North Carolina Medical Board

Christine M. Khandelwal, DO, MHPE: President | Devdutta G. Sangvai, MD, MBA: President-Elect | Anuradha Rao-Patel, MD: Secretary/Treasurer

March 13, 2024

William George Katibah, III, M.D.
Direct Primary Care of the Carolinas
1913 J.N. Pease Place
Charlotte, NC 28262

Dear Dr. Katibah:

The North Carolina Medical Board ("Board") has concluded its investigation of your medical practice. As a result, the Board voted to issue you this public letter of concern. The Board does not consider a public letter of concern to be a disciplinary action or a limitation or restriction on your North Carolina medical license.

In February 2023, the Board received a complaint from a former employee related to your medical practice having expired testing devices and medications. Based on this complaint, the Board opened an investigation and visited your medical practice in March 2023. During this visit it was noted that, while most items were unexpired, there were some medications and vacutainer needles that were expired. The Board has no evidence that you ever used an expired medication or vacutainer needle.

During the Board's investigation, it also learned that you treated yourself and some of your immediate family members. With limited exceptions that are described in the Board Position Statement titled "Self-Treatment and Treatment of Family Members," it is inappropriate for licensees of the Board to treat themselves, members of their immediate family, and those whom they have a significant emotional relationship. It is also a violation of Rule 21 NCAC 32B .1001, Authority to Prescribe, for a physician to prescribe a controlled substance to themselves, an immediate family member, anyone living with the physician, or someone that the physician is having a sexual relationship with. The treatment of yourself and your immediate family shall be summarized below.

Self-Treatment: You treated yourself on occasions from on or about February 2021 to April 2023. During this time, you refilled two prescriptions for a Schedule III controlled substance that had been previously prescribed to you by a treating physician. Even though you refilled a medication that had been prescribed to you for a long time, it was still a violation of Rule 21 NCAC 32B .1001 to refill this for yourself.

Immediate Family Member #1: You treated Immediate Family Member #1 on occasions from on or about March 2021 to on or about March 2023. In February 2023, you prescribed a Schedule IV controlled substance on one occasion, which is a violation of Rule 21 NCAC 32B .1001.

Immediate Family Member #2: You treated Immediate Family Member #2 on four occasions from on or about March 2020 to on or about October 2022.

Immediate Family Member #3: You treated Immediate Family Member #3 on six occasions from on or about October 2019 to on or about July 2023.

Immediate Family Member #4: You treated Immediate Family Member #4 on ten occasions from on or about January 2018 to on or about March 2023.

The Board understands that you believed you were complying with the Board's "Self-Treatment and Treatment of Family Members" Position Statement when you treated yourself and your family members because you were treating acute minor illnesses within your clinical competence. The Board also understands that you were not aware of Rule 21 NCAC 32B .1001. The Board has not made any finding that the actual treatment you rendered to yourself or your immediate family was below the acceptable and prevailing medical practice. The Board's concern is that you treated yourself and your immediate family on repeated occasions and did not comply with Rule 21 NCAC 32B .1001.

As part of this public letter of concern, you have agreed that, within six (6) months from the date of this letter, you shall complete four (4) hours of continuing medical education ("CME") on the subject of medical record documentation and two (2) hours of CME on treating and prescribing to family, self, and those with whom you have close relationships. You have also agreed to ensure that you and relevant office staff members obtain training relating to compliance with the Health Insurance Portability and Accountability Act and the Office of Occupational Safety and Health Administration within six (6) months from the date of this letter. You will ensure that these CME courses and compliance training are approved in advance by the Board's Office of the Medical Director by contacting the Board's Monitoring Coordinator at boardmontioring@ncmedboard.org to facilitate the CME courses and compliance training approval. You have further agreed to contact the Board's Monitoring Coordinator once the CME courses and compliance training are complete to provide proof of completion within thirty (30) days of completion. The Board recognizes that, as a licensee of the Board, you are required to take CME on an ongoing basis and that this CME is a subject matter specific agreement with respect to an ongoing CME requirement for all licensees.

The Board urges you to take steps to ensure that the conduct giving rise to the Board's concerns does not happen again. If ongoing concerns arise related to these issues, the Board may take additional action against your North Carolina medical license.

This letter is a public record within the meaning of Chapter 132 of the North Carolina General Statutes and is subject to public inspection and dissemination as required by that law. It will be reported to the Federation of State Medical Boards.

Sincerely,

Christine Khandelwal, DO

Christine M. Khandelwal, D.O., MHPE
President

CMK/PFB/las

Consent and Waiver

I, William George Katibah, III, M.D., would like to resolve this matter without the need for more formal proceedings and consent to the Board's issuance of this public letter of concern in resolution of the above matter. I hereby waive any requirement under any law or rule that this public letter of concern be served on me.

I agree that, within six (6) months from the date of this letter, I shall complete four (4) hours of continuing medical education ("CME") concerning the subject of medical record documentation and two (2) hours of CME on treating and prescribing to family, self, and those with whom you have close relationships. I will ensure that the CME courses are approved in advance by the Board's Office of the Medical Director by contacting the Board's Monitoring Coordinator at boardmonitoring@ncmedboard.org to facilitate course approval.

I also agree that relevant office staff members and I shall obtain training relating to compliance with the Health Insurance Portability and Accountability Act and the Office of Occupational Safety and Health Administration within six (6) months from the date of this letter. I shall ensure that this training will be approved in advance by the Board's Office of the Medical Director by contacting the Board's Monitoring Coordinator.

I further agree to submit evidence of completion of the above required CME courses and compliance training to the Board's Monitoring Coordinator within thirty (30) days of completing the CME courses and training.

If I fail to complete the above requirements, I understand that the Board may take action against my North Carolina medical license.

Consented to this the 28 day of February 2024.

William George Katibah III MD

William George Katibah, III, M.D.

State of North Carolina

County of Mecklenburg

I, Sasha Rodriguez, do hereby certify that William George Katibah, III, M.D. personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal this the 28 day of February, 2024.

Sasha Rodriguez

Notary Public

SASHA RODRIGUEZ
NOTARY PUBLIC
Mecklenburg County
North Carolina
My Commission Expires Jan. 8, 2028

(Official Seal)

My Commission Expires: Jan 8, 2028