

COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS.

Board of Registration in Medicine

Adjudicatory Case No. 2021-016

In the Matter of)
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)
GEORGE F. GALES, M.D.)
_____)

STATEMENT OF ALLEGATIONS

The Board of Registration in Medicine (Board) has determined that good cause exists to believe the following acts occurred and constitute violations for which a licensee may be sanctioned by the Board. The Board therefore alleges that George F. Gales, 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. 15-326.

Biographical Information

1. The Respondent was born on August 19, 1953. He graduated from Boston University School of Medicine in 1977. He has been licensed to practice medicine in Massachusetts under certificate number 42923 since July of 1978. The Respondent is board-certified in Internal Medicine and lists Internal Medicine as his practice specialty. He is affiliated with Steward Medical Group and Steward Carney Hospital.

Factual Allegations

2. On November 6, 2015, the Board received a M.G.L. c. 112, § 5F report (5F Report) regarding the Respondent's prescribing practices.

3. The report alleged that the Respondent was prescribing high doses of Oxycontin to his patients.

4. The medical records of three, Patients A through C, reveal that the Respondent's care of these patients fell below the standard of care in several ways.

Patient A

5. Patient A is a 58-year-old female who the Respondent treated between 1985 and 2019. Her care was co-managed by the Respondent, her cardiologist, and her neurologist.

6. Patient A had the following diagnoses: multiple vertebral fractures, spinal cord injury, cervical fusion, CVA and S/P motor vehicle accident, chronic pain, coronary artery disease, hypertension, S/P mitral valve replacement, long-term anticoagulation therapy, degenerative arthritis of the lumbar spine with radiculopathy, and foot drop.

7. Patient A's medications included oxycodone, warfarin, aspirin, lisinopril, lovenox, clonazepam, pantoprazole, and no oxycontin.

8. The Respondent failed to clearly document the goals of opiate therapy, which is below the standard of care for record keeping.

Patient B

9. Patient B is a 45-year-old male who the Respondent treated from 2003 to present.

10. Patient B had the following medical conditions: chronic headaches following a skull fracture with multiple vertebral fractures, chronic pain syndrome, osteoarthritis of the lumbar spine with spinal stenosis, depression, generalized anxiety disorder, osteoarthritis of the cervical spine without cervical cord compression, and cervical polyradiculopathy.

11. Patient B's medications at the commencement of his treatment with the Respondent were oxycontin, oxycodone, alprazolam, and citalopram.

12. Patient B's medications no longer include opiates.
13. The Respondent failed to conduct periodic urine screens, which is below the standard of care.
14. The Respondent prescribed Methadone to this patient without providing close EKG monitoring. This is below the standard of care.
15. The Respondent failed to monitor the Prescription Monitoring Program (PMP), which is below the standard of care.

Patient C

16. Patient C is a 61-year-old male who the Respondent treated from 1995 to present.
17. Patient C had the following medical conditions: S/P multiple traumatic injuries and surgeries, and degenerative intervertebral disc disease with chronic low back pain.
18. Patient C's medications included a Lidoderm patch, lorazepam, Percocet, and Celebrex.
19. The Respondent referred Patient C to the Carney Pain Clinic (Carney) in 2017. Carney took over Patient C's pain management at that time.
20. The Respondent's failure to conduct urine screens is below the standard of care.

Legal Basis for Proposed Relief

A. Pursuant to G.L. c. 112, §5, eighth par. (b) and 243 CMR 1.03(5)(a)2, the Board may discipline a physician who has committed an offense against a provision of the laws of the Commonwealth relating to the practice of medicine, or a rule or regulation adopted thereunder. Specifically:

1. G.L. c. 94C, § 19(a), which requires that physicians issue prescriptions for controlled substances in the usual course of the physician's medical practice.

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 who has violated a rule or regulation of the Board. Specifically:

1. 243 CMR 2.07(5), which states that a licensee who violates G.L. c. 94C also violates a rule or regulation of the Board.

C. Pursuant to G.L. c. 112, §5, eighth par. (c) and 243 CMR 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 that places into question the Respondent's competence to practice medicine.

D. Pursuant to Levy v. Board of Registration in Medicine, 378 Mass. 519 (1979) and Raymond v. Board of Registration in Medicine, 387 Mass. 708 (1982), the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician lacks good moral character and has engaged in conduct that undermines the public confidence in the integrity of the medical profession.

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.

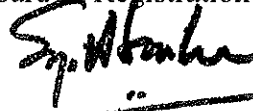
Nature of Relief Sought

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, it is hereby **ORDERED** that the Respondent show cause why the Board should not discipline the Respondent for the conduct described herein.

By the Board of Registration in Medicine,

A handwritten signature in black ink, appearing to read "G. M. Abraham", written over a horizontal line.

George M. Abraham, M.D.
Board Chair

Date: April 8, 2021