

**STATE OF TENNESSEE
DEPARTMENT OF HEALTH**

IN THE MATTER OF:)	
)	BEFORE THE TENNESSEE BOARD
DONALD E. VOLLMER, II, M.D.,)	OF MEDICAL EXAMINERS
RESPONDENT)	
)	COMPLAINT NO. 2023030171
COLLGE GROVE, TENNESSEE)	
TENNESSEE LICENSE NO. 31287)	

CONSENT ORDER

Come now the Division of Health-Related Boards of the Tennessee Department of Health (“State”), by and through the Office of General Counsel, and Respondent, Donald E. Vollmer, M.D., (“Respondent”), and respectfully move the Tennessee Board of Medical Examiners (“Board”) for approval of this Consent Order effecting Respondent’s medical license in the State of Tennessee.

The Board is responsible for the regulation and supervision of medical professionals licensed to practice in the State of Tennessee. *See Tennessee Medical Practice Act, Tennessee Code Annotated sections (“TENN. CODE ANN. §§”) 63-6-101, et seq.* It is the policy of the Board to require strict compliance with the laws of this State, and to apply the laws so as to preserve the quality of medical care provided in Tennessee. It is the duty and responsibility of the Board to enforce the Tennessee Medical Practice Act in such a manner as to promote and protect the public health, safety and welfare in every practicable way, including disciplining individuals who violate the provisions of TENN. CODE ANN. § 63-6-101, *et seq.* or the Rules and Regulations promulgated by the Board and recorded in the *Official Compilation Rules and Regulations of the State of Tennessee* (“TENN. COMP. R. & REGS.”)

Respondent, by his signature to this Consent Order, waives the right to a contested case hearing and any and all rights to judicial review in this matter. Respondent agrees that presentation to and consideration of this Consent Order by the Board for ratification and all matters divulged

during that process shall not constitute unfair disclosure such that the Board or any of its members shall be prejudiced to the extent that requires their disqualification from hearing this matter should this Order not be ratified. Likewise, all matters, admissions and statements disclosed or exchanged during the attempted ratification process shall not be used against Respondent in any subsequent proceeding unless independently entered into evidence or introduced as admissions.

Respondent expressly waives all further procedural steps and expressly waives all rights to seek judicial review of or to challenge or contest the validity of this Consent Order. Respondent understands that by signing this Consent Order, Respondent is allowing the Board to issue its order without further process. Respondent acknowledges that this is a formal disciplinary action and will be reported to the National Practitioner Data Bank and/or similar agency. In the event that the Board rejects this Consent Order for any reason, it will be of no force or effect for either party.

STIPULATIONS OF FACT

1. Respondent has been at all times pertinent hereto licensed by the Board as a medical doctor in the State of Tennessee, having been granted license number 31287 by the Board on March 17, 1999, which currently has an expiration date of January 31, 2025.
2. Body Works, located at 1113 Murfreesboro Road, Suite 307, Franklin, Tennessee 37064, is a registered medical spa in the State of Tennessee, having been granted facility license number 00001270 on May 7, 2024, which currently has an expiration date of May 6, 2025.
3. Body Works, located at 210 Burkitt Commons Avenue, Nolensville, Tennessee 37135, is a registered medical spa in the State of Tennessee, having been granted facility license number 00001271 on May 7, 2024, which currently has an expiration date of May 6, 2025.
4. Respondent has served as the medical director at Body Works since January 2018.

5. Body Works operated as an unregistered medical spa from approximately January 2018 to April 15, 2024, when the application for registration of Body Works was submitted.

GROUND FOR DISCIPLINE

The preceding Stipulations of Fact are sufficient to establish that Respondent has violated the following statutes or rules which are part of the Act, TENN. CODE ANN. § 63-6-101, *et seq.* for which disciplinary action before and by the Board is authorized:

5. The facts stipulated in paragraphs one (1) through five (5), *supra*, constitute a violation of TENN. CODE ANN. § 63-6-214(b)(1):

Unprofessional, dishonorable or unethical conduct;

6. The facts stipulated in paragraphs one (1) through five (5), *supra*, constitute violation of Tenn. Comp. R. & Regs 0880-02-.24(5)

Operation [of a medical spa] without current registration constitutes unprofessional conduct on the part of the medical director or any supervising physician providing services, including supervision services, at such unregistered medical spa and is grounds for disciplinary action by the licensing board of such physician.

POLICY STATEMENT

The Tennessee Board of Medical Examiners takes the following action in order to protect the health, safety, and welfare of the people of the State of Tennessee and ensure that the public confidence in the integrity of the medical profession is preserved.

ORDER

NOW THEREFORE, Respondent, for the purpose of avoiding further administrative action with respect to this cause, agrees to the following:

8. The Tennessee medical license of Donald E. Vollmer, M.D., license number 31287 is hereby **REPRIMANDED**, effective the date of entry of this Order.
9. Respondent must pay seventy-six (76) Type C Civil Penalties in the amount of fifty dollars (\$50.00) each, **for a total civil penalty of three thousand eight hundred dollars (\$3,800.00)**, representing each month that the medical spa operated unregistered with the State of Tennessee, as outlined in the Stipulations of Fact, *supra*. Any and all civil penalties shall be paid within thirty (30) days of the effective date of this Consent Order.
10. Respondent shall pay, pursuant to TENN. CODE ANN. § 63-6-214(k) and Rule 0880-2-.12(1)(j) of the *Official Compilation Rules and Regulations of the State of Tennessee*, the actual and reasonable costs of prosecuting this case to the extent allowed by law, including all costs assessed by the Office of Investigations, Secretary of State, Administrative Procedures Division as well as the Office of General Counsel. These costs will be established by an Assessment of Costs prepared and filed by counsel for the Department. The maximum amount for the assessment of costs shall be two thousand dollars (\$2,000.00). Any and all costs shall be paid in full within thirty (30) days after the issuance of the Assessment of Costs.
11. Any and all civil penalty and cost payments must be paid by **certified check, cashier's check, or money order** payable to the **State of Tennessee**, which shall be mailed or delivered to: **Disciplinary Coordinator, The Division of Health Related Boards, Tennessee Department of Health, 665 Mainstream Drive, 2nd Floor, Nashville, Tennessee 37243**. A notation shall be placed on said check that it is payable for the civil penalty and or cost assessment of **Donald E. Vollmer, M.D., COMPLAINT NO. 2023030171**.

12. Respondent understands that this is a formal disciplinary action and will be reported to the National Practitioner Data Bank (N.P.D.B) and/or similar agency.
13. Failure to comply with any of the terms of this Order shall be considered a Board Order violation, which may result in further discipline against Respondent pursuant to T.C.A. 63-6-214(b)(2).

This **CONSENT ORDER** was approved by a majority of a quorum of the Tennessee Board of Medical Examiners at a public meeting of the Board and signed this 31st day of July, 2024.



Chairperson
Tennessee Board of Medical Examiners

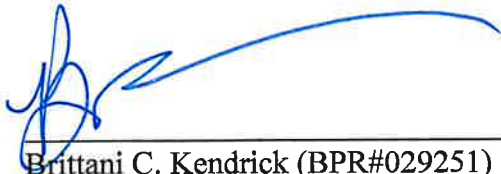
APPROVED FOR ENTRY:



Donald E. Vollmer, M.D.
Respondent

6/10/24

DATE



Brittani C. Kendrick (BPR#029251)
Senior Associate General Counsel
Office of General Counsel
Tennessee Department of Health
665 Mainstream Drive, 2nd Floor
Nashville, Tennessee 37243
(615) 532-7692

6/12/2024

DATE

CERTIFICATE OF SERVICE

The undersigned hereby certifies that a true and correct copy of this document has been served upon Respondent,

Donald E. Vollmer, II, M.D.
6818 Pulltight Hill Road
College Grove, Tennessee 37046
donvollmer2@gmail.com,

by delivering same in the United States Mail, Certified Number 9589 0710 5270 0998 1083 34
_____, return receipt requested, and United States First Class Mail, with sufficient postage thereon to reach its destination and via e-mail to donvollmer2@gmail.com.

This 31st day of July, 2024.



Brittani C. Kendrick
Senior Associate General Counsel