STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

In re:	)	CONSENT
Anthony J. Keating, M.D.	)	AGREEMENT

This document is a Consent Agreement, effective when signed by all parties, regarding a license to practice medicine in the State of Maine held by Anthony J. Keating, M.D. The parties to this agreement are Anthony J. Keating, M.D. ("the Licensee"), the State of Maine Board of Licensure in Medicine ("the Board") and the State of Maine Department of the Attorney General. This Consent Agreement is issued pursuant to 10 M.R.S.A. § 8003(5)(A-1) and 32 M.R.S.A. § 3282–A.

STATEMENT OF FACTS

1. The Licensee has held a license to practice medicine in the State of Maine since 1967.

2. In 1998, the Board received a complaint of inappropriate prescribing practices from a patient of the Licensee.

3. The patient's chart indicated that the Licensee had prescribed controlled substances for the patient without conducting or charting an examination.

4. The Board also received a complaint from the Maine Drug Enforcement Agency about the Licensee's prescribing practices. In the course of investigating this complaint, the Board learned that, after the Licensee retired in December, 1998, he

continued to prescribe medications for some patients for whom he had no medical records.

AGREEMENT

In lieu of proceeding to an adjudicatory hearing, the Licensee agrees to the following:

1. The Board has jurisdiction over the Licensee and over the matters which are subject of this Consent Agreement.

2. The Licensee agrees to accept a warning from the Board.

3. The Licensee agrees to pay a fine of $1,500.00.

4. The Licensee waives his right to a hearing before the Board or any court regarding all terms and conditions of this Consent Agreement.

5. The Licensee has been advised of his right to seek legal counsel with respect to the terms and negotiation of this agreement.

I, ANTHONY J. KEATING, M.D., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT. I UNDERSTAND THAT BY SIGNING IT, I WAIVE CERTAIN RIGHTS. I SIGN THIS CONSENT AGREEMENT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS CONSENT AGREEMENT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

DATED: 4/4/00

ANTHONY J. KEATING, M.D.

STATE OF MAINE
Androscoggin, S.S.

Personally appeared before me the above–named Anthony J. Keating, M.D., and swore to the truth of the foregoing based upon his own personal knowledge, or upon information and belief, and so far as upon information and belief, he believes it to be true.

DATED: 4-4-00

Henrietta Wilson
NOTARY PUBLIC

HENRIETTA H. WILSON
Notary Public, Maine
My Commission Expires May 13, 2000

STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

DATED: 5/9/00

~~EDWARD DAVID~~, M.D., Chairman, acting

STATE OF MAINE
DEPARTMENT OF THE
ATTORNEY GENERAL

DATED: 5/9/00

Ruth E. McNiff
RUTH E. McNIFF
Assistant Attorney General

APPROVED
EFFECTIVE: