

**STATE OF ILLINOIS  
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
DIVISION OF PROFESSIONAL REGULATION**

DEPARTMENT OF FINANCIAL AND	)
PROFESSIONAL REGULATION	)
of the State of Illinois,	Complainant, )
v.	) No. 200904802
W. ROBERT ELGHAMMER, M.D.,	)
License No. 036028934,	)
Controlled Substances License	)
No. 336003825	Respondent. )

**CONSENT ORDER**

The Department of Financial and Professional Regulation, Division of Professional Regulation, of the State of Illinois, by Vladimir Lozovski, one of its attorneys, (hereinafter the "Department") and W. Robert Elghammer, M.D., (hereinafter the "Respondent"), hereby agree to the following:

**STIPULATIONS**

W. Robert Elghammer, M.D. is licensed as a Physician and Surgeon in the State of Illinois, holding License No. 036-028934. Said license is in Active status. At all times material to the matter(s) set forth in this Consent Order, the Department of Financial and Professional Regulation, Division of Professional Regulation, of the State of Illinois had jurisdiction over the subject matter and parties herein.

Information has come to the attention of the Department that alleges that Respondent failed to maintain required office records related to office-keeping and dispensing of controlled substances in his private practice. The allegation(s) as set forth herein, if proven to be true, would constitute grounds for suspending, revoking or other discipline of Respondent's license as a Physician and Surgeon, on the authority 255 Illinois Compiled Statutes, Paragraph 60/22(A) (33).

An Informal Conference was held in this regard on September 1, 2010. M. Laporta, M.D. was present on behalf of the Medical Disciplinary Board and V. Lozovskiy was present for the Department. Respondent was present and represented by L. Walanka, Esq. and E. Williams, Esq. During the Informal Conference, Respondent admitted the allegations and provided detailed information regarding the steps he undertook to correct his record-keeping issues. In addition, Respondent provided information regarding his current practice as well as his plans for the future.

For purposes of this Consent Order only, Respondent acknowledges that should this matter proceed to a contested hearing, the Illinois Medical Disciplinary Board (the "Board") could find a violation of the Medical Practice Act. The Department and Respondent stipulate that the above acknowledgement is made only for the purposes of this Consent Order. In the event that this Consent Order is not approved by the Board or is not approved by the Director of the Division of Professional Regulation of the Illinois Department of Financial and Professional Regulation ("Director"), this acknowledgement shall not be admissible in any proceeding and the matter will be set for an evidentiary hearing on the merits as if this Consent Order had not been submitted. In addition, upon approval of this Consent Order, neither this acknowledgement nor this Consent Order may be utilized in any other proceeding, except one to enforce this Agreement.

Respondent has been advised of the right to have pending allegations reduced to written charges, the right to a hearing, the right to contest any charges brought, and the right to administrative review of this Consent Order. Respondent knowingly waives each of these rights, as well as the right to administrative review of this Consent Order. Such waiver ceases if this Consent Order is rejected by either the Medical Disciplinary Board or the Director of the

Division of Professional Regulation of the Illinois Department of Financial and Professional Regulation.

Respondent and the Department have agreed, in order to resolve this matter, that Respondent, W. Robert Elghammer, M.D., be permitted to enter into a Consent Order with the Department, providing for the imposition of disciplinary measures which are fair and equitable under the circumstances and which are consistent with the best interests of the people of the State of Illinois.

### CONDITIONS

WHEREFORE, the Department, through Vladimir Lozovski, its attorney, and W. Robert Elghammer, M.D., Respondent, agree:

- A. Physician and Surgeon License of W. Robert Elghammer, M.D., license No. 036-028934, is hereby placed on an Indefinite Probation for a minimum of three (3) years;
- B. During the period of probation, Respondent shall provide the Department with quarterly reports which include: (i) Current residential address and contact telephone number; (ii) Information regarding any patient complaints, billing disputes and/or problems; and (iii) Information, regarding any arrests, criminal, or civil actions filed, including DUI and/or other similar offenses against the Respondent;
- C. Respondent shall notify the Department's Chief of Probation Investigations in writing of any change in employment and/or home address and/or telephone number within ten (10) days;
- D. While Respondent's said license is on Probation, Respondent shall annually take and complete an additional ten (10) category I Continuing Medical Education credits directly related to prescribing and record-keeping Controlled Substances in a medical practice. Said additional CMEs are not to be counted towards the annual CMEs

required by Illinois Medical Practice Act;

- E. While Respondent's said license is on Probation, Respondent shall keep a Log of all Schedule II-V Controlled Substances issued by him. On quarterly basis, Respondent shall submit to the Department a copy of the Schedule II-V Controlled Substance Log containing the following information: patient's identifiers, medication's name, medication's strength, medication's dose, medication's amount and prescription's date;
- F. While Respondent's said license is on Probation, the Department shall have the right to make random, quarterly inspections of Respondent's office, including the medical records and controlled substances dispensing logs if required;
- G. While Respondent's said license is on Probation, Respondent shall not prescribe or administer Schedule II-V controlled substances to any of his family members and/or personal friends, except in a documented life saving, emergency intervention;
- H. Respondent shall continue to see a primary care physician in Illinois to treat any and/all medical illnesses, complaints and/or symptoms. Respondent shall request his primary care physician to submit quarterly reports to the Department documenting Respondent's current health status and prognosis;
- I. If working in his own practice, Respondent shall obtain a practice monitor/mentor, who is a licensed Physician and Surgeon in the State of Illinois. The practice monitor/mentor shall be hired at the expense of Respondent and shall be pre-approved by the Chief Medical Coordinator of the Department. Respondent shall request that his practice monitor/mentor submit quarterly reports about scope and performance appraisals. On a quarterly basis the practice monitor/mentor shall meet with Respondent and randomly select and review five (5) charts of patients who have been seen by Respondent during

the quarter. The practice monitor/mentor shall review the charts of those patients and submit independent quarterly reports to the Department evaluating the scope, appropriateness, and quality of medical care rendered by Respondent;

- J. The practice monitor/mentor shall agree to inform the Department immediately if there is evidence of inappropriate behavior, professional misconduct, a violation of Respondent's probation or any violation of the laws and rules governing the practice of medicine;
- K. Respondent shall immediately notify the Department should his relationship with his practice monitor/mentor cease and immediately take actions to select a new monitor/mentor and obtain the approval of the Chief Medical Coordinator;
- L. If working in any other health-care setting than his private practice, Respondent shall request said health-care setting designated person to submit quarterly reports to the Department regarding Respondent's clinical performance, attendance record and any and all other issues arising out of Respondent's practice of medicine;
- M. All the reports required to be submitted under the terms of this Probation shall be filed with the Department no later than 1/20, 4/20, 7/20 and 10/20 of each year during the full term of the Probation. Any reports required of Respondent hereunder shall be mailed to:

**Probations Investigations Unit  
Illinois Dept. of Financial and Professional Regulation  
Division of Professional Regulation  
100 W. Randolph Street, Suite 9-300  
Chicago, IL 60601**

- N. Respondent agrees that a violation of the terms and conditions of this Consent Order or a violation of the terms of probation is a violation of 225 ILCS 60/22(A)(15).
- O. This Consent Order shall become effective immediately after it is approved by the

Director of the Division of Professional Regulation of the Illinois Department of  
Financial and Professional Regulation.

**DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION of the State of  
Illinois  
Division of Professional Regulation**

12/1/10  
DATE

Vladimir Lozovskiy  
Vladimir Lozovskiy  
Attorney for the Department

12/1/10  
DATE

W. Robert Elghammer, M.D.  
W. Robert Elghammer, M.D.  
Respondent

12/2/10  
DATE

Lillian Walanka  
Lillian Walanka, Esq.  
Attorney for Respondent

12-2-10  
DATE

Edward Williams  
Edward Williams, Esq.  
Attorney for Respondent


1-19-11  
DATE

[Signature]  
Member, Medical Disciplinary Board

The foregoing Consent Order is approved in full.

DATED THIS 4<sup>th</sup> day of February, 2011.

**DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION of  
the State of Illinois  
Division of Professional Regulations**

  
**DONALD W. SEASOCK  
ACTING DIRECTOR**

REF: Case No. 2009-04802/License No. 036-028934