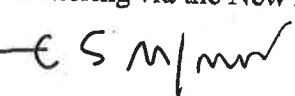


5. Applicant disclosed on his application for a Vermont medical license that the New Hampshire Board issued an Emergency License Suspension of his license on January 30, 2017. (*Attached as Exhibit A*).
6. Applicant entered into a Preliminary Agreement for License Restrictions with the New Hampshire Board on January 31, 2017 which superseded the Emergency License Suspension. (*Attached as Exhibit B*).
7. On August 7, 2017, the New Hampshire Board issued an Order of Conditional Approval to Return to Practice. (*Attached as Exhibit C*).
8. On November 9, 2018, the New Hampshire Board issued an Order Approving Petition to Amend Order of Conditional Approval to Return to Practice and Approve a Return to Practice in Anesthesiology. (*Attached as Exhibit D*).
9. The New Hampshire Board Emergency License Suspension was based upon allegations that Applicant had:
 - a. diverted hydromorphone from the hospital for his personal use;
 - b. committed professional misconduct by using drugs in violation of New Hampshire law; and
 - c. falsified medical records to indicate that diverted drugs had been administered to patients.
10. In February 2017, Applicant entered a 6-week inpatient evaluation treatment program. On April 10, 2017, he entered into a monitoring contract for five years with the New Hampshire Professionals Health Program ("NHPHP").
11. The August 7, 2017, New Hampshire Board Order of Conditional Approval to Return to Practice:

- a. limited Applicant's practice to only critical care medicine for a year after his return to practice;
 - b. required him to have a work-place monitor who would provide quarterly reports; required him to adhere to his NHPHP contract for five years; and,
 - c. provided that in order to obtain the New Hampshire Board's approval of return to practice other than critical care medicine, including but not limited to anesthesiology, Applicant would need to be re-evaluated by Caron Treatment Centers.
12. In December 2017, at Applicant's request, he was re-evaluated by Caron Treatment Centers ("Caron"). Caron opined that Applicant was not ready to return to anesthesiology.
13. Applicant has not yet returned to the practice of medicine, but represents that he has positive prospects for a position in a Vermont hospital in the practice of anesthesia.
14. On March 15, 2018, Applicant entered into a contract with the Vermont Practitioner Health Program ("VPHP"). VPHP will assume monitoring of Applicant when he secures a position in Vermont.
15. On October 1, 2018, Applicant returned to Caron for re-evaluation. Caron recommended, among other things, that Applicant be permitted to return to the practice of anesthesiology given successful monitoring via the New Hampshire PHP. (~~Caron Report Attached as Exhibit E~~). *mw*
16. On October 18, 2018, the New Hampshire Professionals Health Program ("NH PHP") wrote to the NH Board of Medicine to advise the Board of Dr. Manfred's

- a. limited Applicant's practice to only critical care medicine for a year after his return to practice;
 - b. required him to have a work-place monitor who would provide quarterly reports; required him to adhere to his NHPHP contract for five years; and,
 - c. provided that in order to obtain the New Hampshire Board's approval of return to practice other than critical care medicine, including but not limited to anesthesiology, Applicant would need to be re-evaluated by Caron Treatment Centers.
12. In December 2017, at Applicant's request, he was re-evaluated by Caron Treatment Centers ("Caron"). Caron opined that Applicant was not ready to return to anesthesiology.
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14. On March 15, 2018, Applicant entered into a contract with the Vermont Practitioner Health Program ("VPHP"). VPHP will assume monitoring of Applicant when he secures a position in Vermont.
15. On October 1, 2018, Applicant returned to Caron for re-evaluation. Caron recommended, among other things, that Applicant be permitted to return to the practice of anesthesiology given successful monitoring via the New Hampshire PHP. ~~(Caron Report Attached as Exhibit E).~~ 
16. On October 18, 2018, the New Hampshire Professionals Health Program ("NH PHP") wrote to the NH Board of Medicine to advise the Board of Dr. Manfred's

full compliance with his monitoring agreement and to opine that he is now fit to return to the practice of anesthesia with continued monitoring of the NHPHP,

~~Attached as Exhibit F~~, mw?

17. On November 9, 2018 the New Hampshire Board of Medicine issued its Order amending its original Order of Conditional Approval to Return to Practice to allow Dr. Manfred to return to the practice of anesthesiology. (*Exhibit D*). The Order imposes the following conditions:

- a. Dr. Manfred shall establish a work-place monitoring physician prior to his return to work, such monitor to be approved by the Board along with the work-place monitoring agreement between Dr, Manfred and the monitoring physician. Any change to the work-place monitoring physician shall be approved by the Board; and
- b. Dr. Manfred shall ensure that the work place monitor provide quarterly reports to the Board describing his clinical care, conduct and professionalism while practicing ; and
- c. Dr. Manfred shall adhere to the NH PHP contract for five years from the date of the signature by the NH PHP Director or five years after a relapse.

II. Agreement as to Terms and Conditions of Vermont Licensure

18. Applicant is knowingly and voluntarily agreeing to this Stipulation and Consent Order. He agrees and understands that by executing this document he is waiving at this time any rights of due process that he may possess with regard to the issuance to him of a Vermont medical license with accompanying terms and conditions. He agrees that the Vermont Board of Medical Practice possesses and

full compliance with his monitoring agreement and to opine that he is now fit to return to the practice of anesthesia with continued monitoring of the NHPHP.

~~(Attached as Exhibit F).~~ C S M / mmw.

17. On November 9, 2018 the New Hampshire Board of Medicine issued its Order amending its original Order of Conditional Approval to Return to Practice to allow Dr. Manfred to return to the practice of anesthesiology. (*Exhibit D*). The Order imposes the following conditions:

- a. Dr. Manfred shall establish a work-place monitoring physician prior to his return to work, such monitor to be approved by the Board along with the work-place monitoring agreement between Dr, Manfred and the monitoring physician. Any change to the work-place monitoring physician shall be approved by the Board; and
- b. Dr. Manfred shall ensure that the work place monitor provide quarterly reports to the Board describing his clinical care, conduct and professionalism while practicing ; and
- c. Dr. Manfred shall adhere to the NH PHP contract for five years from the date of the signature by the NH PHP Director or five years after a relapse.

II. Agreement as to Terms and Conditions of Vermont Licensure

18. Applicant is knowingly and voluntarily agreeing to this Stipulation and Consent Order. He agrees and understands that by executing this document he is waiving at this time any rights of due process that he may possess with regard to the issuance to him of a Vermont medical license with accompanying terms and conditions. He agrees that the Vermont Board of Medical Practice possesses and

shall continue to maintain jurisdiction in this matter, including any required action to enforce the terms herein.

19. Applicant acknowledges that at all times he has had the right to be represented by counsel in this matter. Applicant agrees that he personally has read and carefully reviewed this document. Applicant agrees to accept and fully abide by the terms and conditions set forth below while this agreement remains in force.
20. Applicant agrees that the terms and conditions of this agreement shall be imposed concurrently with the issuance of Applicant's Vermont medical license.
21. Applicant understands and agrees that that the Vermont medical license issued pursuant to this agreement shall be issued with the designation "conditioned" for at least five years from the time that the Board accepts and approves this Stipulation and Consent Order, until such time as the conditions may be lifted. After the Board has received five years of reports as called for in this agreement, Applicant may request that the Board lift the conditions by submitting a request through the assigned Committee. Applicant understands, acknowledges, and agrees that it will be within the discretion of the Board to determine whether the conditions set forth herein are for an indefinite period notwithstanding the process herein described to request relief from conditions after five years.
22. Applicant agrees that he shall abide fully and in good faith with all provisions of his Vermont Practitioner Health Program ("VPHP") contract. Applicant shall not cease, terminate, or interrupt his participation in VPHP without the advance written approval of the Board or Committee specifically assigned, following presentation of a written petition from him in this regard. The Committee and/or Board shall

retain sole discretion to approve or disapprove any such petition. The Applicant and VPHP may agree to modifications of the provisions of his VPHP contract without Board approval, but Applicant must inform the Board immediately of any request to modify the VPHP contract or any modifications to it.

23. Applicant agrees that he shall abide fully and in good faith with the NH Board Order of Conditional Approval to Return to Practice as amended by the NH Board Order Approving Petition to Amend Order for Conditional Approval to Return to Practice and to Approve a Return to Practice in Anesthesiology.
24. Applicant agrees to immediately inform the Vermont Board of any changes to the Order of Conditional Approval from the New Hampshire Board as amended.
25. Applicant may work only in critical care medicine or anesthesiology. Prior to starting any position in critical care medicine or anesthesiology, Applicant shall provide the Board with the name of his employer, the scope of work expected to be performed, and the name of his practice monitor.
26. Applicant shall not start any position until he provides all the above information and has received written approval from the assigned Committee.
27. Applicant shall not start in any new position until after he has received written approval from the assigned Committee of the position and the practice monitor.
28. As part of the approval process, Applicant shall provide the assigned Committee the name of the employer, confirmation that the employer has received a copy of this stipulation, and the name of the practice monitor.
29. Applicant agrees not to engage in any practice of medicine except for practice that is subject to monitoring by a practice monitor as called for by this Order. The

practice monitor shall be subject to the approval of the assigned Committee.

Applicant may not start any practice until after his practice monitor is approved by the assigned Committee.

30. Applicant shall be responsible for ensuring that the practice monitor complies with the terms and obligations of the Practice Monitoring Agreement that shall be signed by both Applicant and the practice monitor. The Practice Monitoring Agreement is attached hereto as "Exhibit G".
31. Applicant shall comply with the terms and obligations of the Practice Monitoring Agreement.
32. The practice monitor shall report his findings in writing to the assigned Committee on a quarterly basis. The practice monitor's first report shall be submitted to the assigned Committee no later than 15 days following the ninetieth day after Applicant's return to practice.
33. The practice monitoring shall continue for at least two years after Dr. Manfred's return to practice regardless of the type of practice and at least 18 months of the practice monitoring shall be in anesthesiology. The two years shall equal two years of full-time practice of medicine. Dr. Manfred may request in writing to end the requirement for monitoring after two (2) years of practice as long as he has met the 18 months of practice monitoring in anesthesiology. The practice monitoring requirement will not cease until the Committee has approved, in writing, Dr. Manfred's request to end the monitoring.
34. Applicant shall provide a copy of this Stipulation and Consent Order to the practice monitor.

35. Applicant shall be solely responsible for all costs associated with the practice monitor. Applicant shall be responsible for ensuring that the practice monitor's reports are timely submitted to the Committee.
36. Applicant agrees that his agreement with the practice monitor shall provide that the practice monitor immediately notify the Board if there is any indication that the Applicant has engaged in practice that does not meet the standard of care or if Applicant has engaged in any substance abuse. Applicant must also immediately notify the Board if the practice monitor informs him of a belief that the Applicant may have engaged in practice that does not meet the standard of care or engaged in any substance abuse.
37. In the event that the practice monitor can no longer monitor Applicant's practice, Applicant shall immediately notify the assigned Committee in writing. Notice must be provided no later than the first workday on which Applicant learns that the monitor has stopped or will stop monitoring him. Applicant shall retain the services of a new practice monitor, subject to preapproval by the assigned Committee. Within ten (10) days of providing written notice to the assigned Committee that the practice monitor can no longer monitor his practice, Applicant shall provide the assigned Committee with the name and curriculum vitae of the proposed new practice monitor. The assigned Committee will provide written notification to Applicant indicating whether it approves of the new proposed practice monitor.
38. If Applicant has not provided the Committee with a proposed new practice monitor, within ten days from the day on which the approved monitor stops monitoring his

practice, Applicant shall discontinue his practice. Applicant shall not return to practice until he has provided the assigned Committee with the name and curriculum vitae of the proposed new practice monitor and the assigned Committee has provided the Applicant written notice of the new proposed practice monitor.

39. Applicant agrees to allow a Board member, an investigator for the Board, or an Assistant Attorney General to speak with applicant's practice monitor regarding his recovery or his ability to practice. The agreement with the practice monitor must include Applicant's consent to having the practice monitor speak with a Board representative and the practice monitor's agreement to do so.
40. The parties agree that this Stipulation and Consent Order shall be a public document, shall be made part of Applicant's licensing file, and shall be reported as a conditioned license to other licensing authorities and/or entities including, but not limited to, the National Practitioner Data Bank and the Federation of State Medical Boards.
41. This Stipulation and Consent Order is subject to review and acceptance by the Vermont Board of Medical Practice and shall not become effective until presented to and approved by the Board. If the Board rejects any part of this Stipulation and Consent Order, the entire agreement shall be considered void. However, should the terms and conditions of this Stipulation and Consent Order be deemed acceptable by the Board, the parties request that the Board enters an order adopting the facts and/or conclusions herein and all terms and conditions of licensure as set forth herein, including that this license is conditioned.

42. Applicant agrees that all terms and conditions herein may be adopted as an enforceable order of the Board. Applicant agrees that the Board of Medical Practice shall retain continuing jurisdiction in this matter and may enforce as necessary all terms and conditions herein.

Dated at Burlington, Vermont, this 3 day of December, 2018.

STATE OF VERMONT
THOMAS J. DONOVAN
ATTORNEY GENERAL

by: Margaret O. Vincent
MARGARET O. VINCENT
Assistant Attorney General

Dated at Berlin, Vermont, this 30 day of November, 2018.

C
CHRISTOPHER S. MANFRED, M.D.
Applicant

ORDER

The Vermont Board of Medical Practice, so Orders, that the Vermont Medical License of CHRISTOPHER S. MANFRED, M.D., shall be a Conditioned License subject to the above Terms and Conditions.

FOREGOING, AS TO CHRISTOPHER S. MANFRED, M.D.
APPROVED AND ORDERED
VERMONT BOARD OF MEDICAL PRACTICE

DATED: December 5th, 2018

ENTERED AND EFFECTIVE: December 5th, 2018

EXHIBIT A

**State of New Hampshire
Board of Medicine
Concord, New Hampshire**

In the Matter of:
Christopher S. Manfred, MD
License No.: 15036
(Adjudicatory Proceedings)

Docket No. 16-11

**ORDER OF EMERGENCY LICENSE SUSPENSION
AND NOTICE OF HEARING**

1. RSA 329:18-b; RSA 541-A:30, III, and New Hampshire Board of Medicine Administrative Rule ("Med") 409.01 authorize the New Hampshire Board of Medicine ("Board") to suspend a license to practice medicine for no more than one hundred twenty (120) days pending completion of an adjudicatory proceeding, in cases involving imminent danger to life or health. In such cases, the Board must commence a hearing not later than 10 days after the date of the emergency order. If the Board does not commence the hearing within 10 days, the suspension order shall be automatically vacated. *See*, RSA 541-A:30, III. The Board may not continue such a hearing without the consent of the licensee to the continuation of the emergency suspension. *See*, RSA 329:18-b and Med 409.01. Postponement of the proceeding is prohibited unless the licensee agrees to continue the suspension pending issuance of the Board's final decision. *See*, RSA 329:18-b and Med 409.01.

2. Christopher Manfred, MD ("Dr. Manfred" or "Respondent"), holds an active license, No. 15036, issued on October 6, 2010, to practice medicine in the State of New Hampshire. Respondent practices medicine as an anesthesiologist at Dartmouth Hitchcock Medical Center in Lebanon, New Hampshire.

3. The Board has received information indicating that the continued practice of medicine by Dr. Manfred poses an imminent threat to life, safety and/or health, which warrants the temporary suspension of Dr. Manfred's license to practice medicine pending a hearing on whether permanent and/or temporary disciplinary sanctions should be imposed. An investigation was conducted and a Report of Investigation was provided to the Board.

4. In support of this *Order of Emergency License Suspension and Notice of Hearing*, the Board alleges the following facts:

- A. On January 25, 2017, a Compliance Inspector with the NH Board of Pharmacy ("Pharmacy Board"), made this Board's investigator aware of a correspondence dated January 24, 2017, from Marva-Williams-Lowe, R.Ph., who is the Pharmacist-in-Charge ("PIC"), at Dartmouth-Hitchcock Medical Center ("Dartmouth-Hitchcock") in Lebanon. A review of the documentation indicated that Dartmouth-Hitchcock was reporting Controlled Drug Losses to the NH Board of Pharmacy as required by Ph 703.03.
- B. The documentation submitted to the Pharmacy Board indicated that a routine audit conducted by Dartmouth-Hitchcock revealed a "statistically higher utilization of hydromorphone" by one particular physician, compared to other providers. The report stated that patient chart documentation was reviewed by the Department of Anesthesiology providers, which resulted in a finding that although no doses were missing from the documentation, there were some

discrepancies noted between the time of administration of medication as documented in the medical record and removal from the automatic dispensing machine.

- C. The report to the Pharmacy Board went on to note that on January 23, 2017, the physician who Dartmouth-Hitchcock identified in the audit admitted to diverting "a few" vials of hydromorphone 2mg/ml from the operating room for his personal use at home and falsifying medical records to indicate the medications were administered to patients.
- D. The report to the Pharmacy Board indicated that a total of 166 vials of hydromorphone 2mg/ml were removed by this physician from the ADM between September of 2016 and January 11, 2017. Dartmouth-Hitchcock indicated is belief that some or all of these medications were diverted by this physician based on information obtained by Dartmouth-Hitchcock as of January 24, 2017.
- E. In an emailed letter dated January 26, 2017, Dartmouth-Hitchcock notified this Board (the Board of Medicine) of the same information that had been provided to the Pharmacy Board (as described above in paragraphs 4A-D), with the addition of identifying Respondent as the physician who admitted to diverting hydromorphone for his personal use and falsifying medical records.
- F. The report to this Board explained that Respondent is on a leave of absence and has no patient care responsibilities. Additionally, his

access to Dartmouth-Hitchcock's automated dispensing machines has been suspended and he has no access to Dartmouth-Hitchcock's electronic health record system at this time.

5. Based upon the above information, the Board finds that this case involves imminent danger to life and/or health. Further, the Board believes there is a reasonable basis for both immediately suspending Respondent's license on a temporary basis, and for commencing an expedited disciplinary proceeding against Respondent pursuant to RSA 329:18-b, 541-A:30, III, and Med 409.01.

6. The purpose of this proceeding will be to determine whether Respondent has engaged in professional misconduct contrary to RSA 329:17, VI and RSA 329:18-b, which warrants the continued imposition of a temporary license suspension, the imposition of permanent disciplinary sanctions, or both. The specific issues to be determined in this proceeding are:

- A. Whether Respondent committed professional misconduct by diverting hydromorphone, a controlled substance, from his employer hospital for his personal use, in violation of RSA 329:17, VI (d); and/or .
- B. Whether Respondent committed professional misconduct by using drugs, in violation of RSA 329:17, VI (b); and/or
- C. Whether Respondent committed professional misconduct by falsifying medical records to indicate that diverted medications had been given to patients, in violation of RSA 329:17, VI (d), (i) and (k); and/or

D. If any of the above allegations are proven, whether and to what extent, Respondent should be subjected to one or more of the disciplinary sanctions authorized by RSA 329:17, VII.

7. While RSA 329:18-a requires that the Board furnish Respondent at least 15 days' notice of allegations of professional misconduct and the date, time and place of an adjudicatory hearing, RSA 541-A:30, III and Med 409.01 require the Board to commence an adjudicatory hearing within ten (10) days after the date of an immediate, temporary license suspension order.

8. The Board intends to complete this adjudicative proceeding within the one hundred twenty (120) day time period provided by RSA 329:18-b and Med 409.01. Accordingly, neither the date of the initial evidentiary hearing nor the date for concluding this proceeding shall be postponed or extended unless Respondent agrees to continue the suspension period pending issuance of the Board's final decision in this matter. *See* RSA 329:18-b, 541-A:30, III, and Med 409.01.

THEREFORE, IT IS ORDERED that Respondent's New Hampshire license to practice medicine is immediately suspended until further order of the Board; and,

IT IS FURTHER ORDERED that an adjudicatory proceeding be commenced for the purpose of resolving the issues articulated above pursuant to RSA 329:17; 329:18-a; 329:18-b; 541-A:30, III; and Med 409.01. To the extent that this order or the Board's rules do not address an issue of procedure, the Board shall apply the New Hampshire Department of Justice Rules, Part 800; and,

IT IS FURTHER ORDERED that Christopher Manfred, MD shall appear before the Board on Wednesday, February 1, 2017 at 1:00 p.m., at the Board's office located at 121 South Fruit Street, Concord, N.H., to participate in an adjudicatory hearing and, if deemed appropriate, be subject to disciplinary sanctions pursuant to RSA 329:17, VII; and,

IT IS FURTHER ORDERED that if Respondent elects to be represented by counsel, at Respondent's own expense, said counsel shall file a notice of appearance at the earliest date possible; and,

IT IS FURTHER ORDERED that Respondent's failure to appear at the time and place specified above may result in the hearing being held *in absentia*, or the imposition of disciplinary sanctions without further notice or an opportunity to be heard, or both; and,

IT IS FURTHER ORDERED that Matthew G. Mavrogeorge, 33 Capitol Street, Concord, N.H., 03301 is appointed to act as Hearing Counsel in this matter with all the authority within the scope of RSA Chapter 329 to represent the public interest. Hearing Counsel shall have the status of a party to this proceeding; and,

IT IS FURTHER ORDERED that Daniel Potenza, MD, Board Member, or any other person whom the Board may designate, shall act as presiding officer in this proceeding; and,

IT IS FURTHER ORDERED that any proposed exhibits, motions or other documents intended to become part of the record in this proceeding, be filed by the proponent with the Board, in the form of an original and eleven (11) copies, and with an additional copy mailed to any party to the proceeding, and to Lynmarie Cusack, Counsel to the Board, N.H. Department of Justice, 33 Capitol Street, Concord, New Hampshire 03301. All responses or objections to such motions or other documents are to be filed in similar fashion within three

(3) days of receipt of such motion or other document unless otherwise ordered by the Board;
and,

IT IS FURTHER ORDERED that a witness and exhibit list and any proposed exhibits, pre-marked for identification only, shall be filed with the Board no later than five (5) days before the date of the hearing. Respondent shall pre-mark his exhibits with capital letters, and Hearing Counsel shall pre-mark her exhibits with Arabic numerals; and,

IT IS FURTHER ORDERED that unless good cause exists, all motions, including motions seeking to postpone the hearing, shall be filed at least five (5) days before the date of the hearing, which would be affected by the requested relief. Respondent may be allowed additional time to prepare for the hearing, but, per RSA 329:18-b, any additional time for preparation shall result in an extension of license suspension commensurate with the additional time extended; and,

IT IS FURTHER ORDERED that the entirety of all oral proceedings be recorded verbatim by the Board. Upon the request of any party made at least five (5) days prior to the proceeding or conference or upon the Board's own initiative, a shorthand court reporter shall be provided at the hearing or conference and such record shall be transcribed by the Board if the requesting party or agency shall pay all reasonable costs for such transcription; and,

IT IS FURTHER ORDERED that all documents shall be filed with the Board by mailing or delivering them to Penny Taylor, Administrator, N.H. Board of Medicine, 121 South Fruit Street, Suite 301, Concord, N.H., 03301-2412; and

IT IS FURTHER ORDERED that routine procedural inquiries may be made by contacting Penny Taylor, Administrator, N.H. Board of Medicine, at (603) 271-1205, but that

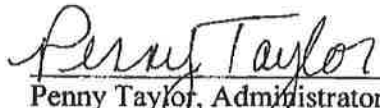
*In the Matter of Christopher S. Manfred, MD
NH Board of Medicine
Order of Emergency License Suspension and Notice of Hearing*

all other communications with the Board shall be in writing and filed as provided above. *Ex parte* communications are forbidden by statute and the Board's regulations; and,

IT IS FURTHER ORDERED that a copy of this Notice of Hearing shall be served upon Respondent by certified mail addressed to the address he supplied to the Board in his latest renewal application. *See*, RSA 329:18, VI, Med. 409.01 (c) and RSA 329:16 (f). A copy shall also be delivered to Hearing Counsel.

BY ORDER OF THE BOARD/*

Dated: January 30, 2017



Penny Taylor, Administrator
Authorized Representative of the
New Hampshire Board of Medicine

/* Recused Board Members(s):

Emily Baker, M.D. and Gilbert J. Fanciullo, M.D.

EXHIBIT B

**State of New Hampshire
Board of Medicine
Concord, New Hampshire**

In the Matter of:
Christopher S. Manfred, MD
License No.: 15036
(Adjudicatory Proceedings)

Docket No. 16-11

PRELIMINARY AGREEMENT FOR LICENSE RESTRICTIONS

The New Hampshire Board of Medicine ("Board") first granted Christopher S. Manfred, MD ("Respondent") a State of New Hampshire license to practice medicine on October 6, 2010. Respondent holds license number 15036 and practices anesthesiology at Dartmouth-Hitchcock Medical Center in Lebanon, New Hampshire. Respondent enters into a Preliminary Agreement for License Restrictions ("Agreement") with the Board as follows:

1. Recognizing that professional misconduct allegations (that I diverted hydromorphone for my personal use and falsified medical records to indicate that patients received the diverted medications) are now pending against me before the Board, I, Christopher S. Manfred, MD, hereby voluntarily agree ~~not~~ to certain restrictions on my license to practice medicine in the State of New Hampshire as set forth in this Agreement.

2. I voluntarily agree not to practice medicine, which includes, but is not limited to, writing prescriptions and treating/seeing patients in the State of New Hampshire until such time as I have:

- a. Contracted with the New Hampshire Physician's Health Program ("NPHP");
and


*In the Matter of Christopher S. Manfred, MD
NH Board of Medicine
Preliminary Agreement for License Restrictions*

- b. Received prior approval in writing from the Director of the NHPHP that it is safe for me to commence practicing medicine; and
 - c. Received a written order from the Board authorizing me to practice medicine.
3. I voluntarily agree that a copy of my contract with the NHPHP shall be provided to the Board, under seal, for its confidential review. In addition, any written approval to resume the practice of medicine that I receive from the Director of the NHPHP shall be provided to the Board.
4. I admit to no violations of RSA 329:17, VI or any other laws, statutes or regulations.
5. I hereby specifically waive any statute of limitations or laches defense, which might then be available as to these misconduct allegations due to the duration of this Agreement.
6. I understand that this Agreement shall become a permanent part of my file, and will be maintained by the Board as a public document.
7. I understand that upon approval by the Board, this Agreement will supersede the Emergency License Suspension Order issued by the Board on January 30, 2017.
8. I further understand that any breach of my obligations under this Agreement shall constitute unprofessional conduct under RSA 329:17, VI (d) and might subject me to discipline by the Board.
9. I voluntarily enter into this Agreement with the Board and state that no promises or representations have been made to me other than those terms and conditions expressly stated herein.

*In the Matter of Christopher S. Manfred, MD
NH Board of Medicine
Preliminary Agreement for License Restrictions*


FOR RESPONDENT

Date: 1/31/2017



Christopher S. Manfred, MD
Respondent

Date: 1/31/17




Cinde Warrington, Esq.
Counsel for Respondent

FOR THE BOARD*/

This Preliminary Agreement is hereby accepted in accordance with the binding terms and conditions set forth above.

Date: 1/31/2017



(Signature)
PENNY TAYLOR

Name
Authorized Representative of the
New Hampshire Board of Medicine

** / Board members, Emily Baker, MD and Gilbert J. Fanciullo, MD, refused.*

EXHIBIT C

**Before the
New Hampshire Board of Medicine
Concord, New Hampshire**

In the Matter of:

**Christopher S. Manfred, M.D.
License No.: 15036
(Adjudicatory Proceedings)**

Docket No.: 16-11

ORDER OF CONDITIONAL APPROVAL TO RETURN TO PRACTICE

On January 30, 2017, the New Hampshire Board of Medicine ("Board") issued an Order of Emergency License Suspension and Notice of Hearing ("Suspension") in the matter of Christopher S. Manfred, M.D. ("Dr. Manfred" or "Respondent"). On January 31, 2017, Dr. Manfred entered into the Preliminary Agreement, which was accepted by the Board the same day and which, by its terms, superseded the emergency order. Pursuant to the Preliminary Agreement, Dr. Manfred agreed to voluntarily cease practicing medicine in the State of NH until such time as he had:

- a. Contracted with the New Hampshire Physician's Health Program ("NHPHP");
- b. Received prior approval in writing from the Director of the NHPHP that it is safe for him to commence practicing medicine; and
- c. Received a written order from the Board authorizing him to practice medicine.

Now before the Board is a Petition for Authorization to Practice Medicine ("Petition"), submitted by Cinde Warmington, attorney for Dr. Manfred, on behalf of Dr. Manfred. Dr. Manfred submitted the following documents for review by the Board in support of his request:

1. Dr. Manfred's *Order of Emergency License Suspension and Notice of Hearing* issued by the Board on January 30, 2017;
2. Dr. Manfred's *Preliminary Agreement for License Restrictions* issued by the Board on January 31, 2017, which, by its terms, superseded the Suspension;

3. Dr. Manfred's NH Professionals Health Program Monitoring Contract dated April 10, 2017; and
4. Letter from Sally Garhart, Medical Director, NHPHP, dated July 12, 2017, approving Dr. Manfred's return to practicing medicine and stating her opinion that it is safe for Dr. Manfred to return to practicing medicine.

Those materials provide support for the position that Dr. Manfred has contracted with and successfully participated in the NHPHP, and has received approval in writing from the Director of the NHPHP that it is safe for him to commence practicing medicine in a critical care setting.

After reviewing the documentation submitted by Dr. Manfred, the Board voted to conditionally approve Dr. Manfred's return to practicing medicine as detailed below.

1. For the first one (1) year of practice, Dr. Manfred shall practice critical care medicine only; and
2. Dr. Manfred shall establish a work-place monitoring physician prior to his return to work, such monitor to be approved by the Board along with the work-place monitoring agreement between Dr. Manfred and the monitoring physician. Any change to the work-place monitoring physician shall be approved by the Board; and
3. Dr. Manfred shall ensure that the work place monitor provide quarterly reports to the Board describing his clinical care, conduct and professionalism while practicing; and
4. Dr. Manfred shall adhere to the NH PHP contract for five years from the date of signature by the NH PHP Director or five years after a relapse; and
5. Subsequent to Dr. Manfred's first year of practice, in order to return to practice other than critical care medicine, including but not limited to anesthesiology, Dr. Manfred will need to be re-evaluated by Caron Treatment Centers and the return to practice other than critical care medicine shall be approved by the Board.

THEREFORE IT IS ORDERED that the Board conditionally approves Dr. Manfred's return to practicing medicine with the following restrictions and/or conditions:

1. For the first one (1) year of practice, Dr. Manfred shall practice critical care medicine only; and
2. Dr. Manfred shall establish a work-place monitoring physician prior to his return to work, such monitor to be approved by the Board along with the work-place monitoring agreement between Dr. Manfred and the monitoring physician. Any change to the work-place monitoring physician shall be approved by the Board; and

3. Dr. Manfred shall ensure that the work place monitor provide quarterly reports to the Board describing his clinical care, conduct and professionalism while practicing; and
4. Dr. Manfred shall adhere to the NH PHP contract for five years from the date of signature by the NH PHP Director or five years after a relapse; and
5. Subsequent to Dr. Manfred's first year of practice, in order to return to practice other than critical care medicine, including but not limited to anesthesiology, Dr. Manfred will need to be re-evaluated by Caron Treatment Centers and the return to practice other than critical care medicine shall be approved by the Board.

IT IS FURTHER ORDERED, that this Order of Conditional Approval to Return to Practice ("Order") will become a 'final order' within fifteen days of the effective date of this Order, as further defined below; the Order of Conditional Approval to Return to Practice may become a 'final order' sooner if Dr. Manfred accepts the above mentioned conditions and restrictions by filing a written acceptance of this Order with the Board.

IT IS FURTHER ORDERED, that this Order will not become a 'final order' if, prior to 2:00 p.m. on the fifteenth day of the effective date of this Order, the Board receives a written request for a hearing; and

IT IS FURTHER ORDERED, that receipt of a timely filed hearing request shall automatically stay this Order and a further order shall be issued in due course in which the Board establishes a date and time of the hearing, and specifies the issues to be heard; and

IT IS FURTHER ORDERED, that any hearing held in response to this Order shall be a non-adjudicatory hearing conducted pursuant to RSA chapter 329 and if necessary RSA 541-A. Dr. Manfred may request to be heard on any relevant matter of law or fact, but evidentiary proceedings shall be conducted only to the extent Dr. Manfred has identified disputed factual issues which require resolution. This non-adjudicatory hearing will be conducted in non-public session unless Dr. Manfred makes a timely written request to conduct it in public session. The burden of proof will be on Dr. Manfred to show cause why he should be granted the privilege to

practice medicine with a full, unrestricted license. Subsequent to such hearing, the Board will issue a 'final order' within the statutory amount of time; and

IT IS FURTHER ORDERED, that once a Board order is a 'final order' in accordance with either of the circumstances outlined above, Dr. Manfred has thirty (30) days to file a request for reconsideration pursuant to the Board's administrative rules and RSA chapter 541 if applicable; and

IT IS FURTHER ORDERED, that a 'final order' is a public document; and

IT IS FURTHER ORDERED that this Order shall take effect as an Order of the Board on the date it is signed by an authorized representative of the New Hampshire Board of Medicine.

*BY ORDER OF THE BOARD

Date: August 7, 2017

Penny Taylor
Penny Taylor, Administrator
Authorized Representative of the
New Hampshire Board of Medicine

*\Emily Baker, M.D. and Gilbert Fanciullo, M.D., Board Members, recused.

EXHIBIT D

Before the
New Hampshire Board of Medicine
Concord, New Hampshire

In the Matter of:
Christopher S. Manfred, M.D.
License No.: 15036
(Adjudicatory Proceedings)

Docket No.: 16-11

**ORDER APPROVING PETITION TO AMEND ORDER
OF CONDITIONAL APPROVAL TO RETURN TO PRACTICE
AND TO APPROVE A RETURN TO PRACTICE IN ANESTHESIOLOGY**

Now before the Board of Medicine ("Board") is the *Petition to Amend Order of Conditional Approval to Return to Practice and to Approve a Return to Practice in Anesthesiology* ("Petition") submitted by Cinde Warmington, attorney for Christopher S. Manfred, M.D. ("Dr. Manfred" or "Respondent"), on behalf of Dr. Manfred. The Petition requests that the Order of Conditional Approval to Return to Practice ("Order") issued by the Board on August 7, 2017 and made final upon Dr. Manfred's acceptance of the Order on August 10, 2017, be amended to remove the requirement that Dr. Manfred spend the first year of his return to practice in critical care, thereby allowing him to return to anesthesiology. Dr. Manfred submitted the following documents for review by the Board in support of his request:

1. Dr. Manfred's *Order of Conditional Approval to Return to Practice* issued by the Board on August 7, 2017; and
2. Dr. Manfred's treatment summary from Caron Treatment Center ("Caron") dated October 16, 2018; and
3. Letter from Sally Garhart, Medical Director, NHPHP, dated October 18, 2018, supporting Dr. Manfred's return to the practice of anesthesia and stating her opinion that Dr. Manfred is fit to return to the practice of anesthesia.

Dr. Manfred, on October 1, 2018, submitted to Caron Treatment Centers for re-evaluation. Caron is recommending that Dr. Manfred return to anesthesiology. The Board has approved Dr.

Manfred's return to the practice of anesthesiology as detailed below.

1. Dr. Manfred shall establish a work-place monitoring physician prior to his return to work, such monitor to be approved by the Board along with the work-place monitoring agreement between Dr. Manfred and the monitoring physician. Any change to the work-place monitoring physician shall be approved by the Board; and
2. Dr. Manfred shall ensure that the work place monitor provide quarterly reports to the Board describing his clinical care, conduct and professionalism while practicing; and
3. Dr. Manfred shall adhere to the NH PHP contract for five years from the date of signature by the NH PHP Director or five years after a relapse; and

THEREFORE IT IS ORDERED that the Board approves Dr. Manfred's return to the practice of anesthesiology with the following restrictions and/or conditions:

1. Dr. Manfred shall establish a work-place monitoring physician prior to his return to work, such monitor to be approved by the Board along with the work-place monitoring agreement between Dr. Manfred and the monitoring physician. Any change to the work-place monitoring physician shall be approved by the Board; and
2. Dr. Manfred shall ensure that the work place monitor provide quarterly reports to the Board describing his clinical care, conduct and professionalism while practicing; and
3. Dr. Manfred shall adhere to the NH PHP contract for five years from the date of signature by the NH PHP Director or five years after a relapse; and

IT IS FURTHER ORDERED, that this Order Approving Petition to Amend Order of Conditional Approval to Return to Practice and to Approve a Return to Practice in Anesthesiology ("Order Approving Petition") will become a 'final order' on the date an authorized representative of the Board signs it; and

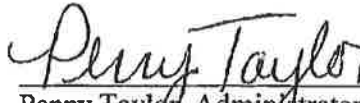
IT IS FURTHER ORDERED, that once a Board order is a 'final order', Dr. Manfred has thirty (30) days to file a request for reconsideration pursuant to the Board's administrative rules and RSA chapter 541 if applicable; and

IT IS FURTHER ORDERED, that a 'final order' is a public document; and

IT IS FURTHER ORDERED that this Order shall take effect as an Order of the Board on the date it is signed by an authorized representative of the New Hampshire Board of Medicine.

*\BY ORDER OF THE BOARD

Date: 11/9/2018



Penny Taylor, Administrator
Authorized Representative of the
New Hampshire Board of Medicine

*\Emily Baker, M.D. and Gilbert Fanciullo, M.D., Board Members, recused.

EXHIBIT G

PRACTICE MONITORING AGREEMENT

Vermont Board of Medical Practice

Christopher Manfred, M.D. Licensing Matter

1. Pursuant to a Stipulation and Consent Order entered into by Dr. Christopher Manfred and the Vermont Board of Medical Practice ("the Board"), Dr. Manfred shall retain a practice monitor to monitor any medical practice that requires him to hold a Vermont license. The purpose of this Practice Monitoring Agreement is to set forth the terms of the practice monitoring component of Dr. Manfred's Stipulation and Consent Order. This Agreement will be signed by the practice monitor approved by the assigned Committee ("the Committee") and Dr. Manfred.
2. The practice monitoring shall continue for at least two years after Dr. Manfred's return to practice regardless of the type of practice and at least 18 months of the practice monitoring shall be in anesthesiology. The two years shall equal two years of full-time practice of medicine. Dr. Manfred may request in writing to end the requirement for monitoring after two (2) years of practice as long as he has met the 18 months of practice monitoring in anesthesiology. The practice monitoring requirement will not cease until the Committee has approved, in writing, Dr. Manfred's request to end the monitoring.
3. In the event that the practice monitor can no longer monitor Dr. Manfred's practice, Dr. Manfred shall immediately notify the Committee in writing. Notice must be provided no later than the first workday on which Dr. Manfred learns that the monitor has stopped or will stop monitoring him. Dr. Manfred shall retain the services of a new practice monitor, subject to preapproval by the Committee. Within ten (10) days

of providing written notice to the Committee that the practice monitor can no longer monitor his practice, Dr. Manfred shall provide the Committee with the name and curriculum vitae of the proposed new practice monitor. The Committee will provide written notification to Dr. Manfred indicating whether it approves of the new proposed practice monitor.

4. If Dr. Manfred has not provided the Committee with a proposed new practice monitor within ten days from the day on which the approved monitor stops monitoring his practice, he shall discontinue his practice immediately. Dr. Manfred shall not return to practice until he has provided the Committee with the name and curriculum vitae of the proposed new practice monitor and the assigned Committee has provided the Dr. Manfred written notice of approval of the new proposed practice monitor.
5. Dr. Manfred shall provide the practice monitor with a copy of the fully executed Stipulation and Consent Order.
6. Dr. Manfred shall be responsible for ensuring that the practice monitor does the following:
 - a. The practice monitor shall report his/her findings in writing to the Committee on a quarterly basis. The practice monitor's first report shall be submitted to the Committee no later than 15 days following the ninetieth day after Dr. Manfred's return to practice. Reports shall be due within fifteen (15) days of the conclusion of each successive quarter.
 - b. On a quarterly basis, the practice monitor shall review the treatment records of ten (10) randomly-selected patients of Dr. Manfred. The practice monitor shall select the ten (10) patients from a list prepared by Dr. Manfred of all

patients for whom Dr. Manfred provided care. The review of the records is to determine whether Dr. Manfred practices in accordance with the applicable standard of care.

- c. The following shall be reviewed by the practice monitor and addressed in the practice monitoring reports: (1) Whether Dr. Manfred consistently makes a clear and detailed record of each patient's care. (2) Whether Dr. Manfred's treatment practices meet the applicable standard of care. The practice monitor is expected to review any other documents, records, files, logs, etc. that will provide the requisite information needed to prepare written monitoring reports.
 - d. After each quarterly review, Dr. Manfred shall meet with the practice monitor to discuss the quality of his treatment and medical records.
 - e. The quarterly monitoring reports shall include: (1) Specific findings identifying the documents that were reviewed and the quality of care reflected in the records. (2) Whether Dr. Manfred's treatment and medical records meet the applicable standards of care, and a comprehensive explanation for such opinion. (3) Reference to instances of care and record keeping that support the monitor's opinion. (4) If applicable, recommended improvements to be made to Dr. Manfred's practice. (5) The date and the length of time that the practice monitor met with Dr. Manfred for these review meetings.
7. Dr. Manfred and the practice monitor agree that the practice monitor shall discuss his/her observations regarding Dr. Manfred's ability to practice and his recovery

progress or lack thereof upon request by a Board member, investigators for the Board or an Assistant Attorney General.

8. Dr. Manfred and the practice monitor agree that the practice monitor will immediately notify the Board if there is any indication that Dr. Manfred has engaged in practice that does not meet the standard of care or if he has engaged in any substance abuse during the monitoring period.
9. Dr. Manfred and the practice monitor agree that they have both read this Agreement in its entirety and agree to all of the terms and obligations set forth herein.
10. Dr. Manfred and the practice monitor agree that the terms of this Agreement cannot be amended or modified in any way without written approval of the Committee.

DATED at Berlin, Vermont, this 30 day of November, 2018.



Christopher Manfred, M.D.
Applicant

DATED at _____, Vermont, this _____ day of _____, 2018.

Practice Monitor