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

In the Matter of the First Amended Accusation Against: Shepherd Green Pryor, V., M.D. Physician's and Surgeon's Certificate No. A96325 Respondent.	MBC File # 800-2018-048113

ORDER CORRECTING NUNC PRO TUNC
CLERICAL ERROR IN "RESPONDENT'S NAME" PORTION OF DECISION

On its own motion, the Medical Board of California (hereafter "Board") finds that there is a clerical error in the "Respondent's Name" portion of the Decision in the above-entitled matter and that such clerical error should be corrected so that Respondent's name will conform to the Board's issued license.

IT IS HEREBY ORDERED that Respondent's name contained on the Decision Order Page in the above-entitled matter be and hereby is amended and corrected nunc pro tunc as of the date of entry of the Decision to read as "Shepherd Green Pryor, V., M.D."

May 7, 2020

Kristina Lawson

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 First Amended Accusation Against:	)	
Shepherd Green Pryor, M.D.	)	Case No. 800-2018-048113
Physician's and Surgeon's Certificate No. A96325	)	
Respondent	)	

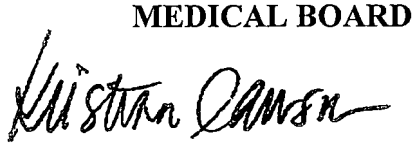
DECISION

The attached Stipulated Settlement and Disciplinary Order 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 May 6, 2020.

IT IS SO ORDERED: April 6, 2020.

MEDICAL BOARD OF CALIFORNIA



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

XAVIER BECERRA
Attorney General of California
MARY CAIN-SIMON
Supervising Deputy Attorney General
ALICE W. WONG
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State Bar No. 160141
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Attorneys for Complainant

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

In the Matter of the First Amended Accusation Against: **SHEPHERD GREEN PRYOR, M.D.** **9097 E. Desert Cove Ave., Suite 250** **Scottsdale, AZ 85260-6279** **Physician's and Surgeon's Certificate No. A 96325** Respondent.	Case No. 800-2018-048113 OAH No. 2019081180 **STIPULATED SETTLEMENT AND DISCIPLINARY ORDER**

IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-entitled proceedings that the following matters are true:

PARTIES

1. Christine J. Lally (Complainant) is the Interim Executive Director of the Medical Board of California (Board). She brought this action solely in her official capacity and is represented in this matter by Xavier Becerra, Attorney General of the State of California, by Alice W. Wong, Deputy Attorney General.

2. Respondent Shepherd Green Pryor, M.D. (Respondent) is represented in this proceeding by attorney Kevin D. Cauley, Esq., whose address is 624 South Grand Avenue, 22nd Floor, Los Angeles, CA 90017-3323.

3. On or about July 1, 2006, the Board issued Physician's and Surgeon's Certificate No. A 96325 to Shepherd Green Pryor, M.D. (Respondent). The Physician's and Surgeon's Certificate expired on July 31, 2018, and has been renewed. It will expire on July 31, 2020, unless renewed.

JURISDICTION

First Amended Accusation No. 800-2018-048113 was filed before the Board, and is currently pending against Respondent. The First Amended Accusation and all other statutorily required documents were properly served on Respondent on December 24, 2019. Respondent timely filed his Notice of Defense contesting the Accusation.

4. A copy of the First Amended Accusation No. 800-2018-048113 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in First Amended Accusation No. 800-2018-048113. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

6. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the First Amended Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

8. Respondent understands and agrees that the charges and allegations in First Amended Accusation No. 800-2018-048113, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.

9. For the purpose of resolving the First Amended Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual basis for the charges in the First Amended Accusation, and that Respondent hereby gives up his right to contest those charges.

10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

CONTINGENCY

11. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

12. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

13. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 96325 issued to Respondent SHEPHERD GREEN PRYOR, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for four (4) years on the following terms and conditions.

1. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide illness or condition.

Within 15 calendar days of receiving any lawfully prescribed medications, Respondent shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone number; medication name, strength, and quantity; and issuing pharmacy name, address, and telephone number.

2. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from the use of products or beverages containing alcohol.

3. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism program, that meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1. Respondent shall participate in and successfully complete that program. Respondent shall provide any information and documents that the program may deem pertinent. Respondent shall successfully complete the classroom component of the program not later than six (6) months after Respondent's initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one (1) year after attending the

classroom component. The professionalism program shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

A professionalism program taken after the acts that gave rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the program would have been approved by the Board or its designee had the program been taken after the effective date of this Decision.

Respondent shall submit a certification of successful completion to the Board or its designee not later than 15 calendar days after successfully completing the program or not later than 15 calendar days after the effective date of the Decision, whichever is later.

4. PSYCHOTHERAPY. Within 60 calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval the name and qualifications of a California-licensed board certified psychiatrist, or a licensed psychologist who has a doctoral degree in psychology and at least five years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall undergo and continue psychotherapy treatment, including any modifications to the frequency of psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

The psychotherapist shall consider any information provided by the Board or its designee and any other information the psychotherapist deems relevant and shall furnish a written evaluation report to the Board or its designee. Respondent shall cooperate in providing the psychotherapist with any information and documents that the psychotherapist may deem pertinent.

Respondent shall have the treating psychotherapist submit quarterly status reports to the Board or its designee. The Board or its designee may require Respondent to undergo psychiatric evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of probation, Respondent is found to be mentally unfit to resume the practice of medicine without restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the period of probation shall be extended until the Board determines that Respondent is mentally fit

to resume the practice of medicine without restrictions.

Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

5. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7) days of the effective date of this Decision, Respondent shall provide to the Board the names, physical addresses, mailing addresses, and telephone numbers of any and all employers and supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's worksite monitor, and Respondent's employers and supervisors to communicate regarding Respondent's work status, performance, and monitoring.

For purposes of this section, "supervisors" shall include the Chief of Staff and Health or Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff privileges.

6. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to biological fluid testing, at Respondent's expense, upon request of the Board or its designee. "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall make daily contact with the Board or its designee to determine whether biological fluid testing is required. Respondent shall be tested on the date of the notification as directed by the Board or its designee. The Board may order a Respondent to undergo a biological fluid test on any day, at any time, including weekends and holidays. Except when testing on a specific date as ordered by the Board or its designee, the scheduling of biological fluid testing shall be done on a random basis. The cost of biological fluid testing shall be borne by the Respondent.

During the first year of probation, Respondent shall be subject to 52 to 104 random tests. During the second year of probation and for the duration of the probationary term, up to five (5) years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no positive biological fluid tests in the previous five (5) consecutive years of probation, may testing be reduced to one (1) time per month. Nothing precludes the Board from increasing the number of random tests to the first-year level of frequency for any reason.

Prior to practicing medicine, Respondent shall contract with a laboratory or service, approved in advance by the Board or its designee, that will conduct random, unannounced, observed, biological fluid testing and meets all of the following standards:

(a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry Association or have completed the training required to serve as a collector for the United States Department of Transportation.

(b) Its specimen collectors conform to the current United States Department of Transportation Specimen Collection Guidelines.

(c) Its testing locations comply with the Urine Specimen Collection Guidelines published by the United States Department of Transportation without regard to the type of test administered.

(d) Its specimen collectors observe the collection of testing specimens.

(e) Its laboratories are certified and accredited by the United States Department of Health and Human Services.

(f) Its testing locations shall submit a specimen to a laboratory within one (1) business day of receipt and all specimens collected shall be handled pursuant to chain of custody procedures. The laboratory shall process and analyze the specimens and provide legally defensible test results to the Board within seven (7) business days of receipt of the specimen. The Board will be notified of non-negative results within one (1) business day and will be notified of negative test results within seven (7) business days.

(g) Its testing locations possess all the materials, equipment, and technical expertise necessary in order to test Respondent on any day of the week.

(h) Its testing locations are able to scientifically test for urine, blood, and hair specimens for the detection of alcohol and illegal and controlled substances.

(i) It maintains testing sites located throughout California.

(j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line computer database that allows the Respondent to check in daily for testing.

(k) It maintains a secure, HIPAA-compliant website or computer system that allows staff

access to drug test results and compliance reporting information that is available 24 hours a day.

(l) It employs or contracts with toxicologists that are licensed physicians and have knowledge of substance abuse disorders and the appropriate medical training to interpret and evaluate laboratory biological fluid test results, medical histories, and any other information relevant to biomedical information.

(m) It will not consider a toxicology screen to be negative if a positive result is obtained while practicing, even if the Respondent holds a valid prescription for the substance.

Prior to changing testing locations for any reason, including during vacation or other travel, alternative testing locations must be approved by the Board and meet the requirements above.

The contract shall require that the laboratory directly notify the Board or its designee of non-negative results within one (1) business day and negative test results within seven (7) business days of the results becoming available. Respondent shall maintain this laboratory or service contract during the period of probation.

A certified copy of any laboratory test result may be received in evidence in any proceedings between the Board and Respondent.

If a biological fluid test result indicates Respondent has used, consumed, ingested, or administered to himself or herself a prohibited substance, the Board shall order Respondent to cease practice and instruct Respondent to leave any place of work where Respondent is practicing medicine or providing medical services. The Board shall immediately notify all of Respondent's employers, supervisors and work monitors, if any, that Respondent may not practice medicine or provide medical services while the cease-practice order is in effect.

A biological fluid test will not be considered negative if a positive result is obtained while practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited substance use exists, the Board shall lift the cease-practice order within one (1) business day.

After the issuance of a cease-practice order, the Board shall determine whether the positive biological fluid test is in fact evidence of prohibited substance use by consulting with the specimen collector and the laboratory, communicating with the licensee, his treating

physician(s), other health care provider, or group facilitator, as applicable.

For purposes of this condition, the terms "biological fluid testing" and "testing" mean the acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

For purposes of this condition, the term "prohibited substance" means an illegal drug, a lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by Respondent and approved by the Board, alcohol, or any other substance the Respondent has been instructed by the Board not to use, consume, ingest, or administer to himself or herself.

If the Board confirms that a positive biological fluid test is evidence of use of a prohibited substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to any other terms or conditions the Board determines are necessary for public protection or to enhance Respondent's rehabilitation.

7. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval as a worksite monitor, the name and qualifications of one or more licensed physician and surgeon, other licensed health care professional if no physician and surgeon is available, or, as approved by the Board or its designee, a person in a position of authority who is capable of monitoring the Respondent at work.

The worksite monitor shall not have a current or former financial, personal, or familial relationship with Respondent, or any other relationship that could reasonably be expected to compromise the ability of the monitor to render impartial and unbiased reports to the Board or its designee. If it is impractical for anyone but Respondent's employer to serve as the worksite monitor, this requirement may be waived by the Board or its designee, however, under no circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

The worksite monitor shall have an active unrestricted license with no disciplinary action within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth by the Board or its designee.

Respondent shall pay all worksite monitoring costs.

The worksite monitor shall have face-to-face contact with Respondent in the work environment on as frequent a basis as determined by the Board or its designee, but not less than once per week; interview other staff in the office regarding Respondent's behavior, if requested by the Board or its designee; and review Respondent's work attendance.

The worksite monitor shall verbally report any suspected substance abuse to the Board and Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected substance abuse does not occur during the Board's normal business hours, the verbal report shall be made to the Board or its designee within one (1) hour of the next business day. A written report that includes the date, time, and location of the suspected abuse; Respondent's actions; and any other information deemed important by the worksite monitor shall be submitted to the Board or its designee within 48 hours of the occurrence.

The worksite monitor shall complete and submit a written report monthly or as directed by the Board or its designee which shall include the following: (1) Respondent's name and Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3) the worksite monitor's license number, if applicable; (4) the location or location(s) of the worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance; (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can lead to suspected substance abuse by Respondent. Respondent shall complete any required consent forms and execute agreements with the approved worksite monitor and the Board, or its designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

If the worksite monitor resigns or is no longer available, Respondent shall, within five (5) calendar days of such resignation or unavailability, submit to the Board or its designee, for prior approval, the name and qualifications of a replacement monitor who will be assuming that responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a replacement monitor within sixty (60) calendar days of the resignation or unavailability of the monitor, Respondent shall receive a notification from the Board or its designee to cease the

practice of medicine within three (3) calendar days after being so notified. Respondent shall cease the practice of medicine until a replacement monitor is approved and assumes monitoring responsibility.

8. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING LICENSEES. Failure to fully comply with any term or condition of probation is a violation of probation.

A. If Respondent commits a major violation of probation as defined by section 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:

(1) Issue an immediate cease-practice order and order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice order issued by the Board or its designee shall state that Respondent must test negative for at least a month of continuous biological fluid testing before being allowed to resume practice. For purposes of determining the length of time a Respondent must test negative while undergoing continuous biological fluid testing following issuance of a cease-practice order, a month is defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until notified in writing by the Board or its designee that he may do so.

(2) Increase the frequency of biological fluid testing.

(3) Refer Respondent for further disciplinary action, such as suspension, revocation, or other action as determined by the Board or its designee.

B. If Respondent commits a minor violation of probation as defined by section 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:

(1) Issue a cease-practice order;

(2) Order practice limitations;

(3) Order or increase supervision of Respondent;

(4) Order increased documentation;

(5) Issue a citation and fine, or a warning letter;

(6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of Regulations, at Respondent's expense;

(7) Take any other action as determined by the Board or its designee.

C. Nothing in this Decision shall be considered a limitation on the Board's authority to revoke Respondent's probation if he has violated any term or condition of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

9. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to Respondent, at any other facility where Respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15 calendar days.

10. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE NURSES. During probation, Respondent is prohibited from supervising physician assistants and advanced practice nurses.

11. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.

12. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has

been compliance with all the conditions of probation.

Respondent shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

13. GENERAL PROBATION REQUIREMENTS.

Compliance with Probation Unit

Respondent shall comply with the Board's probation unit.

Address Changes

Respondent shall, at all times, keep the Board informed of Respondent's business and residence addresses, email address (if available), and telephone number. Changes of such addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021(b).

Place of Practice

Respondent shall not engage in the practice of medicine in Respondent's or patient's place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

License Renewal

Respondent shall maintain a current and renewed California Physician's and Surgeon's license.

Travel or Residence Outside California

Respondent shall immediately inform the Board or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) calendar days.

In the event Respondent should leave the State of California to reside or to practice ,Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.

14. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be available in person upon request for interviews either at Respondent's place of business

or at the probation unit office, with or without prior notice throughout the term of probation.

15. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is defined as any period of time Respondent is not practicing medicine as defined in Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. If Respondent resides in California and is considered to be in non-practice, Respondent shall comply with all terms and conditions of probation. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice and does not relieve Respondent from complying with all the terms and conditions of probation. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

In the event Respondent's period of non-practice while on probation exceeds 18 calendar months, Respondent shall successfully complete the Federation of State Medical Boards's Special Purpose Examination, or, at the Board's discretion, a clinical competence assessment program that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

Respondent's period of non-practice while on probation shall not exceed two (2) years.

Periods of non-practice will not apply to the reduction of the probationary term.

Periods of non-practice for a Respondent residing outside of California will relieve Respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or Controlled Substances; and Biological Fluid Testing..

16. COMPLETION OF PROBATION. Respondent shall comply with all

financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the completion of probation. Upon successful completion of probation, Respondent's certificate shall be fully restored.

17. VIOLATION OF PROBATION. Failure to fully comply with any term or condition of probation is a violation of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

18. LICENSE SURRENDER. Following the effective date of this Decision, if Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy the terms and conditions of probation, Respondent may request to surrender his or her license. The Board reserves the right to evaluate Respondent's request and to exercise its discretion in determining whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its designee and Respondent shall no longer practice medicine. Respondent will no longer be subject to the terms and conditions of probation. If Respondent re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.

19. PROBATION MONITORING COSTS. Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year.

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ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Kevin D. Cauley, Esq. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: 2/4/20

SHEPHERD GREEN PRYOR, M.D.
Respondent

I have read and fully discussed with Respondent Shepherd Green Pryor, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: 2/4/20

KEVIN D. CAULEY, ESQ.
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

DATED: 2/4/20

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
MARY CAIN-SIMON
Supervising Deputy Attorney General

ALICE W. WONG
Deputy Attorney General
Attorneys for Complainant

SF2018201806

Exhibit A

First Amended Accusation No. 800-2018-048113

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FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO December 24 2019
BY: Anna Logan ANALYST

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

In the Matter of the First Amended Accusation Against: **Shepherd Green Pryor, V. M.D.** **9097 E. Desert Cove Ave., Suite 250** **Scottsdale, AZ 85260-6279** **Physician's and Surgeon's Certificate No. A 96325,** Respondent.	Case No. 800-2018-048113 OAH No. 2019081180 **FIRST AMENDED** **ACCUSATION**

Complainant alleges:

PARTIES

1. Christine J. Lally (Complainant) brings this Accusation solely in her official capacity as the Interim Executive Director of the Medical Board of California, Department of Consumer Affairs (Board).

2. On or about July 1, 2006, the Board issued Physician's and Surgeon's Certificate Number A 96325 to Shepherd Green Pryor, V., M.D. (Respondent). The Physician's and Surgeon's Certificate is in delinquent status, having expired on July 31, 2018, and has not been renewed.

JURISDICTION

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

4. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Board deems proper.

5. Section 2305 of the Code states:

"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, or the revocation, suspension, or restriction of the authority to practice medicine by any agency of the federal government, 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."

6. Section 141 of the Code states:

"(a) For any licensee holding a license issued by a board under the jurisdiction of the department, a disciplinary action taken by another state, by any agency of the federal government, or by another country 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. A certified copy of the record of the disciplinary action taken against the licensee by another state, an agency of the federal government, or another country shall be conclusive evidence of the events related therein.

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

CAUSE FOR DISCIPLINE

(Discipline, Restrictions, and Limitations Imposed by Another State)

7. On or about September 18, 2018, the Arizona Medical Board and Respondent entered into an Interim Consent Agreement for Practice Restriction (Agreement), prohibiting Respondent from engaging in the practice of medicine until such time as Respondent receives permission from the Arizona Medical Board. The Agreement was based on the allegation that Respondent was impaired at work on June 8, 2018, and Respondent's acknowledgment that he may have an issue with substance use.

A copy of the Interim Consent Agreement for Practice Restriction is attached as Exhibit A.

8. Respondent subsequently completed inpatient treatment and was discharged on October 27, 2018. Based on Respondent's treatment and prognosis, Respondent entered into a monitoring agreement with the Arizona Medical Board and complied with recommendations for aftercare. On or about November 7, 2018, Respondent and the Arizona Medical Board entered into an Interim Consent Agreement to Participate in the Physician Health Program.

A copy of the Interim Consent Agreement to Participate in the Physician Health Program is attached as Exhibit B.

9. On or about August 6, 2019, the Arizona Medical Board issued a Letter of Reprimand whereby Respondent was placed on five years of probation, with term and conditions, including (1) abstain from use of alcohol; (2) abstain from any illegal drugs, mood altering medications unless prescribed for legitimate therapeutic purpose; (3) participation in personalized aftercare programs, or activities as recommended, including but not limited to psychotherapy or group therapy; (4) compliance with the return to work recommendations, including reduced hours and use of a PHP-approved worksite monitor as recommended; (5) obtain a primary care physician; (6) prescriptions for controlled substances monitoring; (7) random biological fluid, hair and/or nail testing; (8) 36 hours of alcohol/drug awareness education course; (8) notice of employer or supervisor information; and standard terms and conditions of probation.

A copy of the Order for Letter of Reprimand and Probation; And Consent to The Same is attached as Exhibit C.

10. Respondent's conduct and the action of the Arizona Medical Board as set forth in paragraphs 7 to 9, above, constitute cause for discipline pursuant to sections 2305 and/or 141 of the Code.

PRAYER

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

1. Revoking or suspending Physician's and Surgeon's Certificate Number A 96325, issued to Shepherd Green Pryor, V., M.D.;

2. Revoking, suspending or denying approval of Shepherd Green Pryor, V., M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Shepherd Green Pryor, V., M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

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

DATED: December 24, 2019

CHRISTINE J. LALLY
Interim Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

SF2018201806

EXHIBIT A

BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of SHEPHERD G. PRYOR, M.D. Holder of License No. 33720 For the Practice of Allopathic Medicine In the State of Arizona.	Case No. MD-18-0552A INTERIM CONSENT AGREEMENT FOR PRACTICE RESTRICTION

INTERIM CONSENT AGREEMENT

Shepherd G. Pryor, M.D. ("Respondent") elects to permanently waive any right to a hearing and appeal with respect to this Interim Consent Agreement for Practice Restriction and consents to the entry of this Order by the Arizona Medical Board ("Board").

INTERIM 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. 33720 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-18-0552A after receiving a self-report on June 11, 2018 from Respondent that he was alleged to have been impaired while performing a surgical procedure on June 8, 2018. Respondent denied the allegation of impairment, but acknowledged that he may have an issue with substance use.

4. Respondent subsequently underwent an inpatient evaluation at a Board-approved facility. Based on the findings, the facility opined that Respondent is not currently safe to practice, pending completion of inpatient treatment and post-treatment fitness for duty assessment.

5. The aforementioned information was presented to the investigative staff, the medical consultant and the lead Board member. All reviewed the information and concur that the interim consent agreement to restrict Respondent's practice is appropriate.

6. The investigation into this matter is pending and will be forwarded to the Board promptly upon completion for review and action.

INTERIM CONCLUSIONS OF LAW

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

2. Pursuant to A.R.S. § 32-1405(C)(25) the Executive Director has authority to enter into a consent agreement when there is evidence of danger to the public health and safety.

3. Pursuant to A.A.C. R4-16-504, the Executive Director may enter into an interim consent agreement when there is evidence that a restriction is needed to mitigate imminent danger to the public's health and safety. Investigative staff, the Board's medical consultant and the lead Board member have reviewed the case and concur that an interim consent agreement is appropriate.

INTERIM ORDER

IT IS HEREBY ORDERED THAT:

1. Respondent is prohibited from engaging in the practice of medicine in the State of Arizona as set forth in A.R.S. § 32-1401(22) until Respondent applies to the Executive Director and receives permission to do so.

2. Respondent may request, in writing, release and/or modification of this Interim Consent Agreement. Respondent's request must be accompanied by information demonstrating that Respondent has completed the recommendations made by the evaluating facility and is safe to practice medicine. The Executive Director, in consultation

with and agreement of the lead Board member and the Chief Medical Consultant, has the discretion to determine whether it is appropriate to release Respondent from this Interim Consent Agreement.

3. The Board retains jurisdiction and may initiate new action based upon any violation of this Interim Consent Agreement, including, but not limited to, summarily suspending Respondent's license.

4. Because this is an Interim Consent Agreement and not a final decision by the Board regarding the pending investigation, it is subject to further consideration by the Board. Once the investigation is complete, it will be promptly provided to the Board for its review and appropriate action.

5. This Interim Consent Agreement shall be effective on the date signed by the Board's Executive Director.

DATED this 18th day of September, 2018.

ARIZONA MEDICAL BOARD

By Patricia E. McSorley
Patricia E. McSorley
Executive Director

RECITALS

Respondent understands and agrees that:

1. The Board, through its Executive Director, may adopt this Interim Consent Agreement, or any part thereof, pursuant to A.R.S. § 32-1405(C)(25) and A.A.C. R4-16-504.

2. Respondent has read and understands this Interim Consent Agreement as set forth herein, and has had the opportunity to discuss this Interim Consent Agreement with an attorney or has waived the opportunity to discuss this Interim Consent Agreement with an attorney. Respondent voluntarily enters into this Interim Consent Agreement and by doing so agrees to abide by all of its terms and conditions.

3. By entering into this Interim Consent Agreement, Respondent freely and voluntarily relinquishes all rights to an administrative hearing on the matters set forth herein, as well as all rights of rehearing, review, reconsideration, appeal, judicial review or any other administrative and/or judicial action, concerning the matters related to the Interim Consent Agreement.

4. Respondent understands that this Interim Consent Agreement does not constitute a dismissal or resolution of this matter or any matters that may be currently pending before the Board and does not constitute any waiver, express or implied, of the Board's statutory authority or jurisdiction regarding this or any other pending or future investigations, actions, or proceedings. Respondent also understands that acceptance of this Interim Consent Agreement does not preclude any other agency, subdivision, or officer of this State from instituting civil or criminal proceedings with respect to the conduct that is the subject of this Interim Consent Agreement. Respondent further does not relinquish Respondent's rights to an administrative hearing, rehearing, review, reconsideration, judicial review or any other administrative and/or judicial action, concerning the matters related to a final disposition of this matter, unless Respondent affirmatively does so as part of the final resolution of this matter.

5. Respondent acknowledges and agrees that upon signing this Interim Consent Agreement and returning it to the Board's Executive Director, Respondent may not revoke Respondent's acceptance of this Interim Consent Agreement or make any modifications to it. Any modification of this original document is ineffective and void unless mutually approved by the parties in writing.

6. Respondent understands that this Interim Consent Agreement shall not become effective unless and until it is signed by the Board's Executive Director.

7. Respondent understands and agrees that if the Board's Executive Director does not adopt this Interim Consent Agreement, Respondent will not assert in any future proceedings that the Board's consideration of this Interim Consent Agreement constitutes bias, prejudice, prejudgment, or other similar defense.

8. Respondent understands that this Interim Consent Agreement is a public record that may be publicly disseminated as a formal action of the Board, and that it shall be reported as required by law to the National Practitioner Data Bank.

9. Respondent understands that this Interim Consent Agreement does not alleviate Respondent's responsibility to comply with the applicable license-renewal statutes and rules. If this Interim Consent Agreement remains in effect at the time Respondent's allopathic medical license comes up for renewal, Respondent must renew the license if Respondent wishes to retain the license. If Respondent elects not to renew the license as prescribed by statute and rule, Respondent's license will not expire but rather, by operation of law (A.R.S. § 32-3202), become suspended until the Board takes final action in this matter. Once the Board takes final action, in order for Respondent to be

licensed in the future, Respondent must submit a new application for licensure and meet all of the requirements set forth in the statutes and rules at that time.

10. Respondent understands that any violation of this Interim Consent Agreement constitutes unprofessional conduct under A.R.S. § 32-1401(27)(s) ("Violating a formal order, probation, consent agreement or stipulation issued or entered into by the board or its executive director under this chapter.").

SHEPHERD G. PRYOR, M.D.

DATED: 9/14/18

EXECUTED COPY of the foregoing e-mailed
this 18th day of September, 2018 to:

Shepherd G. Pryor, M.D.
Address of Record

Attorney for Respondent
Address of Record

ORIGINAL of the foregoing filed
this 18th day of September 2018 with:

Arizona Medical Board
1740 West Adams, Suite 4000
Phoenix, Arizona 85007

Mary Bobier
Board staff

EXHIBIT B

Arizona Medical Board
1740 W Adams St. Suite 4000 Phoenix, AZ 85007 • website: www.azmd.gov
Phone (480) 551-2700 • Toll Free (877) 255-2212 • Fax (480) 551-2702

Governor

Douglas A. Ducey

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R. Screven Farmer, M.D.
Chair
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James Gillard, M.D.
Vice-Chair
Physician Member

Edward G. Paul, M.D.
Secretary
Physician Member

Jodi Bain, Esq.
Public Member

Bruce A. Bethancourt, M.D.
Physician Member

David C. Beyer, M.D.
Physician Member

Teresa Connolly, D.N.P.
Public Member

Laura Dorrell, M.S.N., RN.
Public Member

Gary R. Figge, M.D.
Physician Member

Pamela E. Jones
Public Member

Lois E. Krahn, M.D.
Physician Member

Executive Director

Patricia E. McSorley

I, Michelle Robles, of the Arizona Medical Board, hereby certify that I am the official custodian of the records of the agency; and that the attached documents are true and complete copies of the documents requested regarding:

Physician Name: Shepard G. Pryor, M.D.

License Number: 33720

Attached are the following document(s):

Document Name:
Physician Profile

Interim Consent Agreement to Participate in the Physician Health Program
Dated: November 7th, 2018

Document #13 of Pages:

Dated this 30th, April, 2019

ARIZONA MEDICAL BOARD

Michelle Robles

Michelle Robles
Custodian of Records

MD PROFILE PAGE

Arizona Medical Board

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Printed on 04/30/19 @ 03:05

General Information

Shepherd G. Pryor MD
Valley Ent

License Number:
License Status: Active
Licensed Date: 01/28/2005
License Renewed: 06/30/2017
Due to Renew By: 07/10/2019
If not Renewed, License Expires: 11/10/2019

Education and Training

Medical School:	RUSH MED COLL OF RUSH UNIV Chicago, Illinois
Graduation Date:	06/09/2001
Residency:	06/30/2001 - 07/15/2005 (Otolaryngology) MAYO SCHOOL OF GRADUATE EDUCATION ROCHESTER, MN
Fellowship:	06/28/2006 - 06/30/2007 (Facial Plastic Surgery) UNIV OF CALIF DAVIS MEDICAL CENTER SAN DIEGO , CA
Area of Interest	Otolaryngology
Area of Interest	Plastic Surgery Within the Head & Neck (Otolaryngology)

The Board does not verify current specialties. For more information please see the American Board of Medical Specialties website at http://www.abms.org to determine if the physician has earned a specialty certification from this private agency.

Board Action

None

A person may obtain additional public records related to any licensee, including dismissed complaints and non-disciplinary actions and orders, by making a written request to the Board. The Arizona Medical Board presents this information as a service to the public. The Board relies upon information provided by licensees to be true and correct, as required by statute. It is an act of unprofessional conduct for a licensee to provide erroneous information to the Board. The Board makes no warranty or guarantee concerning the accuracy or reliability of the content of this website or the content of any other website to which it may link. Assessing accuracy and reliability of the information obtained from this website is solely the responsibility of the user. The Board is not liable for errors or for any damages resulting from the use of the information contained herein.

Please note that some Board Actions may not appear until a few weeks after they are taken, due to appeals, effective dates and other administrative processes.

Board actions taken against physicians in the past 24 months are also available in a chronological list.

Credentials Verification professionals, please click here for information on use of this website.

BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of **SHEPHERD G. PRYOR, M.D.** Holder of License No. 33720 For the Practice of Allopathic Medicine In the State of Arizona.	**Case No. MD-18-0552A** **INTERIM CONSENT AGREEMENT TO PARTICIPATE IN THE PHYSICIAN HEALTH PROGRAM**

By mutual agreement and understanding, between the Arizona Medical Board ("Board") and Shepherd G. Pryor, M.D. ("Respondent"), the parties enter into this Interim Consent Agreement, Findings of Fact, Conclusions of Law and Order ("Interim Consent Agreement") as an interim disposition of this matter.

INTERIM 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. 33720 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-18-0552A after receiving a self-report on June 11, 2018 from Respondent that he was alleged to have been impaired while performing a surgical procedure on June 8, 2018. Respondent denied the allegation of impairment, but acknowledged that he may have an issue with substance use.

4. Respondent subsequently underwent an inpatient evaluation at a Board-approved facility. Based on the findings, the facility opined that Respondent was not safe to practice, pending completion of inpatient treatment and post-treatment fitness for duty assessment.

5. Respondent entered into an Interim Consent Agreement for Practice Restriction, effective September 18, 2018.

6. Respondent subsequently completed inpatient treatment at a Board-approved facility ("Facility") and was discharged with staff approval on October 27, 2018. Based on Respondent's treatment and prognosis, the Facility opined that Respondent was safe to practice, provided he enter into a monitoring agreement with the Board, and comply with recommendations for aftercare.

7. The investigation concerning Respondent's professional conduct will be forwarded to the Board promptly upon completion for review and action.

INTERIM CONCLUSIONS OF LAW

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

2. Pursuant to A.R.S. § 32-1405(20), if delegated by the Board, the Executive Director may enter into stipulated agreements with a physician for the treatment, rehabilitation and monitoring of chemical substance or misuse.

INTERIM CONSENT AGREEMENT

IT IS HEREBY ORDERED THAT:

1. The Interim Consent Agreement for Practice Restriction is vacated upon compliance with paragraph 2 of this Order below.

2. Within 5 days of the date of this agreement, Respondent shall provide the Board proof of enrollment with a PHP Contractor for participation in the Board's PHP for a period of five (5) years. Respondent shall comply with the following terms and conditions:

3. Respondent shall not consume alcohol or any food or other substance containing poppy seeds or alcohol.

4. Respondent shall not take any illegal drugs or mood altering medications unless prescribed for a legitimate therapeutic purpose.

5. Respondent shall attend the PHP's relapse prevention group therapy sessions one time per week for the duration of this Interim Consent Agreement, unless excused by the relapse prevention group facilitator for good cause. Individual relapse therapy may be substituted for one or more of the group therapy sessions, if PHP pre-approves substitution. The relapse prevention group facilitators or individual relapse prevention therapist shall submit monthly reports to the PHP regarding attendance and progress.

6. Respondent shall continue to participate in any personalized aftercare programs or activities as recommended by the Facility in its post-treatment discharge summary including, but not limited to psychotherapy or group therapy as approved by the PHP Contractor, and use of a Soberlink device. Respondent shall report on those activities as requested by the PHP, including executing any releases necessary to allow the PHP to monitor his participation and communicate directly with and obtain records from the treating providers for those aftercare activities. Respondent shall be responsible for all costs of aftercare, including costs associated with compliance of this Interim Consent Agreement.

7. Respondent shall comply with the return to work recommendations, including reduced hours and use of a PHP-approved worksite monitor as recommended by the Facility in its post-treatment discharge summary. Respondent shall report on those activities as requested by the PHP, including executing any releases necessary to allow the PHP to monitor his compliance with this requirement and communicate directly

with and obtain records from his employer(s) and worksite monitor. Respondent shall be responsible for all costs of compliance with this term, including the cost of complying with the reporting requirements.

8. Respondent shall attend ninety 12-step meetings or other self-help group meetings appropriate for substance abuse and approved by the PHP, for a period of ninety days. Upon completion of the ninety meetings in ninety days, Respondent shall participate in a 12-step recovery program or other self-help program appropriate for substance abuse as recommended by the PHP. Respondent shall attend a minimum of three 12-step or other self-help program meetings per week. Two meetings per month must be Caduceus meetings. Respondent must maintain a log of all self-help meetings.

9. Respondent shall promptly obtain a Primary Care Physician ("PCP") and shall submit the name of the physician to the PHP in writing for approval. The approved PCP shall be in charge of providing and coordinating Respondent's medical care and treatment. Except in an *Emergency*, Respondent shall obtain medical care and treatment only from the PCP and from health care providers to whom the PCP refers Respondent. Respondent shall promptly provide a copy of this Interim Consent Agreement to the PCP. Respondent shall also inform all other health care providers who provide medical care or treatment that Respondent is participating in PHP. "Emergency" means a serious accident or sudden illness that, if not treated immediately, may result in a long-term medical problem or loss of life.

10. Respondent shall enter treatment with a PHP Contractor approved addiction psychiatrist or addiction medicine specialist as recommended by the Facility in its post-treatment discharge summary and shall comply with any and all treatment recommendations, including taking any and all prescribed medications. Respondent shall instruct the treating professional to submit quarterly written reports to the PHP regarding

diagnosis, prognosis, current medications, recommendation for continuing care and treatment, and ability to safely practice medicine. The reports shall be submitted quarterly to the PHP, the commencement of which to be determined by the PHP Contractor. Respondent shall provide the psychiatrist with a copy of this Stipulated Rehabilitation Agreement. Respondent shall pay the expenses for treatment and be responsible for paying for the preparation of the quarterly reports. At the expiration of one year or anytime thereafter, Respondent may submit a written request to the PHP Contractor requesting termination of the requirement that Respondent remain in treatment with a psychiatrist. The decision to terminate will be based in part upon the treating psychiatrist's recommendation for continued care and treatment.

11. All prescriptions for controlled substances shall be approved by the PHP prior to being filled except in an *Emergency*. Controlled substances prescribed and filled in an emergency shall be reported to the PHP within 48 hours. Respondent shall take no *Medication* unless the PCP or other health care provider to whom the PCP refers Respondent prescribes and the PHP approves the *Medication*. Respondent shall not self-prescribe any *Medication*. "Medication" means a prescription-only drug, controlled substance, and over-the counter preparation, other than plain aspirin, plain ibuprofen, and plain acetaminophen.

12. Respondent shall submit to random biological fluid, hair and/or nail testing for the remainder of this Interim Consent Agreement (as specifically directed below) to ensure compliance with PHP.

13. Respondent shall provide the PHP in writing with one telephone number that shall be used to contact Respondent on a 24 hour per day/seven day per week basis to submit to biological fluid, hair, and/or nail testing to ensure compliance with PHP. For the purposes of this section, telephonic notice shall be deemed given at the time a

message to appear is left at the contact telephone number provided by Respondent. Respondent authorizes any person or organization conducting tests on the collected samples to provide testing results to the PHP. Respondent shall comply with all requirements for biological fluid, hair, and/or nail collection. Respondent shall pay for all costs for the testing.

14. Respondent shall provide the PHP with written notice of any plans to travel out of state.

15. Respondent shall immediately notify the Board and the PHP in writing of any change in office or home addresses and telephone numbers.

16. Respondent provides full consent for the PHP to discuss the Respondent's case with the Respondent's PCP or any other health care providers to ensure compliance with PHP.

17. The relationship between the Respondent and the PHP is a direct relationship. Respondent shall not use an attorney or other intermediary to communicate with the PHP on participation and compliance issues. Any such questions should be directed to Board staff.

18. Respondent shall be responsible for all costs, including costs associated with participating in PHP, at the time service is rendered or within 30 days of each invoice sent to the Respondent. An initial deposit of two (2) months PHP fees is due upon entering the program. Failure to pay either the initial PHP deposit or monthly fees 60 days after invoicing will be reported to the Board by the PHP and may result in disciplinary action up to and including revocation.

19. Respondent shall immediately provide a copy of this Interim Consent Agreement to all employers, hospitals and free standing surgery centers where Respondent currently has or in the future gains or applies for employment or privileges.

Within 30 days of the date of this Interim Consent Agreement, Respondent shall provide the PHP with a signed statement of compliance with this notification requirement. Respondent is further required to notify, in writing, all employers, hospitals and free standing surgery centers where Respondent currently has or in the future gains or applies for employment or privileges of a violation of this Interim Consent Agreement.

20. In the event Respondent resides or practices as a physician in a state other than Arizona, Respondent shall participate in the rehabilitation program sponsored by that state's medical licensing authority or medical society. Respondent shall cause the monitoring state's program to provide written quarterly reports to the PHP regarding Respondent's attendance, participation, and monitoring. The monitoring state's program and Respondent shall immediately notify the PHP if Respondent is non-compliant with any aspect of the monitoring requirements or is required to undergo any additional treatment.

21. The PHP shall immediately notify the Board if Respondent is non-compliant with any aspect of this Interim Consent Agreement or is required to undergo any additional treatment.

22. The Board retains jurisdiction and may initiate new action based upon any violation of this Interim Consent Agreement, including, but not limited to, summarily suspending Respondent's license.

23. Because this is an Interim Consent Agreement and not a final decision by the Board regarding the pending investigation, it is subject to further consideration by the Board. Once the investigation is complete, it will be promptly provided to the Board for its review and appropriate action.

24. This Interim Consent Agreement terminates on the effective date of the Board's final Order in case number MD-18-0552A.

DATED AND EFFECTIVE this 7th day of November, 2018.

ARIZONA MEDICAL BOARD

By Kristina Fredeksen for
Patricia E. McSorley
Executive Director

RECITALS

Respondent understands and agrees that:

1. The Board, through its Executive Director, may adopt this Interim Consent Agreement, or any part thereof, pursuant to A.R.S. § 32-1405(C)(25).

2. Respondent has read and understands this Interim Consent Agreement as set forth herein, and has had the opportunity to discuss this Interim Consent Agreement with an attorney or has waived the opportunity to discuss this Interim Consent Agreement with an attorney. Respondent voluntarily enters into this Interim Consent Agreement and by doing so agrees to abide by all of its terms and conditions.

3. By entering into this Interim Consent Agreement, Respondent freely and voluntarily relinquishes all rights to an administrative hearing on the matters set forth herein, as well as all rights of rehearing, review, reconsideration, appeal, judicial review or any other administrative and/or judicial action, concerning the matters related to the Interim Consent Agreement.

4. Respondent understands that this Interim Consent Agreement does not constitute a dismissal or resolution of this matter or any matters that may be currently pending before the Board and does not constitute any waiver, express or implied, of the Board's statutory authority or jurisdiction regarding any other pending or future investigations, actions, or proceedings. Respondent does not relinquish his rights to an administrative hearing, rehearing, review, reconsideration, judicial review or any other administrative and/or judicial action, concerning the matters related to a final disposition of this matter, unless he affirmatively does so as part of the final resolution of this matter.

5. Respondent acknowledges and agrees that upon signing this Interim Consent Agreement and returning it to the Board's Executive Director, Respondent may not revoke acceptance of this Interim Consent Agreement or make any modifications to it. Any modification of this original document is ineffective and void unless mutually approved by the parties in writing.

6. Respondent understands that this Interim Consent Agreement shall not become effective unless and until it is signed by the Board's Executive Director.

7. Respondent understands and agrees that if the Board's Executive Director does not adopt this Interim Consent Agreement, Respondent will not assert in any future proceedings that the Board's consideration of this Interim Consent Agreement constitutes bias, prejudice, prejudgment, or other similar defense.

8. Respondent understands that this Interim Consent Agreement is a public record that may be publicly disseminated as a formal action of the Board.

9. Respondent understands that this Interim Consent Agreement does not alleviate Respondent's responsibility to comply with the applicable license renewal

statutes and rules. If this Interim Consent Agreement remains in effect at the time Respondent's license comes up for renewal, Respondent must renew the license if Respondent wishes to retain the license. If Respondent elects not to renew the license as prescribed by statute and rule, Respondent's license will not expire but rather, by operation of law (A.R.S. § 32-3202), become suspended until the Board takes final action in this matter. Once the Board takes final action, in order for Respondent to be licensed in the future, Respondent must submit a new application for licensure and meet all of the requirements set forth in the statutes and rules at that time.

10. Respondent understands that any violation of this Interim Consent Agreement constitutes unprofessional conduct under A.R.S. § 32-1401(27)(r) ("[V]iolating a formal order, probation, consent agreement or stipulation issued or entered into by the board or its executive director under this chapter.").

11. ***Respondent has read and understands the terms of this Interim Consent Agreement.***

SHEPHARD G. PRYOR, M.D. DATED: 11/7/18

EXECUTED COPY of the foregoing mailed
this 7th day of November, 2018 to:

Shepherd G. Pryor, M.D.
Address of Record

Stephen W. Myers, Esq.
Attorney for Respondent
Address of Record

ORIGINAL of the foregoing filed
this 7th day of November 2018 with:

Arizona Medical Board
1740 West Adams, Suite 4000
Phoenix, Arizona 85007

Board staff

EXHIBIT C

Arizona Medical Board
1740 W Adams St. Suite 4000 Phoenix, AZ 85007 • website: www.azmd.gov
Phone (480) 551-2700 • Toll Free (877) 255-2212 • Fax (480) 551-2702

Governor

Douglas A. Ducey

Members

R. Screven Farmer, M.D.
Chair
Physician Member

James Gillard, M.D.
Vice-Chair
Physician Member

Edward G. Paul, M.D.
Secretary
Physician Member

lodi Bain, Esq.
Public Member

Bruce A. Bethancourt, M.D.
Physician Member

David C. Beyer, M.D.
Physician Member

eresa Connolly, D.N.P.
ublic Member

aura Dorrell, M.S.N., RN.
ublic Member

ary R. Figge, M.D.
hysician Member

amela E. Jones
ublic Member

is E. Krahn, M.D.
ysician Member

ecutive Director

tricia E. McSorley

I, Michelle Robles, of the Arizona Medical Board, hereby certify that I am the official custodian of the records of the agency; and that the attached documents are true and complete copies of the documents requested regarding:

Physician Name: Shepherd G. Pryor, M.D.

License Number: 33720

Attached are the following document(s):

Document Name:
Physician Profile

Order for Letter of Reprimand and Probation; and Consent to the Same
Date: August 6th, 2019

Document #13 of Pages:

Dated this October 22nd, 2019

ARIZONA MEDICAL BOARD

Michelle Robles

Michelle Robles
Custodian of Records

MD PROFILE PAGE

Arizona Medical Board

gls.azmd.gov
Printed on 10/21/19 @ 11:02

General Information

Shepherd G. Pryor MD
Valley Ent

License Number:
License Status: Active
Licensed Date: 01/28/2005
License Renewed: 06/17/2019
Due to Renew By: 07/10/2021
If not Renewed, License Expires: 11/10/2021

Education and Training

Medical School:	RUSH MED COLL OF RUSH UNIV Chicago, Illinois
Graduation Date:	06/09/2001
Residency:	06/30/2001 - 07/15/2005 (Otolaryngology) MAYO SCHOOL OF GRADUATE EDUCATION ROCHESTER, MN
Fellowship:	06/28/2006 - 06/30/2007 (Facial Plastic Surgery) UNIV OF CALIF DAVIS MEDICAL CENTER SAN DIEGO , CA
Area of Interest	Otolaryngology
Area of Interest	Plastic Surgery Within the Head & Neck (Otolaryngology)

The Board does not verify current specialties. For more information please see the American Board of Medical Specialties website at http://www.abms.org to determine if the physician has earned a specialty certification from this private agency.

Board Action

08/06/2019 Letter of Reprimand W Probation

A person may obtain additional public records related to any licensee, including dismissed complaints and non-disciplinary actions and orders, by making a written request to the Board. The Arizona Medical Board presents this information as a service to the public. The Board relies upon information provided by licensees to be true and correct, as required by statute. It is an act of unprofessional conduct for a licensee to provide erroneous information to the Board. The Board makes no warranty or guarantee concerning the accuracy or reliability of the content of this website or the content of any other website to which it may link. Assessing accuracy and reliability of the information obtained from this website is solely the responsibility of the user. The Board is not liable for errors or for any damages resulting from the use of the information contained herein.

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BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of **SHEPHERD G. PRYOR, M.D.** Holder of License No. 33720 For the Practice of Allopathic Medicine In the State of Arizona.	Case No. MD-18-0552A **ORDER FOR LETTER OF REPRIMAND AND PROBATION; AND CONSENT TO THE SAME**

Shepherd G. Pryor, M.D. ("Respondent") elects to permanently waive any right to a hearing and appeal with respect to this Order for Letter of Reprimand and Probation; 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 number 33720 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-18-0552A after receiving a self-report on June 11, 2018 from Respondent that he was alleged to have been impaired while performing a surgical procedure on June 8, 2018. Respondent denied the allegation of impairment, but acknowledged that he may have an issue with substance use.

4. Respondent subsequently underwent an inpatient evaluation at a Board-approved facility. Based on the findings, the facility opined that Respondent was not safe to practice, pending completion of inpatient treatment and post-treatment fitness for duty assessment.

5. Respondent entered into an Interim Consent Agreement for Practice Restriction, effective September 18, 2018.

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6. Respondent subsequently completed inpatient treatment at a Board-approved facility ("Facility") and was discharged with staff approval on October 27, 2018. Based on Respondent's treatment and prognosis, the Facility opined that Respondent was safe to practice, provided he enter into a monitoring agreement with the Board, and comply with recommendations for aftercare

7. Respondent completed the evaluation as recommended followed by inpatient treatment. Respondent met again with the PHP Contractor who agreed that Respondent is safe to practice medicine, provided that Respondent enter into a five (5) year agreement for PHP Participation.

8. On November 7, 2018, Respondent entered into an Interim Consent Agreement for PHP participation. Respondent is in compliance with the terms of his PHP monitoring.

9. On June 8, 2018, Respondent was performing an excision of a cervical node on a 51 year-old male patient ("OS"). Hospital staff reported observing Respondent appear to have difficulty suturing the wound and the anesthesiologist notified Hospital staff that he suspected that Respondent might be impaired. Respondent left the Hospital immediately after completing the procedure, but left behind his drink, cell phone and hat. Respondent's drink was reported to smell of alcohol. During the course of the Board's investigation, Respondent agreed that the drink contained alcohol.

10. The Board's Medical Consultant ("MC") reviewed the care provided to OS and determined that Dr. Pryor deviated from the standard of care by performing surgery while impaired. There was potential for patient harm in that the patient was at risk for an adverse outcome from the procedure.

CONCLUSIONS OF LAW

a. The Board possesses jurisdiction over the subject matter hereof and over Respondent.

b. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(f) ("A pattern of using or being under the influence of alcohol or drugs or a similar substance while practicing medicine or to the extent that judgment may be impaired and the practice of medicine detrimentally affected.").

c. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(r) ("Committing any conduct or practice that is or might be harmful or dangerous to the health of the patient or the public.").

ORDER

IT IS HEREBY ORDERED THAT:

1. Respondent is issued a Letter of Reprimand.

2. Respondent is placed on Probation for a period of five years[1] with the following terms and conditions:

3. Respondent shall not consume alcohol or any food or other substance containing poppy seeds or alcohol.

4. Respondent shall not take any illegal drugs or mood altering medications unless prescribed for a legitimate therapeutic purpose.

5. Respondent shall continue to participate in any personalized aftercare programs or activities as recommended by the Facility in its post-treatment discharge summary including, but not limited to psychotherapy or group therapy as approved by the

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[1] Respondent's probation shall be retroactive to November 7, 2018.

PHP Contractor, and use of a Soberlink device. Respondent shall report on those activities as requested by the PHP, including executing any releases necessary to allow the PHP to monitor his participation and communicate directly with and obtain records from the treating providers for those aftercare activities. Respondent shall be responsible for all costs of aftercare, including costs associated with compliance of this Interim Consent Agreement.

6. Respondent shall comply with the return to work recommendations, including reduced hours and use of a PHP-approved worksite monitor as recommended by the Facility in its post-treatment discharge summary. Respondent shall report on those activities as requested by the PHP, including executing any releases necessary to allow the PHP to monitor his compliance with this requirement and communicate directly with and obtain records from his employer(s) and worksite monitor. Respondent shall be responsible for all costs of compliance with this term, including the cost of complying with the reporting requirements.

7. Respondent shall promptly obtain a Primary Care Physician ("PCP") and shall submit the name of the physician to the PHP Contractor in writing for approval. Except in an Emergency, Respondent shall obtain medical care and treatment only from the PCP and from health care providers to whom the PCP refers Respondent. Respondent shall promptly provide a copy of this Order to the PCP. Respondent shall also inform all other health care providers who provide medical care or treatment that Respondent is participating in the PHP. "Emergency" means a serious accident or sudden illness that, if not treated immediately, may result in a long-term medical problem or loss of life.

8. All prescriptions for controlled substances shall be approved by the PHP Contractor prior to being filled except in an Emergency. Controlled substances prescribed and filled in an emergency shall be reported to the PHP within 48 hours. Respondent shall

take no Medication unless the PCP or other health care provider to whom the PCP refers Respondent prescribes and the PHP Contractor approves the Medication. Respondent shall not self-prescribe any Medication. "Medication" means a prescription-only drug, controlled substance, and over-the counter preparation, other than plain aspirin, plain ibuprofen, and plain acetaminophen.

9. If recommended by the PHP Contractor, Respondent shall attend a relapse prevention outpatient program for a duration and frequency recommended by the PHP Contractor, unless Respondent is excused by the relapse program facilitator for good cause. The relapse prevention group facilitators shall submit monthly reports to the PHP regarding Respondent's attendance and progress.

10. Respondent shall enter treatment with a PHP Contractor approved addiction psychiatrist or addiction medicine specialist as recommended by the Facility in its post-treatment discharge summary and shall comply with any and all treatment recommendations, including taking any and all prescribed medications. Respondent shall instruct the treating professional to submit quarterly written reports to the PHP regarding diagnosis, prognosis, current medications, recommendation for continuing care and treatment, and ability to safely practice medicine. The reports shall be submitted quarterly to the PHP, the commencement of which to be determined by the PHP Contractor. Respondent shall provide the psychiatrist with a copy of this Stipulated Rehabilitation Agreement. Respondent shall pay the expenses for treatment and be responsible for paying for the preparation of the quarterly reports. At the expiration of one year or anytime thereafter, Respondent may submit a written request to the PHP Contractor requesting termination of the requirement that Respondent remain in treatment with a psychiatrist. The decision to terminate will be based in part upon the treating psychiatrist's recommendation for continued care and treatment.

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11. If requested by the PHP and not already completed, Respondent shall attend ninety 12-step meetings or other self-help group meetings appropriate for substance abuse and approved by the PHP, for a period of ninety days. Upon completion of the ninety meetings in ninety days, Respondent shall participate in a 12-step recovery program or other self-help program appropriate for substance abuse as recommended by the PHP. Respondent shall attend a minimum of three 12-step or other self-help program meetings per week. Two meetings per month must be Caduceus meetings. Respondent must maintain a log of all self-help meetings.

12. Respondent shall submit to random biological fluid, hair and/or nail testing for the remainder of this Order (as specifically directed below) to ensure compliance with the PHP.

13. Respondent shall provide the PHP Contractor in writing with one telephone number that shall be used to contact Respondent on a 24 hour per day/seven day per week basis to submit to biological fluid, hair, and/or nail testing to ensure compliance with the PHP. For the purposes of this section, telephonic notice shall be deemed given at the time a message to appear is left at the contact telephone number provided by Respondent. Respondent authorizes any person or organization conducting tests on the collected samples to provide testing results to the PHP Contractor. Respondent shall comply with all requirements for biological fluid, hair, and/or nail collection. Respondent shall pay for all costs for the testing.

14. Respondent shall provide the PHP Contractor with written notice of any plans to travel out of state.

15. If not already completed, Respondent shall successfully complete a PHP approved 36 hour alcohol/drug awareness education class.

16. Respondent shall immediately notify the Board and the PHP Contractor in writing of any change in office or home addresses and telephone numbers.

17. Respondent provides full consent for the PHP Contractor to discuss the Respondent's case with the Respondent's PCP or any other health care providers to ensure compliance with the PHP.

18. The relationship between the Respondent and the PHP Contractor is a direct relationship. Respondent shall not use an attorney or other intermediary to communicate with the PHP Contractor on participation and compliance issues. All inquiries must be directed to Board staff.

19. Respondent shall be responsible for all costs, including costs associated with participating in the PHP, at the time service is rendered or within 30 days of each invoice sent to the Respondent. An initial deposit of two (2) months PHP fees is due upon entering the program. Failure to pay either the initial PHP deposit or monthly fees 60 days after invoicing will be reported to the Board by the PHP Contractor and may result in disciplinary action.

20. Respondent shall appear in person before with the PHP Contractor for interviews upon request, upon reasonable notice.

21. Respondent shall immediately provide a copy of this Order to all employers, hospitals and free standing surgery centers where Respondent currently has or in the future gains or applies for employment or privileges. Within 30 days of the date of this Order, Respondent shall provide the PHP with a signed statement of compliance with this notification requirement. Respondent is further required to notify, in writing, all employers, hospitals and free standing surgery centers where Respondent currently has or in the future gains or applies for employment or privileges of a violation of this Order.

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22. In the event Respondent resides or practices as a physician in a state other than Arizona, Respondent shall participate in the rehabilitation program sponsored by that state's medical licensing authority or medical society. Respondent shall cause the monitoring state's program to provide written quarterly reports to the PHP Contractor regarding Respondent's attendance, participation, and monitoring. The monitoring state's program and Respondent shall immediately notify the PHP Contractor if Respondent is non-compliant with any aspect of the monitoring requirements or is required to undergo any additional treatment.

23. The PHP Contractor shall immediately notify the Board if Respondent is non-compliant with any aspect of this Order or is required to undergo any additional treatment.

24. In the event of a chemical dependency relapse by Respondent or Respondent's use of controlled substances or alcohol in violation of this Order, Respondent shall promptly enter into an Interim Consent Agreement for Practice Restriction that requires, among other things, that Respondent not practice medicine until such time as Respondent successfully completes long-term inpatient treatment designated by the PHP Contractor and obtains affirmative approval from the Executive Director, in consultation with the Lead Board Member and Chief Medical Consultant, to return to the practice of medicine. Prior to approving Respondent's request to return to the practice of medicine, Respondent may be required to undergo any combination of physical examinations, psychiatric or psychological evaluations. In no respect shall the terms of this paragraph restrict the Board's authority to initiate and taken disciplinary action for any violation of this Order.

25. Respondent shall obey all state, federal and local laws, all rules governing the practice of medicine in Arizona, and remain in full compliance with any court ordered criminal probation, payments and other orders.

26. Prior to the termination of Probation, Respondent must submit a written request to the Board for release from the terms of this Order. Respondent's request for release will be placed on the next pending Board agenda, provided a complete submission is received by Board staff no less than 30 days prior to the Board meeting. Respondent's request for release must provide the Board with evidence establishing that he/she has successfully satisfied all of the terms and conditions of this Order. The Board has the sole discretion to determine whether all of the terms and conditions of this Order have been met or whether to take any other action that is consistent with its statutory and regulatory authority.

27. This Order supersedes any and all Consent Agreements previously entered into by Respondent and the Board regarding this matter.

28. The Board retains jurisdiction and may initiate new action against Respondent based upon any violation of this Order. A.R.S. § 32-1401(27)(s).

DATED AND EFFECTIVE this 16th day of August, 2019.

ARIZONA MEDICAL BOARD

By Patricia E. McSorley
Patricia E. McSorley
Executive Director

CONSENT TO ENTRY OF ORDER

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

2. Respondent acknowledges and agrees that this 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 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 Order in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Order.

4. The Order is not effective until approved by the Board and signed by its 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 regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or any other state or federal court.

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

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

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

9. If the Board does not adopt this Order, Respondent will not assert as a defense that the Board's consideration of the Order constitutes bias, prejudice, prejudgment or other similar defense.

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10. Any violation of this Order constitutes unprofessional conduct and may result in disciplinary action. A.R.S. § § 32-1401(27)(s) ("Violating a formal order, probation, consent agreement or stipulation issued or entered into by the board or its executive director under this chapter.") and 32-1451.

11. Respondent acknowledges that, pursuant to A.R.S. § 32-2501(16), Respondent cannot act as a supervising physician for a physician assistant while Respondent's license is on probation.

12. ***Respondent has read and understands the conditions of Probation.***

SHEPHERD G. PRYOR, M.D.

DATED: 7/31/19

EXECUTED COPY of the foregoing mailed this 10th day of August, 2019 to:

Steve Myers, Esq.
Mitchell Stein Carey Chapman, PC
One Renaissance Square
2 North Central Avenue, Suite 1450
Phoenix, AZ 85004

PHP Contractor
Address of Record

ORIGINAL of the foregoing filed this 10th day of August, 2019 with:

Arizona Medical Board
1740 West Adams, Suite 4000
Phoenix, Arizona 85007

Michelle Rosbus
Board staff