# BEFORE THE MISSISSPPI STATE BOARD OF MEDICAL LICENSURE IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

# CHRISTOPHER CONRAD CAPEL, M.D. ORDER OF PROHIBITION

WHEREAS, CHRISTOPHER CONRAD CAPEL, M.D., hereinafter referred to as "Licensee," currently holds Mississippi Medical License Number 15299, said license is valid until June 30, 2020;

WHEREAS, on November 1, 2019, the Mississippi State Board of Medical Licensure (Board) received a letter from the Mississippi Physician Health Program (MPHP) regarding Licensee. MPHP informed the Board that MPHP had withdrawn advocacy for Licensee, effective November 1, 2019;

WHEREAS, the Board is now in possession of evidence establishing that MPHP has withdrawn advocacy due to Licensee violating his Provisional Monitoring Agreement (PMA), as evidenced in the supporting affidavit attached hereto;

WHEREAS, paragraph 16 of the PMA, states, in part:

In the event I {Licensee} should fail to comply with any of the conditions of this agreement, the MSBML shall have the authority, with recommendation from the MPHP/MPHC, to immediately prohibit me from practicing medicine until such time as the MSBML and MPHP determines that I am able to return to the practice of medicine. In so doing, the MSBML and MPHP may require me to undergo further evaluation.

WHEREAS, by virtue of violation of the aforementioned PMA, the Board has the authority to prohibit Licensee from practicing medicine until such time as the Board determines that Licensee may return to the practice of medicine;

NOW, THEREFORE, IT IS HEREBY ORDERED, that, as a result of the afforementioned letter, which is further detailed in the affidavit, Licensee shall be prohibited from the practice of medicine until such time as the Board determines that Licensee may return to the practice of medicine;

IT IS FURTHER ORDERED, that a copy of this Order shall be sent by registered mail or personally served upon CHRISTOPHER CONRAD CAPEL, M.D., and shall be effective immediately upon receipt thereof.

ORDERED this the 11 day of December, 2019.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

Kenneth E. Cleveland, M.D.

**Executive Director** 

## BEFORE THE MISSISSPPI STATE BOARD OF MEDICAL LICENSURE IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

#### CHRISTOPHER CONRAD CAPEL, M.D.

### **AFFIDAVIT**

STATE OF MISSISSIPPI COUNTY OF HINDS

- I, Charles Ware, Investigator, Mississippi State Board of Medical Licensure (Board or MSBML), do hereby make oath that I have reason to believe and do believe:
  - That CHRISTOPHER CONRAD CAPEL, M.D., hereinafter referred to as "Licensee," currently holds Mississippi Medical License Number 15299, said number is valid until June 30, 2020.
  - 2. That in August 2018, the Board initiated an investigation of Licensee's practice of medicine to determine whether Licensee was in compliance with the Administrative Code of the Board as Licensee was conducting invasive procedures considered to be beyond that of Level 1 office-based surgery within his sole-practitioner, private medical clinic, all subject to regulation by MSBML. During a clinic inspection, medical records review, and interview of Licensee, conducted by the Board's Investigator, Licensee's responses to the various questions regarding facets of his practice, and his reliance on subordinate staff and family-employees to answer instead of Licensee, demonstrated confusion, lack of understanding or ignorance of varied requirements upon himself as the Licensee and as a Registrant with controlled substance authority, to maintain

complete and accurate records of patient care, prescribing and controlled substance accountability for inventory as required by Administrative Code, which extended to his inaccurately defining which Schedule certain medications prescribed by Licensee were listed within. Licensee's physical appearance was contrary to that expected for his age, implying possible illness which Licensee did not reveal, thereby resulting in additional inquiries with his former employer and a review of Licensee's telephonically prescribing Hydrocodone/Acetaminophen compound and Clonazepam unto himself, without maintaining a treatment record, with such acts providing indicators of possible impairment of Licensee. As the result of said investigation, an Order of Referral of Licensee for examination by the Board's Examining Committee was undertaken.

That on September 21, 2018, service of the Order of Referral upon Licensee was attempted during normal business hours at his medical office, at which Licensee's spouse, who served as his clinic administrator, was present. She advised Licensee was currently incapacitated at their residence as a result of liver failure, for which he had recently undertaken testing and evaluation for transplantation qualification. Upon this explanation of Licensee's dire condition, she was informed of the purpose of this day's visit as resulting from the inspection visits she was a party to, and she accepted service on Licensee's behalf, as she was told Licensee should review the contents and contact the Examining Committee Chairman designated within the documents.

- 4. That on October 1, 2018, following communications with the Examining Committee Chairman by Licensee and his spouse, with confirmation of his medical condition from his treating physician, and in lieu of his scheduled appearance before that Committee, Licensee voluntarily discontinued his medical practice by signing an Agreement Not to Practice Medicine under conditions set forth in the Mississippi Disabled Physicians Law, Mississippi Code (1972), Ann., § 73-25-53(b). Licensee's liver transplantation surgery was performed in November 2018, but afterwards Licensee suffered injuries from a seizure resulting in several fractured vertebrae and a subdural hematoma. Licensee was taking Hydrocodone and Clonazepam, and admitted consuming alcohol, at the time of the seizure.
- That on January 18, 2019, Licensee met with the Medical Director of the Mississippi Physician Health Program, hereinafter referred to as "MPHP." Thereafter, Licensee entered into a Provisional Monitoring Agreement (PMA) with MPHP, through which MPHP specified recommendations Licensee complete a comprehensive multi-disciplinary substance use evaluation for determination of his fitness for duty. Licensee adamantly denied alcohol use or illicit drug use as contributory to his post-transplant injuries, while stating he was at that time taking prescribed Hydrocodone and Clonazepam, as directed. The Agreement Not to Practice Medicine remained in effect.
- 6. That during the period of March 3 7, 2019, Licensee received an evaluation at Bradford Behavioral Health in Warrior, Alabama. The resulting report rendered diagnoses of Alcohol-Use Disorder, Severe, with Sedative-Hypnotic,

Opioid and Cannabis-Use Disorders; and, Mild Neurocognitive Disorder. The results were addressable under Miss. Code (1972), Ann., §73-25-53. The report recommended Licensee be referred for twelve weeks of residential treatment for substance-use disorder, but due to the cognitive deficits, Licensee should first undergo neurocognitive testing prior to the residential treatment. On April 4, 2019, Licensee initiated a neurocognitive assessment by a psychologist in Jackson, Mississippi, which disclosed marked deficits in processing speed, working memory and executive function. Upon discussion of these findings, Licensee elected not to complete the full battery of neurocognitive tests.

- That in May 2019, MPHP became aware of Licensee's continuing use of cannabis and alcohol, both indicative Licensee was in violation of the Provisional Monitoring Agreement. While an attempt to arrange for an involuntary commitment for treatment by the Court was underway to place Licensee into an appropriate facility, Licensee had himself admitted in mid-June to Cirque Lodge, in Utah, which was not considered by MPHP as well-experienced with the necessary treatment for physicians. On July 19, 2019, Licensee left Cirque Lodge against medical advice. The facility's treatment team recognized the impediment of Licensee's inability to engage in treatment as due to his cognitive impairment.
- 8. That on August 1, 2019, Licensee was admitted to the Legacy Program of Pine Grove Behavioral Health in Hattiesburg, Mississippi, after his repeated discussions with MPHP. Neurocognitive testing was completed on September 17, 2019, with determinations of persistent, severe deficits in processing speed,

working memory, and executive function, with a full-scale IQ over two standard deviations below the expected mean based upon Licensee's level of education and demographic information. The exact cause of his neurocognitive status was not determined, although the combination of his previous hepatic encephalopathy with continued polysubstance use were contributing factors.

- 9. That on September 20, 2019, MPHP was notified of Licensee's attempting to leave Pine Grove Behavioral Health against medical advice, following his admitting to the use of Kratom while engaged in current treatment, and of Licensee's intention to consume alcohol as soon as he left the facility. Pine Grove Staff initiated a 72-hour commitment to the Adult Psychiatric Unit at Pine Grove in response to concerns for the patient's safety. Upon his release from this observation, Licensee was instructed to transfer himself to Nexus Neurorecovery Center in Conroe, Texas, to obtain the specified treatment for his cognitive and addiction-related issues. During October 2019, it became apparent to MPHP that Licensee would not comply with the treatment recommendations to obtain treatment from the designated facility in Texas.
- That on November 1, 2019, the Board received a letter from Scott L. Hambleton, M.D., MPHP's Medical Director, advising the Board that MPHP was withdrawing its advocacy for Licensee's continued unrestricted medical license in Mississippi, as Licensee represents a potential imminent threat to public safety. Furthermore, he recited the foregoing repeated attempts to provide Licensee access to the necessary and appropriate treatment providers to address Licensee's profound cognitive impairment and drug/alcohol addiction,

which were either not completed, abandoned against medical advice or ignored in lieu of Licensee's preference. By his actions, Licensee demonstrated he was unable to comply with the monitoring requirements, resulting in MPHP's inability to continue to monitor Licensee concerning this matter.

11. That Paragraph 16 of the Provisional Monitoring Agreement dated January 18,2019, states, in part:

In the event I {Licensee} should fail to comply with any of the conditions of this agreement, the MSBML shall have the authority, with recommendation from the MPHP/MPHC, to immediately prohibit me from practicing medicine until such time as the MSBML and the MPHP determines that I am able to return to the practice of medicine. In doing so, the MSBML and MPHP may require me to undergo further evaluation.

12. That Paragraph 12 of the Provisional Monitoring Agreement states, in part:

I agree to notify the MPHP/MSBML of any change in my physical or mental health, my residence or place of employment. I further agree to notify MPHP and MSBML in writing, within ten (10) days prior to leaving this state to practice in another state. (Emphasis added)

- 13. That pursuant to Licensee's current contact information of record with the Board, Licensee's residential and mailing address is a specific address in Greenwood, Mississippi. Inquiries by the Board's Investigator determined said address is currently vacant and has been listed for sale for at least two (2) months prior to receipt of the loss of advocacy letter on November 1st.
- 14. That the aforementioned letter withdrawing advocacy concludes with the following, in part:

...Considering the extent of <Licensee's> profound cognitive impairment, and the inability of MPHP to continue to monitor him, it is my belief that <Licensee's> continued unrestricted medical licensure in Mississippi represents an imminent threat to public safety. ... I recommend that the Board

- consider prohibiting <Licensee> from practicing medicine until such time that he successfully completes treatment and regains MPHP advocacy.
- 15. By his signature on the PMA, Licensee understands and recognizes the Board's authority to immediately prohibit Licensee from the practice of medicine until such time that the Board determines Licensee is fit to return to the practice of medicine.

Investigator

Mississippi State Board of Medical Licensure

SWORN TO AND SUBSCRIBED BEFORE ME, this the // day of rances E. Carrelle December, 2019.