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 **NORTON ROSE FULBRIGHT**

28th Annual UT Health Law Conference Operational Impact of Significant Cases

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ISSUES AFFECTING HOSPITALS AND HEALTHCARE PROVIDERS Physician Credentialing & HCQIA Immunity *Anderson v. Eastern Connecticut Health Network, Inc.* p. 3

- Dr. Harry Anderson held privileges to practice general surgery and certain surgical specialties at Manchester Memorial Hospital in Manchester, Connecticut
- In late 2009, Dr. Joel Reich, the CMO of Eastern Connecticut Health Network, Inc. (ECHN), received several concerning reports regarding Dr. Anderson's conduct
- Dr. Anderson seemed unsure of himself during surgery, was unkempt in appearance, and at times appeared to be in a "stupor-like state"

Anderson v. Eastern Connecticut Health Network, Inc.
(cont'd)

- Dr. Anderson's psychiatrist told the hospital that these problems were probably due to medication Dr. Anderson was taking for depression
- In August 2010, Dr. Anderson sold his practice to ECHN
- ECHN Health Services, Inc., ECHN's wholly owned subsidiary, hired Dr. Anderson as a general surgeon and chair of Manchester Memorial Hospital's department of surgery pursuant to a written employment agreement

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(cont'd)

- As a condition of his employment, Dr. Anderson was required to maintain medical staff privileges at Manchester Memorial
- Shortly after Dr. Anderson's hiring, Dr. Reich became aware of new reports regarding Dr. Anderson's conduct and appearance, which stated that Dr. Anderson seemed confused and shaky, slurred his speech and mumbled, wore dirty clothes, and had toothpaste on his face while seeing patients

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(cont'd)

- New reports surfaced several months later that Dr. Anderson had mocked a physician's assistant during surgery, was difficult to reach when on emergency call, and had appeared in the hospital late at night, disoriented and smelling of alcohol
- In January 2011, Dr. Anderson discussed the reports in a meeting with Dr. Reich and two other hospital officials, where Dr. Reich suggested that Dr. Anderson consider taking a medical leave of absence or not taking emergency call, and whether Dr. Anderson might wish to retire

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(cont'd)

- Dr. Anderson agreed and was granted 60 days of paid leave from both medical staff privileges and employment
- As a condition of his leave, Dr. Anderson agreed to submit to an evaluation of his physical and cognitive abilities, and his return was conditioned on a satisfactory showing
- He sought the assistance of Health Assistance InterVention Education Network (HAVEN), an organization that evaluates physicians with potential impairment and provides them support

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