

COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS.

Board of Registration in Medicine

Adjudicatory Case No. 2018-018

In the Matter of)
)
)
CRAIG JARRETT, M.D.)
_____)

CONSENT ORDER

Craig Jarrett, M.D. (Respondent) and the Complaint Counsel agree that the Board of Registration in Medicine (Board) may issue this Consent Order, in lieu of convening an adjudicatory hearing, with all of the force and effect of a Final Decision within the meaning of 801 CMR 1.01(11)(d). The Respondent admits to the findings of fact specified below and agrees that the Board may make the conclusions of law and impose the sanctions set forth below in resolution of investigative Docket Number 17-268.

FINDINGS OF FACT

1. The Respondent was born on January 2, 1981. He graduated from Case Western Reserve University School of Medicine in 2010. He has been licensed to practice medicine in Massachusetts under certificate number 254192 since 2013. He has a practice specialty in Cardiac Surgery and General Surgery.
2. The Respondent began his residency at Massachusetts General Hospital (MGH) in 2010.
3. MGH has a policy that forbids residents from moonlighting, taking other jobs, while in clinical residency, except during preapproved times.

4. Any moonlighting activity that takes place should be reported to the Program Director for the General Surgery Program. Those hours must then be deducted from the 80 hours per week for which residents are allowed to perform clinical work.
5. On July 1, 2015, the MGH Chief of Surgery became aware that the Respondent had been moonlighting in violation of the MGH Resident moonlighting policy.
6. Previously, the Respondent had signed a contract and knew that moonlighting was prohibited unless approved. The Respondent agreed that he would not continue to moonlight.
7. Attending physicians had notified the Program Director for the General Surgery Program that the Respondent's performance on some of the services had been "very peripheral," and the Respondent was frequently absent.
8. The Chief of Surgery met with the Respondent on the same day to address the information that he had received.
9. The Chief of Surgery informed the Respondent that the Respondent had lied to his Program Director about moonlighting on at least three occasions.
10. The Respondent was informed that if he was "caught in a lie again" during the following 12 months, he would be terminated from the program immediately and not credited with completion of his Chief resident year.
11. The Chief of Surgery informed the Respondent that he intended to inform all of the attending physicians on the Respondent's service of the Respondent's "pattern of dishonesty," and that any observed instances of dishonesty were to be reported to the Chief of Surgery.

12. The Chief of Surgery also informed the Program Director of the Cardiovascular Surgery Program at the Brigham & Women's Hospital (Brigham & Women's).
13. In July 2015, the Program Director for the General Surgery Program at MGH, wrote a letter to the Respondent that addressed all of the Program Director's previous communications with the Respondent regarding the residency program's policy which forbids moonlighting while on clinical rotations unless preapproved.
14. According to the letter, the Program Director began informing the Respondent of MGH's moonlighting policy in November of 2014; that the Program Director also had conversations with the Respondent regarding the moonlighting policy in December 2014; and that on December 18, 2014, the Program Director sent an email to all residents reminding them of the "strict prohibition of moonlighting during regular clinical assignments."
15. The MGH Program Director also informed the Brigham & Women's Program Director of the Respondent's moonlighting activities.
16. The Respondent had matched with Brigham & Women's Fellowship Program through the ACGME.
17. After receiving the information from MGH, Brigham & Women's wanted to retract their offer of a residency to the Respondent.
18. The Program Director, the Assistant Director and the Chief of Cardiac Surgery at Brigham & Women's and physicians from MGH, including the Program Director for their surgery program had a further meeting to discuss the Respondent.
19. The physicians from Brigham & Women's were informed that the Respondent had done well in the 4 months since MGH had learned that the Respondent was moonlighting.

MGH had seen no signs that the Respondent had continued to moonlight. The MGH physicians also informed Brigham & Women's physicians of the quality of the Respondent's care of postoperative cardiac patients at Mt. Auburn.

20. MGH's assessments of the Respondent and his work convinced Brigham & Women's to give the Respondent a chance.
21. The Cardiac faculty at Brigham & Women's decided to allow the Respondent to enter the Brigham & Women's cardiothoracic residency with the expectation that a single episode of lying would lead to immediate dismissal.
22. In October 2015, prior to the Respondent beginning at Brigham & Women's, the Program Director, the Associate Director and the Chief of the Division of Cardiac Surgery met with the Respondent to discuss his prior history of lying to the Program Director at MGH about his moonlighting.
23. The Respondent was given a copy of Brigham & Women's contract and Partners policies on moonlighting.
24. After he began his Fellowship at Brigham & Women's, the Respondent had continued his moonlighting activities without the knowledge or approval of his Program Director.
25. On August 2, 2017, the Respondent was scheduled to work the overnight shift as a moonlighter at Mt. Auburn Hospital (Mt. Auburn). The Respondent was providing coverage for the cardiothoracic patients.
26. A primary responsibility of a moonlighter is to be readily available to respond to calls from hospital staff.
27. During his shift, the Respondent failed to respond to multiple calls over an extended period of time. He had left the hospital without notifying anyone.

28. Mt. Auburn's hospital administration determined that the Respondent's failure to respond to the staff's calls was an unacceptable breach of his responsibilities as a moonlighter.
29. His employment at Mt. Auburn was terminated.
30. On September 5, 2017, Mt. Auburn sent notification of the Respondent's termination from their moonlighting program to the Program Director at Brigham & Women's. The letter further notified the Program Director that the matter was a disciplinary action and therefore reportable to the Board.
31. In October 2017, the Respondent was terminated from Brigham & Women's Cardiothoracic Fellowship. He appealed his termination.
32. In October 2017, the Respondent was evaluated by PHS. PHS made recommendations for remedial education and identified several programs. PHS had not identified a health condition for which PHS monitoring would be indicated.
33. In April 2018, after appeal, the Respondent's termination was upheld and became final.

CONCLUSIONS OF LAW

The Respondent has engaged in conduct that undermines the public confidence in the integrity of the medical profession. See *Levy v. Board of Registration in Medicine*, 378 Mass. 519 (1979); *Raymond v. Board of Registration in Medicine*, 387 Mass. 708 (1982).

SANCTION AND ORDER

The Respondent's medical license is hereby indefinitely suspended stayed immediately upon the Respondent entering into a five-year Probation Agreement that requires the Respondent to:

- Complete an assessment by Physician Health Services (PHS) within thirty days of the Board's approval of the Consent Order;

- Comply with all recommendations made by PHS, as reported by PHS Director, Steve Adelman, M.D.;
- Complete twenty Board-approved continuing professional development (CPD) credits in medical ethics (with a focus on patient abandonment and a physician's responsibility to ensure continuity in patient care) within sixty days of the approval of the Consent Order; and
- Comply with such other requirements as the Board may require.

EXECUTION OF THIS CONSENT ORDER

Complaint Counsel, the Respondent, and the Respondent's counsel agree that the approval of this Consent Order is left to the discretion of the Board. The signature of Complaint Counsel, the Respondent, and the Respondent's counsel are expressly conditioned on the Board accepting this Consent Order. If the Board rejects this Consent Order in whole or in part, then the entire document shall be null and void; thereafter, neither of the parties nor anyone else may rely on these stipulations in this proceeding.


As to any matter in this Consent Order left to the discretion of the Board, neither the Respondent, nor anyone acting on his behalf, has received any promises or representations regarding the same.

The Respondent waives any right of appeal that he may have resulting from the Board's acceptance of this Consent Order.

The Respondent shall provide a complete copy of this Consent Order and Probation Agreement, with all exhibits and attachments within ten (10) days by certified mail,

return receipt requested, or by hand delivery to the following designated entities: any in- or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which he practices medicine; any in- or out-of-state health maintenance organization with whom he has privileges or any other kind of association; any state agency, in- or out-of-state, with which he has a provider contract; any in- or out-of-state medical employer, whether or not he practices medicine there; and the state licensing boards of all states in which he has any kind of license to practice medicine. The Respondent shall also provide this notification to any such designated entities with which he becomes associated for the duration of this indefinite suspension and probation. The Respondent is further directed to certify to the Board within ten (10) days that he has complied with this directive.

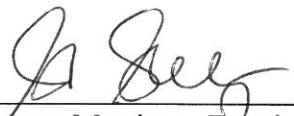
The Board expressly reserves the authority to independently notify, at any time, any of the entities designated above, or any other affected entity, of any action it has taken.



Craig Jarrett, M.D.
Respondent

5/2/18

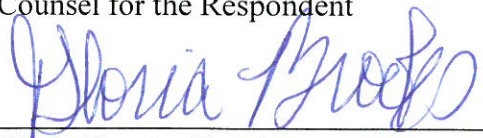
Date



Thomas Merrigan, Esquire
Counsel for the Respondent

5-3-18

Date



Gloria Brooks, Esquire
Complaint Counsel

5/4/18

Date

So ordered by the Board of Registration in Medicine this 10th day of May, 2018.

SENT CERTIFIED MAIL 5/11/18 ms

Craig Jarrett, M.D. Consent Order

Candace Lapidus Sloane, MD
Candace Lapidus Sloane, M.D.
Chair
Page 7