BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

STÉPHEN J. GRAHAM, M.D.

Case No. MD-16-1514A

Holder of License No. 45421
For the Practice of Allopathic Medicine
In the State of Arizona

ORDER GRANTING REQUEST FOR REHEARING OR REVIEW

At its public meeting on February 14, 2018, the Arizona Medical Board ("Board") considered Stephen J. Graham, M.D.'s ("Respondent") Request for Rehearing or Review of the Board’s Order dated December 7, 2017 in the above referenced matter. After considering all of the evidence, the Board voted to grant Respondent’s Request for Rehearing or Review pursuant to A.A.C. R4-16-103(D)(4) and accept the consent agreement proposed by Respondent and attached hereto as Exhibit 1.

ORDER

IT IS HEREBY ORDERED that:

Respondent's Request for Rehearing or Review is granted. The Board's December 7, 2017 Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Probation in Case MD-16-1514A is vacated, and the Board adopts the attached Order for Letter of Reprimand and Probation; and Consent to Same as its final order in this case.

DATED AND EFFECTIVE this 16th day of February 2018.

ARIZONA MEDICAL BOARD

By: Patricia E. McSorley, Executive Director
EXECUTED COPY of the foregoing mailed this 11th day of February, 2018 to:

Stephen J. Graham, M.D.
Address of Record

ORIGINAL of the foregoing filed this 11th day of February, 2018 with:

Arizona Medical Board
1740 West Adams, Suite 4000
Phoenix, Arizona 85007

[Signature]
Board Staff
Exhibit 1
BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

STEPHEN J. GRAHAM, M.D.
Holder of License No. 19987
For the Practice of Allopathic Medicine
In the State of Arizona.

Case No. MD-16-1514A
ORDER FOR LETTER OF REPRIMAND
AND PROBATION;
AND CONSENT TO THE SAME

Stephen J. Graham, M.D. ("Respondent") elects to permanently waive any right to a hearing and appeal with respect to this Order for Letter of Reprimand and Probation; admits the jurisdiction of the Arizona Medical Board ("Board"); and consents to the entry of this Order by the Board.

FINDINGS OF FACT

1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.

2. Respondent is the holder of license number 19987 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-16-1514A after review of a related matter for concerns involving hormone therapy practices at the Clinic where Respondent was identified as Medical Director.

4. In his response to the Board's investigation, Respondent stated that he knows the patients well and saw them in the gym several times a week. Respondent stated that he conducts examinations in a room provided by the gym.

5. During the course of the investigation, a Medical Consultant ("MC") reviewed seven male patients (LB, FF, CH, HH, AM, GM and JW) treated by Respondent between 2012 and 2016. All patients reviewed were treated with some combination of testosterone, Sermorelin, DHEA and Armour Thyroid. None of the patients were diagnosed by Respondent or were otherwise documented as having hypogonadism.
6. The MC noted that Respondent's records were sparse, with little to no information regarding patients' past/family history, no outside medical records included and references to lab tests performed that were not included in Respondent's records.

7. Respondent prescribed testosterone to Patient LB; testosterone, DHEA, and Semorelin to patient FF; Semorelin and testosterone to Patient CH; testosterone to Patient HH; testosterone, Semorelin, DHEA and Armour Thyroid to Patient AM; testosterone, DHEA, and Armour Thyroid to Patient GM; and testosterone to Patient JW.

8. Respondent's records did not contain any blood tests for patients FF and CH. For patients GM and JW, initial labs showed testosterone, DHEA and thyroid function all within normal limits. Patient LB’s records include a lab test performed shortly prior to Respondent’s treatment showing normal testosterone. Respondent’s records for patients HH and AM each contain one lab test that occurred after initiation of treatment.

9. The standard of care required Respondent to conduct adequate initial evaluations of patients with appropriate follow-up and adjustment of medications based on objective evidence and continued re-evaluations that are appropriately documented.

Respondent deviated from this standard of care by initiating hormone replacement therapy for seven patients based on patient reports of vague symptomatology without appropriate supporting labs and in the case of LB, GM, and JW, lab work that contraindicated initiation of hormone replacement therapy. Respondent also deviated from this standard of care by failing to conduct and document adequate follow-up.

10. There was the potential for patient harm in that all patients were at risk of side effects from the medication including, but not limited to, testicular atrophy, oligospermia, abnormal rages, osteoporosis, arthritis, hypertension, various cardiac complications and increased cancer risk.
11. During a Formal Interview on this matter held during the Board’s October 4, 2017 Board meeting, Respondent testified that the patient care reviewed involved individuals who were friends from the gym, and therefore he did not feel it necessary to include patient history information in his documentation because the patients were well known to him. Respondent testified that he had extensive discussions with the patients about risks and benefits. Board staff clarified that written consents were available in the chart for five of the seven patients reviewed. Respondent testified that for all relevant timeframes, he has been employed with a company that provides contract medical services for federal prisons (“Respondent’s Current Employer”).

12. During that same Formal Interview, Board members agreed that Respondent’s treatment of these patients was outside the standard of care. One Board member noted that Respondent’s decision to treat these patients without adequate workup was particularly concerning, given the type of medications and potential side effects at issue.

13. Based on the evidence presented, the Board voted to issue Respondent Findings of Fact, Conclusions of Law and Order for Letter of Reprimand and Probation (“Order”) for three years, with terms and conditions including requiring Respondent to complete two Continuing Medical Education (“CME”) programs: the Professional/Problem-Based Ethics (“ProBE”) program offered by the Center for Personalized Education for Physicians (“CPEP”) for Ethics and Boundaries along with the PRoBE Plus program; and CPEP’s Medical Recordkeeping Seminar with the Personalized Implementation Program (“PIP”) for the Seminar. The PIP was directed to review charts related to Respondent’s private care patients.

14. Respondent timely filed a Motion for Rehearing or Review of the Order. Respondent disclosed for the first time in his Motion that he has ceased taking private care
patients due to a health condition that precludes him from engaging in clinical practice or completing the CME as required by the Order. Respondent subsequently disclosed that his Current Employer, who is aware of his health condition, has offered him an accommodation that may allow him to continue to practice in a non-direct patient care setting.

CONCLUSIONS OF LAW

a. The Board possesses jurisdiction over the subject matter hereof and over Respondent.

b. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(e) (" Failing or refusing to maintain adequate records on a patient.").

c. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(q) (" Any conduct or practice that is or might be harmful or dangerous to the health of the patient or the public.").

ORDER

IT IS HEREBY ORDERED THAT:

1. Respondent is issued a Letter of Reprimand.

2. Respondent is placed on Probation with the following terms and conditions:

   a. Practice Restriction

      Respondent's practice is restricted in that he shall practice only in such settings as deemed appropriate by his Current Employer based on his health condition.

   b. Obey All Laws

      Respondent shall obey all state, federal and local laws, all rules governing the practice of medicine in Arizona, and remain in full compliance with any court ordered criminal probation, payments and other orders.
c. **Tolling**

In the event Respondent should leave Arizona to reside or practice outside the State or for any reason should Respondent stop practicing medicine in Arizona, Respondent shall notify the Executive Director in writing within ten days of departure and return or the dates of non-practice within Arizona. Non-practice is defined as any period of time exceeding thirty days during which Respondent is not engaging in the practice of medicine. Periods of temporary or permanent residence or practice outside Arizona or of non-practice within Arizona, will not apply to the reduction of the probationary period.

d. **Probation Modification or Termination**

Any request for modification or termination of this Order shall be made in writing and will be considered by the Board at its next regularly scheduled meeting provided it is received no less than 30 days prior to the meeting.

If Respondent wishes to return to active clinical practice he must provide the Board with satisfactory evidence that he is safe to provide direct patient care. Additionally, Respondent must also agree to complete the CME as originally ordered by the Board after his October 4, 2017 Formal Interview.

When considering whether to modify or terminate this Order, the Board may require, at the Respondent's expense, any combination of staff approved assessments, evaluations, treatments, examinations or interviews it finds necessary to assist in determining whether Respondent is able to safely resume such practice or whether to grant Respondent's request for modification or termination. The Board has the sole discretion to determine whether to modify or terminate this Board Order or whether to take any other action that is consistent with its statutory and regulatory authority at the time of
the request including ordering Respondent to complete the original CME prior to termination.

3. The Board retains jurisdiction and may initiate new action against Respondent based upon any violation of this Order. A.R.S. § 32-1401(27)(r).

DATED AND EFFECTIVE this 16th day of February, 2018.

ARIZONA MEDICAL BOARD

By Patricia E. McSorley
Executive Director

CONSENT TO ENTRY OF ORDER

1. Respondent has read and understands this Consent Agreement and the stipulated Findings of Fact, Conclusions of Law and Order ("Order"). Respondent acknowledges he has the right to consult with legal counsel regarding this matter.

2. Respondent acknowledges and agrees that this Order is entered into freely and voluntarily and that no promise was made or coercion used to induce such entry.

3. By consenting to this Order, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge this Order in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Order.

4. The Order is not effective until approved by the Board and signed by its Executive Director.

5. All admissions made by Respondent are solely for final disposition of this matter and any subsequent related administrative proceedings or civil litigation involving the Board and Respondent. Therefore, said admissions by Respondent are not intended
or made for any other use, such as in the context of another state or federal government regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or any other state or federal court.

6. Upon signing this agreement, and returning this document (or a copy thereof) to the Board’s Executive Director, Respondent may not revoke the consent to the entry of the Order. Respondent may not make any modifications to the document. Any modifications to this original document are ineffective and void unless mutually approved by the parties.

7. This Order is a public record that will be publicly disseminated as a formal disciplinary action of the Board and will be reported to the National Practitioner’s Data Bank and on the Board’s web site as a disciplinary action.

8. If any part of the Order is later declared void or otherwise unenforceable, the remainder of the Order in its entirety shall remain in force and effect.

9. If the Board does not adopt this Order, Respondent will not assert as a defense that the Board’s consideration of the Order constitutes bias, prejudice, prejudgment or other similar defense.

10. Any violation of this Order constitutes unprofessional conduct and may result in disciplinary action. A.R.S. §§ 32-1401(27)(r) ("[v]iolating a formal order, probation, consent agreement or stipulation issued or entered into by the board or its executive director under this chapter.") and 32-1451.

11. Respondent acknowledges that, pursuant to A.R.S. § 32-2501(16), he cannot act as a supervising physician for a physician assistant while his license is on probation.
12. **Respondent has read and understands the conditions of probation.**

[Signature]

STEPHEN J. GRAHAM, M.D.

DATED: 01/25/2018

EXECUTED COPY of the foregoing mailed this 14th day of February, 2018 to:

Stephen J. Graham, M.D.
Address of Record

ORIGINAL of the foregoing filed
this 14th day of February, 2018 with:

Arizona Medical Board
1740 West Adams Street, Suite 4000
Phoenix, Arizona 85007

[Signature]

Board staff