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FILED

May 21, 2003

**NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS**

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STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF THE SUSPENSION:
OR REVOCATION OF THE LICENSE
ISSUED TO

PATRICK MANZE, M.D.
LICENSE NO. MA63281

Administrative Action

CONSENT ORDER

TO ENGAGE IN THE PRACTICE OF
MEDICINE AND SURGERY IN THE
STATE OF NEW JERSEY

This matter was opened to the State Board of Medical Examiners ("Board") upon request of Patrick Manze, M.D. ("Respondent") for modification of the prior Order of the Board filed on December 11, 2002. Said Order restricted Dr. Manze to practice only in a group of physicians in which at least (1) of the other licensed physicians agrees to act as a monitor for him. Any monitor must be approved by the Board.

As reflected in The December 11, 2002 Consent Order, Respondent has had a long history of alcoholism. In 1996, respondent went to Clearbrook in Wilkes-Barre, Pennsylvania, for a

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month of inpatient treatment. Following that one month inpatient treatment, respondent was sober for approximately two years.

In June 1998, respondent was arrested on a charge of driving while under the influence of alcohol and his driver's license was suspended for six months. As a result of marital stress, respondent again began drinking heavily in July 1998. Respondent was admitted to Columbus Hospital in October 2000 with acute liver failure and a diagnosis of scirosis of the liver.

In September 1999, the Board began an investigation of respondent's medical practice including the review of 40 patient records. As a result, the Board determined that respondent's record keeping was deficient. Respondent has asserted that his poor medical record keeping was as a result of his alcoholism. In November 2000, the Board was informed by the Physicians Health Program of the Medical Society of New Jersey ("PHP") that respondent has relapsed into alcohol abuse. Respondent subsequently agreed to surrender his license.

Respondent's license was reinstated with limitations pursuant to a consent order filed on December 11, 2002. That Order permitted him to practice in a group setting. Despite entry of that Order the doctor never commenced practice pursuant to the December 2002 limitations.

Respondent now seeks to modify the prior Order and practice as a sole practitioner in a professional building with a suite adjacent to a urology practice run by Charles F. Rilli, M.D. Dr.

Rilli has agreed to serve as Dr. Manze's monitor. The Board finds the within disposition to be adequately protective of the public health, safety and welfare,

It is, therefore, on this 21st day of May, 2003 ordered that:

(1) Respondent is hereby reprimanded for his deficient record keeping practices in violation of N.J.S.A. 45:1-21(b) and (h).

(2) Respondent shall enroll in, and successfully complete, a Board-approved record keeping course by December 11, 2003.

(3) Respondent shall pay to the New Jersey Board of Medical Examiners costs of the investigation in the total amount of Nine Thousand Dollars (\$9,000.00) upon filing of the within Order. The Board reserves the right to file a Certificate of Debt in the event payment is not submitted in a timely manner.

(4) Respondent shall pay a civil penalty in the amount of Two Thousand Five Hundred Dollars (\$2,500.00) to the New Jersey Board of Medical Examiners upon the filing of the within Order. The Board reserves the right to file a Certification of Debt in the event payment is not submitted in a timely manner.

5) Respondent is hereby permitted to practice medicine and surgery as a solo practitioner in a suite adjacent to Charles F. Rilli, M.D.

6) Dr. Rilli shall monitor Dr. Manze until further Order of the Board. Dr. Rilli shall provide the Board's Medical Director with quarterly reports regarding Respondent's practice of medicine

and his sobriety. These reports shall continue for twelve (12) months and, if satisfactory, then Respondent may apply to the Board for the removal of Dr. Rilli as his monitor. Removal of the monitor must be approved by the Board in writing. The Board may ask Respondent to meet with a Preliminary Evaluation Committee prior to agreeing to the removal of the monitor. In the event that Dr. Rilli decides he no longer wishes to monitor Dr. Manze, Dr. Manze shall immediately cease practice and notify the Board so that a new monitor acceptable to the Board may be found.

7. Respondent shall provide the Board's Medical Director, after such time as he resumes active medical practice, with ten random progress notes per month (excerpted from his patient records) for a period of six months. Thereafter, if these notes are satisfactory, respondent may request that he no longer be required to submit these records. The Medical Director may agree to this by way of letter, after consultation with the Board.

8. Respondent shall practice absolute abstinence from all psycho-active substances.

9. Respondent shall undergo random, weekly urine monitoring under the supervision of the PHP staff. In addition, respondent shall undergo monthly face to face meetings with a PHP representative.

10. The PHP shall send quarterly reports to the Board regarding respondent's progress.

11. The PHP shall immediately notify the Board of any

evidence of non-compliance with a treatment program or of a relap.

12. Respondent shall document attendance at Alcoholic Anonymous at a minimum of three meetings per week.

13. Respondent shall continue involvement with the Summit Psychological Group until he is discharged from the program.

14. The provisions of this Order shall remain in place until further order of the Board.

15. Respondent shall comply with the attached Directive for Physicians who are Disciplined or whose surrender of licensure has been accepted by the Board, which are incorporated herein by reference.

NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

By William V. Harrer M.D. B.L.D.
William V. Harrer, M.D., B.L.D.
President

Dated:

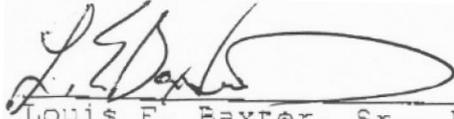
I have read and understood the within Order and agree to be bound by its terms. Consent is hereby given to the Board to enter this Order.

Patrick Manze
Patrick Manze, M.D.

Consented to as to form:



Michael J. Keating, Esq.
Dughi, Hewit & Palatucci
Attorney for Respondent



Louis E. Baxter, Sr., M.D., FASAM
Medical Director
Physicians' Health Program



Charles F. Rilli, M.D.

**DIRECTIVES APPLICABLE TO ANY MEDICAL BOARD LICENSEE
WHO IS DISCIPLINED OR WHOSE SURRENDER OF LICENSURE
HAS BEEN ACCEPTED**

APPROVED BY THE BOARD ON MAY 10, 2000

All licensees who are the subject of a disciplinary order of the Board are required to provide the information **required** on the addendum to these directives. The information **provided** will be maintained **separately** and will **not be part of** the **public** document filed with the **Board**. Failure to **provide** the information required may result in further disciplinary action for failing to cooperate with the Board, **as required by N.J.A.C. 13:45C-1 et seq**: Paragraphs 1 through 4 below shall **apply** when a license is **suspended or revoked** or permanently surrendered, with or without prejudice. Paragraph 5 **applies to** licensees **who** are the subject of an order which, while **permitting** continued practice, contains a probation or monitoring requirement.

1. Document Return and Agency Notification

The licensee shall promptly forward to the Board office at Post Office Box 183, 140 East Front Street, 2nd floor, Trenton, New Jersey 08625-0183, the original license, current biennial registration and, if applicable, the original CDS registration. In addition, if the licensee holds a Drug Enforcement Agency (DEA) registration, he or she shall promptly advise the DEA of the licensure action. (With respect to suspensions of a finite term, at the conclusion of the term, the licensee may contact the Board office for the return of the documents previously surrendered to the Board. In addition, at the conclusion of the term, the licensee should contact the DEA to advise of the resumption of practice and to ascertain the impact of that change upon his/her DEA registration.)

2. Practice Cessation

The licensee shall cease and desist from engaging in the practice of medicine in this State. This prohibition not only bars a licensee from rendering professional services, but also from providing an opinion as to professional practice or its application, or representing him/herself as being eligible to practice. (Although the licensee need not affirmatively advise patients or others of the revocation, suspension or surrender, the licensee must truthfully disclose his/her licensure status in response to inquiry.) The disciplined licensee is also prohibited from occupying, sharing or using office space in which another licensee provides health care services. The disciplined licensee may contract for, accept payment from another licensee for or rent at fair market value office premises and/or equipment. In no case may the disciplined licensee authorize, allow or condone the use of his/her provider number by any health care practice or any other licensee or health care provider. (In situations where the licensee has been suspended for less than one year, the licensee may accept payment from another professional who is using his/her office during the period that the licensee is suspended, for the payment of salaries for office staff employed at the time of the Board action.)

A licensee whose license has been revoked, suspended for one (1) year or more or permanently surrendered must remove signs and take affirmative action to stop advertisements by which his/her eligibility to practice is represented. The licensee must also take steps to remove his/her name from professional listings, telephone directories, professional stationery, or billings. If the licensee's name is utilized in a group practice title, it shall be deleted. Prescription pads bearing the licensee's name shall be destroyed. A destruction report form obtained from the Office of Drug Control (973-504-6558) must be filed. If no other licensee is providing services at the location, all medications must be removed and returned to the manufacturer, if possible, destroyed or safeguarded. (In situations where a license has been suspended for less than one year, prescription pads and medications need not be destroyed but must be secured in a locked place for safekeeping.)

3. Practice Income Prohibitions/Divestiture of Equity Interest in Professional Service Corporations and Limited Liability Companies

A licensee shall not charge, receive or share in any fee for professional services rendered by him/herself or others while barred from engaging in the professional practice. The licensee may be compensated for the reasonable value of services lawfully rendered and disbursements incurred on a patient's behalf prior to the effective date of the Board action.

A licensee who is a shareholder in a professional service corporation organized to engage in the professional practice, whose license is revoked, surrendered or suspended for a term of one (1) year or more shall be deemed to be disqualified from the practice within the meaning of the Professional Service Corporation Act. (N.J.S.A. 14A:17-11). A disqualified licensee shall divest him/herself of all financial interest in the professional service corporation pursuant to N.J.S.A. 14A:17-13(c). A licensee who is a member of a limited liability company organized pursuant to N.J.S.A. 42:1-44, shall divest him/herself of all financial interest. Such divestiture shall occur within 90 days following the the entry of the Order rendering the licensee disqualified to participate in the applicable form of ownership. Upon divestiture, a licensee shall forward to the Board a copy of documentation forwarded to the Secretary of State, Commercial Reporting Division, demonstrating that the interest has been terminated. If the licensee is the sole shareholder in a professional service corporation, the corporation must be dissolved within 90 days of the licensee's disqualification.

4. Medical Records

If, as a result of the Board's action, a practice is closed or transferred to another location, the licensee shall ensure that during the three (3) month period following the effective date of the disciplinary order, a message will be delivered to patients calling the former office premises, advising where records may be obtained. The message should inform patients of the names and telephone numbers of the licensee (or his/her attorney) assuming custody of the records. The same information shall also be disseminated by means of a notice to be published at least once per month for three (3) months in a newspaper of general circulation in the geographic vicinity in which the practice was conducted. At the end of the three month period, the licensee shall file with the Board the name and telephone number of the contact person who will have access to medical records of former patients. Any change in that individual or his/her telephone number shall be promptly reported to the Board. When a patient or his/her representative requests a copy of his/her medical record or asks that record be forwarded to another health care provider, the

licensee shall promptly provide the record without charge to the patient.

5. Probation/Monitoring Conditions

With respect to any licensee who is the subject of any Order imposing a probation or monitoring requirement or a stay of an active suspension, in whole or in part, which is conditioned upon compliance with a probation or monitoring requirement, the licensee shall fully cooperate with the Board and its designated representatives, including the Enforcement Bureau of the Division of Consumer Affairs, in ongoing monitoring of the licensee's status and practice. Such monitoring shall be at the expense of the disciplined practitioner.

(a) Monitoring of practice conditions may include, but is not limited to, inspection of the professional premises and equipment, and inspection and copying of patient records (confidentiality of patient identity shall be protected by the Board) to verify compliance with the Board Order and accepted standards of practice.

(b) Monitoring of status conditions for an impaired practitioner may include, but is not limited to, practitioner cooperation in providing releases permitting unrestricted access to records and other information to the extent permitted by law from any treatment facility, other treating practitioner, support group or other individual/facility involved in the education, treatment, monitoring or oversight of the practitioner, or maintained by a rehabilitation program for impaired practitioners. If bodily substance monitoring has been ordered, the practitioner shall fully cooperate by responding to a demand for breath, blood, urine or other sample in a timely manner and providing the designated sample.

ADDENDUM TO THE DIRECTIVES

Any licensee who ~~is the~~ subject of an order of the Board **suspending, revoking** or otherwise conditioning the license, **shall** provide the following information **at the time that** the order **is signed**, if ~~it is~~ entered by consent, or immediately **after service of a fully executed** order entered after a hearing. The information required **here is necessary for the Board to fulfill its reporting obligations:**

Social Security Number': _____

List the name and address of any and all Health Care Facilities with which you are affiliated:

List the names and addresses of any and all Health Maintenance Organizations with which you are affiliated:

Provide the names and addresses of every person with whom you are associated in your professional practice: (You may attach a blank sheet of stationery bearing this information).

¹ Pursuant to 45 CFR Subtitle A Section 61.7 and 45 CFR Subtitle A Section 60.8, the Board is required to obtain your Social Security Number and/or federal taxpayer identification number in order to discharge its responsibility to report adverse actions to the National Practitioner Data Bank and the HIP Data Bank.

**NOTICE OF REPORTING PRACTICES OF BOARD
REGARDING DISCIPLINARY ACTIONS**

Pursuant to **N.J.S.A. 52:14B-3(3)**, all orders of the **New Jersey State Board of Medical** Examiners are available for public inspection. Should any inquiry be made concerning the status of a licensee, the inquirer will be informed of the existence of the order and a copy will be provided if requested. All evidentiary hearings, proceedings on motions or other applications which are conducted as public hearings and the record, including the transcript and documents marked *in evidence*, are available for public inspection, upon request.

Pursuant to **45 CFR Subtitle A 60.8**, the Board is obligated to report to the **National Practitioners Data Bank** any action relating to a physician which is based on reasons relating to professional competence or professional conduct:

- (1) Which revokes or suspends (or otherwise restricts) a license,
- (2) Which censures, reprimands or places on probation,
- (3) Under which a license is surrendered.

Pursuant to **45 CFR Section 61.7**, the Board is obligated to report to the **Healthcare Integrity and Protection (HIP) Data Bank**, any formal or official actions, such as revocation or suspension of a license (and the length of any such suspension), reprimand, censure or probation or any other loss of license or the right to apply for, or renew, a license of the provider, supplier, or practitioner, whether by operation of law, voluntary surrender, non-renewability, or otherwise, or any other negative action or finding by such Federal or State agency that is publicly available information.

Pursuant to **N.J.S.A. 45:9-19.13**, if the Board refuses to issue, suspends, revokes or otherwise places conditions on a license or permit, it is obligated to notify each licensed health care facility and health maintenance organization with which a licensee is affiliated and every other board licensee in this state with whom he or she is directly associated in private medical practice.

In accordance with an agreement with the Federation of State Medical Boards of the United States, a list of all disciplinary orders are provided to that organization on a monthly basis,

Within the month following entry of an order, a summary of the order will appear on the public agenda for the next monthly Board meeting and is forwarded to those members of the public requesting a copy. In addition, the same summary will appear in the minutes of that Board meeting, which are also made available to those requesting a copy.

Within the month following entry of an order, a summary of the order will appear in a Monthly Disciplinary Action Listing which is made available to those members of the public requesting a copy.

On a periodic basis the Board disseminates to its licensees a newsletter which includes a brief description of all of the orders entered by the Board.

From time to time, the Press Office of the Division of Consumer Affairs may issue releases including the summaries of the content of public orders.

Nothing herein is intended in any way to limit the Board, the Division or the Attorney General from disclosing any public document,