



**NORTH CAROLINA
MEDICAL BOARD**

November 4, 2014

Sandra Normann, M.D.
KidzCare Pediatrics
5335 Yadkin Road
Fayetteville, NC 28303

Dear Dr. Normann:

The North Carolina Medical Board ("Board") has concluded its investigation regarding a complaint made against you regarding your failure to properly notify your patients or your practice that you would be leaving the country and not returning. Although the Board decided not to commence formal proceedings against your license, it did vote to issue you this public letter of concern. The Board does not consider this public letter of concern to be a disciplinary action or a limitation or restriction on your license.

The Board has set forth physician responsibilities relative to departures from practice in its Position Statement entitled, "*Departures or Closings of Medical Practices.*" To summarize, licensees are required to give sufficient notice, typically thirty days, to patients so that patients may secure alternate care and receive copies of their healthcare records in order to ensure that patients will not experience a disruption of continuity of care.

On March 19-21, 2014, you called the practice where you were employed informing them that you were sick. You returned to work Monday, March 24, 2014, and saw patients. You did not report to work on March 25, 2014 and all attempts to contact you by your employer were unsuccessful. There was a full day of patients scheduled to see you that subsequently had to be either rescheduled or seen by another physician. Your practice reviewed your cases and discovered that you had not completed the necessary documentation for eight of your patients.

With no communication from you and with concern for your safety, your practice contacted the police. Days later, you contacted the practice to let them know that you had traveled out of the country and would not be returning. Your actions, as described above, posed a threat to the health and safety of your patients.

The Board requires you to complete the charts for the patients you examined on the day you worked and to ensure the conduct giving rise to the Board's concerns does not happen again. Failure to complete the charts or a repetition of this conduct may result in the Board commencing formal disciplinary proceedings against your license to practice medicine. If that happens, this letter may be entered into evidence in determining the appropriate discipline.

1203 Front Street
Raleigh, North Carolina 27609-7533

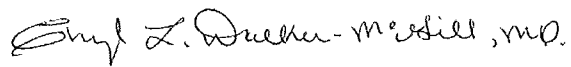
Mailing:
P.O. Box 20007
Raleigh, North Carolina 27619-0007

Telephone: (919) 326-1100
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Web: www.ncmedboard.org

Sandra Normann, M.D.
November 4, 2014
Page Two

The Board does not consider a public letter of concern to be a disciplinary action or a limitation or restriction on your license. However, 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; however, it will not be reported to the National Practitioner Data Bank.

Sincerely,

A handwritten signature in cursive script that reads "Cheryl Z. Walker-McGill, M.D.".

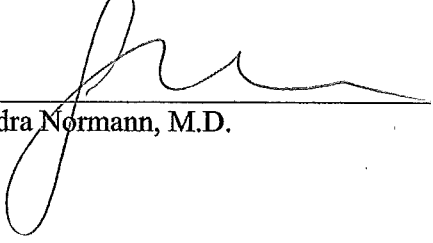
Cheryl Walker-McGill, M.D.
Board President

CWM/DTB/bjs

Consent and Waiver

I, Sandra Normann, 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 and agree in resolution of the matter.

Consented to this the 24th day of October, 2014.



Sandra Normann, M.D.

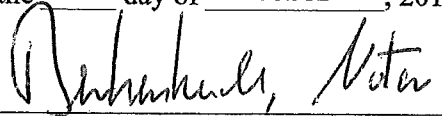
State of Federal Republic of Germany

County of North Rhine Westphalia

I, Stephan Berkenheide, a Notary Public for the above named County and State, do hereby certify that Sandra Normann, 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 24th day of October, 2014.



Notary Public



My Commission expires: 31.07.2026

Urkundenrolle Nummer 296 für 2014

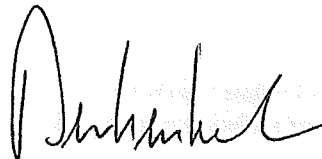
Vorstehende, vor mir gefertigte Unterschrift der Frau Sandra Normann, geb. Smolka, geb. am 04.12.1972, wohnhaft Glückweg 18, 48147 Münster, ausgewiesen durch gültigen Personalausweis der Bundesrepublik Deutschland Nr. 539583519,

beglaubige

ich hiermit.

Die Frage des Notars nach einer Vorbefassung im Sinne des § 3 Abs. 1 Nr. 7 BeurkG wurde von der Urkundsbeteiligten verneint.

Münster, den 24. Oktober 2014



Berkenheide, Notar

