

# LOUISIANA STATE BOARD OF MEDICAL EXAMINERS

630 Camp Street, New Orleans, LA 70130  
Mailing Address: Post Office Box 30250, New Orleans, LA 70190-0250  
www.lsbme.la.gov



Department of Investigations  
Telephone: (504) 568-6820  
FAX: (504) 568-5754

**No. 11-I-756**

---

**IN THE MATTER OF:**

**ANTHONY DEWAYNE ANDERSON, LRT**  
*Applicant*

---

**CONSENT ORDER FOR  
ISSUANCE OF RESPIRATORY  
THERAPY LICENSE  
ON PROBATION**

---

This matter is before the Louisiana State Board of Medical Examiners (the "Board") on the application of Anthony Dewayne Anderson ("Mr. Anderson") for a license to practice as a respiratory therapist ("LRT") in this state. While a review of the materials submitted in support of his application indicates that he satisfies the educational and other requirements necessary for licensure consideration, Mr. Anderson only disclosed one prior criminal conviction when his criminal record check revealed other arrests not disclosed. He has cooperated with this investigation by providing all records as requested. He has completed an evaluation at a Board approved facility and his treating professionals have expressed the opinion that he can practice respiratory therapy with skill and safety. It is noted that the last arrest occurred over five years ago and there have been no further incidents. Mr. Anderson is amenable to a license being issued on probationary status and has expressed a willingness, if licensed as a respiratory therapist in Louisiana, to submit to on-going monitoring.

As evidenced by his subscription hereto, Mr. Anderson acknowledges the substantial accuracy of the foregoing information and that proof of such information upon administrative evidentiary hearing could establish sufficient cause for the rejection or denial of his application for licensure as a respiratory therapist in this state or such other action as the Board may deem appropriate, pursuant to the Louisiana Respiratory Therapy Practice Act La. Rev. Stat. §37:3358.<sup>1</sup>

---

<sup>1</sup> La. Rev. Stat. §37:3358(A) provides that the board may deny, refuse to renew a license, may suspend, revoke, or impose probationary conditions on a license if the licensee or applicant for license has been found guilty of unprofessional conduct which has endangered or is likely to endanger the health, welfare, or safety of the public. Such unprofessional conduct shall include:  
(5) Perjury, fraud, deceit, misrepresentation, or concealment of material facts in obtaining a license to practice respiratory therapy.

(19) Violation of any rules and regulations of the board or any provisions of this Chapter.

The Board's rules also prescribe such conduct as well, La. Adm. C. §§46XLV:5519.A.5, and 13.

Recognizing his right to have administrative adjudication of the above charges, at which time he would be entitled to be represented by legal counsel, to call witnesses and to present evidence on his own behalf in defense or in mitigation of the charges made and to a decision thereon by the Board based upon written findings of fact and conclusions of law, pursuant to La. Rev. Stat. §§49:951, *et seq.*, Mr. Anderson, nonetheless, hereby waives his right to notice of charges, formal adjudication and written decision and, pursuant to La. Rev. Stat. §49:955(D), consents to entry of the Order set forth hereinafter. Moreover, by his subscription hereto, Mr. Anderson also waives any right to which he may be entitled pursuant to the Louisiana Administrative Procedure Act La. Rev. Stat. §49:951, *et seq.* or which otherwise may be afforded to him by law, to contest his agreement to or the force and effect of this document in any court or before any judicial or administrative agency or body, relating to the matters referred to herein. By his subscription hereto, Mr. Anderson also hereby authorizes the Investigating Officer designated by the Board with respect hereto to present this Consent Order to the Board for its consideration and to fully disclose to and discuss with the Board the nature and results of the investigation, and he waives any objection to such disclosures under La. Rev. Stat. §49:960. Furthermore, Mr. Anderson expressly acknowledges that the disclosure of information to the Board by the Investigating Officer shall be without prejudice to the Investigating Officer's authority to pursue any Administrative Complaint filed against him or to the Board's capacity to adjudicate such Complaint, should the Board decline to approve this Consent Order.

Accordingly, in consideration of the foregoing, and pursuant to the authority vested in the Board by La. Rev. Stat. §37:3358 and La. Rev. Stat. §49:955D;

**IT IS ORDERED** that a license is hereby issued on **PROBATION for one (1) year** to Anthony Dewayne Anderson to practice as a respiratory therapist in the state of Louisiana, subject to his acceptance of and strict compliance with the following terms and conditions:

1. **Participation in the Board's Allied Professionals Health Program.** Mr. Anderson shall sign a one (1) year agreement with the Board's Allied Professionals Health Program and shall fully comply with all terms, monitoring conditions and restrictions of the program. Mr. Anderson shall authorize and cause to have submitted to the Board monthly reports of full compliance with all monitoring requirements of the Program.
2. **Participation in Drug Screening.** Mr. Anderson shall submit to periodic, unannounced blood, urine, saliva, hair collection or other screens, including EtG and PEth levels, to detect the presence of alcohol or other mood-altering substances. Such screenings shall be random and shall occur at such intervals as may be directed by the Board's Probation and Compliance Officer or designee. Mr. Anderson shall authorize and cause all reports of the results of such drug screens to be promptly submitted to the Board.
3. **Maintenance of Complete Abstinence.** Mr. Anderson shall maintain complete and total abstinence from the use of any alcohol or mood-altering substances except as may be prescribed by a treating physician for a *bona fide* medical condition. Mr. Anderson shall personally inform the Board in writing within forty-eight (48) hours

of the prescription or administration of any controlled or mood-altering substance received by him for treatment of a *bona fide* medical condition. In the event that Mr. Anderson should be diagnosed with a medical condition which necessitates the use of controlled or mood altering substances, Mr. Anderson hereby acknowledges that he shall voluntarily withdraw from practice until and unless permitted to resume in that capacity following the evaluation and determination of a physician designated by the Board that he is then capable of practicing with reasonable skill and safety to patients.

4. **Board Approval of Practice Setting.** Following the effective date of this Order and for the duration of the probationary period, before continuing or accepting any employment with any clinic, hospital, physician or other entity providing healthcare services to patients, Mr. Anderson shall obtain the Board's written approval of his employment setting and shall provide any and all information that the Board may then require in connection with such approval. Mr. Anderson shall not engage in health care practice in advance of the Board's specific written approval of such practice setting.
5. **Notification of Order; Reports from Supervisors; Authorization.** Prior to beginning work, Mr. Anderson shall provide a copy of this Order to each hospital, clinic, facility, physician or other employer or prospective employer at which or for whom he provides health care services in this state. Thereafter, Mr. Anderson shall authorize and cause the supervisors, or other designees approved by the Board, to submit to the Board quarterly written reports of their determination concerning Mr. Anderson's professional competence as derived from such monitoring. In addition, upon request of the Board's probation officer, Mr. Anderson shall immediately execute and provide, as may be necessary, authorization to obtain any and all peer review records or other employment records pertaining to Mr. Anderson from any hospital, institution, physician or other health care entity where Mr. Anderson is employed.
6. **Probation Monitoring Fee.** For each year of the probationary term, Mr. Anderson shall pay the Board a probation monitoring fee of Three Hundred (\$300.00) Dollars. Payment of the initial fee shall be due not later than sixty (60) days from the effective date of this Order. All subsequent annual payments shall be due on or before the anniversary date of the initial fee payment.
7. **Self-Reporting of Violations.** Mr. Anderson shall immediately self-report in writing to the probation officer any violation of or failure to adhere to the terms, conditions or restrictions of this order. Furthermore, Mr. Anderson shall immediately self-report in writing any personal action or inaction, which constitutes a violation of the Act.
8. **Continuing Medical Education.** Mr. Anderson shall obtain not less than ten (10) credit hours per year for each of the years of the probationary term through attendance at and participation in continuing medical education ("CME") programs approved by the Board. On or before the anniversary date of the effective date of this Order and for each additional year of the probationary term, he shall cause to be

submitted to the Board written certification of the CME programs and credits completed during the preceding twelve (12) months.

9. **Attendance at Approved Seminar/Course on Professionalism/Ethics.** In addition to the above requirement, within one hundred eighty days (180) of issuance of this order, Mr. Anderson shall provide written confirmation that he has attended and successfully completed one or more courses of study, for a minimum of five (5) hours, acceptable to and pre-approved in writing by the Board, in the area of professionalism and ethical conduct of Respiratory Therapists.
10. **Cooperation with the Board's Probation and Compliance Officer.** Throughout the probationary term, Mr. Anderson shall immediately notify the Board's Probation Office of any changes in his current home and professional addresses and telephone numbers, and shall direct all matters required pursuant to this Consent Order to the attention of the Probation Officer with whom he shall cooperate on all matters and inquiries pertaining to his compliance with the terms, conditions and restrictions hereof. Mr. Anderson shall also make himself available upon reasonable notice for personal interviews with the Probation Officer of the Board for the purpose of discussing his then-current compliance with the terms of this Order.
11. **Absence from State or Discontinuance of Practice - Effect on.** Should Mr. Anderson at any time during the period of probation be absent from the state of Louisiana or discontinue practicing as a respiratory therapist, for a period of thirty (30) days or more, he will so advise the Board in writing. In such instance, the probationary period ordered herein shall be deemed interrupted and extended for no less than the period of time during which he was not engaged in practice or was absent from the state of Louisiana; however, all terms and conditions may continue to be in effect as ordered or may be modified or altered as needed in the Board's discretion. Mr. Anderson shall not receive credit toward completion of the probationary period for the time during which he was absent from, or not practicing as a respiratory therapist in the state of Louisiana.
12. **Certification of Compliance with Probationary Terms.** At least sixty (60) days prior to the conclusion of the probationary term imposed herein, Mr. Anderson shall provide the Board with a written request for termination of probation and an affidavit certifying that he has complied with each of the terms of probation imposed by this Order. The probationary period and all of its terms and conditions shall be, and shall be deemed to be, extended and continued in full force and effect pending Mr. Anderson's compliance with the requirements of this provision.
13. **Effect of Violation/Sanction/Resolution.** By his subscription hereto, Mr. Anderson acknowledges that his receipt of written notification that the Board has received apparently reliable information which indicates his failure to comply with the requirements set forth by this Order in any respect shall, without the need for formal hearing or for providing him with any right to which he may otherwise be entitled

pursuant to the Louisiana Administrative Procedure Act, La. Rev. Stat. §§49:951 *et seq.*, or which otherwise may be afforded to him by law, constitute his irrevocable consent to the immediate suspension of his license to practice as a respiratory therapist in this state pending a hearing before the Board and the conclusion of the administrative proceedings by issuance of a final decision following administrative adjudication of such charges.

14. **Effective Date.** This Consent Order shall be effective the date it is approved and accepted by the Board as shown by the signature of its representative below.

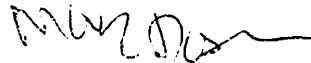
**IT IS FURTHER ORDERED** that any violation or failure of strict compliance with any of the terms, conditions or restrictions set forth by this Order by Mr. Anderson shall be deemed adequate and sufficient cause, upon proof of such violation or failure, for the revocation and cancellation of Mr. Anderson's license to practice as a respiratory therapist in the state of Louisiana or for such other action as the Board may deem appropriate, as if such violations were enumerated among the causes provided in La. Rev. Stat. §37:1326.

**IT IS FURTHER ORDERED** that this Consent Order shall be, and shall be deemed to be, a public record.

New Orleans, Louisiana, this 20<sup>th</sup> day of October, 2014.

**LOUISIANA STATE BOARD  
OF MEDICAL EXAMINERS**

By:



MARK H. DAWSON, M.D.  
*President*

In the Matter of:

Anthony Dewayne Anderson, RT App.

CONSENT ORDER

6

STATE OF LOUISIANA

PARISH OF Bossier

ACKNOWLEDGMENT  
AND CONSENT

I, ANTHONY DEWAYNE ANDERSON, LRT, APPLICANT hereby acknowledge, approve, accept and consent to entry of the above and foregoing Order, this 16 day of September, 2014.

NOTARY AS TO SIGNATURE ONLY  
DOCUMENT NOT PREPARED BY NOTARY

Anthony Dewayne Anderson  
ANTHONY DEWAYNE ANDERSON, LRT

WITNESSES:

Cassie Riegler  
Signature

Valerie L. Watson  
Signature

Cassie Riegler  
Printed Name

VALERIE L. WATSON  
Printed Name

100 Northgate Rd  
Address

100 NORTHGATE RD  
Address

BOSSIER CITY, LA 71112  
City/State/Zip Code

BOSSIER CITY, LA 71112  
City/State/Zip Code

Sworn to and subscribed before me at Bossier City, Louisiana, this 16 day of September, 2014, in the presence of the two stated witnesses.

Barbara J. Dreddy  
Notary Public

Print name Barbara J. Dreddy

Bar/Notary No.: 43528