

COVID-19 and Medical Board Tyranny

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The COVID-19 pandemic may someday be the subject of countless volumes of literature describing it as a sinister man-made global plague. In today's America, it has introduced a dark age of medical science. Nowhere has this fact been demonstrated more clearly than by the actions of state medical licensing boards, most of whom take their cues from the Federation of State Medical Boards (FSMB). Their drive to control medical practice has been gaining momentum for decades, but their current stance and methodology is an all-out assault on the once noble and legitimate medical profession.

Having received the infamous honor of being the first medical doctor in the U.S. to have my medical license first suspended, then fully revoked, because of COVID malevolence, I've learned many lessons about exactly how state medical boards have honed the process of destroying good physicians.

Now, to be sure, there are no perfect physicians, just as there are no perfect people. But a serious problem must exist when the Oregon Medical Board (OMB) is able to take down a physician who has done no harm and who actually had no patient complaints concerning the board's allegations against him.

In this story of my experience, I am just an example. It exposes the corruption and dirty secrets of an agency that is out of control, without accountability, and devoid of any regard for the best science and sound medical practice. State medical licensing boards have evolved into monsters that devour any medical practitioners in their path who do not comply with the government narrative. When government goes rogue, the medical system becomes an unholy alliance that ultimately wreaks havoc on patients. When the physician-patient kinship is compromised, the healing arts suffer greatly. Any collaboration between government and medicine spells disaster.

When Nothing Makes Sense, Think in Terms of Evil

In late October 2019, I treated my first patient who presented with a full-blown influenza-like illness that typified what in several months would be attributed to SARS-CoV-2. I wasn't particularly disturbed by the illness, having seen similarly severe cases over the past decade.

When the COVID-19 pandemic was declared on Mar 11, 2020, I had treated only about 75 patients with the syndrome. They varied in age, but all severe cases were adults, many with comorbidities. They all recovered in about a week's time and all resumed their normal lifestyles. My treatment for severe viral illnesses had worked successfully for decades. It included a pulse dosing of high-dose prednisone, a high-dose topical steroid inhaler, azithromycin or doxycycline, a beta-agonist inhaler, and a generic oral hydrating solution. Simple as that.

What caught my attention about this virus was not so much the virus itself, but the seemingly nonsensical approach to this mysterious pandemic. All the best studies regarding masking concluded that masking was worthless, yet overnight Dr.

Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases and the President's chief medical adviser, suddenly claimed that masking could help, and maybe two masks were better than one. Really?

That message opposed the then-current standard of care. Then, doctors were advised to close their clinics for two weeks. But isn't it the duty of physicians to treat the sick? Why close a clinic when clinicians are most needed? To the best of my knowledge, I was the only doctor in Polk County to keep my clinic doors open throughout the pandemic, staying faithful to my duty to put the patient first—always.

In the early days of the pandemic, my patients who became ill over the weekend were calling for treatment appointments on Monday. They all told stories of being turned away at emergency departments and urgent care clinics. They received no treatment and were advised to quarantine at home for two weeks, and if their lips turned blue to go to the hospital. I had never heard of such advice before. This was not medicine. As people were being told to cover their faces, social distance, close their businesses, and then to take an untested new type of mRNA "vaccine," I began to feel that I was living in Alice's Wonderland where nothing made sense.

My office staff and I had never masked, and all the patients I treated recovered swiftly. My standard cold and flu season protocol worked very well. We had no problems with disease spread, and no cases were traced to my office. Neither my staff nor I ever got sick. And I had even treated a couple patients who were in overt heart failure and had been refused treatment in the emergency department or by their specialists.

Absolutely nothing made sense, until I started putting the pieces of the puzzle together. People were living in fear and confusion. I soon concluded that this was intentional. As the accumulating evidence revealed that the SARS-CoV-2 virus was patented, as was also the reported "cure-all" vaccine, I suspected foul play. Whatever this pandemic was, it appeared to be planned, and it was evil. That would explain an otherwise inexplicable pattern.

The Cost of Truth-Telling

In December 2019, I opened my first-ever social media account on Twitter, at the behest of my publisher, who suggested it to promote a book that I had just launched: *Unity Without Compromise: a Biblical Basis for Christian Union*. The comments popping up on Twitter at that time were disturbing. People seemed so confused and distressed about this virus. Maybe it was my Ph.D. training in microbiology that induced my reaction, but I couldn't resist responding with comments of common sense and what our best scientific studies had taught us. In no time, more than 30,000 Twitter followers revealed how desperate they were to hear the truth. But "Twitter Jack" Dorsey, Twitter's co-founder and now former CEO, didn't like what I had to say, and I was often censored. By then I knew why.

Unfortunately, I never did get to market my book. The COVID-19 panic consumed my time.

On Aug 13, 2020, I received a notice from the Oregon Medical Board (OMB) that it had “received a complaint regarding unprofessional conduct and has opened an investigation.”

It alleged three things: 1) Licensee is not following social-distancing guidelines in his practice and care of patients; 2) licensee is advising patients and the public that masks required under the current guidelines do not work and should not be worn; and 3) licensee has been posting to social media statements discouraging citizens from adhering to distancing guidelines specific to COVID-19.

I responded to the allegations, stating that I had no immediate recall of specifically addressing social-distancing guidelines, but I affirmed my position that masks are not an effective viral barrier, and I gave my patients informed consent regarding scientific mask data and allowed them to choose for themselves to mask or not in my clinic. My patients were most grateful for the honest information. I heard nothing further from OMB after submitting my response.

Almost 4 months later, I attended a political rally at the capitol in Salem. By that time, I had concluded that some serious chicanery was involved in the pandemic response. It was too coordinated, and it defied all the best current science. Unexpectedly, on Nov 7, 2020, I spoke to a large crowd about masking, my highly successful early treatment of COVID, and the fact that the government was trying to shut us down and control us.

The Multnomah County (Portland) Republican National Committee had recorded my speech and made a YouTube video of it that went viral globally. Apparently, the next day the video reached the eyes of OMB, and on Nov 9 the OMB medical director sent me a threatening letter advising me that I “may be in direct and active violation of current Governor Executive Orders” specifying that “elective and non-urgent procedures across all care settings that utilize PPE are allowed, but only to the extent they comply with guidance or administrative rules issued by the Oregon Health Authority.”

The letter further stated that these “legal mandates” require all people to wear “properly fitted facemasks” when indoors in any care setting, this because “[m]asking has been shown to significantly reduce the spread of the novel coronavirus responsible for the current worldwide pandemic.” Of course, that statement was contradicted by the scientific evidence. But according to OMB’s medical director, my care “may be found to be negligent and may also constitute unprofessional or dishonorable conduct” and therefore “may be subject to administrative sanctions.” He concluded, “Thank you for your prompt attention to these matters.”

My prompt attention apparently necessitated a surprise visit from a board investigator, who requested five minutes of my time. I spent more than an hour explaining to him my disease prevention protocol, my 100 percent success in treating COVID-19 patients, and all the best science on masking—to no avail. His “investigation” got about nearly everything about my case wrong, except that my staff and I were not masking. He lied, fabricated, and misrepresented data, and his bias was clearly to support the government party line. His investigation was shoddy at best; he acted more as a prosecutor than an investigator.

The next morning, after the entire world had been notified, the investigator advised me that OMB suspended my license

by “emergency” order. No explanation. No due process. No free speech protection. Guilty as charged, allegedly for not practicing medicine according to Governor Kate Brown’s “legal mandates.” I was unaware that an unlicensed governor could practice medicine in Oregon. Nothing was legal with these decisions, and I quickly sought counsel and filed a federal lawsuit against OMB.

The board does all its damage in administrative courts, and is highly skilled in staying out of a real courtroom. OMB immediately petitioned to dismiss my case on the grounds of it having “judicial immunity.” It took a year for the judge to respond, but my federal lawsuit was dismissed—after OMB blindsided me with a new “Complaint and Notice of Proposed Disciplinary Action” on Jul 16, 2021. To all the previous “findings” related to COVID guidelines, this complaint added conclusions from two fraudulent pain medicine investigations that had been opened in 2019 and never closed.

Medical Boards’ Tyranny in Pain Medicine

OMB has been on the warpath against all doctors practicing pain medicine at least since the Centers for Disease Control and Prevention (CDC) chronic opioid prescribing guidelines surfaced in 2016. When a pain patient of mine repeatedly refused to abide by one of those guidelines, and then verbally abused my staff, I terminated his care. The patient’s partner’s friend filed a complaint against me, unbeknownst to the patient himself (so the accuser stated in a personal letter to me). Though my action was clearly justified, OMB opened an investigation.

Less than a month later, on Dec 10, 2019, I received another notice from OMB, this time stating, “The Oregon Medical Board has received a complaint regarding your care and treatment of [seven additional] patients...and have [sic] opened an investigation.” The vague charge was that “Licensee is not following the guidelines for the treatment of chronic pain.” Once again, “guidelines” were cited, but not a mention was made of what guidelines I was being accused of not following. Five of these seven patients actually wrote affidavits on my behalf after OMB suspended my medical license.

At the ensuing Investigative Committee meeting, several specialists took turns at setting traps for me. I focused on exposing their ignorance about pain medicine. They called for the meeting to end, but I challenged them, stating that according to their policy, I could now ask them questions. Although the chairman insisted they were out of time, I continued. “Why did you open an investigation on a patient who was rightfully terminated for not following the ‘guidelines’ and violating his opioid agreement?” No answer. Second question: “Was there a complaint filed against me by seven patients regarding my treatment of their chronic pain?” They responded that they could not give out the names or discuss anything about anyone who files a complaint.” That wasn’t my question. I repeated, “Was a complaint actually filed against me about these seven patients?” Thirty seconds elapsed. No answer. My attorney then spoke up for the first time and stated, “You didn’t answer Dr. LaTulippe’s question.” He repeated the question. Again, no answer. Just silence.

I immediately sent OMB medical literature to support my position against the erroneous claims regarding pain management. Then I heard nothing further for some time. The investigation was left open.

Medical Board Retaliation

The proposed disciplinary action dated Jul 16, 2021, included fully revoking my license and fining me \$10,000. The day before this complaint was filed, my wife and I left the state to visit our daughters in Arizona, and we put our mail on hold. Our intent was to be gone four weeks, but we extended our stay for seven weeks. Upon our return, we found a letter from the OMB sent by regular-service mail; the certified letter had been returned unopened after two weeks. The letter announced their proposed action and gave me three weeks to respond. Not having received the notice, I responded four weeks late. I mailed the letter certified, and at the same time received a notice that a default order for revoking my medical license and the \$10,000 fine were acted upon because I had not responded. Again, no due process. OMB made no attempt to contact me, despite having my email address and cell phone number.

After receiving my response, OMB refused to reconsider. And since my license was revoked because of additional pain “findings,” the board’s petition to dismiss my federal lawsuit was granted. I appealed the case for judicial review, but at the time I had no legal representation. Now that I have an attorney, I am a slightly less vulnerable victim. But delay after delay has greatly drawn out the legal process.

How Medical Boards Destroy Doctors

State medical boards can destroy highly qualified, conscientious, caring, and competent physicians for no other reason than that the doctors didn’t follow the current political narrative. Although their stated purpose is to protect the public from rogue doctors who do terrible things to patients, the actual purpose of state medical licensing boards now includes policing dissenters who abide by their Oath of Hippocrates and actually base medical decisions on the best scientific evidence. How many good doctors have been removed? How could we find out? How do licensing boards get away with it, and why is the public unaware of their sordid tactics? The answers are compelling—and frightening.

The process of weakening and wearing down good physicians by state medical boards is systematic and can be described by what I call the six D’s:

- **Demoralize** you,
- **Divest** you of your income,
- **Destroy** your reputation publicly,
- **Divert** attention from the real issue,
- **Delay** the litigation process for as long as possible, and
- **Deprive** you of licensure in another state.

A colleague encouraged me to apply for a Florida medical license because legislators there vowed to not deny a medical license to anyone persecuted by medical boards because of COVID. Such was my case. But after I filed a federal lawsuit against OMB for constitutional violations, it suddenly found cause to open new bogus investigations against me, citing ludicrous things that allegedly happened to patients that I hadn’t seen for as long as five years.

I’m uncertain whether any of these fabricated cases are still open despite OMB’s having revoked my license. The Florida Medical Board informed me that any open case would nullify my opportunity to apply for a Florida license to practice medicine. Since my case against OMB is now pending in Oregon Appellate Court, I was denied the state license. But all OMB had to do was

keep open a single bogus investigation—something they do all the time—to prevent me from ever again practicing medicine in any state.

Medical boards ruthlessly break the law with no fear of consequences, have zero accountability, and know full well that the rigged judicial system will always guarantee their victory against medical doctors. State medical boards can do whatever they want; and they know it. Their methodology is based on five factors: judicial immunity, avoiding real courtrooms, capitalizing on the physician’s weaknesses, ignoring the best science, and discarding all ethics.

Judicial Immunity

The ever-abused disclaimer of medical boards charged with any foul play is “judicial immunity.” They assert that their actions were implemented under the protective canopy of serving as a judge. As judge, they declare themselves exempt from all charges such as character defamation, malicious prosecution, fraud, and even glaring constitutional violations that involve the First, Fifth, and Fourteenth Amendments.

Medical board members are selected by the state governor, and consist of a potpourri of medical and non-medical personnel. They have no legal expertise, but when it comes to taking down physicians, they are self-declared “experts.” The legal system has rules that must be followed, but medical board accusers have their own unique set of rules. They would be quickly destroyed in a real courtroom, but they are able to work in a system that fully enables their methods: administrative law.

Administrative Court—the Quintessential Kangaroo Court

Unlike in civil and criminal courts, the composite medical board is assigned the role of judge, although the members have no training in jurisprudence. Their assuming full judicial authority is akin to practicing medicine without a license. Also, no due process of the law applies to these courts. There are no rules of evidence, and hearsay is fully admissible as “evidence” of wrongdoing.

Hearsay might involve a stranger far away who read an article or somehow heard about a doctor and decides he wants to file a complaint with the state board against the doctor. If such a “witness” makes any blind accusation against the doctor—whom he may not know in the least—then that surreptitious charge would be considered as evidence. If the accusation favors the bias of the medical board team, then it becomes very useful fodder in a board proceeding.

When a medical board takes action against a medical professional, such hearsay is memorialized in the widely publicized, unscrupulous mainstream media that adds its own twist, giving the public the false impression that this rumor or personal statement is a proven fact. In this way, even the most absurd and false claims (lies) are tied to the “villain,” and his character is quickly destroyed. Of course, the board knows the claims are fallacious, but they will serve to incite the recruited vigilantes to attack their prey. Threats and insults and new accusations are sure to follow. And that rationalizes the board’s deviant scheme.

All such accusers are given full protection by the board. That means the indicted medical doctor isn’t allowed to know the identity of his accuser(s). It means no cross-examination is permitted. This allows the board to build a case against a doctor without any evidence of patient harm or actual wrongdoing.

An administrative law judge (ALJ) is assigned to these

hearings, but acts only in an advisory capacity. Since medical board members are clueless about judicial procedure, the ALJ facilitates medical board “judges” and makes recommendations that favor the board’s actions and decisions. The bias of ALJs is readily obvious, as expected, since a huge conflict of interest compromises them: they receive their income from government agencies that they represent. In other words, the entire administrative court system is rigged. Judgment is already decided before the hearings begin. It is rare for a defendant to win in administrative courts. They are the quintessential kangaroo court.

Disarming the Victims of Medical Board Abuse

One of the most devastating actions committed by state medical boards against accused doctors is rendering them weak and unfit to ward off their vicious attacker. The moment a physician’s license is suspended, his income is abruptly halted. Yet he must still pay out many expenses in the process of closing his clinic. How can he afford to hire an attorney? That’s easy, just dip into life savings for retirement, or deplete the children’s college funds. Then hire an expensive attorney who already knows the case is futile, but will go through the motions of defending you in the mock court. After all, it does provide the lawyer income. By that time, your funds are sufficiently depleted that you are extremely hesitant to appeal your case in civil court. What will that cost?

After all the libel and slander, abrupt loss of income, notifications that all medical affiliations, board certifications, insurance contracts, and hospital privileges have been canceled, the pending sense of doom begins to engulf you.

‘The Science’ Substitutes for Best Science

Throughout the fake court hearings, you realize that all the best evidence you presented to defend your actions and your honor meant nothing. The board accused you of not complying with a standard of care or best practices, when in fact, such standards were based on the weakest and most biased medical studies available, or simply on the whim of the state’s “woke” health agencies. The best science was neither cited nor acknowledged. Good science was ignored. When I declared this elephant in the room, the board simply did not respond. All logic and strong evidence were overruled by some means or another by the ALJ.

Ethics and Morality Discarded

Exposing all the subtle discrepancies of justice that occur in a medical board action is a formidable challenge. State medical boards abide by no code of ethics, and they make their own definitions of good and evil. How else can one explain the fact that state medical boards have no problem with surgeons who mutilate, and render forever infertile, perfectly healthy young bodies under the guise of “gender-affirming care,” while they will gladly crush a physician who actually heals the sick and first does no harm?

When ethics and morality are discarded, people will do whatever evil they wish, and justify it to themselves. Never will they consider the collateral damage they do. When OMB suspended my license, thousands of patients suddenly had no physician. One-half of my practice involved pain and addiction medicine. This population was doing very well under my care. Some of them now have suffered greatly, and in diverse

ways. One committed suicide. Several applied for disability compensation. Others returned to heroin and other street drugs. Some are depressed and anxious due to lack of quality care. A few have given up and slowly wilt away.

My receptionist derived much support from our “clinic family.” She had been suffering from severe personal and family issues, but she thrived in my office. After my clinic closed, she moved and sought other employment. In a few months, she died from a substance overdose.

The Consequences of Such a System

I practiced medicine without blemish for more than 22 years before OMB took me down for telling the world that early medical treatment for COVID-19 was extremely effective. What if a small-town doctor showed the world that there is an effective COVID-19 treatment when Emergency Use Authorization for an experimental vaccine requires that no treatment be available? The loss to the pharmaceutical industry would be enormous. Thus, independent doctors must be sacrificed.

State medical boards are so powerful that almost all physicians are terrorized into silence and submission. I broke the rules, and I paid the price. I lost my license, my clinic, my home, my career, my reputation, and my means of supporting my family.

The evidence that OMB conveniently ignores is that no actual complaint was ever filed against me by any of my patients, and that I never caused any harm to even a single patient. I only did my job. OMB lied about a complaint being filed against me—a gross injustice. Will I ever be vindicated? In the world’s eyes, it likely doesn’t matter.

Restoring Medical Freedom

Some say that we need a parallel medical system in America, free from the pirated third-party system. Such a system would be incredibly effective at restoring quality medical care. But that would likely be the system’s downfall. Independent doctors would still be a small minority. They would yet be attacked and threatened for doing their job faithfully. Thwarted by corrupt pharma, judges, lawyers, hospital CEOs, and many other colleagues, could they survive?

Medical freedom demands that we dissolve the Federation of State Medical Boards, which now advises every state’s medical licensing board to punish doctors for speaking truth in medicine and insisting on informed consent. State medical boards must be dethroned. Litigation and legislative changes are vital.

Now is the time to act, as the evidence of the death and disease caused by malefactors in the disastrous COVID-19 response mounts. International and U.S. government agencies, and their officials, knew the truth. The truth will be told in history, but many lives will be saved if we boldly and loudly proclaim the truth now.

As individuals, we must all do what we can to better our world, and recognize that whatever the price of freedom, no cost is too great.

Freedom is only vanquished when the people forfeit their liberty. Once lost, this pearl of great price may never be restored.

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