

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,)
)
Plaintiff,)

NOV 04 2010

OKLAHOMA STATE BOARD OF
MEDICAL LICENSURE & SUPERVISION

v.)
)
SCOTT PARKHURST TURNER, M.D.,)
LICENSE NO. 23840,)
)
Defendant.)

Case No. 10-01-3909

**ORDER ACCEPTING
VOLUNTARY SUBMITTAL TO JURISDICTION**

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 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 the Defendant, Scott Parkhurst Turner, M.D., Oklahoma license no. 23840, who appears in person and pro se, proffer this Agreement for acceptance by the Board *en banc* pursuant to Section 435:5-1-5.1 of the Oklahoma Administrative Code ("OAC").

AGREEMENT AND ACKNOWLEDGMENT BY DEFENDANT

By voluntarily submitting to jurisdiction and entering into this Order, Defendant pleads guilty to the allegations in the Complaint and Citation filed herein on September 3, 2010 and acknowledges that hearing before the Board would result in some sanction under the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act (the "Act").

Defendant, Scott Parkhurst Turner, 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 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.

PARTIES' AGREEMENT AND STIPULATIONS

Plaintiff, Defendant and the Board staff stipulate and agree as follows:

Findings of Fact

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.* The Board has jurisdiction over this matter, and notice has been given in all respects in accordance with law and the rules of the Board.

2. Defendant, Scott Parkhurst Turner, M.D., holds Oklahoma license no. 23840 and practices internal medicine and pediatrics in Tulsa, Oklahoma.

3. In or around 2007, Defendant began abusing Lortab. He initially obtained the Lortab from a patient who had returned the medication to him.

4. In early 2008, Defendant was treating an elderly patient in the patient's home. The patient's granddaughter, Patient SJL, offered him two (2) Norco tablets, which he ingested. Patient SJL then asked Defendant to write her a prescription for Norco, which she would then share with Defendant. Defendant agreed to this arrangement.

5. Beginning February 1, 2008 and continuing through December 30, 2009, Defendant wrote one-hundred thirty-three (133) prescriptions to Patient SJL. These prescriptions included forty-nine (49) prescriptions for Oxycodone and Fentanyl, Schedule II controlled dangerous substances, for a total of 4,295 dosage units, forty (40) prescriptions for Phendimetrazine and Hydrocodone, Schedule III controlled dangerous substances, for a total of 4,350 dosage units, forty (42) prescriptions for Alprazolam and Phentermine, Schedule IV controlled dangerous substances, for a total of 3,180 dosage units, and two (2) prescriptions for Cheratussin, a Schedule V controlled dangerous substances, for a total of 120 dosage units, for an average of **17.02 dosage units per day of controlled dangerous drugs**. Under their agreement, Defendant would go to Patient SJL's house and write her a prescription. Patient SJL would fill the prescription while Defendant waited at her house. When she returned, she would split the drugs with Defendant.

6. Beginning October 27, 2008 and continuing through December 28, 2009, Defendant wrote seventy-two (72) prescriptions for controlled dangerous substances to Patient KML, who is Patient SJL's step-father. These prescriptions included forty-seven (47) prescriptions for Fentanyl and Oxycodone, Schedule II controlled dangerous substances, for a total of 4,098 dosage units, twenty-two (22) prescriptions for Hydrocodone, a Schedule III controlled dangerous substance, for a total of 2,640 dosage units, one (1) prescription for Lorazepam, a Schedule IV controlled dangerous substance, for a total of ninety (90) dosage units, and two (2) prescriptions for Cheratussin, a Schedule V controlled dangerous substance, for a

total of 104 dosage units, for an average of **15.75 dosage units per day of controlled dangerous drugs**. Under their agreement, Defendant gave the prescription to Patient KML. Patient KML would then fill the prescription and split the drugs with Defendant.

7. Beginning November 10, 2008 and continuing through December 22, 2009, Defendant wrote thirty-nine (39) prescriptions for controlled dangerous substances to Patient CRL, who is Patient SJL's mother. These prescriptions included twenty-six (26) prescriptions for Hydromorphon, Oxycodone and Fentanyl, Schedule II controlled dangerous drugs, for a total of 1,855 dosage units, nine (9) prescription for Hydrocodone, a Schedule III controlled dangerous substance, for a total of 1,020 dosage units, one (1) prescription for Clonazepam, a Schedule IV controlled dangerous substance, for a total of ninety (90) dosage units, and three (3) prescriptions for Cheratussin, a Schedule V controlled dangerous substance, for a total of one-hundred eighty (180) dosage units, for an average of **7.73 dosage units per day of controlled dangerous drugs**. Under their agreement, Defendant gave the prescription to Patient CRL. Patient CRL would then fill the prescription and split the drugs with Defendant.

8. Defendant admitted to Board investigators that he paid for the majority of the prescriptions that he split with these individuals.

9. Defendant admitted to Board investigators that he knew that Patient SJL was submitting some of the prescriptions to Medicaid for payment.

10. Defendant admitted to Board investigators that he knew Patient SJL was an addict and that Patient CRL was becoming an addict, yet he continued to prescribe controlled dangerous substances to them.

11. A review of Defendant's records reflects that Defendant kept no medical record on his treatment and prescribing of controlled dangerous substances to any of these three (3) patients.

12. Defendant admitted to Board investigators that he was abusing drugs while working as a hospitalist at St. Francis Hospital in Tulsa, Oklahoma. Specifically, Defendant admitted that he would often take three (3) 30 mg. Oxycodone in the morning, three (3) 30mg. Oxycodone before lunch, then three (3) 30 mg. Oxycodone after work. He also admitted that on some occasions, he would cut a portion of a Fentanyl patch and chew on it during his lunch break.

13. On or about April 27, 2009, Defendant submitted his Application for Renewal of his full medical license in the State of Oklahoma for the period May 2, 2009 through May 1, 2010. On his Application for Renewal, Defendant was asked the following question: "Have you been addicted to or abused any drug or chemical substance including alcohol?" In response to this question, the Defendant answered "NO". Defendant admits that he was abusing drugs at the time he filled out the renewal application.

14. Beginning on or about January 25, 2010 and continuing for approximately five (5) days, Defendant submitted to a rapid detox at the Rapid Drug Detox Center in Bloomfield, Michigan.

15. After his rapid detox, Defendant returned to Tulsa, Oklahoma. However, on or about February 2, 2010, Defendant again used a Fentanyl patch not prescribed to him.

16. Beginning on or about February 10, 2010 and continuing through May 19, 2010, Defendant obtained treatment for substance abuse at Bradford Health Services.

17. While obtaining treatment at Bradford, Defendant engaged in a sexual relationship for approximately one (1) month with another patient at Bradford. When Bradford learned of the affair, Defendant was ordered by Bradford staff not to have any contact with the fellow patient. Based upon these incidents, Bradford recommended that Defendant obtain an assessment at Acumen for boundary and sexual issues.

18. Beginning on or about May 24, 2010 and continuing for approximately five (5) days, Defendant submitted to an assessment at Acumen. During the assessment, Defendant admitted that despite being ordered by Bradford to cease all contact with the patient with whom he had the sexual affair, he was still in contact with the fellow patient. The assessment team recommended that Defendant obtain intensive day, longitudinal treatment to address professional and personal boundaries and compulsive use of sexual and interpersonal relationships with women.

19. Beginning on or about July 5, 2010 and continuing through July 23, 2010, Defendant obtained treatment at Acumen for boundary issues and sexual misconduct.

20. Based on the allegations stated above, 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. Procured, aided or abetted a criminal operation in violation of 59 O.S. § 509 (1).
- 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. 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).
- G. Violated any state or federal law or regulation relating to controlled substances in violation of OAC 435:10-7-4(27).
- H. 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).
- I. Except as otherwise permitted by law, prescribed, sold, administered, distributed, ordered, or gave to a habitué 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 OAC 435:10-7-4(25).
- J. Wrote a false or fictitious prescription or any drugs or narcotics declared by the laws of this state to be controlled or narcotic drugs in violation of 59 O.S. §509(11).
- K. Engaged in the indiscriminate or excessive prescribing, dispensing or administering of controlled or narcotic drugs in violation of OAC 435:10-7-4(1).
- L. Prescribed, dispensed or administered controlled substances or narcotic drugs in excess of the amount considered good medical practice or prescribed, dispensed or administered controlled substances or narcotic drugs without medical need in accordance with published standard in violation of OAC 435:10-7-4(2) and (6).
- M. Prescribed, dispensed or administered a controlled substance or narcotic drugs in excess of the amount considered good medical practice, or prescribed, dispensed or administered controlled substances or narcotic drugs

without medical need in accordance with published standards in violation of 59 O.S. 509(16).

- N. 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).
- O. 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 O.S. §509(15) and OAC 435:10-7-4(40).
- P. Is habitually intemperate or habitually uses habit-forming drugs in violation 59 O.S. §509(4) and OAC 435:10-7-4(3).
- Q. Confessed to a crime involving violation of the antinarcotic or prohibition laws and regulations of the federal government or the laws of this state in violation of 59 O.S. §509(7).
- R. Committed any act which is a violation of the criminal laws of any state when such act in connected with the physician's practice of medicine in violation of 59 O.S. §509(9).
- S. 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).
- T. Purchased or prescribed any regulated substance in Schedule I through V, for the physician's personal use in violation of OAC 435:10-7-4(5).
- U. 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).
- V. Engaged in practice or other behavior that demonstrates an incapacity or incompetence to practice medicine and surgery in violation of OAC 435:10-7-4(18).

Conclusions of Law

1. The Board has jurisdiction and authority over the Defendant and subject matter herein pursuant to the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act (the "Act") and its applicable regulations. The Board is authorized to enforce the Act as necessary to protect the public health, safety and welfare.

2. Defendant, Scott Parkhurst Turner, M.D., Oklahoma medical license 23840, is guilty of unprofessional conduct set forth below based on the foregoing facts:

- 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. Procured, aided or abetted a criminal operation in violation of 59 O.S. § 509 (1).
- 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. 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).
- G. Violated any state or federal law or regulation relating to controlled substances in violation of OAC 435:10-7-4(27).
- H. 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).

- I. Except as otherwise permitted by law, prescribed, sold, administered, distributed, ordered, or gave to a habitué 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 OAC 435:10-7-4(25).
- J. Wrote a false or fictitious prescription or any drugs or narcotics declared by the laws of this state to be controlled or narcotic drugs in violation of 59 O.S. §509(11).
- K. Engaged in the indiscriminate or excessive prescribing, dispensing or administering of controlled or narcotic drugs in violation of OAC 435:10-7-4(1).
- L. Prescribed, dispensed or administered controlled substances or narcotic drugs in excess of the amount considered good medical practice or prescribed, dispensed or administered controlled substances or narcotic drugs without medical need in accordance with published standard in violation of OAC 435:10-7-4(2) and (6).
- M. Prescribed, dispensed or administered a controlled substance or narcotic drugs in excess of the amount considered good medical practice, or prescribed, dispensed or administered controlled substances or narcotic drugs without medical need in accordance with published standards in violation of 59 O.S. 509(16).
- N. 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).
- O. 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 O.S. §509(15) and OAC 435:10-7-4(40).
- P. Is habitually intemperate or habitually uses habit-forming drugs in violation 59 O.S. §509(4) and OAC 435:10-7-4(3).

- Q. Confessed to a crime involving violation of the antinarcotic or prohibition laws and regulations of the federal government or the laws of this state in violation of 59 O.S§509(7).
- R. 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).
- S. 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).
- T. Purchased or prescribed any regulated substance in Schedule I through V, for the physician's personal use in violation of OAC 435:10-7-4(5).
- U. 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).
- V. Engaged in practice or other behavior that demonstrates an incapacity or incompetence to practice medicine and surgery in violation of OAC 435:10-7-4(18).

Order

IT IS THEREFORE ORDERED by the Oklahoma State Board of Medical Licensure and Supervision as follows:

1. The Board *en banc* hereby adopts the agreement of the parties in this Voluntary Submittal to Jurisdiction.
2. The license of Defendant, **SCOTT PARKHURST TURNER, M.D.** Oklahoma license no. 23840, is hereby **SUSPENDED** for a period of **THREE (3) MONTHS** beginning August 4, 2010 and continuing until November 4, 2010.

3. Pursuant to the parties' voluntary agreement and submittal to jurisdiction, Defendant shall be placed on **PROBATION** for a period of **FIVE (5) YEARS** under the following terms and conditions:

A. Defendant will conduct his practice in compliance with the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act as interpreted by the Oklahoma State Board of Medical Licensure and Supervision. Any question of interpretation regarding said Act shall be submitted in writing to the Board and no action based on the subject of the question will be taken by Defendant until clarification of interpretation is received by Defendant from the Oklahoma State Board of Medical Licensure and Supervision.

B. Upon request of the Board Secretary, Defendant will request all hospitals in which he anticipates practicing to furnish to the Board Secretary of the Oklahoma State Board of Medical Licensure and Supervision a written statement regarding monitoring of his practice while performing services in or to that hospital.

C. Defendant will furnish to each and every state in which he holds licensure or applies for licensure and hospitals, clinics or other institutions in which he holds or anticipates holding any form of staff privilege or employment, a copy of the Board Order stipulating sanctions imposed by the Oklahoma State Board of Medical Licensure and Supervision.

D. Defendant will not supervise allied health professionals that require surveillance of a licensed physician.

E. Defendant will execute such releases of medical and psychiatric records during the entire term of probation as necessary for use by the Compliance Consultant or other Board designee to obtain copies of medical records and authorize the Compliance Consultant or other Board designee to discuss Defendant's case with Defendant's treating physicians and/or physicians holding Defendant's records.

F. Defendant will submit biological fluid specimens to include, but not limited to, blood and urine, for analysis, upon request of the Oklahoma State Board of Medical Licensure and Supervision or its designee, and Defendant will pay for the analysis thereof.

G. Defendant will not prescribe, administer or dispense any medications for personal use or for that of any family member.

H. Defendant will take no medication except that which is authorized by a physician treating him for a legitimate medical need. Defendant has the affirmative duty to inform any and every doctor treating him of the Board Order immediately upon initiation, or continuation of treatment.

I. Defendant will have the affirmative duty not to ingest any substance, including but not limited to alcohol, which will cause a body fluid sample to test positive for prohibited substances.

J. Defendant will authorize in writing the release of any and all information regarding his treatment at Bradford and Acumen and any other records of his medical, emotional or psychiatric treatment to the Oklahoma State Board of Medical Licensure and Supervision.

K. Defendant will abide by the terms and recommendations of Bradford and Acumen and with all terms of his postcare contracts with Bradford, Acumen and the Oklahoma Health Professionals Recovery Program.

L. Defendant will sign a contract with and attend a minimum of one (1) meeting per week of the Health Professionals Recovery Program unless excused by the HPRP.

M. Applicant will additionally attend a minimum of four (4) meetings per week of a local 12-Step program.

N. Defendant shall obtain marital therapy with a therapist approved in advance in writing by the Board Secretary. Defendant shall submit quarterly reports of his treatment from his therapist to the Board Secretary or his designee for his review. Defendant shall continue his marital therapy until his therapist and the Board Secretary deem it no longer necessary.

O. Defendant shall obtain medication management with a psychiatrist approved in advance in writing by the Board Secretary. Defendant shall submit quarterly reports from his psychiatrist to the Board Secretary or his designee for his review. Defendant shall continue his medication management with his psychiatrist until his psychiatrist and the Board Secretary deem it no longer necessary.

P. Defendant shall obtain individual counseling with a counselor approved in advance in writing by the Board Secretary. Defendant shall submit quarterly reports of his treatment from his counselor to the Board Secretary or his designee for his review. Defendant shall continue his counseling until his counselor and the Board Secretary deems it no longer necessary.

Q. Defendant shall promptly notify the Board of any relapse, including any entry, or re-entry, into a treatment program for substance abuse.

R. Defendant shall promptly notify the Board of any citation or arrest for traffic or for criminal offenses involving substance abuse.

S. Defendant will keep the Oklahoma State Board of Medical Licensure and Supervision informed of his current address.

T. Defendant will keep current payment of all assessments by the Oklahoma State Board of Medical Licensure and Supervision for prosecution, investigation and monitoring of his case, which shall include but is not limited to a one hundred-fifty dollar (\$150.00) per month fee during the term of probation.

U. Until such time as all indebtedness to the Oklahoma State Board of Medical Licensure and Supervision has been satisfied, Defendant will reaffirm said indebtedness in any and all bankruptcy proceedings.

V. Defendant shall make himself available for one or more personal appearances before the Board or its designee upon request.

W. Defendant shall submit any required reports and forms on a timely, accurate and prompt basis to the Compliance Coordinator or designee.

X. Failure to meet any of the terms of this Board Order will constitute cause for the Board to initiate additional proceedings to suspend, revoke or modify Defendant's license after due notice and hearing.

Y. Defendant shall not practice in excess of forty (40) hours per week.

Z. Defendant shall not prescribe, order, administer, dispense or possess any controlled dangerous substances other than to hospital inpatients.

AA. Defendant shall practice in a controlled environment approved in advance in writing by the Board Secretary. Defendant's call schedule shall be limited and shall be approved in advance in writing by the Board Secretary.

BB. Defendant shall submit quarterly reports from his employer regarding his progress and compliance with probation terms.

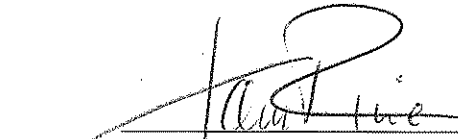
CC. Defendant shall submit to polygraph examinations every six (6) months during the term of his probation, the first of which must occur prior to May 4, 2011. The polygraph examinations will be coordinated and arranged by Defendant. The polygraph examiner must be approved by the Board Secretary and must be experienced in boundary violations. The polygraph examinations shall include questions involving Defendant's maintenance of boundaries, his avoidance of dual relationships with patients and interested third parties, and questions relating to diversion and use of medications and controlled dangerous substances. All evidence obtained by the Board during the investigation of this case must be given to the polygraph examiner prior to the first examination performed by the examiner. Reports of the polygraph examiner shall be provided to the Board Secretary for his review and Defendant shall authorize in writing the release of any and all records of the polygraph examinations to the Board or its designee.

4. Promptly upon receipt of an invoice, Defendant shall pay all costs of this action authorized by law, including without limitation, legal fees and costs, investigation costs, staff time, salary and travel expenses, witness fees and attorney's fees.

5. Defendant's suspension will be lifted, and his license will be reinstated only upon payment in full of all costs and expenses incurred by the State of Oklahoma prior to November 5, 2010.

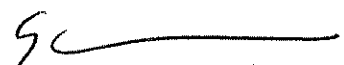
6. A copy of this written order shall be sent to Defendant as soon as it is processed.

Dated this 4 day of November, 2010.

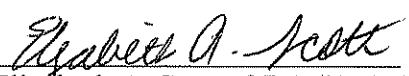


Tom Rine, President
Oklahoma State Board of
Medical Licensure and Supervision

AGREED AND APPROVED

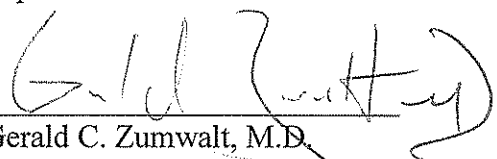


Scott Parkhurst Turner, M.D.
License No. 23840



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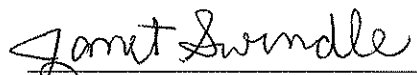
Attorney for the Oklahoma State
Board of Medical Licensure and
Supervision



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

CERTIFICATE OF MAILING

I certify that on the 5 day of November, 2010, I mailed a true and correct copy of the Order Accepting Voluntary Submittal to Jurisdiction to Scott Parkhurst Turner, 1017 E. 13th Street, Cushing, OK 74023-5223.



Janet Swindle