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

KS State Board of Healing Arts

In the Matter of)
)
Nora P. Gomez, M.D. 28297)
Kansas License No. 04-30287)

Docket No. 10-HA 00109

CONSENT ORDER

COMES NOW, the Kansas State Board of Healing Arts, (“Board”), by and through Stacy R. Bond, Associate Litigation Counsel (“Petitioner”), and Nora P. Gomez, M.D. (“Licensee/Applicant”), *pro se*, and move the Board for approval of a Consent Order affecting Licensee/Applicant’s license to practice medicine and surgery in the State of Kansas. The Parties stipulate and agree to the following:

1. Licensee/Applicant’s last known mailing address to the Board is: (confidential)
Overland Park, Kansas 66223.
2. Licensee/Applicant is or has been entitled to engage in the practice of medicine and surgery in the State of Kansas, having been issued License No. 04-30287 on approximately August 14, 1999. Licensee/Applicant’s license is inactive. On or about November 3, 2009, Licensee/Applicant submitted to the Board an application for status change in medicine and surgery from inactive to active. Such application was deemed complete on January 15, 2010.
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.

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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 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/Applicant agrees that, in considering this matter, the Board is not acting beyond its jurisdiction as provided by law.
6. Licensee/Applicant voluntarily and knowingly waives her right to a hearing. Licensee/Applicant voluntarily and knowingly waives her right to present a defense by oral testimony and documentary evidence, to submit rebuttal evidence, and to conduct cross-examination of witnesses. Licensee/Applicant 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/Applicant specifically acknowledges that counsel for the Board is not authorized to sign this Consent Order on behalf of the Board.
8. The Board has received information and investigated the same, and has reason to believe that Licensee/Applicant has not been in the active practice of medicine and surgery since 2005 and that Licensee/Applicant has not been engaged in a

- formal educational program during the two years preceding the application for status change.
9. Licensee/Applicant provided information to the Disciplinary Panel outlining that she is currently certified with the American Board of Family Medicine, having obtained her recertification in Family Medicine on August 4, 2006, such certification is good through December 31, 2013. Additionally, Licensee/Applicant is participating and current in regards to her Maintenance of Certification for Family Physicians (MC-FP).
 10. Licensee/Applicant has stated it is her intend to re-enter practice by working with John L. Crane, M.D., with whom she worked prior to taking a leave of absence in 2005.
 11. Pursuant to K.S.A. 65-2809(e), Any person who has not been in the active practice of the branch of the healing arts for which reinstatement is sought or who has not been engaged in a formal educational program during the two years proceeding the application for reinstatement may be required to complete such additional testing, training or education as the board may deem necessary to establish the Licensee/Applicant's present ability to practice with reasonable skill and safety.
 12. According to K.S.A.65-2838(b), the Board has authority to enter into this Consent Order without the necessity of proceeding to a formal hearing.
 13. All pending investigation materials regarding Licensee/Applicant were fully reviewed and considered by the Board member(s) who serve on the Board's Disciplinary Panel. Disciplinary Panel No. 24 authorized and directed Board

counsel to seek settlement of this matter with the provisions contained in this Consent Order.

14. In lieu of conducting a formal proceeding, Licensee/Applicant, by signature affixed to this Consent Order, hereby voluntarily agrees to the following as a condition to being granted status change from inactive licensure to active licensure to engage in the practice of medicine and surgery:

PRACTICE MONITORING

- a. Licensee/Applicant agrees to have a Board approved practice monitor, who is another Kansas-licensed physician, to review the practices and procedures of Licensee/Applicant's office to ensure compliance with community and ethical standards. Licensee/Applicant shall bear all expenses associated with the practice monitor.
- b. On or before March 1, 2010, Licensee/Applicant shall submit the curriculum vitae of a proposed practice supervisor and a plan of supervised practice for approval to the Board.
- c. The practice supervisor shall submit quarterly reports (on July 15th, October 15th, January 15th and April 15th) to the Board on a form provided by Board staff. Such reports shall include a summary of whether Licensee/Applicant is seeing patients, documenting in the medical record, and prescribing medications in an appropriate and timely manner.

Licensee/Applicant agrees to follow all recommendations of practice monitor and is responsible for timely submission of the practice monitor's reports.

- d. Licensee/Applicant shall at all times keep Board staff informed of all her current practice locations, addresses and telephone numbers. Licensee /Applicant shall provide the above information in writing to the Board within ten (10) days of any such change.
- e. The Board designates Dr. Beverly to review and approve/disapprove of the proposed practice supervisor and plan of supervised practice.
- f. All reports required pursuant to this Consent Order shall be submitted to the Board of Healing Arts, Attention: Complaint Coordinator, 235 S.W. Topeka Blvd., Topeka, Kansas 66603-3068.

TIMEFRAME

- g. The above monitoring provisions and limitations are not self-terminating. After a period of six (6) months, Licensee/Applicant may request modification or termination of the provisions. For any period of time that Licensee/Applicant is not actively practicing medicine and surgery in Kansas, the monitoring provisions and limitations will remain in effect but will be tolled and not counted towards reducing the six (6) month timeframe.
15. Licensee/Applicant's failure to comply with the provisions of the Consent Order may result in the Board taking further disciplinary action as the Board deems appropriate according to the Kansas Administrative Procedure Act and Kansas Healing Arts Act.
16. Nothing in this Consent Order shall be construed to deny the Board jurisdiction to investigate alleged violations of the 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 Healing Arts Act.

17. Licensee/Applicant 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 Act for Judicial Review and Civil Enforcement of Agency Actions, 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 /Applicant has claimed to have had at the time of this release or might have had, either known or unknown, suspected or unsuspected, and Licensee/Applicant shall not commence to prosecute, cause or permit to be prosecuted, any action or proceeding of any description against the Releasees.

18. Licensee/Applicant further understands and agrees that upon signature by Licensee/Applicant, this document shall be deemed a public record and shall be reported to any reporting entities authorized to receive disclosure of the Consent Order.

19. 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.

20. Licensee/Applicant 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/Applicant is not present. Licensee /Applicant 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.
21. Licensee/Applicant, 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.
22. Licensee/Applicant acknowledges that she has read this Consent Order and fully understands the contents.
23. Licensee/Applicant acknowledges that this Consent Order has been entered into freely and voluntarily.
24. All correspondence or communication between Licensee/Applicant and the Board relating to the Consent Order shall be by certified mail addressed to the Kansas State Board of Healing Arts, Attn: Compliance Coordinator, 235 S. Topeka Blvd., Topeka, Kansas 66603-3068.

25. Licensee/Applicant 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.
26. 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.
27. The Board may consider all aspects of this Consent Order in any future matter regarding Licensee/Applicant.

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

IT IS FURTHER ORDERED that upon meeting all technical requirements for licensure, Applicant shall be granted a license.

IT IS FURTHER ORDERED that:

PRACTICE MONITORING

- a. Licensee/Applicant agrees to have a Board approved practice monitor, who is another Kansas-licensed physician, to review the practices and procedures of Licensee/Applicant's office to ensure compliance with community and ethical standards. Licensee/Applicant shall bear all expenses associated with the practice monitor.

- b. On or before March 1, 2010, Licensee/Applicant shall submit the curriculum vitae of a proposed practice supervisor and a plan of supervised practice for approval to the Board.
- c. The practice supervisor shall submit quarterly reports (on July 15th, October 15th, January 15th and April 15th) to the Board on a form provided by Board staff. Such reports shall include a summary of whether Licensee/Applicant is seeing patients, documenting in the medical record, and prescribing medications in an appropriate and timely manner.
Licensee/Applicant agrees to follow all recommendations of practice monitor and is responsible for timely submission of the practice monitor's reports.
- d. Licensee/Applicant shall at all times keep Board staff informed of all her current practice locations, addresses and telephone numbers. Licensee/Applicant shall provide the above information in writing to the Board within ten (10) days of any such change.
- e. The Board designates D. Bezelay to review and approve/disapprove of the proposed practice supervisor and plan of supervised practice.
- f. All reports required pursuant to this Consent Order shall be submitted to the Board of Healing Arts, Attention: Complaint Coordinator, 235 S.W. Topeka Blvd., Topeka, Kansas 66603-3068.

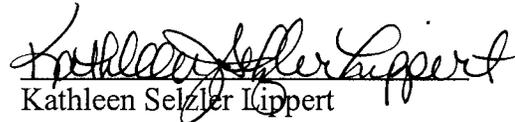
TIMEFRAME

- g. The above monitoring provisions and limitations are not self-terminating.
After a period of six (6) months, Licensee/Applicant may request

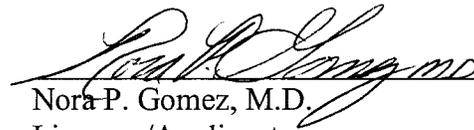
modification or termination of the provisions. For any period of time that Licensee/Applicant is not actively practicing medicine and surgery in Kansas, the monitoring provisions and limitations will remain in effect but will be tolled and not counted towards reducing the six (6) month timeframe.

IT IS SO ORDERED on this 23rd day of February, 2010.

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


Kathleen Selzler Lippert
Interim Executive Director

2-23-10
Date


Nora P. Gomez, M.D.
Licensee/Applicant

1-25-10
Date

PREPARED AND APPROVED BY:


Stacy R. Bond #17673
Associate Litigation Counsel
Kansas Board of Healing Arts
235 S. Topeka Boulevard
Topeka, Kansas 66603-3068
785-296-3268

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Nora P. Gomez, M.D.

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 23rd day of February, 2010, to the following:

Nora P. Gomez, M.D.
Licensee/Applicant
(confidential)
Overland Park, KS 66223

And the original was hand-filed with:

Kathleen Selzler Lippert
Interim Executive Director
Kansas Board of Healing Arts
235 S. Topeka Boulevard
Topeka, Kansas 66603-3068

And a copy was hand-delivered to:

Stacy R. Bond
Associate Litigation Counsel
Kansas Board of Healing Arts
235 S. Topeka Boulevard
Topeka, Kansas 66603-3068

Melissa Massey
Compliance Coordinator
Kansas Board of Healing Arts
235 S. Topeka Boulevard
Topeka, Kansas 66603-3068

