



## Ohio Administrative Code

### Rule 4731-16-06 Consent agreements and orders for reinstatement of impaired practitioners.

Effective: June 30, 2007

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(A) The written consent agreement required under division (F)(2) of section 4730.25 of the Revised Code, division (B)(26) of section 4731.22 of the Revised Code, division (F)(2) of section 4760.13 of the Revised Code or division (F)(2) of section 4762.13 of the Revised Code and rule 4731-16-02 of the Administrative Code prior to reinstatement of a suspended license, or any board order entered in lieu of a consent agreement, shall require, at a minimum, the following probationary and limiting terms:

- (1) Obedience of all federal, state, and local laws, and all rules governing practice in Ohio;
- (2) Submission of quarterly declarations under penalty of perjury stating whether there has been compliance with all conditions of the consent agreement;
- (3) Periodic appearances before the board or its representatives as requested;
- (4) Notification to the board of departures or absences from Ohio. Periods of departure or absence shall not reduce the probationary term, unless otherwise determined by motion of the board for absences of three months or longer, or by the secretary or the supervising member of the board for absences of less than three months, in instances where the board can be assured that probationary monitoring is otherwise being performed;
- (5) Maintenance of a log of all controlled substances, and other drugs as directed by the board, which the practitioner prescribes, orders, personally furnishes, or administers, where appropriate;
- (6) Prohibition of authority to prescribe, administer, personally furnish, order, or possess controlled substances and, as directed by the board, other substances which may impair ability to practice, where appropriate;
- (7) Abstinence from the use of alcohol;



- (8) Abstinence from the use or personal possession of drugs, except those prescribed, administered, or dispensed by another person so authorized by law who has knowledge of the patient's history and of the disease of addiction;
- (9) Submission of witnessed urine or blood samples upon request of the board, and without prior notice;
- (10) Undertaking and maintaining participation in a self help support group acceptable to the board, such as alcoholics anonymous or narcotics anonymous, with evidence of compliance to be provided to the board in each quarterly report;
- (11) Undertaking psychiatric evaluation, and, where appropriate, continuing treatment acceptable to the board, with evidence of compliance to be provided in each quarterly report;
- (12) Monitoring of progress and status by a physician approved by the board, with reports to be provided to the board quarterly;
- (13) Prior approval by the board of any practice arrangements or any health care field employment, where appropriate;
- (14) Copies of the agreement to be provided by the individual to all of the following during the effective period of the agreement or board order:
  - (a) All employers or prospective employers, entities with which the individual contracts or seeks to contract to provide health services or receive training, the chief of staff at each hospital where the individual has or applies for privileges, and all persons and entities that provide the individual chemical dependency treatment or monitoring; and
  - (b) By certified mail, the proper licensing authority of any state or jurisdiction in which the individual holds or applies for any professional license.
- (15) Contacting an appropriate impaired physicians committee, such as the physician health



program, to arrange for assistance in recovery or aftercare;

(16) Continuing compliance with the terms of the aftercare contract entered into with the treatment provider, provided, that where terms of the aftercare contract conflict with the terms of the consent agreement or board order, the terms of the consent agreement or board order shall control;

(17) Continuing authorization, through appropriate written consent forms, for disclosure by the treatment provider to the board, to treating and monitoring physicians, and to others involved in the monitoring process, of information necessary for them to fulfill their respective duties and obligations;

(18) Minimum probationary term of at least five years, except that a practitioner who first applies for licensure or license restoration after receiving treatment for impairment may be given probation of less than five years if the practitioner demonstrates continuous current sobriety of more than one year but less than five years, and a practitioner who first applies for licensure or license restoration after receiving treatment for impairment may be licensed without probation if the practitioner demonstrates continuous current sobriety of at least five years;

(19) Periods during which the probationer is not in compliance with all probationary terms, or during which all probationary monitoring provisions have not yet been implemented, as determined by the secretary of the board, shall not reduce the term of probation;

(20) No requests by the probationer for modifications to probationary terms for at least one year; and

(21) Prohibition of consumption of poppy seeds or any other food or liquid that may produce false results in a toxicology screen.

(B) A violation of any term of the consent agreement or board order described in this rule shall constitute grounds to take disciplinary action in accordance with Chapter 119. of the Revised Code.