



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

RE: Philip D. Welch, MD
Master Case No.: M2012-1260
Document: Statement of Allegations

Regarding your request for information about the above-named practitioner; attached is a true and correct copy of the document on file with the State of Washington, Department of Health, Adjudicative Clerk Office. These records are considered Certified by the Department of Health.

Certain information may have been withheld pursuant to Washington state laws. While those laws require that most records be disclosed on request, they also state that certain information should not be disclosed.

The following information has been withheld:

The identity of the complainant if the person is a consumer, health care provider, or employee, pursuant to RCW 43.70.075 (Identity of Whistleblower Protected) and/or the identity of a patient, pursuant to RCW 70.02.020 (Medical Records - Health Care Information Access and Disclosure)

If you have any questions or need additional information regarding the information that was withheld, please contact:

Customer Service Center
P.O. Box 47865
Olympia, WA 98504-7865
Phone: (360) 236-4700
Fax: (360) 586-2171

You may appeal the decision to withhold any information by writing to the Privacy Officer, Department of Health, P.O. Box 47890, Olympia, WA 98504-7890.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE COMMISSION

FILED
MAR 13 2013
Adjudicative Clerk

In the Matter of the License to Practice
as a Physician and Surgeon of:

No. M2012-1260

PHILIP D. WELCH, MD
License No. MD00018862

**STATEMENT OF ALLEGATIONS
AND SUMMARY OF EVIDENCE**

Respondent

The Disciplinary Manager of the Medical Quality Assurance Commission (Commission), on designation by the Commission, makes the allegations below, which are supported by evidence contained in program file number 2012-6387. The patient referred to in this Statement of Allegations and Summary of Evidence is identified in the attached Confidential Schedule.

1. ALLEGATIONS

1.1 On January 8, 1981, the state of Washington issued Respondent a license to practice as a physician and surgeon. Respondent's license is currently active. Respondent is board certified in obstetrics and gynecology.

1.2 On June 18, 2012, Patient A, a 44 year old female, was referred to Respondent by Planned Parenthood for fibroids and heavy bleeding during menses and during and after intercourse. Respondent examined Patient A, including a pelvic examination, reviewed ultrasound results provided by Planned Parenthood, and diagnosed Patient A with fibroids and menometrorrhagia (prolonged or excessive uterine bleeding). Respondent discussed treatment options with Patient A, including fibroid observation, cryocautery of the cervix and observation, and hysterectomy. The patient elected to have a hysterectomy and Respondent took Patient A to surgery that day and performed a subtotal hysterectomy.

1.3 Respondent did not obtain a pap smear, and relied upon Patient A's recollection that pap smear cultures were negative. Also undetermined by Respondent was that Patient A apparently had an abnormal pap smear approximately ten years earlier. The pathology report regarding the uterus and cervix indicated that Patient A had cervical cancer and that the tumor was transected during the hysterectomy. In Respondent's

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subsequent review of this matter he acknowledged his error in failing to obtain a pap smear despite the patient's representations about negative cultures, and that a cervical abnormality was apparent on a subsequent review of the ultrasound.

2. SUMMARY OF EVIDENCE

2.1 Medical records pertaining to Patient A from Respondent and Swedish Medical Center.

2.2 Letter from Respondent to the Commission investigator, dated August 24, 2012.

3. ALLEGED VIOLATIONS

3.1 The facts alleged in Section 1, if proven, would constitute unprofessional conduct in violation of RCW 18.130.180(4) which provides in part:

RCW 18.130.180 Unprofessional conduct. The following conduct, acts, or conditions constitute unprofessional conduct for any license holder or applicant under the jurisdiction of this chapter:

...
(4) Incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed. The use of a nontraditional treatment by itself shall not constitute unprofessional conduct, provided that it does not result in injury to a patient or create an unreasonable risk that a patient may be harmed;
....

4. NOTICE TO RESPONDENT

4.1 The Commission has determined that this case may be appropriate for resolution through a Stipulation to Informal Disposition pursuant to RCW 18.130.172(2). A proposed Stipulation to Informal Disposition is attached, which contains the disposition the Commission believes is necessary to address the conduct alleged in this Statement of Allegations and Summary of Evidence.

4.2 If Respondent agrees that the disposition imposed by the Stipulation to Informal Disposition is appropriate, Respondent should sign and date the Stipulation to Informal Disposition and return it within fourteen (14) days to the Medical Quality Assurance Commission at PO Box 47866, Olympia, WA 98504-7866.

4.3 If Respondent does not agree that the terms and conditions contained in the Stipulation to Informal Disposition are appropriate, Respondent should contact Jim McLaughlin, Staff Attorney for the Medical Quality Assurance Commission, PO Box 47866, Olympia, WA 98504-7866, (360) 236-2790 within fourteen (14) days.

4.4 If Respondent does not respond within fourteen (14) days, the Commission will assume Respondent has declined to resolve the allegations by means of a Stipulation to Informal Disposition.

4.5 If Respondent declines to resolve the allegations by means of a Stipulation to Informal Disposition pursuant to RCW 18.130.172(2), the Commission may proceed to formal disciplinary action against Respondent by filing a Statement of Charges, pursuant to RCW 18.130.172(3).

4.6 The cover letter enclosed with this Statement of Allegations and Summary of Evidence was mailed to the name and address currently on file for Respondent's license. Respondent must notify, in writing, the Commission if Respondent's name and/or address changes.

DATED: January 25, 2013.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE
COMMISSION

Maryella E. Jansen
MARYELLA E. JANSEN
EXECUTIVE DIRECTOR

Jim McLaughlin
JAMES MCLAUGHLIN, WSBA #27349
DEPARTMENT OF HEALTH STAFF ATTORNEY

CONFIDENTIAL SCHEDULE

This information is confidential and is NOT to be released without the consent of the individual or individuals named herein. RCW 42.56.240(1)

Patient A

