



to enroll in the Professional Assistance Program (PAP), and comply with its evaluations, screens, and recommendations for treatment.

On May 29, 2009, respondent was initially evaluated by the PAP. On or about October 15, 2009, the PAP advised the Board that as it continued to monitor and evaluate Dr. DePetris, he was fit to practice.

The Board has considered and has accepted the recommendation of the PAP. To help ensure that respondent continues in recovery and that his continued practice is consistent with the public health, safety, and welfare, the Board will permit him to practice provided he is in full compliance with this consent order. That includes demonstrating to the satisfaction of the Board that he is actively participating in a drug treatment program, and submitting to urine screens as directed by the PAP with results being negative for psychoactive substances. Any deviation from the terms of this consent order, however, will result in disciplinary action, which may include suspension or revocation of respondent's license to practice. Dr. DePetris may apply for relief from the provisions of this consent order not sooner than one year following its entry.

THEREFORE, IT IS ON THIS 19<sup>th</sup> DAY OF MAY, 2010,

AGREED AND ORDERED THAT:

1. Brian G. DePetris, D.M.D., may practice dentistry in this State only under the terms of this consent order.

2. Respondent's license is suspended for a period of one year, which suspension shall be stayed and served as a period of probation. Should respondent violate the terms of this consent order during the period of probation, the stayed suspension shall become

active and shall be in addition to any sanction imposed by the Board based on the conduct underlying the subsequent violation.

3. Respondent shall abstain from the use of controlled dangerous substances and shall not possess any controlled dangerous substances except pursuant to a bona fide prescription written by a physician or dentist for good medical or dental cause in his own treatment. Respondent shall cause any physician or dentist who prescribes medication which is a controlled dangerous substance to provide a written report to the Board together with patient records indicating the need for such medication. Such report shall be provided to the Board no later than two (2) days subsequent to the prescription in order to avoid confusion which may be caused by a confirmed positive urine test as a result of such medication.

4. Pending further order of the Board, respondent shall remain enrolled in the Professional Assistance Program and comply with the recommendations for evaluation and treatment. Respondent, at a minimum, shall have face-to-face contact with representatives from that program as directed by the PAP and shall submit to urine monitoring as set forth in paragraph 5 below. If respondent discontinues participation with the PAP without the approval of the Board, he shall be deemed in violation of this Order.

5. (a) Until further order of the Board, respondent shall submit to random urine sampling as directed by the PAP. The urine testing requirement shall continue until further order of the Board discontinuing testing. Respondent shall be provided with specific directions for the protocol of the testing procedure and the location of the laboratory facility by the PAP. The urine monitoring shall be conducted with direct witnessing of the taking of the samples as designed by the laboratory facility. The initial urine screen shall utilize

appropriate screening techniques and all confirming tests and/or secondary tests will be performed by gas/chromatography/mass spectrometry (G.C./M.S.). The testing procedure shall include a forensic chain of custody protocol to ensure sample integrity and to provide documentation in the event of a legal challenge.

(b) All test results shall be provided to Jonathan Eisenmenger, Executive Director of the Board, or his designee in the event he is unavailable. The Board also will retain sole discretion to modify the manner of testing in the event technical developments or individual requirements indicate that a different methodology or approach is required in order to guarantee the accuracy and reliability of the testing.

(c) Any failure by respondent to submit or provide a urine sample within twenty-four (24) hours of a request will be deemed to be equivalent to a confirmed positive urine test. In the event respondent is unable to appear for a scheduled urine test or provide a urine sample due to illness or other impossibility, consent to waive that day's test must be secured from the PAP. Personnel at the lab facility shall not be authorized to waive a urine test. In addition, respondent must provide the Board with written substantiation of his inability to appear for a test within two (2) days, e.g., a physician's report attesting that he was so ill that he was unable to provide the urine sample or appear for the test. "Impossibility" as used in this provision shall mean an obstacle beyond the control of respondent that is so insurmountable or that makes appearance for the test or provision of the urine sample so infeasible that a reasonable person would not withhold consent to waive the test on that day.

(d.) In the event respondent will be out of the State for any reason, the PAP shall be so advised so that arrangements may be made at the PAP's discretion for alternate testing.

(e.) Any urine test result showing creatinine levels below 20 mg/dL and a specific gravity below 1.003 shall be deemed a confirmed positive urine test.

(f.) Respondent shall familiarize himself with all foods, food additives or other products (such as poppy seeds) which may affect the validity of urine screens, be presumed to possess that knowledge, and shall refrain from the use of such substances. Ingestion of such substances shall not be an acceptable reason for a positive urine screen and/or failure to comply with the urine monitoring program.

(g.) The Board may, in its sole discretion, modify the frequency of testing or method of testing during the monitoring period.

6. Respondent shall provide any and all releases to any and all parties who are participating in a monitoring, treatment, or other program as outlined in this order, as may be required in order that all reports, records, and other pertinent information may be provided to the Board in a timely manner. The PAP and any other party providing treatment or counseling shall provide quarterly reports to the Board on respondent's participation and progress. For purposes of this consent order, the first report shall be due August 1, 2010. Any information received by the Board regarding respondent's treatment or participation in a monitoring program may be used in connection with any proceedings pertaining to his license.

7. Nothing in this order shall be deemed to preclude the Board from taking any further action it deems appropriate based on respondent's conduct, including but not

limited to the conduct underlying the criminal charges referred to in this Consent Order, should the Board's review of information cause it to determine that such action is warranted.

NEW JERSEY STATE BOARD OF DENTISTRY

BY   
Emil G. Cappetta, D.D.S.  
President

I have read and I understand the terms of this order and agree to be bound by it. I consent to the entry of this Order.

  
Brian G. DePetris, D.M.D.

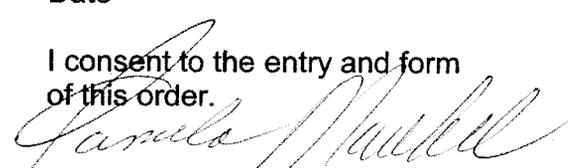
4/6/10  
Date

I have read the terms of this order and agree on behalf of the Professional Assistance Program to comply with its terms as pertaining to the PAP.

\_\_\_\_\_  
Louis E. Baxter, Sr., M.D.  
Executive Medical Director  
Professional Assistance Program

\_\_\_\_\_  
Date

I consent to the entry and form of this order.

  
\_\_\_\_\_  
Pamela Mandel, Esq.

May 10, 2010  
Date

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NEW JERSEY STATE BOARD OF DENTISTRY

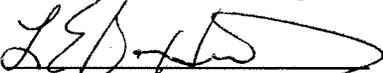
By: \_\_\_\_\_  
Emil G. Cappetta, D.D.S.  
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\_\_\_\_\_  
Brian G. DePetris, D.M.D.

\_\_\_\_\_  
Date

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Louis E. Baxter, Sr., M.D.  
Executive Medical Director  
Professional Assistance Program

  
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Date

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Pamela Mandel, Esq.

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