



Arizona Medical Board

9545 East Doubletree Ranch Road • Scottsdale, Arizona 85258

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FINAL MINUTES FOR REGULAR SESSION MEETING Held on Wednesday, February 9, 2011 9535 E. Doubletree Ranch Road • Scottsdale, Arizona

Board Members

Douglas D. Lee, M.D., Chair
Paul M. Petelin Sr., M.D., Vice Chair
Amy J. Schneider, M.D., F.A.C.O.G., Secretary
Patricia R. J. Griffen, Member-at-Large
Andrea E. Ibáñez
Jody L. Jenkins, M.D.
Gordi S. Khera, M.D.
Ram R. Krishna, M.D.
Germaine Proulx
William J. Thrift, M.D.

CALL TO ORDER

Dr. Lee called the meeting to order at 8:00 a.m.

ROLL CALL

The following Board members were present: Ms. Griffen, Ms. Ibanez, Dr. Jenkins, Dr. Khera, Dr. Krishna, Dr. Lee, Dr. Petelin, Ms. Proulx, Dr. Schneider, and Dr. Thrift.

CALL TO THE PUBLIC

Individuals who spoke during the call to the public appear beneath the matters referenced.

EXECUTIVE DIRECTOR'S REPORT

Lisa Wynn, Executive Director, informed the Board that the Staff Investigational Review Committee (SIRC) reports have been modified, and that the Board will notice the change as early as the April 2011 meeting. She stated that the reports will now include the licensee's prior disciplinary history at the end of the report with a notation for the Board stating that the information is available for the Board's consideration during the sanctions portion of their discussion. Ms. Wynn reported that the Executive Team is currently working on additional operational investigational processes as well. Ms. Wynn informed the Board that the National Practitioner's Databank recently concluded their four year audit of the Board. Ms. Wynn thanked Amanda Schwabe, Board Coordinator, for her diligence and extraordinary attention to detail in handling the reporting responsibilities. Ms. Wynn thanked Dr. Lee for the opportunity for her to attend a one-week executive training course at Harvard College in Boston at the end of March 2011. She stated that the training session will provide her with an opportunity to work with other Executive Directors to discuss performance measures.

Ms. Wynn provided the Board with a legislative update. She stated that House Bill 2520 refers to last year's House Bill 2545 that becomes effective in 2012. The Bill caused some confusion regarding the removal of non-disciplinary actions from a physician's web profile. Ms. Wynn stated that there was conflicting language included in the Bill when it was passed, and she stated that the current Bill clarifies that non-disciplinary Practice Limitations will remain on a physician's profile for notification to the public, and that the Board's meeting minutes are public as well. Senate Bill 1032 regards federal mammography guidelines that were published back in 1996, that provided the Board with the ability to approve a physician to read mammograms. Ms. Wynn stated that this current Bill removes the Board's authority to approve anything short of the federal guidelines. Senate Bill 1176 is the Board's Omnibus Bill. Ms. Wynn stated that the primary component of this Bill is the statutory authority to post felony convictions and malpractice information on a physician's profile. She stated that the Board investigates complaints stemming from felony convictions or malpractice lawsuits, but that the matters will only appear on the website if they result in Board actions. Ms. Wynn informed the Board that the Omnibus Bill is supported by the Arizona Medical Association, and that the Pima County Medical Society has not voiced any concerns. Senate Bill 1458 discusses out of state licensure and creating a form of equivalency. Ms. Wynn stated that the initial intent of this Bill was to apply to military spouses. She stated that the Bill has been and continues to be amended to diminish any loopholes.

CHAIR'S REPORT

Dr. Lee reported that he was recently contacted by a licensee who complimented the Board's licensing renewals process by stating that in his thirty-five years as a physician, he has never had such a prompt and courteous type of response to his licensure.

Dr. Lee recognized Marie Slaughter, Renewals and Information Officer, Licensing Department, who is scheduled to retire on March 31, 2011. Dr. Lee pointed out that Ms. Slaughter has been with the Board for over twenty years. He presented her with a plaque in recognition of her hard work and dedication, and he stated that she will surely be missed by the Board and its staff.

Dr. Lee informed the Board that the Federation of State Medical Boards will be meeting in Seattle in April 2011. He instructed Board members to inform Ms. Wynn if they are interested in attending the meeting. Dr. Petelin provided the Board with an update regarding the Board's Medical Marijuana Subcommittee. He stated that there is a lot of information to cover, and that a few suggestions were made including the removal of a debilitating medical condition that has been added to rule, considering whether there is a mechanism for removing a debilitating medical condition that is currently written in rule, and the inclusion of processes for tincture, liquids, vaporizing, and dosing. Dr. Petelin reported that the Subcommittee will meet again on February 16, 2011.

ELECTION OF BOARD OFFICERS

Ms. Wynn announced the results of the election of Board Officers, which are as follows: Dr. Lee, Chair; Dr. Petelin, Vice Chair; Dr. Schneider, Secretary; and Ms. Griffen, Member-at-Large.

AUDIT UPDATE

Scott Forrer, M.D., spoke during the call to the public. Dr. Forrer expressed concern that there has been no involvement by physicians licensed by the Board during the audit process. He requested that the Board provide an open forum for its licensees to discuss their experiences with the Board, and provide their opinions on where there may be room for improvement in the Board's processes.

MOTION: Dr. Krishna moved to enter into Executive Session to receive the Audit Update.

SECONDED: Ms. Griffen

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

The Board entered into Executive Session at 9:00 a.m.

The Board returned to Open Session at 9:52 a.m.

No deliberations or discussions were made during Executive Session.

Dr. Lee thanked Board staff for their hard work and continued participation in the audit process.

APPROVAL OF MINUTES

MOTION: Dr. Schneider moved to approve the December 8, 2010 Regular Session Meeting Minutes, including Executive Session; and the January 19, 2011 Summary Action Teleconference Meeting Minutes, including Executive Session.

SECONDED: Dr. Petelin

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

ADVISORY LETTERS

MOTION: Dr. Schneider moved to issue an Advisory Letter in item numbers 1-6, 8-12, 14-19, 22-25, 27 and 28.

SECONDED: Dr. Khera

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
1.	MD-10-0747A	ELEANOR A. CLARK, M.D.	16389	Issue an Advisory Letter for performing endometrial ablation without informed consent and for inadequate medical records. There is insufficient evidence to support disciplinary action.
2.	MD-10-0619A	FARZIN DAVACHI, M.D.	42364	Issue an Advisory Letter for failing to disclose the pending Washington Board investigation on his application for licensure. There is insufficient evidence to support disciplinary action.
3.	MD-10-0672A	JAMES D. GORDON, M.D.	28386	Issue an Advisory Letter for failure to repeat a fiberoptic examination on a patient with worsening throat symptoms. There is insufficient evidence to support disciplinary action.
4.	MD-10-0841A	JOSE M. PISCOYA, M.D.	25569	Issue an Advisory Letter for failure to see and evaluate a methamphetamine intoxicated patient and refer the patient to the hospital. There is insufficient evidence to support disciplinary action.
5.	MD-10-0570A	J. DUDLEY PYEATT, M.D.	28137	Issue an Advisory Letter for failing to see a postoperative surgical patient prior to discharge on the day of discharge. There is insufficient evidence to support disciplinary action.
6.	MD-10-1105A	THOMAS H. SCHIMKE, M.D.	18080	Issue an Advisory Letter for failure to retain patient medical records pursuant to statute. There is insufficient evidence to support disciplinary action.
7.	MD-10-0867A	LAURO AMEZCUA-PATINO, M.D.	17900	Issue an Advisory Letter for failure to notify the Board that his patient, a licensed physician, was not safe to practice medicine; for failure to obtain previous medical records; and for inadequate medical records. This matter

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
				does not rise to the level of discipline.

Dr. Jenkins questioned whether this case involved a physician that was truly impaired, or a physician that was sleep deprived. Kathleen Coffey, M.D., Medical Consultant, stated that Dr. Amezcua-Patino documented physician impairment in his progress notes and that the physician herself admitted that she was unable to function, which was well before the time that Dr. Amezcua-Patino reported the physician to the Board.

MOTION: Dr. Jenkins moved to issue an Advisory Letter for failure to notify the Board that his patient, a licensed physician, was not safe to practice medicine; for failure to obtain previous medical records; and for inadequate medical records. This matter does not rise to the level of discipline.

SECONDED: Ms. Griffen

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
8.	MD-10-0868A	JAYAHARI MADDUR, M.D.	14396	Issue an Advisory Letter for reusing disposable endoscope cleaning brushes and for inadequate oversight of technicians. The licensee has demonstrated substantial compliance through remediation that mitigates the need for disciplinary action.

Dr. Jenkins was recused from this case.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
9.	MD-10-1242A	MEGHAN R. O'DONNELL, M.D.	40649	Issue an Advisory Letter for prescribing controlled substances to a family member, and for failing to maintain adequate medical records. This matter does not rise to the level of discipline.
10.	MD-10-1057A	NEIL TRACHTENBERG, M.D.	10078	Issue an Advisory Letter for failure to properly evaluate a patient with menorrhagia and for inadequate medical records. This matter does not rise to the level of discipline.
11.	MD-10-0939A	SAIME AKSOY, M.D.	32256	Issue an Advisory Letter for failure to adequately analyze an enlarged testis histologically. This matter does not rise to the level of discipline.
12.	MD-10-0939B	JOHN C. LIN, M.D.	31442	Issue an Advisory Letter for failure to consider testicular tumor as a cause of the patient's scrotal swelling and for inadequate follow up of tumor markers. This matter does not rise to the level of discipline.
13.	MD-10-0468A	DAVID A. LIN, M.D.	34163	Issue an Advisory Letter for failure to supervise proper placement of an Angioseal device, for failure to determine whether improved blood pressure was transient, and for failure to obtain a vascular surgical consultation on a patient who exsanguinated due to bleeding following cardiac catheterization. There is insufficient evidence to support discipline.

Dr. Khera was recused from this case. Dr. Thrift noted the medical consultant's concerns in this case, and recognized that Dr. Lin indicated that he asked for orders to be done STAT during the critical care of the patient, but they were not done timely. Dr. Thrift questioned whether this matter should be reviewed from a nursing point of view. Bhupendra Bhatheja, M.D., Medical Consultant, opined that when operating on a patient and opening an artery, it is the surgeon's responsibility to see that the artery is closed. Dr. Bhatheja informed the Board that additional concerns raised in this case include improper management of postoperative bleeding, failure to determine whether the patient's blood pressure was transient prior to leaving the hospital, and failure to obtain a vascular surgical consultation.

MOTION: Dr. Thrift moved to issue an Advisory Letter for failure to supervise proper placement of an Angioseal device, for failure to determine whether improved blood pressure was transient, and for failure to obtain a vascular surgical consultation on a patient who exsanguinated due to bleeding following cardiac catheterization. There is insufficient evidence to support discipline.

SECONDED: Ms. Griffen

Dr. Lee spoke in favor of the motion and commented that the issues in this case were bothersome.

VOTE: 7-yay, 0-nay, 0-abstain, 1-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
14.	MD-10-1228A	ROMILA MUSHTAQ, M.D.	42842	Issue an Advisory Letter for action taken by the state of Wisconsin. This matter does not rise to the level of discipline.
15.	MD-10-0700A	DAVID A. RUBEN, M.D.	11382	Issue an Advisory Letter for inappropriate early refills of opioid medications and for inadequate medical records. This matter does not rise to the level of discipline.

TK and Dr. Ruben spoke during the call to the public.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
16.	MD-10-1147A	ROBERT A. WHITE, M.D.	14834	Issue an Advisory Letter for failure to conduct a perirectal exam on a patient complaining of rectal abscess and soiling. This matter does not rise to the level of discipline.
17.	MD-10-1067A	KHALED O. HADELI, M.D.	26115	Issue an Advisory Letter for failure to inform a patient of a test result and initiate treatment in a timely manner. This matter does not rise to the level of discipline.
18.	MD-10-1302A	KATHLEEN M. NORMAN, M.D.	22269	Issue an Advisory Letter for inadequate medical records. This matter does not rise to the level of discipline.
19.	MD-10-0964A	VISHAL D. SINGH, M.D.	28331	Issue an Advisory Letter for inadequate control of the patient's blood glucose and for inadequate documentation. This matter does not rise to the level of discipline.
20.	MD-10-1123A	COREY S. YILMAZ, M.D.	37036	Dismiss.

Dr. Thrift noted that this case involved an allegation of inappropriate prescribing. Dr. Thrift observed that Dr. Yilmaz prescribed double doses for the patients in order to fill a two month supply of medication. Dr. Thrift stated that he found Dr. Yilmaz's care to be appropriate in all other aspects in his treatment of the patients. Dr. Coffer informed the Board that the medical consultant found that the prescriptions written were not supported by the documentation in the patients' charts. Dr. Thrift spoke in favor of dismissing the case.

MOTION: Dr. Thrift moved for dismissal.

SECONDED: Dr. Khera

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
21.	MD-09-1543A	VANNA ZANAGNOLO, M.D.	41181	Return for further investigation.

Ingrid Haas, M.D., Medical Consultant, summarized that this matter stemmed from an investigation regarding another physician in which the medical consultant recommended that Dr. Zanagnolo's care of the patient be reviewed. Board staff attempted on numerous occasions to notify the physician of the investigation and obtain a response to the allegations; however, Dr. Zanagnolo moved out of the country and had not updated the Board with a current address. Dr. Zanagnolo submitted a response to the initial allegations upon receiving the proposed consent agreement for surrender of license. The medical consultant was satisfied with Dr. Zanagnolo's narrative response to his concerns, and ultimately found that she met the standard of care in this case. Therefore, Board staff found that this matter does not rise to the level of discipline and recommended issuing an Advisory Letter for the physician's failure to update the Board with a current address.

Dr. Petelin expressed concern with the care provided to the patient in this case. He observed that the patient received Toradol upon presentation when she was thrombocytopenic; however, Dr. Petelin noted that Toradol is contraindicated with any element of thrombocytopenia. Dr. Petelin found that the patient's hemoglobin and hematocrit in the recovery room were not compatible with the reported blood loss during the procedure. Additionally, Dr. Petelin commented that the patient's persistent hypotension in the recovery room made her discharge from the PACU inappropriate. Dr. Petelin believed that there was an inappropriate use of Hespan as a volume expander, which had been ordered by the anesthesiologist. Dr. Petelin spoke in favor of returning the case for further investigation as he found that the complication of the procedure could have been treated more promptly and appropriately.

MOTION: Dr. Petelin moved to return the case for further investigation.

SECONDED: Dr. Jenkins

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
22.	MD-10-1002A	THOMAS E. RODCAY, M.D.	10026	Issue an Advisory Letter for inadequate supervision of a certified ophthalmic technician, and for inadequate medical records. This matter does not rise to the level of discipline.
23.	MD-10-1002B	JEFFREY S. FELTER, M.D.	19572	Issue an Advisory Letter for inadequate supervision of a certified ophthalmic technician. This matter does not rise to the level of discipline.
24.	MD-10-1002C	RICARDO A. AVILES, M.D.	32367	Issue an Advisory Letter for inadequate supervision of a certified ophthalmic technician. This matter does not rise to the level of discipline.

Dr. Jenkins was recused from Advisory Letter item numbers 22, 23 and 24.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
25.	MD-10-1076A	LYNN POLONSKI, M.D.	26417	Issue an Advisory Letter for performing wrong-site surgery. This matter does not rise to the level of discipline.

Attorney John Phelps spoke during the call to the public on behalf of Dr. Polonski.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
26.	MD-10-0296A	LARRY R. SOBEL, M.D.	12792	Dismiss.

Attorney Christine Cassetta spoke during the call to the public on behalf of Dr. Sobel. Dr. Coffey summarized that Dr. Sobel interpreted a chest x-ray and diagnosed the patient with pneumonia. She stated that the interpreting radiologist did not identify pneumonia on the chest x-ray. Dr. Coffey stated that the patient's symptoms persisted after being placed on antibiotics, and was subsequently referred to the emergency room by Dr. Sobel. The patient was ultimately found to be in acute renal failure and later diagnosed with Wegener's Granulomatosis. Dr. Khara noted that this was a very difficult case with an unfortunate outcome for the patient. Dr. Khara found that Dr. Sobel showed concern for the patient and did the best that he could based on what was clinically present at the time. Dr. Khara stated that although Dr. Sobel may not have provided the patient with the best care, he met the minimum standard of care in this case. Dr. Khara spoke in favor of dismissing the case.

MOTION: Dr. Khara moved for dismissal.
SECONDED: Dr. Petelin

Dr. Petelin spoke in favor of the motion. Dr. Thrift expressed concern regarding the fact that Dr. Sobel sent the patient for a CT angiogram without knowing the patient's creatinine, which he stated may have exacerbated the renal failure. Dr. Khara found that, based on the clinical picture, Dr. Sobel was acting in the best interest of the patient.

VOTE: 7-yay, 1-nay, 0-abstain, 0-recuse, 2-absent.
MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
27.	MD-10-1023A	DAVID J. LANG, M.D.	23604	Issue an Advisory Letter for failure to refer a patient with ageusia to an otolaryngologist in a timely manner. This matter does not rise to the level of discipline.
28.	MD-10-1047A	BRIAN K. ZEBROWSKI, M.D.	35955	Issue an Advisory Letter for dividing or transecting pancreatic tissue during an adrenalectomy. This matter does not rise to the level of discipline.

ADVISORY LETTERS WITH NON-DISCIPLINARY CONTINUING MEDICAL EDUCATION (CME)

MOTION: Dr. Jenkins moved to issue an Advisory Letter with Non-Disciplinary CME in item numbers 1-3.

SECONDED: Dr. Petelin

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.
MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
1.	MD-10-0557A	RONALD K. AIKAWA, M.D.	13929	Issue an Advisory Letter for failure to consider cord compression in a patient with back pain and inability to urinate. Non-disciplinary CME Order for failure to document a complete neurologic exam. Within six months complete the PACE medical recordkeeping course. The course hours shall be in addition to the CME hours required for the biennial renewal of licensure. There is insufficient evidence to support disciplinary action.
2.	MD-10-0635A	CARL F. DIENER, M.D.	5462	Issue an Advisory Letter for inappropriate management of dehydration in a patient with diarrhea, and for inappropriate empirical use of ampicillin in a patient with Klebsiella oxytoca pyelonephritis. Non-disciplinary CME Order for inadequate medical records. Within six months complete the PACE medical recordkeeping course. The course hours shall be in addition to the CME hours required for the biennial renewal of licensure. This matter does not rise to the level of discipline.
3.	MD-10-1280A	MARK A. WELLEK, M.D.	6416	Issue an Advisory Letter for prescribing Klonopin in increasing doses without adequate monitoring, and for failing to refer an out of state patient to a local psychiatrist. Order for non-disciplinary CME for inadequate medical records. Within six months, complete the PACE medical recordkeeping course. The course hours shall be in addition to the CME hours required for the biennial renewal of licensure. This matter does not rise to the level of discipline.

REVIEW OF EXECUTIVE DIRECTOR DISMISSALS

MOTION: Dr. Schneider moved to uphold the dismissal in item numbers 1-6, 8, 10, 12, and 13.

SECONDED: Dr. Petelin

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
1.	MD-10-1166A	LISA L. FULLER, M.D.	33576	Uphold Dismissal.
2.	MD-10-0954A	NAKISA MOHSEN SHEINI, M.D.	37567	Uphold Dismissal.
3.	MD-10-0298D	KRISHNASWAMY CHANDRASEKARAN, M.D.	36138	Uphold Dismissal.
4.	MD-10-0298F	ALANNA M. REBECCA, M.D.	32883	Uphold Dismissal.

SB spoke during the call to the public on behalf of item numbers 3 and 4.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
5.	MD-10-1054B	GEOFFREY H. COOK, M.D.	17774	Uphold Dismissal.
6.	MD-10-0811A	DAVID L. MCGAREY, M.D.	25297	Uphold Dismissal.

Dr. Lee was recused from this case. Attorney John Phelps spoke during the call to the public on behalf of the physician.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
7.	MD-10-0799A	JUDITH B. PENDLETON, M.D.	25070	Uphold Dismissal.

TQ spoke during the call to the public. Dr. Petelin questioned why this case was considered by SIRC. Ms. Wynn stated that there are times where the medical consultant finds no deviation from the standard of care, but the tone of the clinical review may cause concern to have the case looked at by SIRC. William Wolf, M.D., Chief Medical Consultant, stated that the medical consultant suggested that there may have been a minor deviation from the standard of care in this case. Dr. Wolf stated that in such a situation as this, the case is referred to SIRC for consideration of whether the deviation is significantly minor, at which point SIRC will then recommend dismissal. Dr. Coffey stated that the medical consultant found that it took Dr. Pendleton some time to reach a diagnosis of a milk allergy in this case and that there were circumstances which explained the symptomatology at the time.

MOTION: Dr. Petelin moved to uphold the dismissal.

SECONDED: Ms. Griffen

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
8.	MD-10-0036A	STEPHEN F. LEX, M.D.	17751	Uphold Dismissal.

Dr. Lee was recused from this case. VM spoke during the call to the public on behalf of the complainant.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
9.	MD-10-1028A	BRADLEY R. NICOL, M.D.	30127	Uphold Dismissal.

Dr. Lee was recused from this case. CF and AF spoke during the call to the public. Dr. Petelin spoke against dismissing the case. Dr. Petelin expressed concern for the fact that the patient was in severe distress and may have sustained permanent neurological damage to his arm had he not been seen and treated. Dr. Coffey stated that there was nothing in the emergency room notation, including physical exam and CT findings, suggesting that this was an emergent operative situation.

MOTION: Dr. Khera moved to uphold the dismissal.

SECONDED: Dr. Thrift

VOTE: 6-yay, 1-nay, 0-abstain, 1-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
10.	MD-10-1446A	CLAUDE C. FOSDICK, M.D.	13210	Uphold Dismissal.
11.	MD-10-1063B	RICHARD S. PLANK, M.D.	34928	Uphold Dismissal.

SM spoke during the call to the public. Dr. Petelin pulled this case for discussion and pointed out that in the past, the Board has issued non-disciplinary Advisory Letters in similar cases to track the occurrence. Dr. Bhatheja pointed out that the medical consultant found that Dr. Plank correctly interpreted the patient's x-ray. Dr. Petelin referred Board members to the medical consultant's report, in which the medical consultant indicated that he could not concretely comment on the case as he is not a surgeon. Dr. Petelin noted that further into the report, the medical consultant made a surgical judgment by stated that the patient's cyst did not warrant surgical intervention. Dr. Petelin stated that he was bothered by this statement and spoke against dismissing the case.

MOTION: Dr. Khera moved to uphold the dismissal.

SECONDED: Ms. Proulx

VOTE: 7-yay, 1-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
12.	MD-10-1336A	KENNETH B. FLEISCH, M.D.	28922	Uphold Dismissal.

SM spoke during the call to the public.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
13.	MD-10-1186A	ALBERT E. CARLOTTI, M.D.	29728	Uphold Dismissal.

SP and Dr. Carlotti spoke during the call to the public.

OTHER BUSINESS

MOTION: Dr. Jenkins moved to accept the proposed Consent Agreement in item numbers 1-5.

SECONDED: Ms. Proulx

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Griffen, Dr. Jenkins, Dr. Khera, Dr. Lee, Dr. Petelin, Ms. Proulx, Dr. Schneider, and Dr. Thrift. The following Board members were absent: Ms. Ibanez and Dr. Krishna.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
1.	MD-09-1170A	STEVEN L. ARMUS, M.D.	36276	Accept the proposed Consent Agreement for a Letter of Reprimand and Practice Restriction. Dr. Armus shall notify the Board's Executive Director in writing within 30 days prior to commencing practice in Arizona. Upon notification, Dr. Armus shall agree to execute and waiver for the Board to obtain any records necessary to determine that he is safe to practice. The Board may also require that he undergo an assessment by a rehabilitative, retraining or assessment program, at his expense. After five years, Dr. Armus may request lifting of the Practice Restriction.
2.	MD-09-1532A	MARTIN S. CHATTMAN, M.D.	7618	Accept the proposed Consent Agreement for One Year Probation. Within thirty days, Dr. Chattman shall enter into a contract with a Board approved monitoring company to provide all monitoring services, at his expense. The Monitor shall perform biannual chart reviews.
3.	MD-10-1037A	RICHARD SKIBICKI, M.D.	40850	Accept the proposed Consent Agreement for a Letter of Reprimand and Five Year Probation to participate in the Board's Physician Health Program. The Probation shall include psychiatric monitoring. After twelve months, Dr. Skibicki may request the PHP monitor to terminate the psychiatric monitoring requirement. Dr. Skibicki's PHP participation is retroactive to August 11, 2010.
4.	MD-10-0577A	CRAIG R. WOLFF, M.D.	40317	Accept the proposed Consent Agreement for a Letter of Reprimand.
5.	MD-10-0824A MD-10-1131A	STEPHINE KRAMER, M.D.	33219	Accept the proposed Consent Agreement for a Letter of Reprimand.
6.	MD-10-1036A	GABRIEL U. OGBONNAYA, M.D.	32142	Deny the appeal of the Executive Director's referral to Formal Hearing.

Dr. Lee noted that the Executive Director referred this matter to Formal Hearing and that Dr. Ogbonnaya appealed the referral. Jennifer Boucek, Assistant Attorney General, informed the Board that Dr. Ogbonnaya's criminal matter is currently pending, and stated that the Board will proceed with the case on a parallel track. Dr. Khera questioned whether Dr. Ogbonnaya had the option of presenting for a Formal Interview. Ms. Boucek stated that the Board cannot revoke a physician's license following a Formal Interview, but that the Board has the ability to refer the case to Formal Hearing if during the Interview, the Board finds that license revocation is appropriate. Ms. Boucek informed the Board that a physician's license cannot be revoked without first conducting a Formal Hearing.

MOTION: Dr. Petelin moved to deny the appeal of the Executive Director's referral to Formal Hearing.

SECONDED: Ms. Griffen

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
7.	MD-10-0900A	TERRY L. SIMPSON, M.D.	21784	Return for further investigation.

Dr. Wolf summarized that the medical consultant did not find a deviation from the standard of care in this case, and that Board staff has recommended dismissal. Dr. Petelin expressed concern with Dr. Simpson's failure to acknowledge that there was a gastric leak that occurred during this patient's surgery. Dr. Petelin noted that a gastric leak was identified on the patient's autopsy report. Dr. Petelin noted that Dr. Simpson was previously issued an Advisory Letter for failure to acknowledge a technical error in a prior case. Jennifer Boucek, Assistant Attorney General, reminded Dr. Petelin that Board members should not assume that the physician had engaged in unprofessional conduct in this case simply because he had previously received an Advisory Letter for a technical error. Dr. Petelin spoke against dismissal, and recommended issuing Dr. Simpson an Advisory Letter for failure to identify the complication of lap banding., Ms. Boucek informed the Board that the matter would need to return for further investigation to obtain a medical consultant review to determine whether there was a deviation from the standard of care. Ms. Boucek explained that the case had not been considered by SIRC as the original MC did not find a "q" violation.

MOTION: Dr. Petelin moved to return the case for further investigation.

SECONDED: Dr. Khera

Dr. Petelin expressed concern with Dr. Simpson's failure to acknowledge that technical errors and complications happen to all surgeons. Dr. Lee stated that he did not see any flaws in the medical consultant's analysis of this case.

VOTE: 6-yay, 2-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
8.	MD-10-0739A	RAYMOND F. SHAMOS, M.D.	13612	Dismiss.

MOTION: Dr. Petelin moved for dismissal.

SECONDED: Ms. Griffen

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
9.	MD-10-1161A	CHRISTOPHER J. CHURCH, M.D.	28790	Refer the case to Formal Hearing with the recommendation to revoke the physician's license.

Attorney Dawn Farrison spoke during the call to the public on behalf of Dr. Church. Dr. Coffey informed the Board that Dr. Church underwent a psychosexual evaluation due to allegations of inappropriate touching of an anesthetized female patient's breast. During the evaluation, Dr. Church underwent a polygraph test, in which he was found to be deceptive. A second polygraph test determined that Dr. Church continued to demonstrate signs of deception. Dr. Church claimed that he was examining the patient's breast after noting a scar on; however, the Board's medical consultant found that the exam of the breast was not an indicated procedure in Dr. Church's care and treatment of the patient. Dr. Coffey reported that Dr. Church's evaluators have not made a final determination, but have recommended that he successfully complete a polygraph test prior to returning to practicing and that he undergo a boundaries course. Dr. Khera questioned whether Dr. Church was entitled to a Formal Interview before the Board. Ms. Boucek informed the Board that these matters must be referred to Formal Hearing when SIRC recommends revocation of the physician's license. Dr. Khera recommended that Dr. Church appear before the Board to hear his side of the case. Dr. Lee stated that he found the facts of the case to be very egregious, and stated that he agreed with SIRC's recommendation to refer the case to Formal Hearing for revocation.

MOTION: Dr. Lee moved to refer the case to Formal Hearing with the recommendation to revoke the physician's license.

SECONDED: Dr. Petelin

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
10.	MD-10-0144A	WILLIAM A. CALDERWOOD, M.D.	11658	Approval of Draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and One Year Probation to complete the PACE medical recordkeeping course. The course hours shall be in addition to the CME hours required for the biennial renewal of medical licensure. The Probation shall terminate upon successful completion of the course work.
11.	MD-10-0673A	LYNDEN L. BLUTH, M.D.	10921	Approval of Draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand.

MOTION: Dr. Schneider moved to accept the draft Findings of Fact, Conclusions of Law and Order in Other Business item numbers 10 and 11.

SECONDED: Ms. Griffen

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
12.	MD-07-0892A	DAVID I. PLUMB, M.D.	37523	Grant the request for termination of the Board Order.

Kathleen Muller, Physician Monitoring Manager, informed the Board that on August 8, 2008, Dr. Plumb entered into a Practice Limitation that prohibited him from entering an independent medical practice. She stated that Dr. Plumb has successfully completed all terms of the Practice Limitation and has requested termination of the Order. Ms. Muller reported that the Board's Staff Investigational Review Committee (SIRC) considered Dr. Plumb's request and recommended terminating the Order.

MOTION: Dr. Khera moved to grant the request for termination of the Board Order.

SECONDED: Ms. Proulx

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

LEGAL MATTERS

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
1.	MD-09-1568A	JUNE A. GOLD, M.D.	N/A	Deny the motion for rehearing or review.

Dr. Gold was not present during the Board's consideration of this case. Anne Froedge, Assistant Attorney General, stated that Dr. Gold's motion for rehearing referenced the statutory interpretation of an oxford comma used in the statute; however, she did not reference a particular statute while multiple statutes were cited in her case. Ms. Froedge stated that Dr. Gold's request for a rehearing does not meet the Board's criteria for granting a rehearing and; therefore, recommended that the request be denied.

MOTION: Dr. Krishna moved to deny the motion for rehearing or review.

SECONDED: Ms. Proulx

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Griffen, Ms. Ibanez, Dr. Jenkins, Dr. Khera, Dr. Krishna, Dr. Lee, Dr. Petelin, Ms. Proulx, Dr. Schneider, and Dr. Thrift.

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
2.	MD-09-1516A	MARK J. TRENTALANGE, M.D.	29601	Rescind the referred to Formal Hearing and accept the proposed Consent Agreement for a Letter of Reprimand.

Dr. Trentalange was not present during the Board's consideration of this case. Ms. Froedge informed the Board that notification was received regarding a medical malpractice case involving Dr. Trentalange's anesthesia care to a surgical patient back in 2007. Ms. Froedge stated that the matter was investigated, and later scheduled for a Formal Hearing. She explained that Dr. Trentalange subsequently signed a Consent Agreement for a Letter of Reprimand prior to the Hearing. Ms. Froedge recommended that the Board rescind the case from Formal Hearing and accept the proposed Consent Agreement.

MOTION: Dr. Petelin moved to rescind the referral to Formal Hearing and accept the proposed Consent Agreement for a Letter of Reprimand.

SECONDED: Dr. Krishna

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Griffen, Ms. Ibanez, Dr. Jenkins, Dr. Khera, Dr. Krishna, Dr. Lee, Dr. Petelin, Ms. Proulx, Dr. Schneider, and Dr. Thrift.

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

FORMAL HEARING MATTERS – CONSIDERATION OF ADMINISTRATIVE LAW JUDGE (ALJ) RECOMMENDED DECISION

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
1.	MD-10-0768A MD-10-0904A	SAM HOCHANE, M.D.	32092	Adopt the ALJ's recommended Findings of Fact, Conclusions of Law with modifications set forth by legal counsel as Findings of Fact #35 is not supported by the Formal Hearing transcript and Conclusions of Law #2 include a typographical error; and adopt the ALJ's recommended Order for Revocation, and assessment of Formal Hearing costs to the physician, to be paid within sixty days of invoice.

Dr. Hochane was present without legal counsel. Board members indicated that they received and reviewed the administrative record of the Formal Hearing in this matter. Ms. Froedge summarized that Dr. Hochane was recently convicted of two felony counts of sexual abuse of two patients. Ms. Froedge stated that the primary responsibility of the Board is to protect the public. Ms. Froedge reported that during an investigational interview with Board staff in 2007, Dr. Hochane was not truthful regarding his conduct with the patient in question and the case was later dismissed. Ms. Froedge explained that Dr. Hochane's felony conviction involved that same patient. In 2009, Dr. Hochane was placed on Probation by the Board with regard to the allegations surrounding the second patient, and the terms of the Probation were based on recommendations from the treatment facility that evaluated him. Ms. Froedge stated that the probationary terms were put in place so that Dr. Hochane could continue practicing medicine safely; however, she stated that he was non-compliant. Ms. Froedge recommended that the Board adopt the ALJ's recommended decision, with modifications to Findings of Fact #35 to delete sentence 5 as it is not supported by the Formal Hearing transcript, and to modify Conclusions of Law #2 which incorrectly referenced A.R.S. §341-1092.07(G)(2), in which the 3 should be removed for it to correctly reference A.R.S. §41-1092.07(G)(2).

Dr. Hochane stated that he pled guilty to the felony convictions at the recommendation of his attorney. He stated that when he entered into the probationary Order with the Board, he intended to be in full compliance. However, he stated that due to financial reasons, he was not able to completely comply with the Order. He requested that the Board give him a second chance to show that he has the ability to abide by the terms of his Order. He asked that the Board place him on a reasonable restriction that will allow him to continue practicing medicine productively. Ms. Froedge reiterated that it is the Board's primary responsibility to protect the public. She stated that Dr. Hochane failed to comply with his Board Order for Probation, and has been convicted of two felonies which were perpetrated on patients. She stated that for the protection of the public, it is recommended that the Board revoke Dr. Hochane's medical license.

Dr. Krishna spoke in favor of adopting the ALJ's recommended Findings of Fact and Conclusions of Law with modifications set forth by legal counsel. Christopher Munns, Assistant Attorney General, Solicitor General's Office, instructed the Board to include in its motion the justification for the modification to the Findings of Fact and Conclusions of Law. Ms. Froedge clarified that a statement was included in Finding of Fact #35 that was not supported by the transcript of the proceedings and should therefore be deleted. She further clarified that Conclusions of Law #2 included a typographical error in referencing A.R.S. §341-1092.07(G)(2), in which the 3 should be removed for it to correctly reference A.R.S. §41-1092.07(G)(2).

MOTION: Dr. Krishna moved to adopt the ALJ's recommended Findings of Fact and Conclusions of Law with modifications set forth by legal counsel as sentence 5 in Findings of Fact #35 is not supported by the Formal Hearing transcript, and Conclusions of Law #2 contained a typographical error.

SECONDED: Dr. Petelin

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

MOTION: Dr. Schneider moved to adopt the ALJ's recommended Order for Revocation, and assessment of Formal Hearing costs to the physician, to be paid within sixty days of invoice.

SECONDED: Dr. Krishna

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Griffen, Ms. Ibanez, Dr. Jenkins, Dr. Khera, Dr. Krishna, Dr. Lee, Dr. Petelin, Ms. Proulx, Dr. Schneider, and Dr. Thrift.

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

FORMAL INTERVIEWS

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
1.	MD-10-0803A	OLUDARE ONISILE, M.D.	23710	Issue an Advisory Letter for failure to properly document, screen for abuse, screen for psychiatric decompression and for inadequate supervision of a Physician Assistant. There is insufficient evidence to support discipline. Issue a Non-Disciplinary CME Order for inadequate medical records and inappropriate prescribing. Within six months, complete the PACE prescribing course and the PACE medical recordkeeping course. The course hours shall be in addition to the CME hours required for the biennial renewal of licensure.

Dr. Onisile was present with legal counsel, Mr. Cody Hall. Dr. Coffey summarized that Dr. Onisile failed to properly document, screen for abuse, screen for psychiatric decompensation, and maintain appropriate psychiatric referrals for two patients with psychiatric conditions on chronic opioid therapy. In addition, Dr. Onisile failed to adequately supervise a Physician Assistant, and failed to maintain adequate medical records. Dr. Onisile stated that he has implemented several changes in the policies and procedures in his practice to prevent a future occurrence. Dr. Onisile acknowledged that there is room for improvement in his medical recordkeeping. Dr. Thrift expressed concern regarding the fact that the medical records were often not detailed, and stated that it was difficult to discern why the narcotic prescriptions were being written. Dr. Onisile stated that the patients were chronic pain patients that presented with the same symptoms for years who were stable on their medication. Dr. Onisile told the Board that patient BM showed no signs of suicidal ideation prior to the suicidal attempt. Dr. Petelin noted that BM had a previously attempted self inflicted stab wound that resulted in BM's hospitalization. Dr. Onisile stated that this occurred several years ago, and that BM had no history of attempted suicide with medication. In closing, Mr. Hall pointed out that Dr. Onisile has implemented new measures in his practice for better medical recordkeeping. He stated that Dr. Onisile has agreed to undergo the PACE medical recordkeeping course, for which he has already enrolled. Mr. Hall further stated that the tragic patient outcomes in this case were not a direct result of any unprofessional conduct on behalf of Dr. Onisile or his practice. Dr. Thrift found that Dr. Onisile engaged in unprofessional conduct by failing to maintain adequate records, failing to adequately supervise his Physician Assistant, and by deviating from the standard of care.

MOTION: Dr. Thrift moved for a finding of unprofessional conduct in violation of A.R.S. §32-1401(27)(e) - Failing or refusing to maintain adequate records on a patient; A.R.S. §32-1401(27)(q) - Any conduct that is or might be harmful or dangerous to the health of the patient or the public; and A.R.S. §32-1401(27)(ii) - Lack of or inappropriate direction, collaboration or direct supervision of a medical assistant or a licensed, certified or registered health care provider employed by, supervised by or assigned to the physician.

SECONDED: Ms. Ibanez

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

Dr. Thrift found that this matter rises to the level of discipline, and agreed with Board staff's recommended that Dr. Onisile undergo the PACE medical recordkeeping and prescribing courses.

MOTION: Dr. Thrift moved for a draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and One Year Probation. Within six months, complete the PACE prescribing course and the PACE medical recordkeeping course. The course hours shall be in addition to the hours required for the biennial renewal of medical licensure. The Probation shall terminate upon successful completion of the course work.

SECONDED: Dr. Schneider

Dr. Schneider found that this was a difficult case to decipher as the medical records were very hard to follow. Dr. Khera spoke against the motion and stated that discipline is inappropriate in this case as the physician has acknowledged that his records were poor and he has indicated a willingness to obtain the CME course work. Ms. Ibanez supported the motion. Dr. Petelin spoke in favor of issuing an Advisory Letter with CME, and stated that he was impressed with Dr. Onisile initiating involvement with the PACE CME course. Dr. Lee spoke in favor of the motion and stated that Dr. Onisile's medical records clearly do not meet the minimum standard for the patient to have continuity of care with other providers.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Ibanez, Dr. Lee, and Dr. Schneider. The following Board members voted against the motion: Ms. Griffen, Dr. Jenkins, Dr. Khera, Dr. Petelin, Ms. Proulx, and Dr. Thrift. The following Board member was absent: Dr. Krishna.

VOTE: 3-yay, 6-nay, 0-abstain, 0-recuse, 1-absent.

MOTION FAILED.

MOTION: Dr. Petelin moved to issue an Advisory Letter for failure to properly document, screen for abuse, screen for psychiatric decompression and for inadequate supervision of a Physician Assistant. There is insufficient evidence to support discipline. Issue a Non-Disciplinary CME Order for inadequate medical records and inappropriate prescribing.

Within six months, complete the PACE prescribing course and the PACE medical recordkeeping course. The course hours shall be in addition to the CME hours required for the biennial renewal of licensure.

SECONDED: Dr. Khera

Dr. Lee spoke against the motion and stated that he found that there was sufficient evidence to support a disciplinary action on the issue of egregiously poor medical records.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Griffen, Dr. Jenkins, Dr. Khera, Dr. Petelin, Ms. Proulx, and Dr. Thrift. The following Board members voted against the motion: Ms. Ibanez, Dr. Lee and Dr. Schneider. The following Board member was absent: Dr. Krishna.

VOTE: 6-yay, 3-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

Ms. Boucek informed the Board that the Advisory Letter and CME Order will be drafted as separate documents. She stated that if Dr. Onisile is noncompliant with the CME Order, the Board can bring a separate action against him for violation of a Board Order. Board members confirmed that they believed they were voting on both the Advisory Letter and CME Order in one motion.

NO.	CASE NO.	PHYSICIAN	LIC. #	RESOLUTION
2.	MD-10-1229A	GABRIELLE J. GOODRICK, M.D.	22811	Draft Findings of Fact, Conclusions of Law and Order for an Order of Probation to participate in PHP for a period of five years. The Probation shall include psychiatric monitoring. The Probation shall also include a Practice Restriction prohibiting the physician from having intravenous drugs in her office practice. After two months, Dr. Goodrick may petition the PHP monitor requesting modification of the Practice Restriction to allow the use of Versed in her office practice. Dr. Goodrick may not request termination of the Practice Restriction until after three years of PHP participation. This Order shall supersede any and all previous Orders. Dr. Goodrick's PHP participation is retroactive to December 21, 2010.
	MD-10-1378A			Dismiss.

Dr. Goodrick was present with legal counsel, Mr. Calvin Raup. Dr. Lee stated that he knows Mr. Raup, but it would not affect his ability to adjudicate the case. Ms. Muller summarized that in case MD-10-1229A, Dr. Goodrick underwent a chemical dependency evaluation and entered into an Interim Practice Restriction with the Board. Ms. Muller stated that Dr. Goodrick completed treatment for substance abuse on December 9, 2010 and entered into the Board's Physician Health Program under an Interim Order. Marlene Young, Investigator, informed the Board that in the matter of MD-10-1378A, the Board received notification from the Department of Health Services indicating that on October 11-12, 2010, Dr. Goodrick was practicing medicine in violation of her October 1, 2010 Interim Order for Practice Limitation. Dr. Goodrick stated that the allegations from the Department of Health Services stemmed from a clerical error that occurred in her practice. Dr. Goodrick stated that she has not seen patients and that she has not rendered any care while under the Interim Practice Restriction. Dr. Petelin expressed concern that Dr. Goodrick may be allowing her registered nurses to practice medicine in her office, based upon her definition of the practice of medicine submitted in support of her claim that she has not violated the Interim Practice Limitation. Dr. Goodrick stated that it is the standard of care in the community that a registered nurse may work under the direction of a physician, and can administer medication under a physician's standing orders. In closing, Mr. Raup stated that case law provides that the practice of medicine does not include administrative duties performed in a physician's practice. He stated that with regard to the five patients in question, Dr. Goodrick looked at the patients' charts after the patient had already received medical services and left the office. He stated that he finds it difficult to believe that an individual who accidentally violates the statute can still be disciplined by the Board. Dr. Lee found that in MD-10-1229A, Dr. Goodrick has engaged in unprofessional conduct.

MOTION: Dr. Lee moved for a finding of unprofessional conduct in violation of A.R.S. §32-1401(27)(f) - Habitual intemperance in the use of alcohol or habitual substance abuse; and A.R.S. §32-1401(27)(g) - Using controlled substances except if prescribed by another physician for use during a prescribed course of treatment.

Seconded: Ms. Proulx

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

Dr. Lee stated that he finds this matter rises to the level of discipline. He questioned whether the Board was required to issue a Letter of Reprimand when placing the physician on Probation for PHP participation. Ms. Boucek informed the Board that the probationary Order itself is considered discipline, and that by adding a Letter of Reprimand, the physician is being reprimanded for the unprofessional conduct.

MOTION: Dr. Lee moved for a draft Findings of Fact, Conclusions of Law and Order for an Order of Probation to participate in PHP for a period of five years. The Probation shall include psychiatric monitoring. The Probation shall also include a Practice Restriction prohibiting the physician from having intravenous drugs in her office practice. After two months, Dr. Goodrick may petition the PHP monitor requesting modification of the Practice Restriction to allow the use of Versed in her office practice. Dr. Goodrick may not request termination of the Practice Restriction until after three years of PHP participation. This Order shall supersede any and all previous Orders. Dr. Goodrick's PHP participation is retroactive to December 21, 2010.

SECONDED: Dr. Jenkins

Ms. Boucek recommended that the Board include in its motion that the Order shall supersede all prior orders of the Board. Drs. Jenkins and Lee agreed to modify their motion to include the language as recommended by Ms. Boucek.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Griffen, Ms. Ibanez, Dr. Jenkins, Dr. Khera, Dr. Lee, Dr. Petelin, Ms. Proulx, Dr. Schneider, and Dr. Thrift. The following Board member was absent: Dr. Krishna.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

In the matter of MD-10-1378A, Dr. Lee stated that he found that Dr. Goodrick has engaged in unprofessional conduct by violating the Interim Practice Limitation.

MOTION: Dr. Lee moved for a finding of unprofessional conduct in violation of A.R.S. §32-1401(27)(r) - Violating a formal order, probation, consent agreement or stipulation issued or entered into by the board or its executive director under the provisions of this chapter.

SECONDED: Dr. Petelin

Dr. Schneider noted that Dr. Goodrick employed a locum tenens physician for coverage while her license was restricted, who made clinical decisions in her office. Dr. Schneider spoke against the motion and stated that this matter does not rise to the level of unprofessional conduct. Dr. Lee stated that he takes a Board Order very seriously. He stated that to devalue the signature on a clinical chart does a disservice to physician as clinical providers. Dr. Thrift spoke against the motion and stated that it is clear that Dr. Goodrick attempted to establish procedures in her practice in order to comply with the Board Order.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Ibanez, Dr. Lee, and Dr. Petelin. The following Board members voted against the motion: Ms. Griffen, Dr. Jenkins, Dr. Khera, Ms. Proulx, Dr. Schneider, and Dr. Thrift. The following Board member was absent: Dr. Krishna.

VOTE: 3-yay, 6-nay, 0-abstain, 0-recuse, 1-absent.

MOTION FAILED.

MOTION: Dr. Lee moved to issue an Advisory Letter for violation of a Board Order by making signatures on a chart that implied that the patient was being cared for by that physician.

SECONDED: Dr. Petelin

Ms. Boucek advised the Board not to include violation of a Board Order in its motion, as the Board expressly voted against a finding of unprofessional conduct. She recommended that the Board issue the Advisory Letter for Dr. Goodrick's signing of patients' charts in a manner that may have given the impression that she was authorized to practice medicine while under a Practice Restriction. Dr. Lee questioned whether the Advisory Letter motion could mention medical records as the physician had not been noticed of a medical records violation. Ms. Boucek advised the Board to enter into Executive Session to receive legal advice.

MOTION: Dr. Lee moved to enter into Executive Session to receive legal advice.

SECONDED: Dr. Jenkins

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

The Board entered into Executive Session at 1:15 p.m.

The Board returned to Open Session at 1:20 p.m.

No deliberations or discussions were made during Executive Session.

Drs. Jenkins and Lee withdrew their previous motion.

MOTION: Dr. Schneider moved to dismiss case MD-10-1378A.

SECONDED: Dr. Khera

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Griffen, Ms. Ibanez, Dr. Jenkins, Dr. Khera, Dr. Schneider, and Dr. Thrift. The following Board members voted against the motion: Dr. Lee, Dr. Petelin, and Ms. Proulx. The following Board member was absent: Dr. Krishna.

VOTE: 6-yay, 3-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

Mr. Raup questioned the Board as to when Dr. Goodrick may return to practice and begin scheduling patients. Ms. Boucek stated that the Board Order arising from the Formal Interview would supersede the Interim Practice Limitation.

The Board returned to this case later in the day. Ms. Boucek stated that it came to her attention that the treatment center and Board contractors deemed Dr. Goodrick safe to return to practice while being monitored by PHP but recommended that Dr. Goodrick not be allowed to have intravenous drugs in her office. Ms. Boucek recommended that the Board move to make the Order immediately effective upon the Executive Director's execution of the Order.

MOTION: Ms. Griffen moved for the Board's Order to become immediately effective upon the Executive Director's execution of the Order.

SECONDED: Dr. Petelin

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Griffen, Ms. Ibanez, Dr. Jenkins, Dr. Khera, Dr. Lee, Dr. Petelin, Ms. Proulx, Dr. Schneider, and Dr. Thrift. The following Board member was absent: Dr. Krishna.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

NO.	CASE NO.	PHYSICIAN	LIC. #	
3.	MD-10-0682A	VICKY E. SHERMAN, M.D.	21558	Issue an Advisory Letter for failure to complete a tubal ligation and inform the patient of the failure to complete the procedure. This is a technical error that does not rise to the level of discipline.

Dr. Sherman was present with legal counsel, Ms. Sandra Rogers. Dr. Schneider stated that she knows Dr. Sherman, but it would not affect her ability to adjudicate the case. Dr. Haas summarized that Dr. Sherman failed to complete a tubal ligation and inform the patient of the failure to complete the procedure. Dr. Sherman stated that she recognizes she made a mistake in this case, and that she takes full responsibility. Dr. Sherman explained that the patient's consent forms for the tubal ligation and repeat cesarean section were separate forms signed by the patient. The patient later became pregnant while being under the impression that she had undergone the tubal ligation. Dr. Sherman told the Board that the patient remained under her care throughout her pregnancy and is happy with the outcome. Dr. Sherman reported that the hospital has combined the two procedures on one form in an effort to prevent a future similar occurrence. Additionally, Dr. Sherman stated that the hospital now requires a physician's signature on the consent form before the patient can be taken to the operating room. Dr. Petelin expressed concern with the failure to inform the patient that the procedure had not been performed, and noted that there were significant risks involved for the mother and baby. Dr. Petelin found that there were two missed opportunities to inform the patient. In closing, Ms. Rogers stated that Dr. Sherman has been the most honest physician that she has represented. She stated that Dr. Sherman has not tried to avoid responsibility for her mistake. Ms. Rogers pointed out that Dr. Sherman has no prior Board history, and stated that this matter does not warrant discipline. Dr. Schneider found that Dr. Sherman was very contrite in her testimony. Dr. Schneider found that Dr. Sherman did engage in unprofessional conduct by deviating from the standard of care by failing to perform the procedure.

MOTION: Dr. Schneider moved for a finding of unprofessional conduct in violation of A.R.S. §32-1401(27)(q) - Any conduct that is or might be harmful or dangerous to the health of the patient or the public.

SECONDED: Ms. Griffen

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

Dr. Schneider stated that she found this matter does not rise to the level of discipline and recommended issuing the physician an Advisory Letter for a technical violation. Dr. Schneider stated that Dr. Sherman has demonstrated remediation in her processes.

MOTION: Dr. Schneider moved to issue an Advisory Letter for failure to complete a tubal ligation and inform the patient of the failure to complete the procedure. This is a technical error that does not rise to the level of discipline.

SECONDED: Ms. Ibanez

Dr. Petelin spoke in favor of the motion. He pointed out that at the Board's previous meeting, discipline was issued to a physician who was found to have overlooked a chest x-ray report and a malignancy was missed. He found that the matter was similar to the current case, and expressed concern that the Board is not being consistent in issuing discipline versus non-disciplinary actions. Dr. Jenkins disagreed, and stated that she recalled the prior case involving another physician regarded a chest x-ray ordered by the physician who had control over the follow up that occurred with the patient. She stated that this current case involving Dr. Sherman is different in that the processes were not followed at the hospital, which was out of Dr. Sherman's control. Dr. Petelin commented that had the outcome been adverse to either the mother or baby, the Board may look at the case differently. Dr. Schneider disagreed and noted that the end result was a child, and that the prior matter resulted in the patient's death.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Griffen, Ms. Ibanez, Dr. Jenkins, Dr. Khera, Dr. Lee, Dr. Petelin, Ms. Proulx, Dr. Schneider, and Dr. Thrift. The following Board member was absent: Dr. Krishna.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.

MOTION PASSED.

The meeting adjourned at 4:28 p.m.



Handwritten signature of Lisa S. Wynn.

Lisa S. Wynn, Executive Director