

Oregon Medical Board  
**BOARD ACTION REPORT**  
**September 15, 2010**

The information contained in this report summarizes new, interim, and final actions taken by the Oregon Medical Board between August 16, 2010 and September 15, 2010.

Scanned copies of Interim Stipulated Orders, Orders of Emergency Suspension, Stipulated Orders, Final Orders, Termination Orders, Modification Orders and Voluntary Limitations are included at the end of this report in the order that they appear in the report. These orders are marked with an \* asterisk. **Scanned copies of Corrective Action Agreements are not posted, as they are not disciplinary action and impose no practice limitations.** Complaint and Notices of Proposed Disciplinary Action are not listed in this report, as they are not final actions by the Board. Both Orders, however, are public and are available upon request as described below.

Printed copies of the Board Orders listed below are available to the public. To obtain a printed copy of a Board Order, please complete a [service request form](#) on the Board's web site, submit it with the \$10.00 fee *per licensee* and mail to:

**Oregon Medical Board  
1500 SW 1st Ave, Ste 620  
Portland, OR 97201**

*Copies of the Orders listed below are mailed to Oregon hospitals where the Licensee had self-reported that he/she has privileges.*

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**\*Beckmann, Brooke Robert, DPM; DP00434; Salem**

The Board issued an Order of License Suspension on August 25, 2010. This Order immediately suspended Licensee's Oregon podiatry license for failure to pay child support per ORS 25.750.

**\*Beckmann, Brooke Robert, DPM; DP00434; Salem**

The Board issued an Order Terminating Board Order on September 2, 2010. In this Order, the August 25, 2010 Order of License Suspension is terminated and Licensee's license is restored.

**\*Gambie, John Edwin, MD; MD09526; Junction City, OR**

The Board voted to issue an Order of Emergency Suspension on September 2, 2010. This motion immediately suspended Licensee's Oregon medical license.

**\*Gomez, Gregory Rodriguez, MD; MD27099; Lake Oswego, OR**

Licensee entered into a Stipulated Order with the Board on September 2, 2010. In this Order, Licensee is reprimanded, placed on probation for a minimum of ten years, assessed a fine of \$2,000.00, and has restrictions on his medical license.

**\*Hardy, John Henry, Jr., MD; MD18862; Lake Oswego, OR**

Licensee entered into a Stipulated Order with the Board on September 2, 2010. This Order replaces the Stipulated Order of July 14, 2006, and terminates the Order Modifying Stipulated Order, dated January 10, 2008.

**\*Metzger, Mark Steven, MD; MD23691; Portland, OR**

The Board issued an Order of Suspension of License on September 2, 2010 due to Licensee's incarceration in a penal institution. This suspension will remain in effect until Licensee presents satisfactory evidence to the Board that Licensee is no longer incarcerated and the Board is satisfied with due regard to the public interest that Licensee's privilege to practice medicine may be restored.

**\*Phillips, Richard Harvey, M; MD06475; Portland, OR**

Licensee entered into an Interim Stipulated Order with the Board on August 17, 2010. In this Order, Licensee agreed to practice only administrative medicine and will provide no patient care pending the completion of the Board's investigation. Licensee will not provide advice to executive staff on medical or clinical issues pertaining to individual patients and will not collaborate, consult with, or advise mental health teams or other professionals through formal or informal communication on patient care issues.

**\*Powell, Diane Hennacy, MD; MD25438; Medford, OR**

Licensee entered into an Interim Stipulated Order with the Board on August 17, 2010. In this Order Licensee agreed to voluntarily and immediately cease accepting any new patients; transfer patients whom she primarily treats by telephone sessions; obtain a practice mentor.

**\*Smucker, Lonnie Lee, MD; MD17893; Portland, OR**

The Board issued an Order Modifying Stipulated Order on September 2, 2010. Having considered Licensee's request, the Board hereby modifies term 5.7 of this Order as follows:  
5.7 Licensee must inform the Board's compliance officer of any work status changes and follow the Board's recommendations.

All other terms of this Order remain in full force and effect.

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If you have any questions regarding this service, please call the Board at (971) 673-2700 or toll-free within Oregon at (877) 254-6263.

AUG 27 2010

BEFORE THE  
OREGON MEDICAL BOARD  
STATE OF OREGON

In the Matter of )  
BROOKE ROBERT BECKMANN, DPM ) ORDER OF LICENSE SUSPENSION  
LICENSE NO. DP00434 )

1.

The Oregon Medical Board (Board) is the state agency responsible for licensing, regulating and disciplining certain health care providers, including podiatrists, in the state of Oregon. Brook Robert Beckmann, DPM (Licensee) is a licensed podiatric physician in the state of Oregon.

2.

The Oregon Department of Justice Child Support Program has informed the Board that Licensee owes child support and arrears. According to the information provided to the Board, Licensee is not in compliance with an agreement entered into with the Child Support Program. As a result, Licensee's license to practice podiatric medicine is subject to suspension pursuant to ORS 25.750.

3.

The Board therefore suspends Licensee's license to practice podiatric medicine without further hearing, effective immediately, pursuant to ORS 25.780.

IT IS SO ORDERED this 25<sup>th</sup> day of August, 2010.

OREGON MEDICAL BOARD  
State of Oregon

*SIGNATURE REDACTED*

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LISA CORNELIUS, DPM  
Board Chair

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BEFORE THE  
OREGON MEDICAL BOARD  
STATE OF OREGON

In the Matter of )  
BROOKE ROBERT BECKMANN, DPM ) ORDER TERMINATING ORDER  
LICENSE NO. DP00434 ) OF LICENSE SUSPENSION  
)  
)

1.

On August 25, 2010, the Oregon Medical Board (Board) issued an Order of License Suspension regarding Brooke Robert Beckmann, DPM (Licensee). This Order was issued pursuant to ORS 25.750, and Licensee's failure to pay child support. On August 31, 2010, the Board received notification from the State of Oregon, Division of Child Support, informing the Board that suspension on Licensee's podiatric license should be removed because the reasons for the suspension no longer exist.

2.

The Board does hereby order that the August 25, 2010, Order of License Suspension be terminated effective the date this Order is signed by the Board Chair and that Licensee's license be restored.

IT IS SO ORDERED this 2<sup>nd</sup> of September, 2010.

OREGON MEDICAL BOARD  
State of Oregon

*SIGNATURE REDACTED*

LISA A. CORNELIUS, DPM  
Board Chair



1 a free T4 below the normal range on a test. While treating patients with thyroid medication,  
2 Licensee shall periodically retest the TSH level of his patients' blood no later than six weeks  
3 after initiating treatment with thyroid medication and no less than annually thereafter. Licensee  
4 shall reduce the level of thyroid medication if the level of TSH falls below the normal range.”

5 2.2 The Board opened an investigation that included a review of Licensee's  
6 management of a number of cases that revealed an on-going pattern of medical practice that  
7 violated paragraph 5.5 of the Order Modifying the Stipulated Order, dated January 1, 2004, as  
8 well as constituting unprofessional or dishonorable conduct and gross or repeated negligence that  
9 exposed his patients to the risk of harm, as set forth in the Board's Complaint and Notice of  
10 Proposed Disciplinary Action, dated May 11, 2009.

11 2.3 During the investigation, the Board and Licensee entered into an Interim  
12 Stipulated Order (ISO) on March 18, 2010 to address concerns that the Licensee was in violation  
13 of the 2004 Modifying Order referenced above. The ISO set forth the following conditions in  
14 subparagraph 3:

15 3.1 Licensee will not recommend, prescribe, or direct any patient to take  
16 thyroid unless patient TSH levels exceed 10 uIU/mL, except that Licensee may  
17 recommend, prescribe or direct a patient to take thyroid supplementation if  
18 patient TSH levels are between 5 and 10 uIU/mL and the patient has also been  
19 diagnosed with goiter or positive anti-thyroid peroxidase antibodies (or both).

20 3.2 Licensee will require any patient taking thyroid from a non-prescription  
21 source to undergo thyroid blood tests on a regular basis (at least every 6 months)  
22 and that Licensee will direct such patients to adjust their dose to bring their TSH  
23 level into the range recommended by the American Association of Clinical  
24 Endocrinologists (AACE) (the target TSH level is between 0.3 and 3.0 uIU/mL).  
24 If any patient declines to follow this direction, Licensee will provide 30 day prior  
25 written notice to the patient and then terminate the physician – patient  
26 relationship.

1           3.3    In the event Licensee decides to prescribe, recommend, direct a patient to  
2           take testosterone, or to follow a patient taking testosterone, Licensee must  
3           comply with the guidelines recommended in the article “Risks of Testosterone  
4           Replacement Therapy and Recommendations for Monitoring,” published in the  
5           New England Journal of Medicine, 350:5, January 29, 2004. Specifically,  
6           Licensee will ensure that either he or another physician has conducted and  
7           documented a recent digital rectal examination and that at a minimum, blood  
8           tests for baseline testosterone and PSA levels have been performed. Licensee  
9           must not prescribe, recommend, or direct a patient to take testosterone for  
10          patients with a PSA level above 4.0 ng/mL as well as patients with a yearly PSA  
11          increase of 1.5 ng/mL or more, or 0.75 ng/mL per year or more over two years.  
12          If any patient insists that they want to take testosterone in the face of such PSA  
13          levels, Licensee will provide 30 day prior written notice to the patient and then  
14          terminate the physician – patient relationship.

15          3.4    Licensee must make appropriate and timely chart entries to demonstrate  
16          that he is complying with the terms of this Order.

17          3.5    Licensee’s practice is subject to no notice compliance inspections by  
18          Board staff.

19          3.6    Licensee understands that violating any term of this Order will be grounds  
20          for disciplinary action under ORS 677.190(17).

21          3.7    Licensee understands this Order becomes effective the date this Order is  
22          signed by the Board Chair.

23                2.4    On July 19, 2010, a Board Compliance Officer conducted an audit of Licensee’s  
24                clinic and obtained copies of five charts, randomly drawn from a list of patients that were taking  
24                testosterone and / or thyroid medication. A review of these charts reveals that Licensee has  
25                failed to comply with the terms of the Interim Stipulated Order, to include continuing to treat  
26                patients with thyroid medication who have TSH levels that do not exceed the levels specified in

1 the ISO. In addition, Licensee is not complying with the ISO by treating patients with  
2 testosterone who do not have abnormal testosterone levels, and failing to conduct or document a  
3 recent rectal prostate examination for these patients.

4 3.

5 Based on the above information, the Board has determined that from the evidence  
6 available to the Board at this time that Licensee's continued practice of medicine would pose an  
7 immediate danger to the public and to his patients. Licensee's behavior displays repeated  
8 disregard for terms of the Board's stipulated orders that were designed to protect the public.  
9 This behavior causes the Board to conclude that it would be subjecting patients to the risk of  
10 harm if Licensee were allowed to continue to practice while this case remains under  
11 investigation.

12 4.

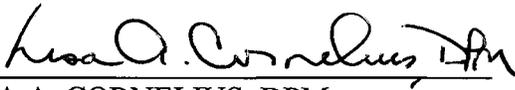
13 Licensee is entitled to a hearing as provided by the Administrative Procedures Act  
14 (chapter 183), Oregon Revised Statutes. Licensee may be represented by legal counsel at a  
15 hearing. If Licensee desires a hearing, the Board must receive Licensee's written request for  
16 hearing within ninety (90) days from the date the mailing of this Notice to Licensee, pursuant to  
17 ORS 183.430(2). Upon receipt of a request for a hearing, the Board will notify Licensee of the  
18 time and place of the hearing and will hold a hearing as soon as practical.

19 5.

20 The Board orders that pursuant to ORS 677.205(3), the license of John Edwin Gambee,  
21 MD, be suspended on an emergency basis and that Licensee immediately cease the practice of  
22 medicine until otherwise ordered by the Board.

23 IT IS SO ORDERED THIS 8<sup>th</sup> day of September 2010.

24 OREGON MEDICAL BOARD  
24 State of Oregon

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26 LISA A. CORNELIUS, DPM  
BOARD CHAIR

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BEFORE THE  
OREGON MEDICAL BOARD  
STATE OF OREGON

In the Matter of )  
GREGORY RODRIGUEZ GOMEZ, MD ) STIPULATED ORDER  
LICENSE NO. MD27099 )

1.

The Oregon Medical Board (Board) is the state agency responsible for licensing, regulating and disciplining certain health care providers, including physicians, in the state of Oregon. Gregory Rodriguez Gomez, MD (Licensee) holds an active license to practice medicine in the state of Oregon.

2.

In an Amended Complaint and Notice of Proposed Disciplinary Action, dated October 30, 2009, the Board proposed taking disciplinary action pursuant to ORS 677.205 against Licensee for violations of the Medical Practice Act, to wit: ORS 677.190(1)(a) unprofessional or dishonorable conduct, as defined in ORS 677.188(4)(a), (b), and (c); ORS 677.190(13) gross or repeated negligence; and ORS 677.190(17) willfully violate any provision of the Medical Practice Act or any rule adopted by the Board.

3.

The acts and conduct alleged to violate the Medical Practice Act follow:

3.1 Licensee formerly practiced family medicine at the Sherwood Providence Medical Clinic. In December 2007, during his time of employment with Providence, Licensee provided medical care to a female employee (Patient A) who was also employed by Providence. Licensee subsequently began to approach Patient A in the work place with the intent of initiating a sexual encounter, to include one occasion where he approached her in the workplace, pushed

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1 her against a wall and kissed her. In the summer of 2008, Licensee entered into a sexual  
2 relationship with Patient A. Licensee also provided medical care to Patient A in August 2008.

3 3.2 As early as January, but not later than early July of 2008, Licensee entered into a  
4 sexual relationship with female medical assistant, Employee B, who worked under his  
5 supervision at Providence. Licensee and Employee B were frequently seen fraternizing together  
6 at the workplace. This relationship precipitated strained interpersonal relationships between  
7 Patient A and Employee B as well as inappropriate email correspondence and erratic behavior  
8 during the summer of 2008 that eventually came to the attention of the Tualatin Police  
9 Department and Licensee's superiors at Providence.

10 3.3 Licensee was initially counseled about his behavior by his employer in July 2008  
11 and reminded of how a physician holds a position of power in relationship with a medical  
12 assistant. Licensee denied having a sexual relationship with Employee B. Additional incidents  
13 involving Licensee and Employee B came to management's attention in August 2008.  
14 Providence conducted an investigation and informed Licensee that he was under investigation.  
15 Licensee was allowed to resign in lieu of termination. Although Providence management  
16 informed Licensee that he should report his change of status to the Board, Licensee failed to  
17 report his resignation to the Board, in violation of ORS 677.415(6) and OAR 847-010-0073(1).

18 3.4 After leaving Providence, Licensee practiced medicine at the Oregon Male  
19 Performance Clinic in Lake Oswego. During an investigative interview with the Board on  
20 October 8, 2009, Licensee indicated that his manner of practice at the Male Performance Clinic  
21 was to review patient health history, conduct a limited examination, and make a diagnosis based  
22 upon a patient's reported symptoms. Licensee's willingness to treat male patients with  
23 testosterone based on reported symptoms alone subjected his patients to the risk of harm for  
24 treatment that was not medically indicated. The cases described below illustrate Licensee's  
25 manner of practice:

26 a. Patient C, a 60 year old male patient, presented before Licensee on January 13,  
27 2009, with a complaint related to low libido. His blood pressure was 154/102. Licensee

1 conducted a localized examination that included an ultrasound. Licensee diagnosed Patient C  
2 with erectile dysfunction. It should be noted, that Licensee failed to establish that the patient had  
3 a testosterone deficiency. Licensee did not conduct a rectal (prostate) examination and did not  
4 order any lab study. Licensee ordered an injection of prostaglandin E1, papaverine and  
5 phentolamine (Trimix) into Patient C's penis. Licensee returned to the clinic on January 14,  
6 2009. Licensee prescribed testosterone topical cream for Patient C (15% testosterone, 200  
7 grams.) Licensee did not explain any of the risks associated with the use of testosterone and  
8 never ordered any lab studies.

9 b. Patient D, a 59 year old male, presented before Licensee on February 3, 2009,  
10 complaining of low libido. Patient D's history included high blood pressure, high cholesterol,  
11 stroke, prostate problems, microscopic hematuria and bleeding disorder. Licensee did not  
12 conduct a rectal examination and did not order any lab work, so Patient D's PSA level was  
13 undetermined. Licensee diagnosed Patient D with erectile dysfunction and ordered an injection  
14 of prostaglandin E1, papaverine and phentolamine (Trimix) into Patient D's penis. Patient D  
15 returned to the clinic more than two hours later, complaining of discomfort and blood in his  
16 urine. The bleeding persisted for two days.

17 3.5 Licensee underwent an evaluation on January 21 and 22, 2010, at the Center for  
18 Personalized Education for Physicians (CPEP). The CPEP Assessment Report found that  
19 Licensee demonstrated medical knowledge that was broad with several gaps, to include failing to  
20 "demonstrate adequate ability to analyze ECGs." Licensee's clinical judgment and reasoning  
21 was found to be "generally acceptable with some exceptions." Licensee's "documentation was  
22 minimally acceptable with room for improvement" while his documentation of a differential  
23 diagnosis was "minimally present in his patient charts" and that he "consistently omitted  
24 documentation of medical reasoning." CPEP also conducted a cognitive function screen test that  
25 indicated good accuracy, but slow speed.

26 3.6 Licensee underwent a neuropsychological exam by Laurence Binder, Ph.D. on  
27 May 24, 2010, at the request of the Board. Dr. Binder's testing showed no evidence of mental

1 slowing, but found Licensee's performance on many of the speed tests to be exceptionally fast.  
2 Dr. Binder also found that Licensee had a cognitive deficit in the areas of complex non-verbal  
3 problem solving, and scored low in measures of concept formation, set shifting and perceptual  
4 reasoning, which indicate problems with flexibility of thinking and generation of multiple  
5 hypotheses.

6 4.

7 Licensee and the Board desire to settle this matter by the entry of this Stipulated Order.  
8 Licensee understands that he has the right to a contested case hearing under the Administrative  
9 Procedures Act (chapter 183), Oregon Revised Statutes, and fully and finally waives the right to a  
10 contested case hearing and any appeal therefrom by the signing of and entry of this Stipulated  
11 Order into the Board's records. Licensee stipulates that he engaged in the conduct described in  
12 paragraph 3 and that this conduct violated: ORS 677.190(1)(a) unprofessional or dishonorable  
13 conduct, as defined in ORS 677.188(4)(a), (b), and (c); ORS 677.190(13) gross or repeated  
14 negligence; and ORS 677.190(17) willfully violate any provision of the Medical Practice Act or  
15 any rule adopted by the Board. Licensee understands that this Order is a public record and is  
16 reportable to the National Practitioners Databank, the Healthcare Integrity and Protection  
17 Databank and the Federation of State Medical Boards.

18 5.

19 Licensee and the Board desire to settle this matter by the entry of this Stipulated Order,  
20 subject to the following terms and conditions of probation:

21 5.1 Licensee is reprimanded.

22 5.2 Licensee is placed on probation for a minimum of ten years. Licensee will report  
23 in person to the Board at each of its regularly scheduled quarterly meetings at the scheduled  
24 times for a probationer interview unless ordered to do otherwise by the Board.

25 5.3 Licensee will pay a fine of \$2,000 within 120 days from the date this Order is  
26 signed by the Board Chair.

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1           5.4     Licensee will not conduct a pelvic or breast examination or provide treatment of  
2 the breast or pelvic area for any female patient 12 years of age or older without a medically  
3 trained chaperone present for the entire course of the examination, consultation, or treatment.  
4 The presence of the chaperone will be immediately documented by entry of their name, date and  
5 time in the patient chart. The chaperone may not be a friend or family member of the patient.

6           5.5     Licensee will avoid any social contact with any female patient, or any immediate  
7 female family member of any patient, outside the clinic setting.

8           5.6     Licensee will enroll in and successfully complete a professional boundaries  
9 course and a course on hypogonadism that are pre-approved by the Board's Medical Director.

10          5.7     Within 30 days from the date this Order is signed by the Board Chair, Licensee  
11 shall sign an agreement with CPEP to complete the CPEP Education Plan. The CPEP Education  
12 Plan and selection of his practice mentor must be pre-approved by the Board's Medical Director  
13 before it goes into effect.

14          5.8     Licensee must successfully complete the CPEP Education Plan within 30-months  
15 from the date this Order is signed by the Board Chair. Licensee shall sign and fully cooperate  
16 with CPEP in the completion of the Education Plan. Licensee shall comply with all aspects of  
17 the CPEP Education Plan. Reports by CPEP of late compliance or non-compliance with any  
18 terms of the Education Plan may constitute grounds for discipline.

19          5.9     Licensee shall also sign all necessary releases to authorize full ongoing  
20 communication between the Board and CPEP, and Licensee will ensure that periodic progress  
21 reports, interim reports and the final written evaluation report from CPEP are provided promptly  
22 to the Board. The final written evaluation report shall include recommendations concerning  
23 Licensee's medical knowledge, medical judgment, his progress in addressing his identified  
24 deficiencies, and his ability and willingness to practice safely and competently. Licensee shall  
25 pay for all costs associated with the CPEP Education Plan, to include travels to Colorado,  
26 mentoring costs, and CPEP fees.

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1           5.10    Licensee's work setting in the health care field must be pre-approved by the  
2 Board's Medical Director.

3           5.11    Licensee must complete a minimum of 60 hours of continuing medical education  
4 courses in the first year of this Stipulated Order that addresses the educational needs identified in  
5 his CPEP Assessment Report. Licensee must submit the continuing medical education courses  
6 that he intends to take to the Medical Director for his review and pre-approval.

7           5.12    Licensee will immediately inform and provide a copy of this order to all his  
8 current employers in the health care field and to any future employers in the health care field  
9 prior to reporting for his first day of work.

10          5.13    Licensee understands that he is subject to no-notice compliance inspections by the  
11 Board's designee.

12          5.14    Licensee will obey all federal, state and local laws, and all rules governing the  
13 practice of medicine in the state of Oregon.

14          5.15    Licensee stipulates and agrees that any deviation or violation from terms of this  
15 Order shall be grounds for discipline pursuant to ORS 677.190(17).

16          5.16    This Order becomes effective the date it is signed by the Board Chair.

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18                   IT IS SO STIPULATED THIS 31 day of August, 2010.

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20                                   *SIGNATURE REDACTED*  
21                                   GREGORY RODRIGUEZ GOMEZ, MD

22                   IT IS SO ORDERED THIS 2nd day of September, 2010.

23                                   OREGON MEDICAL BOARD  
24                                   State of Oregon

25                                   *SIGNATURE REDACTED*  
26                                   LISA A. CORNELIUS, DPM  
27                                   BOARD CHAIR



Licensee has informed the Board that he desires to practice family medicine, but acknowledges that he has been out of practice for more than six years. Consequently, Licensee may only practice medicine subject to fully complying with the following conditions and terms of probation:

4.1 Licensee is placed on probation and will report in person to the Board at each of its regularly scheduled quarterly meetings at the scheduled times for a probationer interview unless ordered to do otherwise by the Board.

4.2 Licensee must take and pass the Special Purpose Examination (SPEX) as a precondition to receiving an active license to practice medicine.

4.3 Licensee must receive pre-approval by the Board's Medical Director for any practice setting before starting to see patients in any clinical setting.

4.4 Licensee must use a medically trained chaperone at all times for all female patients under the age of 18. The presence of a chaperone shall be immediately documented in the medical records.

4.5 Licensee must obtain psychotherapy from a mental health provider pre-approved by the Board's Medical Director. The mental health provider shall provide quarterly written reports to the Board. Licensee shall sign all releases to allow the mental health provider to communicate directly with the Board.

4.6 Licensee understands that if the Board receives any credible report that Licensee has engaged in unprofessional conduct, his medical license will be subject to an immediate order of suspension.

4.7 Licensee must submit a practice re-entry plan to the Board's Medical Director for approval prior to resuming the practice of medicine.

4.8 For a minimum of one year, Licensee must practice under the direct supervision of a physician pre-approved by the Board's Medical Director. Licensee will ensure that the Board receives quarterly written reports on his practice from his supervising physician.



BEFORE THE  
OREGON MEDICAL BOARD  
STATE OF OREGON

In the Matter of )  
 )  
MARK STEVEN METZGER, MD ) ORDER OF SUSPENSION  
LICENSE NO. MD23691 ) OF LICENSE  
 )

1.  
1.

The Oregon Medical Board (Board) is the state agency responsible for licensing, regulating and disciplining certain health care providers, including physicians, in the state of Oregon. Mark Steven Metzger, MD (Licensee) is a licensed physician in the state of Oregon.

2.

On March 17, 2010, the Board issued an Interim Stipulated Order in which Licensee agreed to withdraw from active practice pending the conclusion of a Board investigation regarding allegations of sexual abuse. On August 31, 2010, Licensee was convicted pursuant to his plea of guilty in Multnomah County Circuit Court of one count of Attempted Sexual Abuse in the First Degree (Class C felony) and was sentenced to 18 months of confinement by the Oregon Department of Corrections. Licensee's sentence includes 42 months of post prison supervision. Licensee is now an inmate in a penal institution.

3.

ORS 677.225(1)(b) provides that a licensee's medical license is suspended automatically if the licensee is an inmate in a penal institution.

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4.

The license of Licensee to practice medicine is suspended, pursuant to ORS 677.225(1)(b). This suspension will remain in effect until Licensee presents satisfactory evidence to the Board that Licensee is no longer incarcerated and the Board is satisfied with due regard to the public interest that Licensee's privilege to practice medicine may be restored.

IT IS SO ORDERED this 2nd day of September, 2010.

OREGON MEDICAL BOARD  
State of Oregon

*SIGNATURE REDACTED*

LISA A. CORNELIUS, DPM  
BOARD CHAIR









1 and reportable to the Federation of State Medical Boards, National Practitioner Data Bank  
2 (NPDB), and the Healthcare Integrity and Protection Data Bank (HIPDB).

3 6.

4 This Order becomes effective the date it is signed by the Licensee.

5  
6  
7 IT IS SO STIPULATED THIS 17 day of August, 2010.

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9 *SIGNATURE REDACTED*

10 *C* DIANE HENNACY POWELL, MD *DP*

11  
12 IT IS SO ORDERED THIS 17<sup>th</sup> day of August, 2010.

13 OREGON MEDICAL BOARD  
14 State of Oregon

15  
16 *SIGNATURE REDACTED*

17 KATHLEEN HALEY, JD  
18 EXECUTIVE DIRECTOR

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21 JAMES JOSEPH PECK, MD  
22 MEDICAL DIRECTOR  
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