

STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

In re:)
CATHLEEN G. LONDON, M.D.) CONSENT AGREEMENT
Complaint Nos. CR17-2, CR17-16,)
CR17-22, CR17-28, CR17-35,)
CR17-52, CR17-53, CR17-166,)
and CR17-238)

This document is a Consent Agreement, effective when signed by all parties, regarding disciplinary action against the license to practice medicine in the State of Maine held by Cathleen G. London, M.D. The parties to the Consent Agreement are: Cathleen G. London, M.D. (“Dr. London”), the State of Maine Board of Licensure in Medicine (“the Board”), and the State of Maine Department of the Attorney General. This Consent Agreement is entered into pursuant to 10 M.R.S. § 8003(5)(B) and 32 M.R.S. § 3282-A.

STATEMENT OF FACTS

1. Dr. London has held a license to practice medicine in the State of Maine since June 5, 2015 (license number MD20645), and specializes in family medicine.

2. On December 27, 2016, the Board received a complaint from Patient 17-2 alleging that Dr. London was rude, agitated, aggressive, and spoke loudly about politics. On his second visit, Dr. London engaged him in a political discussion and called Patient 17-2 a “sucker” after assuming that the patient intended to vote for Donald Trump. Patient 17-2 also reported that a large dog roamed freely in the office, and that he has an allergy to dog hair. Patient 17-2 indicated that he was abruptly discharged from Dr. London’s

practice after a staff person told Dr. London that he had been rude. The Board docketed that complaint as CR17-2, and sent it to Dr. London for a response.

3. By letter dated January 30, 2017, Dr. London responded to complaint CR17-2. Dr. London explained the medical care provided to Patient 17-2. Dr. London stated that the patient never raised any issues with the dogs in her office and did not exhibit any allergic symptoms. Dr. London acknowledged that two of her dogs come to the office daily. Dr. London stated that Patient 17-2 said "Go Trump" on his way out after his second visit and she engaged him in a political discussion. Dr. London stated that she has never "fired a patient" for political views. Dr. London stated that Patient 17-2 called and requested his records and became rude when he was told there was a \$15 fee if he wanted the records directly rather than having them sent to another healthcare professional. Patient 17-2 was dismissed from the practice for his rudeness.

4. Patient 17-2 submitted a rebuttal to Dr. London's response, which was received by the Board on February 23, 2017. In his rebuttal, Patient 17-2 disputed that Dr. London was unaware of his allergies, stated that Dr. London engaged him in a conversation about the Affordable Care Act, denied saying "Go Trump", and disputed other statements contained in Dr. London's response.

5. The medical records for Patient 17-2 contain conflicting information regarding the patient's allergies and symptoms. The medical records make no mention of an allergy to pet dander.

6. On January 24, 2017, the Board received a complaint from Patient 17-16 alleging that Dr. London abused the patient because of her political affiliation, socioeconomic status, and race. Patient 17-16 stated that Dr. London told her, "I will never understand how anyone on social services could be a Republican, especially an Indian." Patient 17-16 alleged that Dr. London berated and belittled her regularly, and called her a "drug addict who trafficks her medication" in front of "a bus full of people" in Washington, D.C., and that Dr. London admitted on video afterwards that it was "just her opinion" and that she "didn't say anything about a diagnosis." The Board docketed that complaint as CR17-16, and sent it to Dr. London for a response.

7. Dr. London responded to complaint CR17-16 by letter dated March 7, 2017. Dr. London responded regarding the medical care provided to Patient 17-16. Dr. London claimed that Patient 17-16 "made a point of unzipping her sweatshirt to show [her the patient's] pro Trump t shirt," and that she "only stated that I was surprised she was on MaineCare and state aid," and never mentioned her race. Dr. London explained that she is suspicious anytime someone comes into her practice requesting narcotics, and requires everyone to sign narcotics contracts, and come in for pill counts and urine drug screens. Dr. London explained that Patient 17-16 was called in for a pill count and the medication "looked suspiciously like saccharin." Dr. London reported that Patient 17-16 was called back in to the office four days later and the pills looked entirely different. Patient 17-16 was then called to come in to the office

again and failed to show. Thereafter, Patient 17-16 was advised she would no longer be provided controlled substances.

Dr. London stated that when coming home from Washington, D.C., she was “accosted” by Patient 17-16 on the bus, and that she was “clearly intoxicated” and “started taunting me about garbage from the march the day before.” Dr. London stated that she put her hand up and said that she did not need to talk to her, but Patient 17-16 identified her as her physician and kept yelling at her, including that she would have her license. Dr. London stated that she highly suspects Patient 17-16 of diversion, and that she “clearly needs help.”

8. On March 27, 2017, Patient 17-16 submitted a rebuttal to Dr. London’s response. Patient 17-16 denied diverting any medications. Patient 17-16 asserted that Dr. London shames her patients privately and publicly for political, ethnic, socioeconomic, or disability status on her social media accounts. Patient 17-16 disputed many of the statements made by Dr. London in her response, including that she did not “taunt” Dr. London with a pro-Trump tee shirt, particularly after having been instructed by Dr. London’s staff to keep it hidden. She unzipped her sweatshirt when requested by Dr. London for purposes of examination. Patient 17-16 disputes Dr. London’s account of her visits and pill counts. Patient 17-16 stated that on her first visit with Dr. London, she sold her marijuana tincture, marijuana brownies, and marijuana salve for \$105 even though Patient 17-16 did not have a medical marijuana certification. Patient 17-16 stated that she bought marijuana tinctures at each

appointment with Dr. London. With the rebuttal, Patient 17-16 supplied a picture of marijuana tincture bottles and a copy of her check to Dr. London. The bottles only identified the ingredient, not the identity of the seller. Patient 17-16 previously provided a copy of a video recording of part of her encounter with Dr. London in Washington, D.C.

9. Medical records for Patient 17-16 reflect no discussion regarding marijuana with the patient, but do contain urine drug toxicological screens positive for marijuana metabolites. In addition, billing records do not reflect the \$105 payment reflected in the bank processed check supplied by Patient 17-16.

10. On February 1, 2017, the Board received a complaint from Patient 17-22. Patient 17-22 alleged that she first became a patient of Dr. London in March of 2016 for the purpose of receiving substance abuse treatment. Patient 17-22 stated that she had been receiving suboxone treatment with another provider but left that practice due to sexual harassment by the healthcare professional. Patient 17-22 stated that her first meeting with Dr. London took place at a restaurant because Dr. London did not yet have an office. Patient 17-22 stated that at that meeting Dr. London told her that she could not prescribe her suboxone because she was at her patient limit but that she would prescribe her methadone. Patient 17-22 reported that Dr. London prescribed 80 milligrams of methadone per day, and due to the patient's employment background she knew that was illegal, but felt she had no other options. Patient 17-22 stated that Dr. London told her that she was asked

about the prescription, she was to say that the methadone was for neuropathic pain.

Patient 17-22 stated that between March and May 2016 she met with Dr. London at various parking lots, and even once in Dr. London's home. Patient 17-22 further alleged that she witnessed many HIPAA violations committed by Dr. London and that she revealed patient information to her. Patient 17-22 told the Board that Dr. London requested that she wear a wire and obtain opiate and benzodiazepine prescriptions from another physician because Dr. London wanted him to lose his medical license. Patient 17-22 stated that Dr. London "is loud, and is constantly swearing and yelling about something," and is "extremely dangerous and careless". The Board docketed that complaint as CR17-22, and sent it to Dr. London for a response.

11. On March 22, 2017, the Board received Dr. London's response to complaint CR17-22. Dr. London reported that Patient 17-22 had her first appointment on April 9, 2016 at her home office, complaining of pain. Dr. London stated that Patient 17-22 told her that she was supplementing her suboxone with oxycodone and heroin for pain control and "we decided together at her behest to use methadone for pain." Dr. London denied that Patient 17-22 requested suboxone treatment. Dr. London responded that at the time, she had openings in her Suboxone program. Dr. London denied the reported conversations regarding the other physician or that she requested that the patient wear a wire. Dr. London stated that Patient 17-22 first informed her that she would no longer be prescribed controlled substances in the "autumn"

after a urine drug screen was positive for cocaine, and then was dismissed from the practice in October due to “harassing messages on Facebook.” Dr. London told the Board that she “took the liberty of running a PMP report on [Patient 17-22]. Not surprisingly [the other physician] is her prescribing physician.”

12. On April 23, 2017, Patient 17-22 submitted a rebuttal to Dr. London’s response. In that rebuttal Patient 17-22 provided more details of her first encounter with Dr. London and disputes that Dr. London was treating her for her pain and promised in the initial phone call to provide suboxone treatment. Patient 17-22 acknowledged that her urine drug screen was positive for cocaine in September 2016, but states that Dr. London called her home and “fired me from her care instantly”, would not talk with her and did not provide a taper of her medication, and allowed other patients to remain in the practice notwithstanding failed urine drugs screens. Patient 17-22 also stated that Dr. London had no right to access her PMP after she was no longer her patient.

13. Medical records for Patient 17-22 reflect that she was prescribed up to 80 mg of methadone per day prn for neuropathic pain. The progress note for April 28, 2016 confirms meeting Patient 17-22 at a restaurant, and the only assessment relates to heroin addiction with the plan “methadone sent electronically to [pharmacy] 88 tabs.” The medical records reflect that Patient 17-22 reported to Dr. London that she had been on Suboxone and it did not work.

14. On February 10, 2017, the Board received a complaint from Patient 17-28 alleging that Dr. London's staff was rude when she was inquiring about billing issues and threatened to send her to "collections." Patient 17-28 reported that "no one ever answers the phones," and that if a message is left it is not responded to in a timely manner. Patient 17-28 alleged that Dr. London sent her rude Facebook messages, that dogs run in and out of the patient rooms, and "they try to push their marijuana creams on their patients."

15. On March 13, 2017, Dr. London responded to complaint CR17-28. Dr. London stated that Patient 17-28 never verbalized a complaint about the dogs in the office, stated that she checked the office call log regarding the allegation of no one answering the phone and found there were no calls from the patient's number. Dr. London explained that the patient messaged her on Facebook, and denies that there were any patient messages on Facebook. Dr. London stated that Patient 17-28 berated her office staff about the bill, but the issue was that the insurance company paid the patient directly and they billed Patient 17-28 what was due. Dr. London stated that "I have no idea what she is referring to regarding 'marijuana cream'. I make a CBD topical but it is not 'pushed'- only a handful of patients have even had access to it."

16. On March 21, 2017, the Board issued a complaint based upon information received following a report by Dr. London regarding another physician. The complaint alleges that Dr. London engaged in unprofessional conduct, improperly treated patients with methadone for "pain" in order to avoid the patient limit for suboxone prescribing, improperly accessed the

Prescription Monitoring Program (“PMP”), and raised issues regarding prescribing practices and medical recordkeeping. The Board docketed that complaint as CR17-35, and sent it to Dr. London for response.

17. On March 27, 2017, the Board received Dr. London’s response to complaint CR17-35. Dr. London denied being aggressive, abusive, yelling or screaming. Dr. London also denied switching suboxone patients to methadone. Dr. London stated that she checked the PMP for “patients who were booted from my addiction treatment program and patients others have brought concerns about” or those prompted by a call from a pharmacy.

18. On March 29, 2017, the Board issued a complaint alleging incompetence, unprofessional conduct, and violation of Board rules after receiving information from the Maine Medical Use of Marijuana Program (“MMMP”) and the Milbridge Police Department (“MPD”) that Dr. London was growing marijuana plants, making oils and butter from marijuana and selling them in her home, and Dr. London’s acknowledgment that she had given topical marijuana products and tinctures to patients as an alternative treatment for pain, anxiety and psoriasis. The Board docketed that complaint as CR17-52, and sent it to Dr. London for a response.

19. By letter dated March 30, 2017, Dr. London responded to the complaint. In her response, Dr. London stated that she had a “caregiver card” and admitted growing marijuana plants. She stated that she did not understand the complaint allegation that she does “not keep records” because she had provided “receipts of donations.” Dr. London also stated that she did

discuss risks and benefits of a “TOPICAL medication with CBD in it adequately” and “CBD is not a controlled substance.” She also contended that “CBD is not under the same laws as the rest of Maine Medical Marijuana” and that she had spoken with a field investigator from Maine Medical Marijuana program “who closed the case” after speaking with her “yet [the Board] is holding her to a different standard.” Dr. London reported to Board staff that she had spoken with an attorney who felt it was okay to do this. She also reported that she was not using her own marijuana plants to make any topical products.

20. Dr. London represents to the Board that she ceased this practice after notification by the Board and currently does not manufacture, dispense or distribute marijuana or prepared marijuana to patients.

21. On March 29, 2017, the Board issued a complaint based upon a report and information received from a physician state health officer alleging unprofessional conduct by Dr. London in her communications with MaineCare physicians and pharmacists, including in prior authorization explanations for the use of narcotics for the treatment of neuropathy. The Board docketed that complaint as CR17-53.

22. On April 6, 2017, the Board received Dr. London’s response to complaint CR17-53. Dr. London admitted in her response, that one of the examples of her communications with MaineCare staff was “over the top and inappropriate.” She added, “[a]t least now I know that they are read. I really was not sure. This is the first indication that I have that they are.” Dr. London

asserts that MaineCare prior authorizations are onerous and add an incredible amount of work.

23. By letter dated May 28, 2017, Dr. London informed the Board that she is committed to improving effective communication with patients, colleagues, and regulatory institutions. Dr. London also sought to assure the Board that she did not examine any patient data on the PMP of anyone who was not her patient as far as she knew.

24. Further investigation revealed that Dr. London accessed the PMP on several individuals who were not her patients at the time of access.

25. On July 24, 2017, the Board received an independent outside review of nineteen of Dr. London's medical charts from a Maine licensed physician who is board certified in family practice by the American Board of Medical Specialties ("ABMS"). After acknowledging that Dr. London provided treatment to a difficult patient population and did "many things well", the independent outside reviewer concluded that Dr. London inappropriately prescribed methadone for patients with active opioid use disorder, inappropriately prescribed opioids, failed to consistently obtain prior medical records or communicate with prior healthcare professionals, and failed to meet recordkeeping standards.

26. On July 31, 2017, the Vanderbilt Comprehensive Assessment Program issued its report regarding an evaluation of Dr. London as required by the Board. The report contained recommendations for additional evaluation, treatment, and education.

27. On August 5, 2017, the Board received a complaint from Patient 17-166 who sought Dr. London's assistance with tapering off of an opioid that she was prescribed. Patient 17-166 stated that the overall atmosphere of the office and having large dogs roaming free was intimidating. Patient 17-166 asserted that a discussion regarding her controlled substances prescription took place in a room that could be heard by anyone in the waiting room including a former neighbor of hers. She also stated that Dr. London had her come every 28 days but wrote her prescriptions for 30 days. Finally, Patient 17-166 alleged that Dr. London and a member of her office staff spoke in gibberish language that the patient did not understand which made her feel abused and unsafe. The Board docketed the complaint as CR17-166, and sent it to Dr. London for a response.

28. On October 23, 2017, the Board received Dr. London's response to complaint CR17-166. Dr. London explained the care that she provided to Patient 17-166. Dr. London stated that Patient 17-166 did not mention that the office atmosphere or the dogs frightened her. Dr. London denied that there was a lack of privacy during her discussions with Patient 17-166. She explained to the Board that she has the patients come every 28 days when the prescriptions are written for 30 days to ensure that the prescription would be available at the pharmacy in a timely fashion. Dr. London explained that she did not have a secret language that she speaks with her staff member, but the staff member sometimes uses a foreign language when addressing issues that a

patient should not hear, and Dr. London did not recall whether this occurred when Patient 17-166 was present.

29. On September 27, 2017, Dr. London attended the multi-day “Anger Management for Healthcare Professionals, UC San Diego Pace Program.

30. On December 27, 2017, the Board initiated a complaint following a report from a pharmacist alleging that Dr. London and her staff behaved unprofessionally when he attempted to obtain a clarification regarding a methadone prescription for her patient. He reported that although he requested a corrected prescription, as of the time of his report Dr. London had not complied with that request. The Board docketed the complaint as CR17-238 and sent it to Dr. London for a response.

31. By letter dated February 26, 2018, Dr. London responded to the complaint. In her response, Dr. London explained that she was tapering this patient off methadone and made an error on an earlier prescription. She stated when she attempted to explain this to the pharmacist, he was rude and yelled at her and her staff. She stated that the pharmacist demanded a new prescription which she sent in.

32. Board Rules related to use of controlled substances for treatment of pain require accurate and complete records and compliance with controlled substances laws and regulations. Board Rules Chapter 21, §§ 6, 8.

33. Marijuana is a Schedule I controlled substance pursuant to the Controlled Substances Act, 21 U.S.C. § 801 *et seq.*, and unless specifically excepted or unless specifically listed in another schedule the controlled

substance also includes any material, compound, mixture, or preparation which contains any quantity of the substance. The definition of marijuana in 21 U.S.C. § 802(16) includes both derivatives and preparations of marijuana. Manufacturing, distributing or dispensing marijuana is unlawful. 21 U.S.C. § 841(a). Authorized conduct by a medical provider under the Maine Medical Use of Marijuana Act, 22 M.R.S. § 2421, *et seq.*, does not include dispensing or distributing marijuana or prepared marijuana.

34. Pursuant to 32 M.R.S. § 3282-A(2)(F), the Board may impose discipline if the licensee has engaged in conduct that violates a standard of professional behavior that has been established for the practice of medicine.

35. Pursuant to 32 M.R.S. § 3282-A(2)(H), the Board may impose discipline for violation of Board statute or rule, including rules regarding the use of controlled substances for treatment of pain that are contained in Board Rules, Chapter 21.

36. On May 9, 2017, the Board reviewed complaint CR17-52. On September 12, 2017, the Board reviewed complaints CR17-2, CR17-16, CR17-22, CR17-28, CR17-35, and CR17-53. On November 14, 2017, the Board reviewed complaint CR17-166. On April 10, 2018, the Board reviewed complaint CR17-238. The Board voted to set these matters for an adjudicatory hearing. This Consent Agreement has been negotiated to resolve these matters without further proceedings. Absent Dr. London's acceptance of this Consent Agreement by signing and dating it in front of a notary or an attorney licensed to practice in the State of Maine, and delivering it to Maine Board of Licensure

in Medicine, 137 State House Station, Augusta, Maine 04333-0137 on or before August 13, 2018, the matter will proceed to an adjudicatory hearing as noticed.

COVENANTS

37. Dr. London admits the facts stated above and agrees that such conduct constitutes grounds for discipline pursuant to 32 M.R.S. § 3282-A(2)(F) for engaging in unprofessional conduct, and 32 M.R.S. § 3282-A(2)(H), for violation of Board rules.

38. As discipline for the foregoing conduct, Dr. London agrees to accept, and the Board imposes:

a) A REPRIMAND for engaging in unprofessional conduct arising out of inappropriate interactions with patients, inappropriate interactions with other professionals, inappropriate prescribing of controlled substances, violating patient confidentiality, violating Board rules, and inappropriate use of the PMP.

b) A PROHIBITION on the prescribing of methadone.

c) A LICENSE PROBATION with the following terms and conditions, which terms and conditions:

1) Within thirty (30) days of the effective date of this Consent Agreement, Dr. London shall undergo a full medical evaluation that includes evaluation of thyroid function. Dr. London shall cause a report of the evaluations required by this subparagraph to be submitted to the Board within forty-five (45) days of the effective date of this Consent Agreement.

2) Within thirty (30) days of the effective date of this Consent Agreement, Dr. London shall submit for approval by the Board Chair or Case Reporter the name of a psychiatrist together with a plan for ongoing psychiatric care. Following approval, the treating psychiatrist shall submit monthly written reports to the Board no later than the 28th day of each month confirming treatment was provided and identifying any issues or concerns that may impact Dr. London's ability to competently and safely practice medicine. After an initial period of not less than one year, the treating psychiatrist may in his or her report request that the Board modify the reporting or ongoing treatment requirement. Upon receipt of such request, the Board may grant or deny the request in its sole discretion.

3) Within thirty (30) days of the effective date of this Consent Agreement, Dr. London shall enroll in an in person continuing medical education course on the subject of medical recordkeeping pre-approved by the Case Reporter, Board Chair, or designee. The following courses are pre-approved by the Case Reporter: 1) Case Western Medical Documentation Course; 2) KSTAR Medical Record Course; 3) PACE Medical Record Keeping Course; and 4) CPEP Medical Recordkeeping Seminar. Dr. London shall provide evidence of completion of the continuing medical education course required by this subparagraph within thirty (30) days after successful completion of the continuing medical education course which successful completion shall occur within seven (7) months of the effective date of this Consent Agreement.

4) Dr. London shall attend the Case Western Reserve University School of Medicine course “Buprenorphine: Keeping Up with the Changing Landscape of Office Based Opioid Treatment” to be held on October 10, 2018, or an in person continuing medical education course on addiction medicine pre-approved by the Case Reporter, Board Chair or designee within ninety (90) days of the effective date of this Consent Agreement. Dr. London shall provide evidence of completion of the course required by this subparagraph within four (4) months of the effective date of this Consent Agreement.

5) Within sixty (60) days of the effective date of this Consent Agreement, Dr. London must engage a Board approved Physician Practice Monitor to monitor her compliance with prescribing and medical recordkeeping standards. The Physician Practice Monitor must be currently prescribing controlled substances to patients and also engaged in treating opioid addiction and prescribing buprenorphine products in an office-based treatment program. The Physician Practice Monitor shall monitor Dr. London’s compliance with controlled substance prescribing practices and medical recordkeeping standards. The monitoring and medical record review contemplated by this subparagraph may NOT occur solely by telephone, and must include in person communication or HIPAA compliant shared portal access or interface. There must be in person communication between Dr. London and the Physician Practice Monitor at least quarterly. The Physician Practice Monitor must review each week at least three (3) randomly selected

medication assisted treatment patient charts and three (3) randomly selected patients charts of patients prescribed controlled substances. The Physician Practice Monitor shall submit monthly written reports to the Board no later than the 28th day of each month. In the reports to the Board, the Physician Practice Monitor shall provide a summary of his or her monitoring activities, Dr. London's compliance with office based treatment of opioid use disorder standards, universal precautions and controlled substance prescribing and medical recordkeeping standards, and shall identify any issues with medical decision-making or documentation. Dr. London understands that the Physician Practice Monitor will be an agent of the Board pursuant to 24 M.R.S. § 2511. Dr. London shall permit the Physician Practice Monitor full access to her medical practice, including but not limited to all patient information. After three (3) months of monitoring, either Dr. London or the Physician Practice Monitor may request to reduce the number of charts required to be reviewed by this subparagraph and/or the frequency of the reviews (e.g., bi-weekly or monthly). Upon receipt of such request, the Board shall review all information, and in its sole discretion, may maintain, modify, or eliminate the requirements of this subparagraph for the remaining period of probation. In addition, after receipt by the Board of at least twelve (12) Physician Practice Monitor reports, Dr. London may request that the Board modify or eliminate the requirements of this subparagraph. Upon receipt of such request, the Board shall review all information, and in its sole discretion, may maintain,

modify, or eliminate the requirements of this subparagraph for any remaining period of probation as determined.

6) Dr. London shall reimburse to the Board the actual COSTS of the investigation in the amount of THREE THOUSAND DOLLARS (\$3,000.00) within ninety (90) days of the effective date of this Consent Agreement.

7) Dr. London shall cause all patients to be advised upon initial contact with the practice that dogs may be present at the practice and that the patient may request at any time that the dogs be removed prior to or during any office visit. In addition, Dr. London shall place written notification of the same at the entrance of the medical office.

39. Dr. London acknowledges that while this Consent Agreement together with any amendments is in effect she must directly communicate with the Board or Board staff and has the obligation to respond to any request for information or documentation within the timeframe specified or requested. If providing notice or supplying information to the Board is required by any provision of this Consent Agreement, Dr. London shall provide such notice in writing to Julie Best, Complaint Coordinator, or her successor. Failure to comply with or respond to any request will be considered a violation of this Consent Agreement.

40. The duration of any probationary period shall be tolled for: a) any absence from the state that is in excess of thirty (30) continuous days; b) any absence from the state that is in excess of sixty (60) aggregate days in a single

year; c) any period in which Dr. London does not hold an active Maine license. Dr. London shall inform the Board in writing in advance of any absence from the state specified above.

41. Any conduct of Dr. London described herein may be considered in future Board action(s) as evidence of a pattern of misconduct.

42. Violation by Dr. London of any of the terms or conditions of this Consent Agreement shall constitute grounds for discipline, including but not limited to modification, suspension, or revocation of licensure or the denial of re-licensure.

43. This Consent Agreement is not appealable and is effective until modified or rescinded in writing by the parties hereto.

44. The Board and the Department of the Attorney General may communicate and cooperate regarding Dr. London or any other matter relating to this Consent Agreement.

45. This Consent Agreement is a public record within the meaning of 1 M.R.S. § 402 and will be available for inspection and copying by the public pursuant to 1 M.R.S. § 408-A.

46. This Consent Agreement constitutes discipline and is an adverse licensing action that is reportable to the National Practitioner Data Bank (NPDB), the Federation of State Medical Boards (FSMB), and other licensing jurisdictions.

47. Nothing in this Consent Agreement shall be construed to affect any right or interest of any person not a party hereto. If any clause of this Consent

Agreement is deemed illegal or invalid, then that clause shall be deemed severed from this Consent Agreement.


48. Dr. London acknowledges by her signature hereto that she has read this Consent Agreement, that she has had an opportunity to consult with an attorney before executing this Consent Agreement, that she executed this Consent Agreement of her own free will and that she agrees to abide by all terms and conditions set forth herein.

49. Dr. London has been represented by Sandra L. Rothera, Esq., who has participated in the negotiation of the terms of this Consent Agreement.

50. For the purposes of this Consent Agreement, the term "execution" means the date on which the final signature is affixed to this Consent Agreement.

I, CATHLEEN G. LONDON, M.D., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT AND AGREE WITH ITS CONTENTS AND TERMS. I FURTHER UNDERSTAND THAT BY SIGNING THIS AGREEMENT, I WAIVE CERTAIN RIGHTS, INCLUDING THE RIGHT TO A HEARING BEFORE THE BOARD. I SIGN THIS CONSENT AGREEMENT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS CONSENT AGREEMENT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

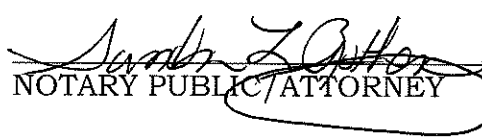
DATED: 8/8/2018


CATHLEEN G. LONDON, M.D.

STATE OF Maine
Washington, S.S.

Personally appeared before me the above-named Cathleen G. London, M.D., and swore to the truth of the foregoing based upon her own personal knowledge, or upon information and belief, and so far as upon information and belief, she believes it to be true.

DATED: 8/8/2018


NOTARY PUBLIC/ATTORNEY BAR# 7853

MY COMMISSION ENDS: _____

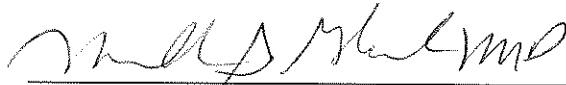
DATED: 8/8/2018


SANDRA L. ROTHERA, ESQ.
Attorney for Cathleen G. London, M.D.

STATE OF MAINE BOARD
OF LICENSURE IN MEDICINE

DATED:

8/14/18



MAROULLA S. GLEATON, M.D., Chair

STATE OF MAINE DEPARTMENT
OF THE ATTORNEY GENERAL

DATED:

August 14, 2018



MICHAEL MILLER
Assistant Attorney General

Effective Date: August 14, 2018