

November 2021 Public Board Actions List

Georgia Composite Medical Board
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The Board issued **one** public orders in **November 2021**. To view each Board order, click on the licensee's name below.

1. **Sherman Washington, MD**
70940
Physician
Public Consent Order

BEFORE THE GEORGIA COMPOSITE MEDICAL BOARD

STATE OF GEORGIA

GEORGIA COMPOSITE
MEDICAL BOARD

IN THE MATTER OF:)

SHERMAN WASHINGTON, JR., M.D.,)
License Number 70940,)

Respondent.)

DOCKET NO. _____

NOV 18 2021

DOCKET NUMBER:

20220043

PUBLIC CONSENT ORDER

By agreement of the Georgia Composite Medical Board (“Georgia Board”) and SHERMAN WASHINGTON, JR., M.D. (“Respondent”), the following disposition of this disciplinary matter is entered pursuant to the provisions of the Georgia Administrative Procedure Act, O.C.G.A. § 50-13-13(a)(4), as amended.

FINDINGS OF FACT

1.

Respondent is licensed to practice medicine in the State of Georgia and was licensed at all times relevant to the matters stated herein.

2.

Respondent, while employed with at least one telemedicine company, prescribed numerous medications to multiple individuals outside of an established physician-patient relationship. At least six of such individuals resided in the State of Georgia. Specifically:

Patient C.B.

3.

On and between March 10, 2017, and April 25, 2017, Respondent prescribed Patient C.B. ten (10) medications without performing an in-person examination nor performing an

examination using technology that is equal to or superior to an examination done personally by a provider, as follows:

- On March 10, 2017, Respondent prescribed Diclofena Sodium 3% Gel, Fluocinonide 0.1% Cream, and Lidocaine 5% Ointment to C.B.;
- On March 30, 2017, Respondent prescribed Fluocinonide 0.1% Cream and Lidocaine-Prilocaine Cream to C.B.;
- On April 3, 2017, Respondent prescribed Diclofenac Sodium 3% Gel to C.B.;
- On April 19, 2017, Respondent prescribed Diclofenac Sodium 3% Gel and Lidocaine 5% Ointment to C.B.;
- On April 25, 2017, Respondent prescribed Fluocinonide 0.1% Cream and Lidocaine-Prilocaine Cream to C.B..

4.

Patient M.B.

On and between June 16, 2017, and August 28, 2017, Respondent prescribed Patient M.B. with six (6) medications without performing an in-person examination nor performing an examination using technology that is equal to or superior to an examination done personally by a provider, as follows:

- On June 16, 2017, Respondent prescribed Diclofenac Sodium 3% Gel to M.B.;
- On June 24, 2017, Respondent prescribed Calcipotriene 0.005% Cream and Fluocinonide 0.1% Cream to M.B.;
- On July 14, 2017, Respondent prescribed Naproxen 125 MG/5 ML Suspen to M.B.;
- On August 7, 2017, Respondent prescribed Naproxen 125 MG/5 ML Suspen to M.B.;
- On August 28, 2017, Respondent Prescribed Fluocinonide 0.1% Cream to M.B..

5.

Patient M.B.

On and between March 17, 2017, and October 18, 2017, Respondent prescribed Patient M.B. with fourteen (14) medications without performing an in-person examination nor performing an examination using technology that is equal to or superior to an examination done personally by a provider, as follows:

- On March 17, 2017, Respondent prescribed Fluocinonide 0.1% Cream to M.B.;

- On March 23, 2017, Respondent prescribed Livixil Pak 2.5-2.5% Crm-Dress to M.B.;
- On April 17, 2017, Respondent prescribed Fluocinonide 0.1% Cream and Livixil Pak 2.5-2.5% Crm-Dress to M.B.;
- On May 17, 2017, Respondent prescribed Fluocinonide 0.1% Cream and Livixil Pak 2.5-2.5% Crm-Dress to M.B.;
- On June 22, 2017, Respondent prescribed Fluocinonide 0.1% Cream and Livixil Pak 2.5-2.5% Crm-Dress to M.B.;
- On August 1, 2017, Respondent prescribed Allzital 25-325 MG Tablet and Fluocinonide 0.1% Cream to M.B.;
- On August 17, 2017, Respondent prescribed Allzital 25-325 MG Tablet to M.B.;
- On September 1, 2017, Respondent prescribed Fluocinonide 0.1% Cream to M.B.;
- On October 2, 2017, Respondent prescribed Allzital 25-325 MG Tablet to M.B.;
- On October 18, 2017, Respondent prescribed Allzital 25-325 MG Tablet to M.B.

6.

Patient D.P.

On August 15, 2017, Respondent prescribed Patient D.P. with four (4) medications without performing an in-person examination nor performing an examination using technology that is equal to or superior to an examination done personally by a provider, as follows:

- On August 15, 2017, Respondent prescribed Calcipotriene 0.005% Cream, Doxepin 5% Cream, Fluocinonide 0.1% Cream, and Lidocaine 5% Ointment to D.P.

7.

Patient S.W.

On and between July 19, 2017, and January 4, 2018, Respondent prescribed Patient S.W. with sixteen (16) medications without performing an in-person examination nor performing an examination using technology that is equal to or superior to an examination done personally by a provider, as follows:

- On July 19, 2017, Respondent prescribed Livixil Pak 2.5-2.5% Crm-Dress and Naproxen 125 MG/5 ML Suspen to S.W.;
- On August 1, 2017, Respondent prescribed Fluocinonide 0.1% Cream to S.W.;
- On August 11, 2017, Respondent prescribed Xyzbac Tablet to S.W.;
- On August 14, 2017, Respondent prescribed Livixil Pak 2.5-2.5% Crm-Dress and Naproxen 125 MG/5 ML Suspen to S.W.;

- On September 1, 2017, Respondent prescribed Fluocinonide 0.1% Cream to S.W.;
- On September 15, 2017, Respondent prescribed Xyzbac Tablet to S.W.;
- On September 23, 2017, Respondent prescribed Naproxen 125 MG/5 ML Suspen to S.W.;
- On October 23, 2017, Respondent prescribed Xyzbac Tablet to S.W.;
- On November 2, 2017, Respondent prescribed Naproxen 125 MG/5 ML Suspen to S.W.;
- On November 7, 2017, Respondent prescribed Calcipotriene 0.005% Cream to S.W.;
- On November 29, 2017, Respondent prescribed Naproxen 125 MG/5 ML Suspen to S.W.;
- On December 5, 2017, Respondent prescribed Calcipotriene 0.005% Cream to S.W.;
- On December 26, 2017, Respondent prescribed Naproxen 125 MG/5 ML Suspen to S.W.;
- On January 4, 2018, Respondent prescribed Calcipotriene 0.005% Cream to S.W.

8.

Patient K.W.

On and between March 9, 2017, and June 2, 2017, Respondent prescribed Patient K.W. four (4) medications without performing an in-person examination nor performing an examination using technology that is equal to or superior to an examination done personally by a provider, as follows:

- On March 9, 2017, Respondent prescribed Mefenamic Acid 250 MG Capsule to K.W.;
- On April 7, 2017, Respondent prescribed Mefenamic Acid 250 MG Capsule to K.W.;
- On May 5, 2017, Respondent prescribed Mefenamic Acid 250 MG Capsule to K.W.;
- On June 2, 2017, Respondent prescribed Mefenamic Acid 250 MG Capsule to K.W.

9.

Respondent's aforementioned conduct departed from and failed to conform to the minimum standards of acceptable and prevailing medical practice and was a violation of Georgia's laws and the Board's rules. *See* Ga. Comp. R. & Regs. R. 360-3-.07 (Practice Through Electronic or Other Such Means), O.C.G.A. § 43-34-8(a), and O.C.G.A. § 43-1-19(a).

10.

Respondent was also licensed as a physician in the Commonwealth of Virginia. On or about November 12, 2019, Respondent entered into a Consent Order with the Virginia Board of

Medicine (Case No. 187506) based, in part, on allegations of prescribing medications without ever performing examinations. Under the terms of the Consent Order Respondent was reprimanded and assessed a One Thousand Five Hundred dollar (\$1,500.00) monetary penalty. On or about February 14, 2020, Respondent's license to practice medicine and surgery in the Commonwealth of Virginia was mandatorily suspended based, in part, on allegations of Respondent's failure to respond (Case No. 202478).

11.

Respondent is also licensed as a physician in the State of North Dakota. On or about November 22, 2019, Respondent entered into a Stipulated Order with the North Dakota Board of Medicine, based, in part, on allegations of prescribing medications without a physician-patient relationship. Under the terms of the Stipulation, Respondent had to complete a course in keeping medical records and Respondent paid costs and attorney's fees incurred by the Board. Respondent successfully completed the North Dakota Stipulated Order in or around July, 2020.

12.

Respondent is also licensed as a physician in the State of Washington. On or about July 16, 2020, Respondent stipulated to an informal disposition with the State of Washington Medical Commission, (No. M2019-234) based, in part, on allegations of improper prescribing through telemedicine companies. Under the terms of the stipulation Respondent was required to complete "Compliance Orientation," review the Medical Commission's Telemedicine Guideline, complete a course in medical ethics, write an authoritative paper on the importance of forming a physician-patient relationship, and personally appear before the Commission.

13.

Pursuant to O.C.G.A. §§ 43-1-19(a)(5) and 43-34-8(a)(5), the Georgia Board may discipline a licensee who has had disciplinary action taken against him or her by any such lawful licensing authority other than the Board.

14.

Respondent agrees to the above findings of facts and waives any further findings of fact with respect to the above-styled matter.

CONCLUSIONS OF LAW

Respondent's conduct constitutes sufficient grounds for the imposition of discipline upon Respondent's license to practice as a physician in the State of Georgia under O.C.G.A. Title 43, Chapters 1 and 34, as amended. Respondent hereby waives any further conclusions of law with respect to the above-styled matter.

ORDER

The Georgia Board, having considered all the facts and circumstances of this case, hereby orders, and Respondent hereby agrees, that the following sanctions shall be imposed upon Respondent's license to practice as a physician in the State of Georgia:

1.

Within ninety (90) days of the effective date of this Consent Order, Respondent shall submit to the Georgia Board a fine of three thousand dollars (\$3,000.00) to be paid in full by cashier's check or money order made payable to the Georgia Composite Medical Board. Said fine shall be sent to the Georgia Composite Medical Board, located at 2 Peachtree Street, NW, 6th Floor, Atlanta, GA 30303, to the attention of the Executive Director. Failure to pay the entire amount within (30) days of the effective date of this Consent Order shall be considered a

violation of this Consent Order and shall result in further sanctioning of Respondent's license, upon substantiation thereof.

2.

Within six (6) months of the effective date of this Consent Order, Respondent shall successfully complete ten (10) hours of continuing medical education ("CME") course(s) focusing on ethics and ten (10) hours of CME course(s) focusing on prescribing. Said CME may be completed online and shall be in addition to the CME required of all Georgia physicians. Respondent shall provide written evidence of successful completion of the CME to the Georgia Board within six (6) months of the effective date of this Order. Failure to provide written evidence of successful completion of the CME within six (6) months of the effective date of this Consent Order shall be considered a violation of this Consent Order and shall result in further sanctioning of Respondent's license, upon substantiation thereof.

3.

In addition to and in conjunction with any other sanction contained herein, this Consent Order and dissemination thereof shall serve as a **public reprimand** of Respondent by the Georgia Board.

4.

Respondent also understands that pursuant to O.C.G.A. Title 43, Chapter 34A, the contents of this Consent Order shall be placed on Respondent's Physician Profile. Furthermore, by executing this Consent Order, Respondent hereby agrees to permit the Georgia Board to update the Physician's Profile reflecting this Consent Order.

5.

Respondent acknowledges that Respondent has read this Consent Order and understands

its contents. Respondent understands that Respondent has the right to a hearing in this matter and freely, knowingly and voluntarily waives that right by entering into this Consent Order.

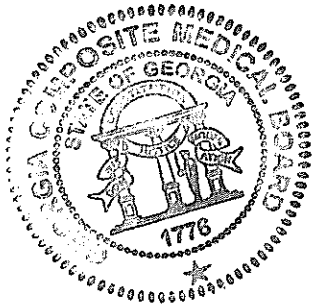
Respondent understands and agrees that a representative of the Department of Law may be present during the Georgia Board's consideration of this Consent Order and that the Georgia Board shall have the authority to review the investigative file and all relevant evidence in considering this Consent Order. Respondent further understands that this Consent Order will not become effective until approved and docketed by the Georgia Board. Respondent understands that this Consent Order, once approved and docketed, shall constitute a public record, evidencing disciplinary action by the Georgia Board that may be disseminated as such. However, if this Consent Order is not approved, it shall not constitute an admission against interest in this proceeding, or prejudice the right of the Georgia Board to adjudicate this matter. Respondent hereby consents to the terms and sanctions contained herein.

(Signatures on the following page)

Approved this 18th day of November, 2021.

GEORGIA COMPOSITE MEDICAL BOARD

(BOARD SEAL)



BY: [Signature]
Despina Dalton, M.D.
Chairperson

ATTEST: [Signature]
~~LASHARN HUGHES, MBA~~ Jonathan McGehee
Executive Director, Interim

CONSENTED TO: [Signature]
SHERMAN WASHINGTON, JR., M.D.
Respondent

AS TO THE SIGNATURE OF
SHERMAN WASHINGTON, JR., M.D.:
Sworn to and subscribed before me
This, 6 day of October 2021.

[Signature]
NOTARY PUBLIC
My Commission Expires: Feb 1, 2025

