

JEFFREY S. CHIESA
ATTORNEY GENERAL OF NEW JERSEY
Division of Law
124 Halsey Street, 5th Floor
P.O. Box 45029
Newark, New Jersey 07101
Attorney for the Board
of Medical Examiners

FILED

December 13, 2012

**NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS**

By: Alexis Goldberger
Deputy Attorney General
Tel. (973) 648-3808

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

IN THE MATTER OF THE LICENSE OF :
:
STEVEN S. RISMAN, M.D. :
: ADMINISTRATIVE ACTION
LICENSE NO. 25MA06974100 :
:
TO PRACTICE MEDICINE AND SURGERY :
: CONSENT ORDER OF
IN THE STATE OF NEW JERSEY :
: REINSTATEMENT OF LICENSURE

This matter was opened to the New Jersey State Board of Medical Examiners ("Board") upon receipt of a request from Steven S. Risman, M.D. ("Respondent") seeking to reinstate his medical license which was automatically and indefinitely suspended by way of a Board Order entered December 21, 2010. The Board entered the Order following receipt of information that Respondent had been arrested on charges of Driving While Under the Influence in August 2010 and that he had failed to report the arrest and subsequent guilty plea to either the Professional Assistance Program of New Jersey ("PAP") or the Board in violation of a prior Consent Order entered on or about August 11, 2008.

CERTIFIED TRUE COPY

The record in this matter reveals that the 2008 Consent Order granted Respondent leave to practice medicine subject to terms and conditions, including absolute abstinence from alcohol and all psychoactive substances and full compliance with the monitoring program established by the PAP. The Order further provided for the automatic suspension of Respondent's license without notice upon receipt of information indicating failure to comply with its terms. Prior to his 2008 reinstatement, Dr. Risman had voluntarily surrendered his license by way of a Consent Order of Voluntary Surrender entered on or about January 2, 2007, after the Board received information from the PAP that he had relapsed into the abuse of controlled dangerous substances. The Board found Dr. Risman's arrest for DWI in 2010 and the totality of the facts presented, including a report that Respondent had taped a vial of urine to his leg to avoid a positive urine screening, constituted evidence of a relapse or recurrence of the use of alcohol or psychoactive substances under the terms of the 2008 Consent Order.

Respondent appeared pro se, accompanied by Dr. Edward Reading of the PAP, before a Committee of the Board on August 1, 2012, seeking leave to reinstate his license to practice medicine and surgery in the State of New Jersey. At the time of the Committee meeting Respondent had been in documented recovery for over eighteen (18) months. Respondent testified he has been fully compliant with the recommendations of the PAP since his suspension in 2010. He successfully completed over six months of inpatient

treatment at Behavioral Health of the Palm Beaches, continues to meet with Dr. Sonia Gray on a monthly basis for his depression, and attends weekly group therapy with Dr. Arnold Washton. Dr. Reading on behalf of the PAP recommended the reinstatement of Respondent's medical license in New Jersey with certain conditions.

The Board finding that Respondent has been in stable recovery for an extended period of time, is forthcoming, insightful and honest regarding his addiction and is fit to practice medicine, and that the within disposition is adequately protective of the public health, safety, and welfare,

IT IS on this 13th day of December, 2012,

ORDERED THAT:

1. Steven Risman, M.D.'s license to practice medicine in the State of New Jersey is hereby reinstated upon his compliance with all requirements for reinstatement including payment of all fees, and the filing of an application including but not limited to a criminal history background check. Reinstatement is subject to the terms and conditions contained in this Order.

2. Respondent shall practice in accordance with the restrictions recommended by the PAP and comply fully with the monitoring program established for him. Such restrictions shall include:

A) Absolute abstinence from all alcohol, controlled dangerous substances, and potentially addictive substances, except as prescribed by a treating health care practitioner.

Respondent shall advise all of his treating health care practitioners of his addiction history and shall be responsible for ensuring the treating health care professional notifies the PAP in writing within five (5) days of issuance of any such prescription together with the diagnosis and treatment plan. Respondent shall also notify the PAP of any such prescription in writing within five (5) days of receiving the prescription.

B) Respondent shall attend support group meetings of Alcoholics Anonymous at a frequency of no less than three meetings per week.

C) Respondent shall undergo random witnessed urine monitoring under the supervision of the PAP, at a frequency of two (2) times per week for the first six months following his return to practice, and then weekly for a minimum of an additional twelve (12) months. Subsequent reductions in the frequency of urine monitoring shall be determined by the Executive Medical Director of the PAP based upon Respondent's duration in recovery with prior notification to the Board. All test results shall be provided in the first instance directly to the PAP and any positive result shall be reported immediately by the PAP to the Executive Director of 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 within twenty-four (24) hours of a request 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 two (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 unfeasible that a reasonable person would waive Respondent's requirement to give the urine sample that day.

F) All random witnessed urine 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 Spectrometry (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 quarterly reports beginning on the "filed" date of this Order to the Board regarding his progress with the monitoring program.

J) Respondent shall submit to continued monitoring by the PAP and attend face-to-face meetings with a clinical staff member of the PAP on a monthly basis.

K) 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 or any noncompliant behavior, 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.

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, Steven Risman, M.D.

2. Respondent shall continue to be under the psychiatric care and treatment of Dr. Sonia Gray or other psychiatrist, pre-approved by the PAP, at a frequency to be determined by Dr. Gray, until such time Dr. Gray, in consultation with the Executive Medical Director of the PAP, agree that it is no longer required and the PAP recommends discontinuance to the Board and the Board approves such discontinuance.

3. Respondent shall continue to participate in group or individual aftercare with Dr. Arnold Washton, at a frequency to be

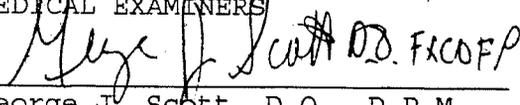
determined by Dr. Washton, until such time as Dr. Washton, in consultation with the Executive Medical Director of the PAP, agrees that it is no longer required and the PAP recommends discontinuance to the Board and the Board approves such discontinuance.

4. 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 Steven S. Risman, 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 of 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 his 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:


George J. Scott, D.O., D.P.M.
Board President

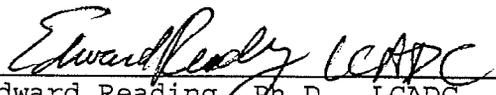
I have read and understood
the above Order and agree to be

bound by its terms. I further
hereby consent to the entry of
this Order.



Steven S. Risman, M.D.

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



Edward Reading, Ph.D., LCADC
Assistant Director
Professional Assistance Program
of New Jersey

**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.