

February 13, 2008

MINUTES

THE STATE MEDICAL BOARD OF OHIO

February 13, 2008

Nandlal Varyani, M.D., President, called the meeting to order at 1:00 p.m., in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes State Office Tower, 30 E. Broad St., Columbus, Ohio 43215, with the following members present: Dalsukh Madia, M.D., Vice-President; Raymond J. Albert, Supervising Member; Carol L. Egner, M.D.; Deepak Kumar, M.D.; R. Gregory Browning, Ph.D.; Andrew F. Robbins, Jr., M.D.; and Anita M. Steinbergh, D.O. The following joined the meeting at a later time: Lance A. Talmage, M.D., Secretary, and W. Frank Hairston. The following did not attend the meeting: David S. Buchan, D.P.M.; and Jack C. Amato, M.D.

Also present were: Richard A. Whitehouse, Executive Director; Diann K. Thompson, Assistant Executive Director; Kimberly C. Anderson, Assistant Executive Director; William J. Schmidt, Staff Attorney, Enforcement, Compliance & Investigations; Rebecca J. Marshall, Chief Enforcement Attorney; Mark R. Blackmer, David P. Katko, Angela McNair, Karen H. Mortland, Marcie P. Pastrick, Kathleen S. Peterson, Cheryl D. Pokorny, Daniel S. Zinsmaster, and Lynn Zondorak, Enforcement Attorneys; Barbara J. Pfeiffer and Kyle C. Wilcox, Assistant Attorneys General; Eileen M. Schmidt, Executive Assistant to the Director; Joan K. Wehrle, Executive Staff Coordinator; Sallie J. Debolt, Executive Staff Attorney; Michael K. Miller, Public Policy & Government Affairs Officer; Karry Thacker, Executive Staff Assistant; Danielle Bickers, Compliance Supervisor; Jean Gillman, Compliance Officer; Barbara Jacobs, Public Services Administrator; and Jacqueline A. Moore, Disciplinary Information Assistant.

MINUTES REVIEW

DR. MADIA MOVED TO APPROVE THE MINUTES OF JANUARY 9-10, 2008. DR. KUMAR SECONDED THE MOTION. A vote was taken:

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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EXECUTIVE SESSION

DR. MADIA MOVED THAT THE BOARD DECLARE EXECUTIVE SESSION TO CONFER WITH THE ATTORNEY GENERAL'S REPRESENTATIVES ON MATTERS OF PENDING OR IMMINENT COURT ACTION. MR. ALBERT SECONDED THE MOTION. A vote was taken

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Pursuant to Section 121.22(G)(3), Revised Code, the Board went into executive session.

Dr. Talmage and Mr. Hairston joined the meeting during the executive session.

The following joined the meeting after the executive session: Patricia A. Davidson, Chief Hearing Examiner; R. Gregory Porter and Gretchen Petrucci, Hearing Examiners.

REPORTS AND RECOMMENDATIONS

Dr. Varyani announced that the Board would now consider the Reports and Recommendations appearing on its agenda. He asked whether each member of the Board had received, read, and considered the hearing records, the proposed findings of fact, conclusions of law, and orders, and any objections filed in the matters of: Marc Andre Leduc, M.D.; Ujwala Pagedar, M.D.; Carsten Schroeder, M.D.; and Stefan Semchyshyn, M.D. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Kumar	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

Dr. Varyani asked whether each member of the Board understands that the disciplinary guidelines do not

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limit any sanction to be imposed, and that the range of sanctions available in each matter runs from dismissal to permanent revocation. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Kumar	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

Dr. Varyani noted that, in accordance with the provision in Section 4731.22(F)(2), Revised Code, specifying that no member of the Board who supervises the investigation of a case shall participate in further adjudication of the case, the Secretary and Supervising Member must abstain from further participation in the adjudication of these matters. Dr. Varyani further advised that they may participate in the discussion and vote in the matter of Carsten Schroeder, M.D., and in the Findings, Order and Journal Entry in the matter of Naeem Al-Khaliq Chaudhry, M.D., as those cases are not disciplinary in nature and concern only the doctors' qualifications for licensure. In the matters before the Board today, Dr. Talmage served as Secretary and Mr. Albert served as Supervising Member.

The original Reports and Recommendations shall be maintained in the exhibits section of this Journal.

MARC ANDRE LEDUC, M.D.

Dr. Varyani directed the Board's attention to the matter of Marc Andre Leduc, M.D. He advised that no objections were filed to Hearing Examiner Davidson's Report and Recommendation.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. DAVIDSON'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER IN THE MATTER OF MARC ANDRE LEDUC, M.D. DR. KUMAR SECONDED THE MOTION.

Dr. Varyani stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that on March 5, 2007, Dr. LeDuc pled guilty to three felony counts and was convicted of same: (1) Pandering Obscenity Involving a Minor in violation of R.C. 2907.321(A)(1) as charged in the first count, a second-degree felony; (2) Attempted Pandering Obscenity Involving a Minor in violation of R.C. 2923.02 with respect to R.C. 2907.321(A)(1), as charged in the second count, a third-degree felony; and (3) Pandering Obscenity Involving a Minor in violation of R.C. 2907.321(A)(5) as charged in the third count, a fourth-degree felony. Dr. Steinbergh noted that the court imposed a six-year prison term. Dr. Steinbergh stated that she does agree with the Proposed Order permanently revoking Dr. LeDuc's license. She stated that the Order will become effective immediately upon mailing of

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notification of approval by the Board.

A vote was taken on Dr. Steinbergh's motion to approve and confirm:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Dr. Madia advised that he must recuse himself from the matter of Ujwala Pagedar, M.D. He at this time left the meeting.

UJWALA PAGEDAR, M.D.

Dr. Varyani directed the Board's attention to the matter of Ujwala Pagedar, M.D. He advised that no objections were filed to Hearing Examiner Petrucci's Report and Recommendation.

Dr. Varyani continued that a request to address the Board has been timely filed on behalf of Dr. Pagedar. Five minutes would be allowed for that address.

Mr. Graff stated that they haven't filed objections, but they do have concerns about the Proposed Order that he would like to raise. He stated that Dr. Pagedar didn't timely notify the Board of a probation in her residency program. They had offered the Board a one-year suspension when this matter began, and they believe that that is not inappropriate. However, during the interim, it has taken more than sixteen months since Dr. Pagedar's application was filed and more than ten months since she received a letter from the Board asking for information. She has provided all the information used in the hearing about that probation. Mr. Graff stated that they believe that this matter could have been settled more quickly. He further indicated that they also believe that, while the proposed one-year suspension is not unreasonable, Dr. Pagedar should be credited for at least part of the time that she's been out of practice. It has been ten months since she received the April 2007 letter from the Board, and Dr. Pagedar provided the Board all of the information concerning that probation. Mr. Graff stated that, if the Board looks at the record, because of the way Dr. Pagedar's program director filled out the form for the American Board of Internal Medicine, Dr. Pagedar was not credited with the third year of her residency. She may have to have that redone, and that is up on appeal. Mr. Graff stated that Dr. Pagedar understands what she did wrong, and she would like to address the Board.

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Dr. Pagedar thanked the Board for the opportunity to express her regrets and apologize for the mistake she made. Dr. Pagedar stated that during the later half of her residency, nothing was going easy for her. She was feeling emotionally overburdened by her work as a resident, her responsibilities as a new mother and her husband working in a different city. On top of that, she lost her mother in July 2006. Dr. Pagedar stated that nothing felt right thereafter. It seemed like her life was on autopilot, and she lost charge of it. Dr. Pagedar added that she does realize that there is nothing to excuse the enormity and seriousness of the mistake that she made. She takes full responsibility for her actions and she deeply regrets her mistake and will continue to do so in the future. She has learned a lesson for life. If given a chance, she would like to start afresh and put her training and education to good use. She shall be more mindful, more truthful and more responsible in the future. Dr. Pagedar again thanked the Board.

Dr. Varyani asked whether the Assistant Attorney General wished to respond.

Mr. Wilcox stated that Karen Unver was the Assistant Attorney General who heard this case, but she is unavailable today, recovering from a surgical procedure. Mr. Wilcox at this time read the following statement, prepared by Ms. Unver:

Dr. Pagedar filed her FCVS application for licensure on October 12, 2006, and she filed her application for licensure with this Board on October 18, 2006. She answered “no” to questions on both applications which asked whether she had ever been placed on probation or had negative reports filed against her.

But the fact of the matter is that she knew she had problems as early as June 29th when she was given a negative resident evaluation during her residency program at Wright State University School of Medicine. And she was orally notified of being placed on probation in the residency program on September 29, 2006. Dr. Pagedar was provided a copy of her probation letter from the residency program. Dr. Pagedar acknowledged at the hearing that she signed the certification portion of the application attesting to truth of her answers to the application questions. She was also aware of her duty to provide updates to the Board or FCVS for any information that changed while her application was pending. But she was not truthful and she did not provide updates.

The Hearing Examiner’s Report and Recommendation sums up the facts of this case well:

“Dr. Pagedar did eventually acknowledge the probation and did provide various documents and information to the Board, but not until she was ‘caught.’”

It is troubling that Dr. Pagedar seems to show a pattern of failure to accept responsibility for her actions. Dr. Virginia Wood, the Program Director at Wright State University School of Medicine testified that she had a significant conversation with Dr. Pagedar in February 2006. Dr. Wood testified that she told Dr. Pagedar that she saw a pattern of behavior that concerned her – that Dr. Pagedar always seemed to provide excuses for why something was not her fault or why someone else was responsible. This

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conversation, which took place at least 8 months before Dr. Pagedar's current action before the Board, is troubling given the responsibility of a doctor when caring for patients. The question is whether Dr. Pagedar will accept responsibility for her actions in the future – will she only accept responsibility when she is caught? Thank you.

Mr. Wilcox stated that when he reviewed the Report and Recommendation, he discovered something that he feels is important and that he wished to point out to Board members. He referred to Conclusion of Law number 5 of the Report and Recommendation, which states in part:

As set forth in Finding of Fact 5, Dr. Pagedar provided additional information to FCVS in February 2007, but she did not complete or submit a new FCVS application page in February 2007. She did not for a second time answer "No" to the probation and negative report questions in the "Postgraduate Medical Education" section of her FCVS application in February 2007.

Mr. Wilcox stated that the Hearing Examiner made a conclusion that that portion of the citation letter was not supported by evidence at hearing. From the record, he believes that this is contradicted in two separate places. The first place is on page six of the Report and Recommendation, paragraph 12 of the Summary of Evidence, which states in part:

...In February 2007, Dr. Pagedar provided that updated information regarding her residency dates. Ms. Nicole Lloyd, a program coordinator of student records at FSMB, testified that, at that same time, Dr. Pagedar again completed the unusual circumstances questions and reported that there was no probation and were no negative reports. Dr. Pagedar testified, however, that she did not answer the unusual circumstances questions a second time.

Mr. Wilcox stated that the second place is page five of States Exhibit 2, which was submitted at hearing. The form clearly asks whether the applicant had ever taken a leave of absence or break from medical education or placed on probation, whether she was ever disciplined or placed under investigation, or whether any negative reports were filed against her. Dr. Pagedar answered "no" to all of these questions.

Mr. Wilcox stated that he thinks that the final order should reflect, given that the Board has documentation itself, and testimony from the representative from the Federation of State medical Boards, that that portion of the citation letter was also proved.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER IN THE MATTER OF UJWALA PAGEDAR, M.D. MR. BROWNING SECONDED THE MOTION.

Dr. Varyani stated that he would now entertain discussion in the above matter.

Dr. Kumar stated that he would first like to make it clear that the citation was not talking about the submission of fraudulent information on the application. It talked about the fact that Dr. Pagedar did not

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timely update her application when other things came to light. Dr. Kumar stated that it is also quite clear from the record that Dr. Pagedar should have known that those things existed beforehand and that she should have answered “yes” to those questions.

Dr. Kumar stated that he wanted to point out that he personally knows Dr. Virginia Wood very well, and he understands that the comments that she made are very appropriate. He added that he’s sure that Dr. Wood had informed Dr. Pagedar of the problems she was having in the residency. He added, however, that he also must give credit to Dr. Pagedar because she did correct her deficiencies during her residency.

Dr. Kumar stated that, taking into account Dr. Pagedar’s presentation today, and the fact that she, virtually, has been suspended for the last ten months or so, he felt it would be prudent to reduce the one-year suspension to three months. That will, essentially give her a year of suspension from the time she graduated from her residency program. Dr. Kumar stated that he felt that that is consistent with what the Board has done in the past.

Dr. Steinbergh asked whether Dr. Kumar’s comments were appropriate concerning Conclusion of Law Number 5.

Ms. Pfeiffer indicated that they were, and she suggested that Finding of Fact Number 5 might also need to be amended.

Mr. Wilcox indicated that Finding of Fact number 5 could be amended by removing the word “not” from the second sentence of the second paragraph, and Conclusion of Law number 5 could be amended by removing the word “not” from the second sentence and by deleting the last sentence in the paragraph.

DR. KUMAR MOVED TO AMEND FINDINGS OF FACT NUMBER 5 AND CONCLUSION OF LAW NUMBER 5 OF MS. PETRUCCI’S REPORT AND RECOMMENDATION TO NOTE DR. PAGEDAR’S INCORRECT RESPONSE TO QUESTIONS IN HER F.C.V.S. APPLICATION AND THAT THE CHARGES IN THE CITATION HAVE BEEN PROVED. DR. KUMAR FURTHER MOVED TO REDUCE THE PERIOD OF SUSPENSION IN THE PROPOSED ORDER TO THREE MONTHS FROM THE EFFECTIVE DATE OF THE ORDER. DR. STEINBERGH SECONDED THE MOTION.

Mr. Whitehouse expressed concern that the Board might be creating a precedent if it considers something along the lines of “time served.” He stated that the Board is certainly within its rights to say that twelve months’ suspension is too much and choose to make it three months; but he suggested that the Board not say that a year’s suspension is appropriate, but because of the time this process has taken, it will be changed to three months. He stated that what happens is, inevitably, the seriousness with which this Board looks at any of these cases is judged by these findings, and you lose it in the context if you start talking about “time served.” He added that it creates a bad precedent.

Dr. Egner stated that she thinks that this is very serious. Dr. Egner stated that she doesn’t think that the questions are ambiguous. Dr. Pagedar had negative reports all three years of her residency program. She was placed on probation, and she knew that from being notified both orally and in writing. Dr. Egner

stated that Dr. Pagedar was in an institution that, had she had any question about what the answer to those questions should have been when she filled out her application, she had access to her professors in her department and could have asked them how she should answer the question. Dr. Egner stated that she didn't want the Board to know, she didn't want the Federation to know. She stated that she thinks that this was not an omission, but was something that Dr. Pagedar didn't want to be known. Dr. Egner stated that she doesn't think that any changes should be made, except to delete what Mr. Wilcox has asked the Board to delete to make the Report and Recommendation more accurate. Dr. Egner stated that Dr. Pagedar needs to understand the seriousness of this. She added that Dr. Pagedar is starting out on a career and she has made some terrible choices. However, she made those choices, and she's intelligent enough to know that this was fraudulent. Dr. Egner stated that she thinks that Dr. Pagedar would benefit from both of the ethics courses and she needs to have the suspension and probation time, without time taken off.

Dr. Steinbergh stated that she agrees with Dr. Egner, but noted that the Board didn't charge Dr. Pagedar with fraud. It charged her with deceptiveness on her application. There is no question that Dr. Pagedar lied about these facts. Concerning the period of suspension, Dr. Steinbergh stated that the Board has already set a precedent on cases such as this. She stated that there are cases where the Board recognizes that the physician has been out of practice for a period of time. The Board has at times taken that into account. Dr. Steinbergh stated that Dr. Pagedar has indicated her understanding, and she personally doubts that Dr. Pagedar, having come before this Board will ever do anything like that again. The Board does not accept deception. Physicians cannot deceive. One of things this Board does is project ahead. If a physician deceives the Board, how is the Board to believe that the physician won't be deceptive in patient care? Dr. Steinbergh stated that physicians are responsible for the lives of their patients. Every word physicians put on patient charts and every piece of information a physician gives to a patient has to be honest, regardless of the outcome. Dr. Steinbergh stated that when the Board sees deception early in a young physician's career, it is very concerned.

Dr. Steinbergh stated that the Proposed Order does require a professional ethics course and a personal ethics course, which will reinforce those issues that concern the Board. She added that Dr. Pagedar has her academic degree, and no one can take that from her. But in order to practice medicine, Dr. Steinbergh believes that Dr. Pagedar has a certain responsibility to her license. She's in trouble because she lied. She cannot do that. Physicians must be intellectually honest and always, when it comes to patient care, be honest.

Dr. Steinbergh expressed concern with suspending Dr. Pagedar's license for a year at this stage of her career. She suggested a compromise of six months.

Dr. Kumar stated that there is no question about the fact that Dr. Pagedar misled and misrepresented herself. The thing that drives him to reduce the suspension is the fact that the Board really did not charge Dr. Pagedar for falsifying her initial application. The citation essentially charged her with not updating the information in a timely manner. Dr. Kumar stated that he would agree with a compromise of six months. He added that he would point out that four or five years ago, the Board had a similar kind of situation to the extent that the resident had to go back to do another six months or a year of residency and the Board suspended that individual's license for a lot less than a year. He stated that he was trying to be consistent.

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Dr. Varyani stated that he is from Dr. Egner's camp. He asked whether Dr. Egner agreed with Dr. Kumar's statement, or whether she had different feelings.

Dr. Egner stated that she doesn't know if she agrees, but she will go along with the amendment.

DR. KUMAR AGREED TO CHANGE THE PERIOD OF SUSPENSION TIME IN HIS MOTION TO SIX MONTHS. DR. STEINBERGH, AS SECOND, ALSO AGREED.

Mr. Browning asked when the suspension period begins.

Dr. Steinbergh stated that it begins immediately upon mailing of the Order.

Dr. Robbins commented that he agrees with what has been said by Dr. Egner, Dr. Steinbergh and Dr. Kumar. He added that he came to the meeting not willing to compromise; but after hearing Dr. Pagedar's statement today, he will go along with the amendment.

A vote was taken on Dr. Kumar's motion to amend:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

DR. KUMAR MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER, AS AMENDED, IN THE MATTER OF UJWALA PAGEDAR, M.D. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

CARSTEN SCHROEDER, M.D.

Dr. Varyani directed the Board's attention to the matter of Dr. Schroeder. He advised that no objections were filed to Hearing Examiner Porter's Report and Recommendation.

Dr. Varyani continued that a request to address the Board has been timely filed on behalf of Dr. Schroeder. Five minutes would be allowed for that address.

Dr. Schroeder thanked the Board for the opportunity to talk to it. Concerning his application for licensure, Dr. Schroeder advised that he did six years of medical training and five years of residency in general surgery in Germany, where he is fully boarded. He then did one and a half years of fellowship training in thoracic surgery in the Cleveland Clinic, University Hospitals and Case Western in Cleveland.

Dr. Schroeder asked that the Board be consistent with past decisions. He stated that there were two physicians at the Cleveland Clinic: Pradeep Manikoth Nambiar, M.D., who got his medical training in the U.K. and got a full license without any training in the United States; and Michael John Flynn, M.D., who, after one year of fellowship at the Cleveland Clinic, was granted a license without any questions asked by the Board. Dr. Schroeder stated that he is just asking the Board to be consistent.

Dr. Varyani asked whether the Assistant Attorney General wished to respond.

Mr. Wilcox stated that he did not.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. PORTER'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER IN THE MATTER OF CARSTEN SCHROEDER, M.D. MR. BROWNING SECONDED THE MOTION.

Dr. Varyani stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that, as a result of reviewing the Findings of Fact and the Report and Recommendation, including information on Dr. Schroeder's postgraduate medical education and the fact that he's currently training at or around the PGY 7 level, she finds that the Conclusions of Law were appropriate and she would propose granting Dr. Schroeder a license. Dr. Steinbergh commented that Dr. Schroeder did submit some very good letters of support on his behalf. She again stated that she finds the Proposed Order granting Dr. Schroeder a license is appropriate.

Dr. Kumar agreed with Dr. Steinbergh. He stated that the only thing he wants to add is a question Dr. Schroeder raised today. He wants the record to reflect that the Board looks at each case individually. He stated that Dr. Schroeder may not have all of the information that the Board had regarding the other two cases he mentioned. Otherwise, he fully supports granting Dr. Schroeder a license.

Dr. Varyani stated that he does remember one of the names Dr. Schroeder had mentioned, but he believes there was a difference concerning board certification. He doesn't remember the other case. Dr. Varyani

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stated that the Medical Board has certain rules, and it has been trying to amend the rules according to the needs of the physicians in the State of Ohio. It is very important that the Board determine that there is adequate training. He added that, as far as he personally feels, the Board feels very comfortable with Dr. Schroeder's level of training.

Dr. Steinbergh stated that it's important for Dr. Schroeder to know that when it reviews licensure applications, and if the applicant falls out in any area, the Committee who evaluates the applications makes a recommendation to the Board and then the Board makes a decision. She stated that there are times when the Board needs more information. Dr. Schroeder can't compare himself to others who may have preceded him and have gone smoothly through the process. It really does depend on the information the Board sees on the application.

A vote was taken on Dr. Steinbergh's motion to approve and confirm:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

STEFAN SEMCHYSHYN, M.D.

Dr. Varyani directed the Board's attention to the matter of Stefan Semchyshyn, M.D. He advised that objections were filed to Hearing Examiner Petrucci's Report and Recommendation and were previously distributed to Board members.

Dr. Varyani advised that, attached to the Objections are materials that are being construed as a motion to admit further evidence. This material was offered as Respondent's exhibit E21a at the hearing, and was not admitted into the record by the Hearing Examiner. Dr. Varyani advised that the Assistant Attorney General has filed a motion to strike this material from the objections. Dr. Varyani asked for a motion concerning the motion to admit further evidence.

DR. STEINBERGH MOVED TO STRIKE THE MATERIALS ATTACHED TO DR. SEMCHYSHYN'S OBJECTIONS FROM THE HEARING RECORD. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye

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Dr. Talmage	- abstain
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Robbins	- aye
Dr. Kumar	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

Dr. Varyani stated that the materials will not be included in the hearing record and will not be considered by the Board.

DR. EGNER MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER IN THE MATTER OF STEFAN SEMCHYSHYN, M.D. DR. ROBBINS SECONDED THE MOTION.

Dr. Varyani stated that he would now entertain discussion in the above matter.

Dr. Egner stated that she is not in agreement with the Proposed Order in this case. She stated that she found this case to have many troublesome spots in many areas. Dr. Egner advised that Dr. Semchyshyn made false, fraudulent statements and misrepresentations in connection with his licensure application. She noted that he has had multiple problems in areas similar to this with many state medical boards and areas of practice where his truth-telling comes into question. Unfortunately, in reading Dr. Semchyshyn's testimony during the hearing, she felt that he passes this off as just the most minor part of what we're talking about. He advises that his wife filled out the application, she was his office manager, and he just signed it. He then goes on and on about all the ways that he has been so wronged and followed throughout his career. Dr. Egner stated that, although she would have liked to see the Hearing Examiner try to bring him back to the point a little earlier, she thinks that she does understand: Dr. Semchyshyn thinks that this is all related, but he has lied on multiple occasions.

Dr. Egner stated that Dr. Semchyshyn wants his Ohio license for sentimental reasons. Dr. Egner stated that she doesn't think that that's the Board's job.

Dr. Egner stated that she looks at Dr. Semchyshyn's career, his propensity for lying, and asks whether this is someone who will add to the care in Ohio. She stated that the answer is "no." Does the Board have reason to deny Dr. Semchyshyn's request? She stated that it does. Dr. Semchyshyn has had multiple problems in multiple areas and nothing lets her think that he wouldn't continue to have those problems. Dr. Egner stated that she would recommend permanently denying Dr. Semchyshyn's request.

Dr. Kumar stated that it's not just an issue of lying. In looking at the record, he finds that Dr. Semchyshyn has had significant difficulty in various hospitals around the country where his care has been questioned, his availability has been questioned, his decision-making has been questioned; and Dr. Semchyshyn seems to throw all this at the feet of a couple of individuals. Dr. Kumar stated that he must grant to some degree

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that there was some evidence in the record that notes by a resident were written after the fact, but he can't be absolutely sure about that.

Dr. Kumar stated that this is an issue beyond just lying. It's an issue of minimal standards: how and how often he does cervical cerclage; how and how often he use tocolytics; how often was he available to provide problem-solving when there were complications. Dr. Kumar stated that Dr. Semchyshyn has been investigated on multiple occasions in multiple places, and his quality of care has been questioned. Dr. Kumar stated that he doesn't think that the Board should just reprimand this individual. He suggested that the Board either permanently deny reinstatement of Dr. Semchyshyn's Ohio license, or permanently revoke his license. If the Board does grant him a license, Dr. Kumar stated that he would want an indefinite suspension of Dr. Semchyshyn's license and require him to be evaluated by some competency examination. His simpler solution would be to permanently deny Dr. Semchyshyn's reinstatement request.

Ms. Pfeiffer advised the Board that Dr. Semchyshyn is currently, actively licensed to practice medicine in Ohio. This is not a case of licensure application.

Dr. Steinbergh stated that it would be a permanent revocation and not a permanent denial. Dr. Steinbergh referred to the Proposed Order and commented that Dr. Semchyshyn is never going to practice again in Ohio. More to the point is whether the Board wants to set up all of these terms and then be required to potentially monitor this physician. Dr. Steinbergh stated that she does want to comment that the Board didn't charge Dr. Semchyshyn with minimal standards or fraud. The Board has charged him with misrepresentation or deception in applying for the license and the fact that he's had other actions on other licenses. Dr. Steinbergh stated that she doesn't disagree with the outcome. She added that she was interested in hearing from Dr. Egner, especially since she is an OB/GYN physician. Dr. Steinbergh stated that with the number of concerns the Board has about this physician, she didn't come with any set conclusion in mind. She stated that if the Board does reprimand Dr. Semchyshyn and enter the Proposed Order, she just cannot imagine that Dr. Semchyshyn will go through this and ultimately practice. She added that she does agree with Dr. Egner that the Board isn't obligated to give a license for emotional reasons or that type of thing. She added that she would agree with an Order of permanent revocation.

Dr. Egner stated that she didn't make comments about Dr. Semchyshyn's practice because this is not a minimal standards case. She added that she does, however, feel that his practice judgment is in keeping with much of his other judgments. Dr. Semchyshyn is someone who is not influenced by standards or by rules. He very much does things his own way, how he wants them, whether or not his way is consistent with practice standards or rules of the department.

Dr. Kumar stated that the only reason he looked at minimal standards is because action was taken against his clinical privileges by other institutions.

Dr. Egner stated that as she read this case, she could see how he ran into trouble, both in how he practiced and the judgments he made in his interactions and in his clinical decisions. She commented that Dr. Semchyshyn does not follow standard rules in any area. She asked why he would follow those rules in Ohio if he were permitted to keep his license.

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Dr. Varyani spoke in support of Dr. Egner's recommendation for permanent revocation.

DR. EGNER MOVED TO AMEND THE PROPOSED ORDER IN THE MATTER OF STEFAN SEMCHYSHYN, M.D., BY SUBSTITUTING AN ORDER OF PERMANENT REVOCATION. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER, AS AMENDED, IN THE MATTER OF STEFAN SEMCHYSHYN, M.D. MR. BROWNING SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

FINDINGS, ORDERS AND JOURNAL ENTRIES

NAEEM AL-KHALIQ CHAUDHRY, M.D.

Dr. Varyani noted that, by letter of November 28, 2007, the Board issued a Notice of Opportunity for Hearing to Naeem Al-Khaliq Chaudhry, M.D., based upon allegations contained in the letter. The Notice was mailed via certified mail, return receipt requested, to Dr. Chaudhry's address of record. A signed certified mail receipt was returned to the Board documenting proper service of the Notice. No hearing request has been received from Dr. Chaudhry and more than thirty days have elapsed since the mailing of

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that notice. The matter was before the Board for final disposition.

DR. STEINBERGH MOVED TO FIND THAT THERE IS RELIABLE, PROBATIVE AND SUBSTANTIAL EVIDENCE TO SUPPORT THE ALLEGATIONS CONTAINED IN THE NOVEMBER 28, 2007 NOTICE AND TO ENTER AN ORDER , EFFECTIVE IMMEDIATELY, DENYING DR. CHAUDHRY'S REQUEST FOR A WAIVER OF THE SEVEN-YEAR RULE AND DENYING DR. CHAUDHRY'S APPLICATION FOR AN OHIO LICENSE. MR. HAIRSTON SECONDED THE MOTION.

Dr. Varyani stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that Dr. Chaudhry has not completed an examination sequence acceptable to the Board. He was notified of the Board's decision and did not request a hearing. Dr. Steinbergh stated that the Proposed Order is appropriate.

A vote was taken on Dr. Steinbergh's motion:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

CITATIONS, PROPOSED DENIALS & ORDERS OF IMMEDIATE AND SUMMARY SUSPENSION

EMMANOUEL CORONEOS, M.D. – CITATION LETTER

At this time the Board read and considered the proposed citation letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

DR. KUMAR MOVED TO SEND THE CITATION LETTER TO DR. CORONEOS. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye

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Dr. Robbins	- aye
Dr. Kumar	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

PATRICIA ANN FOWLER, M.T. – CITATION LETTER

At this time the Board read and considered the proposed citation letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

**DR. KUMAR MOVED TO SEND THE CITATION LETTER TO MS. FOWLER.
DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

SARA C. GORBETT - LETTER OF PROPOSED DENIAL

At this time the Board read and considered the letter of proposed denial in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

**DR. STEINBERGH MOVED TO SEND THE LETTER OF PROPOSED DENIAL TO
MS. GORBETT. MR. HAIRSTON SECONDED THE MOTION.** A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

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The motion carried.

KYMBERLY L. JACOBS - LETTER OF PROPOSED DENIAL

At this time the Board read and considered the letter of proposed denial in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

DR. STEINBERGH MOVED TO SEND THE LETTER OF PROPOSED DENIAL TO MS. JACOBS. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

SCOTT BRIAN LINDSAY, D.P.M. – CITATION LETTER

At this time the Board read and considered the proposed citation letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

MR. HAIRSTON MOVED TO SEND THE CITATION LETTER TO DR. LINDSAY. DR. ROBBINS SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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MARK STEPHEN MCALLISTER, M.D. – ORDER OF SUMMARY SUSPENSION AND NOTICE OF OPPORTUNITY FOR HEARING

At this time the Board read and considered the proposed Order of Summary Suspension and Notice of Opportunity for Hearing in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

DR. KUMAR MOVED TO ENTER AN ORDER OF SUMMARY SUSPENSION IN THE MATTER OF MARK STEPHEN MCALLISTER, M.D., IN ACCORDANCE WITH SECTION 4731.22(G), OHIO REVISED CODE, AND TO ISSUE THE NOTICE OF SUMMARY SUSPENSION AND OPPORTUNITY FOR HEARING. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

STEPHEN RANDALL PORTER, M.D. – CITATION LETTER

At this time the Board read and considered the proposed citation letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

DR. KUMAR MOVED TO SEND THE CITATION LETTER TO DR. PORTER. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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RATIFICATION OF SETTLEMENT AGREEMENTS

Board members were provided with copies of settlement agreements negotiated by Board staff and/or the staff of the Office of the Attorney General, as authorized by the Board's Secretary and Supervising Member, and as appropriate, the Board President, as well as copies of summaries of the agreements. The names and license numbers of the licensee or applicant subjects of such settlement agreements were removed from the documents.

LEO MIHAJLO OGNEN, M.D. – SURRENDER OF LICENSE

DR. STEINBERGH MOVED TO RATIFY THE SECRETARY AND SUPERVISING MEMBER'S ACCEPTANCE OF THE PERMANENT SURRENDER WITH CONSENT TO REVOCATION OF DR. OGNEN'S LICENSE TO PRACTICE MEDICINE AND SURGERY IN THE STATE OF OHIO. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

JOHN LOUIS RATZ, M.D. – CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. RATZ. MR. BROWNING SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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SAMUEL E. PERLER-TOMBOLY, M.D. – SURRENDER OF CERTIFICATE TO PRACTICE
MEDICINE AND SURGERY

**DR. STEINBERGH MOVED TO RATIFY THE PROPOSED PERMANENT SURRENDER WITH
CONSENT TO REVOCATION OF DR. PERLER-TOMBOLY'S LICENSE TO PRACTICE
MEDICINE AND SURGERY. MR. HAIRSTON SECONDED THE MOTION.** A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

CHRISTINA MARIE BROWN, M.T. – CONSENT AGREEMENT

**DR. STEINBERGH MOVED TO RATIFY THE PROPOSED STEP I CONSENT AGREEMENT
WITH MS. BROWN. MR. HAIRSTON SECONDED THE MOTION.** A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

ROBERT L. BRANDT, JR., M.D. – CONSENT AGREEMENT

**DR. STEINBERGH MOVED TO RATIFY THE PROPOSED STEP II CONSENT AGREEMENT
WITH DR. BRANDT. MR. BROWNING SECONDED THE MOTION.** A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye

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Dr. Talmage	- abstain
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Robbins	- aye
Dr. Kumar	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

TRACY ANN KOTNIK, M.D. – CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. KOTNIK. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- nay
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

CHRISTOPHER T. LIEDERBACH, M.D. – CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. LIEDERBACH. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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COMPLAINT NO. 07-2151A - - CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT.

DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- nay
	Mr. Hairston	- nay
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion failed.

Dr. Steinbergh stated that she appreciates the “nay” votes in this matter, but reminded the Board members that the Secretary and Supervising Member have more information available to them and sometimes have to make the decision to go forward with a consent agreement because it may be the most efficient way to handle the case.

Ms. Schmidt advised that the motion to ratify failed, due to the lack of six votes needed to pass.

Dr. Egner stated that this is unfortunate. She stated that she would be quite accepting of a failure when it's due to disagreement with the consent agreement. It is in this case, but it's also due to lack of attendance. She stated that Board members have a duty to do this job. The citizens of Ohio expect that. She expressed concern over a motion that fails due to lack of attendance.

Mr. Browning stated that he agrees with Dr. Egner's comment, but he doesn't agree that the system isn't working because of the votes. He stated that he agrees with 99% of the consent agreements, and he respects the work that goes into them. He understands the pragmatic nature of the consent agreements. He indicated that he doesn't agree that it's okay to handle sex-related offenses through a consent agreement. He stated that he can't imagine talking to anyone and telling them stories about doctors abusing patients sexually and the Board entered into a consent agreement with them.

Dr. Varyani stated that he felt the same way. He added that this case needed his consent, and he stated that he did give consent because this was the lesser of two evils.

Dr. Steinbergh stated that she thinks that the Board members understand and are respectful of Dr. Varyani's position. She stated that now the Board needs to decide, procedurally, where it goes. She noted that it is rare that the Board doesn't come to terms with a consent agreement. She asked whether this will now go back to the practitioner.

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Mr. Browning asked whether this could be held open until the next day.

Mr. Whitehouse stated that the Board already voted, but it could reconsider.

Dr. Varyani stated that the Board has already voted on this, and asked whether the Board could table this matter because of non-settlement. He noted that Dr. Madia will be back on Thursday.

Mr. Browning commented that that wouldn't change his vote.

Dr. Steinbergh stated that the Board has tabled such matters for further discussion, but she's not sure that the Board has ever done this with a consent agreement.

Ms. Marshall suggested that the Board confer with the Assistant Attorneys General in getting an answer. She doesn't know whether the Board can entertain something on which they have already voted.

Dr. Egner stated that if the Board can't table this, the agreement may need to be renegotiated. She added that it is so rare that the Board asks to renegotiate, but this may be one of those occasions.

Mr. Whitehouse stated that this matter will be looked into. He added that he's not sure that the matter needs to be tabled. The staff can always bring this back before the Board if it is interested in discussing this matter again. He acknowledged that there are attendance issues involved. He stated that he's talked with the Governor's office about the need to make sure that these seats are filled more timely. The problem is that, in the interim, there are these kinds of issues to face. He stated that he doesn't feel that it would be improper for the Board to revisit this matter on Thursday.

Ms. Pfeiffer stated that, as it stands now, the Board has not approved the proposed agreement. Enforcement can do what it needs to do. If the Board chooses, it could move to reconsider the matter today or on Thursday.

Dr. Varyani stated that, since the Board has already voted on this matter, staff should try to renegotiate and present the matter again in March.

Ms. Marshall asked what the Board would like staff to try to get.

Dr. Varyani stated that he doesn't think that the Board can openly talk about it, but this agreement was not approved and staff needs to try something else.

Dr. Steinbergh stated that there is opposition from consumers, and that's very important. Staff needs to do better in satisfying consumer representation.

MARK A. MATTHEWS, M.D. – SURRENDER OF LICENSE

MOVED TO RATIFY THE SECRETARY AND SUPERVISING MEMBER'S ACCEPTANCE OF THE PERMANENT SURRENDER OF DR. MATTHEWS' LICENSE TO PRACTICE MEDICINE

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AND SURGERY IN THE STATE OF OHIO. MR. HAIRSTON SECONDED THE MOTION. A
vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

IMRAN RAZA NAQVI, M.D. – CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED STEP I CONSENT AGREEMENT
WITH DR. NAQVI. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

WILLIAM JAMES PLATT, D.O. – CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED STEP I CONSENT AGREEMENT
WITH DR. PLATT. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye

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Dr. Steinbergh - aye
 Dr. Varyani - aye

The motion carried.

Dr. Steinbergh noted that this physician has had multiple relapses. She stated that she appreciates the fact that there have been no documented incidents as a result of the relapses, but she suspects that there have been. Dr. Steinbergh stated that this physician needs to know that he's on the road to permanent revocation. She added that she wishes that the period of suspension was longer in this case.

RICHARD JOSEPH SIEVERS, II, D.O. – CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. SIEVERS. MR. BROWNING SECONDED THE MOTION. A vote was taken:

ROLL CALL:

Mr. Albert	- abstain
Dr. Egner	- aye
Dr. Talmage	- abstain
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Robbins	- aye
Dr. Kumar	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

TOBY JAMES TIPPIE, P.A. – CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED STEP II CONSENT AGREEMENT WITH MR. TIPPIE. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:

Mr. Albert	- abstain
Dr. Egner	- aye
Dr. Talmage	- abstain
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Robbins	- aye
Dr. Kumar	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

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RICHARD A. ZINNI, D.O. – CONSENT AGREEMENT

DR. KUMAR MOVED TO RATIFY THE PROPOSED STEP II CONSENT AGREEMENT WITH DR. ZINNI. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

SHANNON R. KELLEY, M.T. – CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH MS. KELLEY. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Dr. Egner stated that there might have been a lot of publicity about one of the cases before the Board today. She asked whether the Board has a mechanism to notify the press about actions it takes. She commented that the Board was seen in an unfavorable light about one case when it first came out. She stated that the Board should be a little more proactive in announcing actions it has taken.

Mr. Whitehouse stated that the Board can't control the media. He added that in cases that are high profile in nature, the Board certainly has had the opportunity to have conversations with the media in many instances. In those cases where something is done, it's not uncommon for the media to ask the Board to give them a call if something is done. He stated that that would certainly be done, adding that the staff is trying to be proactive in that regard.

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Mr. Albert stated that he wanted to draw the Board's attention to the number of consent agreements on this month's agenda. He stated that the enforcement staff puts a lot of work into consent agreements.

Mr. Albert expressed the Board's appreciation for the work the enforcement staff does.

Dr. Varyani agreed, stating that they do a great job.

At this time (3:00 p.m.) the Board took a break. The meeting reconvened at 3:17 p.m. with Dr. Steinbergh out of the room.

PROBATIONARY APPEARANCES

ASHRAF S. BADOUR, M.D.

Dr. Badour made his initial appearance before the Board, pursuant to the terms of his November 15, 2007 Consent Agreement.

In response to Board members' questions, Dr. Badour stated that everything is going well for him. He finished his training at Case Western Reserve University in 1987 and did a fellowship in epilepsy in Pittsburgh. He then moved to the Wheeling area and practiced as a neurologist in West Virginia and Ohio for about 19 years. He didn't have any problem with the hospital, except he wasn't in agreement with a lot of things that happened there. He developed bipolar disorder, stating that he thinks that he has some symptoms. When he was depressed or anxious, it was related to the practice. When he had a little bit of energy, he felt he was okay, so he never really sought a psychiatric evaluation. In the beginning of February, he started having problems with sleep. He was very anxious. By May he was really florid, a manifestation of the manic attack. Because of that, he ran into some trouble with law enforcement. After this, by court order, he was actually pushed out of his private practice, which he'd built over 19 years. All five hospitals in the area suspended his privileges. Dr. Badour stated that he is not currently practicing.

Dr. Kumar asked whether Dr. Badour could tell the Board a little bit more about the problems he had with law enforcement.

Dr. Badour stated that the first problem was that he was driving fast in Hancock County in West Virginia, coming from Pittsburgh. He had a new car and he was driving probably close to 95 to 100 miles per hour, and he got stopped. He stated that he never tried to elude officers or try to flee. Two days later he was going to his office and was arrested on the hospital premises by the Martins Ferry police for disturbance of the peace. The hospital suspended him, but they didn't send him a letter saying that he wasn't allowed to go to the hospital. Later, he went to his office, which was on the hospital premises, and he couldn't get into the building, so he called the police. The police arrested him.

Dr. Kumar asked whether Dr. Badour understands his consent agreement.

Dr. Badour stated that he does. He indicated that he has no questions about his agreement. He added that he's following all the requirements.

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In response to further questions, Dr. Badour stated that he does take medications for his mental disorder. He sees Dr. Duane Spiker in the Western Psychiatric Institute of the University of Pittsburgh. Dr. Spiker is the head of the bipolar clinic there. He's been taking Seroquel, Lamictal and Prozac. At times he takes Ativan. He sees Dr. Spiker every two weeks. He stated that he does feel a difference on these medications. He stated that he feels calmer and happier than he's felt in a long time.

Dr. Steinbergh returned to the room during the previous discussion.

In response to Dr. Steinbergh's questions, Dr. Badour stated that he is currently not working. He lost his private practice. He has to get his furniture and records from the hospital.

Dr. Steinbergh stated that Dr. Spiker has not yet been approved by the Board to be Dr. Badour's treating psychiatrist.

Ms. Bickers advised that she is waiting for Dr. Spiker's curriculum vitae (CV) to be received before the request goes to the Board.

Dr. Varyani stated that, even though Dr. Badour says he understands his consent agreement, he really doesn't. In order for Dr. Badour to ask for approval of a monitor, the Board needs to see that person's CV.

Dr. Badour stated that the letter only asked him to submit the name of a psychiatrist. However, he was required to submit the name and a CV. That's why he never requested that from Dr. Spiker.

In response to further questions, Dr. Badour stated that he doesn't have a family with him. He's divorced and has two children, who live with his ex-wife in Virginia. He was divorced in 1994. His children are 19 and 18 years old. He doesn't have a close relationship with them. He stated that he thinks that the distance and their activities have prevented it. He'll get a phone call here and there.

DR. KUMAR MOVED TO CONTINUE DR. BADOUR UNDER THE TERMS OF HIS NOVEMBER 15, 2007 CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. STEINBERGH SECONDED THE MOTION. A
vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

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The motion carried.

CELESTE D. BREWER-EDWARDS, P.A.

Ms. Brewer-Edwards made her initial appearance before the Board, pursuant to the terms of her November 15, 2007 Step I Consent Agreement.

In response to Board members' questions, Ms. Brewer-Edwards advised that things are going pretty well for her. She stated that the previous day she graduated from her intensive outpatient therapy, she completed her aftercare requirements, and she got her coin. She will be seeing Dr. Janesz, part of the Cleveland Clinic's alcohol and drug recovery team, to become a part of the Caduceus group. Ms. Brewer-Edwards stated that she looks forward to taking part in that group. She feels that they'll help her sort out some of the professional issues related to impairment.

Ms. Brewer-Edwards stated that she thinks a lot of things arose from exhaustion over work. She worked as a surgical P.A. at an inner city hospital. It was a big trauma hospital, and she worked really long hours and many days, as a lot of physicians and P.A.s do. Her problem came on the tail of a divorce. She was divorced in 2006 and underwent a really nasty property battle with her family, causing her to isolate. Most of her family lives in southeast Cleveland, so she moved clear to the lake, as far away as she could get. At the time of the incident, she was dealing with life alone and working very hard. She had been diagnosed with migraine headaches, so she started a new medication for that. She added that she wasn't eating. She lost about 50 pounds. Ms. Brewer-Edwards stated that it was really a tough time for her when the incident happened. She added that she thinks that she was ignoring the issue. She had some emotional things going on between her and her mom and her ex-husband. There was just a lot of stuff going on at the time, and she just kind of buried herself between work and going out.

Ms. Brewer-Edwards continued that one of the nights she was out, the day after Labor Day, a group of girls attacked her and a companion when they were leaving. She stated that she wasn't hurt very much. Ms. Brewer-Edwards stated that they ripped her hair out, almost scalping her, but she wasn't really hurt. Her companion was kicked in the head and he suffered a concussion. He didn't have insurance. Ms. Brewer-Edwards advised that in the period before this time she had been using marijuana, probably because she was depressed. This incident occurred after that period, and she took her friend to the hospital where she was working because she knew that they would take care of him and she would be able to see him the next day. He didn't have any insurance and she knew that he would receive excellent medical care there and she could look in on him. But when she got there, they said that she was behaving erratically and irrationally. Ms. Brewer-Edwards stated that, in retrospect, maybe she was; but she believes it was more because she had just been beat up and was traumatized.

Dr. Steinbergh asked Ms. Brewer-Edwards how long she has been dependent on marijuana.

Ms. Brewer-Edwards stated that she had initially started using it in November 2006. Her use was just sporadic. It wasn't something that she did frequently, initially. She thinks that as she worked more, she started to use more. She didn't use marijuana or consume alcohol or anything else during her education period. She stated that when she went to school, she worked full time and she has a daughter. She didn't

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have a lot of time for partying during that time. She had a lot of family support, and between working full-time and going to class and keeping up with her daughter and her daughter's activities, there wasn't a lot of time for being in the streets.

Dr. Steinbergh asked whether Ms. Brewer-Edwards understands her consent agreement.

Ms. Brewer-Edwards stated that she does. She added that she has been in touch with Ms. Bickers and Ms. Gillman frequently about her case. She's in compliance and is working very hard toward getting her second physician evaluation so that she can request reinstatement of her license. She does not have a job to go to as of this time, but she does have some prospects. Ms. Brewer-Edwards stated that before she became a P.A. she had a very strong research background, and she keeps trying to get a job working in research, and has been told by people at that the places with which she's interviewed that they have a job for her as a P.A. She stated that she gets many offers, even though she can't work now, so she finds that to be refreshing. She added that it's nice that people still believe in her. Ms. Brewer-Edwards stated that she's been clean for five months now. She attends N.A. meetings more than three days a week, and advised that she enjoys them. When she leaves this meeting, she will be going back to Cleveland. She's the Chairperson at her home group and she has two speakers lined up. She added that she's quite excited about it.

In response to questions about her family support, Ms. Brewer-Edwards stated that she wouldn't be able to survive without her family because she's not working and they provide her income, a place to live, food, everything. She stated that she's blessed to have a very supportive and loving family. She's restored her relationship with her family since all this has happened.

DR. STEINBERGH MOVED TO CONTINUE MS. BREWER-EDWARDS UNDER THE TERMS OF HER NOVEMBER 15, 2007 STEP 1 CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

GREGORY B. CAMP, M.D.

Dr. Camp made his initial appearance before the Board, pursuant to the terms of his November 15, 2007

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Step I Consent Agreement.

In response to Board members' questions, Dr. Camp stated that he is doing fine. He apologized to the Board for not truthfully reporting on his 2003 renewal that he is a recovering alcoholic. He stated that he was active at that time. He did report truthfully in 2007. He has been sober since February 2, 2005. Dr. Camp stated that he attends many A.A. meetings and a Caduceus meeting every week. Dr. Camp commented that he loves A.A.

Dr. Steinbergh noted that Dr. Camp underwent treatment at Wilmington Treatment Center, and asked whether this is an approved treatment provider.

Ms. Bickers stated that it is not. She referred to paragraph 10.b.i. of the November 15, 2007 Step 1 Consent Agreement which requires Dr. Camp to either show that he has participated in at least 28 days of inpatient treatment at an approved treatment provider or to submit to the Board written documentation from the Board of licensure in the state in which he resides, North Carolina, that he has successfully completed any required inpatient treatment. Ms. Bickers explained that this is pursuant to a provision in the rules for physicians who live out of state and practice out of state. She stated that the Board has not yet accepted the Wilmington Treatment Center. She added that Dr. Camp's license is still suspended.

Dr. Steinbergh asked Dr. Camp whether or not he understands what is being discussed.

Dr. Camp stated that he did. He added that he's been told that Wilmington Treatment Center would have to apply to the Board for approval, and that could take a number of months. The Center would be economically better for him, as he resides in Wilmington and his wife would be able to visit him. Furthermore, his supervising psychiatrist is Board-certified in both psychiatry and addiction medicine, and when he did an evaluation last year, he did not feel that Dr. Camp needed inpatient treatment. Dr. Camp requested that the Board depend on that evaluation as an indication for treatment inasmuch as he has been sober for several years now.

Dr. Steinbergh asked whether Dr. Camp is licensed in North Carolina.

Dr. Camp stated that he's not and added that it's not quite that simple. When he was medical director at the mental health center, he voluntarily reported to the psychiatrist working under him that he had an alcohol problem. That individual reported it to the Physicians Health Program (PHP) in North Carolina. He entered that program and had random urine tests, which were all negative. However, he copped a bad attitude about it and withdrew voluntarily from that program. It was suggested that he not renew his North Carolina license. Dr. Camp stated that the PHP in North Carolina is supposed to be anonymous from the Board; however, he felt the wise thing to do was not to renew his North Carolina license. There is a process of reinstatement. He has since gone back to PHP and asked to be let back in, admitting that he'd made a mistake, and was told that he doesn't have a North Carolina license and is ineligible for PHP. Dr. Camp stated that that's moot now because his North Carolina license is by endorsement from Ohio. He also has an active license in California, and he was directed by Ohio to inform California and send California a copy of his consent agreement, which he has done. Dr. Camp stated that it's surprising to him, but apparently there are a number of places having trouble finding psychiatrists, so he has many

opportunities both in permanent and locum tenens positions all over the country.

Dr. Steinbergh stated that, in lieu of 28 days of inpatient treatment at an approved provider, Dr. Camp will have to have a Board, where he is actively licensed, testify to patient treatment.

Ms. Bickers stated that the requirement is actually from a Board where he resides and practices. She stated that the intent is to not necessarily make the physician come back to Ohio to do 28 days of inpatient treatment at an Ohio Board-approved facility if the other Board says that the treatment was done in a facility with which that Board is comfortable.

Dr. Steinbergh asked whether, regardless of the fact that he has no license in North Carolina, the North Carolina Board could recommend that this Board accept Dr. Camp's treatment at the Wilmington Treatment Center.

Ms. Bickers stated that Wilmington Treatment Center can file an application to be an Ohio Board-approved provider.

Ms. Marshall stated that she doesn't think that it will be as complicated as Dr. Steinbergh is suggesting it will be. The agreement is fashioned so that, as the first prong, Dr. Camp will have to do 28 days of inpatient or residential treatment at an Ohio Board-approved treatment provider. The alternative way he could fulfill it, which would be at the Board's discretion, is if he does 28 days of inpatient or residential treatment at a facility that is acceptable to the Medical Board where he lives and practices. If there is some circumstance that prevents Dr. Camp from being able to accomplish that in North Carolina, he would have to do 28 days at one of Ohio's approved treatment providers, which are all over the country.

Dr. Varyani stated that he understands that, but, according to what he's hearing from Dr. Camp, in the near future he has taken no action to participate in a 28-day inpatient treatment.

Dr. Camp stated that he went to Wilmington Treatment Center. When he talked to representatives of the Ohio Board about Wilmington, he was told that it might be an arduous process getting approval for Wilmington. So he sort of suspended that. He added that he is requesting that the Board consider first an evaluation for treatment, which would be shorter and less expensive for him, inasmuch as it is his belief that, based on his evaluation by an addictionologist and his being sober for three years, a 28-day treatment program is not really indicated at this point. If the Board says that he has to do that, then he will do it.

Dr. Varyani stated that he believes that the Board will have a problem with that. The Board's rules require a 28-day inpatient treatment program.

Dr. Camp stated that he understands that. He added that he will work with the Board toward getting Wilmington Treatment Center approved for treatment and he will undergo treatment as quickly as possible.

Dr. Varyani stated that Dr. Camp's other option would be to find an Ohio-approved treatment program.

Dr. Steinbergh asked Dr. Camp whether he is board-certified in psychiatry.

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Dr. Camp stated that he is not, but he is board-eligible.

Dr. Steinbergh commented that Dr. Camp has not actively practiced medicine since 2002.

Dr. Camp stated that that's correct.

Dr. Steinbergh stated that, even with all of the issues with which Dr. Camp has to deal in terms of his dependence, if he's intending to practice in Ohio, he may be required to take an examination, whether it be the SPEX or the board certification examination.

Dr. Camp stated that he understands that. He added that there are training programs for returning physicians, such as himself. He asked whether he could work with the Board's representatives to work out something along that line. Dr. Steven Smith's program in California had been highly recommended to him. It happens that Dr. Smith also has an emphasis on addictionology. He stated that he had planned to do a re-entry kind of training program because he recognizes that there are numerous medications that have been introduced since he's been in practice, and with which he's unfamiliar.

Dr. Steinbergh stated that Dr. Camp needs to carefully read through his consent agreement and begin to fulfill the requirements.

Dr. Camp stated that he gets the message, loud and clear.

DR. STEINBERGH MOVED TO CONTINUE DR. CAMP UNDER THE TERMS OF HIS NOVEMBER 15, 2007 STEP I CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

WENDY KAY DEAN, M.D.

Dr. Dean made her initial appearance before the Board, pursuant to the terms of her November 15, 2007 Step I Consent Agreement.

In response to Board members' questions, Dr. Dean acknowledged that her license is currently suspended due to her use of drugs. She stated that she had graduated from Wheeling Medical Park residency program in 1996. She proceeded to do a family practice in Monroe County for four years. That was actually under the National Health Service Corp., and she was in an underserved area. Dr. Dean stated that she'd been married for many years, but at that point they'd decided to have children. Family practice tends to be seven days a week, 24 hours a day, and that was not real conducive to any type of normal family life, so she switched to emergency medicine. She practiced emergency medicine at Barnesville Hospital for five years and was very happy with that.

Dr. Dean stated that around October 2001, she began to have some functional difficulties with her left hand. She started to lose extensor function in the fingers of her left hand, starting with her fifth finger. It slowly worked its way all the way across her hand. She saw a neurologist for it for a couple of years. The neurologist felt it was some type of heretofore unheard of degenerative neurological disorder. At the point that she finally developed wrist drop and lost use of her thumb, at her own insistence, she saw a plastic surgeon. No one had ever thought that it was a surgical condition because she'd never had any pinpointed injury; however, the plastic surgeons immediately did an exploratory surgery on her left radial nerve and found that it was significantly entrapped. They released the radial nerve in February 2004. Subsequent to that she did start to have some burning paresthesia-type pain in the top of her arm. It was not terribly severe, but it did worsen as time went on.

Dr. Kumar asked whether the persistent pain in her hand was the reason she started taking medication.

Dr. Dean stated that, actually, in February 2004, she started taking some Percocet at bedtime, primarily for that pain, as well as some pain that she was having behind her left elbow. She stated that she actually got her first prescription for that in February and did not refill that prescription until July. She was not terribly happy about taking that pain medication. Dr. Dean advised that, as the left elbow pain progressively worsened, she started to take the Percocet more regularly and was not real thrilled with taking it. The Percocet was obtained through prescription from her neurologist. Subsequent to that, the left elbow pain became quite severe. At some point during this, she was switched from Percocet to Vicodin, because she needed to take it more frequently than just at bedtime. She started taking it about twice a day.

Dr. Dean stated that in about August 2005, she had a left medial epicondylectomy and release of her left ulnar nerve. Throughout that time she was still taking the Vicodin twice a day. She stated that that did fairly well and then started to worsen again.

Dr. Kumar stated that so far what Dr. Dean has described is the use of prescribed medication.

Dr. Dean stated that that is correct; all of the medication was prescribed.

Dr. Steinbergh stated that Dr. Dean began crushing Vicodin tablets and inhaling them. Ultimately, because of this, she became opioid dependent.

Dr. Dean stated that, psychologically, she was never actually physically dependent upon her narcotic pain

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medication. She explained that what had happened is that she started to take Vicodin in that way in an attempt to take smaller amounts. She was not taking it at work. She was basically waiting until the pain was so bad that it was almost unbearable before she took anything. Once she was off work in August 2005, she had the ulnar nerve release and also a tendon transfer in her left hand when it became obvious that her extensor function was not going to return.

Dr. Kumar asked whether Dr. Dean's physicians knew that she was taking the medicines in ways not prescribed.

Dr. Dean stated that her physicians were not aware of the route of administration. All of the medication was prescribed, but her physicians were not aware of the manner in which she was taking them. Dr. Dean stated that she last worked at the end of August 2005. She added that she had to stop working because of her physical disability. The fact that she stopped working was not related to drug or alcohol use. They slowly increased her prescribed pain medication, and it was at the point where she was actually getting pain relief. She had fairly good pain control with the dose of Vicodin they had her on. However, at that point she didn't seem to be able to get past the compulsion to take it incorrectly. That was the point that she realized that she had a problem.

Dr. Kumar asked whether Dr. Dean is taking any pain medication today.

Dr. Dean stated that she takes Neurontin several times a day. She rarely, perhaps once a week, takes Flexeril at bedtime. Dr. Dean explained that she has a lot of muscle spasm in her upper neck and back from holding up her arm.

Dr. Steinbergh asked whether Dr. Dean's consent agreement disallows her from doing that.

Dr. Dean stated that she doesn't believe so.

Ms. Bickers stated that it's not disallowed if it's prescribed by another physician.

Dr. Steinbergh commented that Dr. Dean also has a history of misuse of marijuana.

Dr. Dean stated that that is correct.

Dr. Steinbergh stated that Dr. Dean has a Step I Consent Agreement, entered into in November 2007. Her license was indefinitely suspended. She asked whether Dr. Dean understands that her inpatient treatment at Chestnut Ridge Hospital was not of at least 28 days duration as required by rule 4731-16-02, Administrative Code, and that Chestnut Ridge Hospital is not a Board-approved treatment provider, and that, prior to reinstatement, she is required to complete a 28-day program in an approved treatment provider.

Dr. Dean stated that she understands that. She has not done that yet, as she has some social and financial issues going on right now. She's in the middle of a divorce and at this point she's not financially able to pay for a 28-day inpatient program. She does understand that that is a requirement.

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Dr. Steinbergh noted that Dr. Dean has been out of practice since August 2005. She asked whether Dr. Dean is board-certified.

Dr. Dean stated that she is board-certified in family medicine.

Dr. Steinbergh asked when her last recertification was.

Dr. Dean stated that she believes that that was taken in 2003 or 2004.

In response to further questions, Dr. Dean stated that she is keeping up with her C.M.E. There is some question as to whether she will physically be able to return to practice. She still has quite a bit of chronic pain, and at this point she's being evaluated. She's actually on a waiting list for a physician at WVU, a pain management specialist, to have a nerve stimulator placed. If she gets a good result with the nerve stimulator, she would like to return to practice and would be more than glad to fulfill the remaining requirements of her consent agreement.

Dr. Dean stated that she currently attends at least three A.A. meetings a week. She sees an outpatient counselor at Crossroads Counseling, which is a Board-approved facility. She's having random drug screens done, all of which have been negative. She stated that she believes that the Board has the results of those screens, as well as her meeting logs.

In response to Dr. Robbins' questions, Dr. Dean stated that she is currently going through a divorce. She and her husband have joint custody of their three children, ages eight, seven and four. Her oldest child is aware of what's going on and has made several comments to the effect that he's glad she's off the "bad medicine" because she feels better.

Dr. Robbins asked how Dr. Dean is going to make sure that she doesn't fall in this trap again. He noted that she's going through significant stress and she's still in pain.

Dr. Dean stated that, in spite of the arm pain, she feels so much better physically and mentally than she did, she would never want to go back to the place she was. She added that she's been to three or four pain management physicians subsequent to release from Chestnut Ridge, and in spite of her abuse history, several of these pain management physicians have informed her that she can take narcotics or she could be miserable. She stated that she refuses to do so. She was quite relieved when she found the physician at WVU who had at least somewhat of an alternative to that.

Dr. Varyani asked whether she's tried Pregabalin.

Dr. Dean stated that she'd actually tried Lyrica for a brief time and had a severe reaction. She had horrific vertigo.

DR. KUMAR MOVED TO CONTINUE DR. DEAN UNDER THE TERMS OF HER NOVEMBER 15, 2007 STEP I CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE

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BOARD SECRETARY OR DESIGNEE. MR. BROWNING SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

WILLIAM CLARK HARLAN, D.O.

Dr. Harlan made his initial appearance before the Board, pursuant to the terms of his January 10, 2008 Step II Consent Agreement.

In response to Board members' questions, Dr. Harlan stated that he is doing well. He is currently under a Step II agreement. He still lives in Nelsonville, but is not back to work yet. He noted that the Step II agreement was ratified by the Board last month. The emergency medicine group with whom he previously worked has asked that he come back to work with them, so he's in the process of some credentialing and so forth. He'll be having a couple of meetings with the group next week. Dr. Harlan stated that he's submitted his nominations for a treating psychiatrist, as well as the monitoring physician, so those things will have to be in place prior to his actual return to work.

Dr. Steinbergh advised that there are some OUCOM students present today.

Dr. Harlan stated that he actually spoke at one of their addictions classes after all this got started for him.

Dr. Steinbergh asked Dr. Harlan whether he would mind advising the students on how his problem came about and what they can do to prevent those kinds of issues themselves.

Dr. Harlan stated that, basically, he graduated from OUCOM in 1986. He did his training in Toledo and then went into emergency medicine. He stated that he started out working fairly typical emergency medicine shifts, initially, 24-hour shifts. As time went on, the 24-hour shifts got a lot harder, places got busier. He became the medical director of an emergency department, and he thinks that he got to the point where he was addicted to his job. He still loves emergency medicine and loves to be a physician, but he wasn't living a very balanced lifestyle. It was just all work.

Dr. Harlan stated that, as far as his family history goes, he would classify his father as a workaholic. Dr. Harlan stated that he got to the point where it was just work, work, work – never say no. Eventually, in

the last few years, he was doing emergency medicine full-time, as well as taking care of people in jails, and it was all fairly far apart. He stated that, basically, he was either working or driving to work. He wasn't sleeping much. He developed a dependency on Ritalin, thinking that the less he had to sleep, the more he could work. That, basically, ended him up here. The Medical Board intervened, he entered a 28-day treatment program, and now he participates in recovery programs. Dr. Harlan stated that he thinks that the big education for him is that life is not all about being a doctor. Your identity is not as a physician, but as a person. You have a job as a physician, and it's a job to be taken seriously. Dr. Harlan stated that he feels grateful to have the opportunity to be a physician, but the important thing is to learn to live a balanced lifestyle.

Dr. Harlan stated that when he was at OUCOM in 1986, as far as drug addictions class, he thinks that they had one hour. He knows that the students now have a lot more exposure.

Dr. Steinbergh asked Dr. Harlan to tell the students about how he obtained the Ritalin.

Dr. Harlan stated that at one of the jails where he had worked, they would store the unused medications for later destruction. He found Ritalin in that and decided to try it. This eventually led to him writing prescriptions in the names of inmates who didn't get it and he used the medication himself. Hence, he ended up here; but in the long-run, it's been a good thing.

In response to further questions, Dr. Harlan stated that his recovery is going well. He stated that he thinks it's getting better. He's doing his step work, has a sponsor, and he's doing some service work. He chairs one of the NA meetings, and he does some committee work on the area level also. He's also participating in his aftercare program. Concerning family support, he has six daughters, the youngest of whom is at Ohio State and will graduate this year. Everyone else has already graduated from college. His daughters are spread around somewhat, but they've been very supportive. Dr. Harlan stated that he feels that this has strengthened his relationship with his youngest. He's been very lucky in his marriage, as well; his wife has been very supportive. They spend a lot of time together, which they hadn't had the opportunity to do before. Dr. Harlan stated that he has 50 acres down in Nelsonville, and his wife does potbelly pig rescue and some dog rescue. He commented that he's had a lot of fun pretending that he's a farmer. Dr. Harlan continued that he also does a lot of recovery reading, as well as professional reading. He also tries to get more exercise, trying to get a balance.

In response to further questions, Dr. Harlan stated that he does intend to return to work as an emergency room physician. He added that, with his consent agreement, there's a stipulation that he not work any more than 40 hours a week. He's talked with the group about his work schedule and his plans are to contract for either 32 or 36 hours per week. He stated that he's gone out of his way to make sure that they understand that if he works over 40 hours a week, he's in trouble, so just don't ask.

Dr. Kumar cautioned Dr. Harlan against doing all 40 hours in two days.

Dr. Harlan agreed. He stated that he will be getting credentialed in a lower volume emergency department, and they are twelve-hour shifts, but it's less than two patients per hour. Before, it was two and a half patients per hour in ten-hour shifts that turned out to be twelve to fourteen hours.

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DR. KUMAR MOVED TO CONTINUE DR. HARLAN UNDER THE TERMS OF HIS JANUARY 10, 2008 STEP II CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

DAROLD R. LANCE, JR., D.O.

Dr. Lance appeared before the Board, pursuant to the terms of his August 9, 2007 Superseding Step I Consent Agreement, and pursuant to Board motion of January 9, 2008.

Dr. Steinbergh stated that Dr. Lance is a family practitioner in Jackson, Ohio, who is also a graduate of OUCOM. She advised that he is back this month because of concerns the Board had in January. She asked whether there's been change from December until now.

Dr. Lance stated that he has been attempting to be compliant, adding that he thought he was in January but it was brought to his attention that he had some missing paperwork. He stated that he has been reassured by Ms. Bickers that he is now totally compliant. He's doing everything he's supposed to do and is now eager to get back to work.

Ms. Bickers stated that Dr. Lance is ready to begin the reinstatement process.

Dr. Lance stated that he does need to find two evaluating physicians to say that he's okay to return to work. He added that he does understand what he needs to do.

Dr. Steinbergh asked whether Dr. Lance has any questions of the Board about how best to go through the reinstatement process.

Dr. Lance stated that he's just going to all of the meetings, which he enjoys a lot. Dr. Lance stated that when you're in private practice, you don't get to meet many other physicians, and it's nice to know that you're not alone in this world and that other people have other problems more serious than yours. Dr. Lance stated that he finds solace and inspiration in a number of these people.

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Dr. Kumar commented that Dr. Lance seems to be a lot more sure of himself today than he was two months ago.

Dr. Lance commented that he's not as afraid as he was then.

Mr. Albert asked how many physicians there are in Jackson County.

Dr. Lance stated that when he moved there 19 years ago, there were not that many. Now they've got two clinics in the city of Jackson, the Holzer Hospital has opened up there, Kings Daughters Hospital in Kentucky has opened a clinic, and it seems like Jackson, Ohio, has become a crossroads for that area. Dr. Lance stated that in a way it's nice to see development, but in other ways it's kind of sad to see a lot of the old buildings being torn down to put up a Walgreens Pharmacy across the street from a new CVS Pharmacy. There is now good medical coverage in that area. Dr. Lance stated that the area is sorely lacking in psychiatrists.

DR. STEINBERGH MOVED TO CONTINUE DR. LANCE UNDER THE TERMS OF HIS AUGUST 9, 2007 SUPERSEDING STEP I CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

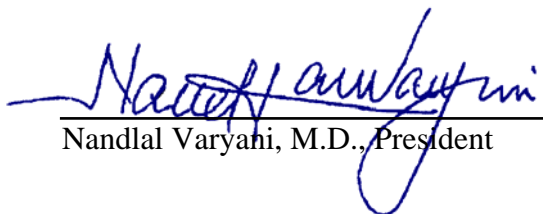
The motion carried.

MR. HAIRSTON MOVED TO ADJOURN. MR. BROWNING SECONDED THE MOTION. All members voted aye. The motion carried.

Thereupon at 4:21 p.m. the February 13, 2008 session of the State Medical Board of Ohio was duly adjourned.

February 13, 2008

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio, meeting on February 13, 2008, as approved on March 12, 2008.

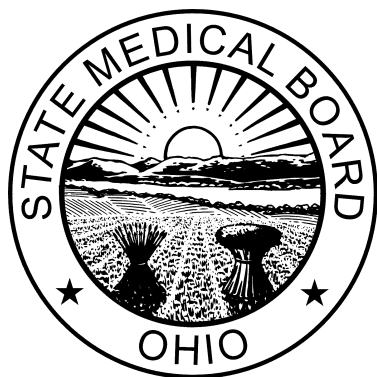


Nandlal Varyani, M.D., President



Lance A. Talmage, M.D., Secretary

(SEAL)



February 14, 2008

MINUTES

THE STATE MEDICAL BOARD OF OHIO

February 14, 2008

Nandlal Varyani, M.D., President, called the meeting to order at 8:00 a.m., in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes State Office Tower, 30 E. Broad St., Columbus, Ohio 43215, with the following members present: Dalsukh Madia, M.D., Vice-President; Lance A. Talmage, M.D., Secretary; Raymond J. Albert, Supervising Member; Carol L. Egner, M.D.; Deepak Kumar, M.D.; R. Gregory Browning, Ph.D.; W. Frank Hairston; Andrew F. Robbins, Jr., M.D.; and Anita M. Steinbergh, D.O. The following did not attend the meeting: David C. Buchan, D.P.M., and Jack C. Amato, M.D.

Also present were: Richard A. Whitehouse, Executive Director; Diann K. Thompson, Assistant Executive Director; Kimberly C. Anderson, Assistant Executive Director; William J. Schmidt, Staff Attorney, Enforcement, Compliance & Investigations; Rebecca J. Marshall, Chief Enforcement Attorney; Mark R. Blackmer, David P. Katko, Angela McNair, Karen H. Mortland, Marcie P. Pastrick, Kathleen S. Peterson, Cheryl D. Pokorny, Daniel S. Zinsmaster, and Lynn Zondorak, Enforcement Attorneys; Barbara J. Pfeiffer and Kyle C. Wilcox, Assistant Attorneys General; Eileen M. Schmidt, Executive Assistant to the Director; Joan K. Wehrle, Executive Staff Coordinator; Sallie J. Debolt, Executive Staff Attorney; Michael K. Miller, Public Policy & Government Affairs Officer; Karry Thacker, Executive Staff Assistant; Danielle Bickers, Compliance Supervisor; Jean Gillman, Compliance Officer; Barbara Jacobs, Public Services Administrator; Kay L. Rieve, Administrative Officer; Cathy Hacker, P.A. Program Administrator; Lisa Lee-Slappy, Paralegal; Fonda Brooks, Enforcement Secretary.

LICENSURE, PROBATION AND REINSTATEMENT CONSENT AGENDA

Dr. Varyani advised that at this time he would like the Board to consider the probationary reports, the probationary requests, and the licensure applications on today's consent agenda. Dr. Varyani asked whether any Board member wished to consider either an application for licensure or a probationary report or request separately. He noted that all probationers are in compliance.

Dr. Steinbergh asked to consider the probationary requests of Stephen R. Giordano, D.O., and Scott R. Welden, M.D., separately.

DR. KUMAR MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES ON JANUARY 7-8, 2008, WITH: CRAIG L. BIERER, D.O.; TRACIE L. BOLDEN, M.D.; JEFFREY A. BRIGGS, M.D.; JOHN D. BROWNLEE, M.D.; JOSEPH CLAUDE CARVER, M.D.; RICHARD G. DAY, M.D.; PATRICK R. DENNISON, D.O.; NICHOLAS C. DIAMANTIS, M.D.; JANICE ELECTA GREEN DOUGLAS, M.D.; PAUL E. DUNCAN, M.D.; MARK E. GOLDSMITH, M.D.; JONATHAN L. HAIMES, M.D.; PAUL F. HEYSE, M.D.; MICHAEL ERIN (DONAHUE) HULL, M.T.; CYNTHIA J. JOHNSON, P.A.; MELANIE E. JUNGBLUT, M.D.; JEANNE M. KIRKLAND, M.D.; BYRON C. LEAK, M.D.;

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FLORENCE B. MATYAS, M.D.; JAMES M. MCGINNIS, D.O.; MICHAEL J. O'BRIEN, D.O.; THOMAS R. PICKETT, P.A.; STEPHEN R. PORTER, M.D.; PUTTAGUNTA RANGA, M.D.; DAVID A. RATH, M.D.; ROBERT S. REEVES, JR., M.D.; LEROY P. RISE, M.D.; JON P. RYAN, D.O.; DAVID P. SPEARS, D.O.; FRANK M. STRASEK, D.P.M.; AND JAMES E. STURMI, M.D.; DR. KUMAR FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES AND THE SECRETARY AND SUPERVISING MEMBER'S RECOMMENDATIONS AS FOLLOWS FOR BOTH PROBATIONARY REQUESTS AND REINSTATEMENT REQUESTS:

- **TO GRANT ERICA R. BROWN, M.D.'S REQUEST FOR APPROVAL OF *ETHICAL FITNESS SEMINAR*, OFFERED BY THE INSTITUTE FOR GLOBAL ETHICS, AS FULFILLMENT OF PARAGRAPH 5 OF HER JUNE 13, 2007 CONSENT AGREEMENT;**
- **TO GRANT L. JEAN COOPER, M.D.'S REQUEST TO CHANGE THE MONITORING PHYSICIAN FROM DAVID A. BOWMAN, M.D., TO DANIEL J. CARDONA, M.D.;**
- **TO GRANT BRUCE C. CORSER, M.D.'S REQUESTS FOR: APPROVAL OF ANTOINETTE A. PRAGALOS, M.D., TO SERVE AS MONITORING PHYSICIAN, WITH TEN CHARTS REVIEWED EACH MONTH; AND APPROVAL OF THE ETHICS COURSES, *INTENSIVE COURSE IN MEDICAL ETHICS, BOUNDARIES AND PROFESSIONALISM* AND *INTENSIVE COURSE IN CONTROLLED SUBSTANCE MANAGEMENT*, OFFERED BY CASE WESTERN RESERVE UNIVERSITY, AS PARTIAL FULFILLMENT OF THE TERMS OF HIS DECEMBER 12, 2007 CONSENT AGREEMENT;**
- **TO GRANT RICHARD J. DEFRANCO, M.D.'S REQUESTS FOR: APPROVAL OF A NEW PRACTICE PLAN TO WORK WITH CHRISTOPHER L. ADELMAN, M.D. AT SAINT VINCENT CHARITY HOSPITAL THROUGH MARCH 2008; APPROVAL OF DR. ADELMAN TO SERVE AS HIS MONITORING PHYSICIAN, WITH TEN CHARTS REVIEWED PER MONTH; APPROVAL OF A SUBSEQUENT PRACTICE PLAN ALLOWING HIM TO WORK FOR SUMMA HEALTHCARE SYSTEM; AND APPROVAL TO SUBSEQUENTLY CHANGE THE MONITORING PHYSICIAN FROM DR. ADELMAN TO ROBERT A. LIEBELT, M.D.;**
- **TO GRANT DIXIE A. DOOLEY, D.P.M.'S REQUESTS FOR: A REDUCTION IN HIS APPEARANCE SCHEDULE TO EVERY SIX MONTHS; A REDUCTION IN DRUG AND REHABILITATION MEETINGS TO TWO MEETINGS A WEEK WITH A TOTAL OF TEN A MONTH, WITH AT LEAST ONE BEING A CADUCEUS MEETING; AND A REDUCTION IN DRUGS SCREENS TO TWO TIMES A MONTH;**
- **TO GRANT WILLIAM WAYNE HOLLIFIELD, M.D.'S REQUESTS FOR: APPROVAL OF THOMAS W. BROWN, M.D., TO SERVE AS HIS TREATING PSYCHIATRIST; AND APPROVAL OF TERRENCE BOGARD, M.D., TO SERVE AS HIS SUPERVISING PHYSICIAN;**

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- TO GRANT JAMES CAMERON JOHNSON, D.O.'S REQUEST FOR APPROVAL OF THE ETHICS COURSE, *INTENSIVE COURSE IN MEDICAL ETHICS, BOUNDARIES AND PROFESSIONALISM*, OFFERED BY CASE WESTERN RESERVE UNIVERSITY, PURSUANT TO PARAGRAPH 10.c OF HIS DECEMBER 12, 2007 CONSENT AGREEMENT;
- TO GRANT MELANIE LYNNE LEU, M.D.'S REQUEST FOR APPROVAL TO CHANGE HER MONITORING PHYSICIAN FROM ROBERT H. ATKINS, D.O., TO KENNETH J. BRAMAN, JR., D.O.;
- TO GRANT ROGER A. MILLER, M.D.'S REQUESTS FOR APPROVAL OF LESLIE H. KERN, PHD., TO SERVE AS HIS TREATING PSYCHOLOGIST, AND APPROVAL OF THE ETHICS COURSE, *INTRODUCTION TO ETHICS*, OFFERED BY THE OHIO STATE UNIVERSITY DEPARTMENT OF PHILOSOPHY IN FULFILLMENT OF PARAGRAPH 4b OF HIS DECEMBER 12, 2007 CONSENT AGREEMENT;
- TO GRANT BRETON LEE MORGAN, M.D.'S REQUEST FOR APPROVAL OF BRIAN MCDEVITT, D.O., TO SERVE AS HIS SUPERVISING PHYSICIAN;
- TO GRANT CARLA M. MEYERS, D.O.'S REQUEST TO DISCONTINUE HER CONTROLLED SUBSTANCE PRESCRIBING LOG REQUIREMENT;
- TO GRANT NATHAN THOMAS PENNEY, D.P.M.'S REQUESTS FOR: A REDUCTION IN HIS APPEARANCE SCHEDULE TO EVERY SIX MONTHS, REDUCTION IN DRUG SCREENS TO TWICE PER MONTH, A REDUCTION IN SESSIONS WITH A PSYCHIATRIST TO EVERY TWO MONTHS, AND A REDUCTION IN SESSIONS WITH A PSYCHOLOGIST TO ONCE A MONTH;
- TO GRANT NYKOLAI VASIL PIDHORODECKYJ, M.D.'S REQUESTS FOR: A REDUCTION IN DRUG SCREENS TO TWICE A MONTH, A REDUCTION IN DRUG AND REHABILITATION MEETINGS TO TWO A WEEK WITH A TOTAL OF TEN PER MONTH, WITH NO SPECIFIC CADUCEUS REQUIREMENT, AND ELIMINATION OF HIS CONTROLLED SUBSTANCE LOG REQUIREMENT;
- TO INCREASE RICHARD S. SKOBLAR, M.D.'S WORK HOUR LIMITATION TO 60 HOURS PER WEEK;
- TO GRANT ROBERT R. SUMMERS, D.O.'S REQUESTS FOR APPROVAL OF LURLEY J. ARCHAMBEAU, M.D., TO SERVE AS HIS ASSESSING PHYSICIAN REQUIRED FOR REINSTATEMENT, AND APPROVAL TO CHANGE HIS TREATING PSYCHIATRIST FROM GREGORY B. COLLINS, M.D. TO LURLEY J. ARCHAMBEAU, M.D.;

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- **TO GRANT SUSAN GAIL SWEDA, M.D.'S REQUESTS FOR: APPROVAL OF AZARIA AKASHI, PH.D., TO SERVE AS HER MENTAL HEALTH PROVIDER; APPROVAL OF CONNIE JENKINS, M.D. TO SERVE AS HER TREATING PSYCHIATRIST; AND APPROVAL OF ANN V. GOVIER, M.D. TO SERVE AS HER MONITORING PHYSICIAN, WITH TEN CHARTS REVIEWED PER MONTH;**
- **TO GRANT KIMBERLY M. TELMANIK, P.A.'S REQUEST FOR APPROVAL OF MASAO S. YU, M.D., TO SERVE AS SUPERVISING PHYSICIAN;**
- **TO GRANT JAMES F. ZIMMERMANN, D.P.M.'S REQUESTS FOR: REDUCTION IN APPEARANCES TO EVERY SIX MONTHS; REDUCTION IN DRUG SCREENS TO TWICE PER MONTH; AND A REDUCTION IN DRUG AND REHABILITATION MEETINGS TO 2 PER WEEK WITH A TOTAL OF 10 PER MONTH.**

DR. KUMAR FURTHER MOVED TO APPROVE FOR LICENSURE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS, THE PHYSICIAN APPLICANTS LISTED IN EXHIBIT "A," THE P.A. APPLICANTS LISTED IN EXHIBIT "B," AND THE ACUPUNCTURE APPLICANTS LISTED IN EXHIBIT "C;" AND TO GRANT CERTIFICATES OF GOOD STANDING TO THE SCHOOLS OF MASSAGE THERAPY, LISTED IN EXHIBIT "D." DR. MADIA SECONDED THE MOTION. A vote was taken

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

STEPHEN R. GIORDANO, D.O., AND SCOTT R. WELDEN, M.D.

Dr. Steinbergh noted that Dr. Giordano's information indicates that there is one drug screen due.

Ms. Bickers advised that that screen has been received and that Dr. Giordano is in compliance with his probationary terms.

Dr. Steinbergh stated that she would prefer that requests with outstanding documentation not appear on the consent agenda. She noted that she had the same concerns about Dr. Welden's request, when there is an

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outstanding supervising physician's report and two outstanding drug screens.

Ms. Bickers stated that if the physician is requesting a change in his probationary status, she will hold back the request until necessary documentation is in. She stated that she doesn't hold up requests for items such as approval of a supervising physician, etc.

Dr. Steinbergh indicated that she understands.

DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES AND THE SECRETARY AND SUPERVISING MEMBER'S RECOMMENDATIONS AS FOLLOWS:

- **TO GRANT STEPHEN R. GIORDANO, D.O.'S REQUESTS FOR: APPROVAL OF THE MONITORING BEING CONDUCTED BY THE NORTH CAROLINA PHYSICIANS HEALTH PROGRAM [NCPHP], AND A REDUCTION IN APPEARANCES TO ANNUAL APPEARANCES;**
- **TO GRANT SCOTT R. WELDEN, M.D.'S REQUEST FOR APPROVAL OF J. STEPHEN MEREDITH, M.D., TO CONDUCT THE PSYCHIATRIC EVALUATION REQUIRED PRIOR TO REINSTATEMENT; AND**

DR. KUMAR SECONDED THE MOTION. A vote was taken:

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

REINSTATEMENT REQUESTS

ROBERT R. SUMMERS, D.O.

DR. STEINBERGH MOVED TO APPROVE DR. SUMMERS' REQUEST FOR REINSTATEMENT OF HIS LICENSE TO PRACTICE OSTEOPATHIC MEDICINE AND SURGERY, WHICH WAS SUSPENDED BY BOARD ORDER OF DECEMBER 12, 2007, SUBJECT TO THE PROBATIONARY TERMS AND CONDITIONS AS OUTLINED IN THE

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BOARD ORDER. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

REPORTS OF ASSIGNED COMMITTEES

LICENSURE COMMITTEE

Dr. Robbins advised that the Committee reviewed several applications.

Andrew U. Aguillon, M.D.

Dr. Robbins advised that Dr. Aguillon requested to take the Computer-based USMLE Step 3 with special accommodations under the Americans with Disabilities Act of 1990. He has been diagnosed with Dyslexia and a reading/learning disorder. Dr. Aguillon requested extra time (time and a half). He did request, and was granted, accommodations for Step 1 and Step 2. The National Board of Medicine Examiners expert agreed that Dr. Aguillon should be granted the requested accommodations. Dr. Robbins stated that the Licensure Committee recommends approval of Dr. Aguillon's request.

DR. STEINBERGH MOVED TO APPROVE DR. AGUILLON'S ACCOMMODATION REQUESTS DURING THE ADMINISTRATION OF THE STEP 3 OF THE USMLE. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

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The motion carried.

Susan Boyd-Lawhorn, M.D.

Dr. Robbins advised that Dr. Boyd-Lawhorn is a May 1999 graduate of the University of Louisville School of Medicine in Louisville, Kentucky. She has requested endorsement of her USMLE scores. Dr. Boyd-Lawhorn completed training in Internal Medicine/Pediatrics at Wright State University from July 1999 until June 2003. She took a break after her residency, and then worked at Gloucester Convenient Care in Hayes Virginia from January 2005 until December 2005. Dr. Boyd-Lawhorn has not worked since December 2005. She holds a license in the state of Virginia, but does not report any American Board Certification.

DR. ROBBINS MOVED TO APPROVE DR. BOYD-LAWHORN S REQUEST FOR OHIO LICENSURE SUBJECT TO HER SUCCESSFUL COMPLETION OF THE SPEX EXAM. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Fatima Eslami-Varzaneh, M.D.

Dr. Robbins advised that Dr. Eslami-Varzaneh is over the seven-year time limit by 7 months. She passed Steps 1 and 2 on the second attempt with scores of 77 and 75, and Step 3 on the fourth attempt with a score of 76. Dr. Eslami-Varzaneh has sent a letter of explanation claiming she went over the seven-year limit for USMLE for several reasons: she had heavy duty as a resident and chief resident, had two small children, and had recently relocated to participate in her two fellowships.

Dr. Robbins advised that Dr. Eslami-Varzaneh graduated from the University of Perugia, Italy, in July 1987. She then immigrated to Canada, attended graduate school and trained at Ottawa Civic Hospital from September 1990 until June 1992. Dr. Eslami-Varzaneh then moved to the United States and was not employed while she studied for exams and raised her family. Dr. Eslami-Varzaneh began a Pathology residency at Washington Hospital Center in Washington, DC, from March 1998 until June 2002. Dr. Eslami-Varzaneh then entered a Gastrointestinal Pathology Fellowship at Yale New Haven Hospital in

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July 2002 until June 2003, and then entered a Surgical Pathology fellowship at Hartford Hospital from July 2003 until June 2004. . Dr. Eslami-Varzaneh has completed six years of post-graduate training in the United States. She holds an active Connecticut license. She was board-certified by the America Board of Anatomic Pathology in November 2005. Dr. Robbins advised that the Committee passed a motion recommending denial of this application.

DR. ROBBINS MOVED TO PROPOSE TO DENY DR. ESLAMI-VARZANEH'S REQUEST FOR A WAIVER OF THE SEVEN-YEAR RULE AND FOR AN OHIO LICENSE ON THE BASIS THAT SHE DOES NOT SHOW GOOD CAUSE FOR NOT COMPLETING THE EXAM SEQUENCE WITHIN THE SEVEN-YEAR PERIOD. DR. MADIA SECONDED THE MOTION.

A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- nay
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- nay
	Dr. Varyani	- nay

The motion carried.

Kohli Hisamuddin, M.D.

Dr. Robbins advised that Dr. Hisamuddin is over the seven-year time limit by seven months. He passed Steps 1, 2 and 3 on the first attempt with scores of 80, 88, and 82. Dr. Hisamuddin has sent a letter of explanation claiming he went over the seven-year limit for USMLE due to personal reasons, and his decision as to whether to pursue a career in the United States.

Dr. Robbins advised that Dr. Hisamuddin graduated from the J.J.M Medical College in Davangere, India, in February 1994. Dr. Hisamuddin practiced in India from August 1993 until July 1996. He then immigrated and practiced in the U.K., from February 1997 until July 2003. He then moved to the United States and began a residency at MetroHealth Medical Center in August 2003 until June 2006. Dr. Hisamuddin then entered a Gastroenterology Fellowship at MetroHealth in July 2006, and continues there until the present. Dr. Hisamuddin was board-certified by the American Board of Internal Medicine in August 2006. Dr. Robbins stated that the Committee recommends approval of Dr. Hisamuddin's request.

DR. ROBBINS MOVED TO APPROVE DR. HISAMUDDIN'S REQUEST FOR THE LIMITED EXCEPTION OF THE SEVEN-YEAR RULE AS OUTLINED IN RULE 4731-6-14(C) (3), OHIO ADMINISTRATIVE CODE, AND ACCEPTING HIS EXAMINATION SEQUENCE IN ORDER FOR HIM TO BE GRANTED A LICENSE. DR. MADIA SECONDED THE MOTION.

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Dr. Steinbergh asked what Dr. Hisamuddin's personal reasons were.

Ms. Rieve stated that Dr. Hisamuddin suffered a death in the family, and was also taking care of his ill parents.

A vote was taken on Dr. Robbins' motion:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Parisa Khatibi, M.D.

Dr. Robbins advised that Dr. Khatibi is over the seven-year time limit by 32 months. She passed Steps 1 and 3 on the first attempt with scores of 78 and 83, and Step 2 on the second attempt with a score of 77. Dr. Khatibi has sent a letter of explanation claiming she went over the seven-year limit for USMLE for immigration issues.

Dr. Robbins advised that Dr. Khatibi graduated from the Guilan Medical Science University in Rasht, Iran, in June 1994. She practiced in Iran from July 1994 until September 2002. Dr. Khatibi then moved to the United States, and participated in an externship at Harbor Hospital Center from December 2002 until June 2003. Dr. Khatibi began an Internal Medicine residency at Maryland General Hospital in Baltimore from July 2003 until June 2004. She then continued training in Internal Medicine at Harbor Hospital from July 2004 until June 2006. Dr. Khatibi took a break for exams and traveling, and has been practicing at Harbor Hospital as a hospitalist since May 2007. She holds active licenses in Maryland and California, and she was board-certified by the American Board of Internal Medicine in September 2006.

Dr. Robbins advised that the Committee voted three to two to deny Dr. Khatibi's request.

DR. ROBBINS MOVED TO DENY DR. KHATIBI'S REQUEST FOR A WAIVER OF THE SEVEN-YEAR RULE. DR. MADIA SECONDED THE MOTION.

Dr. Kumar asked for a summary of the Committee's discussion.

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Dr. Robbins stated that the majority of the Committee felt that being over the seven-year limit by two and a half years was excessive under any circumstances.

Dr. Talmage stated that he made the same point he's made a number of times. If the Board is using the USMLE as a show of competence, there is no reason to deny this request. This applicant is someone who has shown she is competent by passing all three steps of the USMLE. It seems unnecessary to deny her a license.

Dr. Varyani noted that Dr. Khatibi holds licenses in California and Maryland, and all the Committee is saying is that she can practice in one of those states.

Dr. Kumar stated that this is a constant issue the Board faces. He stated that the Board needs to be consistent; it can't just go back and forth. Dr. Kumar stated that the Board voted to deny previous applications and should do so with this one.

Mr. Browning stated that the Board goes through this discussion every month. He stated that there has to be some rationale as to why the Board is making these decisions. The Board should either change the rule or leave it as it is. Is the Board going to approve someone who is over the seven-year period by 32 months when it has just denied someone over by seven months? Mr. Browning stated that he would like the rule looked at as soon as possible, or else the Board will continue to bounce around all over the place, year after year.

Dr. Varyani agreed with Mr. Browning. He stated that the only reason that he likes the seven-year rule is that the Board still has discretion. Unless he can definitely say that this person is not a good doctor, he would like to give the doctor a license in Ohio because there is a need for doctors in Ohio. Dr. Varyani stated that the Board does need to have a rule, and it should be steadfast on that rule. He added that the rule should take into account that Ohio does need physicians, but it does not need incompetent physicians.

Mr. Browning stated that he's not suggesting that the Board should do away with its discretion, but it does need more clarity about the reasons for doing what it's doing.

Dr. Kumar commented that one of the topics on the Federation's agenda for this year is the issue of when to put the physician on supervised or unsupervised care of a patient. Dr. Kumar stated that they are trying to change the USMLE structure as it exists. He stated that he hopes that that will help this Board to clarify the issue a little bit more; however, his stance today is that if he just denied a license to someone over by seven months, he cannot approve someone over 32 months.

Dr. Talmage stated that this rule was made in an era when 10% of medical school students were women, and when the visa system and the immigration system were much easier. He noted that now 50% of medical school classes consist of women, who take time out to have babies. They don't have a continuous training program because of that. There is also now a different immigration system that keeps people out of this country for a number of years, as in this case and in the previous case, so that they can't get into the United States to take the exam. Dr. Talmage stated that he really thinks that the Board has to look at this rule in the modern context. Dr. Talmage stated that he feels that the seven-year time limit is artificial and

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that this rule should be considered by the Licensure Committee.

Dr. Robbins stated that the difficulty is in crafting a rule that continues to allow the Board discretion. The rule the Committee is looking at will eliminate the seven years and allow ten years to complete the sequence. That will eliminate the Board's need to use discretion for most of these cases.

Dr. Varyani stated that if you're looking at competency, the Committee should look at the number of attempts it takes to pass rather than the number of years.

A vote was taken on Dr. Robbins' motion:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- nay
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- nay
	Dr. Robbins	- nay
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- nay

The motion carried.

Christopher Kobet, M.D.

Dr. Robbins advised that Dr. Kobet requested to take the Computer-based USMLE Step 3 with special accommodations under the Americans with Disabilities Act of 1990. Dr. Kobet has been diagnosed with Attention Deficit Disorder with Hyperactivity. He has requested extra time consisting of time and a half.

Dr. Robbins continued that Dr. Kobet did request, and was granted, accommodations for Steps 1 and 2. The National Board of Medicine Examiners expert agreed that Dr. Kobet should be given accommodations.

DR. ROBBINS MOVED TO APPROVE DR. KOBET'S ACCOMMODATION REQUESTS DURING THE ADMINISTRATION OF THE STEP 3 OF THE USMLE. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye

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Dr. Robbins	- aye
Dr. Kumar	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

Margaret Dustman, M.T.

Dr. Robbins advised that Ms. Dustman is applying for restoration of her license to practice massage therapy in Ohio. Ms. Dustman has indicated on her application for restoration that she has not actively practiced massage therapy since 2005.

DR. ROBBINS MOVED TO APPROVE MS. DUSTMAN'S APPLICATION FOR RESTORATION OF HER LICENSE TO PRACTICE MASSAGE THERAPY, SUBJECT TO HER PASSING THE LIMITED BRANCH PORTION OF THE BOARD'S MASSAGE THERAPY EXAMINATION. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Lynn Janoch, M.T.

Dr. Robbins advised that Ms. Janoch is applying for restoration of her license to practice massage therapy in Ohio. Ms. Janoch has indicated on her application for restoration that she has not actively practiced massage therapy since 2005.

DR. ROBBINS MOVED TO APPROVE MS. JANOCH'S APPLICATION FOR RESTORATION OF HER LICENSE TO PRACTICE MASSAGE THERAPY, SUBJECT TO HER PASSING THE LIMITED BRANCH PORTION OF THE BOARD'S MASSAGE THERAPY EXAMINATION. DR. MADIA SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye

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Dr. Talmage	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Robbins	- aye
Dr. Kumar	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

Julie Kronenberger, M.T.

Dr. Robbins advised that Ms. Kronenberger is applying for restoration of her license to practice massage therapy in Ohio. Ms. Kronenberger has indicated on her application for restoration that she has not actively practiced Massage Therapy since 2003.

DR. ROBBINS MOVED TO APPROVE MS. KRONENBURGER'S APPLICATION FOR RESTORATION OF HER LICENSE TO PRACTICE MASSAGE THERAPY, SUBJECT TO HER PASSING THE LIMITED BRANCH PORTION OF THE BOARD'S MASSAGE THERAPY EXAMINATION. DR. KUMAR SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

IMPAIRMENT COMMITTEE

Mr. Albert stated that last month the Committee distributed materials to the Board concerning an alternative drug testing program using FirstLab's Professional Health Monitoring Program. This month, the Committee heard an argument from Stanley Sateren, M.D., of OPHP against the Board's changing its program.

Mr. Albert advised that he has worked with the staff on this and they all feel that changing to FirstLab would be a good move for the Board. They believe it will be a more orderly and efficient way to do drug

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screens. He stated that this is really part of the overall changes that the Committee hopes to make in the way the Board deals with its probationers. One of the main objections to this program is that it might be a little more costly for the probationers.

Dr. Steinbergh stated that she has read through the materials in the agenda package, and she feels that Ms. Bickers and her staff have done a fine job of assessing this change. She added that she, personally, has no disagreement with. Dr. Steinbergh stated that she doesn't feel that the cost for probationers will be excessive. Dr. Steinbergh stated that under the current program, the Board is not receiving a rapid response when the physician has a positive screen. She stated that it is her understanding that OPHP sometimes spends time evaluating those screens, when the Board needs to have the information right away.

Mr. Albert stated that he and the staff have been thinking about this change for a long time, but they have been dragging their feet. One thing that bothered him is how this change would affect OPHP. Mr. Albert stated that he has been dealing with OPHP for 20 years, and feels that its role is for the probationer.

Mr. Albert advised that the Committee is in the process of reviewing the rules on the treatment of impaired practitioners, and will bring proposed changes to the Board as they are developed. One other change the Committee will discuss is changing the requirement for inpatient treatment to allow the limited branch practitioners, who don't make a lot of money, to undergo intensive outpatient therapy, rather than undergo the 28-day inpatient treatment.

Ms. Bickers advised that it's important to note that this is not a "Board against OPHP" proposal, nor is it in response to any one particular failure on OPHP's part.

MR. ALBERT MOVED TO UTILIZE THE FIRSTLAB PROFESSIONAL HEALTH MONITORING PROGRAM AS THE BOARD'S DRUG TESTING PROGRAM. DR. MADIA SECONDED THE MOTION.

Dr. Kumar spoke in support of the motion, stating that it will simplify things. He asked whether Dr. Sateren objected to this change for reasons other than cost.

Dr. Sateren thanked the Board for the opportunity to respond and express OPHP's concerns. In his address, he referred to his February 12, 2008 letter to Mr. Albert, a copy of which shall be maintained in the exhibits section of this journal, which comments on the impact on the quality of monitoring and the services provided to physicians enrolled in OPHP.

Dr. Sateren stated that recovery monitoring is one area of expertise of OPHP, and that goes beyond compliance and urine drug testing (UDT). He stated that it certainly is used as a record of activity and abstinence that is consistent with recovery. Dr. Sateren stated that the recovery rate for physicians enrolled in state physician health programs was reported at last year's American Society of Addiction Medicine annual meeting to be 75% to 96%, with a five- to ten-year abstinence rate. That compares with a 20% to 40%, with a one-year abstinence rate for the general population.

Dr. Sateren advised that Robert Wood Johnson has funded a study in which many of the State Physician

Health Programs are participating. He stated that OPHP contributed to phase one of that study, and an article about that phase will soon appear in JAMA. He stated that, basically, that study is looking for the reasons there is such a difference between recovery rates for physicians versus the general population. What they have found out at this point is that that recovery rate is directly related to being enrolled in a physician's health program, which involves intense multidimensional and multilevel monitoring and recording of recovery activities. It involves ongoing education, timely intervention, long-term and ongoing relationship between the physician's health program and the participant. Also, the physician's health program is looking at the whole person and what aspects of their lives might be negatively impacting on their recovery and their recovery activities.

Dr. Sateren continued that the physician's health programs are also concerned about dual diagnosis and co-occurring disorders, which are reported as high as 20% to 40% in different populations. This means that, at a minimum, licensees that appear before the Board for a substance use disorder have at least a 20% chance of a co-occurring disorder or a dual diagnosis. If that isn't addressed, it increases the risk of relapse.

Dr. Sateren stated that physician health programs are also involved in addressing and identifying issues, such as stress at work, family, and so forth within the context of recovery. A very important part that was identified, also, was what was described as "peer-based coaching," physician-to-physician.

Dr. Sateren stated that with respect to advocacy, if OPHP does not have the opportunity to oversee the UDT process, it will remove a significant part of what OPHP can do to provide appropriate advocacy. OPHP will not provide advocacy if it cannot be supported through documentation.

Dr. Sateren stated that it is his understanding that other state boards use their state PHPs for their UDT and oversight of that and the appropriate clinical intervention, such as hair testing and other types of testing, if deemed indicated in reviewing the reports, as well as the activities that are being monitored.

Dr. Sateren stated that he does understand that the Board has been looking at this change for several years, and he understands the Board's logic and reasoning. He stated that he understands that about half the programs use a third party administrator (TPA). He stated that this bureaucracy gets between the actual lab that's doing the test and the entity to which the test is reported. He commented that this may or may not be a problem.

Dr. Sateren advised that, with respect to the quality of the monitoring provided through OPHP and, specifically, with respect to UDT, continuous quality improvements have been made since he has been in that position. He believes that OPHP does a good job, but agreed that it could do better. He added that he doesn't know whether it could do better than TPAs. He stated that he has gotten mixed reports from other states that use TPAs, both good and bad. At some level, a TPA would reduce the amount of work that OPHP has to do, because that intermediate step will accomplish that. However, a TPA will remove the OPHP network of monitors, who are the eyes and ears of OPHP across the state. He stated that he can pick up a phone and discuss cases or get insight about other situations that may be going on in a geographical area.

Dr. Sateren asked that the Board members read his memorandum with its highlighted bullet points. He

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stated that he thinks that it is a fairly comprehensive summary. Dr. Sateren stated that if the Board's feeling is strong that a TPA is the way to go, there would be no reason why OPHP could not engage FirstLab to do the TPA for them. He added that his understanding is that randomness has been an issue for the Board. He stated that he's not sure what the appropriate frequency of UDT is for people early on in recovery, although he does think that it is probably variable, depending upon the situations. Dr. Sateren stated that what will happen is that the people who have been getting the services, the advocacy, the coaching and the education – early on in recovery, they don't understand this. Then, when they get through their five-year consent agreement, or even before they get through it and they're looking for a job or to get provider panel memberships, medical staff credentialing, they need some type of an advocacy, usually, to support them in those endeavors. Dr. Sateren stated that he does understand that the Medical Board is willing to provide the information that a person completed a consent agreement.

Dr. Sateren stated that his concern is that it will be a significant impact on the recovery of physicians in the state, as well as more costly, if the monitoring is done at the intensity that it currently is. He stated that those are standards that have been established by the Board. Dr. Sateren stated that a few years ago there were probationers who were being tested twice a week. Some were required to drop urines five times a week and selected samples were tested. Dr. Sateren stated that he doesn't know if the Board still does that, but he was directly involved with at least one probationer several years ago where that was required.

Dr. Sateren stated that he believes that removing this level of oversight of monitoring with respect to UDT and appropriate intervention will significantly impact the statistics of recovery for physicians in the state of Ohio, and certainly significantly impact the advocacy for those same physicians who are in such need of support as they go on with their careers.

Dr. Steinbergh asked Dr. Sateren to review for the Board the number of people on his staff who are in the community and what their degrees are, educational backgrounds, etc.

Dr. Sateren stated that at this time OPHP is looking for a case manager because the one they had left the first of February. That individual was a master's-trained chemical dependency social work counselor, working on his Ph.D. in psychology. They are restructuring internally. They have a couple of people with masters degrees. From a clinical standpoint, they are taking this opportunity to look at what they really need for case management.

Dr. Steinbergh asked how many people are actively in the community throughout the state of Ohio. She noted that one of his points was that, in terms of advocacy, getting to know the practitioners.

Dr. Sateren stated that there are about 150 people in the volunteer monitoring group. They serve as OPHP's eyes and ears, and interact with participants and others in the geographic areas OPHP can't reach right away. On staff now, there is himself, a case manager position, and they may possibly add another case manager if it is necessary. He advised that they have improved efficiencies dramatically, while at the same time improving the quality of service. There was a lot of clerical work being done by the case manager. When one case manager retired, they took the opportunity to restructure and hire a person to do the clerical part of this. He stated that he or another licensed individual reviews and signs off on everything.

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Dr. Kumar stated that he likes the idea of individual monitors within the community. That adds quite a bit to the program. Dr. Kumar asked staff how the Board could combine the TPA model with OPHP.

Dr. Sateren stated that that's not possible. He stated that it's a business model. They contract with various drop sites. He stated that he's checked across the country with programs that use TPAs, and drop site fees can range anywhere from \$10 to \$15 to \$35. They try to keep the drop fees at \$25 or below. He has heard of costs as high as 80% being charged by the collection site.

Dr. Varyani stated that if the Board is going to talk about integration of the two entities, it will need a much longer time. He stated that at this time he would like to return the Board's attention to the topic of changing its UDT process.

Dr. Madia stated that the only concern he had was the advocacy. If the Board goes with the new program, who would provide the advocacy when the physician is looking for a job?

Mr. Albert stated that every month he meets with 40 to 50 probationers. He added that Ms. Bickers has contact with probationers on a daily basis. If there's a problem, she'll call him. Mr. Albert stated that most probationers leave the office with one of his business cards that has his home phone number on it. If they have problems, they can call him at home, day or night. Mr. Albert stated that he does get calls, and he has even had them come to his residence. Mr. Albert stated that sometimes these probationers need someone to hold their hands and tell them how to apply for jobs, etc. Mr. Albert stated that this is not new to him, adding that he's been dealing with this kind of people for 50 years. He used to deal with ex-offenders. Mr. Albert stated that he has no formal education in this, but over a period of time, you do pick up a little bit.

Mr. Albert stated that he doesn't want to see OPHP fail, and he doesn't think they will. He added that OPHP needs to do what the Board is going to do. The Board needs to restructure how it handles its probationers. Mr. Albert stated that there is a place for OPHP, and he hopes that OPHP's success is not predicated on collecting urine screens.

Responding to Dr. Madia's question, Ms. Bickers stated that if someone needs a letter of compliance to a specialty board, insurance provider or potential employer, and if the person is currently compliant with their consent agreement or Board order, she doesn't have to wait until the person is off probation before she can send a letter. She will send a letter on Board letterhead over the Secretary or Supervising Member's signature, attesting to his or her compliance. That generally holds some weight.

Dr. Sateren again stated that if the Board members feel that this type of UDT system is desirable, it can be incorporated into OPHP's operation. They can sign an agreement with a TPA as well, with the same type of monitoring and frequency.

A vote was taken on Mr. Albert's motion:

ROLL CALL: Mr. Albert - aye

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Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Robbins	- aye
Dr. Kumar	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

PRESENTATION BY HECTOR VILA, JR., M.D., CHAIR, AMERICAN SOCIETY OF ANESTHESIOLOGISTS, AMBULATORY SURGERY COMMITTEE, REGARDING ADVERSE OUTCOME REPORTING IN FLORIDA

Dr. Varyani referred the Board to Mr. Miller's memorandum of January 30, 2008, which reminded the Board that during a March 2007 discussion of adverse incidents reporting, it had asked that information be gathered from the Florida Board of Medicine related to their experiences with the reporting requirement. As a result of the Board's discussion, Hector Vila, Chair of the American Society of Anesthesiologist Ambulatory Surgery Committee, has been invited to make a presentation to the Board regarding Florida's adverse incidents reporting outcomes. Additionally, the Ohio Society of Anesthesiologists is interested in pursuing adverse incidents reporting legislation in Ohio.

Dr. Vila at this time addressed the Board concerning Florida's experiences with adverse action reporting. Included in the exhibits for this presentation are the following documents: Dr. Vila's CV; an article he co-authored for publication by the A.M.A. entitled *Comparative Outcomes Analysis of Procedures Performed in Physician Offices and Ambulatory Surgical Centers*; the 2006 report by the Florida Board of Medicine's Surgical Care Committee; Florida's rule 64B8-9.001 on physician office incident reporting; and a copy of Florida's physician office adverse incident report form.

Following Dr. Vila's presentation, at 9:41 a.m., the Board took a break. When the meeting reconvened at 9:56 a.m., Dr. Egner and Mr. Albert were out of the room.

REPORTS BY ASSIGNED COMMITTEES

P.A. COMMITTEE

Dr. Talmage stated that the Committee reviewed three applications for Provisional Certificates to Prescribe. There was a lengthy discussion by the Committee about the applications. Dr. Talmage stated that a master's degree or ten years experience are required for a P.A. to be granted a provisional certificate to prescribe. The Committee feels that the master's degree should be in a subject that is health-related. The ability to prescribe is also dependent upon other separate issues, so the master's degree does not have to be in pharmacology or even related to pharmacology in any way. Dr. Talmage stated that he made the

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parallel that a family practitioner who decides to practice sports medicine takes special training in sports medicine. A P.A. who has had 29 months of P.A. training is a generalist. If the P.A. obtains a master's degree in any part of that, they are parallel to the generalist who has special competence in a particular area.

Dr. Talmage stated that the Committee reviewed three applications on the agenda, and the transcripts of the courses of the two individuals with masters degrees, Tracy Compton, PA-C, and Thomas Rice, PA-C, were examined. The third individual, Susan McChesney, PA-C. does not have a masters, and the question is whether she has ten years of experience. The Committee recommends approval of all three applications. Dr. Talmage noted that there was one "nay" vote on the Ms. Compton's application, but the other two passed unanimously.

**DR. TALMAGE MOVED TO GRANT PROVISIONAL CERTIFICATES TO PRESCRIBE TO:
TRACY COMPTON, PA-C; SUSAN MCCHESENEY, PA-C; AND THOMAS RICE, PA-C.
DR. KUMAR SECONDED THE MOTION.**

Dr. Steinbergh stated that she did vote against granting a certificate to Ms. Compton, and advised that this particular master's degree in biological sciences/environmental science concerned her. She stated she did find a few courses to be clinically relevant, but not the majority.

Mr. Browning asked whether there is any requirement that the applicant submit a letter explaining why the course is relevant.

Dr. Varyani stated that he doesn't believe so.

Dr. Talmage stated that their submission for recognition of a master's degree is their letter of application. The Committee determines whether it feels that this is a pertinent field in which to approve the request.

Dr. Egner returned to the meeting at this time.

Dr. Talmage commented that the issue for Ms. McChesney is that there was a considerable gap in her work history. In her application for prescriptive authority, Ms. McChesney did submit the pertinent times in her career where she had P.A. experience. When licensed, she was required to submit all of her history and what she was doing in every part of her life. Dr. Talmage stated that he felt that the gap was examined during her initial licensure, and he did not feel that it was necessary for her to submit a month-to-month CV, but only those areas of her CV that were pertinent to prescribing.

A vote was taken on Dr. Talmage's motion:

ROLL CALL:	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye

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Dr. Robbins	- aye
Dr. Kumar	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

PRESCRIBING COMMITTEE

Dr. Madia stated that, based on concern expressed by Dr. Steinbergh at the December 2007 Board meeting regarding Rule 4731 - 11 - 04, OAC, *Controlled Substances: Utilization For Weight Reduction*, the Board asked that division (B)(1) be amended to require that a detailed history of previous weight loss efforts be included in the patient's history. Dr. Madia referred the Board to the revised paragraph contained in the agenda materials.

DR. MADIA MOVED TO APPROVE PROPOSED CHAPTER 4731 - 11, OHIO ADMINISTRATIVE CODE, AS AMENDED, AND INSTRUCT STAFF TO PROCEED WITH THE RULES FILING PROCESS. DR. STEINBERGH SECONDED THE MOTION.

Dr. Kumar asked whether the rule should say that it also applies to P.A.s who prescribe.

Ms. Debolt stated that the P.A. rules include a provision that the particular rules of 4731. OAC that relate to prescribing are applicable to P.A.s.

A vote was taken on Dr. Madia's motion:

ROLL CALL:	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

LEGISLATIVE LIAISON COMMITTEE

Mr. Browning at this time referred to his written report, a copy of which shall be maintained in the exhibits section of this journal.

Mr. Miller reviewed the details of the report for the Board members.

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Concerning SB 229/HB 398 regarding radiologist assistants, Board members expressed concern with language concerning “image guided” procedures and conscious sedation, stating that the language is too broad. Mr. Miller stated that he will be meeting with the sponsors of the bill outlining Board members’ concerns.

Mr. Browning suggested that Mr. Miller also prepare a memorandum for the sponsors so they have the Board’s concerns in writing.

Mr. Browning added that this is the type of issue that the Board needs an advisory group made up of academic physicians to help the Board understand what makes sense and to give the Board more credibility regarding scope of practice issues.

Dr. Robbins asked whether there has been opposition to SB 279, the *Medical Board procedures/allied health licensing* legislation.

Mr. Miller stated that the bill has just been introduced and has not been assigned to committee yet. He does not yet know whether or not there will be opposition.

Mr. Browning stated that the Committee also reviewed a letter from Mr. Plinke, concerning advertising requirements relevant to physicians’ statements about board-certification status. Mr. Plinke wants to discuss Ohio’s policies and standards. Mr. Browning advised that he and Mr. Miller will meet with Mr. Plinke in March to discuss this topic.

LIMITED BRANCH & ALTERNATIVE MEDICINE COMMITTEE

Dr. Kumar stated that the Committee reviewed a proposed revision to Rule 4731-1-11, OAC, *Application and Certification*. Dr. Kumar advised that the revision adds a paragraph that requires that limited branch schools have all graduation information to the Board within 30 days of the limited branch examination so that admission notices can be mailed out in a timely manner.

Dr. Kumar stated that another revision to the rule is that applicants file their applications at the Board offices not less than 120 days prior to the first day of the examination, as opposed to the 90 days in the current rule. Dr. Kumar asked Ms. Rieve to explain this requested change.

Ms. Rieve stated that because of the increased number of applicants taking the massage exam in Ohio, the staff is already asking that applications be filed 120 days before the first day of examination. The rule change is to bring into line with what the staff is already requesting.

Dr. Varyani expressed concern that changing the deadline for the schools still will make Board staff send out the notices outside of their deadline to send them. If the school submits the information 30 days before the exam, the staff will have to send out the notices on the day the school information arrives. He suggested a deadline of 45 days for the schools. That would give staff some time.

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Dr. Kumar agreed with Dr. Varyani.

DR. KUMAR MOVED TO CHANGE THE DEADLINE IN PARAGRAPH (E) FROM 90 DAYS TO 120 DAYS AND TO CHANGE THE DEADLINE IN NEW PARAGRAPH (F) TO 45 DAYS PRIOR TO THE LIMITED BRANCH EXAMINATION DATE. HE FURTHER MOVED TO FILE THE REVISED RULE FOR RULES HEARING. MR. BROWNING SECONDED THE MOTION.

Ms. Rieve advised that she anticipates objections from the schools at hearing because the exam is only given every six months. Some individuals that graduate in May might not be able to sit for the June examination. They'll have to wait until December. The schools will say that that's a hardship to the students.

Dr. Varyani stated that it may be a hardship, but it's reality. The Board has checking to do, it has printing to do. He stated that this is how life works. The E.C.F.M.G. is given twice a year. It maybe a hardship for some, but so be it.

Dr. Robbins asked whether the exam dates are set in stone.

Ms. Rieve stated that at this time it would be difficult to change the dates because of the Board's contract with the Celeste Center.

Dr. Robbins suggested that the Board looking at changing dates in the future.

A vote was taken:

ROLL CALL:	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

IMPAIRMENT COMMITTEE

Dr. Varyani advised that the Impairment Committee reviewed applications for certificates of good standing as treatment providers from two providers

DR. MADIA MOVED TO APPROVE THE FOLLOWING INSTITUTIONS' APPLICATIONS FOR RENEWAL OF THEIR CERTIFICATES OF GOOD STANDING AS TREATMENT

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PROVIDERS: THE WOODS AT PARKSIDE, COLUMBUS, OH; AND HAZELDEN SPRINGBROOK, NEWBERG, OR. DR. EGNER SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Robbins	- aye
	Dr. Kumar	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

SCOPE OF PRACTICE COMMITTEE

Dr. Steinbergh stated that the Committee reviewed a draft response to correspondence from C. Robert Valdiviez, President, Valdiviez Medical Diagnostics, Inc., concerning whether procedures for the "Neurophysiologic Pain Profile" comport with Ohio laws and rules. She stated that the Committee is not yet ready to bring this matter to the Board for vote.

CONSENT AGREEMENT COMMITTEE

Dr. Kumar advised that the Committee has begun a review of staff-recommended changes to the model consent agreement. The revised model is not yet ready for Board action.

EXECUTIVE COMMITTEE

Dr. Varyani advised that in March, the Board will hear a presentation concerning mini-clinics during the Thursday session. The professional associations will be invited to have representatives present for the meeting.

Concerning the Federation's annual meeting in May, Dr. Varyani stated that the Board has nominated Dr. Talmage to the Federation Board of Directors. He noted that the following staff members have been given permission to attend the Federation meeting: Ms. Anderson, Mr. Miller and Ms. Wehrle. The Ohio Board will be reporting on its project with OUCOM at this year's meeting. Dr. Varyani asked that Board members wishing to attend the meeting, which takes place May 1 through 3, contact Ms. Wehrle.

ADMINISTRATIVE REPORT

Mr. Whitehouse reviewed his written report, a copy of which shall be maintained in the exhibits section of this journal.

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Mr. Whitehouse reported that the OBM has issues several memoranda regarding fiscal restrictions as they deal with a projected \$1.7B deficit. These include controls on hiring, travel, purchasing, and contracts. He offered an outline of these controls prepared by Susan Loe and told members that Ms. Loe would provide the full text, if they were interested in reviewing the actual memos. He informed Board members of the direct applicability of these controls to them as they relate to mileage reimbursement, receipts, lodging, and meals.

HEARING UNIT

Mr. Whitehouse informed Board members effective immediately the disks they receive every month will be password-protected in light of new data security policies from the Administration.

ENFORCEMENT

Mr. Whitehouse reminded Board members that last month he presented data demonstrating progress toward the Board's strategic plan. He stated that there may have been some confusion regarding his observation that the number of new complaints coming in tends to be greater than the number we dispose of per year. To dispel that confusion, he stated that the comment was not intended to relate to the challenge of eliminating the backlog of cases in the hearing unit. He reminded the Board that a plan is in place for that.

Mr. Whitehouse also expressed concern that this comment was misunderstood as a reflection upon the enforcement section's productivity. He stated that it was not. Mr. Whitehouse stated that the enforcement section has consistently increased productivity over the last few years and that with a full complement of experienced staff committed to continuous improvement, the Board saw very respectable output in 2007 and staff expects to raise the bar higher in 2008. In addition, needed improvements to processes have achieved greater efficiencies.

Mr. Whitehouse assured the Board that the staff recognizes the need to address the issues of timely completion and efficient use of limited resources. They also recognize the need to do quality work given what is at stake in these cases. And they are prepared to face the challenges of these often competing interests. It is for these reasons that staff has been working for several months to develop the new performance plan and goals that were promised last month. He stated that these measures would address the challenge of dealing with an increasing workload of cases of greater complexity while maintaining the quality of the work. He indicated that this plan – developed by Chief Enforcement Attorney, Rebecca Marshall and Assistant Executive Director, Kimberly Anderson – was discussed with Dr. Talmage, Mr. Albert, and Dr. Varyani. Mr. Whitehouse introduced Ms. Anderson to present the plan.

Dr. Kumar left the meeting at this time.

At this time the Board heard a presentation by Ms. Anderson, outlining the Enforcement Staff's plans for handling the large case load. A copy of Ms. Anderson's PowerPoint presentation shall be maintained in the exhibits section of this journal.

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Following Ms. Anderson's presentation, Board members expressed concern with the time it is taking to clear out the backlog of open complaints.

Board members expressed an interest in receiving monthly updates as to progress.

Mr. Whitehouse cautioned the Board that data could be provided but expressed concern that reporting on a monthly basis may not be good indicia of progress toward striking a better balance for a variety of reasons. He indicated that an annual review would be more illustrative of this effort and its affect on moving cases more quickly through the system.

Board members expressed concern over the length of time that resolution of their concern regarding timeliness would take.

Mr. Whitehouse suggested that as issues that impede timeliness were not created in the last month, they could not be resolved properly in such a timeframe. The balance between incoming and disposed complaints was only part of a larger picture addressed by the enforcement section's new performance plan and goals

Dr. Varyani indicated that he did not feel that the proposed plan will clear out the complaints as quickly as he would liked done. He noted that Ms. Anderson has indicated that she will be making a status report to the Board on a quarterly basis. He at this time instructed her to report monthly to the Board's Executive Committee on the open complaint status in addition to her quarterly reports to the Board.

FINAL ADOPTION OF RULES 4730-2-06 AND 4731-6-04, OHIO ADMINISTRATIVE CODE

Ms. Debolt advised that at the January 28, 2008 JCARR hearing, no questions or comments were received concerning the proposed revised rules for the P.A. formulary, Rule 4730-2-06 and Appendix, and for the demonstration of proficiency in spoken English Rule 4730-6004. She stated that JCARR jurisdiction over the proposed rules ended as of February 1, 2008. Accordingly, the rules were presented to the Board for official adoption by the Medical Board on February 14, 2008.

DR. STEINBERG MOVED THAT THE FINDINGS AND ORDER CONCERNING RULES 4730-2-06, WITH APPENDIX, AND 4731-6-04 OF THE OHIO ADMINISTRATIVE CODE BE ADOPTED AND THAT STAFF BE DIRECTED TO FILE THE FINAL RULES WITH AN EFFECTIVE DATE OF FEBRUARY 28, 2008. DR. ROBBINS SECONDED THE MOTION. A vote was taken:

ROLL CALL:

Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Robbins	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

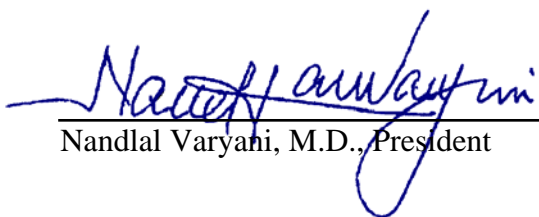
February 14, 2008

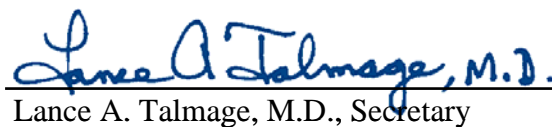
The motion carried.

DR. STEINBERGH MOVED TO ADJOURN. MR. BROWNING SECONDED THE MOTION. All members voted aye. The motion carried.

Thereupon at 11:40 a.m. on February 14, 2008, the February 13-14, 2008 meeting of the State Medical Board of Ohio was duly adjourned.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio, meeting on February 14, 2008, as approved on March 12, 2008.


Nandlal Varyani, M.D., President


Lance A. Talmage, M.D., Secretary

(SEAL)

