

1 **BEFORE THE ARIZONA MEDICAL BOARD**

2 In the Matter of

CASE No: MD-20-0412A

3 **GUISEPPE F. RAMUNNO, M.D.**

**REQUEST FOR LICENSE
INACTIVATION WITH CAUSE AND
ORDER INACTIVATING LICENSE
WITH CAUSE**

4 Holder of License No. 44840
5 For the Practice of Allopathic Medicine in the
6 State of Arizona.

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8 1. I, Guiseppe F. Ramunno, M.D. ("Respondent"), am the holder of License No.
9 44840 to practice allopathic medicine in the State of Arizona.

10 2. I hereby request that, effective at 5:00 p.m. on the date of the following Order,
11 the Arizona Medical Board ("Board") inactivate with cause my license to practice
12 allopathic medicine number 44840 pursuant to A.R.S. §32-1452(F). I participated in the
13 Board's Physician Health Program ("PHP"), from September 20, 2011 to September 20,
14 2013 and from April 7, 2015 to October 26, 2018 and no longer qualify for a confidential
15 Board Order.

16 3. I will not practice medicine in Arizona or any other state, territory or district of the
17 United States or a foreign country while my Arizona license is inactive. I may not hold or
18 maintain a controlled substance certificate with the Drug Enforcement Administration or
19 write or refill prescriptions as long as my license is inactive. If I practice medicine while my
20 license is inactive I will be practicing medicine without a license and/or without being
21 exempt from licensure, which amongst other things, is a felony.

22 4. I shall not request reactivation of my license to practice medicine in Arizona until I
23 complete a long-term care residential program, an inpatient hospital treatment program,
24 an intensive outpatient treatment program or any combination of these programs as
25 required by A.R.S. § 32-1452(F) and subsequently complete an assessment with the

1 Board's PHP Contractor, and the Board is in receipt of the assessment findings and
2 recommendations. I understand that I may also be required to complete other evaluations
3 if deemed necessary by the Board. The Board will not reactivate my license until I present
4 evidence satisfactory to the Board, in its sole discretion, that I am medically competent
5 and mentally and physically able to safely practice medicine in the State of Arizona.

6 DATED this 18 day of May, 2020.

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8 _____
GIUSEPPE RAMUNNO, M.D.

9 **FINDINGS OF FACT**

- 10 1. Respondent currently holds an active license to practice medicine in this state.
11 2. Respondent was under a Board stipulation or probationary order pursuant to
12 A.R.S. § 32-1452 that is no longer in effect.
13 3. On May 13, 2020, the Board received a self-report from Respondent stating that
14 he had been arrested for a DUI.
15 4. Pursuant to A.R.S. § 32-1452(F), Respondent has requested that his/her license
16 to practice medicine in the State of Arizona be placed on the status of Inactive with
17 Cause.

18 **CONCLUSION OF LAW**

- 19 1. The Board possesses jurisdiction over the subject matter hereof and over
20 Licensee.
21 2. The conduct and circumstances described above constitute unprofessional
22 conduct pursuant to A.R.S. §32-1401(27)(f) ("Exhibiting a pattern of using or being under
23 the influence of alcohol or drugs or a similar substance while practicing medicine or to the
24 extent that judgment may be impaired and the practice of medicine detrimentally
25 affected..").

ORDER

IT IS HEREBY ORDERED THAT:

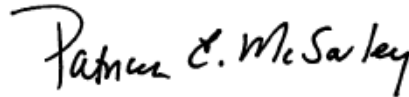
1. License number 44840 held by Respondent is Inactivated with Cause.

2. Before Respondent can request that his/her license be reactivated, he shall successfully complete a long-term care residential program, an inpatient hospital treatment program, an intensive outpatient treatment program or any combination of these programs and shall meet the applicable requirements of A.R.S. §32-1431(D).

3. Once Respondent has completed treatment, the Board shall determine if it should refer the matter for a formal hearing for the purpose of suspending or revoking the license or to place Respondent on probation for a minimum of five (5) years with restrictions necessary to ensure public safety.

DATED this __18th_ day of __May____, 2020

ARIZONA MEDICAL BOARD



By: _____

Patricia E. McSorley
Executive Director

EXECUTED COPY of the foregoing mailed
This __18th__ day of __May____, 2020 to:

Calvin L. Raup
Calvin L. Raup, PLLC
531 E. Thomas Road Suite104
Phoenix, Arizona 85012
Attorney for Respondent

1 ORIGINAL of the foregoing filed this
2 _18th_ day of __May____, 2020 with:

3 Arizona Medical Board
4 1740 West Adams, Suite 4000
5 Phoenix, Arizona 85007

Eimm Dooney

6 Board staff

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