

State of Louisiana Department of Health and Hospitals

Louisiana Physical Therapy Board

104 Fairlane Drive Lafayette, Louisiana 70507 337/262-1043 FAX 337/262-1054

December 20, 2013

Sidney Bourg 127 Barrilleaux Street Lockport, LA 70374

RE:

In the matter of Sidney Bourg, P.T.

License 00536

Administrative Case No. 2013 - 04

Dear Mr. Bourg,

Please find enclosed a copy of the Consent Order rendered in the above referenced matter. The grounds for the administrative proceeding conducted against you were based upon a technical violation of the Physical Therapy Practice Act of Louisiana and the Rules and Regulations promulgated by the Board. As set forth in the Consent Order, you were charged with failure to timely renew your license by the April 30th renewal period and practicing physical therapy without a license for a short period from May 1, 2013 until May 13, 2013.

The Consent Order entered into by the Board and you involved the payment of a lump sum agreed upon fine and the payment of administrative costs in this matter. As set forth in the Consent Order, there are no restrictions on your practice of physical therapy. To the best of my knowledge, you have complied with all the requests of the Board and have done so openly and in good faith.

In conclusion, your skills and provision of services as a physical therapist were never questioned in an administrative proceeding, and to the best of my knowledge, not an area of concern by the Board.

Should you have any questions about this letter or the Consent Order rendered by the Board, please do not hesitate to contact me.

Sincerely,

Cheryl Gaudin Executive Director

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enclosure



State of Louisiana Department of Health and Hospitals

Louisiana Physical Therapy Board

104 Fairlane Drive Lafayette, Louisiana 70507 337/262-1043 FAX 337/262-1054

CASE NUMBER: 2013 - 04

DATE:

August 16, 2013

RE:

Informal Consent Order Regarding Late License Renewal

Licensee Sidney Bourg, License No. 00536, (referred to herein as Applicant) acknowledges that he failed to timely complete and submit application for renewal of his Physical Therapy license for the renewal period beginning May 1, 2013. License renewals are required by law and Board Rules to be made "by March 31 but no later than April 30^{th".} Pursuant to La. 37:R.S. 2417 B a license not renewed in accordance with the rules of the Board shall automatically expire "at the end of its term" after which the licensee shall not practice in Louisiana. Applicant acknowledges that he has practiced physical therapy in Louisiana from May 1, 2013 through May 13, 2013 without a valid license in violation of La. R.S. 37:2417 B. These facts and provisions of the Physical Therapy Practice Act and Board Rules provide a basis and authority for this Consent Order.

Applicant has now applied for reinstatement of his license. He agrees to the following terms and conditions with the Louisiana Physical Therapy Board (the Board) for late renewal:

- A. Applicant will pay to the Board, in addition to regular renewal and reinstatement fees, the sum of \$250 as reimbursement for the administrative and legal time and expenses involved in late renewal of his license. Payment by cashier's check or credit card will be made by August 30, 2013. Any additional time for making this payment requires written approval by the Board.
- B. Applicant shall provide documentation with this agreement from his employer(s) which reflects that all charges to patient accounts have been reversed for all treatments provided by applicant during the period when he was not licensed.
- C. Applicant voluntarily gives his consent to this Informal Consent Order, the terms of which were approved by the Board at its June 19, 2013 meeting.

Applicant

Applicant

Date:_

Cheryl Gaudin, Executive Director
On behalf of the Board

CERTIFICATION REGARDING FEES FOR PHYSICAL THERAPY SERVICES

The undersigned representative of <u>STAT Home Health Agency</u> which is the (Name of facility)			
employer of Sidney Bourg, a physical therapist assistant, subject to licensure by			
the Louisiana Physical Therapy Board, whose license number is <u>00536</u> , acknowledges receipt of			
the Informal Consent Order for Late Renewal of License between the Board and licensee. This			
Consent Order indicates that between May 1, 2013 and May 13, 2013, Sidney Bourg did not hold			
a valid license to provide physical therapy services as required by law. During this period, Licensee			
continued to work at this facility and treat patients who were billed for physical therapy services.			
Since Licensee was not legally authorized to provide physical therapy services during the			
period indicated above, I certify to the Board that charges for those physical therapy services			
provided by Licensee during the period identified above have now been reversed or refunded to			
the payor with appropriate notification directly to the patient. Records of this facility document			
that these unearned fees have been reversed or refunded and such records may be inspected by			
Board representatives by contacting me during regular business hours at 225-202-6720.			
(Telephone number)			
I certify that the above information is true and correct and that I have personal knowledge			
of its accuracy.			
Signature			
DERENT DOMINGUE, PT Print Name			
VICE PRESIDENT HH OPERATIONS Title			
STAT HOUMA Facility			

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Cheryl Gaudin

Duty:

Authorize.Net Auto-Receipt [emailreceipts@authorize.net] From: Friday, December 13, 2013 3:39 PM Sent: **CHERYL GAUDIN** To: Subject: Merchant Email Receipt **Please DO NOT REPLY to this message. E-mail support@authorize.net if you have any questions. ====== SECURITY STATEMENT ======= It is not recommended that you ship product(s) or otherwise grant services relying solely upon this e-mail receipt. ====== GENERAL INFORMATION ======= Merchant: LOUISANA BOPT EXAMINERS (444640) Date/Time: 13-Dec-2013 15:39:12 CCST ====== ORDER INFORMATION ======= Invoice: Description: Late Renewal Fee - Sidney Bourg Amount: 253.00 (USD) Payment Method: MasterCard Type: Authorization and Capture ======= RESULTS ======== Response: This transaction has been approved. Authorization Code: 136487 Transaction ID : 5773741969 Address Verification: Street Address: No Match -- First 5 Digits of Zip: Match === CUSTOMER BILLING INFORMATION === Customer ID: 00536 First Name : Celeste Last Name : Bourg Company: Address : 5638 Hwy 1 City: Lockport State/Province : LA Zip/Postal Code : 70374 Country: Phone: Fax: E-Mail: sidbourg@att.net === CUSTOMER SHIPPING INFORMATION === First Name : Celeste Last Name : Bourg Company: Address: 5638 Hwy 1 City: Lockport State/Province : LA Zip/Postal Code : 70374 Country: ===== ADDITIONAL INFORMATION ====== Tax: