



TEXAS MEDICAL BOARD

**REMEDIAL PLAN**  
**STELLA G. IMMANUEL, M.D.**  
**LICENSE NO. S3994**

On the 15 day of October, 2021, this matter came on to be heard before the Texas Medical Board (Board). On July 12, 2021, Respondent appeared by videoconference at an Informal Show Compliance Proceeding and Settlement Conference (ISC) in response to a letter of invitation from the staff of the Board. This Remedial Plan was offered by Sherif Zaafran, M.D., a member of the Board, and Aundrea Young, a member of a District Review Committee. Claudia Kirk represented Board Staff and prepared this Remedial Plan. Respondent was represented by Steven Mitby.

**FINDINGS**

Respondent failed to give adequate informed consent to one patient for the prescription of hydroxychloroquine for treatment of COVID-19.

Respondent does not admit or deny the Findings and Conclusions of Law contained herein but, rather, has agreed to settle in good faith to avoid the cost, expense, and uncertainty of litigation.

**BOARD HISTORY**

Respondent has not had a prior Order or Remedial Plan with the Board.

**MITIGATING FACTORS**

1. No prior Board history.
2. Respondent cooperated in the investigation of the allegations that resulted in this Remedial Plan.

### CONCLUSIONS OF LAW

1. The Board has jurisdiction over the subject matter and Respondent pursuant to Medical Practice Act, Title 3, Subtitle B, Texas Occupations Code (Act).
2. Section 164.051(a)(6) of the Act, as further defined by Board Rule 190.8(1)(I), authorizes the Board to take action against Respondent.
3. Section 164.0015 of the Act authorizes the Board to resolve this matter with a Remedial Plan.
4. Section 164.002(d) of the Act provides that this Remedial Plan is a settlement agreement under the Texas Rules of Evidence for purposes of civil litigation.

### REMEDIAL PLAN TERMS

Based on the above, Respondent shall:

1. Within one month following the date of the entry of this Remedial Plan, Respondent shall update and submit a copy of her informed consent document, for all off-label treatments she provides, to the Compliance Division of the Board. Respondent shall also adopt policies and procedures to require that all consent documents are reviewed with and signed by patients prior to any off-label treatment being initiated.
2. The cost of administering the Remedial Plan will be \$500 per year. Payment of this cost is due no later than 60 days after the date of entry of this Remedial Plan. The cost shall be paid by cashier's check or money order payable to the Texas Medical Board and shall be submitted to the Executive Director for the Board for routing so as to be remitted to the Comptroller of Texas for deposit in the general revenue fund.
3. The terms of this Remedial Plan are not subject to modification or early termination.
4. Respondent shall comply with all the provisions of the Act and other statutes regulating Respondent's practice.
5. Respondent shall fully cooperate with the Board attorneys, investigators, compliance officers, consultants, and other employees or agents of the Board in any way involved in investigation, review, or monitoring associated with Respondent's compliance with this Remedial Plan.

6. Any violation of the terms, conditions, or requirements of this Remedial Plan by Respondent shall constitute unprofessional conduct likely to deceive or defraud the public, or to injure the public, and shall constitute a basis for disciplinary action by the Board against Respondent pursuant to the Act. Respondent agrees that any proceeding related to this Remedial Plan may be held in person, by teleconference, or by videoconference at the discretion of the Board.


7. This Remedial Plan shall automatically terminate upon Respondent's submission to the Board of evidence deemed to be sufficient by the Compliance Division of the Board that Respondent successfully completed the requirements set forth in the Remedial Plan Terms Paragraph Nos. 1 and 2.

**THIS REMEDIAL PLAN IS A PUBLIC RECORD.**

**THIS REMEDIAL PLAN IS NON-DISCIPLINARY.**

**(SIGNATURE PAGES FOLLOW)**

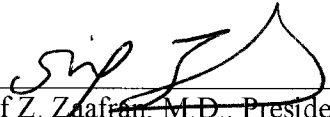
I, STELLA G. IMMANUEL, M.D., HAVE READ AND UNDERSTAND THE FOREGOING  
REMEDIAL PLAN. I UNDERSTAND THAT BY SIGNING, I WAIVE CERTAIN RIGHTS. I  
SIGN IT VOLUNTARILY. I UNDERSTAND THIS REMEDIAL PLAN IS A FINAL, NON-  
APPEALABLE AGREEMENT THAT CONTAINS THE ENTIRE AGREEMENT AND  
THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR  
OTHERWISE.



STELLA G. IMMANUEL, M.D.  
Respondent

8/18/21  
DATE

SIGNED AND ENTERED by the presiding officer of the Texas Medical Board on this  
15 day of October, 2021.

  
\_\_\_\_\_  
Sherif Z. Zafran, M.D., President  
Texas Medical Board