

**FILED**

MAY 14, 2008

**NEW JERSEY STATE BOARD  
OF MEDICAL EXAMINERS**

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

_____	:	
IN THE MATTER OF THE LICENSE OF	:	
	:	Administrative Action
JOHN O'NEAL, M.D.	:	
License No. 25MA0330910	:	CONSENT ORDER OF
	:	REINSTATEMENT OF
	:	LICENSURE WITH
TO PRACTICE MEDICINE AND SURGERY	:	RESTRICTIONS
IN THE STATE OF NEW JERSEY	:	
_____	:	

This matter was most recently opened to the New Jersey State Board of Medical Examiners (the "Board") upon the filing of a Consent Order on August 17, 2006. Pursuant to the Consent Order John O'Neal, M.D. voluntarily surrendered his license to practice medicine and surgery in the State of New Jersey based on a report from the Professional Assistance Program (PAP) that Dr. O'Neal had relapsed into the abuse of alcohol and Dr. O'Neal's acknowledgment of his relapse.

The record in this matter reflects that respondent was accepted into the Alternate Resolution Program (ARP) of the PHP (Physician Health Program, the predecessor of the PAP) on February 19, 1997 following his referral for a November 1996 alcohol abuse relapse. In February 2002, after five years of recovery, the PHP recommended that Dr. O'Neal's enrollment in the

**CERTIFIED TRUE COPY**

ARP be discontinued.

However, in December 2004, after Dr. O'Neal self-reported an October 2004 relapse of alcohol abuse, the Impairment Review Committee (IRC) unanimously decided that Dr. O'Neal should re-enroll in the ARP for five more years of monitoring. Following Dr. O'Neal's second self-reported relapse in September 2005, Dr. O'Neal entered into a Private Letter Agreement with the PAP with the understanding that should he fail to comply with the stipulations set forth, or should he relapse into abuse of alcohol, an immediate notification of his identity would be made to the Board.

On or about July 10, 2006, the PAP alerted the Board that Dr. O'Neal relapsed into the abuse of alcohol as evidenced by his positive screen on June 1, 2006 and his own acknowledgment of his relapse. On August 17, 2006 pursuant to the filing of a Consent Order, respondent voluntarily surrendered his license to practice medicine and surgery. Dr. O'Neal entered inpatient treatment inpatient for 45 days and again entered inpatient treatment for another month.

On March 28, 2007, respondent appeared with counsel before a Committee of the Board accompanied by Dr. Louis Baxter, Executive Medical Director of the PAP in support of his application for reinstatement. Dr. O'Neal testified about his treatment and compliance with the August 17, 2006 Consent Order. The PAP

submitted a Position Statement in support of the reinstatement of Dr. O'Neal's license subject to certain conditions, including a limitation on practice. The Board determined that the petition was premature because there were positive screens for prescription medications that were prescribed without notification to the medical director of the PAP.

On February 7, 2008, the Board received a supplementary Position Statement from the PAP documenting twenty months of recovery and compliance with the August 17, 2006 Consent Order. The Board also received reports from Dr. O'Neal's therapist and psychiatrists supporting reinstatement of his license.

Respondent agreeing to the terms of this Order and the Board finding that Respondent is currently satisfying the requirements of the August 17, 2006 Order, and that the within disposition is adequately protective of the public health, safety and welfare;

IT IS, therefore, on this 14TH day of       MAY      ,  
2008,

ORDERED THAT:

1. Respondent John O'Neal, M.D. is hereby granted a limited license to practice medicine and surgery in the State of New Jersey pursuant to the conditions stated herein.

2. Respondent shall maintain absolute abstinence from all psychoactive substances unless prescribed by a treating physician for a documented medical condition with immediate written

notification to the Medical Director of the Physicians.

Respondent's partners and associates shall not be considered treating physicians.

3. Respondent shall attend a support group of Alcoholics Anonymous at a minimum of three times per week.

4. Respondent shall submit to twice-weekly random urine monitoring for the first six months of his return to practice, then on a random weekly basis for the next year, and thereafter on a schedule to be determined by the Executive Medical Director of the Professional Assistance Program with notification sent to the Executive Director of the Board of Medical Examiners. The initial screen will utilize the EMIT technique and all confirming tests and/or secondary tests will be performed by gas chromatographing/mass spectrometry. The testing procedure shall include a forensic chain of custody protocol to ensure sample integrity and to provide documentation thereof.

5. Respondent shall participate in monthly face-to face visits with the clinical staff of the Professional Assistance Program for the next year and then on a schedule to be determined by the clinical staff of the Professional Assistance Program.

6. Respondent's practice during the first year of his return to practice shall be limited to gynecology and his hours of practice shall be limited and approved by the Executive Medical Director of the Professional Assistance Program.

7. Respondent shall continue individual and group therapy with his therapist and his psychiatrist until such time as the therapist and psychiatrist, in consultation with the Executive Medical Director of the Professional Assistance Program agree that such therapy is no longer required. In the event it is agreed that continued therapy is no longer required, the therapist and psychiatrist shall each submit a report to the Board stating the basis for ending therapy.

8. Respondent shall ensure that the Board receives quarterly reports from the therapist and the psychiatrist regarding respondent's compliance with the terms of this order.

9. Respondent shall ensure that the Board receives quarterly reports from the Professional Assistance Program outlining respondent's participation in his recovery program, with immediate notification of evidence of relapse or non-compliance.

10. Respondent shall appear before a Committee of the Board prior to the removal of any of the restrictions set forth in the within Consent Order, if so requested by the Board at which time the burden shall be on respondent to demonstrate compliance with the within Consent Order.

11. Respondent shall obey all the laws of the State of New Jersey, the United States and their political subdivisions as well as all regulations, rules or laws pertaining to the practice

of medicine and surgery in this State of any other State.

12. During the first year of return to practice, respondent hereby consents to the entry of an Order of automatic suspension of license without notice, upon the Board's receipt of any information which the Board in its sole discretion deems reliable that respondent has failed to comply with paragraphs two (2) through nine (9) of this Consent Order without the prior written consent of the Board. Respondent may petition the Board on five (5) days notice for a hearing limited to the sole issue of whether he deviated from the terms of the Consent Order.

NEW JERSEY STATE BOARD OF MEDICAL  
EXAMINERS.

By: \_\_\_\_\_

*Mario A. Criscito, M.D.*  
Mario A. Criscito M.D.  
Board President

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.

*John O'Neal, M.D.*  
\_\_\_\_\_  
John O'Neal, M.D.

Consented to as to form and e

*Steven Kern, Esq.*  
\_\_\_\_\_  
Steven Kern, Esq.  
Attorney for John O'Neal, M.D.