

AUG 24 2020

KS State Board of Healing Arts

**BEFORE THE BOARD OF HEALING ARTS
OF THE STATE OF KANSAS**

In the Matter of

Gregory L. Curry, M.D.

Kansas License No. 04-26773

KSBHA Docket No. 19-HA00098

Journal Entry of Satisfaction

The Kansas State Board of Healing Arts ("Board"), by its Acting Executive Director, Tucker L. Poling, a duly authorized representative of the Board, in accordance with the provisions of the Kansas Administrative Procedure Act, K.S.A. 77-501 *et seq.*, as amended, and upon due consideration of the agency record, the applicable statutes and regulations, and being otherwise duly advised in the premises, makes the following determinations:

1. On June 17, 2019, Dr. Gregory L. Curry, M.D. ("Licensee") entered into a Consent Order with the Board, imposing requirements therein.
2. Licensee has satisfactorily met all requirements of the Consent Order and has no further obligations for compliance with the Consent Order.

IT IS SO ORDERED.

Dated this 24th day of August 2020.

Journal Entry of Satisfaction

In the Matter of Gregory L. Curry, M.D.

KSBHA Docket No. 19-HA00098

KANSAS STATE BOARD OF HEALING ARTS

A handwritten signature in blue ink, appearing to be 'Tucker L. Poling', written above a horizontal line.

Tucker L. Poling, Acting Executive Director
Kansas State Board of Healing Arts

CERTIFICATE OF SERVICE

I hereby certify that a true copy of the foregoing **Journal Entry of Satisfaction** was served this 24th day of August 2020 by depositing the same in the United States Mail, first-class postage prepaid, and via email, addressed to:

Tom Rottinghaus & Diana Beckman
Wagstaff & Cartmel, LLP
4740 Grand Avenue - Suite 300
Kansas City, Missouri 64112
trottinghaus@wcllp.com
dbeckman@wcllp.com
Attorneys for Licensee

Gregory L. Curry, M.D.
CONFIDENTIAL

Licensee

And a copy hand delivered to:

Tammie Mundil, Deputy Litigation Counsel
Kansas Board of Healing Arts
800 SW Jackson, Lower Level-Suite A
Topeka, Kansas 66612
tammie.l.mundil@ks.gov

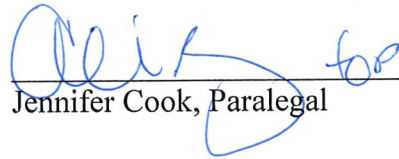
Compliance Coordinator
Kansas Board of Healing Arts
800 SW Jackson, Lower Level-Suite A
Topeka, Kansas 66612

Licensing Administrator
Kansas Board of Healing Arts
800 SW Jackson, Lower Level-Suite A
Topeka, Kansas 66612

And the original was filed with:

Tucker L. Poling, Acting Executive Director
Kansas State Board of Healing Arts
800 SW Jackson, Lower Level - Suite A
Topeka, Kansas 66612

Journal Entry of Satisfaction
In the Matter of Gregory L. Curry, M.D.
KSBHA Docket No. 19-HA00098


Jennifer Cook, Paralegal

FILED *Shle*
JUN 17 2019

BEFORE THE BOARD OF HEALING ARTS ^{KS} State Board of Healing Arts
OF THE STATE OF KANSAS

In the Matter of)

GREGORY L. CURRY, M.D.)

Kansas License No. 04-26773)

Docket No. 19-HA 00096

CONSENT ORDER

COMES NOW, the Kansas State Board of Healing Arts, ("Board"), by and through Courtney E. Manly, Associate Litigation Counsel ("Petitioner"), and Gregory L. Curry, M.D. ("Licensee"), by and through his attorney, Tom Rottinghaus and Diana Beckman of Wagstaff & Cartmell, LLP, and move the Board for approval of a Consent Order affecting Licensee's license to practice medicine and surgery in the State of Kansas. The Parties stipulate and agree to the following:

1. Licensee's last known mailing address to the Board is: [REDACTED]
[REDACTED].
2. Licensee is or has been entitled to engage in the practice of medicine and surgery in the State of Kansas, having been issued License No. 04-26773 on approximately April 5, 1997, and having last renewed such license on June 15, 2018. Licensee's current license designation is Active.
3. The Board is the sole and exclusive administrative agency in the State of Kansas authorized to regulate the practice of the healing arts, specifically the practice of medicine and surgery. K.S.A. 65-2801 *et seq.* and K.S.A. 65-2869.
4. This Consent Order and the filing of such document are in accordance with applicable law and the Board has jurisdiction to enter into the Consent Order as provided by K.S.A. 77-505 and

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65-2838. Upon approval, these stipulations shall constitute the findings of the Board, and this Consent Order shall constitute the Board's Final Order.

5. The Kansas Healing Arts Act is constitutional on its face and as applied in the case. Licensee agrees that, in considering this matter, the Board is not acting beyond its jurisdiction as provided by law.

6. Licensee voluntarily and knowingly waives his right to a hearing. Licensee voluntarily and knowingly waives his right to present a defense by oral testimony and documentary evidence, to submit rebuttal evidence, and to conduct cross-examination of witnesses. Licensee voluntarily and knowingly agrees to waive all possible substantive and procedural motions and defenses that could be raised if an administrative hearing were held.

7. The terms and conditions of the Consent Order are entered into between the undersigned parties and are submitted for the purpose of allowing these terms and conditions to become an Order of the Board. This Consent Order shall not be binding on the Board until an authorized signature is affixed at the end of this document. Licensee specifically acknowledges that counsel for the Board is not authorized to sign this Consent Order on behalf of the Board.

8. A protective order is hereby entered to protect all confidential information under 42 CFR Part II, K.S.A. 65-2836(i), K.S.A. 65-4915, K.S.A. 65-2898a, and K.S.A. 65-4925.

9. The Board has received information and investigated the same, and has reason to believe there may be grounds under K.S.A. 65-2836(b), K.S.A. 65-2837(a)(2), K.S.A. 65-2837(a)(3), K.S.A. 65-2837(b)(23), K.S.A. 65-2837(b)(24), K.S.A. 65-2837(b)(25), K.S.A. 65-2836(k), K.S.A. 65-2836(f), and K.A.R. 100-24-1, to take action on Licensee's license under the Kansas Healing Arts Act, K.S.A. 65-2801, *et seq.*

Consent Order
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10. The facts supporting the allegations in this Consent Order are as follows:

PATIENT 1 - [REDACTED]

11. From at [REDACTED], Licensee provided care and treatment to Patient 1, [REDACTED]

12. During Licensee's treatment of Patient 1, he prescribed several different controlled substances to Patient 1, including but not limited to: Diazepam 10 mg; Alprazolam 1 mg; Testosterone Cyp. 200 mg/ml; Oxycodone HCL 30 mg; Hydrocodon-Acetaminophen 10-325 mg; Hydromorphone 8 mg; Testosterone Cyp. 2,000 mg/10 ml; Depo-testosterone 200 mg/ml; Alprazolam 0.5 mg; Oxycodone HCL 15 mg; Oxycontin 80 mg; and Oxycodone-Acetaminophen 10-325 mg.

13. Licensee's prescriptions to Patient 1 included a combination of opioids and benzodiazepines, creating an increased risk for serious side effects and adverse events.

14. Licensee prescribed Patient 1 controlled substances at high levels for at least approximately four years, with no attempt to reduce the level of controlled substances Patient 1 was taking.

15. On several occasions, Patient 1 requested early refills on his controlled substances medications, which were approved by Licensee.

16. During Licensee's treatment of Patient 1, Patient 1 presented with several red flags, which were largely ignored, including but not limited to:

- a. Patient 1's [REDACTED] would steal his medication;
- b. Patient 1 would run out of his medications earlier than expected;
- c. Patient 1 would pay cash for his prescriptions;

- d. Multiple early refills were requested at several pharmacies by Patient 1, for many reasons;
 - e. Patient 1 used at least six different pharmacies to fill his prescriptions from Licensee; and
 - f. Patient 1 had a positive drug screen for marijuana.
17. On several occasions different pharmacies called College Park Family Care Center ("College Park") with questions, confusion, and concerns regarding the prescriptions of controlled substances written for Patient 1 by Licensee. These include but are not limited to:
- a. Patient 1 requested to refill his prescriptions for controlled substances early;
 - b. Concerns regarding Patient 1 being prescribed both Xanax and Valium at a high, unsafe dosage;
 - c. Concern Patient 1 was prescribed both Oxycodone and Hydrocodone Immediate Release;
 - d. Concern regarding why Patient 1 had not been drug tested, Patient 1 was overdue by six months for a physical exam, and what his diagnosis was;
 - e. Concern for the high dosages of medication Patient 1 was prescribed;
 - f. Patient 1 continued filling his prescriptions at different pharmacies; and
 - g. Patient 1 paid cash for his prescriptions.
18. Over the span of approximately 50 months, [REDACTED], including prescriptions and refills, Licensee prescribed Patient 1:
- a. 61 months of Roxicodone, equating to 11 excess months of this prescription, and approximately 2,970 additional tablets;

- b. 76 months of Valium, equating to 26 excess months of this prescription, and approximately 7,000 additional tablets;
 - c. 48 months of Xanax;
 - d. 54 months of Lortab, equating to four excess months of this prescription, and approximately 1,080 additional tablets; and
 - e. 11 months worth of Dilaudid prescribed in an eight month timeframe, equating to three excess months of this prescription, and approximately 800 additional tablets.
19. On several occasions, Licensee prescribed large amounts of controlled substances to Patient 1 at one time. This includes, but is not limited to:
- a. On [REDACTED], Licensee wrote prescriptions for Patient 1 that included: Testosterone Cyp. 2,000 mg/10 ml; Valium 10mg, 810 tablets; Lortab 10-325 mg, 810 tablets; and Oxycodone HCL 30 mg, 810 tablets. This totals 2,430 tablets.
 - b. On [REDACTED], Licensee wrote prescriptions for Patient 1 that included: Testosterone Cyp 2,000 mg/10 ml; Oxycodone HCL 30 mg, 810 tablets; Valium 10 mg, 810 tablets; Lortab 10-325mg, 810 tablets; and Oxycodone HCL 30 mg, 270 tablets. This totals 2,700 tablets.
 - c. On [REDACTED], Licensee wrote prescriptions for Patient 1 that included: Testosterone Cyp. 200 mg/ml; Xanax 1mg, 270 tablets; Lortab 10-325 mg, 810 tablets; Oxycodone HCL 30 mg, 810 tablets; and Valium 10mg, 810 tablets. This totals 2,700 tablets.
20. The morphine milligram equivalent ("MME") for Patient 1 ranged from 500 – 800 mg/day. This was accompanied by Valium 90 mg/day and Xanax 3 mg/day.

21. Licensee failed to discuss with Patient 1 the risks, side effects and potential consequences of the medications; or in the alternative, failed to document it in Patient 1's medical records.
22. Licensee failed to discuss with Patient 1 options for non-narcotic pain treatment; or in the alternative, failed to document it in Patient 1's medical records.

PATIENT 2 – [REDACTED]

23. From approximately [REDACTED], Licensee provided care and treatment to Patient 2, [REDACTED].
24. During Licensee's treatment of Patient 2, he prescribed several different controlled substances to Patient 2, including but not limited to: Alprazolam 1 mg; Clonazepam 0.5mg; Fentanyl 100 mcg/HR patch; Oxycodone Acetaminophen 10 -325 mg; Oxycodone Acetaminophen 10-650 mg; Oxycodone-Acetaminophen 5-325 mg; Oxycontin 20 mg; Oxycontin 40 mg; Oxycontin 80 mg; and Tramadol HCL 50 mg.
25. Licensee's prescriptions to Patient 2 included a combination of opioids and benzodiazepines, creating an increased risk for serious side effects and adverse events.
26. Licensee prescribed Patient 2 controlled substances at high levels for at least three and a half years, with no attempt to reduce the level of controlled substances Patient 2 was taking.
27. On several occasions, Patient 2 requested early refills on his controlled substance medications, many of which Licensee approved.
28. Patient 2 filled his prescriptions for controlled substances prescribed by Licensee at several different pharmacies.

29. On several occasions different pharmacies called College Park with questions, confusion, and concerns regarding the prescriptions of controlled substances written for Patient 2 by Licensee.

The pharmacies confusion and concerns included, but are not limited to:

- a. Needing more specific directions on Licensee's prescriptions for Patient 2's medication, including Tramadol/Ultram;
- b. Medications were not made in the high dosage Licensee was prescribing them in;
- c. Patient 2 was filling his prescriptions for OxyContin 20 mg, 40 mg, and 80 mg at Price Chopper, and then going to CVS pharmacy 20 days later to fill all three prescriptions early;
- d. [REDACTED]
[REDACTED]
[REDACTED]; and
- e. [REDACTED] filling a Percocet prescription Licensee wrote Patient 2 that was three months old.

30. Over an approximate 40-month span during which Licensee treated Patient 2, [REDACTED]
[REDACTED], Licensee prescribed Patient 2 a total of approximately 55 months of controlled substance medications.

31. Over a 26-month period, from [REDACTED], Patient 2 received approximately 34 months of prescriptions and/or refills.

32. Over a 14-month period, from [REDACTED], 24 months' worth of Tramadol was prescribed and/or refilled to Patient 2 by Licensee.

33. The narcotic prescription history for Patient 2 from [REDACTED] revealed an MME of over 1,000 mg/day.
34. Licensee failed to document in Patient 2's medical records why the excessive numbers of refills were given.
35. Licensee either failed to discuss with Patient 2 the risks, side effects and potential consequences of the medications; or in the alternative, failed to document it in Patient 2's medical records.
36. Licensee either failed to discuss with Patient 2 options for non-narcotic pain treatment; or in the alternative, failed to document it in Patient 2's medical records.

PATIENT 3 [REDACTED]

37. From approximately [REDACTED], Licensee provided care and treatment to Patient 3, [REDACTED].
38. During Licensee's treatment of Patient 3, he prescribed several different controlled substances to Patient 3, including but not limited to: Alprazolam 1 mg; Alprazolam 2 mg; Carisoprodol 350 mg; Clonazepam 1 mg; Clonazepam 2 mg; Diazepam 5 mg; and Methadone HCL 10 mg.
39. Licensee's prescriptions to Patient 3 included a combination of opioids, benzodiazepines, and Soma, creating an increased risk for serious side effects and adverse events.
40. During the 21 months between [REDACTED], Licensee provided Patient 3 with 29 months of Methadone prescriptions and refills. At 270 tablets per month, the additional eight months of refills Licensee provided Patient 3 totaled 2,160 tablets of Methadone 10mg.

41. Licensee wrote Patient 3's Soma prescriptions at 1400 mg/day.
42. In the 20 months between [REDACTED], Patient 3 received more than 60 months of Soma at the maximum dosage.
43. This amount of Soma dramatically potentiates and exacerbates the risks, side effects, and interactions with the Methadone and Xanax Licensee prescribed to Patient 3.
44. On or about [REDACTED], Licensee wrote Patient 3 a prescription for Xanax 2 mg twice daily with five refills. Licensee then documented in Patient 3's medical record he was turning over the prescriptions for benzodiazepines to Patient 3's psychiatrist.
45. However, Licensee wrote Patient 3 a prescription for Xanax 2 mg twice daily with five refills again on or about [REDACTED].
46. On or about [REDACTED], Licensee again wrote Patient 3 a prescription for Xanax 2 mg twice daily with five refills.
47. There is no documentation regarding any communication between Licensee and Patient 3's psychiatrist in Patient 3's medical records.
48. On or [REDACTED], it was noted in Patient 3's medical record that Patient 3's psychiatrist was still managing his benzodiazepines, indicating both Licensee and Patient 3's psychiatrist may have been prescribing benzodiazepines to Patient 3.
49. The narcotic prescription history for Patient 3 from [REDACTED], revealed an MME of over 1,000 mg/day.
50. Licensee either failed to discuss with Patient 3 the risks, side effects and potential consequences of the medications; or in the alternative, failed to document it in Patient 3's medical records.

51. Licensee either failed to discuss with Patient 3 options for non-narcotic pain treatment; or in the alternative, failed to document it in Patient 3's medical records.
52. Licensee either failed to perform, or in the alternative failed to document in Patient 3's medical records, spinal examinations which would need to be recorded in the chart of a patient with a spinal condition requiring large amounts of scheduled narcotics.
53. Licensee's acts, if proven, constitute a violation under K.S.A. 65-2836(b).
54. Licensee's acts, if proven, violated K.S.A. 65-2836(b), as further defined by K.S.A. 65-2837(a)(2), in that he committed repeated instances involving failure to adhere to the applicable standard of care to a degree which constitutes ordinary negligence in his care and treatment of Patient 1, Patient 2, and Patient 3.
55. Licensee's acts, if proven, violated K.S.A. 65-2836(b), as further defined by K.S.A. 65-2837(a)(3), in that Licensee has engaged in a pattern or practice or other behavior which demonstrates a manifest incapacity or incompetence to practice the healing arts.
56. Licensee's acts, if proven, violated K.S.A. 65-2836(b), as further defined by K.S.A. 65-2837(b)(23), in that Licensee prescribed, dispensed, administered, or distributed a prescription drug or substance, including controlled substances in an improper or inappropriate manner to Patient 1, Patient 2, and Patient 3.
57. Licensee's acts, if proven, violated K.S.A. 65-2836(b), as further defined by K.S.A. 65-2837(b)(24), in that Licensee repeatedly failed to practice healing arts with the level of care, skill and treatment which is recognized by a reasonably prudent similar practitioner as being acceptable under similar conditions and circumstances for his care and treatment of Patient 1, Patient 2, and Patient 3.

58. Licensee's acts, if proven, violated K.S.A. 65-2836(b), as further defined by K.S.A. 65-2837(b)(25), in that Licensee failed to keep written medical records which accurately describe the services rendered to the patient, including patient histories, pertinent findings, examination results and test results, for Patient 1, Patient 2, and Patient 3.
59. Licensee's acts, if proven, violated K.S.A. 65-2836(k), in that Licensee violated a lawful rule and regulation of the Board. Specifically, Licensee violated K.A.R. 100-24-1 by failing to maintain an adequate record for each patient for whom he performed a personal service for, including Patient 1, Patient 2, and Patient 3.
60. Licensee's acts, if proven, violated K.S.A. 65-2836(f), in that Licensee repeatedly violated the Kansas Healing Arts Act.
61. Under K.S.A. 65-2836, the Board may revoke, suspend, limit, censure or place under probationary conditions Licensee's license and under K.S.A. 65-2863a the Board has the authority to impose administrative fines for violations of the Kansas Healing Arts Act.
62. According to K.S.A. 65-2838(b) and K.S.A. 77-505, the Board has authority to enter into this Consent Order without the necessity of proceeding to a formal hearing.
63. All pending investigation materials in [REDACTED] regarding Licensee, were fully reviewed and considered by the Board members who serve on the Board's Disciplinary Panel. Disciplinary Panel No. 32 authorized and directed Board counsel to seek settlement of this matter with the provisions contained in this Consent Order.
64. Licensee further understands and agrees that if the Board finds, after due written notice and an opportunity for a hearing, that Licensee has failed to comply with any of the terms of this Consent Order, the Board may immediately impose any sanction provided for by law, including

but not limited to suspension or revocation of Licensee's license to practice medicine and surgery in the State of Kansas. Licensee hereby expressly understands and agrees that, at any such hearing, the sole issue shall be whether or not Licensee has failed to comply with any of the terms or conditions set forth in this Consent Order. The Board acknowledges that at any such hearing, Licensee retains the right to confront and examine all witnesses, present evidence, testify on his own behalf, contest the allegations, present oral argument, appeal to the courts, and all other rights set forth in the Kansas Administrative Procedures Act, K.S.A. 77-501 *et seq.*, and the Kansas Healing Arts Act, K.S.A. 65-2801 *et seq.*

65. Nothing in this Consent Order shall be construed to deny the Board jurisdiction to investigate alleged violations of the Kansas Healing Arts Act, or to investigate complaints received under the Risk Management Law, K.S.A. 65-4921 *et seq.*, that are known or unknown and are not covered under this Consent Order, or to initiate formal proceedings based upon known or unknown allegations of violations of the Kansas Healing Arts Act.

66. Licensee hereby releases the Board, its individual members (in their official and personal capacity), attorneys, employees and agents, hereinafter collectively referred to as "Releasees", from any and all claims, including but not limited to those alleged damages, actions, liabilities, both administrative and civil, including the Kansas Judicial Review Act, K.S.A. 77-601 *et seq.* arising out of the investigation and acts leading to the execution of this Consent Order. This release shall forever discharge the Releasees of any and all claims or demands of every kind and nature that Licensee has claimed to have had at the time of this release or might have had, either known or unknown, suspected or unsuspected, and Licensee shall not commence to prosecute, cause or permit to be prosecuted, any action or proceeding of any description against the Releasees.

67. Licensee further understands and agrees that upon signature by Licensee, this document shall be deemed a public record and shall be reported to any entities authorized to receive disclosure of the Consent Order.
68. This Consent Order, when signed by both parties, constitutes the entire agreement between the parties and may only be modified or amended by a subsequent document executed in the same manner by the parties.
69. Licensee agrees that all information maintained by the Board pertaining to the nature and result of any complaint and/or investigation may be fully disclosed to and considered by the Board in conjunction with the presentation of any offer of settlement, even if Licensee is not present. Licensee further acknowledges that the Board may conduct further inquiry as it deems necessary before the complete or partial acceptance or rejection of any offer of settlement.
70. Licensee, by signature to this document, waives any objection to the participation of the Board members, including the Disciplinary Panel and General Counsel, in the consideration of this offer of settlement and agrees not to seek the disqualification or recusal of any Board member or General Counsel in any future proceedings on the basis that the Board member or General Counsel has received investigative information from any source which otherwise may not be admissible or admitted as evidence.
71. Licensee acknowledges he has read this Consent Order and fully understands the contents.
72. Licensee acknowledges this Consent Order has been entered into freely and voluntarily.
73. All correspondence or communication between Licensee and the Board relating to the Consent Order shall be by certified mail addressed to:

Kansas Board of Healing Arts
Attn: Compliance Coordinator
800 SW Jackson, Lower Level Suite A
Topeka, Kansas 66612
KSBHA_ComplianceCoordinator@ks.gov

74. Licensee shall obey all federal, state and local laws and rules governing the practice of medicine and surgery in the State of Kansas that may be in place at the time of execution of the Consent Order or may become effective subsequent to the execution of this document.

75. Upon execution of this Consent Order by affixing a Board authorized signature below, the provisions of this Consent Order shall become an Order under K.S.A. 65-2838. This Consent Order shall constitute the Board's Order when filed with the office of the Executive Director for the Board and no further Order is required.

76. This Consent Order constitutes **public disciplinary action**.

77. The Board may consider all aspects of this Consent Order in any future matter regarding Licensee.

78. In lieu of conducting a formal proceeding, Licensee, by signature affixed to this Consent Order, hereby voluntarily agrees to the following disciplinary action against his License to engage in the practice of medicine and surgery:

PUBLIC CENSURE

79. Licensee is hereby **publicly censured** for violating the Kansas Healing Arts Act.

FINE

80. Licensee is hereby ordered to pay a **FINE** in the amount of **TWO THOUSAND FIVE HUNDRED DOLLARS (\$2,500.00)** for violations of the Kansas Healing Arts Act.

81. Such fine shall be paid in full, to the Board on or before September 16, 2019, in the form

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of a Cashier's Check or Money Order to the "Kansas State Board of Healing Arts."

82. All monetary payments to the Board relating to this Consent Order shall be mailed to the Board by certified mail, addressed to:

Kansas Board of Healing Arts
Attn: Compliance Coordinator
800 SW Jackson, Lower Level Suite A
Topeka, Kansas 66612
KSBHA_ComplianceCoordinator@ks.gov

EDUCATION: PRESCRIBING CONTROLLED SUBSTANCES

83. Licensee shall attend and successfully complete the Center for Personalized Education for Physicians' ("CPEP") course, "Prescribing Controlled Drugs: Critical Issues and Common Pitfalls" by October 31, 2019, unless otherwise approved by the Board.

84. Licensee shall provide proof of enrollment in the "Prescribing Controlled Drugs: Critical Issues and Common Pitfalls" within ten (10) days of enrollment.

85. All costs associated with this course shall be at Licensee's own expense to include, but is not limited to, the cost of the course, the cost of travel to and from the course, and the cost of accommodations while attending the course.

86. These hours shall be in addition to those continuing education hours required for renewal of licensure.

87. Licensee shall provide proof of successfully completing the "Prescribing Controlled Drugs: Critical Issues and Common Pitfalls" within thirty (30) days of successfully completing the program.

88. Proof of enrollment and successful completion of the course shall be submitted to:

Consent Order
Gregory L. Curry, M.D.

Kansas Board of Healing Arts
Attn: Compliance Coordinator
800 SW Jackson, Lower Level Suite A
Topeka, Kansas 66612
KSBHA_ComplianceCoordinator@ks.gov

MONITORING

89. Licensee's controlled substance prescribing shall be monitored for at least six months by another Kansas-licensed physician. The monitoring physician must be pre-approved by the Board, through the appointed Disciplinary Panel member.
90. On or before July 1, 2019, Licensee must submit the curriculum vitae of a proposed monitoring physician who is agreeable to serve as a monitor for Licensee.
91. Licensee shall maintain a log for each prescription of a controlled substance he writes, orders, or authorizes. The log shall be on a form provided by the Board to Licensee. This log shall serve as a reference to identify all patients who were prescribed controlled substances each month and will contain applicable patient charting information to include at a minimum the patients name, dosage of the prescribed controlled substance, quantity of the controlled substance, any refills that are prescribed, and the diagnosis for the patient.
92. At the Board's request, Licensee agrees provide a written narrative explaining his course of treatment of any and all patients identified by the Board.
93. On a monthly basis, the monitoring physician shall review the controlled substance log and select ten patient charts to review. Licensee shall then provide copies of the selected patient charts to the monitoring physician for review.
94. The monitoring physician shall submit a report to the Board that includes an assessment for each patient chart as to whether Licensee is prescribing controlled substances in a manner

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which is recognized as being acceptable by a reasonably prudent practitioner prescribing under similar conditions and circumstances.

95. Monthly reports by the monitoring physician, including Licensee's log, shall be submitted to the Compliance Coordinator on the 10th of the month for Licensee's controlled substance prescribing of the immediately preceding month. For example, the monthly report for Licensee's prescribing in August 2019, would be due on September 10, 2019. Monthly reports shall be submitted until the Consent Order is terminated, but at a minimum, there must be 12 reports submitted to the Board.

96. The monitoring physician shall immediately notify Board staff if he/she finds any patient case in which he/she reasonably believes Licensee is inappropriate prescribing controlled substances to a patient.

97. Licensee is responsible for ensure the timely submission of the monitoring physician's reports to Board staff.

98. Further, Licensee acknowledges the Board may, at its discretion through monitoring, request a KTRACS report to ensure Licensee's compliance with the terms of the provision.

99. All costs associated with monitoring shall be at Licensee's own expense.

100. All requirements of monitoring shall be submitted to:

Kansas Board of Healing Arts
Attn: Compliance Coordinator
800 SW Jackson, Lower Level Suite A
Topeka, Kansas 66612
KSBHA_ComplianceCoordinator@ks.gov

EDUCATION: MEDICAL RECORD KEEPING

101. Licensee shall attend and successfully complete the CPEP Medical Record Keeping

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Seminar by October 31, 2019, unless otherwise approved by the Board.

102. Licensee shall provide proof of enrollment in the seminar within ten days of enrollment.

103. All costs associated with this seminar shall be at Licensee's own expense to include, but is not limited to, the cost of the seminar, the cost of travel to and from the seminar, and the cost of accommodations while attending the seminar.

104. These hours shall be in addition to those continuing education hours required for renewal of licensure.

105. Licensee shall provide proof of successfully completing the CPEP Medical Record Keeping Seminar within 30 days of successfully completing the program.

106. Proof of enrollment and successful completion of the seminar shall be submitted to:

Kansas Board of Healing Arts
Attn: Compliance Coordinator
800 SW Jackson, Lower Level Suite A
Topeka, Kansas 66612
KSBHA_ComplianceCoordinator@ks.gov

ESSAY

107. Following completion of the CPEP Prescribing Controlled Substance Course, and CPEP's Medical Record Keeping Seminar, Licensee shall write and submit a 1,000-word essay to the Board. The essay shall be submitted on or before November 15, 2019.

108. The essay shall address and discuss the topics covered in both CPEP courses, what Licensee has learned from those courses, and how he will implement what he has learned into his practice.

109. The essay must be at least 1,000 words, type-written, 12-point font, and double spaced.

110. Licensee's essay will be subject to review and approval by the appointed Disciplinary Panel member.

111. In the event the appointed Disciplinary Panel member does not approve of Licensee's submitted essay, the member will outline the reasons. The reasons for non-approval will timely be provided to Licensee. Licensee will then submit an amended essay with revisions within 15 days of receiving the reasons for non-approval.

TIMEFRAME

112. This Consent Order is not self-terminating. Licensee must successfully complete all of the previously mentioned conditions before he can request termination of the Consent Order.

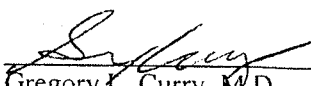
IT IS THEREFORE ORDERED that the Consent Order and agreement of the parties contained herein is adopted by the Board as findings of fact, conclusions of law, and as a Final Order of the Board.

IT IS SO ORDERED on this 17 day of June, 2019.

**FOR THE KANSAS STATE BOARD OF
HEALING ARTS:**


Kathleen Selzler Lippert
Executive Director

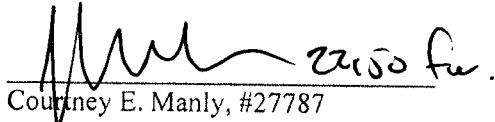
6/17/19
Date


Gregory L. Curry, M.D.
Licensee

5-6-2019
Date

Consent Order
Gregory L. Curry, M.D.

PREPARED AND APPROVED BY:



Courtney E. Manly, #27787

Associate Litigation Counsel
Kansas Board of Healing Arts
800 SW Jackson, Lower Level-Suite A
Topeka, Kansas 66612
Phone: 785-296-1384
Fax: 785-368-8210
courtney.manly@ks.gov



Diana Beckman, #

Tom Rottinghaus, #
Diana Beckman, #
Attorneys for Licensee
Wagstaff & Cartmell, LLP
4740 Grand Avenue – Suite 300
Kansas City, Missouri 64112
Phone: 816-701-1193
trottinghaus@wcllp.com
dbeckman@wcllp.com

CERTIFICATE OF SERVICE

I, the undersigned, hereby certify that I served a true and correct copy of the Consent Order by United States mail, postage prepaid, on this 17th day of June, 2019, to the following:

Tom Rottinghaus & Diana Beckman
Attorneys for Licensee
Wagstaff & Cartmell, LLP
4740 Grand Avenue – Suite 300
Kansas City, Missouri 64112

Gregory L. Curry, M.D.
Licensee

[REDACTED]
[REDACTED]

And the original was hand-filed with:

Kathleen Selzler Lippert
Executive Director
Kansas Board of Healing Arts
800 SW Jackson, Lower Level-Suite A
Topeka, Kansas 66612

And a copy was hand-delivered to:

Courtney E. Manly
Associate Litigation Counsel
Kansas Board of Healing Arts
800 SW Jackson, Lower Level-Suite A
Topeka, Kansas 66612

Compliance Coordinator
Kansas Board of Healing Arts
800 SW Jackson, Lower Level-Suite A
Topeka, Kansas 66612

Licensing Administrator
Kansas Board of Healing Arts
800 SW Jackson, Lower Level-Suite A
Topeka, Kansas 66612

Susan Nile

Consent Order
Gregory L. Curry, M.D.