

COMMONWEALTH OF MASSACHUSETTS

SUFFOLK, SS.

BOARD OF REGISTRATION
IN MEDICINE

Adjudicatory Case No. 2008-002
(DALA Docket No. RM-08-28)

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In the Matter of)
)
Suzanne B. Rothchild, M.D.)
BRN 39314)
_____)


ORDER OF TEMPORARY SUSPENSION

In accordance with the Rules of Procedure Governing Disciplinary Proceedings of the Board of Registration in Medicine, 243 C.M.R. 1.03(11)(a), the Board of Registration in Medicine ("the Board") **ORDERS** that

The certificate of registration to practice medicine in the Commonwealth of Massachusetts of **Suzanne B. Rothchild, M.D.**, Registration No. 39314, is **SUSPENDED** effective immediately. **Suzanne B. Rothchild, M.D.** must cease the practice of medicine immediately, and she is directed to surrender her wallet card and wall certificate to the Board forthwith.

The Board has determined that, based upon the information set forth in the Motion for Summary Suspension, the health, safety, and welfare of the public necessitates said suspension.

The Respondent shall provide a copy of this Order of Suspension within twenty-four (24) hours to the following designated entities: any in- or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which she practices medicine; any in- or out-of-state health maintenance organization with whom she has privileges or any other kind of association; any state agency, in- or out-of-state, with which she has a provider contract; any in- or out-of-state medical employer, whether or not she practices medicine there; and the state licensing boards of all states in which she has any kind of license to practice medicine; Drug Enforcement Administration Boston Diversion Group and the Commonwealth of Massachusetts Department of Public Health Division of Food and Drug. The Respondent is further directed to certify to the Board within forty-eight (48) hours that she has complied with this directive.



Martin Crane, M.D.
Chairman

Dated: March 12, 2008

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practices thirty days following the latest estimated date of confinement of current obstetrical patients, but no later than August 1, 2008.

38. ProMutual will not provide malpractice insurance coverage to the Respondent for any new obstetrical patients after September 20, 2007.

39. On November 20, 2007, Winchester Hospital disciplined the Respondent for failure to perform appropriate fetal monitoring, assess the results of fetal monitoring and provide the appropriate level of assistance to nursing staff.

40. On November 20, 2007, Winchester Hospital imposed a requirement that the Respondent have all her laboring patients co-managed and that the Respondent attend a course on fetal monitoring.

Patient I

41. Patient I is a 32 year-old female who was admitted to Winchester Hospital in labor on March 10, 2007, at approximately 9:08 a.m.

42. The Respondent assumed coverage and care for Patient I on March 10, 2007.

43. The Respondent delivered Patient I's baby on March 10, 2007, at approximately 1:38 p.m.

44. Patient I's baby was born flaccid and pale with no signs of respiratory effort. The umbilical cord was flat, empty of blood.

45. Patient I's baby was transferred to Children's Hospital.

46. Patient I had suffered a placental abruption.

47. The Respondent failed to perform the appropriate fetal monitoring during Patient I's labor.

48. The Respondent failed to provide the appropriate level of assistance to the nurse during Patient I's labor.

49. The Respondent failed to develop a plan for expedited delivery.

50. The Respondent failed to intervene in a timely manner.

51. The Respondent failed to order the Kleihuer-Betke test in a timely manner.

52. The Respondent failed to meet the standard of care with regard to Patient I.

LEGAL BASIS FOR PROPOSED RELIEF

D. Pursuant to G.L. c. 112, § 5, tenth par. (h) and 243 C.M.R. 1.03(5)(a)11, the Board may discipline a physician upon proof satisfactory to a majority of the Board that the physician has violated a rule or regulation of the Board.

1. Pursuant to 243 C.M.R. 2.07(16), a physician must obtain professional malpractice liability insurance as a condition of rendering any direct or indirect patient care in the Commonwealth of Massachusetts.

E. Pursuant to 243 C.M.R. 1.03(5)(a)18, the Board may discipline a physician, upon proof satisfactory to a majority of the Board, that the physician has committed misconduct in the practice of medicine.

F. Pursuant to *Levy v. Board of Registration in Medicine*, 378 Mass. 519 (1979) and *Raymond v. Board of Registration in Medicine*, 387 Mass. 708 (1982), the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician lacks good

moral character and has engaged in conduct that undermines the public confidence in the integrity of the medical profession.

Order

Wherefore, it is hereby **ORDERED** that the Respondent show cause why she should not be disciplined for the conduct described herein.

By the Board of
Registration in Medicine,



Martin Crane, M.D.
Chair

Date: March 12, 2008

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**ORDER OF REFERENCE TO DIVISION OF
ADMINISTRATIVE LAW APPEALS**

The Board hereby refers the Amendment to Statement of Allegations in above-captioned matter to the Division of Administrative Law Appeals for recommended Findings of Fact and necessary Conclusions of Law only.

The Board's Complaint Counsel, the Respondent and any intervenor shall file all papers, transcripts, exhibits or other record entries with both the Board of Registration in Medicine at 560 Harrison Avenue, G-4, Boston, Massachusetts 02118, and also with the Division of Administrative Law Appeals at 98 North Washington Street, 4th Floor, Boston, Massachusetts 02114, in addition to service amongst the Complaint Counsel, the Respondent and any intervenor. Filings for review by the full Board, such as an interlocutory appeal or objections to a Recommended Decision, shall include eight copies addressed to the Executive Director and one copy to the General Counsel.

Upon the Complaint Counsel's receipt of any docket entry originating from an Administrative Magistrate, the Complaint Counsel shall file a copy of same with the Board.

Unless confidentiality is waived by the patient, a) nothing in the public record or docket shall contain patient-identifying information, and b) hearings shall be closed to the public during patient testimony, although transcripts without patient-identifying information are public. Motions to impound and to use pseudonyms, and rulings thereon, shall be filed and docketed under appropriate seal.



 Martin Crane, M.D.
 Chairman

Dated: March 12, 2008

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