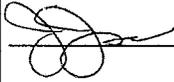


1 Travis Stiegler, D.O.
2 Address of record

3 Copy of the foregoing "Amendment to Consent Agreement and Order for Probation" sent by regular mail
4 this 14th day of February, 2014 to:

5 Jeanne Galvin, AAG
6 Office of the Attorney General CIV/LES
7 1275 West Washington
8 Phoenix AZ 85007

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1 2. On behalf of the Board, the Executive Director may enter into a consent order
2 with a licensee to protect the public and to ensure that the licensee is able to safely perform
3 health care tasks. A.R.S. § 32-1804(B)(24).

4
5 **NOW, THEREFORE, IT IS ORDERED AND AGREED AS FOLLOWS:**

6 Pursuant to A.R.S. § 32-1855 (C), License No. 005517 held by TRAVIS STIEGLER,
7 **D.O.**, is placed on **PROBATION** for 5 years from the effective date of this Order, with the
8 following terms:

9 1. **Practice Restriction.** Physician's practice is restricted as follows:

10 a. Physician may practice up to thirty (30) hours per week of scheduled time.

11 2. **Participation in Monitored Aftercare:**

12 3. Physician shall promptly participate in the Board's monitored aftercare
13 program. As part of participation, Physician shall cooperate with Board Staff. Physician may
14 substitute monitoring of terms 4 through 17 by Post Treatment Supervision/Greenberg and
15 Sucher, PC, effective the date a copy of signed contract with PTS is provided to Board Staff.

16 4. **12 Step or Self-Help Group Meetings:** Physician shall participate in a
17 minimum of three 12-step meetings or other self-help group meetings per week appropriate for
18 alcohol/substance abuse and approved by Board Staff. Physician shall attend 90 meetings in 90
19 days beginning not later than either (a) the first day following Respondent's discharge from
20 chemical dependency treatment or (b) that effective date of this Order.

21 5. The log of attendance at those meetings shall be initialed by the meeting leader.
22 After successful completion of those 90 meetings, additional meetings shall be completed under
23 such terms and within such time frame as recommended by Board Staff after reviewing the
24 updated evaluation.

1 6. **Relapse Prevention Meetings:** Physician shall participate in Relapse
2 Prevention Meetings for health care professionals approved by the Executive Director, under
3 such terms and within such time frame as recommended by the Board approved psychologist.

4 7. **Board /Staff approved Psychological counseling:** Physician shall promptly
5 obtain a licensed psychiatrist, psychologist or counselor, and submit the name of that person to
6 the Board staff for approval. Physician shall cause that psychiatrist, psychologist or counselor to
7 submit to the Board an initial assessment of Physician within 10 days of this Order, and quarterly
8 statements of progress thereafter. Physician shall continue participation as recommended by the
9 psychiatrist, psychologist or counselor.

10 8. If medications are prescribed by a psychiatrist, Physician shall report those to
11 his Primary Care Provider (see section 9) and the Board staff within 48 hours. The notification
12 shall contain all information required for the medication log entry specified in paragraph 12.
13 Physician shall request that the notification be made a part of the PCP's medical record.

14 9. **Board /Staff Approved Primary Care Physician:** Physician shall promptly
15 obtain a primary care physician (“PCP”) and shall submit the name of the physician in writing to
16 Board Staff for approval. The PCP shall not be in the same office practice as the Physician, nor
17 related to the Physician by blood or marriage. The PCP shall be in charge of providing and
18 coordinating Physician’s medical care and treatment. Except in an *Emergency*, Physician shall
19 obtain medical care and treatment only from the PCP and from health care providers to whom
20 Physician is referred by the PCP. Physician shall request that the PCP document all referrals in
21 the medical record. Physician shall promptly inform the PCP of Physician’s rehabilitation efforts
22 and provide a copy of this Agreement to the PCP. Physician shall also inform all other health
23 care providers who provide medical care or treatment that Physician is under this Order.

24 “*Emergency*” means a serious accident or sudden illness that, if not treated immediately,
25 may result in a long-term medical problem or loss of life.

1 10. **Medication:** Except in an *Emergency*, Physician shall take no *Medication*
2 unless the PCP or other health care provider to whom the PCP refers Physician prescribes the
3 *Medication*. In the case of over-the-counter medications, Physician shall provide to his PCP a
4 list of over-the-counter *Medications* currently taken; PCP shall review and approve those and
5 recommend any new *Medications* needed. Physician shall not self-prescribe any *Medication*.

6 “*Medication*” means a prescription-only drug, controlled substance, and over-the counter
7 preparation, other than plain aspirin, plain ibuprofen, and plain acetaminophen.

8 11. If a controlled substance is prescribed, dispensed, or is administered to
9 Physician by any person other than the PCP, Physician shall notify the PCP in writing within 48
10 hours and notify the Board staff immediately. The notification shall contain all information
11 required for the medication log entry specified in paragraph 11. Physician shall request that the
12 notification be made a part of the medical record. This paragraph does not authorize Physician
13 to take any *Medication* other than in accordance with paragraph 9.

14 12. **Medication Log:** Physician shall maintain a current legible log of all
15 *Medication* taken by or administered to Physician, and shall make the log available to Board
16 Staff upon request. For *Medication* (other than controlled substances) taken on an on-going
17 basis, Physician may comply with this paragraph by logging the first and last administration of
18 the *Medication* and all changes in dosage or frequency. The log, at a minimum, shall include the
19 following:

- 20 a. Name and dosage of Medication taken or administered;
- 21 b. Date taken or administered;
- 22 c. Name of prescribing or administering physician;
- 23 d. Reason Medication was prescribed or administered.

24 This paragraph does not authorize Physician to take any *Medication* outside the parameters of
25 this Order.

1 13. **No Alcohol or Poppy Seeds:** Physician shall not consume alcohol or any food
2 or other substance containing poppy seeds or alcohol. It is Physician's responsibility to be aware
3 of and avoid alcohol used in personal hygiene products or in the preparation of food or drink.

4 14. **Biological Fluid Collection:** During all times that Physician is physically
5 present in the State of Arizona and such other times as Board Staff may direct, Physician shall
6 promptly comply with requests from Board Staff to submit to biological fluid collection. If
7 Physician is directed to contact an automated telephone message system to determine when to
8 provide a specimen, Physician shall do so within the hours specified by Board Staff. For the
9 purposes of this paragraph, in the case of an in-person request, "promptly comply" means
10 "immediately". In the case of a telephonic request, "promptly comply" means that, except for
11 good cause shown, Physician shall appear and submit to specimen collection not later than two
12 hours after telephonic notice to appear is given. The Board in its sole discretion shall determine
13 good cause. The Board staff may require the collection to be observed or witnessed.

14 15. Physician shall cooperate with collection site personnel regarding biological
15 fluid collection. Repeated reports from collection site personnel that Physician is not
16 cooperating regarding collection may be considered failure to comply with this Order (see
17 paragraph 25).

18 16. Physician authorizes any person or organization conducting tests on the
19 collected samples to provide testing results to the Board.

20 17. **Relapse:** For the purpose of this Order, the positive finding in Physician's
21 biological fluid of a drug or medication not prescribed to the Physician in accordance with this
22 Order shall be considered proof of a relapse. In the event of a chemical dependency relapse by
23 the Respondent, or Respondent's use of drugs or alcohol in violation of the Order, Respondent's
24 license shall be SUMMARILY SUSPENDED pending a formal administrative hearing for
25 revocation. In the alternative, Respondent may SURRENDER his license if he agrees in writing
to being impaired by alcohol or drug abuse.

1 18. **Payment for Services:** Physician shall pay for all costs associated with
2 participating in this Probation, at time service is rendered, if required, or within 30 days of each
3 invoice sent to Physician.

4 19. **Out of State Travel and/or Unavailability at Home or Office Telephone**
5 **Number:** Physician shall provide Board Staff at least three business days advance written
6 notice of any plans to be away from the office or home when such absence would prohibit
7 Physician from responding to an order to provide a biological fluid specimen or from responding
8 to communications from the Board. The notice shall state the reason for the intended absence
9 from home or office, and shall provide a telephone number that may be used to contact
10 Physician.

11 20. **Examination:** Physician shall submit to mental, physical, and medical
12 competency examinations at such times and under such conditions as directed by the Executive
13 Director to assist in monitoring compliance with the terms of this Agreement and Physician's
14 ability to safely engage in the practice of medicine.

15 21. **Treatment:** Physician shall submit to all medical, substance abuse, and mental
16 health care and treatment ordered by the Board or Executive Director.

17 22. **Obey All Laws:** Physician shall obey all federal, state and local laws, and all
18 rules governing the practice of medicine in the State of Arizona.

19 23. **Interviews:** Physician shall appear in person before the Board and or Board
20 staff for interviews upon request, upon reasonable notice.

21 24. **Address and Phone Changes, Notice:** Physician shall immediately notify the
22 Board in writing of any change in office or home addresses and telephone numbers.

23 25. **Ceasing Practice in the State of AZ:** In the event that Physician ceases to
24 practice medicine in the State of Arizona, by moving out of state, failing to renew her license, or
25 maintaining an AZ license but ceasing to practice clinical medicine or administrative medicine
requiring licensure, Physician shall notify the Board that he has ceased practicing in AZ, in

1 writing, within 10 days of ceasing to practice. In its sole discretion, the Board may stay the terms
2 of this Order until such time as the Physician resumes the practice of medicine in AZ, or may
3 take other action to resolve the findings of fact and conclusions of law contained in this Consent
4 Agreement and Order for Probation.

5 26. **Failure to Comply / Violation**: Respondent's failure to comply with the
6 requirements of this Order shall constitute an allegation of unprofessional conduct as defined at
7 A.R.S. § 32-1854(25); proven violations may be grounds for further disciplinary action (e.g.,
8 suspension or revocation of license).

9 EFFECTIVE AND ISSUED THIS 1st DAY OF March, 2013.

10 STATE OF ARIZONA
11 BOARD OF OSTEOPATHIC EXAMINERS
12 IN MEDICINE AND SURGERY



13 By: Jenna Jones
14 Jenna Jones, Executive Director

15
16
17 Original "Consent Agreement and Order for Probation"
18 filed this 1st day of March, 2013 with the:

19 Arizona Board of Osteopathic Examiners in Medicine and Surgery
20 9535 East Doubletree Ranch Road
21 Scottsdale AZ 85258-5539

22 Copy of the foregoing "Consent Agreement and Order for Probation"
23 Sent via ~~U.S. Mail~~ this 1st day of March, 2013 to:
24 Hand delivered

25 Travis Stiegler, D.O.
Address of Record

Copy of the foregoing "Consent Agreement and Order for Probation"
sent via interagency mail this 1st of March, 2013 to:

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Sarah Selzer, Asst Attorney General
Office of the Attorney General CIV/LES
1275 West Washington
Phoenix AZ 85007