

**UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE JACKSONVILLE**  
**Office of Educational Affairs**  
RESIDENT MANUAL

**IMPAIRED PHYSICIAN POLICY & THE PROFESSIONALS RESOURCE NETWORK (PRN)**

Florida Medical Practice Act of 1988 provides for the Florida Impaired Practitioners program. It is administered through the Florida Medical Association/Florida Medical Foundation Professionals Resource Network (PRN). The Department of Health (DOH) oversees the function of the impaired practitioners programs and consultants through its Impaired Practitioner Committee. The committee's approved program consists of the Professionals Resource Network (PRN).

1. The program may be contacted by the physician/resident seeking treatment, the physician's family, peers, supervisors or other individuals. (1-800-888-8776)
2. All referrals are confidential.
3. All referrals to the PRN are confidentially evaluated.
4. If there is verification of a possible violation of the Practice Act, an intervention is arranged. The practitioner is contacted by the PRN, informed of his/her vulnerability and notified of section 455.261. If there is no confirmation of the violation, but the physician is determined to need professional assistance in other areas, he/she is referred to the Resident Assistant Program for assistance and evaluation.
5. An evaluation is scheduled with one of the approved treatment providers.
6. If the practitioner refuses to be evaluated or seek help, the appropriate regulatory agency is notified and an official investigation may be undertaken at the discretion of the Department of Health (DOH).
7. If the practitioner cooperates, he/she is evaluated by one of the Florida Board of Medicine (BOM)-approved treatment providers. When the evaluation is inpatient, the practitioner is placed under observation for 48 hours, at which time a thorough medical examination, psychiatric assessment, addiction and chemical use evaluation and psychometric testing are completed. This is followed by recommendations for further therapy or other appropriate action, including treatment for chemical dependency, continued psychiatric care or other activities. Should the practitioner disagree, a second opinion with another approved treatment provider is permitted.
8. As long as the practitioner progresses satisfactorily in a DOH-approved program with an approved treatment provider, no regulatory action will be precipitated. Should the practitioner, at any time, fail to progress as required, the PRN consultant will notify the DOH, and the case may then be brought before the BOM. Disciplinary action is determined by the board members.
9. Resumption of clinical privileges at UF Health-Jacksonville will be contingent upon meeting the requirements set forth in the Medical Staff Bylaws and policies and procedures for reinstatement.
10. Role of the Department of Health: Should information regarding a practitioner reach the DOH prior to the PRN consultant, the DOH is required to submit such information to the consultant. Section 455.261 provides for this; the consultant then utilizes such information to direct the practitioner to evaluation and treatment, when recommended.

Family Care: The PRN provides services to the family members of the impaired practitioner through a Family Component Program; this includes the services necessary for continued family recovery.

Continuing Care: The practitioner is placed under a continuing care agreement. This agreement may be individualized for each practitioner. In cases of psychiatric disorders, there also exists a psychiatric continuing care agreement to assure the public of continued psychiatric care and University of Florida College of Medicine-Jacksonville Resident Manual recovery which provides for the practitioner's psychiatrist and other treating professionals reporting to the PRN.