IN THE MATTER OF:
Arnold Rosenbaum M.D.
License Number MD 04446
Case # 180441

CONSENT ORDER

The Rhode Island Board of Medical Licensure and Discipline (hereinafter "Board") has reviewed and investigated the above referenced complaint pertaining to Dr. Arnold Rosenbaum (hereinafter "Respondent") through its Investigative Committee.

FINDINGS OF FACT

1. Respondent has been a licensed physician in the State of Rhode Island since August 9th, 1972. Respondent’s practice is located at 65 Eddie Dowling Highway, North Smithfield, Rhode Island.

2. Respondent is the attending physician for Patient A (alias).

3. The Board received a complaint from Patient A (alias) who complained regarding how she was treated from Respondent in regard to controlled substance prescriptions.

4. Complainant notes she was initially evaluated by Respondent on November 29th, 2017 diagnosed with chronic pain syndrome and lab tests were ordered including a urine drug screen. Complainant states she had a subsequent follow up visit with Respondent on December 6th, 2017 and was prescribed oxycodone 5 mg 1 tablet every 6 hours as needed for low back pain. Complainant avers she was called later that day from Walgreens pharmacy stating the pharmacist had called Respondent because Patient A was taking Suboxone®. Complainant avers pharmacist informed her Respondent had canceled the oxycodone prescription and Patient A could no longer get prescriptions filled at
Walgreens pharmacies. Complainant avers she disclosed to Respondent she was taking Suboxone® and she was misrepresented in this matter. Complainant states “I have been slandered....”

4. Respondent was invited to appear before the Investigative Committee August 2nd, 2018 yet declined due to staffing shortages at his place of employment.

5. Respondent evaluated Patient A on November 29th, 2017 and diagnosed Patient A with chronic pain syndrome. Respondent avers in his response to the Board that Patient A did not disclose she was taking Suboxone®. Respondent did order a urine drug screen that day, which was resulted the next day and revealed presence of buprenorphine (active ingredient of Suboxone®). Confirmatory testing ordered by Respondent from Highline Labs resulted on December 4th, 2017 revealed presence of buprenorphine, naloxone and norbuprenorphine all of which are ingredients found in Suboxone®.

6. Respondent evaluated Patient A subsequently on December 6th, 2017 and diagnosed Patient A with low back pain and prescribed oxycodone 5 mg, every 6 hours for pain with 28 tablets. Respondent also obtained a urine drug screen at that visit, which was resulted the next day and revealed presence of buprenorphine. Confirmatory testing ordered by Respondent and completed by Highline Labs resulted on December 11th, 2017 revealed presence of buprenorphine, naloxone and norbuprenorphine all of which are ingredients found in Suboxone®. These results are identical to the November 29th specimen and support the complainants claim that she was taking Suboxone®.

7. Review of the PDMP reveal that Patient A was being prescribed Suboxone® since August 4th, 2017 and filled it consistently prior to and after being evaluated by Respondent.

8. Respondent did not check the PDMP before prescribing oxycodone, yet a Physician Assistant in Respondents office did check the PDMP which clearly reveal Patient A’s medication history.

9. Respondent states in his response to the Board; “…In addition, management of patients with concurrent prescription of suboxone and opiate is not deemed clinically appropriate or safe and it is not allowed per office policy…”
10. The Investigative Committee concluded Respondent did not actually review the PDMP prior to prescribing oxycodone to Patient A. The investigative committee further states that it agrees with Respondent that prescribing an opioid to a patient taking Suboxone® prior to weaning the Suboxone is not safe and not clinically appropriate. Respondent did not exercise the appropriate clinical diligence prior to prescribing oxycodone to Patient A and therefore did not meet the minimum standard of care as determined by the Board.

11. Respondent has violated Rhode Island General Laws, specifically, § 5-37-5.1 (19) Incompetent, negligent, or willful misconduct in the practice of medicine which includes the rendering of medically unnecessary services, and any departure from, or the failure to conform to, the minimal standards of acceptable and prevailing medical practice in his or her area of expertise as is determined by the board. The board does not need to establish actual injury to the patient in order to adjudge a physician or limited registrant guilty of the unacceptable medical practice in this subdivision;

Based on the foregoing, the parties agree as follows:

1. Respondent admits to the jurisdiction of the Board.

2. Respondent has agreed to this Consent Order and understands that it is subject to final approval of the Board, and this Consent Order is not binding on Respondent until final ratification by the Board.

3. If ratified by the Board, Respondent hereby acknowledges and waives:
   a. The right to appear personally or by counsel or both before the Board;
   b. The right to produce witnesses and evidence on his behalf at a hearing;
   c. The right to cross examine witnesses;
   d. The right to have subpoenas issued by the Board;
   e. The right to further procedural steps except for those specifically contained herein;
   f. Any and all rights of appeal of this Consent Order; and
   g. Any objection to the fact that this Consent Order will be presented to the Board for consideration and review.
h. Any objection that this Consent Order will be reported to the National Practitioner Data Bank, Federation of State Medical Boards.

4. Respondent agrees to a Reprimand on his license.

5. Respondent hereby agrees to successfully complete a Board approved Continuing Medical Education course of at least twenty (20) hours duration, regarding controlled substance prescribing, such as the Vanderbilt course, within 12 months of ratification of this order. Respondent will send notice of compliance with this condition to DOH.PRCompliance@health.ri.gov within 30 days of completing this course.

6. Respondent will engage within 60 days of ratification of this Consent Order a Board approved monitor to review 5 medical records monthly for 12 consecutive months. Monitoring reports shall be sent to DOH.PRCompliance@health.ri.gov no later than 15 days after the preceding 30 days of monitoring.

7. Respondent agrees to pay within (60) days of the ratification of this Consent Order an administrative fee to the Board with a check for $1210 dollars made payable to the Rhode Island General Treasurer for costs associated with investigating the above-referenced complaint. Respondent will send notice of compliance with this condition to DOH.PRCompliance@health.ri.gov within 30 days of mailing the above referenced payment.

8. If Respondent violates any term of this Consent Order, after it is signed and accepted, the Director of the Department of Health shall have the discretion to impose further disciplinary action, including immediate suspension of his medical license. If the Director imposes further disciplinary action, Respondent shall be given notice and shall have the right to request a hearing within twenty (20) days of the suspension and/or further discipline. The Director of the Department of Health shall also have the discretion to request a hearing after notice to Respondent of a violation of any term of this Consent Order. The Board may suspend Respondent’s license, or impose further discipline, for the remainder of Respondent’s probation period if any alleged violation is proven by a preponderance of evidence.
Signed this 9th day of November 2018.

Arnold Rosenbaum M.D.

Ratified this 14th day of November 2018 by the Board of Medical Licensure and Discipline.

Nicole Alexander-Scott, M.D., M.P.H.
Director
Rhode Island Department of Health
3 Capitol Hill, Room 401
Providence, Rhode Island 02908