

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation)
Against:)
)
)
Linda Michelle Petrovich, M.D.)
)
Physician's and Surgeon's)
Certificate No. C 52590)
)
Respondent)
_____)

Case No. 800-2019-051611


DECISION

The attached Proposed Decision is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on February 28, 2020.

IT IS SO ORDERED January 31, 2020.

MEDICAL BOARD OF CALIFORNIA

By: 

**Kristina D. Lawson, J.D., Chair
Panel B**

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:

LINDA MICHELLE PETROVICH, M.D., Respondent.

Physician's and Surgeon's Certificate No. C 52590

Case No. 800-2019-051611

OAH No. 2019060680

PROPOSED DECISION

Administrative Law Judge David Benjamin, State of California, Office of Administrative Hearings, heard this matter on October 3, 2019, in Oakland, California.

Deputy Attorney General Caitlin Ross represented Kimberly Kirchmeyer, Executive Director of the Medical Board of California, Department of Consumer Affairs.

Derek F. O'Reilly-Jones, Attorney at Law, Bonne, Bridges, Mueller, O'Keefe & Nichols, represented respondent Linda Michelle Petrovich, M.D., who was present.

The record closed and the matter was submitted on October 3, 2019.

FACTUAL FINDINGS

1. On November 15, 2006, the Medical Board of California (Board) issued Physician's and Surgeon's Certificate No. C 52590 to respondent Linda Michelle Petrovich, M.D. The certificate is renewed and current with an expiration date of August 31, 2020. Respondent's specialty is diagnostic radiology.

2. On April 23, 2019, complainant Kimberly Kirchmeyer, acting in her official capacity as Executive Director of the Board, issued an accusation against respondent. The accusation alleges that respondent's California certificate is subject to discipline because of action taken by the Board of Medical Licensure of the Commonwealth of Kentucky (Kentucky Board) against respondent's license to practice medicine in that state. Respondent filed a notice of defense.

Action by the Kentucky Board

3. At all times relevant to this matter, respondent was licensed by the Kentucky Board to practice medicine in the Commonwealth of Kentucky.

4. On December 7, 2018, respondent entered into an Agreed Order with the Kentucky Board.

In the Agreed Order, respondent stipulated that, on March 5, 2018, she had settled a medical malpractice case in the amount of \$475,000. The settlement was for respondent's "alleged failure to recognize and report epidural abscesses on an MRI resulting in partial paralysis." Respondent further stipulated that she had provided two compact discs of radiology films and medical records, and a written personal narrative, and that a Kentucky Board consultant had "reviewed the materials in this case and

found that [respondent] did depart from acceptable and prevailing medical practice by misdiagnosing/failing to diagnose findings on the MRI of the c-spine and brain."

In the Agreed Order, respondent stipulated that she had "engaged in conduct which violates the provisions of KRS 311.595(9), as illustrated by KRS 311.597(4)," and that there were therefore legal grounds to enter into the Agreed Order. Section 311.595(9) of the Kentucky Revised Statutes states that the Kentucky Board may take disciplinary action against a licensee who has "[e]ngaged in dishonorable, unethical, or unprofessional conduct of a character likely to deceive, defraud, or harm the public or any member thereof." Section 311.597(4) defines section 311.595(9) to include "[c]onduct which is calculated or has the effect of bringing the medical profession into disrepute, including but not limited to any departure from, or failure to conform to the standards of acceptable and prevailing medical practice within the Commonwealth of Kentucky, and any departure from, or failure to conform to the principles of medical ethics of the American Medical Association or the code of ethics of the American Osteopathic Association. For the purposes of this subsection, actual injury to a patient need not be established."

Based on those stipulated findings of fact and legal conclusions, respondent entered into the Agreed Order with the Kentucky Board. Under the terms of the Agreed Order, respondent was "RESTRICTED/LIMITED FOR AN INDEFINITE PERIOD OF TIME" during which she was prohibited from interpreting any neuroradiology MRI's; required to complete 30 hours of continuing medical education in neuroradiology; and required to reimburse the Kentucky Board for its costs of investigation in the amount of \$350.

The Agreed Order provided that, upon completing the required continuing education and paying the costs of investigation, the Kentucky Board would terminate

the Agreed Order. Respondent completed the continuing education requirement and paid the Kentucky Board's costs. The Kentucky Board terminated the Agreed Order on April 4, 2019.

Respondent's evidence

5. Respondent holds a bachelor of science degree in biochemical engineering from Columbia University; a master of science degree in biomedical engineering from Tulane University; and a doctor of medicine degree from Tulane University. She did an internship in internal medicine at Mercy Hospital in Pittsburgh, Pennsylvania, and a radiology residency at Robert Wood Johnson Hospital in New Brunswick, New Jersey, where she was chief resident from July 2001 to June 2002. From July 2002 to June 2004, respondent did a Body MRI Fellowship at the University of Pennsylvania. She is board certified by the American Board of Radiology.

6. Respondent works for Virtual Radiologic Corp. (vRad) as a teleradiologist. She has worked for vRad and its predecessor organizations since 2006. From her home in Florida respondent reviews studies sent to her electronically from all over the United States; she is licensed to practice in 33 states. Respondent's duty hours are 9:00 p.m. to 7:00 a.m. vRad, whose corporate headquarters is in Minnesota, employs hundreds of radiologists like respondent to provide services to hospitals who do not have radiologists on staff, or who do not have radiologists immediately available during the nighttime hours. Respondent reads about 700 cases per month, and 10,000 cases per year.

7. Respondent remembers the studies that were the subject of the Kentucky Board action, and she has looked at the MRI's since then. She received four studies and four reports of the brain and cervical spine in the middle of her shift. She was not

overly tired. She spent about an hour on the studies. The area of concern was at C1-2. There were two areas of inflammation on the cervical spine, and respondent described one on her report. The second area had an abnormal signal. She feels now that she could have diagnosed it better. Respondent did not see an abscess at the time, and did not see an abscess even when she reviewed the MRI's again after the fact. However, in respondent's words, she "missed one area." If she had seen the second area, she would have reported an abnormal area of signal, worrisome for an infectious process at C1-2.

8. The Kentucky Board prohibited respondent from interpreting any neuroradiology MRI's until she completed 30 hours of continuing medical education in neuroradiology, a requirement she fulfilled in three months. In practice, respondent rarely sees neurology MRI's of spine during the nighttime hours; typically she sees trauma cases, which fall squarely within her training at a Level 1 trauma center. Respondent has decided that in the unlikely event she gets an MRI of the cervical spine, she will refer it to someone in the organization who did a radiology fellowship on the cervical spine. As an organization, vRad would support such a referral, as its 400 radiologists are organized around their specialties and additional training.

9. Respondent self-reported the settlement that was the subject of the Kentucky Board action to every state that requires such a report, including California. Two states, Arizona and Michigan, issued a public reprimand. Investigations are still pending in Florida, Texas, and Idaho. The states of Washington, Illinois, West Virginia, Georgia, Alabama, Virginia, Massachusetts, Louisiana, North Carolina and Pennsylvania investigated the matter, chose not to impose discipline against respondent's medical license, and closed their files.

10. In the 13 years she has worked as a teleradiologist, respondent has reviewed tens of thousands of diagnostic studies. Her readings in this case are the only ones that have ever been criticized. Respondent's work has never been the subject of any other lawsuits.

11. Edward C. Callaway, M.D., has been a Medical Director at vRad for the past two years, and worked with respondent as a colleague at vRad for 10 years before that. In a letter dated September 22, 2019, Dr. Callaway writes that respondent has consistently demonstrated exemplary performance. He would not hesitate to have respondent read his own studies.

Raymond Montecalvo, M.D., is the Senior Medical Director at vRad. He has been a practicing diagnostic radiologist for 30 years and has worked with respondent at vRad since 2006. He has gone to respondent for consultation on challenging cases. He has also reviewed quality assurance data regarding respondent for many years and has found that she always exceeded the company's benchmarks for quality and professionalism.

LEGAL CONCLUSIONS

1. The standard of proof applied to this matter is clear and convincing evidence to a reasonable certainty.
2. Business and Professions Code section 141, subdivision (a), applies generally to licenses issued by agencies that are part of the Department of Consumer Affairs, such as the Board. It provides, in relevant part, as follows:

For any licensee holding a license issued by a board under the jurisdiction of the department, a disciplinary action by another state . . . for any act substantially related to the practice regulated by the California license, may be a ground for disciplinary action by the respective state licensing board.

The disciplinary action of the Kentucky Board is based on acts substantially related to the practice of medicine. Cause exists under section 141 to take disciplinary action against respondent's certificate, by reason of the matters set forth in Finding 4.

3. Business and Professions Code section 2305, which applies specifically to licenses issued by the Board, provides, in relevant part, as follows:

The revocation, suspension, or other discipline, restriction, or limitation imposed by another state upon a license or certificate to practice medicine issued by that state . . . that would have been grounds for discipline in California of a licensee under this chapter, shall constitute grounds for disciplinary action for unprofessional conduct against the licensee in this state.

Complainant argues that the act for which respondent was disciplined by the Kentucky Board would have been subject to discipline in California as "unprofessional conduct" under Business and Professions Code section 2234.

Section 2234 prohibits "unprofessional conduct," and provides that unprofessional conduct "includes, but is not limited to" gross negligence (subd. (b)), repeated negligent acts (subd. (c)), and incompetence (subd. (d)). The term "gross

negligence" means "the want of even scant care or an extreme departure from the ordinary standard of conduct." (*Kearl v. Board of Medical Quality Assurance* (1986) 189 Cal.App.3d 1040, 1052.) "Repeated negligent acts" means two or more negligent acts. (Bus. & Prof. Code, § 2234, subd. (c).) "Incompetence" means "an absence of qualification, ability or fitness to perform a prescribed duty or function." (*Id.* at p. 1054.) Unprofessional conduct is not limited to the enumerated types of conduct identified in subdivisions (a) through (h) of section 2234; there may be types of misconduct that fall within the general, catch-all language that unprofessional conduct "includes, but is not limited to" the conduct described in the subdivisions of section 2234. (*Thorburn v. Department of Corrections* (1998) 66 Cal.App.4th 1284, 1288-1289.) However, the courts have held that "unprofessional conduct" should not be given an overly broad connotation: it must be conduct which indicates an unfitness to practice medicine, such as conduct that breaches the rules or ethical code of the profession. (*Id.* at p. 1288-1292; *Shea v. Board of Medical Examiners* (1978) 81 Cal.App.3d 564, 574-575.)

It was not established that respondent was grossly negligent or incompetent in her reading of the studies for which she was disciplined by the Kentucky Board, or that she committed repeated acts of negligence. While the Kentucky Board notes an evaluator's conclusion that respondent was negligent in her reading of the MRI's ("failure to conform to the standards of acceptable and prevailing medical practice within the Commonwealth of Kentucky"), the Kentucky Board did not find that respondent was negligent and respondent did not admit that she was negligent; moreover, commission of a single act of negligence is not a ground for discipline in California. Complainant argues that respondent's conduct would have been subject to discipline in California as general unprofessional conduct, but that argument is not

persuasive. Respondent's conduct does not demonstrate unfitness to practice, or the breach of any rules or ethical code of the profession.

Cause for discipline under Business and Professions Code section 2305 was not established.

4. Cause for discipline having been established under Business and Professions Code section 141, the issue is the level of discipline to impose. The purpose of license discipline is to protect the public and to rehabilitate the physician, not to punish her. The burden of proving rehabilitation is on the respondent.

The Board's disciplinary guidelines (12th Ed. 2016) have been considered. The guidelines do not address this case precisely, because the guidelines are based on conduct proscribed by California law, and the evidence did not establish that respondent's conduct would have been grounds for discipline in California. The minimum recommended discipline for general unprofessional conduct, incompetence, gross negligence or repeated acts of negligence – none of which was established in this case – is stayed revocation and five years' probation. In cases involving repeated negligent acts with a single patient, the guidelines note that a public reprimand may be considered.

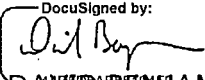
The guidelines do not support a period of probation. It was not established that respondent's misconduct rose to the level of general unprofessional conduct, incompetence, gross negligence or repeated negligent acts, conduct for which a stayed revocation is the minimum recommended discipline. Respondent's misconduct involved a single patient. As a teleradiologist, respondent has read tens of thousands of MRI studies, before and after the studies at issue before the Kentucky Board, and her work has never been criticized in any other case. Respondent promptly completed

the continuing education hours demanded by the Kentucky Board, and is no longer subject to any practice restrictions imposed by that board. Respondent has taken this matter seriously. She candidly acknowledges that, if she saw the same films today, she would describe them differently. Although she is rarely called upon to review such cervical/brain MRI's, she has decided that if she is asked to do so, she will refer them to specialists within vRad. It is concluded that the public interest will be adequately protected by the issuance of a public reprimand.

ORDER

Physician's and Surgeon's Certificate No. C 52590 issued to respondent Linda Michelle Petrovich, M.D., is publicly reprimanded.

DATE: October 31, 2019

DocuSigned by:

DAVID BENJAMIN

Administrative Law Judge

Office of Administrative Hearings

1 XAVIER BECERRA
Attorney General of California
2 MARY CAIN-SIMON
Supervising Deputy Attorney General
3 JOSHUA M. TEMPLET
Deputy Attorney General
4 State Bar No. 267098
455 Golden Gate Avenue, Suite 11000
5 San Francisco, CA 94102-7004
Telephone: (415) 510-3533
6 Facsimile: (415) 703-5480
E-mail: Joshua.Templet@doj.ca.gov
7 *Attorneys for Complainant*

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO APRIL 23 2019
BY: [Signature] ANALYST

8
9 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12
13 In the Matter of the Accusation Against:

Case No. 800-2019-051611

14 **Linda Michelle Petrovich, M.D.**
15 **Virtual Radiologic**
16 **11995 Singletree Ln. Ste. 500**
17 **Eden Prairie, MN 55344**

A C C U S A T I O N

18 **Physician's and Surgeon's Certificate**
19 **No. C 52590,**

Respondent.

20 Complainant alleges:

21 **PARTIES**

22 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
23 capacity as the Executive Director of the Medical Board of California, Department of Consumer
24 Affairs (Board).

25 2. On or about November 15, 2006, the Board issued Physician's and Surgeon's
26 Certificate Number C 52590 to Linda Michelle Petrovich, M.D. (Respondent). The certificate was
27 in full force and effect at all times relevant to the charges brought herein and will expire on
28 August 31, 2020, unless renewed.

JURISDICTION

1
2 3. This Accusation is brought before the Board, under the authority of the following
3 laws. All section references are to the Business and Professions Code unless otherwise indicated.

4 4. Section 2004 of the Code provides that the Board shall have the responsibility for the
5 enforcement of the disciplinary and criminal provisions of the Medical Practice Act.

6 5. Section 2227 of the Code authorizes the Board to take action against a licensee who
7 has been found guilty under the Medical Practice Act by revoking his or her license, suspending
8 the license for a period not to exceed one year, placing the license on probation and requiring
9 payment of costs of probation monitoring, or taking such other action as the Board deems proper.

10 6. Section 141 of the Code states:

11 (a) For any licensee holding a license issued by a board under the jurisdiction of the
12 department, a disciplinary action taken by another state, by any agency of the federal
13 government, or by another country for any act substantially related to the practice
14 regulated by the California license, may be a ground for disciplinary action by the
15 respective state licensing board. A certified copy of the record of the disciplinary
16 action taken against the licensee by another state, an agency of the federal
17 government, or another country shall be conclusive evidence of the events related
18 therein.

19 (b) Nothing in this section shall preclude a board from applying a specific statutory
20 provision in the licensing act administered by that board that provides for discipline
21 based upon a disciplinary action taken against the licensee by another state, an agency
22 of the federal government, or another country.

23 7. Section 2305 of the Code states:

24 The revocation, suspension, or other discipline, restriction, or limitation imposed by
25 another state upon a license or certificate to practice medicine issued by that state, or
26 the revocation, suspension, or restriction of the authority to practice medicine by any
27 agency of the federal government, that would have been grounds for discipline in
28 California of a licensee under this chapter, shall constitute grounds for disciplinary
 action for unprofessional conduct against the licensee in this state.

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1 **KENTUCKY STATUTES IN UNDERLYING OUT-OF-STATE**

2 **DISCIPLINARY MATTER**

3 8. Kentucky Revised Statutes, section 311.595, stated as follows, on December 7, 2018:¹

4 If the power has not been transferred by statute to some other board, commission, or
5 agency of this state, the board may deny an application or reregistration for a license;
6 place a licensee on probation for a period not to exceed five (5) years; suspend a
7 license for a period not to exceed five (5) years; limit or restrict a license for an
 indefinite period; or revoke any license heretofore or hereafter issued by the board,
 upon proof that the licensee has:

8 ...

9 (9) Engaged in dishonorable, unethical, or unprofessional conduct of a character
 likely to deceive, defraud, or harm the public or any member thereof;

10 ...

11 9. Kentucky Revised Statutes, section 311.597 stated as follows, on December 7, 2018

12 As used in KRS 311.595(9), “dishonorable, unethical, or unprofessional conduct of a
13 character likely to deceive, defraud, or harm the public or any member thereof” shall
 include but not be limited to the following acts by a licensee:

14 ...

15 (4) Conduct which is calculated or has the effect of bringing the medical profession
16 into disrepute, including but not limited to any departure from, or failure to conform
17 to the standards of acceptable and prevailing medical practice within the
 Commonwealth of Kentucky, and any departure from, or failure to conform to the
 principles of medical ethics of the American Medical Association or the code of
 ethics of the American Osteopathic Association. For the purposes of this subsection,
18 actual injury to a patient need not be established.

19 ...

20 **CAUSE FOR DISCIPLINE**

21 **(Discipline, Restriction, or Limitation Imposed by another State)**

22 10. Respondent practices diagnostic radiology. On or about March 5, 2018, Respondent
23 settled a medical malpractice lawsuit for \$475,000. The lawsuit alleged that Respondent failed to
24 recognize and report epidural abscesses shown on a patient’s magnetic resonance imaging (MRI)
25 scan, resulting in the patient’s partial paralysis.

26 ///

27 _____
 ¹ The Board of Medical Licensure of the Commonwealth of Kentucky and Respondent
28 entered into an Agreed Order concerning Respondent’s violation of two sections of the Kentucky
 Revised Statutes. The two sections are included here for reference, in the versions in effect on the
 date of the Agreed Order, December 7, 2018.

1 11. A consultant for the Board of Medical Licensure of the Commonwealth of Kentucky
2 (“Kentucky Board”) investigated the allegations and determined that Respondent “did depart
3 from acceptable and prevailing medical practice by misdiagnosis/failing to diagnose findings on
4 the MRI of the c-spine and brain.”

5 12. On December 7, 2018, the Kentucky Board and Respondent entered into an Agreed
6 Order based on stipulations of fact and stipulated conclusions of law. The Agreed Order is
7 attached as **Exhibit A** and incorporated herein. The Agreed Order concluded as follows:

8 Based upon the Stipulations of Fact, the licensee has engaged in conduct which
9 violates the provisions of KRS 311.595(9), as illustrated by KRS 311.597(4).
10 Accordingly, there are legal grounds for the parties to enter into this Agreed
Order.

11 13. Based on the stipulations of fact and stipulated conclusions of law, the Agreed Order
12 restricted and limited Respondent’s practice of medicine for an indefinite period of time. Among
13 other things, the Agreed Order prohibited Respondent from interpreting any neuroradiology MRI
14 scan and required Respondent to complete 30 hours of continuing medical education in
15 neuroradiology.

16 14. Respondent’s conduct and the action of the Kentucky Board as set forth above are
17 substantially related to the practice of medicine and constitute unprofessional conduct within the
18 meaning of Code section 2305 and conduct subject to discipline within the meaning of Code
19 section 141(a).

20 **PRAYER**

21 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
22 and that following the hearing, the Board issue a decision:

23 1. Revoking or suspending Physician's and Surgeon's Certificate Number C 52590,
24 issued to Respondent;

25 2. Revoking, suspending or denying approval of Respondent’s authority to supervise
26 physician assistants and advanced practice nurses;


27 ///

28 ///

1 3. Ordering Respondent, if placed on probation, to pay the Board the costs of probation
2 monitoring; and

3 4. Taking such other and further action as deemed necessary and proper.

4
5 DATED:
6 April 23, 2019


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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EXHIBIT A

FILED OF RECORD

DEC 10 2018

COMMONWEALTH OF KENTUCKY
BOARD OF MEDICAL LICENSURE
CASE NO. 1892

K.B.M.L.

IN RE: THE LICENSE TO PRACTICE MEDICINE IN THE COMMONWEALTH OF KENTUCKY HELD BY LINDA M. PETROVICH, M.D., LICENSE NO. 38697, 11995 SINGLETREE LANE, SUITE 500, EDEN PRAIRIE, MINNESOTA 55344

AGREED ORDER

Come now the Kentucky Board of Medical Licensure (hereafter "the Board"), acting by and through its Inquiry Panel B, and LINDA M. PETROVICH, M.D., ("the licensee"), and, based upon their mutual desire to fully and finally resolve this pending grievance without an evidentiary hearing, hereby ENTER INTO the following AGREED ORDER:

STIPULATIONS OF FACT

The parties stipulate the following facts, which serve as the factual bases for this Agreed Order:

1. At all relevant times, Linda M. Petrovich, M.D. was licensed by the Board to practice medicine within the Commonwealth of Kentucky.
2. The licensee's medical specialty is Diagnostic Radiology.
3. A National Practitioners Data Bank report dated April 5, 2018 indicated that the licensee had settled a medical malpractice case in the amount of \$475,000 on March 5, 2018. The malpractice settlement was for the licensee's alleged failure to recognize and report epidural abscess on an MRI resulting in partial paralysis.
4. The licensee provided two (2) CDs of radiology films and medical records, as well as a written personal narrative.

5. A Board consultant reviewed the materials in this case and found that the licensee did depart from acceptable and prevailing medical practice by misdiagnosing/ failing to diagnose findings on the MRI of the c-spine and brain.

STIPULATED CONCLUSIONS OF LAW

The parties stipulate the following Conclusions of Law, which serve as the legal bases for this Agreed Order:

1. The licensee's medical license is subject to regulation and discipline by the Board.
2. Based upon the Stipulations of Fact, the licensee has engaged in conduct which violates the provisions of KRS 311.595(9), as illustrated by KRS 311.597(4). Accordingly, there are legal grounds for the parties to enter into this Agreed Order.
3. Pursuant to KRS 311.591(6) and 201 KAR 9:082, the parties may fully and finally resolve this pending grievance without an evidentiary hearing by entering into an informal resolution such as this Agreed Order.

AGREED ORDER

Based upon the foregoing Stipulations of Fact and Stipulated Conclusions of Law, and, based upon their mutual desire to fully and finally resolve this pending grievance without an evidentiary hearing, the parties hereby ENTER INTO the following **AGREED ORDER:**

1. The license to practice medicine within the Commonwealth of Kentucky held by LINDA M PETROVICH, M.D., is RESTRICTED/LIMITED FOR AN

INDEFINITE PERIOD OF TIME, effective immediately upon the filing of this Order.

2. During the effective period of this Agreed Order, the licensee's medical license SHALL BE SUBJECT TO THE FOLLOWING TERMS AND CONDITIONS:

- a. The licensee SHALL NOT interpret any neuroradiology MRI;
- b. Within six (6) months of the filing of this Agreed Order, the licensee SHALL complete and submit proof of completion of thirty (30) hours of Continuing Medical Education ("CME") in neuroradiology;
- c. Within six (6) months from entry of this Agreed Order, the licensee SHALL reimburse the costs of the investigation in the amount of \$350.00; and
- d. The licensee SHALL NOT violate any provision of KRS 311.595 and/or 311.597.

3. Upon proof of the licensee's successful satisfaction of the terms and conditions set forth in Paragraphs 2(b) and 2(c) above, the Board shall terminate this Agreed Order.


4. The licensee expressly agrees that if she should violate any term or condition of the Agreed Order, the licensee's practice will constitute an immediate danger to the public health, safety, or welfare, as provided in KRS 311.592 and 13B.125. The parties further agree that if the Board should receive information that she has violated any term or condition of this Agreed Order, the Panel Chair is authorized by law to enter an Emergency Order of Suspension or Restriction immediately upon a finding of probable cause that a violation has occurred, after an *ex parte* presentation of the relevant facts by the Board's General Counsel or Assistant General Counsel. If the Panel Chair should issue such an Emergency Order, the parties agree and stipulate that a violation of any term or condition of this Agreed

Order would render the licensee's practice an immediate danger to the health, welfare and safety of patients and the general public, pursuant to KRS 311.592 and 13B.125; accordingly, the only relevant question for any emergency hearing conducted pursuant to KRS 13B.125 would be whether the licensee violated a term or condition of this Agreed Order.

5. The licensee understands and agrees that any violation of the terms of this Agreed Order would provide a legal basis for additional disciplinary action, including revocation, pursuant to KRS 311.595(13).

SO AGREED on this 7TH day of DECEMBER, 2018.


FOR THE LICENSEE:


LINDA M. PETROVICH, M.D.


COUNSEL FOR THE LICENSEE
(IF APPLICABLE)

FOR THE BOARD:


SANDRA R. SHUFFETT, M.D.
CHAIR, INQUIRY PANEL B


SARA FARMER
Assistant General Counsel
Kentucky Board of Medical Licensure
310 Whittington Parkway, Suite 1B
Louisville, Kentucky 40222
(502) 429-7130