

COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS.

Board of Registration in Medicine
Adjudicatory Case No. 2024-012

In the Matter of)
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)
ANTHONY G. EATON, M.D.)
_____)

STATEMENT OF ALLEGATIONS

The Board of Registration in Medicine (Board) has determined good cause exists to believe the following acts occurred and constitute a violation for which a licensee may be sanctioned by the Board. The Board therefore alleges Anthony G. Eaton, M.D. (Respondent) has practiced medicine in violation of law, regulations, or good and accepted medical practice as set forth herein. The investigative docket number associated with this order to show cause is Docket No. 20-366.

Biographical Information

1. The Respondent graduated from the St. Louis University School of Medicine in 2000. The Respondent has been licensed to practice medicine in Massachusetts under certificate number 220078 since 2004. The Respondent specializes in internal medicine. He owns his own practice, Eaton Medical Associates, in Methuen and is affiliated with Merrimack Valley Hospital and Holy Family Hospital.

2. The Respondent is also licensed to practice medicine in New York.

3. The Respondent was previously licensed to practice medicine in Georgia and Maine.

Factual Allegations

Patient A

4. In 2013, the Respondent began treating Patient A, then a G.L. c. 4, § 7(26)(c) male, for multiple medical problems, including G.L. c. 4, § 7(26)(c) pain.

5. The Respondent breached the standard of care relating to Patient A by maintaining medical records reflecting internally inconsistent medications and by not including sufficient explanation of the medications being prescribed.

6. The Respondent also breached the standard of care for documentation by not consistently documenting all aspects of the patient's multiple, on-going conditions.

Patient B

7. In 2013, the Respondent began treating Patient B, then a G.L. c. 4, § 7(26)(c) male, for multiple medical problems, including G.L. c. 4, § 7(26)(c) pain and G.L. c. 4, § 7(26)(c)

8. The Respondent breached the standard of care in the documentation of Patient B's complex pain management by not adequately documenting his rationale for evolving G.L. c. 4, § 7(26)(c) G.L. c. 4, § 7(26)(c) and by neglecting to reconcile major updates in treatment plans with the medication list.

9. Because Patient B was a G.L. c. 4, § 7(26)(c), the Respondent also breached the standard of care by not sufficiently documenting efforts made to monitor for health risks associated with G.L. c. 4, § 7(26)(c) such as G.L. c. 4, § 7(26)(c).

10. The Respondent also breached the standard of care for documentation by not consistently documenting all aspects of the patient's multiple, on-going conditions.

Patient C

11. In January 2013, the Respondent began treating Patient C, then a G.L. c. 4, § 7(26)(c)-G.L. c. 4, § 7(26)(c) male, for multiple medical problems, including G.L. c. 4, § 7(26)(c) pain and G.L. c. 4, § 7(26)(c).

12. The Respondent breached the standard of care for timely and accurate documentation of Patient C's **G.L. c. 4, § 7(26)(c)** by failing to update the medical record.

Patient D

1. In 2013, the Respondent began treating Patient D, then a **G.L. c. 4, § 7(26)(c)** male, for multiple medical problems, including **G.L. c. 4, § 7(26)(c)** pain.

2. The Respondent breached the standard of care in the documentation of Patient D's **G.L. c. 4, § 7(26)(c)** by including incongruent notes about **G.L. c. 4, § 7(26)(c)**

3. The Respondent breached the standard of care for documentation by not consistently documenting all aspects of the patient's multiple, on-going conditions.

Legal Basis for Proposed Relief

A. Pursuant to 243 C.M.R. 1.03(5)(a)3, the Board may discipline a physician upon proof satisfactory to a majority of the Board, that said physician engaged in conduct which places into question the physician's competence to practice medicine, including but not limited to gross misconduct in the practice of medicine, or practicing medicine fraudulently, or beyond its authorized scope, or with gross incompetence, or with gross negligence on a particular occasion or negligence on repeated occasions.

B. Pursuant to G.L. c. 112, §5, eighth par. (h) and 243 CMR 1.03(5)(a)11, the Board may discipline a physician upon proof satisfactory to a majority of the Board, that said physician has violated of a rule or regulation of the Board. Specifically:

1. 243 CMR 2.07(13)(a), which requires a physician to:
 - a. maintain a medical record for each patient, which is adequate to enable the licensee to provide proper diagnosis and treatment;
 - b. maintain a patient's medical record in a manner which permits the former patient or a successor physician access to them.

The Board has jurisdiction over this matter pursuant to G.L. c. 112, §§ 5, 61 and 62. This adjudicatory proceeding will be conducted in accordance with the provisions of G.L. c. 30A and 801 CMR 1.01.

Nature of Relief Sought

The Board is authorized and empowered to order appropriate disciplinary action, which may include revocation or suspension of the Respondent's license to practice medicine. The Board may also order, in addition to or instead of revocation or suspension, one or more of the following: admonishment, censure, reprimand, fine, the performance of uncompensated public service, a course of education or training or other restrictions upon the Respondent's practice of medicine.

Order

Wherefore the Respondent is hereby **ORDERED** to show cause why the Board should not discipline him for the conduct described herein.

By the Board of Registration in Medicine,



Booker T. Bush, M.D.
Board Chair

Date: 3/14/2024