

STATE OF ALASKA

DEPARTMENT OF COMMERCE AND ECONOMIC DEVELOPMENT

BEFORE THE BOARD OF DENTAL EXAMINERS

In the Matter of )  
)  
Patrick A. Robinson, D.D.S. )  
Respondent )  
\_\_\_\_\_ )



Case No. 1200-95-013

**Findings of Fact, Conclusions of Law and Proposed Decision**

An Administrative hearing was held in the above matter on July 31, 1996. The Division of Occupational Licensing was represented by Assistant Attorney General Julia Coster. Respondent Dr. Robinson did not appear. The Administrative Hearing Officer had sent Dr. Robinson a letter dated May 2, 1996 which clearly informed him of his right to participate by telephone during the hearing. Dr. Robinson elected not to participate and merely submitted a letter dated April 18, 1996 as his Statement of Defense, which is attached hereto as Exhibit 1.

Patrick A. Robinson is a dentist licensed to practice in the State of Washington and Alaska. He went to work for the Family Medical/Dental Center in May or June, 1995 and continued working there through November 1995. During that period of time he wrote

1 numerous prescriptions which were (1) not dentally necessary; (2) out of the scope of  
2 practice for what was ethically necessary for the work he was doing; (3) of those  
3 prescriptions he did write he failed to follow state and federal regulations for prescribing and  
4 dispensing. Robinson wrote prescriptions for over 1,000 Schedule III and Schedule IV  
5 narcotic pills during a period of 10 weeks, some of which he claimed were for emergency  
6 after-hours patients, although there were no records for such patients, no inventory of the  
7 pills prescribed or dispensed, and no dental charts to support his actions. He wrote  
8 prescriptions in the name of two minors, [REDACTED]  
9 [REDACTED] which were picked up and paid for by himself and for which there was no  
10 underlying medical or dental basis for prescription. He filled numerous Schedule II, III, IV and  
11 V prescriptions for [REDACTED] to support a drug habit which she had developed  
12 as a result of illness, said prescriptions being outside the scope of his practice. He also  
13 prescribed drugs for [REDACTED] which were not based on any medical or  
14 dental necessity, which helped continue her drug addiction. [REDACTED] paid him directly, or  
15 "loaned" him money which was not repaid for these drugs; other times she paid for the drugs  
16 directly and he received half of the prescription for himself. On at least two occasions Dr.  
17 Robinson was performing procedures in an impaired condition and was observed by [REDACTED]  
18 [REDACTED] taking some of the drugs which he had gotten during office hours. The Division of  
19 Occupational Licensing has requested that Dr. Robinson's license be revoked and that he  
20 incur a substantial fine.

21 Based the evidence and testimony received at the hearing, the Administrative Hearing  
22 Officer makes the following Findings of Fact, Conclusions of Law and Proposed Decision.

### 23 Findings of Fact

24  
25 1. Shortly after Dr. Robinson was hired by the Family Medical/Dental Center, [REDACTED]  
26 [REDACTED]

27 [REDACTED] She had previously informed Family Medical/Dental that she  
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1 was a recovering drug addict; she so informed Dr. Robinson. Despite this, Dr. Robinson  
2 became good friends with [REDACTED] and encouraged her to continue her drug habit by  
3 prescribing drugs for her when they were not medically or dentally necessary. He did not  
4 do anything to try to discourage her, although she clearly told him that she did not need  
5 the drugs, but that she "wanted them."

6 2. [REDACTED] acknowledged being a drug addict, and has been in and out of  
7 several drug programs. She most recently attended the Providence Program and finally  
8 feels that she has beaten her drug habit. She testified that after [REDACTED]  
9 [REDACTED] they became good friends. He was well aware of her drug problem, and when  
10 she began feeling depressed and anxious, she told him that she wanted some drugs, but  
11 did not need them. He did nothing to try to talk her out of it, but instead took money from  
12 her, paid for the drugs, and at times, if there were 30 or more tablets, he kept  
13 approximately half of the tablets for himself. [REDACTED] also "loaned" Dr. Robinson  
14 various amounts of money, including one \$250 loan which was never repaid. The  
15 evidence shows that 14 prescriptions were written in [REDACTED] name. Ex. 3, pp. 1-11.  
16 They were primarily for Vicodon, Meperidine and Demerol. There is nothing in [REDACTED]  
17 [REDACTED] dental charts which reflect that any of these prescriptions were medically  
18 necessary.

19 3. Dr. Robinson, in his written statement to the Division investigators, accuses [REDACTED]  
20 [REDACTED] of fraudulently forging some of these prescriptions. [REDACTED] denies that she has  
21 ever forged anything. The Administrative Hearing Officer closely questioned [REDACTED]  
22 and found her to be a forthright and truthful witness. She readily admitted to her long  
23 drug habit, and testified that she believes she has finally conquered it. The previous  
24 inconsistent statements given to Division investigators were made because she was  
25 caught off-guard, was advised by Family Medical/Dental staff that she was not the target  
26 of the investigation and at that time she hoped that she could protect Dr. Robinson with  
27 her testimony. The Administrative Hearing Officer advised her of her Fifth Amendment  
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1 right against self-incrimination and that some of the activities which form the subject for  
2 her testimony may be a violation of federal or state law. She indicated that she  
3 understood and wanted to proceed anyway, since she believed that what she had done  
4 was wrong. She was also very clear that what Dr. Robinson had done was equally  
5 wrong.

6 4. Based on the evidence given at the hearing, the Administrative Hearing Officer  
7 believes the version of facts testified to by [REDACTED] rather than those told by her  
8 previously to the investigators.

9 5. In addition to [REDACTED] Dr. Robinson also called in three prescriptions for [REDACTED]  
10 [REDACTED]. [REDACTED] was an underage minor who  
11 visited the family in the summer of 1995. Dr. Robinson stated that she had sore gums  
12 and that she requested that he call in a prescription for her. In an affidavit, [REDACTED]  
13 [REDACTED] stated that Dr. Robinson wrote a prescription for some drugs in her name and  
14 asked her to do a favor for him and pick up the drugs at a pharmacy and bring them back  
15 to him. She did as requested. [REDACTED] stated that she did not ask Dr. Robinson  
16 for any prescriptions, nor did she use any of the drugs that she picked up for Dr.  
17 Robinson. He didn't perform any dental work on her teeth while she was in town, nor did  
18 she complain to him about the need for any pain killers. She was aware of only one  
19 prescription that he wrote in her name while she was in Anchorage, although there were  
20 two others also written in her name of which she was unaware. Exhibit 1.

21 6. Dr. Robinson also wrote six prescriptions for Schedule III and IV narcotic drugs  
22 for [REDACTED], although there was no dental basis for any  
23 prescription. Dr. Robinson's explanation was that [REDACTED] had extreme pain during  
24 the time she was wearing braces and the drugs were therefore necessary. The Division  
25 also submitted to the Administrative Hearing Officer two letters, Exhibits 14 and 15, which  
26 were dated July 16, 1996 and sent to Julia Coster, Assistant Attorney General for the  
27 State. These two letters were purportedly written by [REDACTED] Reviewing the  
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1 substance of the letters, including the word usage, syntax and writing style, the  
2 Administrative Hearing Officer doubts that these letters were written by [REDACTED]  
3 Nor do the signatures on the letters appear to be that of a young woman. When [REDACTED]  
4 [REDACTED] was shown the letters, she testified that she  
5 believed the signatures were that of Dr. Robinson. While the Administrative Hearing  
6 Officer is not finding conclusively that Dr. Robinson forged the signature on these letters,  
7 the contents of the letters, the signature and the absence of a notarized affidavit  
8 accompanying the letters are highly suspicious. The Administrative Hearing Officer does  
9 not believe that they were written by [REDACTED]. For that reason she has  
10 discounted the version of facts set forth therein.

11 7. [REDACTED] dentist at the time, testified that she never talked to  
12 him about any discomfort with regard to her braces, and that it would be somewhat  
13 unusual to have the level of discomfort which would require a prescription for narcotic  
14 drugs. The wires and elastics which she used were normal. He has never had any  
15 complaints about someone having pain after their braces have been taken off. At the  
16 most, if someone is having a problem, he recommends that they take some Tylenol 3.  
17 The Administrative Hearing Officer finds [REDACTED] testimony more credible than that  
18 set out either in the letter from Dr. Robinson, or in the two letters purported to be from  
19 [REDACTED].

20 8. In addition to those prescriptions purportedly written for [REDACTED], Dr.  
21 Robinson also wrote five prescriptions for Schedule II, III and IV drugs for [REDACTED]  
22 [REDACTED]. These five prescriptions were outside the scope of practice, not supported by  
23 any medical or dental charts, and were admittedly written by Dr. Robinson because his  
24 wife was ill and she needed to continue her medication. He does not explain why [REDACTED]  
25 did not see a doctor, or why a doctor could not have prescribed the drugs if they were  
26 necessary, other than to list a long series of complaints with the Family Medical/Dental  
27 Center over what they had supposedly promised him would occur with regard to his  
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1 employment and benefits. Leaving aside the question of whether Dr. Robinson was  
2 promised conditions of employment or benefits which did not happen, that does not  
3 excuse the writing of prescription drugs in a way which violates federal or state law. If in  
4 fact [REDACTED] was so ill that she needed drugs, those drugs should have been  
5 approved by another practicing physician, [REDACTED]. See, Exhibit 7, pg. 1-  
6 10.

7 9. Dr. Robinson also admits that he ordered drugs which he paid for from his  
8 private funds and kept either at home or in his lab coat pockets at work to supply  
9 emergency after-hour patients. There are no records to support that he had such  
10 patients, no charts, and no inventory of the drugs that were bought or prescribed. [REDACTED]  
11 [REDACTED] testified that she could recall no instance where Dr. Robinson saw emergency  
12 after-hour patients. She testified that there were no patients to her knowledge and these  
13 prescriptions were either used by Dr. Robinson directly, or given to [REDACTED]. She also  
14 stated that on several different occasions she saw Dr. Robinson take drugs out of his  
15 pocket and use them himself. On two occasions he was substantially impaired to the  
16 extent that she believed that he was not operating in a safe and competent manner. She  
17 also testified that he would take frequent naps in one of the empty dental rooms, his eyes  
18 were tired and bloodshot, and at times he was not in control of the procedure he was  
19 doing.

20 10. Dr. Robinson's letter of April 18 stating that he was never informed of Family  
21 Medical/Dental Center's office policies regarding dispensation of medications, is not  
22 credible. The Family Medical/Dental Center Administrative Director testified that none of  
23 the dentists are allowed prescription writing authority. If dental patients have excessive  
24 pain they are referred to the medical doctor next door, who then determines the  
25 appropriate prescription. She testified that Dr. Robinson was well aware of this  
26 procedure.

27 11. The Administrative Hearing Officer also finds credible the testimony and  
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1 interview notes taken by Dorothy Hansen and Dick Slisz during their investigatory  
2 conversation with Dr. Robinson in November 1995. Dr. Robinson claimed that he carried  
3 bottles of 100 Diazepam and 100 Hydrocodone in his pocket all the time so that they  
4 would be available to give to his patients who needed them. He said that he did not chart  
5 the dispensed drugs in the patient's record, and dispensed them by pouring the tablets  
6 into the patient's hand. This procedure violates not only the accepted practice of The  
7 Family Medical/Dental Center, but also prescription practices required by the State of  
8 Alaska and the federal government, as well as being in violation of the code of ethics of  
9 the dental profession. Dr. Robinson's apparent non-chalant attitude about the dispensing  
10 of these drugs indicates a total lack of regard for the basic ethics of the practice of  
11 dentistry and is a clearly aggravating circumstance in this case.

12 11. Ms. Dolly Hansen, investigator for the Division of Occupational Licensing,  
13 testified that several pharmacists in Anchorage had become concerned about Dr.  
14 Robinson's prescription policies and had called to talk with her. The State provided  
15 evidence from ten different pharmacies of prescriptions which were highly suspicious and  
16 for which there are absolutely no dental records of any kind which support either the  
17 prescription or the dispensing of the drug. Dr. Robinson's general modes operandi was to  
18 call the pharmacy himself, set up a charge account, have the bill sent to his home  
19 address, call the drugs in himself and then pick them up although they were written in  
20 someone else's name.

21 12. Dr. Smole, a general practice dentist who has been licensed to practice since  
22 1964 in Montana and since 1984 in Alaska, and who previously served on the Dental  
23 Board from 1987 to 1993, testified that of the prescriptions he had looked at and the  
24 situations he had reviewed, Dr. Robinson's prescription writing activities were  
25 inappropriate and far below the ethical standards of the profession. None of the  
26 prescriptions were dentally necessary. Several of the narcotic drugs prescribed are  
27 highly addictive and some can be injected by hypodermic needle to be more effective. If  
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1 combined with other drugs the result is greater than using each drug separately.  
2 Premarin, which is an estrogen drug, and Bellergal, are also clearly outside the scope of  
3 anything that would be remotely used in a dental practice and, therefore, inappropriate to  
4 prescribe.

5 13. Dr. Robinson's orders for prescriptions for "office use" also fall far below the  
6 standards of general dentistry. No records were kept of the quantity of drugs prescribed  
7 or dispensed. Dispensing drugs to patients without noting it on their records, giving drugs  
8 to people without identifying the medicine, the person, the dosage and any precautions  
9 for use, are all extremely dangerous activities. In response to a question from the  
10 Administrative Hearing Officer, Dr. Smole indicated that some of these drugs, particularly  
11 Vicodon, could be classified as a "street drug." In that respect the high number of  
12 prescriptions for Vicodon could not only have been used by the persons Dr. Robinson  
13 said they were used by, but could also have been sold to third parties.

14 14. Judith Solberg, DEA Diversion Investigator, testified that DEA regulations  
15 require a dentist to be registered at each practice location if they are dispensing drugs.  
16 Dr. Robinson was required to be registered to dispense drugs in the State of Alaska at the  
17 Family Medical/Dental Center location to comply with federal law. He failed to do so.

### 18 Conclusions of Law

19 Based on the foregoing Findings of Fact the Administrative Hearing Officer makes  
20 the following Conclusions of Law.

21 1. By prescribing controlled drugs which were not dentally necessary, Dr.  
22 Robinson has engaged in deceit, fraud and intentional misrepresentation in the course of  
23 his professional activities, which do not conform to the minimum standards of dentistry.  
24 These are clear grounds for discipline against Robinson's dental license, pursuant to AS  
25 08.36.315(2) and (6).

26 2. Prescribing and providing controlled substances to [REDACTED] for the purpose of  
27 maintaining her addiction to drugs without a dentally sufficient reason is further evidence  
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1 of deceit, fraud and intentional misrepresentation in the course of engaging in  
2 professional activities in violation of AS 08.36.315(2) and (6).

3 3. By encouraging his [REDACTED] to continue her drug  
4 addiction, Dr. Robinson was engaging in reckless and unethical professional activities  
5 and a type of fraud which justifies the revocation of his license. Dr. Robinson's purported  
6 explanation that [REDACTED] was a manipulative, self-serving drug addict is further  
7 evidence that he has no self-awareness of what he has done, continually tries to blame  
8 others for his unethical and illegal activities, and cannot be trusted.

9 4. His use of [REDACTED] names to get prescription drugs also  
10 demonstrates an appalling lack of ethical and moral character.

11 5. Dr. Robinson's failure to prescribe and dispense drugs in accordance with DEA  
12 regulations, 21 CFR Section 1301.21 et seq. and Alaska Statute 17.30.028, .060, are  
13 further violations which warrant disciplinary action against his license.

14 6. Perhaps Dr. Robinson believed that by coming to Alaska that he could engage  
15 in these activities without anyone noticing. The fact that he began to do illegal activities  
16 within one month of arriving in the State, and continued those activities up until the day he  
17 was fired from the Family Medical/Dental Center and left the State, is powerful evidence  
18 that he lacks the self-awareness, ethical standards and general moral character to  
19 practice dentistry in the State of Alaska. His explanation that his employers in the State  
20 of Washington know about his activities here, and that by having more closely controlled  
21 prescription writing requirements he is absolved of what he has done, is not an adequate  
22 explanation for his appalling lack of judgment while he practiced dentistry in the State of  
23 Alaska.

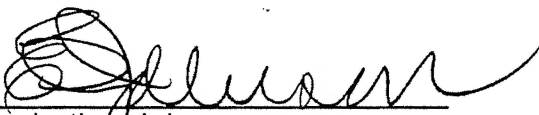
### 24 Proposed Decision

25 The State has requested that Dr. Robinson's license be revoked and that he pay a  
26 substantial fine. The Administrative Hearing Officer, while acknowledging that revocation  
27 of a dental license is a severe and final punishment, agrees that in this case that is the  
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1 appropriate sanction. The nature and scope of Dr. Robinson's activities, his willingness to  
2 involve minors, to take advantage of an obviously impaired and emotionally fragile  
3 person- [REDACTED], pandering to [REDACTED] medical problems and/or drug addiction, and  
4 his general disregard for the most basic ethical requirements in the practice of dentistry  
5 mandate this result. His attempt to shift the blame to his unhappy experience with the  
6 Family Medical/Dental Center and the Division's investigators is unwarranted. Many of  
7 the activities in which he engaged may be a violation of federal and state criminal law, as  
8 well as the statute and regulations of the State. Dr. Robinson has also exposed [REDACTED]  
9 [REDACTED] to potential criminal charges. His disregard for other persons and  
10 for conforming to the minimal standards of ethical practice of his profession are extreme  
11 aggravating circumstances and demand a severe action by the Board.

12 Therefore, the Administrative Hearing Officer recommends that the license of Dr.  
13 Robinson be revoked to practice dentistry in the State of Alaska and that he further be  
14 fined \$5,000.00 (FIVE THOUSAND DOLLARS) under AS 08.01.075.

15 Dated at Anchorage, Alaska this 6 day of September, 1996.

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18 Elizabeth I. Johnson  
19 Administrative Hearing Officer  
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# **BOARD DECISION AND ORDER**

The Board of Dental Examiners having reviewed the Proposed Decision of the Hearing Officer In the Matter of Patrick A. Robinson, Respondent, Case No. **1200-95-13**, hereby

Option 1:            adopts the Proposed Decision in its entirety.

Date: 9-13-96

By: James A. Black OMC  
Chairperson

Option 2:    rejects the Proposed Decision and remands this case to the same/different Hearing Officer to receive additional evidence on the following issues

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and adopts the balance of the Proposed Decision.

Date: \_\_\_\_\_

By: \_\_\_\_\_  
Chairperson

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Option 3:        rejects the Proposed Decision and hereby orders that the entire record  
                     be prepared for the Board's review and decision.

Date: \_\_\_\_\_

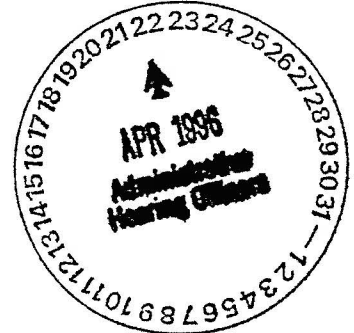
By: \_\_\_\_\_  
Chairperson



April 18, 1996

Patrick A. Robinson, DDS. (Case # 1200-95-013)  
10020-A Main Street #127  
Bellevue, WA 98004

Elizabeth I. Johnson  
Hearing Officer  
State of Alaska  
Department of Commerce and Economic Development  
Before the Board of Dental Examiners  
3601 C Street, Suite 724  
Anchorage, AK 99503



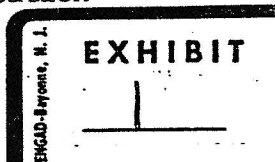
Ms. Johnson:

I was forced to leave the State of Alaska not because of the accusations presented by the board but due to a dwindling income from a position there that was grossly misrepresented. My present financial situation makes it impossible for me to afford legal representation in this case. I am not in a position to travel to Alaska to attend a hearing. I have exhausted my financial resources and can scarcely support my family at my present income level. I will therefore utilize this document to serve as my sole defense to the accusations brought forth by the board.

I strongly feel that this case is a vendetta due to my leaving Family Medical Dental Center. I was told by the non-resident owner Dr. Gopinath, Ph.D. that if I remained at Family Medical Dental Center he could use his influence ("I have friends in high places") to make these accusations disappear. However if I left, "I know these people at the Occupational Licensing Board and they can be very nasty, unreasonable people and can make your life hell and you'll never work again and you won't know why!". I also found that the temporary agency that has employed me for years was contacted by Dr. Gopinath and advised of the accusations against me three months before I received them. As a result the agency would not use me until they had "checked things out" and I lost three weeks of employment and the associated income.

I must also emphatically state that my interview with the investigators was conducted in a highly unprofessional manner. I cannot speak for the board as a whole, but these two investigators did not use good judgement in setting the limit of their authority. The investigators arrived without an appointment coincidentally on the same day I tendered my resignation from Family Medical Dental Center. I was taken away from scheduled patients, the investigators gave only verbal identification and they did not ask if I wanted representation. The session was of an extremely hostile nature escalating to the use of inappropriate language by one investigator. I felt as if they had their case decided before arriving. Even so I attempted to give my full cooperation during this ordeal.

In light of the fact that I did not harm anyone I feel that this accusation



has been blown out of proportion to the maximum extent and it is unfortunate that a government agency has been forced to use their time, energy, and resources to obtain a "result" for the purpose of avenging a former employer's dissatisfaction. Although my funds are extremely limited I can find representation should a countersuit for harassment become necessary. I do not foresee the Licensing Board being so petty as to allow this harassment to continue.

In response to the accusations, first I have not obtained or dispensed office use medication since the board brought to my attention in mid-summer 1995 that this was not correct procedure. I was never informed by Family Medical Dental Center of their office policies regarding dispensation of medications nor reimbursement. No pharmacist advised me that this was incorrect procedure. In fact I was told that special forms were only necessary for class II medications.

I paid for the medications by cash or money orders because I had not established any bank accounts in Alaska. I had the statements sent to my home address for convenience not for any ulterior motive. ( I had no private office at the clinic). I have had bottles of medication disappear thus requiring my unusual method of dispensing the medication in a large clinic.

Secondly, I have established detailed patient records for my family members for their dental treatment in Washington State and will not be prescribing them any medication unless directly related to a specific active dental procedure documented to require this medication. Charts were not established at Family Medical Dental Center due to lack of confidentiality of patient records among the office staff. Patient information which should have remained private was very often a topic of conversation, gossip and ridicule. I found this behavior extremely unprofessional and refused to take part in it and refused to put myself or my family in a position to be a victim of it.

Furthermore, my employers here have very specific prescription writing rules and require detailed records of any prescriptions written for any dental patient. The charts are monitored and audited by qualified health care professionals on a regular basis and every prescription whether written or phoned in ( even after hours) is in the clinic computer.

I have greatly scaled down my prescription writing and have written only extremely limited narcotics prescriptions for patients. Since my employer "somehow" received the list of accusations I have been advised to write no narcotics prescriptions until the matter is settled.

I have taken two drug screening tests, ( both negative ) one independently in Alaska and one for my present employer ( enclosed ) and I have volunteered for random tests whenever they are requested.

I have never taken, bought or sold medications, been impaired, nor have I harmed a patient. Family Medical Dental Center had no qualms with me continuing to treat patients even after the interview. I received more commendations from patients at Family Medical Dental Center than any of the other dentists because I am painless, efficient and have excellent chairside manner and rapport with my patients and I do not believe in human suffering. I was trained that early pain prevention through proper medication will actually lessen the chance for abuse.

I am also scheduled to take education courses on state and federal laws and regulations for prescription writing, contraindications and abuse potentials of medications in the near future.

I did not personally receive medication from [REDACTED] nor do I recall writing any additional prescriptions for her. I understood that she was complaining of wisdom tooth pain and earache when she arrived in Anchorage for a visit with my family. I have no further recollection of this situation.

Regarding [REDACTED] I had absolutely no warning that she was a known drug addict until I was informed of this fact late in my employment at Family Medical Dental Center. I am shocked that a person with this history would be allowed to work in a medical or dental setting. [REDACTED] preyed on my sympathy and compassionate nature by claiming pain from domestic altercations and other contrived situations in order to obtain narcotics prescriptions. I was completely deceived and taken advantage of by her. I understand that a number of these prescriptions may have been forgeries.

As a result of this experience I will not prescribe any medication for any [REDACTED] anyone else who is not a dental patient of record under my active care or for any non-dentally related reason.

As a further indicator of [REDACTED] character she suggested she could falsify Permanent Dividend Fund information as she said she had done for others in the past. My principles would not allow this and I never did receive residency status in Alaska nor apply for the Permanent Dividend Fund. This topic arose when I was expressing my surprise that I would not receive any funds until 1997 which was another misrepresentation by Dr. Gopinath who assured me that I would receive these funds six months from my arrival in Alaska.

[REDACTED] was wearing braces as she had for the past six years when we came to Alaska. Upon seeing the orthodontist in Anchorage her treatment was accelerated by using heavier wires and elastics necessitated by upcoming Senior Portraits. This augmented her discomfort. When the braces were removed her teeth were still extremely painful until they had stabilized in the bone. Pain medication was discontinued after this point was reached since pain was no longer present and it was therefore no longer necessary.

[REDACTED] is not and never has been a drug addict and I am extremely upset that my employers or anyone else received this accusation about her. She has several medical problems and has taken only medication for treatment of these conditions. This information is not for public consumption. She is once again under the care of her former and present physician and he is solely responsible for her care. I was unable to find acceptable medical help for her health problems which became worse while in Alaska and sought only to care for my sick wife. She could have convulsed and died without certain medications as I told the investigators who dismissed this fact with total lack of compassion and indifference. In addition [REDACTED] did not have any medical insurance or other benefits as we should have received by Alaska state law under the employee/employer relationship. Dr. Gopinath also led us to believe in no uncertain terms that it would easily be within our financial capacity to fly out of Anchorage at any time for any reason. This was not the case however and we could not afford to leave even in a dire medical emergency as we had not the funds nor any health insurance to pay for appropriate care.

Why is it assumed that because [REDACTED] is ill she has no constitutional human rights to privacy or dignity? It is not a crime to be ill nor is it a crime to choose your own treatment or health care specialists.

Since her care is now being adequately managed by her medical doctor in Washington I have no reason to and will not attempt to prescribe her any medication not required for documented active dental care. ( My employers here provide a full benefits package ).

I have faithfully addressed and corrected all of the concerns listed in the accusations. I did at no time attempt fraud or deceit with regard to the aforementioned medications. I am abiding by all state and federal statutes regarding dentistry and medication and will continue to do so in the future.

I do not take these issues lightly and only wish to continue in the profession I have diligently undertaken for the past seventeen years. I desire only to rebuild my life from the mental and financial turmoil and the knowledge that has resulted from this unfortunate situation. I believe my family and I have suffered enough as a consequence of this action.

As stated previously I will be financially unable to attend a hearing if one is scheduled and I present this document as my complete defense.

Even with the negative experience in dealing with Family Medical Dental Center I can still recall many positive visits to Alaska in the past and hope to visit my relatives in Anchorage or possibly practice and reside in Alaska in the future under different circumstances.

I do not feel that I have written this letter in vain as if for nothing else perhaps you will find some insightful information into some unsavory business practices not of my making.

Sincerely,



Patrick A. Robinson, DDS.

cc: Department of Occupational Licensing