

August 14, 2002

MINUTES

THE STATE MEDICAL BOARD OF OHIO

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Pitambar Somani, M.D., President, called the meeting to order at 1:30 p.m., at the Vern Riffe Center for Government and the Arts, 77 S. High St., Columbus, Ohio 43215-6127, Room #1932, with the following members present: Anand G. Garg, M.D., Secretary; Raymond J. Albert, Supervising Member; Lance A. Talmage, Sr., M.D.; Anant R. Bhati, M.D.; David S. Buchan, D.P.M.; Anquetette Sloan; and Ronald C. Agresta, M.D. The following joined the meeting at a later time: R. Gregory Browning, Ph.D., Vice-President; Carol L. Egner, M.D.; and Anita M. Steinbergh, D.O. The following was absent: Patricia J. Davidson, M.D.

Also present were: Thomas A. Dilling, Executive Director; William J. Schmidt, Assistant Executive Director; Terrill D. McLaughlin, Assistant Director, Investigations; Lauren Lubow, Communications Administrator; Diann K. Thompson, Assistant Director, Public Services & Enforcement; Lori S. Gilbert, Chief Enforcement Coordinator; Emily M. Brown, Marcie P. Burrow, David P. Katko, Rebecca J. Marshall and Karen H. Mortland, Enforcement Coordinators; Sheryl Maxfield, Lawrence Pratt, Rebecca J. Albers, Hanz R. Wasserburger, Mark A. Michael, and Kyle C. Wilcox, Assistant Attorneys General; Eileen M. Schmidt, Executive Assistant to the Director; Joan K. Wehrle, Coordinator for Assessment and Development; Rochelle A. Sigan, Quality Intervention Assistant; Danielle Bickers, Compliance Officer; Mark Wayda, Chief of Executive Staff; Barbara Rogers, Public Services Administrator; Jacqueline A. Moore and Annette Jones, Disciplinary Information Assistants.

EXECUTIVE SESSION

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

VOTE:	Mr. Albert	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Somani	- aye

The motion carried.

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

Mr. Browning, Dr. Egner and Dr. Steinbergh joined the meeting during the executive session.

The following joined the meeting after the executive session: Daniel J. Roberts, Hearing Examiner.

At this time Dr. Somani congratulated Mr. Albert and Ms. Sloan on their reappointment to the Board.

MINUTES REVIEW

DR. BHATI MOVED TO APPROVE THE MINUTES OF JULY 10, 2002. DR. BUCHAN SECONDED THE MOTION. A vote was taken

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

REPORTS AND RECOMMENDATIONS

Dr. Somani announced that the Board would now consider the findings and orders appearing on the Board's agenda.

Dr. Somani asked whether each member of the Board had received, read, and considered the hearing record, the proposed findings, conclusions, and orders, and any objections filed in the matters of: Lewis B. Boone, Sr., M.D.; Norman Floro, M.D.; Thomas L. Geraci, D.P.M.; James M. Kennen, D.O.; Michael R. Ross, M.D.; Michael R. Treister, M.D.; and Charles C. Voorhis, M.D. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye

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Ms. Sloan	- aye
Dr. Agresta	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye
Dr. Somani	- aye

Dr. Somani asked whether each member of the Board understands that the disciplinary guidelines do not 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. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

Dr. Somani 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. Somani stated that if there were no objections, the Chair would dispense with the reading of the proposed findings of fact, conclusions and orders in the above matters. No objections were voiced by Board members present.

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

LEWIS B. BOONE, SR., M.D.

Dr. Somani directed the Board's attention to the matter of Lewis B. Boone, Sr., M.D. He advised that objections were filed to Hearing Examiner Murphy's Report and Recommendation and were previously distributed to Board members.

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

Dr. Boone was accompanied by his attorney, James M. McGovern.

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Mr. McGovern stated that this case is a bootstrap of a Kentucky Board action. He advised that, as he stressed in his objections to the Report and Recommendation, this case involves Dr. Boone's prescribing practices prior to August 2000. Mr. McGovern commented that the Hearing Examiner suggested that Dr. Boone is not a candidate for a remedial sanction, but he would respectfully disagree.

Dr. Boone stated that he is a man who believes that the past is the past and cannot be left lived again. Everyone lives for the future, and each day represents a new start with more knowledge and information than was had the day before.

Dr. Boone stated that he is here to inform the Board members that the man sitting here today is not the same man who was sanctioned by the Kentucky Medical Board in 2000 and in 1998. Two years later he has redirected his mode of medical practice. His problems in the past relating to prescribing controlled substances and documentation in patient charts have been improved by him. He constantly strives to do things even better. He has learned the importance of maintaining patient records in such a manner that they can be easily followed by anyone who might have reason to examine them.

Dr. Boone continued that, in the past, he did speak with his patients and discuss many things that were never recorded in the patient record. These things included alternative modes of treatment, including the use of non-controlled substances. He discussed with his patients the problems and potential hazards of using controlled substances, and he also discussed things such as short term and long term management plans. However, he did not note these discussions in the medical record. For the past two years he has not prescribed any Schedule I, II or III controlled substance. He is not eligible to reapply for his D.E.A. registration certificate that would give him the ability to prescribe Schedules I, II and III until the year 2004. That means that a total of four years will have passed without his having prescribed any Schedule I, II or III controlled substance.

Dr. Boone stated that from January 19, 2001 to March 25, 2002, the D.E.A. allowed him to prescribe Schedule IV and V medications. During that fourteen-month time frame, there were no objections from the D.E.A. based on logs submitted to them that explained exactly what he was prescribing on a daily basis. The Medical Board of Kentucky had no issues with his prescribing of those medications during that fourteen-month timeframe.

Dr. Boone stated that he would like the Medical Board to note that the past four years, going back to 1998, have presented extreme hardships on him, his family, his medical staff and his patients, socially, emotionally, and financially. Nonetheless, throughout the process of all the investigations, hearings and allegations, he has been completely truthful and forthcoming with all of the things he has done. He has tried to explain the rationale for what he did. Dr. Boone stated that he has submitted the 16 patient records at issue to this Board so that it could have a better and complete understanding of exactly what he did. He has not tried to conceal anything whatsoever. Dr. Boone added that he wants the Board members to have the benefit of every piece of information. As a result of that, and because he has been honest and truthful throughout the process, he has concerns that the Hearing Examiner questioned his credibility with regard to one of the patients, designated as Patient 5 in the June 6 Report and Recommendation.

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Dr. Somani asked Dr. Boone to conclude his statement.

Mr. McGovern stated that Dr. Boone has about one minute left to do. He added that for someone who has a revocation on the table, he should be allowed that time.

Dr. Somani agreed.

Dr. Boone stated that the truth of the matter of what happened with Patient 5 is that this was a patient he saw, examined, treated and prescribed controlled substances to, based on the patient's verbal account of his medical history. Dr. Boone stated that he felt the treatment was appropriate at the time he saw the patient. He subsequently went into another examination room, the patient was instructed to go to the desk and get a follow-up appointment, and to sign a medical release form to obtain his medical records, because he didn't have those records at the time he saw the patient. When he came out of the other examination room, his Secretary told him that the patient had gone from the office and that he had refused to sign the release form for medical records. Dr. Boone stated that he felt that the patient had something to hide, and he didn't want a patient like that in his practice. He sent that patient a form letter that same date, dismissing him from the practice. Approximately three days later, Patient 5's wife called and asked why he had been dismissed. It was at that time only that he was informed that the reason that he was dismissed was because he refused to sign the medical release form and Dr. Boone felt that he had something to hide.

Dr. Boone stated that he would like this Board to know that he is willing to undergo further training on documentation techniques and the prescribing and use of controlled substances. He would like to continue to practice in the State of Ohio and prescribe Schedules IV and V medication while this training is in progress. He would like the opportunity to demonstrate to the Board that he has changed, that he has learned, and that he will continue to learn the practice of medicine in such a way as to endanger no person.

Dr. Boone thanked the Board for allowing him to share his thoughts with the Board today.

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

Mr. Wilcox stated that he is in complete agreement with the Report and Recommendation. The Report is very thorough and documents Dr. Boone's pattern of improper and dangerous prescribing practices very well.

Mr. Wilcox stated that it is interesting that, during his statement, Dr. Boone mentioned Patient 5, because that is a perfect example of why he is before the Board today. Dr. Boone had never seen the patient before, had no medical history of the patient, but nevertheless prescribed 63 doses of Oxycontin and 125 doses with two refills of Valium. Mr. Wilcox stated that that speaks for itself.

Mr. Wilcox concluded by stating that he supports Ms. Murphy's Recommendation and request for permanent revocation.

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DR. AGRESTA MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF LEWIS B. BOONE, SR., M.D. DR. TALMAGE SECONDED THE MOTION.

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

Dr. Bhati stated that Dr. Boone had quite a few chances to fix his problem. The Kentucky Board twice gave him a chance. His D.E.A. certificate was suspended. Even after completing the mini-residency, the problem continued. Dr. Bhati stated that this demonstrates that Dr. Boone's problem is not amenable to rehabilitation. Referring to Patient 1, Dr. Bhati noted that from January 1999 to August 2000, Dr. Boone prescribed 1622 tablets of Oxycontin, 25 tablets of Percodan, 232 tablets of Hycodan, 4,268 tablets of Esgic, 1,585 tablets of Valium 10 mg., 690 tablets of Soma, and 1,848 tablets of Ritalin. Referring to Patient 3, Dr. Bhati noted that from February 1999 to April 2000, Dr. Boone prescribed 1,629 tablets of Lortab, 60 tablets of Oxycontin, 420 tablets of Ativan, 3,030 tablets of Valium and 360 tablets of Fioricet. Referring to Patient 8, Dr. Bhati noted that from February 1999 to August 1999, Dr. Boone prescribed 106 tablets of Oxycontin, 700 tablets of Lortab, 60 tablets of Percocet, 696 tablets of Soma, 600 tablets of Valium, 75 tablets of Elavil and 16 tablets of Ambien.

Dr. Bhati stated that he can't see any improvement in Dr. Boone's prescribing practices, so he must agree with the Proposed Order.

Dr. Egner stated that she also agrees with Dr. Bhati and the Proposed Order. What she hears Dr. Boone saying today and what she heard him say throughout the hearing record is that he still sees this as a documentation problem. Although it is a documentation problem, it goes far beyond that. This was inappropriate prescribing, putting patients at great risk. Dr. Egner stated that, as she read the record, she was surprised that the Board didn't find out that any of those patients had ended up in the emergency room with an overdose or inadvertent death. That's how atrocious the prescribing was. Yet, even today, Dr. Boone doesn't really talk about having learned that there's a different way to practice pain management for benign chronic pain.

Dr. Agresta stated that his interpretation of the record is that Dr. Boone doesn't have any idea how to treat people with pain. His prescribing was indiscriminate, he was just giving pills out, basically. Dr. Agresta stated that he doesn't think that Dr. Boone used good clinical judgment in treating patient after patient. If that's an indication of his practice in general, which most of the time it is, it means that he has no clue of what was going on. Dr. Agresta stated that he agrees with the Report and Recommendation.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye

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Mr. Browning	- aye
Ms. Sloan	- aye
Dr. Agresta	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye

The motion carried.

NORMAN A. FLORO, M.D.

Dr. Somani directed the Board's attention to the matter of Norman A. Floro, M.D. He advised that objections were filed to Hearing Examiner Murphy's Report and Recommendation and were previously distributed to Board members.

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

Dr. Floro was accompanied by his attorney, Barbara Aquilla Butler.

Ms. Butler stated that she and Dr. Floro are here today because Dr. Floro has been accused of committing fraud for not completing the required number of C.M.E. credits for the 1998-2000 period. Ms. Butler stated that Dr. Floro maintains that he has completed the required number of C.M.E. credits, and that he certified that he had completed them because he had. He just cannot present documentation to show that he has completed them. Unfortunately, he has lost the benefit of the doubt and has to show that he has actually attended those C.M.E.s.

Ms. Butler stated that they also have an issue with the calculations that were provided in the entry. Today they have proof to show that Dr. Floro has 33 Category I and 53 Category II for the prior reporting period and 80.5 Category I and 22 Category II for the current period.

Dr. Floro thanked the Board for allowing him to speak. He advised that he joined his father eight years ago as practitioners in an internal medicine practice in Lorain, Ohio. He was audited for his C.M.E. units for the time period of July 1, 1998 through October 31, 2000. He did not respond to the certified letters sent to him requesting documentation. Dr. Floro stated that he wishes to emphasize to the Board that there were extraordinary circumstances, unique to that time. On July 17, 2001, his father underwent aortic valve replacement at the Cleveland Clinic. On September 11, his father also developed a sternal wound infection. Things were rather tumultuous during that time period.

Dr. Floro stated that there was a hearing before Ms. Murphy, where he was to submit the documentation of his C.M.E. credits. He did bring in a partial list of his C.M.E.s. Ms. Murphy was gracious enough to keep the hearing record open for an additional 30 days for him to provide certificates of this documentation. At the time the hearing record closed he did submit documentation towards that. The totals, however, did not include 31 units of Category II that were derived from a 2000 list of Category II. Twenty-nine units of

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Category II for the preceding year were accepted. These were from his hospital's tumor board rounds. The primary reason was that the first letter said the actual dates for when the credits were applicable, and the second letter for the 31 units only mentioned that they were for the year 2000, but did not say what dates exactly. Since then he has tried to remedy his recordkeeping. He has obtained additional documentation from his own hospital for those same 31 units, however the total is 30 units, one unit is missing. Dr. Floro stated that he does have additional documentation of one unit in 1998.

Dr. Somani asked Dr. Floro to conclude his statement.

Dr. Floro stated that he has tried to remedy his recordkeeping to further demonstrate that he has continued to fulfill his C.M.E. requirements. At the time of closure for the 1998 to 2000 audit, he knows that he certified when he renewed his license in 2000 that he had 40 hours of Category I and 100 units total of Category II. The totals that were accepted at the date of the closure were 33 units of Category I and 29 units of Category II. Dr. Floro stated that he wishes to submit that, with the documentation, his Category II units for the audit period were 53 units. Concerning the subsequent 24-month period after October 31, although he had submitted to the journal on March 30, that was before his hearing. He didn't get the certificate until July. He does have 80.5 units of Category I, all except two of which were done prior to the hearing. He also has 22 units of Category II for the subsequent two-year period.

Dr. Floro stated that, given the extraordinary circumstances, he respectfully beseeched the Board to consider that he has certified that he did complete the C.M.E.s. Dr. Floro stated that he is definitely guilty of terrible recordkeeping, but he has tried to remedy that. He has a hard copy file of all of his C.M.E.s, as well as an electronic file of them. He added that he hopes this demonstrates that he has always done his C.M.E. in a timely manner. Dr. Floro asked that the Board not accept the recommendation of the Hearing Examiner.

Dr. Somani stated that the Board has already allowed Dr. Floro extra time. He added that the Board understands Dr. Floro's position.

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

Mr. Michael stated that he believes that Ms. Murphy put it absolutely correctly when she stated that Dr. Floro demonstrated flagrant disregard of his obligation. In fact, he believes that that was stating it nicely. In Dr. Floro's own words at the hearing, he had priorities. None of those priorities included complying with his C.M.E. recordkeeping requirements and, more importantly, responding to the Board when it issued its audit notices. Dr. Floro received his first audit notice eleven months ago, in September 2001. He did not respond. He received his second notice in November. He did not respond. Dr. Floro then received a citation letter. The case was continued so that Dr. Floro could get his records together. When the hearing date arrived, Dr. Floro showed up with a box full of documents and wanted the Hearing Examiner to go through the documents to see if he had complied with his C.M.E. requirements.

Mr. Michael stated that Ms. Murphy was gracious. He added that he disagreed with her procedure in holding the record open, but Ms. Murphy gave Dr. Floro an additional month to compile his records and

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submit them to the Board. She then, on her own initiative, asked Board staff to look at those records and tell her whether or not they met the requirements. Despite all of that, Dr. Floro still came up short.

Mr. Michael stated that it is incumbent upon every member of the profession to not only do their C.M.E. and keep adequate records of that, but also to respond to the Board in a timely manner when asked to produce those records. The State is in support of Ms. Murphy's Report and Recommendation. The vehicle that she put in it for Dr. Floro to come into compliance and to make up his hours for the period of his citation letter as well as his current period is adequate to handle the situation.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF NORMAN A. FLORO, M.D. DR. AGRESTA SECONDED THE MOTION.

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

Dr. Steinbergh stated that she absolutely supports the Proposed Order in this case. Dr. Floro ignored two audit requests from the Board. She appreciates that his father was ill, but by the second request there ought to be a little wake up call for the physician that the Board is interested in looking at his C.M.E. Doctors do have an obligation and responsibility to licensure in this state. Dr. Floro ignored that. He was very unprepared at the time of his hearing. Dr. Steinbergh stated that this Board has spent enough time on this. Dr. Floro should be reprimanded, and the fine of \$5,000 is appropriate. His certificate will be suspended until he completes his C.M.E. and demonstrates to the Board that he's in compliance.

Dr. Steinbergh noted that the paragraph 5 of the Summary of Evidence in the Report and Recommendation indicates that Dr. Floro's father underwent aortic valve surgery in July 2002. She advised that that should state July 2001.

Dr. Buchan stated that he read this case and he feels a sense of compassion for Dr. Floro. He is in total agreement with the proposed reprimand and fine. He is disappointed in the way that Dr. Floro failed to respond to the Board's audit request. However, he suggested removing the suspension from the Proposed Order. Dr. Buchan stated that a suspension wouldn't necessarily prove the Board's point. He added that Dr. Floro now understands what he needs to do. Dr. Buchan stated that a suspension would carry tremendous ramifications in Dr. Floro's ability to practice medicine.

DR. BUCHAN MOVED TO AMEND THE PROPOSED ORDER BY DELETING PARAGRAPHS 3, 4, 6 AND 7. DR. EGNER SECONDED THE MOTION.

Dr. Somani stated that he would entertain further discussion in the above matter.

Dr. Steinbergh opposed the proposed amendment, stating that Dr. Floro has had enough time to prove what he needs to prove and he hasn't. It is Dr. Floro's obligation to prove that he has done the requisite number of C.M.E. hours. The Board cannot sit here and recalculate when it doesn't have proper documentation. Dr. Steinbergh stated that this is the most severe sanction the Board has imposed, but it has never seen a

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case like this. Practitioners need to understand that the Board is serious about this.

Dr. Bhati stated that it really worries him when someone doesn't respond to a certified letter for eleven months. Up to now the Board doesn't have documentation of the required C.M.E. from Dr. Floro, and this concerns him. He doesn't think that Dr. Floro has any respect for a regulatory agency. Dr. Bhati stated that a suspension is severe, but how else will Dr. Floro learn his lesson? He presented himself before the Hearing Examiner, totally unprepared. Dr. Bhati stated that he is appalled by Dr. Floro's actions. When a physician gets a certified letter from the regulatory agency, he or she needs to think about what he or she is doing wrong.

Dr. Egner stated that she may be wrong, but it was her understanding that when the Board automatically suspended a license in cases like this, it found that that was a far greater punishment than the Board intended. The Board then sought fining authority so that it could impose a monetary fine instead of a mandatory suspension.

Dr. Egner continued that since she's been on the Board all C.M.E. violators come here with a sad tale of why they haven't fulfilled the C.M.E. requirement. She doesn't think that anyone has ever said that they didn't do the C.M.E. and don't know why they didn't do them. They always have an excuse, always have a sad reason. Dr. Floro will never make up the credits he missed for the 1998-2000 period. He is short at least seven credits. He will have to document his C.M.E. in the future. Dr. Egner stated that, although she could accept the Hearing Examiner's Proposed Order, she will vote for Dr. Buchan's proposed amendment. She is not sure that a suspension will change Dr. Floro at all.

Dr. Agresta agreed with Dr. Bhati. Eleven months is a long time to not respond to a certified letter. It's a flagrant violation. Also, Dr. Floro's recordkeeping for C.M.E. brings up the question of what his medical records are like. Dr. Agresta stated that he thinks the Hearing Examiner's Proposed Order is appropriate in this case. He's sorry that Dr. Floro's father has had problems, but all Dr. Floro had to do was to respond to the audit letter. It wouldn't have taken him five minutes to send a letter or make a phone call.

Dr. Buchan asked that the Board look at this case on its face. This is about C.M.E., not a standard of care issue or a quality of care issue. It is questionable whether Dr. Floro is short 10 or 15 credits. It is reasonable to reprimand Dr. Floro and to fine him the maximum. It is also reasonable that Dr. Floro be required to report or document his C.M.E. for the next several renewals. He acknowledged that Dr. Floro disrespected the Board and had a flagrant disregard for the Board's audit notices, but, again, this is about C.M.E. To take Dr. Floro out of practice today would be a disservice.

Dr. Somani suggested imposing a stayed suspension.

Dr. Buchan stated that he doesn't feel that the Board will see Dr. Floro again on a C.M.E. violation. The Board has made its case and it should fine Dr. Floro and move on.

Dr. Talmage stated that the idea of a stayed suspension sounds good. Dr. Floro would still be required to provide documentation showing he made up the missing hours. If he doesn't, the Board could rescind the

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stay. This puts Dr. Floro on the bubble to get his documentation in.

Ms. Lubow reminded the Board that if it stays Dr. Floro's suspension, there is no trigger mechanism to reimpose the suspension if he doesn't submit the necessary documentation. The proposed suspension gives Dr. Floro a deadline to meet.

Dr. Talmage suggested amending paragraph 4A to require that all documentation be submitted within 30 days.

Dr. Somani suggested tabling this matter until language for a proposed amendment could be prepared.

Dr. Buchan asked for a vote on his motion.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- nay
	Dr. Bhati	- nay
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- nay
	Dr. Agresta	- nay
	Dr. Garg	- abstain
	Dr. Steinbergh	- nay

The motion failed.

**DR. BHATI MOVED TO TABLE THE MATTER OF NORMAN A. FLORO, M.D.
MR. BROWNING SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- nay

The motion carried.

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THOMAS L. GERACI, D.P.M.

Dr. Somani directed the Board's attention to the matter of Thomas L. Geraci, D.P.M. He advised that no objections were filed to Hearing Examiner Murphy's Report and Recommendation.

DR. AGRESTA MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF THOMAS L. GERACI, D.P.M. MS. SLOAN SECONDED THE MOTION.

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

Dr. Buchan stated that he feels that the Proposed Order represents the Board's continued effort to work with impaired physicians; it is lenient and compassionate. Dr. Geraci did practice while under the influence of heroin. There was evidence that he was under the influence in his office. Dr. Buchan stated that he agrees with the Order as written. This gives Dr. Geraci one more opportunity to come back to the Board in 18 months and prove his ability to practice. Dr. Buchan expressed concern that Dr. Geraci is skating on thin ice, and he questioned whether Dr. Geraci is amenable to rehabilitation.

Dr. Browning spoke in support of the Proposed Order, but added that this is Dr. Geraci's last stop. If another problem develops, he can't see allowing Dr. Geraci to continue to practice medicine.

Dr. Bhati stated that the only reason for giving Dr. Geraci another chance is because until this point, Dr. Geraci has been the poster child of compliance with his March 11, 1998 consent agreement. He then self-reported. Because of those two reasons, giving Dr. Geraci another chance is appropriate. If he gets better in 18 months, that's great. If not, the Board will wash their hands of him. Dr. Bhati stated that he believes Dr. Geraci will get the message loud and clear.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Steinbergh	- aye

The motion carried.

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JAMES M. KENNEN, D.O.

Dr. Somani directed the Board's attention to the matter of James M. Kennen, D.O. He advised that objections were filed to Hearing Examiner Roberts' Report and Recommendation and were previously distributed to Board members.

Dr. Somani continued that a request to address the Board has been filed on behalf of Dr. Kennen, but was not filed in a timely manner. The Assistant Attorney General has indicated that she has no objections to the Board's allowing the address. Dr. Somani asked for a motion to allow Dr. Kennen to address the Board.

**DR. BHATI MOVED TO PERMIT DR. KENNEN TO ADDRESS THE BOARD.
DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

Dr. Somani advised that Dr. Kennen would be permitted five minutes to address the Board.

Dr. Kennen thanked the Board, the Hearing Examiner, the Assistant Attorney General and everyone who helped him with dealing with his problem with alcohol. He's reviewed the Report and Recommendation from his adjudication hearing on May 21, 2002, and he believes that Mr. Roberts has done an excellent job in summarizing his situation. Dr. Kennen stated that he wants to assure the Medical Board that he has been in compliance with his aftercare contract to the best of his ability since his brief relapse in January 2002. That had been prior to completing his treatment program in May and June of 2002, including urine toxicology screens, A.A. meetings, other recovery meetings and support groups, appointments with his psychiatrist and psychotherapist, and resumption of antabuse.

Dr. Kennen stated that he has gained a great deal of insight into the circumstances leading to his relapse, as has been summarized in the Hearing Report. He feels that he has made the appropriate changes in his life and in his program to prevent this in the future. Unfortunately, it took a relapse for him to grasp and accept the full depth of his illness, which is known to happen to many alcoholics. The time that has been afforded him, the need for a therapist and counselor, the support of his family and colleagues and both A.A. and

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non-A.A. friends have all had a positive impact on his life, both spiritually and psychologically.

Dr. Kennen stated that he is sure that his life will continue to improve with the Board's help. He's grateful to everyone who has assisted him in his recovery, and he intends to continue the process. Dr. Kennen stated that he looks forward to returning to the practice of medicine at the appropriate time, when the Board finds him fit.

Dr. Kennen again thanked the Board for its courtesy and attention.

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

Mr. Wilcox stated that he had no response to Dr. Kennen's statement.

Dr. Garg returned to the meeting at this time.

Dr. Egner asked Dr. Kennen whether he's under a monitoring program with the State Department of Health regarding his HIV status.

Dr. Kennen stated that he has a physician monitor, but is not under the State Department of Health. His employers have always monitored him, but he has not had an official monitor by the State Department of Health.

Dr. Egner stated that she thought that there was a rule about that.

Dr. Somani stated that he doesn't believe that this is the time to address this issue.

Dr. Egner stated that the issue came up as part of the record. She wondered whether there shouldn't be some compliance language in the Proposed Order.

Mr. Dilling stated that that would be separate, outside this record. He stated that staff will follow up with Dr. Kennen about his responsibilities in that regard.

Dr. Somani agreed that it was a separate issue.

Dr. Steinbergh also agreed, stating that it doesn't need to be part of the Board's discussion today.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. ROBERTS' PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF JAMES M. KENNEN, D.O. MR. BROWNING SECONDED THE MOTION.

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

Dr. Steinbergh stated that she does agree with the Proposed Order. She supports the proposed year-long

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suspension. Dr. Steinbergh stated that she feels it is important that Dr. Kennen be out of practice for a substantial length of time in order for him to recover. The time will allow him to recover and also impress upon him the importance of this Board Order.

Dr. Bhati agreed that a one-year suspension is appropriate. It will give him time to think about it and understand the problems more. This relapse was fairly early after inpatient treatment.

Dr. Somani stated that Dr. Kennen relapsed in April 1999 and a second relapse in January 2002. He's already had two relapses. The Board knows that it's a very difficult process, especially the relapses.

Dr. Bhati commented that even a one-year suspension is lenient if you really look at this case. Dr. Kennen should get the message that if he shows up again before the Board under these circumstances, he will have no chance; the Board would have zero tolerance.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

MICHAEL R. ROSS, M.D.

Dr. Somani directed the Board's attention to the matter of Michael R. Ross, M.D. He advised that objections were filed to Hearing Examiner Murphy's Report and Recommendation and were previously distributed to Board members.

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

Dr. Ross was accompanied by his attorney, Elizabeth Y. Collis.

Ms. Collis stated that this is a bootstrap case from North Carolina, where Dr. Ross was initially disciplined. In North Carolina, where his actions took place, Dr. Ross was given a 60-day suspension and the entire suspension was stayed. The Hearing Examiner proposes a permanent revocation. Ms. Collis

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stated that that is not the appropriate sanction in this case. Ms. Collis continued that Dr. Ross did not practice in Ohio, he did not use his Ohio license. No evidence was presented at hearing that any Ohio resident was ever treated by Dr. Ross through his internet practice.

Ms. Collis stated that it is important to note that the Board has had dealings with Virtual Medical Group [VMG] in other cases. This case is unlike the case of Dr. Barrett, which this Board previously saw. In Dr. Barrett's case, he used his Ohio license, he treated Ohio Residents. That is not what Dr. Ross did. No Ohio residents were treated.

Ms. Collis stated that VMG is a very slick operation. They advertise on websites that are frequented by physicians. After viewing their website, the average physician would think that this is a legitimate practice. When Dr. Ross applied to work with this group, and he only worked with them for three months, earning less than \$3,000, they specifically told Dr. Ross that the North Carolina Board knows of the practice and acquiesces to the practice. They also presented Dr. Ross with documentation showing that the North Carolina Board acquiesced to the practice of this group. At the time Dr. Ross worked there, VMG had physicians working in over 30 states. Dr. Ross had known for over three years that they had been in practice. These are all things that in the back of a physician's mind would say that this is a legitimate group. They're practicing all over the country. The day Dr. Ross found out from the North Carolina Board investigator that the North Carolina Board, in fact, did not condone the actions of VMG, he resigned his position. He negotiated a consent agreement with the North Carolina Board, and he completely cooperated with the North Carolina Board.

Ms. Collis stated that Dr. Ross is licensed in various states. At this point, the State of Alabama, where he is also licensed and where he did not use his license for Internet practice, has agreed to enter into a consent agreement with Dr. Ross with language similar to North Carolina's. The State of Maryland has proposed to offer a consent agreement to Dr. Ross with the same language as North Carolina's.

Ms. Collis stated that, because no action took place in Ohio, this Board should carefully review the record and make a determination in this case.

Dr. Ross stated that he has spent a good part of his career working in Ohio. He recognizes this Board's prerogative, and that of the other states to set practice guidelines in terms of appropriate care levels. Up until this point he has totally supported and complied with those guidelines. In fact, he felt he was complying with the guidelines when he accepted this employment. If he had known that he was in violation of those guidelines, he would certainly not have done what he did.

Dr. Ross stated that he had no idea at the time, based upon what he'd been told, that his actions were considered inappropriate by the North Carolina Board. When he found out, he immediately complied and was fully cooperative with the North Carolina Board, as well as with the other boards. He has not specifically heard from some of the Boards by whom he's licensed, but he has, on his own, sent out letters informing them of the Consent Order with North Carolina to give them appropriate time to respond. Dr. Ross stated that he never used his Ohio license, never treated Ohio patients, never harmed any patient where he did treat them. He only treated non-acute conditions. Dr. Ross stated that he believes that he was

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operating under the standard of care.

Dr. Ross stated that he believes that he has acted professionally and ethically. He has certainly been totally honest with this Board. His Ohio license was renewed in January, and he, of course, answered correctly that he had the North Carolina discipline pending at that time. As his lawyer indicated, he is negotiating consent decrees with other Boards to mirror the North Carolina decision. He asked that the Board do the same.

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

Mr. Michael advised that the State is in agreement with the Report and Recommendation before the Board. While Dr. Ross might state that he didn't know it was illegal in North Carolina, he did acknowledge at hearing that treating patients over the Internet was not in the best professional judgment. This is an Internet prescribing case. Dr. Ross made it quite clear that he allowed his professional judgment and patient care to lapse because of his personal financial situation. He was prescribing drugs to patients although he admitted he had no way to tell where these patients were located, or whether they were telling him the truth about their conditions. Mr. Michael spoke in support of the Report and Recommendation.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF MICHAEL R. ROSS, M.D. DR. AGRESTA SECONDED THE MOTION.

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

Dr. Steinbergh stated that by Ms. Collis' own words, VMG has a very slick operation. She added that she would like to focus on the fact that Dr. Ross acted inappropriately and failed to maintain minimum standards of care for these patients. There is no way of proving that there were no Ohio patients, but he didn't have a physician/patient relationship with those for whom he prescribed drugs. Dr. Steinbergh stated that she doesn't know why any physician would believe that he or she could prescribe for patients with whom he or she did not have a physician/patient relationship. She believes that this case rises to the level of permanent revocation, and she supports the Report and Recommendation.

Dr. Bhati agreed with Dr. Steinbergh. He noted that Dr. Ross claims that the patients weren't from Ohio, but how do they know that? The patients could have used any name or any place and been from anywhere. Yes, Dr. Ross treated only chronic conditions, but that's not a standard of care. He didn't know the patient, he didn't know the age, whether the patients were telling the truth, where the patients were from or what their conditions are. This was very inappropriate. The question is whether this reaches the level of permanent revocation. This is an Internet prescribing case and it essentially does.

Dr. Egner stated that part of the discussion concerns bootstrap cases. Does the Board look at such cases as if the offenses occurred in Ohio and what it would do if they had? Or does the Board look at such cases and say that the offenses occurred somewhere else and the physician has an Ohio license, and does the Board do something different based on what the state where the offense occurred did. Dr. Egner stated that

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that's a very important question, not just in this case but in all bootstrap cases. Does this matter because it was an Internet offense? She's hearing some suggesting that the offense did occur in Ohio and no one knows it. Dr. Egner stated that she would rather look at such cases as though it had occurred in Ohio. What would the Board do about it, and is permanent revocation what the Board would do? She asked for other members' opinions on whether there is a distinction as to an offense occurring in another state or it occurring in Ohio.

Dr. Talmage stated that he doesn't think that there is a distinction. If someone is willing to do something wrong to a patient in any state, the assumption is that they will do that wrong to an Ohio patient, too. The Board has taken action against physicians' licenses based on poor practice in another state on any number of occasions.

Dr. Talmage stated that he is extremely disturbed by the ethic that someone with financial problems could skirt the ethical practice of medicine. This country is dealing right now with whether it is better to be rich and dishonest or stay honest and forgo some of the riches. Dr. Talmage stated that this is a case the Board can't excuse on the basis that Dr. Ross had financial need. It's still unethical.

Mr. Browning stated that, in addition to the ethics, he's not sure that the doctor understands the gravity of the situation from a patient care perspective. Anything could have happened in this case without the proper relationship, even for "non-acute" care. Mr. Browning stated that he's not sure that Dr. Ross understands that and the general gravity of the situation.

Mr. Browning stated that the question of whether permanent revocation is in order is an open one in his mind. He would be willing to give Dr. Ross some hope by moving a "revocation" versus permanent and see what he does in terms of proper training and practice going into the future.

Dr. Somani asked whether Mr. Browning was making a motion.

Mr. Browning stated that he's raising an issue to see whether there is any interest in pursuing it.

Dr. Agresta stated that he's listened to everyone's comments, and he has the same concerns. In response to Mr. Browning's question, he doesn't think that this does rise to the level of permanent revocation, but he does think that it rises to a high enough level that the Board needs to send a strong message out in relationship to this issue. Dr. Agresta stated that in the long term this could come back to haunt the Board if it doesn't do the proper thing.

Dr. Agresta stated that what bothers him most is that Dr. Ross would have the feeling that such practice was appropriate to treat patients without having a relationship with them or examining them. Everybody knows that's inappropriate. Common sense should tell you that. That may tell something about Dr. Ross' practice in general. Dr. Agresta stated that he is against permanent revocation, but non-permanent or stayed revocation would be more in order. He was honest enough to tell the Board what he did and should get credit for that. Dr. Agresta stated that the Order Dr. Ross got from the North Carolina Board was quite lenient.

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Dr. Steinbergh stated that it's her understanding that, in regard to Internet prescribing, this case is no different from the others. The Board has accepted two permanent revocations in this state for Internet prescribing. As difficult as it is, she doesn't see this case as being different from any other case in terms of Internet prescribing and inappropriate prescribing for patients. She would not stay a revocation.

Dr. Steinbergh stated that she supports the Proposed Order. The Board has permanently revoked two licenses for this exact reason, and she does see this as though he had done it in Ohio. The Board does not have proof that an Ohio resident was not affected.

Dr. Talmage stated that, as he recalls, the previous cases involved continuing, ongoing offenders. This was not a continuing, ongoing offender. There is a slight difference.

DR. TALMAGE MOVED TO AMEND THE PROPOSED ORDER BY DELETING THE WORD "PERMANENT." DR. BHATI SECONDED THE MOTION.

Dr. Buchan stated that the Board responds to behavior from physicians whether in state or out of state. He looks at behavior in Florida as he would at behavior in his neighborhood. If it's inappropriate in Florida, it's inappropriate in Ohio, and the Board responds, regardless of where that behavior took place. He spoke in support of the proposed amendment. He added that he feels that Dr. Ross was duped. Realizing three months later that it was inappropriate, Dr. Ross quickly responded and did the right thing, but he knew better.

Dr. Steinbergh stated that she doesn't think he was duped. Each physician knows his or her responsibility to patient care. Dr. Ross just simply went down the slippery slope.

Dr. Bhati stated that that goes without saying. Dr. Ross did make a mistake. The question is whether or not the Board gives him credit for stopping when he learned that this was not appropriate practice, and going along with the investigation.

Dr. Steinbergh commented that once you're caught, you're caught. She doesn't know that anyone who is caught would continue.

Ms. Sloan stated that she also disagrees that Dr. Ross was duped. This is an intelligent person who should have known that this was not the level of care for any patient, no matter where they were. She does see that Dr. Ross was informed that this was a problem and he did cease. He also notified the other boards that an action had been taken. She would consider that and agree with the proposed amendment.

Dr. Egner questioned what a nonpermanent revocation of Dr. Ross' license would do.

Dr. Somani stated that it would allow him to apply for a license later.

Dr. Egner stated that then the Board would give it to him.

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Mr. Browning stated that it wouldn't necessarily give it to him.

Dr. Somani stated that any application would have to come back to the Board to decide under what conditions a license would be issued.

Dr. Egner asked how the Board would decide that. Dr. Egner stated that this is a physician who does not come with a stellar history. He has started out in three residency programs and never completed one. He graduated from medical school in 1990. In this day and age it's very unusual that someone has not completed a residency program and has had three attempts at it. She looks at that and thinks that this is a person whose judgment is poor. If the Board revokes his license and he comes back, will the Board really assure itself that he has good judgment and good medical judgment? She stated that she's not sure that the Board can. Even with his lack of experience, she believes that he certainly did know that Internet prescribing is the wrong thing to do.

Dr. Somani stated that if he applies, the Board would have the option to negotiate the terms for granting a license.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- nay
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- nay

The motion carried.

DR. BHATI MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER, AS AMENDED, IN THE MATTER OF MICHAEL R. ROSS, M.D. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- nay
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye

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Dr. Agresta	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye

The motion carried.

MICHAEL R. TREISTER, M.D.

Dr. Somani directed the Board's attention to the matter of Michael R. Treister, M.D. He advised that no objections were filed to Hearing Examiner Murphy's Report and Recommendation.

Dr. Somani continued that a request to address the Board has been filed on behalf of Dr. Treister, but was not filed in a timely manner. The Assistant Attorney General has indicated that she has no objections to the Board's allowing the address. Dr. Somani asked for a motion to allow Dr. Treister to address the Board.

**DR. BHATI MOVED TO PERMIT DR. TREISTER TO ADDRESS THE BOARD.
MR. BROWNING SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

Dr. Treister's attorney, Kenneth A. Bravo, addressed the Board on Dr. Treister's behalf.

Mr. Bravo stated that Dr. Treister asked him to appear before the Board today because Dr. Treister is in Chicago. Dr. Treister urged the Board to approve the Report and Recommendation of Ms. Murphy. He referred to the record, and stated that Dr. Treister is a well-respected orthopaedic surgeon, practicing in Chicago. As the Board can see from his C.V. and the hearing transcript, Dr. Treister is well respected and active in both the medical community and the community at large.

Mr. Bravo stated that the facts that give rise to this case in Chicago, Illinois, result from the diversion of Tylenol 3 with codeine by two long-time employees, including one who is an R.N., who had been with the doctor for 25 years. When this was discovered, Dr. Treister accepted responsibility. The employees

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resigned suddenly when the D.E.A. came in to do an audit. The Illinois Department of Professional Regulation, which is essentially the equivalent of the Ohio Medical Board, reprimanded Dr. Treister and fined him \$7,500.00. Because it was a D.E.A. audit, there was also a settlement with the D.E.A. for \$15,000. Immediately upon finding out that there was a problem in his office, Dr. Treister made the necessary changes to assure that this would not occur again. After a hearing, Ms. Murphy has recommended that the Board take no further action. Mr. Bravo requested that the Board adopt Ms. Murphy's recommendation.

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

Ms. Albers stated that Ms. Murphy did an excellent job in setting out the evidence in this case. It is true that Dr. Treister did take responsibility for what happened, and, according to his testimony at the hearing, he did take steps to correct problems in his office as soon as he knew of them. He did, however, have an action in Illinois, and he was reprimanded in Illinois. Ms. Albers stated that, while she agrees with the Proposed Findings of Fact and Conclusions of Law, she doesn't know that she agrees with the Proposed Order that no further action be taken. She added that she will leave that to the Board's discretion.

DR. AGRESTA MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF MICHAEL R. TREISTER, M.D. DR. STEINBERGH SECONDED THE MOTION.

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

Dr. Agresta stated that he thinks that Dr. Treister has to take a little responsibility for what happened in his office. If the Board dismisses this case, he doesn't feel that Dr. Treister has taken responsibility as far as Ohio is concerned. Dr. Agresta stated that the Hearing Examiner did a great job of telling the Board what happened in this case, but he agreed with Ms. Albers that the Board should reprimand Dr. Treister.

DR. AGRESTA MOVED TO AMEND THE PROPOSED ORDER IN THE MATTER OF MICHAEL R. TREISTER, M.D., BY SUBSTITUTING THE FOLLOWING:

It is hereby ORDERED that:

It is hereby ORDERED that Michael R. Treister, M.D. be and is hereby REPRIMANDED.

This Order shall become effective immediately.

DR. BHATI SECONDED THE MOTION.

Dr. Steinbergh spoke in support of the motion to amend, noting that it's pretty straightforward. Dr. Treister didn't appropriately control the medications in his office. He didn't personally divert the drugs, but he was reprimanded for his actions in Illinois. Dr. Steinbergh stated that she believes that the Illinois regulators

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acted appropriately, and it's probably appropriate for Ohio to reprimand Dr. Treister as well.

Dr. Buchan noted that Dr. Treister has been fined over \$20,000. This was a significant offense, and he didn't take it lightly. Dr. Buchan agreed that a reprimand is wholly in order.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

DR. BUCHAN MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER, AS AMENDED, IN THE MATTER OF MICHAEL R. TREISTER, M.D. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

CHARLES C. VOORHIS, M.D.

Dr. Somani directed the Board's attention to the matter of Charles C. Voorhis, M.D. He advised that objections were filed to Hearing Examiner Murphy's Report and Recommendation and were previously distributed to Board members.

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

Attorney John P. Carney appeared on Dr. Voorhis' behalf.

Mr. Carney stated that Dr. Voorhis apologizes for not being here today, but demands on his Florida practice do not allow him to attend. He noted that Dr. Voorhis has been practicing cardiovascular surgery in Panama City since 1979 and has an impeccable record. Mr. Carney at this time read Dr. Voorhis' letter to the Board, as follows:

To Whom it May Concern:

I'm shocked and surprised that the Attorney Hearing Examiner entered a recommendation of reprimand to the State Medical Board of Ohio as punishment for an event which happened in Florida. The Florida Board of Medicine, after evaluating all sides of the issue, assigned a penalty of letter of concern with fine and costs. The Florida Board has the ability to assign reprimand, but chose not to do so. In fact, the Florida Board took the affirmative act of removing the sanction of reprimand from its final order and changing it to a letter of concern, which is not reportable to the National Practitioner Data Bank. Furthermore, the Florida Board never made a finding of a violation of the Medical Practices Act.

It is unusual for a sister state to levy vicariously a more harsh penalty based on a final order of the primary adjudicating state. It seems a peculiar convenience of law when one state may take the decision of a regulating board of another state where the event occurred and assign a greater punishment than the original state board felt necessary. This greater punishment is based, not on fact finding or retrial of the case, but only on the final order and the happenstance that the State of Ohio does not have a category of "letter of concern." It appears that I am being tried for an event which did not happen in Ohio; and without benefit of investigation or the minutes of the Florida Board, the State of Ohio wishes to assign a greater penalty.

I hope the State Medical Board of Ohio will agree with the Florida Board of Medicine and reduce the Ohio investigator's recommendation from reprimand to letter of concern, as was done in Florida, or dismiss this matter entirely.

Sincerely,

Charles C. Voorhis, III

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

Mr. Wilcox stated that he is in agreement with Ms. Murphy's Report and Recommendation in this matter.

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He concurs with her findings that the Board properly took action in this matter. Regarding the letter of concern, he disagrees with the doctor's assertion that the Ohio Board can't act under Ohio law because it was termed a "letter of concern." Mr. Wilcox stated that he believes the Board is allowed to act under Revised Code 4731.22(B)(22), and the reprimand in this case is a proper order.

DR. TALMAGE MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF CHARLES C. VOORHIS, M.D. DR. STEINBERGH SECONDED THE MOTION.

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

Dr. Agresta stated that this Board certainly has the responsibility and right to put out any order it feels appropriate. Dr. Agresta continued that, in reading through the Report and Recommendation, if operating on the wrong side of the chest is not a concern to Florida, it is certainly a concern to him. For Dr. Voorhis to get away with a reprimand is pretty lenient. Dr. Agresta stated that the Proposed Order is appropriate.

Dr. Talmage stated that he thinks Dr. Voorhis' statement of contrition is offensive. If you stick a scope in the wrong side of somebody's chest, it's because you think you know more than everybody else in the room and haven't looked at the x-ray. The medical errors process that has been initiated in this country has found thousands of wrong-sided surgeries, and something has to be done to stop it. If that means reprimanding physicians, that's part of the game. There are accidents that happen, but it isn't that hard to put up a chest x-ray and look at it. The right side of the chest looks different from the left side of the chest. Dr. Talmage stated that the tremendous ego in Dr. Voorhis' statement is really offensive to him. He added that Dr. Voorhis is fortunate to get off with a reprimand.

Dr. Bhati agreed with Dr. Talmage, stating that Dr. Voorhis is very lucky to get away with a reprimand.

Dr. Egner stated that she wants to revisit a few things. The Board is looking at this case, not as if it had occurred in Florida, but as if it had taken place in Ohio. The operating room staff did warn Dr. Voorhis, prior to the surgery, that he was going into the wrong side of the chest. Dr. Egner stated that she agrees with Dr. Talmage that it was Dr. Voorhis' ego that had him go ahead and operate on the wrong side. If someone is warned and doesn't heed the warning, that is cause for action. Dr. Egner noted that Dr. Voorhis' statement expresses surprise that he was reprimanded. She stated that she was surprised, too. She believes the Order should have been harsher. Dr. Egner advised that Dr. Voorhis is fortunate that the Proposed Order is only for a reprimand. She added that she gave a lot of thought as to what would be more appropriate and felt that there should be something more. She is not sure what would be appropriate in this case. Dr. Egner stated that she wants Dr. Voorhis to get the message that it is appropriate for the Board to look at this case. It was an actionable offense.

Mr. Browning stated that, in addition to what strikes one as arrogant behavior, this doctor was explicitly told that he was doing the wrong thing and he did it anyway. He did this to an 85-year-old patient. That patient wasn't in very good shape at some level or he wouldn't be in surgery to begin with. There was dangerous behavior on Dr. Voorhis' part, and he doesn't believe that a reprimand is a severe enough

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sanction. Mr. Browning commented that at the very least Dr. Voorhis should take a course in listening.

Dr. Steinbergh noted that Dr. Voorhis did not come to Ohio to defend himself. There is no question that he is arrogant. Dr. Voorhis prides himself on being extremely conscientious, yet this was an egregious act. Not only did he not look at the x-rays, but people in the operating room told him that he was in the wrong place. Dr. Steinbergh stated that she was also surprised that the Hearing Examiner only proposed a reprimand in this case. She added that she would be willing to look at a proposed amendment in this case.

Dr. Egner suggested tabling the matter to allow time to draft an amended Order.

Dr. Buchan commented that all of the Board members are irritated by Dr. Voorhis' behavior; however, Florida did review the record and their answer was a letter of concern. Dr. Buchan stated that a reprimand is appropriate in this case.

Dr. Talmage stated that Dr. Voorhis may be almost as good as he thinks he is, and this could have been a one-time incident. Dr. Talmage stated that Dr. Voorhis needs to be sent the message that he'd better not make this mistake again. Dr. Talmage stated that he felt that the Proposed Order is appropriate.

Dr. Steinbergh stated that she also wanted to point out that in Florida Dr. Voorhis went into a Consent Agreement, and the final order was a letter of concern, an administrative fine in the amount of \$5,000, and reimbursement of administrative costs incurred in the investigation preparation in the amount of \$1,489.97. The Board should not take that lightly, nor should Dr. Voorhis. It clearly was an agreement that went on in this case.

Dr. Steinbergh continued that because the proposed reprimand will be reportable, and that in itself is a significant action that should get the message through to Dr. Voorhis.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- nay
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

Dr. Garg commented that it's very difficult to find equivalency to orders from other states when the other

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states impose a financial penalty. This case involved a fine, a requirement to repay administrative costs, and a letter of censure. He added that such an order says a lot to him.

FINDINGS, ORDERS AND JOURNAL ENTRIES

ARCHIBALD L. GRIERSON, M.D.

On June 13, 2002, the Medical Board mailed a Notice of Summary Suspension and Opportunity for Hearing to Archibald L. Grierson, M.D., based on Dr. Grierson's alleged inability to practice according to acceptable and prevailing standards of care due to mental illness (Alzheimer's Disease). Dr. Grierson was personally served the Notice of Summary Suspension and Opportunity for Hearing by Investigator Brenda Harrison. A signed Acknowledgment of Receipt was returned to the Medical Board offices as evidence of service. A request for hearing has not been received, and more than 30 days have elapsed since Dr. Grierson was served the Notice of Immediate Suspension and Opportunity for Hearing. The matter was presented to the Board at this time for final disposition.

DR. STEINBERGH MOVED TO ENTER AN ORDER OF REVOCATION, EFFECTIVE IMMEDIATELY, IN THE MATTER OF ARCHIBALD L. GRIERSON, M.D. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

CITATIONS, PROPOSED DENIALS & ORDERS OF SUMMARY SUSPENSION

RODRIGO P. ARZADON, P.A. - 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. STEINBERGH MOVED TO SEND THE CITATION LETTER TO MR. ARZADON. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

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Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

BRIAN J. HUNTER, D.O. - 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. STEIBNERGH MOVED TO SEND THE CITATION LETTER TO DR. HUNTER. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

DAVID C. MINOR, 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. BHATI MOVED TO SEND THE CITATION LETTER TO DR. MINOR. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

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Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

ALEX Y. TSENG, D.O. - 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. AGRESTA MOVED TO SEND THE CITATION LETTER TO DR. TSENG.
DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

ASHFAQ TAJ AHMED, 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. AGRESTA MOVED TO SEND THE CITATION LETTER TO DR. AHMED. DR. BHATI

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SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

DAMODARAN ARUL SELVAM, 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. STEINBERGH MOVED TO SEND THE CITATION LETTER TO DR. ARUL SELVAM.
DR. BHATI SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

REZSO SPRUCH, 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.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

RATIFICATION OF CONSENT AGREEMENTS

ERNESTO V. ANGTUACO, M.D.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. ANGTUACO. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

RALEIGH S. CALLION, M.D.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. CALLION. DR. BHATI SECONDED THE MOTION. A vote was taken:

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Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

ALLAN B. LEVIN, M.D.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

LOUISE DELYTE MORRIS, P.A.-C

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye

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Mr. Browning	- aye
Ms. Sloan	- aye
Dr. Agresta	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye
Dr. Somani	- aye

The motion carried.

At this time Mr. Dilling asked that the Board table the proposed consent agreements in the matters of Mark D. Baldwin, D.O., Joseph Stanley Scheidler, D.O., and Christian T. Felter, M.D. until after the Reinstatement Requests were considered.

DR. BHATI MOVED TO TABLE THE PROPOSED CONSENT AGREEMENTS IN THE MATTERS OF MARK D. BALDWIN, D.O., JOSEPH STANLEY SCHEIDLER, D.O., AND CHRISTIAN T. FELTER, M.D. UNTIL AFTER THE REINSTATEMENT REQUESTS WERE CONSIDERED. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

DIANE LYNN BAUM, M.T.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye

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Dr. Agresta	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye
Dr. Somani	- aye

The motion carried.

VICTOR BYKOV, M.D.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. BYKOV. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

SUBRAMANIAM CHANDRASEKHAR, M.D.

Dr. Steinbergh asked whether Dr. Chandrasekhar works in Ohio or West Virginia.

Ms. Gilbert stated that she believes that Dr. Chandrasekhar currently works in West Virginia but plans to practice in Ohio.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. CHANDRASEKHAR. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye

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Dr. Agresta	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye
Dr. Somani	- aye

The motion carried.

STEVEN WARREN CRAWFORD, M.D.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

DARRELL ANDRE HALL, M.D.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. HALL. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

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The motion carried.

SANDRA KAY HAREWOOD, M.D.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. HAREWOOD. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

CAROL ELAINE LEWIS, M.D.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. LEWIS. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

RONALD L. MILLER, M.D.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH

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DR. MILLER. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

STEPHEN RANDALL PORTER, M.D.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. PORTER. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

MICHAEL JAMES STANEK, D.O.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. STANEK.

Dr. Steinbergh noted that the title on the consent agreement indicates that it is a Step I agreement, when, in fact, it is a Step II agreement.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

JAMES EDWARD STURMI, M.D.

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. STURMI. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

DAVID E. ALLEN, M.D.

DR. AGRESTA MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. ALLEN. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye

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Dr. Bhati	- aye
Dr. Buchan	- aye
Mr. Browning	- aye
Ms. Sloan	- aye
Dr. Agresta	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye
Dr. Somani	- aye

The motion carried.

Dr. Talmage expressed concern with the large number of consent agreements received in the space of two days. He asked whether there shouldn't be a cut-off date for receiving these.

Dr. Somani stated that Dr. Talmage's concerns are appropriate, and asked that the Secretary and Supervising Member consider this. He added that the sooner the Board can ratify the agreements, the sooner they can get physicians into the program.

Mr. Dilling stated that staff will prepare a presentation on the consent agreement process for the Board.

NORMAN A. FLORO, M.D.

DR. BUCHAN MOVED TO REMOVE THE MATTER OF NORMAN A. FLORO, M.D., FROM THE TABLE. DR. BHATI SECONDED THE MOTION. All members voted aye. The motion carried.

DR. BUCHAN MOVED THAT THE PROPOSED ORDER IN THE MATTER OF NORMAN A. FLORO, M.D., BE AMENDED BY SUBSTITUTING THE FOLLOWING:

It is hereby ORDERED that:

1. **REPRIMAND:** Norman A. Floro, M.D., is REPRIMANDED.
2. **FINE:** Dr. Floro shall pay a FINE of \$5,000.00 to the State Medical Board of Ohio.
3. **SUSPENSION OF CERTIFICATE/STAY:** The certificate of Dr. Floro to practice medicine and surgery in the State of Ohio shall be SUSPENDED for an indefinite term. Such suspension shall be STAYED, provided that, within thirty days of the effective date of this Order, Dr. Floro shall provide documentation acceptable to the Board of his satisfactory completion of 112 hours of Continuing Medical Education [CME] credits, at least 45 hours of which shall be in Category I, for the July 1, 1998, through October 1, 2000, CME acquisition period. It shall be

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the responsibility of Dr. Floro to work with appropriate Board staff to ascertain what will be considered as satisfactory documentation and to obtain same.

Failure by Dr. Floro to provide such documentation within the specified time period shall result in the automatic removal of the stay and imposition of the indefinite suspension of his certificate until such time as he complies with the following conditions:

- A. **CONDITIONS FOR REINSTATEMENT OR RESTORATION:** The Board shall not consider reinstatement or restoration of Dr. Floro's certificate to practice until all of the following minimum requirements are met:
- 1) Dr. Floro shall submit an application for reinstatement or restoration, accompanied by appropriate fees.
 - 2) Dr. Floro shall provide documentation acceptable to the Board indicating that he has paid the fine set forth in Paragraph 2, above.
 - 3) Dr. Floro shall provide documentation acceptable to the Board of his satisfactory completion of 112 hours of Continuing Medical Education [CME] credits, at least 45 hours of which shall be in Category I, for the July 1, 1998, through October 1, 2000, CME acquisition period. It shall be the responsibility of Dr. Floro to work with appropriate Board staff to ascertain what will be considered as satisfactory documentation and to obtain same.
 - 4) Dr. Floro shall supply documentation acceptable to the Board of satisfactory completion of 100 hours of approved CME, at least forty hours of which shall be in Category I, for each CME acquisition period, if any, during which his certificate remains suspended.
 - 5) In the event that Dr. Floro has not been engaged in the active practice of medicine for a period of more than two years prior to his application for reinstatement, Dr. Floro shall take and pass the SPEX examination or any similar written examination which the Board may deem appropriate to assess his clinical competency.
4. **DOCUMENTATION OF CME:** Dr. Floro shall supply documentation acceptable to the Board of satisfactory completion of the requisite number of CME credits for the current CME acquisition period, and for two additional CME acquisition periods thereafter. This documentation shall be due in the Board's offices within thirty days of the conclusion of each CME acquisition period, unless otherwise determined by the Board.

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5. **VIOLATION OF ORDER:** If Dr. Floro violates this Order in any respect, the Board, after giving him notice and the opportunity to be heard, may institute whatever disciplinary action it deems appropriate, up to and including the permanent revocation of his certificate.

EFFECTIVE DATE OF ORDER: This Order shall become effective immediately upon mailing of notification of approval by the Board.

DR. TALMAGE SECONDED THE MOTION.

Dr. Talmage stated that he believes the proposed amendment accomplishes what the Board needs to accomplish.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

PERSONAL APPEARANCES

NEIL E. SAUNDERS, D.P.M.

Dr. Saunders appeared before the Board pursuant to his request for release from the terms of his August 13, 1997 Consent Agreement.

Dr. Buchan asked Dr. Saunders what he's learned over the past five years.

Dr. Saunders stated that his life is much better now. It was terrible six years ago. He has been sober for six years and about three months. Through the initial treatment and A.A., his life is much better. He can't say that he's learned, but he has changed his life. His life is now a good life where before it was a terrible life.

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In response to further questions by Dr. Buchan, Dr. Saunders stated that he won't change anything after he's released from probation. He stated that he's always done more than the Board required. He's done what he felt he needed. In the first three years he probably attended seven to eight meetings per week. In the past two years he's probably gone to five to six meetings. He sponsors several gentleman, and he has a home group. None of that is going to change. On days he doesn't do a meeting, he'll have lunch with his sponsor or play racquetball with someone in his home group, so he has interaction every day with people in recovery. He doesn't see that changing.

In response to Mr. Albert's questions, Dr. Saunders stated that he went through two different treatment programs. He initially went through Tennyson Center, and then found out that that wasn't a Board-approved program. There were three inpatient days and about three weeks of half-days outpatient. At six months' sober, he went through Toledo Hospital for a month or two of every day for several hours. Then he did six months to a year of once-a-week outpatient treatment through Toledo.

Mr. Albert asked Dr. Saunders whether he's still getting anything out of the A.A. meetings. Dr. Saunders stated that he didn't think he would go if he didn't get anything out of it. He enjoys them. He attends at least five meetings per week.

DR. BHATI MOVED TO RELEASE DR. SAUNDERS FROM THE TERMS OF HIS AUGUST 13, 1997 CONSENT AGREEMENT. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

JOANNE POJE, M.D.

Dr. Poje made her initial appearance before the Board, pursuant to the terms of her May 8, 2002 Consent Agreement.

Mr. Browning asked Dr. Poje whether she has any questions for the Board.

Dr. Poje stated that her agreement requires her to undergo two evaluations. She asked whether she chooses those individuals or the Board assigns someone.

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Ms. Bickers indicated that Dr. Poje must submit names to the Board for approval. She added that she will talk to Dr. Poje after the appearance to answer her questions.

In response to Ms. Sloan's questions, Dr. Poje stated that, during her suspension period, she has been spending her free time with her children, which is something she hasn't had time to do. She's involved with school projects, such as soccer and band.

In response to Dr. Agresta's questions, Dr. Poje stated that she would like to return to a full-time practice in OB/GYN in a different practice. Part of the problem was that she was in a solo practice, and she never really wanted to do that. She would prefer to be in a group practice where she does have some time off.

Dr. Agresta suggested that Dr. Poje keep her consent agreement at her side and review it periodically.

In response to Dr. Garg's questions, Dr. Poje stated that she did have a psychiatrist in New York, and when she came to Ohio she wasn't comfortable with the first psychiatrist she went to. That was part of the problem. Since October she has had a psychiatrist. She also sees a therapist as well as a psychiatrist. She's working on personal problems, which she hadn't done prior to this. She is quite comfortable with her psychiatrist now.

Dr. Garg asked whether the problems for which Dr. Poje took Oxycontin are now behind her.

Dr. Poje stated that that was a single type of thing. She had been doing a delivery and hurt her back. She'd been given some Stadol, which wasn't helping. The treating physician was on vacation, and so she took Oxycontin. Dr. Poje commented that it was a very stupid thing.

Dr. Steinbergh reminded Dr. Poje that during her suspension period she needs to take good care of herself, review her consent agreement periodically so that she understands it, and focus on recovery and getting back into medicine. Dr. Steinbergh wished Dr. Poje well.

Mr. Albert stated that Dr. Poje needs to allow herself time to do what she's doing right now, and that's spending time with her family. He commented that Ohio moves at a slower pace than New York.

Dr. Poje stated that she thinks she became pretty burned out there. She and her partners were doing 300 deliveries apiece, and she had no time with her children. She didn't see them grow up.

Dr. Egner commented that that is too many deliveries.

Dr. Poje stated that it was crazy, but it was a depressed area and they were the only doctors doing deliveries. She worked on a military base in upstate New York.

Dr. Talmage noted that Dr. Poje answered, "no," on her application when questioned about being diagnosed or treated for mental disorders. He stated that he hopes that Dr. Poje sees that the Board's goal

is rehabilitation. Answering no was more than just dishonest; it was taking away the Board’s ability to potentially help her.

Dr. Poje stated that she thinks she misunderstood the question to some extent. She thought it meant “psychotic disorders.” She realizes that she should have answered, “yes,” with an explanation.

Dr. Talmage stated that the Board does want to rehabilitate, and that’s what the agreement is about.

Dr. Bhati stated that he would like to see Dr. Poje getting back into the swing of things soon.

DR. BHATI MOVED TO CONTINUE DR. POJE UNDER THE TERMS OF HER MAY 8, 2002 CONSENT AGREEMENT AND THE BOARD’S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

LEONARD K. SMITH, M.D.

Dr. Smith made his initial appearance before the Board, pursuant to the terms of the Board’s June 9, 1999 Order.

In response to Dr. Steinbergh’s questions, Dr. Smith stated that he understands the Board’s Order, and added that this has been a humbling experience. Before he went out of practice, he wrote a personal letter to all of his patients informing them of what was happening. He also wrote a letter to the editor of the local newspaper so that the public as a whole would be aware of the situation. Dr. Smith stated that he thought it best to be up-front and above-board with everyone. Dr. Smith stated that he has been humbled and gratified by the support he’s received in his community. He stated that he feels he’s used his time out of practice well, to grow physically, mentally and spiritually. Now that he is back in practice, he appreciates it more than ever. He has not taken any time off since he’s been back in practice.

Dr Bhati cautioned Dr. Smith against burnout.

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Dr. Smith stated that he understands that, but he had four months out of practice.

In response to Dr. Garg's questions, Dr. Smith stated that he is in a solo practice. He has tightened up on his prescription problems regarding anorectic drugs and post-dated prescriptions.

Dr. Smith stated that even before he went out, he sharply curtailed his prescribing anorectic drugs. Those patients he had were largely his own patients in practice, and they were complicated patients with bona fide medical problems. Even that was curtailed, and now he doesn't prescribe anorectics at all. As far as post-dated prescriptions, that went clear back to the early 1990s. Again, the circumstances of those are that it doesn't happen at all.

In response to Ms. Sloan's questions, Dr. Smith stated that the office in question that created the problem was closed within weeks after the agent from the State Medical Board visited, long before they had any knowledge of an investigation by the State Medical Board. That office has been closed since 1995. He has one office now.

In response to Mr. Browning's questions, Dr. Smith stated that during his time out he's put himself into the best shape of his life, physically. He now jogs 40 miles a week. He's been attending medical courses, preparing for board recertification. Spiritually, he has done a lot of reading other than medical, including religious books, including the Torah.

Dr. Bhati asked whether Dr. Smith has any questions for the Board.

Dr. Smith stated that he doesn't.

DR. BHATI MOVED TO CONTINUE DR. SMITH UNDER THE TERMS OF THE BOARD'S ORDER OF JUNE 9, 1999 AND ITS POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. AGRESTA SECONDED THE MOTION.

Dr. Egner noted that Dr. Smith spent some time appealing the Board's Order.

Dr. Smith stated that he did. He added that he went through the usual administrative process.

Dr. Egner stated that she's looking and she sees a Board Order from June 9, 1999, and this is the initial appearance. That sounds like a long time ago to her.

Dr. Smith stated that it's a fair question. Sometimes the wheels of justice progress slowly, having nothing to do with himself. You file an appeal and some judge takes his time to make a decision one way or another, and you have no control over that. It's just the way things turned out.

Dr. Egner stated that, obviously, the Board's Order stood up. She stated that from a personal standpoint

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she wonders whether it was worth the time and money he spent to do all of that. Now he's just coming out of his suspension time.

Dr. Smith stated that he sometimes questioned that himself, but there were reasons for why he did that. They seemed appropriate, and they still do seem appropriate. Dr. Smith stated that he's never done this before, and he doesn't know how long these things take normally. He didn't know that that's longer than normal until Dr. Egner raised the issue. He did what he felt was appropriate.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

MICHAEL J. STANEK, D.O.

Dr. Stanek made his initial appearance before the Board, pursuant to the terms of his May 8, 2002 Consent Agreement.

Dr. Buchan advised Dr. Stanek that the Board is engaged in helping him through the process. The Board believes he has the ability to succeed.

In response to Dr. Buchan's questions, Dr. Stanek stated that he's doing quite well. He feels pretty normal, has no anxiety or depression and his energy level is good. He feels rested and pretty normal. When he relapsed he wasn't too interested in going into the hospital to go to work, and now he's ready to go back. Dr. Stanek added that he doesn't want to go back to the same type of practice he had. He's had a lot of support and discussion with his colleagues, and it doesn't look like he's going to do that anymore. He had a very large clinical practice that had been shifting in focus. He ended up taking care of GI malignancies at the James, and that got to be pretty depressing. His brother died from colon cancer about the same time he started having abnormal scopes in June of last year. He was pretty scared at the time. Instead of working 70 to 80 hours a week, they've proposed that he take over the inpatient consultation service where he will see the hematology and oncology cases at Ohio State and the James Cancer Hospital. He will work three half-days a week in a benign hematology clinic and get out of solid tumor malignancy for a while.

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Dr. Stanek stated that he hasn't read any medicine since his suspension. He's just been doing recreational reading. He's also been fishing, helping his son-in-law move, and preparing for a daughter's wedding. Dr. Stanek stated that he didn't have any hobbies, interests or friends. He got most of his social interaction at work with his patients. Now he has friends with whom he will do things, he has hobbies, and his children know who he is now. Part of his relapse pattern behavior is his obsessiveness in his work. He recognizes that. It really helped get the attention of the people for whom he works when the consent agreement limited his work week to 40 hours. Dr. Stanek stated that he appreciated that.

Dr. Bhati commented that Dr. Stanek seems to be doing well.

Dr. Stanek stated that he's taking Zoloft, and he doesn't know whether it's the program or Zoloft or his sponsor or the A.A. program, but he really feels that he's doing well, too. His sister believes that he's been depressed for a while, and that may be so. He did not recognize it.

Dr. Talmage stated that he's glad to hear that Dr. Stanek is changing his career. He commented that that's a hard patient group to take care of.

Dr. Egner stated that Dr. Stanek seems like a very nice man, but she reminded him that he is an impaired physician who has relapsed multiple times. She stated that she wants Dr. Stanek to know that his license is at stake. The Board does want him to be successful in this, and she believes that he has made some very important steps to keep him from relapsing again; but if he does, there is a limit to the number of times the Board will give him another chance.

Dr. Stanek stated that in 1989 he was younger and had a high drug and alcohol tolerance, and he was really sick from the toxicity. This time it wasn't nearly as much. His motivation back then was that he had a lot of consequences and he was going to do everything he needed to do to fix it. This time it brought to his attention the fantasy of the thought that he could control the drinking. He thinks that instead of being in compliance this time, he's surrendered to his powerlessness to drugs and alcohol. His program has changed. In the past he used to go to speakers meetings, he would take articles with him to read, he didn't call his sponsor and he just didn't interact with anyone. This time around he's redone his steps and he's developing a sense of spirituality. It's working for him and he's trying to stay focused on that. His day starts out with a 7:00 a.m. meeting. Executives, physicians, attorneys, and businessmen attend that meeting. He's going to be able to incorporate that in his schedule. The spiritual aspect of it has been the difference, with his sense of surrendering instead of just being compliant.

Dr. Stanek stated that Charlie Bass, a specialist in relapse prevention at Parkside, has probably made more of an impact on Dr. Stanek than anybody he's ever met. Mr. Bass described a system of identifying relapse patterns of behavior that opened up a whole new concept of what Dr. Stanek needs to do to stay sober. It's the thinking and the behavior that changes before the relapse occurs. Dr. Stanek stated that he's gained a lot of benefit from Mr. Bass. Mr. Bass is one of only three people certified in the state to do this.

Dr. Steinbergh stated that she would reiterate Dr. Egner's comments. The Board is enormously supportive, and it wants Dr. Stanek to be successful in his recovery. The Board does know how difficult it is.

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Dr. Stanek has to want to make this happen for himself. She stated that she hopes that his system works, adding that it sounds like Dr. Stanek does have a good system in place. Dr. Steinbergh continued that the Board has a two-sided sword; it really wants Dr. Stanek to recovery, but the Board's experience is such that it has to warn Dr. Stanek that there are only so many relapses that can be tolerated of a practicing physician.

Dr. Garg stated that he appreciates Dr. Stanek's statements, and he does recognize that Dr. Stanek is in a very difficult specialty. He stated that Dr. Stanek thought he could control his drinking. He asked whether Dr. Stanek thought he could continue to practice while drinking. Has he addressed that in his mind?

Dr. Stanek stated that he can't blame one, two, three or more things for the reason he drank. Basically, the pain of his living was the greater than the pain of drinking, and those are two not-very-pleasant alternatives. The real focus he has is to keep himself in a way of living that is comfortable. He thinks that there was more going in his life than just the practice of medicine. He had six colonoscopies in a two-year period. He would get Demerol and Versed on a Wednesday, go home and not remember the afternoon and go back to work the next morning. He should have never done that. He should have done the procedure on a Friday, gotten hold of his sponsor and hit some meetings and stuff. Those are the things that keep you sober. He's not going to take that chance. If he's at Ohio State and his demands of duty are too great, he will leave there and do something else.

In response to Dr. Garg's questions, Dr. Stanek stated that he is in a department with 27 other physicians. He does have his D.E.A. He will be keeping a drug log for the Board.

Ms. Sloan noted that life is not always going to be comfortable for Dr. Stanek. She asked whether he has mechanisms to help him to handle uncomfortable situations.

Dr. Stanek stated that he has people he can talk to now about his problems. If he can't, he won't practice medicine or do what he's doing. He still has the sense that there is a contribution he can make. In many ways oncology is very rewarding. Watching these people take life so preciously and fight so hard to stay alive is a spiritual part of medicine. It wasn't so much the people dying that got to him as it was the volume of work he was doing. Also, he didn't take time out to grieve for his brother. He went straight back to work after his brother was buried.

DR. AGRESTA MOVED TO CONTINUE DR. STANEK UNDER THE TERMS OF HIS MAY 8, 2002 CONSENT AGREEMENT AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye

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Mr. Browning	- aye
Dr. Agresta	- aye
Ms. Sloan	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

PHILIP G. WAGMAN, M.D.

Dr. Wagman made his initial appearance before the Board, pursuant to the terms of the Board's Order of February 13, 2002.

In response to Mr. Browning's questions, Dr. Wagman stated that he is doing fine. He has a license in Pennsylvania and is with the Pennsylvania health program, which has the same stipulations as Ohio's Order, but also with some additional restrictions. He practices medicine there currently. He was trained in nuclear medicine, but apparently that's not going to work out. He practices the only area he can practice, and that's occupational medicine.

Mr. Browning asked whether Dr. Wagman likes occupational medicine.

Dr. Wagman remarked that it's a living. He stated that his problem was depression and attempted suicide because of occupational disruption. He's learned going through treatment and therapy. Dr. Wagman stated that he's grateful for the Board's intervention, because he did need some help. He needed to step away from medicine for a little while. He needed some counseling. He's learned to be able to approach medicine with the idea that he can practice, but he's practicing completely outside the insurance system, and outside community medical areas. He's doing auto accidents and Worker's Compensation work. In the meantime, he's able to be able to control any anxiety, frustration, and depression when he goes past hospitals in town. There's not one single nuclear medicine physician in the hospitals in his part of the state. He's applied at the hospitals and received letters back that the hospitals don't need him. He's managed to control all of that is now making the best of it. He's realized that nuclear medicine isn't going to work out for him, but it's not his fault; it's the system. He could slowly try to change the system step by step, but he had to learn not to get too frustrated. He has to do this brick by brick, one brick at a time. It will take a number of years to do this. In the meantime, he's doing medicine in an area that, even though he's outside of the system, he has to make the best of it. He went through a lot of different choices. He tried to get back into residency training, but since he's Board certified and did five years, he can't do a second residency. He tried to do an addiction medicine fellowship, and his application was declined, possibly because he was under Board suspension at the time. After that he thought that he couldn't do general practice because with managed care you can't get paid. It's a fight that's not worth fighting because you're going to lose it. Dr. Wagman then asked himself what he could do, and he arrived at occupational medicine.

In response to Dr. Agresta's questions, Dr. Wagman stated that he does understand the terms of the

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Board's Order. Dr. Agresta recommended that Dr. Wagman read it periodically, not just once, to remind him of his responsibilities under it.

Dr. Agresta asked whether Dr. Wagman attends A.A.

Dr. Wagman stated that he's not required to under this Board Order, but he's required by Pennsylvania to attend three times a week, and he does do that.

In response to Dr. Steinbergh's questions, Dr. Wagman stated that the number of times he's changed psychiatrists is a result of his moving. He stated that the first psychiatrist was Dr. Walton. He was with Dr. Walton for two years. Dr. Walton would not treat him any longer because Dr. Walton felt everything was resolved. He was forced to find another doctor, whom he's been seeing. He started seeing a psychologist in Newcastle two years ago. He then moved to Columbus to do paralegal work at Capitol University, and he saw a psychologist at Ohio State. Then he moved back to Newcastle and is back with the original psychologist. He believes his treatments are going well.

MR. ALBERT MOVED TO CONTINUE DR. WAGMAN UNDER THE TERMS OF THE BOARD'S ORDER OF FEBRUARY 13, 2002 AND ITS POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. BHATI SECONDED THE MOTION.

In response to Dr. Garg's questions, Dr. Wagman stated that he's doing occupational medicine, getting referrals from a chiropractor. A lot of patients will approach these doctors and need medication. He's set up a referral situation with the chiropractor. He only sees the patients the chiropractor sends him, although he does do a little general medicine because sometimes patients he's seeing will come in with small things. Most of his patients are victims of auto accidents or are Workers' Compensation cases.

Dr. Garg warned Dr. Wagman that there are physicians who have gotten into trouble with that kind of practice relationship.

Dr. Wagman stated that there is no financial integration in the practice. He is purely a consultant. Over the past six months he put together an integrated treatment plan with the chiropractor with whom he works. The plan lists what the chiropractor will do and what he will do. This practice is in Pennsylvania. He has no financial relationship with the chiropractor. Also, because there is a little bit of pain management involved, he called the Pennsylvania State Board of Medicine and got their guidelines for the use of controlled substances and pain management, and he follows everything they outline. He put together an entire treatment program that complies 150 percent with the people in Pennsylvania.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye

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Dr. Bhati	- aye
Dr. Buchan	- aye
Mr. Browning	- aye
Dr. Agresta	- aye
Ms. Sloan	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

SHELTON WILLIAMS, JR., M.T.

Mr. Williams made his initial appearance before the Board, pursuant to the terms of his May 8, 2002 Consent Agreement.

Dr. Steinbergh asked Mr. Williams whether he understands his consent agreement. Mr. Williams stated that he does.

Dr. Steinbergh stated that Mr. Williams has been noncompliant thus far with his agreement. He doesn't have a supervising physician, a monitoring massage therapist, he hasn't sent in any reports of A.A. logs. Dr. Steinbergh stated that he's not compliant and he's looking at being taken out of practice.

Mr. Williams stated that he realizes that he doesn't have any documentation.

Dr. Steinbergh asked why.

Mr. Williams stated that he just doesn't have them.

Dr. Steinbergh stated that Mr. Williams has said that he understands his consent agreement. She asked whether he is taking it seriously.

Mr. Williams stated that he is, and that he does know that the Board has the right to take away his right to practice.

Mr. Williams stated that he has found a supervising physician, but he doesn't have a C.V. with him right now. He will provide it to the Board within the week. He also has a monitoring massage therapist who has agreed to monitor him. He doesn't have her résumé with him.

Dr. Steinbergh asked whether Mr. Williams knew when these things were due.

Mr. Williams stated that he believes they were due in July.

Dr. Steinbergh stated that Mr. Williams is looking for trouble. This is not a good way to get started with

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the Medical Board. She asked whether Mr. Williams is going to A.A. meetings.

Mr. Williams stated that he is. He has misplaced his log.

Dr. Steinbergh asked whether she is to believe that Mr. Williams goes to meetings.

Mr. Williams responded that there is no reason for Dr. Steinbergh to believe that he goes.

Dr. Steinbergh advised that he needs to understand that. The Board doesn't have any reason to believe him because it has nothing before it. She added that the Board isn't kidding, he will be taken out of practice. She asked when Mr. Williams will get things into the office.

Mr. Williams stated that he will do it as soon as possible. He can get the C.V.s and résumés in by this time next week.

Dr. Steinbergh asked why he couldn't submit them tomorrow. She suggested that he FAX them to the Board tomorrow.

Mr. Williams stated that he can try to do that this week.

Dr. Steinbergh stated that if he's already talked to a supervising physician and a monitoring massage therapist, he ought to be able to fax all these things, including his A.A. log, to Ms. Bickers. She stated that she doesn't think Mr. Williams is going to his A.A. meetings. She advised Mr. Williams not to lie to the Board because there is no point to it. The Board is here for Mr. Williams, not for itself. If he's not going to comply, the Board will take him out of practice. She stated that he ought to be talking to Ms. Bickers by the next day and getting these things into the Board, and he'd better get started with A.A. The Board has to make a decision about whether or not to allow him to practice.

Mr. Albert suggested that Mr. Williams be required to appear before the Secretary and Supervising Member in September, not in three months.

Dr. Garg suggested that he be required to appear before the full Board again in September.

Mr. Albert agreed with Dr. Garg's suggestion.

Dr. Bhati stated that he liked Dr. Garg's suggestion better.

MR. ALBERT MOVED TO REQUIRE MR. WILLIAMS TO APPEAR BEFORE THE FULL BOARD AT ITS SEPTEMBER 2002 MEETING, AT WHICH TIME HE MUST BE IN FULL COMPLIANCE WITH THE TERMS OF HIS CONSENT AGREEMENT. DR. BHATI SECONDED THE MOTION.

Dr. Steinbergh asked whether Mr. Williams needs another meeting to go over his consent agreement. She

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asked whether he had a check-off list and checked off all the points he understands.

Mr. Williams stated that when he gave that to the Board, the Board believed that Mr. Williams understood his responsibilities.

Dr. Garg instructed Ms. Bickers to discuss the matter with Mr. Dilling if the Board doesn't receive the required documentation and perhaps go for a summary suspension of Mr. Williams' license.

Dr. Buchan asked Mr. Williams whether he is an alcoholic. Mr. Williams stated that he is.

Dr. Buchan stated that the Board understands that process. Part of what the Board does is work through that with him and with hundreds of others. It is doable, but part of that is his word. The Board will be good to its word, and he must be true to his word. If he can do that, he will have a good relationship with the Board and he'll be fine. If he's not true to his word, that's it. The Board won't waste its time.

Dr. Somani stated that the point the Board is trying to make is that it is very important that Mr. Williams comply with the terms of his consent agreement. He can't slip. If he does slip, the Board will understand that he's not recovering.

Dr. Steinbergh asked Mr. Williams whether he likes his job and wants to continue doing it. Mr. Williams stated that he does.

Dr. Agresta suggested that Mr. Williams take his consent agreement and put it someplace visible where he will see it and read it every day. Maybe that will help him realize what he has to do.

Dr. Somani stated that the Board's responsibility is to protect the public. When practitioners are impaired, the Board has no way to ensure that the public is protected.

Mr. Albert asked where Mr. Williams underwent treatment.

Mr. Williams stated that he was at two treatment centers: one in Maryland at the Comack Clinic, and the other was at Bethesda Hospital in Cincinnati.

Mr. Albert stated that if there is something in the consent agreement that he doesn't understand, Mr. Williams should call Ms. Bickers and she will explain it or make arrangements for him to come into the office to review his agreement.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye

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Dr. Buchan	- aye
Mr. Browning	- aye
Dr. Agresta	- aye
Ms. Sloan	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

PROBATIONARY REPORTS

Dr. Somani referred the Board to the Compliance Staff's reports of conferences with probationers on June 10 and June 11, 2002. He noted that all probationers are in compliance.

DR. BHATI MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES WITH EDWARD M. BIRDSONG, D.O.; GREGORY X. BOEHM, M.D.; JESSICA B. CAMPBELL, M.D.; LOREN S. CARLSON, D.O.; BOYD D. CURTIS, M.D.; NICHOLAS G. ESPINOZA, D.O.; CHRISTIAN T. FELTER, M.D.; WILLIAM H. FIEGENSCHUH, JR., M.D.; JOHN D. FREED, M.D.; GARY F. GLADIEUX, M.D.; BRIAN HEIM, M.D.; JAMES C. HELPHENSTINE, D.O.; RAYMOND E. HENSHAW, II, M.D.; W. ANDREW HIGHBERGER, M.D.; RICHARD M. HOFSTRA, M.D.; MITCHELL W. LEVENTHAL, M.D.; JAMES P. LEWIS, M.D.; MARK S. MCALLISTER, M.D.; KOLLI PRASAD, M.D.; STEPHEN J. ROLFE, M.D.; WILLIAM A. ROMER, M.D.; DON R. SHEGOG, M.D.; SARAVANA E. SIVASHANKER, M.D.; JORDAN B. STERNS, M.D.; JOSEPH A. TORE, M.D.; MARK E. TURNER, D.O.; SAMUEL Z. WESTERFIELD, M.D.; PAUL W. WILSON, D.O.; AND REGINALD O. WINDOM, M.D. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Somani	- aye

The motion carried.

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PROBATIONARY REQUESTS

J. ANTONIO ALDRETE, M.D.

Dr Aldrete's request for approval of ethics courses was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE THE ETHICS COURSE, *ETHICS ACROSS THE MEDICAL PROFESSIONS*, OFFERED BY DONNA F. HOMENKO, PHD, CUYAHOGA COMMUNITY COLLEGE, AS FULFILLMENT OF PARAGRAPH II.2. OF DR. ALDRETE'S NOVEMBER 8, 2001 CONSENT AGREEMENT. DR. STEINBERGH FURTHER MOVED TO APPROVE THE PRESCRIBING COURSE, *CLINICAL, LEGAL & ETHICAL ISSUES IN PRESCRIBING ABUSABLE DRUGS*, OFFERED BY THE UNIVERSITY OF SOUTH FLORIDA, COLLEGE OF MEDICINE, AS REQUIRED BY PARAGRAPH II.2. DR. STEINBERGH FURTHER MOVED TO ASK STAFF TO OBTAIN A 2002 COPY OF THE UNIVERSITY OF SOUTH FLORIDA COURSE BROCHURE. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

GREGORY X. BOEHM, M.D.

Dr. Boehm's request for approval of a monitoring physician was presented to the Board for consideration at this time.

DR. EGNER MOVED TO APPROVE GREGORY B. COLLINS, M.D., TO SERVE AS DR. BOEHM'S MONITORING PHYSICIAN. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye

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Dr. Bhati	- aye
Dr. Buchan	- aye
Mr. Browning	- aye
Dr. Agresta	- aye
Ms. Sloan	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

MARK A. CAMPANO, M.D.

Dr. Campano's requests for approval of a monitoring physician, a supervising physician and a treating psychiatrist were presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE: CHARLES V. BARRETT, D.O., TO SERVE AS DR. CAMPANO'S MONITORING PHYSICIAN; MICHAEL M. McCOMBS, D.O., TO SERVE AS DR. CAMPANO'S SUPERVISING PHYSICIAN; AND VINODBALA S. SHAH, M.D., TO SERVE AS DR. CAMPANO'S TREATING PSYCHIATRIST. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

KEVIN R. CLARK, M.D.

Dr. Clark's request for approval of practice plans was presented to the Board for consideration at this time.

Dr. Steinbergh noted that Dr. Clark was asking for approval of two practice plans. She stated that she would approve one or the other, but not both. She did not feel that he should be working at both places at the same time.

Dr. Somani suggested approving both plans and requiring Dr. Clark to choose one.

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DR. STEINBERGH MOVED TO APPROVE DR. CLARK'S PLAN TO WORK FULL TIME IN THE VETERANS ADDICTION RECOVERY CENTER AT THE BRECKSVILLE VETERANS ADMINISTRATION, UNDER THE SUPERVISION OF THEODORE V. PARRAN, JR., M.D., AS WELL AS HIS PLAN TO WORK FOUR HALF-DAY SESSIONS WITH THE POTENTIAL FOR HIM TO BECOME THE UNIT DIRECTOR IN THE CHEMICAL DEPENDENCY PROGRAM AT KAISER PERMANENTE, UNDER THE SUPERVISION OF SIGMUND NORR, M.D. DR. STEINBERGH FURTHER MOVED THAT DR. CLARK BE PERMITTED TO WORK ONLY ONE OF THE APPROVED PLANS. MR. ALBERT SECONDED THE MOTION.

Dr. Somani stated that if Dr. Clark is appointed unit director at Kaiser Permanente's chemical dependency program, he should report back to the Board for approval of that plan.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

RICHARD M. DONNINI, D.O.

Dr. Donnini's request for a reduction in his appearance schedule was presented to the Board for consideration at this time.

DR. BUCHAN MOVED TO GRANT DR. DONNINI'S REQUEST TO REDUCE HIS APPEARANCE SCHEDULE TO EVERY SIX MONTHS. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye

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Dr. Agresta - aye
Ms. Sloan - aye
Dr. Garg - aye
Dr. Steinbergh - aye

The motion carried.

ROBERT L. GABRIELE, M.D.

Dr. Gabriele's request for a reduction in his drug screen requirement was presented to the Board for consideration at this time.

DR. BHATI MOVED TO REDUCE DR. GABRIELE'S DRUG SCREEN REQUIREMENT FROM BIWEEKLY TO TWICE PER MONTH. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote: Mr. Albert - aye
Dr. Egner - aye
Dr. Talmage - aye
Dr. Bhati - aye
Dr. Buchan - aye
Mr. Browning - aye
Dr. Agresta - aye
Ms. Sloan - aye
Dr. Garg - aye
Dr. Steinbergh - aye

The motion carried.

MARK T. HALLE, M.D.

Dr. Halle's request for approval of a monitoring physician was presented to the Board for consideration at this time.

DR. BUCHAN MOVED TO APPROVE JOHN M. DAVIS, M.D., TO SERVE AS DR. HALLE'S MONITORING PHYSICIAN. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote: Mr. Albert - aye
Dr. Egner - aye
Dr. Talmage - aye
Dr. Bhati - aye
Dr. Buchan - aye
Mr. Browning - aye

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Dr. Agresta	- aye
Ms. Sloan	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

W. ANDREW HIGHBERGER, M.D.

Dr. Highberger's request for approval of a monitoring physician was presented to the Board for consideration at this time.

Dr. Steinbergh noted that Dr. Highberger's nominee, Mary S. Applegate, M.D., is also his primary care physician, and suggested that the Board require Dr. Highberger to nominate an anesthesiologist as his monitoring physician. She noted that the file indicates that there is a potential for Dr. Barbara Rogers, an anesthesiologist who practices at Dr. Highberger's hospital, to serve as monitoring physician.

Dr. Steinbergh continued that Dr. Applegate also posed some questions concerning what Dr. Highberger is allowed to do under the terms of the consent agreement. Dr. Steinbergh referred the Board to Dr. Applegate's letter of July 29, 2002, and noted that Dr. Applegate has inquired into what Dr. Highberger is allowed to do in regards to anesthesia.

Dr. Talmage stated that Dr. Applegate is asking whether, if he co-manages a procedure, can he use opiates. He would be in the presence of another caregiver.

Dr. Garg stated that it makes sense.

Dr. Steinbergh stated that the Board isn't allowing Dr. Highberger to practice anesthesiology, except for obstetrical anesthesia; i.e., epidurals or pain management, except using opiates. She commented that this was one of those consent agreements that was somewhat tricky. The agreement states that Dr. Highberger shall not engage in the performance of operative anesthesia without prior approval. He can't change that for a year. Later in the agreement it states, "(n)othing in this paragraph is intended to limit his practice of pain management or performance of obstetrical anesthesia, not involving the handling of operative opioids."

Dr. Steinbergh continued that Dr. Highberger should not be allowed to supervise a C.R.N.A. or co-manage with another anesthesiologist. He's clearly not allowed to perform anesthesiology in that setting.

DR. STEINBERGH MOVED TO ASK DR. HIGHBERGER TO NOMINATE AN ANESTHESIOLOGIST AS HIS MONITORING PHYSICIAN, WHO WILL BE APPROVED BY THE SECRETARY AND SUPERVISING MEMBER AND WHO WILL BE REQUIRED TO REVIEW 10 CHARTS PER WEEK. SHE FURTHER MOVED TO ADVISE DR. HIGHBERGER THAT HE IS NOT PERMITTED TO SUPERVISE A C.R.N.A., NOR IS HE PERMITTED TO CO-

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MANAGE THE ADMINISTRATION OF ANESTHESIA WITH ANOTHER ANESTHESIOLOGIST. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

BAK CHUL KIM, M.D.

Dr. Kim's request for approval of a monitoring physician was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE RUSSELL J. TAYLOR, M.D., TO SERVE AS DR. KIM'S MONITORING PHYSICIAN. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

JEFFREY D. NEIDHART, M.D.

Dr. Neidhart's request for approval of a monitoring physician was presented to the Board for consideration at this time.

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DR. STEINBERGH MOVED TO APPROVE R. GRAHAM SMITH, M.D., TO SERVE AS DR. NEIDHART'S MONITORING PHYSICIAN. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PAUL E. PANCOAST, M.D.

Dr. Pancoast's requests for reductions in his appearance schedule and drug screen requirement and elimination of his alcohol and drug rehabilitation meeting log requirement were presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE DR. PANCOAST'S REQUEST TO REDUCE HIS APPEARANCE SCHEDULE TO ONCE EVERY SIX MONTHS. DR. STEINBERGH FURTHER MOVED TO DENY DR. PANCOAST'S REQUESTS TO REDUCE HIS DRUG SCREEN REQUIREMENT AND TO ELIMINATE HIS ALCOHOL AND DRUG REHABILITATION MEETING LOG REQUIREMENT. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

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JOANNE POJE, M.D.

Dr. Poje's request for approval of a treating psychiatrist and a mental health professional was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE AMITA R. PATEL, M.D., AS DR. POJE'S TREATING PSYCHIATRIST. DR. STEINBERGH FURTHER MOVED TO APPROVE RAYMOND G. MESSER, M.S.W., AS THE MENTAL HEALTH PROFESSIONAL REQUIRED BY PARAGRAPH 2 OF THE MAY 8, 2002 CONSENT AGREEMENT. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

ANTHONY G. POLITO, D.P.M.

Dr. Polito's request for a reduction in his appearance schedule was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO GRANT DR. POLITO'S REQUEST FOR A REDUCTION IN HIS APPEARANCE SCHEDULE TO EVERY SIX MONTHS. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

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The motion carried.

MARY H. RABB, D.O.

Dr. Rabb's requests for approval of a monitoring physician and elimination of the chart review requirement were presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE JILL M. BARRY, M.D., TO SERVE AS DR. RABB'S MONITORING PHYSICIAN, SUBJECT TO RECEIPT OF EDUCATIONAL INFORMATION ABOUT DR. BARRY. DR. STEINBERGH FURTHER MOVED TO GRANT DR. RABB'S REQUEST TO ELIMINATE THE CHART REVIEW REQUIREMENT OF HER OCTOBER 13, 1999 CONSENT AGREEMENT, AS LONG AS HER MONITORING PHYSICIAN CONTINUES TO SUBMIT QUARTERLY REPORTS. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried..

SILVANA SABATO, L.M.T.

Ms. Sabato's requests for a reduction in her psychiatric treatment requirement and elimination of her drug screen requirement were presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE MS. SABATO'S REQUEST FOR A REDUCTION IN HER PSYCHIATRIC TREATMENT REQUIREMENT TO ONCE EVERY THREE MONTHS. DR. STEINBERGH FURTHER MOVED TO DENY MS. SABATO'S REQUEST TO ELIMINATE HER DRUG SCREEN REQUIREMENT. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye

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Dr. Bhati	- aye
Dr. Buchan	- aye
Mr. Browning	- aye
Dr. Agresta	- aye
Ms. Sloan	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

FRANK R. SHARP, M.D.

Dr. Sharp's request for a reduction in his psychiatric treatment requirement was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO GRANT DR. SHARP'S REQUEST FOR A REDUCTION IN HIS PSYCHIATRIC TREATMENT REQUIREMENT TO ONCE EVERY TWO MONTHS.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

SARAVANA E. SIVASHANKER, M.D.

Dr. Sivashanker's request for elimination of the monitoring physician and chart review requirement of the Board's July 12, 2000 Order was presented to the Board for consideration at this time.

DR. BUCHAN MOVED TO DENY DR. SIVASHANKER'S REQUEST FOR ELIMINATION OF THE MONITORING PHYSICIAN AND CHART REVIEW REQUIREMENT. DR. TALMAGE SECONDED THE MOTION.

Dr. Steinbergh advised that this was a minimal standards case. Chart review is the only way the Board has to monitor this physician.

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Dr. Bhati agreed.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

ROBERT D. SMARSCH, D.O.

Dr. Smarsch's requests for a reduction in his appearance schedule and a reduction in his drug screen requirement were presented to the Board for consideration at this time.

DR. BHATI MOVED TO APPROVE DR. SMARSCH'S REQUEST FOR A REDUCTION IN HIS APPEARANCE SCHEDULE TO EVERY SIX MONTHS, AND A REDUCTION IN HIS DRUG SCREEN REQUIREMENT TO TWICE PER MONTH. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

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KELLI D. WAHL, M.T.

Ms. Wahl's requests for approval of a treating psychiatrist and a mental health counselor were presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE RONALD LITVAK, M.D., TO SERVE AS MS. WAHL'S TREATING PSYCHIATRIST, AND ANNE E. CROSKEY, L.I.S.W., AS MS. WAHL'S MENTAL HEALTH COUNSELOR. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

LESLIE R. WOLF, M.D.

Dr. Wolf's request for approval of a monitoring physician was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE STEPHEN J. POMERANZ, M.D., TO SERVE AS DR. WOLF'S MONITORING PHYSICIAN WHILE DR. WOLF IS NOT ACTIVELY TREATING PATIENTS. DR. BHATI SECONDED THE MOTION.

Dr. Steinbergh noted that Dr. Wolf is not currently treating patients.

Ms. Bickers stated that Dr. Wolf has her license, but is not treating patients. Should Dr. Wolf return to the active practice of medicine, she can nominate a monitor that would be appropriate to do charts.

Dr. Garg asked what Dr. Wolf's practice is and what Dr. Pomeranz would be monitoring.

Ms. Bickers stated that Dr. Pomeranz would report on how Dr. Wolf appears when coming to work, whether she appears to be dedicated to her recovery, and her interaction with staff and others.

Mr. Albert stated that Dr. Wolf has a depression problem. When she first came to the Board, her husband

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had just passed away. She's doing very well.

Dr. Steinbergh noted that Dr. Pomeranz holds a license in 26 states.

Dr. Garg stated that Dr. Pomeranz is an internationally known MRI specialist. That's all he does. He gives opinions all over the country. Dr. Garg stated that his only concern would be with what he would be monitoring since he was such a busy man himself.

Dr. Somani asked why Dr. Wolf is requesting Dr. Pomeranz as a monitoring physician.

Ms. Bickers stated that Dr. Pomeranz is currently Dr. Wolf's boss.

Mr. Albert stated that Dr. Wolf is editing and writing for a health magazine. He added that she is doing very well now.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

REINSTATEMENT REQUESTS

MARK BALDWIN, D.O.

Dr. Baldwin's request for approval of a psychiatrist assessor was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE PATRICE TORRES-AREHART, M.D., TO SERVE AS THE PSYCHIATRIST ASSESSOR, AS REQUIRED BY PARAGRAPH 11.b.i.v., OF DR. BALDWIN'S APRIL 10, 2002 CONSENT AGREEMENT. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
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Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Bhati	- aye
Dr. Buchan	- aye
Mr. Browning	- aye
Dr. Agresta	- aye
Ms. Sloan	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

FRED A. BRINDLE, M.D.

Dr. Brindle's request for approval of a psychiatrist assessor was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE PHILLIP L. BORDERS, M.D., AS AN ASSESSOR FOR PURPOSES OF PERFORMING A PSYCHIATRIC ASSESSMENT, AS REQUIRED BY PARAGRAPH 8.b.iii OF DR. BRINDLE'S AUGUST 8, 2002 CONSENT AGREEMENT. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

JOHN CHEEK, M.D., D.D.S.

Dr. Cheek's request for approval of an assessor was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE FREDERICK N. KARAFFA, M.D., AS AN ASSESSOR, PURSUANT TO PARAGRAPH 9.b.iv. OF DR. CHEEK'S MARCH 14, 2002 CONSENT AGREEMENT. DR. EGNER SECONDED THE MOTION. A vote was taken:

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Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

CHRISTIAN T. FELTER, M.D.

Dr. Felter's requests for approval of an assessor and a psychiatrist assessor were presented to the Board for consideration at this time.

DR. BHATI MOVED TO APPROVE FREDERICK N. KARAFFA, M.D., AS AN ASSESSOR, AND PATRICE TORRES AREHART, M.D., AS A PSYCHIATRIST ASSESSOR, PURSUANT TO PARAGRAPH 9.b.iv. OF DR. FELTER'S FEBRUARY 13, 2002 CONSENT AGREEMENT. DR. BHATI FURTHER MOVED TO REQUIRE DR. FELTER TO APPEAR BEFORE THE FULL BOARD AT ITS SEPTEMBER 11, 2002 MEETING. DR. BUCHAN SECONDED THE MOTION.

A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

WILLIAM H. FIEGENSCHUH, JR., M.D.

Dr. Fiegenschuh's request for approval of a psychiatric assessor was presented to the Board for consideration at this time.

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DR. STEINBERGH MOVED TO APPROVE MASSOOD R. BABAI, M.D., TO PERFORM THE PSYCHIATRIC ASSESSMENT REQUIRED BY PARAGRAPH 3.c. OF THE BOARD'S ORDER OF AUGUST 9, 2000. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

THOMAS A. RANIERI, M.D.

Dr. Ranieri's request for approval of an assessor was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE FREDERICK N. KARAFFA, M.D., AS AN ASSESSOR, PURSUANT TO PARAGRAPH 9.b.iv. OF DR. RANIERI'S MAY 8, 2002 CONSENT AGREEMENT. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

JOSEPH S. SCHEIDLER, D.O.

Dr. Scheidler's request for approval of an assessor was presented to the Board for consideration at this time.

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DR. STEINBERGH MOVED TO APPROVE FREDERICK N. KARAFFA, M.D., AS AN ASSESSOR, PURSUANT TO PARAGRAPH 9.b.iv. OF DR. SCHEIDLER'S FEBRUARY 13, 2002 CONSENT AGREEMENT. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

RATIFICATION OF CONSENT AGREEMENTS

DR. BUCHAN MOVED TO REMOVE THE TOPIC, RATIFICATION OF CONSENT AGREEMENTS, FROM THE TABLE. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Dr. Agresta	- aye
	Ms. Sloan	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

MARK D. BALDWIN, D.O.

Mr. Dilling advised that this agreement and the next two had to be held until the physicians' requests for approval of assessors were granted by the Board, bringing the physicians to the point where they are ready for reinstatement of their licenses.

Mr. Dilling suggested that, in the future, to avoid this type of situation occurring, the Board could delegate

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the responsibility of approving monitoring physicians, assessors, etc., to the Secretary and Supervising Member when the nominee has previously been approved by the Board. He stated that staff will prepare a proposal for Board member consideration.

Dr. Bhati stated that he thought that would be a good idea.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

JOSEPH STANLEY SCHEIDLER, D.O.

DR. BHATI MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. SCHEIDLER. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

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CHRISTIAN T. FELTER, M.D.

DR. BHATI MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. FELTER. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

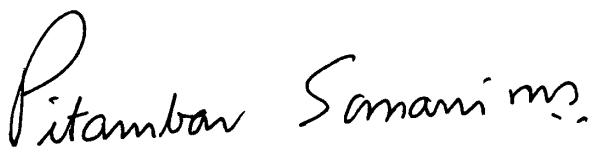
Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

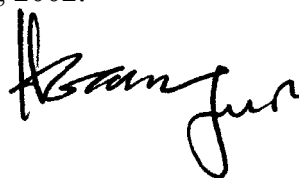
DR. BHATI MOVED TO ADJOURN. MR. ALBERT SECONDED THE MOTION. All members voted aye. The motion carried.

Thereupon at 5:40 p.m. the August 14, 2002 session 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 August 14, 2002, as approved on September 11, 2002.



Pitambar Somani, M.D., President



Anand G. Garg, M.D., Secretary

(SEAL)



August 15, 2002

MINUTES

THE STATE MEDICAL BOARD OF OHIO

August 15, 2002

Pitambar Somani, M.D., President, called the meeting to order at 1:30 p.m., at the Vern Riffe Center for Government and the Arts, 77 S. High St., Columbus, Ohio 43215-6127, Room #1932, with the following members present: Raymond J. Albert, Supervising Member; Carol L. Egner, M.D.; Lance A. Talmage, Sr., M.D.; Anant R. Bhati, M.D.; David S. Buchan, D.P.M.; Anquetette Sloan; and Anita M. Steinbergh, D.O. The following members were absent: R. Gregory Browning, Ph.D., Vice-President; Anand G. Garg, M.D., Secretary; Patricia J. Davidson, M.D.; and Ronald C. Agresta, M.D.

Also present were: Thomas A. Dilling, Executive Director; William J. Schmidt, Assistant Executive Director; Terrill D. McLaughlin, Assistant Director, Investigations; Lauren Lubow, Communications Administrator; Diann K. Thompson, Assistant Director, Public Services & Enforcement; David P. Katko, Enforcement Coordinator; Rebecca J. Albers, Assistant Attorneys General; Eileen M. Schmidt, Executive Assistant to the Director; Joan K. Wehrle, Coordinator for Assessment and Development; Rochelle A. Sigam, Quality Intervention Assistant; Danielle Bickers, Compliance Officer; Mark Wayda, Chief of Executive Staff; Barbara Rogers, Public Services Administrator.

EXECUTIVE SESSION

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

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

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

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LICENSURE

ERIC TODD EVENSON, M.D.

Dr. Evenson's request for endorsement of his National Board diplomate status was presented to the Board for consideration at this time. Dr. Evenson has not been engaged in the active practice of medicine since September 1989. He is currently employed with Uniformed Services University of Health Sciences, as Director of Occupational and Environmental Medicine Residency Program.

DR. STEINBERGH MOVED TO APPROVE DR. EVENSON'S REQUEST FOR ENDORSEMENT LICENSURE, SUBJECT TO HIS PASSING THE SPEX OR A BOARD RECERTIFICATION EXAMINATION. The motion died for lack of a second.

Dr. Talmage noted that Dr. Evenson is the director of a residency program and has been for the past two years. He stated that Dr. Evenson's manual skills are not in question. Being a director of a residency program has to be a good demonstration of Dr. Evenson's ability to practice environmental medicine. He must be prepared to ask questions and to critique residents.

DR. BHATI MOVED TO APPROVE DR. EVENSON'S REQUEST FOR ENDORSEMENT LICENSURE, SUBJECT TO RECEIPT AND APPROPRIATENESS OF NECESSARY DOCUMENTATION. DR. TALMAGE SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

COMBINED POST-GRADUATE TRAINING PROGRAMS

Mr. Dilling advised that the F.C.V.S. recently notified state medical boards that they had just become aware that the ACGME does not accredit post-graduate training programs that combine two specialties into one. At this time, there are over 200 programs in existence in the United States, and eight programs in Ohio, that offer a combined post-graduate program. Neither ACGME nor the Residency Review committees accredit combined programs; they accredit each specialty program separately. Combined specialty programs have, however, been approved by each specialty board, and resident physicians completing these programs are eligible for board certification in both specialties.

Mr. Dilling continued that the issue is that the statutes require training by ACGME-accredited programs,

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and the combined programs are not ACGME accredited. He stated that the Board could recognize the equivalency of these programs. Mr. Dilling added that another issue that arises concerns the training certificates. Such a situation was never considered at the time the training certificates were instituted.

Mr. Dilling referred to his memorandum of August 14, 2002 and a proposed motion he has prepared for the Board.

DR. TALMAGE MOVED TO DEEM THOSE APPLICANTS WHO HAVE COMPLETED THE REQUIRED NUMBER OF POST-GRADUATE TRAINING YEARS AT A COMBINED PROGRAM WHOSE SEPARATE PROGRAMS ARE ACGME APPROVED AS MEETING THE EQUIVALENCY TRAINING REQUIREMENTS OF SECTION 4731.091 OF THE REVISED CODE, AND TO RECOGNIZE SUCH PROGRAMS AS EQUIVALENT TO “FELLOWSHIPS,” AS THAT TERM IS USED IN SECTION 4731.291 OF THE REVISED CODE. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

Mr. Dilling advised that he has recently received a call from a physician who has gone through four years of residency and a year's fellowship at a renowned institution in Ohio. He has been doing this under a training certificate. The physician passed Step I of the USMLE in 1992 and Step II in 1993, but he failed Step III in 1996. This physician claims that he was never notified in 1996 of his failure. He is Board certified.

Dr. Somani stated that the issue is that this physician didn't complete all three steps within seven years, as required.

Mr. Dilling stated that the physician asks that the Board amend its rule through an emergency rule to include some grandfathering provision. Mr. Dilling advised that the Board has the authority to do that, but it would be opening up the door for those who have failed many times and have been denied in the past.

Dr. Somani stated that he sees no reason to change the rule at this time.

Dr. Talmage commented that it is totally ludicrous that a physician would fail an examination and not know it.

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Mr. Albert stated that the physician has the burden to inquire into his status.

Dr. Buchan agreed, stating that this physician's only option is to begin the sequence again.

GROUP HEALTH ASSOCIATES; PAIN EVALUATION AND MANAGEMENT CENTER; AND
WOODCROFT FAMILY PRACTICE - P.A. UTILIZATION PLANS

The above-captioned P.A. Utilization Plans were presented to the Board for consideration at this time, due to issues raised by Dr. Egner on the July 2002 poll vote. Dr. Egner indicated that her concerns were that the groups, who were asking to amend their original plans, were still operating under the previous request form, which has been revised.

Mr. Dilling stated that staff called the groups and asked them to file the new form for approval. Pain Evaluation and Management Center and Woodcroft Family Practice have submitted new applications, but Group Health Associates has not. Mr. Dilling suggested that, if the Board approves the two groups under the new plan, it could also approve Group Health Associates, subject to its submission of an updated plan.

Dr. Egner stated that it doesn't make sense to her to be asking for surgical assisting when half of these people are family practitioners, pediatricians and internal medicine practitioners.

Mr. Dilling stated that the statutes only allow them to practice within their scope, and it is a group application.

Dr. Somani commented that family practitioners might do minor surgery in their offices.

Dr. Steinbergh stated that some family practitioners, if they're old enough, might have done surgery in the past, and they might still be credentialed to do surgery. The doctor would have to be credentialed to do the surgery or to be an assistant with the P.A. assisting him.

Dr. Somani asked whether more clarification is needed.

Dr. Egner referred to Group Health Associates' application, noting that it indicated that they had a number of P.A.s that would not be assisting in surgery, and one that would be assisting in the gastroenterology department.

DR. STEINBERGH MOVED TO APPROVE PAIN EVALUATION AND MANAGEMENT CENTER AND WOODCROFT FAMILY PRACTICE'S P.A. UTILIZATION PLANS, SUBJECT TO RECEIPT AND APPROPRIATENESS OF NECESSARY DOCUMENTATION, AND TO APPROVE GROUP HEALTH ASSOCIATES' P.A. UTILIZATION PLAN, SUBJECT TO ITS FILING AN APPROPRIATE APPLICATION. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:

Mr. Albert

- aye

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Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Bhati	- aye
Dr. Buchan	- aye
Ms. Sloan	- aye
Dr. Steinbergh	- aye

The motion carried.

JUNE 2002 COSMETIC THERAPY EXAMINATION RESULTS

At this time the Board reviewed the results of the June 2002 cosmetic therapy examination.

DR. STEINBERGH MOVED TO APPROVE THE RESULTS OF THE JUNE 2002 COSMETIC THERAPY EXAMINATION, AND TO CERTIFY AS PASSING AND LICENSE THOSE RECEIVING A SCORE OF 75 OR GREATER ON THE EXAMINATION, SUBJECT TO RECEIPT AND APPROPRIATENESS OF NECESSARY DOCUMENTATION, AND TO CERTIFY AS FAILING AND DENY LICENSURE TO THOSE WHO RECEIVED A SCORE OF LESS THAN 75 ON THE EXAMINATION. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

IMPAIRMENT RULES

Mr. Albert advised that a hearing was held on July 19 on the proposed amendments to the impairment rules. The transcript for that hearing was received in the past few days. Mr. Albert stated that this matter will be on the Board's September agenda for final adoption.

FY 04/05 BUDGET

Mr. Dilling referred the Board to copies of budget materials distributed by Mr. Wayda the previous day. A copy of these materials shall be maintained in the exhibits section of this journal.

Mr. Dilling advised that the Medical Board's budget does not use any tax dollars, but operates on the

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revenues it generates through licensure and renewal fees. The Board's current revenues will meet the expenditures for FY 2004, but not 2005. The Board will need to dip into its reserves for that year. The Board does have enough money to remain fiscally responsible.

Mr. Dilling advised that increases in the budget are a result of, among other things: the Board's handling some fiscal responsibilities previously handled by the Treasurer's office; employee salary increases; and the addition of two new enforcement coordinators to begin to make inroads into quality of care cases.

Dr. Somani stated that the staff has done a tremendous job in outlining the Board's needs in the proposed budget. He added that additional staff are needed to take care of high priority cases.

At this time Mr. Dilling reviewed the Budget request with the Board.

FEDERATION OF STATE MEDICAL BOARDS BYLAWS

Mr. Dilling advised that the Federation has requested proposals for changes to its bylaws. He asked Board members to contact Ms. Wehrle with any suggestions they might have.

Ms. Wehrle advised that the deadline for filing proposals is September 1, 2002.

FEDERATION OF STATE MEDICAL BOARDS BOARD OF DIRECTORS MEETING

Mr. Dilling stated that he attended the Board of Directors meeting in July. The thrust of the meeting was the clinical skills assessment examination. He added that he believes that the present Board of Directors work well together, and noted that they have set long-term goals.

ADMINISTRATIVE REPORT

At this time Mr. Dilling presented a "15-Year Pin" to Board Investigator Robert L. Howard, celebrating his fifteen years of state service. He noted that Mr. Howard is an investigator in the Columbus area. He added that he also has a pin to award to Chuck Woodbeck, Enforcement Coordinator.

Mr. Schmidt stated that Mr. Woodbeck had to go to the courthouse in service to the State.

Mr. Dilling stated that Mr. Woodbeck is the staff member who churns out a lot, if not all, of the state criminal actions cites that the Board sees. When he met with the other board administrators, a number of them told him that they knew Mr. Woodbeck. Mr. Woodbeck has a communication network across the country. The others were impressed with Mr. Woodbeck's tenacity in not letting go of a problem physician.

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

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Mr. Dilling advised that Emily M. Brown has left the Board's employ as an Enforcement Coordinator to take a position with the Nursing Board. Her new position is an exempt position and pays significantly more than the Medical Board could pay her in the position she held here. Mr. Dilling commented that this is the third staff person the Board has lost to the Nursing Board. He added that, to a certain extent, it's flattering, but it does hurt the Board to lose skilled people.

QIP REPORT

Mr. Dilling noted that Dr. Garg is not present to report to the Board. He advised that Mr. Browning attended the QIP meeting in July.

Dr. Steinbergh reported on her attendance at the June 2002 QIP meeting. She felt that the cases seen were appropriately handled. She stated that, after attending, she feels that QIP is a good preventative measure for some of those practitioners who are beginning to show problems.

Dr. Somani asked whether she found the QIP to be different from the hospital peer review system.

Dr. Steinbergh stated that she felt it was much different. She felt the QIP meeting was more intense.

Dr. Somani asked whether QIP should be promoted as a model for hospitals.

Dr. Steinbergh stated that the difference in this is that there is more authority in QIP. She indicated that she doesn't believe doctors take hospital peer review as seriously.

REPORTS OF ASSIGNED COMMITTEES

EXECUTIVE COMMITTEE

Dr. Somani stated that the Committee discussed the Board's proposed budget. It also approved two out-of-state travel requests: one for Mr. Dilling to attend the AIM meeting in New York City in October, and the second for Mr. Albert to attend an impairment workshop in Las Vegas.

Dr. Bhati advised that the Committee also approved a staff person to accompany Mr. Albert to the impairment workshop.

Dr. Somani stated that the Board also reviewed a draft annual report for 2001. Copies of the report were distributed to Board members and a copy shall be maintained in the exhibits section of this journal.

Dr. Somani advised that there was also quite a bit of discussion on the proposed USMLE clinical skills assessment requirement. There was discussion as to whether the Ohio Board should send a supporting letter to the Federation about this issue.

Mr. Dilling stated that the staff can try to answer some of the questions raised by the Committee before

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drafting a letter for the Board's approval.

Dr. Somani stated that the major concerns were whether there is enough data to make the test cost effective. Also, this should primarily be the responsibility of the medical colleges and the AAMC.

Dr. Talmage stated that, having participated in debate at the A.M.A. level, those are the same concerns that were brought up. There are counterarguments.

Dr. Steinbergh asked for the A.M.A.'s feelings about this.

Dr. Talmage stated that the medical schools are doing their best to comply and train students well. However, the medical/legal climate is such that people get through medical school who probably should not graduate. This would be a backdoor out for them. Dr. Talmage stated there is regret that the evaluation costs \$1,000, but they clearly see these people who are not clinically competent. They have the theoretical knowledge, but they simply do not relate to patients. Unless the schools can take the lead and fail those people, which they have not had the propensity to do, there needs to be an exam.

Dr. Steinbergh stated that she believes everyone agrees that there should be an assessment of clinical skills, but there's disagreement at what level the assessment should be done. She noted that Dr. Agresta has advised that it will be built into the first postgraduate year and build the cost into their overall education budget.

Dr. Egner suggested that that would be kind of late. If the purpose of this is to help medical schools, putting it into the first postgraduate year is a little late.

Dr. Steinbergh stated that the Committee felt it should be administered between the third and fourth year of medical school.

Dr. Somani stated that the Committee also discussed the upcoming retreat. He advised that it was originally scheduled for the September meeting, but he asked whether Board members would object to moving the retreat to November. Board members did not object.

Dr. Somani stated that the September meeting will probably be a two-day meeting and will be held on September 11 and 12. There will be a special program at the State House in remembrance of the September 11 terrorist attacks. Because of that, the Executive Committee will begin at 10:00 a.m. instead of 9:00 a.m., and the other groups will begin meeting at 11:00 a.m. rather than 10:30 a.m.

LIMITED BRANCH & ALTERNATIVE MEDICINE COMMITTEE

Dr. Buchan advised that the Committee reviewed applications for certificates of good standing for three schools, and recommends approval of those schools.

DR. BUCHAN MOVED TO APPROVE THE FOLLOWING FOR CERTIFICATES OF GOOD

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STANDING: NORTH CENTRAL STATE COLLEGE IN MANSFIELD, OHIO; COLORADO INSTITUTE OF MASSAGE THERAPY IN COLORADO SPRINGS, COLORADO; AND REGIONAL COLLEGE OF MASSAGE THERAPY, INC., IN FT. WAYNE, INDIANA. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.”

P.A. COMMITTEE

Dr. Talmage stated that the Committee reviewed a number of supplemental requests, and its recommendations are consistent with those of the P.A. Policy Committee with the exception of one.

Buckeye Urology & Andrology

The above-captioned requested approval of the following functions:

1. detumescense of priapism
2. ultrasound guided needle biopsy of prostate

DR. BHATI MOVED TO PROPOSE TO DENY APPROVAL OF BOTH FUNCTIONS ON THE BASIS THAT THEY ARE SURGICAL PROCEDURES REQUIRING PHYSICIAN EXPERTISE. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

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Children's Hospital Medical Center Hematology/Oncology

The above-captioned requested approval of the following functions:

1. performance of lumbar puncture
2. performance of bone marrow aspirations from the posterior iliac crest
3. performance of bone marrow biopsy from the posterior iliac crest

Dr. Talmage advised that the P.A.P.C. recommended approval of the performance of lumbar puncture, while the P.A. Committee recommended denial. The Board approved it once in 1990. Dr. Talmage stated that his impression was that the previous Board approval was for performance on adults only.

Ms. Albers advised that the rule doesn't differentiate between children and adults.

Dr. Somani stated that this was probably approved not realizing that in the future someone would want a P.A. to perform the procedure on children.

Dr. Talmage asked whether Ms. Albers was advising the Board that it cannot deny approval.

Ms. Albers stated that the Board will be challenged because the rule states that the Board may approve lumbar punctures.

Dr. Steinbergh referred to the numbers of occasions that the Board did previously deny approval of this function.

Mr. Dilling asked Ms. Thompson to clarify rule (A).

Ms. Thompson stated that the introductory paragraph says, "(f)unctions that may be approved pursuant to supplement include, but are not limited to the following:." All of the functions listed in paragraph (A) are functions that, through the rulemaking process, the Board determined to be appropriate for P.A.s if the P.A. is being supervised by an appropriate physician and if the education and training is appropriate

Dr. Talmage stated that his dictionary says that "may" is optional.

Ms. Thompson stated that the Board would have to look at the credentials submitted. Is the doctor credentialed to do this? Is it part of his routine practice? What does the hospital do with it? The rule only says that lumbar punctures are appropriate. It doesn't say adult lumbar punctures are appropriate but child lumbar punctures are not. The distinction wasn't made at the rules hearing or in the Board's discussions prior to the hearing. She noted that the Board denied this in a previous case and was overturned by the Courts. She added that that was before there were rules in place saying that the Board may approve this function. In denying this the Board would have to be very explicit as to why it doesn't think this is appropriate.

Ms. Albers stated that, if the Board denies this, the applicant will come in and bring statistics in and everything else.

Mr. Dilling stated that the Board could potentially approve the application after they've done that.

Dr. Talmage stated that Children's Hospital has applied for this before and was denied, and others were denied.

Dr. Somani stated that there is a significant difference in doing lumbar puncture in children than there is in adults. The size is different, children are a lot more fragile. It was probably not looked into because the Board never anticipated getting an application for P.A.s to do the procedure on children.

Dr. Talmage stated that he was there through the rules hearing, and the purpose of the list was a "may" list. It wasn't that applicants would get approval. You have to apply and the Board has to decide that it is safe. That's what "may" means to him.

Mr. Dilling stated that his recollection was that the Board made some hard-fought decisions to say that the "A" list procedures are the ones that the Board will move through the system. The "B" list includes functions that the applicant will need to make a better case for approval.

Dr. Bhati stated that this application was discussed extensively in the Committee meeting and reasons were given for denial. If it gets challenged, it gets challenged. The Committee does feel there should be a distinction between performing this procedure on a child and an adult.

DR. TALMAGE MOVED TO PROPOSE TO DENY THE PROCEDURE, PERFORMANCE OF LUMBAR PUNCTURE, ON THE BASIS THAT THE PROCEDURE IS MORE DANGEROUS AND HAS AN INCREASED RISK OF COMPLICATIONS IN PEDIATRIC CASES, NECESSITATING IT BE DONE BY A PHYSICIAN WHO HAS THE EXPERTISE TO HANDLE THOSE COMPLICATIONS. DR. EGNER SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

Dr. Talmage continued that the Committee recommends approval of the second and third procedures.

DR. TALMAGE MOVED TO APPROVE FUNCTIONS 2 AND 3 OF THE REQUEST.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- abstain
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

Tristate Urogynecology

The above-captioned requested approval of the following functions:

1. installation of intravesical chemotherapeutic agents as directed by supervising physician

DR. TALMAGE MOVED TO APPROVE THE REQUESTED PROCEDURE. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- abstain
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

Knox Cardiology

The above-captioned requested approval of the following functions:

1. performance of endotracheal intubation

Dr. Talmage advised that the Committee recommended denial of this function, based on the fact that there are so few of these procedures performed, and they occur during the process of a code or a stress test. Also, the application indicates that the physician would be in the vicinity, not directly supervising the procedure.

Dr. Buchan stated that the Committee was also looking for more training for the P.A. It felt that the

P.A. would need training in administering anesthesia.

Dr. Talmage stated that the argument against denial is that EMTs are trained to do this procedure; but the circumstances in which an EMT does an intubation are when the patient is in the field and physicians aren't present. Here a physician is present and should be able to do it. Dr. Talmage stated that he believes that the P.A. would be more qualified to do the chest compressions while the physician does the intubation.

Dr. Bhati stated that this is an extremely difficult procedure. The patient is at times fighting to prevent the tube being placed. If someone does it once a month, that's not enough to become proficient.

Dr. Talmage stated that the other problem the Board will have is that it approved this procedure twice in hospital settings. It approved a third request with on-site supervision and only five observed procedures.

Dr. Steinbergh stated that if it's just an occasional occurrence and the physician has to watch a P.A. do 25 procedures, it will take forever.

Dr. Buchan stated that they talk about no physician being physically on location, yet they say they're doing it under on-site supervision. There seems to be a contradiction in the application itself.

Dr. Talmage referred to the application and noted that it says that the P.A. would perform the function "in the rare event a cardio-pulmonary arrest should occur with no doctor physically on location."

Dr. Steinbergh stated that they're looking to save a life, and if they have someone there with ACLS training, at least an attempt to intubate is better than nothing.

Dr. Somani asked why this is even brought to the Board. This is an accepted procedure in emergency management for anybody in a code situation. Those who are ACLS trained are allowed to do everything possible according to protocol.

Dr. Bhati stated that this application is about those who are doing stress tests and collapse. He believes that those are the most difficult patients to intubate.

Dr. Somani stated that they are tough, but if the P.A. is allowed to do stress tests without the physician being present, it is their responsibility to have emergency protocols in place.

Mr. Dilling stated that the applicant is allowed to ask for approval of this procedure for its P.A.s.

Dr. Talmage stated that the application indicates that there is 100 percent on-site supervision.

Dr. Bhati stated that if it says 100 percent physician supervision, they're talking about two different things.

Dr. Somani stated that the application indicates that there are rare occasions when the physician will be on location but unavailable. In every single procedure there should be an ACLS approved emergency

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protocol. Every place has that. Physicians offices should have that. If a patient codes in the office and the physician isn't there, someone with ACLS training should be able to do it.

Dr. Steinbergh agreed. She stated that the real question in her mind is the assessment of the need to do the procedure. Not every emergency truly goes to intubation. The decision to attempt to intubate is critical to her. As to the actual process of intubation, if you truly have an emergency and you're trying to save a person's life, you have to give it a try. As difficult as it may be in certain circumstances, you do have to try. She questioned why the Board wouldn't allow an ACLS-trained physician to intubate on an emergency situation.

Dr. Somani again stated that it shouldn't even come here because it's part of the emergency protocol.

DR. STEINBERGH MOVED TO APPROVE THE PROCEDURE. The motion died for lack of a second.

Dr. Buchan asked whether Dr. Somani is suggesting that anyone could put in this tube.

Dr. Somani stated that they could if they are ACLS trained. That is part of ACLS training.

Dr. Buchan stated that he understands that, but he doesn't think that that's a very high standard. Four hours of didactic training and four hours of laboratory, including but not limited to a "supervised animal lab," doesn't hold a very high standard for him. Dr. Buchan stated that he has taken ACLS training, but he doesn't hold that as a very high standard.

Dr. Steinbergh stated that this is a physician assistant. The Board allows lumbar punctures and other things. She believes that P.A.s can do intubations in emergency situations under the circumstances of this training.

Dr. Buchan stated that he doesn't have a problem with P.A.s doing this. He was looking to have the P.A. spend some time in the anesthesia department for some more experience than simply the ACLS training.

Dr. Steinbergh stated that this is at a cardiology group, the P.A. will be observed performing 25 procedures to determine competency, and he's also ACLS trained. She doesn't see how the Board can deny this.

Dr. Somani asked whether the 25 observed procedures would be done in an anesthesia setting.

Dr. Buchan stated that this is an inconsistent application. He can't imagine that there would be 25 emergencies necessitating this in five years.

Dr. Somani stated that they may be trained in the hospital setting with the anesthesiologists.

Dr. Buchan stated that he would like to see that in their application if that is what they are going to do.

DR. SOMANI MOVED TO APPROVE THE PROCEDURE IN AN EMERGENCY UNDER THE PROTOCOLS FOR EMERGENCY RESPONSE. DR. SOMANI FURTHER MOVED TO REQUEST AN EXPLANATION OF HOW THE 25 OBSERVED PROCEDURES WOULD BE DONE. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

REPORTS AND RECOMMENDATIONS

JAMES M. KENNEN, D.O.

DR. BUCHAN MOVED TO REOPEN THE MATTER OF JAMES M. KENNEN, D.O. DR. STEINBERGH SECONDED THE MOTION. All members voted aye. The motion carried.

Ms. Lubow advised that she has found technical errors in two places on the Report and Recommendation. These involved references to the impairment statute in the Introduction and in the Conclusions. The reference should have been to Section 4731.22(B)(26) only.

DR. STEINBERGH MOVED TO AMEND THE THIRD PARAGRAPH OF PARAGRAPH I.A. OF THE INTRODUCTION AND PARAGRAPH 2 OF THE CONCLUSIONS OF LAW TO ELIMINATE THE FOLLOWING WORDS: "SECTION 4731.22(B)(25), OHIO REVISED CODE, TO WIT." DR. STEINBERGH FURTHER MOVED TO APPROVE AND CONFIRM MR. ROBERTS' PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER, AS AMENDED, IN THE MATTER OF JAMES M. KENNEN, D.O. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

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The motion carried.

REPORTS OF ASSIGNED COMMITTEES

EDUCATION, PUBLIC RELATIONS & RISK MANAGEMENT

Dr. Egner advised that the newsletter is at the State Mail Center and will go out soon.

Dr. Egner reviewed some consumer-oriented revisions to the Board's website. These include additions of links on the front page to other pertinent sections of the Board's website.

Dr. Somani stated that he looked through this and thought it was very good. It should be very helpful to the public.

ANESTHESIOLOGIST ASSISTANT COMMITTEE

Dr. Egner stated that the Committee will be sending proposed rules to the Board in the next month so that they can be discussed at the September Board meeting. She encouraged the Board to read the rules as thoroughly as possible before the meeting so that the Board can move on to a rules hearing.

LEGISLATIVE LIAISON AND RULES REVIEW COMMITTEE

Mr. Wayda stated that the Committee report has been distributed. He referred specifically to the final report of the Health Care Workforce Shortage Task Force. Mr. Wayda stated that the Task Force adopted language that the Committee finds to be pretty much in line with what the Board's thinking had been on scope of practice issues.

Mr. Wayda stated that the second item for the Board's special attention is an issue raised by Mr. Browning regarding State Issue One, the drug treatment initiative. That Issue was filed on Monday, August 12, with 770,000 signatures, twice the number needed to get the issue on the statewide ballot. It is a constitutional amendment proposal to require judges to give first and second time offenders for drug possession and drug use treatment only, in lieu of conviction or incarceration. Mr. Browning's concerns were with expungement language in the amendment. That language seems to say in very stark terms that there are only two very limited exemptions that would grant access to information about these previous drug treatments: either so that you know that it's not a first or second offense so that law enforcement can testify that this is a third incident; or for someone applying for a position as a police officer. The constitutional amendment would say that there are no other reasons for which this information can be discovered.

Mr. Wayda stated that that is a concern for the Board. It's a very detailed constitutional amendment, which Mr. Schmidt will look at very closely. There is a question in the proposed amendment as to whether the language that preempts criminal penalties also preempts administrative penalties, and what impact that might have on the Board's ability to order impaired physicians to go for treatment. Those are the issues the

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Committee will look at and report on later. There has been some discussion as to what the Board's options would be, if that is the case, and there really aren't many. There is a lot of opposition to this issue, including Governor Taft, Attorney General Montgomery, law enforcement and other citizen groups. Most of the support, especially the big financial support, is from a couple of out-of-state foundations.

Mr. Albert asked how this would address criminal acts committed in the course of the addiction.

Mr. Wayda stated that it's all related to the specific offense for which they are before the Court. If it's a drug use with a violent crime or threat of violent crime, they're not eligible for this program. If there had been a conviction or imprisonment for a violent offense within five years of this particular drug offense, they're not eligible for this diversion program.

Mr. Albert asked whether a person who is driving under the influence and who has an accident and kills someone would be eligible.

Mr. Wayda stated that there is a disqualifier for people operating a vehicle under the influence.

Mr. Albert asked whether this includes alcohol.

Mr. Wayda stated that the proposal addresses controlled substances.

Mr. Dilling stated that that is a question that staff will look into.

LICENSURE COMMITTEE

Dr. Somani stated that the staff has identified issues that will be brought to the Board at a future meeting.

CONSENT AGREEMENT COMMITTEE

Dr. Steinbergh stated that the Committee is working to determine appropriate chart review requirements for monitoring physicians. It will bring something to the Board in the future.

QUALITY ASSURANCE COMMITTEE

Ms. Sloan stated that the Committee reviewed the Closed Complaint Report and felt that the cases were appropriately closed.

MIDWEST REGIONAL BOARDS

Ms. Wehrle advised that the next meeting will be held on November 9, 2002.

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EXECUTIVE SESSION

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

REPORTS OF ASSIGNED COMMITTEES

P.A. COMMITTEE

DR. BUCHAN MOVED TO RECONSIDER THE SUPPLEMENTAL P.A. UTILIZATION REQUESTS FROM CARDIOTHORACIC SURGEONS, INC. (OHIO STATE UNIVERSITY), OHIO CARDIOTHORACIC AND VASCULAR SURGEONS, INC., AND MEDCENTRAL MANSFIELD. MR. ALBERT SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

DR. TALMAGE MOVED TO APPROVE THE SUPPLEMENTAL REQUESTS OF CARDIOTHORACIC SURGEONS, INC. (OHIO STATE UNIVERSITY), OHIO CARDIOTHORACIC AND VASCULAR SURGEONS, INC., AND MEDCENTRAL MANSFIELD RELATING TO THE INSERTION OF ARTERIAL LINES. DR. TALMAGE FURTHER MOVED THAT THE BOARD COMMIT TO RESEARCH ON THE SAFETY OF THIS PROCEDURE FOR FUTURE REPORT TO THE BOARD. DR. EGNER SECONDED THE MOTION. A vote was taken:

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Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Ms. Sloan	- aye
	Dr. Steinbergh	- aye

The motion carried.

DR. STEINBERGH MOVED TO A DJOURN. MR. ALBERT SECONDED THE MOTION. All members voted aye. The motion carried.

Thereupon at 10:40 a.m. on August 15, 2002, the August 14-15, 2002 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 August 14-15, 2002, as approved on September 11, 2002.

Pitambar Somani M.D.
Pitambar Somani, M.D., President

Anand G. Garg
Anand G. Garg, M.D., Secretary

(SEAL)

