

COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN MEDICINE

MIDDLESEX, SS.

Adjudicatory Case No. 2016-040
(RM-16-459)

)
In the Matter of)
)

FINAL DECISION AND ORDER

Idris Z. Dahod, M.D.)
_____)

This matter came before the Board for final disposition on the basis of the Division of Administrative Law Appeal's March 19, 2018 Recommended Decision ("Recommended Decision"), which is attached hereto and incorporated by reference. The Board has fully considered the Recommended Decision, the Parties' Objections to the Recommended Decision, and the Memoranda on Disposition. The Board rejects the Petitioner's objection as to the Magistrate's decision to narrow the scope of the proceeding to consideration of the allegations as to Patients J and A. The Board adopts the Recommended Decision, as amended to: correct scrivener's errors and to impose a sanction.

Scrivener's Errors

Correcting scrivener's errors, the Board:

- on page 2, line 3 of the Recommended Decision, strikes "Order of Temporary Suspension;"
- on page 6, paragraph 22, substitutes "Petitioner's" for "Respondent's";
- on page 13, line 16, inserts "kissed" between "and" and "her"; and
- on page 16, line 16, substitutes "Respondent" for "Petitioner."

Sanction

The record demonstrates that the Respondent kissed Patient A on the lips prior to an examination. The examination, without a chaperone present, was a follow-up to an endoscopy and colonoscopy a week earlier and involved his unbuttoning her pants to

examine her abdomen. The Respondent kissed Patient A again when she left the appointment.

The Respondent engaged in conduct placing into question his competence to practice medicine, committed misconduct in the practice of medicine, engaged in conduct that undermines the public confidence in the integrity of the medical profession, and failed to adhere to the ethical protocols set forth in the American Medical Association's Code of Medical Ethics, Opinion 8.14. Therefore, it is proper for the Board to impose sanction. *See Raymond v. Board of Registration in Medicine*, 387 Mass. 708 (1982); *Levy v. Board of Registration in Medicine*, 378 Mass. 519 (1979).

More than thirty years ago, the Board pronounced:

The physician-patient relationship requires sound professional judgment, an acute sensitivity to the trust that is placed in the physician, and a high degree of integrity. *In the Matter of Donald M. Allen, M.D.*, Board of Registration in Medicine, Adjudicatory Case No. 407 (Final Decision and Order, December 19, 1980.)

The Respondent has violated an ethical principle of the American Medical Association's Code of Medical Ethics, Opinion 8.14, since kissing Patient A constituted either "[s]exual contact that occur[red] concurrent with the patient-physician relationship" or "non-sexual contact with a patient [that] may be perceived as or may lead to sexual contact." *In the Matter of Jason Faulhaber, M.D.*, Board of Registration in Medicine, Adjudicatory Case No. 2013-041 (Final Decision and Order, July 2, 2015).

In this case, the Respondent failed to demonstrate sound professional judgment and an acute sensitivity to the trust that is place in him as a physician. The Board is troubled that this conduct took place after:

- in 2005, Saint Vincent's Hospital implemented a non-disciplinary corrective action plan in response to staff concerns about his patient contacts during endoscopic procedures;
- in 2006, the Board's Complaint Committee issued a non-disciplinary Letter of Warning to the Respondent to "maintain appropriate boundaries with patients at all times" and stating, "[I]t is important to use chaperones for all examinations when a parent is not present;" and

- in 2011, Saint Vincent's Hospital wrote a non-disciplinary letter to the Respondent, following staff concerns about his patient contacts during endoscopic procedures, stating, "In accordance with the 2006 [Board] ruling you must continue to have a chaperone in the room at all times during any patient exam or procedure. You must maintain appropriate boundaries with all patient at all times...."

In determining an appropriate sanction, the Board acknowledges the Respondent's entry into a 2014 non-disciplinary Voluntary Agreement to Practice and the significant education, coaching and counseling he has completed with respect to physician-patient boundaries and interactions. However, the Board also acknowledges its mission to ensure public safety and determines that the only way to ensure that the Respondent consistently and effectively implements his education, coaching and counseling into his practice of medicine is to permit resumed practice subject to monitoring by the Board.

The Board hereby imposes an INDEFINITE SUSPENSION of the Respondent's license to practice medicine. The Board will consider a stay of the indefinite suspension upon the Respondent's entry into a five-year Probation Agreement with standard terms and also will require: i) a Board-approved practice plan; ii) documented use of Board-approved chaperones throughout all examinations and consultations with female patients; iii) the Respondent's offering a gown and changing area to each patient whose torso he may examine; and iv) such other terms as the Board may require. The sanction is imposed for each violation of the law, and not a combination of any or all of them.

The Respondent shall provide a complete copy of this Final Decision and Order, 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; the state licensing boards of all states in which he 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 he becomes affiliated for the duration of the suspension. 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. The Respondent has the right to appeal this Final Decision and Order within thirty (30) days, pursuant to G.L. c. 30A, §§14 and 15, and G.L. c. 112, § 64.

DATE: October 11, 2018

Candace Lapidus Sloane, MD

Candace Lapidus Sloane, M.D.,
Board Chair