STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS

DEPARTMENT OF HEALTH
BOARD OF MEDICAL LICENSURE
AND DISCIPLINE

IN THE MATTER OF:
STEVEN R. PEZZULLO, M.D.
License Number MD 05845

SUMMARY SUSPENSION

The Board of Medical Licensure and Discipline (hereinafter "the Board") has received information through a patient concerning the professional activities of Steven R. Pezzullo, M.D., (hereinafter "the Respondent"). The Respondent is a licensed physician in Rhode Island whose principal place of business is Pawtuxet Valley Urgent Care, 982 Tiogue Avenue, Coventry, RI 02816. The Board opened an investigatory file involving a then-seventy year old female patient. In light of the nature of the concern about the Respondent, the Director of Health makes the following:

Findings of Fact and Conclusions of Law

1. The Respondent is a 62 year old physician whose primary and secondary specialties are internal medicine and family practice, respectively. He is a 1977
graduate of the University of Bologna in Italy. He has been licensed to practice medicine in the State of Rhode Island since June 17, 1981.

2. The Board received a complaint from a then-seventy year old female patient about the Respondent's alleged conduct during a physical examination at the urgent care center at which the Respondent was employed.

3. The patient's written initial complaint vividly described a course of the Respondent's physical examination on March 25, 2011, at the Pawtuxet Valley Urgent Care Center for symptoms relating to either bronchitis or pneumonia.

4. The complainant alleged that the Respondent asked her to lie down and he "started to examine my breast over and over" and "started to move his hands lower and lower pulling my slacks down as he moved toward my private (area)." While this allegedly was occurring, the complainant stated she put pressure on her pants to stop the Respondent from lowering her pants any further, then he left the room. She further alleged that the examination was unnecessary because a chest x-ray had already been taken and had revealed the cause of her symptoms.

5. The Board opened an investigation which, *inter alia*, included an appearance of the complainant before the Investigating Committee of the Board. The Committee brought the matter to the full Board, which in turn requested further review.

6. The Respondent appeared recently before the Investigating Committee and was told he had a right to have counsel present. He voluntarily submitted answers to questions the Committee posed to him, and he made several comments that concerned the Committee that related to his credibility and to his conduct.
Respondent told the Committee that no one had ever made a complaint of this nature in the past, despite an investigation into his alleged sexually inappropriate touching of a female patient that eventually led to a finding of No Unprofessional Conduct by the Board of Medical Licensure and Discipline in 1996. When confronted with this history, even though he was “cleared,” he admitted that there had been similar allegations in the past.

7. That the Investigating Committee was careful to consider the merits of the instant complaint without giving undue consideration to the complaint against the Respondent that closed in 1996. The Board staff present at the Respondent’s interview with the Investigating Committee brought the prior complaint to its attention immediately upon the Respondent denying that a similar complaint of sexually inappropriate conduct had ever been made. Although very little weight is applied to this history due to the ultimate finding of eight members of the Board in 1996, and although the current complainant’s allegations are sufficiently credible standing alone, it is not insignificant that the prior allegation described some similar conduct by Respondent.

8. The Respondent’s version of how he examined the complainant was concerning because of his medically unnecessary request to have her lie down during his examination of her chest, and for how he demonstrated the holding of his stethoscope with four fingers; although these two facts are certainly not dispositive in and of themselves as to whether the Respondent committed Unprofessional Conduct as found by the Investigating Committee.
9. Significantly, the Respondent admitted to the Committee that he conducted examinations of female patients in the presence of female escorts only when he performed breast and pelvic examinations, but not during other examinations of female patients. The Board of Medical Licensure and Discipline stated to the Respondent through his attorney in a July 17, 1996, letter that it “strongly urges” the Respondent “to adopt a policy of providing a female observer in the examination room during his examination of a female patient.” Given the disturbing and serious allegations made against the Respondent prior to that warning, it is inconceivable that a physician would not heed such a warning to prevent the same type of allegation that has been made by the current complainant, which arose from an examination that Respondent admits was conducted without any escort.

10. After his presentation, the committee voted to find that Respondent had committed Unprofessional Conduct on the part of the Respondent, and to refer the matter to the full Board.

11. The Investigating Committee weighed the credibility of the complainant and of the Respondent, as is their obligation and purview, and expressed strong belief of the complainant’s accuracy, her appropriate corresponding emotional tone when describing each step of Respondent’s alleged actions, and her consistency over multiple interviews over time, and clear disbelief of the Respondent based on his denial of a past sexual complaint even though it had not been substantiated, his demeanor, and a dismissive comment he made about the patient’s age. Because of the complexity of analyzing and judging the veracity of two people who were
the only witnesses to an event, and because the investigation can be resolved only by a weighing of both parties' credibility, the Board and its Investigating Committee have proceeded carefully and deliberately in this matter.

12. The Investigating Committee believed the presentation of the complainant, who averred that the Respondent had touched her breasts inappropriately during a stethoscopic examination and had partly lowered her pants without informing her before doing so, and as such, he is an immediate danger to the public if he were allowed to continue to practice medicine at this time.

ORDER

After considering the findings of the Investigating Committee of the Board of Medical Licensure and Discipline regarding the Respondent, it has been determined that the continuation of the practice of medicine by the Respondent would constitute an immediate danger to the public. Accordingly, the Respondent is suspended from practicing medicine until further Order of the Department of Health, Board of Medical Licensure and Discipline. The Respondent is entitled to an administrative hearing on this suspension within ten (10) days of this Order pursuant to Rhode Island General Laws §5-37-8.

Michael Fine, M.D.  Date
CERTIFICATION

I hereby certify that I have hand delivered and mailed by regular mail and certified mail a copy of this ORDER to Steven R. Pezzullo, MD. On this 31st day of August 2012.

Steven R. Pezzullo, MD
815 Sandy Lane #7
Warwick, RI 02889

Steven Pezzullo, MD
Pawuxet Valley Urgent Care
982 Tiogue Ave.
Coventry, RI 02816

Linda Julian