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MAR 27 2019

KS State Board of Healing Arts

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

In the Matter of)	
)	Docket No.: 19-HA00071
JEFF M. SLOYER, M.D.)	
Kansas License No. 04-29872)	

**EMERGENCY ORDER OF TEMPORARY LIMITATION AND
EMERGENCY PROCEEDINGS**

On March 26, 2019, this matter comes before the Presiding Officer on a motion filed on March 22, 2019 and supplemented with additional exhibits filed on March 26, 2019 (the motion and supplement, including all exhibits, hereinafter referred to as "Motion") on behalf of the Disciplinary Panel of the Board ("Petitioner") for an Ex Parte Emergency Order of Limitation and for Emergency Proceedings. Upon consideration of the agency record, including all filings and attached exhibits, the presiding officer finds, concludes and orders as follows:

1. Pursuant to K.S.A. 65-2838(c) and K.S.A. 77-536(c), that there is reasonable cause to believe that:

- a. grounds exist for disciplinary action; and
- b. the immediate continuation in unlimited practice by Jeff M. Sloyer, M.D. ("Licensee") would constitute an imminent danger to the public health and safety.

2. The cause to believe that grounds exist for disciplinary action and the Licensee's immediate continuation in practice would constitute an imminent danger to the public health and safety include the following:

- a. The facts and documentary evidence as set forth and incorporated in the Motion, all such facts and documentary evidence incorporated here by

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reference subject to the Protective Order that has been entered in this case.

- b. Pursuant to K.S.A. 38-2223, Licensee is required to promptly report to the Kansas Department of Children and Families (“DCF”) when he “has reason to suspect that a child has been harmed as a result of physical, mental or emotional abuse or neglect . . .” *Id.*
- c. There is evidence that supports cause to believe that, in late January 2018, Licensee treated a 21 day-old infant (“Infant 1”) at Coffey County Medical Center who presented with injuries suggestive of child abuse, as more fully described in Count I of the Petition. However, Licensee discharged Infant 1 back to her home without appropriately evaluating Infant 1’s injuries as indicative of potential abuse and without making a report to DCF.
- d. Approximately three weeks later, Infant 1 was taken to Children’s Mercy Emergency Department by her mother with additional injuries. Based on the physical presentation of Infant 1, medical personnel at Children’s Mercy immediately began evaluating Infant 1 for non-accidental trauma. An Initial Child Abuse & Neglect – SCAN Consult was conducted, which ultimately resulted in documenting seven healing fractures from prior injuries. More specifically:
 - “[Infant 1’s] injuries are due to violent physical abuse . . . additionally [Infant 1] has reportedly had significant bruising on a prior occasion in late January. . . . [Infant 1] has suffered violent physical abuse on more than one occasion.”
- e. Infant 1’s mother’s boyfriend eventually admitted to physically abusing infant 1 on multiple occasions, including around the date Infant 1 presented to Licensee.
- f. There is evidence that supports cause to believe that, on July 22, 2015, a five-month-old child (“Infant 2”) was treated by Licensee at Coffey County Hospital with injuries suggestive of child abuse, as more fully described in Count II of the Petition. An XR skeletal survey was documented as “highly suggestive of non-accidental trauma.” Infant 2 also presented with signs suggestive of neglect. Although Licensee documented on the morning of July 23, 2015 a plan that included “[r]ule out child abuse”, Licensee ordered Infant 2 discharged to home at 1:19 p.m. that day. However, Infant 2 was transported by law enforcement to Children’s Mercy for further care and placed in state custody. There is evidence that supports cause to believe that Licensee did not make a report to DCF regarding Infant 2.

4. The presiding officer further finds that, in addition to the facts and law referenced above,

K.S.A. 65-2801, K.S.A. 65-2836(b), K.S.A. 65-2837(b)(12), and the policy consideration of the Board's duty of public protection provide reasonable grounds in law and policy to justify the requested emergency suspension. The presiding officer finds that children, especially children under 16, are a vulnerable patient population that justify special vigilance by the Board to protect their safety consistent with the Board's duty of public protection pursuant to K.S.A. 65-2801 et. seq.

5. Child abuse "is a leading cause of morbidity and mortality throughout childhood."¹ An abused child has a significantly increased risk of death if abuse is not reported at the first presentation to a physician of injuries suggestive of abuse.²

6. Kansas law recognizes a significant line of demarcation at age 16 regarding a minor's capacity to seek health care independently and make decisions regarding their own health care. See K.S.A. 38-123b. Children under 16 are therefore a uniquely vulnerable sub-population of minor patients.

7. Given the facts referenced above, which give reasonable cause to believe that Licensee's education, training, and/or clinical judgment may be significantly deficient in regard to the recognition and appropriate clinical approach and follow up to clinical warning signs of child abuse, the presiding officer finds that it is necessary pursuant to K.S.A. 65-2838(c) and K.S.A. 77-536(c) that Licensee be temporarily restrained from treating children under 16 years of age.

¹ Rosen's Emergency Medicine Concepts and Clinical Practice, 842 (Walls, M.D. et al., 9th ed. 2018); U.S. Advisory Board on Child Abuse and Neglect: Child abuse and neglect: critical first steps in response to a national emergency, Washington, DC, 1990, U.S. Government Printing Office.

² See Kelly Colleen McDonald, Child Abuse: Approach and Management, 75 American Family Physician, 221 (2007).

8. Therefore, pursuant to K.S.A. 65-2838(c) and K.S.A. 77-536(b), Licensee's license to practice medicine and surgery is immediately temporarily limited pending further proceedings and/or further Order of the Board, as follows:

- **Licensee shall not treat patients who are under sixteen years of age.**

9. A notice of expedited hearing to determine whether the temporary limitation shall remain in place is filed and served contemporaneously herewith.

IT IS, THEREFORE, ORDERED that the license of Jeff M. Sloyer, M.D., Kansas License No. 04-29872, is hereby **IMMEDIATELY LIMITED** as described above on a temporary basis pending a hearing to determine if there is adequate cause for the suspension to remain in effect.

IT IS SO ORDERED this 27th day of March, 2019.

KANSAS STATE BOARD OF HEALING ARTS

/s/ Tucker Poling, KS#23266, for
Robin Durrett, D.O.
Presiding Officer

CERTIFICATE OF SERVICE

I certify that a true copy of the foregoing Order was served this 27th day of March, 2019 by depositing the same in the United States Mail, first-class postage prepaid, and addressed to:

Jeff M. Sloyer, MD
[REDACTED]
Burlington, KS 66839
Licensee - Residence

Jeff M. Sloyer, MD
309 Sanders Street
Burlington, KS 66839
Licensee - Business

And copies were hand-delivered to:

Courtney E. Manly, Associate Litigation Counsel
Jared T. Langford, Associate Litigation Counsel
Kansas State Board of Healing Arts
800 SW Jackson Lower Level, Ste A
Topeka, KS 66612

and the original was filed with the office of the Executive Director.

A handwritten signature in black ink, appearing to be 'J. Sloyer', is written over a horizontal line.