

Board Policy Regarding The Required Reporting Of Impaired Physicians By Other Physicians And Hospitals

Reporting impaired physicians directly to the Kentucky Physicians Health Foundation's Impaired Physicians Program ("the Foundation") is not sufficient to satisfy the statutory reporting requirements. Effective immediately, the Board's policy on this issue is as follows:

If a licensed physician or hospital staff suspects that a physician is impaired - due to chronic alcoholism, chemical dependency or physical/mental disability (ies) - such fact must be report directly to the Kentucky Board of Medical Licensure within ten (10) days of obtaining direct knowledge of the impairment. The report to the Board must be in writing and contain the following information: the name of the physician suspected of being impaired, a detailed account of the facts giving rise to that suspicion, a list of other persons having information regarding the suspected impairment, and the name of the reporting physician/hospital staff.

When the Board receives such a report, it will immediately review the information provided to determine the nature and extent of the suspected violations. If the Board cannot appropriately determine the nature and extent of the suspected violations from the initial report, it may request additional information, by letter or through investigation.

If it appears that the physician has violated specific provisions of the Medical Practice Act, in addition to being impaired, i.e. false prescriptions, conviction, etc., the Board shall initiate an investigation covering all of the suspected violations. The physician shall be notified of this fact and encouraged to contact the Foundation, for assessment and treatment. The completed investigation, including relevant information about the treatment for the impairment, will be presented to an Inquiry Panel for appropriate action.

If it appears that the physician may be impaired, but has not violated other specific sections of the Medical Practice Act, the Board shall contact the physician suspected of being impaired, by certified mail - return receipt requested. The Board will advise the physician that they have been granted a thirty (30) day grace period in which to contact IPP and to submit to an appropriate evaluation by the Foundation.

The Board will withhold any further action until the expiration of the grace period, unless there is reason to believe that emergency action is required to protect patients and/or the public. Thirty days from the date the physician received the notice, the Board will inquire of the Foundation whether a) the physician has contacted the Foundation; b) the appropriate evaluations have been completed; and/or, c) Board review of the matter is warranted. If the Foundation reports that all necessary steps have been taken and that Board review is not necessary, the Board will consider the matter "properly reported" and not subject to Open Records release. If the physician has failed to contact the

Foundation, if the physician has failed to complete the appropriate evaluations, or the Foundation believes Board review is necessary given the results of the evaluation, the Board will open an investigation based upon the initial report. At the conclusion of that investigation, all relevant information will be presented to an Inquiry Panel for appropriate action.

This policy revision makes no change regarding the procedures followed in those instances where an affected individual voluntarily self-reports to the Foundation.

If you have any questions or need any assistance in this regard, please contact the Board's staff.

Adopted: March 27, 2003