Arizona Medical Board

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FINAL MINUTES FOR REGULAR SESSION MEETING Held on February 4-5, 2016 9535 E. Doubletree Ranch Road • Scottsdale, Arizona

Board Members
Richard T. Perry, M.D., Chair
James M. Gillard, M.S., M.D., F.A.C.E.P., F.A.A.E.M., Vice-Chair
Jodi A. Bain, Esq., Secretary
Marc D. Berg, M.D.
Donna S. Brister
Teresa L. Connolly, D.N.P., R.N., N.E.A.-B.C.
R. Screven Farmer, M.D.
Gary R. Figge, M.D.
Robert E. Fromm, M.D., M.P.H.
Lois E. Krahn, M.D.
Edward G. Paul, M.D.
Wanda J. Salter, R.N.

THURSDAY, FEBRUARY 4, 2016

GENERAL BUSINESS

A. CALL TO ORDER

Dr. Perry called the meeting to order at 8:04 a.m.

B. ROLL CALL

The following Board members were present: Ms. Bain, Dr. Berg, Ms. Brister, Dr. Connolly, Dr. Farmer, Dr. Figge, Dr. Fromm, Dr. Gillard, Dr. Krahn, Dr. Paul, Dr. Perry, and Ms. Salter.

ALSO PRESENT

Present among Board staff include: Christopher Munns, Assistant Attorney General ("AAG"), Solicitor General's Office; Carrie Smith, AAG; Mary D. Williams, AAG; Anne Froedge, AAG, Patricia E. McSorley, Executive Director; Kristina Fredrickson, Deputy Director; William Wolf, M.D., Chief Medical Consultant; Anita Shepherd, Investigations Manager; Mary Bober, Board Operations Manager; and Andrea Cisneros, Staff Investigational Review Committee Coordinator.

C. PUBLIC STATEMENTS REGARDING MATTERS LISTED ON THE AGENDA ("Public Statements")

Individuals who addressed the Board during the Public Statements portion of the meeting appear beneath the matter(s) referenced.

D. EXECUTIVE DIRECTOR'S REPORT

- Discussion Regarding ADOA FY2017 Capital Improvement Plan
- Preliminary Discussion Regarding Development of Board Policy Re: Handling of Complaints Related to Billing Issues and Development of Board Policy Re: Telemedicine.

Ms. McSorley expressed the need for a better mechanism to determine excessive billing.

Board members requested Dr. Weinstein to talk to the Board about the future of telemedicine at a future meeting.

E. CHAIR'S REPORT

Dr. Perry commented on the election of officers and stated the board is in good standing.

F. LEGAL ADVISOR'S REPORT

- Update on Case No. CV2014-054509
- Update on Case No. 2:15-cv-01022-JJT
- Discussion Regarding Request for Direction on Reporting Board Lawsuits.

MOTION: Dr. Farmer moved for the Board to enter into Executive Session pursuant to A.R.S. § 38-431.03(A)(3).
SECOND: Dr. Krahn
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

The Board entered into Executive Session at 11:50 a.m.
The Board returned to Open Session at 12:01 p.m.
No legal action was taken by the Board during Executive Session.

G. DISCUSSION AND POSSIBLE ACTION REGARDING ELECTION OF OFFICERS

MOTION: Dr. Perry moved to nominate Dr. Gillard as Board Chairman, Dr. Farmer as Board Vice Chairman, and Ms. Bain to remain as Board Secretary.
SECOND: Dr. Paul
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

H. DISCUSSION AND POSSIBLE ACTION REGARDING APPROVAL OF 2016 MEETING DATES

Dr. Perry confirmed the dates for the March 10, 2016 special teleconference meeting and the April 6, 2016 regular session meeting. Dr. Perry asked the Board to submit their requests on future dates to Board staff.

I. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING AMB POLICY AND LEGISLATIVE AGENDA

Patricia E. McSorley, Executive Director
Stuart Goodman, Legislative Liaison

- HB 2364 – Medical Board; License Renewal
  Mr. Goodman reported the bill passed the House Health Committee this past week.
- HB 2501 – Health Regulatory Boards; Transfer; DHS
  Mr. Goodman reported regarding the transfer bill and discussed the ongoing stakeholder meetings that he has been attending. Mr. Goodman explained the bill is constantly evolving and in its most recent version, the timeframes for the four phases for agency transfer have been extended. Mr. Goodman will keep the Board up to date.
- HB 2502 – Medical Licensure Compact
  Mr. Goodman stated the bill will be used to facilitate the licensure process.
- HB 2517 – Businesses; Professions; Regulation Restrictions
  Mr. Goodman explained the bill as a mechanism for licensure requirements.
- HB 2519 – Separating Service Members; Professional Licenses
- HB 2520 – Professional Licensure; Reciprocity; Military Spouses
  Mr. Goodman explained the original statute created a mechanism for a service members' family to get a license in a reasonable timeframe. Mr. Goodman expressed the language in this bill took out the safety mechanisms built into the original language and stated the bill is not likely to pass.
- SB 1283 – Controlled Substances Prescription Monitoring Program

- SB 1443 – Health Profession Regulatory Boards
  Mr. Goodman explained that this legislation would require the Board to report non-disciplinary actions on the website. A bill enacted in 2010 removed the provision in law requiring boards to post non-disciplinary actions. Mr. Goodman noted Senator Barto opined that if the information was available to the public by phone call to the board, then it should also be on the boards' websites, as most people simply do not know that they can get the information by phone.
- SB 1445 – Health Care Services; Patient Education
  Board members expressed concerns regarding the limitations on the Board's ability to regulate based on the proposed language of the bill, as well as the interference in the employer/employee relationship.
  MOTION: Dr. Perry moved to direct the Board's legislative liaison to engage in discussions regarding SB1445 and communicate the Board's concerns regarding the Board's ability to regulate.
  SECOND: Dr. Krahn
  VOTE: 11-yay, 0-nay, 1-abstain, 0-recuse, 0-absent.
  MOTION PASSED.
- SB 1524 – Regulatory Actions; Limitation
- Discussion and Possible Action Re Identification of Other Proposed Legislation That May Be Relevant to Board Activities.

J. CONSIDERATION, DISCUSSION AND ACTION REGARDING A POLICY AND PROCESS TO ADDRESS NON-COMPLIANCE WITH THE GREATER ARIZONA CENTRAL CREDENTIALING PROGRAM ("GACCP") LOOK BACK AUDIT

Patricia E. McSorley, Executive Director

- Discussion and Possible Action Regarding Staff Request for Board Direction on Processing and Disposition of Cases for Non-compliant Physicians
  Ms. McSorley discussed possible solutions for obtaining cooperation from the remaining 61 non-responsive licensees.
- Request for Board Direction Re: Lic #48326 Almashjary
  Ms. McSorley discussed board staff's inability to contact this licensee, and that she appears to have left the country.
  MOTION: Dr. Fromm moved to delay the investigation of staff attempting to locate the physician until such time that the licensee renews her license with the Board and updates her contact information.
  SENCOND: Dr. Krahn
  VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
  MOTION PASSED.
- Update on Progress for GACCP Contract Completion.

K. APPROVAL OF MINUTES

MOTION: Dr. Farmer moved to approve the December 15, 2015 Emergency Teleconference, and the December 28, 2015 Emergency Teleconference meeting minutes.
SECOND: Ms. Brister
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

LEGAL MATTERS

L. REVIEW, CONSIDERATION AND POSSIBLE ACTION ON PROPOSED BOARD ORDER ARISING FROM ADMINISTRATIVE LAW JUDGE'S RECOMMENDED DECISION

1. MD-13-0426A, EDGARDO D. ZAVALA-ALARCON, M.D., LIC. #27016

Board members indicated that they received and reviewed the administrative record from the Formal Hearing. Dr. Alarcon was present with legal counsel, Attorney Fred Cummings. AAG Froedge was present on behalf of the State.

AAG Froedge explained the State's motion to modify and adopt the ALJ's decision. AAG Froedge noted the State respectfully disagrees with the conclusion of the ALJ regarding the standard of care issues in the case, but is not seeking a modification. The State requested modifications as proposed in its motion and requested the Board issue an Advisory Letter for inadequate medical records.

In closing, Mr. Cummings requested the Board honor the ALJ's recommendation for dismissal. Mr. Cummings noted the Board's first outside medical consultant, a plastic surgeon, did not find a problem with Dr. Zavala-Alarcon's medical records. Mr. Cummings explained Dr. Zavala-Alarcon had a policy to chart by exception which is not unusual and requested the Board to take into consideration Dr. Zavala-Alarcon no longer charts by exception.

Dr. Zavala-Alarcon commented on his effort to fix or improve every detail raised by the Board and stated that his main concern is patient safety.

MOTION: Ms. Bain moved to adopt the ALJ's recommended Findings of Fact.
SECOND: Dr. Paul
VOTE: 10-yay, 2-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

MOTION: Dr. Fromm moved to adopt the ALJ's recommended Conclusions of Law.
SECOND: Dr. Gillard
VOTE: 11-yay, 0-nay, 1-abstain, 0-recuse, 0-absent.
MOTION PASSED.

MOTION: Dr. Fromm moved to adopt the ALJ's recommended Order for dismissal.
SECOND: Ms. Bain
VOTE: 11-yay, 0-nay, 1-abstain, 0-recuse, 0-absent.
MOTION PASSED.

MOTION: Dr. Krahn moved to approve the Board Order arising from the ALJ's recommended decision.
SECOND: Ms. Bain
VOTE: 11-yay, 0-nay, 1-abstain, 0-recuse, 0-absent.
MOTION PASSED.

M. MOTION FOR REHEARING/REVIEW

1. MD-13-1181A, ERICK A. FALCONER, M.D., LIC. #45505

Dr. Falconer participated telephonically during the Board's consideration of his petition for the Board to rehear or review the case. AAG Williams was present on behalf of the State.

MOTION: Dr. Perry moved for the Board to enter into Executive Session pursuant to A.R.S. § 38-431.03(A)(3).
SECOND: Ms. Bain
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

The Board entered into Executive Session at 8:24 a.m.
The Board returned to Open Session at 8:28 a.m.
No legal action was taken by the Board during Executive Session.

Dr. Falconer expressed his belief that facts were not clearly addressed and felt his constitutional rights were violated. Dr. Falconer noted he self-reported his Missouri case to the Board and no harm or damages occurred with the patients in the case.

Ms. Williams stated to Board members that Dr. Falconer failed to demonstrate any grounds that support a rehearing. Ms. Williams further stated that there were no errors, irregularities or denials of due process. Ms. Williams noted Dr. Falconer was convicted of a felony and lied to the Board on his initial and renewal applications, these are grounds for discipline due to unprofessional conduct. Ms. Williams requested the Board to deny Dr. Falconer's petition for rehearing.

Ms. Bain confirmed the time frame of the hearings in the case and Dr. Falconer's reasons for his request for a rehearing. Dr. Perry read the Grounds for Rehearing and Review to Board members.

MOTION: Dr. Fromm moved to deny the motion for rehearing and affirm the previous Board Order.
SECOND: Dr. Farmer
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

2. MD-13-0315A, MD-13-0500A, MD-13-1436A, DAVID A. RUBEN, M.D., LIC. #11382
Dr. Ruben was present during the Board's consideration of his petition for rehearing or review. AAG Froedge was present on behalf of the State.

Dr. Ruben stated no harm came to eight patients, and three patients and their spouses testified that their treatment was appropriate. Dr. Ruben further stated that the Administrative Law Judge found that he met the standard of care and explained the Board's two medical consultants' assessments were invalid.

Ms. Froedge explained Dr. Ruben failed to demonstrate any of the grounds warranting a rehearing. Ms. Froedge requested a limited Board review to delete Conclusion of Law #7 because the State did not allege inadequate medical records as to patients MB, FS and ME.

MOTION: Dr. Berg moved to grant the motion and conduct a limited review for the purpose of deleting Conclusions of Law #7 as recommended by the State.
SECOND: Dr. Paul
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

N. FORMAL INTERVIEWS

1. MD-13-1151A, SUDEEP S. PUNIA, M.D., LIC. #20224
Dr. Punia was present with legal counsel, Attorney Andrew Plattner.

Board staff presented the case and Dr. Punia's failure to properly perform a smart liposuction procedure. Board staff stated OMC's concerns consisted lack of preoperative evaluation, screening of the patient, and the facility's certification and qualifications for surgical procedures.

Dr. Punia testified that the patient underwent a smart liposuction procedure, a simple outpatient and office based procedure. Dr. Punia stated there were no complications and noted the patient ignored post-operative instructions, did not wear her compression garment and declined a follow up procedure. Dr. Punia noted no guarantee of results was given to the patient. Dr. Punia explained that patient's medical history was reviewed and she met the requirements for the procedure.

In closing, Mr. Plattner explained that laser lipolysis and suction assisted lipectomy are performed differently and records show that only oral sedation and not IV sedation was utilized. Mr. Plattner stated Dr. Punia has the credentials, facility and staff to perform the procedure. Mr. Plattner noted the patient elected to undergo the procedure and knew the time frames and had post-operative instructions.

MOTION: Dr. Perry moved for dismissal.

SECOND: Dr. Gillard
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

2. MD-14-0310A, JONATHAN B. MURPHY, M.D., LIC. #44962
Dr. Murphy was present with legal counsel, Attorney David Williams.

Board staff summarized that Dr. Murphy falsely represented himself as hospital staff, inappropriately provided orders without authorization at the hospital, practiced non-evidence based cancer treatment, and inappropriately prescribed medication.

Mr. Williams noted GE was a patient of Dr. Murphy's and that Dr. Murphy wanted to make sure there was a continuity of patient care while GE was at Banner Desert. Dr. Murphy stated there was a miscommunication between himself and hospital staff. Dr. Murphy told the Board in the future he will act in a supportive role only and be clear on who is the attending physician. Mr. Williams commented Dr. Murphy did not claim to be an oncology specialist, at the time he was an allopathic doctor training under a homeopathic doctor and is now currently licensed as a homeopathic doctor. Mr. Williams noted GE voluntarily chose treatment with Dr. Murphy. Dr. Fromm inquired about Dr. Murphy's understanding of the HIPPA Law and who is allowed access to patient's medical records.

MOTION: Dr. Perry moved for the Board to enter into Executive Session pursuant to A.R.S. § 38-431.03(A)(3).
SECOND: Ms. Salter
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

The Board entered into Executive Session at 11:44 a.m.
The Board returned to Open Session at 11:58 a.m.
No legal action was taken by the Board during Executive Session.

Dr. Fromm noted Dr. Murphy is an allopathic doctor and inquired if he notified his patients that he was training as a homeopathic doctor. Dr. Murphy stated he informed his patients he was training in homeopathic medicine. Dr. Gillard expressed concern regarding Dr. Murphy's awareness of requirements for credentialing needed before writing orders at a hospital. Dr. Murphy stated he understood that writing or signing an instruction is an order. Dr. Perry clarified Dr. Murphy became a homeopathic doctor in April 2014 but was still only licensed as an allopathic physician at the time in question. Dr. Perry noted the admitting physician recognized that Dr. Murphy was providing out patient care.

MOTION: Dr. Fromm moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(q) - Any conduct or practice that is or might be harmful or dangerous to the health of the patient or the public; and A.R.S. § 32-1401(27)(y) - The use of experimental forms of diagnosis and treatment without adequate informed patient consent, and without conforming to generally accepted experimental criteria, including protocols, detailed records, periodic analysis of results and periodic review by a medical peer review committee as approved by the federal food and drug administration or its successor agency.
SECOND: Dr. Krahn
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

Dr. Berg commented that one of the first things in medical school you learn is that signing on the signature line is an order. Dr. Fromm opined that the audio recording of the nurses did not clearly justify that Dr. Murphy knowingly made a fraudulent statement.

MOTION: Dr. Berg moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(t) - Knowingly making any false or fraudulent statement,

written or oral, in connection with the practice of medicine or if applying for privileges or renewing an application for privileges at a health care institution.
SECOND: Dr. Gillard
ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Bain, Dr. Berg, Ms. Brister, Dr. Connolly, Dr. Farmer, Dr. Figge, Dr. Gillard, Dr. Perry, and Ms. Salter. The following Board members voted against the motion: Dr. Fromm, Dr. Krahn, and Dr. Paul.
VOTE: 9-yay, 3-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

Dr. Fromm opined that an advisory letter is sufficient due to Dr. Murphy making attempts to remediate and gain an understanding of his mistakes and gain his homeopathic license. Dr. Fromm noted the Board has already given a Letter of Reprimand for clinical issues while treating the patient. Dr. Farmer spoke against the motion stating it is disingenuous to say Dr. Murphy wasn't intentionally passing himself off as staff. Dr. Gillard agreed with Dr. Farmer stating that he had concerns regarding Dr. Murphy's decision to write his name on the board and signing order forms when the physician did not have hospital privileges.

MOTION: Dr. Fromm moved to issue an Advisory Letter for writing an order at a hospital where the physician did not hold privileges as well as for engaging in unsubstantiated and unproven therapies. The physician has subsequently obtained a homeopathic license that puts the activity under the jurisdiction of both the Arizona medical and homeopathic boards. While the licensee has demonstrated substantial compliance through rehabilitation or remediation that has mitigated the need for disciplinary action, the Board believes that repetition of the activities that led to the investigation may result in further Board action against the licensee.
SECOND: Ms. Brister
VOTE: 1-yay, 11-nay, 0-abstain, 0-recuse, 0-absent.
MOTION FAILED.

Dr. Krahn noted the issue of signing orders was not part of the previous Letter of Reprimand. Dr. Figge agreed with SIRC's recommendation for CME.

MOTION: Dr. Figge moved for a draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Six Month Probation. Within six months, complete no less than 15 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding ethics. The CME hours shall be in addition to the hours required for license renewal.
SECOND: Dr. Gillard
ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Bain, Dr. Berg, Ms. Brister, Dr. Connolly, Dr. Farmer, Dr. Figge, Dr. Fromm, Dr. Gillard, Dr. Krahn, Dr. Paul, Dr. Perry, and Ms. Salter.
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

O. FORMAL INTERVIEWS

1. MD-14-0608D, JOHN M. PIERCE, M.D., LIC. #28911
   Dr. Perry was recused from this case. Dr. Pierce was present without legal counsel.

   Board staff presented the case to the Board. The Board received a complaint from the FDA reporting that Dr. Pierce received foreign unapproved cosmetic medications twelve times. Board staff noted Dr. Peirce failed to provide patient logs and cooperate with Board investigation.

   Dr. Pierce noted patients did not experience negative effects from the medications. Dr. Pierce stated he did not know the medications were not FDA approved or he would not have used them. Dr. Pierce stated he no longer orders medication from that company.

Dr. Connelly noted FDA sent a letter to Dr. Pierce regarding the unapproved medications and Dr. Pierce reports he did not receive the letter. Dr. Connelly expressed concern regarding whether it is reasonable to hold physicians accountable for establishing whether medications are counterfeit.

Dr. Farmer requested clarification regarding SIRC's recommendation for unprofessional conduct for failing to cooperate with the board. Dr. Peirce stated he did provide patient logs but was delayed due to his practice moving. Board staff clarified Dr. Pierce submitted patient log in January 2016 and did not include the Juvederm patients. Board staff stated the delay in providing requested documents is not acceptable and recommended that the Board find that Dr. Pierce committed unprofessional conduct pursuant to A.R.S. § 32-1401(27)(dd) .

MOTION: Dr. Connolly moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(dd) - Failing to furnish information in a timely manner to the Board or the Board's investigators or representatives if legally requested by the Board.
SECOND: Ms. Brister
VOTE: 10-yay, 1-nay, 0-abstain, 1-recuse, 0-absent.
MOTION PASSED.

Dr. Gillard opined the violation did not rise to a level of discipline. Several Board members spoke in favor of the motion due to the importance of cooperating with a Board investigation.

MOTION: Dr. Connolly moved to issue an Advisory Letter for failure to cooperate with a Board investigation. While the licensee has demonstrated substantial compliance through rehabilitation or remediation that mitigates the need for disciplinary action, the Board believes that repetition of the activities that led to the investigation may result in further Board action against the licensee.
SECOND: Dr. Fromm
VOTE: 11-yay, 0-nay, 0-abstain, 1-recuse, 0-absent.
MOTION PASSED.

2. MD-12-1458A, FRANK PALLARES, M.D., LIC. #41363
Dr. Pallares was present without legal counsel. Board staff summarized that the Board received a complaint from Havasu Regional Medical Center regarding Dr. Pallares' poor clinical judgement and inattention to detail. Five patient charts were forwarded to a MC for review. In June 2014, Dr. Pallares reported to PACE for Phase I of the evaluation. PACE recommended taht prior to reporting for Phase II, Dr. Pallares needed to complete a neuropsychological evaluation. Dr. Pallares did not complete the neuropsychological evaluation and did not complete Phase II of the program due to alleged unprofessional conduct displayed during the observation portion. Dr. Pallares was indefinitely barred from returning to complete Phase II. PACE ultimately found that there is not sufficient evidence to indicate that Dr. Pallares is unsafe to practice based on Phase 1 performance, but expressed that they were troubled by his professionalism. PACE recommended Dr. Pallares undergo a psychiatric evaluation and enroll in an anger management course.

Dr. Pallares opined that the biggest concern of the MC who reviewed his five charts appeared to be with two patients' mode of transportation to the hospital and that they were unideal situations. Dr. Pallares disagreed with PACE's comments regarding his unprofessionalism towards the Chief of Cardiovascular Medicine Director.

Dr. Gillard agreed with MC that the patients should have been monitored during transport and that if a patient refuses recommended transport an AMA document needs to be signed. Dr. Gillard believed Dr. Pallares committed unprofessional conduct.

Board members commented on rules regarding patient transportation and clarified that in an emergency a patient can be transferred to any ER and the patient must be admitted to the hospital.
Board staff noted this is the only case where PACE barred a physician from completing the competency evaluation out of 1600 physicians who have completed the evaluation.

MOTION: Dr. Perry moved for the Board to enter into Executive Session pursuant to A.R.S. § 38-431.03(A)(3).
SECOND: Ms. Bain
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

The Board entered into Executive Session at 2:21 a.m.
The Board returned to Open Session at 2:31 a.m.
No legal action was taken by the Board during Executive Session.

MOTION: Dr. Gillard moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(q) - Any conduct or practice that is or might be harmful or dangerous to the health of the patient or the public; and 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.
SECOND: Dr. Krahn
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

Dr. Gillard agreed with SIRC's request for a Letter of Reprimand and recommended an evaluation from Center for Personalized Education for Physicians (CPEP) be completed. Dr. Farmer stated the Board's mission is to protect the public's health and safety. He noted the Board sends many physicians to PACE and the fact that Dr. Pallares was not allowed to complete the program is concerning. Dr. Farmer opined Dr. Pallares should be suspended from practicing immediately until the CPEP evaluation is completed to ensure public safety. Dr. Berg noted the differences between PACE Phase I and PACE Phase II with regards to Dr. PIlares behaviors and agreed that a neuropsychiatric evaluation is needed. Board staff clarified that a neurospych evaluation has been complete due to Dr. Pallares being required to complete the evaluation tin order to be invited back for PACE Phase II.

MOTION: Dr. Gillard moved for draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Two Year Probation. Dr. Pallares shall enroll with CPEP for a competency evaluation within 30 days from the date of this Order, and complete the evaluation within nine months. The physician shall be prohibited from performing any form of medicine in the State of Arizona until such time that he has completed the CPEP evaluation. If the physician is found safe to practice by CPEP, staff may terminate the Practice Restriction. Board staff shall conduct periodic chart reviews of Dr. Pallares' patients for a period of two years. Once the licensee has complied with the Probation, he must affirmatively request that the Board terminate the Probation.
SECOND: Dr. Fromm
ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Berg, Ms. Brister, Dr. Farmer, Dr. Figge, Dr. Gillard, Dr. Krahn, Dr. Paul, and Dr. Perry. The following Board members voted against the motion: Ms. Bain, Dr. Connolly, Dr. Fromm, and Ms. Salter.
VOTE: 9-yay, 3-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

MOTION: Dr. Farmer moved for the Board's Order to take immediate effectiveness due to concerns regarding public health, safety or welfare.
SECOND: Dr. Paul

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Brister, Dr. Farmer, Dr. Figge, Dr. Gillard, Dr. Krahn, Dr. Paul, and Dr. Perry. The following Board members voted against the motion: Ms. Bain, Dr. Berg, Dr. Fromm, and Ms. Salter.
VOTE: 8-yay, 4-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

3. MD-14-1049A, HELEN E. WATT, M.D., LIC. #22016
Dr. Watt was present with legal counsel, Attorney Peter Wittekind.
Board staff summarized that Dr. Watt falsely advertised for FDA approved injection lipolysis. Board staff found that Dr. Watt, as Medical Director of LipoNOW, was ultimately responsible for any advertisement issued with her name and credentials.

Dr. Watt stated she was unaware that her name and credentials were being used. Dr. Watt stated that the owner and marketing manager admitted that she was not involved in the advertisement.

In closing, Mr. Wittekind stated that the Board's investigation found Dr. Watt's response credible and that if Dr. Watt had known about the advertisements she would have insisted they be accurate.

Board members clarified that at the time Dr. Watt was medical director at LipoNOW that Dr. Watt understood the medication was not FDA approved. Board members expressed concern that Dr. Watt would accept a position and not know what was happening in regards to the company using her name for advertising purposes.

During the Board's deliberation Dr. Perry stated Dr. Watt agreed to lend her name as medical director to a facility that was administering at the time an unapproved FDA drug, she did not see patients and signed off on charts after the procedure was completed. Dr. Perry opined Dr. Watt would not know the patients are safe if she has never seen them or know of the results. Ms. Brister agreed with Dr. Perry and expressed concern of a physician and surgeon signing off on charts of someone they've never seen or knowing the results of the procedure. Dr. Fromm opined the Nursing Board would consider Dr. Watt to be the supervising physician and that this was inappropriate supervision.

MOTION: Dr. Perry moved for a finding of unprofessional conduct in violation of 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.
SECOND: Dr. Krahn
VOTE: 11-yay, 1-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

MOTION: Dr. Perry moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(c)- False, fraudulent, deceptive or misleading advertising by a doctor of medicine or the doctor's staff, employer or representative.
SECOND: Dr. Krahn
ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Brister, Dr. Connolly, Dr. Farmer, Dr. Figge, Dr. Krahn, Dr. Paul, Dr. Perry, and Ms. Salter. The following Board members voted against the motion: Ms. Bain, Dr. Berg, Dr. Fromm, and Dr. Gillard.
VOTE: 8-yay, 4-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

Dr. Krahn expressed concern for Dr. Watt having previous Letters of Reprimand and the Board continues to see examples of unprofessional conduct. Dr. Krahn recommended a Decree of Censure. Dr. Berg spoke against the motion for censure. Ms. Salter noted Dr. Watt continues to show a history of inadequate medical records, in this case it is signing off on charts of patients she has not seen.

MOTION: Dr. Perry moved for a draft Findings of Fact, Conclusions of Law and Order for a Decree of Censure.
SECOND: Dr. Krahn
ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Krahn, Dr. Perry, and Ms. Salter. The following Board members voted against the motion: Ms. Bain, Dr. Berg, Dr. Farmer, Dr. Fromm, Dr. Gillard, and Dr. Paul.
VOTE: 6-yay, 6-nay, 0-abstain, 0-recuse, 0-absent.
MOTION FAILED.

MOTION: Dr. Perry moved for draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand.
SECOND: Dr. Farmer
ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Bain, Dr. Berg, Ms. Brister, Dr. Connolly, Dr. Farmer, Dr. Figge, Dr. Fromm, Dr. Gillard, Dr. Krahn, Dr. Paul, Dr. Perry, and Ms. Salter.
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

The Board discussed reconsidering the previous motion to clarify the Letter of Reprimand encompasses both violations.

MOTION: Dr. Farmer moved to reconsider the motion to issue disciplinary action to clarify for the record regarding the violations included in the disciplinary order voted on.
SECOND: Dr. Perry
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

MOTION: Dr. Perry moved for a draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand for violations of A.R.S. § 32-1401(27)(c) and (ii).
SECOND:
ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Bain, Dr. Berg, Ms. Brister, Dr. Connolly, Dr. Farmer, Dr. Figge, Dr. Fromm, Dr. Gillard, Dr. Krahn, Dr. Paul, Dr. Perry, and Ms. Salter.
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

CONSENT AGENDA

P. CASES RECOMMENDED FOR DISMISSAL

1. MD-14-1665A, ALLEN D. SLOAN, M.D., LIC. #17481

Dr. Farmer was recused from this case. Complainants RRM and CH spoke during the Public Statements portion of the meeting.

Dr. Gillard observed many inconsistencies with the outside medical consultant's findings. Dr. Berg opined the case be sent to another consultant for further review. Board members commented on Dr. Sloan's failure to identify need for CPR and the failure led to patient harm and death.

MOTION: Dr. Gillard moved to return the case to have the matter considered by the Board's Staff Investigational Review Committee.
The motion was withdrawn.

MOTION: Dr. Berg moved to return the case for further investigation to notice the physician regarding the potential statutory violations of A.R.S. § 32-1401(27)(q) and (II). The standard of care requires a physician to timely recognize a life threatening condition of the patient and initiate resuscitation. The physician deviated from this

standard of care by delay or failure to recognize the patient's life threatening condition and failure to initiate resuscitative efforts. There was the potential for patient harm relating to anoxic brain injury. Actual patient harm was identified in that the patient died. The physician shall be invited to appear before the Board for a Formal Interview.
SECOND: Dr. Figge
VOTE: 11-yay, 0-nay, 0-abstain, 1-recuse, 0-absent.
MOTION PASSED.

2. MD-14-0408A, KULBHUSHAN K. SHARMA, M.D., LIC. #22286
Complainant EC spoke during the Public Statements portion of the meeting.

Board members noted EC's comments during the Public Statements portion of the meeting that alleged there was no pre-procedure ultrasound completed; however Board members stated that in fact a completed pre-procedure ultrasound was found in EC's medical records.

MOTION: Dr. Berg moved for dismissal.
SECOND: Dr. Fromm
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

3. MD-14-1376A, ROOZBEH RASSADI, M.D., LIC. #37861
MOTION: Dr. Gillard moved for dismissal.
SECOND: Dr. Figge
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

4. MD-13-1353A, AKIL LOLI, M.D., LIC. #30579
Dr. Perry was recused from this case.

MOTION: Dr. Gillard moved for dismissal.
SECOND: Dr. Paul
VOTE: 10-yay, 0-nay, 0-abstain, 1-recuse, 1-absent.
MOTION PASSED.

Q. CASES RECOMMENDED FOR ADVISORY LETTERS

MOTION: Dr. Figge moved to issue an Advisory Letter in item numbers 4, 5, 6, 7, 13, 14, 15, and 16.
SECOND: Dr. Krahn
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

1. MD-15-0212A, DENNIS D. BECKWORTH, M.D., LIC. #10238
Dr. Berg opined Dr. Beckworth would be unable to answer appropriately regarding being under investigation if he was unaware of said investigation.

MOTION: Dr. Berg moved for dismissal.
SENCOND: Dr. Gillard
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

2. MD-14-1557A, HAROON QURAISH-UL-HAQUE, M.D., LIC. #23305
Dr. Berg noted although there was no deviation of care a police report was filed for Dr. Quraish-Ul-Haque putting his hands on a person's neck and shaking. Board members opined this is unprofessional conduct and discipline may be appropriate.

MOTION: Dr. Berg moved to offer the physician the opportunity to enter into a Consent Agreement for a Letter of Reprimand for engaging in unprofessional

conduct in violation of A.R.S. § 32-1401(27)(q). If he declines to enter into the Consent Agreement, he shall be invited to appear before the Board for a Formal Interview.
SENCOND: Dr. Farmer
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

3. MD-13-1242A, RAYMOND P. ROFFI, M.D., LIC. #21337
FA spoke during the Public Statements portion of the meeting on behalf of the complainant. Dr. Roffi also addressed the Board during the scheduled Public Statements.

Board members noted there was a discrepancy between the two MC's reports. Dr. Berg opined there was no delay in diagnosis. Dr. Mattalino agreed with Dr. Berg and opined it was a judgement call. Board members agreed with MC findings of inadequate medical records.

MOTION: Dr. Berg moved to issue an Advisory Letter for inadequate medical records. There is insufficient evidence to support disciplinary action.
SENCOND: Dr. Gillard
VOTE: 9-yay, 2-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

4. MD-14-0587A, CECIL C. GRAHAM, M.D., LIC. #30345
RESOLUTION: Issue an Advisory Letter for performing thoracic intra-articular facet injections without documentation of exhaustion of adequate conservative care and without diagnostic testing. There is insufficient evidence to support disciplinary action.

5. MD-15-0158A, JOHN W. MCGETTIGAN, M.D., LIC. #12606
RESOLUTION: Issue an Advisory Letter for violating a Board Order. There is insufficient evidence to support disciplinary action.

6. MD-14-1457A, MARK D. FETTER, M.D., LIC. #24439
RESOLUTION: Issue an Advisory Letter for improper planning of a breast augmentation. There is insufficient evidence to support disciplinary action.

7. MD-15-0181A, WILLIAM L. SUN, M.D., LIC. #33617
RESOLUTION: Issue an Advisory Letter for committing a misdemeanor involving moral turpitude and failure to timely report the matter to the Board. There is insufficient evidence to support disciplinary action.

8. MD-15-0268A, DOUGLAS A. ANDERSON, M.D., LIC. #16123
Dr. Anderson spoke during the Public Statements portion of the meeting along with Attorney Steve Myers. Dr. Perry stated that he knows Dr. Anderson professionally, but it would not affect his ability to adjudicate the case.

Dr. Gillard opined that Dr. Anderson did everything correctly but telemedicine statutes are clear. Dr. Farmer agreed with Dr. Gillard that Dr. Anderson did everything right and opined that there would not be a finding of unprofessional conduct if Dr. Anderson was covering in the absence of a physician who was a part of the same practice. Dr. Berg quoted a subdivision of statute that a physician who provides temporary treatment on behalf of the primary physician he would not need to do a physical examination. Board members clarified that it was a telephonic exam and that the he was not covering for the primary physician of record. Dr. Gillard expressed concern if Board dismisses the case would it send precedence for those providing telemedicine.

MOTION: Dr. Gillard moved to issue an Advisory Letter for prescribing medication without first performing a physical examination or without first establishing a

doctor-patient relationship. There is insufficient evidence to support disciplinary action.
SECOND: Ms. Brister

This motion was withdrawn.

MOTION: Dr. Farmer moved for dismissal due to mitigating circumstances peculiar to this case including lack of coverage and lack of availability of alternative care.
SENCOND: Dr. Figge
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

9. MD-15-0229A, RONALD D. GORDON, M.D., LIC. #8503
Board staff presented case to the Board.

Dr. Berg agreed with MC that Dr. Gordon's lack of prompt recognition of the patient's condition despite two phone conversations deviated from the standard of care. Board members agreed with Dr. Berg that Dr. Gordon deviated from the standard of care by not recommending the patient to go to the emergency room. Dr. Berg opined that a Letter of Reprimand for a q violation would be appropriate.

MOTION: Dr. Berg moved to offer the physician the opportunity to enter into a Consent Agreement for a Letter of Reprimand based on SIRC's findings. If the physician declines to enter into the Consent Agreement, he shall be invited to appear before the Board for a Formal Interview.
SENCOND: Dr. Figge
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

10. MD-14-1121A, ANGELA C. KO, M.D., LIC. #44771
Board staff summarized that Dr. Ko deviated from the standard of care and had documentation issues.

Board members recommend non-disciplinary CME for neuromuscular blockade to understand the importance of monitoring when using neuromuscular blockades. Board members noted the physician stayed with the patient throughout treatment. Board members further noted it is impossible to diagnose pseudocholinesterase deficiency unless family history is known and the only treatment is to reintubate and monitor the patient.
Dr. Figge agreed with Board members' assessment regarding the need for reintubation and monitoring.

MOTION: Dr. Farmer moved to issue an Order for Non-Disciplinary CME in addition to the recommended Advisory Letter for inadequate medical records. There is insufficient evidence to support disciplinary action. Within six months, complete no less than 10 hours of Board staff pre-approved Category I CME in postoperative management and management with neuromuscular blockade. The CME hours shall be in addition to the hours required for license renewal.
SENCOND: Dr. Figge
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

11. MD-15-0676A, SCOTT N. KING, M.D., LIC. #46208
Board staff summarized that the licensee admitted to misreading a CT scan which resulted in a nine month delay in diagnosis.

Board members noted Dr. King was in training and should have had an attending physician read and review the scan. Board members agreed Dr. King was not appropriately supervised. Dr. Fromm noted at the time of CT scan reading the patient's cancer was incurable.

MOTION: Dr. Berg moved to offer the physician the opportunity to enter into a Consent Agreement for a Letter of Reprimand based on SIRC's findings. If the physician declines the offer, he shall be invited to appear before the Board for a Formal Interview.

This motion was withdrawn.

MOTION: Dr. Figge moved to issue an Advisory Letter for failure to properly interpret a CT scan. The violation was a one-time minor or technical violation that is not of sufficient merit to warrant disciplinary action.
SENCOND: Dr. Gillard
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

12. MD-14-0910A, BRIAN D. KIMBALL, M.D., LIC. #23681
Dr. Gillard opined the complainant was unhappy about derogatory comments made by technicians and not the physician.

MOTION: Dr. Gillard moved for dismissal.
SENCOND: Dr. Krahn
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

13. MD-15-0098A, MATTHEW J. BURKE, M.D., LIC. #37469
RESOLUTION: Issue an Advisory Letter for action taken by the State of Colorado. There is insufficient evidence to support disciplinary action.

14. MD-14-1398A, BRUCE K. ADAMS, M.D., LIC. #12375
RESOLUTION: Issue an Advisory Letter for inadequate evaluation or management of hypotension in a trauma patient. There is insufficient evidence to support disciplinary action.

15. MD-14-1311A, MARK A. MATHURIN, M.D., LIC. #23700
RESOLUTION: Issue an Advisory Letter for inadequate supervision of a PA leading to failure to recognize arterial insufficiency. There is insufficient evidence to support disciplinary action.

16. MD-15-0698A, KATHRYN L. FICK, M.D., LIC. #47068
RESOLUTION: Issue an Advisory Letter for poor judgment, planning and decision making prior to gynecological surgery. There is insufficient evidence to support disciplinary action.

17. MD-14-1421A, RAHUL D. MEHAN, M.D., LIC. #45544
Board members discussed whether the patient's fall was preventable. Board members noted that the patient was offered assistance and declined it.

MOTION: Dr. Farmer moved for dismissal.
SENCOND: Dr. Fromm
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

18. MD-14-1383A, JANEEN C. R. BJORK, M.D., LIC. #30081
Dr. Gillard noted that SIRC recognized the physician was not the patient's primary obstetrician. Dr. Gillard agreed with the OMC's conclusion that the patient was noncompliant. Board staff noted Dr. Bjork had one visit with the patient. Board members noted that the OMC found Dr. Bjork failed to admit patient for monitoring.

MOTION: Dr. Gillard moved for dismissal.
SENCOND: Dr. Krahn
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

19. MD-14-1541A, DUANE M. WOOTEN, M.D., LIC. #17126
Dr. Perry was recused from this case.

This matter was discussed in conjunction with MD-14-1541B. Board members noted that the physicians left the clinic with less than 24 hours' notice and abandoned their patients. Dr. Gillard noted that Dr. Wooten made himself available by phone to patients for prescription refills. Board members discussed who should be held responsible for ensuring continuity of patient care when there is an impasse between physicians and employers. Board members agreed with OMC's finding of deviation from the standard of care for leaving the practice without reasonable notice.

MOTION: Dr. Berg moved to offer the physician the opportunity to enter into a Consent Agreement for a Letter of Reprimand based on SIRC's findings. If the physician declines, he shall be invited to appear before the Board for a Formal Interview.
SENCOND: Ms. Salter
VOTE: 9-yay, 0-nay, 1-abstain, 1-recuse, 1-absent.
MOTION PASSED.

20. MD-14-1541B, TAMERA B. JORDAN, M.D., LIC. #34494
Board members noted physician left the clinic with less than 24 hours' notice and abandoned her patients. Board members noted that Dr. Jordan did not stay or offer to be available by phone. Board members agreed with OMC's finding of deviation of care leaving a practice without reasonable notice.

MOTION: Dr. Berg moved to offer the physician the opportunity to enter into a Consent Agreement for a Letter of Reprimand based on SIRC's findings. If the physician declines, he shall be invited to appear before the Board for a Formal Interview.
SENCOND: Ms. Salter
VOTE: 10-yay, 0-nay, 1-abstain, 0-recuse, 1-absent.
MOTION PASSED.

R. CASES RECOMMENDED FOR ADVISORY LETTERS WITH NON-DISCIPLINARY CONTINUING MEDICAL EDUCATION ORDERS

MOTION: Dr. Krahn moved to issue an Advisory Letter and Order for Non-Disciplinary CME in item numbers 2 and 3.
SECOND: Dr. Gillard
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

1. MD-14-1173A, LUCIO ARTEAGA, M.D., LIC. #16150
Dr. Figge opined the licensee's actions are egregious and requires discipline. Dr. Gillard agreed with Dr. Figge's comments regarding inappropriate boundaries and noted the patient had a history of Bipolar disease.

MOTION: Dr. Figge moved to offer the physician the opportunity to enter into a Consent Agreement for a Letter of Reprimand and Probation to complete the recommended CME, based on SIRC's findings. If the physician declines, he shall be invited to appear before the Board for a Formal Interview.
SECOND: Ms. Salter
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

2. MD-14-0641A, CARLOS J. LOPEZ, M.D., LIC. #27821
RESOLUTION: Issue Advisory Letter and issue Order for Non-Disciplinary CME for failure to detect abnormal gait and leg length discrepancy in a pediatric patient and for inadequate medical records. The matter was a technical violation that does not rise to the level of discipline. Within six months, complete no less than four hours of Board staff pre-approved Category I CME in the detection, evaluation and management of pediatric hip dysplasia. The CME hours shall be in addition to the hours required for license renewal.

3. MD-14-1120A, CHARLES S. LIPSKIND, M.D., LIC. #17076
Complainant LK spoke during the Public Statements portion of the meeting.

RESOLUTION: Issue Advisory Letter and issue Order for Non-Disciplinary CME for inadequate medical records. There is insufficient evidence to support disciplinary action. Within six months, complete a minimum of 15 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding medical recordkeeping. The CME hours shall be in addition to the hours required for license renewal.

S. REVIEW OF EXECUTIVE DIRECTOR DISMISSALS

MOTION: Dr. Paul moved to uphold the dismissal in item numbers 1-5.
SECOND: Ms. Brister
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

1. MD-15-0156A, ANTHONY C. THEILER, M.D., LIC. #24072
RESOLUTION: Uphold the dismissal.

2. MD-14-1549A, KEVIN S. GOETA-KREISLER, M.D., LIC. #22102
RESOLUTION: Uphold the dismissal.

3. MD-14-1660B, DIONICE S. JULIANO, M.D., LIC. #47188
RESOLUTION: Uphold the dismissal.

4. MD-15-0292A, STEPHEN K. LIAO, M.D., LIC. #24064
RESOLUTION: Uphold the dismissal.

5. MD-15-0927A, HENRY H. ROENIGK, M.D., LIC. #9492
Complainant RC spoke during the Public Statements portion of the meeting. Dr. Roenigk also addressed the Board during the scheduled Public Statements.

RESOLUTION: Uphold the dismissal.

T. PROPOSED CONSENT AGREEMENTS (Disciplinary)

MOTION: Dr. Farmer moved to accept the proposed Consent Agreement in item numbers 1-6.
SECOND: Dr. Krahn
ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Bain, Dr. Berg, Ms. Brister, Dr. Connolly, Dr. Farmer, Dr. Figge, Dr. Fromm, Dr. Gillard, Dr. Krahn, Dr. Paul, Dr. Perry, and Ms. Salter.
VOTE: 12-yay, 0-nay, 0-abstain, (1-recusal noted on item number 4), 0-absent.
MOTION PASSED.

1. MD-14-1132A, VERA A. MEIER-BENNETT, M.D., LIC. #44624
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand and Five Year Probation to participate in PHP. Dr. Meier-Bennett's PHP participation shall be retroactive to 11/4/2014. Once the licensee has complied with the terms of Probation, she must affirmatively petition the Board to terminate the Probation.

2. MD-15-0869A, CELIA R. ELIAS, M.D., LIC. #26173
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand.

3. MD-14-1047A, BRIAN F. MCCABE, M.D., LIC. #23045
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand and Five Year Probation to participate in PHP. Dr. McCabe's PHP participation shall be retroactive to 9/24/2014. Once the licensee has complied with the terms of Probation, he must affirmatively petition the Board to terminate the Probation.

4. MD-14-0327A, HILARIO JUAREZ, M.D., LIC. #12148
Dr. Perry was recused from this case.

RESOLUTION: Accept the proposed Consent Agreement for a Decree of Censure.

5. MD-14-0231A, IRINA V. VOLKOVA, M.D., LIC. #45605
RESOLUTION: Accept the proposed Consent Agreement for a Decree of Censure and Five Year Probation. Dr. Volkova's practice shall be restricted in that she is prohibited from practicing any form of medicine in the State of Arizona until applying to the Board and receiving permission to do so in accordance with the Board's Order. Prior to applying to the Board to request release from the Practice Restriction, Dr. Volkova shall undergo and complete a competency evaluation at a facility approved by the Board or its staff and is responsible for all expenses relating to the evaluation and/or treatment. The licensee must affirmatively petition the Board to terminate the Probation, once the terms of Probation have been met.

6. MD-14-0755A, URSZULA H. KOTLOW, M.D., LIC. #33139
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand.

U. LICENSE APPLICATIONS

i. APPROVE OR DENY LICENSE APPLICATION

MOTION: Dr. Berg moved to approve the license application and issue a license in item numbers 3, 5, 6, 8, and 9.
SECOND: Dr. Farmer
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

1. MD-15-1039A, RICHARD A. HOVERSTEN, M.D., LIC. #N/A
Dr. Hoversten spoke during the Public Statements portion of the meeting and stated he thought he answered all the application questions correctly.

Board staff summarized the case, stating that this was an application for relicensure, after Respondent surrendered his license in May, 2009 after testing positive for controlled substances in violation of his PHP probation. Board staff summarized Respondent's activities since his voluntary surrender, including his recently passed SPEX examination, ongoing issues with substance abuse and licensure with Board of Behavioral Health.

Dr. Paul noted that Respondent had been drug free since 2012, and the PHP Contractor's recommendation was for Dr. Hoversten to complete a comprehensive substance use evaluation since he is currently taking bupenorphrine. Dr. Paul spoke in favor of allowing him to complete the evaluation prior to making a decision on licensure. Dr. Sucher reported that Dr. Hoversten has been monitored by Greenberg and Sucher for the last three years. Dr. Perry asked whether the Respondent met all

the other requirements for licensure and what the Board's options were with regard to licensure. AAG. Smith stated the Board could issue a probationary license or return the case to investigations so that Dr. Hoversten could complete the evaluation that had been recommended. Dr. Gillard noted Dr. Hoversten has shown sobriety and is unable to get Board certified until licensed. Dr. Wolf noted Dr. Hoversten's long history of misrepresenting or answering questions incorrectly on Board applications and stated that this could impact the Board's ability to regulate the physician. Dr. Farmer agreed with Dr. Wolf's statement. Dr. Sucher stated that when Dr. Hoversten has been monitored he did well and observed that Dr. Hoversten's last relapse occurred after he completed a 5 year rehabilitation program.

MOTION: Dr. Farmer moved to deny the license based on A.R.S. § 32-1422(A)(3). The physician shall be offered the opportunity to withdraw his license application within thirty days. If not withdrawn, the license shall be denied.
SECOND: Ms. Salter
Dr. Berg spoke against the motion, noting that it appeared to him that Dr. Hoversten appears to be forthcoming. Dr. Hoversten was asked to address the Board regarding the issue of the incorrect answer, and he stated that he honestly thought that he had disclosed everything. Dr. Figge agreed with Dr. Berg's statements. Dr. Gillard also spoke against the motion, and suggested that Dr. Hoversten should complete a PACE evaluation. Dr. Farmer stated that based on the response, perhaps the best approach would be to table the matter.
The motion was withdrawn.

MOTION: Dr. Krahn moved to table the matter until such time that the applicant has had the opportunity to complete the recommended neuropsychological evaluation.
SECOND: Dr. Paul
Board members discussed whether to require a PACE evaluation be completed, however determined to review the case again after the neuropsychological evaluation was completed prior to ordering a PACE evaluation. .
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

2. MD-15-0417A, SUBHASCHAND R. RAMNAUTH, M.D., LIC. #N/A
Dr. Ramnauth spoke during the Public Statements portion of the meeting. Dr. Krahn stated that Dr. Ramnauth is a board certified vascular surgeon who entered into a non-disciplinary Consent Order with the New Jersey Medical Board and must participate in a fellowship program, which requires a full license.

MOTION: Dr. Krahn moved to deny the license based on A.R.S. § 32-1422(A)(4). Dr. Ramnauth shall be offered the opportunity to withdraw his license application within thirty days. If the application is not withdrawn, the license shall be denied.
SECOND: Dr. Farmer
Dr. Gillard mentioned allowing the doctor to withdraw his application. Board members asked whether the Board could issue a limited license. AAG Smith advised that the Board could put any number of stipulations on a probationary license but stated that the Board must determine whether he meets the minimum requirements for licensure, and the Board's statutory scheme is not set up for a short term limited license, and it has not been done in the past. It was noted that the New Jersey Consent Agreement specifically ordered him to complete this specific fellowship. Board members discussed options for proceeding in this unusual situation.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Bain, Dr. Farmer, Dr. Krahn, Dr. Paul, and Ms. Salter. The following Board members voted against the motion: Dr. Berg, Ms.

Brister, Dr. Connolly, Dr. Figge, Dr. Fromm, Dr. Gillard, and Dr. Perry. The following Board member was absent: Ms. Bain.
VOTE: 4-yay, 7-nay, 0-abstain, 0-recuse, 1-absent.
MOTION FAILED.

MOTION: Based on A.R.S. § 32-1422(A)(4), Dr. Fromm moved to offer the applicant a Consent Agreement for a probationary license pursuant to A.R.S. § 32-1427(H) to restrict the license within the scope and duration of the fellowship training program, and requiring that the physician be supervised by the director of the fellowship program or their designee. Before the physician can be granted a full license, he must demonstrate to the Board his ability to safely practice. If the fellowship does not accept the probationary license, then the license shall be denied. If the applicant declines to enter into the Consent Agreement, the license shall be denied.
SECOND: Dr. Berg
VOTE: 10-yay, 1-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

3. MD-15-0740A, GARY-ANTHONY O. LAWSON-BOUCHER, M.D., LIC. #N/A
   RESOLUTION: Approve the license application and grant the license.

4. THIS MATTER HAS BEEN MOVED TO ITEM R. ii, 1

5. MD-15-1502A, DAVID A. MYERS, M.D., LIC. #N/A
   RESOLUTION: Approve the license application and grant the license.

6. MD-15-1033A, EDWIN N. KENDRICK, M.D., LIC. #N/A
   RESOLUTION: Approve the license application and grant the license.

7. MD-16-0105A, KELLI R. FAVATA, M.D., LIC. #N/A
   Dr. Favata spoke during the Public Statements portion of the meeting.

   Dr. Gillard noted physician failed to renew license and treated 50 patients with an expired license.

   MOTION: Dr. Gillard moved to grant the license and issue an Advisory Letter for practicing on an expired license. There is insufficient evidence to support disciplinary action.
   SECOND: Dr. Farmer
   VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
   MOTION PASSED.

8. MD-15-1325A, FORREST D. LANCHBURY, M.D., LIC. #N/A
   RESOLUTION: Approve the license application and grant the license.

9. MD-15-0573A, AMJAD A. SAFVI, M.D., LIC. #N/A
   RESOLUTION: Approve the license application and grant the license.

ii. APPROVE OR DENY LICENSE APPLICATIONS WITH RECOMMENDATION FROM CHIEF MEDICAL CONSULTANT

MOTION: Dr. Gillard moved to approve the license application and grant the license in item numbers 1-5.
SECOND: Dr. Fromm
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

1. MD-16-0039A, LENARD C. BRUNSDALE, M.D., LIC#N/A
   RESOLUTION: Approve the license application and grant the license.

2. MD-15-1350A, EDWARD YU, M.D., LIC#N/A

RESOLUTION: Approve the license application and grant the license.

3. MD-15-1406A, STEVEN J. WANG, M.D., LIC#N/A
   RESOLUTION: Approve the license application and grant the license.

4. MD-16-0094A, JEFFREY T. SUGIMOTO , M.D., LIC#N/A
   RESOLUTION: Approve the license application and grant the license.

5. MD-16-0030A, RAMASWAMY RAVIKUMAR , M.D., LIC#N/A
   RESOLUTION: Approve the license application and grant the license.

iii. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING LICENSURE BY ENDORSEMENT PURSUANT TO A.R.S. § 32-1426(B) AND R4-16-201(F)

a. ADMINISTRATIVELY COMPLETE

MOTION: Ms. Brister moved to grant the license in item numbers 1-3.
SECOND: Dr. Krahn
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

1. ANNA GEORGE, M.D.
   RESOLUTION: Grant the license.

2. JOY MADARANG-LEWIS, M.D.
   RESOLUTION: Grant the license.

3. VICTOR A. FOLARIN, M.D.
   RESOLUTION: Grant the license.

b. ADMINISTRATIVELY INCOMPLETE

1. ISIS BOTTROS, M.D.
   Board staff stated the only outstanding deficiency item is license verification from New York Medical Board.

   MOTION: Dr. Gillard moved to grant the license once satisfactory verification is received from the New York Medical Board.
   SECOND: Ms. Brister
   VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
   MOTION PASSED.

iv. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING APPLICANT'S REQUEST FOR WAIVER OF PRIMARY SOURCE REQUIREMENT

1. BADRELDIN IBRAHIM, M.D.
   MOTION: Dr. Gillard moved to grant the applicant's request for waiver of primary source requirement.
   SECOND: Dr. Paul
   VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
   MOTION PASSED.

OTHER BUSINESS

V. GENERAL CALL TO THE PUBLIC

There were no individuals that addressed the Board during the General Call to the Public.

MOTION: Dr. Fromm moved to table the remaining items on the agenda for Friday, February 5, 2016 and adjourn the meeting.
SECOND: Ms. Brister
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

The meeting adjourned at 6:30 p.m.

FRIDAY, FEBRUARY 5, 2016

GENERAL BUSINESS

A. CALL TO ORDER

Dr. Perry called the meeting to order at 8:15 a.m.

B. ROLL CALL

The following Board members were present: Ms. Bain, Dr. Berg, Ms. Brister, Dr. Connolly, Dr. Farmer, Dr. Figge, Dr. Fromm, Dr. Gillard, Dr. Krahn, Dr. Paul, Dr. Perry, and Ms. Salter.

ALSO PRESENT

Present among Board staff include: Carrie Smith, Assistant Attorney General ("AAG"); Anne Froedge, AAG, Patricia E. McSorley, Executive Director; Kristina Fredrickson, Deputy Director; Stuart Goodman, Legislative Liaison; William Wolf, M.D., Chief Medical Consultant; Anita Shepherd, Investigations Manager; Mary Bober, Board Operations Manager; and Andrea Cisneros, Staff Investigational Review Committee Coordinator.

C. PUBLIC STATEMENTS REGARDING MATTERS LISTED ON THE AGENDA

There were no individuals that addressed the Board during the Call to the Public.

D. FORMAL INTERVIEWS

1. MD-12-1410A, PAUL A. OVERLIE, M.D., LIC. #23889

   Dr. Overlie was present with legal counsel, Attorney Andrew Plattner. Board staff summarized the case and stated that Dr. Overlie was issued a Letter of Admonition by the Colorado Medical Board for unprofessional conduct and failure to conform to minimal standards of acceptable medical practice. The Order required Dr. Overlie to complete an assessment with CPEP within 120 days of the Order. Dr. Overlie completed the assessment on January 29, 2013 but disagreed with the findings. On February 7, 2014 the Texas Medical Board ordered Dr. Overlie to comply with the Colorado Order. On February 20, 2013 the New Mexico Board voted to offer Dr. Overlie a stipulated Order that required him to comply with the Colorado Board's Order. Dr. Overlie underwent the second assessment in April 2014. The CPEP assessment reported Dr. Overlie had a good overall medical knowledge and his clinical judgement and reasoning ranged from good to questionable.

   Dr. Overlie commented on the patient care issue from July 2005. Dr. Overlie stated he was on call in the evening and examined the patient at 8:00 pm. Dr. Overlie explained the patient was agitated and presented with dysrhythmias. Dr. Overlie summarized the patient was managed with medical care, had a failed intervention of his LAD, an echo was completed, throughout the night the patient's blood pressure rose and fell and eventually the patient succumbed to death. Dr. Overlie opined that the standard of care was not violated and throughout the entire disciplinary process he has gained hundreds hours of CMEs and he has not lost his status with any of the device companies. Dr. Overlie noted throughout his forty year career he has had only two medical malpractice settlements.

   Mr. Plattner noted that Dr. Overlie had no formal disciplinary action in any state based on this case. Dr. Plattner commented that Dr. Overlie has been a pioneer in the EP field and his practice was the first in the country to use a stint for a heart attack. Mr. Plattner mentioned the second CPEP assessment showed improvement and that the delay in Dr. Overlie completing all CPEP's requirements was due to the need for a second assessment. Mr. Plattner noted Dr. Overlie practices in Texas and does not practice in Arizona.

Dr. Berg commented on the attorney's representation that no disciplinary action had been taken in any state when Board staff reported disciplinary actions in Colorado and California. Mr. Plattner clarified there has been no sanctions towards Dr. Overlie's license. Board members commented on Dr. Overlie signed the Colorado Board Order voluntarily and therefore he must complete all requirements arising from it. A Board member commented on the unresponsiveness from Dr. Overlie and his attorney to the Board's request for the CPEP assessment. Board members discussed Dr. Overlie and his attorney inability to reply to the Board's request until the requested documentation was made available to them from CPEP and the various states involved. Dr. Fromm found it concerning that Dr. Overlie ordered an echo to be done that day but did not take time to look at it himself or have another physician look at the screens but instead verbally discussed the results with the tech.

MOTION: Dr. Fromm moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(o) - Action that is taken against a doctor of medicine by another licensing or regulatory jurisdiction due to that doctor's mental or physical inability to engage safely in the practice of medicine, the doctor's medical incompetence or for unprofessional conduct as defined by that jurisdiction and that corresponds directly or indirectly to an act of unprofessional conduct prescribed by this paragraph. The action taken may include refusing, denying, revoking or suspending a license by that jurisdiction or a surrendering of a license to that jurisdiction, otherwise limiting, restricting or monitoring a licensee by that jurisdiction or placing a licensee on probation by that jurisdiction.
SECOND: Dr. Paul
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

Dr. Fromm opined an Advisory Letter is appropriate due to the physician demonstrating substantial compliance with his remediation plan and rehabilitation to include participation in two CPEP activities and post educational assessment. Dr. Gillard noted the Dr. Overlie practices in Texas and the Texas Board has not disciplined his license regarding this case.
MOTION: Dr. Fromm moved to issue a non-disciplinary Advisory Letter for action taken by California, Colorado, New Mexico, and Texas. While the licensee has demonstrated substantial compliance through rehabilitation or remediation that has mitigated the need for disciplinary action, the Board believes that repetition of the activities that led to the investigation may result in further Board action.
SECOND: Dr. Krahn
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

2. MD-14-0927A, ROGER K. OTTMAN, M.D., LIC. #45551
Dr. Gillard was recused from this case. Dr. Ottman was present with legal counsel, Attorney Scott Holden.

Dr. Ottman explained the patient had some bleeding but was mentally and physically stable. The patient had normal vital signs, received appropriate treatment for pain and was given IV fluids. Dr. Ottman stated ultrasound results showed a need for intervention and a call was made for an OBGYN consultant. Dr. Ottman stated he was given a wait time of one hour and opined that given the stable vital signs this seemed acceptable. Dr. Ottman stated though the patient was not constantly monitored there was constant observation. Dr. Ottman explained that the nurses came to him for orders because he was immediately available and treating other patients in the room. Dr. Ottman stated pain medication was given based off the nurse's assessment unless there were unstable vital signs.

In closing, Mr. Holden noted that in the currently pending civil lawsuit the family accused the nursing staff of malfeasance.

Ms. Salter opined that the nursing care was inappropriate and Dr. Ottman relied on information provided by them. Ms. Salter inquired if Board staff has reported the nursing staff in this case to the Nursing Board. Board staff stated a referral has not been made to the Nursing Board. Dr. Connelly commented on lack of nursing notes throughout the entire ER record. Board members agreed with not starting hourly monitoring and that it is appropriate to order blood if a patient arrived with bleeding. Dr. Fromm commented on issues with electronic medical records. Board members commented on not being able to find any nursing narrative which made it difficult to follow the communication between the nursing staff and physician. Dr. Figge noted that from his personal opinion, when he is in the ER if a nurse knows he has seen the patient they will continue to come to him for orders.

MOTION: Dr. Figge moved for dismissal.
SECOND: Dr. Krahn
VOTE: 10-yay, 1-nay, 0-abstain, 1-recuse, 0-absent.
MOTION PASSED.

3. MD-13-1456A, MICHAEL P. NEWCOMB, M.D., LIC. #21132
Dr. Perry was recused from this case. Dr. Newcomb was present with legal counsel, Attorney Scott King. Board staff summarized that the Board received a notification of a malpractice settlement regarding Dr. Newcomb's care and treatment of patient KD alleging failure to ensure that an order for a gynecology consultation was followed; which resulted in the death of the patient due to vaginal bleeding. The MC found that Dr. Newcomb deviated from the standard of care by failing to assure that the ASAP gynecology consultations was obtained, failed to perform a vaginal exam for a patient with active vaginal bleeding and failed to follow the H and H values.

Mr. King told the Board during the lawsuit the patient's daughter testified that she attended a two hour meeting with the director of nursing, the charge nurse and the CNA involved in KD's care. During the meeting the charge nurse admitted that on April 5, 2012 he was called into the room by the daughter and observed that a flat soccer ball sized clot had passed. The charge nurse admitted after he left the room, he went home and did not call the doctor or order labs. Mr. King noted that on April 5th the patient passed twelve clots and Dr. Newcomb was not notified. Mr. King noted that Dr. Newcomb was not notified of KD's ongoing vaginal bleeding. Mr. King told the Board when Dr. Newcomb was notified that the patient was diaphoretic and tachycardic, Dr. Newcomb gave an Order for the patient to be sent to the ER for evaluation on April 6, 2012.

Dr. Newcomb explained he works in a rehab facility, which is a subacute setting, and he completes home visits. Dr. Newcomb explained the facility staff completes rounds on a daily basis due to the patients coming out of a hospital. Dr. Newcomb stated that the facility uses electronic medical records and that anytime there is a change in condition there should be collaboration between the nurse practitioner and the physician. Dr. Newcomb clarified that the gynecology consultation was to be scheduled as soon as possible or upon discharge and if the appointment was not able to be scheduled the nurse would notify him.

A Board member disagreed with the MC and stated that the patient's hemoglobin levels were consistent and Dr. Newcomb would not be able to monitor anemic levels in a subacute setting.

In closing, Mr. King noted that the gynecology appointment was scheduled and the order was completed. Mr. King noted that Dr. Bagley's treatment of the patient a month earlier was similar to Dr. Newcomb's treatment in this case; however; the important difference is Dr. Newcomb was not notified of the blood clots being passed.

Dr. Paul stated the doctor and rehab facility did not deviate from the standard of care and that with regards to the hemoglobin aspect he would not have ordered more H and H testing. Dr. Paul noted the patient was considered close to discharge and the physician was not made aware of the vaginal bleeding. Dr. Paul stated the electronic medical

records are acceptable and that the patient had a number of medical issues. Board members agreed that the doctor cannot treat the patient if not notified of changes.

MOTION: Dr. Paul moved for dismissal.
SECOND: Dr. Figge
VOTE: 11-yay, 0-nay, 0-abstain, 1-recuse, 0-absent.
MOTION PASSED.

4. MD-14-0327B, DANIEL FANG, M.D., LIC. #30861

Dr. Perry was recused from this case. Dr. Fang was present with legal counsel, Attorney Paul Giancola. Board staff summarized that on August 11, 2011 the patient underwent a duodenal switch and the MC opined that Dr. Fang deviated from the standard of care by failing to timely diagnose the abdominal sepsis that ultimately led to the death of the patient. The MC stated signs of abdominal sepsis were disregarded as patient was tachycardic from the first day and continued to decline post-operatively. An Upper GI study was ordered and did not show a leak. The patient was transferred to Dr. Fang from Dr. Juarez on post-operative day one. Dr. Juarez had completed an exam before transfer of care and diagnosed acute pancreatitis.

Dr. Fang stated he has learned from this case and now has a more thorough sign off during transfer of patients. Dr. Fang explained he reviewed the upper GI results which showed no leaks and supported Dr. Juarez' working diagnosis of acute pancreatitis. Dr. Fang did not question the diagnosis until his morning examination of the patient. Dr. Fang explained when he re-examined patient in the morning of August 13, 2011 as she was transferred to the ICU; there were no clear signs of peritonitis or abdominal sepsis. Dr. Fang stated he admitted the patient to ICU after the nurse called him that patient was unresponsive to the fluid challenges.

In closing, Mr. Giancola noted that Dr. Fang had a face to face discussion with the operating surgeon, who had just evaluated the patient. Mr. Giancola also noted that true pancreatitis is not treated surgically and that surgery can pose a great risk to the patient.

Dr. Farmer opined there was unprofessional conduct in regards with the delay in seeing the patient possibly changing the outcome.

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

Dr. Berg observed that the nineteen hour absence of an examination by a physician noted by the OMC is closer to fourteen hours. Dr. Berg opined the need for more informed notes from the nursing staff should not reflect negatively on the physician. Dr. Krahn opined there was reason not to operate prematurely and noted Dr. Fang's consideration of another diagnosis of peritonitis. Dr. Fromm agreed with Dr. Fang that the working diagnosis was supported and did not see a basis for a finding of unprofessional conduct. Dr. Fromm opined that Dr. Fang's approach at time was appropriate. Dr. Figge opined that Dr. Fang went to great lengths to verify a working diagnosis and that there were no signs of a leak. Dr. Gillard agreed that the diagnosis of pancreatitis was strongly supported and he did not believe that the delay of getting the patient into the OR would affect the outcome. Dr. Krahn and fellow board members noted electronic medical records were difficult to read and that nursing notes were difficult to find in the record.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Berg and Dr. Farmer. The following Board members voted against the motion: Ms. Bain, Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Fromm, Dr. Gillard, Dr. Krahn, Dr. Paul, and Ms. Salter. The following Board member was recused: Dr. Perry.
VOTE: 2-yay, 9-nay, 0-abstain, 1-recuse, 0-absent.
MOTION FAILED.

MOTION: Dr. Fromm moved for dismissal.
SECOND: Dr. Figge
ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Fromm, Dr. Gillard, Dr. Krahn, Dr. Paul, Dr. Perry, and Ms. Salter. The following Board members voted against the motion: Ms. Bain, Dr. Berg, and Dr. Farmer. The following Board member was recused: Dr. Perry.
VOTE: 8-yay, 3-nay, 0-abstain, 1-recuse, 0-absent.
MOTION PASSED.

E. FORMAL INTERVIEWS

1. MD-14-1175A, LISA M. YORK, M.D., LIC. #24012

Dr. York was present with legal counsel, Attorney Gordon Lewis.

Board staff summarized that the Board received a complaint against Dr. York for inappropriate billing. In 2010 the patient went to Dr. York's office and an office staff member performed a rapid strep test. The patient received a $15 bill for the test. The patient attempted to ask the office why she was charged for the test and failed to gain a response and was sent to claims. On November 17, 2014 Dr. York sent a fax containing the patient's statement showing the $15 charge dismissal and a letter from Dr. York to collections agency requesting that the charge to be dismissed. Board staff called Dr. York but was unable to leave a message. The Board staff made multiple requests for documents and a response via fax, mail and email. No response was received from Dr. York.

Dr. York stated she understands her responsibility to respond to the Board's requests and thought that she had adequately responded. Dr. York explained that due to family health issues and staff issues she decided to close her practice in November 2014. In the months preceding the closure she had temporary staff copying records, running the front office, answering phones and obtaining mail. She attributes the miscommunication and failure to respond to the board to the temporary staff and updating her mailing address with the Board. Dr. York stated she has updated her contact information with the Board and will not let it lapse again.

Dr. Krahn expressed the importance of the Board being able to communicate with its Licensees. Dr. Krahn noted that Dr. York responded with a three page fax at one point and therefore was aware of an investigation and the need for the Board to be able to be in contact.

In closing, Mr. Lewis stated Dr. York did respond to the request but failed to keep her contact information updated with the Board but has since rectified the issue.

Dr. Perry commented on the difficulty of changing or closing a practice and understands how this situation could arise and does not find a need for discipline. Dr. Fromm noted the Board requires all physicians to keep an appropriate or updated address with the Board. Dr. Figge agreed with Dr. Fromm regarding the need for consistency.

MOTION: Dr. Krahn moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(dd) - Failing to furnish information in a timely manner to the Board or the Board's investigators or representatives if legally requested by the Board.
SECOND: Dr. Figge
VOTE: 9-yay, 2-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

Dr. Krahn opined that this violation did not rise to the level of discipline and recommended an advisory letter.
MOTION: Dr. Krahn moved to issue a non-disciplinary Advisory Letter reminding the physician of the need to keep her contact information up to date with the Board.

SECOND: Dr. Figge
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

Ms. Salter commented on the need to include the rationale in the Advisory Letter motion.
MOTION: Dr. Krahn moved to rescind the Advisory Letter.
SECOND: Dr. Figge
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

MOTION: Dr. Krahn moved to issue a non-disciplinary Advisory Letter reminding the physician of the need to keep her contact information up to date with the Board. While the licensee has demonstrated substantial compliance through rehabilitation or remediation that mitigates the need for disciplinary action, the Board believes that repetition of the activities that led to the Board's investigation may result in further Board action against the licensee.
SECOND: Dr. Figge
VOTE: 11-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.
MOTION PASSED.

OTHER BUSINESS

F. GENERAL CALL TO THE PUBLIC

TB addressed the Board during the General Call to the Public regarding her plastic surgery performed by Dr. William Leighton. DW also addressed the Board on behalf of TB.

MOTION: Dr. Perry moved for adjournment.
SECOND: Dr. Gillard
VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.
MOTION PASSED.

The meeting adjourned at 3:35 p.m.

Patricia E. McSorley

Patricia E. McSorley, Executive Director