicant shall also be required to disclose the existence of and provide a copy of this Consent Order to such individuals or entities in connection with any future application for institutional appointment, associated practice, utilization of a physician's assistant, or employment as a physician in the State of Georgia while this Consent Order is in effect. By executing this Consent Order, Applicant specifically consents to any such entity or individuals reporting to the Board information which would affect his ability to practice medicine with reasonable skill and safety to patients, notwithstanding any privilege provided by state or federal law.

(j) If Applicant employs a physician's assistant in his practice, Applicant shall not utilize the physician's assistant to perform tasks which are otherwise prohibited by the terms of this Consent Order, or otherwise utilize

to circumvent any restriction, term or condition outlined herein.

(k) In the event the Applicant should leave Georgia to reside or practice outside of Georgia for periods longer than thirty (30) consecutive days, the Applicant shall notify the Board in writing of the dates of departure and return. Periods of residency or practice outside of Georgia as well as periods when Applicant is not actively engaged in the practice of medicine or is on inactive licensure status will not apply to the reduction of the Applicant's probationary period, except as authorized by the Board. The Applicant shall advise the Board of any change in address of record or employment status.

(l) The Applicant shall abide by all State and Federal laws regulating the practice of medicine or relating to drugs, the Rules and Regulations of the Composite State Board of Medical Examiners, and the terms of this Consent Order and probation. If the Applicant shall fail to abide by such laws, rules or terms, or if it should appear from monitoring reports submitted to the Board that the Applicant is otherwise unable to practice medicine with reasonable skill and safety to patients, the Applicant's license shall be subject to further discipline, including revocation, upon substantiation thereof after notice and hearing, and if revoked the Board in its discretion may determine that the license should be permanently revoked and not subject to reinstatement. Applicant hereby agrees

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that any violation of this Consent Order shall be deemed to be sufficient to authorize the Board to order summary suspension of the Applicant 's license, pending further proceedings, pursuant to the provisions of the Georgia Administrative Procedure Act, O.C.G.A. § 50-13-18(c)(1), or any other statute authorizing emergency action, but Applicant understands that he shall be entitled to an expedited hearing to substantiate such violation(s), if the Board exercises such right.

(m) Within 60 days from the scheduled date of termination of probation, Applicant may petition for termination of probation by certifying under oath before a notary public that the Applicant has complied with all conditions of probation and by providing documentation supporting discharge from probation. The Composite State Board of Medical Examiners shall review and evaluate the practice of the Applicant prior to lifting the probation. At such time, the Board shall be authorized to restore all rights and privileges incident to the license of the Applicant, unless it extends, maintains, or imposes such restrictions or conditions as the Board deems appropriate, based upon the information presented to it pursuant to this Consent Order. Notice of intent to extend, maintain or impose such restrictions or conditions beyond the designated probationary period shall be given to the Applicant, and Applicant may respond to such notice in writing or request

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This Consent Order shall remain in effect pending a final determination by the Board.

2.

This Consent Order may be disseminated in the same manner as orders containing public reprimands.

3.

This Consent Order, if approved by the Composite State Board of Medical Examiners, shall in no way be construed as condoning the Applicant's prior condition or conduct, and shall not be construed as a waiver of any of the lawful rights possessed by the Board.

4.

Applicant, Mercer Truett Bridges, Jr., M.D., acknowledges that he has read this Consent Order, and understands its contents. He understands that he has the right to appear before the Board in this matter, and freely, knowingly and voluntarily waives such right by entering into this Consent Order. He understands that this Consent Order will not become effective until approved by the Composite State Board of Medical Examiners and docketed by the Joint Secretary, State Examining Boards. He further understands and agrees that the Board shall have the authority to review the investigative file and all relevant evidence in considering this Consent Order. He further understands that this Consent Order, once approved, shall constitute a public record which may be disseminated as a disciplinary action of the Board. However if the Consent Order is not approved, it shall not constitute an admission

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against interest in this proceeding, or prejudice the right of the Board to adjudicate this matter. Applicant consents to the terms and conditions contained herein.

Approved, this 7th day of December, 1989.

COMPOSITE STATE BOARD OF MEDICAL EXAMINERS

BY: Thomas J. Busey, Jr.
THOMAS J. BUSEY, JR.
President

(BOARD SEAL)

ATTEST: William G. Miller
WILLIAM G. MILLER, JR.
Joint Secretary
State Examining Boards

Consented to:

Mercer Truett Bridges, Jr. MD
MERCER TRUETT BRIDGES, JR., M.D.
Applicant

Sworn to and subscribed before me this 23rd day of October, 1989.

Nellie Richardson

NOTARY PUBLIC

My commission expires:

Notary Public, Hamilton County, Ohio
My Commission Expires June 27, 1993

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MONITORING AND SUPERVISING PHYSICIAN STATEMENT

I, the undersigned supervising and monitoring physicians
pledge that they have read the attached Consent Order and
to serve as Applicant's supervising and monitoring
physicians.

I have read and subscribed
to this 23rd day
October, 1989.

W.D. Richardson

PUBLIC
Mission expires:

Cherokee County, Georgia
Mission Expires June 27, 1993

(Signed)

John P. Kepler, M.D.
Name: JOHN P. KEPLER, M.D.
Supervising (Workplace) Physician
Address: ANCHOR HOSPITAL
5452 YORKTOWN DR
COLLEGE PARK, GA. 30349
Telephone: (404) 991-6044

I have read and subscribed
to this 23rd day
October, 1989.

W.D. Richardson

PUBLIC
Mission expires:

DeKalb County, Georgia
Mission Expires June 27, 1993

(Signed)

Philip O. Wilson, MD
Name: PHILIP O. WILSON, MD
Monitoring Physician
Program: TALSOTT RECOVERY SYSTEM
Address: 1669 PHOENIX PARK #102
ATLANTA, GA 30349
Telephone: 404-994-0185

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