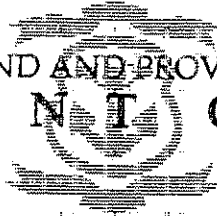


STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
D E P A R T M E N T O F H E A L T H



Safe and Healthy Lives in Safe and Healthy Communities

STATE OF RHODE ISLAND AND
PROVIDENCE PLANTATIONS,
DEPARTMENT OF HEALTH,
BOARD OF MEDICAL LICENSURE
AND DISCIPLINE

C97-026

In the matter of Raymond D. Petit, M.D.

CONSENT ORDER

A memorandum from the Department of Health, Facilities Regulation was sent to the Board of Medical Licensure and Discipline (hereinafter referred to as the Board). The memorandum alleged that Raymond Petit, M.D. (hereinafter referred to as "the Respondent") had violated §5-37-5.1 of the General Laws of the State of Rhode Island, 1956, as amended.

The Respondent is a physician licensed to practice medicine in the State of Rhode Island. The following constitutes the Investigating Committee's Investigative Findings:

Investigative Findings

1. The patient was an 84 year-old male who was residing at a local nursing care facility. He sustained a fall from a geriatric chair and according to the Inter-Agency Referral form from the nursing care facility was reportedly unresponsive for 2-3 minutes. The patient complained of a headache when he began to respond to questions as to what occurred. He was transported to a local emergency room for evaluation and treatment.
2. The emergency room record reveals that he was complaining of head pain and his blood pressure was 195/123. The patient's blood pressure at the nursing care facility after the incident was 190/70, and was in the range of 154/80 at time of transfer.

According to the Inter-Agency Referral form the patient was known to suffer from orthostatic hypotension and was being medically treated for the condition with the use of anti-hypotensive medications as well as an abdominal binder. The Respondent examined him, found the patient to have a normal neurological examination and an essentially normal physical examination. The patient was confused, but reportedly at baseline. The Respondent ordered X-Rays of the cervical spine. While in the ER, the patient complained of headache and vomited approximately 100cc's of fluid two hours after his arrival.

The patient's blood pressure was checked three times while in the ER and each time it was slightly more elevated than the time before. The patient was ultimately discharged back to the nursing care facility with a diagnosis of acute neck strain and a recommendation that he be placed in a posey as needed and supervised.

3. The patient expired within 3 1/2 hours of his return to the nursing care facility. The cause of death according to the death certificate prepared by the medical examiner was listed as subdural hematoma due to blunt head trauma.

4. The Board of Medical Licensure and Discipline finds the Respondent guilty of violating R.I.G.L. §5-37-5.1(19) for failing to document his reason for not ordering a CT Scan for the patient.

The parties agree as follows:

(1) The Respondent is a physician licensed and doing business under and by virtue of the Laws of the State of Rhode Island, allopathic license No. 7573.

(2) Respondent admits to the jurisdiction of the Board and hereby agrees to remain under the jurisdiction of the Board.

(3) Respondent has read this Consent Order and understands that it is a proposal of Investigating Committee II of the Board and is subject to the final approval of the Board. This Consent Order is not binding on respondent until final ratification by the Board.

(4) 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 in 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;
- g. Any objection to the fact that this Consent Order will be presented to the Board for consideration and review;
- h. Any objection to the fact that it will be necessary for the Board to become acquainted with all evidence pertaining to this matter in order to review adequately this Consent Order;
- i. Any objection to the fact that potential bias against the Respondent may occur as a result of the presentation of this Consent Order.

(5) If the Consent Order is not accepted by the Respondent, the Investigative Committee will recommend to the Board that an Administrative Hearing be scheduled with respect to any and all acts of alleged unprofessional conduct.

(6) Acceptance of this Consent Order constitutes an admission by the Respondent that the facts set forth herein are the findings of Investigative Committee II of the Board.

(7) This Consent Order shall become part of the public record of this proceeding once it is accepted by all parties and by the Board. It shall be published, as the Board, in its exercise of its discretion, shall determine.

(8) Failure to comply with this Consent Order, when signed and accepted, shall subject the Respondent to further disciplinary action.

(9) Respondent accepts the sanction of a Reprimand and an administrative fee of \$1000.00 payable within sixty (60) days of the ratification of this order.

Signed this 17 day of 8 , 1999.


Raymond D. Petit, M.D.

Ratified by the Board of Medical Licensure and Discipline at a meeting held on *August*
11, 1999.

Patricia A. Nolan, MD, MPH

Patricia A. Nolan MD, MPH
Chairperson, Board of
Medical Licensure and
Discipline