

BOARD OF MEDICAL PRACTICE

In re: Teig D. Marco, Jr., M.D.)
) Docket No. MPC 052-0514
)

STIPULATION AND CONSENT ORDER

NOW COME Teig D. Marco., M.D., and the State of Vermont, by and through Vermont Attorney General William H. Sorrell, and hereby stipulate and agree to the following in the above-captioned matter:

1. Teig D. Marco, M.D. ("Respondent") holds Vermont medical license number 042-0007992 originally issued by the Vermont Board of Medical Practice on July 3, 1989.
2. Jurisdiction in this matter rests with the Vermont Board of Medical Practice ("the Board"), pursuant to 26 V.S.A. §§ 1353-1357, 3 V.S.A. §§ 809-814, and other authority.

FINDINGS OF FACT

3. The Board opened the Docket No. MPC 052-0514 matter in May 2014 upon receipt of information concerning Respondent. The matter was assigned to the Central Investigative Committee ("the Committee") of the Board.
4. The Committee's investigation revealed that in December 2013 Respondent was providing medical care to nursing home patients when he was approached at the nursing home by a medical professional (the "Patient") with whom he had a professional relationship. Patient asked Respondent if his practice group was taking new patients as Patient needed a new primary care provider.
5. Respondent advised Patient that there were providers at his practice who would be willing to see Patient. Patient had an appointment with a provider at Respondent's

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practice, but was ultimately dismissed from the practice once Patient's opioid prescription history was discovered via a query of the Vermont Prescription Monitoring System ("VPMS").

6. Respondent referred Patient to a pain clinic.
7. Despite receiving some background information from his practice concerning Patient's VPMS query results, Respondent did not attempt to obtain a copy of the query, nor did he query VPMS to view Patient's controlled substance prescription history.
8. Patient again approached Respondent at the nursing home and asked if he would write prescriptions for opioid pain medications and antidepressants until Patient could find another provider. Respondent agreed to write these prescriptions based on his professional relationship with Patient.
9. On December 6, 2013, Respondent provided Patient with a prescription for 90 tablets of hydrocodone – acetaminophen 7.5-325. Prior to writing this prescription, Respondent failed to conduct a physical exam, obtain a history or query Patient's history on VPMS. At no time prior or subsequent to providing Patient with the prescription did Respondent create any medical records to document his treatment, nor did he check Patient's history on VPMS.
10. On January 2, 2014, Respondent provided Patient with a prescription for 90 tablets of hydrocodone – acetaminophen 7.5-325. Prior to writing this prescription, Respondent did not conduct a physical exam, obtain a history, or query Patient's history on VPMS.
11. At no time prior or subsequent to providing Patient with the hydrocodone-acetaminophen prescription did Respondent create any medical records to document his treatment, nor did he check Patient's history on VPMS.

12. On January 31, 2014, Respondent provided Patient with a prescription for 90 tablets of hydrocodone – acetaminophen 7.5-325.
13. Prior to writing this prescription, Respondent did not conduct a physical exam, obtain a history, or query Patient's history on VPMS.
14. At no time prior or subsequent to providing Patient with the hydrocodone-acetaminophen prescription did Respondent create any medical records to document his treatment, nor did he check Patient's history on VPMS.

CONCLUSIONS OF LAW

15. It is unacceptable medical practice for a licensee to write an initial prescription for opioid medication to a new patient without conducting a physical examination, obtaining a history, querying VPMS, and documenting his treatment. Such conduct may constitute unacceptable patient care and the failure to conform to the essential standards of acceptable and prevailing practice in violation of 26 V.S.A. §§ 1354(b)(1) and (2).
16. Respondent acknowledges that it is the Board's position that if the State were to file charges against him, it could satisfy its burden at a hearing and a finding adverse to him could be entered by the Board, pursuant to 26 V.S.A. § 1354 (b)(2).
17. Respondent agrees that the Board may enter as its facts and/or conclusions paragraphs 1 through 14 above, and further agrees that this is an adequate basis for the Board actions set forth herein. Any representation by Respondent herein is made solely for the purposes set forth in this agreement.

18. Therefore, in the interest of Respondent's desire to fully and finally resolve the matter presently before the Board, he has determined that he shall enter into the instant agreement with the Board. Respondent enters no further admission here, but to resolve this matter without further time, expense and uncertainty; he has concluded that this agreement is acceptable and in the best interest of the parties.
19. Respondent acknowledges that he is knowingly and voluntarily entering into this Stipulation and Consent Order with the Board. He acknowledges he has had the advice of counsel regarding this matter, and in the review of this Stipulation and Consent Order. Respondent is fully satisfied with the legal representation he has received in this matter.
20. Respondent agrees and understands that by executing this document he is waiving any right to challenge the jurisdiction and continuing jurisdiction of the Board in this matter, to be presented with a specification of charges and evidence, to cross-examine witnesses, and to offer evidence of his own to contest any allegations by the State.
21. The parties agree that upon their execution of this Stipulation and Consent Order, and pursuant to the terms herein, the above-captioned matter shall be administratively closed by the Board. Thereafter, the Board will take no further action as to this matter absent non-compliance with the terms and conditions of this document by Respondent.
22. This Stipulation and Consent Order is conditioned upon its acceptance by the Vermont Board of Medical Practice. If the Board rejects any part of this document, the entire agreement shall be considered void. Respondent agrees that if the Board does not accept this agreement in its current form, he shall not assert in any subsequent proceeding any claim of prejudice from any such prior consideration. If the Board

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rejects any part of this agreement, none of its terms shall bind Respondent or constitute an admission of any of the facts of the alleged misconduct, it shall not be used against Respondent in any way, it shall be kept in strict confidence, and it shall be without prejudice to any future disciplinary proceeding and the Board's final determination of any charge against Respondent.

23. Respondent acknowledges and understands that this Stipulation and Consent Order shall be a matter of public record, shall be entered in his permanent Board file, shall constitute an enforceable legal agreement, and may and shall be reported to other licensing authorities, including but not limited to: the Federation of State Medical Boards Board Action Databank, the National Practitioner Data Bank, and the Healthcare Integrity and Protection Data Bank. In exchange for the actions by the Board, as set forth herein, Respondent expressly agrees to be bound by all terms and conditions of this Stipulation and Consent Order.

24. The parties therefore jointly agree that should the terms and conditions of this Stipulation and Consent Order be deemed acceptable by the Board, it may enter an order implementing the terms and conditions herein.

ORDER

WHEREFORE, based on the foregoing, and the consent of Respondent, it is hereby ORDERED that:

- a. Respondent shall be reprimanded for the conduct set forth above;
- b. No later than one year from the date of approval of this Stipulation and Consent Order, Respondent shall successfully complete a continuing medical education course approved by the Central Investigative Committee of the Board that addresses medical ethics, boundaries and professionalism. Respondent shall seek the Committee's approval of the proposed CME course no later than 60 days prior to the start date of the course. Respondent shall complete the course within one year of the entry of this Stipulation and Consent Order. Upon Respondent's successful completion of the CME course, he shall provide the Committee with proof of attendance. Respondent shall also provide a brief written narrative of the CME course to the Central Committee which will document what he learned from the course, and how he will apply that knowledge to his practice. Respondent shall provide the proof of attendance and written narrative to the Committee within 30 days of completion of the CME course. Respondent shall be solely responsible for all costs associated with the CME course; and
- c. Respondent acknowledges that as a prescriber of controlled substances in Vermont he is responsible for knowing when to use VPMS in accordance with state law, state regulations, and the standard of care. At a minimum, Respondent shall check VPMS when prescribing controlled substances in the following circumstances as

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required by Act 205 of 2014, regardless of whether a patient resides in a nursing home:

- (1) at least annually for patients receiving ongoing treatment with an opioid Schedule II, III or IV controlled substance;
- (2) when starting a patient on Schedule II, III or IV controlled substances for nonpalliative long-term pain therapy of 90 days or more;
- (3) the first time prescribing an opioid Schedule II, III, or IV controlled substance to treat chronic pain; and
- (4) prior to writing a replacement prescription for a Schedule II, III, or IV controlled substances.

SIGNATURES

DATED at Montpelier, Vermont, this 3rd day of November, 2014:

STATE OF VERMONT

WILLIAM H. SORRELL
ATTORNEY GENERAL

By: Kassandra P. Aristide
Kassandra P. Aristide
Assistant Attorney General
Office of the Attorney General
109 State Street
Montpelier, VT 05609

DATED at Fairfax, Vermont, this 3rd day of November, 2014.

Teig D. Marco
Teig D. Marco, M.D.
Respondent

Approved as to form:

DATED at Burlington, Vermont, this 3 day of NOV., 2014.


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Ritchie E. Berger
Ritchie E. Berger, Esq.
Dinse, Knapp & McAndrew, P.C.
209 Battery Street
P.O. Box 988
Burlington, VT 05402
Counsel for Respondent


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AS TO TEIG D. MARCO, M.D.

APPROVED AND ORDERED
VERMONT BOARD OF MEDICAL PRACTICE

Richard W. Busby, MD 

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W. J. [Signature] 

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Dated: December 3, 2014

ENTERED AND EFFECTIVE: December 3, 2014

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