

**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,)

MAR - 6 2014

OKLAHOMA STATE BOARD OF
MEDICAL LICENSURE & SUPERVISION

Plaintiff,)

v.)

Case No. 11-11-4441

MEDHAT S. F. MICHAEL, M.D.,)
LICENSE NO. 23746)

Defendant.)

**ORDER ACCEPTING
VOLUNTARY SURRENDER TO JURISDICTION**

Plaintiff, the State of Oklahoma ex rel. the Oklahoma State Board of Medical Licensure and Supervision ("Board"), by and through its attorney, Matthew Ryan Stangl, Assistant Attorney General for the State of Oklahoma, and the staff of the Board as represented by the Secretary of the Board, Gerald C. Zumwalt, M.D., and the Executive Director of the Board, Lyle Kelsey, and Defendant, Dennis Roberts, M.D., Oklahoma license no. 23746, who appears in person, offer this Agreement effective March 6, 2014, for acceptance by the Board *en banc* pursuant to *Oklahoma Administrative Code* section 435:5-1-5.1.

By entering into this Order, Defendant voluntarily submits to the Board's jurisdiction in regard to the Complaint and Citation filed herein on June 4, 2012, and further acknowledges that a hearing before the Board could result in some sanction under the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act (59 Okla. Stat. § 480, *et seq.*).

Defendant, Medhat Michael, M.D., states that he is of sound mind and is not under the influence of, or impaired by, any medication or drug and that he fully recognizes his right to appear before the Board for an evidentiary hearing on the allegations made against him. Defendant hereby voluntarily waives his right to a full hearing, submits to the jurisdiction of the Board and agrees to abide by the terms and conditions of this Order. Defendant acknowledges that he has read and understands the terms and conditions stated herein, and that this Agreement has been reviewed and discussed with him and his legal counsel.

ALLEGATIONS IN COMPLAINT

Sexual Misconduct with Patients

PATIENT SHD

1. On or about May 18, 2008, Patient SHD was treated by Defendant at his clinic. At that visit, Defendant gave her five (5) prescriptions, including one (1) for a controlled dangerous substance. Patient SHD's children were also treated by Defendant. Child WHD was treated by Defendant on six (6) occasions from November 22, 2007 until June 11, 2008 and received eleven (11) prescriptions for dangerous drugs. Child LHD was treated on three (3) occasions from November 25, 2007 until January 31, 2008 and received six (6) prescriptions, one (1) of which was for a controlled dangerous substance.
2. In or around mid-2008, Patient SHD took one of her children to Defendant for medical care. During this visit, Defendant convinced Patient SHD to come to work for him at his clinic.
3. A few days after beginning to work for Defendant, he began making sexual advances towards Patient SHD. Specifically, Patient SHD took some files into his office and turned to leave. Defendant asked Patient SHD to wait. Defendant then walked up to Patient SHD, put his arms around her, and kissed her on the lips. She immediately pushed him away and exclaimed "Absolutely Not!" She finished her shift, but called in the next day to advise Defendant she would no longer work for him because he had kissed her the previous day.
4. After this incident where Defendant kissed Patient SHD, neither she nor her children have returned to him for any medical treatment.

PATIENT TMD

5. In or around late 2009, Defendant treated Patient TMD at his clinic for a stomach problem and Defendant issued her a prescription.
6. During this office visit, Defendant repeatedly told Patient TMD how pretty she was, asked her how much she made at her current job, then he offered her a job at his clinic, which she accepted. She began working for Defendant approximately one (1) week later.
7. Shortly after she began working for Defendant, he began to make sexual advances towards her. He frequently hugged her and attempted to kiss her on the lips. Defendant additionally frequently said sexually inappropriate things to her. Specifically, Defendant asked Patient TMD to "show him her boobs". He also took

off his shoe, telling her how large his foot was and that this meant he had a large penis.

8. Patient TMD worked for Defendant for approximately three (3) months but as the sexual harassment and sexual advances progressed, she quit and has not returned for any medical treatment by Defendant since that time.

PATIENT DWD

9. In or around late 2011, Patient DWD began working for Defendant. Patient DWD was attempting to get into the Physician Assistant program and believed that working in a medical office would help her so she went to work for Defendant. During her employment by Defendant, he constantly promised her that he would write her a "glowing recommendation" and would make sure that she got into the PA program.
10. On or about November 4, 2011, Patient DWD became Defendant's patient when he issued four prescriptions to her: Adderall #60, a Schedule II controlled dangerous substance, Lortab #15, a Schedule III controlled dangerous substance, and two (2) non-controlled dangerous drugs. Defendant did not conduct a physical exam, did not obtain a patient history, and kept no record of the medications prescribed at the time of the prescriptions. All records on this patient were fraudulently created by Defendant or at his direction during the course of the Board's investigation.
11. Shortly after she began working for Defendant, he began to make sexual advances towards her. He began by trying to hug and kiss her. She had to pull back quickly to avoid his kisses. He repeatedly hugged her with his body pressed against hers and would not let go. He also would come up behind her, put his arms around her waist, and hug her from behind while pushing his pelvic area into her body.
12. On numerous occasions, when Defendant found himself alone with Patient DWD in a room, he would stick a twenty dollar (\$20.00) bill down her shirt and into her bra as a "bonus". Patient DWD spoke with other staff at the clinic and confirmed that Defendant had put \$20.00 bills down the shirts and into the bras of other female employees and patients. On one occasion, Defendant sent the other employees to get the mail, then before she knew it, put his hand down her shirt, touched her breasts, and put a \$100.00 dollar bill under her bra.
13. On one occasion, Defendant asked Patient DWD to stay at the clinic after closing. She asked him why he wanted her to stay. Defendant then offered to pay her for sex and told her he "only wanted to touch" her. Patient DWD refused Defendant's offer and left the office. Defendant frequently told her he was in love with her and that he thought about her all night long.

PATIENT JBD

14. In or around early September 2011, Defendant treated Patient JBD for stomach problems. After her office visit, Defendant called Patient JBD everyday for several days to check on her. After calling her for approximately one (1) week, Defendant asked Patient JBD to come work for him. Patient JBD had previously told Defendant she wanted to go to PA school. When Defendant offered her a job, he lied to her and told her he was on the "PA Board" and that he would write her a great recommendation to help her get into PA school. Patient JBD then agreed to work for Defendant.
15. On or about September 24, 2011, Patient JBD began working for Defendant. Shortly after she started working for him, Defendant began making unwanted sexual remarks to her. He frequently walked behind her in the halls making moaning sounds and "mmmmm" noises. He asked her what she looked like under her scrubs, told her he thought about her all night, that she did not want to know what he was thinking about, and that he loved her and wanted to know if she loved him.
16. Defendant additionally made numerous unwanted sexual advances towards Patient JBD. Specifically, Defendant frequently kissed her on her shoulder and on one occasion, kissed her breast on the outside of her clothing.
17. In late October 2011, Defendant came up behind Patient JBD, grabbed both of her breasts with his hands, pressed his body against hers, then kissed her on the side of her neck. Patient JBD told Defendant his actions were not welcome and she walked away from him.
18. Two (2) days later, Defendant gave Patient JBD a hug, forced a kiss on her lips, and would not let go. Patient JBD pushed him away and again told him his actions were inappropriate. Patient JBD worked the next day, then picked up her paycheck and drove to the police station to report what had happened to her.
19. Criminal Felony Sexual Battery charges were filed against Defendant based upon his actions against Patient JBD.

PATIENT CKD

20. In or around 2010 and 2011, Defendant treated Patient CKD as a patient. Defendant additionally treated her husband and children as patients.
21. In or around November 2010, Patient CKD began working for Defendant. She initially worked for him as part of her Medical Assistant externship program where she worked for free for 200 hours. After completing that, Defendant hired her to be his Office Manager.

22. In late 2010 or early 2011, Defendant began making unwanted sexual advances towards Patient CKD. Specifically, he came up behind Patient CKD on several occasions and hugged her, with his hands either on top of her breasts or with his arms over her breasts. Patient CKD had previously had a portion of one of her breasts removed so she was very self-conscious about her breasts. On one occasion, after Defendant had inappropriately put his hands on her breasts, he made the statement that "Yes, one breast is smaller than the other". At that time, Patient CKD told Defendant that his touches were not wanted and told him to stop.
23. On another occasion, Defendant purchased a new office chair for Patient CKD. When she sat in it, Defendant told her how good she smelled. He then came up behind her, touched his lips to her neck, and whispered, asking her if her "pretty little panties" smelled that good, causing her to fall out of the chair in an attempt to get away from him.
24. On one occasion, Defendant came from behind Patient CKD, put his hand down her shirt, and put money in it, telling her he wanted to help with the holidays. Patient CKD told Defendant to stop. Defendant also frequently grabbed or patted her bottom while walking in the hallways at his office.
25. Defendant additionally made numerous and repeated vulgar and sexual comments to Patient CKD. On one occasion, he approached Patient CKD and said "If you want to go f*** somewhere, let me know". In the office break room, he walked up to Patient CKD and told her to "s*** his d****". Approximately once per week he asked her if she had "f***ed" her husband and what position they had been in. On one occasion, when Patient CKD was not smiling, he told her that he would take her upstairs and give her something to smile about.
26. Defendant additionally made sexually explicit statements in front of patients. On one occasion, Patient CKD was talking to a patient about his time in prison. Defendant then made the comment that "I bet you didn't get no p**** in there". Defendant then said to the patient not to worry, that he and the patient could "gang up" on Patient CKD.

PATIENT VCD

27. On or about August 22, 2008, Patient VCD was treated by Defendant for a sore throat. At this visit, he gave her three (3) prescriptions for non-controlled dangerous drugs. On or about September 2, 2008, Patient VCD was treated again by Defendant for stomach pain. At this visit, he gave her two (2) prescriptions, one (1) of which was for Tylenol III, a Schedule III controlled dangerous substance.
28. At one of Patient VCD's office visits, Defendant convinced her to come and work for him. On or about September 15, 2008, Patient VCD began working for

Defendant. At the end of her first day of work, Defendant began making sexual advances towards Patient VCD. Specifically, Defendant kissed her on the lips.

29. On Patient VCD's second day of working for Defendant, he continued his sexual advances when he kissed her several more times during the day, frequently telling her she was "gorgeous". At the end of the day, the doctor kissed her again, but this time tried to force his tongue into her mouth. Patient VCD shoved him away, left the clinic, and did not ever return to work for Defendant, or for any medical treatment.

PATIENT SMD

30. In or around October 2011, Patient SMD went to work for Defendant.
31. On or about November 21, 2011, Defendant treated Patient SMD at his clinic for a sore throat. Defendant admits he kept no medical record of his treatment of Patient SMD. However, pharmacy records reflect that he issued her two (2) prescriptions at that time: Azithromycin and Prednisone.
32. After working for him approximately 1 ½ months, and after she had become his patient, Defendant began making sexual advances towards Patient SMD. Specifically, on one occasion, he asked Patient SMD to come into his office for a "bonus" to help with Thanksgiving. SMD went to Defendant's office, at which time Defendant approached with a twenty dollar (\$20.00) bill in his hand. He then reached inside her shirt and stuck the money inside her bra.
33. Patient SMD additionally witnessed Defendant speaking in a sexually demeaning manner to a patient. On one occasion, Patient SMD witnessed Defendant repeatedly questioning a patient about her sexual practices. Despite the patient's denial that she was engaged in sexual activity, Defendant continued to give her "advice" in a vulgar and sexually demeaning manner.

PATIENT CBD

34. On or about November 10, 2011, and December 6, 2011, Defendant treated Patient CBD at his clinic for anxiety. Pharmacy records reflect that on both of these occasions, Defendant prescribed Xanax #30 to her. He also prescribed Tramadol to her on November 23, 2011.
35. Beginning in or around November 2011 and continuing through December 2011, Patient CBD also worked as a Medical Assistant intern for Defendant. During her internship interview, Defendant made numerous sexual noises to her. As he followed her around the office, he began "moaning" as he walked behind her. During her interview, he told her he had to weigh her. While he was weighing her, he continued to make moaning noises.

36. Shortly after she began to work for Defendant, he began making sexual advances towards her. During the first few weeks, Defendant grabbed Patient CBD and kissed her at least seven (7) to eight (8) times. Patient CBD had to turn her head to avoid being kissed on the lips. Defendant continued to kiss her on the neck and cheek. On one occasion, Defendant grabbed Patient CBD from behind, put his arms under her breasts, and lifted her off the ground.

PATIENT SAD

37. In or around November 2011, Defendant treated Patient SAD at his clinic for what she thought was a stomach virus. During this visit, Defendant began questioning Patient SAD in depth about why she was taking anti-depressants. At this time, the patient revealed that as a child, she had been raped. Defendant then asked her, "When you were raped, was it in the front or the back?"
38. On Patient SAD's first visit, Defendant told her he needed to take her picture, which he did on his cell phone.
39. During an office visit in early November 2011, Defendant began making sexual advances towards Patient SAD. During this visit, Defendant put his hands on Patient SAD's face and kissed her on the lips. Patient SAD jumped back and left the clinic. Patient SAD was shocked that Defendant kissed her, but thought that it might be related to Defendant's culture. On her next visit a week later, Defendant again tried to kiss her on the lips, but she stopped him by putting her hand up. On both of these occasions when Patient SAD tried to leave the exam room, Defendant positioned himself between her and the door so that she had to brush up against him to get out of the office. During a later visit, Defendant advised Patient SAD that her anti-depressants were making her gain weight. Defendant took the patient's shoe off to allegedly check for swelling. While holding her foot, he began to act like he was "nibbling" on her leg. Patient SAD immediately told to stop and that his actions were inappropriate.

PATIENT BWD

40. In or around November 2011, Patient BWD, a nine (9) year old child, went to Defendant's clinic for treatment for an ear infection. Upon entering the exam room, Defendant looked at the child and in front of the child's mother, who was also a patient, exclaimed, "Oh, she is sexy". After this comment, neither Patient BWD nor her mother ever returned to Defendant for medical treatment.

Sexual Misconduct with Employees

AWD

41. Beginning in or around September 2011 and continuing for approximately four (4) weeks until October 2011, AWD worked for Defendant at his clinic as a Medical Assistant.
42. Shortly after she began to work for Defendant, he began making sexual advances towards her. Defendant began by hugging her and attempting to kiss her. On one (1) occasion, he tried to kiss her on the lips, but she quickly turned her head so that he only kissed her cheek. While attempting to kiss her, he has also grabbed her bottom.
43. Defendant's sexual advances towards AWD quickly escalated. When AWD had only been working for Defendant for approximately one (1) week, he gave her a hug. During this hug, he thrust his penis into her vaginal area. A week or so later, when AWD was standing in the office kitchen, he came up behind her, grabbed her hips with his hands, and thrust his penis against her body while saying "oh baby, oh baby". AWD immediately told Defendant he could not do that and that it was very inappropriate.
44. Defendant additionally made numerous and repeated sexual comments to AWD. On one occasion, he told her he could "give it to her better than her boyfriend" and that his penis was bigger than her boyfriend's. While walking behind AWD, Defendant has moaned and has often told her that she was getting him excited.
45. AWD told Defendant to stop this behavior and that his behavior was not appropriate on numerous occasions. Defendant responded only by laughing and he showed no signs of stopping his behavior.
46. Criminal Felony Sexual Battery charges were filed against Defendant based upon his actions against AWD.

BPD

47. Beginning in or around June 2011 and continuing through September 2011, BPD worked for Defendant at his clinic.
48. On or about July 3, 2011, Defendant began making sexual advances towards BPD. He approached her and told her she looked flushed. He stroked her face, then hugged her. During this hug, he placed one of his hands on her lower back and he placed one of his fingers in her butt crack. He then used that hand to press her pelvis into his pelvic area.

49. On or about July 10, 2011, Defendant again hugged BPD, grabbed her butt, and put a finger down her butt crack. BPD told Defendant he could not do that, to which he replied, "I can't?" BPD again told him he could not do that. She then walked away.
50. Defendant additionally made numerous and repeated sexual comments to BPD while walking behind BPD in the office, Defendant would frequently bark like a dog and howl at her. He additionally made sexually explicit comments to her on a regular basis, using the words "f****" and "c****" regularly when he spoke to her.
51. BPD asked Defendant to stop his unwanted sexual behavior on numerous occasions, but he did not.
52. Criminal Felony Sexual Battery charges were filed against Defendant based upon his actions against BPD.

KCD

53. Beginning in or around March 2011 and continuing through August 2011, KCD worked for Defendant at his clinic.
54. During this time, Defendant made numerous unwanted sexual statements to KCD. Specifically, Defendant asked KCD "how many times she had sex with her boyfriend", what position they were in when they had sex, and "how big" her boyfriend was.
55. Defendant frequently asked KCD to kiss him and he grabbed himself in a sexual manner in front of her.

LSD

56. Beginning in or around November 2008, LSD worked for Defendant as a medical assistant for two (2) weeks.
57. Shortly after beginning her job with Defendant, he began making sexual advances towards her. On one occasion, she was filing charts in a low cabinet when Defendant came up behind her and stuck his finger down her "butt crack". LSD told Defendant to stop and she tried to elbow him but he just walked away laughing at her.
58. On another occasion, LSD was upset about her pending divorce. Defendant walked up to her and hugged her tightly, forcing their bodies together so closely that she could feel his penis against her body.

59. On another occasion, she was taking an x-ray and was standing behind the glass in the x-ray room. He came up behind her, cupped her bottom with his hands, and lifted her up. At that point, she quit the job and left the office.

ABD

60. Beginning in or around April 25, 2011 and continuing through approximately June 3, 2011, ABD worked for Defendant as a medical assistant through an internship program through Wright Career College.
61. Shortly after beginning her internship, Defendant began exhibiting sexual behavior towards her and other interns. Specifically, Defendant would purposely drop files on the floor, then “bark” at the interns while they picked them up. Additionally, he followed the female employees around the office and barked at them while they walked.
62. Defendant additionally made sexually explicit statement to ABD directly. During her initial tour of the office, Defendant gave her unsolicited advice about how to “make her vagina tighter”.

MGD

63. Beginning in or around February 2011 and continuing through approximately October 2011, MGD worked for Defendant as an LPN.
64. During her employment by Defendant, he frequently made sexual advances towards her. Defendant has attempted to kiss her when he was hugging her, stuck his tongue out in a sexual manner, touched her bottom, and told her he would be her “sugar daddy”.
65. MGD also witnessed Defendant make sexual statements to patients. On one occasion, when a young attractive female patient was being treated by Defendant for a foot or ankle problem, Defendant randomly asked her if she had breast fed her child. On another occasion, when a patient was speaking with MGD about cooking, Defendant said to the patient “You’re turning me on”.

ACD

66. Beginning in or around early August 2010 and continuing for three (3) weeks, ACD worked for Defendant at his clinic as a Medical Assistant.
67. Shortly after she began working for Defendant, he began making numerous and repeated sexual comments to her. Defendant frequently “cornered” her and would try to hug her and kiss her neck and cheek. Because she felt threatened by Defendant,

she resigned her position on August 24, 2010, with her last day of work being August 30, 2010.

Criminal Charges

68. On or about November 29, 2011, Defendant was charged with four (4) counts of felony sexual battery in the District Court of Oklahoma County, State of Oklahoma, Case No. CF-2011-6559. These felony charges were based upon Defendant's sexual battery on JBD, AWD and BPD, as set forth above.

Obstruction of Board Investigation

69. On or about November 30, 2011, Board Investigators Robert DuVall and Robbin Roberts traveled to Defendant's office to investigate the sexual misconduct complaints. After interviewing Defendant, Investigator DuVall advised him that he would need to interview the office staff. Defendant refused to let Board investigators speak with his staff. He additionally stated that he would need to speak with his staff before he would allow them to speak with Board investigators.
70. Mr. DuVall again advised Defendant that he needed to speak with the staff immediately, before Defendant had the opportunity to talk with them. Mr. DuVall reminded Defendant that the failure to allow Board investigators to speak with his staff could be considered an attempt to obstruct the State's investigation and a failure to cooperate with a lawful investigation. Defendant again refused to allow Board investigators to speak with his staff.
71. Board investigators Mr. DuVall and Ms. Roberts then gave each of the staff at Defendant's clinic their business cards and advised them that they wished to speak with them and asked that they call either of the investigators, after which time they left Defendant's clinic.
72. On December 1, 2011, SMD, a patient and employee at Defendant's clinic, contacted Mr. DuVall. She advised him that after Mr. DuVall had left the clinic the previous day, Defendant had approached each of his employees and confiscated the business cards left by Mr. DuVall. He advised the employees that if they wished to speak to Board investigators, they would need to speak with him first. When SMD heard Defendant say this to other employees and when she saw him take the Board business cards, she quickly copied the card Mr. DuVall had given to her so that she would have his telephone number to contact him. She then copied this number and later gave it to the other employees so that they would know how to contact Mr. DuVall.

Falsification of Medical Records

73. On or about December 5, 2011, Defendant approached Patient DWD, who was also an employee at his clinic. Defendant had previously prescribed medication to and treated Patient DWD, but had kept no medical record of his treatment. On that date, he asked her to prepare a medical record for herself with her patient information so as to create a medical record. She complied with his request.

Prescribing Controlled Dangerous Substances to his Spouse

74. A review of pharmacy records reflects that from June 21, 2011 until November 18, 2011, Defendant authorized five (5) prescriptions for Testosterone, a Schedule III controlled dangerous substance, to his wife, Patient AMD.
75. When Board investigators questioned the pharmacist, Raelyn Walker, D.Ph, she would have filled a prescription for a controlled dangerous drug to the spouse of a physician, she revealed that she had actually taken the call from Defendant when he ordered the prescription. She stated that he clearly identified himself as "Michael Medhat", rather than "Medhat Michael", his true name. She advised that if he had identified himself as his true name of Medhat Michael, she would have questioned him as to his relationship to the patient.
76. Pharmacist Walker advised Board investigators that she remembered the incident so well because when Defendant was speaking to her ordering the controlled dangerous drug for his wife, he kept telling her how "young and pretty" she sounded and that he would bet she was beautiful. He told her he was going to come by the pharmacy personally to see her. Ms. Walker was upset about his comments and advised pharmacy staff to not identify her if Defendant came by the pharmacy.

Refusal to Comply with Board Subpoenas/Falsification of Medical Records

77. On or about December 6, Board Investigator DuVall returned to Defendant's office with a subpoena for the medical records of Patient AMD, the wife of Defendant. The purpose of the subpoena was to determine if any medical records existed for Defendant's wife since Defendant had prescribed controlled dangerous substances to her. Defendant refused to comply with the Board subpoena. Specifically, he refused to turn over any medical records and would not even confirm that any records for his wife, Patient AMD, even existed.
78. On or about December 13, 2011, Board Investigator Roberts returned to Defendant's office with a subpoena for the medical records of nine (9) employees and patients who had complained of sexual misconduct by Defendant:

Patient VCD
Patient DWD

Patient SHD
Patient LHD (daughter of Patient SHD)
Patient WHD (son of Patient SHD)

Patient SMD
Patient TMD
Employee LSD
Employee HKD

Ms. Roberts was made to wait approximately one and one-half (1 ½) hours and was not allowed to see the files as they were being copied. She was separated by a closed door which was locked. In the room where files were supposedly being copied were Defendant, his office staff, and his attorney. After this time, only the first five (5) records listed above were produced. Ms. Roberts was advised that no records existed for the remaining for persons.

79. The next day, December 14, 2011, Patient DWD, who is also an employee of Defendant, contacted Ms. Roberts. Patient DWD advised her that while Investigator Roberts was waiting for 1 ½ hours for the medical records she had subpoenaed, that Defendant was “creating” and “adding to” medical records. She advised that Defendant asked her to “backdate” some pages in her own medical records to reflect a previously undocumented medical treatment. She refused Defendant’s request. Defendant also asked her to make a copy of a page of prescriptions but folded it so that a prescription at the bottom of the page would not show. She refused his request. She additionally advised that on this date, December 13, 2011, Defendant filled in the “Dr. Notes” portion of her medical records and added them to her medical record, although she was not treated on those dates. Further, while the subpoenaed files were being pulled and copied and added to by Defendant, numerous documents were also being shredded by office staff, all while Defendant and his attorney were present.
80. Patient DWD further advised Board investigators that at the time Board investigators subpoenaed her patient record, it contained only medical history information that Defendant had asked her to fill out on December 6, 2011, a few days before her file was subpoenaed. By the time her file was turned over to Board investigators, it contained falsified treatment records prepared by Defendant after he received the Board’s subpoena, as well as fraudulent copies of prescriptions created by Defendant
81. Patient and employee DWD also advised Board investigators that the record of Patient TMD had been located as filed under her married name, but that Defendant had refused to produce it. When Board investigators learned this, a new subpoena listing Patient TMD under her married name was issued. When presented with the new subpoena, Defendant refused to produce anything and refused to confirm whether or not any record existed for patient TMD.

82. During the Board's investigation, Patient SMD, who was also an employee, advised Board investigators that she was treated by Defendant and received two (2) prescriptions from him. However, when Board investigators subpoenaed her patient chart from Defendant, he advised that there was no patient chart on Patient SMD. She then advised Board investigators that she filled the prescriptions at a Wal-Mart pharmacy in south Oklahoma City. When Board investigators went to the pharmacy to obtain the prescriptions written by Defendant, they were advised by the pharmacist that just days earlier, Defendant had appeared at the pharmacy, gave him a false story about the prescriptions being forged, and Defendant took the original prescriptions from the pharmacist.

Fraudulent License Renewal

83. In or around January 2006, Defendant was requested to appear on January 13, 2006 before the Texas Medical Board at a settlement conference to respond to a complaint filed against him. The allegations of the complaint were that Defendant had attempted to bribe the receptionist at a medical office to obtain the patient records of a person who was not his patient. At the January 13, 2006 settlement conference, Board representatives offered Defendant a proposed Agreed Order, which Defendant did not sign.
84. On or about October 10, 2006, Defendant renewed his Oklahoma medical license. In response to the question "Since the last renewal...have you been requested to appear before a licensing or disciplinary agency?", Defendant answered "NO". Defendant had in fact been asked to appear before the Texas Medical Board just nine (9) months earlier.
85. On or about December 16, 2006, the Texas Medical Board dismissed the case against Defendant based upon its settlement with Defendant. The terms of the settlement were not disclosed in the dismissal motion.

CHARGES IN COMPLAINT

86. Defendant is guilty of unprofessional conduct in that he:
- A. Engaged in predatory sexual behavior in violation of OAC 435:10-7-4 (45).
 - B. Engaged in dishonorable or immoral conduct which is likely to deceive, defraud or harm the public in violation of 59 Okla. Stat. § 509 (8) and OAC 435:10-7-4 (11).
 - C. Engaged in physical conduct with a patient which is sexual in nature, or in any verbal behavior which is seductive or

sexually demeaning to a patient in violation of 59 Okla. Stat. § 509 (17).

- D. Committed an act of sexual abuse, misconduct or exploitation related or unrelated to the licensee's practice of medicine and surgery in violation of OAC 435:10-7-4 (23).
- E. Abused the physician's position of trust by coercion, manipulation or fraudulent representation in the doctor patient relationship in violation of OAC 435:10-7-4(44).
- F. 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 Okla. Stat. § 509 (13) and OAC 435:10-7-4(39).
- G. 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 Okla. Stat. § 509 (18) and OAC 435:10-7-4(41).
- H. Violated any state or federal law or regulation relating to controlled substances in violation of OAC 435:10-7-4(27).
- I. Prescribed or administered a drug or treatment without sufficient examination and the establishment of a valid physician patient relationship in violation of 59 Okla. Stat. § 509(12).
- J. Committed an 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 Okla. Stat. § 509(9).
- K. Engaged in fraud or misrepresentation in applying for or procuring a medical license or in connection with applying for or procuring periodic reregistration of a medical license in violation of OAC 435:10-7-4(8).
- L. Engaged in the use of any false, fraudulent, or deceptive statement in any document connected with the practice of medicine and surgery in violation of OAC 435:10-7-4(19).
- M. Prescribed, sold, administered, distributed, ordered, or gave any drug legally classified as a controlled substance or recognized as an addictive dangerous drug to a family

member or to himself or herself in violation of OAC 435:10-7-4(26).

- N. Failed to furnish the Board, its investigators or representatives, information lawfully requested by the Board in violation of OAC 435:10-7-4(37).
- O. Failed to cooperate with a lawful investigation conducted by the Board in violation of OAC 435:10-7-4(38).
- P. Is unable to practice medicine with reasonable skill and safety to patients by reason of age, illness, drunkenness, excessive use of drugs, narcotics, chemicals or any other type of material or as a result of any mental or physician condition in violation of 59 Okla. Stat. § 509(15) and OAC 435:10-7-4(40).
- Q. Is physically or mentally unable to practice medicine and surgery with reasonable skill and safety in violation of OAC 435:10-7-4(17).
- R. Failed to maintain adequate medical records to support diagnosis, procedure, treatment or prescribed medications in violation of 59 Okla. Stat. § 509 (20).
- S. 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).

FINDINGS OF FACT

- 87. Medhat S.F. Michael, M.D., currently possesses Oklahoma medical license no. 23746.
- 88. Defendant Medhat S.F. Michael, M.D., is the subject of the foregoing allegations and charges in a Complaint before the Oklahoma State Board of Medical Licensure and Supervision filed on June 4, 2012.
- 89. Defendant acknowledges that a hearing before the Board could result in some sanction under the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act.
- 90. Defendant hereby relinquishes his Oklahoma medical license no. 23746 to the Board, including his wall certificate and wallet card, and agrees to never apply for reinstatement of his Oklahoma medical license.

91. Defendant acknowledges this matter will be reported to the National Practitioner Data Bank.
92. Relinquishment of Defendant's medical license is freely and voluntarily given. Defendant has not been subject to any duress or coercion, and is fully aware of the consequences of permanently submitting his medical license to the Board pursuant to this agreement.

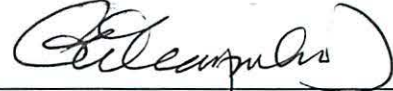
CONCLUSIONS OF LAW

93. 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.*
94. The Board en banc has jurisdiction over the subject matter herein, and notice has been given in all respects as required by law and the rules of the Board.
95. Pursuant to 59 Okla. Stat. §509.1(A), the Board has authority to accept the relinquishment of Defendant's Oklahoma medical license no. 23746.


ORDER

96. The relinquishment of Defendant's license is hereby accepted by the Board.
97. Oklahoma medical license no. 23746 of Defendant, Medhat S.F. Michael, M.D., has been forfeited and is hereby accepted by Board as of the date of this order, March 6, 2014.
98. Pursuant to 59 Okla. Stat. §509.1(A)(9), Defendant shall pay all reasonable costs expended by the Board for any legal fees and costs, as well as investigatory costs, including but not limited to staff time, salary and travel expense, witness fees and attorney fees.
99. Defendant shall never apply for reinstatement of his Oklahoma medical license.

DATED this 6th day of March, 2014.



G. David Casper, M.D., President
Oklahoma State Board of Medical
Licensure and Supervision



Medhat S.F. Michael, M.D.
License No. 23746



Gerald C. Zumwalt, M.D., Secretary
Oklahoma State Board of Medical
Licensure and Supervision



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

CERTIFICATE OF SERVICE

This is to certify that on this 6th day of March, 2014, a true and correct copy of this order was sent to Ms. Lane Krieger via email to lscoggins@okhealthlawyer.com and mailed to 201 Robert S. Kerr, Ste. 710, Oklahoma City, OK 73102



Kathy Plant, Executive Secretary