



Arizona Medical Board

9545 East Doubletree Ranch Road • Scottsdale, Arizona 85258

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**FINAL MINUTES FOR
REGULAR SESSION MEETING
Held on Wednesday, August 3, 2016
And on Thursday, August 4, 2016
9535 E. Doubletree Ranch Road • Scottsdale, Arizona**

Board Members

James M. Gillard, M.D., M.S., F.A.C.E.P., F.A.A.E.M., Chair
R. Screven Farmer, M.D., 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.
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.

Wednesday, August 3, 2016

GENERAL BUSINESS

A. CALL TO ORDER

Dr. Gillard called the meeting to order at 9:00 a.m.

B. ROLL CALL

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

The following Board members were absent: Dr. Fromm and Dr. Berg.

ALSO PRESENT

Present among Board staff include: Carrie Smith, Assistant Attorney General ("AAG"); Anne Froedge, AAG, Patricia E. McSorley, Executive Director; Kristina Fredericksen, Deputy Director; William Wolf, M.D., Chief Medical Consultant; Andrea Cisneros, Staff Investigational Review Committee ("SIRC") Coordinator, Raquel Rivera, Interim Acting Investigations Manager; Mary Bober, Board Operations Manager; and Michelle Robles, Board Coordinator.

C. PUBLIC STATEMENTS REGARDING MATTERS LISTED ON THE AGENDA

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

D. EXECUTIVE DIRECTOR'S REPORT

MOTION: Dr. Krahn moved to table this item.

SECOND: Ms. Bain.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

- Discussion Regarding Scheduling for 2017 Board Meeting Calendar
- Review, Discussion and Possible Action on Approval of FY 2016-2017 Annual Report
- Review, Discussion and Possible Action on Approval of FY 2016-2020 Strategic Plan
- Review, Discussion and Possible Action on Approval of FY 2018 Budget
- Update on the Interstate Medical Compact Licensure Commission

E. CHAIR'S REPORT

Dr. Gillard had no updates for the Chair's Report.

F. LEGAL ADVISOR'S REPORT

- Update on Case No MD-16-0639A Commencement of Arbitration Proceedings pursuant to A.R.S. § 32-2907
- Update on CV2014-054509
- Update on Case No 2:15-cv-01022-JJT

G. APPROVAL OF MINUTES

Dr. Figge requested that the June 1-2, 2016 Regular Session minutes be corrected to reflect that he was recused for Agenda item I.2. .

MOTION: Dr. Figge moved to approve the June 1-2, 2016 Regular Session, including Executive Session as corrected; and the June 2, 2016 Special Meeting, including Executive Session.

SECOND: Ms. Bain.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

LEGAL MATTERS

H. FORMAL INTERVIEWS

1. MD-15-0144A, NISHITH S. SHAH, M.D., LIC. #31035

Dr. Shah was present with legal counsel Christopher Smith.

Board staff stated that the case was initiated when the licensee answered affirmatively on his 2012 renewal that his treatment of a patient was being investigated by the Arizona Dental Board. The Medical Consultant ("MC") noted multiple deviations from the standard of care. The MC found actual harm in that CN died.

Mr. Smith stated that Dr. Shah has completed the CME required by the Arizona Dental Board and that the matter has been adjudicated by that Board Mr. Smith further stated that the issue in this case is two separate Board's investigations resulting in different conclusions and requested the case be resolved with a dismissal or issuance of an Advisory Letter.

During questioning by Board members, Dr. Shah stated that he completed a six month residency in anesthesiology and is familiar with the medications and protocol. He explained that his goal in this case was to keep the patient comfortable with moderate sedation. Dr. Shah clarified that he has three trained assistants who assist him with procedures.. Dr. Shah explained that the case progressed routinely until the patient's oxygen saturation suddenly dropped. He immediately started chest compressions administered medication while waiting for EMS. Once EMS arrived care was handed over to EMS Dr. Shah reported he has since changed his policy to require ACLS training for his assistants, monitors record vitals every five minutes.

MOTION: Dr. Farmer moved for the Board to enter into Executive Session pursuant to A.R.S. § 38-431.03(A)(2).

SECOND: Ms. Bain.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

The Board entered into Executive Session at 10:40 am
The Board returned to Open Session at 10:46 a.m.
No legal action was taken by the Board during Executive Session.

Dr. Farmer expressed his concern regarding Dr. Shah's understanding of general anesthetics, record documentation and that Dr. Shah admitted he was unaware of a black box warning on medication he administered.

MOTION: Dr. Farmer moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(e) and (q) as stated by SIRC with the exception of the issues regarding the pre-operative work up.

SECOND: Ms. Bain.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

Dr. Farmer stated that the issues raised by this case involved basic anesthesia knowledge. Dr. Farmer opined that he believed Dr. Shah needed additional in person CME regarding sedation and general anesthetics.

MOTION: Dr. Farmer moved to grant the license renewal and draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and 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 sedation and general anesthesia. The CME hours shall be in addition to the hours required for license renewal. The Probation shall terminate upon proof of successful completion of the CME coursework.

SECOND: Dr. Paul.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Gillard, Dr. Farmer, Ms. Bain, Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Krahn, Dr. Paul and Ms. Salter. The following Board members were absent: Dr. Berg and Dr. Fromm.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

2. MD-14-1496A, FRANCIS J. WOO, M.D., LIC. #10705

A.E. addressed the Board. Dr. Woo was present without legal counsel.

Board staff reported that the case was initiated after receiving a complaint regarding Dr. Woo's treatment of a 59 year old female patient of ED alleging inappropriate prescribing. The Medical Consultant ("MC") found that Dr. Woo did not obtain an appropriate past medical, or medication history, and did not perform an appropriate physical assessment. The MC noted that no consultations with appropriate psychiatric professionals were requested, and that medications were refilled multiple times with no follow-up visits.

In his opening statement, Dr. Woo stated that ED was an established patient and that he treated her to the best of his ability given her financial and living situation..

During questioning, Dr. Woo explained he recommended ED establish treatment from physicians in the Phoenix area and treatment from a psychiatrist and mental health provider but she refused. Dr. Woo clarified that his office would refuse her requests for early refills due to her history of not using the medicine as prescribed.

In closing, Dr. Woo referenced that per the Pharmacy Board report his prescribing pattern are within the normal standards and that chronic anxiety requires lifelong treatment.

During deliberation, Dr. Krahn noted that the patient lived in the metropolitan area where physicians and mental health providers are easily accessible. Dr. Krahn opined she found

unprofessional conduct in this case due to the lack of thorough evaluation or clear treatment plan, as well as inadequate medical records and rationale for medication.

MOTION: Dr. Krahn moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(e) and (q) as stated by SIRC.

SECOND: Dr. Figge.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

Dr. Krahn expressed concern regarding Dr. Woo's care and remarked that there are tools to provide physicians for contingencies for a non-compliant patients including refusing to prescribe medication, and reducing refills.

MOTION: Dr. Krahn moved for a draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and 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 prescribing controlled substances. The CME hours shall be in addition to the hours required for license renewal. The Probation shall terminate upon proof of successful completion of the CME.

SECOND: Ms. Salter.

Ms. Brister opined it is difficult for a physician to make recommendations if the patient refuses to pursue additional help.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Gillard, Dr. Farmer, Ms. Bain, Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Krahn, Dr. Paul and Ms. Salter. The following Board members were absent: Dr. Berg and Dr. Fromm.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

3. MD-14-1202A, MICHAEL R. JERMAN, M.D., LIC. #17678

Dr. Figge was recused from this matter. Dr. Jerman was present with Counsel Steve Myers.

Board staff summarized this formal interview is a continuation of the June 2016 meeting interview. Dr. Jerman voluntarily entered into a confidential board order which he violated by drinking alcohol. Dr. Jerman then entered in Consent Agreement for an interim practice restriction which he violated. Board staff maintains their recommendation for discipline and probation to participate in the Physician Health Program.

During questioning, Dr. Jerman clarified that he was not on call during the night in question, as he had initially reported to the Board. Dr. Jerman informed the Board that at the time of the DUI, he had just completed twenty two hours of continuous patient care, including a difficult case involving a patient death.

With regard to the alcohol consumption that resulted in the finding that his Interim Consent Agreement had been violated, Dr. Jerman stated that he assumed the Court's dismissal of his DUI case would also end his monitoring agreement with the Board.

In closing, Mr. Myers opined there is insufficient evidence of impairment at time of Dr. Jerman's arrest, and that Dr. Jerman does not qualify for DSM criteria for alcoholism. Board staff reiterated that Dr. Jerman's initial report was that he drank a small bottle of champagne and drove home while on call. Dr. Jerman signed a Consent Agreement for a Board Order he would not consume alcohol for two years. Board staff expressed concern that he was still under the terms of the Board Order which he violated when he drank alcohol.

MOTION: Dr. Connolly moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(a), (f), (q) and (r) as stated by SIRC.

SECOND: Dr. Farmer.

Board Members discussed concerns regarding Dr. Jerman's consumption of alcohol. The Board agreed that the inpatient treatment center documentation was credible evidence of alcohol dependence and that there is clear and credible evidence of unprofessional conduct when Dr. Jerman made the decision to consume alcohol while under a Board order prohibiting him from doing so.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

MOTION: Dr. Connolly moved for a draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Five Year Probation to participate in the PHP. Dr. Jerman's participation shall be retroactive to May 1, 2015. After one year from the date of this Order, Dr. Jerman may request that the Board terminate the Probation.

SECOND: Ms. Salter.

Board members agreed that the dismissal of the DUI through the legal system does not negate the clear violations that occurred. Board staff confirmed Dr. Jerman is compliant with the current interim consent agreement. Dr. Connolly recommended adding the language for early termination due to the mitigating factor of the DUI being dismissed.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Gillard, Dr. Farmer, Ms. Brister, Dr. Connolly, Dr. Krahn, Dr. Paul and Ms. Salter. The following Board member abstained: Ms. Bain. The following Board member was recused: Dr. Figge. The following Board members were absent: Dr. Berg and Dr. Fromm.

VOTE: 8-yay, 0-nay, 1-abstain, 1-recuse, 2-absent.

MOTION PASSED.

4. MD-15-0992A KRISTOPHER B. JOHNSON, M.D., LIC. #R71536

Dr. Johnson was present with Counsel Paul Giancola.

Board staff presented that after receiving a report from the hospital where Respondent held privileges that Dr. Johnson, a general surgery resident, was suspended from the residency program after testing positive for alcohol. Dr. Johnson was referred to the Physician Health Program ("PHP") to undergo a health assessment. Respondent subsequently completed an evaluation and on January 15, 2016, Dr. Johnson entered into an Interim Consent Agreement to Participate in PHP. Dr. Johnson remains in compliance with the terms and conditions of the PHP Interim Consent Agreement.

Dr. Johnson stated he is grateful to be in the PHP program and that he is in a much better place in his life and is back in his residency. Dr. Johnson stated he has been compliant with the Board's Order and treatment and is requesting a confidential SRA.

In closing Mr. Giancola outlined mitigating factors in Mr. Johnson's case and requested a confidential SRA or a confidential SRA with an Advisory Letter.

MOTION: Ms. Salter moved for the Board to enter into Executive Session pursuant to A.R.S. § 38-431.03(A)(2).

SECOND: Dr. Figge

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

The Board entered into Executive Session at 1:34 pm

The Board returned to Open Session at 1:39p.m.
No legal action was taken by the Board during Executive Session.

MOTION: Dr. Krahn moved to table the case.
SECOND: Ms. Figge.
VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.
MOTION PASSED.

MOTION: Dr. Krahn moved for a finding for unprofessional conduct in violation of A.R.S. § 32-1401(27)(f).
SECOND: Dr. Figge.
VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.
MOTION PASSED.

MOTION: Dr. Krahn moved to issue an Advisory Letter for habitual intemperance. While the licensee has demonstrated substantial compliance through rehabilitation 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: Dr. Figge.

Board members stated this case does not rise to the level of discipline due to the testimony given by Dr. Johnson and his remediation through treatment.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.
MOTION PASSED.

I. FORMAL INTERVIEWS

1. MD-13-1342A, JOSHUA M. DOPKO, M.D., LIC. #32865
Dr. Dopko was present with Counsel Fred Cummings.

Board staff reported that this case was initiated after review of another matter involving Dr. Dopko's Physician Assistant ("PA"), who was found to be prescribing high amounts of controlled substances without appropriate physician supervision.

In his opening statement, Dr. Dopko explained that he first met the PA when he was the ER director and chief of staff. During that time Dr. Dopko stated he never experienced issues with the PA. Subsequently, he agreed to be supervising physician for the the PA. Dr. Dopko texted the PA informing his that he would discontinue supervision and was not aware that the PA continued to see patients. Dr. Dopko reiterated that he cooperated with the DEA's investigation of the PA. Dr. Dopko admits he should not have agreed to be a supervising physician without understanding the statutory requirements for supervision.

In closing, Mr. Cummings stated that Dr. Dopko is remorseful for his involvement with this PA and referenced support letters asserting that Dr. Dopko was as much a victim of the PA as the public was. Mr. Cummings noted that Dr. Dopko is now aware of the statutes, does not plan to become a supervising physician in the future and requested that the Board issue an Advisory Letter.

MOTION: Dr. Paul moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(a) and (ii) as stated by SIRC.
SECOND: Dr. Farmer.
VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.
MOTION PASSED.

Dr. Paul opined that due to the mitigating factors in this case such as his extensive career, support letters, and cooperation in the DEA case; this matter does not rise to the level of discipline.

MOTION: Dr. Paul moved to issue an Advisory Letter for inadequate supervision of a Physician Assistant. While the licensee has demonstrated substantial compliance through 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: Dr. Farmer

Dr. Gillard spoke for the motion since the physician has done a lot to mitigate the situation. Dr. Krahn opined it is hard to be aware of something when you are not informed.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.
MOTION PASSED.

2. This matter was pulled from the Board's Agenda.
3. This item was moved to Consent Item "O" number 12.
4. MD-14-1443A, JOHN E. HENSLER, M.D., LIC. #5346
MOTION: Dr. Krahn moved for to continue the Formal Interview at a future Board meeting.
SECOND: Ms. Brister.
VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.
MOTION PASSED.

CONSENT AGENDA

J. CASES RECOMMENDED FOR DISMISSAL

MOTION: Dr. Figge moved to dismiss the pending investigation in item numbers J1-7.
SECOND: Dr. Paul.
VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.
MOTION PASSED.

1. MD-14-0505A, NEAL A. KLEIN, M.D., LIC. #12569
Dr. U addressed the Board during the Public Statements portion.
RESOLUTION: Dismiss.
2. MD-14-1604A, ROBERT R. MAXWELL, M.D., LIC. #7468
RESOLUTION: Dismiss.
3. MD-14-1671A, JOHN M. KASSENBRUCK, M.D., LIC. #17245
RESOLUTION: Dismiss.
4. MD-14-0699A, GLEN J. MCCrackEN, M.D., LIC. #23445
RESOLUTION: Dismiss.
5. MD-14-1393A, STEVE FANTO, M.D., LIC. #21415
K.J. and A.J. F. addressed the Board at the Public Statements portion.
RESOLUTION: Dismiss.
6. MD-15-0501A, GAREY S. SIMMONDS, M.D., LIC. #23958
RESOLUTION: Dismiss.
7. MD-15-0384A, INI E. EKPO, M.D., LIC. #35735
RESOLUTION: Dismiss.

K. CASES RECOMMENDED FOR ADVISORY LETTERS

MOTION: Ms. Brister moved to issue an Advisory Letter in item numbers 1-5, 7-9, 11, 12, 14-16, 20, 23, 26, 29, and 30.

SECOND: Dr. Paul.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

1. MD-15-0038A, MUHAMMAD M. SALIM, M.D., LIC. #24008
RESOLUTION: Issue an Advisory Letter for inadequate evaluation/analysis of a patient, inappropriate prescription of fluconazole, and inadequate medical records. There is insufficient evidence to support disciplinary action.
2. MD-15-1165A, JULIA L. BRUCE, M.D., LIC. #47103
RESOLUTION: Issue an Advisory Letter for action taken by the state of Colorado. There is insufficient evidence to support disciplinary action.
3. MD-14-1677A, RAHOOL S. KARNIK, M.D., LIC. #41783
RESOLUTION: Issue an Advisory Letter for inadequate response to a patient requiring urgent cardiology consultation. There is insufficient evidence to support disciplinary action.
4. MD-15-0500A, ABEL SALAZAR, M.D., LIC. #21717
RESOLUTION: Issue an Advisory Letter for continuing metformin a patient with a rising creatinine. There is insufficient evidence to support disciplinary action.
5. MD-15-0197A, SCOTT R. SIEBEL, M.D., LIC. #29471
RESOLUTION: Issue an Advisory Letter for either not reviewing or failing to document his review of a preoperative ECG. The violation is a technical violation that is not of sufficient merit to warrant disciplinary action.
6. MD-14-1673A, KEVIN A. STAHL, M.D., LIC. #23129
Attorney Megan Evans and Dr. Stahl addressed the Public Statements portion of the meeting.

Dr. Farmer summarized that this was a complex case of bipolar disorder and that this case consisted of 23 visits and multiple psychiatrists who came to the same treatment plan. Dr. Farmer noted the documentation was adequate. Dr. Krahn opined this was a case of good care where there was a difficult patient and FDA approved medications were used. Dr. Farmer recommended dismissal.

MOTION: Dr. Farmer moved to dismiss.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

7. MD-14-1085A, TERRENCE T. CROWDER, M.D., LIC. #41364
RESOLUTION: Issue an Advisory Letter for inadequate communication with the patient and/or caregiver, and for lack of timely response to the Arizona Medical Board. There is insufficient evidence to support disciplinary action.
8. MD-15-0826A, WEIMIN K. HU, M.D., LIC. #34002
RESOLUTION: Issue an Advisory Letter for inadequate records. 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 actions against the licensee.
9. MD-15-0667A, EDUARDO MIRANDA-ARNOLD, M.D., LIC. #19053
RESOLUTION: Issue an Advisory Letter for actions taken by other regulatory jurisdictions. There is insufficient evidence to support disciplinary action.
10. MD-15-0172A, SAMIR S. SHAH, M.D., LIC. #37900
Dr. Gillard summarized the licensee is a radiologist with a malpractice settlement for allegations of a delayed interventional radiology resulting in a knee amputation and that the MC stated that the physician's contribution was minimal and not significantly below the standard of care.

Board staff clarified that Dr. Shah was not involved for the first five days but the concern was that he had identified the popliteal pseudo aneurism in a patient who had ischemia after five days and recommended the repair for the next morning resulting in a one day delay.

Dr. Farmer opined that if a physician recommended an emergency intervention there should not be a delay in the procedure.

MOTION: Dr. Farmer moved to Issue an Advisory Letter for delay in diagnosis. There is insufficient evidence to support disciplinary action.

SECOND: Dr. Figge.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

11. MD-15-0078A, FRANCIS J. STAGG, M.D., LIC. #27434

RESOLUTION: Issue an Advisory Letter for failing to obtain medical records prior to allowing a patient to return to work as a commercial driver three months after undergoing brain surgery for schwannoma removal, contrary to Federal Motor Carrier Safety Administration guidelines. There is insufficient evidence to support disciplinary action.

12. MD-15-0332A, HUNG K. LI, M.D., LIC. #44423

RESOLUTION: Issue an Advisory Letter for failing to document the performance of high output pacing to assess for the presence of the phrenic nerve and for conducting an ablation too close to the sinus node. There is insufficient evidence to support disciplinary action.

13. MD-15-1077A, HARBIR D. SINGH, M.D., LIC. #32999

Dr. Farmer summarized that the physician did not timely sign a death certificate but opined that there were many mitigating circumstances and recommended dismissal.

MOTION: Dr. Farmer moved to dismiss the case as there are mitigating circumstances that make the reoccurrence unlikely.

SECOND: Dr. Connolly.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

14. MD-15-1149A, GIRALDO KATO, M.D., LIC. #28499

RESOLUTION: Issue an Advisory Letter for inaccurately documenting review of CSPMP database information when qualifying patients for medical marijuana certifications. While the licensee has demonstrated substantial compliance through 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.

15. MD-15-1214A, DEVA NATHAN, M.D., LIC. #7955

RESOLUTION: Issue an Advisory Letter for action taken by the State of Illinois. While the licensee has demonstrated substantial compliance through 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.

16. MD-14-1654A, AUBREY J. CHUNG, M.D., LIC. #22436

J.D. addressed the Board during the Public Statements portion of the meeting.

RESOLUTION: Issue an Advisory Letter for failing to perform a repeat cystoscopy when the patient developed persistent microhematuria and irritative bladder voiding symptoms not responsive to antibiotic therapy. There is insufficient evidence to support disciplinary action.

17. MD-15-0231A, RINELY R. AGUIAR-OLSEN, M.D., LIC. #28377

Dr. Farmer summarized in this case there was a delay in reporting test results to a patient but there was no patient harm identified. Dr. Farmer noted the physician did try to personally reach the patient with no response and other mitigating factors. Dr. Farmer recommended dismissal.

MOTION: Dr. Farmer moved to dismiss.

SECOND: Dr. Paul.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

18. MD-15-0528B, NORMAN M. SABA, M.D., LIC. #14033

Dr. Farmer stated that in this case the the physician was covering for his partner, who was the patient's primary care provider and there were some difficult social dynamics with the patient's family. Dr. Farmer noted the medical records are not great but they are not inadequate and recommended dismissal.

Dr. Figge agreed and noted that the practice has since mitigated the situation by switching to electronic medical records.

MOTION: Dr. Farmer moved to dismiss.

SECOND: Dr. Figge.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

19. MD-15-0741A VERNON L. JOHNSON, M.D., LIC. #47121

Dr. Farmer summarized this case is an issue where a physician failed to pay their income tax in another state and there was confusion regarding where the physician was living at the time. The physician's license was reinstated. Dr. Gillard opined this was state residency issue and there was no patient care involved.

MOTION: Dr. Farmer moved to dismiss.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

20. MD-15-0130A, NICHOLAS J. ARGYROS, M.D., LIC. #15654

RESOLUTION: Issue an Advisory Letter for removing insufficient skin during a circumcision. The violation is a minor or technical violation that is not of sufficient merit to warrant disciplinary action.

21. MD-14-0636A, STEVEN J. BUPP, M.D., LIC. #19350

Dr. Figge stated that he knows Dr. Bupp, but it would not affect his ability to adjudicate the case.

Dr. Farmer summarized this case was initiated by a complaint by a family member of a mentally ill patient. The patient participated in the CODAC system, which is a difficult system to get physicians to participate in. In this case the physician did not prescribe opioids and the patient was already maintained a medication plan. Dr. Farmer opined the care was adequate. Dr. Krahn agreed that the physician did not deviate from the standards of the community.

MOTION: Dr. Farmer moved to dismiss.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

22. MD-15-0177A, STEPHEN E. JAFFE, M.D., LIC. #41153

Dr. Gillard summarized that the patient alleged abandonment. The physician wanted to withdraw the patient from opiates because he was receiving them from sources other

than this physician. According to the complainant he was rushed to the hospital after a week of detox.

Board staff informed the Board the MC opined it was abrupt to discontinue all the medications and that they should have been tapered.

Dr. Gillard noted that he did not find abandonment. Dr. Krahn expressed concern for the reasoning behind discontinuing Dyprexia, a non-controlled substance, for a patient with a bipolar diagnosis.

MOTION: Dr. Krahn moved to issue an Advisory Letter for inappropriate medication management. There is insufficient evidence to support disciplinary action.

SECOND: Dr. Farmer.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

23. MD-15-1154A, SUJITH R. KALMADI, M.D., LIC. #38208

RESOLUTION: Issue an Advisory Letter for issuing medical marijuana certifications without checking the CSPMP database and for falsely attesting that the database was checked. 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.

24. MD-15-0621A, JOACHIN U. OKAFOR, M.D., LIC. #36747

Attorney Michael Ryan addressed the Board during the Public Statements portion of the meeting.

Dr. Paul summarized the patient, who had previous suicide attempts, cut himself and was taken to the emergency room. The patient at the time was seventeen but in a few hours would be eighteen. Dr. Paul noted the physician decided to discharge the patient and opined this was reasonable rationale based on the circumstances. Dr. Figge explained that the patient's presentation required a behavioral health evaluation before discharge in addition to a discussion with the parent who has more insight about the patient. Board members agreed that when there is self-harm the standard of care is to have behavioral health assessment.

MOTION: Dr. Paul moved to issue an Advisory Letter for improperly discharging a patient with suicidal ideation after an attempt at self-harm. There is insufficient evidence to support disciplinary action.

SECOND: Dr. Krahn.

Dr. Krahn expressed the importance of an appropriate plan being in place when a discharge decision for a patient is made.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

25. MD-15-1005A, HARI C. PURI, M.D., LIC. #46931

Dr. Farmer summarized that this is a case of a three year old diagnosed by the doctor with ADHD. The complaint originated by separated parents who disagreed with treatment; however, the MC felt the care was reasonable. Dr. Farmer opined the records were adequate. Dr. Krahn explained that Adderall is a potent medication but does not fall out of the community standards for situations like this.

MOTION: Dr. Farmer moved to dismiss.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

26. MD-14-1460A, THADDEUS D. HOUSTON, M.D., LIC. #32684

RESOLUTION: Issue an Advisory Letter for action by the state of North Carolina and for failure to properly interpret a CT scan. There is insufficient evidence to support disciplinary action.

27. MD-15-0244A, MEEKILE N. G. MASON, M.D., LIC. #47729

Dr. Mason addressed the Board during the Public Statements portion of the meeting.

Dr. Farmer explained that he believed dismissal may be appropriate. Dr. Krahn opined in this case hospitalization was reasonable and disagreed with dismissal.

MOTION: Dr. Figge moved to issue an Advisory Letter for failing to continue court-ordered treatment for a patient with a history of schizophrenia and medical non-compliance. There is insufficient evidence to support disciplinary action.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

28. MD-15-0717A, STEPHEN L. CURTIN, M.D., LIC. #23459

Dr. Farmer stated that he knows Dr. Curting, but it would not affect his ability to adjudicate the case.

Dr. Farmer stated the complaint raised issues with the procedure performed and informed consent provided. The MC did not identify a deviation but questioned the decision continue to prescribe narcotics. Dr. Farm farmer recommended dismissal.

MOTION: Dr. Farmer moved to dismiss.

SECOND: Ms. Brister.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

29. MD-15-1146A, MICHAEL J. DEMANGONE, M.D., LIC. #21633

RESOLUTION: Issue an Advisory Letter for attesting to conducting CSPMP queries for marijuana certification when in fact she did not. While the licensee has demonstrated substantial compliance through 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.

30. MD-15-0225A, COREY S. YILMAZ, M.D., LIC. #37036

RESOLUTION: Issue an Advisory Letter for failure to report a DUI arrest to the Board pursuant to statute and for self-prescribing a controlled substance. While the licensee has demonstrated substantial compliance through remediation that mitigates the need for discipline, the Board believes that repetition of the activities that led to the investigation may result in future Board action against the license.

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

MOTION: Ms. Brister moved to issue an Advisory Letter and Order for Non-Disciplinary CME in item numbers 2, 3, and 5-8.

SECOND: Dr. Figge.

VOTE: 8-yay, 0-nay, 0-abstain, (1 recusal noted in item 7)-recuse, 3-absent.

MOTION PASSED.

1. MD-14-1468A, BRADLEY J. WILLIAMS, M.D., LIC. #14677

Attorney Paul Giancola addressed the Board during the Public Statements portion of the meeting.

Dr. Gillard noted the CME has already been completed by the physician.

MOTION: Dr. Krahn moved to issue an Advisory Letter for inadequate medical records. There is insufficient evidence to support disciplinary action.

SECOND: Dr. Paul.

**VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.
MOTION PASSED.**

2. MD-15-0419A, MICHAEL R. TRIMBLE, M.D., LIC. #33104
RESOLUTION: Issue an Advisory Letter and Order for Non-Disciplinary CME for failing to recognize the failure of non-operative management of a rectus sheath hematoma and need for more aggressive action. There is insufficient evidence to support disciplinary action. Within six months, complete a minimum of 5 hours of Board staff pre-approved Category I CME in the treatment and management of hematomas. The CME hours shall be in addition to the hours required for license renewal.

3. MD-15-0528A, LOUIS IORIO, M.D., LIC. #12191
Dr. Iorio addressed the Board during the Public Statements portion of the meeting.

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

4. MD-15-0679A, VIJITHA K. REDDY, M.D., LIC. #46644
Board members discussed that the physician recognized the error on an ultrasound reading and has since changed her practice and that the Florida Board dismissed the case. Board members further discussed CME would not be beneficial since this case took place eight years ago and the ultrasound equipment in this case is no longer used in today's practice.

MOTION: Dr. Gillard moved to dismiss.

SECOND: Ms. Salter.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

5. MD-15-0601A, ERIN M. CORRIDON, M.D., LIC. #46364
RESOLUTION: Issue an Advisory Letter and Order for Non-Disciplinary CME for prescribing controlled medications without establishing a physician-patient relationship or performing a physical examination and for failing to maintain 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 ethics. The CME hours shall be in addition to the hours required for license renewal.

6. MD-14-0616A, SANDRA A. BEBAK, M.D., LIC. #18834
RESOLUTION: Issue an Advisory Letter and Order for Non-Disciplinary CME for inappropriate prescribing. While the licensee has demonstrated substantial compliance through remediation that mitigates the need for discipline, the Board believes that repetition of the activities that led to the investigation may result in future Board action against the licensee. Within six months, complete a minimum of 15 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding controlled substances prescribing. The CME hours shall be in addition to the hours required for license renewal.

7. MD-15-0641A, SUSAN B. GREGER, M.D., LIC. #47822
Dr. Krahn was recused from this case. Dr. Connolly stated that she knows Dr. Greger, but it would not affect her ability to adjudicate the case.

RESOLUTION: Issue an Advisory Letter and Order for Non-Disciplinary CME for inadequate medical records. There is insufficient evidence to support disciplinary action. Within twelve 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.

8. MD-15-0520A, RAYMOND R. VALDIVIA, M.D., LIC. #22654
RESOLUTION: Issue an Advisory Letter and Order for Non-Disciplinary CME for failure to perform a complete history and physical, failure to promptly evaluate and treat the patient, and for inadequate medical records. While there is insufficient evidence to support disciplinary action, the Board believes that continuation of the activities that led to the investigation may result in further Board action against the licensee. Within six months, complete a minimum of 10 hours of Board staff pre-approved Category I CME in medical recordkeeping. The CME hours shall be in addition to the hours required for license renewal.

M. REVIEW OF EXECUTIVE DIRECTOR DISMISSALS

MOTION: Dr. Krahn moved to uphold the dismissal in item numbers 1-10.

SECOND: Ms. Brister.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

1. MD-15-0732A, CHRISTOPHER J. LAMPE, M.D., LIC. #35272
RESOLUTION: Uphold the dismissal.
2. MD-15-0949A, TERI A. BAGNASCO, M.D., LIC. #24222
RESOLUTION: Uphold the dismissal.
3. MD-15-1458A, SALVATORE J. TIRRITO, M.D., LIC. #33344
RESOLUTION: Uphold the dismissal.
4. MD-15-1444A, TRAVIS C. HOLCOMBE, M.D., LIC. #21129
Dr. Holcome and R.R. addressed the Board during the Public Statements portion of the meeting.

RESOLUTION: Uphold the dismissal.
5. MD-15-0762A, MARK D. CAMPBELL, M.D., LIC. #25777
RESOLUTION: Uphold the dismissal.
6. MD-16-0047A, AMY N. SUSSMAN, M.D., LIC. #42197
RESOLUTION: Uphold the dismissal.
7. MD-16-0047B, CONRAD J. CLEMENS, M.D., LIC. #29838
RESOLUTION: Uphold the dismissal.
8. MD-16-0047C, PRABIR ROY-CHAUDHURY, M.D., LIC. #51087
RESOLUTION: Uphold the dismissal.
9. MD-15-0537A, KAORU R. GOSHIMA, M.D., LIC. #33173
RESOLUTION: Uphold the dismissal.
10. MD-15-0361A RALPH E. BASSETT, M.D., LIC. #24954
RESOLUTION: Uphold the dismissal.

N. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING CASE RECOMMENDED FOR DISCIPLINARY ACTION

1. MD-15-0384B, IVYNNELL SANDIFER, M.D., LIC. #24856
Attorney Michael Ryan addressed the Board during the Public Statements portion of the meeting.

Board members expressed concern that an EKG and cardio biomarker should have been completed and opined that a cardiac work up should be completed in accordance with the standard of care.

MOTION: Dr. Gillard moved to Issue an Advisory Letter and Order for Non-Disciplinary CME for failing to order appropriate testing for this patient. There is insufficient evidence to support disciplinary action. Within six months, complete no less than 15 hours of Board staff pre-approved Category I CME in cardiac diseases. The CME hours shall be in addition to the hours required for license renewal.

SECOND: Ms. Brister.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

O. PROPOSED CONSENT AGREEMENTS (Disciplinary)

MOTION: Dr. Krahn moved to accept the proposed Consent Agreement in item numbers 1-13.

SECOND: Dr. Paul.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Gillard, Dr. Farmer, Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Krahn, Dr. Paul and Ms. Salter. The following Board members were absent: Ms. Bain, Dr. Berg and Dr. Fromm.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

1. MD-15-0200A, DANIEL R. EMIG, M.D., LIC. #41773
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand.
2. MD-15-1439A, MARK D. LOCKETT, M.D., LIC. #30405
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand and Probation. Within six months, complete no less than 10 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding medical ethics. The CME hours shall be in addition to the hours required for license renewal. The Probation shall terminate upon proof of successful completion of the CME coursework.
3. MD-14-0997A, ERIC BENJAMIN, M.D., LIC. #15965
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand and 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 medical recordkeeping; a minimum of 5 hours of Board staff pre-approved Category I CME in child psychiatry risk management; and a minimum of 5 hours of Board staff pre-approved Category I CME in ethics. The CME hours shall be in addition to the hours required for license renewal. The Probation shall terminate upon proof of successful completion of the CME coursework.
4. MD-16-0570A, JOSE A. SOSA-ROCHE, M.D., LIC. #18643
RESOLUTION: Accept the proposed Consent Agreement for Surrender of licensure.
5. MD-14-1211A, KATHLEEN M. STROHMEYER, M.D., LIC. #44670
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand and Five Year Probation for PHP participation. Dr. Strohmeyer's PHP participation shall be retroactive to December 18, 2014. Dr. Strohmeyer shall continue the use of Naltrexone. Once the licensee has complied with the terms of Probation, she must affirmatively request that the Board terminate the Probation.
6. MD-15-0731A, ROGER B. OLADE, M.D., LIC. #32339

RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand and Statutory Penalty. Within 90 days, Dr. Olade shall pay a Statutory Penalty in the amount of \$100.

7. MD-14-1518A, FRED A. CHERON, M.D., LIC. #40800
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand and Two Year Probation for PHP participation. Dr. Cheron's PHP participation shall be retroactive to April 15, 2015. The Probation shall include psychiatric monitoring with a PHP approved psychiatrist. Once the licensee has complied with the terms of Probation, he must affirmatively request that the Board terminate the Probation.
8. MD-15-0709A, MICHELLE M. MULDER, M.D., LIC. #44992
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand.
9. MD-14-1666A DONALD L. BUCKLIN, M.D., LIC. #14628
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand and Probation. Within three months, complete no less than 10n hours of Board staff pre-approved Category I CME in the diagnosis of coronary artery disease. The CME hours shall be in addition to the hours required for license renewal. The Probation shall terminate upon proof of successful completion of the CME.
10. MD-14-1428A EARLE W. MOORE, M.D., LIC. #47940
RESOLUTION: Accept the proposed Consent Agreement for Surrender of licensure.
11. MD-15-0322A, SAILAJAH JANARTHANAN, M.D., LIC. #35946
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand and Probation. Dr. Janarthanan's practice is restricted in that she hshall not practice medicine in the State of Arizona and is prohibited from prescribing any form of treatment including prescription medications until she completes the terms and conditions of the Michigan Board's Order. Once the licensee has complied with the terms of Probation, she must affirmatively request that the Board terminate the Probation. Dr. Janarthanan's request for termination must be accompanied proof of license reinstatement from the Michigan Board. Prior to petitioning the Board for release from the terms of this Order, Dr. Janarthanan shall submit proof of completion of a minimum of 15 hours Board staff pre-approved Category I CME in an intensive, in-person course regarding the prescribing of controlled substances. The CME hours shall be in addition to the hours required for license renewal.
12. MD-14-1299A, MATTHEW R. DICKER, M.D., LIC. #33711
RESOLUTION: Accept the proposed Consent Agreement for a Letter of Reprimand.
13. MD-14-1130A, EDWARD G. BLANKSTEIN, M.D., LIC. #10529
RESOLUTION: Accept the proposed Consent Agreement for Surrender of licensure.

OTHER BUSINESS

P. REQUEST FOR TERMINATION OF BOARD ORDER

1. MD-14-0507A, PHILIP A. GIDEON, M.D., LIC. #35544
Dr. Gillard commented that the physician is participating in PHP and the PHP contractor has no objection to lifting the order.

MOTION: Dr. Krahn moved to grant the request for termination of Dr. Gideon's June 4, 2015 Board Order.

SECOND: Ms. Brister.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

2. MD-14-0110A, ROB F. SCHUSTER, M.D., LIC. #35558

Dr. Gillard noted that the Board issued a Letter of Reprimand and two year Probation for participation in PHP, the physician has been compliant with the PHP monitoring requirements, and Board staff recommended termination of the Board order.

MOTION: Ms. Brister moved to grant the request to terminate Dr. Schuster's August 6, 2015 Board Order.

SECOND: Dr. Connolly.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

3. MD-14-0651A, BRANDON Z. MASSEY, M.D., LIC. #35576

Dr. Gillard stated that the physician is on a Board order for two year PHP participation, has been compliant and the PHP contractor has submitted a letter supporting termination.

MOTION: Ms. Salter moved to grant the request to terminate Dr. Massey's June 4, 2015 Board Order.

SECOND: Ms. Brister.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

4. MD-15-0287A, THOMAS BAJO, M.D., LIC. #14541

Dr. Gillard reported there was a practice limitation still in effect and that Board staff respectfully requested the Board consider vacating and accept a confidential stipulated health agreement. Board staff clarified the Board staff initially made this recommendation with the understanding that the physician would enter into the confidential stipulated health agreement but the attorney has indicated Dr. Bajo does not wish to be monitored.

MOTION: Dr. Krahn moved to deny the request to vacate the July 1, 2015 Interim Order for Practice Limitation.

SECOND: Ms. Brister.

Dr. Figge noted in the PHP assessment it was agreed the physician was safe to practice with monitoring but physician has been non-compliant.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

Q. GENERAL CALL TO THE PUBLIC

No individuals addressed the Board during the General Call to the Public.

MOTION: Dr. Krahn moved to adjourn the meeting.

SECOND: Ms. Brister.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

The meeting adjourned at 4:03 p.m.

Thursday, August 4, 2016

GENERAL BUSINESS

A. CALL TO ORDER

Dr. Gillard called the meeting to order at 8:09 a.m.

B. ROLL CALL

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

The following Board members were absent: Dr. Fromm and Dr. Berg.

ALSO PRESENT

Present among Board staff include: Seth Hargraves, AAG; Carrie Smith, AAG; Patricia E. McSorley, Executive Director; Kristina Fredericksen, Deputy Director; William Wolf, M.D., Chief Medical Consultant; Andrea Cisneros, Staff Investigational Review Committee ("SIRC") Coordinator, Raquel Rivera, Interim Acting Investigations Manager; Mary Bober, Board Operations Manager; and Michelle Robles, Board Coordinator.

C. PUBLIC STATEMENTS REGARDING MATTERS LISTED ON THE AGENDA – 8:00 a.m.

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

D. UPDATE ON LOOK BACK AUDIT CONDUCTED BY GREATER ARIZONA CENTRAL CREDENTIALING PROGRAM (GACCP)

Ms. Fredericksen reported that all eleven of the physicians scheduled were removed from this agenda and of the 3,000 physicians that were a part of the Look Back project all but 15 have turned in the required documentation.

E. LEGISLATIVE UPDATE

Ms. Smith explained most of these bills will not affect the Board's process with the exception of the Licensure Compact.

- HB 2337 Regulation; Deficiencies; Opportunity to correct
- HB 2450 Expedited Rulemaking; Outdated Rules
- HB 2487 State Agencies; Preapplication Authorization; Limitations
- HB 2505 Medical Licensure Compact

Ms. Smith reported the Board is required to provide a legislative proposal by December 1, 2017 for the Non -Medical Licensure Compact alternative and the Board is required to offer a temporary license and process by July 1, 2017; this will come with additional funding. Ms. Smith explained a compact license application will need to be developed. Ms. McSorley discussed the proposed process for obtaining a compact license. Ms. Bain that these additions could make the Board more user friendly.

- HB 2503 Psychologists; Licensure Compact
- HB 2613 Regulatory Boards; Licensing; Revisions
- HB 1388 Rulemaking Exemption; One-Year Review
- SB 1421 Boards; Commissions; Compensation; Expenses
- SB 1444 Board of Nursing; Licensure; Complaints

Ms. Smith reported the requirement was added that an investigative report must be provided to all licensees at least ten days before a meeting.

- SB 1445 Health Care Services; Patient Education

Ms. Smith reported there is now language stating a physician can educate a patient about lawful services and off label usage as long as the standard of care is met.

F. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING SUBSTANTIVE POLICY STATEMENT (“SPS”) CLARIFICATION OF AUTHORITY FOR EXECUTIVE DIRECTOR TO GRANT LICENSURE UNDER CERTAIN CIRCUMSTANCES

Ms. McSorley explained this policy is in regards to applicants who who disclose potentially derogatory information on applications and allows the Executive Director to grant the license under certain circumstances.

MOTION: Ms. Salter moved to approve the Substantive Policy Statement #14.

SECOND: Dr. Connolly.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

LEGAL MATTERS

G. FORMAL INTERVIEWS

1. MD-14-1082A, MONEIL M. PATEL, M.D., LIC. #44593

Dr. Patel was present with Counsel Andrew Plattner.

Board Staff informed the Board the case was initiated after receiving a complaint regarding Dr. Patel’s care and treatment of two patients (“SN”) and (“MA”) alleging that Dr. Patel was inappropriately prescribing medications for weight loss. The MC found a deviation in that Dr. Patel did not discuss a diet and exercise plan, medical records were inadequate and, there was inconsistency with the prescriptions written, which included controlled substances for inappropriate indications.

During his opening statement, Dr. Patel stated no patients had been harmed in this case and that patients are screened prior to therapy to include a thorough history, physical exam and full laboratory panel. Dr. Patel informed the Board that his exclusion criteria included cardiac disease, elevated lipid panels and prostate cancer. Dr. Patel explained in addition to diet and exercise, the medications he used were FDA approved for weight loss. Dr. Patel requested the case be dismissed or at most issuance of an Advisory Letter with CME.

During questioning, Dr. Patel explained that he sees most patients in office but for the patient’s convenience a follow up visit may be done through skype or telemedicine. Dr. Patel stated that if an exam needed to be completed he would instruct for an exam to be completed and the documents be sent to him. Dr. Patel further stated that he explained the risks to his patients and that they are not kept on these medications for long periods of time.

Dr. Farmer agreed with the MC in that the medications are potentially harmful to patients and that it is a real concern that Dr. Patel prescribed these medications to healthy patients who are at no medical risk. Dr. Patel justified that in elective cosmetic therapy the standard of care is quality of life. Board members expressed a concern for the lack of documentation for his rational and testing for the medications used.

In closing, Mr. Plattner stated Dr. Patel recognized and acknowledged the medical records are not reflective, of the screening, monitoring, reasoning and communication of medication used. This was due to a lack of access medical records and Dr. Patel now uses electronic medical records. Mr. Plattner stated that he did not feel rise this case rose to the level of discipline but does acknowledge the medical records concern.

Dr. Paul opined there was a clear medical records violation as well as conduct that is or may be harmful to the public.

MOTION: Dr. Paul moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(e) and (q) as stated by SIRC.

SECOND: Dr. Krahn.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

Dr. Paul opined this case does rise to the level of a Letter of Reprimand with probation.

MOTION: Dr. Paul moved for a Draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Probation. Within six months, complete no less than 5 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding ethics; and no less than 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. The Probation shall terminate upon proof of successful completion of the CME coursework.

SECOND: Dr. Farmer.

Board members agreed there is a clear records violation and opined that the risks of this elective therapy are not clearly explained to patients. Board members expressed concern that the involved are very serious.

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

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

MOTION PASSED.

2. MD-14-1319A, MD-15-0308A, TODD W. TURLEY, M.D., LIC. #34623

M.M. addressed the Board prior to the Formal Interview. Dr. Turley was present with Counsel Rick Kent.

Board Staff reported that case MD-14-1319A was initiated after receiving notification of a malpractice settlement regarding Dr. Turley's care and treatment of a 67 year-old male patient DR alleging negligent administration of phenol with subsequent incomplete paraplegia. The MC identified multiple deviations from the standard of care, noting that the most concerning deviations were the use of neurotoxic phenol in close proximity to the spinal cord and unnecessary duplicative simultaneous use of two different methods of nerve destruction. Case MD-15-0308A was initiated after receiving a complaint regarding Dr. Turley's care and treatment of a 42 year-old male patient MM alleging that Dr. Turley failed to properly perform a occipital nerve block, which caused nystagmus, head spinning, and a ringing noise in his ears. The MC found that Dr. Turley deviated from the standard of care for the documentation of the procedure and the post procedure assessment of the patient.

In his opening statement, Dr. Turley explained MM was a patient who experienced chronic pain, was seen at multiple clinics and physicians. He had several medical issues and to relieve some pain underwent an occipital nerve block. During MM's facet procedure the patient verbally consented to a second block after completion of the facets. Dr. Turley stated if there was a concern he would have sent MM to the ER but there wasn't a concern so he was kept for observation. Dr. Turley stated he may have fell below the standard of care by not getting a written consent before the procedure as opposed to a verbal consent.

Mr. Kent stated in the case of DR in 2010 Dr. Turley followed the recommendations in the practice guidelines of the American Society of Anesthesiology from 2007. In the case of MM the intravascular injection was within the standard of care. Attorney Kent noted that the symptoms that MM complained about were symptoms he experienced prior to the procedure. Mr. Kent requested a dismissal.

During questioning, Dr. Turley explained DR had been treated by one of his partners. Dr. Turley explained typically after evaluation physical therapy is utilized to relieve pain and if that is unsuccessful then injection therapy may be used. With regards to his medical records, Dr. Turley acknowledged the setbacks of the EMR used and has since made changes. Dr. Farmer noted injections and ablations have risks, and the concern is in they were done concurrently and repeated in a long ongoing fashion without a neurological exam.

With regards to patient MM, Dr. Turley stated he was given verbal consent for the procedure. Dr. Turley explained during the procedure the patient jerked and afterward he took a picture to locate the needle. After an hour the patient was exhibiting symptoms but was improving. Dr. Farmer noted that as stated an hour later the patient was still exhibiting symptoms without a good neurological exam being documented and was sent home. Dr. Farmer clarified he was not concerned with the intravascular injection but was concerned with the follow up care and plan.

Board staff informed the Board that the referenced 2010 American Society of Anesthesiology practice guideline revisions were unanimous and that phenol injection was not an appropriate procedure for non-cancer patients due to the risks. Board staff stated that by 2010 this was well known by anesthesiologists and when this procedure was completed in 2011.

Dr. Farmer opined the facts support a deviation in medical records and patient care; as a pain expert it is their responsibility to document rationale for the risk of this procedure.

MOTION: Dr. Farmer moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(e) and (q) as stated by SIRC.

SECOND: Ms. Bain.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

Dr. Farmer recommended discipline due to the medical records duration, however CME may not be necessary due to the mitigating factor of an electronic medical record system being implemented. Dr. Farmer expressed concern with the frequency of the injections, especially when doing an ablation concurrently with a lack of rationale in the documentation. In the case of MM there are mitigating factors with the records but the follow up care is inadequate.

MOTION: Dr. Farmer moved for a draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand.

SECOND: Dr. Paul.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Gillard, Dr. Farmer, Ms. Bain, Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Krahn, Dr. Paul and Ms. Salter. The following Board members were absent: Dr. Berg and Dr. Fromm.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

3. MD-14-1321A, JOHN I. ISKANDAR, M.D., LIC. #35047

Dr. Iskandar was present with Counsel William Jones.

Board staff explained that case number MD-14-1321A was initiated after receiving notification of malpractice settlement regarding Dr. Iskandar's care and treatment of a 49 year-old female patient EK alleging inappropriate performance of spinal cord stimulator implantation with subsequent central cord syndrome. EK underwent multiple surgeries and had ongoing pain. The MC stated that spinal cord contusion may have occurred during the initial surgery. The MC stated that when Dr. Iskandar reevaluated EK, he entertained the concept of the electrode size and position as a possible explanation, and commented in reviewing the CT scan that there was no stenosis; however, he did not entertain or document the possibility of a spinal cord contusion. The MC found that the second surgery was likely unnecessary. The MC also found that the operative summary of October 2010 was not dictated in a timely manner and was also concerned that there was no documentation of EK's neurologic examination during the first out-patient postoperative visit on November, 2010.

In his opening statement, Dr. Iskandar explained this was a difficult patient with chronic pain where surgery was performed with careful attention. Dr. Iskandar agreed there was a possibility for a spinal injury but the symptoms were isolated to the hands and he concluded

that the paddle was too wide. Dr. Iskandar clarified he did offer removal but opined that he would not make the recovery better. Dr. Iskandar stated the second surgery went.

During questioning, Dr. Iskandar explained that the concern was the resistance of putting the electrode in the middle and if placed in the middle the electrode would provide bilateral stimulation for relief of the neck pain and arm pain. Dr. Farmer disagreed with the MC and agreed that Dr. Iskandar encountered unforeseen difficulty and he addressed it.

In closing, Mr. Jones stated Dr. Iskandar attempted to assist EK resulting in an unanticipated problem which he attempted to remediate. Dr. Iskandar discussed the options, risks and family's wishes and chose the best perceived option.

Dr. Farmer indicated there was a medical records violation in this case and noted previous Board history of a Letter of Reprimand for medical records.

MOTION: Dr. Farmer moved for a finding of unprofessional conduct in violation of A.R.S. § 32-1401(27)(e).

SECOND: Dr. Krahn.

Dr. Paul agreed Dr. Iskandar attempted to do the correct thing; however; there is a clear medical record issue.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

MOTION: Dr. Farmer moved to issue an Advisory Letter for inadequate medical records. There is insufficient evidence to support disciplinary action.

SECOND: Dr. Krahn.

Dr. Farmer commented that CME was not necessary as it is clear now to Dr. Iskandar that medical records need to be entered in a timely fashion.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

4. MD-14-0935A, ALLAN L. ROWLEY, M.D., LIC. 31278
Dr. Rowley was present without counsel.

Board staff explained this is a continuation of Dr. Rowley's formal interview from the June 2016 meeting, for allegations of opioid dependency and diversion of controlled substances from the work place. Dr. Rowley testified to his recovery and requested non disciplinary action. The Board sought legal advice and the matter was tabled for a later date.

MOTION: Ms. Bain moved for the Board to enter into Executive Session pursuant to A.R.S. § 38-431.03(A)(2) and (3).

SECOND: Dr. Figge.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

The Board entered into Executive Session at 11:55 am

The Board returned to Open Session at 12:03 p.m.

No legal action was taken by the Board during Executive Session.

During questioning, Dr. Rowley agreed there was potential for patient harm. Ms. Bain inquired if Dr. Rowley understood there was a risk to the community. Dr. Rowley agreed the community was at risk while he was under a substance that modified his behavior and is grateful for rehabilitation.

Dr. Gillard reported that during the June meeting there was a finding of unprofessional conduct.

MOTION: Ms. Bain moved to Issue an Advisory Letter for the use of controlled substances not prescribed by a physician for use during a prescribed course of treatment and for habitual intemperance. 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: Dr. Paul.

Dr. Figge opined CME would not make a difference. Dr. Farmer abstained.

VOTE: 8-yay, 0-nay, 1-abstain, 0-recuse, 2-absent.

MOTION PASSED.

H. LICENSING INTERVIEWS

1. MD-15-0714A, ENRIQUE M. BURSZTYN, M.D., LIC. #N/A

Dr. Bursztyn was present without counsel.

Board staff reported that the case was opened based on yes responses provided on his application wherein he disclosed prior disciplinary board actions, previous malpractice settlements, and that he has had a license application denied in another state.

During his opening statement, Dr. Bursztyn explained that regarding the malpractice issue most cases were mammography and that has completed thousands of mammograms since that time with no incidents. Dr. Bursztyn stated that mammography is a small portion of what he does and his practice consists more of neurology, radiology and scans. He stated his is Board certified in neuroradiology and lifetime Board certified in neurology.

During questioning, Dr. Bursztyn reported he currently holds three unrestricted licenses in Pennsylvania, New York and Indiana, he has no pending malpractice cases and the last case was from 2003. Dr. Bursztyn reports he has been practicing fulltime as a radiologist, splitting his time between New York and as a partner of a practice in Indiana.

Dr. Gillard noted Dr. Bursztyn has had no issues in thirteen years and he is up to date on his Neuroradiology Boards and certification.

MOTION: Dr. Gillard moved to grant the license.

SECOND: Figge.

Dr. Gillard noted radiology and imaging has changed and improved since the time of these cases.

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

MOTION PASSED.

2. MD-15-1387A, KIARASH L. MIRKIA, M.D., LIC. #N/A

Dr. Mirkia was present without counsel.

Board staff reported that the case was initiated after receiving Dr. Mirkia's application for licensure in which he answered "Yes" to background questions #3 and #8. Dr. Mirkia disclosed one settled and two then pending malpractice claims against him. The Board's Chief Medical Consultant reviewed the cases and recommended a specialty consultant review of all three cases prior to licensure.

During questioning, Dr. Mirkia explained the disciplinary was issue during his residency at a conference he attended not meant for residents. Dr. Mirkia clarified that the Temple University hospital did not have a position for his fourth and fifth year and therefore completed his residency at Mount Sinai Hospital in Illinois. Regarding his malpractice case for L.J. Dr. Mirkia explained that the patient was morbidly obese and that it had been a difficult procedure but he removed the gallbladder and put in a drain. After the procedure he explained to the family that there may have been a leak. With regards to the delay, Dr. Mirkia opined the GI and radiologist needed to do the testing first. Dr. Mirkia noted that this case was dismissed.

In the case of KW, Dr. Figge agreed with the consultant that there was no finding of a deviation.

Dr. Mirkia reported NB's case is still pending. He explained that it was a difficult case where the patient had comorbidities. Dr. Mirkia explained that he did not perform an intraoperative cholangiogram when he suspected a lead because anesthesia time was critical in this patient and therefore he decided to close after two hours and transfer to hepatic surgeon. Dr. Mirkia noted he is Board certified in general surgery and critical care, holds four state medical licenses and has had no sanctions or disciplinary action in any other state.

MOTION: Ms. Bain moved for the Board to enter into Executive Session pursuant to A.R.S. § 38-431.03(A)(2).

SECOND: Dr. Figge.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

The Board entered into Executive Session at 1:55 m

The Board returned to Open Session at 2:05 p.m.

No legal action was taken by the Board during Executive Session.

Board members agreed that is the letter from his residency program was very concerning.

Dr. Mirkia stated that he did well in his residency and does not understand why such a concerning letter was written and e not in keeping with the fact that the director helped him find a position for the continuation of his residency.

In closing, Dr. Mirkia stated that is the letter involved an incident that is sixteen years old. Furthermore; he has had no incidents since then and has always conducted himself in a professional matter.

MOTION: Dr. Farmer moved to return the case for further investigation to obtain clarification from the residency program director regarding correspondence submitted to the Board.

SECOND: Dr. Krahn.

Dr. Gillard opined that the letter is concerning but the incident is from his residency and Dr. Mirkia has since had training and obtained five licenses without incident. Ms. Brister noted the letter is six months old.

VOTE: 3-yay, 5-nay, 0-abstain, 0-recuse, 3-absent.

MOTION FAILED.

Board staff confirmed that only three issues in the number of gallbladder procedures Dr. Mirkia has performed is within the norm and agreed with Dr. Mirkia that limiting a patient's time under anesthesia is important. Dr. Wolf opined two ductal injuries within two consecutive year is a lot and that if a physician suspects an injury it must be taken care of immediately

MOTION: Dr. Figge moved to grant the license.

SECOND: Dr. Paul.

VOTE: 5-yay, 3-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

CONSENT AGENDA

I. CASES RECOMMENDED FOR ADVISORY LETTERS

MOTION: Ms. Brister moved to issue an Advisory Letter in item numbers 1.1-4, 6, 7, and 9-18.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

1. MD-15-0453A, GERALD B. WALMAN, M.D., LIC. #10481

RESOLUTION: Issue an Advisory Letter for failing to inform a patient of her test results in a timely manner. There is insufficient evidence to support disciplinary action.

2. MD-15-0457A, MANUEL J. GALVEZ, M.D., LIC. #32761
RESOLUTION: Issue an Advisory Letter for inadequate treatment of an abscess and for inadequate medical records. There is insufficient evidence to support disciplinary action.
3. MD-15-1150A, ROBIN L. OBENCHAIN, M.D., LIC. #35188
RESOLUTION: Issue an Advisory Letter for attesting to checking CSPMP data on forms for medical marijuana certification when she did not. While the licensee has demonstrated substantial compliance through remediation that mitigates the need for discipline, the Board believes that repetition of the activities that led to the investigation may result in further Board action against the licensee.
4. MD-15-0056A, HARRY Y. K. LUM, M.D., LIC. #9658
RESOLUTION: Issue an Advisory Letter for performing an inadequate history and physical, and missing an infection on examination of a knee joint. There is insufficient evidence to support disciplinary action.
5. MD-15-0334A, ERIC J. FOLTZ, M.D., LIC. #36073
Dr. Foltz addressed the Board during the Public Statements portion of the meeting.

Dr. Farmer explained that the physician recorded results of an MRI and had planned to provide results on follow up but the patient could not schedule a follow-up visit due to his insurance company. Dr. Farmer opined the physician had good policies in place and that this was insurance issue. Dr. Farmer recommended dismissal.

MOTION: Dr. Farmer moved to dismiss.

SECOND: Dr. Figge.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

6. MD-15-0620A, EDUARDO E. QUIROZ, M.D., LIC. #16323
RESOLUTION: Issue an Advisory Letter for inadequate medical records. There is insufficient evidence to support disciplinary action.
7. MD-15-1151A, MARK S. BESSETTE, M.D., LIC. #18835
RESOLUTION: Issue an Advisory Letter for attesting to have queried the CSPMP database for patients receiving medical marijuana certifications when he did not. There is insufficient evidence to support disciplinary action.
8. MD-15-1318A, JANICE M. LABRANCHE, M.D., LIC. #28362
Dr. Labranche addressed the Board during the Public Statements portion of the meeting.

Dr. Gillard reported that the physician placed a second IUD without removing the first IUD. Dr. Gillard noted the IUD had been in place for ten years and was not visible. There was no patient harm. Dr. Farmer disagreed and opined there is potential for patient harm. Dr. Krahn noted that the MC reported a concern that there was not a thorough review of patient history.

MOTION: Dr. Farmer moved to Issue an Advisory Letter for failure to remove a patient's old IUD prior to proceeding with insertion of a new IUD. There is insufficient evidence to support disciplinary action.

SECOND: Dr. Paul.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

9. MD-15-0296A, JOHN J. DUGGAN, M.D., LIC. #31494
RESOLUTION: Issue an Advisory Letter for improper performance of a total knee arthroplasty. There is insufficient evidence to support disciplinary action.
10. MD-15-0487A, EVA I. LIANG, M.D., LIC. #32891
RESOLUTION: Issue an Advisory Letter for inadequate postoperative follow up. There is insufficient evidence to support disciplinary action.
11. MD-15-1104A, CARL R. SUNBY, M.D., LIC. #46980
RESOLUTION: Issue an Advisory Letter for action taken by the State of Wisconsin. There is insufficient evidence to support disciplinary action.
12. MD-15-1118A, RICHARD A. RUBEN, M.D., LIC. #44981
RESOLUTION: Issue an Advisory Letter for failure to prescribe the proper dose of medication and for inadequate medical records. There is insufficient evidence to support disciplinary action.
13. MD-15-1411A, MANDEEP K. RAI, M.D., LIC. #27036
RESOLUTION: Issue an Advisory Letter for failure to timely report her DUI arrest to the Board. There is insufficient evidence to support disciplinary action.
14. MD-15-0727A, RONALD J. WIDMAN, M.D., LIC. #20741
RESOLUTION: Issue an Advisory Letter for failure to consult ENT to assist in managing the patient's potential airway compromise and for delaying intubation, which eventually resulted in respiratory failure. There is insufficient evidence to support disciplinary action.
15. MD-15-0538A, JAMES. D. BOREL, M.D., LIC. #11909
RESOLUTION: Issue an Advisory Letter for failure to remove the guidewire used in placement of a CVP catheter. There is insufficient evidence to support disciplinary action.
16. MD-15-1079A, MOMIN M. GABIR, M.D., LIC. #28217
RESOLUTION: Issue an Advisory Letter for failure to provide patient medical records in a timely fashion. There is insufficient evidence to support disciplinary action.
17. MD-15-0525A, NAVTEJ S. TUNG, M.D., LIC. #30264
RESOLUTION: Issue an Advisory Letter for performing a wrong site/side procedure with inadequate consent documentation. There is insufficient evidence to support disciplinary action.
18. MD-14-1668A, MARK IVEY, M.D., LIC. #10659
RESOLUTION: Issue an Advisory Letter for suboptimal management of weight gain and for inadequate medical records. There is insufficient evidence to support disciplinary action.
19. MD-15-1121A, CAROLYN J. BORDINKO, M.D., LIC. #40143
Attorney Christina Chait addressed the Board on behalf of the physician during the Public Statements portion of the meeting.

Dr. Gillard stated that there was discussion of abandonment when the patient had been referred to another physician. The patient has a history of anxiety and depression and was unhappy with the physician and hourly services. Board staff clarified that the case is not a dispute of quality of care but a contract dispute. The referred physician did accept the transfer of care for medication management. Dr. Wolf opined the next day is not sufficient notice for a contract change. Board members stated there was a quick change in contract but there was no lapse in care or patient harm.

MOTION: Dr. Connolly moved to dismiss.
SECOND: Ms. Salter.
VOTE: 7-yay, 0-nay, 1-abstain, 0-recuse, 3-absent.
MOTION PASSED.

J. LICENSE APPLICATIONS

MOTION: Dr. Farmer moved to approve the license application and grant the license in item numbers 1, 2, 4, 6-11, 13, and 14.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

i. APPROVE OR DENY LICENSE APPLICATION

1. MD-15-1024A, MARK W. PENN, M.D., LIC. #N/A

RESOLUTION: Approve the license application and grant the license.

2. MD-16-0205A, ASHLEY L. GUBBELS, M.D., LIC. #N/A

RESOLUTION: Approve the license application and grant the license.

3. MD-15-0952A, DOUGLAS J. KRELL, M.D., LIC. #N/A

Dr. Krell and Attorney Steve Myers addressed the Board during the Public Statements portion of the meeting.

Dr. Gillard explained that during the June meeting the Board voted to table this case to negotiate a provisional license and Dr. Krell has since signed a consent agreement.

Ms. Smith clarified the consent agreement allows Dr. Krell to practice within the confines of the fellowship. Ms. Smith noted the medical director has to sign off on the supervision and that once completion he will come to the Board to petition for a full unrestricted license. Board staff reported Dr. Krell hoped getting his Arizona license will help get his DEA license.

MOTION: Dr. Krahn moved to accept the proposed Consent Agreement for a probationary license.

SECOND: Ms. Brister.

VOTE: 8-yay, 0-nay, 1-abstain, 0-recuse, 3-absent.

MOTION PASSED.

4. MD-16-0624A, MESFIN AFEWORK, M.D., LIC. #N/A

RESOLUTION: Approve the license application and grant the license.

5. MD-15-0953A, STEPHANIE VAN ZANDT, M.D., LIC. #N/A

Dr. Gillard summarized that this is a case of an OBGYN physician with two malpractice cases. One of the cases from 2014 resulted in a fetal death from pre-eclampsia. The Chief Medical Consultant recommended of CME for pre-eclampsia.

MOTION: Ms. Salter moved to grant the license. Dr. Van Zandt shall be required to complete no less than 10 hours of Board staff pre-approved Category I CME in the treatment of pre-eclampsia to be completed within 90 days.

SECOND: Dr. Paul.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

AAG Smith stated that language of the motion should include the probationary license and offering of a consent agreement.

MOTION: Dr. Figge moved to withdraw the motion.

SECOND: Dr. Farmer.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

MOTION: Ms. Salter moved to Offer the applicant a consent agreement for a probationary license. Dr. Van Zandt shall be required to complete no less than 10 hours of Board staff pre-approved Category I CME in the treatment of pre-eclampsia to be completed within 90 days. Once the applicant has signed the consent agreement, the ED may issue the license. The applicant shall be issued full licensure upon proof of successful completion of the CME.

SECOND: Dr. Paul.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

6. MD-16-0260A, GUILLERMO HIGA SANSONE, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
7. MD-16-0440A, ENRICO J. DIRIENZO, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
8. MD-16-0578A, HAROON I. RASHEED, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
9. MD-16-0444A, SHARON S. WALKER-WATKINS, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
10. MD-16-0128A, DAVID L. WATSON, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
11. MD-16-0664A, EBON J. WALLACE-TALIFARRO, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
12. MD-16-0861A, PATRICK A. SMITH, M.D., LIC. #N/A
Dr. Farmer stated that he knows Dr. Smith, but it would not affect his ability to adjudicate the case.

Dr. Gillard reported that the surgeon had a single settlement, let his Board's lapse in 2007 and has since been working in administration medicine. The physician has been out of fulltime medical practice for year with no licenses in another state. Dr. Figge noted that once the physician gets a license there is no restriction to administration medicine only.

MOTION: Dr. Gillard moved to approve the license application and grant the license.

There was no second therefore the motion died.

MOTION: Dr. Figge moved to grant the license contingent upon the applicant's successful completion of the SPEX.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

13. MD-16-0391A, MATTHEW S. MCCARTY, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
14. MD-16-0450A, RICHARD J. TEFF, 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. Farmer moved to approve the license application and grant the license for item numbers 1-12 and 14-16.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

1. MD-16-0666A, MANAGE D. S. NISSANKA, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
2. MD-16-0645A, CHRISTOPHER B. VALENTINE, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
3. MD-16-0711A, TIMOTHY G. DEZASTRO, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
4. MD-16-0495A, KATRINA LEWIS, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
5. MD-16-0746A, CHRISTOPHER P. HENRY, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
6. MD-16-0745A, JOEL M. KUPFER, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
7. MD-16-0773A, JUSTIN H. LEE, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
8. MD-16-0813A, WILLIAM P. MANSFIELD, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
9. MD-16-0825A, DEEPAK GUPTA, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
10. MD-16-0771A, GIRISH K. MOUR, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
11. MD-16-0552A, ARMANDO S. GARZA, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
12. MD-16-0824A, TATTAMANGALAM P. CHANDRIKA, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
13. This item was pulled from the Board's Agenda.
14. MD-16-0828A, RONALD A. LEPKE, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
15. MD-16-0816A, CHI W. KOO, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.
16. MD-16-0626A, BERNDT P. SCHMIT, M.D., LIC. #N/A
RESOLUTION: Approve the license application and grant the license.

iii. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING LICENSE APPLICATION AND RECOMMENDED ADVISORY LETTER

1. MD-16-0606A, BARRY R. WEISS, M.D., LIC. #N/A
Dr. Gillard summarized that the licensee had an Arizona license in the past. However; he failed to disclose information on his application for re-licensure that he had an action in California for operating a clinic owned by someone who was not licensed and an investigation on his Alaskan license for failure to pay a fine.

MOTION: Dr. Farmer moved to grant the license and issue an Advisory Letter for providing misinformation on his initial application for re-licensure. There is insufficient evidence to support disciplinary action.

SECOND: Ms. Brister

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

iv. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING RENEWAL APPLICATION AND CONSIDERATION OF RECOMMENDED DISMISSAL OF PENDING INVESTIGATION

MOTION: Dr. Figge moved to grant the license renewal and dismiss the pending investigation in item numbers 1-2.

SECOND: Ms. Brister.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

1. MD-16-0004A, PHILLIP M. GRANDSTAFF, M.D., LIC. #48338

RESOLUTION: Grant the license renewal and dismiss the pending.

2. MD-16-0195A, SAMUEL F. BARKER, M.D., LIC. #51120

RESOLUTION: Grant the license renewal and dismiss the pending.

v. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING RENEWAL APPLICATION AND RECOMMENDED ADVISORY LETTER

1. MD-15-1353A, LISHAN AKLOG, M.D., LIC. #35842

Board staff reported the physician had a DUI in 2012 and did not report it on his 2013 license renewal however, he reported it on his 2015 renewal.

MOTION: Dr. Figge moved to grant the license renewal and issue an Advisory Letter for failure to disclose a DUI in a timely manner. There is insufficient evidence to support disciplinary action.

SECOND: Ms. Brister.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

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

1. ADMINISTRATIVELY COMPLETE

1. RALPH VASSALLO, M.D.

Dr. Gillard summarized that the physician has licenses in 4 states and was Board certified in internal medicine but let her certification expire. It has been ten years since he took his National Boards and he was the chief medical officer in his state for the American Heart Association. The Executive Director recommended granting the license based on practice experience.

MOTION: Dr. Figge moved to grant the license.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

2. ADMINISTRATIVELY INCOMPLETE

1. EILEEN P. LAURENCE-EPSTEIN, M.D.

Dr. Gillard summarized that the physician is not currently board certified. She has completed a year of anesthesiology and internal medicine residency. She has works part time on a continuous basis.

MOTION: Dr. Farmer moved to grant the license.
SECOND: Dr. Paul.
VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.
MOTION PASSED

LEGAL MATTERS

K. RESCIND REFERRAL TO FORMAL HEARING AND ACCEPT PROPOSED CONSENT AGREEMENT

1. MD-15-1470A, MICHAEL MAHL, M.D., LIC. #12868

AAG Froedge reported that this case was scheduled for formal hearing and in lieu of a hearing signed a consent agreement for surrender of his license. The State requested the Board accept the consent agreement.

MOTION: Dr. Farmer moved to rescind the referral to Formal Hearing and accept the proposed Consent Agreement for surrender of licensure.

SECOND: Dr. Krahn.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Gillard, Dr. Farmer, Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Krahn, Dr. Paul and Ms. Salter. The following Board members were absent: Ms. Bain, Dr. Berg and Dr. Fromm.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

2. MD-14-1120A, CHARLES S. LIPSKIND, M.D., LIC. #17076

L.K. addressed the Board during the Public Statements portion of the meeting.

AAG Froedge reported that Dr. Lipskind appealed the original CME order and has since agreed to complete the amended CME and dismiss the appeal.

MOTION: Dr. Krahn moved to rescind the referral to Formal Hearing and accept the proposed Consent Agreement for an Amended Order for Continuing Medical Education. Within six months, complete a minimum of 15 hours of Board staff pre-approved Category I non-disciplinary CME in an intensive, in-person course for medical recordkeeping. The CME hours shall be in addition to the hours required for license renewal. This Order supersedes any and all previous Orders for CME entered by the Board regarding this matter and the licensee's appeal of the previous CME Order is dismissed.

SECOND: Dr. Paul.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

L. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING HEARING ON APPEAL OF DEFICIENCY NOTICE

1. MD-16-0798A, SUDHIR KUMAR GOEL, M.D., LIC. #N/A

Chairman Gillard announced the case and commenced the application deficiency hearing. Dr. Goel was present and represented by his with Counsel David Derickson. Assistant Attorney General, Anne Froedge represented the State of Arizona in the proceeding. Assistant Attorney General Seth T. Hargraves appeared as the Independent Advisor to the Board. Chairman Gillard advised the parties on the procedures that the Board would be following, and then proceeded to opening statements.

In his opening statement Mr. Derickson explained Dr. Goel surrendered his license in 2008 and submitted an application for reinstatement in 2014. On August 12 2015 Dr. Goel received a deficiency notice. Dr. Goel addressed the deficiencies and he took and passed the SPEX exam. On April 14, 2016 a second deficiency letter was sent, stating he must successfully complete the USMLE exam, which he then appealed. The USMLE

excludes eligibility to previously licensed physicians who have taken the FLEX exam. Mr. Derickson opined the testing requirement has been met by the passing of the SPEX exam. Mr. Derickson is requesting the SPEX exam be accepted as the testing requirement for licensure.

In his opening statement, Dr. Goel explained that in 2004 he had struggles in his personal life, there was no civil or criminal case, but he decided to surrender his license. Dr. Goel informed the Board that he went back to medical school in India and was licensed there. He goes back forth between the states and India, and now wants to reapply for his Arizona license.

AAG Froedge requested that the exhibits provided by Mr. Derickson and the State be submitted into evidence.

MOTION: Dr. Farmer moved to accept the State's exhibits 1-7 into evidence. Dr. Farmer also moved to accept Dr. Goel's exhibits 1-5 into evidence.

SECOND: Dr. Gillard.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

AAG Froedge explained that according to A.R.S. § 32-1458, an applicant for reinstatement shall comply with all initial licensing requirements prescribed by this chapter. Ms. Froedge opined that Dr. Goel must comply with statute and he has not taken the USMLE. Ms. Froedge stated that the first deficiency letter was an oversight but it is still Dr. Goel's responsibility to be aware of the statutes and requirements by law when applying for a license.

Dr. Gillard opined it is troubling that the Board staff misinformed Dr. Goel but inquired if the Board has the ability to waive the USMLE requirement and accept the SPEX exam. Ms. Froedge clarified that the USMLE is required by law and thus the Board cannot waive the requirement. Dr. Gillard stated the Board can motion to petition the USMLE to allow the physician to take the exam but USMLE may deny if they feel the physician has an advantage.

MOTION: Dr. Farmer moved for the Board to enter into Executive Session pursuant to A.R.S. § 38-431.03(A)(2).

SECOND: Dr. Paul

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

The Board entered into Executive Session at 3:06 p.m.

The Board returned to Open Session at 3: 22 p.m.

No legal action was taken by the Board during Executive Session.

Mr. Derickson requested that the Board consider Dr. Goel's opening statement as evidence. Under oath, Dr Goel stated that the statements he made in his opening statement are true.

During Mr. Derickson's questioning, Dr. Goel explained he has spent \$1300 to take the SPEX exam, paid for his books and spent months studying for the exam due to the instruction of the Arizona Medical Board. Dr. Goel stated that he plans to practice as a primary care physician.

During Ms. Froedge's cross examination, Dr. Goel stated he does not remember the exact month he reapplied for licensure and that he went through the credentialing process with the consultation of his attorney.

State called Ms. R. Shepherd as a witness to testify under oath. Ms. Shepherd confirmed Dr. Goel's license application was received on August 7, 2015, the initial deficiency letter

was sent on August 15, 2015 and the second deficiency letter was sent on April 18, 2016. Ms. Shepherd clarified that initial deficiency letter did not specifically advise to take the USMLE exam. Ms. Shepherd informed that the USMLE secretary will consider a request from the Executive Director requesting Dr. Goel be allowed to take the exam.

During cross examination, Ms. Shepherd stated that yes the deficiency letter was sent out by AMB staff. Ms. Shepherd explained that once a license application is received and reviewed a deficiency letter may be sent out for missing documents or requirements.

In closing, Mr. Derickson stated the AMB misinstructed Dr. Goel to take the SPEX and as part of the public Dr. Goel relies on the direction of the Board. The injury in this case was that Dr. Goel spent money and time to take the SPEX and if he has to take the USMLE he will have to spend additional money and time. Mr. Derickson requests the Board accept the SPEX exam in place of the USMLE.

In closing, Ms. Froedge reiterated that by law Dr. Goel must meet the requirements of licensure. The statutes are on the website and Dr. Goel went through the application process with counsel and it is their responsibility to know the statutes. The State requests the Board deny the appeal.

Board members agreed that although they sympathize with Dr. Goel's situation however; the statute is clear and by law the ongoing deficiency must be upheld. Dr. Figge noted that on the second page of the August 12, 2015 deficiency letter, Dr. Goel was informed of the possibility that he had to take the USMLE Examination.

MOTION: Dr. Figge moved to deny the appeal with the finding that the licensing deficiency does exist.

SECOND: Dr. Krahn.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Gillard, Dr. Farmer, Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Krahn, Dr. Paul and Ms. Salter. The following Board members were absent: Ms. Bain, Dr. Berg and Dr. Fromm.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

Mr. Derickson requested the ED contact the USMLE and request that Dr. Goel be eligible to take the exam.

MOTION: Dr. Krahn moved to direct the ED to write to the USMLE for applicant to take the exam.

SECOND: Ms. Salter.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

M. FORMAL INTERVIEWS ARISING OUT OF THE LOOK BACK PROCESS

1. THIS ITEM HAS BEEN PULLED FROM THE AGENDA
2. THIS ITEM HAS BEEN PULLED FROM THE AGENDA
3. THIS ITEM HAS BEEN PULLED FROM THE AGENDA
4. THIS ITEM HAS BEEN PULLED FROM THE AGENDA
5. MD-16-0619A, NICOLE D. JOHNSON, M.D., LIC. #45635

The Board took no action on this item.

6. THIS ITEM HAS BEEN PULLED FROM THE AGENDA

OTHER BUSINESS

N. REQUEST FOR MODIFICATION OF BOARD ORDER

1. MD-15-0073A, ISSADA THONGTRANGAN, M.D., LIC. #45920

Ms. Smith reported she was contacted by counsel for Dr. Thongtrangan requesting modifications of the Board Order. He completed his reevaluation at Pine Grove and they

have changed their recommendations. He is currently required to attend SAA three times a week and Pine Grove lowered that requirement to two times a week. His next evaluation will be in May of 2017.

MOTION: Dr. Krahn moved to accept the proposed Amended Consent Agreement for a Decree of Censure and Probation.

SECOND: Dr. Farmer.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Gillard, Dr. Farmer, Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Krahn, Dr. Paul and Ms. Salter. The following Board members were absent: Ms. Bain, Dr. Berg and Dr. Fromm.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

O. APPROVAL OF DRAFT FINDINGS OF FACT, CONCLUSIONS OF LAW AND ORDER

1. MD-14-1007A, ROBERT J. RAUSCHER, M.D., LIC. #13109

Attorney Steve Myers addressed the Board during the Public Statements portion of the meeting.

Ms. Smith updated the Board that Board staff received a written request to modify the draft Findings of Fact, Conclusions of Law and Order. The request to change the language in paragraph six to reflect it was the physician's own signature used and in paragraph twelve to eliminate reference to the extreme DUI.

MOTION: Dr. Krahn moved to approve the draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Probation as modified per the Respondent's request.

SECOND: Dr. Farmer.

ROLL CALL VOTE: Roll call vote was taken and the following Board members voted in favor of the motion: Dr. Gillard, Dr. Farmer, Ms. Brister, Dr. Connolly, Dr. Figge, Dr. Krahn, Dr. Paul and Ms. Salter. The following Board members were absent: Ms. Bain, Dr. Berg and Dr. Fromm.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

P. REVIEW, DISCUSSION AND CONSIDERATION OF PROPOSED SETTLEMENT OFFER

1. MD-13-0500A, MD-13-0315A, DAVID A. RUBEN, M.D., LIC. #11382

Board staff requested the settlement offer be denied. The physician requested the practice limitation be lifted and the findings of the Administrative Law Judge be reinstated. The appeal is being pursued in Superior Court.

MOTION: Dr. Krahn moved to deny the proposed settlement offer.

SECOND: Ms. Brister.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

MOTION: Dr. Farmer moved for the Board to enter into a brief recess.

SECOND: Ms. Salter.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

The meeting recessed at 4:06 p.m.

The meeting reconvened at 4:16 p.m.

Q. APPEAL OF EXECUTIVE DIRECTOR ACTION PURSUANT TO R4-16-510

1. MD-14-1411A, BILL D. HOLLOMAN, M.D., LIC. #33572

Dr. Holloman and Attorney Steve Myers addressed the Board during the Public Statements portion of the meeting. Dr. Figge was recused from this matter.

Dr. Gillard reported there are several issues in this case that have not been addressed and due to financial hardship he requested to come before the Board for a Formal Interview instead of accepting the Executive Directors action for an evaluation. .

Board staff informed the Board that this case shows evidence that he mismanaged a broad variety of cases by failing to take appropriate action. These cases took place over several months in 2014. A competency PACE evaluation was requested four months ago. The Board is unable to determine if he is safe to practice without an evaluation.

Dr. Gillard agreed with Board staff and expressed the importance addressing hypercalcemia and a high platelet count. Dr. Krahn noted that an interview at the soonest would be two months and given the level of concern of these cases the evaluation needs to move forward.

MOTION: Dr. Farmer moved to deny Dr. Holloman's appeal of Executive Director action.

SECOND: Dr. Krahn.

Dr. Farmer agreed with Board staff there are in fact multiple cases with red flags. Ms. Smith clarified that the time frames of the Order has already passed but it would restart if upheld.

VOTE: 7-yay, 0-nay, 0-abstain, 1-recuse, 3-absent.

MOTION PASSED.

R. GENERAL CALL TO THE PUBLIC

No individuals addressed the Board during the General Call to the Public.

MOTION: Ms. Brister moved to adjourn the meeting.

SECOND: Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

The meeting adjourned at 5:15 p.m.



Patricia E. McSorley
Patricia E. McSorley, Executive Director