

BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

ANDRZEJ J. SLASKI, M.D.

Holder of License No. 6972
For the Practice of Allopathic Medicine
In the State of Arizona.

Case No. MD-11-0335A and MD-12-0232A

**INTERIM ORDER FOR PRACTICE
RESTRICTION AND CONSENT TO THE
SAME**

INTERIM CONSENT AGREEMENT

Andrzej J. Slaski, M.D. ("Respondent") elects to permanently waive any right to a hearing and appeal with respect to this Interim Order for Practice Restriction; admits the jurisdiction of the Arizona Medical Board ("Board"); and consents to the entry of this Order by the Board.

FINDINGS OF FACT

1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.

2. Respondent is the holder of License No. 6972 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-11-0335A after receiving a complaint from a pharmacist regarding Respondent's prescribing practices.

4. Patient PH had a history of illicit drug use and was previously discharged from a pain management practice due to doctor shopping. After review of the case, the board's medical consultant ("MC") opined that the level and quantity of short acting medication prescribed by Respondent for PH was excessive without any implemented tools to address addiction, diversion and abuse. The MC also expressed concern that there was no urine drug testing done while Respondent treated PH. The MC observed that Respondent continued to prescribe high levels of short acting pain medication to

1 patient CA, who was known to have failed previous drug tests. The MC also noted that
2 Respondent failed to document any office notes for the period of treatment when CA was
3 employed by Respondent. The MC opined that patient CA, a high risk patient, should
4 have had her pain re-evaluated, non-narcotic options readdressed, or the possibility of
5 abuse looked into to a higher degree.

6 5. The board initiated case number MD-12-0232A after receiving a Complaint
7 from the mother of patient PS on February 29, 2012, alleging inappropriate prescribing of
8 narcotics to her twenty-five year-old son.

9 6. Medical records for patient PS were reviewed and Respondent was
10 interviewed by a board medical consultant and investigator on March 8, 2012.
11 Respondent is a pediatrician but stated that, currently, he is practicing only pain
12 management. Respondent admits to having no training or continuing medical education
13 in pain management.

14 7. Respondent treated PS with high-dose narcotics for pain, although his MRI
15 showed only minimal degenerative disc disease and Respondent admitted that he was
16 never able to confirm the patient's primary complaint of fibromyalgia. In fact, there is no
17 indication in the chart that Respondent performed a full examination of the patient's
18 painful sites. There was one urine drug screen in PS's medical record and it was positive
19 for illicit drugs but negative for alprazolam, which Respondent had prescribed. There is
20 no indication that Respondent addressed this issue with PS but he continued to prescribe
21 the alprazolam and oxycodone. Additionally, Respondent continued to prescribe the
22 medications to PS after PS reported on two occasions that the medications had been
23 stolen. Included in the medical chart were several state Board of Pharmacy (CSPMP)
24 restricted medication lists which revealed that PS was obtaining narcotics from at least 7
25

1 providers including Respondent. There is no indication in the chart that this issue was
2 addressed by Respondent.

3 8. The executive director has determined that a restriction is needed to mitigate
4 imminent danger to the public health and safety, and the Board's investigative staff and
5 medical consultant concur after review of the case that a consent agreement is
6 appropriate.

7
8 **CONCLUSIONS OF LAW**

9 1. The Board possesses jurisdiction over the subject matter hereof and over
10 Respondent.

11 2. The Executive Director may enter into a consent agreement with a physician
12 if there is evidence of danger to the public health and safety pursuant to A.R.S. § 32-
13 1405(C)(25) and § 32-1451(F); A.A.C. R4-16-504.

14 3. Based on the information in the Board's possession there is evidence that if
15 Respondent were to practice medicine in Arizona there would be a danger to the public
16 health and safety.

17 **ORDER**

18 IT IS HEREBY ORDERED THAT:

19 1. Respondent shall not practice clinical medicine or any medicine involving
20 direct patient care, and is prohibited from prescribing any form of treatment including
21 prescription medications, until Respondent applies to the Board and receives permission
22 to do so.

23 2. This is an interim order and not a final decision by the Board regarding the
24 pending investigative file and as such is subject to further consideration by the Board.

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DATED AND EFFECTIVE this 12th day of MARCH, 2012.



ARIZONA MEDICAL BOARD

By [Signature]
Lisa S. Wynn
Executive Director

CONSENT TO ENTRY OF INTERIM ORDER

1. Respondent has read and understands this Interim Order for Practice Restriction and Consent to the Same and the stipulated Findings of Fact, Conclusions of Law and Order ("Interim Order"). Respondent acknowledges he has the right to consult with legal counsel regarding this matter.

2. Respondent acknowledges and agrees that this Interim Order is entered into freely and voluntarily and that no promise was made or coercion used to induce such entry.

3. By consenting to this Interim Order, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge this Interim Order in its entirety as issued, and waives any other cause of action related thereto or arising from said Interim Order.

4. The Interim Order is not effective until approved and signed by the Executive Director.

5. All admissions made by Respondent are solely for final disposition of this matter and any subsequent related administrative proceedings or civil litigation involving the Board and Respondent. Therefore, said admissions by Respondent are not intended or made for any other use, such as in the context of another state or federal government

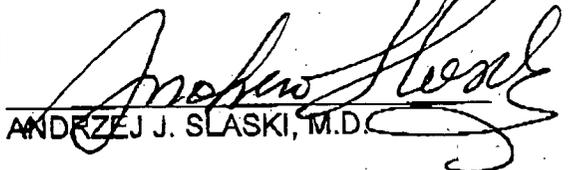
1 regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or
2 any other state or federal court.

3 6. Upon signing this Interim Order, and returning this document (or a copy
4 thereof) to the Board's Executive Director, Respondent may not revoke the consent to the
5 entry of the Interim Order. Respondent may not make any modifications to the document.
6 Any modifications to this original document are ineffective and void unless mutually
7 approved by the parties.

8 7. This Interim Order is a public record that will be publicly disseminated as a
9 formal action of the Board and will be reported to the National Practitioner's Data Bank
10 and on the Board's web site.

11 8. If any part of the Interim Order is later declared void or otherwise
12 unenforceable, the remainder of the Interim Order in its entirety shall remain in force and
13 effect.

14 9. Any violation of this Interim Order constitutes unprofessional conduct and
15 may result in disciplinary action. A.R.S. § § 32-1401(27)(r) ("[v]iolating a formal order,
16 probation, consent agreement or stipulation issued or entered into by the board or its
17 executive director under this chapter") and 32-1451.

18 
19 ANDRZEJ J. SLASKI, M.D.

DATED: 3/12/12

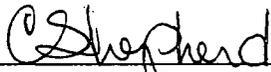
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1 EXECUTED COPY of the foregoing mailed
2 this 12th day of March, 2012 to:

3 Andrzej J. Slaski, M.D.
4 Address of Record

5 ORIGINAL of the foregoing filed
6 this 12th day of March, 2012 with:

7 Arizona Medical Board
8 9545 E. Doubletree Ranch Road
9 Scottsdale, AZ 85258

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11 _____
12 Arizona Medical Board Staff
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