

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

RHODE ISLAND DEPARTMENT OF HEALTH,
ENVIRONMENTAL AND HEALTH SERVICES REGULATION,
OFFICE OF FACILITIES REGULATION and
MICHAEL FINE, M.D., IN HIS CAPACITY
AS DIRECTOR OF THE DEPARTMENT OF HEALTH

In the Matter of:

SCOTT TIMOTHY SCHMIDT, M.D.
IN HIS CAPACITY AS FACILITY SUPERVISOR AND
RADIATION SAFETY OFFICER FOR
THE CENTER FOR PLASTIC & HAND SURGERY
235 PLAIN STREET, SUITE 203
PROVIDENCE RI 02905

RE: DIAGNOSTIC X-RAY EQUIPMENT, LICENSE # SRF-0198

IMMEDIATE COMPLIANCE ORDER

Now comes the Director of the Rhode Island Department of Health, pursuant to Rhode Island General Laws Chapter 23-1.3, Radiation Control, and makes the following findings and enters the following Order:

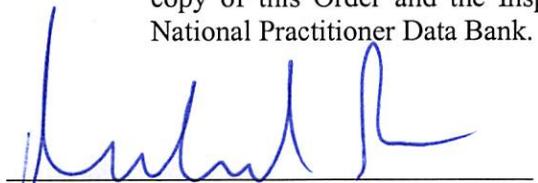
1. The Center for Plastic & Hand Surgery is a Physician Practice (hereinafter "Practice") operating under Dr. Scott Timothy Schmidt's physician's license #MD-12444. The Practice is located on 235 Plain Street, Suite 203, Providence, Rhode Island. The Practice is registered for Diagnostic X-Ray Equipment by the Office of Facilities Regulation within the Department of Health pursuant to Section 23-1.3-5, et seq. of the General Laws of the State of Rhode Island.
2. Scott Timothy Schmidt, MD is the duly registered Facility Supervisor and Radiation Safety Officer for the Practice.
3. Pursuant to RI General Law Chapter 23-1.3 and the Rules and Regulation for the Control of Radiation, Part F Diagnostic X-rays and Associated Imaging Systems in the Healing Arts (R23-1.3-RAD) and as a condition of its registration, the Practice is responsible for the safe use of diagnostic X-ray equipment and associated imaging systems in the healing arts and ensuring the general health and safety of patients and employees regarding the intentional exposure of individuals to X-ray imaging.
4. On June 18, 2013, a Radiological Health Specialist from the Office of Facilities Regulation conducted and concluded an announced (i.e., scheduled) on-site inspection for the purpose of reviewing compliance with regulations for diagnostic X-ray imaging. The inspector conducted an exit interview with the Practice Office Manager and outlined the areas of non-compliance.
5. A copy of the results of this inspection as set forth in the notice of violation (hereafter "Inspection") is attached hereto and made part hereof (Exhibit A) and indicates that the Practice failed to be in compliance with regulatory standards, including failing to have the required shielding assessment of radiation levels, to have the annual entrance exposure rate measurements, or to ensure that patients and employees who are present in the room where x-rays are produced have the necessary protective clothing and/or physical barriers.

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6. On July 1, 2013, a Radiological Health Specialist from the Office of Facilities Regulation conducted an unannounced on-site inspection for the purpose of assessing correction efforts of the Practice. The inspector confirmed the Practice continued to operate the x-ray equipment without the required shielding assessment and exposure safety devices.
7. The Director hereby finds based on the identified deficiencies of the Inspection that the Practice failed to appropriately supervise and manage the operation and use of the diagnostic X-ray equipment to ensure the health and welfare of patients.
8. Therefore, based on the foregoing and in accordance with RI General Law § 23-1.3-9 and 23-1-21, the Administrator finds an emergency exists that without intervention of the Department of Health and issuance of this Immediate Compliance Order, the public health, or welfare of patients of the Practice will be in jeopardy, and immediate action is required to protect the public health, welfare or safety of the public.

It is hereby ORDERED:

1. Effective with the receipt of this order, the Practice must cease use of the x-ray equipment and will immediately contract with an individual registered in RI to provide radiation physics services to:
 - a. Conduct an entrance exposure rate measurement for the fluoroscopic unit and post the results;
 - b. Develop a shielding plan.
 - c. Report to the Director the consultants findings and actions, if any.
2. Effective with the receipt of this order, the Practice must acquire and have available for use lead aprons or equivalent for patients, human holders, and staff in the room when performing fluoroscopic procedures.
3. In accordance with RI General Laws §§ 23-1.3-9 and 23-1-21, you are required to implement this order. Upon written application to the Director of Health, you may request a hearing regarding this order. The Practice must submit a complete plan of correction that is acceptable to the Director, for all deficiencies outlined in Exhibit A no later than July 15, 2013.
4. Notwithstanding any further findings, actions, or sanctions by the Department, this order remains in effect until further notice. In support of this order, the Department will forward a copy of this Order and the Inspection report to the Board of Medical Licensure and the National Practitioner Data Bank.



Michael Fine,
Director, Rhode Island Department of Health

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CERTIFICATION OF SERVICE

A copy of this Immediate Compliance Order was hand-delivered to Fatima Coggeshall by the undersigned on this 3rd day of July, 2013, and documents receipt of this order.

Charma E. Waring