

IN THE MATTER OF	*	BEFORE THE MARYLAND
AMR EL-BESHIR	*	STATE BOARD OF
Respondent	*	PHYSICIANS
Unlicensed	*	Case Number: 2015-0394

CONSENT ORDER

On November 20, 2015, the Maryland State Board of Physicians (the “Board”) charged Amr El-Beshir (the “Respondent”) under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) § 14-101 *et seq.* The Respondent is charged under the following provisions of Health Occ. § 14-601:

Health Occ. § 14-601:

Except as otherwise provided in this title, a person may not practice, attempt to practice, or offer to practice medicine in this State unless licensed by the Board.

Health Occ. § 14-606 provides in pertinent part:

(a) *Imposition of penalties.*

...

(4) Except as provided in paragraph (5) of this subsection,¹ a person who violates § 14-601 or § 14-602 of this subtitle is:

...

(ii) Subject to a civil fine of not more than \$50,000 to be levied by the Board.

¹ Paragraph (5) does not apply to the Respondent.

Health Occ. § 14-101 defines the practice of medicine in pertinent part as follows:

(o) *Practice medicine.* -- (1) "Practice medicine" means to engage, with or without compensation, in medical:

...

- (i) Diagnosis;
- (ii) Healing;
- (iii) Treatment;

...

(2) "Practice medicine" includes doing, undertaking, professing to do, and attempting any of the following:

- (i) Diagnosing, healing, treating, preventing, prescribing for, or removing any physical, mental, or emotional ailment or supposed ailment of an individual:
 - 1. By physical, mental, emotional, or other process that is exercised or invoked by the practitioner, the patient, or both;
or
 - 2. By appliance, test, drug, operation or treatment[.]

Md. Code Reg. 10.32.12 provides:

.04 Scope of Delegation.

A. A physician may not delegate to an assistant technical acts which are exclusively limited to any individual required to be licensed, certified, registered, or otherwise recognized pursuant to any provision of the Health Occupations Article and the Education Article, Annotated Code of Maryland.

...

E. A physician may not delegate to an assistant acts which include but are not limited to:

...

(5) Giving medical advice without the consult of a physician.

On February 10, 2016, Disciplinary Panel A was convened as a Disciplinary Committee for Case Resolution ("DCCR") in this matter. Based on negotiations occurring as a result of this DCCR, the Respondent agreed to enter into this Consent Order, consisting of Findings of Fact, Conclusions of Law, and Order.

I. **FINDINGS OF FACT**

The Board finds:

1. At all times relevant, the Respondent has not been licensed or certified by the Board in any capacity.
2. The Respondent holds a Master's degree in education and counseling and is not licensed in the field of psychology, nor is he licensed by any of the health occupational licensing boards in Maryland.
3. At all times relevant to these charges, the Respondent was the Chief Executive Officer and Program Director of Facility A, a therapy and chemical dependency outpatient center, located in Baltimore, Maryland. Dr. El-Beshir, the Respondent's father, was Facility A's medical director and "owner" from 2003 through February 26, 2015.²
4. Sometime around January 2015, a second physician was hired at Facility A for a short period of time. At all other times relevant to these charges, Dr. El-Beshir was the physician responsible for the patients set forth below in the charges.
5. When Dr. El-Beshir was present at Facility A, his expected hours were generally part-time on Tuesdays and Thursdays.

² As set forth below, Dr. El-Beshir was previously disciplined in MBP Case #2015-0013.

6. On or about July 9, 2014, the Board received a complaint that had been filed by a child psychiatrist (“Dr. R”) from Hospital A, alleging in part that Dr. El-Beshir had prescribed a “high load” of sedating and psychotropic medications to a pediatric patient in the practice and that the Respondent instead of Dr. El-Beshir had been returning messages intended for Dr. El-Beshir. According to Dr. R., the Respondent had answered clinical questions even though he is not a licensed provider.

7. Based on the complaint referenced in ¶ 6, the Board initiated an investigation of Dr. El-Beshir, under Case #2015-0013, which resulted in a February 26, 2015 voluntary surrender of his medical license, stating in part:

I acknowledge that the Board initiated an investigation of this matter and if the investigation continued, Disciplinary Panel A would have ordered the summary suspension of my license to practice in Maryland and would have pursued disciplinary charges under Health Occ. § 14-404(a)(3)(ii), (18) and (22) based upon my prescribing of psychotropic medications to minors and practicing medicine with an unauthorized individual . . . I acknowledge that for all purposes relevant to medical licensure, the investigative findings and allegations of violation of Health Occ. § 14-404(a)(3)(ii), (18) and (22) will be treated as if proven.³

8. Also based on receipt of the complaint referenced in ¶ 6, the Board initiated an investigation of the Respondent.

9. On or about December 9, 2014, the Board notified the Respondent that it had opened a full investigation based on allegations that he had engaged in the unauthorized practice of medicine and in furtherance of its investigation, the Board

³Pertinent to this investigation, Health Occ. § 14-404(a)(18) provides that – subject to the hearing provisions of § 14-405 of this subtitle, a disciplinary panel, on the affirmative vote of a majority of the quorum of the disciplinary panel, may reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the licensee: ... Practices medicine with an unauthorized person or aids an unauthorized person in the practice of medicine.

issued subpoenas to the Respondent for a complete list of Facility A's employees and for 10 patient medical records.

10. During the course of its investigation, in December 2014 and January 2015, the Board received two additional complaints that had been filed with the Office of Health Care Quality ("OHCQ") by two former employees of Facility A (Employees A and B), alleging that the Respondent had posed as a physician.

11. Employee A's and Employee B's complaints referenced in ¶ 10 alleged that the Respondent had refilled prescriptions by signing Dr. El-Beshir's name or instructing staff to telephone in medications to local pharmacies when Dr. El-Beshir was not present.

12. As part of its investigation, Board staff conducted interviews under oath of the Respondent, Dr. El-Beshir, and current and former employees of Facility A, the results of which, are set forth in pertinent part below.

INTERVIEW OF EMPLOYEE A

13. On or about December 15, 2014, Board staff interviewed Employee A under oath.

14. Employee A, a Licensed Clinical Professional Counselor ("LCPC"), and former employee of Facility A, began her employment at Facility A in September 2014.

15. On or about September 18, 2014, Employee A recalled that Dr. El-Beshir and the Respondent were working at Facility A. At approximately 8:40 p.m., Dr. El-Beshir refused to see any additional patients despite there being at least one patient waiting to see him for medical care (Patient A). Employee A stated that after Dr. El-Beshir left the office that evening, the Respondent provided Patient A with a prescription after Patient A became upset that Dr. El-Beshir had not seen her.

16. Employee A stated that Dr. El-Beshir was the only physician employed at Facility A from approximately September 15, 2014 until November 24, 2014, but he only sporadically appeared for patient appointments. Employee A stated that "...that's where [the Respondent] comes in. [The Respondent] sees [the patients] and [the Respondent] writes scripts, and if [the Respondent] doesn't write scripts, [the Respondent] will have the office managers to call in the script." According to Employee A, there were times that Dr. El-Beshir would miss entire weeks or he would come in only one day a week.

17. Employee A recalled that on or about November 5, 2014, she witnessed the Respondent writing several prescriptions for patients, and that Employees B and C were also witnesses.

18. Employee A stated that some prescriptions were written and signed by the Respondent, and some prescriptions Dr. El-Beshir would fill in and the Respondent would sign.

19. Employee A also stated that she was aware the Respondent at times had requested the staff to telephone in prescriptions for patients, or the Respondent telephoned in patient prescriptions for Suboxone,⁴ Clonidine,⁵ and psychotropic medications.

20. On or about November 17, 2014, during a meeting with the Respondent, Employee A discussed concerns she had that the Respondent had signed prescriptions or had directed that patient prescriptions be telephoned into pharmacies by other office staff. According to Employee A, the Respondent stated that he would not continue

⁴ Suboxone is a Schedule III CDS used in the treatment of opioid addiction.

⁵ Clonidine is known as a Central alpha-2 Adrenergic Agonist and is used to treat attention deficit hyperactivity disorder (ADHD) and high blood pressure.

these practices and expressed concern that Employee A would consider filing a complaint with the State.

21. On or about November 21, 2014, Employee A had a second discussion with the Respondent about Employee A's concerns that the Respondent was continuing to write prescriptions after Employees B and C had notified her that on November 20, 2014, the Respondent had written a prescription for another patient.

22. On November 24, 2014, the Respondent terminated Employee A from employment for "insubordination," but failed to specify the insubordinate behavior to Employee A.

INTERVIEW OF EMPLOYEE B

23. On or about January 22, 2015, Board staff conducted an interview of Employee B under oath.

24. Employee B was a former Facility A billing and office management employee, who began her employment at Facility A in May 2014.

25. Employee B recalled that Dr. El-Beshir stopped seeing patients in the office around November 2014.

26. Employee B stated that patients were scheduled routinely for Dr. El-Beshir; however, he failed to appear for appointments beginning in November 2014.

27. Employee B recalled that the Respondent wrote patient prescriptions or would sign Dr. El-Beshir's name to prescriptions (such as Suboxone, Klonopin,⁶ and Xanax⁷) if Dr. El-Beshir was not present at Facility A.

⁶ Klonopin is a Schedule IV Controlled Dangerous Substance ("CDS") benzodiazepine used in the treatment of seizures, panic disorders, and anxiety.

⁷ Xanax is a Schedule IV Controlled Dangerous Substance ("CDS") benzodiazepine used in the treatment of panic disorders and anxiety.

28. Employee B stated that prescriptions issued by the Respondent had not been pre-signed by Dr. El-Beshir. The Respondent had signed prescriptions issued to patients in his father's name.

29. Employee B stated that she had witnessed Employee A's discussions with the Respondent about Employee A's concerns that the Respondent had been engaging in the practice of signing and issuing patient prescriptions.

INTERVIEW OF EMPLOYEE C

30. On January 22, 2015, Board staff conducted an interview of Employee C under oath.

31. Sometime in November 2014, Facility A hired Employee C as a Psychiatric Rehabilitation Program (PRP) counselor.

32. Employee C stated that after she began working at Facility A in November 2014, Dr. El-Beshir was not present in the office to see scheduled patients. Employee C stated that she had only seen Dr. El-Beshir at Facility A "a couple of times."

33. During the occasions that Dr. El-Beshir had not been present to see scheduled patients, Employee C stated that the Respondent had telephoned in prescriptions to pharmacies.

INTERVIEW OF EMPLOYEE D

34. On or about January 22, 2015, Board staff interviewed Employee D under oath.

35. Employee D was the former medical records manager at Facility A, and began employment at Facility A in June 2014.

36. Employee D stated that Patients had been scheduled to see Dr. El-Beshir on a Monday-through-Friday basis through January 2015, yet according to Employee D, Dr. El-Beshir had not been present at Facility A since November 2014.

37. Employee D stated that she and other Facility A employees had telephoned in patient prescriptions if Dr. El-Beshir did not show up to his scheduled patient appointments. She was aware that Employee A had met with the Respondent to express her concerns about the Respondent writing patient prescriptions.

38. Employee D also stated that if the prescriptions were not telephoned in to specific patient pharmacies, the Respondent issued "paper prescriptions" to patients. Employee D witnessed the Respondent writing the prescriptions he had issued to patients.

39. Employee D stated that she had witnessed the Respondent writing prescriptions for patients most frequently during September and October 2014. Employee D stated that the Respondent had told her that the prescriptions had been pre-signed by Dr. El-Beshir. Subsequently, however, Employee D saw the Respondent sign Dr. El-Beshir's name on prescriptions he issued to patients.

40. Employee D stated that if a third party such as a pharmacy telephoned the office to ask a clinical question about a prescription and Dr. El-Beshir was not present in the office, the Respondent would respond to clinical inquiries.

INTERVIEW OF DR. EL-BESHIR

41. On or about January 29, 2015, Board staff interviewed Dr. El-Beshir under oath.

42. Dr. El-Beshir stated he works at Facility A, "very part-time," usually only on Thursdays but sometimes Tuesdays as well.

43. Dr. El-Beshir stated that he became chronically ill in 2011 and the Respondent began to take over the management of Facility A. Dr. El-Beshir acknowledged that he did not think the Respondent was qualified to do so.

44. Dr. El-Beshir denied receiving any telephone calls from third parties.

45. Dr. El-Beshir acknowledged that he did not know what was happening in the office when he was not present. Dr. El-Beshir did state however, that he was aware that the Respondent telephoned in Suboxone prescriptions for patients when Dr. El-Beshir was not present to see patients.

46. Dr. El-Beshir stated that he was not aware of where the Respondent kept the prescription pads in Facility A, but stated that the Respondent was the only one who knew where the prescription pads were kept.

47. When Board staff presented Dr. El-Beshir with four written prescriptions dated January 12, 2015 issued to various patients, he acknowledged the handwriting was "suspicious." When Board staff relayed to Dr. El-Beshir that January 12, 2015 was a Monday, he stated that he was "not sure" if the signature was his.

INTERVIEW OF RESPONDENT

48. On or about January 29, 2015, Board staff interviewed the Respondent. The Respondent acknowledged he had instructed staff members from Facility A to telephone in prescriptions when his father had not seen patients.

49. The Respondent stated during the interview that if Dr. El-Beshir was not present in the office to evaluate and treat patients, he (the Respondent) would obtain permission from his father to telephone in prescriptions and reschedule their appointments.

50. The Respondent denied writing prescriptions for patients.

51. Additionally, during the interview, the Respondent acknowledged that he had returned telephone calls for messages left by third parties regarding patient-specific questions. He stated that he would pass the information on to Dr. El-Beshir.

52. The Respondent acknowledged in response to questioning from Board staff that a prescription issued on December 10, 2014 with Dr. El-Beshir's name did not resemble his father's actual handwriting; however, he denied that he had written or signed the prescription.

PATIENT-RELATED FINDINGS

PATIENT B

53. On or about June 29, 2015, Board staff contacted Patient B by telephone regarding his care and treatment at Facility A.

54. In September 2014, Patient B presented to Facility A for Suboxone treatment for opioid dependency and received treatment through at least June 2015.

55. During Patient B's treatment, he received prescriptions for Suboxone and Xanax. Dr. El-Beshir was Patient B's assigned psychiatrist.

56. According to Patient B, Dr. El-Beshir was not present for his scheduled appointments a "few times." On those occasions, Facility A's staff would provide Patient B with a prescription with Dr. El-Beshir's signature, or the staff would telephone in the prescription to his pharmacy.

PATIENT C

57. On or about June 29, 2015, Board staff contacted Patient C by telephone regarding the care and treatment she had received at Facility A.

58. From July 2013 through at least June 2015, Patient C received psychiatric treatment at Facility A. Dr. El-Beshir was her assigned psychiatrist.

59. During Patient C's treatment at Facility A, she received prescriptions for Risperdal,⁸ Prozac,⁹ Xanax, Klonopin and promethazine.¹⁰

60. Patient C stated that Dr. El-Beshir was often late to her appointments and there was a stretch of 2-3 months during which he was not present for Patient C's scheduled appointments.

61. Patient C stated that Facility A's staff would speak with the Respondent before telephoning in prescriptions if Dr. El-Beshir was not present for her scheduled appointment.

62. On one occasion, Patient C recalled that the Respondent provided her with a prescription for the wrong medication: Seroquel.¹¹

PATIENT D

63. On or about July 16, 2015, Board staff contacted Patient D by telephone, regarding the care and treatment she had received at Facility A.

64. From July 2011 through sometime in 2014, Patient C received psychiatric treatment at Facility A, and Dr. El-Beshir was her psychiatrist.

65. During Patient D's treatment, she received prescriptions for Suboxone, Seroquel, Trazadone,¹² Lexapro,¹³ and Clonidine.

⁸ Risperdal is an atypical antipsychotic that treats schizophrenia and bipolar disorder.

⁹ Prozac is a Selective Serotonin Reuptake Inhibitor (SSRI) that treats depression, obsessive-compulsive disorder (OCD), and other disorders.

¹⁰ Promethazine is a neuroleptic medication and antihistamine that prevents and controls motion sickness, nausea, vomiting, dizziness, prevents allergic reactions, helps with sleep, and controls pain or anxiety.

¹¹ Seroquel is an atypical antipsychotic that treats schizophrenia, bipolar disorder, or depression.

¹² Trazadone is a Serotonin Antagonist and Reuptake Inhibitor (SARI) that treats depression.

¹³ Used in the treatment of depression and anxiety.

66. Patient D stated that Dr. El-Beshir was not present at his scheduled office visits during the fall and winter of 2014.

67. Patient D stated that the Respondent would provide her with prescriptions whenever Dr. El-Beshir was not present at her scheduled appointments. Patient D stated that she witnessed the Respondent writing prescriptions for patients in the waiting room with her, when Dr. El-Beshir was not present at the office.

68. Patient D witnessed the Respondent signing Dr. El-Beshir's signature on her paper prescriptions.

PATIENT E

69. On or about July 22, 2015, Board staff contacted Patient E by telephone regarding the care and treatment she received at Facility A.

70. From September 2012 through at least July 2015, Patient E received psychiatric and substance abuse treatment at Facility A. Patient E was being prescribed Suboxone, Xanax, and Adderall.¹⁴

71. Patient E stated that she recalled Dr. El-Beshir missed scheduled appointments with her toward the end of 2014 because Dr. El-Beshir had become ill.

72. Patient E stated that she never witnessed the Respondent writing prescriptions for her, but the Respondent would hand monthly prescriptions to her and other patients in the waiting room.

¹⁴ Adderall is a Schedule II Controlled Dangerous Substance ("CDS") amphetamine which treats Attention Deficit Hyperactivity Disorder (ADHD) and narcolepsy.

II. CONCLUSION OF LAW

Based on the foregoing Findings of Fact, the Board concludes as a matter of law that the Respondent's actions and inactions constitute violations of Health Occ. § 14-601.

III. ORDER

It is, on the affirmative vote of a majority of the quorum of the Board, hereby:

ORDERED that, pursuant to the authority vested by the Maryland Medical Practice Act, Health Occ. § 14-206(e) (2), the Respondent shall **IMMEDIATELY CEASE AND DESIST** from engaging in the practice of medicine; and it is hereby

ORDERED that within **ONE (1) YEAR** of the date of this Consent Order, the Respondent shall pay a monetary fine in the total amount of **TEN THOUSAND DOLLARS (\$10,000.00)**. The payment or payments shall be by certified or bank guaranteed check(s) made payable to the Maryland State Board of Physicians. The check(s) should be mailed to: Maryland State Board of Physicians, P.O. Box 37217, Baltimore, Maryland, 21297; and it is further

ORDERED that the Respondent is responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; and it is further

ORDERED that this Consent Order shall be a **PUBLIC DOCUMENT** pursuant to Md. Code Ann., Gen. Prov. §§ 4-101 through 4-601 (2014 & 2015 Supp.).

02/25/2016
Date

Christine A. Farrelly
Christine A. Farrelly, Executive Director
Maryland State Board of Physicians

CONSENT

I, Amr El-Beshir acknowledge that I am represented by counsel and have consulted with counsel before entering into this Consent Order. By this Consent and for the sole purpose of resolving the issues raised by the Board, I agree and accept to be bound by the foregoing Consent Order and its conditions.

I acknowledge the validity of this Consent Order as if entered into after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to all other substantive and procedural protections provided by law. I agree to forego my opportunity to challenge these allegations. I acknowledge the legal authority and jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I affirm that I am waiving my right to appeal any adverse ruling of the Board that I might have filed after any such hearing.

I sign this Consent Order after having an opportunity to consult with counsel, voluntarily and without reservation, and I fully understand and comprehend the language, meaning and terms of the Consent Order.

2/19/2016
Date

Amr El-Beshir
Amr El-Beshir

Reviewed and Approved by:

David J. McManus
David J. McManus, Esquire

STATE OF MARYLAND

CITY/COUNTY OF:

I HEREBY CERTIFY that on this 19th day of February, 2016, before me, a Notary Public of the State and County aforesaid, personally appeared Amr El-Beshir, and gave oath in due form of law that the foregoing Consent Order was his voluntary act and deed.

AS WITNESS, my hand and Notary Seal.

Alicia Lyn Moskal
Notary Public

My commission expires:

Alicia Lyn Moskal
NOTARY PUBLIC STATE OF MARYLAND
My Commission Expires October 5, 2017