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**MINUTES**

**THE STATE MEDICAL BOARD OF OHIO**

**September 10, 2003**

R. Gregory Browning, Ph.D., President, called the meeting to order at 1:00 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.; David S. Buchan, D.P.M.; 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: Anant R. Bhati, M.D.

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. Baldwin, 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; 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.

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: Marc J. Bernstein, M.D.; Thomas Anh Nguyen, M.D.; Oscar H. Salvat, M.D.; and Jack E. Steele, M.D. A roll call was taken:

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

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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. Buchan	- 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.

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

MARC J. BERNSTEIN, M.D.

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

**DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF MARC J. BERNSTEIN, M.D. MS. SLOAN SECONDED THE MOTION.**

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

Dr. Buchan stated that Dr. Bernstein pled guilty to the abuse of a patient. The record is consistent with the proposal to permanently revoke Dr. Bernstein's license. Dr. Buchan stated that the Board has talked about this before and will continue to use the harshest penalty in these matters.

Dr. Steinbergh stated that this is a case of sexual misconduct in the course of practice. Dr. Bernstein

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surrendered his New York and Pennsylvania licenses, and he has allowed his other licenses to expire. He hasn't practiced in Ohio since October 2002. The Findings and Conclusions in this case are appropriate, and she supports the Proposed Order.

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

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

The motion carried.

THOMAS ANH NGUYEN, M.D.

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

**DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF THOMAS ANH NGUYEN, M.D. DR. ROBBINS SECONDED THE MOTION.**

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

Dr. Steinbergh stated that this is a case involving severe impairment and a felony conviction. The Proposed Order suspends Dr. Nguyen's license for 18 months and places him on probation for five years. It also requires that he practice under a Board-approved practice plan. Dr. Steinbergh stated that she believes the Proposed Order is appropriate in this case.

Dr. Buchan agreed with Dr. Steinbergh. He added that he at first thought that the Proposed Order was cumbersome since there wasn't a hearing in this matter, but he does feel that it is appropriate. He commended Ms. Murphy for her work in this case.

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

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

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

The motion carried.

OSCAR H. SALVAT, M.D.

Mr. Browning directed the Board's attention to the matter of Oscar H. Salvat, M.D. 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 timely filed on behalf of Dr. Salvat. Five minutes would be allowed for that address.

At this time it was determined that Dr. Salvat was not present.

**DR. STEINBERGH MOVED TO TABLE THE REPORT AND RECOMMENDATION IN THE MATTER OF DR. SALVAT TO ALLOW DR. SALVAT TIME TO ARRIVE TO ADDRESS THE BOARD. 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.

JACK E. STEELE, M.D.

Mr. Browning directed the Board's attention to the matter of Jack E. Steele, M.D. He advised that objections were filed to Hearing Examiner Porter'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. Steele.

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Five minutes would be allowed for that address.

Dr. Steele stated that he didn't come to protect his valuable medical income. Practicing has cost him over \$20,000 in the last ten years. He came to alert the Board to the practices of the examining board. What he was led to believe was to be a review of the patient's treatment by examining the various treating doctors' records turned out to be something very different. Dr. Steele stated that the only records examined were his, and the hearing turned out to be an attack on him personally. This was possibly the result of a peevish pharmacist's anonymous accusation. She objected to his prescription blanks being photocopied rather than commercially printed; she accused the patients of copying them, which they never did; she asked that he use colored ink to prevent copying; and finally she refused to fill any of his prescriptions. She is the only one he knows who thought he was a bad physician.

Dr. Steele stated that he has long worked with drug addicts. He was a physician with BUDA (Bureau of Drug Abuse); for years he was Medical Director of DMHC (Dayton Mental Health Center) drug dependency treatment unit; methadone maintenance, and in-house detoxification and therapeutic community which cured addicts, although not all.

Dr. Steele stated that he resents it when an inexperienced physician, who has never treated drug addicts or marital problems, criticizes his treatment on the basis of records alone, particularly when he ignores the fact that the treatment was successful. The patients have been drug free for many months. The patients were also cured of two psychosomatic complaints which caused previous physicians to prescribe narcotics. Their marriage is the best it has ever been. Patient #2 takes no drugs for fibromyalgia and Patient #1 walks upright without a cane and does not complain of back pain.

Dr. Steele continued that Dr. Karp criticized his records for being of the old fashioned, narrative type. They certainly were. He is an old fashioned doctor. The records were designed to guide his treatment, not to convince others of his competence. His patient's welfare is his first consideration. He used a beta adrenergic blocker on a patient in the Dayton Mental Health Center, who'd murdered an attendant. That was ten years before FDA approved the drug for controlling violent outbreaks. After that, the patient became such a pussy cat that they wanted to move him to an opened, mixed ward. In another case, a patient's family told a judge that the patient didn't need medicine, that Jesus would cure him. A judge ordered his medication stopped. In his ensuing misery the patient killed himself. Dr. Steele commented that judges don't need licenses to make medical decisions.

Dr. Steele stated that the 'hearing' consisted of the prosecutor and Dr. Karp reading previously prepared scripts to support a previously made conclusion. Any competent psychiatrist should know that Dr. Karp's 'cook book' approach, using standard tests yielding symptom lists, and a diagnosis implying what drug to give, wouldn't work for addiction or any other personality-character dysfunction. There is no effective drug treatment for these conditions. Dr. Steele stated that, during the hearing, he asked Dr. Karp how he would have treated the patients. He would have sent them away untreated, he said, first to the referring physician. Dr. Steele stated that that would be impossible because the patients were self referred. Dr. Karp said that he would then send them to a drug treatment clinic. Dr. Steele commented that there is presently a two-year waiting list for that.

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Dr. Steele concluded that his treatment may have been less than standard, but it succeeded and was certainly better than Dr Karp's proposal. He doesn't believe that taking his license away will improve patient treatment, though as he said, he is not here to defend his license, but to make the Board aware of the methods of the Board review. Who in the whole procedure cared anything about the patient's welfare? A number of criticisms of his record were his not ordering this, that and the other thing, which were ordered by the physicians at Miami Valley Hospital. Dr. Steele stated that he was aware of the results of the x-rays, EKGs, EEGs, stuff like that. He didn't redundantly put the information in his record, too. When he brought the Miami Valley records, they didn't want to look at them. They said they hadn't been certified or something, but he believes that the real reason was that the records didn't support their previously made conclusions.

Dr. Steele noted that this was his second Board hearing. Had they taken his license after the first hearing, two patients would still be drug-seeking addicts with psychosomatic disease for which they requested narcotics.

Mr. Browning advised Dr. Steele that he had a minute to conclude his statement.

Dr. Steele stated that the Hearing Examiner didn't accept the records of the patients who were cured; that apparently wasn't relevant.

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

Mr. Wilcox spoke in support of the Hearing Examiner's Report and Recommendation, noting that it does an excellent job of highlighting the important aspects of Dr. Steele's hearing. As documented in the Report and Recommendation, the expert testimony of Dr. Karp was concise and focused on how Dr. Steele's actions in regards to Patients 1 and 2 fell far below the minimal standards of care.

Mr. Wilcox stated that the prescribing practices of Dr. Steele are also very troubling. Large amounts of psychotropic drugs were prescribed with little or no regard. Dr. Karp indicated that no ethical or current psychiatrist would prescribe any of these drugs. Dr. Steele's recordkeeping for Patients 1 and 2 was also clearly substandard.

Mr. Wilcox stated that, in the final analysis, the Hearing Examiner was correct; this is a sad case to recommend license revocation. However, in this case, the Board must do what is right for the protection of the public. Mr. Wilcox stated that, in this situation, permanent revocation is clearly appropriate.

**DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. PORTER'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF JACK E. STEELE, M.D. DR. KUMAR SECONDED THE MOTION.**

Dr. Kumar stated that, as he was going through and looking at all of the testimony and documentation he had, he initially considered that it was possible that Dr. Steele doesn't recognize the type of records he needs to keep. Dr. Kumar stated that he was hoping that he would hear an admission from Dr. Steele of a few things that he did, but he did not hear that today.

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Dr. Kumar indicated that one thing that really troubled him was that when Dr. Steele was in Florida, he continued to write prescriptions from Florida to be filled in Ohio. He would be away for a long time with no capability of seeing the patients himself.

Dr. Kumar stated that he initially considered just requiring Dr. Steele to surrender his D.E.A. license; however, he now believes that the Proposed Order is appropriate and that the Board should revoke Dr. Steele's license.

Dr. Steinbergh noted that Dr. Steele has been a physician for a long time and has, over the years, provided appropriate medical care; but the medical care he's provided most recently and his recordkeeping is quite outdated. She commented that Dr. Steele is correct when he says that his records are for himself only and that he clearly knows the patients, but that kind of thought process went by the wayside many years ago. Medical records today, and for many years in the past, have been not only for the ability to provide continuity of care, but also, if another physician should need the medical record, the record would clearly state the problems, the usual subjective complaints, objective evaluation, assessment and plan. This type of recordkeeping has been in vogue for 40 or 50 years. Dr. Steinbergh stated that she believes that Dr. Steele has lost touch with that. As he's reduced his practice, he has not seen the need to provide that kind of care.

Dr. Steinbergh stated that the biggest concern is the prescribing problem. Dr. Steele's continuing to prescribe controlled substances under circumstances such as this is simply unacceptable at this particular stage in medical knowledge. Dr. Steinbergh stated that she understands an older physician who continues to do that, even though this Board and the general medical field would say that this is inappropriate. That's why the reviewer felt that there were so many substantial problems.

Dr. Steinbergh asked whether, at this point, the Board has the option of allowing Dr. Steele to permanently surrender his license, rather than imposing a permanent revocation.

Mr. Dilling stated that the Board is in the hearing process stage. He believes the time to accept a permanent surrender has passed.

Dr. Steele asked whether the Board wanted to give him a gun and allow him to shoot himself.

Mr. Dilling stated that the Board would not allow him to, and it wouldn't give him a gun either.

Dr. Steinbergh stated that there are physicians in this state who, at the end of their careers, realize that they perhaps practiced beyond what they should have, and that, perhaps their practice of medicine puts patients at risk. It is the Board's role, as the Medical Board, to protect the public and be certain, at least to the best of their knowledge, that they won't put patients at risk. If permanent surrender is not an option at this point, then she concurs with the proposed permanent revocation of his license.

Dr. Steele asked how many Board members have cured an addict.

Mr. Browning informed Dr. Steele that his time to make statements is finished.

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Dr. Steinbergh stated that she has reviewed the record, and she doesn't think that it takes years and years of prescribing, without reducing medication, to "cure" an addict. One doesn't see in this record that addicted patients are giving reduced amounts of medication until they are off the medications. What is seen is that there is the continuing of prescribing, even with the knowledge of addiction. The record itself was somewhat disturbing.

Dr. Steele stated that that was his complaint. The Board didn't look at all the records. The record included the decrease to zero early this year.

Dr. Kumar stated that he came to this meeting with a different thought in his mind. He stated that he can give Dr. Steele credit for his good intentions in taking care of addicts, and he can give Dr. Steele credit for the fact that he did not gain significantly financially. Dr. Kumar stated that he is continually troubled by the way the medicines were prescribed and, particularly, the way the medicines were prescribed while he was a long time away from being in contact with patients personally. Therefore, he must concur with the proposed revocation of Dr. Steele's license.

Dr. Steele stated the fact that he was not in contact with the patient was another untruth.

Mr. Browning told Dr. Steele that the Board is finishing its work here. He asked for further discussion by Board members.

Dr. Egner stated that this case is not about two different views on how to treat addiction. Dr. Steele's treatment is certainly below minimal standards. She added that she doesn't believe that his method of recordkeeping was ever in vogue in medicine. Dr. Steele's medical records and the testimony he gave at hearing really reads like flights of ideas themselves. His prescribing is totally inappropriate, and he's not amenable to education and change. Dr. Egner stated that she wishes that Dr. Steele had permanently surrendered his license when he had the opportunity to do so, but he didn't, and, given the opportunity, she believes that Dr. Steele would continue to practice in the exact same manner as seen in the record.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Buchan	- 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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OSCAR H. SALVAT, M.D.

**DR. BUCHAN MOVED TO REMOVE THE MATTER OF OSCAR H. SALVAT, M.D., FROM THE RECORD. 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
	Dr. Steinbergh	- aye

The motion carried.

Mr. Browning stated that, although a request to address the Board had been timely filed on behalf of Dr. Salvat, neither Dr. Salvat nor his representative is present to address the Board.

**DR. ROBBINS MOVED TO APPROVE AND CONFIRM MR. PORTER'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF OSCAR H. SALVAT, M.D. DR. DAVIDSON SECONDED THE MOTION.**

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

Dr. Steinbergh stated that she believes the record is clear. This was a case of sexual misconduct in practice. The Georgia Composite State Board of Medical Examiners took action on Dr. Salvat's Georgia license, and Ohio's charges against him were appropriate. Dr. Steinbergh stated that she concurs with the Proposed Order of permanent revocation. She noted that Dr. Salvat's Georgia license was also revoked.

Dr. Buchan stated that the Hearing Examiner's Report and Recommendation makes a reasonable evaluation of this matter, and he supports it as written.

Dr. Egner stated that Dr. Salvat's refusal to accept responsibility for his actions supports the Board's not taking a more lenient disposition. She stated that that fact is really the crux of the issue here. She may not have gone with permanent revocation, but Dr. Salvat's testimony did not really lead to anything other than that. She will agree with permanent revocation in this case.

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

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

The motion carried.

#### MINUTES REVIEW

**DR. STEINBERGH MOVED TO APPROVE THE MINUTES OF DECEMBER 11, 2003.**  
**MR. ALBERT SECONDED THE MOTION.** A vote was taken

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

The motion carried.

#### FINDINGS, ORDERS AND JOURNAL ENTRIES

##### DANNY MAURICE COLTON, M.D.

By letter dated February 13, 2002, the Board notified Danny Maurice Colton, M.D., that it had proposed to deny or take disciplinary action against his application for a certificate to practice medicine and surgery in Ohio, based on allegations pertaining to Dr. Colton's failure to demonstrate good moral character. In addition, the board advised Dr. Colton that he was entitled to a hearing if such hearing was requested within thirty days of the mailing of the notice of opportunity for hearing.

In accordance with section 119.07, Ohio Revised Code, the notice of opportunity for hearing was sent via certified mail, return receipt requested, to the address of record for Dr. Colton on February 14, 2002. Dr. Colton did not sign the certified mail receipt. The notice of opportunity for hearing was mailed again on March 6 and May 15, 2002. No service was documented. Finally, the notice of opportunity for hearing

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was published in *The Cincinnati Enquirer* on November 29, December 6, and December 13, 2002. On January 29, 2003, a copy of the proof of publication was sent to Dr. Colton's last address of record.

As of July 28, 2003, the Board had not received a request for hearing from Dr. Colton. 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 13, 2002 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF DANNY MAURICE COLTON, 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 she agrees with the Proposed Order in this case. Dr. Colton's conduct was quite unethical and he clearly fails to furnish proof of good moral character that is required for licensure. A permanent denial of licensure is appropriate in this case.

Dr. Kumar stated that he continues to be troubled by the fact that, even during his residency, Dr. Colton was reprimanded and could not continue in the residency. It is quite apparent that Dr. Colton does not meet the standards to hold a license in the State of Ohio.

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.

PATRICIA ANN DUGGAN, M.D.

By letter of July 2, 2003, the Board proposed to deny Dr. Duggan's application for a certificate to practice medicine and surgery in Ohio based upon the fact that she has not passed an examination sequence that would, pursuant to Section 4731.14, O.R.C., and Rule 4731-6-14, O.A.C., permit the Board to grant a license. Said notice was mailed via certified mail, return receipt requested, to Dr. Duggan's address of

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record. A signed [certified](#) mail receipt was returned to the Board from that mailing, documenting proper service of the notice. However, no hearing request has been received and more than 30 days have elapsed since the mailing of the second notice. The matter was presented to the Board at this time for final disposition.

**DR. STEINBERGH MOVED TO ENTER AN ORDER DENYING DR. DUGGAN'S APPLICATION FOR A CERTIFICATE TO PRACTICE MEDICINE AND SURGERY IN OHIO. DR. ROBBINS SECONDED THE MOTION.**

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

Dr. Steinbergh stated that, from the review of the records, it is clear that Dr. Duggan did not pass all three parts of the U.S.M.L.E. within the seven years required. She noted that Dr. Duggan passed Step I in June 1993, Step II in March 1995 and Step III in September 2001.

Dr. Kumar asked what Dr. Duggan can do to remedy the situation.

Mr. Dilling advised that she must pass Steps I and II by September 2008.

Mr. Dilling explained that there is a limited exception to this rule for physicians who, in conjunction with a medical degree, are actively pursuing a doctoral degree in a field of biological sciences, or for physicians who suffered from a significant health condition which by its severity would necessarily cause a delay to the applicant's medical study. In those cases, all three steps must be passed within a ten year period.

Dr. Egner stated that the law requires that all three steps be completed within a seven-year period. The Board has followed that law to the letter and she doesn't feel it has any option but to continue to follow it in this case.

Dr. Davidson commented that Dr. Duggan appears to be a, potentially, very valuable member of the physician community in Ohio; however, as others have said, she did not complete the U.S.M.L.E. sequence in the proper time. She saw no explanation as to why Dr. Duggan did not complete it within seven years. It's unfortunate that Dr. Duggan didn't avail herself of the hearing process to help the Board understand.

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

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Dr. Steinbergh - aye

The motion carried.

Dr. Garg left the meeting at this time.

CITATIONS, PROPOSED DENIALS & LETTERS OF SUMMARY SUSPENSION

JITANDER N. KALIA, 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. KALIA.  
DR. BUCHAN 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.

GERMAN V. PRADA, 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. PRADA.  
DR. BUCHAN 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. Steinbergh - aye

The motion carried.

BARBARA A. REED, 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. REED.  
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.

ROBERT S. REEVES, JR., 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. REEVES.  
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.

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SHELTON WILLIAMS, JR., M.T. - CITATION LETTER

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

**DR. BUCHAN MOVED TO SEND THE CITATION LETTER TO MR. WILLIAMS.**  
**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.

Dr. Garg returned to the meeting at this time.

ROQUE J. RAMIREZ, 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. RAMIREZ.**  
**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
	Dr. Steinbergh	- aye

The motion carried.

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RICHARD R. AUGSPURGER, 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. BUCHAN MOVED TO SEND THE CITATION LETTER TO DR. AUGSPURGER. 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.

LOUIS A. LING, 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. LING. 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.

Dr. Talmage noted that two of the citation letters are going to individuals who are on probation with the Board but have not complied with the terms of probation. He stated that he and Mr. Albert believe that, if

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probationers do not comply with the terms, they should be cited. He suggested that the Board might see more of these letters. He and Mr. Albert are meeting with those probationers who are having trouble with compliance, and, hopefully, they will be able to teach some lessons. If not, there may be more such letters coming before the Board.

#### RATIFICATION OF CONSENT AGREEMENTS

STEPHEN RANDALL PORTER, M.D.

**DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. PORTER. DR. BUCHAN 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.

BRUCE S. WORRELL, D.O.

**DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. WORRELL. 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
	Dr. Steinbergh	- aye

The motion carried.

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MARIE THERESE SHEDLOCK, P.A.

**DR. BUCHAN MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH MS. SHEDLOCK. 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
	Dr. Steinbergh	- aye

The motion carried.

MARK EDWARD GOLDSMITH, M.D.

Ms. Gilbert advised that this Step II consent agreement is for an individual who is currently on probation with the Board. This agreement would supersede the Step II agreement previously ratified by the Board for this individual and would continue the probation for another ten years. The terms are similar to those in the current agreement in terms of impairment issues and adds matters for standards and ethical issues, including a reprimand and a sanction. There are also admissions different from those in the previously ratified agreement.

Mr. Dilling stated that the agreement does fall within the disciplinary guidelines.

Dr. Steinbergh stated that she does not agree with this consent agreement, and added that the Board should cite Dr. Goldsmith. She referred to the admissions contained in the proposed consent agreement, which state that Dr. Goldsmith engaged in behavior involving patients under his psychiatric care that constituted inappropriate boundary crossings, created ethical conflicts of interest, and may have compromised the quality of care provided within the physician- patient relationship. Such behavior included, but was not limited to: having a teenage male patient spend the night at Dr. Goldsmith's home, where Dr. Goldsmith's practice is also located, on three occasions; hiring a patient to perform clerical tasks in his psychiatric practice and domestic chores in his household; paying a patient to perform manual labor at his residence; allowing patients to accompany him on personal errands; asking a patient to sign his attendance log at AA meetings; loaning money to a patient; accepting gifts from a patient; and sharing personal information with patients. None of the aforementioned patients remain under Dr. Goldsmith's psychiatric care at this time.

Dr. Egner asked whether the Board knows that there was no sexual impropriety when the teenager spent the night at Dr. Goldsmith's house.

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Ms. Gilbert stated that the staff is putting this forward as being what it believes the Board can demonstrate.

Mr. Dilling reminded the Board that it is in a position in considering consent agreements where it must be somewhat reliant on the Secretary and Supervising Member.

Dr. Steinbergh again stated that she's uncomfortable with this agreement.

Dr. Kumar asked what kind of practice this physician has.

Ms. Gilbert stated that he's a psychiatrist.

Dr. Kumar stated that he has to agree with Dr. Steinbergh on this. He has difficulty accepting this as being a Step II Agreement with reprimand.

**DR. EGNER MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. GOLDSMITH.**

Dr. Talmage reminded the Board that there are provisions contained in agreements for what will occur should the physician fail to comply with probationary terms. He suggested that that might offer some reassurance to Board members.

**DR. BUCHAN SECONDED THE MOTION.**

Dr. Buchan stated that, on the surface, there are some very disturbing facts or issues raised in this matter. Dr. Buchan added that he has been involved with consent agreements for a period of time and has great confidence in those who authored this consent agreement. Dr. Buchan stated that he supports this consent agreement, but added that this is a very difficult case.

Dr. Egner stated that this discussion is important so that the Secretary and Supervising Member know how the Board feels about such matters, should they arise again in the future. She added that she is sure that they went through a great deal of thought in this process. She trusts both the Secretary and Supervising Member and is willing to vote to ratify this agreement.

Dr. Steinbergh stated that she also respects the Secretary and Supervising Member and the Board's staff, but she cannot agree to this agreement because she thinks this physician needs to be cited. This is an inappropriate consent agreement and she cannot vote to ratify it.

Dr. Robbins asked what the Board's options are.

Mr. Dilling stated that the Board can either ratify the agreement or send it back to the Secretary and Supervising Member for citation. Mr. Dilling stated that the problem is that the Board doesn't really know what the doctor will be cited for. The Board must have reliable, probative and substantial evidence to initiate an action. He asked that the Board understand that the Secretary and Supervising Member are probably ten times more conservative than the Board members are in going forward with these cases.

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These agreements are reviewed by the Secretary and Supervising Member, the Attorney General's representatives, and the Board staff. The key is that the Board doesn't really know what could come back in that citation.

A vote was taken on Dr. Egner's motion to ratify:

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	- nay
	Mr. Browning	- aye

The motion carried.

#### PROBATIONARY REPORTS

Mr. Browning referred the Board to the Compliance Staff's reports of conferences with probationers on July 7-8, 2003. The reports indicate that all probationers are in compliance.

**DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES WITH: MARK S. FLEMING, M.D.; DARRELL A. HALL, M.D.; WAYNE L. HARRISON, M.D.; ROBERT B. KAMERER, M.T.; TIMOTHY S. KRESS, M.D.; ROSEMARY W. MCLAUGHLIN, M.D.; ANTHONY G. POLITO, D.P.M.; MARY H. RABB, D.O.; SILVANA SABATO, L.M.T.; JAMES H. SCOTT, D.O.; ROBERT D. SMARSCH, D.O.; JORDAN B. STERNS, M.D.; AND JEFFREY W. WINHOLT, M.D. DR. BUCHAN SECONDED THE MOTION.** A vote was taken:

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

PROBATIONARY REPORTS AND REQUESTS

DAVID E. ALLEN, M.D.

Dr. Allen's requests pursuant to the terms of his February 12, 2003 consent agreement were presented to the Board for consideration at this time.

**DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCES WITH DR. ALLEN ON AUGUST 11, 2003. DR. STEINBERGH FURTHER MOVED TO APPROVE DR. ALLEN'S REQUESTS: FOR PERMISSION TO WORK SOME NIGHT SHIFTS; TO INCREASE HIS WORK HOUR LIMITATION TO 48-50 HOURS PER WEEK ON A PROVISIONAL BASIS, WITH THE UNDERSTANDING THAT DR. ALLEN WILL BE SCHEDULED FOR ANOTHER APPEARANCE IN THREE MONTHS, AT WHICH TIME THE SECRETARY AND SUPERVISING MEMBER WILL REVIEW THE MONITORING REPORTS AND DETERMINE WHETHER THE INCREASE IN HOURS WILL BE PERMANENT; AND TO REPLACE THE RANDOM BLOOD SCREEN REQUIREMENT WITH RANDOM SALIVA SCREENS. DR. BUCHAN SECONDED THE MOTION. A vote was taken:**

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

The motion carried.

DIANE L. BAUM, M.T.

Ms. Baum's request for a reduction in her appearance schedule was presented to the Board for consideration at this time.

**DR. GARG MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCES WITH MS. BAUM ON AUGUST 12, 2003. DR. GARG FURTHER MOVED TO GRANT MS. BAUM'S REQUEST FOR A REDUCTION IN HER APPEARANCE SCHEDULE FROM EVERY THREE MONTHS TO EVERY SIX MONTHS. DR. BUCHAN SECONDED THE MOTION. A vote was taken:**

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

The motion carried.

LESLIE R. DYE, M.D.

Dr. Dye's requests for modification to the terms of her June 12, 2002 consent agreement were presented to the Board for consideration at this time.

**DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCES WITH DR. DYE ON AUGUST 12, 2003. DR. STEINBERGH FURTHER MOVED TO GRANT DR. DYE'S REQUESTS FOR A REDUCTION IN HER DRUG SCREEN REQUIREMENT TO TWICE PER MONTH AND A REDUCTION IN HER APPEARANCE SCHEDULE TO EVERY SIX MONTHS. DR. GARG SECONDED THE MOTION.** A vote was taken:

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

The motion carried.

STEVEN T. PATTERSON, D.O.

Dr. Patterson's requests for modifications to the terms of his February 11, 1999 Consent Agreement were presented to the Board for consideration at this time.

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

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**CONFERENCES WITH DR. PATTERSON ON AUGUST 12, 2003. DR. STEINBERGH FURTHER MOVED TO DENY DR. PATTERSON'S REQUESTS FOR REDUCTIONS IN HIS DRUG SCREEN AND ALCOHOL AND DRUG REHABILITATION MEETING REQUIREMENTS. DR. GARG SECONDED THE MOTION. A vote was taken:**

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

The motion carried.

JOSEPH S. SCHEIDLER, D.O.

Dr. Scheidler's request to eliminate the work hour limitation in his August 14, 2002 Consent Agreement was presented to the Board for consideration at this time.

**DR. GARG MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCES WITH DR. SCHEIDLER ON AUGUST 11, 2003. DR. GARG FURTHER MOVED TO GRANT DR. SCHEIDLER'S REQUEST TO PROVISIONALLY ELIMINATE THE LIMITATION THAT HE WORK NO MORE THAN 40 HOURS PER WEEK, WITH THE UNDERSTANDING THAT HE WILL BE SCHEDULED FOR ANOTHER APPEARANCE IN THREE MONTHS, AT WHICH TIME THE SECRETARY AND SUPERVISING MEMBER WILL REVIEW THE MONITORING REPORTS AND DETERMINE WHETHER THE RESTRICTION WILL BE PERMANENTLY LIFTED. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:**

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Buchan	- 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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JOHN R. TRUMBO, M.D.

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

**DR. GARG MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCES WITH DR. TRUMBO ON AUGUST 12, 2003. DR. GARG FURTHER MOVED TO REDUCE DR. TRUMBO'S DRUG SCREEN REQUIREMENT FROM ONCE A WEEK TO TWICE PER MONTH. DR. BUCHAN SECONDED THE MOTION. A vote was taken:**

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

The motion carried.

PROBATIONARY REQUESTSPETER FRAGATOS, M.D.

Dr. Fragatos' request for approval of a treating psychiatrist, and determination of the frequency and number of charts to be reviewed by his monitoring physician, Gerald F. Meier, M.D., was presented to the Board for consideration at this time.

**DR. STEINBERGH MOVED TO APPROVE DENNIS M. SAVINSKY, M.D., TO SERVE AS DR. FRAGATOS' TREATING PSYCHIATRIST. DR. STEINBERGH FURTHER MOVED TO DIRECT DR. MEIER TO REVIEW TEN CHARTS PER MONTH. DR. GARG SECONDED THE MOTION. A vote was taken:**

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

CYNTHIA J. JOHNSON, P.A.

Ms. Johnson's request for approval of a mental health counselor, pursuant to the terms of her January 8, 2003 consent agreement, was presented to the Board for consideration at this time.

**DR. GARG MOVED TO APPROVE JAMES PRIESTER, PhD, TO SERVE AS MS. JOHNSON'S MENTAL HEALTH COUNSELOR. DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

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

The motion carried.

ASHOK V. PADHIAR, M.D.

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

**DR. GARG MOVED TO APPROVE JEROME J. KLEINMAN, M.D., TO SERVE AS DR. PADHIAR'S TREATING PSYCHIATRIST. DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Buchan	- 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 S. REEVES, JR., M.D.

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

**DR. STEINBERGH MOVED TO APPROVE GREGORY B. COLLINS, M.D., TO SERVE AS DR. REEVES' TREATING PSYCHIATRIST. DR. GARG SECONDED THE MOTION.** A vote was taken:

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

The motion carried.

REINSTATEMENT REQUESTS

DANIEL H. BRUMFIELD, M.D.

Dr. Brumfield's requests for approval of an ethics course and a prescribing course were presented to the Board for consideration at this time.

Dr. Egner commented that it is odd that there is no C.M.E. associated with the Mercer course.

Dr. Garg stated that he doesn't believe that there's C.M.E. associated with either course.

Dr. Davidson noted that the first course was one constructed specifically for Dr. Brumfield. She added that she was also surprised that there were no C.M.E. credits offered for the second course.

**DR. GARG MOVED TO APPROVE THE PROFESSIONAL ETHICS COURSE OFFERED BY STEPHEN B. LEVINE, M.D., CLINICAL PROFESSOR OF PSYCHIATRY AT CASE WESTERN**

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**RESERVE SCHOOL OF MEDICINE, AND THE PRESCRIBING COURSE DIRECTED BY JOHN M. HOLBROOK, PhD, PROFESSOR IN THE DEPARTMENT OF PHARMACEUTICAL SCIENCES AND DIRECTOR OF THE CENTER OF SUBSTANCE ABUSE EDUCATION AND RESEARCH AT MERCER UNIVERSITY SOUTHERN SCHOOL OF PHARMACY, AS FULFILLING THE REQUIREMENTS OF PARAGRAPH 9(b) OF DR. BRUMFIELD'S DECEMBER 11, 2002 CONSENT AGREEMENT. DR. KUMAR SECONDED THE MOTION.**

Dr. Steinbergh stated that, although she likes the first course, she has questions about the second. She asked to be reminded about this case.

Ms. Jacobs advised that Dr. Brumfield is on probation for substance abuse, and for leaving blank pre-signed prescription forms for his office staff to use to refill prescriptions. She advised that there was no felony conviction for prescribing.

Dr. Egner asked that staff attempt to contact Mercer University and find out if it will give the Board a copy of their test for the Board's review.

Ms. Jacobs advised that there were some things within the modules of the Mercer course for which C.M.E. credit is offered. She reminded the Board that this school wasn't primarily designed for physicians, but for pharmacists. She added that she will attempt to obtain a copy of the test.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Buchan	- 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 advised that at the July 2003 Board meeting, the Minimal Standards of Care Committee reported concerning a letter from the Nursing Board regarding prescription medications administered at school by a school aide to a student with an individualized education program. The question was asked whether this was the unlicensed practice of medicine or a medical delegation issue. The Committee felt that this is neither the practice of medicine nor a delegation issue. The Committee felt very comfortable with the situation. Mr. Dilling stated that the Board was advised in July that, absent objections by the

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Board, Ms. Thompson would respond to the Nursing Board in this regard, and a copy of her response would be distributed to Board members. Mr. Dilling stated that at this time he is seeking indication for the record that the Board is in agreement with Ms. Thompson's written response, a copy of which shall be maintained in the exhibits section of this journal.

**DR. GARG MOVED TO APPROVE MS. THOMPSON'S LETTER TO THE NURSING BOARD CONCERNING PRESCRIPTION MEDICATIONS ADMINISTERED AT SCHOOL.**

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

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

The motion carried.

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

At this time Mr. Dilling referred the Board to two possible agendas for the October 2003 Board retreat. The first proposal focuses on achieving public protection through effective medical regulation. The second proposal contains a diversity of topics, including medical ethics, medical malpractice and the Board's disciplinary action processes.

Dr. Robbins spoke in favor of the first proposal.

Dr. Garg agreed, stating that he believes it would be most helpful for the newer members of the Board.

Dr. Egner agreed that the first proposal would be better, but added that she likes the topics in the second proposal. She suggested that the Board cover those topics in its Thursday sessions.

The consensus of the Board was that the first proposal, with the addition of the topic on medical malpractice, would be the agenda for the October retreat.

Mr. Dilling directed the Board's attention to the list of meetings and speaking engagements attended by Board and staff members. He also noted that there is a Midwest Regional Boards meeting scheduled for Saturday, October 11, 2003, in Ann Arbor, Michigan. He further noted that Board members interested in

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attending will be reimbursed for their mileage and an overnight stay. He asked that members notify Ms. Wehrle if they are interested in attending.

At this time Mr. Dilling presented a "five-year pin" to Mr. McLaughlin, celebrating his five years of state service.

Mr. Dilling also noted that Mr. Michael would be leaving the Health and Human Services Section of the Attorney General's office for an assignment in the Education Section. Mr. Dilling at this time presented a letter of appreciation to Mr. Michael for his work for the Board.

#### PERSONAL APPEARANCES

##### LAWRENCE YOUNG, III, M.D.

Dr. Young appeared before the Board pursuant to his request for release from the terms of the Board's Order of September 13, 2000. If approved, release from probation would become effective September 13, 2003.

Dr. Steinbergh asked Dr. Young whether he is still working as an internist. He advised that he is.

Dr. Steinbergh asked whether Dr. Young was required to make any other retribution in terms of his felony conviction.

Dr. Young stated that the criminal portion ended on April 1, 2003. He's still in negotiations with the IRS about the money.

**DR. GARG MOVED TO RELEASE DR. YOUNG FROM THE TERMS OF THE BOARD'S ORDER OF SEPTEMBER 13, 2000, EFFECTIVE SEPTEMBER 13, 2003. MR. ALBERT SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Buchan	- 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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FRANK R. BRUENING, M.D.

Dr. Bruening made his initial appearance before the Board, pursuant to the terms of his June 11, 2003 Consent Agreement.

In response to Dr. Steinbergh's questions, Dr. Bruening stated that he's feeling very well. He sees Hy P. Kisin, Ph.D. for his psychological counseling twice a month, and Thomas Sherman, M.D. for psychiatric treatment once a month. Dr. Sherman is not prescribing anything at this time as he is still evaluating the situation. Dr. Bruening stated that he has been taking Pamelor for the past year and a half. Since his license has been suspended, during the days he works around the house and outside. He doesn't do anything formal.

Dr. Buchan asked whether it was true that Dr. Bruening came to the Board's attention because of concerns with his clinical practice.

Dr. Bruening stated that there was a concern that he was forgetting things too often.

Dr. Buchan asked whether this process has been a blessing or a curse and whether he felt some sense of relief that he's on a better road now.

Dr. Bruening stated that this has been the worst year of his life, and he has actually looked forward to coming here and talking about it.

Dr. Buchan stated that he hopes that Dr. Bruening sees this appearance and future appearances as part of the road to recovery. He asked whether Dr. Bruening is currently practicing.

Dr. Bruening stated that he has not practiced since January 27.

In response to further questions by Dr. Buchan, Dr. Bruening stated that his primary concern at this point is to get his license back. He can't look for jobs without a license. He'll start looking for work after he gets his license. He had one offer already from a nurse midwife who is moving to Michigan. He doesn't feel that this time out was at all critical to his recovery or improvement. He stated that he's had this problem dating back to college, and he's been able to control it for the most part. It didn't have a name until now, but both Dr. Kisin and Dr. Sherman have both questioned what they are treating. They can't see it. He stated that he never felt that he was putting patients at risk. If he thought he was putting someone in danger, he would call someone else in to do it.

Dr. Buchan stated that he would like to see Dr. Bruening through to the other side of this issue, but he's not sure that they both agree on how to get there.

Dr. Bruening stated that he'll do whatever the Board tells him to do.

Dr. Steinbergh stated that it has been opined that Dr. Bruening has difficulty with clinical decision-making and memory. Knowing what he knows as a physician, does he not think that that puts patients at risk? She

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asked how he compensated for the memory loss and possible decision-making problem.

Dr. Bruening stated that he can't remember how he compensated for the memory loss. He has not hurt anyone or come close to hurting anyone yet.

Dr. Steinbergh asked whether Dr. Bruening's decision making may have been compromised by his memory loss, and how he would compensate for that.

Dr. Bruening stated that he could give the Board an example from January, the same month he was suspended by the clinic. He was delivering a patient at Flower Hospital, down the hall from another patient who was also in labor and who was a midwife's patient. He had another midwife working as a labor nurse with him. He delivered his patient and a nurse ran in and said the other midwife is in real trouble down the hall. He said he'd be right there, he had to sew up the episiotomy. The one nurse midwife said that she could do that. He went down the hall and the other lady's patient was a breach. He decided a C-section was necessary, but the anesthesia didn't come as quickly as it should have, and the baby's leg was out to the knee. He said that he knew what he was supposed to do, and that was to push the leg back in and do the section, but he has delivered breaches before. He explained how he delivered the baby. So he can think in a crisis. Does he remember everything? No, but he's been listening to other people who say that they don't remember things either.

Dr. Bruening stated that he has twice undergone neuro-psych evaluations. One when he couldn't remember going home. The second time he had it done himself, without anyone's order, and the neuropsychologist, Carol A. Budzenski, Ph.D., said that there is no difference between this and the last time. He didn't think that he would have to repeat the MRI and spinal tap and all that because it had come back normal. Basically, he was the same as he was when he'd forgotten where he lived. He can't see any other testing to be done. Dr. Budzenski does not think that this is enough to keep him off work. When he saw a doctor in Cleveland, the doctor gave him three words to remember at the beginning of the interview. At the end Dr. Bruening was able to remember them, and will probably remember them for the rest of his life. Dr. Bruening stated that he doesn't think he has any more problems than most have with memory. If he gets into an extremely anxious situation, his memory might not work.

Dr. Kumar asked what triggered some disciplinary action on the part of the clinic if Dr. Bruening doesn't have any problem with his memory. There had to be some patient outcome problem, or some other problem.

Dr. Bruening stated that he could get into what he thinks happened, if the Board wants him to; but if he were listening to it, he would consider himself extremely paranoid. Five years ago he was making the most he ever made in his life. Then the insurance companies decided that they were going to pay out what they wanted to pay, and his income dropped tremendously. He was called into the president's office at the clinic and was told that he would have to take a lower salary because he "was into the clinic for God knows how many doctors." He did take a lower salary, but there were three months he didn't have a salary. One month out of the year he took a greatly reduced salary. Dr. Bruening stated that he doesn't remember exactly what he said, but the president felt from Dr. Bruening's statements that Dr. Bruening considered himself worth more medically than the president does. Things have been kind of shaky since then.

Dr. Bruening stated that the memory thing came and went. A year ago in July his son got married and he took off the week before and the week after the wedding. When he got back to work, he found out that one of his partners had wanted that week off to take her son to look for colleges. So he had one partner mad at him. The precipitating event was that he had been seeing OB patients, and the last patient of the morning was a girl who had a very definite French accent. He commented to her, "do you mean that they don't have good obstetricians in France," and she advised that she married an American and now lives in America. He went through the whole routine, checking the patient for the first time, and realized that she wasn't going "to go" quickly. He realized that he was an hour behind. He had an errand to run, which he did, and on the way out, right in front of the Clinic there was a car tipped over on its roof and people were all over the place. He thought that if he stopped, he'd never get back. So he did his errand, came back, the car was gone at that point and he thought no more of it until about 3:00 in the afternoon when the ladies in the office had the television on and there was a story about the same French lady being in the car in the accident. Dr. Bruening stated that he felt bad because he was the last doctor to see her before this happened. His other partner was on call but went to surgery without her beeper and no one told her that their patient was at Toledo Hospital. It really hurt because he was the backup and he wasn't called. He had a screaming fit, asking how they could let something like that happen to a patient. His partner left town to attend a funeral, and before she left she said that she would never be able to work with Dr. Bruening again and that she could go out on her own. She left for the trip and when she came back he was the one leaving, not her. Both his partners went to the president of the clinic and complained that he couldn't remember things. So he has two partners and the president of the clinic saying that there's something wrong with him, and they can out shout him.

Dr. Buchan asked how Dr. Bruening how he would respond to the psychiatrist who stated that he's not capable of practicing to the standard of care necessary.

Dr. Bruening stated that he has not seen that psychiatrist since he made that opinion. The psychiatrist called him and told him that he should bring \$1,000 in money order or cash for the interview. Dr. Bruening stated that the psychiatrist told him that he wasn't crazy; but, evidently, he told the Board a lot of stuff that he didn't say to Dr. Bruening. There was a 14-page report, and he's only been allowed to see the last two pages. Dr. Bruening has asked that the report be given to Dr. Sherman and Dr. Kisin, so that they know what they're working with, and the answer is "no." They believe that Dr. Bruening is normal, and don't understand what is going on. Dr. Bruening stated that he doesn't know what Dr. Sherman's and Dr. Kisin's reports would say from what they've told him.

Dr. Egner stated that earlier Dr. Bruening said that he's had this problem since he was in college.

Dr. Bruening stated that he's had the depression and anxiety since college. That's not a new diagnosis. It's been going on for quite a while. He and Dr. Kisin have talked about the "imposter" phenomenon, where a successful person thinks that he's not that good and that everybody else thinks he's better than he is. They were working along that line, that he should just accept the fact that he's successful. This came along and all of a sudden, maybe he's not an imposter anymore. If the Board is asking how he's doing between then and now, he's doing worse than he had before.

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Dr. Egner stated that there's a psychiatrist that says that he's not ready to go back to practice, but Dr. Bruening is now seeing a different psychiatrist. Who will say when Dr. Bruening is ready to go back?

Ms. Bickers stated that Dr. Bruening is currently seeing Dr. Sherman. She has informed Dr. Sherman that he can get a copy of the last four pages of the psychiatric evaluation and a copy of the letter ordering Dr. Bruening to obtain an evaluation, and Dr. Sherman said that he was fine with that. Dr. Bruening will have to nominate an evaluating psychiatrist to provide the second of two assessments required for reinstatement.

Dr. Steinbergh asked why Dr. Bruening is not allowed to have the full psychiatric evaluation.

Ms. Bickers stated that the report is part of the investigatory file. What was given to Dr. Bruening and Dr. Bruening's attorney was really a matter of courtesy on the Board's part. The rest of it is confidential. She recommended that Dr. Sherman obtain a copy of the assessment letter from Dr. Bruening.

Dr. Egner stated that, hopefully, Dr. Sherman can take that information, and the Board will get a second opinion.

In response to Dr. Egner's questions, Dr. Bruening stated that his wife drove him to this appointment because she gets carsick if she doesn't drive.

Dr. Buchan stated that Dr. Bruening needs two assessments to return to work.

Dr. Bruening stated that he does understand that, but because of being investigated, he was fired and doesn't have a place to go back to work.

**DR. STEINBERGH MOVED TO CONTINUE DR. BRUENING UNDER THE TERMS OF HIS JUNE 11, 2003 CONSENT AGREEMENT AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. BUCHAN SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Buchan	- 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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Dr. Talmage stated that he had to disqualify himself from this case, as he and Dr. Bruening have been more than just colleagues for 30 years.

SANDRA K. HAREWOOD, M.D.

Dr. Harewood made her initial appearance before the Board, pursuant to the terms of her June 11, 2003 Consent Agreement.

Dr. Kumar noted that this is Dr. Harewood's third relapse.

Dr. Harewood stated that it is, but that this had been the topic of her Caduceus meeting the previous evening. She really thinks that the first two times she was in Greene Hall were more administrative because she was not at a point of acceptance. She wasn't there yet. It was really about a year ago, as she worked through her personal situation and made the decision to go to Talbot that she really felt that she was ready. She's felt much better the past year than she did previously.

In response to Dr. Kumar's questions about Dr. Harewood's depression diagnosis, Dr. Harewood stated that she is not taking any medications. By the time she went down to Talbot in November 2003, she was off medication. The psychologist she had been seeing left practice and she no longer had health insurance to ease some of that, and she really felt much better. Even her psychometrics at intake at Talbot indicated that her depression was mild. The psychiatrist at Talbot felt it was fine not to be on medication. She doesn't feel that not being on medication would be responsible for another relapse. She stated that, even when she was taking it, she wasn't sure how much good the medication did. She's much more quick to go in for medication if needed because it helped a great deal at the time she took it.

Dr. Harewood continued that she doesn't have much family support. Her mother is now 92 years old and she's in a Dayton nursing home, her husband died in 1996, she has no siblings, and her husband's siblings have not been supportive. Her youngest child is 16 and is at home. The children are all doing well now, and that's a reward in and of itself.

Dr. Harewood stated that, right after leaving Greene Hall the first time, she lost her job in the group she was in. Then her mother had to go into a nursing home, and she had to deal with taking care of her mother's property. It wasn't until she finished with that that she felt she could enter Talbot and have some peace of mind. Her son had been in an apartment in Dayton, but he came back to the house to stay, and her youngest child went to live with her stepbrother. That became very onerous for him, and when Dr. Harewood returned in February, he declined to have his stepsister stay with him anymore, and that was difficult. Her daughter was able to live a little while at home with her and her son, but that was suboptimal. It's taken a while to get things cleared up, but she also has worked through getting her house together to sell. She's had a lot of things to deal with and no personal support.

Dr. Davidson stated that one thing with which the Board has wrestled is the appropriate length of suspension. She noted that Dr. Harewood had a 90-day suspension last year, and is currently serving a one-year suspension. She asked Dr. Harewood for her opinion about the duration of the suspensions for her.

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Dr. Harewood stated that, initially, her opinion about the suspension was negative because she was feeling desperate, not having employment and then having to deal with her mother's situation. Last summer, though, she finally figured out that she may be able to use her disability insurance. She asked that the Board understand that at the time she had so much that she was trying to deal with that she didn't think as clearly as she would at other times. It was also embarrassing. She started working on that last summer at Talbot. She had previously had breaks in her practice because her husband was an anesthesiologist and he was hospital-based in a small hospital, and he was essentially in a solo practice for quite a while. They had three children, and she was very happy being an employee. This last practice situation, financially, was difficult. While it was sort of a relief to know that she wouldn't go back to that, and then be confronted with the fact that there wasn't anything to go back to, and then feeling that she couldn't really sell herself to anybody, she couldn't see how she could work full-time and do the things for her mother, she kind of felt steamrolled for a while. Once she started working on things and working on the disability, she felt much better.

Dr. Harewood stated that she feels that the sooner she can go back and be productive, the better off she and her family will be.

Dr. Davidson stated that it sounds as though Dr. Harewood has had an incredible amount to deal with. Hopefully the suspension time can be well used and beneficial to her recovery.

In response to Dr. Garg's questions, Dr. Harewood stated that her practice was mostly hospital based. There was an afternoon clinic that they traded off covering, but the last practice was office-based. They didn't do any of their own admissions.

Dr. Harewood stated that personal problems initiated the abuse.

Dr. Garg commented that it seems that Dr. Harewood is still going through stress, and he's worried about it.

Dr. Harewood stated that she's made a lot of progress in handling her stress, and that has given her more energy than did any of the medications she took.

Dr. Steinbergh asked whether Dr. Harewood understands her consent agreement. Dr. Harewood stated that she thinks she does. She added that it's pretty overwhelming.

Dr. Steinbergh asked whether Dr. Harewood has considered taking any other kind of job during the suspension to be productive and involved socially with other people.

Dr. Harewood stated that she has, and she asked to what extent she can work in a medical office. She's got the potential to do some billing or some kind of clerical work. Could she work as a medical technician?

Mr. Schmidt stated that Dr. Harewood can work in a medical setting, but she must be extraordinarily cautious about anything that brings her into contact with patients. She'd be walking a very tight line.

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Dr. Garg asked whether she can work teaching students and residents without seeing patients.

Dr. Harewood stated that you have to have a license for that.

Dr. Steinbergh stated that the Board has had physicians who have been very productive during their suspensions. There have been physicians who have worked in construction. Dr. Harewood may want to look at something other than the practice of medicine. She recommended that Dr. Harewood take a position that would allow her to interact in the community and feel productive, and would allow her to socialize with other adults.

Dr. Garg stated that so long as Dr. Harewood doesn't present herself as a licensed physician and providing medical advice and care during the period of suspension, he doesn't see a problem with her working in an office.

Dr. Harewood commented that it might be difficult to draw the line.

Dr. Buchan asked whether Dr. Harewood has shared her trials with residents.

Dr. Harewood stated that she left resident training in 1992. She has a few close friendships that grew out of that period.

Dr. Buchan stated that if Dr. Harewood could prevent just one person from going down this road, to intervene early, it would be a bonus.

**DR. BUCHAN MOVED TO CONTINUE DR. HAREWOOD UNDER THE TERMS OF HER JUNE 11, 2003 CONSENT AGREEMENT AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. ROBBINS SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Buchan	- 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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SAM HILL, D.O.

Dr. Hill made his initial appearance before the Board, pursuant to the terms of the Board's Order of May 14, 2003.

Dr. Steinbergh noted that Dr. Hill has a long history with this Board.

In response to Dr. Steinbergh's questions, Dr. Hill stated that his sobriety and depression is going very well, despite being under an enormous amount of stress at home right now, including financial stress, foreclosure notices and car repossessions. He stated that he has been looking for work and has gone to the employment office several times. Where he lives is kind of isolated and there's not a lot available.

Dr. Hill continued that he is staying sober, going to meetings and to Parkside. He attends three to four meetings a week. He also attends Caduceus meetings at Parkside.

Dr. Hill stated that he understands the Board's Order, but there appears to be a misunderstanding in the minutes, which indicate that this is his third relapse. He stated that it isn't. This is his first relapse.

Mr. Schmidt advised that this is the third Order. The first Order was based on P.A. Utilization issues, the second Order, issued in 1995, had to do with writing prescriptions for his own use in others names.

Dr. Egner advised that Dr. Hill has had more recurring problems than most people she knows.

Dr. Hill disagreed, stating that the first involved a P.A. not sending his paperwork in. The other case was a dispute between lawyers as to whether or not the stay was automatic.

Dr. Egner stated that Dr. Hill was suspended.

Dr. Hill stated that he was, even though there was a court order from the Tandon case saying that it was automatically sustained, he never appealed it. That was kind of a technical thing.

Dr. Egner instructed Dr. Hill to follow this Order to the letter. If he needs something clarified, he should ask the Board or its staff. Dr. Egner stated that she is afraid that Dr. Hill's next infringement on a Board Order will result in no license ever. Even though Dr. Hill sees this as a second relapse and the other things are technicalities, she believes this is the second time Dr. Hill has had a permanent revocation stayed. She doesn't know anyone who gets that the third time.

Dr. Buchan asked Dr. Hill whether he understands that.

Dr. Hill stated that he did.

In response to further questions by Dr. Steinbergh, Dr. Hill stated that he sees a psychiatrist once a month, but she's leaving practice now so he's in the process of finding someone else. His current psychiatrist is located in Newark, Ohio.

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Dr. Steinbergh stated that it probably won't be difficult to find another psychiatrist in that area. She asked if that is where he is from.

Dr. Hill stated that he is not from Newark, but he has been seeing this psychiatrist for ten years.

Dr. Egner noted that Dr. Hill is from Hillsboro, which is very far away from Newark, and questioned his driving there every month.

Dr. Steinbergh commented that that is not too far a distance to drive once a month.

Mr. Albert reminded Dr. Hill that, if his psychiatrist is leaving, he has the obligation to nominate a new one and provide Ms. Bickers with a C.V.

Dr. Steinbergh stated that she concurs with Dr. Egner's thoughts. Dr. Hill has been in trouble with this Board since 1988. There will come a time when his time will run out. The Board is here to support Dr. Hill in his recovery. She added that she hopes he will find a job, but should there come a time when he can't go forward any more, there are physicians who have had to lose their licenses and to redefine their lives.

Dr. Hill stated that that one year of practicing without a license was not intentional. His attorney told him that he was 100% in the clear.

Dr. Buchan stated that, from his own review of Dr. Hill's file, if the Board sees him again, that's it. He has a stayed revocation. He wants Dr. Hill to understand the importance of the stayed revocation. He added that the Board is here to support him through recovery. He has a shot at it here, but it's up to him.

Dr. Steinbergh stressed that, should he have questions, he should come to the Board for answers. The Board Orders are clear. If they aren't clear, he needs to have them clarified by the Board's staff. She stated that it was never clear to her how he could interpret a previous Board Order as allowing him to practice.

Dr. Hill stated in the Tandon case, Judge Connor issued a ruling that stays were automatic.

Mr. Albert instructed Dr. Hill to stop blaming everyone else for his problems and to just accept his addiction, work on his recovery and work on getting himself to the place where he can get his license back. He guaranteed that Dr. Hill has used up all of his chances. He needs to forget about blaming others and work on his recovery. The Board wants to see Dr. Hill succeed.

In response to Dr. Kumar's questions, Dr. Hill stated that his last problem was with alcohol, and the first time it was hydrocodone. His first sobriety date was April 1993. He would date his impairment beginning in around 1989.

Dr. Kumar stated that he hopes that Dr. Hill recovers, and that he takes Dr. Egner's and Mr. Albert's

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cautions very carefully. This is his last opportunity and he should take advantage of it and recover.

**DR. BUCHAN MOVED TO CONTINUE DR. HILL UNDER THE TERMS OF THE BOARD'S ORDER OF MAY 14, 2003 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. Talmage	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

ROBERT F. LINN, D.O.

Dr. Linn made his initial appearance before the Board, pursuant to the terms of his June 11, 2003 Consent Agreement.

In response to Dr. Steinbergh's questions, Dr. Linn stated that he is doing very well. This is a busy time for him as he opened up a solo private practice the previous week in Huber Heights, Ohio. He did his residency in a civilian institution in Pennsylvania, Ohio. He then spent five years at Wright Patterson Air Force Base (WPAFB) in Dayton, Ohio, and was discharged in July 2002. He was practicing with a group in Englewood, Ohio, up until July of this year. His separation from that group was not a result of the Board's Consent Agreement or his depression. He advised that he had planned to open his own practice.

Dr. Linn continued that he sees his psychiatrist every three months. His next appointment is next week. He's nominated Ronan M. Kisch, Ph.D., as his treating psychologist. He has been seeing Dr. Kisch every one to two weeks for almost a year. He and his wife typically go together. Some visits are alone but probably most are together.

Dr. Steinbergh stated that she is a solo practitioner in family practice and she knows what the stresses are. Her concern is that, in the development of his practice, Dr. Linn maintain his counseling and that he stay well. It is a high-pressure kind of thing, especially if you're the sole breadwinner of the family.

Dr. Linn stated that his wife is the office manager. He agreed with Dr. Steinbergh that it was much more work than he had imagined. He still has a contract with Grandview/Kettering, and so he has financial backing with a contract, a guaranteed salary, and a guarantee on office expenses, etc., for another thirteen

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months. That will help to make sure that they're up and running until they're on their own at the end of that thirteen months.

Dr. Steinbergh commented that that thirteen months will go quickly. She asked whether Dr. Linn's family is stable.

Dr. Linn stated that his relationship with his wife has gotten a lot better. They probably never got the counseling needed when he was in the military. The counseling at WPAFB was done by the residents there. He believes that the psychologist they are now seeing is outstanding. They believe they are getting the things they need. He and his wife are both a little headstrong. They're learning to work together on those kinds of issues.

Dr. Steinbergh noted that Dr. Linn has two charges of domestic violence on his record.

Dr. Linn stated that he did. He added that he didn't have the money for an attorney, and the report sounds ugly when you read it. He stated that he won't make any excuses for the charges. He stated that he doesn't know if the Board has actual copies of the police reports, but he did two wrongs, and he's sorry that he did that. He's asked his wife for forgiveness and they're working on it. The first incident was during an argument, when he threw a can of Coke at his wife and hit her in the leg. He's the one who called 911. He was down about some things and he got arrested. The second incident involved a heated argument, during which his sister was on the phone with his wife and heard his wife screaming, and his sister called 911. The police came and he was arrested again. He was wrong for being in that kind of argument, and he does admit that during the arguments the two of them had their hands on each other. He added that he's not proud of that, and he can't erase the facts – they're in the record. All he can do is move forward. He and his wife have two beautiful children, ages two and three, he has three stepchildren- two in high school and one in college, and he has three sons he supports in Pennsylvania. They're a busy family. He works at a couple Urgent Care facilities at night to help support their family.

In response to Dr. Kumar's questions, Dr. Linn stated that he has privileges at two hospitals, and he has associate privileges at other hospitals since he practices at their after-hours clinics.

In response to Mr. Albert's questions, Dr. Linn stated that he's in the office roughly eight hours, five days a week, although they're staying late Thursday evenings and Saturday mornings twice a month. One morning a week he precepts residents at a health clinic in downtown Dayton. He has an arrangement with the hospital to moonlight about twelve hours a week.

Mr. Albert stated that it has been his observation that solo practitioners sometimes tend to work more hours than they should, and that puts stress on them. He suggested that Dr. Linn closely monitor that. Mr. Albert expressed concern that incidents of domestic violence sometime spill over into working with patients, and he asked that Dr. Linn keep that in mind.

Dr. Robbins stated that he doesn't think it's an easy situation to have one's spouse in the office as an office manager. He added that he doesn't think it's easy to have your spouse in the office in any situation; it's stressful. Dr. Robbins stated that Dr. Linn needs to monitor his stress level carefully, because it could get

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worse.

Dr. Linn stated that the two of them met with their therapist the previous day and the whole hour was focused on that issue.

Dr. Davidson commented that neither of them can ever get away from work.

**DR. GARG MOVED TO CONTINUE DR. LINN UNDER THE TERMS OF HIS JUNE 11, 2003 CONSENT AGREEMENT AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. GARG ALSO MOVED TO APPROVE DR. KISCH AS DR. LINN'S TREATING PSYCHOLOGIST. DR. ROBBINS SECONDED THE MOTION.**

Dr. Egner stated that she thinks that Dr. Linn made a lot of bad decisions. He comes across as a pretty nice guy, but on paper he doesn't look like a nice guy.

Dr. Linn stated that when you read the report, it does look bad. Even when you read the admissions for the hospital, those were for command directed mental health evaluations. They weren't psychiatric admissions. They weren't required because he required inpatient mental health treatment. That's just the way the military does it when they want to evaluate your fitness for duty when you're under treatment for depression and on medication. You're admitted for a week and then you're evaluated thoroughly.

Dr. Egner asked what Dr. Linn's date of discharge was.

Dr. Linn stated that he was discharged on July 6, 2002.

Dr. Egner noted that both domestic violence episodes occurred when Dr. Linn was in the military. Dr. Egner stated that choosing solo practice is not the best thing to do for him, financially or time-wise. She stated that she has been there. Working with his wife is not a good thing to do – they will be together all of the time. If they're both kind of stubborn and they both want control, he's setting himself up for disagreements both in the office and at home. He's working too many hours, and yet he has bills to pay. He has himself in a bad situation with a bad past.

Dr. Linn stated that he doesn't see any way out of that, unfortunately.

Dr. Egner suggested that he get a job in a group.

Dr. Linn stated that he looked into that, but he was turned down because of his probation.

Dr. Egner stated that she understands that, but the Board has many probationers who find jobs. She stated that Dr. Linn is going to do what he wants to do, and he will either succeed or fail. He minimizes the domestic violence charges, and she's very suspicious of that. She added that he doesn't have to prove anything to her. He has to follow his consent agreement and not get into trouble.

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Dr. Linn stated that he respectfully disagrees with Dr. Egner that he minimizes the domestic violence charges. He added that he wishes his wife were with him to explain, but she's not.

Dr. Buchan stated that if it looks bad on paper, it might be because it is bad. He advised Dr. Linn that the Board would be in his corner as long as it can be, but it won't minimize his problems.

Dr. Robbins asked who takes care of the children when his wife is at the office.

Dr. Linn stated that they've hired a neighbor's granddaughter who stays with the children.

Dr. Robbins stated that that's another expense, and suggested that Dr. Linn give that a lot of thought.

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

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

The motion carried.

GUY M. SAVA, M.D.

Dr. Sava was scheduled to make his initial appearance before the Board, pursuant to the terms of the Board's Order of April 2, 2003; however, he was unable to attend the meeting.

Mr. Schmidt advised that Dr. Sava has submitted requests for the Board's consideration. He added that although Dr. Sava does have a plausible reason for not being able to attend this meeting, he would recommend tabling Dr. Sava's requests until such time as he appears before the Board.

Dr. Steinbergh asked whether Dr. Sava needs to be present for the Board to approve a supervising physician.

Mr. Schmidt stated that he is suggesting tabling the requests because this is the second time Dr. Sava has been scheduled for his initial appearance and did not appear.

**DR. STEINBERGH MOVED TO TABLE DR. SAVA'S REQUESTS UNTIL SUCH TIME AS HE APPEARS BEFORE THE BOARD. DR. BUCHAN SECONDED THE MOTION. A vote was taken:**

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

The motion carried.

#### ROLE OF MEDICAL BOARD PRESIDENT, VICE-PRESIDENT AND SECRETARY

Mr. Browning indicated that this matter would be tabled until the Thursday session, but he asked whether any Board members need information from Mr. Dilling on this topic, since Mr. Dilling won't be present on Thursday. If not, the matter will be tabled.

Mr. Dilling at this time directed the Board's attention to his memorandum of July 30, 2003, a copy of which shall be maintained in the exhibits section of this journal, which provides guidelines for the transition from Dr. Garg as Secretary to Dr. Talmage. He asked that the Board move to adopt the transition guidelines as detailed in the memorandum. He reminded the Board that this was discussed by the Executive Committee at its August meeting. The Executive Committee, in its report to the Board, recommended approval; however, there was never a motion or vote on this.

Mr. Browning asked Mr. Dilling to recap the discussion from August.

Mr. Dilling stated that, as Board Secretary, Dr. Talmage will abstain from all cases, not only the ones on which he had served as the Secretary. Dr. Garg will continue to abstain in cases on which he acted as Board Secretary. Staff will notify him when a case comes up upon which he did not serve as Secretary.

Mr. Dilling stated that there was an issue in that the Board President usually filled the Secretary or Supervising Member role when either recuses himself from the case. His suggestion is that the Board allow the past Secretary to now fill that role, thereby saving a vote and also using Dr. Garg's valuable resource and experience.

Dr. Steinbergh stated that she believes that, if the President is a physician, that role should fall to the President. She stated that she did serve as President, and serving as replacement Secretary or Supervising Member becomes a valuable experience for the President. He or she gets to see the other side of the Board and gets to make decisions in a way that allows the President to see the prosecutorial section of the Board. If Dr. Garg has not been involved in the case, you're not saving a vote. Her personal feeling is that the Board should continue to educate and expose those people moving up through the chairs, including the

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President, to this type of issue.

Dr. Davidson agreed with Dr. Steinbergh.

Dr. Garg stated that he doesn't care one way or the other, but he thought the proposed policy was going to be a temporary situation. There's no reason that it can't be changed at any time.

Dr. Steinbergh noted that, currently, the President is a non-physician. She agreed at this time that if Dr. Garg has already had exposure to a case, he should serve as Acting Secretary or Supervising Member in cases where the Secretary or Supervising Member must abstain.

Dr. Robbins suggested that if the President can't serve as Secretary, and Dr. Garg has not had exposure to the case, the President should appoint someone to serve in cases where the Secretary or Supervising Member must abstain.

Mr. Dilling stated that the guidelines, as written, take the President out of the role of serving as Secretary or Supervising Member.

Dr. Talmage noted that these guidelines would prevail while the President is a non-physician. If the President is a physician, these guidelines would not be necessary and would not prevail.

Dr. Steinbergh stated that she thinks that it is fair to say that the guidelines don't direct the President to assign the case to a physician member when the Secretary or Supervising Member have a conflict.

Mr. Browning asked whether the Board wishes to amend the language in Mr. Dilling's memo to say what Dr. Talmage just said, to qualify it to the situation the Board is in today.

Dr. Garg suggested approving this document and deciding again in January, when a new President takes over, how the Board wants to proceed.

**DR. BUCHAN MOVED TO APPROVE THE TRANSITION GUIDELINES THROUGH DECEMBER 31, 2003. MR. ALBERT SECONDED THE MOTION.** A vote was taken:

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

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The motion carried.

At this time, the topic was tabled for further discussion on Thursday.

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

Thereupon at 4:45 p.m. the September 10, 2003 session of the State Medical Board of Ohio was duly adjourned.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio, meeting on September 10, 2003, as approved on October 8, 2003.



R. Gregory Browning, President



Lance A. Talmage, M.D., Secretary

(SEAL)



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**MINUTES****THE STATE MEDICAL BOARD OF OHIO****September 11, 2003**

R. Gregory Browning, Ph.D., President, called the meeting to order at 8:00 a.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; Anand G. Garg, M.D., Secretary; Raymond J. Albert, Supervising Member; David S. Buchan, D.P.M.; Deepak Kumar, M.D.; Anquetette Sloan; Patricia J. Davidson, M.D.; Andrew F. Robbins, Jr., M.D., and Anita M. Steinbergh, D.O. The following joined the meeting at a later time: Carol L. Egner, M.D. The following did not attend the meeting: Anant R. Bhati, M.D.

Also present were: William J. Schmidt, Assistant Executive Director; Diann K. Thompson, Assistant Executive Director; Terrill D. McLaughlin, Assistant Director, Investigations; Mark Wayda, Chief of Executive Staff; Shannon K. Baldwin, Executive Staff Attorney; Karen H. Mortland, Enforcement Coordinator; Rebecca J. Albers, Assistant Attorney General; Eileen M. Schmidt, Executive Assistant to the Director; and Joan K. Wehrle, Coordinator for Assessment and Development.

**EXECUTIVE SESSION**

**MR. ALBERT MOVED THAT THE BOARD DECLARE EXECUTIVE SESSION TO CONSIDER THE EMPLOYMENT OF A PUBLIC OFFICIAL. DR. BUCHAN SECONDED THE MOTION. A vote was taken:**

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

The motion carried.

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

Dr. Egner arrived during the Executive Session.

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ROLE OF MEDICAL BOARD PRESIDENT, VICE-PRESIDENT AND SECRETARY

At this time Mr. Browning removed the above-captioned topic from the table.

Dr. Talmage at this time submitted his resignation as Board Vice-President, based on the fact that he now holds the office of Secretary of the Board.

**DR. STEINBERGH MOVED TO NOMINATE MS. SLOAN AS VICE-PRESIDENT OF THE BOARD. DR. GARG SECONDED THE NOMINATION.** A vote was taken:

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

The motion carried.

**DR. GARG MOVED THAT, IF ANY BOARD MEMBER WHO IS ELIGIBLE FOR THE PRESIDENCY BY SENIORITY STEPS DOWN FOR REASONS OF HOLDING ANOTHER OFFICE OR FOR PERSONAL REASONS, THAT MEMBER WOULD KEEP SENIORITY TO RUN FOR PRESIDENT AT THE NEXT OPPORTUNITY. DR. BUCHAN SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Buchan	- 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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LICENSUREPHYSICIAN ASSISTANT APPLICANTS

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

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

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

The motion carried.

DAVID KIM, M.D. – P.A. UTILIZATION PLAN

Dr. Kim's P.A. Utilization Plan was presented to the Board for consideration at this time.

**DR. STEINBERGH MOVED TO APPROVE DR. KIM'S P.A. UTILIZATION PLAN, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. DR. KUMAR SECONDED THE MOTION.** A vote was taken:

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

TED ZDANOWICZ, M.D. – P.A. UTILIZATION PLAN

Dr. Zdanowicz' P.A. Utilization Plan was presented to the Board for consideration at this time.

**DR. STEINBERGH MOVED TO APPROVE DR. ZDANOWICZ' P.A. UTILIZATION PLAN, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. DR. BUCHAN SECONDED THE MOTION.** A vote was taken:

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

The motion carried.

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. STEINBERGH 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. MS. SLOAN SECONDED THE MOTION.** A vote was taken:

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

PHYSICIAN ASSISTANT APPLICANTS

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

**DR. STEINBERGH 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. MS. SLOAN SECONDED THE MOTION. A vote was taken:**

Vote:

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

The motion carried.

DIAGNOSTIC CARDIOLOGY ASSOCIATES – P.A. UTILIZATION PLAN

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

**DR. DAVIDSON MOVED TO APPROVE THE STANDARD P.A. UTILIZATION PLANS SUBMITTED BY DIAGNOSTIC CARDIOLOGY ASSOCIATES, 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. Talmage	- aye
Dr. Buchan	- 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.

RAJEEV MEHTA, M.D. – P.A. UTILIZATION PLAN

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

**DR. BUCHAN MOVED TO APPROVE THE STANDARD P.A. UTILIZATION PLANS SUBMITTED BY RAJEEV MEHTA, M.D., CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. DR. DAVIDSON SECONDED THE MOTION.** A vote was taken:

Vote:

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

The motion carried.

METROHEALTH MEDICAL CENTER, DEPT. OF GASTROENTEROLOGY – P.A. UTILIZATION PLAN

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

**DR. GARG MOVED TO APPROVE THE STANDARD P.A. UTILIZATION PLANS SUBMITTED BY METROHEALTH MEDICAL CENTER, DEPT. OF GASTROENTEROLOGY, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS. DR. BUCHAN SECONDED THE MOTION.** A vote was taken:

Vote:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Buchan	- 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.

CHARLES MOLTA, M.D. – P.A. UTILIZATION PLAN

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

**DR. GARG MOVED TO APPROVE THE STANDARD P.A. UTILIZATION PLANS SUBMITTED BY CHARLES MOLTA, M.D., CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS.**

**DR. DAVIDSON SECONDED THE MOTION.** A vote was taken:

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

The motion carried.

OHIO VALLEY SURGEONS – P.A. UTILIZATION PLAN

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

**DR. GARG MOVED TO APPROVE THE STANDARD P.A. UTILIZATION PLANS SUBMITTED BY OHIO VALLEY SURGEONS, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS.**

**DR. DAVIDSON SECONDED THE MOTION.** A vote was taken:

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

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

The motion carried.

#### ACUPUNCTURIST APPLICANT

At this time the Board considered applications for registration as acupuncturists.

**DR. GARG MOVED TO APPROVE THE APPLICANTS LISTED IN LICENSURE EXHIBIT (D) FOR REGISTRATION AS ACUPUNCTURISTS, 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. Talmage	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Robbins	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

The motion carried.

#### ANESTHESIOLOGIST ASSISTANTS

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

**DR. GARG MOVED TO APPROVE THE APPLICANTS LISTED IN LICENSURE EXHIBIT (D) FOR REGISTRATION AS ANESTHESIOLOGIST ASSISTANTS, 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

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

The motion carried.

#### REPORTS OF ASSIGNED COMMITTEES

##### EXECUTIVE COMMITTEE

Mr. Browning stated that the Committee met with representatives from O.S.M.A. Mr. Browning stated that he arrived at the meeting late, and deferred to Dr. Talmage for a report on the meeting.

Dr. Talmage stated that it was a very congenial meeting. One issue that was discussed was the storage of medical records. The O.S.M.A. and O.H.A. feel that the Board is better suited to store records of physicians who leave the state or hospitals that close down. The Committee, however, disagreed, and does not feel that the Board has the capability of storing those records. That will continue to be discussed.

Dr. Talmage stated that another issue discussed was O.S.M.A.'s handing out a brochure to people who are subject to investigation or who are interviewed by our investigators. The brochure uses the Board's name. O.S.M.A. has promised to take the Board's name out of the brochure. The O.S.M.A. has encouraged the Board to develop some written materials to be handed to persons other than those who are under subpoena that would detail the investigative process. Dr. Talmage stated that he thinks O.S.M.A. has made a good point.

Dr. Talmage advised that the rest of the discussion involved commonalities, including legislation on which the Board and O.S.M.A. are on common ground.

Mr. Browning stated that there was also discussion about the Clinical Skills Assessment Examination (CSE).

Dr. Talmage stated that, as organized medicine has continued to do, O.S.M.A. is opposed to the CSE as a condition of licensure, preferring instead to have it go back to being the responsibility of the medical schools to teach and examine clinical skills.

Dr. Talmage stated that none of the issues brought up were new. They were simply restatements of what has been discussed in the past.

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Dr. Garg asked whether there was further discussion on the C.M.E. fee issue.

Dr. Talmage stated that the matter was brought up, but there was no further discussion of it. The O.S.M.A. did detail some of the efforts they are making in raising the fee for approval of C.M.E. for various institutions. With the raised fee, only one institution dropped out. The rest renewed at the new fee. The O.S.M.A. policy is that, if the income does not meet the outgo for staff and administration, they will not fund it from the O.S.M.A. treasury. Right now they're breaking even.

Dr. Robbins asked whether the results of the exams come to this Board. Will the Board see the percentage of pass/fail rate for the Ohio medical schools? He stated that he would like to get those statistics.

Dr. Talmage stated that the National Board scores are published in *JAMA* each year, and he believes that they are divided by medical school. He stated that he would assume that the Board could get the same data.

Dr. Robbins asked whether there is anything that goes back to the medical school whose students receive sub-standard scores on the examination.

Dr. Talmage stated that he would assume that there would be pressure on schools with a large percentage fail rate. He stated that the state legislatures and medical boards would be on the school's back.

Mr. Browning asked that the staff follow up on Dr. Robbins' request.

Dr. Egner asked whether Dr. Steinbergh and Dr. Bhati did a site visit of one of the CSE facilities.

Dr. Steinbergh stated that they did, and she made a report about it at the Executive Committee meeting.

Mr. Browning asked that Dr. Steinbergh and Dr. Bhati report on their visit at the October Board meeting, when the topic will be on the agenda.

Dr. Garg stated that the Board needs to address the issue of what needs to be done to eliminate the TSE requirement in the law, since the CSE should take care of that aspect.

Dr. Kumar stated that in discussing the CSE, the Board has talked about hardships on graduates because of the limited number of exam sites. This imposes a greater difficulty for IMGs who take that test for the ECFMG because the test is only given in the United States at selected centers. Many IMGs, when they do take the ECFMG abroad have to travel to the United States to take that portion of the examination. They would have extreme difficulty coming here because of visa restrictions. They can't get a visa just to take the CSE. One of the things he would encourage is the creation of exam sites outside of the United States.

Dr. Garg stated that his understanding was that there will be only one examination. The ECFMG won't be giving it separately. It will be combined with USMLE and both organizations will work together.

Dr. Garg stated that he knows that it is inconvenient to come to the United States, and he may be in the

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minority among IMGs, but he doesn't see it as an imposition. If that's a requirement for licensure, and if there is only one center or several centers, they have to take it.

Dr. Kumar again stated that he has no objection to requiring the examination; however the overseas centers giving the examination do not have the CSE portion built into it.

Dr. Garg stated that it will be built into the USMLE and the ECFMG will not be giving a separate examination.

Dr. Kumar stated that the USMLE exams given overseas do not have the clinical centers, and although they are combining Parts I and II of the USMLE with the ECFMG, physicians are being required to go to the United States to take the CSE. They will need a visa to enter the United States, and you cannot get a visa just to take this clinical section examination. It is creating an increased hardship, not because they don't want to take the examination, but because of the logistics. It becomes impossible for them to come and take the examination in this country.

Mr. Browning stated that this topic will be brought back to the Board in October.

#### EDUCATION, PUBLIC RELATIONS & RISK MANAGEMENT COMMITTEE

Dr. Egner referred the Board to a list of possible topics for the upcoming newsletter. She advised Board members who want to add to the list to contact her or Ms. Lubow.

Dr. Davidson stated that Dr. Bhati had requested an article on gifts for physicians. She, Mr. Schmidt and Ms. Lubow have worked on language, and will distribute that to Board members when it is complete.

#### PRESCRIBING AND PAIN MANAGEMENT COMMITTEE

Dr. Davidson stated that she distributed minutes from the last four Compassionate Care Task Force (CCTF) meetings to the Committee. She advised that she, Mr. Wayda and Mr. Dilling have been attending the meetings. The CCTF will meet monthly through March.

Dr. Davidson stated that she also reported to the Committee on the Committee on Prescriptive Governance (CPG).

Dr. Davidson stated that the Committee will also review its weight management rules for update.

#### LEGISLATIVE LIAISON AND RULES COMMITTEE

Mr. Browning referred to Mr. Wayda's memorandum of September 10, 2003, a copy of which shall be maintained in the exhibits section of this journal. He advised that it's pretty quiet right now in the General Assembly. They only have a few days scheduled for the rest of the calendar year. He referred specifically to the proposed P.A. prescribing bill, adding that the Committee will be following this legislation as well as

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H.B. 264, concerning naturopathic medicine, closely.

Mr. Wayda stated that staff had planned to talk with the Committee about the Pharmacy Board's protocol rule. The Pharmacy Board had not yet considered that rule at the time that the Committee met. The Pharmacy Board has approved the rule to go to the formal rulemaking process. The Committee looked at this rule at a previous meeting and gave the staff some general guidance, indicating that the staff was handling this correctly. The rule the Pharmacy Board approved is not yet finalized because there is still a question of definition of "high therapeutic index." The Executive Director of the Pharmacy Board is working with OSU's School of Pharmacy to come up with language. Their Board has approved going forward with the rule, saying that they trust that the language on therapeutic index will be sufficient.

Mr. Wayda stated that this is an issue with the Medical Board because in February the Medical Board approved the Tri-Board (the Medical Board, the Pharmacy Board and the Nursing Board) statement on protocol prescribing. That statement was a statement of what current law allows. A number of different parties saw the statement as being new law because they had been practicing in violation of the old law for quite some time. The people who were at the forefront of this with the Board were the dialysis clinics. The proposed rule change is a direct result of conversations between the three Boards and representatives of the dialysis centers. The issue has been how many times can a non-prescriber adjust the dose of medication before the prescriber has to be involved again. According to the definitions in the Pharmacy Board statutes, you get one. If a non-prescriber adjusts the medication, there has to be a new order written by the physician before a second dose adjustment can occur.

Mr. Wayda stated that the bottom line is that the Pharmacy Board has created a rule that will allow a single-dose adjustment, creates standards for getting back to physicians, makes a requirement for a second order if there is going to be a second dose adjustment, and every subsequent dose adjustment. This will take the dialysis clinics in some measure towards where they want to be. Not all of the interested parties are getting all they want. The second piece of this is that respiratory therapists do a lot of practice by protocol, which is in violation of the statutes, but their practice is often non-medical. They have protocols for non-drug therapies. They do weaning of ventilators and post-thoracic surgical care by protocol. They have now gotten into this game, as well, and the Board will probably see some scope of practice legislation for respiratory therapists.

Dr. Kumar noted that the rule refers to "inpatients," which does not cover all patients in hospitals. There are patients who are in the hospital for observation and aren't technically inpatients. The language needs to address these patients. Half of the patients in the hospitals are technically outpatients.

Mr. Wayda stated that staff will mention that to the Pharmacy Board, but he reminded the Board that the language on "inpatients" is part of the regulatory scheme. Since the Pharmacy Board is opening up this rule, the Medical Board can certainly make that point.

#### LICENSURE COMMITTEE

Dr. Garg stated that the Committee tabled the licensure application of Samuel Tobias pending receipt of

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additional information.

LIMITED BRANCH & ALTERNATIVE MEDICINE COMMITTEE

Dr. Buchan stated that the Committee addressed three issues. The first issue involves an application for renewal of certificates of good standing. Staff will continue to refine that application and will bring it back to the Committee in October.

Dr. Buchan continued that the Committee also reviewed a list of FAQs on the use of endermologie machines, which was created in response to increasing inquiries from the public. These machines are being marketed to unlicensed persons and persons licensed as estheticians and cosmetologists. After reviewing information provided by staff, the Committee felt that the use of these machines is the practice of medicine within the scope of massage therapy. The FAQs will be posted on the Massage Therapy subweb on the Board's website.

Dr. Buchan stated that the third item the Committee addressed concerned a proposed cosmetic therapy curriculum rule, which is based on the massage therapy curriculum rule previously submitted by the Board to the formal rulemaking process. The Committee recommends that the Board proceed to the rulemaking process.

**DR. GARG MOVED TO FILE THE PROPOSED RULE FOR HEARING. DR. DAVIDSON SECONDED THE MOTION.** A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Buchan	- 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 discussed proposed changes to the supplemental P.A. Utilization Plan application in order to reduce redundant paperwork. The staff will continue working on the document and bring it back to the Committee at a future meeting.

**DR. GARG MOVED TO ADJOURN. DR. BUCHAN SECONDED THE MOTION.** All members voted

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aye. The motion carried.

Thereupon at 9:47 a.m. on September 11, 2003, the September 10-11, 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, meeting on September 10-11, 2003, as approved on October 8, 2003.



R. Gregory Browning, President



Lance A. Talmage, M.D., Secretary

(SEAL)

