



STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE
137 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0137

SHERIDAN R. OLDHAM, M.D.
CHAIRMAN

JOHN ELIAS BALDACCI
GOVERNOR

RANDAL C. MANNING
EXECUTIVE DIRECTOR

October 10, 2007

Shawn Willson, M.D.
101 Foreside Rd.
Falmouth, ME 04105

RE: Completion of Consent Agreement

Dear Dr. Willson:

This is to inform you that the Board of Licensure in Medicine reviewed your request to be released from your Consent Agreement dated July 8, 2003 at the September 2007 Board meeting. Based on the information provided to the Board, they agreed that you have complied with the terms of your Consent Agreement and have successfully completed its requirements. The Consent Agreement has expired, effective September 11, 2007.

The Board will make reports to the National Practitioner Data Bank and to the Federation of State Medical Boards documenting your successful fulfillment and the resulting closure of the Consent Agreement.

Please let me know if you have any questions. I can be reached at (207) 287-6931.

Very truly yours,

Maria A. MacDonald
Investigator

CR 06-240

Cc: David Simmons, M.D.

Maureen Lathrop, Administrative Secretary ✓

STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

IN RE: SHAWN L. WILLSON, M.D.)
)
) AMENDMENT TO
 CONSENT AGREEMENT

This document is an amendment to the Consent Agreement entered into by Shawn L. Willson, M.D., the State of Maine Board of Licensure in Medicine and the Maine Department of Attorney General and approved by the Board on July 8, 2003.

1. Pursuant to the provisions of her Consent Agreement, Dr. Willson submitted a written request to change the frequency of urine monitoring on February 8, 2005. The Consent Agreement provides for random samples once a month. Dr. Willson requested that this schedule be changed from monthly to quarterly samples with the continued provision that random samples may be drawn at any time.

2. The Board considered and approved this request at its meeting on March 8, 2005. Paragraph 3(C)(1) is amended to incorporate the change in substance monitoring from monthly to quarterly.

3. The Consent Agreement is further amended to change Dr. Willson's aftercare treatment from individual therapy to a peer support group of Alcoholics Anonymous or the Caduceus Group for Impaired Physicians.


4. The amendments to the Consent Agreement are based on the Licensee's

long term compliance with her Consent Agreements in Maine, Washington, Colorado and New Hampshire, as well as her nine years of sobriety.

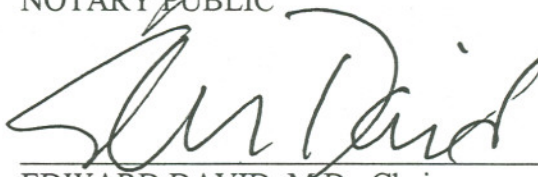
Dated: 4/18/05


SHAWN L. WILLSON, M.D.

Personally appeared before me the above named Shawn L. Willson, M.D. and swore to the truth of the foregoing based upon her own personal knowledge, or upon information and belief, and so far as upon information and belief, she believes it to be true.


NOTARY PUBLIC
MATTHEW S. JONES
NOTARY PUBLIC
MY COMMISSION EXPIRES DEC. 10, 2011

Dated: 5/10/05


EDWARD DAVID, M.D., Chairman
MAINE BOARD OF LICENSURE
IN MEDICINE

Dated: 4/20/05


RUTH E. McNIFF
Assistant Attorney General

**STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE**

IN RE: SHAWN L.WILLSON, M.D.)
) **CONSENT AGREEMENT**
) **FOR**
) **CONDITIONAL LICENSE**

This document is a Consent Agreement and Order, effective when signed by all parties, regarding the issuance of a conditional license to practice medicine in the State of Maine to Shawn L. Willson, M.D.. The parties to the Consent Agreement are Shawn L. Willson, M.D. (the "Licensee"), the State of Maine Board of Licensure in Medicine (the "Board") and the Maine Department of Attorney General.

FACTUAL BACKGROUND

1. Dr. Willson graduated from Kansas City School of Medicine in 1990. After beginning her postgraduate training in obstetrics and gynecology, she completed her training in psychiatry in 1995 at Emory University.
2. From 1995 to 1996, Dr. Willson participated in a psychiatric fellowship and Brigham and Women's Hospital in Chestnut Hill, Massachusetts. During this time, she sustained a back injury and was treated with Vicodin.
3. In 1996, Dr. Willson moved to Washington and began participating in the Washington Physician Health Program because of her Vicodin dependency. She moved to Colorado in 1997 and disclosed her Vicodin dependency on her application for licensure. In June, 1997, the Colorado State Board of Medical Examiners issued a conditioned license to Dr. Willson based on her excessive use of and dependence upon Vicodin. The stipulation required Dr. Willson to abstain from all habit-forming drugs, participate in the Colorado Physician Health Program, have random urine monitoring and a practice monitor. She was a practicing psychiatrist in Colorado until 2000.
4. When she relocated to New Hampshire in 2001, Dr. Willson voluntarily relinquished her Colorado license. The Colorado Physician Health Program has verified that she was fully compliant with the conditions under which her license was issued. Dr. Willson completed a fellowship in forensic psychiatry in New Hampshire in 2002. She also participated in the New Hampshire Physician Health Program from 2001-2002.
5. Dr. Willson applied for an active license to practice medicine in Maine in 2002. She was initially issued a temporary license with the understanding that her permanent license would be conditioned for substance abuse monitoring. She has been involved with the Maine Physician Health Program since September 2002. Pursuant to this Consent Agreement, the Board will grant Dr. Willson a conditional license, based on the same facts and circumstances which gave rise to the Colorado agreement. There have been no new incidents or relapses.

CONDITIONS OF LICENSURE

The Licensee and the Board agree and understand that maintenance of her license shall be conditioned upon the Licensee's compliance with the following conditions of licensure. Except as may be specified below, failure to comply with any of the following conditions shall irrevocably result in the non-renewal or revocation of the Licensee's license to practice medicine in the State of Maine.

1. **ABSTINENCE.** The Licensee agrees that henceforth she shall completely abstain from the use of any and all Prohibited Substances. "Prohibited Substances" as used throughout the Consent Agreement shall mean: opiates; alcohol; cocaine; fentanyl; mood, consciousness or mind-altering substances, whether illicit or not; and all drugs which are dispensed to or prescribed for the Licensee by anyone other than a treating physician knowledgeable of the Licensee's history of substance abuse, unless the circumstances constitute a genuine medical or surgical emergency.

A. **Prescription Medication.** If any controlled drug is dispensed or prescribed for the Licensee for a personal medical condition, the Licensee or the Supervising Physician shall notify the Board by telephone and in writing within 48 hours or as soon thereafter as possible. The notice shall be followed by a written summary of all pertinent circumstances. The Supervising Physician shall be apprised every five days of all continuing pertinent circumstances regarding continued use of the controlled drug, and a written report thereof shall be submitted to the Board for every five days that the use of the controlled drug continues after the initial 48-hour report.

B. **Future Use of Prohibited Substances Shall Result in Loss of Licensure.** The Licensee agrees and understands that any evidence of use at any time in the future, whether in Maine or elsewhere, of any Prohibited Substance shall constitute a violation of the Consent Agreement, which SHALL RESULT IN THE IMMEDIATE, INDEFINITE AUTOMATIC SUSPENSION OF LICENSURE, AND PROOF OF USE SHALL RESULT IN AUTOMATIC REVOCATION/NON-RENEWAL OF LICENSURE.

2. **SANCTION FOR VIOLATION OF LICENSE MODIFICATIONS AND/OR CONDITIONS.**

A. **Automatic Suspension.** Any oral or written report to the Board of violation, technical or otherwise, of these License Modifications and/or Conditions shall result in the immediate, indefinite and automatic suspension of the Licensee's license. The automatic suspension of the Licensee's license shall become effective at the time the Licensee

receives actual notice from the Board that a report of violation has been made. Actual notice can be provided by telephone, in person, in writing, by another means or any combination of the above-referenced means. The indefinite, automatic suspension shall continue until the Board holds a hearing on the matter, unless the Board earlier determines that the report is without merit or decides that no further sanction is warranted.

B. Continued Suspension; Other Sanctions. The Licensee's indefinite automatic suspension shall continue for such time until the Board holds a hearing and reaches a decision. The Board shall attempt to hold a hearing within 60 days of the automatic suspension or as soon thereafter as practicable (unless both the Licensee and the Board agree to hold the hearing later) and shall be held pursuant to the Maine Administrative Procedure Act. The Board may impose such other discipline, including without limitation, fines, further suspension, probation, non-renewal or revocation, as the Board after hearing deems appropriate. By this Consent Agreement, the Licensee expressly accords the Board jurisdiction, concurrent with the Courts, to revoke her license if the Board deems is appropriate.

3. SUBSTANCE MONITORING. The Licensee understands and agrees that she may, for the remainder of her career as a licensed physician, undergo some level of substance monitoring to test whether the Licensee has used a Prohibited Substance, as defined in Paragraph 1. The monitoring shall be through urinalysis testing and/or blood testing, and any other reliable method which may later be developed and approved by the Board.

The Licensee irrevocably agrees that the Board and the Maine Department of Attorney General must have full access to all test data and reports.

Changes in testing to more reliable methods of detection of usage may be proposed by the Licensee or the board and changes shall be made in the Board's discretion, with or without a hearing. It is the Licensee's obligation to ensure that the plan for testing, as stated herein, is complied with in full.

A. Supervising Physician. The Licensee shall propose a Supervising Physician, who shall be approved by the Board (the "Supervising Physician") and who shall have the Licensee appear and provide samples as provided below. The Supervising Physician may appoint designees, who must also be physicians and who must also be approved in advance by the Board.

1. It is the responsibility of the Licensee to ensure that the Supervising Physician or one of the Supervising Physician's approved designees is available to have the Licensee appear and provide urine samples as required by the Consent Agreement. In the event neither the Supervising Physician nor any designee is available (or anticipated to be available) at the given time to be responsible for urine monitoring, the Licensee shall contact by telephone as soon as possible (followed up within 24 hours by writing) the Board Executive Director or Assistant Executive Director. The Licensee shall by telephone

resolve with the Board Executive Director or Assistant Executive Director a plan for urine monitoring to be used for the duration of time that the Supervising Physician and all designees are unavailable. Under no circumstances shall the Licensee fail to provide a urine sample to some person pursuant to the plan which is preapproved by the Board Executive Director or Assistant Executive Director.

B. Process. All urine and blood samples shall be handled through legal chain of custody methods. All samples provided shall be analyzed by a certified laboratory which regularly handles these types of tests, and tests shall be conducted by such reliable methods as exist. Any changes must be approved by the Board.

C. Frequency of Urine Testing. It is the Licensee's obligation to ensure that all the samples are given and test occur as specified and that the random samples are in fact random and that they are provided within six (6) hours after notice to the Licensee (without any foreknowledge by the Licensee) and are of at least the frequency required. Failure to maintain this schedule or the random nature of the tests shall be cause for suspension, non-renewal or revocation of Dr. Willson's license, unless proof of genuine emergent medical circumstances (for the Licensee or a patient of her) exist which warrants less serious disciplinary actions being taken by the Board.

1. For a period of four (4) years from the effective date of this Agreement, urine samples shall be provided at least once each month. Further, the Board or the Supervising Physician may request random samples drawn at any time.

2. Following the period of four (4) years from the effective date of this Agreement, the Board or the Supervising Physician may request random samples provided at any time.

3. The frequency of urine testing shall continue as outlined herein even while the Licensee is on vacation or other leave of absence. He shall be responsible for making arrangements such that the testing is carried out with the frequency and standards outlined in the Consent Agreement.

D. Blood Testing. It is the Licensee's obligation to ensure that all of the samples are given and tests occur as specified and that the random samples are in fact random and that they are provided within six (6) hours after notice to the Licensee (without any foreknowledge by the Licensee) and are of at least the frequency required. Failure to maintain this schedule or the random nature of the tests shall be cause for suspension, non-renewal or revocation of Dr. Willson's license, unless proof of emergent medical circumstances (for the Licensee or her patient) exist which warrants less serious disciplinary action being taken by the Board.

1. Frequency of Blood Samples and Testing.

a. Blood samples must be drawn any time a test evidences any level of a Prohibited Substance.

b. Blood samples must be drawn any time the Supervising Physician or the Board deems one is warranted.

E. Visual Samples. The Licensee shall provide each urine and blood sample in the physical presence and under the direct observation of the Supervising Physician or her/her designee who shall visually observe the Licensee providing the sample. Otherwise, the sample shall be deemed unacceptable and the Licensee shall immediately provide another sample. Any such occurrence shall be reported to the Board by the Licensee and by the Supervising Physician, both by telephone and in writing within 24 hours or as soon thereafter as possible. In addition, the unacceptable sample shall be retained and tested, with the intention that the tests of the unacceptable and the acceptable samples both be sent upon completion to the Board.

F. Second Sample. At the same time as each urine and blood sample is taken, the Licensee must provide a second sample (or shall have provided sufficient quantity to constitute a valid second sample), which shall also be taken in the physical presence and under the visual observation of the person collecting the sample. Responsibility for providing a second sample shall be the Licensee's. The second urine or blood sample shall be frozen (or maintained by other appropriate means approved by the Board), stored in a controlled setting, kept under a legal chain of custody, inaccessible to the Licensee, and shall be stored for subsequent testing in the event the first sample tests positive for a Prohibited Substance.

(1) Testing the Second Sample. The Executive Director of the Board shall designate where the test of the second sample shall be executed.

G. Standards for Tests. Standards for detectable levels of Prohibited Substances for which the urine and blood samples shall be tested shall be set forth in the Licensee's written, preapproved plan for substance monitoring.

H. Reporting Test Results.

1. Immediate Report of Positive Test Results. Any test result evidencing any level of a Prohibited Substance, whether by urine sample, intoxilyzer sample, or blood sample, shall be reported to the Board by the Supervising Physician by telephone and in writing within 24 hours or as soon thereafter as possible.

2. Reporting Negative Test Results. Written reports of all tests shall be sent to the Board monthly by the Supervising Physician, together with an explanation of the

dates and times samples were provided and tests made, the type(s) of tests made, and the substances tested for (together with detectable levels tested for), and the test results. The Licensee shall ensure that all reports are made to the Board in a timely fashion.

3. Confidentiality Waived. With regard to the Board and its agents and any process to be pursued by the Board, the Licensee hereby waives all claims of confidentiality and privilege with respect to all tests taken pursuant to this Consent Agreement.

4. Retention of Reports. All original laboratory data and test reports shall be permanently retained by the Supervising Physician.

I. Rebuttable Presumption Raised by Positive Test. It is agreed and understood that a test (whether by urine sample or blood sample) evidencing any Prohibited Substance, when confirmed, shall raise a rebuttable presumption that the Licensee in fact used such substance. Such a positive test result shall alone be sufficient to prove the use of the Prohibited Substance by the Licensee. The Licensee further agrees that the result of the test may be admitted into evidence in any proceeding regarding the Licensee's license, whether before the Board or before a Court of competent jurisdiction. The confirmatory test shall be performed immediately upon any initial positive test result.

J. Immediate, Indefinite, Automatic Suspension for Positive Test. If any urine or blood test is positive (i.e., in any manner evidences any use of any Prohibited Substance), then the result shall be the immediate, indefinite, automatic suspension of the Licensee's license, which shall continue until the Board holds a hearing on the matter, unless the Board, or the Board Secretary and the Department of Attorney General, earlier determine that the report is without merit. The suspension shall begin the moment the Licensee first learns of a positive test or report of a positive test to the Board, whether from the Supervising Physician or her/her designee, from the Board or from any other source in writing, orally or by any other means. This shall include non-confirmed, positive tests.

K. Board Hearing to Determine if Licensee Used Any Prohibited Substance. After receiving a positive report evidencing use by the Licensee of any Prohibited Substance, the Board shall investigate the situation, including demanding a response from the Licensee. The Board shall attempt to hold a hearing within 60 days of the automatic suspension or as soon thereafter as practicable (unless both the Licensee and the Board agree to hold the hearing later) and it shall be held pursuant to the Maine Administrative Procedure Act. By this Consent Agreement, the Licensee expressly accords the Board jurisdiction, concurrent with the Courts, to revoke her license if it determines he used any Prohibited Substance.

L. Failure to Maintain Sampling Schedule or Failure to Appear or to Provide Sample. Failure by the Licensee: to maintain the sampling schedule; to appear

when demanded to provide a sample; to appear within two hours of being so notified; or to provide samples upon being demanded to do so shall be dealt with as follows:

1. Failure to Maintain Sampling Schedule. It is the Licensee's responsibility to ensure that both the schedule for sampling and the random sampling required are maintained.

a. Report. If the scheduled samples or the random samples are not drawn as required, then the Supervising Physician or her/her designee and the Licensee (and any other person knowledgeable of such failure) must telephone the Board as soon as possible and send to the Board a written report of such failure within 48 hours.

b. Suspension. An immediate, indefinite suspension of licensure shall result from any failure by the Licensee to comply with the mandated schedule of samples or if the random samples are not provided as required. The suspension shall begin the moment the Licensee actually learns a report has been made or sent to the Board.

c. Meeting with Board. Both the Licensee and the Supervising Physician (and the responsible designee, if any) shall appear before the Board regarding this situation at its next regularly scheduled Board meeting, unless the next meeting is to be held within 15 days of the suspension, in which case they may be scheduled to appear at the subsequent regularly scheduled Board meeting.

d. Board Action. The Board may order the Licensee's license reinstated or, if appropriate, may continue the suspension and may set the matter for hearing. The Board shall attempt to hold a hearing within 60 days of the automatic suspension, or as soon thereafter as practicable, at which time it may take such action as it deems appropriate, including without limitation reinstatement, fines, probation, suspension, non-renewal and revocation.

2. Failure to Appear.

a. Report and Meeting with Board. The Licensee and the Supervising Physician (and the responsible designee, if any) must, telephone the board as soon as possible and send to the board a written report of such occurrence within 48 hours, and both the Licensee and the Supervising Physician shall appear before the Board, regarding any failure to appear when demanded to provide a sample, at the next regularly scheduled Board meeting, unless the next meeting is to be held within 15 days of the report, in which case they may be scheduled to appear at the subsequent regularly scheduled Board meeting.

b. Suspension. An immediate, indefinite suspension of licensure shall result from any failure by the Licensee to appear for a scheduled or randomly ordered

test, unless the Licensee and the Supervising Physician present the failure as having been caused by a genuinely emergent circumstance beyond the Licensee's control, as long as the Licensee appeared within six hours of the resolution of the emergency. Except in this instance, the suspension shall begin the moment the Licensee actually learns a report has been made or sent to the Board.

c. Board Action. The Board may order the Licensee's license reinstated or, if appropriate, may continue the suspension and set the matter for hearing. The Board shall attempt to hold a hearing within 60 days of the automatic suspension, or as soon thereafter as practicable, at which time it may take such action as it deems appropriate, including without limitation reinstatement, fines, probation, suspension, non-renewal and revocation.

3. Failure to Provide Sample.

a. Report and Meeting with Board. The Licensee and the Supervising Physician (and the responsible designee, if any) shall telephone the Board as soon as possible and send to the Board a written report of any occurrence regarding failure or refusal to provide a sample within 48 hours, and both the Licensee and the Supervising Physician shall appear before the Board at the next regularly scheduled Board meeting, unless the next meeting is to be held within 15 days of the report, in which case they may be scheduled to appear at the subsequent regularly scheduled Board meeting.

b. Second Opportunity to Provide Urine Sample. If the Licensee appears when scheduled or ordered, but fails to provide an adequate sample, then with regard to urine, after accurate notation of any and all substances consumed (no substance shall be consumed which might affect the accuracy of the tests to be performed), a second opportunity to provide a urine sample shall be given after a reasonable time, not to exceed two hours. A repeat failure, or any refusal, shall result in an immediate, indefinite suspension of licensure. The suspension shall begin the moment of the occurrence.

c. Board Action. The Board may order the Licensee's license reinstated, or, if appropriate, may continue the suspension and set the matter for hearing. The Board shall attempt to hold a hearing within 60 days of the automatic suspension, or as soon thereafter as is practicable, at which time it may take such action as it deems appropriate, including without limitation reinstatement, fines, probation, suspension, non-renewal and revocation.

M. Amendment of Testing Provisions. Upon written application by the Licensee to the Board, the Board may amend the above agreed conditions for testing as long as such changes are otherwise consistent with the schedule set forth in this Consent Agreement. Amendment from the conditions shall be in the discretion of the Board and shall be based upon such information as the Board deems pertinent. A decision may be made by the Board, in its discretion, with or without providing a hearing. The Board can

propose Amendment(s), which may or may not be agreed to by the Licensee.

N. **Increasing Testing.** For good cause shown (i.e., questionable reports or problems with providing samples), the Board can, in its discretion, without hearing, unilaterally increase the frequency of testing to the highest levels contemplated by this Consent Agreement, and may also add an additional four random tests per month. In addition, the Board may, in its discretion, without a hearing, extend the periods of testing by up to an additional five years.

4. **PROFESSIONAL MANAGEMENT.**

A. **Aftercare Treatment Sessions.** The Licensee agrees to submit for Board approval the name of a licensed individual or agency in the treatment of substance abuse with whom the Licensee shall consult and counsel for the purpose of working on all issues pertaining to the Licensee's chemical dependency, including the Licensee's compliance with this Consent Agreement, which consultations shall be ^{twice} monthly for one year beginning on the effective date of this Agreement and at least annually for the following four years. *sw*

B. **Amendment of Aftercare Treatment Requirements.** After two years, upon written application to the Board by the Licensee, the Board may amend this schedule. Amendment shall be in the discretion of the Board and shall be based upon such information as the Board deems pertinent. A decision may be made with or without providing a hearing.

C. **Change of Specialist.** If the Licensee proposes to change the Specialist, then the Licensee shall make written application to the Board, including among other things a letter from the Licensee regarding her reasons for requesting such change and separate letters from the current Specialist and the proposed new Specialist relative to their understanding of the reasons for this request and, to the extent applicable, any concerns they may have. The Board may in its discretion grant or deny such request with or without providing a hearing. If the request is denied, nothing precludes the Licensee from proposing another Specialist. In requesting a change of Specialist, the Licensee understands that the Board may inquire into any issues it deems pertinent with any person, including, without limitation, the current Specialist.

D. **Reports from the Specialist.** Beginning one month from the date hereon and continuing thereafter, within a month after every session, the Specialist shall submit to the Board a written report regarding the Licensee's compliance with her schedule of meetings, the Licensee's competency to continue practicing medicine, and the prognosis of the Licensee's continued recovery.

E. **Board Investigation.** At any time the Board may deem appropriate, the Board or its agent may contact the Licensee and/or the Specialist to receive further information relative to the Licensee. In addition, if the Board deems it appropriate, it may

meet to inquire directly of the Specialist about the Licensee's progress.

5. SELF-HELP GROUP MEETINGS.

A. Attendance at AA and NA. ~~The Licensee agrees to attend Alcoholics Anonymous ("AA") a minimum of three times each week through one year from the effective date of this agreement, and at least once each week through four years thereafter.~~ sw

B. Impaired Physicians Self-Help Group. The Licensee agrees that he shall attend self-help group meetings of an impaired medical professional group, if available, on a regular basis for the term of this agreement, which is 5 years. ~~Meetings of the impaired professional self-help groups may be substituted on a one-for-one basis with meetings of AA or NA.~~ sw

C. Reports of Attendance. Beginning three months from the date hereon and continuing every three months thereafter, the Licensee shall submit to the Board a signed, written quarterly report of her attendance at AA, NA or impaired professional self-help group meetings. Any instances of failure to attend the required numbers of meetings shall be noted, together with specific explanation detailing reasons.

D. Failure to Meet This Requirement. It is the parties' understanding that periodically reasonable explanations may exist for occasionally missing a meeting; however, unexcused continuous or repeated failures to comply with the requirements of this section of the Consent Agreement shall constitute a violation of the Consent Agreement which, after hearing before the Board, can result in licensure discipline, including without limitation a fine, suspension, non-renewal, probation or revocation of the Licensee's conditional license.

6. MAINTENANCE OF OBLIGATIONS WHEN AWAY FROM MAINE OR HOME. It is the intention of the parties that the Licensee's obligations regarding substance monitoring and self-help group meetings shall be maintained regardless of whether the Licensee is in Maine. For instance, if the Licensee is going on a business trip or a vacation, it shall be the Licensee's and the Supervising Physician's obligation to ensure that arrangements are made consistent with this Consent Agreement in such other location(s) to ensure the continuation and satisfaction of her obligations under this Consent Agreement. Any such occurrences shall be noted in writing sent to the Board explaining the arrangements made, followed by a separate writing detailing how the arrangements were carried out.

A. It is the parties' intention that the Licensee notify the Board in writing in advance of departure regarding the arrangements made. Failure to do so in advance shall be excused only for good cause shown.

B. Failure to meet the conditions outside of Maine shall be dealt with in the same manner as failure otherwise to maintain the obligations of this Consent Agreement.

7. **INVOLVEMENT IN THE MAINE COMMITTEE ON PHYSICIANS' HEALTH.** The Licensee shall continue her contractual involvement with the Maine Committee on Physicians' Health as long as any term of this Consent Agreement remains in force. The Licensee is encouraged to actively participate in the Committee.

8. **MONITORING OF BEHAVIOR.** The Licensee agrees that her behavior will be monitored by a physician, approved by the Board, who is in contact with the Licensee on an average of four or five times a week. This physician will agree to inform the Board if the Licensee demonstrates any signs of withdrawal or behavior change which could result from the use of a Prohibited Substance. The monitoring physician shall report such information by telephone and in writing within 24 hours or as soon thereafter as possible.

9. **NOTICE TO HOSPITALS.** Within 10 days after execution of this agreement by the Board and approved by the Department of Attorney General, the Licensee shall provide a copy of this Consent Agreement to:

A. **The Hospital.** Notice to all hospitals at which the Licensee shall practice be provided, at a minimum, to the Hospital CEO and the Chief of Medicine.

B. **Others.** Any other entity or person involved in the monitoring or treatment process which or whom the Board deems appropriate shall receive and review this Consent Agreement.

10. **DESIGNATED COPY OF CONSENT AGREEMENT.**

A. **Reading and Signing the Consent Agreement by Others.** The Licensee shall have each person set forth in Paragraph 9 above read, date, and sign a copy of the Consent Agreement (the "Designated Copy"). The Designated Copy shall also be read and signed by the Supervising Physician, all designees and by the Evaluator. The original Designated Copy which is signed by the above-referenced persons shall at all times be kept on file at the Licensee's office and shall be subject to inspection upon request of the Board or its agent. A copy of the signature page shall be made and sent to the Board. The Licensee agrees that if new individuals assume the roles set forth in Paragraph 9 during the existence of this Agreement, such individuals shall also read, date and sign the Agreement.

11. The Licensee shall be required to maintain her Maine license to practice as a physician for as long as this Agreement is in effect. In the event that Dr. Willson applies for licensure in other jurisdictions during the pendency of this Agreement, he shall notify said jurisdiction of the existence of this Agreement.

12. **REQUIREMENT REPORT.** The Licensee agrees and hereby irrevocably directs that IF ANYONE HAS REASON TO SUSPECT THAT THE LICENSEE HAS USED A PROHIBITED SUBSTANCE OR HAS OTHERWISE VIOLATED THIS CONSENT AGREEMENT, SUCH PERSON MUST REPORT THE LICENSEE TO THE BOARD WITHIN 24 HOURS OR AS SOON THISEAFTER AS POSSIBLE, SUCH REPORT SHALL BE MADE BY TELEPHONE AND IN WRITING. ALL PERTINENT FACTS AND CIRCUMSTANCES SHALL BE REPORTED TO THE BOARD.

13. **WAIVER OF CONFIDENTIALITY AND RELEASE OF RECORDS.** The Licensee agrees and understands that the Board and the Department of Attorney General shall have complete access to the Licensee's present and future personal medical and counseling records regarding chemical dependency and to all otherwise confidential data pertaining to treatment or monitoring of the Licensee for chemical dependency.

14. **BOARD'S JURISDICTION.** The Licensee acknowledges that the Board has jurisdiction over her license. In consideration for the Board's issuing to the Licensee her license pursuant to this Consent Agreement, the Licensee agrees that, as regards any alleged violation of this Consent Agreement, the Board is granted jurisdiction to revoke her license or take such other disciplinary action as is available to the Courts. The Board may also, if it deems it preferable, refer such matter for action in Court.

15. **MISCELLANEOUS PROVISIONS.**

A. **Notice.** Unless otherwise specified in this Consent Agreement, written notice shall be deemed served upon mailing by first class mail, postage prepaid.

1. **Notice to the Board:**

State of Maine Board of Licensure in Medicine
Attention: Executive Director
137 State House Station
Augusta, Maine 04333-0137
Telephone: (207) 287-3601

2. **Notice to the Licensee:**

Shawn Wilson, MD
16 Woodlands Drive
Falmouth, ME 04105

Tel: 207-450-2992
207-181-5205

SW

B. **Address Change.** If the Licensee changes jobs, moves her residence, moves her office practice, changes telephone numbers at work or at home, or secures privileges at a hospital, the Licensee shall provide notice to the Board within two weeks after such occurrence.

C. **Costs.** All costs incurred in performance of the Modifications and Conditions of this Consent Agreement shall be borne by the Licensee. If a violation of this Consent Agreement is proven to have occurred, regardless of the sanctions imposed, the Licensee shall reimburse the Board for all costs and attorney's fees incurred in proving such violation.

D. **Hearings.** Unless otherwise specified, hearings shall be held consistent with the Maine Administrative Procedure Act.

E. **Severance.** If any clause of this Consent Agreement is deemed illegal or invalid, then that clause shall be deemed severed from this Consent Agreement.

16. **AMENDMENT OF CONSENT AGREEMENT.** This Consent Agreement cannot be amended orally. It can be amended only by a writing signed by the parties hereto and approved by the Department of Attorney General.

A. Requests for amendments made by the Licensee shall be made in writing submitted to the Board.

B. The Board may also propose amendments by sending a written proposal to the Licensee.

17. **ADVICE OF COUNSEL.** The Licensee has been informed that he has the right to legal counsel.

18. **WAIVER OF RIGHT TO APPEAL BOARD'S DECISION AND CERTAIN FUTURE BOARD DECISIONS.** In regard to all terms and conditions of this Consent Agreement, the Licensee waives any further hearings or appeal to the Court regarding her Application for Licensure and the Conditional License issued hereunder. Nothing in this paragraph shall be deemed a waiver of the Licensee's rights under rule, statute or the Maine or United States Constitutions, to appeal a decision or action later taken by the Board subsequent to licensure except as the Licensee may have agreed herein, such as with discretionary decisions by the Board and which may occur with or without a hearing, increased jurisdiction of the Board to revoke her license for violation of this Consent Agreement. The Licensee agrees that this Consent Agreement and Order is a final order resolving the Licensee's application for Licensure.

I, SHAWN L.WILLSON, M.D., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT. I UNDERSTAND THAT BY SIGNING, I WAIVE CERTAIN RIGHTS. I SIGN IT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS CONSENT AGREEMENT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

Dated: 7/3/03

Shawn Willson, M.D.

STATE OF MAINE

Cumberland, ss.

Dated: July 3, 2003

Personally appeared before me the above named SHAWN L.WILLSON, M.D. and swore to the truth of the foregoing based upon her own personal knowledge, or upon information and belief, and so far as upon information and belief, he believes it to be true.

AWL
Maine Bar No 3283

~~Notary Public~~

APPROVED:

STATE OF MAINE BOARD OF
LICENSURE IN MEDICINE

By: 
Edward David, M.D., Chairman

APPROVED: Effective 7/8/03

STATE OF MAINE DEPARTMENT
OF ATTORNEY GENERAL

Dated: 7/8/03

By: 
Ruth E. McNiff
Assistant Attorney General