

patient charts failed to document a controlled substance agreement despite the presence of concurrent prescriptions for benzodiazepines and opioids/methadone, and despite prescriptions exceeding recommended daily Morphine Milliequivalent (MME) for opioids in various instances with no data-based justification, and with little evidence of any discussion of down-titration. Compounding this misconduct, Defendant continued to prescribe CDS as described herein without modification, or even increased CDS prescription dosage despite Defendant's own documentation for clear indications of substance abuse or adverse reactions in multiple instances. Further, documentation supporting the practices detailed herein was consistently vague for clinical indications which may warrant such prescription patterns, including the initial patient assessment and plan of care, where the same are present at all, and specifically omit discussion of alternative non-CDS prescriptions or interventions. Accordingly, the expert determined that Defendant's evaluation and/or diagnostic practice, clinical decision making and prescribing practices, as well as documentation relating thereto, were inconsistent with or in violation of the appropriate practice standard(s).

III. VIOLATIONS

5. Based on the foregoing, Defendant is guilty of unprofessional conduct as follows:
 - a. Prescribing, dispensing or administering of controlled substances or narcotic drugs in excess of the amount considered good medical practice, in violation of 59 O.S. 509(16)(a) and Okla. Admin. Code § 435:10-7-4(2).
 - b. Prescribing, dispensing or administering opioid drugs in excess of the maximum limits authorized in Section 2-309I of Title 63 of the Oklahoma Statutes, in violation of 59 O.S. 509(16)(c).
 - c. Indiscriminate or excessive prescribing, dispensing or administering of controlled or narcotic drugs, in violation of Okla. Admin. Code § 435:10-7-4(1).
 - d. Prescribing or administering a drug or treatment without sufficient examination and the establishment of a valid physician-patient relationship and not prescribing in a safe, medically accepted manner, in violation of 59 O.S. 509(12).
 - e. 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. § 509(18).
 - f. Failure to maintain adequate medical records to support diagnosis, procedure, treatment or prescribed medications, in violation of 59 O.S. § 509(21) and Okla. Admin. Code § 435:10-7-4(41).

V. CONCLUSION

Given the foregoing, the undersigned respectfully 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 Defendant's professional license, including an assessment of costs and attorney's fees incurred in this action as provided by law.

Respectfully submitted,

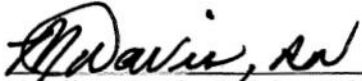


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VERIFICATION

I, Melissa Davis, under penalty of perjury, under the laws of the State of Oklahoma, state as follows:

1. I have read the above Complaint regarding Bradford Jay Stephens, M.D.; and
2. The factual statements contained therein are true and correct to the best of my knowledge and belief.



Melissa Davis, RN, Investigator
OKLAHOMA STATE BOARD OF MEDICAL
LICENSURE AND SUPERVISION

Date: 12-10-24



County, State of Execution