

COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS.

Board of Registration in Medicine

Adjudicatory Case No. 2018-051

_____)
 In the Matter of)
)
 KIM E. BOWMAN, M.D.)
 _____)

CONSENT ORDER

Pursuant to G.L. c. 30A, § 10, Kim E. Bowman, 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 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 Nos. 13-426 and 15-145.

Findings of Fact

1. The Respondent was born on March 13, 1952. The Respondent graduated from Tufts University School of Medicine in 1978. The Respondent is board-certified in internal medicine with a subspecialty certification in geriatric medicine. She has been licensed to practice medicine in Massachusetts since 1980 under certificate number 45580. The Respondent is affiliated with New England Baptist Hospital, Faulkner Hospital, Beth Israel Deaconess Medical Center, Sherrill House, Inc., Mt. Pleasant Rest Home, and Sofia Snow Rest Home. The Respondent has received various honors and recognition over the years for her practice of

medicine, including but not limited to winning the "Patient's Choice" Award in 2010, and being named "Best PCP" by the Brookline Tab newspaper in 2009.

Patient A

2. Patient A, a male, was born in 1931.
3. In 2013, Patient A was a resident of a nursing home.
4. Patient A had multiple issues, including coronary artery disease, diastolic heart failure with preserved ejection fraction, hypertension, chronic kidney disease, anemia, a history of traumatic fractured vertebra, low back pain, and glaucoma.
5. From August 6, 2013 to August 7, 2013, Patient A was hospitalized for gastroenteritis.
6. Upon return to the nursing home, the Respondent assumed care of Patient A.
7. The Respondent regularly conducted physical examinations, ordered appropriate laboratory monitoring, and provided other care and treatment consistent with the standard of care in the treatment of this medically complex patient.
8. On August 14, 2013, the Respondent changed an order for the administration of oxycodone from four times a day to three times a day. The nursing home printed a summary order which listed Patient A taking oxycodone extended release three times a day. The Respondent signed the summary order which included the incorrect type of oxycodone. Patient A was given the incorrect type of oxycodone. Approximately six weeks later, this error was corrected on the next summary order.
9. The Respondent failed to follow the standard of care when she signed the summary which listed the incorrect type of oxycodone. However, this failure did not lead to any patient harm.

Patient B

10. Patient B, a male, was born in 1974.
11. The Respondent was Patient B's primary care physician from 2009 to 2014.
12. Patient B had a history of back pain that was not fully resolved following one or more surgeries.
13. The Respondent treated Patient B for chronic back pain, chronic anxiety, and panic attacks.
14. The Respondent failed to meet the standard of care in her treatment of Patient B by:
 - a. Issuing numerous early refills for Patient B's opioid prescriptions;
 - b. Failing to perform urine screens on Patient B;
 - c. Continuing to prescribing opioids to Patient B despite his violation of that portion of his pain management contract that related to benzodiazepines.
 - d. Failing to document any attempts to communicate with Patient B's therapist.
15. However, none of the Respondent's failures caused harm to the patient.

Additionally, Patient B never complained about any of the care and treatment provided to him by the Respondent.

Conclusion of Law

A. The Respondent has violated G.L. c. 112, § 5, eighth par. (c) and 243 CMR 1.03(5)(a)3 by engaging in conduct that places into question the Respondent's competence to practice medicine including practicing medicine with negligence on repeated occasions, as described above.

Sanction and Order

The Respondent's license is hereby indefinitely suspended; however, the indefinite suspension will be immediately stayed upon the Respondent's entry into a Board-approved Probation Agreement. The Respondent is also ordered to complete an audit of twenty-five of her medical records by a Board-approved entity by May 16, 2018. The Probation Agreement shall include standard terms and require the Respondent to document her remediation of any deficiencies identified through the audit.

The Respondent is also ordered to complete 5 continuing professional development credits (CPDs) in Geriatric Medicine and 3 CPDs in prescribing opioids within 90 days of the Board's approval of this proposed Consent Order.

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

Execution 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 s/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 for the duration of this suspension, Probation Agreement, and Order to obtain CPDs. 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.

Kim E. Bowman MD
Kim E. Bowman, M.D.
Licensee

3-1-18
Date

John Fuleo
John Fuleo
Attorney for the Licensee

3-1-18
Date

James Parkos
James Parkos
Complaint Counsel

3/2/18
Date

So ORDERED by the Board of Registration in Medicine this 8 day of Nov. 2018.

Candace Lapidus Sloane, MD

Candace Lapidus Sloane, M.D.
Board Chair