

BEFORE THE
NORTH CAROLINA MEDICAL BOARD

In re:)
)
Christopher Eric Lacroix, M.D.,) CONSENT ORDER
)
Respondent.)

This matter is before the North Carolina Medical Board ("Board") on information regarding Christopher Eric Lacroix, M.D., ("Dr. Lacroix"). Dr. Lacroix admits and the Board finds and concludes that:

STATUTORY AUTHORITY

The Board is a body duly organized under the laws of North Carolina and is the proper party to bring this proceeding under the authority granted it in Article 1 of Chapter 90 of the North Carolina General Statutes and the rules and regulations promulgated thereto.

FINDINGS OF FACT

Dr. Lacroix is a physician licensed by the Board on or about October 19, 2005, license number 2005-01730.

During the times relevant herein, Dr. Lacroix practiced internal medicine in Washington, North Carolina.

Carolina Locum Resources ("CLR") is a locum tenens company based out of Raleigh, North Carolina. CLR arranges for

physician assistants and nurse practitioners to work various jobs throughout the state.

CLR approached Dr. Lacroix about supervising mid-level practitioners it placed. Dr. Lacroix agreed to serve as the primary supervising physician for multiple physician assistants and one nurse practitioner who obtained employment through CLR. CLR agreed to pay Dr. Lacroix a monthly stipend for each mid-level provider he supervised and paid Dr. Lacroix at least some money most months over approximately three years.

Pursuant to Board rules, a primary supervising physician "accepts full responsibility for the physician assistant's medical activities and professional conduct at all times." The Board's rules also provide that the primary supervising physician assures the Board that the physician assistant "is qualified by education, training and competence to perform all medical acts required of the physician assistant and is responsible for the physician assistant's performance in the particular field or fields in which the physician assistant is expected to perform medical acts" (21 NCAC 32S .0201(10)(a)).

Prior to beginning practice, a physician assistant must have completed and submitted to the Board an "Intent to Practice" form (21 NCAC 32S .0203). In addition, a physician assistant and supervising physician must have in place a written supervisory arrangement and prescription plan that detail what

medical acts the physician assistant will be providing and what drugs the physician assistant may prescribe (21 NCAC 32S .0213(c)). The physician assistant and supervising physician must also meet monthly for the first six months to discuss clinical issues. These meetings must be documented (21 NCAC 32S .0213(d)).

CLR provided Dr. Lacroix with assurances it would ensure Dr. Lacroix complied with Board rules. Notwithstanding such assurances, it remained Dr. Lacroix's obligation to ensure he complied. Dr. Lacroix failed to comply with Board rules regarding supervision of physician assistants. Dr. Lacroix admitted that he relied upon CLR to guide him as to what was required under Board rules. Dr. Lacroix also relied heavily upon CLR to make sure that he was in compliance with Board rules.

There were several instances where physician assistants began practice under Dr. Lacroix's supervision without Dr. Lacroix realizing that this was the case. When this came to his attention, Dr. Lacroix objected to CLR and instructed CLR not to do this. However, CLR persisted in this practice.

There were numerous occasions where Dr. Lacroix failed to ensure that a written supervisory agreement was in place prior to practice. Dr. Lacroix also failed to conduct quality improvement meetings as required by Board rules.

Dr. Lacroix allowed CLR to use him as a supervising physician for physician assistants working temporary assignments at clinics where there was no physician on site to supervise the physician assistant. For most of the physician assistants, Dr. Lacroix never met them in person and never observed them practice. For just a few them, he may have spoken to them on the phone. Dr. Lacroix was paid for his service by CLR.

Dr. Lacroix's supervision failed to meet Board standards and failed to comply with Board rules. Dr. Lacroix failed to provide meaningful supervision to many of the physician assistants placed under his license by CLR.

CONCLUSIONS OF LAW

Dr. Lacroix's conduct, as described above, constitutes unprofessional conduct, including, but not limited to, departure from, or the failure to conform to, the standards of acceptable and prevailing medical practice, within the meaning of N.C. Gen. Stat. § 90-14(a)(6) which is grounds under that section of the North Carolina General Statutes for the Board to annul, suspend, revoke, condition, or limit Dr. Lacroix's license to practice medicine or to deny any application he may make in the future.

PROCEDURAL STIPULATIONS

Dr. Lacroix acknowledges and agrees that the Board has jurisdiction over him and over the subject matter of this case.

Dr. Lacroix knowingly waives his right to any hearing and to any judicial review or appeal in this case.

Dr. Lacroix acknowledges that he has read and understands this Consent Order and enters into it voluntarily.

Dr. Lacroix would like to resolve this matter without the need for more formal proceedings.

The Board has determined that it is in the public interest to resolve this case as set forth below.

ORDER

NOW, THEREFORE, with Dr. Lacroix's consent, it is ORDERED that:

1. Dr. Lacroix is hereby REPRIMANDED.
2. Dr. Lacroix will pay a fine in the amount of Two Thousand (\$2,000.00) Dollars within ninety (90) days of this Consent Order.
3. Dr. Lacroix shall obey all laws. Likewise, he shall obey all rules and regulations involving the practice of medicine.
4. Dr. Lacroix shall notify the Board in writing of any change in his residence or practice addresses within ten (10) days of the change.
5. Dr. Lacroix shall meet with the Board or members of the Board for an interview at such times as requested by the Board.

6. If Dr. Lacroix fails to comply with any of the terms of this Consent Order, that failure shall constitute unprofessional conduct within the meaning of N.C. Gen. Stat. § 90-14(a) (6) and shall be grounds, after any required notice and hearing, for the Board to annul, suspend or revoke his license to practice medicine and surgery and to deny any application he might make in the future or then have pending for a license.

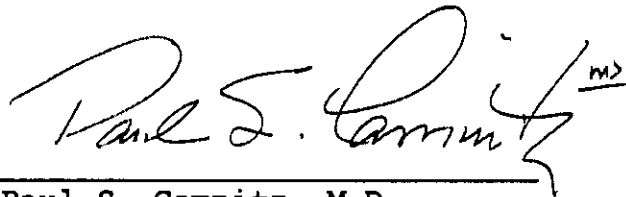
7. This Consent Order shall take effect immediately upon its execution by both Dr. Lacroix and the Board and it shall continue in effect until specifically ordered otherwise by the Board.

8. Dr. Lacroix hereby waives any requirement under any law or rule that this Consent Order be served on him.

9. Upon execution by Dr. Lacroix and the Board, this Consent Order shall become a public record within the meaning of Chapter 132 of the North Carolina General Statutes and shall be subject to public inspection and dissemination pursuant to the provisions thereof. Additionally, it will be reported to persons, entities, agencies and clearinghouses as required and permitted by law including, but not limited to, the National Practitioner Data Bank.

By Order of the North Carolina Medical Board this the 2nd
day of January, 2014.

NORTH CAROLINA MEDICAL BOARD

A handwritten signature in black ink, reading "Paul S. Camnitz" with "M.D." written as a superscript to the right. The signature is written in a cursive style.

By:

Paul S. Camnitz, M.D.
President

Consented to this the 12 day of December, 2013.



Christopher Eric Lacroix, M.D.

State of North Carolina

County of Pitt

I, Amy M. Carrere, a Notary Public for the above named County and State, do hereby certify that Christopher Eric Lacroix, M.D. personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal

this the 12th day of December, 2013.

Amy M. Carrere
Notary Public

(SEAL)



My Commission Expires: 7-24-18