

**IN AND BEFORE THE OKLAHOMA STATE BOARD  
OF MEDICAL LICENSURE AND SUPERVISION  
STATE OF OKLAHOMA**

**STATE OF OKLAHOMA, *ex rel.*** )  
**OKLAHOMA STATE BOARD** )  
**OF MEDICAL LICENSURE** )  
**AND SUPERVISION,** )  
 )  
**Plaintiff,** )  
 )  
**v.** )  
 )  
**EDWARD ALLEN LEE, M.D.,** )  
**LICENSE NO. MD 11807,** )  
 )  
**Defendant.** )

**FILED**  
MAR 16 2017  
OKLAHOMA STATE BOARD OF  
MEDICAL LICENSURE & SUPERVISION

**Case No. 15-10-5227**

**VERIFIED COMPLAINT FOR PROFESSIONAL MISCONDUCT**

The State of Oklahoma, *ex rel.* Oklahoma State Board of Medical Licensure and Supervision (“Board”), alleges and states as follows for its Complaint against Edward Allen Lee, M.D. (“Defendant”):

**I. AUTHORITY**

1. This Board has jurisdiction over the subject matter and is a duly authorized agency of the State of Oklahoma empowered to license and oversee the activities of physicians in the State of Oklahoma pursuant to 59 O.S. 2011, § 480, *et seq.*
2. This action is authorized by 59 O.S. Supp. 2014, § 503.
3. Defendant holds Oklahoma medical license number MD 11807, which was issued on July 1, 1978.
4. The acts and omissions complained of herein were made while Defendant was acting as a physician pursuant to the medical license conferred upon him by the State of Oklahoma. Such acts and omissions occurred within the physical territory of the State of Oklahoma.

**II. PRIOR BOARD HISTORY, Case No. 97-07-1912**

5. An Amended Complaint was filed against Defendant on November 24, 1997 for sexual misconduct with a patient (“1997 Complaint”).
6. Defendant’s license was revoked effective March 4, 1999. An Order of Revocation was filed on May 6, 1999.

7. Defendant's license was reinstated on May 11, 2000 under terms of an Agreement for Licensure ("Agreement"). Under the Agreement, Defendant must, including but not limited to, have a female chaperone during all time of exams on female patients.

### **III. BACKGROUND, Case No. 15-10-5227**

8. The current matter arises out of family member complaint that Defendant continues to prescribe narcotics to patient S.G.R., who is addicted to CDS and has been admitted to the hospital for overdosing twice.
9. Ten (10) patient charts, including that of S.G.R., were subpoenaed and obtained. The patient chart for G.S.R. revealed that he had been seeing Defendant in January 2015 for neck and back pain. Defendant prescribed Soma, Oxycodone and Morphine to treat G.S.R.
10. On August 11, 2015, S.G.R. went to see Defendant, S.G.R. was suffering withdrawal symptoms. In response, Defendant prescribed Oxycodone, Soma, Flagyl and Amoxil. On August 31, 2015 S.G.R. again came to see Defendant, complaining of abdominal pain. Defendant prescribed Xanax.
11. Board Investigator Robbin Roberts interviewed Defendant on March 1, 2016 at defendant's office. During that interview Defendant admitted that he prescribed Controlled Dangerous Substances ("CDS") to several family members.
12. Prescribing records show Defendant prescribed the following to family members:
  - a. E.H.R., 28 years old, between March 21, 2014 and December 31, 2015, Phentermine, Hydrocodone powder, Hydrocodone-Acetaminophen 10/325, Tramadol, Temazepam, Oxycodone and Morphine; total 52 CDS prescriptions.
  - b. K.H.R., 28 years old, between January 12, 2012 and January 15, 2016, Lorazepam, Fioricet, Hydrocodone/Acetaminophen 10/500, Soma, Demerol, Phentermine, Morphine, and Oxycodone; total 51 CDS prescriptions.
  - c. R.H.R., 28 years old, between February 13, 2015 and December 18, 2015, Hydrocodone/Acetaminophen, Lorazepam, Promethazine HCL w/Codeine and Temazepam; total 11 CDS prescriptions.
  - d. S.S.R., 52 years old, on January 6, 2014, Lorazepam.
  - e. S.H.R., 24 years old, between July 15, 2014 and January 11, 2016, Soma, Oxycodone and Temazepam; total 21 prescriptions.
  - f. J.L.R., 33 years old, between March 18, 2014 and August 12, 2015, Hydrocodone Bitartrate powder 14 times.
  - g. J.H.R., 24 years old, between September 29, 2014 and November 6, 2015, Hydrocodone/Acetaminophen 6 times.

13. No other prescriptions for CDS have been issued to any of the above family members by any doctor in the State of Oklahoma since each received their last prescription(s) from Defendant. This suggests Defendant prescribed to them without need.
14. The 10 patient charts were taken to Dr. F.T., M.D. for expert review.
15. The qualified expert's observations and findings of the 10 charts he reviewed include the following:
  - a. There was insufficient documentation to support the longer-term use of large quantities of narcotics and sedatives in all 10 records.
  - b. All visits were documented without any substantiating physical findings to confirm the patients' subjective complaints. All 10 records were documented with a few circles without any specific explanation of abnormal findings and no supportive special investigations were done or reported that confirmed the patients' complaints or chronic medical conditions.
  - c. Large quantities of CDS were prescribed to patients based solely their complaints and not substantiated by the record. None of the documentation provided justification of the large quantities or combinations of CDS prescribed or the frequency with which they were prescribed.
  - d. Refills of many of the CDS were authorized over an extended period of time without further investigations, exploration of other therapies or modalities, or referral to specialists.
  - e. Attempts to reduce the quantity and strength of CDS were not documented.
  - f. The quantities and combinations of CDS are potentially lethal if consumed in the quantities prescribed. Patient SG was provided large quantities of opioids for withdrawal following admission to an ER a few days prior to overdose of narcotics.
  - g. Nine patients received opioids that exceeded 120mg/day morphine equivalent dose with some as high as 2460, without justification.
  - h. In addition to the large quantities of opioids prescribed, most patients received large quantities of Soma, Promethazine with Codeine cough syrup, Alprazolam and Zolpidem.
  - i. There was no documented use of patient assessment tools to assess the function and pain level of the patients except for self-reported pain on a scale from 0-10. There was no documented screening for risk of opioid addiction and substance abuse in any of the records.
  - j. Urine drug screening was done on an infrequent basis on most of the patients and discussion of inconsistencies were not performed.

- k. There were no properly executed pain management contracts.
16. Defendant's care and conduct does not conform to the current standard of care for pain management or chronic opioid use. Defendant's prescription management and habits are harmful and dangerous to his patient's and are potentially lethal.

#### IV. VIOLATIONS

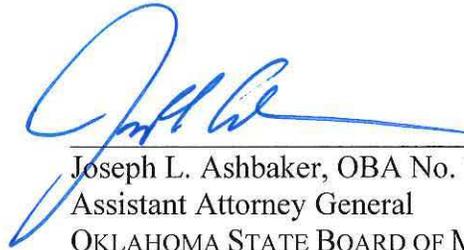
17. Based on the above, Defendant is guilty of professional misconduct by:
- a. Prescribing or administering a drug or treatment without sufficient examination and the establishment of a valid physician-patient relationship, in violation of 59 O.S. 2011, § 509(12),
  - b. Engaging in dishonorable or immoral conduct which is likely to deceive, defraud, or harm the public, in violation of 59 O.S. 2011, § 509(8) and Okla. Admin. Code § 435:10-7-4(11),
  - c. Prescribing, dispensing or administering of controlled substances or narcotic drugs in excess of the amount considered good medical practice, or prescribing, dispensing or administering controlled substances or narcotic drugs without medical need in accordance with published standards, in violation of 59 O.S. 2011, § 509(16) and Okla. Admin. Code §§ 435:10-7-4(2), (6), (24),
  - d. Failure to maintain an office record for each patient which accurately reflects the evaluation, treatment, and medical necessity of treatment of the patient, in violation of 59 O.S. 2011, § 509(18),
  - e. Failure to provide a proper and safe medical facility setting and qualified assistive personnel for a recognized medical act and maintaining adequate medical records to support diagnosis, procedure, treatment or prescribed medications, in violation of 59 O.S. 2011, § 509(20) and Okla. Admin. Code § 435:10-7-4(41),
  - f. Engaging in the indiscriminate or excessive prescribing, dispensing or administering of Controlled or Narcotic drugs, in violation of Okla. Admin. Code § 435:10-7-4(1),
  - g. Except as otherwise permitted by law, prescribing, selling, administering, distributing, ordering, or giving to a habitue or addict or any person previously drug dependent, any drug legally classified as a controlled substance or recognized as an addictive or dangerous drug in violation of Okla. Admin. Code § 435:10-7-4(25),
  - h. Prescribing, selling, administering, distributing, ordering, or giving any drug legally classified as a controlled substance or recognized as an addictive dangerous drug to a family member or to himself or herself. Provided that this paragraph shall not apply to family members outside the second degree of consanguinity or affinity. Provided further that this paragraph shall not apply to

medical emergencies when no other medical doctor is available to respond to the emergency, in violation of Okla. Admin. Code § 435:10-7-4(26).

- i. Violating OBN rules and regulations regarding the prescribing of CDS, in violation of Okla. Admin. Code § 435:10-7-4(27).
- j. Engaging in the improper management of medical records, in violation of Okla. Admin. Code § 435:10-7-4(36),

## V. CONCLUSION

Given the foregoing, the undersigned requests the Board conduct a hearing, and, upon proof of the allegations contained herein, impose such disciplinary action as authorized by law, up to and including suspension or revocation and any other appropriate action with respect to the Defendant's professional license, including an assessment of costs and attorney's fees incurred in this action as provided by law.



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**VERIFICATION**

I, Robbin Roberts, under penalty of perjury, under the laws of the State of Oklahoma, state as follows:

1. I have read the above Complaint regarding the Defendant, Edward Allen Lee, M.D.; and

2. The factual statements contained therein are true and correct to the best of my knowledge and belief.

  
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Robbin Roberts, Investigator  
OKLAHOMA STATE BOARD OF MEDICAL  
LICENSURE AND SUPERVISION

Date: 3-15-17

Oklahoma County, OK  
Place of Execution