

a. Successfully passing the Qualifying Examination Parts I and II of the Medical Council of Canada, thereby becoming registered in the Canadian Medical Register as a Licentiate (one requirement of licensure in Canada);

b. Completing the Medical License Bridging Program in Canada, including medical ethics and an Observership in the general medical practice of Dr. J. Abiscott; and

c. Receiving certification as an Advanced Cardiac Life Support provider from the Sunnybrook Medical Center, University of Toronto.

3. Pursuant to Title 32 M.R.S.A. § 3280-A(4), “the board may not reinstate a lapsed license... who has not provided evidence satisfactory to the board of having actively engaged in the practice of medicine continuously for at least the past twelve months under the license of another jurisdiction... unless the applicant has first satisfied the board of the applicant’s current competency...”

4. Pursuant to Title 32 M.R.S.A. § 3271(5), an “applicant may not be licensed unless the Board finds that the applicant is qualified and no cause exists, as set forth in section 3282-A, that may be considered grounds for disciplinary action against a licensed physician or surgeon.”

5. On December 11, 2009, the Board received correspondence from Dr. Butlers indicating that he would agree to work under the supervision of another licensed physician in a general practice.

6. On April 13, 2010, the Board reviewed Dr. Butlers' application for licensure (reinstatement). Following its review, the Board voted to grant Dr. Butler's a conditional Maine medical license if he had a reasonable score on the Special Purpose Examination (SPEX), an examination provided by the Post-Licensure Assessment System (PLAS).

7. On August 9, 2010, the Board received an e-mail from Dr. Butlers in which he agreed to accept a conditional medical license under the close supervision of a board certified primary care physician. In addition, Dr. Butlers indicated that he would be limiting his scope of his medical practice to primary care, and would not be performing surgery. The Board also received written confirmation from PLAS that Dr. Butlers scored a 90 on the SPEX.

8. Absent Dr. Butlers' acceptance of the terms and conditions of this Consent Agreement for Conditional Licensure by signing it and dating it, having it notarized, and returning it to Assistant Executive Director Dan Sprague, Maine Board of Licensure in Medicine, 137 State House Station, Augusta, Maine 04333-0137, the Board shall not grant him a license to practice medicine in the State of Maine.

9. By signing this Consent Agreement, Dr. Butlers waives any and all objections to, and hereby consents to allow the Board's legal counsel to present this proposed Consent Agreement to the Board for possible ratification on September 14, 2010. Dr. Butler also forever waives any arguments of bias or otherwise against any of the Board members in the event that the Board fails to ratify this proposed Consent Agreement.

COVENANTS

10. Dr. Butlers agrees that the Board has sufficient evidence from which it could reasonably conclude that he has not actively practiced medicine for twenty years, and that, at present, his lack of active medical practice for such a long period of time constitutes grounds for modification or restriction his Maine medical license pursuant to 32 M.R.S.A. § 3282-A.

11. In light of Dr. Butlers' admission in paragraph 10 above, the Board agrees to issue, and Dr. Butlers agrees to accept, a conditional license to practice medicine in this State following the execution² of this Consent Agreement. Unless and until this Consent Agreement is modified or rescinded in writing by agreement of all of the parties, Dr. Butlers' Maine medical license shall be subject to the following conditions:

- a. Dr. Butlers shall limit his practice of medicine to a closely supervised primary care medical practice location approved by the Board;
- b. Dr. Butlers shall practice medicine only at the Board-approved location, and under the close supervision of a board-certified primary care physician approved by the Board, who is a signatory to this Consent Agreement;
- c. Dr. Butlers shall ensure that the duties of his supervising/monitoring board-certified primary care physician shall

² For the purposes of this Consent Agreement, "execution" means the date on which the final signature is affixed to this Consent Agreement.

include: on-going, regular supervision; review of patient charts (including clinical scales performance, patients' responses to outcome, and satisfaction reviews); review of the efficacy of prescribed medications; and consultation with other health care providers involved in the patients' care. In complying with this requirement, Dr. Butlers shall permit his supervising physician full access to all patient information;

d. Dr. Butlers shall ensure that his Board-approved physician supervisor is aware of and ensures that Dr. Butlers complies with the following conditions:

- (i) Dr. Butlers shall not perform surgery;
- (ii) Dr. Butlers shall see a limited number of patients per day, which number shall be monitored and regulated by his supervising physician;
- (iii) Dr. Butlers and his supervising physician shall engage in a case discussion and record review on the same date on which the patient is seen by Dr. Butlers;
- (iv) Dr. Butlers shall ensure that his supervising physician develops and implements protocols for the medical practice that assist Dr. Butlers with clinical practice updates (*i.e.* recently developed medical tests) and potential drug interactions (*i.e.* pharmacological agents);
- (v) Dr. Butlers shall ensure that he regularly communicates with his supervising physician; and

(vi) Dr. Butlers shall ensure that his supervising physician provides the Board with quarterly reports concerning his compliance with the terms and conditions of this Consent Agreement, Dr. Butlers' practice of medicine, and progress towards eventual independent practice.

e. Dr. Butlers and his supervising physician shall permit the Board or its agent(s) to inspect his medical practice at random intervals as determined by the Board or its designee to ensure his compliance with the terms and conditions of this Consent Agreement. Such inspection shall include access to all areas and records of the medical practice;

f. Dr. Butlers' Board-approved supervising physician agrees to and understands his/her obligations under this Consent Agreement, and shall immediately report to the Board in writing:

(i) any violation by Dr. Butlers of any of the terms or conditions of this Consent Agreement; or

(ii) any change in status regarding his/her willingness to serve as Dr. Butlers' supervising physician; or

(iii) any concern regarding any aspect of Dr. Butlers' medical practice or abilities; or

(iv) any negative change in Dr. Butlers' employment status with the medical practice.

12. Dr. Butlers has not been represented by legal counsel in the negotiation of the terms of this Consent Agreement.

13. Violation of any of the terms or conditions of this Consent Agreement by Dr. Butlers shall constitute grounds for discipline, including but not limited to suspension or revocation of licensure.

14. Pursuant to 10 M.R.S.A. § 8003(5)(B) the Board and Dr. Butlers agree that, in addition to any other disciplinary action available to it by law, the Board has the authority to issue an order modifying, suspending, or revoking his license in the event that he fails to comply with any of the terms or conditions of this Consent Agreement.

15. Dr. Butlers waives his right to a hearing before the Board or any court regarding all findings, terms and conditions of this Consent Agreement.

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

17. The Board and the Office of the Attorney General may communicate and cooperate regarding Dr. Butlers or any other matter relating to this Consent Agreement.

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

19. This Consent Agreement constitutes adverse licensing action that is reportable to the National Practitioner Data Bank (N.P.D.B.) and the Healthcare Integrity and Protection Data Bank (H.I.P.D.B.).

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

21. The term of this Consent Agreement is indefinite from the date of execution, and remains in full force and effect so long as Dr. Butlers is licensed with the Board and complies with the terms and conditions of this Consent Agreement.

22. Dr. Butlers may request amendments or changes to this Consent Agreement by submitting a request in writing to the Board, which may decide the matter without a hearing.

I, GEORGE H. BUTLERS, 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: August 26, 2010

George H. Butlers MD
GEORGE H. BUTLERS, M.D.

Province of Ontario
STATE OF Ontario

_____, S.S.

Personally appeared before me the above-named George H. Butlers, 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: Aug 26/2010

[Signature]
NOTARY PUBLIC / ATTORNEY

MY COMMISSION ENDS:

Nov / 2010



STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

DATED: 9/14/2010

Sheridan R. Oldham, M.D.
SHERIDAN R. OLDHAM, M.D., Chairman

STATE OF MAINE DEPARTMENT
OF THE ATTORNEY GENERAL

DATED: 9/14/10

[Signature]
DENNIS E. SMITH
Assistant Attorney General

SUPERVISING PHYSICIAN

BY SIGNING BELOW, I CERTIFY THAT I AM VOLUNTARILY AGREEING TO ACT AS THE SUPERVISING PHYSICIAN UNDER THE TERMS AND CONDITIONS OF THIS CONSENT AGREEMENT, THAT I UNDERSTAND MY OBLIGATIONS UNDER THIS CONSENT AGREEMENT AND THAT I WILL FULFILL THEM, AND THAT I AM NOT A PARTY TO THIS CONSENT AGREEMENT AND WILL BE ACTING AS AN AGENT FOR THE BOARD IN ENSURING DR. BUTLERS' COMPLIANCE WITH THE TERMS AND CONDITIONS OF THIS CONSENT AGREEMENT.

DATED: _____

_____, M.D.
Supervising Physician

Effective Date:

STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

DATED: 9/14/2010

Sheridan R. Oldham, M.D.
SHERIDAN R. OLDHAM, M.D., Chairman

STATE OF MAINE DEPARTMENT
OF THE ATTORNEY GENERAL

DATED: 9/14/10

Dennis E. Smith
DENNIS E. SMITH
Assistant Attorney General

SUPERVISING PHYSICIAN

BY SIGNING BELOW, I CERTIFY THAT I AM VOLUNTARILY AGREEING TO ACT AS THE SUPERVISING PHYSICIAN UNDER THE TERMS AND CONDITIONS OF THIS CONSENT AGREEMENT, THAT I UNDERSTAND MY OBLIGATIONS UNDER THIS CONSENT AGREEMENT AND THAT I WILL FULFILL THEM, AND THAT I AM NOT A PARTY TO THIS CONSENT AGREEMENT AND WILL BE ACTING AS AN AGENT FOR THE BOARD IN ENSURING DR. BUTLERS' COMPLIANCE WITH THE TERMS AND CONDITIONS OF THIS CONSENT AGREEMENT.

DATED: 1/5/12

[Signature]
_____, M.D.
Supervising Physician

Effective Date: