

PAULA T. DOW
ATTORNEY GENERAL OF NEW JERSEY
Division of Law, 5th Floor
124 Halsey Street
P.O. Box 45029
Newark, New Jersey 07101

FILED

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**NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS**

By: Tobey Palan
Deputy Attorney General
Attorney for Board of Medical Examiners
(973) 648-2436

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

IN THE MATTER OF THE LICENSE OF

CHARLES GRABIAK, M.D.

TO PRACTICE MEDICINE IN THE
STATE OF NEW JERSEY

:
: Administrative Action
:
: **CONSENT ORDER OF**
: **REINSTATEMENT OF LICENSURE**
:

This matter was most recently opened to the State Board of Medical Examiners (Board) upon receipt of a request from Charles Grabiak, M.D. (Respondent) seeking to reinstate his medical license which was voluntarily surrendered by way of a Consent Order dated April 11, 2007 after the Board received information that Respondent relapsed into the abuse of alcohol. He had also surrendered his license almost eleven years earlier, in 1996, after a prior relapse into alcohol abuse. Respondent was subsequently reinstated with an unrestricted license in April of 1999. After Respondent's relapse in April of 2007, he entered an in-patient treatment program in Pennsylvania followed by a three (3) week out-patient program in Princeton, N.J. Respondent has been in documented recovery since January of 2008 and has been in treatment with the Professional

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Assistance Program (PAP). Respondent's first application in April of 2009 for reinstatement was denied by the Board as premature.

In accordance with the 1999 Consent Order, prior to any restoration of his license, Respondent is required to appear before a Committee of the Board to determine his readiness to re-enter the practice of medicine; provide the Board with evidence that he is capable of discharging the functions of a licensee and that he is not suffering from any impairment or limitation resulting from the use of alcohol or any drug which could affect his practice; and has not engaged in professional misconduct; provide the Board with reports from each and every mental health professional who has participated in Respondent's treatment during the period of time from his entry into treatment to his appearance; provide the Board with a report from the Professional Assistance Program of New Jersey (PAP) detailing the nature and extent of his involvement with that entity; affirmatively establish his fitness, competence and capacity to re-enter the active practice of medicine; and provide the Board with a full account of his conduct during the intervening period of time from his entry into treatment to his appearance.

Respondent and Dr. Louis Baxter, M.D. of the PAP appeared before a Committee of the Board on January 6, 2010. At the time of the Committee meeting Respondent had been in documented recovery for approximately two (2) years. Respondent testified that he completed weekly urine screens as a necessary component of maintaining his sobriety and has now been in documented recovery for over two years.

Dr. Baxter testified that Respondent's prognosis for ongoing recovery is good. He recommends the reinstatement of Respondent's medical license in New Jersey with the following provisions: 1) absolute abstinence from all psychoactive substances, including alcohol, unless prescribed by a treating physician for a documented medical condition with prior notification

provided to the Executive Director of the Professional Assistance Program; 2) regular attendance at the support group of AA at a minimum of three meetings per week; 3) random weekly urine monitoring with specimens collected for the first year of licensure, subsequent reductions to be at the direction of the Executive Medical Director of the PAP with prior notification submitted to the State Board of Medical Examiners; 4) face-to-face followup with a clinical representative of the PAP on a monthly basis for the first six (6) months of licensure reinstatement followed by appointments consistent with his duration in recovery; 5) continued aftercare/therapy as prescribed by Dr. Deerfield, in consultation with the Executive Medical Director of the PAP, agree that it is no longer required; 6) limitation of practice hours to 40 hours per week for the first three (3) months of his return to practice; 7) Respondent's medical practice must be maintained in a group or instructional setting, no solo practice upon reinstatement; and 8) quarterly status reports from the PAP to the Board regarding Respondent's compliance with the monitoring mandates with immediate notification to the Board of any evidence whatsoever of non-compliance or relapse.

Respondent now seeks leave to reinstate his license to practice medicine and surgery in the State of New Jersey. The Board finding that Respondent has been in stable recovery for over two years, is fit to practice medicine and that the within disposition is adequately protective of the public health, safety and welfare,

IT IS THEREFORE on this 23rd day of June , 2010

ORDERED:

1. Charles F. Grabiak, M.D. is hereby granted a license to practice medicine in New Jersey on the following terms and conditions:

A) Respondent shall maintain absolute abstinence from alcohol, all C.D.S. and potentially addictive substances, except as duly prescribed by a treating health care practitioner.

Respondent shall advise all of his treating health care practitioners, who prescribe medications, of his addiction history. Respondent shall report any such use to the Board in writing within five (5) days of receiving such a prescription together with the name of the prescribing physician/dentist/advanced practice nurse or other authorized prescriber and the reason for its use.

B) Respondent shall attend support group meetings of AA/NA at a minimum of three meetings per week.

C) Respondent shall undergo random witnessed urine monitoring for C.D.S. and alcohol a minimum of once per week for a minimum of one year. Subsequent reductions in urine monitoring are to be at the discretion of the Executive Medical Director of the PAP with prior notification submitted to the Board.

D) The Board reserves the right to require a modification of the manner of the random witnessed urine testing by the PAP in the event technical developments or individual requirements indicate that a different methodology or approach is required to guarantee the accuracy and reliability of the testing.

E) Respondent's failure to submit to or provide a urine sample when requested shall be deemed to be the equivalent of a confirmed positive urine test and shall be deemed a violation of this order unless Respondent is unable to appear for a scheduled urine test due to illness or other impossibility. Respondent must advise the Board in writing within two (2) days, and cause the PAP to so advise the Board in writing within (2) days, of a claimed illness or impossibility. If Respondent fails to appear for a scheduled urine test due to illness, Respondent shall provide to the Board, written substantiation of the illness in the form of a physician's report, within two (2) days. "Impossibility" means an obstacle beyond the control of Respondent that is insurmountable or that

makes his appearance for the urine test so infeasible that a reasonable person would waive Respondent's requirement to give the urine sample that day.

F) All random witnessed alcohol and drug screens shall be negative for the presence of alcohol or drugs, unless the drugs detected by screening were taken for a documented illness pursuant to a valid prescription from a health care practitioner aware of Respondent's substance abuse history. All positive results shall be confirmed by the Gas Chromatography Mass Spectrometer (GC/MS) testing method. Chain of custody documentation must accompany all laboratory reports and/or the laboratory reports must indicate that chain of custody procedures have been followed.

G) Any urine test result showing creatinine levels below 20 mg/dl and a specific gravity below 1.003 shall create a rebuttable presumption of a confirmed positive urine test, and shall be followed by a confirming test. The method of the confirming test shall be determined by the PAP.

H) Respondent shall become familiar 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. Respondent specifically agrees that 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.

I) Respondent shall be responsible to ensure that the PAP shall supply reports every ninety (90) days beginning on the "filed" date of this Order to the Board regarding his progress with the monitoring program.

J) Respondent shall obtain the agreement of the PAP via a signature of its representative on this Order to notify the Board within 24 hours of its receipt of information of any

slip or relapse of impairment, including but not limited to any positive urine screen or failure to appear for urine monitoring or any scheduled appointment or any discontinuance of the PAP rehabilitation program whether initiated by Respondent or by the PAP.

K) Respondent shall attend regular face-to-face meetings with a staff member of the PAP on a monthly basis. If Respondent remains in successful documented recovery, his face-to-face meetings shall continue at a frequency commensurate with his documented duration in recovery as determined by the Executive Medical Director of the PAP.

L) Respondent expressly waives any claim to privilege or confidentiality that he may have concerning reports and disclosures to the Board, and use by the Board of that information in any license proceedings, including reports and disclosures by the urine monitoring program, or the PAP, or any other person or entity involved in the rehabilitation program.

M) All costs associated with the monitoring outlined above shall be the responsibility of, and paid directly by, Charles F. Grabiak, M.D.

2. Respondent shall continue to be under the care and treatment of Dr. Deerfield or her successor approved by the Board, who will monitor and manage any prescribed medications Respondent takes, until such time Dr. Deerfield, in consultation with Dr. Baxter of the PAP, agree that it is no longer required and the PAP recommend discontinuance to the Board and the Board approves such discontinuance.

3. 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 Charles Grabiak, M.D. has failed to comply with any of the conditions set forth above, any other provision of this Order, or any report of a confirmed positive

urine, or a prima facie showing of a relapse or recurrence drug abuse and/or the use of alcohol or controlled substances.

5. Respondent shall have the right to apply for removal of the automatic suspension on five (5) days notice but in such event shall be limited to a showing that the urine tested was not hers or was a false positive in the case of urine testing, or that other information submitted was false.

NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS

By: 
Paul C. Mendelowitz, M.D., Board President

I have read and understood the above Order and agree to be bound by its terms. I hereby consent to the entry of this Order:


Charles F. Grabiak, M.D.

I have read and understand the within Order and agree to comply with the terms which relate to the Professional Assistance Program of New Jersey (PAP).


Dr. Louis Baxter
Professional Assistance Program
of New Jersey