



North Carolina Medical Board

Eleanor E. Greene, MD: President | Timothy E. Lietz, MD: President-Elect | Barbara E. Walker, DO: Secretary/Treasurer

August 2, 2017

Certified Mail – Return Receipt Requested

Keith R. Berndtson, M.D.
121 S. Estes Drive, Suite 205
Chapel Hill, NC 27514

Dear Dr. Berndtson:

The North Carolina Medical Board (“North Carolina Board”) has decided to issue you a license. However, as a result of information reviewed while evaluating your license application, the North Carolina Board has also decided to issue you a public letter of concern. The North Carolina Board does not consider a public letter of concern to be a disciplinary action or a limitation or restriction on your license.

The North Carolina Board is concerned that you entered into a Consent Order with the Illinois Department of Financial and Professional Regulation (“Illinois Board”) on June 14, 2012, in which the Illinois Board found that you inappropriately prescribed controlled substances to family members and prescribed excessive quantities of controlled substances to a patient. Your Illinois medical license was placed on probation for one year and you agreed to a number of terms and conditions that included obtaining continuing medical education related to pain management and controlled substance prescribing. The Board notes that your Illinois Board probation ended on June 28, 2013, and that you completed all terms of the Illinois Board Consent Order. The Board encourages you to follow the guidelines included in its position statements, “Policy for Opioids for the Treatment of Pain” and “Self-treatment and Treatment of Family Members” which are enclosed for your review.

The North Carolina Board urges you to take steps to ensure that the conduct giving rise to the North Carolina Board’s concerns does not happen again. Otherwise, the North Carolina Board may vote to commence formal disciplinary proceedings against your license. If that happens, this letter may be entered into evidence in determining the appropriate discipline.

This letter is a public record within the meaning of Chapter 132 of the North Carolina General Statutes and is subject to public inspection and dissemination as required by that law. It will be reported to the Federation of State Medical Boards; however, it will not be reported to the National Practitioner Data Bank.

Sincerely,

Eleanor E. Greene, M.D.
President

EEG/PFB/lt

Enclosures

**POLICY FOR THE USE OF OPIOIDS
FOR THE TREATMENT OF PAIN**

The Board believes that a fundamental component of good medical practice includes the appropriate evaluation and management of pain. Responsibly prescribed opioid medications may help North Carolina licensees treat their patients' pain safely and effectively, and improve their quality of life. It is the duty of any licensee prescribing opioid medications to be knowledgeable of both the therapeutic benefits, risks, and potential harm associated with opioid treatment. The Board expects any licensee prescribing opioids for the treatment of pain to provide diagnoses, treatments, and medical record documentation that are consistent with the standard of care in North Carolina. The Board notes that a failure to provide opioid treatment consistent with the standard of care in North Carolina may subject a licensee to disciplinary action by the Board.

The Board has previously attempted to provide guidance regarding opioid treatment of pain to its licensees through guidance documents generated and maintained by the Board. However, in order to provide its licensees with guidance that reflects the most current medical and scientific research and recommended practices, the Board has decided to adopt and endorse the CDC Guideline for Prescribing Opioids for Chronic Pain written and maintained by the Center for Disease Control and Prevention ("CDC"). While these guidelines do not constitute regulations or necessarily state the standard of care in North Carolina in every context, the Board's believes that these guidelines can provide useful information to licensees related to the appropriate considerations to be made prior to and during treatment plans involving opioids.

The CDC Guideline for Prescribing Opioids for Chronic Pain can be found at the following link: <https://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm> In addition to its Guideline, the CDC has also provided a number of useful clinician resources related to opioid treatment of pain covering topics such as Nonopioid Treatments, Assessing Benefits and Harms, Calculating Dosage, and Tapering. These documents can be found at the following link: <https://www.cdc.gov/drugoverdose/prescribing/resources.html>

It is the Board's hope that familiarity with the concepts included in the documents above will help licensees provide safe and effective care for their North Carolina patients.

Adopted July 2005; Amended May 2013; Amended January 2017

Self-treatment and treatment of family members

It is the Board's position that it is not appropriate for licensees to write prescriptions for controlled substances or to perform procedures on themselves or their family members. Rules 32B.1001, 32S.0212, and 32M.0109 prohibit licensees from prescribing controlled substances (including all narcotics) to themselves or immediate family members. In addition, licensees should not treat their own chronic conditions or those of their immediate family members or others with whom the licensee has a significant emotional relationship. In such situations, professional objectivity may be compromised, and the licensee's personal feelings may unduly influence his or her professional judgment, thereby interfering with care.

There are, however, certain limited situations in which it may be appropriate for licensees to treat themselves, their family members, or others with whom the licensee has a significant emotional relationship.

1. **Emergency Conditions.** In an emergency situation, when no other qualified licensee is available, it is acceptable for licensees to treat themselves or their family members until another licensee becomes available.
2. **Urgent Situations.** There may be instances when licensees or family members do not have their prescribed medications or easy physician access. It may be appropriate for licensees to provide short term prescriptions.
3. **Acute Minor Illnesses Within Clinical Competence.** While licensees should not serve as primary or regular care providers for themselves or their family members, there are certain situations in which care may be acceptable. Examples would be treatment of antibiotic-induced fungal infections or prescribing ear drops for a family member with external otitis. It is the expectation of the Board that licensees will not treat recurrent acute problems.
4. **Over the Counter Medication.** This position statement is not intended to prevent licensees from suggesting over the counter medications or other non-prescriptive modalities for themselves or family members, as a lay person might.

Licensees who act in accord with this position statement will be held to the same standard of care applicable to licensees providing treatment for patients who are unrelated to them. Thus, licensees should not treat problems beyond their expertise or training.

The Board expects licensees to maintain an appropriate medical record documenting any care that is given. It is also prudent for the licensee to provide a copy of the medical record to the patient's primary care provider.

Licensees who inappropriately treat themselves, their family members or others with whom they have a significant emotional relationship should be aware that they may be subject to disciplinary action by the Board.

(Adopted May 1991) (Amended May 1996; May 2000; March 2002; September 2005, March 2012)
(Reviewed November 2015)

Consent and Waiver

I, Keith R. Berndtson, M.D., would like to resolve this matter without the need for more formal proceedings and consent to the Board's issuance of this public letter of concern in resolution of the above matter.

Consented to this the 2nd day of AUGUST, 2017.

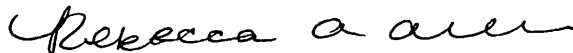

Keith R. Berndtson, M.D.

State of N. Carolina

County of Orange

I, _____, a Notary Public for the above named County and State, do hereby certify that Keith R. Berndtson, 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 02 day of August, 2017.


Notary Public

(SEAL)

REBECCA A ALLEN Notary Public Orange Co., North Carolina My Commission Expires April 30, 2022

My Commission Expires: April 30, 2022

North Carolina Medical Board