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MINUTES**THE STATE MEDICAL BOARD OF OHIO****December 13, 2006**

Andrew F. Robbins, Jr., M.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: Deepak Kumar, M.D., Vice-President; Raymond J. Albert, Supervising Member; Carol L. Egner, M.D.; David S. Buchan, D.P.M.; R. Gregory Browning, Ph.D.; Anquetette Sloan; Patricia J. Davidson, M.D.; and Anita M. Steinbergh, D.O. The following joined the meeting at a later time: Lance A. Talmage, M.D., Secretary; and Nandlal Varyani, M.D. The following did not attend the meeting: Dalsukh Madia, M.D.

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

MINUTES REVIEW

Dr. Egner advised that she asked that the minutes be amended to note that Ms. Murphy addressed the Board after raising her hand and being recognized by Dr. Robbins. The draft contained in the table file reflects that amendment.

DR. BUCHAN MOVED TO APPROVE THE MINUTES OF NOVEMBER 8-9, 2006, AS AMENDED. DR. DAVIDSON SECONDED THE MOTION. A vote was taken

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

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The motion carried.

EXECUTIVE SESSION

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

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

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

Dr. Talmage and Dr. Varyani joined the meeting during the executive session.

The following joined the meeting after the executive session: Patricia A. Davidson, Acting Chief Hearing Examiner; Gretchen Petrucci, Hearing Examiner.

REPORTS AND RECOMMENDATIONS

Dr. Robbins announced that the Board would now consider the Reports and Recommendations appearing on its agenda. He asked whether each member of the Board had received, read, and considered the hearing records, the proposed findings, conclusions, and orders, and any objections filed in the matters of: Ravi Chandra Ashwath, M.D.; Alexander M. Beylinson, M.D.; Harry Michael Condoleon, D.O.; Shaji Jaffrey Kazi, M.D.; Tera Jean Martin, M.T.; Lalsingh P. Rohira, M.D.; Robert Franklin Short, M.D.; and Gretel Case Stephens, M.D. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye*
	Dr. Talmage	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye

* Dr. Egner's response came later in the meeting.

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

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

Dr. Robbins 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. They may, however, participate in the matter of Dr. Beylinson, as that case is not disciplinary in nature and concerns only the doctor's qualifications for licensure. In the matters before the Board today, Dr. Talmage served as Secretary and Mr. Albert served as Supervising Member.

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

RAVI CHANDRA ASHWATH, M.D.

Dr. Robbins directed the Board's attention to the matter of Ravi Chandra Ashwath, M.D. He advised that objections were filed to Hearing Examiner Porter's Report and Recommendation and were previously distributed to Board members.

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

* Dr. Egner's response came later in the meeting.

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Dr. Ashwath was accompanied to the meeting by his attorney, James M. McGovern.

Mr. McGovern stated that he submitted objections, and he understands that they have been read by the Board members. Mr. McGovern stated that Dr. Ashwath does not have any objection to the ultimate conclusion reached by Mr. Porter in this matter, that being that Dr. Ashwath did violate R.C. 4731.22(B)(22), and that he did not violate R.C. 4731.22(A) or (B)(5). The matter at issue dealt with a renewal application question. Dr. Ashwath did not consent to the Georgia discipline that triggered this whole matter until nine days after he correctly responded to question 2 on the Ohio renewal application. Therefore, Dr. Ashwath had not “consented to a reprimand concerning a license to practice in any jurisdiction other than Ohio,” as was referenced in question 2 on the Ohio renewal application until after Dr. Ashwath had electronically submitted that document. Mr. McGovern urged the Board to adopt Mr. Porter’s recommendation.

Dr. Ashwath addressed the Board at this time. He thanked the Board for the opportunity to be before the Board. He stated that he did not have any intentions at any time to deceive the Board, as evidenced by his answer to the question that asked whether he had a malpractice suit. Dr. Ashwath stated that he clearly said “yes” to that question. After that, confusion occurred because of the question associated with it. Secondly, he complied with the terms of the Georgia Board by paying the fine and doing additional C.M.E. He’s complete with that. Dr. Ashwath advised that he’s in a cardiology fellowship program at Rainbow Babies and Children’s Hospital. He’s a chief fellow at this time, in his third year, and he plans to do fetal echocardiography for his future career. He’s interviewed at Rainbow, and he will hopefully stay there and work in Ohio.

Dr. Ashwath again thanked the Board for giving him an opportunity. He remarked that this type of thing should never have occurred in his life.

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

Mr. Clifford stated that he would essentially address the objections raised by Dr. Ashwath. He advised that Dr. Ashwath answered “no” on his renewal application when asked whether he consented to discipline in another jurisdiction. Mr. Clifford stated that Dr. Ashwath signed the agreement with the words, “consented to,” on January 31, 2005, with the Georgia Board. He submitted his renewal application, answering “no” to the question on February 14, 2005. At the time of the submission, the Georgia Board had not ratified the Consent Agreement. Mr. Clifford stated that, notwithstanding the fact that the Hearing Examiner did not find a violation of 4731.22(A) and (B)(5), Dr. Ashwath contends that he was not required to answer “yes” on the renewal application because the Consent Agreement was not effective until the document was ratified by the Georgia Board, and, therefore, the Board wasn’t justified in commencing this action.

Mr. Clifford stated that this argument ignores the document itself, which says “consented to,” which was signed and dated approximately two weeks before the submission of his renewal application. Whether the document is effective is immaterial to whether he consented to the agreement. Mr. Clifford stated that he thinks that Dr. Ashwath is also confused with the requirements to find violations of 4731.22(A) and (B)(5). The meaning of that is “intent.” Dr. Ashwath saw this document, he signed it. He knew he signed it. He submitted his renewal application. He was told, either by his attorney or someone else, that the

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agreement wasn't effective until it is ratified by the Georgia Board. Based upon that, the Hearing Examiner looked and said, "Okay, now, we have this person who was told that this isn't effective until it's ratified. Therefore he, in not disclosing this, didn't intend to deceive the Board." The Hearing Examiner didn't find that Dr. Ashwath didn't consent to it. Of course, he consented to it. Mr. Clifford commented that it's a semantics argument being raised here. He commented that the Executive Director of the Georgia Board, who was not an attorney, testified that, no matter when they consent to it, it's not consented until it's ratified. Mr. Clifford stated that he thinks that that's plainly a stupid argument.

Mr. Clifford stated that when the Board looks at the plain reading of the Georgia Consent Agreement, and the question on the Ohio renewal application, Dr. Ashwath was aware of the document, he was aware when he submitted it, there was just a question of whether he intended to deceive the Board. Mr. Clifford stated that he does agree with Dr. Ashwath that he did notify this Board of the Georgia action; but to say that the Board was not substantially justified in going forward is incorrect, and to say that he did consent to it and answered the Ohio question properly is incorrect.

Mr. Clifford closed by saying that there is evidence to support at least, at a minimum, the (B)(22) violation, and it's up to the Board to decide whether a reprimand is sufficient.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. PORTER'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF RAVI CHANDRA ASHWATH, M.D. MS. SLOAN SECONDED THE MOTION.

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

Dr. Steinbergh stated that she does believe that the Board had reason to bring Dr. Ashwath to hearing. Concerning the question about his answer to the Board that he had not consented when he had consented, Dr. Steinbergh noted that this Board's consent agreements include the following language:

It is expressly understood that this Consent Agreement is subject to ratification by the Board prior to signature by the Secretary and Supervising Member and shall become effective upon the last date of signature below.

Dr. Steinbergh stated that there is a time element there. The practitioner signs the agreement, agrees or consents to the terms, but understands that the agreement is not yet ratified. Dr. Steinbergh stated that she doesn't know that the Board could prove that Dr. Ashwath intended to fraudulently apply or intended to mislead the Board. She added that she thinks that the Georgia Board's decision was appropriate. Georgia reprimanded Dr. Ashwath and required that he complete C.M.E. Dr. Steinbergh stated that she thinks that the Proposed Order is appropriate. The Board should reprimand Dr. Ashwath. She added that she doesn't personally think that the Board should look beyond that. It's sufficient, and the Board has every reason to believe that Dr. Ashwath is going to be an appropriate physician in the State of Ohio, and she would not step in the way at this point. She would simply reprimand him.

Dr. Steinbergh stated that those Board members who sit and read the language time and time again, if he believed that the consent order would not be effective, as the Georgia Board said, she thinks that he

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believed that. Dr. Steinbergh stated that the Board should just let this go now.

Dr. Buchan stated that he reviewed this case and agrees that the Proposed Order is appropriate. The Board reads time and time again about the intent to defraud issue, and his feeling about that is that full disclosure is most appropriate. Dr. Buchan believes that Dr. Ashwath now understands that. Dr. Buchan added that he's not necessarily buying into the fact that Dr. Ashwath didn't understand that he might be walking a tight line here. Dr. Buchan again stated that the Proposed Order is appropriate. Dr. Ashwath paid his debt and needs to move forward.

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

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

The motion carried.

ALEXANDER M. BEYLINSON, M.D.

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

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

Dr. Beylinson was accompanied by his attorney, Victoria L. Fedor. Ms. Fedor stated that she and Dr. Beylinson thank the Board for the opportunity to address it. She also thanked Ms. Petrucci and Mr. Wilcox for their professionalism throughout the process.

Ms. Fedor stated that the issue before the Board today is whether or not Dr. Beylinson completed two years of postgraduate medical education, as required. Ms. Petrucci's Report and Recommendation finds that Dr. Beylinson has, in fact, met this requirement. They have no objections to the Report and Recommendation, and they respectfully request that it be adopted by the Board.

Dr. Beylinson thanked the Board members for taking time out of their busy schedules to be here today. He added that he would like to apologize to the Board for the inconvenience and confusion regarding whether

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the requirements of PGY-2 were met. Dr. Beylinson stated that he graduated from medical school in the former USSR. He completed four years of internship and residency in general surgery. He worked as a general surgeon in Almaty City Hospital in Kazakhstan. After he came to Ohio with his family, he completed the requirements of E.C.F.M.G. certification, an internship at Case Western Reserve University (CWRU) in Cleveland, and he accepted a PGY-1 position at Huron Hospital in Cleveland. He understood that he would actually be doing PGY-2 skilled training. He did all rotations and skills that the PGY-2 residents did. He also completed all the requirements of Huron Hospital's surgical residency program. Dr. Beylinson stated that he has supporting letters from physicians of Huron Hospital and Robinson Memorial Hospital. He is currently licensed to practice medicine in New Hampshire and Michigan, but he would like to live and work in Cleveland, together with his friends, former residents and his teachers. Dr. Beylinson stated that he looks forward to practicing medicine in Ohio.

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

Mr. Wilcox stated that he does not.

DR. VARYANI MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF ALEXANDER M. BEYLINSON, M.D. DR. BUCHAN SECONDED THE MOTION.

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

Dr. Egner stated that she appreciates the Report and Recommendation. She added that she thinks it was very clear that, since the Board didn't have the information given to it at the level of the Licensure Committee, where this probably could have been taken care of, it had to go to hearing. Dr. Egner stated that she agrees that Dr. Beylinson does fulfill the requirement; he has completed the equivalent of two years of postgraduate training through the second year level. Dr. Egner noted, however, that Dr. Beylinson's training was not called "PGY-2" training and the matter deserved looking into. The letters presented at hearing clarify it completely. Dr. Egner stated that she would like to say for the record that some of this could have been avoided if Dr. Beylinson had provided all of this information to the Board at a much earlier date. He would have saved himself and the Board a lot of trouble and expense. Dr. Egner stated that she agrees with the Report and Recommendation that Dr. Beylinson should be granted a license. Dr. Egner added that she hopes Dr. Beylinson has a successful career.

Dr. Steinbergh stated that she has real concerns about this license. Although she respects the concept that he may have had training through the second-year level, as she reviewed his training, both in Kazakhstan and in Ohio, his training has been in surgery. Dr. Steinbergh stated that she questions why Dr. Beylinson doesn't go on to be a surgeon. Now he's moving into a very risky area of practicing general medicine. He's a visiting physician seeing patients at home, and so forth. He'll work in geriatric medicine. Dr. Steinbergh stated that she sees absolutely no real training in those areas.

Dr. Steinbergh stated that the Board's mission is public protection, and even though the Board doesn't license by specialty, it recognizes the fact that those physicians who step outside of their areas of expertise are putting patients at risk and putting themselves at risk. Dr. Steinbergh stated that she would encourage

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anyone who is going to go on to do medicine like that, to go and get more postgraduate training in those areas. If Dr. Beylinson has made a decision that he's not going to be a surgeon and continue with his surgical training, he ought to go into another training program and be trained to do internal medicine, geriatrics, whatever his choice is. Dr. Steinbergh stated that she thinks this case is risky.

Dr. Kumar commented that Dr. Steinbergh has read his mind. He was wondering why a person trained in general surgery is going to go on to do general medicine. Dr. Kumar stated that, by statute, the Board has to accept the training because the Board can't license by specialty, but he thinks that there are some things that Dr. Beylinson needs to look at, internally.

Dr. Buchan stated that he thinks it's appropriate to license this gentleman, but he was wondering what certifying board he will pursue. That board will ask the questions in detail and may put up a block in terms of his ability to access that certification. Dr. Buchan stated that he does think that Dr. Beylinson deserves a license in the State of Ohio.

Dr. Kumar stated that you don't have to be board certified.

Dr. Buchan stated that the record reflects that Dr. Beylinson is going to pursue board certification. Dr. Buchan stated that his own position on this case is that Dr. Beylinson met the standard that the Board requires. The ABMS may feel differently over time.

Dr. Talmage left the room during the previous discussion.

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

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

The motion carried.

HARRY MICHAEL CONDOLEON, D.O.

Dr. Robbins directed the Board's attention to the matter of Harry Michael Condoleon, D.O. He advised that no objections were filed to Hearing Examiner McNeil's Report and Recommendation.

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

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Dr. Condoleon was represented at the meeting by his attorney, Robert C. Angell. Mr. Angell stated that he and Dr. Condoleon have no objection to the Report and Recommendation. They feel that the proposed resolution is appropriate. Mr. Angell advised that Dr. Condoleon has asked him to assure the Board that he will comply in every respect with the monitoring and the documentation requirements of the Proposed Order.

Mr. Angell advised that he spoke with Dr. Condoleon about ten days ago, and he said that the monitoring aspect of the CPEP process is just now getting underway. The six-to-nine-month period that was referenced in Dr. Condoleon's materials will probably be pushed out to twelve months at this point.

Mr. Angell stated that he does think that Dr. Condoleon will be able to get this Board to the same level of comfort as the Iowa Board in less than three years. Mr. Angell noted that Mr. McNeil's Report and Recommendation indicates that the Board may always release Dr. Condoleon from probation prior to the end of the three-year term; however, in his recommended order, Mr. McNeil indicates that the probation will be for a minimum of three years. Mr. Angell indicated that he would like clarification on that.

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

Mr. Clifford stated that he doesn't have anything to add to this case.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. MCNEIL'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF HARRY MICHAEL CONDOLEON, D.O. MR. BROWNING SECONDED THE MOTION.

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

Dr. Steinbergh stated that she finds that the Report and Recommendation is appropriate. She noted that this is a practitioner who was disciplined in Iowa for standard of care issues. This Board is not able to assess clearly what his standard of care was. Dr. Condoleon is in the CPEP process for Iowa. The language of the Proposed Order seems appropriate to her. She added that the only thing that she would add to the Proposed Order is the requirement that, prior to Dr. Condoleon's practice in Ohio, he submit a practice plan for Board approval. She added that she doesn't think that he needs to be in a supervised, structured environment; she just thinks that he should submit such a practice plan for Board approval, should he ever intend to practice medicine in Ohio.

Dr. Steinbergh advised that she thinks that the reason the Hearing Examiner added language indicating that the Board might release Dr. Condoleon prior to the end of the three-year probationary period is a suggestion for a possible amended Order. The Proposed Board Order, if adopted, would place Dr. Condoleon on probation for a period of three years, which she feels is appropriate. Dr. Steinbergh stated that the Board doesn't have any real evidence as to what this physician did. The Board's role of public protection is to make sure that the Board puts him under these probationary terms and, if he comes into the state of Ohio, the Board approves a practice plan and watches him.

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DR. STEINBERGH MOVED TO AMEND THE PROPOSED ORDER IN THE MATTER OF HARRY MICHAEL CONDOLEON, D.O., BY ADDING THE REQUIREMENT THAT DR. CONDOLEON PRESENT THE BOARD WITH A PRACTICE PLAN, WHICH MUST BE APPROVED BY THE BOARD PRIOR TO HIS PRACTICE IN OHIO, AS PARAGRAPH B.4, AND RENUMBERING THE “PERSONAL APPEARANCES” PARAGRAPH AS B.5. MR. BROWNING SECONDED THE MOTION.

Dr. Kumar agreed with Dr. Steinbergh’s motion, but added that he still has a little concern that the Board should have information from CPEP prior to getting a practice plan from Dr. Condoleon. If the Board doesn’t have information from CPEP prior to getting the practice plan, the Board won’t know exactly what is going on.

Dr. Steinbergh stated that paragraph B.3. of the Proposed Order requires Dr. Condoleon to submit to the Board any reports he submits to the Iowa Board, which would include a report by CPEP.

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

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

The motion carried.

MR. BROWNING MOVED TO APPROVE AND CONFIRM MR. MCNEIL’S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER, AS AMENDED, IN THE MATTER OF HARRY MICHAEL CONDOLEON, D.O. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

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

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The motion carried.

SHAJI JAFFREY KAZI, M.D.

Dr. Robbins directed the Board's attention to the matter of Shaji Jaffrey Kazi, M.D. He advised that no objections were filed to Hearing Examiner Davidson's Report and Recommendation.

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

Dr. Kazi was accompanied by his attorney, Kevin P. Byers. Mr. Byers advised that Dr. Kazi has no objections to the Report and Recommendation, but he would like to briefly address the Board at this time. Mr. Byers added that they heartily encourage the Board to adopt the outcome, as recommended by Ms. Davidson.

Dr. Kazi thanked the Board for giving him the opportunity to address it. He stated that he agrees with the facts in the Report and Recommendation. He added that he has been treated very fairly throughout this process.

Dr. Kazi stated that this case arose from his failure to give his forwarding address when he left Illinois in 2003, which, in turn, resulted in a charge by the Illinois Division of Professional Regulation that he failed to respond to a malpractice settlement in a timely fashion. Dr. Kazi stated that he would answer any questions that the Board may have.

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

Mr. Clifford stated that he did not.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. DAVIDSON'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF SHAJI JAFFREY KAZI, M.D. DR. KUMAR SECONDED THE MOTION.

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

Dr. Steinbergh stated that she agrees with the Report and Recommendation. She noted for the record that there is an error in the Summary of Evidence, in the "Background" paragraphs. Dr. Steinbergh stated that paragraph 1 should indicate that Dr. Kazi completed a three-year residency in internal "medicine," not "medical."

Dr. Steinbergh continued that Dr. Kazi, unfortunately, did not change his address with the Illinois Board, and he let his license expire. At that time he was actively licensed in Arizona. The Illinois Medical Board required him to submit a mandatory report regarding a malpractice settlement that had been reported to the Illinois Board. When Dr. Kazi did not respond, the Illinois Board took action on his license. Dr. Kazi eventually found out about this when the Arizona Board contacted him. He then realized the error he had

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made and contacted the Illinois Board. In August 2006, Dr. Kazi signed a consent order with the Illinois Board and paid a fine. The Illinois Board restored Dr. Kazi's license at that time and found that no other action was necessary.

Dr. Steinbergh stated that Ms. Davidson's Proposed Order is appropriate. She doesn't believe that the Board needs to take any further action on Dr. Kazi's license. She added that she thinks that he has learned his lesson and won't do it again. She suggested that Dr. Kazi was not clear at the time that he needed to send a change of address.

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

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

The motion carried.

TERA JEAN MARTIN, M.T.

Dr. Robbins directed the Board's attention to the matter of Tera Jean Martin, M.T. He advised that objections were filed to Hearing Examiner Davidson's Report and Recommendation and were previously distributed to Board members.

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

Ms. Martin was accompanied by her attorney, James M. McGovern.

Mr. McGovern stated that, as set forth in their objections, the two DUI and reckless operation convictions at issue are far removed from the present. As the evidence at the hearing demonstrated, and as the Board will hear today from Ms. Martin, a lot has changed in her life for the better since those events took place years back. The evidence demonstrates that Ms. Martin is not currently dependent upon, let alone abusing, alcohol. Of the options recommended by Hearing Examiner Davidson, dismissal of the charges is the most appropriate in this case.

Mr. McGovern stated that, if the Board can find a way to do so, Ms. Martin is in full cooperation and agreement with any monitoring terms the Board may want to place on her. The most obvious would be some type of random urine screens. Ms. Martin is willing and able to submit to that. The other two

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options proposed by Ms. Davidson are not of merit.

At this time Ms. Martin addressed the Board. She apologized to the Board, stating that she made a couple of mistakes a couple of years back, and she's learned a lot from them. She's still dealing with those mistakes, and she wants to put them behind her. Since then, she has bought a house, has been working for 14 months, doing a great job in massage, and she's just ready to put this behind her.

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

Mr. McCann stated that he would like to make a few comments about the Report and Recommendation. Generally, he agrees with the Report and Recommendation. He agreed that the testimony of Leah Menninger, a Counselor at the Center for Chemical Addictions Treatment (CCAT), should not be considered by the Board. He added, however, that he's not comfortable with one of the options presented by the Hearing Examiner. He stated that the Hearing Examiner's first option was that the Board, based on its expertise and the undisputed evidence of the convictions, could determine that Ms. Martin is impaired. The second option allows the Board to find that there wasn't enough evidence that Ms. Martin is impaired. Mr. McCann stated that he is not comfortable recommending the third option, which is to require Ms. Martin to undergo a new evaluation and to remand this matter to the Hearing Examiner. Mr. McCann stated that the General Assembly has, by law, permitted the remand of a case for additional testimony or evidence, and the Board is entitled to do that by law. He doesn't think that it's in the spirit of the law to remand a case, to retry it, basically, for this reason.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. DAVIDSON'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER IN THE MATTER OF TERA JEAN MARTIN, M.T. MR. BROWNING SECONDED THE MOTION.

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

Dr. Steinbergh stated that she thinks that the Proposed Order is appropriate. She has grave concerns about this particular treatment provider, and she could not make a decision today as to whether or not Ms. Martin is impaired. Dr. Steinbergh stated that she doesn't feel comfortable saying that Ms. Martin is not impaired, since she has these convictions on her record. Dr. Steinbergh added that there is a real question about the assessment of Ms. Martin. Dr. Steinbergh stated that the Board should look to another treatment provider for appropriate assessment. She added that she also believes that the Board's Limited Branch & Alternative Medicine Committee should reassess this provider. Dr. Steinbergh stated that she is in agreement with the Proposed Order, which requires Ms. Martin to undergo another evaluation, and then remands the matter to the Hearing Examiner. Dr. Steinbergh again stated that she's not comfortable saying that Ms. Martin is impaired, and she's not comfortable saying that she's not impaired. Dr. Steinbergh added that the Board relies on these evaluations, and she doesn't think that the Board has had an appropriate evaluation in this case.

Dr. Egner stated that she has real issues with this. She doesn't know exactly what the answer is, but she feels that Ms. Martin has become a victim of the Board's system. Dr. Egner added that she holds massage therapists to a different standard than she does physicians. She added that she's always cognizant of the

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expense involved for the massage therapist. The Board is so used to dealing with doctors, and the money issues are not always as much of a concern. The money issues are a definite concern with Ms. Martin. Dr. Egner added she is even concerned about the suggestion that Ms. Martin do urine screens, because they are expensive.

Dr. Egner stated that this is kind of a mess. Ms. Martin went to a Board-approved evaluator, and the evaluator did a terrible job.

Dr. Steinbergh commented that Ms. Martin has recourse there.

Dr. Egner stated that that's a difficult recourse. She stated that Ms. Martin wants to move on with her life and put this behind her. Now it's being suggested that the Board send her to a three-day evaluation, and Dr. Egner expressed concern about that. She questioned how "at risk" Ms. Martin is such that the Board would require her to go for another evaluation. She stated that that's the question.

Dr. Kumar stated that he doesn't think that he can answer that, and that's his problem.

Dr. Steinbergh stated that Ms. Martin has a history of two "DUIs" and one "reckless operation."

Dr. Egner stated that she's young.

Dr. Steinbergh stated that she only thinks of the Board's commitment to its licensees. The Board is obligated to the public to make certain that its licensees are appropriate. If Ms. Martin is, in fact, impaired, the Board needs to deal with that. She added that she feels badly for Ms. Martin, and added that she doesn't feel comfortable with the CCAT assessment. She stated that Ms. Martin will have to deal with that legally, between her attorney and the provider. Dr. Steinbergh stated that she can't say that Ms. Martin is not impaired.

Dr. Kumar stated that he understands that there are financial issues involved but, to do the right thing, the Board does need a determination as to whether the individual is impaired or not. Doing a three-day evaluation is okay. He asked what would happen if the Board doesn't remand the matter but just asks for the three-day evaluation. Based on the evaluation, the Secretary and Supervising Member could make a decision later on. The Board could then cut down on the expense of having to hold a hearing.

Dr. Buchan stated that he's looking at this on its face, and his feeling is that she made choices that reflect horrible judgment and a horrible lack of the self-control that is necessary of any of the Board's licensees. He stated that he doesn't think that the time of the events is that far removed. He stated that it's just been a year and a half since she had her last incident. Dr. Buchan stated that he thinks that Ms. Martin is impaired, and the Board should treat her as such. Her actions and the evidence suggest that the Board needs to respond. He noted that she has enjoyed some sobriety over the last year and a half, and she should return to practice, but not without monitoring. He stated that the Board doesn't need to send her through another three-day evaluation. She has two DUI and "reckless operation" convictions. The Board should let her practice and monitor her for three years. Her fate would then be in her hands.

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Dr. Buchan stated that the Board needs to get off center on this, and added that the Board has seen enough impairment to understand that she needs to be monitored and she needs to practice. He feels that this is an issue the Board can handle on its merits today.

Mr. Browning asked what Dr. Buchan is proposing.

Dr. Buchan stated that the Board should put together some monitoring language. He stated that he's more inclined to monitoring, as opposed to severe accountability. He stated that he could draft the language and bring it back to the Board.

Dr. Talmage returned to the meeting during the previous statement.

Dr. Kumar commented that three years of monitoring may be more expensive than three days of evaluation. If she's cleared after the three-day evaluation, then she's okay.

Dr. Buchan stated that anyone who has made the choices that Ms. Martin has made is a licensee about whom he'd be worried. He would be inclined to monitor her in any event.

Mr. Browning commented that it's hard to monitor someone who passes muster. If the process is meaningful, and you go through an evaluation, and it's determined that you're not impaired, that's important. He doesn't think that you'd just monitor such a person at will, even if they were found with no impairment. Mr. Browning stated that people do make poor judgments and get in trouble with DUIs and are not impaired. He agreed that there aren't very many, it's a low percentage, but the Board can't decide that it's zero percent up-front.

Dr. Egner stated that that statistic that the Board has quoted many times is in relationship to a physician. A very high percentage of physicians who have had two DUIs in a certain amount of time are impaired. She doesn't know that the same statistic holds true for the general public. There is a lot more at stake for the physician than for the general public in getting a DUI. When physicians get a DUI, it carries more weight.

Dr. Buchan stated that the statistic he remembers is that three to five percent of those people are not impaired. There's a 95% probability that Ms. Martin is impaired.

Mr. Browning stated that the point is that, if the Board decides to have her evaluated, it has to wait to find out what the result is. Since it's not zero percent, the Board has to find out.

Dr. Steinbergh stated that every time a person drinks and drives, he or she can kill another human being. This Medical Board cannot condone that type of thing. If Ms. Martin is impaired, the Board needs to take action. She stated that there is no question that Ms. Martin used terrible judgment. Impaired and chemically impaired people make bad decisions. She agreed that other people make bad decisions, as well, but the Board isn't concerned about the other people. It's only concerned about its licensees.

Dr. Steinbergh stated that it behooves the Board to get an appropriate evaluation and to be certain of what it is doing. She added that she's not opposed to accepting Ms. Martin as being chemically dependent and imposing an order that is the equivalent of a step 1 agreement, with the same language and a five-year

probation, the same as everybody else.

Dr. Egner stated that she wouldn't recommend that for Ms. Martin. Dr. Egner expressed concern about an individual Ms. Martin's age saying that she will act as an impaired person and be monitored when no one has definitely said that she's impaired. She stated that she doesn't think that the Board should be doing that, and she certainly would not recommend that Ms. Martin do that.

Dr. Steinbergh stated that she needs to be assessed then.

Dr. Buchan stated that the choices that Ms. Martin has made make monitoring required, in his view. If the Board could put together a three year monitoring system that is not too cumbersome, he could live with that. Dr. Buchan added that he's not suggesting that Ms. Martin needs random urine screens every week. He's suggesting that the Board craft something that's appropriate, but she needs to get back to practice.

Mr. Browning asked whether Dr. Buchan is suggesting tabling this matter to bring back a proposal.

Dr. Buchan stated that it should be tabled after getting some sense about the monitoring from the Board.

Dr. Kumar stated that he was in favor of leaving the first paragraph of the Proposed Order, which requires Ms. Martin to undergo another three-day evaluation, and deleting the second paragraph, which remands the matter back to the Hearing Examiner following the evaluation.

Dr. Buchan asked what happens if the report comes back that Ms. Martin is not impaired. Does the Board grant her a full license?

Dr. Kumar stated that it does.

Dr. Buchan asked what would suggest that Ms. Martin won't make poor choices six months later.

Mr. Browning stated that the Board has that problem with everyone.

Dr. Buchan stated that Ms. Martin has crossed a line for him, but maybe not for others.

DR. KUMAR MOVED TO AMEND THE PROPOSED ORDER IN THE MATTER OF TERA JEAN MARTIN, M.T., BY DELETING PARAGRAPH 2. DR. STEINBERGH SECONDED THE MOTION.

Mr. Browning asked what happens after the three-day evaluation.

Dr. Kumar stated that the same thing would happen as always: the Secretary and Supervising Member will act if the report shows she's impaired. If she isn't impaired, the charges will be dismissed by the Secretary and Supervising Member. It's automatic when the report comes back from the evaluation.

Dr. Egner suggested that the Secretary and Supervising Member talk to Ms. Martin and decide whether or

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not she needs an evaluation.

Dr. Kumar stated that he wouldn't go that far. He would make an order for the Secretary and Supervising Member to review the report from the evaluator and make the determination of what needs to be done.

Dr. Steinbergh stated that it's the same as anybody who's been notified that they have to go in for a three-day evaluation. That starts the process.

Dr. Davidson stated that this unfairly punishes Ms. Martin. Ms. Martin went to one of the Board's treatment evaluators, nobody likes the outcome, so the Board is just going to try again. She stated that it reminds her of how people would order a pre-operative lab value, not like the results, and then order another one. She stated that she always said that they ought to order three to break the tie. You can't choose the one you want.

Dr. Steinbergh disagreed with Dr. Davidson's analogy, stating that she's not saying that the Board doesn't like the evaluation; but the Hearing Examiner found that the evaluation and the testimony of the evaluator was not reliable. If you're clinically looking at a patient, and you have a strong clinical intuition about this, and the test comes back and isn't consistent with what the physician thought, you don't go in the direction of the lab. You go in the direction of your clinical impression and, if it means repeating that test to clarify it for yourself, you do that. Dr. Steinbergh stated that she's all for the clinical intuition. She doesn't disagree with Dr. Buchan's clinical intuition, but to say that she's not impaired is inappropriate. What the Board has found here is that this particular treatment provider, although approved by the Board, did not give appropriate testimony to the Hearing Examiner at the hearing, and the Board has this Proposed Order, with which she happens to agree.

Dr. Buchan stated that his clinical impression is that the Board had a problem. Ms. Martin complied and the Board didn't get acceptable results. He's suggesting that, if the amendment on the table fails, he will craft an Order that would reflect a need to monitor, assuming that she's impaired. Dr. Buchan stated that he thinks that the Board can make that call, and he's willing to do that.

Dr. Davidson stated that she agrees with Dr. Buchan. Given the process and the relative punishment to Ms. Martin, if the Board requires her to get another evaluation, she's still out of practice and she's still spending money, and she would be really surprised if Ms. Martin got a refund. That's not her fault, and it's not the Board's fault. This way the Board assumes the worst. She has advised her attorney that she's willing to accept monitoring. Dr. Davidson stated that she'd feel much more comfortable with a big window of observation – and three years is plenty – customized to the situation, rather than taking her out of practice, waiting, getting another evaluation and a lot of expense, when Ms. Martin has done nothing wrong in this process.

Dr. Varyani indicated agreement with Dr. Buchan.

Dr. Kumar stated that he doesn't have any problems with Dr. Buchan's suggestion, but he's concerned that three years of monitoring will be more expensive than a three-day evaluation.

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Dr. Buchan stated that he thinks it's a natural consequence of the choices that Ms. Martin made.

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

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

The motion failed.

**MR. BROWNING MOVED TO TABLE THE MATTER OF TERA JEAN MARTIN, M.T.
DR. KUMAR SECONDED THE MOTION.** A vote was taken:

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

The motion carried.

Later in the meeting, following the Personal Appearances, Dr. Robbins asked for a motion to remove this matter from the table for further discussion or motion.

**DR. EGNER MOVED TO REMOVE THE MATTER OF TERA JEAN MARTIN, M.T. FROM
THE TABLE. DR. DAVIDSON SECONDED THE MOTION.** A vote was taken:

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

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

The motion carried.

Dr. Buchan stated that his feeling about this case was that he would like to see Ms. Martin monitored. He felt that there was enough evidence in the record to suggest that she needed monitoring. The dilemma is that the Board has to decide whether or not Ms. Martin is impaired. Dr. Buchan stated that the State did not make the case for impairment. If Ms. Martin is impaired, the Board is obligated by statute and rule to seek out a 28-day treatment center and to put the appropriate monitoring in place. Dr. Buchan stated that the Board has put itself in such a situation that, if the Board's clinical sense is that she's impaired, it will have to require an extraordinary move and sequence of events on her part, which is exactly what he hopes the Board will not do.

Dr. Buchan stated that that is where the Board is at this moment. He added that he personally feels like Ms. Martin needs to hear from the Board. If the Board moves toward the dismissal side of this, she needs to hear from the Board the seriousness of this, the Board's sense of where she is. The Board can't demand that Ms. Martin go to A.A. and seek out treatment as if she were impaired, but his sense is, to help herself, she needs to move in that direction. He stated that he does believe that she has an issue to which she needs to attend.

Mr. Browning asked Dr. Buchan what he is suggesting.

Dr. Buchan stated that his feeling is at this point that the Board should dismiss the case. He doesn't sense that the Board can make an argument that she is impaired. He added that he doesn't think that the State provided the Board with enough evidence to make the argument that she is impaired.

Dr. Kumar stated that that comes to the same thing he was saying when he made the original motion. He agrees that the State hasn't got the evidence that she's impaired and needs to go through the monitoring; but at the same time, he doesn't know if she is impaired. Dr. Kumar stated that he understands that the previous evaluation was defective, and he thinks that the Board should require another three-day evaluation.

Mr. Browning stated that the problem, as he sees it, is that this is not just about this case. This is about the Board's process. This is saying that the Board has a fundamentally flawed process because she went through a Board-certified process, and it came out unclear at best. The Board doesn't have the evidence it needs to act on impairment. Therefore, unless the Board wants to question its process in a fundamental way and open the door to a lot of other questioning in the future, the Board should move forward with Dr. Buchan's recommendation. Mr. Browning stated that the Board didn't meet its own test; it did not meet its own threshold, therefore, she's not impaired. Board members can have individual judgments to the contrary, but she is not impaired, per this evaluation. Mr. Browning again stated that he favors

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Dr. Buchan's position and would recommend support of it. He just doesn't see where the Board can go otherwise.

Dr. Egner agreed, and added that she thinks that there are some mitigating circumstances to go along with what Mr. Browning is saying. She added that she really appreciates Dr. Buchan coming this far with this recommendation, noting that it is a big distance for him. Dr. Egner stated that she looks at Ms. Martin and notes that she was young, and she's still young. Young people have a different drinking standard. Dr. Egner commented that she's not saying that it's right at all, but Ms. Martin is employed and all the people who work with her gave testimony that she was reliable and hasn't demonstrated any questionable behavior. Ms. Martin talked about why that was a bad period in her life. Dr. Egner stated that it sounds like Ms. Martin is getting her act together. Dr. Egner added that Ms. Martin has heard the Board's concerns today and she knows that another mess-up will land her back with the Board. Dr. Egner stated that she's not saying that Ms. Martin is or isn't impaired. Even though the Board isn't going to rely on the evaluator's conclusions, two testing areas in the objective part of the evaluation did indicate a low probability of impairment, and that gives her a little bit of a good feeling that the Board can dismiss this.

Dr. Egner stated that she thinks that the right thing to do is to dismiss this case. She added that Ms. Martin did what the Board asked her to do – she went to a Board-approved evaluator, she seems to have been forthcoming with the events around her drinking. Dr. Egner stated that she trusts that Ms. Martin and her attorney are familiar enough with the Board's process that he will educate her well in what her future could hold if she has an impairment problem. Dr. Egner stated that she agrees with the dismissal.

Dr. Kumar stated that the fact that Ms. Martin had a low probability on that test will sway him to go ahead and dismiss this case.

DR. BUCHAN MOVED TO AMEND THE PROPOSED ORDER IN THE MATTER OF TERA JEAN MARTIN, M.T., BY SUBSTITUTING AN ORDER OF DISMISSAL. DR. EGNER SECONDED THE MOTION. A vote was taken:

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

The motion carried.

MR. BROWNING MOVED TO APPROVE AND CONFIRM MS. DAVIDSON'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER, AS AMENDED, IN THE MATTER OF

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TERA JEAN MARTIN, M.D. MS. SLOAN SECONDED THE MOTION. A vote was taken:

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

The motion carried.

LALSINGH P. ROHIRA, M.D.

Dr. Robbins directed the Board's attention to the matter of Lalsingh P. Rohira, M.D. He advised that no objections were filed to Hearing Examiner McNeil's Report and Recommendation.

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

Dr. Varyani stated that he is recusing himself from this case.

Dr. Varyani left the room at this time.

Dr. Rohira thanked the Board for allowing him to address it. He stated that he knows that what he did was wrong and inexcusable. He should have supervised his staff much more closely, but these people worked with him for more than ten years and he trusted them. Dr. Rohira stated that he accepts his responsibility for his wrongdoing and he realizes that the Board must take some action.

Dr. Rohira stated that he has paid a heavy price for his wrongdoing, and he's extremely sorry for that. The investigation began in 1997, the FBI raided his office in 1999, he was indicted in 2002, convicted in 2003, and he closed his practice in 2003. A new trial was granted in 2004. Dr. Rohira stated that he pled guilty because he wanted to take responsibility for what went on in his office. He was sentenced in 2006 to one year of probation.

Dr. Rohira stated that he has suffered so much during the last nine years: He lost his wife, he lost his children – they won't talk to him. Financially, he's in total ruins. Dr. Rohira stated that he knows that the Board has to punish him, but asked that the Board not permanently revoke his license. He asked that the Board restore his dignity so that, sometime in the future, he can look forward to taking care of his patients. Dr. Rohira commented that he loves his patients, and they love him very much. Dr. Rohira remarked that the Board members are all family men and women, and he stated that he is begging the Board to not

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condemn him to death. He asked that the Board give him another opportunity where he can serve humanity.

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

Ms. Pfeiffer stated that she would briefly summarize the allegations in this case and hit a couple of highlights. She advised that Dr. Rohira was cited based upon the fact that he was convicted of felony offenses. There were actually five felony offenses, all federal cases. Dr. Rohira pled guilty in June 2006. One of the exhibits the Board had to review was State's Exhibit 3, the plea agreement. In the plea agreement, Dr. Rohira initialed each and every one of the 15 pages. The offenses to which he pled guilty were: One count of conspiracy, three counts of wire fraud and one count of healthcare fraud.

Ms. Pfeiffer at this time read the following from the plea agreement to which Dr. Rohira agreed:

12. The parties stipulate to the following facts, which satisfy all of the elements of the offenses to which Defendant agrees to plead guilty:

Defendant is a psychiatrist licensed in the State of Ohio. From July 1991 through September 30, 1997, Defendant knowingly and willfully engaged in the following conduct in the Northern District of Ohio:

Defendant misrepresented to certain insurance plans that he provided therapy sessions generally requiring thirty (30) or sixty (60) minutes of face to face time with the patient, and claimed payment for the sessions, when in fact he provided medication checks of fifteen (15) minutes or less.

Defendant misrepresented to certain insurance plans that he provided therapy sessions, for which he claimed payment, when in fact the sessions were conducted by a non-licensed person, Co-Defendant Sharonne Szyrej.

Defendant misrepresented to certain insurance plans that he provided therapy sessions, and claimed payment for those sessions, when in fact the patients had cancelled or failed to appear for the appointments.

Defendant conspired with Defendant Sharonne Szyrej and with his office manager, Co-Defendant Martin Williams, to engage in the unlawful conduct described above.

Ms. Pfeiffer stated that, also contained in the documents, is a settlement in a related civil suit, where Dr. Rohira admitted that the United States had a valid claim of \$2.2 million against him, as a result of his misconduct in this case. Dr. Rohira agreed to pay, and the United States agreed to accept, \$400,000 as a resolution of the civil case.

Ms. Pfeiffer stated that this is a case that went on for years, involved a substantial amount of money, and Dr. Rohira pled guilty to the charges. Clearly, this was a case that occurred in the course of his practice.

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Ms. Pfeiffer stated that the Board's Disciplinary Guidelines provide both the minimum and maximum of permanent revocation in this case.

DR. EGNER MOVED TO APPROVE AND CONFIRM MR. MCNEIL'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF LALSINGH P. ROHIRA, M.D. MR. BROWNING SECONDED THE MOTION.

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

Dr. Egner stated that she thinks that the Report and Recommendation is well written and the facts of the case are clear. She agrees with Ms. Pfeiffer's presentation. A permanent revocation is definitely in order. The billing issues should have been obvious to him; it was his practice, his responsibility, and he knew that. Dr. Egner stated that this isn't just a matter of trusting an employee.

Dr. Egner stated that she was especially bothered by the fact that services were provided by an unlicensed person and billed as if Dr. Rohira had seen the patient and given therapy. She noted that Dr. Rohira is a psychiatrist, psychiatric patients have the potential of being more vulnerable and advantage should not be taken.

Dr. Egner stated that the Proposed Order is not a death sentence. Dr. Rohira can live the rest of his life. But he has done things that should result in his not practicing medicine anymore. Dr. Egner stated that she has no regrets in giving Dr. Rohira a permanent revocation.

Dr. Kumar stated that he agrees with Dr. Egner's statements. He noted that Dr. Rohira even charged when services were not rendered. Miscoding can happen, but if the patient was not even there, he charged. Dr. Kumar stated that that is really troublesome for him.

Dr. Buchan stated that he wanted to follow up on Dr. Egner's comment that this is not a death sentence. If Dr. Rohira has a need to serve humanity, that need should be met in other ways. Dr. Rohira's choices were made, and Dr. Buchan stated that he supports the permanent revocation.

Dr. Steinbergh stated that she agrees with the Proposed Order. She added that Dr. Rohira needs to understand that in this case there are no mitigating factors. He defrauded health plans, Medicare and Medicaid. The Board's mission is to protect the public from physicians who are not practicing appropriately, and Dr. Rohira wasn't. She stated that when physicians delegate certain authority to those people to whom he should not, and then bill for services, it's fraud. The Court has convicted Dr. Rohira, and he agreed to that. Dr. Steinbergh stated that this Board has no avenue other than permanent revocation. Dr. Steinbergh stated that she agrees with Dr. Egner and Dr. Buchan that the Board is not sentencing Dr. Rohira to death. This is not the Board's sentence. He made all of these decisions. As a professional, he took on that responsibility. Dr. Rohira's love of humanity, as Dr. Buchan suggested, is something he can prove in other ways; but this Board simply can't allow him to practice anymore in this state. Dr. Steinbergh stated that she agrees with the Proposed Order.

Mr. Albert left the meeting during Dr. Steinbergh's statements.

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Mr. Browning stated that he agrees with everything that has been said. Mr. Browning added that it's hard, and really impossible, to exploit the system without, at the same time, exploiting the patients. That is what has happened here in addition to everything else. Mr. Browning stated that he's in support of the Report and Recommendation.

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

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

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

The motion carried.

ROBERT FRANKLIN SHORT, M.D.

Dr. Robbins directed the Board's attention to the matter of Robert Franklin Short, M.D. He advised that no objections were filed to Hearing Examiner Porter's Report and Recommendation.

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

Dr. Short was accompanied by his attorney, Bradley K. Sinnott. Mr. Sinnott advised that this is a matter that came before the Hearing Examiner on a set of stipulated facts. The parties agreed about what the underlying facts are. Mr. Porter did an expert and reasonable job of fashioning a Report and Recommendation, and they take no objection to it. Mr. Sinnott stated that they are here today for the purpose of answering any question that a Board member might have.

Mr. Sinnott continued that this has been a cooperative process with the Board from the outset, and they appreciate the opportunity to work with the Board's staff, the Attorney General's Office, and the Hearing Examiner, towards finding a just and appropriate conclusion. They believe that Mr. Porter has made a recommendation that achieves that. Mr. Sinnott stated that the record is clear that Dr. Short is a good and responsible physician. He's in the process of becoming a very well trained radiologist. The Report and Recommendation will allow that process to continue. They have no objection to the Report and Recommendation, and they would urge its adoption by the Board.

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Mr. Albert returned to the room at this time.

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

Mr. Clifford stated that the Board needs to know that Dr. Short has had a training certificate which has expired. He is now in Virginia, under a program that is similar to the O.P.H.P. program. There are things in place in the Proposed Order that mandate that he has to notify the Board if there are any changes to the contract with the Virginia program. The Virginia contract is to last five years. Dr. Short must make quarterly declarations to the Ohio Board that he is complying with the Virginia program. The Proposed Order also requires him to submit releases so that documentation submitted to the Virginia program comes to Ohio. Mr. Clifford stated that the most important part of it is that, if Dr. Short decides to return to Ohio, the Board will be able to make its own independent evaluation as to whether he's still impaired or whether the Board needs to monitor him or send him to additional treatment or monitoring.

Mr. Clifford concluded by advising that he agrees with the Report and Recommendation, as written.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. PORTER'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF ROBERT FRANKLIN SHORT, M.D. DR. KUMAR SECONDED THE MOTION.

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

Dr. Steinbergh spoke in support of the Proposed Order. She added that she appreciates Mr. Clifford's input in regard to the summary of Dr. Short's circumstances. Dr. Short will be appropriately monitored in Virginia, and is not currently licensed in Ohio. Should Dr. Short apply for licensure, the Board will see where he is in the process.

Dr. Kumar stated that he understands everything that has been said, but he questioned whether the Board could put someone who doesn't have a current training certificate on probation. Dr. Kumar stated that this seems a little bit awkward to him.

Dr. Steinbergh stated that Dr. Short requested a training certificate through June 23, 2006. He completed an application, which then stimulated the Board to assess him. During the process of the assessment, Dr. Short decided to stay in his residency in radiology in Virginia.

Dr. Egner asked whether Dr. Short is planning on coming back to Ohio to practice.

Dr. Short stated that he would like to. His wife is from Cleveland and his family is in Dayton. Given the opportunity to practice medicine in Ohio, it is something that he would strongly consider.

Mr. Clifford stated that the issue before the Board is one that has come up on numerous occasions: The Board has someone who had a license at one time, and who no longer has a license. The Board has discretion to deal with that. At the time the notice was issued to Dr. Short, he had a training certificate. Mr. Clifford stated that it is correct that Dr. Short does not currently have a training certificate.

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Mr. Whitehouse asked what would happen, hypothetically, if there were a violation of the terms of probation. The Board would have nothing on which to take action.

Mr. Clifford stated that the Board would have to look at what the Order says.

Dr. Steinbergh stated that Dr. Short has every reason to fulfill these requirements. He's in agreement with the Proposed Order and has not objected to it. If Dr. Short is someone with an interest in coming into this state, this is no different from Dr. Short's program in Virginia.

Mr. Browning stated that there is a Proposed Order before the Board that has been questioned. He asked whether it is an Order this Board could support legally. He stated that he would assume that this is reasonable legal option since it was put forward by the Board's own legal staff. He assumes that everyone believes that it is okay, despite Dr. Kumar's logical question, and that the Board has the legal authority and can move forward if it decides to do that.

Ms. Pfeiffer stated that § 4731.22(M)(3) reads as follows:

Notwithstanding any other provision of the Revised Code, all of the following apply:...Failure by an individual to renew a certificate of registration in accordance with this chapter shall not remove or limit the board's jurisdiction to take any disciplinary action under this section against the individual.

Ms. Pfeiffer stated that she doesn't know whether Dr. Short could potentially renew and get another training certificate.

Ms. Thompson advised that he could.

Ms. Pfeiffer stated that, in that case, the Board does have the jurisdiction to take the action.

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

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

The motion carried.

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GRETEL CASE STEPHENS, M.D.

Dr. Robbins directed the Board's attention to the matter of Gretel Case Stephens, M.D. He advised that no objections were filed to Hearing Examiner Porter's Report and Recommendation.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. PORTER'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF GRETEL CASE STEPHENS, M.D. DR. VARYANI SECONDED THE MOTION.

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

Dr. Steinbergh stated that, as the Hearing Examiner says in his Report, this is a very unusual case. Dr. Stephens is a pathologist who lived in Tennessee with her husband. When they divorced, she moved from the home. She cleaned out her house, or so she believed, and some time later, as the house was sold, she did have every reason to believe that her husband would have finished cleaning out the house. Nevertheless, during the process of selling and purchase of the house, people found some pathologic specimens and pictures and evidence of investigations and so forth. Dr. Stephens' husband was also a medical examiner and pathologist, so there were some things that he personally had to remove. Nevertheless, Dr. Stephens got into legal difficulties and was reprimanded in Tennessee. She was fined a total of \$2,400 plus costs. The Board is now taking action on that action. Dr. Steinbergh stated that she does agree that this case is done, that Dr. Stephens has paid the price for what she's done. She added that she thinks Dr. Stephens realizes that she should have removed those items from the home.

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

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

The motion carried.

The Board at this time took a brief recess. When the meeting reconvened, Dr. Buchan was not present.

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FINDINGS, ORDERS AND JOURNAL ENTRIESERIN ROSE BAYER, P.A. APPLICANT

Dr. Robbins noted that, by letter of October 13, 2006, the Board issued a Notice of Opportunity for Hearing to Ms. Bayer, based upon allegations contained in the letter. The Notice was mailed via certified mail, return receipt requested, to Ms. Bayer's address of record. A signed certified mail receipt was returned to the Board documenting proper service of the notice. No hearing request has been received from Ms. Bayer and more than thirty days have elapsed since the mailing of that notice. The matter was before the Board for final disposition.

DR. STEINBERGH MOVED TO FIND THAT THERE IS RELIABLE, PROBATIVE AND SUBSTANTIAL EVIDENCE TO SUPPORT THE ALLEGATIONS CONTAINED IN THE OCTOBER 13, 2006 NOTICE AND TO ENTER AN ORDER, EFFECTIVE IMMEDIATELY, DENYING MS. BAYER'S APPLICATION FOR CERTIFICATION AS A PHYSICIAN ASSISTANT. DR. KUMAR SECONDED THE MOTION.

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

Dr. Steinbergh noted that Ms. Bayer is not eligible for certification as she doesn't hold current certification by the National Commission on Certification of Physician Assistants (NCCPA), as required by the statutes.

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

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

The motion carried.

EVELYN DAVIDSON, M.T. APPLICANT

Dr. Robbins noted that, by letter of October 13, 2006, the Board issued a Notice of Opportunity for Hearing to Evelyn Davidson, M.T. Applicant, based upon allegations contained in the letter. The Notice was mailed via certified mail, return receipt requested, to Ms. Davidson's address of record. A signed certified mail receipt was returned to the Board documenting proper service of the notice. No hearing request has been received from Ms. Davidson and more than thirty days have elapsed since the mailing of that notice. The matter was before the Board for final disposition.

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DR. STEINBERGH MOVED TO FIND THAT THERE IS RELIABLE, PROBATIVE AND SUBSTANTIAL EVIDENCE TO SUPPORT THE ALLEGATIONS CONTAINED IN THE OCTOBER 13, 2006 NOTICE AND TO ENTER AN ORDER, EFFECTIVE IMMEDIATELY, GRANTING MS. DAVIDSON A LICENSE TO PRACTICE MASSAGE THERAPY, SUBJECT TO HER PASSING THE LIMITED BRANCH PORTION OF THE MASSAGE THERAPY EXAMINATION WITHIN SIX MONTHS OF OCTOBER 13, 2006. DR. DAVIDSON SECONDED THE MOTION.

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

Dr. Steinbergh noted that Ms. Davidson has not been engaged in the active practice of massage for more than two years. Requiring her to pass the limited branch portion of the Massage Therapy Examination is appropriate.

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

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

The motion carried.

TERESA MARY TRYGSTAD, D.O.

Dr. Robbins noted that, by letter of November 1, 2006, the Board issued a Notice of Opportunity for Hearing to Teresa Mary Trygstad, D.O., based upon allegations contained in the letter. The Notice was mailed via certified mail, return receipt requested, to Dr. Trygstad's address of record. A signed certified mail receipt was returned to the Board documenting proper service of the notice. No hearing request has been received from Dr. Trygstad, and more than thirty days have elapsed since the mailing of that notice. The matter was before the Board for final disposition.

DR. STEINBERGH MOVED TO FIND THAT THERE IS RELIABLE, PROBATIVE AND SUBSTANTIAL EVIDENCE TO SUPPORT THE ALLEGATIONS CONTAINED IN THE NOVEMBER 1, 2006 NOTICE AND TO ENTER AN ORDER, EFFECTIVE IMMEDIATELY, GRANTING DR. TRYGSTAD A LICENSE, SUBJECT TO HER TAKING AND PASSING EITHER THE SPECIAL PURPOSE EXAMINATION (SPEX) OR THE COMPREHENSIVE OSTEOPATHIC MEDICAL VARIABLE-PURPOSE EXAMINATION (COMVEX) WITHIN SIX

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MONTHS OF NOVEMBER 1, 2006. DR. KUMAR SECONDED THE MOTION.

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

Dr. Steinbergh sated that Dr. Trygstad has not been engaged in the active practice of medicine for more than two years. Requiring her to take the SPEX or COMVEX is appropriate.

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

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

The motion carried.

RATIFICATION OF SETTLEMENT AGREEMENTS

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

JAMES JOSEPH GILIBERTO, JR. D.O. – PERMANENT WITHDRAWAL OF APPLICATION

DR. STEINBERGH MOVED TO RATIFY THE PERMANENT WITHDRAWAL OF DR. GILBERTO'S APPLICATION TO PRACTICE OSTEOPATHIC MEDICINE AND SURGERY. MR. BROWNING SECONDED THE MOTION. A vote was taken:

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

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The motion carried.

MATTHEW ALLAN SNYDER, L.M.T. – CONSENT AGREEMENT

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

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

The motion carried.

JANICE MARIE CARSON, M.D. – WITHDRAWAL OF APPLICATION

DR. KUMAR MOVED TO RATIFY THE WITHDRAWAL OF DR. CARSON'S APPLICATION TO PRACTICE MEDICINE AND SURGERY. DR. DAVIDSON SECONDED THE MOTION. A vote was taken:

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

The motion carried.

RICHARD JOSEPH DEFRANCO, M.D. – CONSENT AGREEMENT

DR. DAVIDSON MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. DEFRANCO. DR. KUMAR SECONDED THE MOTION.

Dr. Steinbergh commented that this physician is really at risk, with dual diagnoses. She stated that she

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hopes that he understands the consequences.

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

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

The motion carried.

ARLAN MARCUS GUSTILO-ASHBY, M.D. – CONSENT AGREEMENT

DR. STEINBERGH MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. GUSTILO-ASHBY. DR. DAVIDSON SECONDED THE MOTION. A vote was taken:

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

The motion carried.

JOSEPH COOPER SIMONE, D.O. – CONSENT AGREEMENT

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Varyani	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye

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Ms. Sloan - aye
Dr. Davidson - aye
Dr. Steinbergh - aye

The motion carried.

ROBERT ANDREW ANDERSON, D.O. – WITHDRAWAL OF APPLICATION

DR. STEINBERGH MOVED TO RATIFY THE WITHDRAWAL OF DR. ANDERSON'S APPLICATION TO PRACTICE OSTEOPATHIC MEDICINE AND SURGERY. DR. DAVIDSON SECONDED THE MOTION. A vote was taken:

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

The motion carried.

DONNA M. GAMERO, P.A. – PERMANENT SURRENDER OF LICENSE

DR. STEINBERGH MOVED TO RATIFY THE PERMANENT SURRENDER OF MR. GAMERO'S PHYSICIAN ASSISTANT CERTIFICATION. DR. KUMAR SECONDED THE MOTION. A vote was taken:

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

The motion carried.

Dr. Buchan returned to the meeting at this time.

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WANDA BETH KALENCKI, D.O. – CONSENT AGREEMENT

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

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

The motion carried.

SALVATORE ANGELO MANNO, P.A. – WITHDRAWAL OF APPLICATION

DR. STEINBERGH MOVED TO RATIFY THE WITHDRAWAL OF MR. MANNO'S APPLICATION FOR CERTIFICATION AS A PHYSICIAN ASSISTANT. MR. BROWNING SECONDED THE MOTION. A vote was taken:

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

The motion carried.

JAMES H. MEYERS, M.D. – WITHDRAWAL OF APPLICATION

DR. STEINBERGH MOVED TO RATIFY THE WITHDRAWAL OF DR. MEYERS' APPLICATION TO PRACTICE MEDICINE AND SURGERY. MS. SLOAN SECONDED THE MOTION. A vote was taken:

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

The motion carried.

MARK OWEN HENSON, M.D. – CONSENT AGREEMENT

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

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

The motion carried.

PERSONAL APPEARANCES

MICHAEL SHANE GAINEY, M.D.

Dr. Gainey appeared before the Board pursuant to his request for release from the terms of the Board's Order of April 14, 2004.

In response to Board members questions, Dr. Gainey stated that he is doing well. He advised that the process of the last two years has been a significant learning experience for him. He stated that by the time he came before the Board, it had been three years since the event that brought him to the Board's attention. He stated that it has been six years since the event in question. He stated that he's learned to specifically review the rules of ethics and the laws regarding physician conduct. Dr. Bright advised that it was a learning process. His parents taught him right from wrong; he never needed anybody to tell him what is right and wrong. This was just reinforcement. He has a clear understanding of right and wrong.

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Dr. Gainey advised that he hasn't shared his experience with his colleagues or others. He stated that the fallout of this was that no one he's known for over 20 years has talked to him since. He was immediately ostracized. Dr. Gainey stated that that's just the way it is; some people can talk to you, some can't.

Dr. Gainey stated that he can't make somebody come and talk to him. Dr. Gainey added that he's a private person. He acknowledged that others could learn from his experiences, but added that, for a lot of people, just to hear someone else's troubles make themselves feel better. He stated that it's been a long time since this event occurred. He stated that for five years he hasn't been back to the hospital where it occurred, and he's sure there are people there who wouldn't have a clue who he was. He stated that he doesn't have any hard feelings about that. He added that he can't go back and worry about his problems; he can only just go forward. He has two children and has to go forward. If others won't talk to him, that's fine.

Dr. Kumar stated that it's not a matter of others talking to him; he was wondering whether Dr. Gainey has shared his experiences with other physicians with whom he has contact now.

Dr. Gainey stated that he's actually working as an electrician now; he's not practicing medicine. He stated that he likes the work, and added that his whole family work as electricians. Dr. Gainey stated that he was an electrician before he became a doctor. He needed some time away from medicine. After he went back to practice, he was working 400 hours a month, trying to pay some bills. Dr. Gainey stated that he has two children and there are days when they really need him around, so he's been spending more time with them and working as an electrician. He indicated that he hasn't decided whether he will return to medical practice. He stated that he has to feel better. He went through some trials and tribulations. He actually used to work in the emergency room over 400 hours a month, and that's a lot of hours. He used to be a family practitioner and geriatrician on top of that. He went one month where he didn't even go home for the whole month.

Dr. Kumar stated that he wants Dr. Gainey to be aware that, should he one day decide to return to practice and has been out of practice for two years, he will have to take a special examination.

Dr. Gainey stated that he understands that. He added that he doubts that he will be out of practice for two years. For right now, being an electrician is very healthy for him. He does keep up with his C.M.E., and added that all of his life he did his C.M.E. Dr. Gainey commented that being a doctor is a continual learning process. He enjoys C.M.E., but it has been fun not to have been doing it for a while. He's been out of practice for a few months. He hasn't made any decision about his future. Dr. Gainey stated that he needed a break, so he went to work with his two brothers, whom he hadn't seen for years. He stated that the work has been very enjoyable, but added that he's not a great electrician.

When asked whether he would be a better doctor because of the process he went through, Dr. Gainey stated that he's a much better person from what he went through. As to whether he'll be a better doctor, Dr. Gainey stated that he never was a bad doctor. He is still a pretty decent ER doctor.

DR. KUMAR MOVED TO RELEASE DR. GAINNEY FROM THE TERMS OF THE BOARD'S ORDER OF APRIL 14, 2004. MR. BROWNING SECONDED THE MOTION. A vote was taken:

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

The motion carried.

DAVID C. BLOCKER, M.D.

Dr. Blocker made his initial appearance before the Board, pursuant to the terms of his September 13, 2006 Consent Agreement. He was accompanied by his attorney, Jeffrey J. Jurca.

Mr. Jurca stated that this is Dr. Blocker's first appearance under the Consent Agreement. He advised that they have submitted Dr. Blocker's quarterly declaration, notified other states in which Dr. Blocker is licensed and earlier this week they provided, through Dr. Osborn, Dr. Blocker's monitoring physician, some documentation specifically related to paragraph 6 of the Consent Agreement and the restriction that prevented Dr. Blocker from interpreting ultrasounds or CT scans.

Ms. Bickers stated that she has distributed the letter from Dr. Osborn to the Board members. She noted that it does support that Dr. Blocker has done a little above the required amount of CTs and ultrasounds. She stated that a request to lift the restriction is not on the agenda today, but rather than make Dr. Blocker wait another month for Board consideration, she would like to ask that the Board consider that today.

In response to Board members questions, Dr. Blocker stated that he is not working with any group. He hasn't worked since this has gone on. He stated that he does locum tenens work, and getting malpractice insurance, especially in another state, would be very difficult. He figured that it would be best if he just waited until this was decided one way or the other before seeing patients again. He does plan to resume doing locum tenens, which is basically what he has been doing.

Dr. Kumar asked how, if Dr. Blocker is doing locum tenens, his cases will be reviewed at BMI in Beavercreek and CCI in Springfield.

Dr. Blocker stated that if Dr. Osborn can provide him with some employment, he can also review those cases. Dr. Blocker stated that he can also take cases back with him, if he is working at a place that has electronic films.

Ms. Bickers stated that there is a practice plan requirement in place, so Dr. Blocker will have to submit a new practice plan if he's not working as approved. If a more appropriate monitoring physician is required,

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he will submit another name for Board approval, as well.

Mr. Jurca stated that the idea right now is for Dr. Blocker to work under the monitoring of Dr. Osborn to the extent possible. If conditions change, they would have to request that amendment.

Dr. Kumar stated that he's still having a little difficulty understanding. If Dr. Blocker, as a locum tenens, is working in Cleveland, does he intend to have all of those images transmitted to BMI or CCI to be interpreted?

Dr. Blocker stated that he could have random images selected and sent over.

DR. KUMAR MOVED TO CONTINUE DR. BLOCKER UNDER THE TERMS OF HIS SEPTEMBER 13, 2006 CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. HE FURTHER MOVED TO REMOVE DR. BLOCKER'S RESTRICTION ON PERFORMING, REVIEWING OR INTERPRETING OF ANY ULTRASOUNDS OR CT SCANS.

Dr. Kumar added that Dr. Blocker will have to have a practice plan approved by the Board before moving forward.

Mr. Jurca stated that he believes that the Board has the outlines of a practice plan, based on Dr. Osborn's letter. He will work with Ms. Bickers to refine that practice plan.

MR. BROWNING SECONDED THE MOTION.

Dr. Steinbergh asked Dr. Blocker how he personally feels about his progress.

Dr. Blocker stated that he's thankful that the restriction will be lifted. His interpretation of films has probably been improved. He's read a large number of over-read cases and has had cases independently evaluated. While this has been forced time off, it has been very nice to get up in the morning and not be tired from being beaten up at work the evening before. He added that he will go to Wright State's library and do that a few a times a week. Dr. Blocker stated that he's more knowledgeable than he was.

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

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye

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Dr. Steinbergh - aye

The motion carried.

ANTHONY GRAY, M.D.

Although scheduled, Dr. Gray did not appear before the Board this month.

ADAM P. HALL, D.O.

Dr. Hall made his initial appearance before the Board, pursuant to the terms of his September 13, 2006 Step I Consent Agreement.

In response to Board members' questions, Dr. Hall stated that, on a day-to-day basis, he makes a lot of phone calls and goes to meetings. He attends Caduceus meetings on Thursday. He tries to go to a meeting once a day, but does go to at least three a week, per the Board's requirement. As far as what's been going on in his life on a day-to-day basis, he's just been doing what has been requested by the Board to maintain compliance. He's goes through some trials and tribulations, like most people.

Dr. Hall stated that he has not started counseling with Dr. Ware yet. He needed to get Board approval for Dr. Ware first.

Dr. Steinbergh noted that Dr. Hall is also requesting approval of Susan R. Daab-Krzykowski, M.D. to serve temporarily as his supervising physician.

Ms. Bickers stated that Dr. Hall does actually have a signed agreement with O.P.H.P. She asked that the Board approve Dr. Daab-Krzykowski, who can supervise until she gets a copy of the O.P.H.P. contract.

In response to further questions, Dr. Hall stated that, prior to seeking approval for Dr. Ware, he did see another Board approved psychiatrist. He has been maintained on his medication by Dr. Daab-Krzykowski. He's been taking Symbyax. He's also taking Trazadone for insomnia.

DR. STEINBERGH MOVED TO CONTINUE DR. HALL UNDER THE TERMS OF HIS SEPTEMBER 13, 2006 STEP 1 CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. SHE FURTHER MOVED TO APPROVE SUSAN R. DAAB-KRZYKOWSKI, M.D. TO SERVE AS DR. HALL'S SUPERVISING PHYSICIAN, AND KEVIN V. WARE, M.D., TO SERVE AS DR. HALL'S TREATING PSYCHIATRIST. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

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

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

The motion carried.

JOSEPH ALOYSIUS RIDGEWAY, IV, M.D.

Dr. Ridgeway made his initial appearance before the Board, pursuant to the terms of his October 12, 2006 Step I Consent Agreement.

In response to Board members' questions, Dr. Ridgeway stated that he is doing well. He is not working, obviously, but things are going fairly well. The recovery program is going well. He's spending quite a bit of time with his daughter, who turned six in October. He has her about half the time. Dr. Ridgeway commented that that relationship is the best part of his life. He's working through some of the legal issues from his ongoing divorce.

Dr. Kumar asked Dr. Ridgeway why he thinks this time is going to be different. He commented that this is a relapse.

Dr. Ridgeway stated that it's an odd situation, and he thinks that the circumstances were bizarre. He stated that he doesn't expect any non-compliance.

Dr. Steinbergh stated that the relapse issue is up to Dr. Ridgeway. Cocaine is a serious addiction, and he needs to understand that the Board is supportive in terms of helping Dr. Ridgeway recover from impairment, but he's the only one who can heal himself. Dr. Steinbergh commented that there have been some physicians who have lost their licenses because of their inability to control the disease of addiction. Dr. Steinbergh cautioned Dr. Ridgeway against taking the Board's monitoring lightly. He'll have to work very hard at it. She added that the Board wants to see Dr. Ridgeway succeed.

When asked about his plans for the next several months, Dr. Ridgeway stated that he's not working at all now, but is exploring other work-related activities. He stated that that's been kind of challenging. It has been suggested that he do something as an adjunct to the medical field, in the business end of things. He did attend a meeting in Chicago, looking into that. Dr. Ridgeway advised that it's going to be tough, because people are going to look at it as an interim activity for him, and that's not going to be what they want. They'll want someone to fill a long-term position. Dr. Ridgeway stated that he's not really sure.

Dr. Buchan asked how Dr. Ridgeway would feel about working at someplace like Lowe's.

Dr. Ridgeway stated that that has been suggested to him. He added that that's not what Dr. Collins suggested. Dr. Collins suggested the avenue along the lines of medical sales.

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Dr. Buchan stated that something may be better than nothing right now. If a physician is working hard, the Board respects that.

DR. VARYANI MOVED TO CONTINUE DR. RIDGEWAY UNDER THE TERMS OF HIS OCTOBER 12, 2006 STEP 1 CONSENT AGREEMENT WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. KUMAR SECONDED THE MOTION. A vote was taken:

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

The motion carried.

MICHAEL J. VJECHA, M.D.

Dr. Vjecha made his initial appearance before the Board, pursuant to the terms of his September 13, 2006 Step I Consent Agreement.

In response to Board members' questions, Dr. Vjecha stated that he is doing well.

Dr. Kumar noted that Dr. Vjecha was almost at the end of his probation when he relapsed.

Dr. Vjecha stated that he was halfway through, actually. The relapse occurred three days after his fifth anniversary celebration at a meeting. This was very shocking to him. Dr. Vjecha stated that his fifth year was probably the best year of his life. He'd heard that cocaine is a very difficult substance, and he was in an emotionally vulnerable place in looking back at things. Sabotage is another dynamic that works in. He added that he's heard that success in life is sometimes emotionally difficult to accept.

Dr. Vjecha stated that a more important thing that was going on is that for the last 30 years he's been a member of a religious community, and he's been considering whether he should stay or leave that community. He'd gotten stuck in that decision. A lot of the things that were going on around that time last year were really about fear and, at 50, moving on in life in a completely new direction. Dr. Vjecha stated that he knew within the first week of his relapse that he was acting out of fear, and that it was not the right way to do that.

Dr. Vjecha continued that what he experienced in this relapse was the utter powerlessness over this disease,

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because he'd wanted to stop multiple times. For the first time, this was coming to the bottom, where he really had to get into treatment again.

Dr. Vjecha stated that at the time of his relapse, there were a number of things going on. There were a number of problems with relationships. There were some family disputes. He'd just submitted a major grant, and there was a letdown after that. There was also a letdown after going to an international conference. The underlying thing, though, was really his becoming increasingly torn internally over whether he would stay or leave, and his fear over really knowing that he wanted to leave, but being afraid to make that decision. Dr. Vjecha stated that after leaving treatment again and making a decision to take a leave of absence from the Jesuit Community last December, he experienced an overwhelming sense of relief. He stated that that surprised him.

Dr. Kumar stated that he's having some difficulty with Dr. Vjecha's comments, because Dr. Vjecha is still blaming external factors as the circumstances for his relapse. He doesn't feel that Dr. Vjecha is taking personal responsibility in that sense. He continues to blame other things.

Dr. Vjecha stated that he's sorry he's given that impression, adding that he's not blaming anything. In treatment and in therapy, they try to understand what emotional things and vulnerabilities led up to relapse. He takes full responsibility for the relapse, and he is actually dealing with the consequences from that, which have been significant.

Dr. Steinbergh asked Dr. Vjecha if he didn't know that there would be consequences. She stated that she's trying to understand how he could choose that route again when he knows that there are consequences. She asked whether there was something unclear in his mind at the time he made his decision.

Dr. Vjecha stated that he was in the wrong place at the wrong time and it was an impulsive decision. He added that he doesn't want the Board to think that he's blaming anyone else for his relapse. He takes full responsibility for it.

Dr. Buchan commented that it is mindboggling to know that Dr. Vjecha walked away for so long. The error wasn't picking up the cocaine, it was in putting himself in that environment.

Dr. Vjecha stated that he ordinarily had not had cravings, except around his anniversary time. For the fifth anniversary, which people have said is kind of a pivotal anniversary moment, he had extraordinary cravings. These things also come up in dreams. Ordinarily, through the rest of the year, he's not really bothered by those.

Mr. Browning asked whether Dr. Vjecha was in the Community when this happened, and whether he thinks, in hindsight, that this was a way for him to get out of the Community.

Dr. Vjecha replied that he was in the Community, and the sabotage element is certainly, unconsciously, a factor. Dr. Vjecha stated that he certainly never wanted to be back before the Board in these circumstances. He doesn't ever want to be in this position again.

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Mr. Browning stated that if he does come back, it will probably be for the last time.

Dr. Vjecha stated that he understands; that is very clear to him. He does feel that he's on a better path. Dr. Vjecha advised that he's not been engaged in clinical practice throughout this monitoring period. He continues to remain in Washington, D.C., where he was initially in treatment. His recovery network there is extensive. He's been working since 2004 with an international AIDS clinical trials network based in D.C. He's very actively involved in the forefront of AIDS research, and it's very invigorating. Dr. Vjecha stated that he's very grateful for that. His boss gave him time off during that period, and he's been back to work there since January 2006.

Ms. Sloan asked whether Dr. Vjecha has thought about going into another field. She stated that she brings that issue up because this is a field in which she has worked for many years, and a large population with whom he's working are those who use drugs.

Dr. Vjecha stated that, right now, he's not sure where his future work will actually be. It's really in academic clinical research right now, and really at a high, managerial level. It's going to be a number of years before he goes back into clinical practice. Dr. Vjecha stated that Ms. Sloan's question is a good one, but he can't really answer it. His clinical work has always been overseas, in an administrative capacity, doing refugee relief work and HIV and tuberculosis research. His work in medicine has been from a public health point of view, and there has not been direct patient care since his fellowship training. He's board certified in infectious disease and internal medicine. Right now he's just working one day at a time. Dr. Vjecha added that he does go to meetings with all those same people, so he sees them every day.

Dr. Steinbergh stated that there are a couple of things that concern her. Dr. Vjecha is, at this time, going through somewhat of a sense of euphoria because things are going well for him; but in reviewing his history, she sees that he has a history of ADD. She asked whether he is currently taking Aderall.

Dr. Vjecha stated that that was stopped in the early 2000s. He's taking Stratera right now. That's been working.

Dr. Steinbergh stated that the decision-making process that goes on in the frontal lobe, the right and wrong and these kind of things, she senses is kind of compromised. She stated that an important piece of Dr. Vjecha's life ought to be ongoing counseling in a way that he can run his career decisions by someone else. Part of the decision making that went into his relapse concerns her. Dr. Steinbergh stated that life is challenging, whether you're chemically dependent or not, and Dr. Vjecha has to understand himself well enough to say that he may not be able to make this decision on his own. He shouldn't be impulsive about it, but should have someone else help to guide him in his decisions.

Dr. Vjecha stated that he has continued with weekly therapy since 2000, and that's a very important part of his life right now.

DR. STEINBERGH MOVED TO CONTINUE DR. VJECHA UNDER THE TERMS OF SEPTEMBER 13, 2006 STEP I CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. MS. SLOAN SECONDED THE

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MOTION. A vote was taken:

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

The motion carried.

JOSEPH G. WERNER, M.D.

Dr. Werner made his initial appearance before the Board, pursuant to the terms of his September 13, 2006 Step I Consent Agreement.

In response to Board members' questions, Dr. Werner stated that he is doing well, all things considered. He definitely had a pretty low point in his life over the summer, as the Board knows. He had to deal with a lot of life issues, and really had to question his desire to practice medicine. Dr. Werner stated that he realized that he was really kind of taking it for granted at the time. He knew he was going to be a doctor; he went through medical school relatively easily. He didn't really value it as much. Dr. Werner stated that when he really had to sit down and analyze what else he would do, it was an extremely daunting task. Trying to think of some other way to apply the knowledge that he's incurred so much debt gaining is also a challenge. Dr. Werner stated that he wasn't sure whether he would be allowed to return to finish his training in anesthesia, but everyone has been very supportive. His department has been behind him and is allowing him to do some non-clinical based research. He's helping a couple research protocols for when he does get back to training. He's also doing a lot of reading every day.

Concerning his recovery, Dr. Werner stated that it's going pretty well. He attends A.A., Caduceus and aftercare meetings. He's compliant with his aftercare contract, which requires more meetings than the Board does. He speaks with his sponsor five to seven times a week. Dr. Werner stated that they used to meet once a week, but then his sponsor started working a different shift and there are conflicts. But they still are able to talk on the phone five to seven times a week. He also has a big support group. Both his mentor in the anesthesia department and the individual with whom he's doing research know his situation and he sees them everyday.

Dr. Steinbergh stated that Dr. Werner needs to understand his disease, and asked if he's reading more and more about it.

Dr. Werner stated that while he was an inpatient he had a good opportunity to delve into the topic. Since

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he's been out he's been trying to work on the A.A. program itself. He added that, conceptually, the program makes a lot of sense to him, and he can see why it works for so many people.

Dr. Werner stated that when he came out of his inpatient stay, his family situation was difficult. He and his wife were newlyweds, having been married about six months when this all happened. He stated that his wife was not happy with him, and when he left treatment she had a lot of anger and resentment. They went to family therapy sessions, and they're doing a lot better now. They have more firmly established communication patterns, and they try to not let things boil up to the point where they are out of control. Dr. Werner stated that he has been able to devote more time to his wife, which she appreciates.

Dr. Werner added that other things have happened in his family. His mother's oldest brother, the head of the family under Korean culture, died of cancer a month and a half ago, and that was hard on his mother. He said that she lives in Atlanta and he couldn't visit her and be compliant with his recovery program, but he was able to call her every day and keep in contact with her. Dr. Werner stated that probably the biggest thing he's learned about himself is that he was taking a lot of things for granted, such as his ability to practice medicine, his wife, and his family. His actions didn't support what he did value. He is now more grateful for the things that he has and that he's allowed to do.

Dr. Buchan asked whether Dr. Werner's wife knew that he was abusing drugs.

Dr. Werner stated that his wife did not condone his use, and he never used them in the house.

DR. BUCHAN MOVED TO CONTINUE DR. WERNER UNDER THE TERMS OF SEPTEMBER 13, 2006 STEP I CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. MR. BROWNING SECONDED THE MOTION. A vote was taken:

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

The motion carried.

EXECUTIVE SESSION

MR. BROWNING MOVED THAT THE BOARD DECLARE EXECUTIVE SESSION TO CONSIDER THE RESIGNATION OF A PUBLIC EMPLOYEE. DR. STEINBERGH SECONDED

THE MOTION. A vote was taken:

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

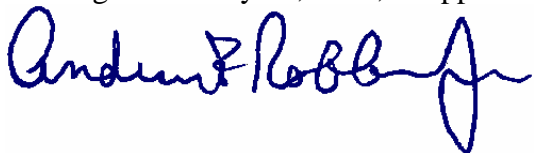
The motion carried.

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

Following the return to public session, a motion to adjourn, made by Mr. Browning and seconded by Mr. Albert, was unanimously passed by the Board.

Thereupon at 5:30 p.m. the December 13, 2006 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 January 11, 2006, as approved on February 8, 2006.



Andrew F. Robbins, Jr., M.D., President



Lance A. Talmage, M.D., Secretary

(SEAL)



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MINUTES

THE STATE MEDICAL BOARD OF OHIO

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Andrew F. Robbins, Jr., M.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: Deepak Kumar, M.D., Vice-President; Raymond J. Albert, Supervising Member; Nandlal Varyani, M.D.; David S. Buchan, D.P.M.; R. Gregory Browning, Ph.D.; Anquetette Sloan; Patricia J. Davidson, 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: Lance A. Talmage, M.D., Secretary; and Dalsukh Madia, M.D.

Also present were: Richard A. Whitehouse, Executive Director; Rebecca J. Marshall, Chief Enforcement Attorney; Marcie P. Pastrick, Enforcement Attorney; Damion M. Clifford, Barbara J. Pfeiffer, Assistant Attorneys General; Eileen M. Schmidt, Executive Assistant to the Director; Sallie J. Debolt, Executive Staff Attorney; Michael K. Miller, Public Policy & Government Affairs Officer; Danielle Bickers, Compliance Supervisor; Jean Gillman, Compliance Officer; Barbara Jacobs, Public Services Administrator; Jacqueline A. Moore, Disciplinary Information Assistant; and Cathy Hacker, P.A. Program Administrator.

CITATIONS AND PROPOSED DENIALS

ANDREW PAUL LINCOLN ACKERMAN, M.T. APPLICANT - LETTER OF PROPOSED DENIAL

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

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

Vote:	Mr. Albert	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

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JABIR KAMAL AKHTAR, M.D. - LETTER OF PROPOSED DENIAL

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

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

Vote:	Mr. Albert	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

MOHAMMAD ANVARI-HAMEDANI, M.D. – CITATION LETTER

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

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

Vote:	Mr. Albert	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

CLYDE DENNIS BROWN, 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. BROWN. MS. SLOAN

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SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

ROBERT JAMES FINKS, M.T. APPLICANT - LETTER OF PROPOSED DENIAL

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

DR. KUMAR MOVED TO SEND THE LETTER OF PROPOSED DENIAL TO DR. FINKS. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

ROBERT GROSS, D.O. – CITATION LETTER

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

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

Vote:	Mr. Albert	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye

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Mr. Browning	- aye
Ms. Sloan	- aye
Dr. Davidson	- aye
Dr. Steinbergh	- aye

The motion carried.

KANDHASAMY KANNAPIRAN, 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. KANNAPIRAN. DR. VARYANI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

Dr. Egner joined the meeting at this time.

LICENSURE, PROBATION AND REINSTATEMENT CONSENT AGENDA

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

DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES ON NOVEMBER 6-7, 2006 WITH: MICHAEL TODD ADAMS, M.D.; STEVE AMOILS, M.D.; ROBERT M. BENSON, M.D.; KEVIN W. BOWERS, D.O.; DAVID T. BROCK, D.O.; SCOTT M. CAMPBELL, M.D.; PATRICK BRIAN CESTONE, JR., M.D.; L. JEAN COOPER, M.D.; MILES E. DRAKE, JR., M.D.; TIMOTHY A. GOODEN, M.D.; GEORGE V. HASSINK, M.D.; KANDHASAMY KANNAPIRAN, M.D.; MELANIE LYNNE LEU, M.D.; DAVID J. LEVY, M.D.; KEVIN DALE MCKEE, D.O.; PHILIP F. MYERS, JR., M.D.; JOHN RUSSELL OGDEN, M.D.; MICHAEL PAUL PARKER, M.D.; JOANNE POJE, M.D.; DALE PRATT-HARRINGTON, D.O.; JOHN H. ROCKWOOD, P.A.; JAMES M. ROSSELIT, D.O.;

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JULIA RUFFIN, D.P.M.; JOHN W. SHAW, M.D.; JODY LEE NELSON SHORT, D.O.; GEORGE A. SOUTHIERE, JR., M.D.; MICHAEL J. STANEK, D.O.; TOM R. STARR, M.D.; AND TOBY JAMES TIPPIE, P.A.; DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES AND THE SECRETARY AND SUPERVISING MEMBER'S RECOMMENDATIONS AS FOLLOWS:

- **TO APPROVE MARK A. BANKS, M.D.'S REQUEST TO CHANGE HIS MONITORING PHYSICIAN FROM SANFORD Z. MELMED, M.D., TO JOHN M. DIPIETRA, M.D.;**
- **TO APPROVE DAVID W. STREEM, M.D., TO SERVE AS JOHN D. BROWNLEE, M.D.'S SUPERVISING PHYSICIAN;**
- **TO APPROVE KRISTINE M. CAMPBELL, M.D., TO SERVE AS PATRICK R. DENNISON, D.O.'S TREATING PSYCHIATRIST;**
- **TO APPROVE DAVID C. ERNST, M.D.'S REQUEST REDUCTION IN ALCOHOL AND DRUG REHABILITATION MEETINGS FROM 3 PER WEEK TO 2 PER WEEK, WITH A MINIMUM OF 10 PER MONTH;**
- **TO GRANT RALPH ARDEN HUGUNIN, M.D.'S REQUEST FOR APPROVAL OF *ETHICS ACROSS THE MEDICAL PROFESSIONS*, OFFERED BY DONNA F. HOMENKO, PH.D., PROFESSOR, CUYAHOGA COMMUNITY COLLEGE, AS FULFILLING THE REQUIREMENTS OF PARAGRAPH B.5. OF THE BOARD'S ORDER OF AUGUST 10, 2005;**
- **TO APPROVE THE KENTUCKY PHYSICIANS HEALTH FOUNDATION [PHF], TO SERVE AS GUY M. SAVA, M.D.'S SUPERVISING "PHYSICIAN";**
- **TO GRANT MICHAEL CRAIG WARREN, D.O.'S REQUESTS TO APPROVE HIS NEW PRACTICE PLAN, TO WORK AS A HOSPITALIST IN THE UNIVERSITY HEALTH SYSTEM IN CLEVELAND, OHIO, AND TO CHANGE HIS MONITORING PHYSICIAN FROM MICHAEL HOOKER, D.O., TO MICHAEL J. MENOLASINO, III, D.O., WITH TEN CHARTS REVIEWED PER MONTH;**

DR. STEINBERGH FURTHER MOVED TO GRANT RICHARD GRAHAM DAY'S REQUEST FOR APPROVAL OF JAMES W. KELLER, M.D., TO SERVE AS ONE OF THE ASSESSORS FOR PURPOSES OF PERFORMING THE CHEMICAL DEPENDENCY ASSESSMENTS REQUIRED FOR REINSTATEMENT, PURSUANT TO PARAGRAPH 10.b.IV OF HIS JULY 13, 2005 STEP 1 CONSENT AGREEMENT.

DR. STEINBERGH FURTHER MOVED TO APPROVE FOR LICENSURE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCEPTANCE WITH LICENSURE PROTOCOLS, THE PHYSICIAN APPLICANTS LISTED IN EXHIBIT "A", THE P.A. APPLICANTS LISTED IN EXHIBIT "B", THE ACUPUNCTURIST

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APPLICANTS LISTED IN EXHIBIT "C" AND THE RESULTS OF THE RESCORED JUNE 2006 MASSAGE THERAPY EXAMINATION, AND TO CERTIFY AS PASSING AND LICENSE THOSE RECEIVING A SCORE OF 75 OR GREATER ON THEIR EXAMINATION, AND TO CERTIFY AS FAILING AND DENY LICENSURE TO THOSE WHO RECEIVED A SCORE OF LESS THAN 75 ON THE EXAMINATION. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

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

The motion carried.

ELECTION OF OFFICERS FOR 2007

DR. STEINBERGH MOVED TO UNANIMOUSLY ELECT DR. KUMAR AS PRESIDENT, DR. VARYANI AS VICE-PRESIDENT, DR. TALMAGE AS SECRETARY, AND MR. ALBERT AS SUPERVISING MEMBER. DR. BUCHAN SECONDED THE MOTION. All members voted aye. The motion carried.

ADMINISTRATIVE REPORT

Mr. Whitehouse reviewed his written report, a copy of which shall be maintained in the exhibits section of this journal, as well as the attachments to the report. In addition, he updated the Board on several items, including the Board's move date, which, at this time, is scheduled to take place in June 2007, and staff's efforts in working with interested parties on legislation concerning due process.

He noted that Ms. Thompson has an announcement to make to the Board.

Ms. Thompson announced that as of 20 minutes ago, the Board application process went on-line.

Board members congratulated Ms. Thompson and staff on their efforts in this regard.

Concerning the complaint statistics, Dr. Davidson suggested that the Board track the time from citation letter to hearing. She stated that that's a statistic in which people seem to be interested.

Mr. Whitehouse stated that staff can look into that.

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Dr. Steinbergh suggested that the Board might look at educating various organizations, institutions and individuals about the Board's process, so that they understand the time involved.

Mr. Browning asked Mr. Whitehouse to report on his and Dr. Davidson's meeting with the Ohio Council of Medical School Deans.

Mr. Whitehouse stated that it was interesting, but he expected more people to actually be there. He stated that the Council was very receptive, and interested in working with the Board on educational aspects, including ongoing licensee competency.

Dr. Davidson reported on the number of areas in which the Council might be helpful, and in which the Board might assist the Council, including addressing medical students concerning the Board's activities.

PRESIDENT'S REPORT

Dr. Robbins stated that he does not have much to report at this time. He commented that the year has gone pretty quickly, and he continues to marvel at what an honor it is to be on the Board, and also on its staff. He stated that he believes that the Board is situated for much better things ahead. He has enjoyed very much being President during the last year, and he looks forward to continued productivity.

REPORTS BY ASSIGNED COMMITTEES

IMPAIRMENT COMMITTEE

Mr. Albert stated that the Committee reviewed Chapter 4731-16, the Impairment Rules, and Chapter 4731-28, Mental or Physical Impairment Rules. He stated that copies of the rules have been distributed to interested parties over the past several months, and the Committee is now bringing them to the Board for a motion to proceed to hearing.

DR. EGNER MOVED TO APPROVE THE PROPOSED RULES AND TO INSTRUCT STAFF TO PROCEED TO THE HEARING PROCESS. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

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Ms. Bickers advised that the Committee also reviewed a revised Treatment Provider application. The revisions eliminate some of the redundant questions. The Committee will next review the renewal application sent to treatment providers.

LEGISLATIVE LIAISON & RULES COMMITTEE

Mr. Browning stated that the Legislature is currently in a lame duck session; there is little activity going on. The Committee's report, a copy of which shall be maintained in the exhibits section of this journal, was distributed to Board members.

LICENSURE COMMITTEE

Dr. Robbins advised that the Committee reviewed a number of licensure applications.

Jennifer Hetrick, M.D.

Dr. Robbins advised that Dr. Hetrick has not been engaged in the active practice of medicine since October 2004. The Committee recommends approval subject to her passing the SPEX.

DR. EGNER MOVED TO APPROVE DR. HETRICK'S APPLICATION FOR ENDORSEMENT LICENSURE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS, AND CONTINGENT UPON HER PASSING THE SPEX OR SPECIALTY BOARD RECERTIFICATION EXAMINATION. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

Arikat Ouseph Sunny, M.D.

Dr. Robbins advised that Dr. Sunny, as well as the next applicant the Board will consider, did not successfully complete all three steps of the U.S.M.L.E. within seven years. Dr. Sunny has requested an exemption for good cause.

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Dr. Robbins noted that the Committee has further discussed the seven-year rule, and it will bring a recommendation to the full Board, hopefully in January.

Dr. Robbins stated that Dr. Sunny is over the seven-year limit by two years and eight months. He passed Steps 1 and 2 on his first attempt at each, and Step 3 on his second attempt. Dr. Sunny was undergoing additional medical education during the nearly three years he is over the deadline, and for this reason the Committee recommends granting the exemption.

DR. DAVIDSON MOVED TO FIND THAT DR. SUNNY DID HAVE GOOD CAUSE FOR GOING BEYOND THE SEVEN-YEAR LIMIT, AND TO APPROVE HIS APPLICATION FOR ENDORSEMENT LICENSURE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS. DR. VARYANI SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

Yuhui Xu, M.D.

Dr. Robbins advised that Dr. Xu missed the seven-year deadline by two months. He did complete his Ph.D. in pathology and is now doing research at Harvard Medical School. The Committee recommends approving Dr. Xu's application.

DR. STEINBERGH MOVED TO FIND THAT DR. XU DID HAVE GOOD CAUSE FOR GOING BEYOND THE SEVEN-YEAR LIMIT, AND TO APPROVE HIS APPLICATION FOR ENDORSEMENT LICENSURE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye

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Ms. Sloan	- aye
Dr. Davidson	- aye
Dr. Steinbergh	- aye

The motion carried.

Dr. Robbins advised that the Committee reviewed proposed revised Rule 4731-6-14, the seven-year limit rule. He advised that the proposed changes would require an applicant to pass all three steps of the USMLE within a ten year period, without having failed any one step more than three times. The proposed rule would allow for a limited exception for those individuals that obtained both an M.D./D.O. and Ph.D., provided they meet certain criteria. If someone fails a step more than twice, they will have to start the entire sequence over. Dr. Robbins stated that the proposed revision will be sent to schools and residency programs for input.

QUALITY ASSURANCE COMMITTEE

Dr. Egner stated that the Committee reviewed the Closed Complaint report and finds that the Secretary and Supervising Member are doing a good job.

LIMITED BRANCH & ALTERNATIVE MEDICINE COMMITTEE

Dr. Buchan advised that the Committee reviewed applications for Certificates of Good Standing to teach massage therapy from two schools, and recommends approval of both.

MR. BROWNING MOVED TO GRANT CERTIFICATES OF GOOD STANDING TO THE COLLINS CAREER COLLEGE IN CHESAPEAKE, OH, AND TO THE ACADEMY OF MASSAGE THERAPY IN ENGLEWOOD, NJ. DR. DAVIDSON SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

Dr. Buchan advised that the Committee also recommends appointment of Vickie Mickey, C.T., and Mary Pat Gallagher, R.N., C.T., to fill the vacant positions on the Cosmetic Therapy Advisory Committee.

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MR. BROWNING MOVED TO APPOINT MS. MICKEY AND MS. GALLAGHER TO THE COSMETIC THERAPY ADVISORY COMMITTEE. DR. DAVIDSON SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Steinbergh	- aye

The motion carried.

MINIMAL STANDARDS COMMITTEE

Dr. Kumar advised that the Committee reviewed the “Physical Examination s by Physicians” position paper, adopted by the Board on March 18, 1989, and discussed the possibility of archiving this document in view of the fact that the Board recently adopted sexual boundary rules that cover most areas of concern discussed in the paper. Following its discussion, the Committee recommended maintaining the document as there are some areas still not addressed by rule.

P.A. COMMITTEE

In Dr. Talmage’s absence, Ms. Sloan reported for the P.A. Committee. She stated that the Committee continues to review draft rules necessitated by the change in the P.A. statutes. She advised that the Committee is not ready to make a recommendation to the Board concerning these rules at this time.

Ms. Sloan advised that the Committee is also working on the formulary for P.A.s, using the Nursing Board’s formulary for APNs as a starting point. The formulary will be divided into three parts: drugs that P.A.s may prescribe, drugs that P.A.s may not prescribe, and physician approved or initiated prescriptions. Under the third category, the Committee is looking at those drugs that may be written by a particular specialty. The Committee feels that the three categories will suffice.

Ms. Debolt advised that the Committee also reviewed correspondence from an ophthalmologist, inquiring as to whether or not a P.A. may perform refractions. The approved response says that a P.A. can do the testing as long as a physician interprets the results.

Dr. Robbins commented that it’s the standard of care in ophthalmology for office assistants to do refractions. He says it’s done everywhere. What’s different in this situation is that the ophthalmologist wants to hire a P.A., which is rare. If the physician hadn’t wanted to hire the individual in question as a P.A., but merely brought her in as a medical assistant, it would have been fine. The problem is that she

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wants to hire the individual as a P.A.

Ms. Debolt stated that there is a prohibition from practicing optometry in the P.A. law.

Dr. Robbins stated that the fear is that the P.A., without the physician being present, may start seeing patients and writing the prescriptions.

Concern was expressed by several Board members that the P.A. could see the patient, send the information to an ophthalmologist, who would never see the patient, and the ophthalmologist would write a prescription.

Dr. Buchan stated that his concern is that P.A.s do have a greater scope than office assistants who currently perform these procedures in ophthalmologist's offices, and could expand their role and fax the physicians information that the physician would sign off on.

After further discussion, it was decided that the matter would be tabled for redrafting of the letter.

DR. STEINBERGH MOVED TO TABLE THE MATTER OF THE CORRESPONDENCE CONCERNING REFRACTIONS BY P.A.S, AND TO RETURN THE MATTER TO THE COMMITTEE. DR. KUMAR SECONDED THE MOTION. All members voted aye. The motion carried.

Ms. Sloan stated that the Committee also reviewed special services plans from two groups.

Affiliated Dermatology

The above-named group has requested permission for its P.A.s to perform light-based treatment therapy for vascular and pigmented lesions and UVB Eximer laser treatment for psoriasis. Ms. Sloan advised that the Committee recommends denial.

DR. KUMAR MOVED TO DENY AFFILIATED DERMATOLOGY'S PLAN FOR ITS P.A.S TO PERFORM LIGHT-BASED TREATMENT FOR VASCULAR AND PIGMENTED LESIONS AND UVB EXIMER LASER TREATMENT FOR PSORIASIS ON THE BASIS THAT THE PROCEDURES ARE PROHIBITED BY RULES 4731-18-02, 4731-18-03, AND 4731-18-04, OHIO ADMINISTRATIVE CODE. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye

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Dr. Steinbergh - aye

The motion carried.

Sunrays Cardiology, Inc.

Ms. Sloan advised that the above-named group has requested permission for its P.A.s to perform noninvasive vascular studies, to include treadmill stress echo, dobutamine stress echo and adenosine infusion studies. The Committee tabled the request, as the application covers four different procedures and the information provided as to the education of the P.A. was not complete.

Dr. Davidson advised that she would be opposed to P.A.s being permitted to do stress echo tests.

SCOPE OF PRACTICE COMMITTEE

Dr. Steinbergh stated that the Committee had two issues on its agenda, the first being the Board's policy on performance of EMGs. The Board had received a request from the Chiropractic Board to revisit this issue, as the two boards' policies on this issue are in conflict. Dr. Steinbergh advised that the Committee feels that performing EMGs is the practice of medicine and cannot be delegated to non-physicians. The testing is done to evaluate physiologic function from the motor neuron off the spinal cord to the neuromuscular level. Board certified neurologists and physiatrists, during their three-year residency training, incorporate EMGs as part of their diagnostic ability. They are capable of evaluating diseases such as ALS, myasthenia gravis and other neurologic diseases.

Dr. Steinbergh continued that chiropractors are being authorized by the Chiropractic Board to perform EMGs. What they're looking at is radiculopathies, carpal tunnel syndrome, and that type of thing. What the Committee disagrees with is the chiropractor's ability to completely interpret that EMG. Performing an EMG is not as simple as placing an electrode. The important piece is the interpretation of the examination as it is in process.

Dr. Steinbergh stated that the Committee did not feel that the Board should modify its policy that performing an EMG is the practice of medicine. The Committee will continue to look at this and redefine electromyography, based on Dr. Kumar's comments that he does use EMG techniques in his practice.

Dr. Steinbergh stated that the Committee also continues discussion about an inquiry regarding Hyperbaric Therapy by podiatrists. She stated that the Committee wants to get input from the head of the hyperbaric department at Ohio State University. It will also run this by the Ohio Podiatric Medicine Association.

REPORT ON MIDWEST REGIONAL BOARDS MEETING

Dr. Steinbergh advised that the meeting took place on Saturday, December 2. She stated that the unfortunate part is that so many of this Board's members attended, but only one physician from Pennsylvania came and the time was spent educating her. Dr. Steinbergh reviewed the agenda, a copy of which shall be maintained in the exhibits section of this journal, with the Board.

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Dr. Steinbergh expressed concern about lack of interest in these meetings by other states. She wonders whether this is an expense that is no longer justifiable for this Board.

Dr. Egner agreed, stating that there was a lot of interest in these meetings when it first started, adding that it is a good concept. Dr. Egner stated that the entire country should have regional communication. Ohio shares way too many licensees with surrounding states and there should be better communication. If the interest isn't held by the other states, it's a lot of work and an expense that isn't benefiting Ohio.

Mr. Albert stated that it will take the Federation to get behind this and set up regions throughout the country.

Dr. Egner stated that the states don't want that because they're afraid they will lose some independence.

Dr. Steinbergh stated that she has asked Ms. Wehrle to contact the Federation to reserve a spot for this group on their agenda. Attempts will be made to get more of the members to attend. They will also look at scheduling this meeting in the fall, rather than in the winter, which creates weather problems for some Boards.

Mr. Whitehouse suggested that at some point, teleconferencing might be the answer to attendance.

Thereupon at 10:16 a.m. on December 14, 2006, the December 13-14, 2006 meeting of the State Medical Board of Ohio was duly adjourned.



Andrew F. Robbins, Jr., M.D., President



Lance A. Talmage, M.D., Secretary

(SEAL)

