CHAPTER 23 GROUNDS FOR DISCIPLINE

[Prior to 7/19/06, see 653—Chapter 12]

- **653—23.1(272C) Grounds for discipline.** The board has authority to impose discipline for any violation of Iowa Code chapter 147, 148, 148E, 252J, 272C or 272D or the rules promulgated thereunder. The grounds for discipline apply to physicians and acupuncturists. This rule is not subject to waiver pursuant to 653—Chapter 3 or any other provision of law. The board may impose any of the disciplinary sanctions set forth in 653—subrule 25.25(1), including civil penalties in an amount not to exceed \$10,000, when the board determines that the licensee is guilty of any of the following acts or offenses:
- **23.1(1)** Violating any of the grounds for the revocation or suspension of a license as listed in Iowa Code section 147.55, 148.6, 148E.8, 272C.10, or 272C.15.
- **23.1(2)** Professional incompetency. Professional incompetency includes, but is not limited to, any of the following:
 - a. Willful or repeated gross malpractice;
 - b. Willful or gross negligence;
- c. A substantial lack of knowledge or ability to discharge professional obligations within the scope of the physician's or surgeon's practice;
- d. A substantial deviation by the physician from the standards of learning or skill ordinarily possessed and applied by other physicians or surgeons in the state of Iowa acting in the same or similar circumstances:
- e. A failure by a physician or surgeon to exercise in a substantial respect that degree of care which is ordinarily exercised by the average physician or surgeon in the state of Iowa acting in the same or similar circumstances:
- f. A willful or repeated departure from or the failure to conform to the minimal standard of acceptable and prevailing practice of medicine and surgery or osteopathic medicine and surgery in the state of Iowa;
- g. Failure to meet the acceptable and prevailing standard of care when delegating or supervising medical services provided by another physician, health care practitioner, or other individual who is collaborating with or acting as an agent, associate, or employee of the physician responsible for the patient's care, whether or not injury results.
- 23.1(3) Practice harmful or detrimental to the public. Practice harmful or detrimental to the public includes, but is not limited to, the failure of a physician to possess and exercise that degree of skill, learning and care expected of a reasonable, prudent physician acting in the same or similar circumstances in this state, or when a physician is unable to practice medicine with reasonable skill and safety as a result of a mental or physical impairment or chemical abuse.
- **23.1(4)** Unprofessional conduct. Engaging in unethical or unprofessional conduct includes, but is not limited to, the committing by a licensee of an act contrary to honesty, justice or good morals, whether the same is committed in the course of the licensee's practice or otherwise, and whether committed within this state or elsewhere; or a violation of the standards and principles of medical ethics or 653—13.7(147,148,272C) or 653—13.20(147,148) as interpreted by the board.
- **23.1(5)** Sexual misconduct. Engaging in sexual misconduct includes, but is not limited to, engaging in conduct set out at 653—subrule 13.7(4) or 13.7(6) as interpreted by the board.
- **23.1(6)** Substance abuse. Substance abuse includes, but is not limited to, excessive use of alcohol, drugs, narcotics, chemicals or other substances in a manner which may impair a licensee's ability to practice the profession with reasonable skill and safety.
- **23.1(7)** Indiscriminately or promiscuously prescribing, administering or dispensing any drug for other than lawful purpose includes, but is not limited to:
 - a. Self-prescribing or self-dispensing controlled substances.
 - b. Prescribing or dispensing controlled substances to members of the licensee's immediate family.

- (1) Prescribing or dispensing controlled substances to members of the licensee's immediate family is allowable for an acute condition or on an emergency basis when the licensee conducts an examination, establishes a medical record, and maintains proper documentation.
- (2) Immediate family includes the physician's spouse or domestic partner and either of the physician's, spouse's, or domestic partner's parents, stepparents or grandparents; the physician's natural or adopted children or stepchildren and any child's spouse, domestic partner or children; the siblings of the physician or the physician's spouse or domestic partner and the sibling's spouse or domestic partner; or anyone else living with the physician.
- 23.1(8) Physical or mental impairment. Physical or mental impairment includes, but is not limited to, any physical, neurological or mental condition which may impair a physician's ability to practice the profession with reasonable skill and safety. Being adjudged mentally incompetent by a court of competent jurisdiction shall automatically suspend a license for the duration of the license unless the board orders otherwise.
- **23.1(9)** Felony criminal conviction. Being convicted of a felony in the courts of this state, another state, the United States, or any country, territory or other jurisdiction, as defined in Iowa Code section 148.6(2) "b."
- **23.1(10)** Violation of the laws or rules governing the practice of medicine or acupuncture of this state, another state, the United States, or any country, territory or other jurisdiction. Violation of the laws or rules governing the practice of medicine includes, but is not limited to, willful or repeated violation of the provisions of these rules or the provisions of Iowa Code chapter 147, 148, 148E or 272C or other state or federal laws or rules governing the practice of medicine.
- **23.1(11)** Violation of a lawful order of the board, previously entered by the board in a disciplinary or licensure hearing, or violation of the terms and provisions of a consent agreement or settlement agreement entered into between a licensee and the board.
- 23.1(12) Violation of an initial agreement or health contract entered into with the Iowa physician health program (IPHP).
- **23.1(13)** Failure to comply with an evaluation order. Failure to comply with an order of the board requiring a licensee to submit to evaluation under Iowa Code section 148.6(2) "h" or 272C.9(1).
- **23.1(14)** Knowingly making misleading, deceptive, untrue or fraudulent representations in the practice of a profession. Knowingly making misleading, deceptive, untrue or fraudulent representations in the practice of a profession includes, but is not limited to, an intentional perversion of the truth, either orally or in writing, by a physician in the practice of medicine and surgery or osteopathic medicine and surgery or by an acupuncturist.
- 23.1(15) Fraud in procuring a license. Fraud in procuring a license includes, but is not limited to, an intentional perversion of the truth in making application for a license to practice acupuncture, medicine and surgery, or osteopathic medicine and surgery in this state, and includes false representations of material fact, whether by word or by conduct, by false or misleading allegations, or by concealment of that which should have been disclosed when making application for a license in this state, or attempting to file or filing with the board any false or forged document submitted with an application for a license in this state.
- **23.1(16)** Fraud in representations as to skill or ability. Fraud in representations as to skill or ability includes, but is not limited to, a licensee's having made misleading, deceptive or untrue representations as to the acupuncturist's or physician's competency to perform professional services for which the licensee is not qualified to perform by education, training or experience.
- 23.1(17) Use of untruthful or improbable statements in advertisements. Use of untruthful or improbable statements in advertisements includes, but is not limited to, an action by a licensee in making known to the public information or intention which is false, deceptive, misleading or promoted through fraud or misrepresentation and includes statements which may consist of, but are not limited to:
 - a. Inflated or unjustified claims which lead to expectations of favorable results;
- b. Self-laudatory claims that imply that the licensee is skilled in a field or specialty of practice for which the licensee is not qualified;
 - c. Representations that are likely to cause the average person to misunderstand; or

- d. Extravagant claims or claims of extraordinary skills not recognized by the medical profession.
- 23.1(18) Obtaining any fee by fraud or misrepresentation.
- 23.1(19) Acceptance of remuneration for referral of a patient to other health professionals in violation of the law or medical ethics.
- 23.1(20) Knowingly submitting a false report of continuing education or failure to submit the required reports of continuing education.
- **23.1(21)** Knowingly aiding, assisting, procuring, or advising a person in the unlawful practice of acupuncture, medicine and surgery, or osteopathic medicine and surgery.
- **23.1(22)** Failure to report disciplinary action. Failure to report a license revocation, suspension or other disciplinary action taken against the licensee by a professional licensing authority of another state, an agency of the United States government, or any country, territory or other jurisdiction within 30 days of the final action by such licensing authority. A stay by an appellate court shall not negate this requirement; however, if such disciplinary action is overturned or reversed by a court of last resort, such report shall be expunged from the records of the board.
- 23.1(23) Failure to report voluntary agreements. Failure to report any voluntary agreement to restrict the practice of acupuncture, medicine and surgery, or osteopathic medicine and surgery entered into with this state, another state, the United States, an agency of the federal government, or any country, territory or other jurisdiction.
- **23.1(24)** Failure to notify the board within 30 days after occurrence of any settlement or adverse judgment of a malpractice claim or action.
- **23.1(25)** Failure to file the reports required by 653—22.2(272C) within 30 days concerning wrongful acts or omissions committed by another licensee.
- **23.1(26)** Failure to comply with a valid subpoena issued by the board pursuant to Iowa Code sections 17A.13 and 272C.6 and 653—subrule 24.2(6) and rule 653—25.12(17A).
- **23.1(27)** Failure to submit to a board-ordered mental, physical, clinical competency, or substance abuse evaluation or drug or alcohol screening.
- **23.1(28)** The inappropriate use of a rubber stamp to affix a signature to a prescription. A person who is unable, due to a disability, to make a written signature or mark, however, may substitute in lieu of a signature a rubber stamp which is adopted by the disabled person for all purposes requiring a signature and which is affixed by the disabled person or affixed by another person upon the request of the disabled person and in the presence of the disabled person.
- **23.1(29)** Maintaining any presigned prescription which is intended to be completed and issued at a later time.
- **23.1(30)** Failure to comply with the recommendations issued by the Centers for Disease Control and Prevention of the United States Department of Health and Human Services for preventing transmission of human immunodeficiency virus and hepatitis B virus to patients during exposure-prone invasive procedures, or with the protocols established pursuant to Iowa Code chapter 139A.
- **23.1(31)** Failure by a physician with HIV or HBV who practices in a hospital setting, and who performs exposure-prone procedures, to report the physician's HIV or HBV status to an expert review panel established by a hospital under Iowa Code section 139A.22(1) or to an expert review panel established by the department of public health under Iowa Code section 139A.22(3).
- **23.1(32)** Failure by a physician with HIV or HBV who practices outside a hospital setting, and who performs exposure-prone procedures, to report the physician's HIV or HBV status to an expert review panel established by the department of public health under Iowa Code section 139A.22(3).
- **23.1(33)** Failure by a physician subject to the reporting requirements of 23.1(31) and 23.1(32) to comply with the recommendations of an expert review panel established by the department of public health pursuant to Iowa Code section 139A.22(3), with hospital protocols established pursuant to Iowa Code section 139A.22(1), or with health care facility procedures established pursuant to Iowa Code section 139A.22(2).
- **23.1(34)** Noncompliance with a support order or with a written agreement for payment of support as evidenced by a certificate of noncompliance issued pursuant to Iowa Code chapter 252J. Disciplinary

proceedings initiated under this rule shall follow the procedures set forth in Iowa Code chapter 252J and 653—Chapter 15.

- 23.1(35) Rescinded IAB 3/11/20, effective 4/15/20.
- **23.1(36)** Improper management of medical records. Improper management of medical records includes, but is not limited to, failure to maintain timely, accurate, and complete medical records.
- **23.1(37)** Failure to transfer medical records to another physician in a timely fashion when legally requested to do so by the subject patient or by a legally designated representative of the subject patient.
- **23.1(38)** Failure to respond to or comply with a board investigation initiated pursuant to Iowa Code section 272C.3 and 653—24.2(17A,147,148,272C).
- **23.1(39)** Failure to comply with the direct billing requirements for anatomic pathology services established in Iowa Code Supplement section 147.106.
- **23.1(40)** Failure to submit an additional completed fingerprint card and applicable fee, within 30 days of a request made by board staff, when a previous fingerprint submission has been determined to be unacceptable.
- **23.1(41)** Failure to respond to the board or submit continuing education materials during a board audit, within 30 days of a request made by board staff or within the extension of time if one had been granted.
- **23.1(42)** Failure to respond to the board or submit requested mandatory training for identifying and reporting abuse materials during a board audit, within 30 days of a request made by board staff or within the extension of time if one had been granted.
- **23.1(43)** Nonpayment of state debt as evidenced by a certificate of noncompliance issued pursuant to 2008 Iowa Acts, Senate File 2428, division II, and 653—Chapter 12.
- **23.1(44)** Voluntary agreements. The board may take disciplinary action against a physician if that physician has entered into a voluntary agreement to restrict the practice of medicine in another state, district, territory, or country.
- a. The board will use the following criteria to determine if a physician has entered into a voluntary agreement within the meaning of Iowa Code section 148.12 and this rule.
- (1) The voluntary agreement was signed during or at the conclusion of a disciplinary investigation, or to prevent a matter from proceeding to a disciplinary investigation.
 - (2) The agreement includes any or all of the following:
- 1. Education or testing that is beyond the jurisdiction's usual requirement for a license or license renewal.
- 2. An assignment beyond what is required for license renewal or regular practice, e.g., adoption of a protocol, use of a chaperone, completion of specified continuing education, or completion of a writing assignment.
- 3. A prohibition or limitation on practice privileges, e.g., a restriction on prescribing or administering controlled substances.
 - 4. Compliance with an educational plan.
 - 5. A requirement that surveys or reviews of patients or patient records be conducted.
 - 6. A practice monitoring requirement.
 - 7. A special notification requirement for a change of address.
- 8. Payment that is not routinely required of all physicians in that jurisdiction, such as a civil penalty, fine, or reimbursement of any expenses.
- 9. Any other activity or requirements imposed by the board that are beyond the usual licensure requirements for obtaining, renewing, or reinstating a license in that jurisdiction.
 - b. A certified copy of the voluntary agreement shall be considered prima facie evidence.
- **23.1(45)** Performing or attempting to perform any surgical or invasive procedure on the wrong patient or at the wrong anatomical site or performing the wrong surgical procedure on a patient.
- **23.1(46)** Violation of the standards of practice for medical directors who delegate and supervise medical aesthetic services performed by nonphysician persons at a medical spa as set out at rule 653—13.8(148,272C).

- **23.1(47)** Failure to provide the board, within 14 days of a request by the board as set out at 653—paragraph 13.8(5)"*l*," written verification of the education and training of all nonphysician persons who perform medical aesthetic services at a medical spa.
- 23.1(48) Failure to file with the board a written report and a copy of the hospital disciplinary action within 30 days of any hospital disciplinary action or the licensee's voluntary action to avoid a hospital investigation or hospital disciplinary action, as required by rule 653—22.5(272C).

This rule is intended to implement Iowa Code chapters 17A, 147, 148, 272C and 272D. [ARC 8525B, IAB 2/10/10, effective 3/17/10; ARC 9088B, IAB 9/22/10, effective 10/27/10; ARC 9598B, IAB 7/13/11, effective 8/17/11; ARC 0533C, IAB 12/26/12, effective 1/30/13; ARC 4979C, IAB 3/11/20, effective 4/15/20; ARC 5600C, IAB 5/5/21, effective 6/9/21; ARC 5749C, IAB 7/14/21, effective 8/18/21]

653—23.2(272C) Student loan default or delinquency—prohibited grounds for discipline. The board shall not suspend or revoke a license issued by the board to a person who is in default or is delinquent on repayment or a service obligation under federal or state postsecondary educational loans or public or private services-conditional postsecondary tuition assistance solely on the basis of such default or delinquency.

This rule is intended to implement Iowa Code section 272C.4(10). [ARC 4979C, IAB 3/11/20, effective 4/15/20]

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[Filed 2/5/79, Notice 11/29/78—published 2/21/79, effective 3/29/79]
   [Filed without Notice 2/14/80—published 3/5/80, effective 4/9/80]
[Filed 10/10/80, Notice 8/20/80—published 10/29/80, effective 12/3/80]
  [Filed 6/14/82, Notice 4/28/82—published 7/7/82, effective 8/11/82]
  [Filed 9/9/83, Notice 8/3/83—published 9/28/83, effective 11/2/83]
  [Filed 3/9/84, Notice 1/18/84—published 3/28/84, effective 5/2/84]
[Filed 10/19/84, Notice 8/29/84—published 11/7/84, effective 12/12/84<sup>2</sup>]
    [Filed emergency 4/15/88—published 5/4/88, effective 4/15/88]
[Filed 10/28/88, Notice 6/15/88—published 11/16/88, effective 12/21/88]
  [Filed 7/21/89, Notice 5/17/89—published 8/9/89, effective 9/13/89]
  [Filed 8/2/90, Notice 5/30/90—published 8/22/90, effective 9/26/90]
   [Filed 4/1/94, Notice 2/2/94—published 4/27/94, effective 6/1/94]
[Filed 11/3/94, Notice 9/28/94—published 11/23/94, effective 12/28/94]
  [Filed 12/14/95, Notice 8/30/95—published 1/3/96, effective 2/7/96]
 [Filed 2/23/96, Notice 9/27/95—published 3/13/96, effective 4/17/96]
  [Filed 2/23/96, Notice 1/3/96—published 3/13/96, effective 4/17/96]
  [Filed 5/2/97, Notice 3/12/97—published 5/21/97, effective 6/25/97]
  [Filed 5/2/97, Notice 3/26/97—published 5/21/97, effective 6/25/97]
  [Filed 2/2/98, Notice 11/5/97—published 2/25/98, effective 4/1/98]
  [Filed 6/12/98, Notice 4/22/98—published 7/1/98, effective 8/5/98]
  [Filed 2/5/99, Notice 12/2/98—published 2/24/99, effective 3/31/99]
  [Filed 4/30/99, Notice 3/24/99—published 5/19/99, effective 7/1/99]
 [Filed 11/10/99, Notice 9/22/99—published 12/1/99, effective 1/5/00]
[Filed 12/1/00, Notice 10/18/00—published 12/27/00, effective 1/31/01]
   [Filed 5/11/01, Notice 4/4/01—published 5/30/01, effective 7/4/01]
  [Filed 2/14/02, Notice 1/9/02—published 3/6/02, effective 4/10/02]
  [Filed 6/6/02, Notice 3/6/02—published 6/26/02, effective 7/31/02]
  [Filed 5/20/04, Notice 4/14/04—published 6/9/04, effective 7/14/04]
   [Filed 7/16/04, Notice 6/9/04—published 8/4/04, effective 9/8/04]
 [Filed 7/29/05, Notice 6/22/05—published 8/17/05, effective 9/21/05]
 [Filed 6/27/06, Notice 2/15/06—published 7/19/06, effective 8/23/06]
 [Filed 12/14/06, Notice 11/8/06—published 1/17/07, effective 2/21/07]
   [Filed 2/8/07, Notice 1/3/07—published 2/28/07, effective 4/4/07]
 [Filed 7/24/08, Notice 6/18/08—published 8/13/08, effective 9/17/08]
 [Filed 9/18/08, Notice 8/13/08—published 10/8/08, effective 11/12/08]
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[Filed ARC 8525B (Notice ARC 8198B, IAB 10/7/09), IAB 2/10/10, effective 3/17/10] [Filed ARC 9088B (Notice ARC 8925B, IAB 6/30/10), IAB 9/22/10, effective 10/27/10] [Filed ARC 9598B (Notice ARC 9415B, IAB 3/9/11), IAB 7/13/11, effective 8/17/11] [Filed ARC 0533C (Notice ARC 0177C, IAB 6/27/12), IAB 12/26/12, effective 1/30/13] [Filed ARC 4979C (Notice ARC 4806C, IAB 12/18/19), IAB 3/11/20, effective 4/15/20] [Filed ARC 5600C (Notice ARC 5370C, IAB 12/30/20), IAB 5/5/21, effective 6/9/21] [Filed ARC 5749C (Notice ARC 5473C, IAB 2/24/21), IAB 7/14/21, effective 8/18/21]

Effective date of subrule 135.204(10) [renumbered 12/4(10), IAC 5/4/88] delayed by the Administrative Rules Review Committee 70 days from November 2, 1983.

² Effective date of rules 135.206, 135.207 and 135.208 [renumbered 12.6, 12.7 and 12.8, IAC 5/4/88] delayed by the Administrative Rules Review Committee 70 days from December 12, 1984. Delay lifted by committee on January 9, 1985.