

August 13, 2003

MINUTES

THE STATE MEDICAL BOARD OF OHIO

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R. Gregory Browning, Ph.D., President, called the meeting to order at 1:05 p.m., at the Vern Riffe Center for Government and the Arts, 77 S. High St., Columbus, Ohio 43215, Room #1932, with the following members present: Lance A. Talmage, M.D., Vice-President and Secretary; Raymond J. Albert, Supervising Member; Carol L. Egner, M.D.; Anant R. Bhati, M.D.; Deepak Kumar, M.D.; Anquetette Sloan; Patricia J. Davidson, M.D.; Andrew F. Robbins, Jr., M.D., Anand G. Garg, M.D., and Anita M. Steinbergh, D.O. The following did not attend the meeting: David S. Buchan, D.P.M.

Also present were: Thomas A. Dilling, Executive Director; William J. Schmidt, Assistant Executive Director; Diann K. Thompson, Assistant Executive Director; Terrill D. McLaughlin, Assistant Director, Investigations; Mark Wayda, Chief of Executive Staff; Lauren Lubow, Senior Executive Staff Attorney; Shannon K. Freed, Executive Staff Attorney; Lori S. Gilbert, Chief Enforcement Coordinator; Marcie P. Burrow, David P. Katko, Rebecca J. Marshall, Karen H. Mortland, Kathleen S. Peterson, and Charles A. Woodbeck, Enforcement Coordinators; Rebecca J. Albers, 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; Danielle Bickers, Compliance Officer; Barbara Jacobs, Public Services Administrator; Jacqueline A. Moore and Annette Jones, Disciplinary Information Assistants; R. Gregory Porter, Chief Hearing Examiner; Sharon W. Murphy and Daniel J. Roberts, Hearing Examiners.

MINUTES REVIEW

MR. ALBERT MOVED TO APPROVE THE MINUTES OF JULY 9, 2003. DR. KUMAR SECONDED THE MOTION. A vote was taken

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

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REPORTS AND RECOMMENDATIONS

Mr. Browning announced that the Board would now consider the findings and orders appearing on the Board's agenda. He 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: Michael Howard Bridges, M.D.; Subramaniyam Chandrasekhar, M.D.; Samuel R. Goss, D.P.M.; Brian J. Hunter, D.O.; and Donald R. Kiser, D.O. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Mr. Browning	- aye

Mr. Browning 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. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Mr. Browning	- aye

Mr. Browning 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.

Mr. Browning 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.

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

MICHAEL HOWARD BRIDGES, M.D.

Mr. Browning directed the Board's attention to the matter of Michael Howard Bridges, M.D. He advised that no objections were filed to Hearing Examiner Murphy's Report and Recommendation.

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

Mr. Dilling advised that it is his understanding that Dr. Bridges' counsel has made a motion to appear before the Board; however, they are not yet present. Mr. Dilling asked that the Board table this matter until their arrival.

Mr. Browning tabled this matter at this time.

SUBRAMANIYAM CHANDRASEKHAR, M.D.

Mr. Browning directed the Board's attention to the matter of Subramaniyam Chandrasekhar, M.D. He advised that objections were filed to Hearing Examiner Murphy's Report and Recommendation and were previously distributed to Board members.

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

Dr. Chandrasekhar was accompanied by his attorney, David K. Orensten.

Dr. Chandrasekhar thanked the Board for the opportunity to address it. He advised that he is an alcoholic, and as a result, it's appropriate that this Board monitor him to ensure the safety of his patients. He recognizes the fact that he's an alcoholic, and he realizes how important it is for him to attend A.A. and Caduceus meetings, to have a monitoring and a supervising physician, and to continue to work to maintain his sobriety. Dr. Chandrasekhar stated that he is committed to his recovery, and he accepts the probationary terms imposed by the Board. He will fulfill the obligations imposed upon him by his Consent Agreement.

Dr. Chandrasekhar stated that the only thing he requests of this Board is to reduce the length of his suspension from one year to 90 days. He stated that he requests this so that he may be allowed to support his family. This experience has given him insight in what is truly important in his life. Right now he just wants to focus on taking care of his family, maintaining his sobriety and improving his health.

Dr. Chandrasekhar thanked the Board for listening to him and for considering his request to reduce the length of his suspension.

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Mr. Browning asked whether the Assistant Attorney General wished to respond.

Mr. Michael reminded the Board that it has before it a Report and Recommendation and not a Consent Agreement. He added that the Report and Recommendation adequately addresses the facts of this case. Mr. Michael reminded the Board that Dr. Chandrasekhar's relapse occurred immediately following his appearance for an office conference, pursuant to his August 14, 2002 Consent Agreement with the Board. On his way home, Dr. Chandrasekhar stopped and had several drinks and was picked up for DUI, which led to the case before the Board today.

Mr. Michael stated that, in his objections, Dr. Chandrasekhar requested clarification as to whether the Proposed Order was directing him to obtain a new 28-day inpatient treatment or if the Board was satisfied with the treatment he'd already had prior to the relapse. Mr. Michael stated that he believes that the Report and Recommendation is clear and that a new 28-day inpatient treatment period would be necessary prior to Dr. Chandrasekhar seeking reinstatement.

Mr. Michael stated that the State is in support of the Report and Recommendation, as written, and asked that the Board clarify the treatment requirement for Dr. Chandrasekhar's purposes.

DR. BHATI MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF SUBRAMANIAM CHANDRASEKHAR, M.D. DR. STEINBERGH SECONDED THE MOTION.

Mr. Browning stated that he would now entertain discussion in the above matter.

Dr. Kumar noted that Dr. Chandrasekhar's license has been suspended since the relapse, and he asked how long the license has been suspended.

Mr. Browning advised that, according to the Report and Recommendation, Dr. Chandrasekhar's Ohio license was summarily suspended on April 2, 2003.

Dr. Steinbergh spoke in support of the Report and Recommendation. This was a severe impairment with relapses. She stated that she thinks that the Board Order is appropriate.

Dr. Egner also agreed with the Report and Recommendation. She explained that Dr. Chandrasekhar needs a second 28-day treatment program because, obviously, the first time didn't work. There was such a short time period between his consent agreement and his relapse. Although he says he went to a friend's house, drank and then realized what a serious mistake he had made, the fact that he got behind the wheel of a car shows that he didn't realize his serious mistake. He wouldn't have driven himself had he had that realization. This shows that Dr. Chandrasekhar's impaired judgment affects much of his life. Unfortunately, that's why he needs the whole year suspension. The Board really needs to see a longer period of time where he can remain alcohol and drug free and work on his impairment.

Dr. Egner stated that she does understand Dr. Chandrasekhar's financial difficulties, and this is always a problem. However, as Mr. Albert has pointed out many times at Board meetings, there are many treatment

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providers who take finances into consideration. This should not hinder him from getting the treatment that he needs. Also, the Board is not saying that he can't provide for his family. There are other jobs Dr. Chandrasekhar can do, and he's going to have to do them. Medicine is not a job that he can do right now.

Dr. Kumar stated that he agrees with the Report and Recommendation, but asked the Board to consider whether, since Dr. Chandrasekhar has already served a few months of suspension, his one-year term should be amended to make the suspension period retroactive to April 2, 2003. He added that he would support the retroactive suspension.

Dr. Bhati stated that the issue here is not the family, but Dr. Chandrasekhar himself. The Board isn't talking about a first-time situation. This is a second relapse, and took place immediately after counseling in the Board's offices. Dr. Bhati stated that he doesn't think that Dr. Chandrasekhar gets the point that he has to get better or he will risk everything, including his license, his family and his debts getting worse than they are right now. Dr. Bhati stated that it's important for Dr. Chandrasekhar's license to be suspended for twelve months, and it's important for him to complete another 28 days of inpatient treatment. Dr. Chandrasekhar should also understand that the Proposed Order is for a stayed permanent revocation. If he makes one more bad move, he'll be out.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- abstain
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

MICHAEL HOWARD BRIDGES, M.D.

Mr. Browning advised that Dr. Bridges and Kevin P. Byers, his attorney, have arrived, and the Board will now proceed with his case.

Mr. Byers stated that it is imperative that the Board members realize that Dr. Bridges does not currently hold a valid certificate in the State of Ohio. His license has been lapsed for over two years; he did not renew in July 2001. That decision to not renew was not based on any intent to try to deceive the Board or hide anything from the Board relative to his history in North Carolina. He simply didn't see the point at that period in time, and still doesn't, of holding an active Ohio license when he is well established in North

Carolina, he is happy there, and his family is there.

Mr. Byers stated that, while they have no problem with the Hearing Examiner's factual findings, it's important from a realistic, practical standpoint that the Proposed Order will result in a cloud on a license that does not exist. If Dr. Bridges comes back to Ohio to practice, he will go through a restoration, for which, as he understands it, he will be filing a brand new application. He will go through original source verification. The Board knows the full history of what happened in North Carolina, and the Board could certainly review that information.

Mr. Byers asked that, given Dr. Bridges' unique circumstances, his willingness to cooperate with the Board, his openness and frankness, his immediate treatment once the fact that he might be having some kind of mental health issue or mood disorder was brought to his attention, the Board dismiss this case without prejudice. If Dr. Bridges ever returns to Ohio and wants to practice here, the full history of the North Carolina events can be brought forward and considered when he moves to reapply or gain a new license.

Dr. Bridges thanked the Board for taking the time to let him talk and address this issue. He stated that it's a very important matter to him in that it does have a significant impact on his ability to practice in North Carolina. Dr. Bridges stated that, while he agrees with all the Findings in the Report and Recommendation, the Proposed Order does have significant ramifications on his ability to practice; specifically, it would cause complications with credentialing and things like that, especially since it's been over two years since this was addressed in North Carolina. Dr. Bridges stated that he now has a full and active license in North Carolina, without restrictions.

Dr. Bridges asked that the Board review his case with that in mind, and that it dismiss his case without prejudice or any other terms that would resolve this without any adverse action that would have ramifications to his ability to practice in North Carolina.

Mr. Browning asked whether the Assistant Attorney General wished to respond.

Mr. Wilcox stated that this is obviously not the typical case seen by the Board. His first reaction to the Hearing Examiner's Proposed Order was that it was not normally something the Board would do, so it must be the wrong thing to do. The more he examined it, the more he understood the rationale behind Ms. Murphy's proposal. This is a doctor who did all the right things in the state of North Carolina to address his mental impairment issues. He is not interested in practicing in Ohio, and he has let his Ohio license lapse this past July. The question is whether this Order makes sense, given this unusual fact situation. Mr. Wilcox stated that, obviously, the Board knows that it can take action against a license that's lapsed, so that's not an issue. He added that the State is not opposed to the Hearing Examiner's Proposed Order in this case.

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

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Mr. Browning stated that he would now entertain discussion in the above matter.

Dr. Bhati asked whether the Board is in a position to take action on a lapsed license.

Mr. Dilling stated that, legally, the Board can. What has happened here is that, when the Board initiated its action, it was in the first two-year period following the lapse of Dr. Bridges' license. Were Dr. Bridges to have reapplied in that time, the Board would have had to grant a license first and then initiate proceedings afterward. Since then Dr. Bridges has entered into a period when he would have to apply for restoration of his license, and there is more process involved in restoration. The Board wouldn't have to immediately grant that license.

Dr. Steinbergh stated that she believes that Dr. Bridges has, in fact, handled everything he needed to handle in North Carolina. She added that she sees the reason for the Board having evaluated the case, and she believes that the citation letter was appropriately sent, but she feels at this time that the Board should dismiss this case. She doesn't see any benefit in limiting his license at this point. If he does come back and apply for restoration, the Board will have the ability to look and see how he is at that time. Dr. Steinbergh stated that she hates to put an action on his Ohio license unless it would really make a difference in how the Board would look at reapplication of license.

Dr. Bhati stated that he thinks it would make a difference. The question is whether the Board can take into account the North Carolina problems when Dr. Bridges applies for restoration.

Dr. Steinbergh stated that, as she understands it, when Dr. Bridges decides to apply for restoration, he will have to check the boxes indicating that he is impaired by reason of mental illness which is, at this point, under control, and that he has a full license to practice in another state. Dr. Bridges is not applying to practice in the state of Ohio at this time. It seems that the Board would deal with this in the same way it would deal with any impairment that comes before the Board.

Mr. Dilling referred to Ohio Revised Code 4731.222, which states in part, that the Board

“may require the applicant to pass an oral or written examination, or both, to determine the applicant's present fitness to resume practice. The authority of the board to impose terms and conditions includes the following:

- (A) Requiring the applicant to obtain additional training and to pass an examination upon completion of such training;
- (B) Restricting or limiting the extent, scope, or type of practice of the applicant.

The board shall consider the moral background and the activities of the applicant during the period of suspension or inactivity, in accordance with section 4731.08 of the Revised Code.”

Mr. Dilling stated that Dr. Bridges appears to be an active practitioner, so the Board wouldn't require the

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SPEX. Mr. Dilling stated that he believes that under this statute the Board would look at what Dr. Bridges had been doing during the period he did not have an Ohio license.

Dr. Bhati stated that the issue here is that Dr. Bridges has been forthright, coming and telling the Board his entire story. He's been treated properly and now has a full license. However, things did happen, and action needs to be considered. He wouldn't go any lower than issuing a reprimand at least. He would have a problem with dismissing this case altogether.

Dr. Steinbergh spoke against reprimand, stating that she doesn't think there is anything for which to reprimand Dr. Bridges.

Dr. Bhati stated that you would reprimand for what happened in North Carolina.

Dr. Egner asked how the Board could reprimand Dr. Bridges. She asked whether he would be reprimanded because he is guilty of developing a mental illness. She stated that that's not right. You wouldn't reprimand someone for developing diabetes. The Board only has two choices here. If the Board thinks that it will not be able to look at his background and record without some restriction placed on his license, then that is what it has to do, even though it has a bad feel. If the Board, at the time Dr. Bridges wants to restore his license in Ohio, can have access and look at all of this information, the case should be dismissed at this time. She wouldn't do anything more than that.

Mr. Dilling stated that, if what the Board wants to do is dismiss the case and look at it again when Dr. Bridges reapplies, it can do that and feel assured that that would happen. He added that he believes that Dr. Bridges understands that, as well. The Board has created a record that, should Dr. Bridges come back to Ohio, it's fair. If the Board does that, what it has normally done in those cases, and what he believes he heard earlier on the record, the Board felt there was a sufficient basis for having gone forward with this action. He suggested that reiterating that with a statement that it chooses not to take action at this time would be appropriate.

Dr. Steinbergh asked whether it is correct that restoration goes through the same process as does initial licensure.

Mr. Dilling stated that in restoration you go through the same process as you would in initial licensure, except for the initial credentialing and primary source verification. You have to answer the same additional information questions and you have to fill out a résumé. You have to answer all the same types of questions as you would with a full application for licensure. The difference between that and reinstatement is that in reinstatement you answer five or six questions, attest to having completed the required C.M.E., pay your money, and the Board has to reinstate.

Dr. Steinbergh noted that Dr. Bridges is past that point.

Mr. Dilling stated that he is at this time, but he wasn't at the time the cite was issued.

Dr. Steinbergh stated that she doesn't see a reason to place a restriction on Dr. Bridges license. If the

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Board is going to be able to evaluate Dr. Bridges should he return to Ohio to practice, the Board has the same ability to look at him as it does anyone else. Dr. Bridges will have to check those boxes, and the Board will look at the impairment issue.

DR. STEINBERGH MOVED TO AMEND THE PROPOSED ORDER TO DISMISS THIS MATTER.

Dr. Bhati suggested having language prepared for the Board.

Dr. Steinbergh stated that she could move to table instead.

Dr. Egner stated that she doesn't think that's necessary if Dr. Steinbergh is going to move to dismiss.

DR. STEINBERGH STATED THAT THE BOARD WAS SUBSTANTIALLY JUSTIFIED IN GOING FORWARD WITH THE INITIAL ACTION. DR. STEINBERGH MOVED, BASED UPON THE RECORD BEFORE THE BOARD TODAY, TO AMEND THE PROPOSED ORDER TO DISMISS THIS MATTER WITHOUT PREJUDICE. DR. EGNER SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

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 HOWARD BRIDGES, M.D. MS. SLOAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye

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Dr. Garg - abstain
Dr. Steinbergh - aye

The motion carried.

SAMUEL R. GOSS, D.P.M.

Mr. Browning directed the Board's attention to the matter of Samuel R. Goss, D.P.M. He advised that no objections were filed to Hearing Examiner Murphy's Report and Recommendation.

Mr. Browning advised that materials being construed to be a motion to admit additional evidence have been filed on behalf of Dr. Goss. The Assistant Attorney General has filed a memorandum in opposition to Respondent's motion to admit documents. He asked whether the Board wished to admit the additional evidence to the record.

DR. KUMAR MOVED TO ADMIT THE JURORS' STATEMENTS INTO THE RECORD. The motion died for lack of a second.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF SAMUEL R. GOSS, DP.M. DR. BHATI SECONDED THE MOTION.

Mr. Browning stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that this was a case involving a felony conviction. The Proposed Order calls for a stayed revocation, suspension for 18 months and probation for three years. Dr. Steinbergh stated that she can't disagree with the Proposed Order. She noted that one might be concerned that there was a felony conviction, and added that for some that would be enough to permanently revoke the license. She thinks that the Report and Recommendation points out some mitigating circumstances in this case. The conviction was based on one payment of \$400.00 to Dr. Goss. Dr. Goss did, in fact, terminate his agreement and did cooperate with the Board and so forth. Dr. Steinbergh stated that she believes that Dr. Goss does realize how serious this was, and she doubts very much that he would get into this kind of situation again.

Dr. Bhati referred to paragraph 5 of the Summary of Evidence, noting that, following Dr. Goss' attorney's argument that the Court should impose a lesser penalty in this case, the court found "it is clear from the evidence and the testimony that Dr. Goss is an intelligent man who is not easily led by others. This was not a spur of the moment decision. There was planning involved in this act, and frankly, the act was purely motivated by greed. There is no evidence that this is aberrant behavior." Dr. Bhati stated that he agrees with the Report and Recommendation in this case.

Dr. Steinbergh stated that it is very difficult for her to do anything but revoke a license when a person has been convicted of Medicaid and Medicare fraud. In this particular case, the Proposed Order is appropriate.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

BRIAN J. HUNTER, D.O.

Mr. Browning directed the Board's attention to the matter of Brian J. Hunter, D.O. He advised that objections were filed to Hearing Examiner Murphy's Report and Recommendation and were previously distributed to Board members.

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

Dr. Hunter was accompanied by Charles R. Saxbe, his attorney.

Mr. Saxbe stated that he and Timothy S. Horton represent Dr. Hunter, who would like this opportunity to address the Board in support of adoption of the Report and Recommendation.

Dr. Hunter stated that he would first like to thank the Medical Board, counsel, Board investigators and employees for their professionalism and courtesies extended throughout this process, and for the opportunity to share his thoughts with the Board now.

Dr. Hunter stated that many times during the last three years he thought that, perhaps, this was all a nightmare and that he would wake up and it would all go away. What he did is not a dream, but a reality. He committed Medicaid fraud. When Medicaid investigators came to his office, it was almost with a sense of relief that he admitted the full extent of his wrongdoing. Although he has made full restitution, he can never atone for his actions. He has embarrassed the medical profession, this Board, his family and, most importantly, himself. He cannot now fathom the thought process that led him to fraudulently bill Medicaid. At the time these events were occurring, he was able to delude himself that his actions were justified because Medicaid owed him money. While he was clearly wrong, the wrongness of his actions was not apparent to him. Back then he was in the grips of a substance abuse problem. Dr. Hunter stated that he doesn't seek to justify his actions, only to explain them. He has committed himself to recovery.

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Dr. Hunter stated that the person who stands before the Board today is in many ways different from the person who committed Medicaid fraud years ago. No matter what happens here, he will continue his recovery. He has a second chance at life, and he will make the best of that second chance.

Dr. Hunter added that one reason he hopes to return to the practice of medicine is to provide quality medical care to a middle to low income patient population that finds it difficult to obtain quality medical care in the present environment. Dr. Hunter stated that the practice of medicine has always been his passion, and he hopes someday to once again be a proud member of the medical community. If given the chance, he will not let the Board down, and he will not let himself down.

Mr. Browning asked whether the Assistant Attorney General wished to respond.

Mr. Michael stated that the State is also in support of the Report and Recommendation, as written, and believes that the Recommendation is appropriate, given the facts of this case.

Mr. Michael stated that, while Dr. Hunter has been forthright in most respects, initially in the hearing he denied that his impairment had affected his treatment of patients. However, during the course of the hearing it came out that he did treat patients while impaired by taking call in the evenings, while he was using.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF BRIAN J. HUNTER, D.O. DR. BHATI SECONDED THE MOTION.

Mr. Browning stated that he would now entertain discussion in the above matter.

Dr. Kumar stated that he agrees with the Report and Recommendation. He added that the only question he has is that the Proposed Order does not address the Medicaid fraud issue. The Report and Recommendation is primarily written for the abuse issues, and the Board needs to look at this carefully and perhaps require him to complete an ethics course pertaining to the practice of medicine and Medicaid fraud.

DR. KUMAR MOVED TO AMEND THE PROPOSED ORDER IN THE MATTER OF BRIAN J. HUNTER, D.O., BY ADDING A REQUIREMENT UNDER PARAGRAPH C THAT DR. HUNTER SUCCESSFULLY COMPLETE A COURSE IN PROFESSIONAL ETHICS THAT ADDRESSES THE ISSUE OF MEDICAID FRAUD. DR. STEINBERGH SECONDED THE MOTION.

Dr. Steinbergh agreed with Dr. Kumar that the Proposed Order does not address the Medicaid fraud issue. She acknowledged that impairment does lead to all kinds of problems, and that in this case it led to Medicaid fraud. In other cases, it's other issues. Requiring a professional ethics course in this case would be appropriate. That course needs to address this kind of issue.

Dr. Talmage asked whether Dr. Kumar wishes to add language allowing the Secretary and Supervising Member to approve the course presented.

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Dr. Steinbergh stated that it's standard for the full Board to approve the course.

Dr. Robbins stated that he is in agreement with the amendment. He added that he also appreciates Dr. Hunter's statement to the Board, and stated that it was well done.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER, AS AMENDED, IN THE MATTER OF BRIAN J. HUNTER, D.O. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

DONALD R. KISER, D.O.

Mr. Browning directed the Board's attention to the matter of Donald R. Kiser, D.O. He advised that no objections were filed to Hearing Examiner Porter's Report and Recommendation.

Mr. Browning continued that a request to address the Board has been filed on behalf of Dr. Kiser, but was

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not filed in a timely manner. The Assistant Attorney General has indicated that he has no objections to the Board's allowing the address. Mr. Browning asked whether the Board wished to allow the address.

DR. BHATI MOVED TO ALLOW DR. KISER TO ADDRESS THE BOARD. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

Mr. Browning advised that five minutes would be allowed for Dr. Kiser's address.

Dr. Kiser was accompanied by his attorney, George J. Cosenza.

Mr. Cosenza thanked the Board for the opportunity to address it. He stated that this case involves a misrepresentation that Dr. Kiser made in West Virginia with regard to his attendance at Continuing Medical Education (CME) classes. Dr. Kiser entered into a Consent Decree in West Virginia, and has fully complied with all of the terms and conditions of that Consent Decree. It was also reported in Pennsylvania and Nevada, where Dr. Kiser has licenses. Both of those jurisdictions have basically gone along with the West Virginia sanctions and have not taken any further sanctions against Dr. Kiser. There is a recommendation before the Board that further sanctions be taken against Dr. Kiser in Ohio. Mr. Cosenza stated that they don't believe those sanctions to be appropriate. There was no misrepresentation in the state of Ohio. Dr. Kiser was completely forthright and truthful on his Ohio application; and, in fact, he is not in active practice in the state of Ohio.

Dr. Kiser stated that, as Mr. Cosenza stated, he did not perform anything in the State of Ohio that was false, deceptive or misleading. When he filled out his Ohio license renewal, he truthfully checked off the box that asked whether he had any actions taken by another state concerning a licensing issue. He sent all of the information to the Board. He also sent the information to the licensing boards in Nevada and Pennsylvania, neither of which took further action. They did not put any restrictions or conditions on his licenses.

Dr. Kiser stated that what happened in West Virginia was based on an extreme situation, a life crisis. He was going through a divorce and a second divorce within a year after that. The only person who knew about what happened in West Virginia was his soon-to-be-ex-wife. When they separated, he learned that

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she had abused her three-year-old child. When he turned her in to Child Protective Services, she called the Ohio and West Virginia Boards and stirred up problems. Dr. Kiser stated that he regrets what happened in West Virginia. He's been in practice for eighteen years and never had anything happen like this. It will never happen again. Dr. Kiser stated that he won't risk losing his license or his income. He has two small children to take care of.

Dr. Kiser stated that he has not been employed in the State of Ohio since October 2000. The only thing he uses his Ohio medical license for is as a doctor for a football team and the women's volleyball team at Marietta College in Marietta, Ohio. That's the only thing he does. His responsibility is to those 120 athletes. If he lost his license, it would not only hurt him, but it would hurt these student athletes.

Dr. Kiser stated that, if the Ohio Board needs to take some type of action on his license, he asked that it be a warning or, at the most, probation concerning his CME credits for a specified number of years. Dr. Kiser stated that he wanted to reiterate that he did nothing illegal in the State of Ohio. What happened, happened in West Virginia. He paid his dues to West Virginia, and it's never going to happen again.

Mr. Browning asked whether the Assistant Attorney General wished to respond.

Mr. Wilcox spoke in support of the Report and Recommendation of the Hearing Examiner in this case. What Dr. Kiser did was very serious and it does merit a suspension by this Board. Forging documents for CME and then submitting them to a licensing board obviously shows a serious lapse of judgment by Dr. Kiser. While this may be an isolated incident, it is a reflection of potential serious character flaws in Dr. Kiser. The Board should make sure that Dr. Kiser knows that this type of deception and fraud is not acceptable and will be treated seriously. Mr. Wilcox stated that he believes that a suspension is therefore in line and is appropriate in this matter.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. PORTER'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF DONALD R. KISER, D.O. DR. BHATI SECONDED THE MOTION.

Mr. Browning stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that she believes that Dr. Kiser understood what he did. He took care of it in West Virginia, and she doesn't think that the Board needs to suspend his Ohio license. He did appropriately answer the questions on his Ohio license renewal application. She believes this case ought to be somewhat over for Dr. Kiser.

DR. STEINBERGH MOVED TO AMEND THE PROPOSED ORDER BY SUBSTITUTING AN ORDER OF REPRIMAND. DR. EGNER SECONDED THE MOTION.

Dr. Egner stated that she also wanted to reprimand Dr. Kiser when she read this; however, at this moment, she's not sure that that's the right thing to do. She thinks that Dr. Kiser thinks that if you do an act in another state and pay your penalty there, there shouldn't be any action in Ohio because it's over and done with. That's not the way it works. You hold licenses in states, and you have to follow the rules in all of

the states in which you hold a license.

Dr. Egner continued that, by his testimony today, Dr. Kiser doesn't really take responsibility for filling out that false information. She does understand that he was going through a very difficult time, and he might need to look at his judgment a little bit, but he tells the Board today that it happened because someone turned him in. It really happened because he filled out false information. She's now leaning away from a reprimand because she thinks that he really does need to understand what it means to hold a license in states and that what he did was fraudulent.

Dr. Kumar stated that one of his problems with a simple reprimand is that this is not just a matter of falsifying CME records, but he presented himself as being A.C.L.S.-certified. The certificate card that he carried was changed. That is a lot more serious than just falsifying CME records. He's indicating that he is A.C.L.S. re-certified when he's not. Under that scenario, a simple reprimand is not appropriate.

Dr. Davidson agreed with Dr. Egner and Dr. Kumar. She stated that she doesn't buy the argument that he didn't do anything illegal in Ohio. He is a licensed Ohio physician and he owes a duty of responsibility to Ohio. If what he did was illegal in West Virginia, it's illegal here. Dr. Davidson stated that she appreciates Dr. Kiser's candor, and added that the Board has seen other licensees who added insult to injury by trying to perpetuate a lie. She appreciates that he was honest on his Ohio application. Dr. Davidson noted that West Virginia fined Dr. Kiser \$2,000. She agrees with the Report and Recommendation, and she also agrees with Dr. Egner that Dr. Kiser hasn't really owned up to what he did, and she agrees with Dr. Kumar about the gravity of what Dr. Kiser did.

Ms. Sloan stated that she also agrees with the Proposed Order. She commented that Dr. Kiser was honest on the application, but only because he was caught and not because he knew that this was wrong. To sit here today and blame it on all of the other problems when he actually took the action to not only falsify but to bring other people into this action of falsifying is unacceptable, and the Proposed Order is appropriate.

Dr. Bhati stated that he's glad the Board allowed Dr. Kiser and his attorney to speak to the Board. Dr. Kiser sat before the Board and tried to make it believe that if action is taken in another state, this Board doesn't have jurisdiction. The Board does have jurisdiction. If a physician has a license in the State of Ohio and does something wrong elsewhere, he will be sanctioned for it by Ohio. Dr. Bhati stated that he doesn't think Dr. Kiser understands that.

Dr. Robbins also spoke against reprimand. He stated that he agreed with Ms. Sloan, adding that what really bothered him about this case is that Dr. Kiser got others involved in this process: the nurse at Selby Memorial, and the other individual who worked at Camden Clark Memorial Hospital. The extent to which Dr. Kiser went really bothered him. Dr. Robbins stated that he also agrees with other comments made by Board members that what happened in West Virginia is important, regardless of where you are.

Dr. Steinbergh stated that she absolutely agrees with all of the comments. This Board has always made it clear that, as long as you have an Ohio license, what happens in another state affects your Ohio license. She doesn't wish to impart the feeling that because he did it in another state it doesn't affect Ohio. It does. She added that she agrees with all of the comments made by Board members. Dr. Kiser's justification for

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thinking that he's already A.C.L.S. qualified had been because he practices emergency medicine. She felt from reading the record that that was a reasonable explanation. He knows those things, and so forth. Although he made the decision to do the wrong thing, she thinks that he didn't appreciate the gravity of it because of the pressure he was under. Dr. Steinbergh stated that the reason for her proposed reprimand is not because the Board shouldn't take action, but because she didn't see the purpose for a 30-day suspension. However, she will not disagree with the Board.

DR. STEINBERGH WITHDREW HER MOTION TO AMEND. DR. EGNER, AS SECOND, AGREED.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

FINDINGS, ORDERS AND JOURNAL ENTRIES

DAVID M. BAROFF, M.D.

Mr. Browning advised that, by letter of February 12, 2003, the Board notified Dr. Baroff that it proposed to take disciplinary action against his certificate to practice medicine and surgery in Ohio. Signed certified mail receipts were returned to the Board documenting proper service of the notice on Dr. Baroff; however, no hearing request has been received and more than 30 days have elapsed since the mailing of that notice. The matter was presented to the Board at this time for final disposition.

DR. STEINBERGH MOVED TO ADOPT MS. MURPHY'S SUMMARY OF EVIDENCE AND PROPOSED FINDINGS, WHICH DEMONSTRATE THAT THERE IS RELIABLE, PROBATIVE AND SUBSTANTIAL EVIDENCE TO SUPPORT THE ALLEGATIONS AS SET FORTH IN THE FEBRUARY 12, 2003 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF DAVID M. BAROFF, M.D., AND TO ENTER THE PROPOSED ORDER. DR. ROBBINS SECONDED THE MOTION.

Mr. Browning stated that he would now entertain discussion in the above matter.

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Dr. Steinbergh stated that this is a case of sexual misconduct and impropriety. She absolutely agrees with the Proposed Findings and the Proposed Order of permanent revocation.

Dr. Bhati agreed, adding that there is not much to discuss. Dr. Baroff had the opportunity to respond to the Board’s charges and did not. The Board must find that he is guilty of the charges, and the Proposed Order is appropriate.

Dr. Kumar expressed surprise that Dr. Baroff’s activities weren’t picked up when he was still in his residency. He also spoke in support of the Proposed Order.

Dr. Egner stated that the length of time over which Dr. Baroff acted inappropriately adds to the gravity of the situation. This has been an ongoing problem for him, and permanent revocation is in order.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

A copy of the Proposed Findings and Proposed Order shall be maintained in the exhibits section of this journal

DAVID B. COVERDALE, M.D.

Mr. Browning advised that by letter of May 14, 2003, the Board notified Dr. Coverdale that it proposed to take disciplinary action against his certificate to practice medicine and surgery in Ohio. Signed certified mail receipts were returned to the Board documenting proper service of the notice on Dr. Coverdale; however, no hearing request has been received and more than 30 days have elapsed since the mailing of that notice. The matter was presented to the Board at this time for final disposition.

DR. STEINBERGH MOVED TO ADOPT MS. MURPHY'S SUMMARY OF EVIDENCE AND PROPOSED FINDINGS, WHICH DEMONSTRATE THAT THERE IS RELIABLE, PROBATIVE AND SUBSTANTIAL EVIDENCE TO SUPPORT THE ALLEGATIONS AS SET FORTH IN THE MAY 14, 2003 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF DAVID B. COVERDALE, M.D., AND TO ENTER THE PROPOSED ORDER. DR. BHATI SECONDED

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THE MOTION.

Mr. Browning stated that he would now entertain discussion in the above matter.

Dr. Egner remarked that she likes this system of giving the Board more information than it previously received in cases where hearings weren't requested, but she feels that the Proposed Order in this case is too detailed without a hearing having taken place. She suggested revoking this physician's license. She stated that this is a case of a severe alcohol impairment in a physician who has yet to complete a year of residency. He's already had four relapses. Dr. Egner stated that she can't see that Dr. Coverdale is going to get a license without the Board finding out much more detail of what is going on in the background. She believes that it needs a hearing to grant a license. She stated that she doesn't think that the Board needs to say that he can't apply for three years, and then he must demonstrate that he's been alcohol-free for 18 months and go through a 28-day program. What the Board needs on this physician is a hearing. She doesn't like to see that the Board would get this specific without a hearing.

DR. EGNER MOVED TO AMEND THE PROPOSED ORDER BY SUBSTITUTING AN ORDER OF REVOCATION. DR. ROBBINS SECONDED THE MOTION.

Dr. Robbins stated that he totally concurs with Dr. Egner. He would have been more interested in the Proposed Order had the Board had a response from Dr. Coverdale. The fact that he's had as many relapses as he has, he doesn't see the Board getting involved with all of the things in the Order. He believes this case speaks to revocation.

Dr. Steinbergh stated that Dr. Coverdale no longer has a training certificate. It was valid through June 30. The Board has never received an application for licensure. So the Board doesn't have an application to deny or a license to revoke. She agreed that this is a case of severe impairment, and questioned what the Board should do.

Mr. Dilling stated that all of the factors involved in this case make it a unique and somewhat difficult case. Dr. Coverdale had a training certificate, a thing that lapses after a year. The Board received a complaint. Part of what the Board is doing is putting on the record a proposal to deny. In Section 4731.22(B)(26), Ohio Revised Code, the law provides grounds for the Board to take a disciplinary action. It talks about suspending that license and not revoking it. The intent of the statute is that this person gets another shot. Do they get another shot through a revocation? They can technically reapply for a license. Mr. Dilling stated that he believes that this Proposed Findings and Proposed Order was written the way it was to give this person another chance based upon the record before the Board today. The Proposed Order requires no application for a significant period of time, and it requires Dr. Coverdale to submit a lot of proof before he can have a second chance to get a license in Ohio. Mr. Dilling stated that he believes that revocation is taken out of the mix by the law.

Dr. Steinbergh stated that the Proposed Order does not allow the physician to apply for a license for three years and then requires the physician to prove his ability to practice.

Dr. Kumar stated that he believes that the Proposed Order accomplishes the same thing as a revocation. He

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has a comment about the Proposed Order requirement that Dr. Coverdale show evidence of continued sobriety for 18 months at the time he applies for a license. He stated that he doesn't think that that's long enough in view of the number of relapses Dr. Coverdale has had. He believes it should be for 30 months.

Dr. Steinbergh disagreed with that.

DR. EGNER WITHDREW HER MOTION TO AMEND. DR. ROBBINS, AS SECOND, AGREED.

Dr. Egner stated that she still has some problems with the Board making so many specific recommendations without all of the knowledge that could be obtained through hearing. She stated that she will vote for the Proposed Order.

Dr. Bhati stated that this may give Dr. Coverdale a wakeup call. He thinks it's a good idea.

Mr. Dilling stated that these aren't easy cases, and he believes it's good that these cases are going this route, fleshing the case out more in cases where the physician has chosen to not request a hearing, or has not timely requested a hearing. This is not a hearing. Hopefully, the information given to the Board is enough to satisfy reliable, probative and substantial evidence.

Dr. Egner stated that the problem she is having is that the Board has before it a doctor who is in the very beginning of his career, and the Board is going to say that he can't apply for an Ohio license for three years. This is going to have major effects on this person's ability to ever get training. It goes back to the same thinking she has when the Board talks about five-year suspensions. Sometimes the Board can make it so difficult that, in essence, it is saying that the person isn't going to become a licensed physician. That's her problem. It's not that she doesn't want to give this person a second chance and that she doesn't believe that the information before the Board is true. She's just not sure the Board would accomplish what would normally be accomplished for impairment.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

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CHRISTIAN T. FELTER, M.D.

Mr. Browning advised that by letter of May 14, 2003, the Board notified Dr. Felter that it proposed to take disciplinary action against his certificate to practice medicine and surgery in Ohio. Signed certified mail receipts were returned to the Board documenting proper service of the notice on Dr. Felter; however, no hearing request has been received and more than 30 days have elapsed since the mailing of that notice. The matter was presented to the Board at this time for final disposition.

DR. STEINBERGH MOVED TO ADOPT MS. MURPHY'S SUMMARY OF EVIDENCE AND PROPOSED FINDINGS, WHICH DEMONSTRATE THAT THERE IS RELIABLE, PROBATIVE AND SUBSTANTIAL EVIDENCE TO SUPPORT THE ALLEGATIONS AS SET FORTH IN THE MAY 14, 2003 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF CHRISTIAN T. FELTER, M.D., AND TO ENTER THE PROPOSED ORDER. DR. KUMAR SECONDED THE MOTION.

Mr. Browning stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that Dr. Felter is severely impaired, and he has violated his Consent Agreement. Dr. Steinbergh stated that she agrees with the Proposed Order of revocation. She added that it is sad that Dr. Felter didn't come before the Board for a hearing, but there is certainly tremendous evidence that he can't practice. Because of his age, revocation as opposed to permanent revocation is in order.

Dr. Egner stated that she remembered when Dr. Felter last appeared before the Board, and she thinks that all of these points were brought up to him very clearly. He knew how serious this was, and she believes that the Board discussed with him at that time that some of his living conditions were not conducive to his recovery. She agreed that this is a very sad and very disappointing case, but she is definitely in favor of the proposed revocation. Dr. Felter did this with full knowledge of what the Board's thinking was.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

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JANET LYNN RICE, M.D.

Mr. Browning advised that by letter of July 25, 2003, the Board, pursuant to Section 4731.22(B)(19) and/or (26), Ohio Revised Code, ordered Dr. Rice to undergo a three-day inpatient evaluation. Dr. Rice failed to appear for this scheduled examination and she did not inform the Board that her failure to appear was due to circumstances beyond her control. Signed certified mail receipts were returned to the Board documenting proper service of the notice on Dr. Rice; however, no hearing request has been received and more than 30 days have elapsed since the mailing of that notice.

Mr. Browning continued that Section 4731.22(B)(19), Ohio Revised Code, provides that "failure to submit to a mental or physical examination...ordered by the board constitutes an admission of the allegations against the individual unless the failure is due to circumstances beyond the individual's control, and a default and final order may be entered without the taking of testimony or presentation of evidence," and Section 4731.22(B)(26), Ohio Revised Code, contains equivalent language. The matter was presented to the Board at this time for final disposition.

DR. STEINBERGH MOVED TO ADOPT THE PROPOSED FINDINGS, ORDER AND JOURNAL ENTRY, CONTAINED IN THE TABLE FILE, IN THE MATTER OF JANET LYNN RICE, M.D. DR. EGNER SECONDED THE MOTION.

Mr. Browning stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that this is a case of psychiatric impairment. The Proposed Order is to deny Dr. Rice's application for licensure. Dr. Steinbergh asked how soon Dr. Rice will be permitted to reapply for license if the Board issues this Order.

Mr. Dilling stated that Dr. Rice can reapply as early as she wants.

Dr. Garg left the meeting during the previous discussion

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Steinbergh	- aye

The motion carried.

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CITATIONS, PROPOSED DENIALS AND ORDERS OF SUMMARY SUSPENSION

ROGER M. MORRELL, M.D. - LETTER OF PROPOSED DENIAL

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

DR. STEINBERGH MOVED TO SEND THE LETTER OF PROPOSED DENIAL TO DR. MORRELL. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Steinbergh	- aye

The motion carried.

NEEL N. SHETH, M.D. - LETTER OF PROPOSED DENIAL

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

DR. BHATI MOVED TO SEND THE LETTER OF PROPOSED DENIAL TO DR. SHETH. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Steinbergh	- aye

The motion carried.

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WILLIAM JOHN STEFANICH, 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. BHATI MOVED TO SEND THE CITATION LETTER TO DR. STEFANICH. DR. ROBBINS SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Steinbergh	- aye

The motion carried.

Dr. Garg returned to the meeting at this time.

WILLIAM DANIEL TRUSNOVIC, 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. TRUSNOVIC. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

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GRANT F. KOHER, 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. BHATI MOVED TO SEND THE CITATION LETTER TO DR. KOHER. DR. ROBBINS SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

WILLIAM W. SPRICH, 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. SPRICH. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

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RATIFICATION OF CONSENT AGREEMENTSROBERT MALCOLM BENSON, M.D.**DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. BENSON. DR. BHATI SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

SCOTT MICHAEL CAMPBELL, M.D.**DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. CAMPBELL.**

Dr. Davidson stated that this agreement didn't seem consistent with others in similar circumstances in that there was no suspension time involved. This is a physician who is an alcoholic and who has had ongoing problems with marijuana.

Dr. Steinbergh stated that Dr. Campbell's assessments demonstrated that he's been found capable of practicing.

Ms. Gilbert stated that this is a situation where, under the rules, a physician would normally be suspended. This physician would have potentially qualified for the "one-bite" rule but for the Board having become involved before he was actually evaluated. After that, he or his counsel contacted the Board and staff here verified that Dr. Campbell received some misinformation. That is why he wasn't entered into a Step I agreement at that time. He was in the 28-days treatment program at the time he would have normally been suspended. Including a suspension at this point would have been just adding a suspension at this point. Dr. Campbell has jumped through all of the hoops he would have had to jump through to get to a Step II agreement.

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

Vote:	Mr. Albert	- abstain
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Dr. Egner	- aye
Dr. Talmage	- abstain
Dr. Bhati	- aye
Dr. Kumar	- aye
Ms. Sloan	- aye
Dr. Davidson	- aye
Dr. Robbins	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye

The motion carried.

MARK STUART HOPKIN, M.D.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

SUZANNE MARIE SMITH, M.T.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain

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Dr. Steinbergh - aye

The motion carried.

JOHN H. GRAY, D.O.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

PETER FRAGATOS, M.D.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

ADAM SAMUEL MARTIN, M.D.

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

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Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

ADOPTION OF OFFICE-BASED SURGERY RULES

Mr. Wayda referred to proposed rules 4731-25-01 through 4731-25-05, and proposed rule 4731-25-07, which were before the Board for final adoption. He noted that proposed rule 4731-25-06 is being re-evaluated in light of letters received from the Association of Ambulatory Surgery Facilities (AASF). Mr. Wayda stated that the other rules have been through all of the processes and are now ready for adoption.

Mr. Wayda stated that the first question for the Board is the determination of an effective date. Normally the Board sets an effective date for the end of the month or the first day of the next month after adoption. This case requires a little bit of thought because of the C.M.E. requirement. He stated that Dr. Bhati has suggested an effective date of November 1 because of the fact that there is a six-month period built into the rules. The thinking was that the rules become adopted by the Board, which puts people on notice and gives them an extra couple of months to meet the requirements.

DR. GARG MOVED THAT THE FINDINGS AND ORDER “IN THE MATTER OF THE ADOPTION OF NEW RULES 4731-25-01, 4731-25-02, 4731-25-03, 4731-25-04, 4731-25-05 AND 4731-25-07 OF THE OHIO ADMINISTRATIVE CODE,” PERTAINING TO OFFICE-BASED SURGERY, AS CONSIDERED AND INCORPORATED INTO THE JOURNAL OF THE STATE MEDICAL BOARD OF OHIO FOR THIS 13TH DAY OF AUGUST, 2003, BE ADOPTED AS THE FINDINGS AND ORDER OF THE BOARD IN RELATION TO THE PROPOSED RULE CITED THEREIN, AND THAT THE STAFF PROCEED TO FILE THE FINAL RULE IN ACCORDANCE WITH THE PROVISIONS OF SAID FINDINGS AND ORDER, WITH AN EFFECTIVE DATE OF NOVEMBER 1, 2003. DR. BHATI SECONDED THE MOTION.

Dr. Kumar asked for clarification of the C.M.E. issue. Is it for the physicians who are doing the anesthesia themselves or for physicians who are going to supervise C.R.N.A.s.

Dr. Bhati explained that M.D.s who supervise C.R.N.A.s or do the procedure themselves in an office setting must complete five hours of category I C.M.E. for the delivery of moderate sedation/analgesia, or

20 hours of category I C.M.E. for the delivery of anesthesia services.

Dr. Kumar stated that, in a way, he does conscious sedation every day. He noted that physicians have constantly objected to having topic specific C.M.E. When a neurosurgeon receives a license to practice medicine, he's not required to do C.M.E. in neurosurgery. He has a problem with having a topic specific C.M.E. requirement. Dr. Kumar stated that the hospitals are requiring physicians to do a review and overview. It doesn't take five hours to effectively do that every year. Requiring five hours of C.M.E. to do conscious sedation to get a license, when at the same time you're asking the physician to be A.C.L.S. certified, which itself takes five to six hours on a yearly basis, is redundant and not needed.

Dr. Bhati stated that this focused C.M.E. requirement has been extensively discussed over the past two years. The question is whether a non-anesthesiologist physician who has a patient who gets into trouble is capable of managing the problem. Dr. Bhati stated that that's what the supervising physician needs to be able to do. He added that he doesn't think that most physicians can say that they're capable of managing a patient getting into trouble. In a hospital, the anesthesiologist takes care of the problem.

Dr. Talmage stated that the rule also states that if you are an anesthesiologist, or if you have anesthesia privileges already, you don't need the C.M.E. credits. The C.M.E. requirement is only for those who do not do anesthesia in the routine course of their practice.

Dr. Bhati added that this is talking only about office-based surgery situations, not hospital surgeries.

Dr. Kumar stated that he knows that the Board needs to protect people, and a regular M.D. is not able to handle such situations. However, there is already a requirement that these individuals be A.C.L.S. certified and have a current, active A.C.L.S. license. Physicians with A.C.L.S. licenses can, or should be able to, handle those situations. If they can't, then they're not doing the job in getting A.C.L.S. certification.

Dr. Talmage asked how many credits are received for A.C.L.S. certification.

Dr. Kumar stated that you don't get C.M.E. credits for that. You spend all day long and you don't get credits.

Dr. Garg asked whether A.C.L.S. covers all aspects of conscious sedation.

Dr. Kumar stated that they do.

Dr. Davidson stated that what A.C.L.S. covers is how to rescue someone from a sedation overdose, not the how-to of sedation. She noted that, in Dr. Kumar's situation, he's credentialed by his hospital and will not be required to obtain the C.M.E.

Dr. Davidson stated that the Board argued and argued over this, and it would be wonderful if there was some other way to demonstrate that John Q. Physician has expertise in sedation other than residency or credentialing by a hospital, but there isn't. C.M.E. was the next best thing the Board could come up with. She added that she truly believes that's apart from A.C.L.S. A.C.L.S. is rescue. In C.M.E., there is some

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body of education about how to do it and, hopefully, not need the A.C.L.S.

Dr. Bhati stated that at one point the issue was raised as to whether five hours is enough. The Board doesn't know that, but at least it's better than nothing.

Dr. Davidson asked Mr. Wayda to clarify the need for the delay to November.

Dr. Garg stated that it would only allow them two and a half months to get their C.M.E. hours.

Mr. Wayda stated that, actually, the Board is giving them eight months total. There are six months built into the rule, and the Board is giving them an extra two months.

Dr. Davidson stated that she would argue for allowing doctors a year to do it. She stated that physicians' schedules are busy. She added that she already knows what C.M.E. she is going to take for next year. At this point she would have to trash that, run around and find something else, change her time off. Her schedule is too tight.

Dr. Egner stated that the Board has just finished a discussion on how important the C.M.E. is and the rationale behind requiring it. If it is that important, the sooner the better. She stated that she really thought that the leeway wasn't necessary. They have six months. She would not give a year.

Dr. Garg stated that he would stick with his motion. You have to start somewhere to show you are competent to do something. He reminded the Board that the rules have to be written for everyone.

Dr. Bhati stated that he thinks eight months is reasonable.

Dr. Davidson stated that she does not. She added that she hates to raise any red flags for these rules. The gentler the Board can make this, the better.

Dr. Bhati asked what Dr. Davidson would be comfortable with.

Dr. Davidson stated a full year. She wouldn't enforce the rules for a year.

Dr. Talmage suggested making the effective date six months from today, which would give physicians a full year to obtain the C.M.E.

Mr. Wayda stated that Ms. Thompson did research on available options for C.M.E. Eighteen months ago, Ms. Thompson had uncovered an on-line version where a physician could actually get up to 30 hours of Category I C.M.E. credits in anesthesia or five hours in conscious sedation. At the time, there was testimony from Dr. Harder of the O.S.A., who admitted that there were fairly limited options for C.M.E. in this area. Dr. Harder's point was that, as the rules become more imminent, there will be more options available. Mr. Wayda stated that in the past week, in preparation for this meeting, he did a very brief search on line for anesthesia C.M.E.s and a whole raft of them popped up. Mr. Wayda stated that he believes Dr. Harder's prediction was correct; as these rules in Ohio and elsewhere are coming on line, there

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are now 15 states or so that have regulations on office-based surgery and sedation and anesthesia and you're beginning to see more of these C.M.E.s come on-line.

Dr. Bhati stated that Dr. Davidson's concern relates to physicians' schedules, and not availability of programs. Dr. Bhati stated that he believes that eight or nine months is a reasonable period of time.

Dr. Garg suggested an effective date of January 1, which will give physicians 10 months.

Mr. Dilling stated that there has also been discussion about the next newsletter being devoted to office-based surgery. That would allow the Board to publicize the rules.

DR. GARG CHANGED THE EFFECTIVE DATE IN HIS MOTION TO JANUARY 1, 2004. DR. BHATI, AS SECOND, AGREED TO THE CHANGE. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- abstain
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

EXECUTIVE SESSION

DR. GARG MOVED THAT THE BOARD DECLARE EXECUTIVE SESSION TO CONSIDER THE EMPLOYMENT OF A PUBLIC OFFICIAL, AND TO CONFER WITH THE ATTORNEY GENERAL'S REPRESENTATIVES ON MATTERS OF PENDING OR IMMINENT COURT ACTION. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

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The motion carried.

Pursuant to Sections 121.22(G)(1) and (3), Revised Code, the Board went into executive session.

Mr. Browning left the meeting during the Executive Session. Dr. Talmage assumed the Chair in his absence.

PERSONAL APPEARANCES

FRANK PAUL BONGIORNO, M.D.

Dr. Bongiorno appeared before the Board pursuant to his request for release from the terms of the Board's Order of July 8, 1998.

In response to Dr. Kumar's questions, Dr. Bongiorno stated that he has his own practice. He's a wound specialist and he travels throughout the state of Michigan. He has two offices, one in Ann Arbor and one in Grand Rapids. He doesn't work in Ohio now. He's had an Ohio license for many years but he doesn't work here.

Dr. Kumar noted that Dr. Bongiorno's initial problem was that there was a disciplinary action taken by hospitals in which Dr. Bongiorno worked.

Dr. Bongiorno stated that there was no disciplinary action taken by hospitals. He advised that his problem in Ohio was the result of discipline he received from the state of Georgia.

MR. ALBERT MOVED TO RELEASE DR. BONGIORNO FROM THE TERMS OF THE BOARD'S ORDER. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

BRADFORD J. MURPHY, D.O.

Dr. Murphy appeared before the Board pursuant to his request for release from the terms of his May 13, 1998 Consent Agreement.

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In response to Dr. Bhati's questions, Dr. Murphy stated that he is doing well. He stated that he appreciates the Board's involvement in turning him around. It was a good process and he's glad to be on the other end of it.

DR. BHATI MOVED TO RELEASE DR. MURPHY FROM THE TERMS OF HIS CONSENT AGREEMENT.

In response to Dr. Steinbergh's questions, Dr. Murphy stated that he goes to three regular A.A. meetings per week, and he's also involved with the Dayton Caduceus group. He plans to continue a similar schedule to that. He's a family practitioner in Kettering, and his practice is going quite well. His family is intact, and he has their support. Dr. Murphy again stated that he is very appreciative of the Board's intervention and involvement in his life.

DR. STEINBERGH SECONDED THE MOTION.

Dr. Garg noted that Dr. Murphy's impairment involved alcohol and Vicodin. He asked how Dr. Murphy got started on Vicodin.

Dr. Murphy stated that he probably started using the Vicodin in 1997. He didn't start taking it due to any significant health problems. He stated that he took it because he was addicted.

Dr. Davidson asked whether Dr. Murphy will change anything in his recovery process once he's released from probation.

Dr. Murphy stated that he may continue the urine screens and so forth with OPEP, but they won't be done at the same frequency. He imagines he'll still attend at least three meetings a week, maybe four.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

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GARY E. SIVAK, M.D.

Dr. Sivak appeared before the Board pursuant to his request for release from the terms of his August 12, 1998 Consent Agreement.

In response to Dr. Bhati's questions, Dr. Sivak stated that he is doing pretty well. He practices anesthesia with Cleveland Anesthesia Group. He is happy about his life, stating that it's better than it's ever been.

In response to Dr. Garg's questions, Dr. Sivak stated that his group covers St. Vincent's Charity Hospital, Carnegie Surgery Center, Northern Ohio Surgery Center in Sandusky, and an additional surgery center in Findlay, Ohio.

Dr. Davidson stated that it appears that Dr. Sivak had chronic pain issues caused by cervical spine disease that began his addiction.

Dr. Sivak stated that that's what initiated this problem, but that's an issue that's in the past. Pain is not an issue for him at this point. It's not perfect, but there are tools in place to prevent relapse. He's been getting by for seven years now and things are good.

Dr. Bhati commented that if he can go seven years, he can go 70 years without a problem.

Dr. Sivak stated that that is right.

DR. STEINBERGH MOVED TO RELEASE DR. SIVAK FROM THE TERMS OF HIS CONSENT AGREEMENT. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

Dr. Sivak thanked the Board for its efforts on his behalf.

MARK E. TURNER, D.O.

Although scheduled, Dr. Turner did not appear before the Board.

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EUGENE A. BREWER, M.D.

Dr. Brewer made his initial appearance before the Board, pursuant to the terms of the Board's Order of July 10, 1996.

In response to Dr. Bhati's questions, Dr. Brewer stated that he has an active practice at a V.A. Hospital in Texas. He has clinic on Tuesdays and Fridays and sees 20 to 30 patients. He does his major surgeries on Mondays, small outpatient surgeries on Thursdays. Last year he did about 450 to 500 procedures.

Dr. Bhati stated that he hopes that Dr. Brewer is not overburdened, because things can go wrong. Some physicians do ten to twelve cases a day and get into problems.

Dr. Brewer stated that the V.A. is kind of a limiting factor and he's in no danger of being overworked.

Dr. Steinbergh stated that this was minimal standards case. She asked how he's being monitored in Texas, and what type of remediation he's undergone in the past six to seven years.

Dr. Brewer stated that the initial remediation that he took was to close his practice in Ohio and enter a fellowship. He satisfactorily completed a fellowship in urologic oncology in Kansas City, Missouri, at St. Luke's Hospital. The ongoing performance monitors that his hospital has, not only for himself but for everyone, is that the nurses are constantly reviewing the charts. They have a list of things that they're looking for in regard to quality, with regard to the notes, and with regard to different criteria required by the hospital. That's ongoing every month. He'll get a list of ten things that they looked at and what his percentage is. He's usually 95 to 100 percent on the monitors they have in place.

Dr. Kumar stated that he noticed that the initial Board action was in 1996. His initial appearance should have been in the first three months. He asked why the initial appearance is so long overdue. He asked whether Dr. Brewer plans to return to Ohio now.

Dr. Brewer stated that he has no plans to return to Ohio. He loves where he practices in Texas. Dr. Brewer advised that he appealed the Board's 1996 action, and that appeal ran to the Fall of 1997. He actually applied for restoration in January 1998. He doesn't know what happened from that point, whether it was a failure on his part or the hospital's part, but his restoration application wasn't acted upon until last Fall when he began making phone calls to find out what was going on and why it was taking so long. He had to update his application, document his C.M.E., and his license was restored in February 2003.

Dr. Talmage asked how much longer Dr. Brewer's Texas probation runs.

Dr. Talmage stated that he doesn't have a Texas license and is not on probation there. He has a California license, which is what the V.A. has been using as his endorsing license. With the restoration of his Ohio license, there was a question as to whether he has a "full and unrestricted license" in Ohio. He stated that he believes that the V.A. has been in contact with Mr. Schmidt about this matter.

Dr. Kumar stated that one of the problems he has is that Dr. Brewer is using his Ohio license to practice in

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a V.A. facility in Texas, and Ohio doesn't have an effective way of monitoring the quality of things being done there. He's using an Ohio license to accomplish that purpose.

Dr. Talmage stated that the Board will receive quarterly declarations of compliance, and Dr. Brewer will be appearing every three months.

Dr. Kumar asked whether the Board is getting information from the V.A.

Ms. Bickers explained that, under the terms of the Board's Order, Dr. Brewer doesn't need to have a monitoring physician unless he's practicing in Ohio.

Dr. Kumar stated that he has a problem with the fact that Dr. Brewer is using his Ohio license to work at the V.A. in Texas, and Ohio isn't able to monitor him just because he's not practicing in Ohio.

Dr. Garg stated that Dr. Brewer is under a Board Order that cannot be changed now.

Dr. Egner asked how long Dr. Brewer has been working at the V.A.

Dr. Brewer stated that he's been there seven years and fifteen days.

In response to Dr. Egner's questions, Dr. Brewer stated that he was practicing at the V.A. under his California license. According to the state of California, his license there is full and unrestricted.

Dr. Talmage questioned whether California took a bootstrap action.

Dr. Brewer stated that it did, but the action was stayed and he was put on probation. The terms were very simple; he would have to submit additional C.M.E. if he moved to California. The terms were tolled as long as he didn't practice in California.

Dr. Bhati asked whether there is a quality assurance committee who looks over the cases of all the department members.

Dr. Brewer stated that there is. He added that it's a pretty rigid structure. You have a physician, a chief over that physician, a chief of staff over that service chief; it's like the military. He reports to the chief of surgery, who reports to the chief of staff, who in turn reports to a chief medical officer for all of the hospitals in the Southwest.

Dr. Steinbergh asked whether he does general urology or principally oncologic.

Dr. Brewer stated that he does general urology. He's the only urologist in his hospital, and they have a need for someone who can take care of kidney stones and do a vasectomy, and he likes doing those things.

DR. BHATI MOVED TO CONTINUE DR. BREWER UNDER THE TERMS OF THE BOARD'S ORDER OF JULY 10, 1996 AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH

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**FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE.
DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

STEVEN W. CRAWFORD, M.D.

Dr. Crawford made his initial appearance before the Board, pursuant to the terms of the Board's Order of June 11, 2003.

In response to Dr. Bhati's questions, Dr. Crawford stated that he is doing well. Hydrocodone is no longer a part of his life and hasn't been for the past 15 months. His license is currently suspended, and will be until February 2004. His father is a carpenter, and he has a baby due in about two weeks, so they've redone one room for the baby. Now they're taking off storm windows and redoing the glaze around the windows. He stated that he has been working on that for the past two and a half weeks. So he basically has been doing carpentry work, getting ready for the baby, and working on his recovery.

Dr. Bhati asked whether Dr. Crawford has had the chance to read the Order every once in a while. Dr. Crawford stated that he has.

**DR. BHATI MOVED TO CONTINUE DR. CRAWFORD UNDER THE TERMS OF THE BOARD'S ORDER OF JUNE 11, 2003 AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE.
DR. STEINBERGH SECONDED THE MOTION.**

Dr. Steinbergh stated that because Dr. Crawford has been in previous consent agreements, he knows the rules and knows the Board is here to help and support him. She advised that the Board hopes that Dr. Crawford will get through this. She encouraged him to work hard on his recovery.

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

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

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Dr. Kumar	- aye
Ms. Sloan	- aye
Dr. Davidson	- aye
Dr. Robbins	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

ADAM S. MARTIN, M.D.

Dr. Martin made his initial appearance before the Board, pursuant to the terms of his May 15, 2003 Consent Agreement.

Dr. Talmage noted that Dr. Martin's Step II agreement with the Board was ratified earlier in the meeting.

In response to Dr. Garg's questions, Dr. Martin stated that he is a surgery resident at University Hospitals in Cleveland. They are ready to take him back into the program. His monitoring for his urine screens is done through EAP at University Hospitals. His Program Directors are involved with his recovery, and he's also had contact with the Chief of Staff at University Hospitals.

Dr. Talmage commented that, as a resident, Dr. Martin's practice will be monitored constantly.

Dr. Davidson noted that it appears that Dr. Martin had a 90-day suspension of his training certificate. She advised that the Board has agonized over the right duration and the role of suspension. She asked Dr. Martin to comment on that time.

Dr. Martin stated that he's had plenty of time to go to a lot of A.A. meetings and have good participation with the people in A.A. He's spent time with his sponsor. Had he been in the residency at the time, it would have been a lot more difficult to spend time with people and go to a lot of meetings.

Dr. Davidson asked whether Dr. Martin anticipates that his residency program will be supportive or sympathetic, adding that recovery will take time. She stated that it almost seems impossible to do a residency, noting that working 80 hours a week is not consistent with active recovery.

Dr. Martin stated that one good thing about having the time off is that he's established meetings that he likes to go to and people with whom he likes to spend time. There are a lot of meetings to go to in Cleveland, being that it is a big city. He doesn't see that there will be a problem.

Dr. Garg asked what year residency Dr. Martin is in.

Dr. Martin stated that he was in the tenth month of his residency when the Board first contacted him. He hasn't had a discussion about exactly where he is in the program. They list him as a second-year resident.

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Dr. Garg stated that the purpose of his question was to find out how the hospital would handle the three months Dr. Martin was away. He noted that residency programs are pretty rigid about the time spent.

Dr. Martin stated that his program director told him that he would have to make up the months that he missed, but that they would accommodate him.

Dr. Talmage stated that the thing to keep in mind is that this is one of the more rigorous residencies and he needs to be very conscious of his stress levels, and report that immediately and ask for help. Eighty hours a week is a big demand. If you don't take call with the rest of the residents, you're not pulling your load. There's pressure to do that. He cautioned Dr. Martin to be vigilant. If he seems to be stressing, he should get help.

Dr. Martin stated that he's been real pleased by the support he has received from within the Cleveland Clinic system.

Dr. Garg asked whether Dr. Martin has good support from his colleagues in the residency program.

Dr. Martin stated that he has. He added that he's been doing a chart review study at Metro Hospital, and just going from the library to the chart room he's run into a lot of people, and they have all been very supportive.

Dr. Garg asked what the call schedule is like for a second year in his program.

Dr. Martin stated that for all of the years there it's supposed to be every fourth night. He added that he hasn't worked since April, but they have put in place a float system at the main university hospital, so call there might be even more infrequent.

Dr. Talmage commented that if Dr. Martin has a ruptured spleen case at 5:00 p.m. and his meeting is at 5:30 p.m., he's not going to go to the meeting. He cautioned Dr. Martin to be very careful.

Dr. Davidson stated that Dr. Martin has a life-threatening disease and he needs treatment and needs to be aware of that. She wished him luck.

Mr. Albert asked Dr. Martin how long he was at Glenbeigh.

Dr. Martin stated that he was there for 28 days. He stated that when he first showed up there he was resistant to being there. He added that he enjoyed his time there, much more so at the end than at the first two weeks. The people he met up there and with whom he went through treatment are real good people. He's maintained some contact with them since he's gotten out. It was very helpful.

In response to Dr. Garg's questions, Dr. Martin stated that he would say that his main drug of choice was alcohol. He also used marijuana, but he used alcohol more.

Ms. Sloan asked Dr. Martin to talk about his personal support system, other than colleagues.

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Dr. Martin stated that his basic support is the A.A. community and his sponsor. He has started attending meetings with a home group in Cleveland. There's also an aftercare group at the Cleveland Clinic. Dr. Martin advised that he has a very supportive family, but they're not from the area. His support around Cleveland is within the people he's met going to A.A.

DR. BHATI MOVED TO CONTINUE DR. MARTIN UNDER THE TERMS OF HIS MAY 15, 2003 CONSENT AGREEMENT AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

VENU G. MENON, M.D.

Dr. Menon made his initial appearance before the Board, pursuant to the terms of Board's Order of May 14, 2003. He was accompanied by his attorney, Elizabeth Y. Collis.

Dr. Steinbergh noted that the basis for the Board's action in this case was that Dr. Menon had submitted false information on his application for reinstatement in Oklahoma. He currently works full-time at the Dayton Outpatient Center and the Springboro Outpatient Center. She asked whether he has any concerns or questions about the Board's Order.

Dr. Menon stated that he does not.

Dr. Bhati asked whether Dr. Menon has reviewed the Board Order.

Dr. Menon stated that he has. He's not happy with it, but he will comply with it. Dr. Menon stated that he felt that the three-year suspension period is quite long. He has been in practice for 25 years, and will probably retire in three years or soon after.

In response to Dr. Kumar's questions, Dr. Menon stated that he is working full-time with Dr. Suresh Gupta. He also works at Dr. Gupta's center in Springboro. He's works at two facilities for a single employer.

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Dr. Kumar noted that Dr. Menon ran into trouble at Upper Valley Medical Center with quality concerns, etc. He asked who monitors his work at the outpatient facility.

Dr. Menon stated that at the Upper Valley Medical Center he was doing mostly OB anesthesia for nearly 20 years. He didn't have much contact with other surgeries. OB used to keep him very busy. He was the only OB anesthesiologist there. Dr. Menon stated that he didn't have any quality issues there. He submitted four letters from obstetricians to that effect. It was a fiction made up by other anesthesiologists.

Ms. Collis stated that the quality concern was the handwriting issue. Dr. Menon admitted at the hearing that the hospital was very concerned that, because his handwriting was so poor, it could compromise quality of care.

Dr. Kumar stated that there are two things with which he is uncomfortable in this case. The first is the requirement that he has a medical records course. He asked whether Dr. Menon has signed up for a medical records course.

Dr. Menon stated that he stated that he was going to as the Board which course he should go to. He hasn't signed up for a course yet.

Ms. Bickers stated that Dr. Menon has until the end of his first year of probation to take the course.

Dr. Kumar stated that one of his problems is that Dr. Menon is working in a situation where it's a totally outpatient facility with no hospital supervision. His work is not going to be monitored by any utilization review committee or anything of that sort.

Dr. Talmage stated that ASFs are required to have a utilization review committee.

Dr. Kumar indicated that he does not believe that this facility does. He stated that he would like to make certain that Dr. Menon's monitoring physician is someone who is outside the practice.

Ms. Collis stated that that is their intent. They intend to find someone outside of the practice, who is in the Dayton area and who is an anesthesiologist so that there is someone outside that practice area who will review charts and make those recommendations.

Dr. Talmage asked how many anesthesiologists are in the ASF in which he practices.

Dr. Menon stated that there are two.

Dr. Kumar stated that the other anesthesiologist is the owner of the practice.

Dr. Garg asked what kind of anesthesiologist services he provides in these centers.

Dr. Menon stated that he would be doing general anesthesia, spinal anesthesia, epidurals, blocks, all types

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of anesthesia.

Dr. Garg asked Dr. Menon to explain about the false information he provided.

Dr. Menon stated that they asked him whether any disciplinary action had been taken against him. He didn't know what disciplinary action was, so he said, "no." The Oklahoma Board ruled that losing privileges is a disciplinary action. He didn't know that at all.

Dr. Garg asked whether there had been any quality of care issues at any of the institutions in which he worked.

Dr. Menon stated that there were not. He added that he's worked locum tenens at several places and never had any problem, except at Upper Valley Medical Center. The Chiefs of Anesthesia at these other places reviewed all of his charts.

Dr. Talmage advised that Dr. Menon's monitoring physician will be nominated for the Board's consideration in September.

Ms. Collis stated that Dr. Menon is licensed in other states, and they have sent copies of the Board's Order to the other states in which he is licensed.

DR. GARG MOVED TO CONTINUE DR. MENON UNDER THE TERMS OF THE BOARD'S ORDER OF MAY 14, 2003 AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH HIS NEXT APPEARANCE BEFORE THE FULL BOARD AT THE TIME OF HIS RELEASE. MS. SLOAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PROBATIONARY REPORTS

Mr. Browning referred the Board to the Compliance Staff's reports of conferences with probationers on June 9-10, 2003. The reports indicate that all probationers are in compliance.

DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF

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CONFERENCES WITH: NICHOLAS G. ESPINOZA, D.O.; WILLIAM H. FIEGENSCHUH, JR., M.D.; WALTER L. GEORGE, JR., M.D.; RAYMOND E. HENSHAW, II, M.D.; RICHARD M. HOFSTRA, M.D.; MARK S. MCALLISTER, M.D.; LOUISE DELYTE MORRIS, P.A.; ASHOK V. PADHIAR, M.D.; JOHN P. ROBINSON, D.O.; ALAN B. STORROW, M.D.; ROBERT R. SUMMERS, D.O.; AND MARY MEI-LING YUN, M.D. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PROBATIONARY REPORTS AND REQUESTS

LOREN S. CARLSON, D.O.

Dr. Carlson's request for elimination of her chart review requirement was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 8, 2003. DR. STEINBERGH FURTHER MOVED TO ELIMINATE DR. CARLSON'S CHART REVIEW REQUIREMENT. DR. GARG SECONDED THE MOTION.

A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

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KEVIN R. CLARK, M.D.

Dr. Clark's requests for revisions to the terms of his September 13, 2000 consent agreement were presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO DENY DR. CLARK'S REQUEST FOR A REDUCTION IN HIS DRUG SCREEN REQUIREMENT AND A REDUCTION IN HIS ALCOHOL AND DRUG REHABILITATION MEETING REQUIREMENT. DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 7, 2003. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PETER E. DINTIMAN, M.D.

Dr. Dintiman's request for revisions to the terms of the Board's Order of April 12, 2001 was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO DENY DR. DINTIMAN'S REQUESTS FOR A REDUCTION IN HIS DRUG SCREEN REQUIREMENT AND A REDUCTION IN HIS APPEARANCE SCHEDULE. DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 7, 2003. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

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The motion carried.

JOHN D. FREED, M.D.

Dr. Freed's request for revisions in the terms of his September 12, 2001 Consent Agreement was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE DR. FREED'S REQUEST FOR A REDUCTION IN HIS APPEARANCE SCHEDULE FROM EVERY THREE MONTHS TO EVERY SIX MONTHS. DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 9, 2003. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

JAMES H. GRAY, JR., D.O.

Dr. Gray'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. GRAY'S REQUEST FOR A REDUCTION IN HIS APPEARANCE SCHEDULE FROM EVERY THREE MONTHS TO EVERY SIX MONTHS. DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 8, 2003. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

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The motion carried.

MARK T. HALLE, M.D.

Dr. Halle's requests for approval to change psychiatrists, and approval of a practice plan were presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE RICHARD E. MINTER, M.D., TO SERVE AS DR. HALLE'S NEW TREATING PSYCHIATRIST. DR. STEINBERGH FURTHER MOVED TO APPROVE DR. HALLE'S PROPOSED PRACTICE PLAN TO PERFORM VOLUNTEER WORK. DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 8, 2003. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

THOMAS A. HUNTER, P.A.

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

DR. BHATI MOVED TO REDUCE MR. HUNTER'S APPEARANCE SCHEDULE FROM EVERY THREE MONTHS TO EVERY SIX MONTHS. DR. BHATI FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 8, 2003. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye

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Dr. Garg - aye
Dr. Steinbergh - aye

The motion carried.

ANTHONY W. KITCHEN, M.D.

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

DR. STEINBERGH MOVED TO APPROVE EDMOND L. PASTERNAK, D.O., TO SERVE AS DR. KITCHEN'S MONITORING PHYSICIAN, WITH 20 CHARTS REVIEWED ON A MONTHLY BASIS. DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 7, 2003. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Bhati	- aye
Dr. Kumar	- aye
Ms. Sloan	- aye
Dr. Davidson	- aye
Dr. Robbins	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

ROBERT S. REEVES, JR., M.D.

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

DR. BHATI MOVED TO APPROVE BENJAMIN E. BALL, D.O., TO SERVE AS DR. REEVES' MONITORING PHYSICIAN, WITH TEN (10) CHARTS REVIEWED PER MONTH. DR. BHATI FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 8, 2003. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Bhati	- aye
Dr. Kumar	- aye
Ms. Sloan	- aye
Dr. Davidson	- aye

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Dr. Robbins	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

JESSICA A. ROSS, M.D.

Dr. Ross' request for approval of a professional ethics course was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE CASE WESTERN RESERVE UNIVERSITY'S INTENSIVE COURSE IN MEDICAL ETHICS AND PROFESSIONALISM AS FULFILLING PARAGRAPH B.2. OF THE BOARD'S ORDER OF SEPTEMBER 11, 2002. DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON JULY 8, 2003. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PROBATIONARY REQUESTS

DAVID T. BROCK, D.O.

Dr. Brock's request for the Board's acceptance of his current Florida monitoring was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO ACCEPT THE FLORIDA MONITORING WHILE DR. BROCK IS IN FLORIDA. DR. BHATI SECONDED THE MOTION.

Dr. Egner stated that it appears to her that Dr. Brock wants to change the terms of his Consent Agreement considerably. She stated that she's not in favor of that at all. Dr. Brock has a consent agreement in Florida and he has one in Ohio. Unfortunately, he's going to have to abide by both. She knows that it's inconvenient to have two agreements, but she doesn't like changing. She referred to the differences in the two agreements. She believes the Board should stick to the agreement he's made in Ohio.

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Dr. Steinbergh stated that Dr. Brock is in his residency and is returning to Ohio in March 2004. If the Board chooses, the Ohio terms can be put back in place. She referred to Dr. Brock's letter of June 24, 2003, and indicated that it appears that Dr. Brock is very stable. His request appeared appropriate to her.

Dr. Egner stated that the requested changes look like pretty big things to her. Reading from the request she noted that drug screens will be collected on a random basis, but not necessarily once a week, chart monitoring during the residency will not be performed.

Dr. Talmage stated that chart review is done normally as a part of the residency.

Dr. Egner stated that she would say that it's probably not being performed.

Dr. Steinbergh stated that she thinks that Dr. Brock means that it won't be done by a monitor, according to the Ohio Agreement.

Dr. Talmage stated that, as a resident, all charts are monitored.

Mr. Albert stated that he and Ms. Bickers looked over this request this morning. Dr. Brock has been under probation with the Board for a year.

Ms. Bickers stated that he was with Ohio for a year, then he went to Florida, tolled the terms of the Consent Agreement because he didn't have monitoring established. Now he does and he wants to start the clock back up again and is asking that the Board accept the Florida PRN monitoring.

Dr. Garg asked what the Board knows about Florida PRN.

Ms. Bickers stated that all the Board knows is what Dr. Brock submitted. When he returns to Ohio in March, the Board can return to the Ohio terms.

Mr. Albert stated that if he were in Ohio now, the Board would have decreased appearances from every three months to every six months, and the Board would have decreased urine screens from weekly to two per month. He noted that Florida advises that psychiatric sessions will not be conducted. Mr. Albert stated that the Board should at least have a quarterly report from his psychologist. Mr. Albert stated that he would not be in favor of going beyond what he would be doing were he in Ohio.

DR. STEINBERGH WITHDREW HER MOTION.

MR. ALBERT MOVED TO REQUIRE DR. BROCK: TO APPEAR BEFORE THE BOARD EVERY SIX MONTHS; TO SUBMIT TWO RANDOM URINE SAMPLES FOR TESTING PER MONTH; TO ARRANGE FOR THE BOARD TO RECEIVE A REPORT FROM HIS TREATING PSYCHOLOGIST EVERY THREE MONTHS; AND TO APPEAR BEFORE THE FULL BOARD PRIOR TO HIS RETURN TO PRACTICE IN OHIO. DR. BHATI SECONDED THE MOTION.

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Dr. Davidson asked how much time, if the Board does count his time in Florida, Dr. Brock will be operating under the terms of the Board's agreement.

Ms. Bickers explained that Dr. Brock spent a year in Florida, setting up his residency program and not being monitored by anyone. That year will be tacked on to the time he has left to serve.

Dr. Steinberg stated that she tends to agree with Dr. Egner; just let Dr. Brock meet Ohio's conditions.

Ms. Bickers stated that that is what the Board typically does.

Mr. Schmidt stated that he believes it is the consensus opinion on the enforcement staff, himself, Mr. Dilling and others that if a doctor leaves Ohio and is not on any monitoring at all that his probationary term is tolled. When he comes back, the Board picks up the monitoring where it left off. The Board doesn't know what's gone on in the intervening six months or six years. The way the consent agreements and orders are written is that, if the person is out of state, the probation is tolled unless the Board determines that adequate monitoring is being conducted. Does adequate monitoring have to be the exact monitoring Ohio would do? The Board could argue that it does, but this is not a person who is currently providing services to the citizens that Ohio protects.

Dr. Steinbergh stated that Dr. Brock indicates that he could have Florida PRN send the Board a summary letter. She stated that her guess is that Dr. Brock wants to get back into monitoring so that he can prove himself to the Board. He has a practice setup starting in March 2004, so he knows that he's coming back to Ohio. Dr. Steinbergh stated that, even if the Board says that it won't change anything, Dr. Brock will probably do it because he wants to get going on this.

Ms. Bickers stated that that is correct. Dr. Brock has indicated that he will do whatever the Board wants, but he asked whether the Board would be willing to accept these other terms.

Dr. Steinbergh stated that she agrees with Dr. Egner that the Board should require Dr. Brock to commit himself to the Consent Agreement.

Dr. Talmage stated that the motion before the Board is to impose random urine screens twice a month, appearances before the Secretary and Supervising Member every six months, quarterly psychologist report and an appearance before the full Board upon returning to Ohio.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye

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Dr. Garg - aye
Dr. Steinbergh - aye

The motion carried.

FRANK R. BRUENING, M.D.

Dr. Bruening's requests for approval of a treating psychiatrist and a treating psychologist were presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE THOMAS SHERMAN, M.D., TO SERVE AS DR. BRUENING'S TREATING PSYCHIATRIST AND HY P. KISIN, PH.D., TO SERVE AS DR. BRUENING'S TREATING PSYCHOLOGIST. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Bhati	- aye
Dr. Kumar	- aye
Ms. Sloan	- aye
Dr. Davidson	- aye
Dr. Robbins	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

CAROL E. LEWIS, M.D.

Dr. Lewis' requests for approval of a psychiatrist, a counselor and a practice plan were presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE: HARRY W. POLLOCK, M.D., TO SERVE AS DR. LEWIS' TREATING PSYCHIATRIST; DEBORAH BONEM, L.I.S.W., TO SERVE AS DR. LEWIS' COUNSELOR; AND THE PRACTICE PLAN PROPOSED IN DR. LEWIS' LETTER OF JULY 21, 2003, A COPY OF WHICH SHALL BE MAINTAINED IN THE EXHIBITS SECTION OF THIS JOURNAL. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Bhati	- aye
Dr. Kumar	- aye
Ms. Sloan	- aye
Dr. Davidson	- aye

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Dr. Robbins	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

ROBERT F. LINN, D.O.

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

DR. GARG MOVED TO APPROVE GARY A. BALSTER, M.D., TO SERVE AS DR. LINN'S TREATING PSYCHIATRIST. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

WILLIAM H. NOBLE, III, D.O.

Dr. Noble's request for a change in monitoring physicians was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE DONALD E. WIDMAN, M.D., TO SERVE AS DR. NOBLE'S NEW MONITORING PHYSICIAN. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

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The motion carried.

LAWRENCE B. ROTHSTEIN, M.D.

Dr. Rothstein's requests for approval of a new depression management physician/therapist and a new monitoring physician were presented to the Board for consideration at this time.

DR. GARG MOVED TO APPROVE WILLIAM V. ROLL, PH.D, TO SERVE AS DR. ROTHSTEIN'S DEPRESSION MANAGEMENT THERAPIST AND WILLIAM KAM-YUEN LOH, M.D., TO SERVE AS DR. ROTHSTEIN'S MONITORING PHYSICIAN. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

CLIFFORD SONNIE, M.D.

Dr. Sonnie's request for approval of courses required by the Board's Order of May 13, 1998, was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE CASE WESTERN RESERVE UNIVERSITY'S COURSE, *PRINCIPLES OF CHEMICAL DEPENDENCE FOR THE PRIMARY CARE PRACTITIONER*, AND THE AMA'S PROGRAM, *PAIN MANAGEMENT – THE SERIES*, AS FULFILLING THE REQUIREMENT OF PARAGRAPH 3.E. OF THE BOARD'S ORDER OF MAY 13, 1998. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye

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Dr. Steinbergh - aye

The motion carried.

REINSTATEMENT REQUESTS

ASHFAQ TAJ AHMED, M.D.

Dr. Ahmed's request for approval of a course in personal and professional ethics was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE THE MEDICAL COLLEGE OF OHIO'S "ADVANCED SEMINAR ON PERSONAL AND PROFESSIONAL ETHICS," TAUGHT BY JOY D. SKEEL, M.DIV., DIRECTOR OF MEDICAL HUMANITIES, AS FULFILLMENT OF PARAGRAPH B(2) OF THE BOARD'S ORDER OF JUNE 11, 2003 IN THE MATTER OF ASHFAQ TAJ AHMED, M.D. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

IRENEO T. CADSAWAN, M.D.

Dr. Cadsawan's request for approval of an ethics course was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE CASE WESTERN RESERVE UNIVERSITY'S *INTENSIVE COURSE IN ETHICS AND PROFESSIONALISM*, AS FULFILLING PARAGRAPH B(2) OF THE BOARD'S ORDER OF APRIL 2, 2003 IN THE MATTER OF IRENEO T. CADSAWAN, M.D. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye

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Dr. Davidson	- aye
Dr. Robbins	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

LICENSURE

P.A. UTILIZATION PLANS

A number of standard P.A. Utilization Plans were presented to the Board for consideration at this time.

Dr. Steinbergh stated that she had questions about the plans submitted by CNS Center for Neuro & Spine and by Springfield Endocrinology & Internal Medicine.

DR. GARG MOVED TO APPROVE THE STANDARD P.A. UTILIZATION PLANS SUBMITTED BY: BLANCHARD VALLEY WOMENS CARE, LLC; MIAMISBURG FAMILY PRACTICE; CINCINNATI CHILDREN'S HOSPITAL MEDICAL CENTER; PLASTIC SURGERY, INC.; UNIVERSITY SURGICAL ASSOCIATES; AND SAYED YOUSSEF, M.D., CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. MR. ALBERT SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

CNS CENTER FOR NEURO & SPINE

Dr. Steinbergh noted that this was a request to change a previously approved plan. She stated that she just wanted to make certain that the box for assisting in surgery was checked on the original utilization plan. She suggested that Ms. Hacker check the box, and then initial and date it for today's date.

DR. GARG MOVED TO APPROVE CNS CENTER FOR NEURO & SPINE'S REQUEST TO REVISE THEIR UTILIZATION PLAN TO ALLOW THE P.A. TO ASSIST IN SURGERY.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

SPRINGFIELD ENDOCRINOLOGY & INTERNAL MEDICINE

Dr. Steinbergh stated that she had a question about the nursing home issue and the number of patients the P.A. would see. The Board has received a letter from M. Husain Jawadi, M.D., F.A.C.P., F.A.C.E., indicating that he would resubmit the nursing home request at the time he has a contract with a nursing home. Dr. Jawadi also agreed to limit the number of patients the P.A. will see to 25.

DR. GARG MOVED TO APPROVE SPRINGFIELD ENDOCRINOLOGY & INTERNAL MEDICINE'S P.A. UTILIZATION PLAN, AS AMENDED BY DR. JAWADI'S LETTER AND CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PHYSICIAN ASSISTANT APPLICANTS

At this time the Board considered applications for registration as physician assistants.

MR. ALBERT MOVED TO APPROVE THE APPLICANTS LISTED IN LICENSURE EXHIBIT

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(A) FOR REGISTRATION AS PHYSICIAN ASSISTANTS, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PAIN MANAGEMENT ASSOCIATES OF DAYTON, P.A. UTILIZATION PLAN

Dr. Talmage noted that the above-captioned P.A. Utilization Plans was omitted from the earlier list approved by the Board.

DR. STEINBERGH MOVED TO APPROVE PAIN MANAGEMENT ASSOCIATES OF DAYTON'S STANDARD P.A. UTILIZATION PLAN, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. DR. ROBBINS SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

SUZANNE SMITH, M.T. APPLICANT

Ms. Smith's request for licensure as a massage therapist, based on her having passed the December 2002 massage therapy examination, was presented to the Board for consideration at this time.

Mr. Dilling advised that the Board earlier ratified a consent agreement with Ms. Smith.

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DR. STEINBERGH MOVED TO APPROVE MS. SMITH'S REQUEST FOR LICENSURE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS, AND SUBJECT TO THE TERMS OF HER AUGUST 13, 2003 CONSENT AGREEMENT. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PETER FRAGATOS, M.D.

Dr. Fragatos' request for endorsement of his L.M.C.C. licentiate status was presented to the Board for consideration at this time.

Mr. Dilling noted that the Board ratified a consent agreement with Dr. Fragatos earlier in the meeting.

DR. STEINBERGH MOVED TO APPROVE DR. FRAGATOS' REQUEST FOR ENDORSEMENT LICENSURE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS, AND SUBJECT TO THE TERMS OF HIS AUGUST 13, 2003 CONSENT AGREEMENT. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

The motion carried.

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PHYSICIAN LICENSURE APPLICANTS

At this time the Board considered applications for licensure as doctors of medicine and surgery, doctors of osteopathic medicine and surgery and doctors of podiatric medicine and surgery.

DR. GARG MOVED TO APPROVE THE APPLICANTS LISTED IN LICENSURE EXHIBIT (B) FOR ENDORSEMENT LICENSURE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. MR. ALBERT SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PHYSICIAN ASSISTANT APPLICANTS

At this time the Board considered applications for both full and temporary registration as physician assistants.

DR. GARG MOVED TO APPROVE THE APPLICANTS LISTED IN LICENSURE EXHIBIT (C) FOR REGISTRATION AS PHYSICIAN ASSISTANTS, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. DR. ROBBINS SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

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DELHI FAMILY CARE ASSOCIATES – P.A. UTILIZATION PLAN

The above-captioned standard P.A. Utilization Plan was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE THE STANDARD P.A. UTILIZATION PLANS SUBMITTED BY DELHI FAMILY CARE ASSOCIATES, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. MR. ALBERT SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

PREMIER CARDIOTHORACIC & VASCULAR SURGEONS, INC. – P.A. UTILIZATION PLANS

The above-captioned standard P.A. Utilization Plan was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE THE STANDARD P.A. UTILIZATION PLAN SUBMITTED BY PREMIER CARDIOTHORACIC & VASCULAR SURGEONS, INC., CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. MR. ALBERT SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

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UNIVERSITY HOSPITAL HEALTH SYSTEM, RICHMOND HTS. CAMPUS – P.A. UTILIZATION PLAN

The above-captioned standard P.A. Utilization Plan was presented to the Board for consideration at this time.

DR. GARG MOVED TO APPROVE THE STANDARD P.A. UTILIZATION PLAN SUBMITTED BY UNIVERSITY HOSPITAL HEALTH SYSTEM, RICHMOND HTS. CAMPUS, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. DR. ROBBINS SECONDED THE MOTION.

A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

JUNE 2003 MASSAGE THERAPY EXAMINATION RESULTS

At this time the Board reviewed the results of the June 2003 massage therapy examination.

DR. GARG MOVED TO APPROVE THE RESULTS OF THE JUNE 2003 MASSAGE THERAPY EXAMINATION, AND TO CERTIFY AS PASSING AND LICENSE THOSE RECEIVING A SCORE OF 75 OR GREATER ON THE EXAMINATION, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS, AND TO CERTIFY AS FAILING AND DENY LICENSURE TO THOSE WHO RECEIVED A SCORE OF LESS THAN 75 ON THE EXAMINATION.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye

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Dr. Garg - aye
Dr. Steinbergh - aye

The motion carried.

BARBARA ANN PHIBBS, ACUPUNCTURIST APPLICANT

Ms. Phibbs' application for registration as an acupuncturist was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE MS. PHIBBS' REQUEST FOR REGISTRATION AS AN ACUPUNCTURIST, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Bhati	- aye
Dr. Kumar	- aye
Ms. Sloan	- aye
Dr. Davidson	- aye
Dr. Robbins	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye

The motion carried.

ADMINISTRATIVE REPORT

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

REPORTS OF ASSIGNED COMMITTEES

EXECUTIVE COMMITTEE

Dr. Talmage stated that the Committee discussed all of the issues contained in Mr. Dilling's administrative report.

Mr. Dilling stated that Dr. Kumar has suggested discussing minimal standards of care in terms of doctors not certified in specialties as a retreat topic. Dr. Kumar has expressed concern over physicians who are jumping from one area of medicine to another, without appropriate training.

Dr. Kumar stated that the Board licenses physicians to practice. The only things that restrict physicians are

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the hospitals. Hospitals only credential neurosurgeons to do neurosurgery. The problem that comes up is that there are a lot of physicians who work outside hospitals who do things that are detrimental to the population. He noted that there are family doctors who take a one-day course on performing liposuction, and they're doing liposuction in their offices. He has seen resulting extensive complications in the emergency room. The Board isn't being proactive in preventing these people from doing those things. There has to be some mechanism that, when the Board licenses someone, it tells the physician that he can only do what he is trained to do. If you're in family practice, you can do family practice; if you're a surgeon, you can do surgery.

Dr. Kumar stated that he doesn't know how to go about this. It's a big issue and opens a big Pandora's box. He thought that it would be a good discussion for retreat.

Dr. Talmage stated that the Committee also discussed using the Thursday morning sessions for addressing issues that would take about an hour to address, and saving the retreat for those issues that require two or more hours of discussion.

Mr. Dilling stated his idea for the retreat was to focus on a single issue that would allow the Board to go into a lot of different areas. That issue would be the question, "what is proper discipline?" How much discipline is enough to accomplish the Board's tasks? Mr. Dilling stated that he believes the Board would benefit from some prolonged discussion in a retreat-type setting, a little more relaxed setting, to talk about those issues.

Mr. Dilling stated that Mr. Browning asked him to put his ideas on paper and give the Board two choices: the one he just mentioned, and a choice that would be more of a potpourri of ideas, of which minimal standards could be one. He added that Dr. Steinbergh had brought up looking for a little more foundation about what the Board does. He suggested that that could be done at the September meeting for about an hour. That would be a good lead-in for the October meeting. Mr. Dilling stated that he will prepare those and get them to Board members, and Board members can vote on which they would prefer.

Dr. Garg stated that Dr. Kumar has brought up a very valid point and is of concern all of the time. He added that it's not just a matter of crossing specialties. Some specialists may be doing things in which they were not trained. Unfortunately, the way he understands the current legislation, the Board can't give a limited, restricted or focused license. To do so would probably need a legislative change.

Mr. Dilling stated that it would if you go that far. The Board is just at the discussion stage at this time.

Dr. Garg stated that if someone is doing harm by doing a procedure after viewing a two-minute video on the subject, that becomes the basis for a complaint to the Board. That establishment or physician would then be investigated.

Dr. Kumar stated that he understands that, but one of the problems he had about filing a complaint himself was that it could be construed as being filed because he is in competition.

Dr. Talmage stated that it would be an anonymous complaint, looked into by the investigator. That's no

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problem.

Dr. Garg stated that it doesn't matter if it is competition. If in a physician's view another physician is doing harm, it should be reported. Physicians in that specialty would be better judges because they would know what harm is being done.

Continuing the Executive Committee report, Mr. Dilling stated that, historically, he has brought out-of-state travel requests to the Executive Committee for approval. The Executive Committee has informed him that he no longer has to come to the Committee with these requests, unless it is a larger than usual request. Mr. Dilling stated that he will keep the Board informed of the out-of-state travel done by the Board and staff.

Mr. Dilling continued that the Board has one new investigator who will be sent to CLEAR investigator training in Toronto. He will also be sending Ms. Gilbert to a Federation Management meeting in Seattle, where the main topic will be malpractice issues. Mr. Schmidt has been asked to speak on Internet prescribing at the National Association of Drug Diversion Investigators (NADDI) Conference in Ft. Lauderdale in November. NADDI would pay Mr. Schmidt's way.

Dr. Talmage suggested that the out-of-state travel requests be appended to the minutes of the Executive Committee so that retrospectively everyone would have a review. That way, if an objection arises, it can be handled and the travel policy could be reviewed.

Mr. Dilling advised that Mr. Albert and Dr. Kumar has expressed an interest in attending a FSMB presentation on impairment. He stated that if Board members are interested in attending such seminars, they should contact him.

EDUCATION, PUBLIC RELATIONS & RISK MANAGEMENT COMMITTEE

Dr. Egner referred to Ms. Lubow's memorandum of July 30, 2003, a copy of which shall be maintained in the exhibits section of this journal, indicating that the Board has been invited to co-sponsor the Agency for Healthcare Research and Quality's (AHRQ) WebM&M website. Dr. Egner stated that this will not cost the Medical Board anything, and that it will require minimum involvement on the Board's part. The Committee recommends the Board accept the invitation.

DR. EGNER MOVED TO ACCEPT AHRQ'S INVITATION TO CO-SPONSOR ITS WEBM&M WEBSITE. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye

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Dr. Garg - aye
 Dr. Steinbergh - aye

The motion carried.

PRESCRIBING AND PAIN MANAGEMENT COMMITTEE

Dr. Davidson stated that the Committee discussed a proposed newsletter article on the proper relationship between pharmaceutical representatives and physicians regarding gifts. The proposed article lists points made in an AMA's Council on Ethical and Judicial Affairs opinion. During discussion of the proposed article, Mr. Schmidt pointed out that the first item listed in opinion E-8.061, which states that the use of drug samples for personal or family use is permissible is not in concert with state and federal law. The Committee will discuss this article further. She asked that the Board approve the newsletter in concept.

Dr. Bhati stated that he would prefer to see the amended article prior to approval.

IMPAIRMENT COMMITTEE

Mr. Albert stated that the Committee reviewed applications for approval of three treatment providers, and recommends approval of all three.

DR. STEINBERGH MOVED TO APPROVE THE FOLLOWING TREATMENT PROVIDERS: HAZELDEN FOUNDATION, CENTER CITY, MN; HAZELDEN SPRINGBROOK, NEWBERG, OH; AND LAURELWOOD HOSPITAL, WILLOUGHBY, OH. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

LEGISLATIVE LIAISON AND RULES REVIEW COMMITTEE

Mr. Wayda stated that there is one issue the Committee discussed and with which the Board must deal: the Pharmacy Board's proposed rule on protocols.

Dr. Davidson stated that this was one of the first issues she heard about when joining the Board. The

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Nursing Board, the Pharmacy Board and the Medical Board (Boards) joined together to address the issue of the use of protocols to initiate or adjust medications. The group had very narrow situations where a protocol could be used, and it became clear that there were a lot of situations out there that were exceeding those protocols. The Boards got together and reiterated what was in statutes about this. She noted that the dialysis groups and respiratory therapist groups were ones that had big objections.

Dr. Davidson stated that the Pharmacy Board is looking for the Board's concurring with their moving forward with these rules. They are on a time table, and need the Board to be with them in theory. As a result of their work, the group adding general principles that would flesh out the protocol language that will alleviate the dialysis groups' concerns, as well as the respiratory therapists' situation.

Mr. Wayda explained that the problem that is arising is that the general approach addresses the Boards' concerns about this type of practice. The Boards' concern generally is that the physician or the prescriber ought to be prescribing; and people who are authorized only to administer drugs should only administer and should not be prescribing. The problem is that general rules that lean in that direction are at odds with the practice that some of these groups are doing in the field. Mr. Wayda stated that what the Boards are beginning to see that what they thought may have been an opening to get some agreement on this rule may not be so agreeable to all of the parties. The proposed rule specifically deals with adjustments of dosage of high therapeutic index drugs. The way the rule is currently drafted, it says that you can have a non-prescriber who is authorized in their scope of practice to administer the drug and, with a mathematical formula allow them to do one change of dosage in these specific high therapeutic drugs. Before that non-prescriber can make a second change in dosage, they have to report the first change to a prescriber, and the prescriber has to acknowledge that they recognize that the dosage change has been made and say they're still on protocol. That then authorizes the non-prescriber to make a second dose adjustment. The result is that you don't have a non-prescriber making more than one change in dosage before a prescriber acknowledges and signs off on it.

Mr. Wayda stated that that is seen by some groups as a problem. For example, in a dialysis center, a physician may be reviewing records weekly for someone who has three dose adjustments in a week, or someone who has three or four in a month, in which case the physician would be reviewing the case monthly. Their argument is that, in a single-practice nephrologist with 2500 patients, if only ten percent of those people have dose adjustments, the amount of paperwork and review required to have a physician review every single dose adjustment is too great a burden. Mr. Wayda stated that their arguments are that these are high therapeutic index drugs, which means it's really hard to hurt somebody with them, and there are studies that indicate that the key is maintaining a range of blood level results.

Dr. Kumar stated that many hospitals have a heparin protocol which calls for a nurse to adjust the dose of heparin being given based upon lab reports. That may happen more than once in a day's time.

Mr. Wayda stated that the current rule would allow for the nurse to do that once, and then the physician would have to look at it and say that it's okay to adjust it a second time if the next set of results are off from what they should be.

Mr. Wayda noted that Mark Keeley, Legislative Affairs Administrative for the Pharmacy Board is present.

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Mr. Keeley stated that there is also a sliding scale for insulin. The Pharmacy Board thought that the proposed rule would solve the problem by having a rule that allows for a sliding scale, but require communication between the prescriber and the non-prescriber. Before, there was nothing that would address a sliding scale.

Dr. Talmage asked whether this issue must be addressed before the October Board meeting. He stated that the Board has nothing written up for it on this, and making a decision is somewhat difficult, particularly at this hour.

Mr. Wayda stated that the Pharmacy Board, because of the structure of their rulemaking process and the need for them to get a set of rules through their process, will be looking at their September meeting which will take place the same week as the Medical Board's September meeting. The Pharmacy Board needs some feedback from the Medical Board. He stated that they are not asking that the Medical Board approve the language, but indicate whether it approves of the direction being taken.

Mr. Dilling stated that the ultimate goal is to avoid legislation and a number of groups going in to change the statute. The staff is not asking that the Board sign off on the rule, but it's asking that the Board approve the concept of a rule.

Mr. Albert and Dr. Garg supported the concept of a rule.

Dr. Steinbergh stated that she feels that the Board is in agreement here.

Dr. Bhati stated that this is a difficult issue. It doesn't just affect the nephrology and respiratory departments, but practically every department. Dr. Bhati's not quite sure that they would be willing to accept this rule. He would not sign on this rule, but would look at it when it's ready.

Dr. Garg stated that the Pharmacy Board is asking whether it is going in the right direction.

Mr. Wayda stated that a lot of the comments about this has been a result of the Joint State of the Boards, which is a statement of what is permissible by State Law. It says that many of the things being done as protocols are illegal under current law. The rule would create minor expansions under the current law to allow some of these practices to continue.

Dr. Talmage asked that the Board be kept up to date on this rule.

LICENSURE COMMITTEE

Dr. Talmage advised that the Committee reviewed the restoration applications of Robert Klappert Johnson, M.D., and Everett Leroy Jung, M.D. Both physicians' licenses lapsed in October 2000. The Committee moved to approve restoration, subject to their passing the SPEX.

DR. BHATI MOVED TO APPROVE DR. JOHNSON'S AND DR. JUNG'S REQUESTS FOR

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RESTORATION OF THEIR LICENSES TO PRACTICE MEDICINE AND SURGERY IN OHIO SUBJECT TO THEIR PASSING THE SPEX. DR. GARG SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

LIMITED BRANCH & ALTERNATIVE MEDICINE COMMITTEE

Dr. Talmage advised that the Committee reviewed the results of the Massage Therapy examination scores, which the Board earlier discussed under Licensure.

Dr. Talmage stated that the Committee also reviewed applications for certificates of good standing for two schools: The Northcoast Medical Training Academy in Kent, Ohio, and the Red Mountain Institute in Birmingham, Alabama, and recommends approval of both.

MR. ALBERT MOVED TO GRANT CERTIFICATES OF GOOD STANDING TO THE NORTHCOAST MEDICAL TRAINING ACADEMY AND THE RED MOUNTAIN INSTITUTE. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

Dr. Talmage stated that the committee also reviewed proposed revisions to revised rule 4731-1-15, and recommends the Board proceed to the rulemaking process.

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DR. GARG MOVED TO ACCEPT PROPOSED AMENDED RULE 4731-1-15 AND TO PROCEED TO THE RULEMAKING PROCESS. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

P.A. COMMITTEE

Dr. Talmage stated that the Committee reviewed supplemental P.A. utilization requests and recommended approval of all.

DR. GARG MOVED TO APPROVE THE HEART INSTITUTE OF NW OHIO'S SUPPLEMENTAL REQUEST FOR THE REMOVAL OF SWAN GANZ CATHETERS AND NON-INVASIVE CARDIOVASCULAR STUDIES AND OHIO HEART CARE'S SUPPLEMENTAL REQUEST FOR NON-INVASIVE CARDIOVASCULAR STUDIES. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Bhati	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

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

Thereupon at 5:40 p.m. the August 13, 2003 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,

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meeting on August 13, 2003, as approved on September 10, 2003.



R. Gregory Browning, President



Lance A. Talmage, M.D., Secretary

(SEAL)

