

STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

IN RE:)	CONSENT AGREEMENT
KENG CHEONG LEONG, M.D.)	FOR DISCIPLINE AND
CR10-580)	RESTRICTED/CONDITIONAL
)	LICENSURE

This document is a Consent Agreement For Discipline and Restricted/Conditional Licensure, effective when signed by all parties, regarding discipline imposed upon and the issuance of an active conditional license to practice medicine in the State of Maine to Keng Cheong Leong, M.D. The parties to this Consent Agreement are: Keng Cheong Leong, M.D. ("Dr. Leong"), the State of Maine Board of Licensure in Medicine (the "Board") and the Maine Department of Attorney General.

STATEMENT OF FACTS

1. The Board first issued Dr. Leong a medical license on April 23, 1973. Dr. Leong specializes in Obstetrics and Gynecology (OB-GYN).
2. On August 24, 2010, the Board received an application from Dr. Leong to renew his Maine medical license.
3. On July 12, 2010, the Board staff received information from a pharmacist who indicated that he had just filled a prescription for controlled drugs (Oxycontin) issued by Dr. Leong for JM, a male patient. The pharmacist also indicated that he had worked in the area a long time and was aware that Dr. Leong practiced the medical specialty of OB/GYN. The pharmacist contacted Dr. Leong, who confirmed the prescription and indicated that he had

been treating patient JM for some time for back pain. As a result of receiving this information, the Board staff obtained information from the Prescription Monitoring Program (PMP), which confirmed that Dr. Leong had been prescribing controlled drugs to male patients, including JM.

4. On or about September 29, 2010, the Board staff sent Dr. Leong a subpoena to provide the Board with a copy of JM's medical records.

5. On or about October 12, 2010, the Board received a letter from Dr. Leong, together with a copy of JM's medical records. According to Dr. Leong's letter, about a year prior he slipped and fell and injured his shoulder and back. As a result of his injury, Dr. Leong decided to give up surgery and obstetrics due to continuing pain and safety concerns for his patients. According to Dr. Leong, he began a "general practice" of medicine on a part-time basis that included male patients. Dr. Leong described patient JM as a "walk in" patient who requested pain medication. Dr. Leong indicated that patient JM was from out-of-state, had returned a few times, and that he tried to refer patient JM to physical therapy and a pain control clinic.

6. A review of the medical records for JM indicated:

- a. 7-10-10 "Walk - in" History reviewed Has pcp (primary care physician) from out of state. Temporarily staying in Maine. Cc Generalized chronic pain esp. joints - sometimes severe. Pain discussed Advised _____ and try other methods of treatment Attempt to refer to Behavioral Clinic and Rehab - pt. (patient) hesitating pcp did the same. Rx Oxycontin 20 mg tid PRN x 90 # - Advised prescription of analgesics are temporary - To return to own physician for continuing care Wt - 195 Bp 165/70"

- b. 8-11-10 "Pain – generalized Previous treatment tried Continues to do mild exercises and treatment Rx Oxycotin 20 mg Tid PRN x 90 # follow-up Advised"
- c. 9-17-10 "Generalized pain esp joints On analgesics Advised to take minimum Rx Oxycodone 20 mg PRN Bid x 95 follow-up"

Dr. Leong's hand-written records for patient JM did not include any of the following elements for treating chronic pain in accordance with Board Rule, Chapter 21, Section III, "Principles of Proper Pain Management:"

- a. Appropriate documentation of medical history and physical examination, including the nature and intensity of the pain, current and past treatments for pain, underlying or coexisting diseases, the effect of the pain on physical and psychological functioning, and history of substance abuse.
- b. Appropriate documentation of a treatment plan that states objectives to be used to determine treatment success, and should indicate whether any other diagnostic evaluations or treatments are planned.

In addition, Dr. Leong's medical records did not explain why he continued to prescribe narcotics to JM knowing that JM had a primary care physician in another state and after he advised JM that he should return to his physician for continuing care.

7. On December 14, 2010, the Board reviewed the foregoing information, and voted to initiate a complaint against Dr. Leong's license pursuant to 32 M.R.S. § 3282-A. The Board docketed the complaint as CR10-580, and sent it to Dr. Leong for response. In addition, the Board issued a subpoena to Dr. Leong to produce the medical records of 3 other male patients

and 4 female patients.

8. On December 30, 2010, the Board's Medical Director received a telephone call from Dr. Leong. Dr. Leong told the Medical Director that he had not been practicing OB/GYN for about one year since he was injured, and that he had switched to family practice and treats both men and women. Dr. Leong admitted that his medical record documentation was not the best. Dr. Leong said he prescribed the patients what they were receiving from other doctors, believed that the patients were in pain, other treatment options have not worked, and that pain medications are their "last resort." The Medical Director told Dr. Leong that he needed to explain his medical treatment of these patients, why he was prescribing the medications and his treatment plan.

9. On January 4, 2011, the Board's Medical Director again spoke telephonically with Dr. Leong. The Medical Director told Dr. Leong that the Board's complaint focused on concerns related to his prescribing of controlled substances and his transition to a primary care provider. Dr. Leong admitted that he was "naïve" when it came to patient requests for narcotics. The Medical Director discussed with Dr. Leong the need to obtain and review medical records of patients who transfer to his care, perform drugs testing, pill counts, access the prescription monitoring program (PMP). During this conversation, Dr. Leong stated that MaineCare has allowed him to be a primary care provider, but stated that he had no specific medical training in primary care, although all of his continuing medical education (CME) was in primary care.

10. On January 18, 2011, the Board received a response from Dr. Leong to complaint CR10-580. In his response, Dr. Leong stated that during the last year he switched his practice from OB-GYN, which he practiced for 37-38 years, to general and family practice that includes the treatment of male and female patients. Dr. Leong stated that he attends medical seminars on general medicine, and that he has prescribed narcotics for years for post-operative pain control. Dr. Leong also stated that treating patients for chronic pain was new to him and posed a challenge. Dr. Leong did not describe his treatment for each of the 7 patient records subpoenaed by the Board, but provided a general description of his approach to their care, including performing regular “physicals” and referring “difficult cases” to specialists. None of the 7 patient records provided by Dr. Leong with his response included any of the following elements for treating chronic pain in accordance with Board Rule, Chapter 21, Section III, “Principles of Proper Pain Management:”

- a. Appropriate documentation of medical history and physical examination, including the nature and intensity of the pain, current and past treatments for pain, underlying or coexisting diseases, the effect of the pain on physical and psychological functioning, and history of substance abuse.
- b. Appropriate documentation of a treatment plan that states objectives to be used to determine treatment success, and should indicate whether any other diagnostic evaluations or treatments are planned.

11. On February 8, 2011, the Board reviewed complaint CR10-580, including the hand-written medical records for the 3 male and 4 female

patients to whom Dr. Leong prescribed narcotics for chronic pain. Following its review, the Board voted to schedule the matter for an adjudicatory hearing. In addition, the Board voted to authorize its assigned legal counsel to negotiate a consent agreement with Dr. Leong to resolve CR10-580 without hearing.

12. This Consent Agreement has been negotiated by and between legal counsel for Dr. Leong and assigned legal counsel for the Board in order to resolve complaint CR10-580 and his pending license application without an adjudicatory hearing. Absent Dr. Leong's acceptance of this Consent Agreement by signing it, dating it, having it notarized, and returning it to the Maine Board of Licensure in Medicine, 137 State House Station, Augusta, Maine 04333-0137 on or before May 6, 2011, the Board will resolve these matters by holding a consolidated adjudicatory hearing at a later date.

13. By signing this Consent Agreement, Dr. Leong waives any and all objections to, and hereby consents to allow the Board's legal counsel to present this proposed Consent Agreement to the Board for possible ratification on May 10, 2011. Dr. Leong also forever waives any arguments of bias or otherwise against any of the Board members in the event that the Board fails to ratify this proposed Consent Agreement.

COVENANTS

In lieu of proceeding to an adjudicatory hearing the Board and Dr. Leong agree to the following disposition.

14. Dr. Leong concedes that based upon the facts described in

paragraphs 1 to 10 above that the Board has sufficient evidence from which it could conclude that he engaged in unprofessional conduct by prescribing narcotic medication to patients without conducting and documenting appropriate medical history, physical examination, and treatment planning. Dr. Leong concedes that such conduct, if proven, could constitute grounds for discipline and the denial of his application to renew his Maine medical license pursuant to 32 M.R.S.A. § 3282-A(2)(F).

15. As discipline for the conduct admitted above, Dr. Leong agrees to:

a. Accept a REPRIMAND. As a medical professional and licensee of the Board, Dr. Leong should have been aware of the limitations of his medical knowledge and training with regard to treating chronic pain by prescribing narcotic medication. Narcotic medications are highly addictive and subject to abuse. As a medical professional, Dr. Leong was also responsible for being aware of and complying with Board Rule, Chapter 21, "Use of Controlled Substances For Treatment of Pain."

b. Dr. Leong shall immediately cease practicing general medicine, a medical specialty for which he has limited medical training, and limit his practice of medicine only to office-based gynecology.

c. Dr. Leong shall immediately cease prescribing any controlled medications for the treatment of chronic pain (i.e. narcotics, benzodiazepines, hypnotics). Dr. Leong may prescribe controlled substances for no more than ten (10) consecutive days to treat gynecology patients for acute pain/acute

anxiety/conditions. In addition, to the extent that Dr. Leong prescribes any controlled drugs to patients in his office-based gynecological practice, Dr. Leong shall comply with Board Rule, Chapter 21, "Use of Controlled Substances For Treatment of Pain."

16. The Board agrees to issue and Dr. Leong agrees to accept a Maine medical license subject to the following restrictions/conditions:

- a. Dr. Leong will limit his practice of medicine to office-based gynecology.
- b. Dr. Leong shall not prescribe any controlled medications for the treatment of chronic pain (i.e. narcotics, benzodiazepines, hypnotics).
- c. Dr. Leong shall not prescribe controlled substances for more than ten (10) consecutive days to treat gynecology patients for acute pain/acute anxiety/conditions. In addition, to the extent that Dr. Leong prescribes any controlled drugs to patients in his office-based gynecological practice, Dr. Leong shall comply with Board Rule, Chapter 21, "Use of Controlled Substances For Treatment of Pain."

17. Dr. Leong waives his right to a hearing before the Board or any court regarding all findings, terms, restrictions and conditions of this Consent Agreement. Dr. Leong agrees that this Consent Agreement is a final order resolving complaint CR10-580 and his pending application for licensure. This Consent Agreement is not appealable and is effective until or unless modified or rescinded in writing by the parties hereto. This Consent Agreement cannot

be amended orally. It can only be amended by a writing signed by the parties hereto and approved by the Office of Attorney General.

18. The Board and the Office of the Attorney General may communicate and cooperate regarding Dr. Leong or any other matter relating to this Consent Agreement.

19. This Consent Agreement is a public record within the meaning of 1 M.R.S. § 402 and will be available for inspection and copying by the public pursuant to 1 M.R.S. § 408. This Consent Agreement constitutes disciplinary and adverse licensing action that is reportable to the Federation of State Medical Boards (FSMB), the National Practitioner Data Bank (NPDB), and the Healthcare Integrity and Protection Data Bank (HIPDB).

20. Nothing in this Consent Agreement shall be construed to affect any right or interest of any person not a party hereto.

21. The Board and Dr. Leong agree that no further agency or legal action will be initiated against him by the Board based upon complaint CR10-580, except or unless he fails to comply with the terms and conditions of this Consent Agreement.

22. Dr. Leong acknowledges that, pursuant to Title 10 M.R.S. § 8003(5)(B), his failure to comply with any of the terms or conditions of this Consent Agreement shall constitute grounds for additional disciplinary action against his Maine medical license, including but not limited to an order, after hearing, imposing additional fines and costs.

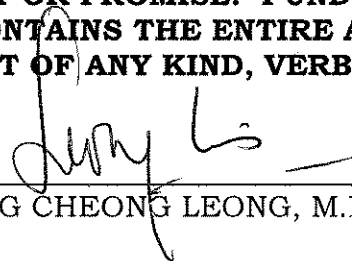
23. Dr. Leong acknowledges and agrees that, pursuant to Title 10 M.R.S. § 8003(5), the Board has the authority to suspend or revoke his medical license in the event that he fails to comply with any terms or conditions of this Consent Agreement.

24. Dr. Leong has been represented by Emily A. Bloch, Esq., who has participated in the negotiation of this Consent Agreement.

25. Dr. Leong acknowledges by his signature hereto that he has read this Consent Agreement, that he has had an opportunity to consult with an attorney before executing this Consent Agreement, that he executed this Consent Agreement of his own free will and that he agrees to abide by all terms and conditions set forth herein.

I, KENG CHEONG LEONG, M.D., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT AND AGREE WITH ITS CONTENTS AND TERMS. I FURTHER UNDERSTAND THAT BY SIGNING IT, I WAIVE CERTAIN RIGHTS, INCLUDING THE RIGHT TO A HEARING BEFORE THE BOARD. 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: 5-4-11


KENG CHEONG LEONG, M.D.

STATE OF Maine
Androsdragin, S.S.

Personally appeared before me the above-named, Keng Cheong Leong, 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:

5/4/2011

Sharon Goes

SHARON P. GOES
NOTARY PUBLIC
MAINE
MY COMMISSION EXPIRES APRIL 26, 2017

NOTARY PUBLIC/ATTORNEY

MY COMMISSION ENDS:

April 26, 2017

Dated:

5/3/11

Emily A. Bloch

EMILY A. BLOCH, ESQ.
Attorney for Dr. Leong

STATE OF MAINE BOARD OF
LICENSURE IN MEDICINE

Dated:

5/10/2011

Sheridan R. Oldham, MD

SHERIDAN R. OLDHAM, M.D., Chairman

STATE OF MAINE DEPARTMENT
OF ATTORNEY GENERAL

Dated:

5/10/11

Dennis E. Smith

DENNIS E. SMITH
Assistant Attorney General

Effective Date:

5/10/11