

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

FILED

STATE OF OKLAHOMA)
EX REL. THE OKLAHOMA BOARD)
OF MEDICAL LICENSURE)
AND SUPERVISION,)
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Plaintiff)
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v.)
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)
KENT THOMAS KING, M.D.,)
LICENSE NO. 16153,)
)
)
Defendant.)

JAN 27 2012

OKLAHOMA STATE BOARD OF
MEDICAL LICENSURE & SUPERVISION

Case No. 11-03-4188

COMPLAINT

COMES NOW the plaintiff, the State of Oklahoma ex rel. the Oklahoma State Board of Medical Licensure and Supervision (the "Board"), by and through its attorney, Elizabeth A. Scott, Assistant Attorney General, and for its Complaint against the Defendant, Kent Thomas King, M.D., Oklahoma license no. 16153, alleges and states as follows:

1. The Board is a duly authorized agency of the State of Oklahoma empowered to license and oversee the activities of physicians and surgeons in the State of Oklahoma pursuant to 59 Okla. Stat. §480 *et seq.*

2. Defendant, Kent Thomas King, M.D., holds Oklahoma license no. 16153 and practices family medicine in Marlow, Oklahoma.

SEXUAL MISCONDUCT ALLEGATIONS

1ST PATIENT-PATIENT SAL

3. In or after 2007, Defendant met Patient SAL through an online dating service. At some point thereafter, they engaged in a sexual relationship. When initially asked by Board investigators if he had ever prescribed controlled dangerous substances to Patient SAL, Defendant lied and stated that he had not.

4. A review of pharmacy records reflects that from January 3, 2008 until March 7, 2011, Defendant authorized nine (9) prescriptions for controlled dangerous substances to Patient

SAL. When Board investigators confronted Defendant with these nine (9) prescriptions, he then admitted that he must have prescribed to her but did not remember it. In a follow-up interview with Board investigators, Defendant admitted that Patient SAL was “bi-polar” and that he had in fact prescribed Tussionex HC and possibly some non-CDS dangerous drugs.

5. Defendant admits that he kept no medical record of his treatment and prescribing to Patient SAL.

2ND PATIENT-PATIENT KAL

6. In or after 2007, Defendant met Patient KAL through an online dating service. At some point thereafter, they engaged in a sexual relationship. When initially asked by Board investigators if he had ever prescribed controlled dangerous substances to Patient KAL, Defendant lied and stated that he had not. In a follow-up interview six (6) months later, Defendant then admitted that he had in fact prescribed controlled dangerous substances to Patient KAL. Defendant did not remember why he had treated Patient KAL.

7. Defendant admits that he kept no medical record of his treatment and prescribing to Patient KAL.

3RD PATIENT-PATIENT SVL

8. In or around the fall of 2008, Defendant met Patient SVL through Craigslist. They immediately engaged in a sexual relationship and have continued to engage in a sexual relationship through at least April 2011.

9. When first questioned by Board investigators, Defendant lied and stated that his sexual relationship with Patient SVL ended in February 2010 when he began his sexual relationship with the fourth patient, Patient TSL set forth below. However, when confronted with text messages and pictures of Defendant with Patient SVL at a motel in Tulsa at a convention in April 2011, Defendant then admitted that he had in fact engaged in sexual relations with Patient SVL as late as April 2011, during which time he was also engaging in a sexual relationship with Patient TSL as set forth below.

10. When questioned by Board investigators as to whether or not he had ever treated Patient SVL or prescribed any medications to her, Defendant lied and stated that he had only issued two (2) prescriptions for controlled dangerous substances and one (1) prescription for a non-controlled dangerous substance to this patient.

11. A review of pharmacy records reflects that during the time that Defendant was engaged in a sexual relationship with Patient SVL, he in fact issued eight (8) prescriptions for controlled dangerous substances for alleged anxiety and pain, and eight (8) prescriptions for non-controlled dangerous drugs to Patient SVL. Controlled dangerous substances prescribed include Xanax, Lortab, Soma and Restoril. When confronted by Board investigators in a follow-up

interview, Defendant admitted to Board investigators that he had also prescribed Tussionex HC and Lorazepam to Patient SVL.

12. Defendant admits that he kept no medical record of his treatment and prescribing to Patient SVL.

13. Board investigators additionally questioned Defendant about allegations that he had hit or slapped Patient SVL during an argument. Defendant initially lied and told investigators that he had not done this. However, when confronted with text messages he had sent Patient SVL where he apologized for slapping her, he then admitted that he had in fact pushed her up against a car window and slapped her.

4TH PATIENT-PATIENT TSL

14. A review of Defendant's records reveals that Defendant began treating Patient TSL in or around 1993 and continuing for the next eighteen (18) years until at least August 2010. Defendant delivered both her fifteen (15) year old and two and one-half (2 ½) year old sons and treated her continuously for numerous health issues throughout this eighteen (18) year period of time. Defendant's treatment of Patient TSL included the prescribing of numerous controlled and non-controlled dangerous drugs.

15. In or around March 2010, while Defendant was still her treating physician, Defendant and Patient TSL began to engage in a sexual relationship. While Defendant is still married at this time, he and Patient TSL have continued this sexual relationship through the present time. Defendant admits that he engaged in a sexual relationship with Patient TSL at the same time he was maintaining a doctor-patient relationship and prescribing both controlled and non-controlled dangerous drugs to her.

16. A review of pharmacy records reflects that **subsequent** to the beginning of Defendant's sexual relationship with Patient TSL, he prescribed Lorazepam, a controlled dangerous substance, as well as ten (10) other non-controlled dangerous drugs found in pharmacy and patient records. A review of Defendant's medical record for Patient TSL does not reflect **any** of these prescriptions issued by Defendant.

5th and 6th PATIENTS-PATIENT MGL AND PATIENT SGL

17. In or around 2008 or 2009, Defendant engaged in a sexual relationship with a husband and wife couple, Patient MGL and Patient SGL.

18. Shortly after Defendant's sexual relationship with Patient MGL ended, he began a doctor-patient relationship with him. According to Defendant's records, he treated Patient MGL for HPV from July 15, 2010 until September 17, 2010. The PMP reflects three (3) prescriptions for Hydrocodone, a Schedule III controlled dangerous substance, were issued to Patient MGL. However, only one (1) of the prescriptions is reflected in the patient chart.

19. Shortly after Defendant's sexual relationship with Patient SGL (the wife of Patient MGL above) ended, he also began a doctor-patient relationship with her. According to Defendant's records, he treated Patient SGL for HPV from May 23, 2010 until April 29, 2011. The PMP reflects eleven (11) prescriptions for controlled dangerous substances were issued to Patient SGL to include one (1) prescription for Oxycodone, one (1) prescription for Hydrocodone, and nine (9) prescriptions for Restoril. None of the nine (9) prescriptions for Restoril are reflected in the patient chart.

20. When subsequently questioned by Board investigators as to why he did not document the majority of the prescriptions for controlled dangerous substance written to Patient MGL and Patient SGL, Defendant admitted that he must have called them in afterhours or on the weekends and forgot to note them in the chart.

7TH PATIENT-PATIENT RSL

21. In or around 2009, Defendant met Patient RSL through an online dating service. At some point thereafter, they engaged in a sexual relationship. Defendant admits that he recommended that she come to his office for treatment and believes that he may have prescribed dangerous drugs to her. However, since he kept no medical record of his treatment of Patient RSL, he admitted he cannot be sure of the specific dates and drugs prescribed.

8TH PATIENT-PATIENT DML

22. In or around 2009, Defendant engaged in a sexual relationship with Patient DML. Defendant admits that he believes he called in Bactrim or another antibiotic for this patient at some time. However, since he kept no medical record of his treatment of Patient DML, he cannot be sure of the specific dates and drugs prescribed.

TREATMENT

23. On or about April 18-19, 2011, Defendant submitted to an assessment at Elmhurst for sexual misconduct. Elmhurst concluded that Defendant was not safe to practice and recommended that he enter long-term residential treatment.

24. On or about May 5, 2011, Defendant entered long-term treatment at the Professional Renewal Center. However, while in treatment in late June 2011, Defendant violated his treatment agreement with PRC. Specifically, he logged onto a computer account he had previously used to arrange sexual encounters. He then arranged to meet a husband and wife couple at a restaurant in Kansas with the intent to enter into a sexual relationship with the couple. He actually met the couple at the restaurant but decided not to proceed with the sexual relationship at that time.

25. When PRC learned of this incident, he was discharged and released to obtain a higher level of treatment at another facility.

26. On or about July 11, 2011, Defendant entered treatment at Sante, where he remained until he was discharged on or about October 10, 2011. Sante gave numerous recommendations at the time of Defendant's discharge.

27. Near the end of his treatment at Sante, Defendant met with Board investigators and confirmed that the only women with whom he had engaged in a sexual relationship and treated as a physician were Patients SAL, KAL, SVL and TSL, the first four (4) patients set forth above.

28. Subsequently, Sante learned that it had not reviewed any of the investigative materials submitted by the Board investigator, nor had it addressed the sexual misconduct committed by Defendant while he was in treatment at PRC. Accordingly, Sante revised its discharge recommendations to include a baseline polygraph examination to be obtained **immediately**. It also recommended that he continue polygraph examinations every six (6) months, along with numerous other recommendations.

29. Approximately one (1) month after completing treatment at Sante, Defendant again contacted Board investigators and **disclosed two (2) additional patients** with whom he was involved in a sexual relationship, Patients MGL and SGL, the 5th and 6th patients set forth above.

30. In or around December 2011, Defendant agreed to submit to the initial polygraph examination recommended by Sante. As part of that examination, Defendant was asked to provide a list of all persons with whom he had engaged in a sexual relationship and also acted as the person's physician. At that time, Defendant **disclosed two (2) additional women**, Patients RSL and DML, as persons he was sexually involved with and to whom he believes he may have prescribed medications.

31. Defendant is guilty of unprofessional conduct in that he:

- A. Engaged in dishonorable or immoral conduct which is likely to deceive, defraud or harm the public in violation of 59 O.S. § 509 (8) and OAC 435:10-7-4 (11).
- B. Engaged in physical conduct with a patient which is sexual in nature, ... in violation of 59 O.S. §509 (17).
- C. Committed an act of sexual ... misconduct or exploitation related or unrelated to the licensee's practice of medicine and surgery in violation of OAC 435:10-7-4 (23).
- D. Abused the physician's position of trust by coercion [or] manipulation ... in the doctor-patient relationship in violation of OAC 435:10-7-4(44).

- E. Violated any provision of the medical practice act or the rules and regulations of the Board or of an action, stipulation, or agreement of the Board in violation of 59 O.S. §509 (13) and OAC 435:10-7-4(39).
- F. Violated any state or federal law or regulation relating to controlled substances in violation of OAC 435:10-7-4(27).
- G. Confessed to a crime involving violation of the antinarcotic laws and the laws of this state in violation of 59 O.S. §509(7).
- H. Committed any act which is a violation of the criminal laws of any state when such act is connected with the physician's practice of medicine in violation of 59 O.S. §509(9).
- I. Prescribed or administered a controlled substance without medical need in accordance with published standards in violation of 59 O.S. §509(16) and OAC 435:10-7-4(2) and (6).
- J. Prescribed or administered a drug or treatment without sufficient examination and the establishment of a valid physician patient relationship in violation of 59 O.S. §509(12).
- K. Failed 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. §509 (18) and OAC 435:10-7-4(41).
- L. Engaged in the indiscriminate or excessive prescribing, dispensing or administering of controlled or narcotic drugs in violation of OAC 435:10-7-4(1).
- M. Failed to provide a proper and safe medical facility setting and qualified assistive personnel for a recognized medical act, including but not limited to an initial in-person patient examination in violation of 59 O.S. §509(20). Adequate medical records to support diagnosis, procedure, treatment or prescribed medications must be produced and maintained.

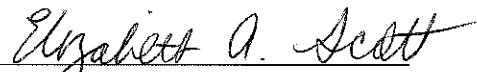
- N. Failed to establish a physician/patient relationship prior to providing patient-specific medical services, care or treatment in violation of OAC 435:10-7-4(49).
- O. Failed to furnish the Board, its investigators or representatives, information lawfully requested by the Board in violation of OAC 435:10-7-4(37).
- P. Failed to cooperate with a lawful investigation conducted by the Board in violation of OAC 435:10-7-4(38).

Conclusion

WHEREFORE, plaintiff requests that 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 the revocation or suspension of the Defendant's license to practice as a physician and surgeon in the State of Oklahoma, the assessment of costs and fees incurred in this action, and any other appropriate action with respect to Defendant's license to practice as a physician and surgeon in the State of Oklahoma.

Dated this 27th day of January, 2012 at 12:30 p.m.

Respectfully submitted,



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Attorney for the State of Oklahoma ex rel.
Oklahoma State Board of Medical
Licensure and Supervision