

October 11, 2006

MINUTES

THE STATE MEDICAL BOARD OF OHIO

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Andrew F. Robbins, Jr., M.D., President, called the meeting to order at 1:04 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; Lance A. Talmage, M.D., Secretary; 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.; Dalsukh Madia, M.D.; and Anita M. Steinbergh, D.O. The following arrived at a later time: Nandlal Varyani, M.D.

Also present were: Diann K. Thompson, Assistant Executive Director; William J. Schmidt, Staff Attorney, Enforcement, Compliance & Investigations; Rebecca J. Marshall, Chief Enforcement Attorney; 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, Damion M. Clifford, Steven C. McGann and Barbara J. Pfeiffer, 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; Barbara Jacobs, Public Services Administrator; Jacqueline A. Moore, Disciplinary Information Assistant. The following joined the meeting at a later time: Richard A. Whitehouse, Executive Director;

MINUTES REVIEW

DR. KUMAR MOVED TO APPROVE THE MINUTES OF SEPTEMBER 13, 2006.

DR. STEINBERGH SECONDED THE MOTION. A vote was taken

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

The motion carried.

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EXECUTIVE SESSION

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

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

The motion carried.

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

Dr. Varyani arrived during the executive session. Mr. Albert left the meeting following the executive session.

The following joined the meeting after the executive session: Patricia A. Davidson, Acting Chief Hearing Examiner, and Gretchen L. 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: James Curtis Dilday, M.D. and German V. Prada, M.D. A roll call was taken:

ROLL CALL:	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. Madia	- aye
	Dr. Steinbergh	- aye
	Dr. Robbins	- aye

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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:	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. Madia	- 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. Dr. Robbins advised that Dr. Talmage and Mr. Albert were the Secretary and Supervising Member and must abstain on the Reports and Recommendations scheduled for today.

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

JAMES CURTIS DILDAY, M.D.

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

MR. BROWNING MOVED TO APPROVE AND CONFIRM MR. McNEIL'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF JAMES CURTIS DILDAY, M.D. DR. STEINBERGH SECONDED THE MOTION.

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

Dr. Steinbergh stated that this is a physician who had a training certificate that expired on July 24, 2006. He was authorized to participate in a geriatric psychiatry fellowship at the University of Cincinnati. The Arkansas State Medical Board revoked his Arkansas license on June 21, 2004 for persistent and flagrant overcharging for services, charging for services where the services were not rendered, and inappropriate prescribing of controlled substances. Dr. Steinbergh stated that she thought that the record was very clear about the Arkansas Board Order. The Proposed Order before the Board is for permanent revocation.

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Dr. Steinbergh stated that Dr. Dilday requested a hearing, but he never came to the hearing to personally defend himself. She stated that, in her mind, the Arkansas Order was clear. Because he was allowed to have a hearing and did not come to defend himself in any way, she does think that the circumstances do allow for permanent revocation. Dr. Steinbergh noted that many times the Board just revokes, if there wasn't a hearing and a clear record. To her the record is clear and she does agree with the Proposed Order of permanent revocation.

Dr. Buchan stated that, in reviewing this, the findings of the Arkansas Board regarding the errors in prescribing and the errors in billing were so egregious that there really is no opportunity to recapture the public trust, nor Dr. Buchan's trust. Dr. Buchan stated that he believes permanent revocation of his training certificate is the right thing to do.

Dr. Kumar commented that Dr. Dilday currently doesn't have a training certificate. He suggested that the language state that Dr. Dilday's expired training certificate is permanently revoked.

Dr. Buchan asked whether you can revoke a non-existent training certificate.

Ms. Pfeiffer stated that the Board can take disciplinary action on an expired license.

Ms. Thompson stated that she believes the Findings of Fact make it clear. The first Finding of Fact concludes that Dr. Dilday's training certificate expired on July 24, 2006. She doesn't know that the Board needs to clarify the Proposed Order further. The Hearing Examiner felt that the Board still has jurisdiction over that training certificate, which could be renewed at this time.

Dr. Steinbergh stated that it's still in a renewable state, and she believes that it would be for two years.

Ms. Thompson stated that a training certificate is a little different. If he went back to the training program this year, that certificate could be reinstated.

Dr. Varyani suggested adding the training certificate number.

Dr. Steinbergh stated that she thinks that the language in the Proposed Order is clear.

Dr. Buchan stated that if the attorneys are suggesting that the Proposed Order is on safe ground, he would keep it as it is.

Dr. Kumar asked Ms. Pfeiffer if it is all right the way it is written.

Ms. Pfeiffer stated that it's fine the way it's written, especially if the Board is adopting the Findings of Fact, too, as they're set forth.

A vote was taken on Mr. Browning's motion to approve and confirm:

Vote: Dr. Egner - aye

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Dr. Talmage	- abstain
Dr. Varyani	- aye
Dr. Buchan	- aye
Dr. Kumar	- aye
Mr. Browning	- aye
Ms. Sloan	- aye
Dr. Davidson	- aye
Dr. Madia	- aye
Dr. Steinbergh	- aye

The motion carried.

GERMAN V. PRADA, M.D.

Dr. Robbins directed the Board's attention to the matter of German V. Prada, 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. Prada. Five minutes would be allowed for that address.

Dr. Prada was accompanied by his attorney, Eric J. Plinke.

Mr. Plinke advised that in the early part of 2004 Dr. Prada's license was suspended, by Board Order, for a minimum period of 180 days, with reinstatement terms attached to it. Dr. Prada appealed that Board Order. There was a period of time during the appeal where a stay was granted. Despite the stay, Dr. Prada had served some suspension. His license has been, in effect, suspended since September 2004. Dr. Prada made a reinstatement request, which is part of the record before the Board, along with the evidence that he provided in support of that. Thereafter, Dr. Prada was cited twice. The hearing record before the Board this month is the combined hearing record for both of those cites. Mr. Plinke stated that the hearing itself actually occurred in August 2005. Dr. Prada has continued to be suspended, pursuant to the Board's original Order, for in excess of two years.

Mr. Plinke stated that the hearing record before the Board is very thorough, and he added that he thinks that Mr. Porter did an excellent job of walking his way through the volumes of evidence. Mr. Plinke stated that he would like to speak to two issues regarding that evidence. The allegations involving Patient 2 were frankly, from his experience, some of the most unbelievable he's seen this Board make. Mr. Plinke stated that he's glad to see that Mr. Porter agreed with their position on that. Mr. Plinke stated that he has no objections regarding that portion.

Mr. Plinke continued that he has given the Board his legal position on the activities that occurred during the suspension, which were mainly about who was authorizing prescriptions and what was going on with regard to billing for Jeffrey Riber's services. He added that, obviously, the Board has discretion and authority to decide what to do in this case in regard to those issues. He reminded the Board that, during

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that period, Dr. Prada had retained another physician to take control of the practice and to be there for Mr. Riber, who's an independent practitioner. It was that physician who was authorizing refills. The prescription evidence before the Board is not supported by any witness. There was not one single witness who came forward to say that he or she spoke with someone and they authorized this prescription under Dr. Prada's name. The Board has volumes of inconsistent and false records from pharmacies. To agree with what Mr. Porter has concluded, the Board would have to disbelieve portions of what's in the documents, and believe the parts that are incriminating against Dr. Prada. Mr. Plinke stated that he doesn't think that the Board can do that in a sustainable fashion.

Mr. Plinke asked that the Board consider Dr. Prada's application for reinstatement.

Dr. Prada at this time addressed the Board. He stated that he would like to apologize to the Board for what he was accused of. It was a tremendous error that brought him before the Board three years ago. He was very overwhelmed, rendering him unable to speak when his life was shattered. Dr. Prada admitted that he lacked the proper skills for the management of the business aspects of his office, but he never authorized prescriptions or the stamping of any legal documents that would misinterpret or misrepresent his practice. He understood that he was not to have any participation in his practice during his suspension. Therefore, he did not even go into his office, and he secured the coverage of Dr. Trevino to take control of his practice.

Dr. Prada stated that he has always been honest. He felt that he was responsible, and he never denied or excused his actions of which he was accused in the first incident. He asked that the Board take into consideration all of the acts of members of the medical profession in the State of Ohio that were more serious than that of which he was accused. Their punishment was less severe. Dr. Prada asked that the Board also consider that he has been out of practice for over two years. In his 42 years of practice he has never had complaints brought against him to the Medical Board or any other facility until this unfortunate incident.

Dr. Prada asked that the Board take into consideration his loyalty to his profession, the state, his patients and the Medical Board. He stated that he feels that he has complied with all of the requests that have been made of him. He asked that the Board reinstate his certificate to practice medicine and surgery in the State of Ohio, and allow him to continue caring in a better way for his patients, his country and himself.

Dr. Prada thanked the Board for its consideration.

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

Mr. Wilcox stated that, admittedly, this was a difficult and lengthy case. It is broken down into three main parts: the sexual boundary issues; standard of care issues; and Dr. Prada's alleged practice while his license was suspended.

Concerning the sexual boundary issues, Mr. Wilcox stated that, obviously, there were some issues of credibility in this case. He doesn't necessarily disagree with Mr. Porter's conclusions in that matter. He would add, however, that he thinks that Dr. Prada also has some credibility issues, given his histories and

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given some of the admissions he made at hearing. As to the patient care issues, the State's expert, Dr. Karp testified that Dr. Prada, in this case, failed to perform basic recordkeeping functions in his treatment of Patient 2, and this failure resulted in the conclusion that Dr. Prada failed to conform to minimal standards of care. Even Dr. Prada admitted during the hearing that he doesn't document his patient records well. He stated that he thinks that the Board can see that when they review those records. Dr. Prada testified that he was concerned more with sitting with his patients and listening to them than accurately reflecting things such as testing for blood levels and the patients' interactions with medications. Dr. Karp testified that all of Dr. Prada's medical recordkeeping shortcomings fell below the minimal standard of care. One other thing regarding the recordkeeping is that Dr. Prada testified that he often orally explained treatment options to patients or, perhaps, indications of potential problems patients may have with medications. He said that he would orally explain that to patients, but he never recorded that in his records. As the State's expert testified, the standard of care for the psychiatric profession and the medical profession is to explain the treatment options and to document them in the record.

Mr. Wilcox stated that, additionally, it is important to maintain accurate and coherent prescription records. In this case, especially for Patient 2, that wasn't done. The State's expert testified that at least ten different medications were prescribed to Patient 2, and there was no documentation as to why these particular medications were prescribed. There's no prescription log or prescription record to show when prescriptions were given and how much medication was given. There was only one instance in the record of any lab or blood analysis for the medication, Depakote. Dr. Karp explained that the need to document blood levels of a patient on Depakote on a regular basis is extremely important, especially within the first few months of taking this medication.

Mr. Wilcox stated that, as to the issue of Dr. Prada practicing medicine during the period of suspension, it is obvious from looking at the record. Dr. Prada's license was suspended by this Board from March 31, 2004 to June 25, 2004. His office staff, for whom he is certainly responsible, basically continued business as normal. They saw patients, prescribed medications. In an admission at hearing, Dr. Prada stated that, in spite of the fact that he's been licensed for 30 years, he was just learning that he is responsible for documents issued in his name and prescriptions requested by his staff in his name. He told the Board that he never paid any attention to the financial aspects of his practice. Mr. Wilcox stated that he doesn't find this to be an acceptable excuse. Dr. Prada is responsible for the actions of his staff. The prescriptions in question were phoned in by his office staff under his authorization. Dr. Prada's D.E.A. number was used. Dr. Prada's office continued during his suspension as if he was practicing. Jeff Riber kept seeing patients, Darlene Wimberley kept billing the BWC for these patients in Dr. Prada's name, and they both apparently kept calling in prescriptions in Dr. Prada's name.

Mr. Wilcox stated that another illustration of Dr. Prada's practice during his suspension is his treatment of Patient 3, in which he admitted during his Board deposition that he'd authorized the change in the prescription of the medication called Lexapro. He later changed his testimony at hearing, stating that Dr. Trevino had actually authorized the change, but there is no indication of this in the record. Mr. Wilcox stated that he thinks that this also damages Dr. Prada's credibility. Dr. Trevino was no where to be found; there was no testimony from Dr. Trevino, and there were only scant mentions of Dr. Trevino in the record.

Mr. Wilcox stated that it is also evident from the BWC billing records that Dr. Prada was receiving income

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or payments in his name for bills submitted during the suspension time. The exhibits identified by the BWC witness indicate that several billing statements were submitted by Dr. Prada's office during his suspension period. These forms were submitted under his exclusive BWC provider number, and Dr. Prada was listed as the provider of the services on those forms. Mr. Wilcox stated that he doesn't think that Dr. Prada's attempt to explain away these actions as being done without his authority are credible. Dr. Prada was the physician of record, and his stamped signature appears on those documents. He submitted those bills under his exclusive provider number, and the testimony at hearing shows that Jeff Riber, the other person working out of Dr. Prada's office, never had and never has had a BWC provider number. Dr. Prada is ultimately responsible, and for him to blame this on his staff further takes away from his credibility.

Mr. Wilcox stated that, in the end, he supports Mr. Porter's determination that Dr. Prada has failed to manage his practice and has abdicated his responsibilities as a physician. Permanent revocation is appropriate in this case.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. PORTER'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER IN THE MATTER OF GERMAN V. PRADA, M.D. DR. MADIA SECONDED THE MOTION.

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

Dr. Egner stated that she would like to address three main areas in this case. She commented that she does not agree with the Proposed Order of permanent revocation in this case. She stated that she agrees with Mr. Porter's finding that Patient 2 was not credible in terms of the sexual boundary violation allegation. Patient 2 had no recollection as to when the incident may have occurred; she reported it two years after the fact. There were many opportunities when she or her husband, who accompanied her to most of those visits, could have addressed that issue. Dr. Egner stated that it is significant that Patient 2 saw Dr. Prada ten times after the alleged incident. Dr. Egner stated that she believes that Patient 2 read about Dr. Prada's previous problems, she knew that he had been accused of boundary issues previously, and that that was the basis for her accusation. Dr. Egner stated that she doesn't believe the Board can discipline Dr. Prada based on that issue.

Dr. Egner continued that, in terms of patient care, she thinks that the State's expert spends an inordinate amount of time trying to convince the Board of minimal standards violation, based on extremely poor recordkeeping. Dr. Egner stated that Dr. Prada does have the most incredibly poor recordkeeping. She added that she's not sure that the Board can say that Dr. Prada practices below minimal standards. She stated that she wouldn't want to use Dr. Prada as her psychiatrist; she's not going to hold him up as an exemplary physician. But she added that she's not sure that the Board has proven that Dr. Prada deserves a permanent revocation. She noted that even Patient 2 states that one of the reasons that she was hesitant to leave Dr. Prada was that he did help her, psychiatrically, more than other psychiatrists she has seen in the past.

Dr. Egner continued that, concerning the allegation that Dr. Prada practiced while his license was suspended, she thinks that the Board is in a "Catch 22." The Board says that he has terrible recordkeeping,

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and he doesn't write anything down, so he must have practiced while he was suspended because his records don't show that Dr. Trevino okayed the prescriptions. Dr. Egner stated that they practiced in a way that records don't really mean much of anything in that practice. Dr. Egner stated that she doesn't believe that Dr. Prada, himself, practiced while his license was suspended. His office staff said that he only came in to get the mail and would not talk to anyone about those patients. She doesn't think that he did. Dr. Egner stated that she thinks that they just went on, as usual. Mr. Riber had been seeing patients for a long time. Mr. Riber did not have an individual prescriber number with the BWC. Dr. Prada's real issue should be fraud with BWC. He submitted claim after claim for years, not just during his suspension time, as if he rendered the service. He says that he did it under his corporation, but the BWC has rules that say it is provider dependent. Dr. Prada definitely has issues there; he submitted claims as if he rendered the care, when he didn't. That was not the Board's cite, however. Dr. Egner stated that that will have to be handled someplace else.

Dr. Egner continued that Dr. Prada did have a relationship with Dr. Trevino to handle things while he was gone. Dr. Trevino came to his office two days a week. She added that she doesn't think that Dr. Trevino was really an active role model in this office, who came in and said, "Let me change your system, it's really bad." She stated that she thinks that Dr. Trevino saw the patients he was scheduled to see and that was about it.

Dr. Egner stated that, as far as the prescriptions go, she agrees with Mr. Plinke's objections. It is hard to put all of the onus on the doctor's office when the pharmacy was extremely lax in being accurate. Whether they put down a correct address or not was not important to the pharmacy. She stated that she can see where, if someone calls the pharmacy and identifies himself or herself as being from Dr. Prada's office, calling in a prescription authorized by Dr. Trevino, the pharmacy was not "into" details. She thinks that, as soon as they heard, "this is Dr. Prada's office," or they looked on their computer and saw these were prescriptions previously prescribed by Dr. Prada, that's exactly the name that they put down.

Dr. Egner stated that she's only saying this in Dr. Prada's defense because the Report and Recommendation asks for permanent revocation. If the Proposed Order were something else, such as a suspension, recordkeeping course requirement, supervision, and really looking at Dr. Prada, that would be appropriate. To permanently revoke a license based on this record is not appropriate.

Dr. Kumar thanked Dr. Egner for her analysis. He stated that, for the same reasons she cited, he did draft an alternative order. Dr. Kumar stated that he would like to commend Mr. Porter for doing an excellent job in preparing his Report and Recommendation. He noted, however, that in paragraph 73 of the Summary of Evidence, the date cited should be May 6, 2002, not May 6, 2006 as the Report presents.

Dr. Kumar stated that he won't go into what happened as far as Patient 2 and sexual impropriety is concerned because the evidence is quite clear that the patient is not believable in many aspects. He stated that he would like to spend some time talking about the care, as such, provided to Patient 2, as well as the recordkeeping. Dr. Kumar stated that it is true that the progress notes, as they appear, are very sketchy. However, if you look at the initial intake notes, which he has gone through extensively, it is a very well done template that talks about: The chief complaint; the diagnosis; what the patient is there for; the family history; children's history; and where the patient was before. The only thing missing from the equation is a

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column: Diagnosis. Dr. Kumar stated that he doesn't know why that's missing, but the template is otherwise very well done. Dr. Kumar continued that one thing that is missing in many aspects in this case is the log of medicine that was prescribed. Dr. Kumar stated that it's kind of intriguing. He looked at other records submitted, and other than for Patient 2, there is a beautiful log of medicine, with dates they were renewed and why they were renewed. For Patient 2, the log was started, was half-filled, and it was never followed through. In the progress notes, there is a note of what medication the patient was on.

Dr. Kumar stated that the Board needs to recognize the extreme difficulty Dr. Prada had taking care of this patient because this patient was being taken care of by two different places. The patient was being seen at Wright Patterson Air Force (WPAFB) and by Dr. Prada. There are plenty of notes in the chart that talk about communication back and forth with the WPAFB physician and Dr. Prada. There are notes talking about the WPAFB people calling and asking his opinion to take over the care and he refused because he hadn't seen the patient for too long, and he doesn't know what's going on. There is also a record here that was so precise that, when there was a snow day, he could not keep an appointment and the appointment was canceled. The note said that he would only write the medication for seven days, that the patient would have to come back for an appointment and then the prescription would be refilled. The record reflected that.

Dr. Kumar stated that this is a minimal standards issue because it's hard to read the progress notes and so on and so forth, but he doesn't believe it falls below the level that deserves a permanent revocation.

Dr. Kumar stated that he has before him evidence that was presented that Dr. Prada billed BWC under his name. Dr. Kumar stated that it was certainly billed under Dr. Prada's provider number; however, in the column, "provider name" it says "German V. Prada, M.D., Inc." That pattern appears various places in the billing records. Some places it says, "Inc.," and other places it doesn't. They are actually interchanging "M.D., Inc." and "M.D." very frequently without any regard. Dr. Kumar stated that he thinks that's where the problem comes up. He noted that, as Dr. Egner pointed out, this is a BWC issue and the BWC must address that.

Dr. Kumar stated that, pertaining to the prescription allegations, he won't elaborate more than what Dr. Egner has said, but one thing that is really lacking was the fact that the Board hadn't any testimony from Dr. Trevino. Dr. Trevino was the key person who should have testified that he was the one who was supervising all along. Unfortunately, the Board doesn't have that. Instead, there is testimony of one patient that she never saw Dr. Prada during the time frame she got a prescription at his office.

DR. KUMAR MOVED TO AMEND MR. PORTER'S PROPOSED ORDER BY SUBSTITUTING THE FOLLOWING:

- A. The application of German V. Prada, M.D., for reinstatement of his certificate to practice medicine and surgery in Ohio is DENIED.
- B. **PERMANENT REVOCATION, STAYED; SUSPENSION:** The certificate of Dr. Prada to practice medicine and surgery in the State of Ohio shall be PERMANENTLY REVOKED. Such permanent revocation is STAYED, and

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Dr. Prada's certificate shall be SUSPENDED for an indefinite period of time, but not less than six (6) months from the effective date of this Order.

- C. **CONDITIONS FOR REINSTATEMENT OR RESTORATION:** The Board shall not consider reinstatement or restoration of Dr. Prada's certificate to practice medicine and surgery until all of the following conditions have been met:
1. **Application for Reinstatement or Restoration:** Dr. Prada shall submit an application for reinstatement or restoration, accompanied by appropriate fees, if any.
 2. **Obey the Law:** Dr. Prada shall obey all federal, state, and local laws, and all rules governing the practice of medicine and surgery in Ohio.
 3. **Psychiatric Reports Evidencing Fitness to Practice; Recommended Limitations:** At the time Dr. Prada submits his application for reinstatement or restoration, Dr. Prada shall provide the Board with written reports of evaluation by two psychiatrists acceptable to the Board indicating that Dr. Prada's ability to practice has been assessed and that he has been found capable of practicing in accordance with acceptable and prevailing standards of care. Such evaluations shall have been performed within sixty days prior to Dr. Prada's application for reinstatement or restoration. The reports of evaluation shall describe with particularity the bases for the determination that Dr. Prada has been found capable of practicing according to acceptable and prevailing standards of care and shall include any recommended limitations upon his practice.
 4. **Professional Billing Course:** At the time he submits his application for reinstatement or restoration, Dr. Prada shall provide acceptable documentation of successful completion of a course or courses addressing appropriate billing practices. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any courses taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. Prada submits the documentation of successful completion of the course or courses dealing with professional billing practices, he shall also submit to the Board a written report describing the course, setting forth what he learned from the course, and identifying with specificity how he will apply what he has learned to his practice of medicine in the future.
 5. **Medical Records Course:** At the time he submits his application for reinstatement or restoration, Dr. Prada shall provide acceptable documentation

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of satisfactory completion of a course on maintaining adequate and appropriate medical records, such course to be approved in advance by the Board or its designee. Any courses taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. Prada submits the documentation of successful completion of the course or courses on maintaining adequate and appropriate medical records, he shall also submit to the Board a written report describing the course, setting forth what he learned from the course, and identifying with specificity how he will apply what he has learned to his practice of medicine in the future.

6. **Additional Evidence of Fitness To Resume Practice:** In the event that Dr. Prada has not been engaged in the active practice of medicine and surgery for a period in excess of two years prior to application for reinstatement or restoration, the Board may exercise its discretion under Section 4731.222 of the Revised Code to require additional evidence of his fitness to resume practice.

D. PROBATION: Upon reinstatement or restoration, Dr. Prada's certificate shall be subject to the following PROBATIONARY terms, conditions, and limitations for a period of at least three years:

1. **Obey the Law:** Dr. Prada shall obey all federal, state, and local laws, and all rules governing the practice of medicine and surgery in Ohio.
2. **Declarations of Compliance:** Dr. Prada shall submit quarterly declarations under penalty of Board disciplinary action or criminal prosecution, stating whether there has been compliance with all the conditions of this Order. The first quarterly declaration must be received in the Board's offices on or before the first day of the third month following the month in which Dr. Prada's certificate is restored or reinstated. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.
3. **Personal Appearances:** Dr. Prada shall appear in person for an interview before the full Board or its designated representative during the third month following the month in which Dr. Prada's certificate is restored or reinstated, or as otherwise directed by the Board. Subsequent personal appearances must occur every three months thereafter, and/or as otherwise requested by the Board. If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.

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4. **Professional Ethics Course:** Before the end of the first year of probation, or as otherwise approved by the Board, Dr. Prada shall provide acceptable documentation of successful completion of a course or courses dealing with professional ethics. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any courses taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. Prada submits the documentation of successful completion of the course or courses dealing with professional ethics, he shall also submit to the Board a written report describing the course, setting forth what he learned from the course, and identifying with specificity how he will apply what he has learned to his practice of medicine in the future.

5. **Education Program:** Before the end of the first year of probation, or as otherwise approved by the Board, Dr. Prada shall provide acceptable documentation of satisfactory completion of an education program, to be approved in advance by the Board or its designee. The education program shall be related to professional behavior and effective physician-patient communication. The exact number of hours and the specific content of the program shall be determined by the Board or its designee. This program shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which the program is completed.

In addition, at the time Dr. Prada submits the documentation of successful completion of the education program dealing with professional behavior and effective physician-patient communication, he shall also submit to the Board a written report describing the course, setting forth what he learned from the course, and identifying with specificity how he will apply what he has learned to his practice of medicine in the future.

6. **Noncompliance Will Not Reduce Probationary Period:** In the event Dr. Prada is found by the Secretary of the Board to have failed to comply with any provision of this Order, and is so notified of that deficiency in writing, such period(s) of noncompliance will not apply to the reduction of the probationary period under this Order.
7. **Absence from Ohio:** Dr. Prada shall obtain permission from the Board for departures or absences from Ohio. Such periods of absence shall not reduce the probationary term, unless otherwise determined by motion of the Board for absences of three months or longer, or by the Secretary or the Supervising Member of the Board for absences of less than three months, in instances where

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the Board can be assured that probationary monitoring is otherwise being performed.

- E. **TERMINATION OF PROBATION:** Upon successful completion of probation, as evidenced by a written release from the Board, Dr. Prada's certificate will be fully restored.
- F. **REQUIRED REPORTING TO EMPLOYERS AND HOSPITALS:** Within thirty days of the effective date of this Order, or as otherwise determined by the Board, Dr. Prada shall provide a copy of this Order to all employers or entities with which he is under contract to provide health care services or is receiving training; and the Chief of Staff at each hospital where he has privileges or appointments. Further, Dr. Prada shall provide a copy of this Order to all employers or entities with which he contracts to provide health care services, or applies for or receives training, and the Chief of Staff at each hospital where he applies for or obtains privileges or appointments. This requirement shall continue until Dr. Prada's certificate to practice medicine and surgery in the State of Ohio is fully restored.
- G. **REQUIRED REPORTING TO OTHER STATE LICENSING AUTHORITIES:** Within thirty days of the effective date of this Order, or as otherwise determined by the Board, Dr. Prada shall provide a copy of this Order by certified mail, return receipt requested, to the proper licensing authority of any state or jurisdiction in which he currently holds any professional license. Dr. Prada shall also provide a copy of this Order by certified mail, return receipt requested, at the time of application to the proper licensing authority of any state in which he applies for any professional license or reinstatement or restoration of any professional license. Further, Dr. Prada shall provide this Board with a copy of the return receipt as proof of notification within thirty days of receiving that return receipt, unless otherwise determined by the Board. This requirement shall continue until Dr. Prada's certificate to practice medicine and surgery in the State of Ohio is fully restored.
- H. **SUPERSEDE PREVIOUS BOARD ORDER:** This Order shall supersede the terms and conditions set forth in the March 31, 2004, Board Order concerning Dr. Prada.

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

Dr. Kumar noted that the proposed alternative order imposes a stayed permanent revocation, gives conditions for reinstatement of Dr. Prada's license. The conditions include a recordkeeping course, a billing course. The other probationary terms are essentially the same as those contained in the Board's previous Order.

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Dr. Steinbergh stated that she would like to make one correction to Conclusion of Law paragraph 6 of the Report and Recommendation. She stated that the last sentence of that paragraph should read, “Nevertheless, because the Board did not previously have before it all of the information that was presented during the hearing, the Board was substantially justified in pursuing in this allegation.”

Dr. Steinbergh stated that she thinks her interpretation of this case was very consistent with Dr. Kumar and Dr. Egner. She added that she does, however, have concerns about the fraudulent billing of BWC. She stated that it was clearly fraudulent and is an issue. Dr. Steinbergh stated that it wasn't clear to her whether or not Dr. Trevino, who was the physician in charge during the time in question, had a BWC provider number. If he did, things should have been billed under his number. Dr. Steinbergh stated that she knows that Mr. Riber did not have a provider number. She added that, unless they used the appropriate provider number, the billing was fraudulent. Dr. Steinbergh stated that it's her understanding that each physician has an individual provider number. If services were provided by a physician, that physician's provider number should have been used in the billing. Therefore, in this case, she does believe that there was fraud in billing. Dr. Steinbergh commented that Dr. Prada clearly had no control of this, but is ignorance an excuse?

Dr. Egner stated that he wasn't cited for it.

Dr. Steinbergh agreed but added that that's a real issue for her.

Dr. Kumar stated that he asked beforehand whether Dr. Prada is under indictment with BWC. If not, the Board can't take action at this point.

Dr. Steinbergh noted that Dr. Kumar's amendment would supersede the previous Board Order, and the new Order would be to deny Dr. Prada's request for reinstatement, and impose a stayed permanent revocation. She stated that Dr. Prada's license has been suspended for two years, so he will have to take the SPEX regardless. The Board needs to decide how long he should be suspended under this order.

Dr. Kumar stated that he suggested six months for discussion purposes.

Dr. Steinbergh stated that she would have imposed a longer suspension period; but she is not opposed to the six-month suspension. She added that she would probably put Dr. Prada on probation for three to five years to monitor his practice.

Dr. Kumar stated that the alternative order places him on probation for three years. He stated that it's the same terms that he had before.

Dr. Steinbergh stated that she agrees that he has to have psychiatric reports, the professional billing course, the medical records course. She noted that, in his first Board Order, Dr. Prada was required to take a professional ethics course.

Dr. Kumar stated that he believes Dr. Prada already took that course.

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Dr. Steinbergh stated that, if he did, he will provide that information to the Board.

Dr. Kumar stated that that was supposed to be accomplished during his previous probationary period.

Dr. Steinbergh stated that the conditions for reinstatement should include the professional ethics course requirement. If, in fact, he's already completed it, then he's already fulfilled that piece.

Dr. Kumar stated that the proposed amendment already has that requirement in the probationary requirements.

Dr. Steinbergh stated that she would prefer that it be moved into the conditions for reinstatement section.

Dr. Kumar agreed to Dr. Steinbergh's request.

Dr. Steinbergh referred to paragraph C.5. of the proposed amendment, which requires that Dr. Prada complete a professional behavior course "related to professional behavior and effective physician-patient communication." She asked whether Dr. Kumar is seeing that as something different from the professional ethics course.

Dr. Kumar stated that in some aspects they are alike. There are a lot of similarities there.

Dr. Steinbergh asked whether, if Dr. Prada provided the Board with an all-inclusive course that would address professional ethics and these aspects of the education program, it would be acceptable.

Dr. Kumar stated that it would have to be determined by the Board when he submits that course.

Dr. Steinbergh noted that that education program is under the conditions for reinstatement, as well as under probationary conditions.

Mr. Browning suggested that successfully passing the SPEX should be listed under paragraph 6 of the reinstatement conditions. The current language indicates that the Board may exercise its discretion, as opposed to mandating that he pass the SPEX.

Dr. Kumar agreed.

Dr. Egner stated that her thought with the suspension is that Dr. Prada's original suspension period was for 180 days. In essence, his license has been suspended for two years. He had a hearing that was done in August 2005. It is now October 2006. She asked what the purpose of more suspension time is. She stated that he's not only fulfilled his 180-day suspension; he's fulfilled eight months beyond it, and now the Board is asking for an additional six months.

Dr. Steinbergh stated that the question in her mind that she can't answer is whether he's fulfilled his criteria for restoration. By doing this alternative Board Order, if the Board uses the word "indefinite," it allows him then to fulfill his conditions for reinstatement. She stated that she thinks that there are things that

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Dr. Prada simply needs to learn before he returns to practice.

Dr. Egner stated that she agrees that he needs to do it, but she doesn't know that he needs to do it with more suspension time.

Dr. Steinbergh stated that the question is whether or not he's already met the criteria for reinstatement, and does the Board then put some of these things into the probationary period.

Dr. Kumar stated that he has two reasons for a six-month suspension. He wants Dr. Prada to do the practice management or billing course and the medical recordkeeping course before the Board restores his license, whether it takes him three months or six months.

Dr. Steinbergh stated that if the Order just imposes an "indefinite" suspension, it allows him to conclude these pieces without putting a specific time on it. He would just have to fulfill the criteria for reinstatement and then go into probation for three years.

Dr. Kumar stated that the only reason he included a time frame was because he thought it would take Dr. Prada that much time to finish the requirements.

Dr. Steinbergh commented that it may take longer.

Dr. Buchan stated that, as the Board works through this amendment, his initial reading of this was to be compassionate with this physician. Dr. Buchan stated that he can appreciate where this amendment is heading; however, nobody is changing the findings of fact. Nobody is discussing or arguing the conclusions of law. Dr. Buchan stated that his sense of this is that Dr. Prada's practice is out of control. He stated that he understands the issue involving Patient 2. But the practice situation, Dr. Prada's practicing without a license, the prescription writing – Dr. Buchan stated that he doesn't think that that was confusion, and he doesn't think that the pharmacist didn't understand. He commented that he sees Dr. Prada's name time after time after time. Dr. Trevino's name he sees mentioned three times. Dr. Buchan stated that, in his opinion, that wasn't just a random misunderstanding on the pharmacist's part. Clearly, the practice was out of control.

Dr. Buchan stated that he's feeling much less lenient in this matter and would take a position on the other side, to suggest that Dr. Prada wasn't serving his suspension appropriately. He was continuing to not practice in the way the Board feels is necessary for the citizens of this state. Dr. Buchan stated that he thinks Mr. Porter's Conclusions and Findings of Fact were appropriate, and he would suggest a harder line.

Dr. Varyani stated that when he first read this case, he had a reaction similar to Dr. Buchan's. For someone to bill, even as an "Inc.," to BWC, even if you hire a physician, you bill under your name, you've got to know what you're doing. This is not fun stuff, it's your responsibility. Dr. Varyani stated that he is surprised that everyone is talking about leniency. Dr. Prada has said that he's been in practice for 42 years. He questioned what the Board is trying to do. He agreed with Dr. Buchan that a more severe sanction is appropriate. Dr. Varyani stated that he's hearing the other Board members say that Dr. Prada is such a nice guy and the Board should be nice to him, and he's trying to see a reason why he should be nice

to Dr. Prada. Dr. Varyani stated that he's not finding a reason for leniency.

Dr. Kumar stated that he wishes that Dr. Prada had presented Dr. Trevino as a witness to come and really tell whether or not he was actually there all the time. His sense is that this was a loose association, but he has no proof of that. On the other hand, the reason he was not in agreement with permanent revocation, the Board saw an individual a few months ago who was practicing in Cleveland, and he admitted that he was practicing for about three months because he assumed that the Order would become effective 30 days later, and the Board did not permanently revoke that physician's license. He continued to practice. In that sense, Dr. Kumar felt that permanent revocation was excessive. Dr. Kumar stated that he understands that Dr. Prada did things that he does not like, that Dr. Prada should have done some things differently, but he wants to be consistent.

Dr. Robbins stated that should a physician under suspension call a pharmacy with a prescription, what that person should immediately say is, "I am under suspension by the Medical Board, I cannot practice medicine. Make sure this prescription is under Dr. Trevino's name, because I don't want to go to those people again." Dr. Robbins stated that that was not done here, ever.

Dr. Varyani stated that it was not only not done here, but they were billing under his name.

Dr. Robbins stated that the billing under Dr. Prada's name is absolute fraud, and they knew exactly what was going on. This was a physician under suspension, but money kept coming in. He stated that, in the exact same circumstance, he should have called the BWC and advised that he is under suspension, patients are being seen with another physician, Dr. Trevino, in the office, and asked how it should be done. That wasn't done. Dr. Robbins stated that he would be a lot less lenient in this case than he's hearing from other Board members.

Dr. Varyani stated that he's not trying this case. He thinks that everybody has had plenty of chance, and the Board is sitting here reviewing the situation. Dr. Varyani stated that he sees no reason for leniency in this practice, from what has been going on; however, he will go along with the consensus of the Board. Dr. Varyani stated that he thinks that the Attorney General's office and the Board's enforcement attorneys have done a tremendous job. He stated that he spent a lot of time on this case, and he still doesn't see why he should show this man leniency.

Dr. Steinbergh asked whether Dr. Varyani is convinced that all of these things occurred.

Dr. Varyani stated that he is.

Dr. Steinbergh stated that that's the piece for her. She stated that this is a bad case. The question for her was whether it rises to the level of permanent revocation. Is this a physician who, through ignorance, allowed this practice to go on? Where was his legal advice, once his license was suspended? Where was his legal advice to say that "this is what you must do and this is what you shouldn't do?" Dr. Steinbergh stated that Dr. Prada should have known better. Did he know better and is the record quite reflective of what actually went on? She stated that she's having a little bit of a problem with that.

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Dr. Kumar stated that there was testimony in the record from Mr. Riber and Ms. Wimberley that they called in all of the subscriptions, and so forth. He commented that they may be lying. He added that he agrees with Dr. Robbins as to what should have been done. He added that there may be additional fraud issues, but the Board is now considering whether or not Dr. Prada practiced. Maybe he did, and maybe he didn't. There's an element of uncertainty here as to what exactly happened. Under that basis, he feels that permanent revocation is too much.

Dr. Madia stated that he has a hard time believing that someone who has practiced that long doesn't know what was right and what was wrong: How to bill, who should write prescriptions, under what name. It is not ignorance, but he should have known after practicing this long. If he doesn't know, he should not be a physician.

Ms. Sloan stated that she sees a couple of points here. Dr. Prada stated that he's practiced for over 43 years. She commented that his practice seems to have been poor for those 43 years. His office has run poorly for 43 years. If these employees in his office continue to run the operation as if he was there, that's a poorly run office. Ms. Sloan suggested that Dr. Trevino probably saw how poor the office was run, and he merely did what he needed to do and left. Why would he try to get in the mix of this mess? Ms. Sloan stated that Dr. Trevino did call in; he had to have a number to make the few calls that were there in his name.

Dr. Steinbergh stated that that's a DEA number, which is different from the BWC number.

Ms. Sloan stated that they accepted it.

Dr. Varyani stated that anyone in practice should know that if Dr. Trevino is practicing and Dr. Prada is billing for him, it's not going under Dr. Prada. Dr. Varyani stated that he doesn't think that, in this day and age, you can plead ignorance because you're not supposed to be ignorant. There's literature everywhere. In order to learn how to bill, you know how to fill out a bill.

Dr. Egner stated that she believes that all discussion regarding billing should not be a consideration for what the Board does with Dr. Prada. There is nothing in this cite that refers to his billing practices. The Board is talking about whether he practiced below minimal standards, was there a sexual imposition problem with a patient, and did he practice during the time that he was suspended. She stated that she is very concerned about all of the discussion that is going on regarding his billing practices. Those other issues are what the Board must base its recommendation on. He may be back here again regarding his billing practices. That would be the appropriate time to discuss those.

Dr. Davidson commented that there are records that indicate that he was practicing when he wasn't supposed to be practicing.

Dr. Kumar agrees with that, but added that there are records that were kept during the time when his license was suspended, and those were also very erratic. They were billed in his name, sometimes in his incorporation name, all interchangeable.

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Dr. Steinbergh stated that the discussion about his billing practices goes to the evidence that Dr. Prada was, in fact, practicing. The proof that Dr. Prada was practicing was that they billed these services under Dr. Prada's name. In order for them to do that, he had to have provided those services.

Dr. Egner stated that if that's how it's couched, then that's fine.

Dr. Kumar stated that he's not sure that that's conclusive proof because the same erratic practice was being done before. Yes, there's proof that something was going on, but is it 100% proof that he was there? Dr. Kumar again referred to an earlier physician whose license the Board did not revoke, who practiced for three months on a suspended license.

Mr. Browning asked whether anyone seconded Dr. Kumar's motion.

Ms. Schmidt advised that there is not a second.

DR. STEINBERGH SECONDED DR. KUMAR'S MOTION, FOR THE PURPOSES OF DISCUSSION.

Dr. Steinbergh stated that it's not clear to her that the Board has come to terms with the exact language in the amended order. She stated that the question would be whether or not the Board is willing to consider an amended order, or whether the Board feels that the original recommendation is appropriate.

Mr. Browning asked whether there is a completed proposal before the Board.

Dr. Buchan stated that, just to get a sense of where the Board is going, his vote would be for permanent revocation. He does agree that there are some mitigating factors. He noted that he mentioned that Dr. Prada's practice was out of control; he didn't suggest that Dr. Prada was out of control. He stated that he could agree to a longer period of suspension.

Dr. Steinbergh stated that Dr. Prada has served a two-year suspension thus far. The original Order was for a 180-day suspension. She stated that she would like to clarify, for the record, the conditions for reinstatement versus the probationary terms. Conditions for reinstatement would be to add the requirement for a professional ethics course to the reinstatement terms, and language requiring that he pass the SPEX. For the probationary terms, which would go for at least three years, remove paragraph 4 of the probationary terms since it will now be done under the reinstatement terms. She asked, concerning the probationary term requiring education, whether Dr. Kumar would want to incorporate professional ethics and education under his reinstatement terms.

Dr. Kumar stated that that is fine with him. He suggested adding the professional billing course and the medical records course as paragraphs 5 and 6 of his reinstatement terms, and renumber the current paragraph 6 to 7.

Dr. Steinbergh stated that she wants it noted that this does supersede his previous Board Order, set on March 31, 2004.

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A vote was taken on Dr. Kumar's motion to amend, as amended through discussion:

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

The motion failed.

Dr. Robbins asked for a vote on Dr. Steinbergh's original motion to approve and confirm the Proposed Order.

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

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

The motion failed.

Dr. Kumar suggested working on a compromise.

Mr. Browning stated that he thinks that the message of the vote is that there needs to be more accountability, short of permanent revocation, but something that sends a clearer message.

Dr. Steinbergh suggested that the Board impose a two-year suspension period, with the same language as Dr. Kumar's proposal.

Ms. Sloan suggested that there needs to be a provision for monitoring Dr. Prada's records.

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Dr. Steinbergh stated that a practice plan would be what she would want.

Dr. Kumar agreed to adding that to his earlier motion.

Ms. Thompson asked whether the Board wants the practice plan to be approved and the monitoring to be approved as part of the probation.

Several Board members indicated that it was.

Mr. Browning asked to make certain that the language requiring him to take the SPEX is definite enough.

Dr. Kumar asked for a clarification.

Dr. Steinbergh stated that the conditions for reinstatement should require submission of a practice plan to be approved by the Board, with monitoring in the probationary portion.

Dr. Kumar suggested a one-year suspension period.

Ms. Schmidt reminded the Board members that, since the other two motions failed, their motion must include the terms they want in the Order.

DR. KUMAR MOVED TO AMEND THE HEARING EXAMINER'S PROPOSED ORDER IN THE MATTER OF GERMAN V. PRADA, M.D., BY SUBSTITUTING THE FOLLOWING:

It is hereby ORDERED that:

- A. The application of German V. Prada, M.D., for reinstatement of his certificate to practice medicine and surgery in Ohio is DENIED.
- B. **PERMANENT REVOCATION, STAYED; SUSPENSION:** The certificate of Dr. Prada to practice medicine and surgery in the State of Ohio shall be PERMANENTLY REVOKED. Such permanent revocation is STAYED, and Dr. Prada's certificate shall be SUSPENDED for an indefinite period of time, but not less than one year from the effective date of this Order.
- C. **CONDITIONS FOR REINSTATEMENT OR RESTORATION:** The Board shall not consider reinstatement or restoration of Dr. Prada's certificate to practice medicine and surgery until all of the following conditions have been met:
 1. **Application for Reinstatement or Restoration:** Dr. Prada shall submit an application for reinstatement or restoration, accompanied by appropriate fees, if any.
 2. **Obey the Law:** Dr. Prada shall obey all federal, state, and local laws, and all

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rules governing the practice of medicine and surgery in Ohio.

3. **Psychiatric Reports Evidencing Fitness to Practice; Recommended Limitations:** At the time Dr. Prada submits his application for reinstatement or restoration, Dr. Prada shall provide the Board with written reports of evaluation by two psychiatrists acceptable to the Board indicating that Dr. Prada's ability to practice has been assessed and that he has been found capable of practicing in accordance with acceptable and prevailing standards of care. Such evaluations shall have been performed within sixty days prior to Dr. Prada's application for reinstatement or restoration. The reports of evaluation shall describe with particularity the bases for the determination that Dr. Prada has been found capable of practicing according to acceptable and prevailing standards of care and shall include any recommended limitations upon his practice.
4. **Professional Billing Course:** At the time Dr. Prada submits his application for reinstatement or restoration, Dr. Prada shall provide acceptable documentation of successful completion of a course or courses dealing with professional billing practices. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any courses taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. Prada submits the documentation of successful completion of the course or courses dealing with professional billing practices, he shall also submit to the Board a written report describing the course, setting forth what he learned from the course, and identifying with specificity how he will apply what he has learned to his practice of medicine in the future.

5. **Medical Records Course:** At the time Dr. Prada submits his application for reinstatement or restoration, Dr. Prada shall provide acceptable documentation of satisfactory completion of a course or courses on maintaining adequate and appropriate medical records. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any courses taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. Prada submits the documentation of successful completion of the course or courses on maintaining adequate and appropriate medical records, he shall also submit to the Board a written report describing the course, setting forth what he learned from the course, and identifying with

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specificity how he will apply what he has learned to his practice of medicine in the future.

6. **Professional Ethics Course**: At the time Dr. Prada submits his application for reinstatement or restoration, Dr. Prada shall provide acceptable documentation of successful completion of a course or courses dealing with professional ethics. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any courses taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. Prada submits the documentation of successful completion of the course or courses dealing with professional ethics, he shall also submit to the Board a written report describing the course, setting forth what he learned from the course, and identifying with specificity how he will apply what he has learned to his practice of medicine in the future.

7. **Education Program**: At the time Dr. Prada submits his application for reinstatement or restoration, Dr. Prada shall provide acceptable documentation of satisfactory completion of an education program. The education program shall be related to professional behavior and effective physician-patient communication. The exact number of hours and the specific content of the program shall be determined by the Board or its designee. This program shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which the program is completed.

In addition, at the time Dr. Prada submits the documentation of successful completion of the education program dealing with professional behavior and effective physician-patient communication, he shall also submit to the Board a written report describing the course, setting forth what he learned from the course, and identifying with specificity how he will apply what he has learned to his practice of medicine in the future.

8. **Practice Plan with Monitoring**: At or prior to the time Dr. Prada submits his application for reinstatement or restoration, or as otherwise determined by the Board, Dr. Prada shall submit to the Board and receive its approval for a plan of practice in Ohio. The practice plan, unless otherwise determined by the Board, shall be limited to a supervised structured environment in which Dr. Prada's activities will be directly supervised and overseen by a monitoring physician approved by the Board. Dr. Prada shall obtain the Board's prior approval for any alteration to the practice plan approved pursuant to this Order.

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At the time Dr. Prada submits his practice plan, he shall also submit the name and curriculum vitae of a monitoring physician for prior written approval by the Secretary or Supervising Member of the Board. In approving an individual to serve in this capacity, the Secretary or Supervising Member will give preference to a physician who practices in the same locale as Dr. Prada and who is engaged in the same or similar practice specialty.

The monitoring physician shall monitor Dr. Prada and his medical practice, and shall review Dr. Prada's patient charts. The chart review may be done on a random basis, with the frequency and number of charts reviewed to be determined by the Board.

Further, the monitoring physician shall provide the Board with reports on the monitoring of Dr. Prada and his medical practice, and on the review of Dr. Prada's patient charts. Dr. Prada shall ensure that the reports are forwarded to the Board on a quarterly basis and are received in the Board's offices no later than the due date for Dr. Prada's quarterly declaration.

In the event that the designated monitoring physician becomes unable or unwilling to serve in this capacity, Dr. Prada must immediately so notify the Board in writing. In addition, Dr. Prada shall make arrangements acceptable to the Board for another monitoring physician within thirty days after the previously designated monitoring physician becomes unable or unwilling to serve, unless otherwise determined by the Board. Furthermore, Dr. Prada shall ensure that the previously designated monitoring physician also notifies the Board directly of his or her inability to continue to serve and the reasons therefore.

9. **Additional Evidence of Fitness To Resume Practice: SPEX**: Prior to submitting his application for reinstatement or restoration, Dr. Prada shall take and pass the SPEX examination or any similar written examination which the Board may deem appropriate to assess Dr. Prada's clinical competency.

D. PROBATION: Upon reinstatement or restoration, Dr. Prada's certificate shall be subject to the following PROBATIONARY terms, conditions, and limitations for a period of at least three years:

1. **Obey the Law**: Dr. Prada shall obey all federal, state, and local laws, and all rules governing the practice of medicine and surgery in Ohio.
2. **Declarations of Compliance**: Dr. Prada shall submit quarterly declarations under penalty of Board disciplinary action or criminal prosecution, stating whether there has been compliance with all the conditions of this Order. The first quarterly declaration must be received in the Board's offices on or before

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the first day of the third month following the month in which Dr. Prada's certificate is restored or reinstated. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.

3. **Personal Appearances:** Dr. Prada shall appear in person for an interview before the full Board or its designated representative during the third month following the month in which Dr. Prada's certificate is restored or reinstated, or as otherwise directed by the Board. Subsequent personal appearances must occur every three months thereafter, and/or as otherwise requested by the Board. If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.
 4. **Comply with Practice Plan:** Dr. Prada shall comply with the practice plan set forth in paragraph C.8, above.
 5. **Noncompliance Will Not Reduce Probationary Period:** In the event Dr. Prada is found by the Secretary of the Board to have failed to comply with any provision of this Order, and is so notified of that deficiency in writing, such period(s) of noncompliance will not apply to the reduction of the probationary period under this Order.
 6. **Absence from Ohio:** Dr. Prada shall obtain permission from the Board for departures or absences from Ohio. Such periods of absence shall not reduce the probationary term, unless otherwise determined by motion of the Board for absences of three months or longer, or by the Secretary or the Supervising Member of the Board for absences of less than three months, in instances where the Board can be assured that probationary monitoring is otherwise being performed.
- E. **TERMINATION OF PROBATION:** Upon successful completion of probation, as evidenced by a written release from the Board, Dr. Prada's certificate will be fully restored.
- F. **REQUIRED REPORTING TO EMPLOYERS AND HOSPITALS:** Within thirty days of the effective date of this Order, or as otherwise determined by the Board, Dr. Prada shall provide a copy of this Order to all employers or entities with which he is under contract to provide health care services or is receiving training; and the Chief of Staff at each hospital where he has privileges or appointments. This requirement shall continue until Dr. Prada's certificate to practice medicine and surgery in the State of Ohio is fully restored.
- G. **REQUIRED REPORTING TO OTHER STATE LICENSING AUTHORITIES:** Within thirty days of the effective date of this Order, or as

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otherwise determined by the Board, Dr. Prada shall provide a copy of this Order by certified mail, return receipt requested, to the proper licensing authority of any state or jurisdiction in which he currently holds any professional license. Dr. Prada shall also provide a copy of this Order by certified mail, return receipt requested, at the time of application to the proper licensing authority of any state in which he applies for any professional license or reinstatement or restoration of any professional license. Further, Dr. Prada shall provide this Board with a copy of the return receipt as proof of notification within thirty days of receiving that return receipt, unless otherwise determined by the Board. This requirement shall continue until Dr. Prada's certificate to practice medicine and surgery in the State of Ohio is fully restored.

H. SUPERSEDE PREVIOUS BOARD ORDER: This Order shall supersede the terms and conditions set forth in the March 31, 2004, Board Order concerning Dr. Prada.

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

MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

MR. BROWNING MOVED TO APPROVE AND CONFIRM MR. PORTER'S FINDINGS OF FACT, CONCLUSIONS, AND PROPOSED ORDER, AS AMENDED, IN THE MATTER OF GERMAN V. PRADA, M.D. DR. DAVIDSON SECONDED THE MOTION. A vote was taken:

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

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

The motion carried.

FINDINGS, ORDERS AND JOURNAL ENTRIES

PHILIP GARY WAGMAN, M.D.

Dr. Robbins advised that the Board issued its Notice of Opportunity for Hearing to Dr. Wagman on August 9, 2006, and acknowledgment of receipt was received from Dr. Wagman. Dr. Wagman did not request a hearing, and more than 30 days have elapsed since the mailing of the 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 AUGUST 9, 2006 NOTICE AND TO ENTER AN ORDER OF PERMANENT REVOCATION, EFFECTIVE IMMEDIATELY. DR. KUMAR SECONDED THE MOTION.

Dr. Steinbergh noted that Dr. Wagman was convicted of multiple felony counts in Pennsylvania for violation of Pennsylvania's Controlled Substance, Drug, Device and Cosmetic Act; one felony count of conspiracy to violate Pennsylvania's Controlled Substance, Drug, Device and Cosmetic Act; and one felony count of flight to avoid apprehension. Dr. Wagman has been incarcerated, the memorandum is clear, and the Findings, Order and Journal Entry should be for a permanent revocation.

A vote was taken on Dr. Steinbergh's motion to permanently revoke Dr. Wagman's license:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

The Board took a break at 2:53 p.m. The meeting reconvened at 3:13 p.m.

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CITATIONS, PROPOSED DENIALS & ORDERS OF SUMMARY SUSPENSION

PHILIP L. CREPS, 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. CREPS.
MR. BROWNING SECONDED THE MOTION.** A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

DAVID ALLEN MCMAKEN, 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. MCMAKEN.
DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

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ALLA MIKHLI, D.P.M. – CITATION LETTER

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

**DR. BUCHAN MOVED TO SEND THE CITATION LETTER TO DR. MIKHLI.
DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

WALTER STEPHEN SHONKWILER, D.P.M. – CITATION LETTER

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

**DR. STEINBERGH MOVED TO SEND THE CITATION LETTER TO DR. SHONKWILER.
DR. MADIA SECONDED THE MOTION.** A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

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RATIFICATION OF SETTLEMENT AGREEMENTS

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

SCOTT J. BACLAWSKI, L.M.T. – CONSENT AGREEMENT

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

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

RIMON DAOUD, M.D. – WITHDRAWAL OF APPLICATION

DR. STEINBERGH MOVED TO RATIFY THE WITHDRAWAL OF RIMON DAOUD'S APPLICATION TO PRACTICE MEDICINE AND SURGERY IN THE STATE OF OHIO. MS. SLOAN SECONDED THE MOTION. A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

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NATHAN T. PENNEY, D.P.M. – CONSENT AGREEMENT

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

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

JOHN F. ZAK, M.D. – VOLUNTARY RETIREMENT

DR. VARYANI MOVED TO RATIFY DR. ZAK'S VOLUNTARY RETIREMENT. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

PATRICK ROBERT DENNISON, D.O. – CONSENT AGREEMENT

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

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

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

The motion carried.

DANN W. GANZHORN, M.D. – CONSENT AGREEMENT

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

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

HUSAM EDDIN HAMED, M.D. – CONSENT AGREEMENT

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

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

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The motion carried.

PHILLIP THIELE NORTH, M.D. – CONSENT AGREEMENT

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

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

JOSEPH A. RIDGEWAY, M.D. – CONSENT AGREEMENT

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

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

SARAH A. STEIN, L.M.T. – CONSENT AGREEMENT

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

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Vote:

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. Madia	- aye
Dr. Steinbergh	- aye

The motion carried.

JAMES F. ZIMMERMAN, D.P.M. – CONSENT AGREEMENT

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

Vote:

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. Madia	- aye
Dr. Steinbergh	- aye

The motion carried.

JOHN DAVID BROWNLEE, M.D. – CONSENT AGREEMENT

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

Vote:

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

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Dr. Madia - aye
Dr. Steinbergh - aye

The motion carried.

SAJID Q. CHUGHTAI, M.D. – SURRENDER OF LICENSE

DR. MADIA MOVED TO RATIFY THE PERMANENT SURRENDER OF DR. CHUGHTAI'S LICENSE TO PRACTICE MEDICINE AND SURGERY IN THE STATE OF OHIO. DR. VARYANI SECONDED THE MOTION. A vote was taken:

Vote:

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. Madia	- aye
Dr. Steinbergh	- aye

The motion carried.

SUSAN GAIL SWEDA, M.D. – CONSENT AGREEMENT

DR. MADIA MOVED TO RATIFY THE PROPOSED STEP I CONSENT AGREEMENT WITH DR. SWEDA. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:

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. Madia	- aye
Dr. Steinbergh	- aye

The motion carried.

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GREGORY KARASIK, M.D. – CONSENT AGREEMENT

DR. KUMAR MOVED TO RATIFY THE PROPOSED CONSENT AGREEMENT WITH DR. KARASIK. DR. MADIA SECONDED THE MOTION.

Dr. Egner expressed concern over this consent agreement, and Dr. Steinbergh commented that it's on the edge.

Dr. Davidson asked whether the working relationship that existed prior to the sexual relationship made that better or less.

Ms. Pfeiffer advised that counsel for Dr. Karasik are also present.

Dr. Egner stated that she feels that this consent agreement is an intrusion into someone's life. Doctors marry nurses, give them prescriptions. The Board members might not like it. She stated that she hopes that there are a lot more details involved in the negotiation of this agreement than what is presented to the Board today.

A vote was taken on Dr. Kumar's motion to ratify the proposed consent agreement.:

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

The motion carried.

PERSONAL APPEARANCES

MICHAEL S. GAINEY, M.D.

Although scheduled to appear, Dr. Gainey was not present.

DAVID C. HANES, D.O.

Dr. Hanes appeared before the Board pursuant to his request for release from the terms of his October 10, 2001 Consent Agreement.

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In response to Board members' questions, Dr. Hanes stated that everything is going well for him. He is currently employed as a hospitalist in Nina, Wisconsin. He works in two hospitals. He works seven days on and seven days off, with two call nights in two weeks. He works roughly 12 hours a day, seven days in a row, and then two nights on his off week.

Dr. Hanes stated that this has been a long process, and he thinks that it has made him a better person overall. He stated that his life was out of control, long before he got into trouble. He had some Board time off, and had some good groundwork. Dr. Hanes stated that it was one of the hardest things he's ever had to do. He commented that he's worked very hard to sit in front of this Board today. He added that it was a light at the end of the tunnel that he didn't think was going to come, but he just kept trying to go forward and go through every step he needed to go through. His recovery has really been without a hitch. It was hard, but he just didn't drink. Today those thoughts pop in his head every now and then, when he's tired, but he just ignores them and they pass.

Dr. Hanes continued that his wife stayed with him through this, and they have a new child. He has a home, a job, and a lot of things that sobriety has given him. There are some hurdles in the road, but he kind of goes through them and not around them anymore. He thinks it's made him a better person.

Dr. Hanes stated that he continues to do the things he did from day one. He's not as involved in A.A. as he was, attending meetings two to three times a week, and he does chair meetings. He mixes up his meetings with some newcomer meetings and some old-timer meetings. In the beginning he went to ten to twelve meetings a week, because that's where he needed to be. He wants to attend because they're reminders of what could happen again. He'll stay in touch with some physicians who have gone through the same thing. He doesn't plan to change anything in his recovery program, except doing urine screens every other week. He plans to stay active in meetings and stay in touch with his sponsors and everyone he's met through this journey, and continue going on. It's part of his life now. He has had the opportunity to intervene and help someone else twice. He was able to give them some advice about their approach to licensure issues and direct them. He stated that it was kind of nice to have that experience. Once he's released, he will be on a wellness committee at the hospital for physicians who have troubles such as he has had.

Dr. Robbins stated that Dr. Hanes' work schedule is interesting, with seven days, twelve hours a day on duty and then seven days off. He stated that, in a hospital, that's a very stressful situation.

Dr. Hanes stated that it is stressful. Up until February he was taking extra calls and participating in some ICU coverage. In February they had their first child, and he gets five days in a row to spend with his daughter. He noted that his work schedule has changed his meeting schedule a little bit. His concern when he first started was that he'd have too much free time. He talked with his sponsor about that. Dr. Hanes stated that there isn't a huge amount of patients to be seen. It's usually about twelve to fifteen patients a day. He's been doing this for almost two years, and it's going well. He's enjoying it.

DR. BUCHAN MOVED TO RELEASE DR. HANES FROM THE TERMS OF HIS OCTOBER 10, 2001 CONSENT AGREEMENT, UPON RECEIPT OF DOCUMENTATION FROM HIS SUPERVISING PHYSICIAN. MR. BROWNING SECONDED THE MOTION. A vote was taken:

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Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

TRACIE LYNNE BOLDEN, M.D.

Dr. Bolden made her initial appearance before the Board, pursuant to the terms of her April 12, 2006 Consent Agreement.

In response to Board members' questions, Dr. Bolden stated that she's doing well. She stated that she's in a family practice residency. Every fourth day she's on call. She stated that she lives in Dayton, but her residency is at Bethesda North in Cincinnati, Ohio. She's just finishing her first year of residency. She's currently taking Wellbutrin, 150 mg once a day. She's not having any problems sleeping at night. She does feel that she's in control. She sees her psychiatrist, Dr. Robert Lubow, about every two weeks. They work mainly around Dr. Lubow's schedule.

Dr. Steinbergh asked whether there are any significant issues that she discusses with Dr. Lubow, or would she say it's a chronic depression.

Dr. Bolden stated that it never was a chronic depression to begin with. It was more about what was going on with her life at that moment. She's married to a recovering alcoholic, who wasn't in recovery at the time she began sessions. Now her husband does his A.A. Meetings, she goes to Al-Anon, and she does her meetings with Dr. Lubow. She also has two children. She is not taking any mood-altering substances. She stated that there is an alcoholic in the house, so alcohol isn't an option.

Dr. Bolden stated that she understands the terms of her consent agreement. She added that her residency program is taking a more active role.

DR. VARYANI MOVED TO CONTINUE DR. BOLDEN UNDER THE TERMS OF HER APRIL 12, 2006 CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

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

The motion carried.

MICHAEL E. DONAHUE, L.M.T.

Ms. Donahue made her initial appearance before the Board, pursuant to the terms of her July 12, 2006 Consent Agreement.

In response to Board members' questions, Ms. Donahue stated that she is not really working in the field. She hasn't found stable employment. She commented that she just recently entered into the agreement, and has just recently been able to look for work. She's been doing some volunteer work at a hospice-type of situation with another LMT in Cincinnati. She's looking for a more stable position in doing massage therapy. While doing that, she's working in a restaurant, and she has a small business that she runs at home, which is an antique mall directory.

Ms. Donahue stated that she goes to A.A., and she just celebrated two years of continued sobriety on September 8. She was doing meetings before the agreement, and she's still doing the three required per the consent agreement. She's also starting to find a way to have an addiction program available to people in her church. Ms. Donahue stated that she has been involved from the beginning in starting a church on the west side of Cincinnati for the underprivileged area. There are a lot of those types of problems there, so she's trying to help set up something that will be available to the community there. Both of the girls she was sponsoring have relapsed and are no longer in the program. She still talks to newcomers and makes herself available. She's not sponsoring anyone at this time, but she still sees her sponsor and meets with her for breakfast or lunch on a weekly basis.

When asked what keeps her sober, Ms. Donahue stated that she's made it through the tough stuff. Although the reality of a relapse is there, at this point it's also about just being happy and being accountable and living by the principles set forth in the program. Trying to help others would probably be about at the top of the list. She's still monitored, but for her it's more about having a quality life. As you spend more time in sobriety, the present danger of taking a drink becomes less and less when you are still working the program. That's not to say that she doesn't think she's ever going to relapse. It's just that the hard part of not drinking has kind of passed.

Ms. Donahue stated that she doesn't have contact with anyone with whom she used to have contact. She's pretty much cut herself off. She has a woman's group she goes to every week. All of her friends now are

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pretty much from her church. There are a lot of young people that go to her church. She and her husband have also started a twenty-something ministry there. They plan events and things like that to get people connected. She stays involved in that kind of thing and that helps her relationship with people now.

Dr. Egner asked how old Ms. Donahue was in 1999 when she had her problem in North Carolina.

Ms. Donahue stated that she thinks she had just turned 20. She turned 20 in February, and the incident happened in May.

DR. STEINBERGH MOVED TO APPROVE CONSUELA R. ALLEY, M.D., TO SERVE AS MS. DONAHUE'S SUPERVISING PHYSICIAN. DR. STEINBERGH FURTHER MOVED TO CONTINUE MS. DONAHUE UNDER THE TERMS OF HER JULY 12, 2006 CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. MADIA SECONDED THE MOTION.

In response to further questions, Ms. Donahue stated that, when the people she sponsored relapsed, she felt very, very sad. It feels like you offer someone a gift with a big red bow and they refuse to reach out and take it. It's a reminder of where she came from and where she could still go. Ms. Donahue commented that most people don't get it.

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

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye
	Dr. Robbins	- aye

The motion carried.

JEFFREY NAGY FADEL, M.D.

Dr. Fadel made his initial appearance before the Board, pursuant to the terms of his June 14, 2006 Consent Agreement.

In response to Board members' questions, Dr. Fadel stated that he became addicted to hydrocodone after he came off an arthritis medicine and started to self-treat. He was arrested for doing that, so he has legal consequences that he's still in the process of trying to resolve. He was writing fake prescriptions for

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hydrocodone for family members and for himself to maintain his addiction. Through the Kentucky Physician Health Foundation, he has been in a twelve-step program for the last 18 months. He's had, he feels, a well-received program so far. He's presently not working, although he does a healthy occupational therapy business in southern Indiana as a promoter. He's in the process of developing a wellness program for that program, so he does have income coming in. What he is specifically doing is going from business to business as a promoter, as a retired physician. He had to check with the Kentucky State Board before he started that, and they said it was fine, as long as he wasn't practicing medicine.

Dr. Fadel stated that he currently takes Lexapro, 10 mg qd. He also takes Ibuprofen for his arthritic knee and Propacet occasionally, but that's it.

Dr. Fadel stated that he got burned out and he was doing more surgery than his knee could have handled. He thought he could self-medicate himself. That's how he got into trouble. Fundamentally, now, since he's not standing on his knee during surgical procedures, he does pretty well. As far as treatment goes now, he's going through conservative management, and it seems to be working out really well. If he could afford it, he'd just retire. Dr. Fadel stated that his plan is to practice orthopaedic medicine, but he can't do surgery. He explained that, with his obsessive compulsive nature, if he tries to go back into surgery, he'll probably go down the wrong path. Although he enjoys doing surgery, he just physically can't do it. It affected him physically, and it therefore affected him mentally, and he feels it would be a disservice to his patients. He could handle office work. Dr. Fadel stated that he has to be involved somewhere.

When asked, Dr. Fadel stated that he doesn't have any questions for the Board; that he does understand the terms of his Consent Agreement. He added that he's just trying to do the right thing, get through it and move on.

DR. KUMAR MOVED TO APPROVE THE KENTUCKY PHYSICIAN HEALTH FOUNDATION [PHF], TO SERVE AS DR. FADEL'S SUPERVISING "PHYSICIAN." DR. KUMAR FURTHER MOVED TO CONTINUE DR. FADEL UNDER THE TERMS OF HIS JUNE 14, 2006 CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

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PUTTAGUNTA RANGA, M.D.

Dr. Ranga made his initial appearance before the Board, pursuant to the terms of his July 12, 2006 Consent Agreement.

In response to Board members' questions, Dr. Ranga stated that he's doing pretty well. He understands the terms of his Consent Agreement, and he talked with Mr. Katko about it at the time he signed the Agreement. He asked questions at that time, and since then Ms. Bickers has been helpful. If he has a question, he contacts her.

Dr. Ranga stated that he's not taking any medicine. He's undergoing psychotherapy for his bipolar disorder. He sees Richard A. Nockowitz, M.D., a neuropsychiatrist, who does psychotherapy for him and makes all psychiatric decisions about using medication or not. Neither Dr. Nockowitz nor his predecessor, Douglas Beech, M.D. suggested medications. Dr. Nockowitz told him that he has seen medication lead to mania in some people. Instead Dr. Nockowitz is going to monitor him, and if he sees that Dr. Ranga is going through a period of mania, he might order medication.

Dr. Ranga stated that it's his ambition to keep his Ohio license. He will do his current practice for the next two years, if the State Medical Board permits. He will then write a book on Yoga. He does practice eight hours a week in the office, and he will get his hospital privileges back because his partner, who is also his monitoring physician, doesn't feel comfortable covering for him at the hospital in addition to being monitoring physician. Dr. Ranga stated that he has nominated another physician to monitor his practice. He stated that there aren't that many who practice cardiology and internal medicine and acute care for 25 years. He will change his monitoring physician for that reason.

Dr. Kumar asked Dr. Ranga what events triggered the identification of his mental disorder.

Dr. Ranga stated that he wrote hieroglyphic language in the charts. The second allegation was that he did change a physical therapy order given by another physician for someone who was not his patient. He did show yoga to patients in his practice because he felt it was important to help them stand. He stated that he didn't remember changing an order for another physician's patient.

Dr. Ranga admitted that he should not have written the chart notes in hieroglyphics, because peer physicians should be able to read that. Just because he can interpret them doesn't mean other physicians can. Dr. Ranga stated that he did want to retire at some point, but after he thought about it, after going to India, he decided that he did miss the hospital. He stated that it's pretty hard to retire when he's ready, to some extent, to practice. Dr. Ranga stated that he thinks that his way of thinking went beyond the routine peers. Showing yoga is not accepted by AMA, it is not an evidence-based approach. He plans to practice one week in November and one week in December, go on vacation, and when he comes back in March he will practice one week out of three.

Dr. Kumar stated that one thing that surprised him is that Dr. Ranga is a cardiologist, and he asked why Dr. Ranga would change the physical therapy order of somebody else.

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Dr. Ranga stated that he doesn't remember doing that, but if he did it, he was wrong. The thing is that he's not trying to disturb the treatment of other physicians, but he did show yoga, too. He did cardiac rehab for his routine recommendations. Dr. Ranga stated that he thinks, basically, it was from his culture.

Dr. Varyani stated that Dr. Ranga is not practicing homeopathic medicine, but allopathic medicine here. He is certified to practice allopathic medicine. Yoga is not allopathic; however, there are a lot of schools of thought saying that it benefits. The best thing to do is to give himself a separate time and separate office, or stay in the same office and say that he's going to practice X, Y and Z medicine, and he can do that. Dr. Varyani stated that Dr. Ranga did write an order for the patient of another physician, although he doesn't remember doing that, but that's not kosher either. Dr. Varyani stated that you can combine allopathic with homeopathic medicine and with other medicine, as long as he does it in his office for his patients.

DR. KUMAR MOVED TO CONTINUE DR. RANGA UNDER THE TERMS OF HIS JULY 12, 2006 CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

JON P. RYAN, D.O.

Dr. Ryan made his initial appearance before the Board, pursuant to the terms of his July 12, 2006 Consent Agreement.

In response to Board members' questions, Dr. Ryan stated that he first had a problem with drugs and alcohol when he was 18. He went through recovery and was actually in recovery for twelve years. During the recovery time he did go to medical school and training. He was not working a program during medical school, but he did not do any drinking during medical school. He started drinking immediately prior to his internship. He went into internal medicine and rheumatology and during that time of training he was drinking for the first three years. He stated that he was really "controlled" at that time because he was in his internship and residency. It wasn't an issue. The program was not aware of his problem, nor were any of his colleagues. No one came to talk to him about his performance or had any questions.

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Dr. Ryan stated that he started taking Tramadol because he had knee pain. He ended up getting Vicodin and started taking that from there. The Vicodin was prescribed by another physician at an urgent care facility. From there it just got out of control. He started utilizing samples of Tramadol, and that eventually led into a physical dependence and his use escalated over the two years, to the point that he was brought in by the Board. In terms of his practice, he is now out of his fellowship and has been in practice for one year. Dr. Ryan commented that he's been in hell for the last year or two. He was fading away from his wife and his family. Since getting clean and being in recovery, it's like coming back home. He feels like he's actually a part of life now, part of his family. He's there for them, and they're there for him.

Dr. Ryan stated that, currently, his license is suspended and he's not working. He takes his children four days out of the week. He also attends two meetings on a daily basis. He meets with his sponsor regularly, at least once a week, and he talks to his sponsor on the phone numerous times during the week. Dr. Ryan stated that he is also involved in an aftercare program in Xenia, Ohio through Green Hall. He is supervised by O.P.E.P. Dr. Ryan stated that he does think he's progressing, although this is new, so his progress has been a 90 degree curve at this point. He stated that he's doing the things necessary to progress.

Dr. Egner asked whether Dr. Ryan, when he returns to practice, will be exposed to medical students and residents.

Dr. Ryan stated that he probably won't be initially, but when he gets a broader base he will.

Dr. Egner asked him whether he would feel comfortable telling them his story.

Dr. Ryan stated that he would. He added that he quit going to meetings because of the stigma of being an addict. He didn't want that background. He made the wrong choice. He stated that he might be a little uncomfortable sharing his background with others, but he would welcome the opportunity to do so.

Dr. Egner stated that these problems occur so much earlier than most people realize. From a medical student's standpoint and a resident's standpoint, to see a guy like Dr. Ryan who can tell his story, he might hit home with somebody who needs some help and doesn't know what to do.

Dr. Steinbergh stated that Ohio University College of Medicine does a professionalism course, and she goes there once a year to talk about these issues. She asked whether he's met anyone at the College.

Dr. Ryan stated that he has friends who went there.

Dr. Steinbergh stated that some day when he is well into his healing process, he might consider talking with her there. She agrees with Dr. Egner that Dr. Ryan is young enough that students and residents will see him as someone real, and he will sometimes hit home more than Board members can. There's always going to be someone in the audience with this problem. She stated that the Board hopes that Dr. Ryan will be a model for other young people.

Dr. Ryan stated that he hopes he will be, too.

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DR. STEINBERGH MOVED TO CONTINUE DR. RYAN UNDER THE TERMS OF HIS JULY 12, 2006 CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. KUMAR SECONDED THE MOTION. A vote was taken:

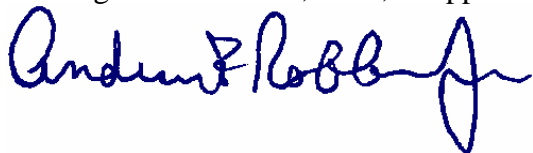
Vote:	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Varyani	- aye
	Dr. Buchan	- aye
	Dr. Kumar	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Davidson	- aye
	Dr. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

DR. EGNER MOVED TO ADJOURN. MS. SLOAN SECONDED THE MOTION. All members voted aye. The motion carried.

Thereupon at 4:18 p.m. the October 11, 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 October 11, 2006, as approved on November 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

October 12, 2006

Andrew F. Robbins, Jr., M.D., President, called the meeting to order at 8:07 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; Lance A. Talmage, M.D., Secretary; 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.; Dalsukh Madia, M.D.; and Anita M. Steinbergh, D.O. The following joined the meeting at a later time: Carol L. Egner, M.D.

Also present were: Richard A. Whitehouse, Executive Director; Diann K. Thompson, Assistant Executive Director; William J. Schmidt, Staff Attorney, Enforcement, Compliance & Investigations; Rebecca J. Marshall, Chief Enforcement Attorney; Angela Scott and Daniel S. Zinsmaster, Enforcement Attorneys; Damion M. Clifford, Kyle Wilcox and Barbara J. Pfeiffer, Assistant Attorneys General; Eileen M. Schmidt, Executive Assistant to the Director; Joan K. Wehrle, Executive Staff Coordinator; Michael K. Miller, Public Policy & Government Affairs Officer; Danielle Bickers, Compliance Supervisor; Jean Gillman, Compliance Officer; and Barbara Jacobs, Public Services Administrator.

PRESENTATION ON OHIO AUTOMATED Rx REPORTING SYSTEM BY DANNA E DROZ, RPH, JD, PMP ADMINISTRATOR, OHIO STATE BOARD OF PHARMACY

At this time Ms. Droz made a presentation, with the use of slides, regarding Section 4729.75, Ohio Revised Code, Ohio's Automated Rx Reporting System. Copies of the slides used in the presentation shall be maintained in the exhibits section of this Journal.

Dr. Egner arrived during the presentation. Mr. Albert left the meeting following the presentation.

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 asked for a separate discussion on the probationary requests of Todd Gilbert Gottschalk, D.O., and David P. Spears, D.O.

DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES ON SEPTEMBER 11-12, 2006 WITH: DAVID E. ALLEN, M.D.; ROBERT L. BRANDT, JR., M.D.; FRANK R. BRUENING, M.D.; ALLAN W. CLARK, M.D.; BOYD

D. CURTIS, M.D.; MILES E. DRAKE, JR., M.D.; LYNNE A. EATON, M.D.; RYAN STEVEN FRYMAN, D.O.; WALTER L. GEORGE, M.D.; LYON L. GLEICH, M.D.; TAMMY M. HABERBERGER, D.O.; W. ANDREW HIGHBERGER, M.D.; DONALD C. MANN, M.D.; GREGORY S. MASIMORE, M.D.; MARK MCALLISTER, M.D.; JUAN C. MEJIA, M.D.; FRANCINE R. MOSLEY, M.D.; WILLIAM O. MURTAGH, JR., M.D.; CARLA M. MYERS, D.O.; THOMAS A. NGUYEN, M.D.; ERDULFO P. PAAT, M.D.; CHARLES CHRISTIAN RICKEY, P.A.; KENT ROBINSON, M.D.; STEPHEN J. ROLFE, M.D.; CHRISTOPHER S. SHAW, M.D.; MARIE T. SHEDLOCK, P.A.; RICHARD S. SKOBLAR, M.D.; MATTHEW ALLAN SNYDER, L.M.T.; BRIAN D. SOUTHERN, M.D.; DAVID E. SUBLER, M.D.; ROBERT R. SUMMERS, D.O.; BRUCE S. WORRELL, D.O.; JAMES F. ZIMMERMAN, D.P.M.; AND RICHARD A. ZINNI, D.O.; DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES AND THE SECRETARY AND SUPERVISING MEMBER'S RECOMMENDATIONS AS FOLLOWS:

- **ASHFAQ TAJ AHMED, M.D.'S REQUEST FOR APPROVAL OF THE ETHICS COURSE TAILORED FOR HIM BY JOY D. SKEEL, M.DIV;**
- **DAVID C. BLOCKER, M.D.'S REQUEST FOR APPROVAL OF ROBIN E. OSBORN, D.O., TO SERVE AS BOTH HIS REVIEWING CERTIFIED RADIOLOGIST AND MONITORING PHYSICIAN, WITH 10 CHARTS REVIEWED PER WEEK, AND HIS PROPOSED PRACTICE PLAN TO DO LOCUM TENENS WORK, PRIMARILY FOR MEDICAL DOCTOR ASSOCIATES;**
- **MICHAEL B. BURGHARDT, M.D.'S REQUEST TO REDUCE HIS DRUG SCREEN REQUIREMENT TO TWICE PER MONTH;**
- **ANTHONY E. DANIACHEW, M.D.'S PROPOSED PRACTICE PLAN WITH WEATHERBY LOCUMS FOR CBL PATH, A COMMERCIAL PATHOLOGY LABORATORY;**
- **DIXIE A. DOOLEY, D.P.M.'S REQUEST FOR APPROVAL OF KEVIN F. SUNSHEIN, D.P.M., TO SERVE AS THE MONITORING PHYSICIAN, WITH 10 CHARTS REVIEWED PER MONTH;**
- **JANICE ELECTA GREEN DOUGLAS, M.D.'S REQUEST FOR APPROVAL OF PHILLIP L. BORDERS, M.D., TO SERVE AS THE ASSESSING PSYCHIATRIST;**
- **GREGORY G. DUMA, M.D.'S REQUEST FOR APPROVAL OF THE KENTUCKY PHYSICIANS HEALTH FOUNDATION [PHF], TO SERVE AS THE SUPERVISING "PHYSICIAN";**
- **SUSAN M. HATFIELD, P.A.'S REQUEST FOR RELEASE FROM THE TERMS OF THE DECEMBER 13, 2000 CONSENT AGREEMENT;**

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- **TO APPROVE MELANIE LYNNE LEU, M.D.'S REQUEST TO CHANGE HER MONITORING PHYSICIAN FROM RITA DEATTREA BECKFORD, M.D., AND JASON M. WHITE, D.O., TO ROBERT H. ATKINS, D.O.;**
- **TO APPROVE ASHOK V. PADHIAR, M.D.'S REQUESTS TO LIFT HIS WORK-HOUR RESTRICTION, AND TO DISCONTINUE THE REQUIREMENT THAT HE MAINTAIN A LOG OF CONTROLLED SUBSTANCES;**
- **PAUL E. PANCOAST, M.D.'S REQUEST TO CHANGE HIS MONITORING PHYSICIAN FROM STANLEY K. DORST, M.D., TO JEFFREY L. BELDEN, M.D.;**
- **WILLIAM C. STEVENSON, M.D.'S REQUEST FOR APPROVAL OF DAVID D. GOLDBERG, D.O., TO SERVE AS HIS MONITORING PHYSICIAN, WITH 10 CHARTS REVIEWED PER MONTH, AND APPROVAL TO CHANGE THE SUPERVISING PHYSICIAN FROM MICHAEL S. GOLDSTONE, M.D., TO DAVID D. GOLDBERG, D.O.;**
- **TO APPROVE DEBORAH L. TAYLOR, M.D.'S REQUEST TO CHANGE HER TREATING PSYCHIATRIST FROM MARK A. HURST, M.D., TO REBECCA A. WARE, M.D.;**
- **TO APPROVE GARY W. WALTZ, M.D.'S MODIFIED PRACTICE PLAN TO CONTINUE TO WORK FOR THE OHIO DEPARTMENT OF HEALTH, NORTHCOAST BEHAVIORAL HEALTHCARE, HIS WORK INCLUDING PARTIAL UNIT COVERAGE AND ASSERTIVE COMMUNITY TREATMENT. ALL OF THE DOCTOR'S WORK WITH NORTHCOAST BEHAVIORAL HEALTHCARE WILL CONTINUE TO BE SUPERVISED BY HIS MONITORING PHYSICIAN.**

DR. STEINBERGH FURTHER MOVED TO GRANT JODY SHORT, D.O.'S REQUEST FOR APPROVAL OF EDNA JONES, M.D., TO SERVE AS ASSESSOR FOR PURPOSES OF PERFORMING THE CHEMICAL DEPENDENCY ASSESSMENT REQUIRED FOR REINSTATEMENT PURSUANT TO PARAGRAPH 10.B.IV OF HIS MAY 10, 2006 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", AND THE ACUPUNCTURIST APPLICANTS LISTED IN EXHIBIT "C." MS. SLOAN SECONDED THE MOTION. A vote was taken:

Vote:	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. Madia	- aye
Dr. Steinbergh	- aye

The motion carried.

Todd Gilbert Gottschalk, D.O.

Dr. Steinbergh stated that, in the matter of Dr. Gottschalk, the agenda didn't contain a letter from his psychotherapist in regard to Dr. Gottschalk's request. She noted that the Secretary and Supervising Member recommend reducing Dr. Gottschalk's psychotherapy sessions to two per month for six months and once a month thereafter. She stated that she discussed this with Ms. Bickers who provided her with a copy of a letter from the psychotherapist, who advised that she believes that Dr. Gottschalk has met the stated goals, and who recommends granting Dr. Gottschalk's request. The psychotherapist advises that Dr. Gottschalk has a good relationship with her, and they've discussed using psychotherapy on an "as-needed" basis.

Ms. Bickers advised that Mr. Albert was the one who reviewed this request, and he noted that Dr. Gottschalk is not required to make Board appearances. The psychotherapy sessions are the only monitoring in place for Dr. Gottschalk. The Board does receive detailed quarterly reports from his psychotherapist.

Dr. Davidson stated that going from sessions once a week to nothing is a fairly dramatic change in this person's oversight.

Dr. Talmage stated that when they get letters from psychiatrists saying that they only need to see the physician every three or six months, he and Mr. Albert feel uncomfortable recommending that drastic a change. He stated that he thinks a gradual withdrawal would be appropriate.

DR. STEINBERGH MOVED TO APPROVE DR. GOTTSCHALK'S REQUEST TO MODIFY TODD GILBERT GOTTSCHALK, D.O.'S PSYCHOTHERAPY REQUIREMENT TO TWO SESSIONS A MONTH FOR SIX MONTHS, AND ONE SESSION A MONTH THEREAFTER, IF APPROPRIATE. DR. MADIA SECONDED THE MOTION. A vote was taken:

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

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Dr. Davidson - aye
Dr. Madia - aye
Dr. Steinbergh - aye

The motion carried.

David P. Spears, D.O.

Dr. Steinbergh stated that Dr. Spears is in a family practice residency. He currently works 44 hours a week and has requested permission to increase his work hours to 80 hours a week. Dr. Steinbergh commented that this is an impairment case, and she feels 80 hours a week is excessive for someone with his problem.

Dr. Egner stated that Dr. Spears is not new to the Board. He'll have been under probation with the Board two years this coming January. She stated that he's a resident and an 80-hour work week is normal for a resident. Dr. Egner stated that she understands Dr. Steinbergh's concerns, but the Board is asking the residency program to be that much more flexible, asking his co-residents to pick up the slack where the Board won't let him work.

Dr. Steinbergh stated that the extra work would be working in the emergency department, which is not part of his residency program; although the program director does recommend the additional work to give him experience in the emergency room and to allow for some transition.

Dr. Egner stated that the Secretary and Supervising Member are in support of the request if the additional work does not exceed the 80-hour a week residency limitation.

Dr. Talmage stated that the 80 hours is moonlighting plus residency. If the residency program only requires him to work 60 hours, he can work another 20.

Dr. Kumar stated that he would have an issue if the extra hours are for moonlighting.

Dr. Talmage stated that a lot of residencies approve moonlighting activities. The residents get additional experience, which is considered beneficial to the resident education. They do get paid for it separately from the residency.

Dr. Steinbergh stated that Dr. Spears does state in his letter to the Board that all of his work will remain within the parameters of his residency training facility. He also advises that the work shifts will not interfere with his recovery program.

Dr. Varyani stated that he feels it is appropriate, as long as it doesn't interfere with his residency.

DR. MADIA MOVED TO APPROVE DAVID P. SPEARS, D.O.'S REQUEST TO WORK OUTSIDE OF THE OSTEOPATHIC RESIDENCY PROGRAM, AS LONG AS THE ADDITIONAL WORK DOES NOT EXCEED THE 80 HOUR WEEK RESIDENCY LIMITATION. DR. DAVIDSON SECONDED THE MOTION. A vote was taken:

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Vote:	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. Madia	- aye
	Dr. Steinbergh	- nay

The motion carried.

REINSTATEMENT REQUESTS

KEVIN R. CLARK, M.D.

At this time the Board considered the report of office conference with Dr. Clark, as well as Dr. Clark's request to discontinue the practice plan requirement of his September 13, 2000 Consent Agreement. The Secretary and Supervising Member made no recommendation concerning this request.

DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORT OF CONFERENCE ON SEPTEMBER 12, 2006. SHE FURTHER MOVED TO GRANT DR. CLARK'S REQUEST TO DISCONTINUE THE PRACTICE PLAN REQUIREMENT.

Dr. Steinbergh stated that Dr. Clark has advised that he is having trouble finding work because of the practice plan. Dr. Clark has advised that he has eight and a half years of uninterrupted recovery and more than five and three quarters years under the Consent Agreement. Dr. Steinbergh stated that she did discuss this request with Mr. Albert, who indicated that he has no difficulty in granting this request; he simply didn't have a recommendation for the Board. Mr. Albert indicated that he wasn't convinced that a prospective employer would hold a practice plan requirement against a physician.

Ms. Bickers stated that it depends on the physician and how he or she presents their consent agreement to the employer. Mr. Albert wasn't totally convinced that the practice plan would be a hurdle, but it is. Any kind of restriction can be a hurdle for a physician to get employment.

Dr. Steinbergh stated that she thought in this case, because of his years, it would be appropriate for the Board to do this for Dr. Clark.

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

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

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

The motion carried.

ADMINISTRATIVE REPORT

Mr. Whitehouse at this time reviewed his written report, a copy of which shall be maintained in the exhibits section of this journal. He noted that, since the composition of his report, Investigator Peter Vitucci has announced that he will be retiring in January 2007. Mr. Whitehouse stated that the staff is also in the process of selecting individuals to interview for the three positions in the Standards Review and Intervention Unit.

Mr. Whitehouse stated that the Board has submitted its budget request. The request seeks an increase in the Board's appropriation authority to allow the Board to absorb the salary increases and moving costs to the Rhodes Tower. Mr. Whitehouse stated that he has every expectation that the Board will be successful, noting that it's a conservative request. The Board does have the support of OBM.

Mr. Whitehouse referred to the portion of his report discussing the Trusted Agent Platform (TAP) project. He asked Ms. Thompson to report on this topic.

Ms. Thompson stated that she and Ms. Rieve went to OSU, where eight residents signed up to try the new online application. Of the eight residents, four were able to go directly to the application portion, while the other four went through the F.C.V.S. process. She stated that all seemed to make the same mistakes, so she and Ms. Rieve reported to the Federation on that problem. The system is still being tested at OSU.

Mr. Whitehouse stated that Ms. Thompson and Ms. Rieve have done a lot of work on this project, and they are doing a tremendous job. Mr. Whitehouse stated that he feels that the test was a qualified success.

Mr. Whitehouse stated that he arrived late to the previous day's meeting because, at Dr. Robbins' request, he attended the first meeting of the Ohio Board of Regent's Physician Supply and Demand Consultation, which was formed to discuss a number of issues basically dealing with assessment of health care and availability of practitioners in Ohio, and some discussion of what the solutions may be. He stated that this project will aid the Board in being able to put together information that will be helpful in making that assessment. The Consultation is made up of representatives of the Ohio Senate, the medical schools, the Ohio Hospital Association, and a number of regulatory boards. Mr. Whitehouse stated that he advised that the Medical Board would be interested in assisting the Consultation with some baseline information. There was discussion about the time it would take and what may be involved, and it may involve some statutory

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change and the creation of rules that would allow the Board to collect data. Mr. Whitehouse added that, initially, this group will have to rely upon information in the AMA database.

Mr. Whitehouse stated that Board members should have already received a copy of the audit report. He noted that the auditor did not find any material noncompliance or any reportable conditions. One finding they did make regarded reconciliations. The Board has not reconciled accounts since as far back as 2004. They are suggesting that all Boards and Commissions do reconciliations.

Dr. Egner asked, if it hasn't reconciled the books on a continuing basis, how the Board knows that it's \$400,000 in revenues over what the Board thought it had.

Mr. Whitehouse stated that OBM told the Board it was. He stated that the Auditor had commented that he wouldn't even mention the problem if the variance was 5% or below. The Executive Committee felt that the Board should be a little more aggressive. He stated that the reconciliations will be incorporated as part of the fiscal reports in the future.

PRESIDENT'S REPORT

Dr. Robbins at this time thanked those who were involved in preparing for the September retreat. He stated that he felt that it went very well.

REPORTS OF ASSIGNED COMMITTEES

IMPAIRMENT COMMITTEE

Mr. Miller advised that the Committee reviewed draft rules that will now be sent to the PAPC for comment as to how they affect the practice of physician assistants. The Committee itself did not recommend any changes to the draft rules.

LICENSURE COMMITTEE

Dr. Robbins advised that the Committee reviewed a number of licensure matters for recommendation to the Board.

Kate Adkins, M.D.

Dr. Robbins advised that Dr. Adkins has requested special accommodations under the Americans with Disabilities Act of 1990 (ADA) for Step 3 of the U.S.M.L.E. Dr. Adkins has been diagnosed with Ocular Motor Dysfunction and Suppression of the Binoc Vision. Dr. Robbins stated that the Committee recommends granting Dr. Adkins' request.

DR. ROBBINS MOVED TO GRANT DR. ADKINS REQUEST FOR THE SPECIAL ACCOMMODATION OF EXTRA TIME OF TIME AND A HALF FOR U.S.M.L.E. STEP 3. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

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Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

Irina A. Gendler, M.D.

Dr. Robbins advised that Dr. Gendler has applied for a full license, and is requesting a waiver of the U.S.M.L.E. seven-year rule. Dr. Gendler entered the Dayton Community Practice residency in June 2003 and graduated in June 2006. She is over the seven-year time limit by six months. He noted that she passed Steps 1 and 3, each on the third attempt with scores of 78 and 86. She passed Step 2 on the second attempt with a score of 75. Dr. Robbins noted that, had Dr. Gendler passed Step 3 in either of her first two attempts, she would have passed within the seven-year limit. The Committee felt that there was no good reason why a waiver should be granted, and it recommends denial.

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

Dr. Kumar noted that Dr. Gendler indicates that she had a rough pregnancy and her father died of pancreatic cancer. In the past, the Board has granted exemptions for health reasons. He noted that Dr. Gendler did not fail any step more than three times. Dr. Kumar stated that he believes granting the waiver is justifiable in this case.

Dr. Robbins stated that he believes that one or two of the Committee members felt the same way, but he didn't. Dr. Robbins stated that he still feels that, had Dr. Gendler passed the first two times she took Step 3, she would have been eligible. The only reason Dr. Gendler didn't make the deadline is because she didn't pass the exam the first two times. The Committee voted to deny.

Dr. Davidson stated that when the Committee looked at the time frame, anything that was conceivably a health issue wasn't contemporaneous with her not succeeding in the exam sequence.

Dr. Kumar stated that he didn't consider the time sequence. If the sequence was such that she should have succeeded, he would agree with the Committee.

Dr. Steinbergh stated that Dr. Gendler says that it was in 2000 that she had the difficult pregnancy. At the

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same time her father was ill. She attempted and failed in October 2004, October 2005 and passed in April 2006.

Dr. Talmage stated that Dr. Gendler can actually go back and take Step 1 again, and bring herself within the seven years.

Mr. Browning stated that there is a rule limitation that is obvious, and the Board is for holding standards. He continued that this physician just finished a residency in Ohio that, from all the information the Board has, she completed successfully. She just finished it this summer. Mr. Browning stated that he's for public protection and standards, but he has no idea what the Board is going to get out of forcing her to go back around when she just finished a residency. Mr. Browning stated that he understands that residencies have a variety of different goals, but competency should be one of them. Mr. Browning stated that, with that in mind, he was in favor of approving Dr. Gendler's request. The health issues are, to him, secondary.

Dr. Buchan stated that the Board hasn't felt that the seven-year timeline was that severe. This physician does not meet the Board's rules.

A vote was taken on Dr. Robbins motion to deny:

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

The motion carried.

Dr. Davidson advised that the Committee has asked Mr. Miller to place the seven-year rule on a future agenda for discussion. She stated that the Committee needs to re-evaluate the rule.

Dr. Varyani commented that most of the Group 1 time is taken up with discussion on this issue.

Raymond M. Hsu, M.D.

Dr. Robbins advised that Dr. Hsu is requesting a waiver of the seven-year rule. In this situation, Dr. Hsu interrupted his medical school training to complete a master's degree. He passed all three steps on the first attempt, with scores of 96, 96 and 95. He completed a transitional internship at the University of Hawaii from June 1998 through June 1999, then entered the Diagnostic Radiology program at Johns Hopkins

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Hospital in July 1999. He completed five years at that residency program, and then transferred to Stanford University and completed an Abdominal Imaging fellowship in June of 2004. Dr. Robbins advised that the Committee recommends granting the waiver.

DR. ROBBINS MOVED TO APPROVE DR. HSU'S REQUEST FOR A WAIVER OF THE SEVEN-YEAR RULE, AND TO GRANT HIM A LICENSE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

Nazih Iskander, M.D.

Dr. Robbins stated that Dr. Iskander is also requesting a waiver of the seven-year rule. Dr. Iskander is over the 7-year time limit by 14 months. He passed Steps 1 and 2 on the first attempt with scores of 79 and 77, and passed Step 3 on the third attempt with a score of 80. Dr. Iskander graduated from the University of Asyut in Asyut, Egypt in February 1987. Dr. Iskander practiced in Egypt until March 1996, when he immigrated to the United States. Dr. Iskander completed a transitional internship at St. Francis Medical Center in Pittsburgh, and then entered a Physical Medicine and Rehabilitation residency at Mercy Hospital in Pittsburgh from July 2001 through November 2004. He then completed a Physical Medicine/pain fellowship at the Cleveland Clinic from December 2004 through November 2005. Dr. Iskander is currently practicing in Pennsylvania, where he holds an unrestricted license. Dr. Robbins stated that he had initially recommended denial of Dr. Iskander's request; however, at the time of the Committee meeting, the Committee was informed that Dr. Iskander had recently become board certified in Physical Medicine and Rehabilitation. Dr. Robbins stated that, because of Dr. Iskander's recent Board certification, the Committee recommends that the Board approve Dr. Iskander's request.

Dr. Davidson stated that the Board's overall decision has been that if a physician didn't pass the exam sequence, to find some surrogate marker of competency.

Dr. Kumar expressed concern about finding different standards at different times for different cases.

Dr. Davidson stated that the Committee is trying to be consistent. She believes each member weighs the

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different elements.

Dr. Kumar stated that when the rules were initially written, they were more designed for health issues or someone involved in a Ph.D. program. The rule wasn't designed for this type of exception. He stated that he will vote to deny the application.

DR. ROBBINS MOVED TO GRANT DR. ISKANDER'S REQUEST FOR A WAIVER OF THE SEVEN-YEAR RULE AND TO GRANT HIM A LICENSE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS. DR. EGNER SECONDED THE MOTION.

Dr. Buchan stated that he continues to look for good cause for not completing the examination within the seven years, and he doesn't see it in this case.

A vote was taken:

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

The motion carried.

Dr. Steinbergh stated that she doesn't feel that the Board has been fair in this. She stated that the Board either has to follow its rule and grant an exception for exceptional reasons only, or grant it for everyone.

Dr. Robbins stated that in his mind, had Dr. Gendler recently become Board certified, he would have supported granting her a waiver.

Dr. Egner noted that the rule doesn't say anything about board certification.

Dr. Davidson stated that she thinks that the Board is allowed to grant an exemption for good cause. She thinks that the Board is interpreting its consideration of an exemption to be something else that says that they're qualified. She stated that she thinks board certification is that something, but she doesn't feel graduating from a residency is.

Dr. Buchan stated that the Board had strayed a long way from the notion of "good cause," which suggests

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why they did not complete the examination sequence in seven years. The Board has strayed so far off that mark, and now the Board is discussing competency. He stated that the Board can't discuss competency in this; it's not in the Board's rule. He questioned making board certification or high scores on the test a standard. The Board is discussing good cause for why they didn't complete the test in an appropriate period of time. He agreed with Dr. Steinbergh that this current decision is unfair.

Mr. Browning stated that this is the Board's rule, and the Board isn't for its own rule in the sense of its being rigidly enforced. He stated that the Board should change the rule.

Dr. Talmage asked whether the Board is being consistent with the rest of the country.

Mr. Whitehouse stated that he thinks that the Federation has been talking about a "three strikes and your out" response.

Ms. Thompson stated that, if the Board is going to go to just exam attempt limits, the U.S.M.L.E. is suggesting six; but they had to admit that the standard across the country is three failed attempts before the applicant is sent off for more education. They haven't talked about the time limit; although seven years is very common, and the combination of seven years and no more than three attempts is very common.

Dr. Talmage asked whether that is changing in other states.

Ms. Thompson stated that it's not as far as she's seen.

Mr. Browning stated that the other states probably do what this Board does. They give themselves the power to override their rule.

Ms. Thompson stated that the idea of the exam sequence being completed within seven years is from the idea that these aren't three separate examinations. This is one examination in three parts. The examiners are still saying that; they're still saying something along the lines of seven years. The Board's original rule was seven years, and if a candidate hasn't completed the sequence in seven years, he or she must do it over.

Mr. Whitehouse stated that that speaks to what some might think is a draconian application of the seven-year rule, that it has to be within seven years because it is one exam. But it's not an expression or evaluation of competence.

Dr. Steinbergh stated that it is one exam that examines the information they got in that period of time. She questioned the concept that someone will take Step 1 again to complete the sequence within seven years because that Step 1 the person then takes is different from the one they took before.

Dr. Robbins stated that he has talked with a number of people at the Federation meeting, and their states are having the same problems Ohio is having. He commented that it would be easier if the Board just didn't grant any exemptions, although he doesn't know how humane that is.

Mr. Browning stated that he doesn't agree with the concept that it is one test. He feels that it was set up to

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be three related but separate tests, taken over years. Everyone knows that, unless you started all over again and studied for it, you would not pass step 1 years later. A few people would, but the vast majority would not.

Mr. Browning continued that he wouldn't be surprised to learn that the seven-year time limit came out of doctoral training. You start a doctoral program and have to complete the dissertation and all of the training within seven years. It goes to the coherence of the education. You're moving through a practice. It doesn't become so protracted that it's fragmented, and you really never got the body of knowledge that you needed. He stated that he thinks that that's the basic logic of this.

Dr. Varyani commented that he thinks passing Step 3 is more of an indication of being a good physician than passing the other two steps.

Following further discussion on points previously made, the Board recommended that the Committee look at this rule again.

Mr. Browning left the meeting during the previous discussion.

Francesco Lupis, M.D.

Dr. Robbins advised that Dr. Lupis is a graduate of a school that is not L.C.M.E. accredited. Dr. Lupis completed an internship at North Shore University in Manhasset, New York in June of 2002. He then entered an Anesthesiology residency at SUNY Stony Brook University in July of 2002. He remained in this program until June of 2004, but only obtained 6 months PGY credit at that institution. Dr. Lupis then changed specialties and entered the Family practice program at Flower Hospital in Toledo in June of 2005. He has completed one year in that program, and will complete his second year in June of 2007. Dr. Lupis is requesting that the Board deem his training and experience at North Shore (PGY I), SUNY at Stony Brook (6 months of PGY 2) and Flower Hospital (currently in PGY 2 year) to be equivalent to 24 months of graduate medical education through the second-year level of GME so that he may be granted a license. Dr. Robbins stated that the Committee recommends denying Dr. Lupis' request.

DR. ROBBINS MOVED TO DENY DR. LUPIS' REQUEST. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

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

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The motion carried.

Kathleen Pajer, M.D.

Dr. Robbins advised that Dr. Pajer has not been engaged in the active practice of medicine since 2003.

DR. ROBBINS MOVED TO GRANT DR. PAJER A LICENSE TO PRACTICE MEDICINE AND SURGERY, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS, AND CONTINGENT UPON HER PASSING THE SPEX OR HER BOARD CERTIFICATION EXAMINATION.

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

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

The motion carried.

PRESCRIBING COMMITTEE

Mr. Miller advised that the Drug Enforcement Administration (DEA) is seeking comment on a policy statement and a proposed rule regarding the issuance of multiple prescriptions. Under the DEA's proposed rule change, the "Do Not Fill Until..." provision would allow physicians to write three separate prescriptions with staggered fill dates so patients can be given the equivalent of a 90-day prescription for schedule II controlled substances when medically appropriate. The proposed rule addresses concerns voiced by medical boards and others regarding the DEA's 2004 interim policy statement on issuance of multiple Schedule II prescriptions.

Dr. Kumar stated that when the DEA published their rule initially, it was clearly a problem for patient care. The change will really help.

Dr. Steinbergh agreed, noting that it will be particularly helpful for children with ADHD, where you're continuing the patients for periods of time. It will present a problem for physicians who do not wish to write for 90-days worth of controlled substances. Patients will pressure the doctor to do so.

There were no adverse comments made by Board members regarding this change.

Mr. Browning returned during the previous discussion.

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QUALITY ASSURANCE COMMITTEE

Dr. Egner stated that, although the Committee did not meet the previous day, she did talk with Mr. Whitehouse about getting the Committee more statistics on the Board's complaints.

Dr. Egner at this time referred to the Hearing Unit's report, stating that she likes the way the cases are separated by Hearing Examiner. She noted that there are a number of cases assigned to Mr. McNeil, yet it is her understanding that Mr. McNeil will be leaving at the end of December. She expressed concern that he will be doing the hearings and someone else would be writing the Reports and Recommendations.

Mr. Whitehouse stated that it is hoped that there will be a statutory change that will allow Mr. McNeil to return to work for the Board. He noted that Mr. McNeil is currently working under contract, and that contract period is winding down.

Dr. Egner expressed concern about Mr. McNeil's work, stating that his reports are really hard to follow.

Other Board members agreed with Dr. Egner.

Mr. Whitehouse stated that he will take the Board's concerns to the Hearing Unit.

LIMITED BRANCH & ALTERNATIVE MEDICINE COMMITTEE

Dr. Buchan stated that the Committee reviewed applications for certificates of good standing from three schools, and recommends approving all three.

MR. BROWNING MOVED TO GRANT CERTIFICATES OF GOOD STANDING TO THE FOLLOWING SCHOOLS: THE COLORADO INSTITUTE OF MASSAGE THERAPY; THE WESTERN INSTITUTE OF NEUROMUSCULAR THERAPY (WIN); AND THE CORTIVA INSTITUTE-MUSCULAR THERAPY INSTITUTE. DR. KUMAR SECONDED THE MOTION.

A vote was taken:

Vote:	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. Madia	- aye
	Dr. Steinbergh	- aye

The motion carried.

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MINIMAL STANDARDS OF CARE COMMITTEE

Dr. Kumar stated that the proposed sexual misconduct rules were sent to JCARR, and no objections were filed. The rules will be coming to the full Board for approval in November.

Dr. Kumar stated that the Committee also reviewed a draft response to a letter from T.J. Redington, M.D., Senior Vice President and Chief Financial Officer of Community Mercy Health Partners in Springfield concerning reimbursement to radiologists who review the lung portion of CT scans ordered by cardiologists. Copies of both Dr. Redington's letter and the draft response approved by the Committee will be contained in the exhibits section of this journal.

**DR. BUCHAN MOVED TO SEND THE LETTER OF RESPONSE TO DR. REDINGTON.
DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

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

The motion carried.

P.A. COMMITTEE

Dr. Talmage stated that the Committee modified the Addendum to the Physician Assistant Supervision Agreement Application to add signature lines to the back of the sheet so that large groups can efficiently sign and return the form.

Knox Cardiology

Dr. Talmage advised that the Committee also reviewed Knox Cardiology's request for approval of an amendment to their special services plan (formerly "supplemental utilization plan") for noninvasive cardiovascular studies to reflect 70% onsite supervision, 29% direct supervision and 1% offsite supervision. He stated that both the P.A.P.C. and the P.A. Committee recommend denial.

Dr. Davidson left the meeting during Dr. Talmage's statements.

DR. BUCHAN MOVED TO DENY KNOX CARDIOLOGY'S REQUEST TO AMEND ITS

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SPECIAL SERVICES PLAN. MR. BROWNING SECONDED THE MOTION. A vote was taken:

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

The motion carried.

Dr. Talmage stated that the P.A. rules were also discussed, modifications will be made and they will be discussed again by the Committee in November, with the aim that they will be brought to the full Board for discussion in December.

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

Thereupon at 10:07 a.m. on October 12, 2006, the October 11-12, 2006 meeting of the State Medical Board of Ohio was duly adjourned.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio, meeting on October 11-12, 2006, as approved on November 8, 2006.



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



Lance A. Talmage, M.D., Secretary

(SEAL)

