May 8, 2024

Via Attorney of Record

William John Bicket, M.D.
MUSC Lancaster Wound Healing and Hyperbaric Center
838 W. Market Street
Lancaster, SC 29720-6233

Dear Dr. Bicket:

The North Carolina Medical Board ("Board") has concluded its investigation regarding your care of Patient A. It is the Board's decision not to commence formal proceedings against your license. However, 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 license.

On November 12, 2020, Patient A, a 65-year-old female, presented to you at a wound care clinic for evaluation of a left calf wound. Patient A developed the wound in 2019, which had initially healed. However, the site reopened in September 2020, and she was subsequently referred to you by her primary care provider. You assessed Patient A with a traumatic wound and subsequently initiated therapy with mechanical and enzymatic debridements and prescribed various antimicrobials. Over the next four months, the wound continued to worsen, and on March 15, 2021, Patient A sought a second opinion from another wound provider.

This provider recognized the wound as atypical and started Patient A on a different treatment regimen and instructed Patient A to follow-up in one week. When Patient A presented on March 23, 2021, she had developed another ulcer on her left leg after she reportedly scratched the area two days earlier. The provider ordered labs and referred Patient A to a rheumatologist based on concerns that the underlying cause of the wounds may be an autoimmune disorder leading to a chronic, recurrent skin disorder in which small, discolored blisters appear on the skin and become ulcers (pyoderma gangrenosum). The rheumatologist ultimately diagnosed Patient A with an autoimmune disorder (ankylosing spondylitis). On April 19, 2021, Patient A was admitted to the hospital due to complications of the leg wound and was administered intravenous antibiotics before eventually improving.

The Board had your care of Patient A reviewed by an independent medical expert. The reviewing expert found that your care of Patient A may have fallen below the standard of care in North Carolina. Specifically, the reviewing expert criticized your failure to: (1) elicit a proper history of Patient A's leg wound; (2) employ a differential diagnosis of atypical wounds to include ruling out malignancy, vasculitis, or an autoimmune disease; (3) collect an appropriate biopsy; (4) utilize appropriate dressings; (5) order appropriate compression therapy; (6) utilize appropriate antimicrobial therapy; or (7) adjust the care plan despite continued wound deterioration.

You have agreed that within six (6) months from the date of this letter, you will complete six (6) hours of Category I continuing medical education ("CME") related to atypical wound care, to be approved in advance by the Board's Office of the Medical Director.

The Board is concerned that your care of Patient A may have failed to conform to the standards of acceptable and prevailing medical practice in North Carolina. The Board urges you to take steps to ensure the conduct giving rise to the Board's concerns does not happen again. Otherwise, the Board may take additional action against your license to practice medicine. If that happens, this letter may be reviewed in determining the appropriate action.

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, and it may be reported to the National Practitioner Data Bank if required by law.

Sincerely,

Christine Khandelwal, DO

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

CMK/DTB/adw

Consent and Waiver

I, William John Bicket, 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 six (6) hours of Category I continuing medical education ("CME") related to atypical wound care. I will ensure that this CME is 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 further agree to submit evidence of completion of the above required CME to the Board's Monitoring Coordinator within five (5) days of completing the course.

If I fail to complete the above requirement, I understand that the Board may take disciplinary or other action against my North Carolina license.

Consented to this the 7 day of May, 2024.

William John Bicket, MD
William John Bicket, M.D.

State of North Carolina

County of Cabarrus

I, Jordan Emily Young, do hereby certify that William John Bicket, 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 7 day of May, 2024.

Jordan Emily Young
Notary Public

(Official Seal)

My Commission Expires: Oct. 19 2028

JORDAN EMILY YOUNG
NOTARY PUBLIC
Cabarrus County
North Carolina
My Commission Expires October 19, 2028