BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

MARVIN G. RISKE, M.D.

Holder of License No. 21421
For the Practice of Allopathic Medicine
In the State of Arizona.

Case No. MD-16-0377A
ORDER FOR LETTER OF REPRIMAND; AND
CONSENT TO THE SAME

Marvin G. Riske, M.D. ("Respondent"), elects to permanently waive any right to a
hearing and appeal with respect to this Order for a Letter of Reprimand; 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 21421 for the practice of
   allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-16-0377A after receiving a complaint
   regarding Respondent's care and treatment of a 43 year-old female patient ("SC") alleging
   failure to supply a prescription at the patient's request.

4. On March 5, 2014, SC initially presented to Respondent with complaints of
   no libido, cold hands and feet, fatigue and sleep disturbance. SC had a history of these
   complaints and had been seen previously by another physician who had initially prescribed
   her a testosterone crème and later subcutaneous pellets. SC reported being on 50mg of
   testosterone cypionate weekly IM. SC also admitted to "being on testosterone given to her
   by a trainer." Respondent ordered initial labs.

5. On March 24, 2014, a notation in Respondent's record indicates that he
   reviewed SC's labs which showed that SC's testosterone was 391 and free testosterone
was 43. Respondent noted a recommendation that SC stop prior testosterone and return for follow-up testing in three to four weeks.

6. On December 9, 2014, Respondent noted that SC’s testosterone was 30 but with symptoms, “low compared to her ideal pellet level 120-160 previously.” Respondent documented a discussion about pricing and structure, and noted that the patient preferred the SQ program. Respondent issued a prescription for Testosterone cyp 200 cyp/ml 10cc vial with 2 refills for SQ injections at the doctor’s office or via SQ per the doctor’s orders.

7. Respondent’s notes subsequently show that SC received injections on December 15 and 23, 2014 and on January 27, 2015, Respondent noted that SC reported using her “last injection yesterday” and ordered labs.

8. On February 12, 2015, Respondent noted that he reviewed SC’s labs and that her testosterone was still too high and reduced the dose of testosterone to 15 units every week home injection with a follow up in two months.

9. On March 9, 2015, Respondent noted that SC reported feeling foggy, tired and recommended a recheck of her hormones. Respondent noted in a lab review on March 17, 2015 that SC’s testosterone was again too high and that he would reduce the dose to 10 units and recommended a follow-up visit.

10. During the course of her treatment, SC requested a prescription for the testosterone that she could fill at a lower cost at a pharmacy other than the one at Respondent’s facility. She was advised that it was office policy to supply testosterone from their pharmacy since it was a registered pharmaceutical and therapy had to be monitored and administered professionally to avoid potential complications. The practice did not have a release form signed by SC related to Respondent’s financial interest in the pharmacy.
11. The standard of care required Respondent to prescribe testosterone for proper indications and in the proper dosages. Respondent deviated from this standard of care by prescribing testosterone in a patient with inappropriate indications and in excessive amounts.

12. There was the potential for patient harm in that SC was at risk for the side effects from excessive prescription of testosterone.

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)(q) ("Any conduct or practice that is or might be harmful or dangerous to the health of the patient or the public.").

c. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(ff) ("Knowingly failing to disclose to a patient on a form that is prescribed by the board and that is dated and signed by the patient or guardian acknowledging that the patient or guardian has read and understands that the doctor has a direct financial interest in a separate diagnostic or treatment agency or in nonroutine goods or services that the patient is being prescribed and if the prescribed treatment, goods or services are available on a competitive basis. This subdivision does not apply to a referral by one doctor of medicine to another doctor of medicine within a group of doctors of medicine practicing together.").
ORDER

IT IS HEREBY ORDERED THAT:

1. Respondent is issued a Letter of Reprimand.

DATED AND EFFECTIVE this ______ day of ______, 2017.

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 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, pre judgment or other similar defense.

9. **Respondent has read and understands the terms of this agreement.**

Original of the foregoing filed this 21st day of April, 2017 with:

Arizona Medical Board
9545 E. Doubletree Ranch Road
Scottsdale, AZ 85258

Board staff

Dated: 2/17/12