

COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS.

Board of Registration in Medicine

Adjudicatory Case No. 2023-004

In the Matter of

CHRISTOPHER R. KEROACK, MD

**CONSENT ORDER**

Pursuant to G.L. c. 30A, § 10, Christopher R. Keroack, M.D. (Respondent) and the Board of Registration in Medicine (Board) (hereinafter referred to jointly as the "Parties") agree that the Board may issue this Consent Order to resolve the above-captioned adjudicatory proceeding. The Parties further agree that this Consent Order will have all the force and effect of a Final Decision within the meaning of 801 CMR 1.01(11)(d). The Respondent admits to the findings of fact specified below and agrees that the Board may make the conclusions of law and impose the sanction set forth below in resolution of investigative Docket No. 20-0179.

**Findings of Fact**

1. The Respondent is a 1996 graduate of Tufts University School of Medicine and is certified by the American Board of Internal Medicine. He has practiced medicine in Massachusetts since 1999 under certificate number 160647. The Respondent is the president, treasurer and director of New England Center for Functional Medicine, P.C. (formerly known as Pioneer Weight and Wellness). He is affiliated with Mercy Medical Center (Mercy) and Baystate Medical Center (Baystate).

2. The Massachusetts Prescription Awareness Tool (MassPat) is an online database that lists all Schedule II to V prescriptions as well as gabapentin prescriptions filled by patients at pharmacies.

3. On or about December 5, 2014, physicians were required to check MassPat prior to prescribing opioids listed in Schedules II and III.

4. On or about October 15, 2016, physicians were required to check MassPAT when prescribing a benzodiazepine or DPH-designated Schedule IV-VI drug for the first time.

5. From May 2019 to April 2022, the Respondent prescribed clonazepam and alprazolam to a few patients for anxiety.

6. Clonazepam and alprazolam are benzodiazepines.

7. From May 2019 to June 2022, the Respondent did not check the MassPat prior to prescribing benzodiazepines for the first time.

8. The Respondent prescribed phentermine, an appetite suppressant, as part of an overall weight reduction program that also includes dieting, exercise, and counseling.

9. The Respondent wrote prescriptions for 50 to 60% of his patients.

10. The Respondent prescribed ketamine in a topical formula as a pain reliever to his patients.

11. Both the phentermine and ketamine were compounded at Performix Specialty Pharmacy in New Hampshire.

12. The Respondent purchased the compounded medication from Performix at a wholesale price. The Respondent sold the compounded medication at a retail price to his patients. The retail price was the wholesale price plus sixty (60) percent.

13. The Respondent recommended and sold supplements in his office and estimated that 80 – 85% of his patients purchased them.

14. The Respondent charged a “standard 60% markup” on the wholesale prices of the supplements.

15. The Respondent’s website included links directly to suppliers. If the Respondent’s patients used a code provided by him to purchase products, the Respondent received a gratuity from the company.

16. According to AMA Ethical Opinion 8.063,  
In-office sale of health-related products by physicians presents a financial conflict of interest, risk placing undue pressure on the patient, and threatens to erode patient trust and undermine the primary obligation of physicians to serve the interests of their patients before their own.”

17. According to AMA Ethical Opinion 8.063,  
Because of the risk of patient exploitation and the potential to demean the profession of medicine, physicians who choose to sell health-related products from their offices must take steps to minimize their financial conflicts of interest.  
The following guidelines apply:

(a) In general, physicians should limit sales to products that serve the immediate and pressing needs of their patients...

(b) Physicians may distribute other health-related products to their patients free of charge or at cost, in order to make useful products readily available to their patients. When health-related products are offered free or at cost, it helps to ensure removal of the elements of personal gain and financial conflicts of interest

that may interfere, or appear to interfere, with the physician's independent medical judgment.

18. According to AMA Ethical Opinion 8.063, Physicians must disclose fully the nature of their financial arrangement with a manufacturer or supplier to sell health-related products. Disclosure includes informing patients of financial interests as well as about the availability of the product or other equivalent products elsewhere. Disclosure can be accomplished through face-to-face communication or by posting an easily understandable written notification in a prominent location that is accessible by all patients in the office...

19. The Respondent did not disclose his financial interest in the compounded medications or supplements that he sold to patients.

#### Conclusion of Law

- A. The Respondent has engaged in conduct that undermines the public confidence in the integrity of the medical profession. See Levy v. Board of Registration in Medicine, 378 Mass. 519 (1979); Raymond v. Board of Registration in Medicine, 387 Mass. 708 (1982).
- B. Pursuant to G.L. c. 112, §5, eighth par. (b), and 243 C.M.R. 1.03(5)(a) 2, the Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician has committed an offense against any provisions of the laws of the Commonwealth relating to the practice of medicine, or any rule or regulation adopted thereunder, to wit:

1. 105 CMR 700.00 as it pertains to mandatory review of the MassPat system for the issuance of certain prescriptions.

Sanction and Order

The Respondent's license is hereby REPRIMANDED, FINED \$2,500, and he is ORDERED to complete 5 additional continuing medical education (CME) credits in the use of MassPAT and prescribing generally. The fine and documentation verifying the completion of the CME's are due within 90 (ninety) days of ratification of this Consent Order. This sanction is imposed for the violations of law listed in the Conclusion section.

Execution of this Consent Order

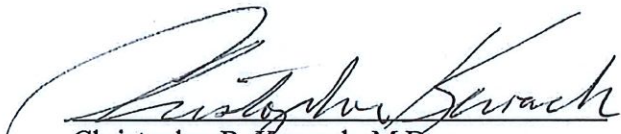
Complaint Counsel and the Respondent agree that the approval of this Consent Order is left to the discretion of the Board. The signature of Complaint Counsel, the Respondent, and the Respondent's counsels are expressly conditioned on the Board accepting this Consent Order. If the Board rejects this Consent Order in whole or in part, then the entire document shall be null and void; thereafter, neither of the parties nor anyone else may rely on these stipulations in this proceeding.

As to any matter in this Consent Order left to the discretion of the Board, neither the Respondent, nor anyone acting on his behalf, has received any promises or representations regarding the same.

The Respondent waives any right of appeal that he may have resulting from the Board's acceptance of this Consent Order.

The Respondent shall provide a complete copy of this Consent Order with all exhibits and attachments within ten (10) days by certified mail, return receipt requested, or by hand delivery 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 the Respondent practices medicine; any in- or out-of-state health maintenance organization with whom the Respondent has privileges or any other kind of association; any state agency, in- or out-of-state, with which the Respondent has a provider contract; any in- or out-of-state medical employer, whether or not the Respondent practices medicine there; the state licensing boards of all states in which the Respondent has any kind of license to practice medicine; the Drug Enforcement Administration Boston Diversion Group; and the Massachusetts Department of Public Health Drug Control Program. The Respondent shall also provide this notification to any such designated entities with which the Respondent becomes associated in the year following the date of imposition of this reprimand. The Respondent is further directed to certify to the Board within ten (10) days that the Respondent has complied with this directive. The Board expressly reserves the authority to independently notify, at any time, any of the entities designated above, or any other affected entity, of any action it has taken.

  
\_\_\_\_\_  
Christopher R. Keroack, M.D.  
Licensee

11/9/2022  
Date

  
\_\_\_\_\_  
Tracy Morong  
Complaint Counsel

11/16/2022  
Date

So ORDERED by the Board of Registration in Medicine this 5<sup>th</sup> day of January, 2023.

  
\_\_\_\_\_  
Julian N. Robinson, M.D.  
Board Chair