



Texas State Board of Medical Examiners

1101 CAMINO LA COSTA, SUITE 201
P.O. BOX 13562, CAPITOL STATION
AUSTIN, TEXAS 78711

(512) 452-1078

September 29, 1987

COPY

Harley R. McDaniel, M. D.
5600 Fairfield
Dallas, Texas 75205

RE: Letter of Reprimand

Dear Doctor McDaniel:

Thank you for coming to Austin on September 28, 1987, to appear before our Board Member, James W. Lively, D. O. and Bill Campbell, staff attorney, to discuss allegations that you treated a patient at Parkland Hospital in Dallas at a time when you had no privileges so to do.

After hearing your testimony and the other evidence, it is the opinion of the Sanction Committee that you are guilty of unprofessional conduct in violation of Section 3.08(4) of Article 4495b (the Texas Medical Practice Act). The Sanction Committee further found that you failed to properly supervise a medical technician in the taking of blood and administering of medications and that such was an improper delegation to an unqualified employee, all in violation of Section 3.08(h) and (i) of the MPA.

In the future, we admonish you to comply with all State and Federal laws and regulations as well as bylaws and regulations of hospitals, medical schools or other facilities prior to your using experimental drugs. While we recognize your enthusiasm to be a part of the medical community that is tirelessly working to find a cure for AIDS, you must understand that this Board cannot ignore violations by physicians of existing standards of care. You were aware of the bylaws and protocol of Parkland Hospital and violated them with knowledge aforethought. Consequently, you are herewith reprimanded by this letter for your permanent file, which letter of reprimand shall be a matter of public record.

Sincerely,

G. V. Brindley, Jr., M. D.
Executive Director
GVB/BC/co

CERTIFIED MAIL - RETURN RECEIPT

11, July 1983 447-945

DOMESTIC RETURN RECEIPT

1. <input type="checkbox"/> Show to whom, date and address of delivery. 2. <input type="checkbox"/> Restricted Delivery.		3. Article Addressed to: Harley R. McDaniel, M. D. 5600 Fairfield Dallas, Texas 75205	
4. Type of Service: <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail		Article Number 460399	
Always obtain signature of addressee or agent and DATE DELIVERED.			
5. Signatory Address: Harley R. McDaniel		6. Signature - Agent: Harley R. McDaniel	
7. Date of Delivery			
8. Addressee's Address (ONLY if requested and fee paid)			