

STATE OF WASHINGTON
MEDICAL DISCIPLINARY BOARD

In the Matter of Disciplinary)
Action Concerning) NO. PM 4347
RICHARD WILKINSON, M.D.) STATEMENT OF CHARGES
Respondent.)

MICHAEL J. MURPHY, Secretary of the Washington State Medical Disciplinary Board, and acting in that capacity, states and alleges as follows:

I.

The respondent has been issued a license to practice medicine by the state of Washington.

II.

The respondent employed, directed and/or permitted Rochelle Campbell to administer allergy testing, injections and inoculations to 1 - Healthcare Information Readily L... and other patients. 1 - Healthcare Inf... 1 - Healthcar... died as a result of anaphylactic reaction due to such allergy testing injections and inoculations. RCW 18.88.285 provides that only a person licensed under Chapter 18.88 RCW or Chapter 18.78 RCW is permitted to administer tests and inoculations. Rochelle Campbell was not licensed to practice under Chapter 18.88 RCW or Chapter 18.73 RCW.

III.

The respondent did not adequately evaluate 1 - Healthcare Information Readily ... for possibility of anaphylactic reaction to allergy testing, did not possess the appropriate CPR training nor have adequately trained staff and did not institute adequate resuscitation measures when 1 - Healthcare Information Readily Iden... experienced a reaction.

IV.

The actions in Paragraphs II and III above constitute grounds for disciplinary action pursuant to RCW 18.72.030(11), which defines unprofessional conduct to include incompetency or negligence in the practice of medicine and surgery resulting in serious harm to the patient and RCW 18.130.180(4), which defines unprofessional conduct to include incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed

WHEREFORE, Michael J. Murphy, alleges that the conduct referred to in this statement of charges affects the public health, safety and welfare, that a notice be issued and served as provided by law to the respondent giving him the opportunity to defend against the accusations of this statement of charges, and provided that if he shall fail to defend against these

accusations, that he shall be subject to such discipline as is appropriate under RCW 18.130.160.

DATED this 26th day of October, 1987.

Michael J. Murphy
Secretary, Washington State
Medical Disciplinary Board

By: *Gloria Westeryield*
GLORIA WESTERYIELD
Executive Secretary

jlt/203A

STATE OF WASHINGTON
MEDICAL DISCIPLINARY BOARD

In the Matter of Disciplinary)	
Action Concerning)	NO. PM 4114
)	
RICHARD WILKINSON, M.D.)	STIPULATION AND AGREED
Respondent.)	ORDER DIRECTING CORRECTIVE
)	ACTION
)	

The Department of Licensing and respondent, by and through their respective counsel of record, stipulate as follows:

I. STIPULATION

1. Respondent is fully apprised of both the nature and severity of the allegations set forth in the Statement of Charges. Respondent is fully apprised that he has the right to be represented by counsel.

2. Respondent is fully apprised of the fact that the State is prepared to proceed to a hearing on the merits of the Statement of Charges.

3. Respondent is fully apprised, with the advice and assistance of his counsel of record, that should the State in fact prove at hearing the allegations set forth in paragraphs II and III of the Statement of Charges, the Board has the power and authority to take appropriate [disciplinary] [corrective] action.

4. Respondent is fully apprised, with the advice and assistance of his counsel of record, of the right to defend by presenting evidence at hearing.

5. Respondent wishes to expedite the resolution of this matter by means of stipulation.

COPY

STIPULATION AND AGREED ORDER - 1
FINAL ORDER DIRECTING CORRECTIVE ACTION - 1

6. This agreement is not binding unless accepted by the Medical Disciplinary Board.

7. Respondent waives a hearing on the merits of the Statement of Charges.

8. This settlement will be subject to the reporting requirements of RCW 18.130.110(2).

II. FACTUAL RECITATION

On January 5, 1984, Rochelle Campbell, an unlicensed/uncertified individual administered allergy testing to 1 - Healthcare Information Readily Ide.... This included the use of intracutaneous injections. Certification of "Health Care Assistants" is currently available under RCW 18.135, though this certification was not available at the time 1 - Healthcare Informati... was so tested.

After the patient was administered intracutaneous injections, he experienced anaphylactic reaction and expired.

III. CORRECTIVE ACTION

1. The respondent will at all times hereafter have only persons licensed or certified by the appropriate agency perform allergy testing; including injections.

2. The respondent will demonstrate to the satisfaction of the Board that there is adequate emergency care equipment ("crash cart") to be available in the office for use by staff on any patient undergoing an acute disease process such as anaphylactic shock, cardiac or respiratory arrest. The necessary equipment and drugs to be stocked by Respondent will be included in a list provided by Respondent and approved by the Board. Presentation

of this list shall be accomplished within thirty (30) days of acceptance of this Stipulation by the Board.

3. Any individuals performing allergy testing shall be fully trained and currently certified in resuscitative techniques and obtain this certification within three months of the signing of this stipulation.

4. The respondent will show compliance with CME training in in-office resuscitative training to deal with emergent situations and retain current Advanced Cardiac Life Support status and shall submit proof of completion within three months of signing this stipulation.

5. The Board shall monitor compliance with the above for a minimum five years from the date of this order. The parties agree that the Board, or its agents, may inspect the premises, without notice, to determine compliance.

6. The respondent shall make all reasonable efforts to obtain prior records of care given on all new patients before commencing testing/treatment.

I hereby certify that I have read this stipulation and agreement in its entirety, that my counsel of record has fully explained its legal significance and consequences and in witness of this I affix my signature this _____ day of _____, 1988.

Dr. Wilkinson personally appeared before me and acknowledged the above stipulation to be a voluntary act and deed.

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 1987.

NOTARY PUBLIC in and for the
State of Washington, residing
at _____
My commission expires: _____

IV. ORDER

The Board accepts the stipulation as stated in the preceding paragraphs. Dr. Wilkinson IS ORDERED to comply with the terms of paragraphs III. 1 through 6 above.

DATED this _____ day of _____, 1988.

STATE OF WASHINGTON
MEDICAL DISCIPLINARY BOARD

By: _____
JAMES P. DUNLAP, M.D.
Chairman

Presented by:

Copy received, Approved as
to form and Notice of
Presentation Waived



WILHELM DINGLER
Assistant Attorney General

Attorney for Respondent/Respondent

**STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE COMMISSION**

In the Matter of the License to)	
Practice as a Physician and Surgeon of)	Program No. 94-09-0045MD
)	
RICHARD STANLEY WILKINSON, MD)	STATEMENT OF ALLEGATIONS AND
License No. MD00016229)	SUMMARY OF EVIDENCE
Respondent.)	
)	
)	
)	

The Administrator of the Medical Quality Assurance Commission, on designation by the Commission, makes the allegations below. Any patients referred to in this Statement of Allegations and Summary of Evidence are identified in an attached Confidential Schedule.

Section I: ALLEGED FACTS

- 1.1 Richard S. Wilkinson, MD, Respondent was issued a license to practice as a physician and surgeon by the State of Washington in November 1977.
- 1.2 Between December 1994 and June 1996, Respondent prescribed thyroid medication to Patient One without adequate laboratory testing and without either (a) performing adequate physical examinations to determine whether Patient One was suffering from clinical or iatrogenic hyperthyroidism, or (b) failing to record the findings of such physical examinations in the patient records.
- 1.3 Between June 1994 and November 1995, Respondent prescribed thyroid medication to Patient Two without adequate laboratory testing and without either (a) performing adequate physical examinations to determine whether Patient One was suffering from clinical or iatrogenic

hyperthyroidism, or (b) failing to record the findings of such physical examinations in the patient records.

1.4 Between February 1995 and October 1995, Respondent prescribed thyroid medication to Patient Three without either (a) performing adequate physical examinations to determine whether Patient One was suffering from clinical or iatrogenic hyperthyroidism, or (b) failing to record the findings of such physical examinations in the patient records.

1.5 Between October 1994 and and June 1995, Respondent prescribed thyroid medication to Patient Four without either (a) performing adequate physical examinations to determine whether Patient One was suffering from clinical or iatrogenic hyperthyroidism, or (b) failing to record the findings of such physical examinations in the patient records.

Section 2: SUMMARY OF EVIDENCE

2.1 Respondent's medical records of Patients One, Two, Three and Four.

2.2 Report of Steven Bratman, MD, dated October 3, 1996.

Section 3: ALLEGED VIOLATIONS

3.1 The facts alleged in paragraphs 1.2 through 1.5, if proven, would constitute unprofessional conduct in violation of RCW 18.130.180(4) which provides in part:

Incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed. The use of a nontraditional treatment by itself shall not constitute unprofessional conduct, provided that it does not result in injury to a patient or create an unreasonable risk that a patient may be harmed.

Section 4: NOTICE TO RESPONDENT

4.1 The Commission has determined that this case may be appropriate for resolution through a Stipulation to Informal Disposition, pursuant to RCW 18.130.172(2). A proposed Stipulation to

Informal Disposition is attached, which contains the disposition the Commission believes is necessary to address the conduct alleged in this Statement of Allegations and Summary of Evidence.

4.2 If Respondent agrees that the disposition imposed by the Stipulation to Informal Disposition is appropriate to address the conduct alleged in this Statement of Allegations and Summary of Evidence, Respondent should sign and date the Stipulation to Informal Disposition and return it within fourteen days to

Cassandra Batdorf
Department of Health
Health Professions, Section 5
1300 SE Quince St.
Olympia, Washington 98504.

4.3 If Respondent does not agree that the terms and conditions contained in the Stipulation to Informal Disposition are appropriate to address the conduct alleged in the Statement of Allegations and Summary of Evidence, Respondent should contact Michael L. Farrell, Department of Health Staff Attorney, at (509) 458-3643 within fourteen days.

4.4 If Respondent does not respond within fourteen days, the Commission will assume Respondent has declined to resolve the allegations by means of a Stipulation to Informal Disposition.

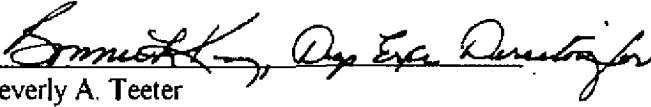
4.5 In the event Respondent declines to resolve the allegations by means of a Stipulation to Informal Disposition pursuant to RCW 18.130.172(2), the Commission may proceed to formal disciplinary action against Respondent by filing a statement of charges, pursuant to RCW 18.130.172(3).


4.6 The cover letter enclosed with this Statement of Allegations and Summary of Evidence was mailed to the name and address currently on file for Respondent's license. Pursuant to WAC 246-01-

100, Respondent must notify, in writing, the Commission if Respondent's name and/or address changes.

DATED this 20th day of December, 1996.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE COMMISSION


Beverly A. Teeter
Administrator

 FOR
Michael L. Farrell WSBA # 16022
Department of Health Staff Attorney

CONFIDENTIAL SCHEDULE

This information is confidential and is NOT to be released without the consent of the individual or individuals named herein. RCW 42.17.310(1)(d) and 18.19.100.

- A.
- B.
- C.
- D.



**STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE COMMISSION**

In the Matter of the License to)	
Practice as a Physician and Surgeon of)	Program No. 94-09-0045MD
)	
RICHARD STANLEY WILKINSON, MD)	STIPULATION TO INFORMAL
License No. MD00016229)	DISPOSITION
Respondent.)	
)	
)	

Section 1: STIPULATION

The parties to the above-entitled matter stipulate as follows:

1.1 Richard S. Wilkinson, MD, Respondent, is informed and understands that the Administrator of the Medical Quality Assurance Commission, on designation by the Commission, has made the following allegations:

1.1.1 Between December 1994 and June 1996, Respondent prescribed thyroid medication to Patient One without adequate laboratory testing and without either (a) performing adequate physical examinations to determine whether Patient One was suffering from clinical or iatrogenic hyperthyroidism, or (b) failing to record the findings of such physical examinations in the patient records.

1.1.2 Between June 1994 and November 1995, Respondent prescribed thyroid medication to Patient Two without adequate laboratory testing and without either (a) performing adequate physical examinations to determine whether Patient One was suffering from clinical or iatrogenic hyperthyroidism, or (b) failing to record the findings of such physical examinations in the patient records.

1.1.3 Between February 1995 and October 1995, Respondent prescribed thyroid medication to Patient Three without either (a) performing adequate physical examinations to determine whether Patient One was suffering from clinical or iatrogenic hyperthyroidism, or (b) failing to record the findings of such physical examinations in the patient records.

1.1.4 Between October 1994 and June 1995, Respondent prescribed thyroid medication to Patient Four without either (a) performing adequate physical examinations to determine whether Patient One was suffering from clinical or iatrogenic hyperthyroidism, or (b) failing to record the findings of such physical examinations in the patient records.

1.2 Respondent is informed and understands that the Commission has alleged that the conduct described above, if proven, would constitute a violation of RCW 18.130.180(4).

1.3 The parties wish to resolve this matter by means of a Stipulation to Informal Disposition pursuant to RCW 18.130.172(1).

1.4 Respondent agrees to be bound by the terms and conditions of the Stipulation to Informal Disposition.

1.5 This Stipulation to Informal Disposition is of no force and effect and is not binding on the parties unless and until this Stipulation to Informal Disposition is accepted by the Commission.

1.6 Respondent does not admit any of the allegations in the Statement of Allegations and Summary of Evidence or in paragraph 1.1 above. This Stipulation to Informal Disposition shall not be construed as a finding of unprofessional conduct or inability to practice.

1.7 This Stipulation to Informal Disposition is not formal disciplinary action. It is not subject to the reporting requirements of RCW 18.130.110 or any interstate/national reporting requirement.

1.8 This Stipulation to Informal Disposition is releasable to the public upon request pursuant to the Public Records Act, chapter 42.17 RCW. The Statement of Allegations and Summary of Evidence and the Stipulation to Informal Disposition shall remain part of Respondent's file and cannot be expunged.

1.9 The Commission agrees to forego further disciplinary proceedings concerning the allegations contained in sections 1.1 and 1.2 above.

1.10 Respondent agrees to successfully complete the terms and conditions of this informal disposition.

1.11 Respondent is advised and understands that a violation of the provisions of section 2 of this Stipulation to Informal Disposition, if proved, would constitute grounds for discipline under RCW 18.130.180 and the imposition of sanctions under RCW 18.130.160.

Section 2: INFORMAL DISPOSITION

Pursuant to RCW 18.130.172 (2) and based upon the foregoing stipulation, the parties agree to the following Informal Disposition:

2.1 In each and every case in which Respondent chooses to treat a patient with thyroid replacement therapy, Respondent agrees to perform adequate laboratory tests and physical examinations on a periodic basis to determine whether the patient is at danger from iatrogenic hyperthyroidism. Respondent shall also record the findings of the physical examinations in the patient's chart.

2.2 Respondent agrees to complete at least 25 hours of Category I CME in the areas of proper management of endocrine disease and record-keeping. The CME course hours must be approved in advance by the Commission or the Commission's designee in advance. The CME course hours will be

approved so long as the course hours are Category I and the course covers the management of endocrine disease and/or record-keeping; the sponsor of the course is not relevant. The CME course hours shall be completed within one year of the effective date of this Order.

2.3 In order to monitor compliance with the Order Respondent agrees that a representative of the Commission may make announced semi-annual visits to Respondent's practice to inspect office and/or medical records. The representative shall review the records of Respondent's patients receiving thyroid replacement therapy.

2.4 Respondent agrees to pay \$1000 to partially reimburse the Commission for obtaining a review in this matter. Respondent agrees to send the payment within ninety (90) days of the effective date of this Stipulation to Informal Disposition. The check shall be sent to the following address:

Department of Health
P.O. Box 1099
Olympia, WA 98507-1099.

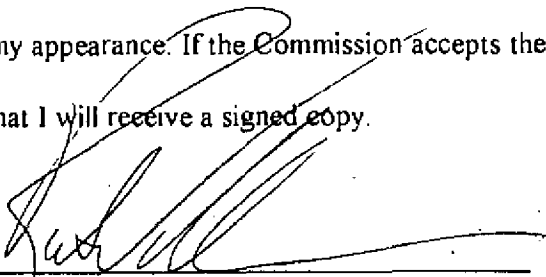
2.5 Respondent may petition for termination of this Stipulation to Informal Disposition in writing no sooner than one year from the effective date of this Stipulation to Informal Disposition. With the written petition, Respondent must submit evidence that he has complied with the terms and conditions of this Stipulation to Informal Disposition. The evidence shall include copies of certificates showing completion of the required CME hours. If the Commission finds Respondent in compliance with this Stipulation to Informal Disposition, the Commission shall terminate the terms and conditions of this Stipulation to Informal Disposition by written letter to Respondent.

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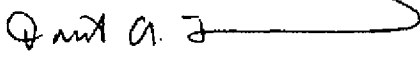
I, Richard S. Wilkinson, MD, Respondent, certify that I have read this Stipulation to Informal Disposition in its entirety; that my counsel of record, if any, has fully explained the legal significance and consequence of it; that I fully understand and agree to all of it, and that it may be presented to the Commission without my appearance. If the Commission accepts the Stipulation to Informal Disposition, I understand that I will receive a signed copy.



Richard S. Wilkinson, MD
Respondent

February 26, 1997

Date



David Thorner WSBA 4783
Attorney for Respondent

February 26, 1997

Date

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Section 3: ACCEPTANCE

The Medical Quality Assurance Commission accepts this Stipulation to Informal Disposition. All parties shall be bound by its terms and conditions.

DATED this 7th day of March, 1997.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE COMMISSION

Darrell D. Beer

Acting Panel Chair

Presented by:

Michael L. Farrell

Michael L. Farrell WSBA # 16022
Department of Health Staff Attorney

March 3, 1997

Date

Redaction Summary (8 redactions)

1 Privilege / Exemption reason used:

1 -- "Healthcare Information Readily Identifiable to a Person - RCW 42.56.360(2), RCW 70.02.020(1), RCW 42.56.070(1)" (8 instances)

8

Page 1, Healthcare Information Readily Identifiable to a Person - RCW 42.56.360(2), RCW 70.02.020(1), RCW 42.56.070(1), 3 instances

Page 2, Healthcare Information Readily Identifiable to a Person - RCW 42.56.360(2), RCW 70.02.020(1), RCW 42.56.070(1), 2 instances

Page 5, Healthcare Information Readily Identifiable to a Person - RCW 42.56.360(2), RCW 70.02.020(1), RCW 42.56.070(1), 2 instances

Page 12, Healthcare Information Readily Identifiable to a Person - RCW 42.56.360(2), RCW 70.02.020(1), RCW 42.56.070(1), 1 instance