

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
BOARD OF MEDICINE**

IN RE:

JORGE C. SRABSTEIN, M.D.

License No.: MD6763

Respondent

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CONSENT ORDER

This matter comes before the District of Columbia Board of Medicine (the “Board” or “D.C. Board”) pursuant to the Health Occupations Revision Act (“HORA”) (D.C. Official Code § 3-1201.01, *et seq.* (2012 Repl.)). The HORA authorizes the D.C. Board to regulate the practice of medicine in the District of Columbia. D.C. Official Code § 3-1202.03(a)(2) (2012 Repl.). The D.C. Board has broad jurisdiction to regulate the practice of medicine and to impose a variety of disciplinary sanctions upon a finding of a violation of the HORA. D.C. Official Code, § 3-1205.14; *Mannan v. District of Columbia Board of Medicine*, 558 A.2d 329, 333 (D.C.1989). The Council of the District of Columbia, in amending the HORA, “intended to strengthen enforcement of its licensing laws.” *Davidson v. District of Columbia Board of Medicine*, 562 A.2d 109, 113 (D.C.1989). And the HORA “was designed to ‘address modern advances and community needs with the paramount consideration of protecting the public interest.’” *Joseph v. District of Columbia Board of Medicine*, 587 A.2d 1085, 1088 (D.C.1991) (*quoting* Report of the D.C. Council on Consumer and Regulatory Affairs on Bill 6-317, at 7 (November 26, 1985)) (emphasis added by court)).

Background

Respondent was originally licensed in the District of Columbia to practice medicine on or about November 15, 1973, and is licensed in the District of Columbia through December 31, 2016. Respondent is also licensed in Maryland, and is presently licensed there through September 30, 2017.

On March 7, 2016, Respondent entered into a consent order (the “Maryland Order”) with the Maryland State Board of Physicians (the “Maryland Board”), in which the Maryland Board reprimanded Respondent for failing to keep adequate medical records under the Maryland Medical Practices Act, Md. Health Occupations Code Ann. §§ 14-404(a). The Maryland Board also required Respondent to complete a continuing medical education (CME) course on documentation within six months of the effective date of the Maryland Order.

Respondent is a board-certified physician in psychiatry, child psychiatry, and pediatric medicine, and at all times relevant to the Maryland Board’s charges, he maintained a private practice in Germantown, Maryland. On or about October 22, 2014, the Maryland Board received a complaint from Respondent’s former patient (“Patient A”) who alleged that Respondent: (1) breached Patient A’s confidentiality by treating, and otherwise providing medical attention for, Patient A and three of Patient A’s family members for “family therapy;” (2) failed to maintain adequate records; and (3) inflated his billing by seeing each patient subsequent to the other. Based on Patient A’s complaint, and following a peer review of the patient records, the Maryland Board charged Respondent with (1) inadequate recordkeeping as determined by appropriate peer review, in violation of Md. Health Occupation Code § 14-404(a)(40), and (2) failing to meet appropriate standards for quality medical care as determined by appropriate peer review, in violation of Md. Health Occupation Code § 14-404(a)(22). The Maryland Board ultimately dismissed the charge under § 14-404(a)(22), and proceeded only under § 14-404(a)(40).

According to the Maryland Board, Respondent's inadequate recordkeeping that constituted violations of §14-404(a)(40) were common to all three patients in the Maryland Order.¹ The Maryland Order recited Respondent's failure to: (1) adequately document the patients' differential diagnoses; (2) document the patients' mental status examinations to provide adequate information for psychiatric examinations, review of symptoms, or safety concerns; (3) document adequate justification of patients' frequent medication changes; and (4) provide documentation or notes that was legible.

The Maryland Board found that, with respect to Patient A, Respondent: (1) failed to document follow-up with Patient A's history of substance abuse, (2) failed to adequately document issues relating to Patient A's medical status after he was diagnosed with cancer and HIV, (3) treated Patient A with medication management almost exclusively, and did not provide Patient A with individual therapy, and (4) did not document any communication with any of Patient A's therapists.

With respect to Patient B, a minor at the time Respondent provided care and treatment, the Maryland Board found that Respondent (1) failed to adequately document symptom screening, (2) failed to adequately document and subsequently evaluate Patient B's individual psychotherapy considerations, (3) treated Patient B with medication management almost exclusively, with several sessions of undocumented family therapy; (4) failed to include documentation from Patient B's school staff regarding her ADHD symptoms; and (5) failed to adequately document the significance of Patient B's nightmares and flashbacks.

With respect to Patient C, also a minor at the time of care and treatment, the Maryland Board found that Respondent (1) failed to adequately evaluate Patient C for ADHD to include (but not limited to) obtaining corroborative information from school staff and/or referring Patient C for a

¹ Of the four family members who were patients of Respondent, the Maryland Board addressed Respondent's care of Patient A, the father; Patient B, the daughter; and Patient C, the son. In the Maryland Order, the Maryland Board did not include any information regarding the fourth patient.

neuropsychological evaluation, (2) inadequately documented psychosocial stressors affecting Patient C and/or therapy interventions, (3) consistently prescribed Patient C multiple medications, and failed to wean him from them to determine if any of the medications were exacerbating his symptoms.

Based on these findings, the Maryland Board concluded that Respondent had failed to maintain adequate records as determined by appropriate peer review. Thus, the Maryland Order was issued.

Conclusions of Law

The D.C. Board is authorized to sanction Respondent under the HORA for his actions, which are related to the practice of medicine. The HORA provides, in pertinent part:

Each board, subject to the right of a hearing as provided by this subchapter, on an affirmative vote of a quorum of its appointed members may take one or more of the disciplinary actions provided in subsection (c) of this section against any applicant for a license, registration, or certification, an applicant to establish or operate a school of nursing or nursing program, or a person permitted by this subchapter to practice a health occupation regulated by the board in the District who: (3) [i]s disciplined by a licensing or disciplinary authority or peer review body[.]

D.C. Official Code § 3-1205.14(a)(3). The HORA further provides,

Upon determination by the board that an applicant, licensee, registrant, person certified, or person permitted by this subchapter to practice in the District has committed any of the acts described in subsection (a) of this section, the board may: (4) [r]eprimand any licensee, registrant, person certified, or person permitted by this subchapter to practice in the District[.]

D.C. Official Code § 3-1205.14(c)(4). Furthermore, the HORA enumerates how reciprocal disciplinary action can be taken by the D.C. Board when physicians are practicing outside of the District of Columbia:

A person licensed, registered, or certified to practice a health occupation in the District of Columbia is subject to the disciplinary authority of the board although engaged in practice elsewhere. Subsection (a) of this section shall not be construed to limit the disciplinary authority of the board only to conduct or activities engaged in

outside of the District that result in the imposition of discipline by a licensing or disciplinary authority where the conduct occurred.

D.C. Official Code § 3-1205.14(e).

The Maryland Board reprimanded Respondent for failing to maintain adequate medical records. Accordingly, the Maryland Board directed Respondent to complete a Board-approved comprehensive course in documentation to be completed within six months. Therefore, Respondent's conduct described above provides the D.C. Board with a basis in fact and law to warrant disciplinary action. The D.C. Board will take reciprocal disciplinary action, and will require the Respondent to provide evidence of full compliance of the Maryland Order, including verification of completion of all CMEs required under the Maryland Order.

ORDER

ACCORDINGLY, based upon the foregoing, it is by the District of Columbia Board of Medicine hereby,

ORDERED, that, Respondent is hereby REPRIMANDED; and it is further

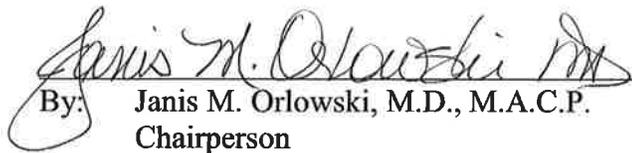
ORDERED, that any violation of this Order may constitute grounds for further disciplinary action against Respondent's license to practice medicine in the District of Columbia, after due notice and hearing. In the event Respondent violates this Order, an administrative proceeding may be convened to determine whether such action is warranted; and it is further

ORDERED, that Respondent shall maintain a course of conduct in his practice of medicine commensurate with the requirements of all laws and regulations of the District of Columbia regarding the practice of medicine; and it is further

ORDERED, that this is a public document.

DISTRICT OF COLUMBIA BOARD OF MEDICINE

9.28.16
Date


By: Janis M. Orłowski, M.D., M.A.C.P.
Chairperson

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CONSENT OF RESPONDENT

• My signature on the foregoing Consent Order signifies my acceptance of the terms and conditions of the Consent Order and my agreement to be bound by its provisions. JCS

(initial)

• I acknowledge the validity of this Consent Order, as if made after a hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my behalf, and to all other substantive and procedural due process protections provided by the laws of the District of Columbia and the United States of America. JCS (initial)

• I also recognize that I am waiving my right to appeal any adverse ruling of the Board had this matter gone to a hearing. JCS (initial)

• I also expressly acknowledge by signing this Consent Order, I am waiving my right to confront witnesses, give testimony, to call witnesses on my behalf, and to other substantive and procedural due process protections provided by the laws of the District of Columbia and the United States of America. JCS (initial)

• I further expressly acknowledge that by signing this Consent Order, I am waiving my right to appeal this Consent Order. JCS (initial)

• I have had an opportunity to review this document and to consult with my own legal counsel. I choose willingly to sign this Consent Order, and I understand its meaning and effect.

JCS (initial)

9/9/16

Date

Jorge C. Srabstein, M.D.
Jorge C. Srabstein, M.D.
License No.: MD6763

Sworn to and subscribed before me this 9th day of September, 2016.

Barbara F. Cromack

Notary Public

(SEAL)

My Commission Expires:

7/9/2018

This Consent Order shall be deemed a public document and shall be distributed as appropriate.