

COMMONWEALTH OF MASSACHUSETTS

Middlesex, ss.

Board of Registration in Medicine

Adjudicatory Case No. 2019-031

In the Matter of)
)
)

Edgar W. Robertson, M.D.)
_____)

CONSENT ORDER

Pursuant to G.L. c. 30A, § 10, Edgar W. Robertson, M.D. (Respondent) and the Board of Registration in Medicine (Board) (hereinafter referred to jointly as the "Parties") agree that the Board may issue this Consent Order to resolve the above-captioned adjudicatory proceeding. The Parties further agree that this Consent Order will have all the force and effect of a Final Decision within the meaning of 801 CMR 1.01(11)(d). The Board agrees that the scope of the instant consent order is limited to the findings of fact and conclusions of law specified below. The Respondent admits to the findings of fact specified below and agrees that the Board may make the conclusions of law and impose the sanction set forth below in resolution of investigative Docket No. 17-042.

Findings of Fact

1. The Respondent graduated from Boston University School of Medicine in 1973. He is certified by the American Board of Medical Specialties in Neurology. The Respondent has been licensed to practice medicine in Massachusetts under certificate number 37083 since 1974.
2. The Respondent was the "on call" neurologist for North Shore Medical Center Union Hospital ("NSMC") on December 18, 2016.

3. On or about December 18, 2016 at 1:00 am, a female patient ("Patient A") was brought to NSMC's Emergency Department. Patient A was experiencing symptoms of acute stroke.

4. Respondent was contacted by ED Physician 1, who was on duty in the Emergency Department and was responsible for evaluating the patient per hospital protocol.

5. During the initial phone contact, Respondent recommended that the patient be given a Tissue Plasminogen Activator ("TPA"), a time-sensitive medication which is routinely given to patients who are experiencing an acute stroke. Per hospital protocol, the medication can be given by an ED Physician or by a neurologist.

6. ED Physician 1 wrote an order to administer TPA to Patient A.

7. ED Physician 1 also requested that the Respondent come to the Emergency Department to evaluate the patient per hospital policy; Respondent disagreed that this was required by hospital policy and further explained that it was not clinically necessary for him to come to the hospital.

8. After several telephone conversations, Respondent arrived at the Emergency Department to perform a neurological evaluation of Patient A focused on the NIH Stroke Scale. Respondent also spoke to the patient's husband.

9. As Respondent was leaving the hospital, ED Physician 1 approached him to discuss the patient. Respondent vocalized his frustration and irritation. The Respondent does not recall the precise words which were stated by either party, but he agrees that his words and conduct were regrettable and unprofessional.

10. It is not clear whether the discussion between Respondent and ED Physician 1 was witnessed by others in the facility.

11. Respondent left the hospital, feeling that a treatment plan had been established and that no further discussion was needed. ED Physician 1 disagreed. In an apparent attempt to resolve the misunderstanding, ED Nurse 1 followed the Respondent into the parking lot to engage in further discussion.

12. Respondent referred to ED Physician 1 as a "bitch" in the parking lot of the hospital, in the presence of the ED Nurse 1. Respondent agrees that this verbiage was regrettable and unprofessional.

13. Patient A received appropriate treatment, made a full recovery and was discharged several days later.

14. Respondent received a written letter of warning from NSMC, stating that his behavior on December 18, 2016 and during a follow-up meeting on January 24, 2017 did not comport with NSMC's policies.

15. Respondent attended a meeting before the Board's Complaint Committee on February 7, 2017, at which he acknowledged that he had responded poorly on December 18, 2016. He also reported that he had completed six (6) months of professional coaching, in 2018, as part of an agreement which had been reached with NSMC in which there would be no restrictions on his privileges.

16. As a mitigating factor, the Parties note that, subsequent to an unrelated to these incidents, Respondent's practice structure has changed and he no longer covers overnight shifts as the "on-call" neurologist.

Conclusion of Law

The Respondent has violated 243 CMR 1.03(5)(a)(11) by engaging in disruptive behavior contrary to Board Policy 01-01, Disruptive Physician Behavior (Adopted June 13, 2001).

Sanction and Order

The Respondent's license is hereby admonished.

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 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 the Respondent has

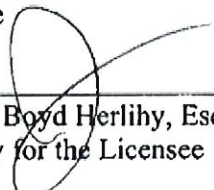
privileges or any other kind of association; any state agency, in- or out-of-state, with which the Respondent has a provider contract; any in- or out-of-state medical employer, whether or not the Respondent practices medicine there; the state licensing boards of all states in which the Respondent has any kind of license to practice medicine; the Drug Enforcement Administration Boston Diversion Group; and the Massachusetts Department of Public Health Drug Control Program. The Respondent shall also provide this notification to any such designated entities with which the Respondent becomes associated in the year following the date of imposition of this admonishment. The Respondent is further directed to certify to the Board within ten (10) days that the Respondent 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.




Edgar W. Robertson, M.D.
Licensee

3-14-2022
Date



Jennifer Boyd Herlihy, Esq.
Attorney for the Licensee

3-17-22
Date



Lisa L. Fuccione
Complaint Counsel

3-18-22
Date

So ORDERED by the Board of Registration in Medicine this 18th day of March, 2022.



Julian N. Robinson, M.D.
Board Chair