

June 11, 2008

MINUTES

THE STATE MEDICAL BOARD OF OHIO

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Nandlal Varyani, M.D., President, called the meeting to order at 1:00 p.m., in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes State Office Tower, 30 E. Broad St., Columbus, Ohio 43215, with the following members present: Dalsukh Madia, M.D., Vice-President; Lance A. Talmage, M.D., Secretary; Raymond J. Albert, Supervising Member; Carol L. Egner, M.D.; Marchelle L. Suppan, D.P.M.; R. Gregory Browning, Ph.D.; W. Frank Hairston; Jack C. Amato, M.D.; Susan E. Stephens, M.D.; and Anita M. Steinbergh, D.O.

Also present were: Richard A. Whitehouse, Executive Director; Kimberly C. Anderson, Assistant Executive Director; Rebecca J. Marshall, Chief Enforcement Attorney; Mark R. Blackmer, David P. Katko, Angela S. McNair, Karen H. Mortland, Marcie P. Pastrick, Cheryl D. Pokorny, Sheldon Safko and Daniel S. Zinsmaster, Enforcement Attorneys; Barbara J. Pfeiffer and Karen A. Unver, 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; Karry Thacker, Executive Staff Assistant; Danielle Bickers, Compliance Supervisor; Jean Gillman, Compliance Officer; Barbara Jacobs, Public Services Administrator; Jacqueline A. Moore, Disciplinary Information Assistant.

EXECUTIVE SESSION

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

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye

The motion carried.

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

The following joined the meeting after the executive session: Gretchen Petrucci, Hearing Examiner.

PROPOSED FINDINGS AND PROPOSED ORDERS

Dr. Varyani announced that the Board would now consider the Reports and Recommendations, and Proposed Findings and Proposed Order appearing on its agenda. He asked whether each member of the Board had received, read and considered the hearing record; the findings of fact, conclusions of law and proposed orders; and any objections filed in the matters of Wilfred Louis Anderson, M.D.; Richard Luboga Byakika, M.D.; George Jakymenko, M.D.; and Gregory S. Uhl, M.D.; and the Proposed Findings and Proposed Order in the matter of Brian Matthew Gease. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

Dr. Varyani asked whether each member of the Board understands that the disciplinary guidelines do not limit any sanction to be imposed, and that the range of sanctions available in each matter runs from dismissal to permanent revocation. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

Dr. Varyani noted that, in accordance with the provision in Section 4731.22(F)(2), Revised Code,

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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. In the matters before the Board today, Dr. Talmage served as Secretary and Mr. Albert served as Supervising Member.

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

WILFRED LOUIS ANDERSON, M.D.

Dr. Varyani directed the Board's attention to the matter of Wilfred Louis Anderson, M.D. He advised that no objections were filed to Hearing Examiner Davidson's Report and Recommendation.

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

Ms. Jacobs advised that the Board received a letter from Dr. Anderson's attorney, indicating that he and Dr. Anderson would not be here today, and that they did not wish to make a personal appearance before the Board.

Dr. Varyani asked whether Ms. Pfeiffer wished to address the Board on this matter.

Ms. Pfeiffer advised that this case involves an application for license that Dr. Anderson submitted following the permanent revocation of his license many years ago. Ms. Pfeiffer explained that the courts have held that the permanent revocation at the time was really not permanent because of the statutory language. The Board now has the statutory authority to permanently revoke, but in 1998 the courts ruled that Dr. Anderson is permitted to reapply. Ms. Pfeiffer stated that the Board can consider its prior action against Dr. Anderson.

Ms. Pfeiffer stated that the underlying conduct of Dr. Anderson that was at issue in this prior case was not an isolated incident of sexual misconduct. Dr. Anderson freely admitted to the Board's investigators the following statement, "everyone knows I don't charge patients I have sex with." At the hearing, Dr. Anderson basically exhibited no remorse, and, at best, a poor acknowledgment of the wrongfulness of his conduct. In the current application pending before the Board, he wrote the following in his explanation to the Board about his prior disciplinary action and his prior criminal conviction: "I pleaded guilty, even though I was innocent of any crime. I understand that consensual sex with a patient is wrong." Ms. Pfeiffer stated that what she finds difficult to reconcile is the statement that he made to the Board in his application with the fact that he pled guilty to the criminal offense of attempted gross sexual imposition. Inherent in his guilty plea and his subsequent conviction is a lack of consent between the doctor and the patient in this particular criminal action.

Ms. Pfeiffer continued that, even according to Dr. Anderson's own admissions regarding what happened in this matter, he indicated that Patient 1 had come into his office, kind of distraught, she thought she might

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be pregnant, found out she was pregnant and became even more distraught. According to Dr. Anderson, he felt he had no choice but to take this woman home with him, she was that distraught. Ms. Pfeiffer stated that she thinks that, in his words, he stated, "there were no other options, so I took her home." He took her home, stopped and bought a bottle of champagne, and went to his house. At some point, she performed a little sex on him, according to his version of events, and he then went to get a pizza, they shared the pizza, and then he took her home. That was Dr. Anderson's version of what happened.

Ms. Pfeiffer stated that Patient 1 has a different version. Patient 1 advised that he had given her some type of pill at his office, took her home, she passed out, and then she woke up with him on top of her and she was naked.

Ms. Pfeiffer stated that Dr. Anderson's conduct was not limited to one patient. Dr. Anderson admitted to making offensive, inappropriate remarks to his female patients. He admitted repeatedly on several occasions that, when he was conducting a vaginal exam of a woman, he would put the speculum in and ask the woman, "Does this feel good?" Most of the time the woman would say, "No," and then his follow-up comment would be, "I bet you like it when your boyfriend does it," or "I bet you like it when your husband does it." Ms. Pfeiffer stated that this is completely inappropriate. Ms. Pfeiffer stated that Dr. Anderson also freely admitted that he would tell his female patients, as they were dressing, "I don't like to see put your clothes on, I like to see you take them off." Ms. Pfeiffer stated that, again, this remark is inappropriate.

Ms. Pfeiffer stated that, at hearing, Dr. Anderson didn't seem to really understand the true wrongfulness of his conduct. He denies he was guilty of the offense to which he pled guilty. Ms. Pfeiffer stated that Dr. Anderson's conduct was reprehensible, predatory in nature. He's shown no remorse to his patients, particularly Patient 1, who was extremely vulnerable and of whom he took advantage.

Ms. Pfeiffer stated that she agrees wholeheartedly with the Hearing Examiner's conclusion that there was no convincing evidence that Dr. Anderson has experienced a change or development in his ethical standards or moral character since the time he committed the violations described in the 1998 Order. Ms. Pfeiffer encouraged the Board to consider the sanction of permanent denial in this case.

DR. MADIA MOVED TO APPROVE AND CONFIRM MS. DAVIDSON'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER IN THE MATTER OF WILFRED LOUIS ANDERSON, M.D. DR. AMATO SECONDED THE MOTION.

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

Dr. Steinbergh stated that the case of Dr. Anderson was discussed fully in 1998. At that time, the Board permanently revoked his license. This was, in fact, a very egregious case of ethical violations, sexual boundaries and so forth. Dr. Steinbergh stated that, because of the fact that the court held that at the time the Board didn't have authority to permanently revoke and that some revocations are subject to reinstatement, Dr. Anderson did reapply.

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Dr. Steinbergh stated that the case before the Board today, from the April 21, 2008 hearing, has not changed her mind at all. She again stated that this was an enormously egregious case. Dr. Anderson pled guilty to a misdemeanor that involved moral turpitude in practice. He demonstrated a lack of good moral character. Dr. Steinbergh stated that there was no compelling evidence that would provide her with any thoughts other than to permanently deny Dr. Anderson's licensure application. Dr. Steinbergh stated that she concurs with the Proposed Order of permanent denial.

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

RICHARD LUBOGA BYAKIKA, M.D.

Dr. Varyani directed the Board's attention to the matter of Richard Luboga Byakika, M.D. He advised that no objections were filed to Hearing Examiner Petrucci's Report and Recommendation.

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

Dr. Byakika was accompanied by his attorney, Kevin P. Byers. Mr. Byers stated that there were no written objections filed to this case, but he would like to highlight a couple of things for the Board and then Dr. Byakika would address the Board.

Mr. Byers stated they're here today about a March 2004 training certificate application upon which Dr. Byakika made two errors. He did not respond properly on two questions. Dr. Byakika acknowledged that at hearing and tried to explain what his thinking was, or his lack of thinking. He essentially said that he didn't pay attention and that it was a sloppy mistake. Mr. Byers stated that that training certificate expired in June 2007. He noted that the training certificate is now non-existent. Mr. Byers stated that he's not trying to convince the Board that it doesn't have jurisdiction to do anything, but simply to point out that Dr. Byakika is not a licensee in the State of Ohio; instead, he is now practicing in the State of North Carolina.

Mr. Byers referred to page nine of the Report and Recommendation, noting that the Hearing Examiner found a pattern of deception or non-disclosure because Dr. Byakika stated that he thought he may have not told others about his misdemeanor convictions in Colorado, including the residency program he went to in Canton, Ohio. Mr. Byers stated that that also could imply that Dr. Byakika did misunderstand his history and he was consistent. Had he told others about it and then came to Ohio and said, "You know, this is probably going to be problematic and I want a license and I won't tell Ohio," that would be a clear indication of a conscious deception, a conscious effort to not disclose. Mr. Byers stated that he's not sure that the Hearing Examiner's conclusion that not telling anybody about it is proof that he decided to deceive Ohio. Mr. Byers stated that he supposes that the Hearing Examiner felt that it was a pattern and he decided to keep up the pattern of non-disclosure. That's for this Board to decide, given the record and what it can discern from that.

Mr. Byers stated that he thinks that this Board has certainly fulfilled its duty to the public simply by going through this process. He again noted that at issue is a non-existent temporary training certificate. Mr. Byers stated that his concern is that Dr. Byakika is fully licensed in North Carolina, where he fully disclosed. Dr. Byakika went through evaluations for that hospital and for the state licensing board there, so they all know about his history. Mr. Byers expressed concern over what would happen to Dr. Byakika's North Carolina license should the Board adopt an Order that revokes his training certificate. He also expressed concern over how that would impact Dr. Byakika in all future licensure actions. Dr. Byakika is a young physician, just starting his career. Mr. Byers stated that Dr. Byakika understands that he has an obligation in the future to tell everyone about this; it's been a wonderful learning experience, one he'll never forget.

Mr. Byers stated that the Board can do anything under the allegations in the citation letter, including entering an order of reprimand. He stated that the Board could render some other penalty that doesn't look as harsh as a revocation. Mr. Byers asked that the Board use some compassion, reason and understanding with Dr. Byakika, given where he's at in his career.

Dr. Byakika stated that throughout all of this, there was no real intent to deceive or hide anything. He's learned a good lesson from what has happened and, since then, he's been disclosing all of his history to anybody who asks. Dr. Byakika stated that he thinks that he's made amends. He asked that the Board see it that way. He stated that he does have children in Ohio so in the future there may be plans for him to come back to Ohio and practice here. He would like to keep a clean record, if that is possible. Dr. Byakika again stated that he did not intend to deceive anybody with his training certificate application.

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

Ms. Pfeiffer stated that this was Mr. Wilcox's case. She noted that Mr. Wilcox is not present, but has indicated that he has no comments to make to the Board.

DR. EGNER MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER IN THE MATTER OF RICHARD LUBOGA BYAKIKA, M.D. DR. STEINBERGH SECONDED THE MOTION.

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

Dr. Egner stated that Dr. Byakika's training certificate was granted in 2004. It is now 2008. Since that period of time, Dr. Byakika has completed his residency program and he now practices in North Carolina. He disclosed to North Carolina the issue in question here. She stated that, if she's not mistaken, she believes that North Carolina still requires a personal interview.

Dr. Byakika indicated that he didn't have to undergo a personal interview for his North Carolina license.

Dr. Egner continued that Dr. Byakika was assessed by the North Carolina Physician Health Program and they found no evidence of impairment. She added that she believes that the North Carolina program has been around for some time, and is a reliable source for this Board to use.

Dr. Egner stated that, as far as she's concerned, the Board has waited too long in this case. These issues have been before the Board before. She stated that, when it comes to training certificates, she holds the Board responsible for a more timely action. She added that, unfortunately, this Board failed. She feels that North Carolina did the work to get the answers that this Board needed.

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

Dr. Egner stated that anyone filling out an application should read the questions carefully. She doesn't believe that Dr. Byakika will make this mistake again. She doesn't know of anything that this Board needs to do today to help him learn that lesson more. Dr. Egner stated that she does think that a revocation has far reaching effects for him that this Board doesn't really need to do.

DR. STEINBERGH SECONDED THE MOTION.

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

Dr. Stephens agreed with Dr. Egner, stating that, if the Board's about anything, it's about pointing out people's faults and their breaches with the Board. This physician was punished, he learned a lesson, he made amends, he's corrected his mistakes and he's gone on to be successful. She stated that that's what this Board should be about.

Dr. Amato also concurred with that. He stated that a reprimand certainly seems to be in order. He noted that North Carolina picked up the ball that Ohio, perhaps, dropped. Dr. Byakika poses no threat to the public. A revocation of his training certificate is something else for him to report, that could, down the road, cost Ohio a physician it can surely use, especially in the rural parts of this state. Dr. Amato indicated that that would be an unintended consequence of an action that goes far beyond this Board exercising its authority. Dr. Amato commended Dr. Egner for jumping on the ball quickly and recommending the reprimand, which he will support.

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Dr. Steinbergh stated that, although she agrees with the reprimand, she does have a question about the Board's ability to do that. She stated that it's clear that Dr. Byakika did misrepresent himself and he did, in fact, fraudulently apply for that certificate. That's something important the Board must remember. She referred to the Conclusions of Law in the Report and Recommendation, noting that the Hearing Examiner stated, "(i)n a decision by the Franklin County Court of Common Pleas interpreting this statute, the Court held that, when the Board finds a violation of Section 4731.22(A), Ohio Revised Code, the Board may only "revoke or * * * refuse to grant a certificate." Dr. Steinbergh stated that that appears to be the range of penalties available to the Board. It does not include a fine, probation, suspension or stayed revocation. She asked whether a reprimand is something that this Board can do, as applied to this certificate.

Ms. Marshall noted that the Board also cited Dr. Byakika under Section 4731.22(B)(5), Ohio Revised Code, which gives the Board the full range of discipline.

Dr. Steinbergh stated that, in light of that statement, she does support the reprimand, but she does feel that it's important for this physician to understand that this was fraud on his application and that that is absolutely unacceptable.

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER, AS AMENDED, IN THE MATTER OF RICHARD LUBOGA BYAKIKA, M.D. DR. VARYANI SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye

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Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

GEORGE JAKYMENKO, M.D.

Dr. Varyani directed the Board's attention to the matter of George Jakymenko, M.D. He advised that no objections were filed to Hearing Examiner Petrucci's Report and Recommendation.

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

Dr. Jakymenko was accompanied by his attorney, Elizabeth Y. Collis. Ms. Collis stated that Dr. Jakymenko has a statement he would like to make. She advised that they did not file objections, based upon the fact that the Hearing Examiner has accurately outlined the facts and the details in this case. Ms. Collis stated that they would ask, based on the fact that this does not involve patients, patient care or anything having to do with Dr. Jakymenko's medical practice, that a 90-day suspension not be imposed at this point and that the Board allow him to continue to practice medicine. She stated that the Board may impose some restrictions or some requirements before he would be able to return to practice; however, they ask that he not be required to have a practice plan or monitor put in place, based on the fact that this matter does not involve patient care.

Dr. Jakymenko thanked the Board for its time and consideration of his case. He stated that he practiced medicine in Canton, Ohio for 21 years as a family practice physician in a small private office. He was an approved provider under AultCare and the PrimeTime healthcare programs. He was well liked in the medical community by his colleagues and by his patients.

Dr. Jakymenko stated that he's a good physician and he would like to continue to practice medicine for many years; however, by 2004, with the changes in the economy, he found it more and more difficult to make ends meet in a small private practice. AultCare and Aultman Hospital had imposed caps on how much he was reimbursed for the work he did, but his overhead expenses continued to rise. In 2004, he received one DUI after being out with friends one evening and having too much to drink. He stated that he has never had a drinking problem; this was a one-night aberration. Dr. Jakymenko stated that he completed all the requirements of the Court for the DUI, and additional treatment was not recommended for him.

Dr. Jakymenko stated that in 2006, when he completed his Medical Board renewal application, he also disclosed this DUI to the Board. Finally, in October 2006 he was unable to afford his malpractice

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insurance. He therefore lost his hospital privileges at Aultman Hospital, and he was removed from the AultCare and PrimeTime provider panels. Dr. Jakymenko stated that the removal was financially devastating. He was forced to close his medical practice in 2006. He subsequently lost his condominium, which was foreclosed on by the bank, and his car, which was repossessed by the lender. By 2007, he also fell behind in paying his taxes, so the federal government put a lien on his office property. He stated that in the past year he's had numerous creditors who have called his office and come to his home. He stated that it was a hard time for him, and, unfortunately, instead of dealing with his problems head on, he buried his head in the sand. He often did not open his mail, answer his phone or open the door because he was tired of being hounded by creditors.

Dr. Jakymenko stated that he does remember receiving a telephone call from someone who claimed to be a Medical Board investigator; but, based on all the creditor calls that he was receiving, he was suspicious and he did not call that individual back. He added that he also remembers receiving some paperwork from the Board, that he did not return. He does not remember investigators from the Medical Board coming to his home, but he did not intentionally try to avoid the Board. He also does not remember receiving a subpoena from the Board, and he never tried to not cooperate with the Board. Dr. Jakymenko stated that, since he was not working during this time period, there were many weeks when he would go to Cleveland to visit family or friends for weeks at a time. He stated that he now understands that by failing to respond to the creditors and the Medical Board, he was just making matters worse for himself. However, without a job and without the finances to support many of his bills, he did not know what to do.

Dr. Jakymenko stated that he knows that the only way to help himself at this point is to face his problems. He knows that he's a good physician, but he's not a good businessman. If the Board allows him to keep his license, he would like to seek employment as a hospitalist or a locum tenens physician. He will seek work as a physician where he can just be a doctor and not have to be responsible for dealing with the business side of medicine. At this point, he has not practiced medicine for almost two years. He asked that this Board not suspend his license but to allow him to continue to practice as soon as he completes the personal ethics course recommended by the Hearing Examiner. Dr. Jakymenko stated that there's no way for him to get back on his feet financially if he can't work. He stated that now he's ready, willing and able to work and he would respectfully request that the Board not impose an additional 90-day suspension on his license and not require that his practice be supervised by a monitoring physician, since he's never had a problem with patient care and his work as a physician is not at issue in this case.

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

Ms. Pfeiffer stated that this was also Mr. Wilcox's case, and there would be no response.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER IN THE MATTER OF GEORGE JAKYMENKO, M.D. DR. EGNER SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye

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Dr. Talmage	- abstain
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

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

Dr. Egner stated that Dr. Jakymenko has some real red flags here. His life just fell apart for various and, for the Board, unknown reasons. She added that she wishes that the medical students from Ohio University were here today because Dr. Jakymenko presents an example of what can happen from a simple DUI. She stated that she doesn't believe that the DUI was the cause of the domino effect that happened in his life, and she's not certain what the cause was, but it is what brought him to the Board's attention. Dr. Egner stated that she thinks that Dr. Jakymenko needs to be here, and that he does need some supervision.

Dr. Egner continued that she thinks that Dr. Jakymenko should also be evaluated by a psychiatrist prior to resuming practice. She noted that Dr. Jakymenko was board-certified in internal medicine and he let that certification lapse in 2005. She stated that it is very unusual for internists to let board certification lapse. She added that to see the progression of losing his malpractice insurance, losing his office, losing his car, not paying taxes, it is glaring that something very serious was going on with Dr. Jakymenko. In all that period of time, he didn't even fill out an application for a locum tenens job or seek any other type of employment to try to get himself out of this financial nightmare. Dr. Egner stated that that is one of the reasons she feels he should have a psychiatric evaluation, to make sure that he is not suffering from severe depression or some other issue that could impair his life and his practice.

Dr. Egner stated that to say that Dr. Jakymenko doesn't need to have a practice plan or a monitoring physician because these issues weren't related to his practice is not consistent with anything else the Board does. The Board has impaired physicians all the time who could make that same claim: "I didn't drink while practicing, it didn't affect how I treated patients." She stated that the Board's response to that is "yes it does, and we have a right to look at that." Dr. Egner stated that she feels the same way in this case.

Dr. Egner stated that she agrees with the Report and Recommendation. The suspension of 90 days to get his affairs in order, take the ethics course and come up with a practice plan is the right thing to do. Dr. Egner stated that Dr. Jakymenko should also be on probation with the Board for a couple of years so that the Board can monitor his progress.

Dr. Steinbergh concurred with adding the psychiatric evaluation as a condition for reinstatement. She

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stated that the Board has boilerplate language for that, which includes a requirement that the evaluating psychiatrist submit his or her report to the Board. Dr. Steinbergh stated that this case was significant in the fact that this physician used such poor judgment, and therefore she does agree with a psychiatric evaluation requirement.

Dr. Steinbergh stated that Dr. Jakymenko certainly experienced a lot of personal and professional crises; however, this does not excuse him from his professional and personal responsibilities to this Board. It's a privilege to practice medicine, not a right, and the Board upholds that kind of thought. Dr. Steinbergh stated that she appreciates all of the problems that Dr. Jakymenko had, but there is absolutely no excuse for his not responding to this Board on multiple occasions.

Dr. Steinbergh stated that Dr. Jakymenko hasn't practiced in almost two years and he let his internal medicine board-certification run out. She stated that she can't imagine that he'll be a hospitalist or a locum tenens without getting some type of certification again. Dr. Steinbergh stated that she doesn't feel that Dr. Jakymenko's goals are consistent with his ability to practice at this point. She added that she absolutely agrees with the practice plan requirement. There's no other way to monitor this physician who, in fact, has demonstrated such poor judgment.

Dr. Steinbergh stated that she agrees with the Conclusions of Law and the Proposed Order, except that she would add the psychiatric evaluation requirement.

Dr. Stephens disagreed. She stated that she's not surprised that Dr. Jakymenko let his internal medicine board-certification lapse. She stated that having witnessed people with financial difficulties that spiral, everything gets expensive and you have people calling you, coming to your house, things like that, and you don't open the mail. She stated that she's seen people have a houseful of mail that's never opened because they cannot face the mountain of issues coming their way. She stated that she would like to have some sympathy for this physician. She stated that she can see how things could escalate – malpractice insurance and internal medicine recertification are expensive and if you don't have the money, you continue to not have the money.

Dr. Amato stated that he definitely thinks that this is a practitioner who would benefit from psychiatric help at this point, if he has not already sought same. He's certainly been overwhelmed. Dr. Amato stated, however, that Dr. Jakymenko's biggest problem is financial. It seems that everything the Board has discovered in its investigation relates to financial issues. He stated that he's not sure about the proposed 90-day suspension. Dr. Amato stated that he hopes that the Board now has this practitioner's attention. He stated that the only way out of financial crisis is for Dr. Jakymenko to go to work. The Board will slow that down by another quarter of a year if it leaves the Proposed Order as it stands. Dr. Amato stated that he would like to see the suspension markedly reduced. Realistically, Dr. Jakymenko is in financial difficulties, and the Board is discussing the imposition of more financial hurdles, i.e., psychiatric evaluations and potential aftercare, by doing what it needs to do to protect the public.

Dr. Steinbergh stated that there are certain things that the Board can do. It could stay the suspension and require that he completes certain requirements within a certain period of time. He does, however, need

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some time to undergo the psychiatric evaluation and to present the Board with a practice plan. The Proposed Order could be amended to change the minimum suspension period to 30 days, but the bottom line is that whatever you put in place, he should not come back until he's done these things to get his license reinstated.

Dr. Amato stated that he would prefer a suspension period of not less than ten days, and also include conditions for reinstatement.

Dr. Steinbergh stated that all of these things take time to do before he can be reinstated, and then when he gets reinstated, he'll go into a probationary period. There are certain things the Board will want to do to make sure that he's appropriate to go back into practice. That's what the conditions for reinstatement mean. She stated that if Board members feel that it's not important to do those things before he's reinstated, then they can stay the suspension and put him into probationary status. Then the Board could require that he complete certain things within a certain period of time. She stated that if the Board is requiring a practice plan, he has to have one before he can practice.

Dr. Amato suggested changing the minimum suspension period from 90 days to 30 days. He stated that Dr. Jakymenko could potentially get all of the requirements completed and start to practice 30 days out.

Dr. Steinbergh agreed, but suggested that getting everything done that quickly would be difficult.

Dr. Amato stated that the way the Order currently reads, if Dr. Jakymenko gets everything done in 45 days, he still has to wait another 45 days for his license. He'd like to see the period of suspension lessened so that as soon as Dr. Jakymenko gets everything done that is needed to be done to protect the citizens of this state, he can immediately go to work.

Dr. Steinbergh suggested asking Dr. Egner whether she would accept Dr. Amato's suggestion as a friendly amendment to her amendment.

Ms. Marshall stated that the Board's citation of Dr. Jakymenko is based solely on Section 4731.22(B)(34), which is the failure to cooperate with a Board investigation. The Board does not have the legal authority to require a psychiatric evaluation, unless Dr. Jakymenko is willing to waive his rights under the Eastway case law that allows the Board to do that.

Dr. Steinbergh asked why "failure to cooperate" wouldn't demonstrate impairment of judgment.

Ms. Marshall stated that in the citation process, the Board has to make certain legal allegations. It did not make an allegation of any type of mental or physical illness. It only made the allegation that he did not cooperate.

Dr. Steinbergh stated that she would like to make a point for Dr. Stephens. She stated that Board members attempt to be sensitive to these issues, but to her it goes beyond the fact that he had creditors. Dr. Jakymenko does understand that he shouldn't have just not responded to people. At this point, her concern

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is one of personal judgment and making sure that he is appropriate to practice medicine.

Ms. Marshall stated that the Board could ask Ms. Collis whether Dr. Jakymenko would be willing to waive his rights under the Eastway case law.

Ms. Collis stated that she's willing to consult with Dr. Jakymenko and get back with the Board in a few minutes.

DR. VARYANI MOVED TO TABLE THE MATTER OF DR. JAKYMENKO. DR. EGNER SECONDED THE MOTION. All members voted aye. The motion carried.

When the matter was removed from the table by Dr. Varyani later in the meeting, Dr. Talmage was out of the room.

Ms. Pfeiffer advised that there is a parliamentary matter that needs to be addressed. She asked Ms. Schmidt to explain.

Ms. Schmidt advised that the Board earlier adopted the Hearing Examiner's Proposed Order. She stated that if the Board wished to amend that Order, a motion to reconsider the matter would be needed.

DR. STEINBERGH MOVED TO RECONSIDER THE MATTER OF GEORGE JAKYMENKO, M.D. DR. AMATO SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Ms. Pfeiffer stated that Ms. Collis has talked with Dr. Jakymenko and he is willing to acquiesce with the condition of a psychiatric evaluation, in the traditional manner of doing so, where he can propose names to the Board for the Board's approval.

Ms. Collis stated that Dr. Jakymenko does want some input by making some recommendations for an appropriate psychiatrist. She stated that she doesn't want the psychiatrist requirement to be something that will have to be formally approved by the full Board; rather, she would like it to be presented as he would a

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practice plan, to the Board's Secretary and Supervising Member for approval.

Dr. Egner stated that she has no problem with that personally, adding that the Board entrusts those decisions to the Secretary and Supervising Member all of the time.

Dr. Steinbergh asked Dr. Egner whether she will accept Dr. Amato's friendly amendment to shorten the minimum suspension period to 30 days.

Dr. Egner stated that she thinks that that's fine, but the reality is that Dr. Jakymenko has a lot to do in 30 days. If he can do it, that's fine. Dr. Egner asked what the Board's options are if the psychiatric evaluation indicates that Dr. Jakymenko needs ongoing psychiatric care.

Ms. Marshall suggested that the Board table the matter again to allow staff sufficient time to prepare an alternative order. She stated that the standard language would provide that anything recommended by the psychiatrist be followed by the physician. It depends on what the Board puts in its Order.

Dr. Egner stated that she thinks it's implied in the Board's concerns. The Board does want him to get back into practice and to be productive. However, she doesn't want just an evaluation. If the evaluation says that Dr. Jakymenko doesn't need treatment, that's fine. If the evaluation indicates that he does need treatment, the Board wants that to be followed through.

DR. STEINBERGH MOVED TO TABLE THE MATTER TO DEVELOP AN ALTERNATIVE ORDER.

Dr. Amato asked whether this is the sort of thing that could be ironed out between the doctor, his counsel and the Board's staff for later in this meeting. He stated that Dr. Jakymenko wants to get back to work.

Dr. Steinbergh stated that this will be done today.

DR. AMATO SECONDED THE MOTION. All members voted aye. The motion carried.

Ms. Marshall stated that Ms. Thompson generally writes the alternative orders, and she is not present today.

Ms. Collis stated that Dr. Jakymenko would like the matter to be concluded today, in order to make it possible for him to seek employment and have some sort of suspension completed by July.

Dr. Varyani stated that the Board will try to accomplish this today.

Dr. Egner suggested that someone from the Hearing Unit might be able to take care of this.

Later in the meeting, by motion made by Dr. Egner, seconded by Mr. Browning, and unanimously passed, the matter was again brought off the table. Dr. Talmage was present when the matter was removed from

the table.

Ms. Pfeiffer advised that Ms. Collis and Dr. Jakymenko have reviewed the proposed amended order and have agreed to its terms.

Dr. Egner thanked the Board staff, Ms. Collis and Dr. Jakymenko for being cooperative in this process. She stated that the proposal brings her to the point where she feels comfortable.

DR. EGNER MOVED TO AMEND THE PROPOSED ORDER IN THE MATTER OF GEORGE JAKYMENKO, M.D., BY SUBSTITUTING THE FOLLOWING:

It is hereby ORDERED that:

- A. **SUSPENSION OF CERTIFICATE:** The certificate of George Jakymenko, M.D., to practice medicine and surgery in the State of Ohio shall be SUSPENDED for an indefinite period of time, but not less than 30 days.
- B. **CONDITIONS FOR REINSTATEMENT OR RESTORATION:** The Board shall not consider reinstatement or restoration of Dr. Jakymenko's certificate to practice medicine and surgery until all of the following conditions have been met:
 1. **Application for Reinstatement or Restoration:** Dr. Jakymenko shall submit an application for reinstatement or restoration, accompanied by appropriate fees, if any.
 2. **Personal Ethics Course or Courses:** Before Dr. Jakymenko applies for reinstatement or restoration, or as otherwise determined by the Board, Dr. Jakymenko shall provide acceptable documentation of successful completion of a course or courses dealing with personal 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. Jakymenko submits the documentation of successful completion of the course or courses dealing with personal ethics, he shall also submit to the Board a written report describing the course(s), setting forth what he learned from the course(s), and identifying with specificity how he will apply what he has learned to his practice of medicine in the future.

3. **Psychiatric Assessment:** Prior to submitting his application for reinstatement or restoration, Dr. Jakymenko shall submit to the Board for its prior approval

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the name and curriculum vitae of one or more psychiatrists of Dr. Jakymenko's choice. The Board or its designated representative(s) will consider Dr. Jakymenko's proposed psychiatrist(s).

Upon approval by the Board or its designated representative(s), Dr. Jakymenko shall obtain from the approved psychiatrist an assessment of Dr. Jakymenko's current psychiatric status. The assessment shall take place no more than 30 days prior to the submission of Dr. Jakymenko's application for reinstatement or restoration, unless otherwise approved by the Board. Prior to the initial assessment, Dr. Jakymenko shall furnish the approved psychiatrist copies of the Board's Order, including the Summary of the Evidence, Findings of Fact, and Conclusions of Law, and any other documentation from the hearing record which the Board may deem appropriate or helpful to that psychiatrist.

Upon completion of the initial assessment, Dr. Jakymenko shall cause a written report to be submitted to the Board from the approved psychiatrist. The written report shall include:

- a. A detailed report of the evaluation of Dr. Jakymenko's current psychiatric status and condition;
- b. A detailed plan of recommended psychiatric treatment, if any, based upon the psychiatrist's informed assessment of Dr. Jakymenko's current needs;
- c. A statement regarding any recommended limitations upon his practice, and
- d. Any reports upon which the treatment recommendation is based, including reports of physical examination and psychological or other testing.

Should the Board-approved psychiatrist recommend psychiatric treatment, and upon approval by the Board, Dr. Jakymenko shall undergo and continue psychiatric treatment weekly or as otherwise directed by the Board. The sessions shall be in person and may not be conducted by telephone or other electronic means. Dr. Jakymenko shall comply with his psychiatric treatment plan, including taking medications as prescribed for his psychiatric disorder.

Dr. Jakymenko shall continue in psychiatric treatment until such time as the Board determines that no further treatment is necessary. To make this determination, the Board shall require reports from the approved treating psychiatrist. The psychiatric reports shall contain information describing Dr. Jakymenko's current treatment plan and any changes that have been

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made to the treatment plan since the prior report; Dr. Jakymenko's compliance with the treatment plan; Dr. Jakymenko's psychiatric status; Dr. Jakymenko's progress in treatment; and results of any laboratory studies that have been conducted since the prior report. Dr. Jakymenko 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. Jakymenko's quarterly declaration as set forth in paragraph C.4., below.

In addition, Dr. Jakymenko shall ensure that his treating psychiatrist immediately notifies the Board of Dr. Jakymenko's failure to comply with his psychiatric treatment plan and/or any determination that Dr. Jakymenko is unable to practice due to his psychiatric disorder.

In the event that the designated psychiatrist becomes unable or unwilling to serve in this capacity, Dr. Jakymenko must immediately so notify the Board in writing and make arrangements acceptable to the Board for another psychiatrist as soon as practicable. Dr. Jakymenko shall further ensure that the previously designated psychiatrist also notifies the Board directly of his or her inability to continue to serve and the reasons therefor.

4. **Practice Plan:** At the time that Dr. Jakymenko applies for reinstatement or restoration, or as otherwise determined by the Board, Dr. Jakymenko shall also 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. Jakymenko's activities will be directly supervised and overseen by a monitoring physician approved by the Board. Dr. Jakymenko shall obtain the Board's prior approval for any alteration to the practice plan approved pursuant to this Order.

At the time Dr. Jakymenko 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. Jakymenko and who is engaged in the same or similar practice specialty.

The monitoring physician shall monitor Dr. Jakymenko and his medical practice, and shall review Dr. Jakymenko'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

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monitoring of Dr. Jakymenko and his medical practice, and on the review of Dr. Jakymenko's patient charts. Dr. Jakymenko 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. Jakymenko's quarterly declaration.

In the event that the designated monitoring physician becomes unable or unwilling to serve in this capacity, Dr. Jakymenko must immediately so notify the Board in writing. In addition, Dr. Jakymenko shall make arrangements acceptable to the Board for another monitoring physician within 30 days after the previously designated monitoring physician becomes unable or unwilling to serve, unless otherwise determined by the Board. Furthermore, Dr. Jakymenko 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 therefor.

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

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

1. **Obey the Law:** Dr. Jakymenko shall obey all federal, state, and local laws, and all rules governing the practice of medicine and surgery in Ohio.
2. **Cooperate with the Board:** Dr. Jakymenko shall cooperate with requests and inquiries of the Board.
3. **Comply with Psychiatric Treatment Plan and Practice Plan:** Dr. Jakymenko shall practice in accordance with the psychiatric treatment plan as set forth in paragraph B.3., above, and the practice plan approved by the Board as set forth in paragraph B.4., above.
4. **Declarations of Compliance:** Dr. Jakymenko 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. Jakymenko's certificate is restored or reinstated, or as otherwise directed by

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the Board. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.

5. **Personal Appearances:** Dr. Jakymenko 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. Jakymenko's certificate is restored or reinstated, or as otherwise directed by the Board. Subsequent personal appearances must occur every six 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.
 6. **Modification of Terms:** Dr. Jakymenko shall not request modification of the terms, conditions, or limitations of probation for at least one year after imposition of these probationary terms, conditions, and limitations.
 7. **Noncompliance Will Not Reduce Probationary Period:** In the event Dr. Jakymenko 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.
 8. **Termination of Probation:** Upon successful completion of probation, as evidenced by a written release from the Board, Dr. Jakymenko's certificate will be fully restored.
- D. **REQUIRED REPORTING TO EMPLOYERS AND HOSPITALS:** Within 30 days of the effective date of this Order, or as otherwise determined by the Board, Dr. Jakymenko 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. Jakymenko 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. Jakymenko receives from the Board written notification of his successful completion of probation.
- E. **REQUIRED REPORTING TO OTHER STATE LICENSING AUTHORITIES:** Within 30 days of the effective date of this Order, or as otherwise determined by the Board, Dr. Jakymenko 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.

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Dr. Jakymenko 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 or restoration of any professional license. Further, Dr. Jakymenko shall provide this Board with a copy of the return receipt as proof of notification within 30 days of receiving that return receipt, unless otherwise determined by the Board. This requirement shall continue until Dr. Jakymenko receives from the Board written notification of his successful completion of probation.

This Order shall become effective immediately upon the mailing of the notification of approval by the Board.

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

MR. BROWNING MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER, AS AMENDED, IN THE MATTER OF GEORGE JAKYMENKO, M.D. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye

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Dr. Varyani - aye

The motion carried.

GREGORY S. UHL, M.D.

Dr. Varyani directed the Board's attention to the matter of Gregory S. Uhl, M.D. He advised that no objections were filed to Hearing Examiner Petrucci's Report and Recommendation.

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

Dr. Uhl was accompanied by his attorney, Paul-Michael LaFayette. Mr. LaFayette stated that he's been very fortunate to represent Dr. Uhl in the administrative process. He stated that they filed no objections to the Hearing Examiner's Findings of Fact and Conclusions of Law. He believes that the Hearing Examiner did a thorough and accurate job of reporting what transpired at the hearing, as well as the history, as far as what has happened with Dr. Uhl over the last few years. Mr. LaFayette stated that they agree with the Hearing Examiner's Findings of Fact and Conclusions of Law and request that the Board approve them in their present form.

Dr. Uhl stated that he's had several problems over the last decade or so, most of which were addressed early on in the decade. In the last five years, he's gone to any length that anyone has ever asked him to go to try to get his life back in shape and he has continued to be a good doctor. He explained that one of the main reasons that he wanted to maintain his Ohio license is that he was born here, he went to school here, has an elderly mother whom he can't extract from here, and, probably, at some point in time he will have to take care of her. He believes that he may eventually need to return to Ohio to practice medicine. Dr. Uhl stated that he would like to have that option available. He's dedicated his life over the last five or six years to trying to get a much better handle on his life and the problems that he created for himself. He's had his eyes opened wide in this meeting today to see how other things can affect people's lives as well. Dr. Uhl stated that he is humbly before the Board to accept whatever recommendations the Board makes, and to answer any questions the Board may have.

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

Ms. Unver stated that she wants to highlight the pattern of failures and successes that Dr. Uhl experienced as he battled depression and anger management issues over the past several years. This case involves a sister state violation, stemming from Dr. Uhl's voluntary surrender of his New Mexico license after that board had sent Dr. Uhl a letter in 2003. The letter from the New Mexico Board informed Dr. Uhl that it had reason to believe that he was impaired. It ordered him to submit to an interview before a special examining committee. Ms. Unver advised that Dr. Uhl's career was suffering, and it was at this time that he moved his family to Georgia. He was contacted by the Georgia Medical Board, and he voluntarily sought treatment for his anger and depression issues. Since seeking help in 2004, Dr. Uhl has entered into a private Consent Order with the Georgia Medical Board and his New Mexico license has been reinstated.

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under conditions with the New Mexico Medical Board.

Ms. Unver stated that she thinks that the Hearing Examiner summed up very nicely the actions that Dr. Uhl has taken since 2004. Hearing Examiner Petrucci wrote, in part, "Dr. Uhl has completed an inpatient treatment program, has taken positive responsibility for his prior actions, and has practiced medicine actively in Georgia in a position of responsibility. . . . Uhl has certainly moved in a healthier direction and appears to be very committed to his mental health." Ms. Unver stated that the State agrees with the Hearing Examiner's Report and Recommendation, as written, and encourages the Board to adopt it, as written.

DR. MADIA MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER IN THE MATTER OF GREGORY S. UHL, M.D. MR. HAIRSTON SECONDED THE MOTION.

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

Dr. Steinbergh stated that she thinks that this particular Proposed Order is fine. Dr. Uhl has suffered from depression all of these years and, fortunately, he has had a positive response to the Board's concerns. Dr. Steinbergh stated that Ms. Petrucci's Conclusions of Law are a good summation of the positive way in which Dr. Uhl has handled his difficulties.

Dr. Steinbergh stated that the only thing she would amend in the Proposed Order is the probationary period. She stated that she would reduce it from a minimum of three years to a minimum of two years. She noted that Dr. Uhl would be making an appearance before the full Board in the third month following the effective date of the Order, and then again upon his request for release from probation.

DR. STEINBERGH MOVED TO AMEND THE PROPOSED ORDER TO REDUCE THE PROBATIONARY PERIOD FROM A MINIMUM OF THREE YEARS TO A MINIMUM OF TWO YEARS. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MS. PETRUCCI'S FINDINGS OF FACT, CONCLUSIONS OF LAW, AND PROPOSED ORDER, AS AMENDED, IN THE MATTER OF GREGORY S. UHL, M.D. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Dr. Talmage left the meeting at this time.

PROPOSED FINDINGS AND PROPOSED ORDER IN THE MATTER OF BRIAN MATTHEW GEASE

Dr. Varyani directed the Board's attention to the matter of Brian Matthew Gease. He advised that by letter of March 12, 2008, the Board notified Mr. Gease that it proposed to deny his application for a certificate to practice massage therapy in the State of Ohio based on allegations contained in the letter. The notice was mailed to Mr. Gease's address of record and proper service was documented. No hearing request has been received from Mr. Gease and more than thirty days have elapsed since the mailing of the notice. The matter was reviewed by Hearing Examiner Davidson, who prepared a Proposed Findings and Proposed Order, and is now before the Board for final disposition.

DR. STEINBERGH MOVED TO FIND THAT THE ALLEGATIONS AS SET FORTH IN THE MARCH 12, 2008 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF MR. GEASE HAVE BEEN PROVEN TO BE TRUE BY A PREPONDERANCE OF THE EVIDENCE, AND TO ADOPT THE PROPOSED FINDINGS AND PROPOSED ORDER. DR. EGNER SECONDED THE MOTION.

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

Dr. Steinbergh stated that she does appreciate the Proposed Order and she agrees with the denial, but she would like to propose an amended Order. Dr. Steinbergh stated that Mr. Gease is a massage therapist who was ordered by this Board to be assessed for possible chemical dependency. He was, in fact, assessed at Glenbeigh on January 7 of this year by Dr. Adelman, and was, in fact, diagnosed with habitual and

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excessive abuse of alcohol and that he could not practice according to acceptable standards of care. To date, Mr. Gease has not gone to the 28-day treatment that was recommended by Dr. Adelman. Mr. Gease was cited in March and has not requested a hearing.

Dr. Steinbergh stated that she agrees with the Hearing Examiner that the application should be denied, however, she would like to add stipulations that must be met prior to any future application. She commented that her proposal contains the type of stipulations the Board imposes on impaired physicians. The bottom line is that he has to go to a certified treatment provider for at least 28 days of inpatient or residential treatment.

DR. STEINBERGH MOVED TO AMEND THE PROPOSED ORDER IN THE MATTER OF MR. GEASE BY SUBSTITUTING THE FOLLOWING:

It is hereby ORDERED that:

- A. **APPLICATION DENIED:** The application of Brian Matthew Gease for a certificate to practice massage therapy in the state of Ohio is DENIED.
- B. **CONDITIONS PLACED UPON ANY FUTURE APPLICATION:** Mr. Gease shall not apply in the future for a certificate to practice massage therapy in the State of Ohio, or for any other certificate issued by the Board, until all of the following conditions are met.
 1. **Application:** Mr. Gease shall submit an application, accompanied by appropriate fees.
 2. **Demonstration of Ability to Practice:** Mr. Gease shall demonstrate to the satisfaction of the Board that he can practice in compliance with acceptable and prevailing standards of care under the provisions of his certificate. Such demonstration shall include but shall not be limited to the following:
 - a. Certification from a treatment provider approved under Section 4731.25 of the Revised Code that Mr. Gease has successfully completed any required inpatient treatment, including at least twenty-eight days of inpatient or residential treatment for chemical dependence, as set forth in Rules 4731-16-02(B)(4) and 4731-16-08(A)(13) of the Administrative Code, completed consecutively.
 - b. Evidence of continuing full compliance with a post-discharge aftercare contract with a treatment provider approved under Section 4731.25 of the Revised Code. Such evidence shall include, but not be limited to, a copy of the signed aftercare contract. The aftercare contract must comply with Rule 4731-16-10 of the Administrative Code.

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- c. Two written reports indicating that Mr. Gease's ability to practice has been assessed and that he has been found capable of practicing according to acceptable and prevailing standards of care. The reports shall be made by physicians knowledgeable in the area of addictionology and who are either affiliated with a current Board-approved treatment provider or otherwise have been approved in advance by the Board to provide an assessment of Mr. Gease. Prior to the assessments, Mr. Gease shall provide the evaluators with copies of patient records from any evaluations and/or treatment that he has received, and a copy of this Order. The reports from the evaluators shall include any recommendations for treatment, monitoring, or supervision of Mr. Gease, and any conditions, restrictions, or limitations that should be imposed on Mr. Gease's practice. The reports shall also describe the basis for the evaluator's determinations.

All reports required pursuant to this paragraph shall be based upon examinations occurring within the three months immediately preceding any application.

C. PROBATIONARY CONDITIONS TO BE PLACED UPON ANY FUTURE CERTIFICATE GRANTED BY THE BOARD: In the event that the Board should grant a future application by Mr. Gease for a certificate to practice massage therapy in the State of Ohio, or for any other certificate issued by the Board, that certificate shall be subject to the following PROBATIONARY terms, conditions, and limitations for a period of at least five years:

1. **Obey the Law:** Mr. Gease shall obey all federal, state, and local laws, and all rules governing the practice of massage therapy or other licensed practice in Ohio.
2. **Personal Appearances:** Mr. Gease shall appear in person for an interview before the full Board or its designated representative during the third month following the month during which the Board approved Mr. Gease's application for a certificate to practice massage therapy or other certificate. 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.
3. **Quarterly Declarations:** Mr. Gease shall submit quarterly declarations under penalty of Board disciplinary action and/or criminal prosecution, stating whether there has been compliance with all the conditions of this Order. The

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first quarterly declaration must be received in the Board's offices on or before the first day of the third month following the month during which the Board approved Mr. Gease's application for a certificate to practice massage therapy or other certificate. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.

4. **Abstention from Drugs**: Mr. Gease shall abstain completely from the personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of Mr. Gease's history of impairment.
5. **Abstention from Alcohol**: Mr. Gease shall abstain completely from the use of alcohol.
6. **Comply with the Terms of Treatment and Aftercare Contract**: Mr. Gease shall maintain continued compliance with the terms of the treatment and aftercare contracts entered into with his treatment provider, provided that, where terms of the treatment and aftercare contract conflict with terms of this Order, the terms of this Order shall control.
7. **Drug & Alcohol Screens**: Mr. Gease shall submit to random urine screenings for drugs and alcohol at least four times per month, or as otherwise directed by the Board. Mr. Gease shall ensure that all screening reports are forwarded directly to the Board on a quarterly basis. The drug testing panel utilized must be acceptable to the Secretary of the Board, and shall include Mr. Gease's drug(s) of choice.

Mr. Gease shall abstain from the use of any substance and the consumption of poppy seeds or any other food or liquid that may produce a low level positive result in a toxicology screen. Mr. Gease is specifically warned that the consumption or use of such substances, including but not limited to substances such as mouthwash or hand cleaning gel, may cause a positive drug screen that may not be able to be differentiated from intentional ingestion, and therefore such consumption or use is prohibited under this Order.

All such urine screenings for drugs and alcohol shall be conducted through a Board-approved drug testing facility and collection site, except as provided below, and the screening process shall require a daily call-in procedure.

Mr. Gease shall submit, at his expense and on the day selected, urine specimens for drug and/or alcohol analysis. All specimens submitted by Mr. Gease shall be negative, except for those substances prescribed, administered, or dispensed to him in conformance with the terms, conditions and limitations set forth in

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this Order. Refusal to submit such specimen, or failure to submit such specimen on the day Mr. Gease is selected or in such manner as the Board may request, shall constitute a violation of this Order.

Further, within thirty days of the issuance of a license to practice massage therapy, Mr. Gease shall enter into the necessary financial and/or contractual arrangements with the Board-approved drug testing facility and/or collection site in order to facilitate the urine screening process in the manner required by this Order. Further, within thirty days of making such arrangements, Mr. Gease shall provide to the Board written documentation of completion of such arrangements, including a copy of any contract entered into between Mr. Gease and the Board-approved drug testing facility and/or collection site. Mr. Gease's failure to timely complete such arrangements, or failure to timely provide written documentation to the Board of completion of such arrangements, shall constitute a violation of this Order.

Mr. Gease shall ensure that the urine screening process performed through the Board-approved drug testing facility and/or collection site requires a daily call-in procedure; that the urine specimens are obtained on a random basis; and that the giving of the specimen is witnessed by a reliable person. In addition, Mr. Gease and the Board-approved drug testing facility and collection site shall assure that appropriate control over the specimen is maintained and shall immediately inform the Board of any positive screening results.

Mr. Gease shall ensure that the Board-approved drug testing facility and/or collection site provides quarterly reports to the Board, in a format acceptable to the Board, verifying whether all urine screens have been conducted in compliance with this Order, and whether all urine screens have been negative.

In the event that the Board-approved drug testing facility and/or collection site becomes unable or unwilling to serve as required by this Order, Mr. Gease must immediately notify the Board in writing, and make arrangements acceptable to the Board, as described below, as soon as practicable. Mr. Gease shall further ensure that the Board-approved drug testing facility and/or collection site also notifies the Board directly of its inability to continue to serve and the reasons therefore.

The Board expressly reserves the right to withdraw its approval of any drug testing facility and/or collection site in the event that the Secretary and Supervising Member of the Board determine that the drug testing facility and/or collection site has demonstrated a lack of cooperation in providing information to the Board or for any other reason.

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Mr. Gease shall submit his urine specimens to the Board-approved drug testing facility and collection site chosen by the Board. However, in the event that utilizing said Board-approved drug testing facility and/or collection site creates an extraordinary hardship upon Mr. Gease, as determined in the sole discretion of the Board, then subject to the following requirements, the Board may approve an alternate drug testing facility and/or collection site, or a supervising physician, to facilitate the urine screening process for Mr. Gease:

- a. Within thirty days of the date upon which Mr. Gease is notified of the Board's determination that utilizing the Board-approved drug testing facility and/or collection site constitutes an extraordinary hardship upon Mr. Gease, he shall submit to the Board in writing for its prior approval the identity of either an alternate drug testing facility and collection site, or the name of a proposed supervising physician, to whom Mr. Gease shall submit the required urine specimens. In approving a facility, entity, or an individual to serve in this capacity, the Board will give preference to a facility located near Mr. Gease's residence or employment location, or to a physician who practices in the same locale as Mr. Gease. Mr. Gease shall ensure that the urine screening process performed through the alternate drug testing facility and/or collection site, or through the supervising physician, requires a daily call-in procedure; that the urine specimens are obtained on a random basis; and that the giving of the specimen is witnessed by a reliable person. In addition, Mr. Gease shall assure that the alternate drug testing facility and collection site, or the supervising physician, maintains appropriate control over the specimen and shall immediately inform the Board of any positive screening results.
- b. Mr. Gease shall ensure that the alternate drug testing facility and/or collection site, or the supervising physician, provides quarterly reports to the Board, in a format acceptable to the Board, verifying whether all urine screens have been conducted in compliance with this Order, and whether all urine screens have been negative.
- c. In the event that the designated alternate drug testing facility and/or collection site, or the supervising physician, becomes unable or unwilling to so serve, Mr. Gease must immediately notify the Board in writing. Mr. Gease shall further ensure that the previously designated alternate drug testing facility and collection site, or the supervising physician, also notifies the Board directly of the inability to continue to serve and the reasons therefore. Further, in order to ensure that there will be no interruption in his urine screening process, upon the previously approved alternate drug testing facility, collection site, or supervising physician becoming unable to serve, Mr. Gease shall immediately commence urine

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screening at the Board-approved drug testing facility and collection site chosen by the Board, until such time, if any, that the Board approves a subsequent alternate drug testing facility, collection site, or supervising physician, if requested by Mr. Gease.

- d. The Board expressly reserves the right to disapprove any entity or facility proposed to serve as Mr. Gease's designated alternate drug testing facility and/or collection site, or any person proposed to serve as his supervising physician, or to withdraw approval of any entity, facility or person previously approved to so serve in the event that the Secretary and Supervising Member of the Board determine that any such entity, facility or person has demonstrated a lack of cooperation in providing information to the Board or for any other reason.

All screening reports required under this Order from the Board-approved drug testing facility and/or collection site, or from the alternate drug testing facility and/or collection site or supervising physician, must be received in the Board's offices no later than the due date for Mr. Gease's quarterly declaration. It is Mr. Gease's responsibility to ensure that reports are timely submitted.

Mr. Gease shall submit blood, urine, breath, saliva and/or hair specimens for screening for drugs and alcohol, for analysis of therapeutic levels of medications that may be prescribed for Mr. Gease, or for any other purpose, at Mr. Gease's expense upon the Board's request and without prior notice. Mr. Gease's refusal to submit a specimen upon request of the Board shall result in a minimum of one year of actual license suspension. Further, the collection of such specimens shall be witnessed by a representative of the Board, or another person acceptable to the Secretary or Supervising Member of the Board.

8. **Provision of Blood or Urine for Screening without Prior Notice:** Mr. Gease shall submit blood and/or urine specimens for analysis without prior notice at such times as the Board may request, at Mr. Gease's expense.
9. **Rehabilitation Program:** Mr. Gease shall maintain participation in an alcohol and drug rehabilitation program, such as A.A., N.A. or C.A., no less than three times per week, unless otherwise determined by the Board. Substitution of any other specific program must receive prior Board approval. Mr. Gease shall submit acceptable documentary evidence of continuing compliance with this program, which must be received in the Board's offices no later than the due date for Mr. Gease's quarterly declarations.

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10. **Releases:** Mr. Gease shall provide continuing authorization, through appropriate written consent forms, for disclosure of evaluative reports, summaries, and records, of whatever nature, by any and all parties that provide treatment or evaluation for Mr. Gease's impairment and/or related conditions, or for purposes of complying with this Order, whether such treatment or evaluations occurred before or after Board approval of Mr. Gease's application for a certificate to practice massage therapy or other certificate. The above-mentioned evaluative reports, summaries, and records are considered medical records for purposes of Section 149.43 of the Ohio Revised Code and are confidential pursuant to statute.

Mr. Gease shall also provide the Board written consent permitting any treatment provider from whom Mr. Gease obtains treatment to notify the Board in the event he fails to agree to or comply with any treatment contract or aftercare contract. Failure to provide such consent, or revocation of such consent, shall constitute a violation of this Order.

11. **Absence from Ohio:** Mr. Gease 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.
12. **Tolling of Probationary Period while Out of Compliance:** In the event Mr. Gease 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.
13. **Required Reporting to Employers and Hospitals:** Within thirty days of the issuance of a license to practice massage therapy or any other license to Mr. Gease, Mr. Gease shall provide a copy of this Order to all employers or entities with which he is under contract to provide health care services (including but not limited to third party payors) or is receiving training; and the Chief of Staff at each hospital where he has privileges or appointments. Further, Mr. Gease shall promptly 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. Further, Mr. Gease shall provide the Board with one of the following documents as proof of each required notification within thirty days of the date of each such

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notification: (1) the return receipt of certified mail within thirty days of receiving that return receipt, (2) an acknowledgement of delivery bearing the original ink signature of the person to whom a copy of the Order was hand delivered, (3) the original facsimile-generated report confirming successful transmission of a copy of the Order to the person or entity to whom a copy of the Order was faxed, or (4) an original computer-generated printout of electronic mail communication documenting the email transmission of a copy of the Order to the person or entity to whom a copy of the Order was emailed.

14. **Required Reporting to Other State Licensing Authorities:** Within thirty days of the issuance of a license to practice massage therapy or any other license to Mr. Gease, Mr. Gease shall provide a copy of this Order to the proper licensing authority of any state or jurisdiction in which he currently holds any professional license, as well as any federal agency or entity, including but not limited to the Drug Enforcement Agency, through which he currently holds any license or certificate. Mr. Gease shall further provide a copy of this Order at time of application to the proper licensing authority of any state in which he applies for any professional license or reinstatement of any professional license. Further, Mr. Gease shall provide the Board with one of the following documents as proof of each required notification within thirty days of the date of each such notification: (1) the return receipt of certified mail within thirty days of receiving that return receipt, (2) an acknowledgement of delivery bearing the original ink signature of the person to whom a copy of the Order was hand delivered, (3) the original facsimile-generated report confirming successful transmission of a copy of the Order to the person or entity to whom a copy of the Order was faxed, or (4) an original computer-generated printout of electronic mail communication documenting the email transmission of a copy of the Order to the person or entity to whom a copy of the Order was emailed.
15. **Change of Address:** Mr. Gease shall notify the Board in writing of any change of principal practice address or residence address within thirty days of such change.
16. **Termination Of Probation:** Upon successful completion of probation, as evidenced by a written release from the Board, Mr. Gease's certificate will be fully restored.

This Order shall become effective IMMEDIATELY.

DR. AMATO SECONDED THE MOTION.

Dr. Egner stated that she doesn't understand the rationale for putting in conditions for re-application as

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opposed to a simple denial. She also questioned asking a massage therapist to do a 28-day inpatient program. She added that she thinks that that requirement is onerous for a massage therapist. Dr. Egner stated that she is not in favor of the proposed amendment because it stipulates that Mr. Gease complete a 28-day inpatient treatment program. Dr. Egner commented that the Board is in the process of discussing whether or not the Board should hold massage therapists to the same standard as it holds physicians. Dr. Egner stated that by the time Mr. Gease reapplies, the standard may be different.

Mr. Albert stated that the Impairment Committee is in the process of trying to develop rules for massage therapists and cosmetic therapists that would allow them to seek treatment on an outpatient basis.

DR. STEINBERGH WITHDREW HER MOTION.

A vote was taken on Dr. Steinbergh's initial motion to approve the Proposed Order:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

FINDINGS, ORDERS & JOURNAL ENTRIES

CARRIE ROBIN CHADWICK, M.T.

Dr. Varyani noted that, by letter of April 11, 2008, the Board issued a Notice of Opportunity for Hearing to Ms. Chadwick, based upon allegations contained in the letter. The Notice was mailed via certified mail, return receipt requested, to Ms. Chadwick's address of record, and documentation of service was received. No hearing request has been received from Ms. Chadwick and more than thirty days have elapsed since the mailing of that notice. The matter was before the Board for final disposition.

MR. BROWNING MOVED TO FIND THAT THE ALLEGATIONS AS SET FORTH IN THE APRIL 11, 2008 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF MS. CHADWICK HAVE BEEN PROVEN TO BE TRUE BY A PREPONDERANCE OF THE EVIDENCE AND TO ENTER AN ORDER, EFFECTIVE IMMEDIATELY, APPROVING MS. CHADWICK'S REQUEST FOR RESTORATION OF HER LICENSE TO PRACTICE

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MASSAGE THERAPY, SUBJECT TO HER PASSING THE LIMITED BRANCH PORTION OF THE BOARD'S MASSAGE THERAPY EXAMINATION WITHIN SIX MONTHS OF APRIL 11, 2008. MR. HAIRSTON SECONDED THE MOTION.

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

Dr. Steinbergh stated that she agrees with the Proposed Order.

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye

The motion carried.

NARINDER S. DABHIA, M.D.

Dr. Varyani noted that, by letter of April 24, 2008, the Board issued a Notice of Opportunity for Hearing to Dr. Dabhia, based upon allegations contained in the letter. The Notice was mailed via certified mail, return receipt requested, to Dr. Dabhia's address of record, and documentation of service was received. No hearing request has been received from Dr. Dabhia and more than thirty days have elapsed since the mailing of that notice. The matter was before the Board for final disposition.

MR. BROWNING MOVED TO FIND THAT THE ALLEGATIONS AS SET FORTH IN THE APRIL 24, 2008 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF DR. DABHIA HAVE BEEN PROVEN TO BE TRUE BY A PREPONDERANCE OF THE EVIDENCE AND TO ENTER THE PROPOSED ORDER, EFFECTIVE IMMEDIATELY. DR. MADIA SECONDED THE MOTION.

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

Dr. Steinbergh noted that paragraph #1 of the draft order, on page 200 of the agenda materials, needs to be corrected to indicate that Dr. Dabhia has requested the waiver in order to sit for Step III of the U.S.M.L.E.

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

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ROLL CALL:

Mr. Albert	- abstain
Dr. Egner	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye

The motion carried.

DAVID ALLEN JACOBS, JR., M.T.

Dr. Varyani noted that, by letter of April 11, 2008, the Board issued a Notice of Opportunity for Hearing to Mr. Jacobs, based upon allegations contained in the letter. The Notice was mailed via certified mail, return receipt requested, to Mr. Jacobs's address of record, and documentation of service was received. No hearing request has been received from Mr. Jacobs and more than thirty days have elapsed since the mailing of that notice. The matter was before the Board for final disposition.

DR. MADIA MOVED TO FIND THAT THE ALLEGATIONS AS SET FORTH IN THE APRIL 11, 2008 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF MR. JACOBS HAVE BEEN PROVEN TO BE TRUE BY A PREPONDERANCE OF THE EVIDENCE AND TO ENTER AN ORDER, EFFECTIVE IMMEDIATELY, APPROVING MR. JACOBS'S REQUEST FOR RESTORATION OF HIS LICENSE TO PRACTICE MASSAGE THERAPY, SUBJECT TO HIS PASSING THE LIMITED BRANCH PORTION OF THE BOARD'S MASSAGE THERAPY EXAMINATION WITHIN SIX MONTHS OF APRIL 11, 2008. MR. BROWNING SECONDED THE MOTION. A vote was taken:

ROLL CALL:

Mr. Albert	- abstain
Dr. Egner	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

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JENNY LEANNE KNOTTS, M.T.

Dr. Varyani noted that, by letter of April 11, 2008, the Board issued a Notice of Opportunity for Hearing to Ms. Knotts, based upon allegations contained in the letter. The Notice was mailed via certified mail, return receipt requested, to Ms. Knotts' address of record, and documentation of service was received. No hearing request has been received from Ms. Knotts and more than thirty days have elapsed since the mailing of that notice. The matter was before the Board for final disposition.

DR. MADIA MOVED TO FIND THAT THE ALLEGATIONS AS SET FORTH IN THE APRIL 11, 2008 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF MS. KNOTTS HAVE BEEN PROVEN TO BE TRUE BY A PREPONDERANCE OF THE EVIDENCE AND TO ENTER AN ORDER, EFFECTIVE IMMEDIATELY, APPROVING MS. KNOTTS' REQUEST FOR RESTORATION OF HER LICENSE TO PRACTICE MASSAGE THERAPY, SUBJECT TO HER PASSING THE LIMITED BRANCH PORTION OF THE BOARD'S MASSAGE THERAPY EXAMINATION WITHIN SIX MONTHS OF APRIL 11, 2008. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

ERIN W. WOODWARD, M.T. APPLICANT

Dr. Varyani noted that, by letter of April 9, 2008, 2008, the Board issued a Notice of Opportunity for Hearing to Ms. Woodward, based upon allegations contained in the letter. The Notice was mailed via certified mail, return receipt requested, to Ms. Woodward's address of record, and documentation of service was received. No hearing request has been received from Ms. Woodward and more than thirty days have elapsed since the mailing of that notice. The matter was before the Board for final disposition.

DR. STEINBERGH MOVED TO FIND THAT THE ALLEGATIONS AS SET FORTH IN THE APRIL 9, 2008 NOTICE OF OPPORTUNITY FOR HEARING IN THE MATTER OF MS. WOODWARD HAVE BEEN PROVEN TO BE TRUE BY A PREPONDERANCE OF THE EVIDENCE AND TO ENTER THE PROPOSED ORDER, EFFECTIVE IMMEDIATELY. MR. BROWNING SECONDED THE MOTION. A vote was taken:

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ROLL CALL:

Mr. Albert	- abstain
Dr. Egner	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

Dr. Talmage returned to the meeting prior to consideration of the following topic.

CITATIONS, PROPOSED DENIALS, AND ORDERS OF SUMMARY AND IMMEDIATE SUSPENSION

PAUL EDWARD ANDORFER, M.D. – CITATION LETTER

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

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

ROLL CALL:

Mr. Albert	- abstain
Dr. Egner	- aye
Dr. Talmage	- abstain
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

ATTA ASEF, 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

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shall be maintained in the exhibits section of this Journal.

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

ERICA LORELL BERRY – LETTER OF PROPOSED DENIAL

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

DR. MADIA MOVED TO SEND THE LETTER OF PROPOSED DENIAL TO MS. BERRY. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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JOSHUA FOREST BROCKMAN – LETTER OF PROPOSED DENIAL

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

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

JACK MARK LEVINE, 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. LEVINE. DR. AMATO SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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JAY WELDON MARTIN, 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. MADIA MOVED TO SEND THE CITATION LETTER TO DR. MARTIN. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

RATIFICATION OF SETTLEMENT AGREEMENTSRICHARD DAVID GRECZANIK, D.O. – STEP II CONSENT AGREEMENT

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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LLOYD STANLEY NARAMORE, D.O. – CONSENT AGREEMENT

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

MARK A. RHODEBACK, L.M.T. – CONSENT AGREEMENT

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

PENELOPE RUTH WARREN, M.D. – SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

DR. MADIA MOVED TO RATIFY THE PROPOSED PERMANENT SURRENDER OF DR.

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WARREN'S LICENSE TO PRACTICE MEDICINE AND SURGERY. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

STEPHEN T. MCCARREN, M.D. – CONSENT AGREEMENT

DR. MADIA MOVED TO RATIFY THE PROPOSED STEP I CONSENT AGREEMENT WITH DR. McCARREN. DR. STEINBERGH SECONDED THE MOTION.

Dr. Steinbergh stated that this physician is a big concern because of the number of relapses, not reporting and bad behavior.

Dr. Amato referred to Ms. Pokorny's statement that Dr. McCarren admitted to a relapse in 2000 but never reported the relapse on his licensure renewal application for the 2002-2004 biennium. Dr. Amato stated that he questions the Board's consistency of thrust. Earlier today the Board talked about revocation for dishonesty on an application. In this case staff is lowering the punishment on the guidelines for repeated relapse.

Dr. Steinbergh stated that this is an impairment case where the other was not.

Dr. Amato stated that not telling the truth on your application is the same in either case.

Dr. Steinbergh stated that one would feel that his not reporting is consistent with the disease process.

Dr. Varyani stated that he had the same concerns as Dr. Amato. Because the consent agreement falls below the Board's disciplinary guidelines, he was contacted. Dr. Varyani continued that, like it or not, the Board staff would prefer to have this person not practicing and under an agreement with the Board, rather than not having an agreement. Dr. Varyani stated that they were basically able to negotiate a six-month suspension rather than three months. Dr. Varyani stated that the agreement is below standards, but he thinks that the important thing is to have a consent agreement in place and have this guy monitored rather than not

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monitored.

Dr. Talmage stated that, in general, there is a concept in addictionology of a “slip,” which is not technically a relapse, according to some addictionologists. It is a brief resumption of use of a chemical substance with immediate resumption of aftercare. Whether that is reportable is somewhat of a judgment call and is part of the consideration process.

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

ROLL CALL:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- abstain
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

MINUTES REVIEW

MR. BROWNING MOVED TO APPROVE THE MINUTES OF MAY 14-15, 2008.
MR. HAIRSTON SECONDED THE MOTION. A vote was taken

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye

The motion carried.

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PROBATIONARY APPEARANCESGERALD B. APPLGATE, M.D.

Dr. Applegate appeared before the Board pursuant to his request for release from the terms of the Board's Order of May 14, 2008.

In response to Board members' questions, Dr. Applegate stated that he is doing very well. Following release from probation, Dr. Applegate plans to continue his gynecology practice in Florida. Dr. Applegate stated that he has retired from the practice of obstetrics. He has a solo practice. He had no questions for Board members.

DR. STEINBERGH MOVED TO RELEASE DR. APPLGATE FROM THE TERMS OF THE BOARD'S ORDER OF MAY 14, 2008. DR. VARYANI SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

ROBERT L. BELLUSO, D.O.

Dr. Belluso appeared before the Board pursuant to his request for release from the terms of his June 14, 2006 Consent Agreement. If approved, release from probation would become effective June 14, 2008.

In response to Board members' questions, Dr. Belluso stated that he sees his psychiatrist every three weeks. He stated that he was released from that requirement by the Board, but has continued and will continue these sessions. He does not take any medications.

Continuing to respond to Board member questions, Dr. Belluso stated that he is doing well. He will graduate from his family practice residency program at Akron General Medical Center in 20 days. He has signed a contract to practice in Pennsylvania, just south of Pittsburgh. He's joining a family practice group that does both inpatient and outpatient medicine. He stated that he's talked with his current counselor who

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will help get counseling set up for him in Pennsylvania. Dr. Belluso stated that he thinks that the counseling is very helpful and he will continue. He acknowledged that the stressors he faced in residency will be different from those he'll face in practice, but he added that he's learned the tools to deal with stress better now.

DR. STEINBERGH MOVED TO RELEASE DR. BELLUSO, EFFECTIVE JUNE 14, 2008, FROM THE TERMS OF HIS JUNE 14, 2006 CONSENT AGREEMENT. DR. MADIA SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

STEPHEN B. LEVITT, M.D.

Dr. Levitt appeared before the Board pursuant to his request for release from the terms of his June 8, 2005 Consent Agreement.

In response to Board members' questions, Dr. Levitt indicated that he is doing very well. In response to a question about whether or not he was paying child support now, Dr. Levitt indicated that paying child support was not an issue for him. Rather, his error was in notarizing a document for someone. Dr. Levitt stated that he thought he was allowed to do that because he has a power of attorney for his father, who is a notary public. He found out later that he was not allowed to do that. He signed his father's name and then initialed the signature, the same as he did for the checks he wrote on his father's behalf.

DR. MADIA MOVED TO RELEASE DR. LEVITT, FROM THE TERMS OF HIS JUNE 8, 2005 CONSENT AGREEMENT. MR. BROWNING SECONDED THE MOTION.

Dr. Steinbergh stated that she'll believe that Dr. Levitt clearly understands what he did and won't make the mistake again.

Dr. Levitt stated that he will not make that mistake again. He's learned his lesson.

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Mr. Albert stated that part of Dr. Levitt's agreement was that he do public service.

Dr. Levitt stated that that is correct. He stated that his office created a public service in which they treat people for free. They have continued this, although not to the full extent of treating the hundreds that they did to meet the requirement, but he still averages treating about twenty people a week as a result.

Mr. Albert advised that both Dr. Levitt and his partner have both assured him that they will continue to do this.

Dr. Levitt stated that they are taking care of the indigent, those who do not have insurance, free of charge.

Mr. Albert stated that this is something that is really dear to his heart.

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

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

THOMAS G. OLSEN, M.D.

Dr. Olsen appeared before the Board pursuant to his request for release from the terms of his June 8, 2005 Consent Agreement.

In response to Board members' questions concerning a DUI and child support issues, Dr. Olsen stated that he went to a party and had too much to drink. He stated that he foolishly got in a car and drove home. Dr. Olsen stated that, concerning child support, all of his children are now 21 years old or over and there is no further support issue. Dr. Olsen stated that all of his children have gone to college and he's supported them through boarding schools in the east. He's paid close to \$1,000,000 in support of their educational endeavors.

DR. MADIA MOVED TO RELEASE DR. OLSEN FROM THE TERMS OF HIS JUNE 8, 2005 CONSENT AGREEMENT. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

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ROLL CALL:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

ASHOK V. PADHIAR, M.D.

Dr. Padhiar appeared before the Board pursuant to his request for release from the terms of his June 11, 2003 Step II Consent Agreement.

In response to Board Members' questions, Dr. Padhiar stated that he is doing very well. He has been clean and sober for six years. He is in a group anesthesiology practice in Johnstown, PA, with ten anesthesiologists and 25 nurse anesthetists. He's been a member of the group for about the past two and a half years. For his recovery, he attends A.A. meetings. He completed his rehabilitation program about four years ago. He sponsors others in A.A., a couple of whom are physicians. His recovery is fairly personalized at the moment. He attends meetings about once a week, depending on his schedule, and he also attends Caduceus meetings. His family support is very good. He works 30 to 50 hours a week. In a group of ten it's a lot more flexible and a lot easier. Dr. Padhiar advised that his parents moved to Pennsylvania with him.

DR. STEINBERGH MOVED TO RELEASE DR. PADHIAR FROM THE TERMS OF HIS JUNE 11, 2003 STEP II CONSENT AGREEMENT. DR. AMATO SECONDED THE MOTION. A vote was taken:

ROLL CALL:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye

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Dr. Steinbergh - aye
Dr. Varyani - aye

The motion carried.

AKI S. PURYEAR, M.D.

Dr. Puryear appeared before the Board pursuant to his request for release from the terms of his April 2, 2003 Consent Agreement.

In response to Board members' questions, Dr. Puryear stated that he is currently in practice in St. Louis, MO, doing pediatric orthopedics. His partner is his supervising physician there and knows everything about him. His Chairman also knows. Dr. Puryear stated that he works anywhere from 40 to 70 hours a week, depending on the year. His partners are very supportive.

As far as recovery, Dr. Puryear stated that he attends three to four meetings a week, he attends Caduceus meetings, and he has a sponsor. Dr. Puryear commented that he has not been successful with those he has sponsored, but he's stayed sober. Dr. Puryear stated that his family, including his wife, his mother and his sisters have all been very supportive.

Mr. Albert advised that Dr. Puryear is a veteran of the Iraq war.

Dr. Puryear commented that the last time he sat before the Board was right before he went to Iraq the first time.

DR. MADIA MOVED TO RELEASE DR. PURYEAR FROM THE TERMS OF HIS APRIL 2, 2003 CONSENT AGREEMENT. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

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TODD, S. CARRAN, M.D.

Dr. Carran made his initial appearance before the Board, pursuant to the terms of his May 14, 2008 Step II Consent Agreement.

In response to Board members' questions, Dr. Carran stated that he has a psychiatric diagnosis of post traumatic stress disorder (PTSD), the etiology of which was the murder/suicide of his parents at the age of nine. He undergoes psychotherapy with his psychiatrist on a weekly basis and has done so for almost six years. He's done a fair amount of reading about the psychology of addiction, and PTSD is frequently associated with opiate dependence. The effects of his childhood and those things undoubtedly played a large role in his opiate dependence. Dr. Carran stated that understanding that has been very helpful to him. Dr. Carran indicated that he believes that he's moved beyond that now, to the extent that you can move beyond it, and his psychiatrist agrees.

In response to questions about his support group, Dr. Carran stated that his support comes more from friends and people in the program than family members. Although he has a close relationship with his aunt and uncle, it was a bit psychologically abusive, so they're not really his support group. He advised that he also has an older sister and a younger brother. His relationship with them is good. He added that they all live in different states, but they do speak frequently. He has two roommates in recovery, and he finds that to be very useful. It keeps him involved in the program at all times. One roommate has been in recovery for twenty years and the other has been in recovery for three years.

DR. STEINBERGH MOVED TO CONTINUE DR. CARRAN UNDER THE TERMS OF HIS MAY 14, 2008 STEP II CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

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ALI KHAN, M.D.

Dr. Khan made his initial appearance before the Board, pursuant to the terms of the Board's Order of December 12, 2007.

Ms. Bickers advised that Dr. Khan has submitted a request to continue under the probationary terms while he practices in Florida.

In response to Board members' questions, Dr. Khan stated that he intends to go to Florida if the Board gives him permission. He would like to practice in both Ohio and Florida, and will be traveling back and forth. He plans to open a cosmetic clinic in Florida. He added that he has a cosmetic practice in Ohio.

Dr. Steinbergh commented that the materials before the Board indicate that Dr. Khan's listed specialty is family practice.

Dr. Khan stated that that is correct. He is board-certified in family practice, but not in anything else. Dr. Khan explained that, during his residency, he started taking a lot of C.M.E. courses in Botox and fillers, etc. When he graduated, he started doing that full-time. He has practiced for two years now. He's not doing family practice now, only cosmetic procedures.

Dr. Steinbergh commented that it's pretty risky behavior to practice in Ohio and in Florida, to have offices so far apart. She stated that she's concerned about that. She also noted that Dr. Khan was working in an emergency room when the incident that brought him before the Board occurred. Dr. Steinbergh stated that the Board does know that, when a doctor dabbles in a variety of areas, it tends to lower his competency in that, and it could possibly put him at risk for adverse events.

Dr. Khan stated that, during his residency, most of the areas he did in his electives were either emergency room or cosmetic medicine. He was doing four or five shifts a month in a low-volume emergency room, and he had his practice. He intends to transition his practice from Ohio to Florida. He's not going to go back and forth, but will have to do so for the first few months, until he can find a responsible medical director and transfers care of his Ohio patients and closes his files. He's not going to have two practices.

In response to further questions, Dr. Khan stated that he's had a Florida license since 2003. He did report his Ohio Board Order to the Florida Board, which put his license on probation to run concurrent with his Ohio probation. Florida fined him \$1,049.00; they asked him to do a C.M.E. course, which could be the same as the one he's required to take in Ohio; and they gave him a letter of concern. He made his initial appearance before the Florida Board two weeks prior to this meeting.

DR. STEINBERGH MOVED TO CONTINUE DR. KHAN UNDER THE TERMS OF THE BOARD'S ORDER OF DECEMBER 12, 2007, INCLUDING DURING TIME SPENT PRACTICING IN THE STATE OF FLORIDA, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. MADIA SECONDED THE MOTION.

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Dr. Khan indicates that he would like to be able to visit his parents in Pakistan, his older sister in Vancouver, his brother in New York, and his younger sister in Florida. Because of these circumstances, he has to travel to visit them, but the Board's Order requires him to obtain permission to travel.

Dr. Steinbergh stated that this can be handled administratively.

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

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

CHRISTOPHER T. LIEDERBACH, M.D.

Although scheduled, Dr. Liederbach did not make an appearance.

MARGARET MARY OLSEN, M.D.

Although scheduled, Dr. Olsen did not make an appearance.

JOHN W. SHAW, M.D.

Dr. Shaw made his initial appearance before the Board, pursuant to the terms of his April 9, 2008 Step II Consent Agreement.

In response to Board members' questions, Dr. Shaw stated that he is working the program the best he can. He's been doing well in recovery. The meetings he attends have increased. He attends a Caduceus every week. He got a new sponsor, with whom it has been nice to work. He's redone the steps. Dr. Shaw stated that he has good family support. He was re-evaluated by the Cleveland Clinic before entering into the Step II agreement. He also sees a psychologist in town on a weekly basis. He stated that he's been doing that for a month, and it's been going well.

Dr. Steinbergh noted that it's been three years since Dr. Shaw entered into a Step 1 agreement in 2005. She

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asked whether he's progressed.

Dr. Shaw stated that he thinks that he's progressed very far in the recovery program. He obviously had a relapse on Ultram in August 2007. He had made a lot of progress from where he was in 2005. The recovery for him has gotten to another level. Unfortunately, he had that relapse and intervention again. He's had more time off again. In talking to the sponsor, doing more meditation and working the program better, he thinks that he's gotten to a better level of the recovery program. It's been three years and it does take a while to go from where he was in 2005 to where he is now.

In response to further questions from Board members, Dr. Shaw stated that he works in the Defiance Clinic, and has 3 partners in his surgical practice. He has full privileges at the hospital, with no restrictions.

Dr. Stephens asked Dr. Shaw what he has found to be the hardest step.

Dr. Shaw stated that the hardest step for him was Step 4. That involves doing the moral inventory and finding the character defects that he possesses. He stated that he did that step the first time, but he thinks that you do it with a more in-depth level a second time, especially when you have a relapse. You look at yourself in more detail and in a deeper way. Dr. Shaw stated that he can't guarantee that he won't relapse, and added that he doesn't think that anyone with an addiction can do that. He can only tell the Board that he feels that he got pretty far the first time and this time his recovery is at a deeper level. Dr. Shaw stated that you have to do the steps and have the accountability. Time is all he can do to prove it. He does have support from his family and from his colleagues. They keep an eye on him, too, and they're going to watch him closer this time as well. Dr. Shaw stated that for the first six months he won't take as much call. He'll probably work part-time for the first six months. He added that this is something he's worked out with the partners. He's spent a lot of time with his family, who has been involved with the recovery process. Dr. Shaw stated that he feels very positive about his recovery.

Mr. Albert stated that Dr. Shaw worked very hard on his recovery and he had good family support. He stated that Dr. Shaw was kind of the poster boy for the recovery program. Mr. Albert expressed disappointment in Dr. Shaw when he had that relapse, and added that he knows Dr. Shaw's wife was also disappointed. Mr. Albert stated that he is confident that Dr. Shaw will make it this time.

Dr. Shaw stated that he is going to try very, very hard.

DR. STEINBERGH MOVED TO CONTINUE DR. SHAW UNDER THE TERMS OF HIS APRIL 9, 2008 STEP II CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. MADIA SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye

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Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

Dr. Varyani left the room at this time.

ANDREAS SZOKOLOCZY-SYLLABA, D.O.

Dr. Szokoloczy-Syllaba made his initial appearance before the Board, pursuant to the terms of his May 14, 2008 Step II Consent Agreement.

In response to Board members' questions, Dr. Szokoloczy-Syllaba stated that he is doing very well. The medications he currently takes include Celexa and Depakote. He's also been taking Ambien for sleep since last August. These are all being taken under the supervision of his psychiatrist. Dr. Szokoloczy-Syllaba stated that he's not back to work yet, but he's still trying to work some things out with his former employer.

In response to further questions, Dr. Szokoloczy-Syllaba stated that he had two years of training in physical medicine and rehabilitation, and then was board-certified in osteopathic manipulative medicine and neuromuscular skeletal medicine.

In response to further questions, Dr. Szokoloczy-Syllaba stated that, up until recently, he was seeing his psychiatrist every three weeks. He's just recently starting going every four weeks. He's been a lot more mood stable with the medications, and the depression has gotten better, as well.

Dr. Steinbergh stated that Dr. Szokoloczy-Syllaba is asking for approval of Dr. Reddy as his monitoring physician. She asked what his relationship with Dr. Reddy is.

Dr. Szokoloczy-Syllaba stated that Dr. Reddy is going to be his employer, and was his employer previously. Dr. Szokoloczy-Syllaba stated that he did previously have a good relationship with his partners.

DR. STEINBERGH MOVED TO APPROVE BHIMAVARAPU K. REDDY, M.D., TO SERVE AS DR. SZOKOLOCZY-SYLLABA'S MONITORING PHYSICIAN, WITH 10 CHARTS TO BE REVIEWED EACH MONTH. DR. STEINBERGH FURTHER MOVED TO CONTINUE DR. SZOKOLOCZY-SYLLABA UNDER THE TERMS OF HIS MAY 14, 2008 STEP II CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR

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

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye

The motion carried.

Dr. Steinbergh asked whether Dr. Szokoloczy-Syllaba understands the terms of his consent agreement and whether he has any questions.

Dr. Szokoloczy-Syllaba stated that he does understand the consent agreement, adding that he went over it several times over. He stated that he does have a question. He stated that he previously was working part-time with a physician in Springfield. He asked whether he would have to have those charts reviewed should he return to working with her. Dr. Szokoloczy-Syllaba stated that he usually does pain consults for that physician. Usually, the patients get sent to Dr. Reddy's practice for procedures, and he'll do pain injections.

Dr. Steinbergh stated that Dr. Reddy could review those charts as he sees fit. If he's reviewing ten charts a month, it would be good to have a sampling from each practice.

Dr. Varyani returned to the room at this time.

JOSEPH C. SIMONE, D.O.

Dr. Simone made his initial appearance before the Board, pursuant to the terms of his March 13, 2008 Step II Consent Agreement.

In response to Board members' questions, Dr. Simone stated that he is doing well today. He practiced general anesthesia prior to his license being suspended by the Board, but hasn't returned to it. He was traveling, doing locum tenens, but he's not sure he wants to go back to traveling. He's not sure that it's the best thing for his recovery. He'll look at options here in Columbus. Dr. Simone stated that he's done family practice and emergency medicine before and he may just stay with that for now. His only training in family practice was during his rotating internship. He would probably work in urgent care centers rather than in a family practice.

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In response to further questions, Dr. Simone stated that he is currently taking Suboxone, and has taken it for about a year. He's in the process of discontinuing that. He takes about half a day.

Ms. Bickers stated that Dr. Simone is not taking the Suboxone for his addiction but for treatment of pain.

Dr. Simone stated that he has some damaged discs in his back.

DR. MADIA MOVED TO APPROVE DOUGLAS W. BEECH, M.D., TO SERVE AS DR. SIMONE'S TREATING PSYCHIATRIST. DR. MADIA FURTHER MOVED TO CONTINUE DR. SIMONE UNDER THE TERMS OF HIS MARCH 13, 2008 STEP II CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. AMATO SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

ROSS P. TURNER, D.O.

Dr. Turner made his initial appearance before the Board, pursuant to the terms of his May 14, 2008 Step II Consent Agreement.

In response to Board members' questions, Dr. Turner stated that he was in PGY-3 year at the time of his intervention. Right now he's involved in keeping things up around the house, doing recovery activities, watching his three-year-old, things like that. When his license is reinstated, he intends to go back into residency. He still has a pending court case, and he plans to re-enter the match in the fall. According to his Pharmacy Board appearance the previous week relative to his pharmacist's license, he needs to work 300 hours for that license to be fully reinstated. So in the upcoming months he'll be applying for the match, working to resolve the court indictment, and doing the 300 hours.

Dr. Varyani stated that he's an anesthesiologist, and the two drugs that Dr. Turner was abusing are readily available to Dr. Turner, if he returns to the anesthesiology residency program. Dr. Varyani asked whether Dr. Turner is sure that he wants to do that for the rest of his life. Dr. Varyani suggested that Dr. Turner

look for another residency, rather than a residency in anesthesia. He felt that would be better for Dr. Turner in the long run.

Ms. Bickers stated that, should he return to anesthesia residency and practice, Dr. Turner will be required to take naltrexone. Also, there were conditions imposed in the consent agreement relating to the drugs he uses in practicing anesthesia.

Dr. Varyani stated that he understands that, but if you're an anesthesiologist, you have fentanyl in your pocket every day. The stimulus to relapse is right there, in your pocket.

Dr. Steinbergh stated that the risks are high in anesthesiology.

Dr. Turner stated that he appreciates Board members' input, especially from an anesthesia standpoint. At this point in time he had decided to try to pursue that residency again. Safeguards are in place in the consent agreement. He added that he continues to be in contact with a number of recovering anesthesiologists and he recognizes that, although they have finished their residency, per se, they're no safer than he is in actuality. Dr. Turner stated that he doesn't want to demean anybody's research or input whatsoever, but there are ways for him to resume his training. Dr. Turner added that he won't be at the former institution.

Dr. Varyani stated that he's not saying that it can't be done. He's just saying that for Dr. Turner, the chances for relapse are higher than for other chemically dependent individuals.

Dr. Egner asked whether Dr. Turner will enter the match, starting over as a PGY 1.

Dr. Turner stated that he expects, although he doesn't know for sure, that it will be as a PGY 2. It would be the advanced part of the match as opposed to the categorical because he does have an internship in internal medicine. He believes, although he doesn't know for sure, that that should stand and that he should be able to start over as a PGY 2.

In response to further questions from Dr. Egner, Dr. Turner stated that he has interviewed with one program, thus far, outside of the match, and their only stumbling block for him taking the position today or tomorrow is the felony indictment that is still hanging over his head a year and a half later. Until that's resolved, they don't want anything to do with him.

Dr. Egner commented that it's not a minor issue.

Dr. Turner agreed, stating that he is not trying to minimize it at all; it's just that he's finally starting to get his life back together, his license has been reinstated, and the indictment is the last piece of the puzzle.

Dr. Egner stated that she does not understand why Dr. Turner would go back into anesthesia. She stated that she thinks he's foolish to do so. She commented that he didn't even answer Dr. Varyani's question as to why he wants to do it. She stated that Dr. Turner has put time into anesthesia training, but he's young

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and has lots of years to pursue any other specialty there is. She stated that it is very unwise on Dr. Turner's part to go into an anesthesia training program. She added that there are so many other specialties, there must be something else to spark Dr. Turner's interest, and he's just asking for trouble. She asked what Dr. Turner would expect the Board to do if he comes back with a relapse. Would he expect the Board to put him back into that same environment? Dr. Egner stated that she doesn't want to be so harsh, but this is the reality.

Dr. Turner stated that he understands the direction Dr. Egner is coming from, but, unfortunately, he doesn't necessarily share that opinion.

Dr. Madia asked whether Dr. Turner knows the percentage of relapse in anesthesia.

Dr. Turner stated that it's 25% to 35% with a 10% to 15% mortality rate. He stated that those statistics don't reflect the fact that there are opiate blockers available. None of the people who died were obviously on opiate blockers.

DR. STEINBERGH MOVED TO CONTINUE DR. TURNER UNDER THE TERMS OF HIS MAY 14, 2008 STEP II CONSENT AGREEMENT, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. AMATO SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

EXECUTIVE SESSION

DR. STEINBERG MOVED THAT THE BOARD DECLARE EXECUTIVE SESSION TO CONSIDER THE EMPLOYMENT OF A PUBLIC EMPLOYEE. DR. EGNER SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye

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Dr. Varyani	- aye
Dr. Buchan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Dr. Amato	- aye
Dr. Robbins	- aye
Dr. Steinbergh	- aye
Dr. Talmage	- aye
Dr. Kumar	- aye

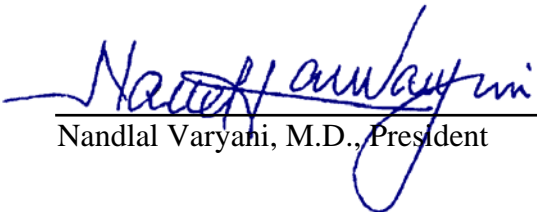
The motion carried.

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


At the end of the Executive Session, the President adjourned the meeting.

Thereupon at around 5:07 p.m. the June 11, 2008 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 June 11, 2008, as approved on July 9, 2008.



Nandlal Varyani, M.D., President



Lance A. Talmage, M.D., Secretary

(SEAL)



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MINUTES

THE STATE MEDICAL BOARD OF OHIO

June 12, 2008

Nandlal Varyani, M.D., President, called the meeting to order at 8:00 a.m., in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes State Office Tower, 30 E. Broad St., Columbus, Ohio 43215, with the following members present: Dalsukh Madia, M.D., Vice-President; Lance A. Talmage, M.D., Secretary; Raymond J. Albert, Supervising Member; Carol L. Egner, M.D.; Marchelle L. Suppan, D.P.M.; R. Gregory Browning, Ph.D.; W. Frank Hairston; Jack C. Amato, M.D.; Susan E. Stephens, M.D.; and Anita M. Steinbergh, D.O.

Also present were: Richard A. Whitehouse, Executive Director; Kimberly C. Anderson, Assistant Executive Director; William J. Schmidt, Senior Counsel, Enforcement, Compliance & Investigations; Rebecca J. Marshall, Chief Enforcement Attorney; Barbara J. Pfeiffer and Karen A. Unver, 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; Karry Thacker, Executive Staff Assistant; Danielle Bickers, Compliance Supervisor; Jean Gillman, Compliance Officer; Barbara Jacobs, Public Services Administrator; and Kay L. Rieve, Administrative Officer.

LICENSURE, PROBATION AND REINSTATEMENT CONSENT AGENDA

Dr. Varyani 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. Varyani 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 stated that she doesn't want to consider any of the items separately, but she does want to point out for the benefit of new Board members that there are times when they'll see in the probationary reports that the individual isn't necessarily compliant at the time of his or her last office meeting. However, the compliance staff is aware of this and is working with the individual to bring them into compliance. She commented that she had concerns about this in the past and about not approving those reports. She stated that she's finally satisfied that the staff is moving in the right direction with those cases.

Dr. Steinbergh stated that she also thinks that it is very important, when a Board member is reading the probationary requests, if the documentation advises that a report has been received on a probationer from the supervising physician, monitoring physician, etc., that report should be included in the agenda materials.

DR. STEINBERGH MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES ON APRIL 7-8, 2008, WITH: STEVEN R. ALLEN, SR., M.D.; STEVE AMOILS, M.D.; DAVID B. AXELSON, M.D.; ASHRAF S. BADOUR, M.D.; MARK A. BANKS, M.D.;

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ROBERT M. BENSON, M.D.; KEVIN W. BOWERS, D.O.; SCOTT M. CAMPBELL, M.D.; PAUL CLAASSEN, D.O.; L. JEAN COOPER, M.D.; WENDY KAY DEAN, M.D.; MILES E. DRAKE, JR., M.D.; DAVID C. ERNST, M.D.; MARY JO FOOTE, P.A.; JAMES VINCENT FURICCHIA, M.D.; WILLIAM CLARK HARLAN, D.O.; RALPH ARDEN HUGUNIN, M.D.; DAROLD R. LANCE, JR., D.O.; MELANIE LYNNE LEU, M.D.; DAVID J. LEVY, M.D.; FRED R. MOSS, M.D.; PHILLIP THIELE NORTH, M.D.; STEPHEN R. PORTER, M.D.; JAMES M. ROSSELIT, D.O.; JULIA RUFFIN, D.P.M.; JODY LEE NELSON SHORT, D.O.; FRANK M. STRASEK, D.P.M.; MICHAEL G. STRAYER, M.T.; KERRIE VAN WAGONER, P.A.; MICHAEL CRAIG WARREN, D.O.; HEATHER LOUISE WHITTY, M.T.; AND TAMARA D. WILLINGHAM, M.T. DR. STEINBERGH FURTHER MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES AND THE SECRETARY AND SUPERVISING MEMBER'S RECOMMENDATIONS AS FOLLOWS FOR BOTH PROBATIONARY REQUESTS AND REINSTATEMENT REQUESTS:

- **TO GRANT RICHARD J. DEFRANCO, M.D.'S REQUESTS FOR APPROVAL OF A NEW PRACTICE PLAN TO WORK FOR PEAK HEALTH SERVICES IN CLEVELAND, OHIO AND THEN ERIE, PENNSYLVANIA UPON RENEWAL OF HIS LICENSE THERE; AND APPROVAL OF GERALD D. KLUG, M.D., TO SERVE AS THE MONITORING PHYSICIAN TO REVIEW CHARTS IN BOTH LOCATIONS;**
- **TO GRANT SANDRA K. HAREWOOD, M.D.'S REQUEST FOR APPROVAL OF ROBERT E. SMITH, M.D., TO SERVE AS THE MONITORING PHYSICIAN WITH 10 CHARTS REVIEWED PER MONTH;**
- **TO GRANT DAVID W. MASSIE, M.D.'S REQUEST FOR APPROVAL OF DAVID W. STREEM, M.D., TO SERVE AS HIS SUPERVISING PHYSICIAN;**
- **TO GRANT ALLA MIKHLI, D.P.M.'S REQUEST FOR APPROVAL OF *ICD-9 AND CPT-4 CODING*, OFFERED BY CROSS COUNTRY EDUCATION, IN FULFILLMENT OF PARAGRAPH 3(b) OF THE BOARD'S ORDER OF APRIL 11, 2007;**
- **TO GRANT THOMAS A. NGUYEN, M.D.'S REQUEST FOR A REDUCTION IN HIS REQUIRED PSYCHIATRIC SESSIONS FROM ONCE A WEEK TO ONCE PER MONTH;**
- **TO GRANT PAUL E. PANCOAST, M.D.'S REQUEST FOR A WAIVER OF HIS AUGUST 2008 PROBATIONARY APPEARANCE;**
- **TO GRANT ALAN J. PARKS, M.D.'S REQUEST FOR APPROVAL OF A MEDICAL RECORDS COURSE TAILORED FOR THE DOCTOR BY DONNA F. HOMENKO, PHD.;**
- **TO GRANT WILLIAM J. PLATT, D.O.'S REQUEST FOR APPROVAL OF HALESH M. PATEL, M.D., TO SERVE AS HIS MONITORING PHYSICIAN, WITH 10 CHARTS REVIEWED PER MONTH;**

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- **TO GRANT DALE PRATT-HARRINGTON, D.O.’S REQUEST FOR APPROVAL OF STEVEN W. CLAY, D.O., AND WHEATON B. WOOD, M.D. TO PERFORM THE TWO CHEMICAL DEPENDENCY EVALUATIONS REQUIRED PRIOR TO REINSTATEMENT;**
- **TO GRANT DAVID A. RATH, M.D.’S REQUEST FOR APPROVAL OF RANI A. LAKHI, M.D., TO SERVE AS HIS MONITORING PHYSICIAN, WITH 10 CHARTS REVIEWED PER MONTH;**
- **TO GRANT LEROY P. RISE, M.D.’S REQUEST FOR APPROVAL OF PETER P. ZAFIRIDES, M.D., TO SERVE AS HIS NEW TREATING PSYCHIATRIST;**
- **TO GRANT JON P. RYAN, D.O.’S REQUESTS FOR A REDUCTION IN DRUG SCREENS FROM ONCE A WEEK TO TWICE PER MONTH, AND A REDUCTION IN HIS APPEARANCE SCHEDULE FROM EVERY THREE TO EVERY SIX MONTHS;**
- **TO GRANT RICHARD S. SKOBLAR, M.D.’S REQUEST FOR APPROVAL OF THOMAS M. ROBB, D.O., TO SERVE AS HIS NEW SUPERVISING PHYSICIAN;**
- **TO GRANT SCOTT THOMAS STEWART, P.A.’S REQUEST FOR A REDUCTION IN HIS APPEARANCE SCHEDULE FROM EVERY SIX MONTHS TO ANNUALLY; AND**
- **TO GRANT TOBY JAMES TIPPIE, P.A.’S REQUEST FOR APPROVAL OF WILLIAM C. STERNFELD, M.D., TO SERVE AS HIS REPORTING PHYSICIAN.**

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 ACUPUNCTURE APPLICANTS LISTED IN EXHIBIT “C;” AND TO GRANT CERTIFICATES OF GOOD STANDING TO THE SCHOOLS OF MASSAGE THERAPY, LISTED IN EXHIBIT “D.” MR. BROWNING SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

“PARTNERS IN PROFESSIONALISM” PILOT PROJECT REPORT

Mr. Whitehouse advised that all of the first-year students from Ohio University’s College of Osteopathic Medicine (OUCOM) have now attended a Board meeting. He stated that he would like guidance from the Board members as to whether or not they believe there is value in this project. He referred the members to the report in the agenda materials, a copy of which shall be maintained in the exhibits section of this journal. Mr. Whitehouse stated that he thinks that this has been a successful program. He recommended that the Board no longer consider this a “pilot” and consider it a function of this Board’s mission of public protection.

Mr. Whitehouse stated that he thinks the Board should continue the program, advising that he had a very positive meeting with the people at OU, who are very interested in continuing the program. He stated that they’ve talked about the creation of some educational modules.

Mr. Whitehouse stated that the Board has also received some interest from the other medical schools. They want to know what is being done. Mr. Whitehouse stated that Board staff is looking at ways to expand this program by looking at how it can use technology to virtually bring students to Board meetings. He stated that OU has actually offered to grant the Board on some sort of permanent loan some teleconferencing equipment. OU is interested in more events like that. He stated that the Board will expand the interaction it has with students before and after their attendance at the meeting. Those will begin if the Board decides that this program is something worth continuing. The Board can use the equipment to communicate the information and provide a recording or live feed of portions of the Board meeting to students.

Mr. Whitehouse stated that reports and recommendations and probationary appearances are the key elements of what folks need to see to impress upon them those things identified as essential in this program. He stated that that can be done pretty well virtually.

Mr. Whitehouse stated that he would be glad to answer any questions Board members might have.

Mr. Browning stated that he is a big supporter of this program, but he’s trying to understand the level of value of work that has been done, either by the Board or OUCOM, to understand why this is so beneficial. Has the Board done something beyond collecting anecdotal evidence that show that the students like the program.

Mr. Whitehouse stated that, at the inception, he and Dean Brose discussed what they might do, and they were of a similar mind that this needed to be something more than a “scared straight” program. They seem to intuitively believe that there is value in beginning a relationship with students and incorporating these concepts of professionalism and ethics. He stated that they’ve also talked about how that might be measured. There are goals, which are set forth on the documentation in the agenda, and there are objectives; but how do you measure that in a meaningful way? He stated that one of the things they discussed was creating an instrument which the students would complete before they began this program, and complete at the end of their medical school education. Students would be required to complete a

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true/false examination having to do with questions related to perceptions of the Board, understanding Board activities and ethical questions to be able to measure the difference between folks coming in, experiencing the program, and then going out to become professionals.

Mr. Browning stated that he thinks that it's important, if the Board expands the program statewide, that there's a solid base of evidence, beyond perceptions of those involved, that the program is worth doing.

Mr. Albert asked whether it would pay to have some kind of handout or handbook for these students.

Mr. Whitehouse stated that that's something that figuring out how to get more information to the students has been discussed. A handbook is something that might be considered. He outlined the type of technical tools that might be available.

Dr. Steinbergh suggested having some type of questionnaire sent to a physician at any time a physician applies for licensure or a training certificate. She indicated that it wouldn't hold up a physician's getting a training certificate, but it would be evidence somewhere down the line, should that physician get into trouble, that he had the information. She added that she thinks that a questionnaire should also be prepared for those applying for licensure renewal, reinstatement or restoration.

Dr. Stephens suggested linking an ethics course to this somehow. She stated that she thinks that some of the things residents don't know, such as the fact that it's unethical to write prescriptions for family members.

Dr. Steinbergh commented that OUCOM has a professionalism program where numerous ethical and professional topics get covered.

Dr. Stephens stated that she still thinks that they need something that is more specific to what the Board does.

Mr. Whitehouse stated that the Board could probably develop a module that would affect that. There has also been discussion about developing a test on this program.

Mr. Browning suggested inviting Dean Brose to address the Board on this program.

Dr. Steinbergh commented that, at professional organization meetings, Dean Brose has presented this program in a very positive fashion. He added that he feels that the program will be expanding throughout the United States because of what Ohio is doing.

Dr. Suppan stated that rather than having the Board develop a questionnaire to evaluate what the students have learned, the College might be approached to develop something to evaluate the program. That could serve as a springboard to direct the carrying forward of the program through the other schools.

Mr. Whitehouse stated that the College has a great interest in measuring this.

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Mr. Browning stated that the Board just needs some evidence that the Board is making a positive difference, and to get the kind of feedback it needs to adjust the program as necessary, to make it better. He asked whether, in that regard, anything of significance has come out of this first year in terms of adjusting the program.

Mr. Whitehouse stated that probably the most significant thing is the need to hold the post-game meeting sooner than a month after the meeting. He added that the next time around, the follow-up assessment will be done on Friday following the meeting. Mr. Whitehouse advised that the students have been pleased by Board members' efforts to speak with them during breaks, and suggested that possibly some Board members may be able to attend the Friday follow-up meeting to answer additional questions.

Mr. Albert asked how many first-year medical students there are in the state of Ohio.

Dr. Steinbergh stated that there are approximately 700 first-year medical students in the state.

Dr. Suppan suggested that it should be expanded to the podiatry school as well.

Dr. Egner stated that she likes the program and feels that it's good. She added that to see it expand is fine. However, she believes there should be some kind of written evaluation, which could be as simple as the few points on the back of the physician's wallet card that are the points every physician should know. She stated that there are some key things the Board wants these students to walk away with, and the students should go through some sort of quiz or test to show that they understand what the Board does. She stated that she is concerned about the expense of this program. Dr. Egner added, though, that she thinks that all Board members would be willing to give up an hour of their time to do an introduction to the schools.

Dr. Suppan agreed, adding that she thinks that the Board might be able to defray expenses by asking the schools to bear part of the burden. She stated that they're set up to do marketing and putting together computer programs and websites. She stated for the Board to take that on deflects from its focus of what it does every day. Since this benefits the schools, they should do that. The Board can steer them, but they can take the onus to do these things and bear the expense.

Mr. Whitehouse stated that that's consistent with the direction of the program.

ADMINISTRATIVE REPORT

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

Mr. Whitehouse stated that a new Board member has been appointed to the Board to replace Dr. Robbins. He is Darshan Mahajan, M.D., a neurologist from Grafton, Ohio. Mr. Whitehouse stated that it is hoped that Dr. Mahajan will be at the July Board meeting.

Mr. Whitehouse stated that the Executive Committee discussed the annual retreat, and identified November as the only month the retreat might be held. He stated that staff will look into the prospect of holding the

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retreat offsite this year, adding that that is a little more conducive to a good discussion. He asked Board members to contact him with any suggestions they have for the retreat agenda.

Mr. Whitehouse advised that the Board has been notified that the Auditor will be doing an audit of the Medical Board, beginning in July or August. He added that he's not certain yet whether this is to be a fiscal or management audit.

Mr. Whitehouse advised that there will be a short orientation program for new Board members concerning enforcement issues.

Mr. Whitehouse at this time introduced Susan Loe, Administrator, Fiscal/HR/IT, who would address the Board on the proposed budget for the next biennium. He stated that the staff has identified the additional staff the Board needs, some issues with regard to the fee structure, and some clean up language needed in a couple of different areas of the medical practices act.

Ms. Loe referred to materials distributed to the Board. She stated that it's important for the Board to work on a two-year budget for FY10-11. The Board needs to project what its need will be during that time and ask for sufficient staff and funds.

Dr. Amato asked whether there was a rationale as to why anesthesiologist assistants' initial fees are lower than those of P.A.s. He stated that he thinks that they should be the same, as they are both extenders of physicians.

Dr. Stephens stated that they take up just as much of the Board's time in regulating them, so they should pay the same.

Ms. Loe stated that, as far as she knows, the fees haven't changed for a long time. She added that the fees require a statutory change.

Mr. Browning asked when the fees were last changed.

Ms. Loe stated that she doesn't know.

Dr. Varyani stated that it's been a long time.

Dr. Talmage stated that it's been about ten years.

Board members spoke in support of the concept of increasing all licensure fees. Mr. Albert commented that he believes that he could justify raising fees with the Legislature.

Ms. Loe stated that the budget is due to be filed with OBM by September 15. The Board will need to make decisions in August.

Dr. Varyani stated that there was mention about adding personnel to the Board staff. He suggested

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increasing the numbers of the enforcement attorneys and the nurses on staff. He commented that Board members would prefer to speed up the enforcement process.

REPORTS OF ASSIGNED COMMITTEES

EXECUTIVE COMMITTEE

Dr. Varyani stated that he and Mr. Miller have taken part in meetings on adverse event reporting. He commented that he has nothing further to say on that at this time.

Dr. Steinbergh stated that the Federation is reviewing its bylaws. She stated that the Bylaws Committee meets on August 20. She would like Board members to contact Ms. Wehrle should they wish to make any suggestions for bylaws change.

LEGISLATIVE LIAISON & RULES COMMITTEE

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

At this time Mr. Miller reviewed the report. He noted that Steve Robinson, M.D., and Eric Plinke, Esq. attended the Committee meeting to discuss the issue of board certification and physicians advertising as being board-certified when the specialty in which they are board-certified is not plastic surgery. The Committee members supported the development of rules addressing "truth in advertising" issues. They also discussed the possible formation of an Ad Hoc Committee to work on this matter.

Mr. Browning asked whether there is any educational requirement in H.B. 553 for surgical technologists.

Mr. Miller stated that it's very broad. It doesn't set out anything. It says that they have to be involved in a program. They would have to be certified by the National Board of Surgery Technologists and Surgical Assistants. It doesn't set out any parameters for the educational program.

Dr. Suppan stated that the surgical technician program is two years of college. She added that someone might be grandfathered in. She stated that the surgical technologist has a higher level of expectation than the surgical nurse because the surgical technician may suture.

Mr. Browning stated that he, Dr. Steinbergh, Mr. Whitehouse and Mr. Miller have been meeting with the Medical School Deans' Council for their assistance in helping the Board think through scope of practice issues. The Council agrees that the Board does have legitimate concerns. There was no "solution-related" discussion at the first meeting. There will be another meeting this summer to discuss how the Board can come up with a set of decision-making criteria for the Board and for state policy makers.

Dr. Steinbergh stated that she thinks that they were very forthcoming and understand the difficulties the Board has related to scope of practice issues.

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LICENSURE COMMITTEE

Dr. Egner advised that the Committee reviewed a number of applications.

Emad Attallah-Wasif, MD

Dr. Egner advised that Dr. Attallah-Wasif is over the seven-year time limit by six months. He passed Steps 1, 2 and 3 on the first attempt with scores of 81, 89 and 86. Dr. Attallah-Wasif has sent a letter of explanation claiming he went over the seven-year limit for USMLE because he was participating as a post-doctoral fellow/research scholar at Emory from November 2002 until June 2004, and took Part 3 in April 2004.

Dr. Egner continued that Dr. Attallah-Wasif graduated from Ain Shams University in Cairo, Egypt in June 2000. Dr. Attallah-Wasif trained at Ain Shams University as an intern and Orthopedic Surgery resident from March 2000 until October 2002. He immigrated to the U.S. and began the post-doctoral fellowship at Emory from November 2002 until June 2004. He then began training as a Surgery resident at Vanderbilt University in Nashville from July 2004 until June 2005, then continued training at Yale New Haven Hospital from July 2005 until June 2006 in General Surgery. He completed two more months as a research fellow from July 2006 until September 2006. Dr. Attallah-Wasif is now a Family Practice Resident at Akron General Medical Center from October 2006 to the present time. Dr. Attallah-Wasif holds an Ohio training license, and he does not report board-certification.

Dr. Egner stated that there was a lot of discussion as to whether to grant this physician a waiver.

Dr. Steinbergh stated that Dr. Attallah-Wasif is now a family practice resident. She asked in what year of residency he was. She stated that she would recommend approving this application.

Dr. Varyani tabled the matter to allow Ms. Rieve time to get the information Dr. Steinbergh has requested.

The matter was removed from the table upon Ms. Rieve's return with the information. She advised that Dr. Attallah-Wasif is a PGY-3. He came into the family medicine program in October 2006 as a PGY-1, but he completed his PGY-1 by February 2007. He was a PGY-2 from February 2007 to February 2008.

Dr. Steinbergh suggested that the Board approve Dr. Attallah-Wasif for license, subject to completion of his PGY-3 year.

Dr. Egner stated that under other circumstances, Dr. Attallah-Wasif fits all of the criteria the Board normally looks at for licensure. His training began at Vanderbilt and he was there for a year, and then training at Yale for a year, he completed two months as a research fellow, and now he's in a family practice residence since October 2007. She stated that she thinks that that shows a little more consistency than what the Board considered the previous day.

DR. STEINBERGH MOVED TO APPROVE DR. ATTALLAH-WASIF'S APPLICATION FOR ENDORSEMENT LICENSURE, CONTINGENT UPON ALL REQUESTED DOCUMENTS

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**BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS.
DR. EGNER SECONDED THE MOTION.** A vote was taken:

ROLL CALL:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

Jessica Bott, M.T. Applicant

Dr. Egner advised that Ms. Bott has applied to sit for the June 17, 2008 Massage Therapy examination. She has requested special accommodations under the Americans with Disabilities Act 1990. She has been diagnosed with Bipolar Disorder and Anxiety Disorder. Ms. Bott has requested a separate testing area. She is taking both the Basic Science and Limited Branches portions of the exam.

Dr. Egner stated that Ms. Bott has documented her disability by submitting letters from Margaret Messerly, M.D., Praveen Abraham, D.O. and Michelle Mather, LISW who document Ms. Bott's anxiety is greatly affected by large crowds, and that she would benefit from a separate testing area. The Committee recommends approval.

**DR. MADIA MOVED TO APPROVE MS. BOTT'S ACCOMMODATION REQUEST FOR A
SEPARATE TESTING AREA. DR. SUPPAN SECONDED THE MOTION.** A vote was taken:

ROLL CALL:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

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The motion carried.

Larry Chandler, M.T. Applicant

Dr. Egner advised that Mr. Chandler has applied to sit for the June 17, 2008, Massage Therapy examination. He has requested special accommodations under the Americans with Disabilities Act 1990. He has diabetic retinopathy, which has resulted in complete loss of vision. Mr. Chandler has requested a taped exam, extended testing time (time and a half), a dedicated proctor and a separate testing area. He is taking both the Basic Science and Limited Branches portions of the exam.

Dr. Egner stated that Mr. Chandler has documented his disability by submitting a letter from Dr. Barry Gridley which documents Mr. Chandlers' vision problems, and a letter from Debra Moody, MRC, CRC, and Acting Manager for Disability Services from Sinclair Community College. Ms. Moody has indicated that the school has provided extended testing time, audio textbooks and other accommodations for Mr. Chandler during his massage therapy classes. The Committee recommends approval.

DR. MADIA MOVED TO APPROVE THE ACCOMMODATION REQUEST FOR A TAPED EXAM, EXTENDED TESTING TIME (TIME AND A HALF), A DEDICATED PROCTOR AND A SEPARATE TESTING AREA. DR. STEPHENS SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

April Huber, M.T. Applicant

Dr. Egner advised that Ms. Huber has applied to sit for the June 17, 2008 Massage Therapy examination. She has requested special accommodations under the Americans with Disabilities Act 1990. She has been diagnosed with a Learning Disability and Attention Deficit Disorder. Ms. Huber has requested a taped exam, extended testing time (time and a half), and a separate testing area. She is taking both the Basic Science and Limited Branches portions of the exam. Ms. Huber has documented her disability by submitting her IEP from Ogle County Educational Cooperative in Byron, Illinois, which documents she was given extended testing time, a reader, or audio tapes during her high school education. The Committee recommends approval.

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DR. MADIA MOVED TO APPROVE THE ACCOMMODATION REQUEST FOR A TAPED EXAM, EXTENDED TESTING TIME (TIME AND A HALF), AND A SEPARATE TESTING AREA. DR. STEPHENS SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Robert Robison, M.D.

Dr. Egner stated that Dr. Robison has applied for licensure in Ohio. Dr. Robison has indicated that he has not been engaged in the clinical practice of medicine since March 1991. He is currently employed as the Vice President of Medical Affairs for Buckeye Community Health Plan. Dr. Egner advised that Dr. Robison was recently ordered to take either the SPEX exam or show evidence that he took an examination to recertify his Family Medicine Boards in 2005. Dr. Robison received the Board's final order, and is now submitting the evidence of his Board recertification. The Committee recommends approval.

DR. TALMAGE MOVED TO ACCEPT DR. ROBISON'S DOCUMENTATION AS EVIDENCE OF RECENT AMERICAN BOARD RECERTIFICATION AND GRANT HIM A LICENSE IN OHIO, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS. DR. STEPHENS SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye

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Dr. Steinbergh - aye
 Dr. Varyani - aye

The motion carried.

Jerry Seymour, M.T. Applicant

Dr. Egner advised that Mr. Seymour has applied to sit for the June 17, 2008, Massage Therapy examination. He has requested special accommodations under the Americans with Disabilities Act 1990. He has diabetic retinopathy, which has resulted in complete loss of vision. Mr. Seymour has requested a taped exam, extended testing time (time and a half), a dedicated proctor and a separate testing area. He is taking both the Basic Science and Limited Branches portions of the exam.

Dr. Egner stated that Mr. Seymour has documented his disability by submitting a letter from Linda Fleming-Willis, the Director of Administration at the American Institute of Alternative Medicine. She has indicated that the school has provided extended testing time and assistance from a reader and in completing the test answer sheets. The Committee recommends approval.

DR. MADIA MOVED TO APPROVE THE ACCOMMODATION REQUEST FOR A TAPED EXAM, EXTENDED TESTING TIME (TIME AND A HALF), A DEDICATED PROCTOR AND A SEPARATE TESTING AREA. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

Muhammad Z. Shrayyef, M.D.

Dr. Egner advised that Dr. Shrayyef has requested a waiver of the U.S.M.L.E. seven-year rule for good cause. Dr. Shrayyef is over the seven-year time limit by 33 months. He passed Steps 1 (October 1997) and 2 (March 1998) on the first attempts with scores of 80 and 81, and Step 3 on the third attempt (July 2006) with an 85. Dr. Shrayyef has advised that he is over the seven-year limit because it took time to acquire a VISA.

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Dr. Egner stated that the Board has not generally accepted this as good cause in the past. The difference in this case is that Dr. Shrayyef was board-certified in internal medicine in 2006. She stated that there was a lot of discussion on this case at the Committee level. The Committee does recommend denial of Dr. Shrayyef's request.

DR. MADIA MOVED TO PROPOSE TO DENY DR. SHRAYYEF'S REQUEST FOR A WAIVER OF THE SEVEN-YEAR RULE ON THE BASIS THAT HE DID NOT PRESENT GOOD CAUSE. DR. STEINBERGH SECONDED THE MOTION.

Dr. Madia noted that Dr. Shrayyef has been in the United States since 2000, so his VISA is not an issue.

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

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Audrey Spangler, M.T. Applicant

Dr. Egner advised that Ms. Spangler has applied to sit for the June 17, 2008 Massage Therapy examination. She has requested special accommodations under the Americans with Disabilities Act 1990. She has been diagnosed with a Learning Disability in reading. Ms. Spangler has requested a taped exam, extended testing time (time and a half), and a separate testing area. She is taking both the Basic Science and Limited Branches portions of the exam.

Dr. Egner noted that Ms. Spangler has documented her disability by submitting the results of a Learning Disability Assessment done by Eric Nicely, PhD. He indicates that Ms. Spangler does show a reading disorder, and suggests accommodations that allow verbal-audio aides, and extended testing time. The Committee recommends approval.

DR. TALMAGE MOVED TO APPROVE THE ACCOMMODATION REQUEST FOR A TAPED EXAM, EXTENDED TESTING TIME (TIME AND A HALF), AND A SEPARATE TESTING AREA. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

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ROLL CALL:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

Lora Lee Clear, M.T.

Dr. Egner advised that Ms. Clear has applied for restoration of her LM.T. license in Ohio. Ms. Clear has indicated on her application for restoration that she has not actively practiced Massage Therapy since 2005. Dr. Egner advised that the Committee recommends approving her request for restoration of her Ohio massage therapy license, subject to passing an exam.

DR. EGNER MOVED TO APPROVE MS. CLEAR'S REQUEST FOR OHIO LICENSURE SUBJECT TO SUCCESSFUL COMPLETION OF THE LIMITED BRANCH PORTION OF THE MASSAGE EXAMINATION. DR. MADIA SECONDED THE MOTION. A vote was taken:

ROLL CALL:

Mr. Albert	- aye
Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Suppan	- aye
Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- aye
Dr. Amato	- aye
Dr. Stephens	- aye
Dr. Steinbergh	- aye
Dr. Varyani	- aye

The motion carried.

Jenny E. Van Pelt, M.T.

Dr. Egner advised that Ms. Van Pelt has applied for restoration of her LM.T. license in Ohio. Ms. Van Pelt has indicated on her application for restoration that she has not actively practiced Massage Therapy since 2005. Dr. Egner stated that the Committee recommends approving her request for restoration of her Ohio

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massage therapy license, subject to passing an exam.

DR. EGNER MOVED TO APPROVE MS. VAN PELT'S REQUEST FOR OHIO LICENSURE SUBJECT TO SUCCESSFUL COMPLETION OF THE LIMITED BRANCH PORTION OF THE MASSAGE EXAMINATION. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

Samir Harshadbhai Shah, M.D.

Dr. Egner advised that Dr. Shah is over the seven-year time limit by three months. He passed Step 1 on the second attempt with a score of 82, Step 2 on the first attempt with a 77, and Step 3 on the third attempt with a 78. Dr. Shah submitted a letter explaining that he went over the seven-year limit for USMLE because of the sudden death of his grandparents in 2005 and 2006, and the birth of his two children.

Dr. Egner advised that the Committee recommends approving Dr. Shah's request.

DR. MADIA MOVED TO GRANT DR. SHAH THE LIMITED EXCEPTION OF THE SEVEN-YEAR RULE AS OUTLINED IN 4731-6-14(C)(3), AND TO ACCEPT HIS EXAMINATION SEQUENCE IN ORDER FOR HIM TO BE GRANTED A LICENSE, CONTINGENT UPON ALL REQUESTED DOCUMENTS BEING RECEIVED AND APPROVED IN ACCORDANCE WITH LICENSURE PROTOCOLS. DR. STEPHENS SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye

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Dr. Steinbergh - aye
Dr. Varyani - aye

The motion carried.

PRESCRIBING COMMITTEE

Dr. Stephens stated that the Committee discussed the Board appointments to the Nursing Board's Committee on Prescriptive Governance.

DR. STEPHENS MOVED TO APPOINT DEBORAH L. COLE-SEDIVY, D.O., AND GEORGE P. PETTIT, M.D., TO THE NURSING BOARD'S COMMITTEE ON PRESCRIPTIVE GOVERNANCE. MR. HAIRSTON SECONDED THE MOTION. A vote was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- aye
	Dr. Stephens	- aye
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

IMPAIRMENT COMMITTEE

Mr. Albert stated that Board members will be mailed copies of proposed rules governing massage therapists and cosmetic therapists. He stated that this will be mailed prior to the next meeting or in the agenda package. He asked Board members to read this over and contact him or staff. He stated that these will be on the Board agenda for July, at which time he would like the Board members to vote on them.

Mr. Browning stated that, in many ways, the Board is looking at these rules in response to an economic problem on the part of the licensees, many of whom are working part-time doing other things, have modest incomes and cannot absorb the cost of 28 days of inpatient treatment. Yet, there are others with economic problems. Mr. Browning stated that he can just see some physician coming in who is in trouble financially, asking why limited branch practitioners can go through an abbreviated process at a huge savings, but not for the physician with financial difficulties. Mr. Browning stated that the Board sees physicians all the time with financial problems.

Mr. Albert stated that you have to draw a sharp line between massage and cosmetic therapists and

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physicians. Almost all of the treatment centers will make payment arrangements for physicians. He added that the work the two limited branch practitioners do is different from what a physician or P.A. does. An impaired physician or P.A. could present a greater harm for the public.

Mr. Browning stated that the Board just needs to have a very clear rationale. Mr. Browning also asked that the Board attempt to get information as to whether the mandated 28-day program really works.

Dr. Steinbergh stated that she has the same concerns as Mr. Browning. She stated that there has to be an extremely strong demarcation because there is no question in her mind that there will be a physician who will challenge this in the courts. She pointed out that massage therapists use their licenses in a very dramatic way. Not too many state medical boards license massage therapists. In their advertising and in the way they feel about themselves professionally, they're very proud of the fact that they're licensed by the State Medical Board of Ohio. They have to meet professional standards in order to get a license from this Board. Dr. Steinbergh stated that there are programs that will do a sliding scale, dependent on one's income. If the Board feels strongly in the 28-day program, she doesn't understand why the Board should separate the limited branches out. Dr. Steinbergh stated that she doesn't disagree about the finances with that, nor does she disagree with the fact that they are not doing patient care. She added, however, that physicians prescribe medical massage therapy. If she gives a prescription to a patient because she believes that he or she would do well with massage therapy for musculoskeletal purposes, the prescription includes a diagnosis and what areas to emphasize and how long the treatments should last. She stated that that's a legitimate prescription and that person is filling the prescription, no different from getting an x-ray or prescription for medication. She treats it in the same way. The insurance companies, if they have benefits for massage therapy, will treat it that way. Dr. Steinbergh stated that the Board has to uphold the professionalism. It can't say that the massage therapists aren't as important and therefore we don't think that your impairment is as important. She has that conflict.

Mr. Albert stated that these are all legitimate questions, but massage therapists just don't have the ability to pay for that treatment. There are some treatment providers with sliding scales, such as COMPASS and Maryhaven. He added, however, that Maryhaven notified him that they will no longer take people under 28 days. Mr. Albert stated that he's thought long and hard about these rules. Mr. Albert stated that the rules will also provide for a shorter term evaluation. He added that he met with Theodore V. Parran, M.D., and Frederick N. Karaffa, M.D., about these rules. He stated that both Dr. Parran and Dr. Karaffa gave the Board a lot of input on these rules, and he believes they had no problem with the way the Board is handling this.

Dr. Amato stated that he thinks that there is a clear distinction, and Dr. Steinbergh just explained it. The physician is writing the prescription for the massage therapy. The massage therapist is following directions. Dr. Amato stated that the Board's task is not to guarantee low costs to the Board's licensees. He added, however, that the Board does have the ability to make adjustments for the degree of responsibility. He stated that he's never had a massage in his life, but he would think that if he was getting a massage by an intoxicated massage therapist, there's little chance of him or her actually hurting him. If he has an intoxicated orthopedic surgeon replacing his knee, he might be in big trouble. Dr. Amato noted that the Board's charge is to take care of the citizens of the State of Ohio, and he doesn't see an equality of the degree of risk for Ohio's citizens.

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Dr. Amato continued that, early on in this process, Mr. Albert got specific answers to the questions concerning the outcome data of the accelerated three-day course versus the 28-day course, and the response was that the data from the three-day intensive course is pretty good. It's not as good as the 28-day course, but pretty comparable. Dr. Amato added that the Board has to keep in mind that these individuals are on probation, the Board is going to be monitoring them. If, in fact, a year down the road or six months down the road the Board sees a 90% relapse rate, the Board may want to reevaluate. By the same token, if perhaps two years down the road the Board sees a relapse rate no different than for those who completed a 28-day course, the Board may want to start looking at physicians going to the three-day course.

Dr. Amato stated that he doesn't see a massage therapist making decisions. They are following instructions, as he understands it.

Dr. Steinbergh stated that he agrees with Dr. Amato concerning the level of responsibility, but she does still believe, when they're licensed by this Board, in terms of professionalism, that it would be a bad mark on the Board to have a front page story about a massage therapist being drunk while seeing all these people and being licensed by the State Medical Board. She stated that she wants to protect the value of the license of this Board.

Mr. Albert stated that he thought long and hard about this and it goes completely contrary to his evaluation of someone impaired by alcohol or drugs; but, saying that, he and staff haven't been able to come up with anything better.

Dr. Varyani stated that, as long as the Board is open to further modification if needed, he is for trying this course.

Ms. Anderson stated that she has consulted with addictionologists in the state, and they have said that treating physicians is a little more difficult than treating non-physicians in the level of denial. Getting the physicians into the 28-day program away from their practice is really vital in treating that group of individuals. That's another reason why the 28 days is necessary for physicians and may not be as necessary for non-physicians because there may not be that intellectual capacity and the denial issues.

Dr. Steinbergh stated that that's a good point.

Dr. Amato stated that another issue that concerns him is that the facilities that are doing the initial evaluations are also the facilities that will do the 28 day treatment. He stated that that seems to him that there may be an incentive to over diagnose. He suggested that if facility A is doing the evaluation, the patient should be mandated to go to facility B for his 28 days.

Mr. Albert stated that that's come up before. He stated that Dr. Parran would like some centers around the state where people could go just for an evaluation.

Dr. Steinbergh stated that she appreciates the concept of conflict of interest. The Board has discussed that in the past.

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Ms. Anderson stated that the Board does have a rule that prohibits an evaluating treatment provider from requiring the patient to take the 28-day treatment at that facility.

P.A. COMMITTEE

Dr. Talmage stated that the P.A. Committee met and reviewed three Special Services Plans.

Advanced Dermatology & Dermatopathology, Inc.

Dr. Talmage stated that the Committee reviewed the above-captioned's request for its P.A.s to perform electrodesiccation and/or curettage of superficial skin lesions and cryotherapy of very superficial benign and pre-cancerous lesions. Dr. Talmage stated that the group met the criteria, per the PAPC, that the patient be evaluated pre- and post-procedure. Dr. Talmage stated that the Committee recommends approval of both procedures.

DR. TALMAGE MOVED TO APPROVE ADVANCED DERMATOLOGY & DERMATOPATHOLOGY, INC'S SPECIAL SERVICES PLANS FOR ITS P.A.S TO PERFORM ELECTRODESSICATION AND/OR CURETTAGE OF SUPERFICIAL SKIN LESIONS AND CRYOTHERAPY OF VERY SUPERFICIAL BENIGN AND PRE-CANCEROUS LESIONS, IN AN OFFICE SETTING, UTILIZING 20% DIRECT AND 80% ONSITE SUPERVISION WITH THE P.A. OBSERVING THE PHYSICIAN PERFORM 50 PROCEDURES AND THE PHYSICIAN OBSERVING THE P.A. PERFORM NO LESS THAN 50 PROCEDURES TO DETERMINE COMPETENCY. DR. STEINBERGH SECONDED THE MOTION. The majority of Board members voted aye, with one or two voting nay.

Dr. Stephens stated that she would have liked a little discussion before the vote. She noted that the plan states that the P.A.s are allowed to remove the lesions as long as a physician evaluates it before and after. She stated that she has a problem with that. The "before" evaluation is fine, but oftentimes the "after" evaluation can be obscured by swelling, edema, redness, and/or sutures. She doesn't think that that is something the P.A. should be doing. She thinks that, if you're going to cut, you should be a physician.

Dr. Steinbergh stated that she doesn't think anyone disagrees. She added that for years the Board has allowed P.A.s to do excisions, laceration repairs in various forms. She referred to the list of times that the Board approved this type of procedure. This application was held up a bit to make certain that we did have a physician evaluating the lesion beforehand to make certain that the lesion should be removed, knowing that the doctor is onsite 80% of the time and directly supervising 20% of the time.

Dr. Stephens stated that she doesn't care that the physician is watching 20% of the time, he's not watching 80% of the time. She stated that it's her opinion that the physician should do this procedure. It's very difficult after a lesion is excised to really tell where the margins or the borders were or are. She stated that if she goes in a room and sees a lesion and then comes back 20 minutes later after seeing patients and having lots of other stuff in her head, she doesn't know that she's going to have perfect memory as to the borders and the this and the that of that lesion. She does not think that a P.A. should be performing

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excisions.

Dr. Varyani stated that the Board has allowed this. He reminded the Board that the person requesting for the P.A.s to do this is the surgeon. He again stated that the Board has approved this before, and asked upon what grounds the Board is going to say, "no."

Dr. Stephens stated that the Board can reconsider this. She added that people change their minds all the time. They reconsider it, think about it some more, and decide that it's not a good idea.

Mr. Browning stated that Dr. Stephens is getting into legitimate issues in his mind. The Board has this huge arena of P.A.s doing a million and one things, and then the Board starts signing off on them doing it, and before you know it, that is used against the Board. People could go to court and say that the Board signed off on these people doing these procedures up and down the state, and now, through some suggestive moment in time, you've decided I can't do it, and that's not right. Mr. Browning stated that his sense is that, if the Board starts giving things away, it can't take them back. That doesn't mean that Dr. Stephens is wrong. He's just saying that this is part of a huge arena of health care being expanded out. The Board has this whole history, this is just the tip of the iceberg.

Dr. Amato stated that he agrees with Dr. Stephens that historical perspective is important. But if, in fact, the Board has started down a path that is not correct, it doesn't mean that the Board can't turn around and go back up the path. Dr. Amato stated that he has to wonder whether the twelve members of this Board ought to consider one of those three-day evaluations. He can recall in Committee where someone with four years of college, four years of medical school, four years of residency in family practice or OB/GYN shouldn't be doing plastic surgery. He stated that this plan is allowing someone with, perhaps, two years of nursing training and six months of P.A. training to perform desiccation and removal of skin lesions, which is a form of plastic surgery. He stated that the Board is schizoid and needs the three-day evaluation.

Dr. Varyani stated that he has an answer to that. These guys go in, big institutions go in, the surgeons go in themselves, saying "I have trained these guys. I know they can do it as well as I can do it. I could be doing something else." And then the Board allows 50 of those groups to do it. And the Board sits here today, as a medical board, and it has no authority if the legislature says, "yes, you can do it." The Board is basically here to make rules relating to whatever the legislature has allowed them to do. Today the Board is discussing how to back away from those rules? Dr. Varyani stated that he doesn't believe that it was the Medical Board that decided to do it.

Dr. Amato asked why the Board is regulating it.

Dr. Steinbergh stated that in May the Board did change its mind about a urological procedure.

Mr. Browning added that the Board has done that in other cases.

Dr. Steinbergh stated that the Board does now have a layer between the legislature and this Board, and that is the PAPC. They are to advise the Board as to what P.A.s may or may not do, and they seem to be appropriately conservative in their evaluations. They look to see whether the P.A. has been properly

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educated to do this.

Mr. Browning stated that it is contentious. The Board was at its scope of practice meeting and someone from Ohio State stated that there's no evidence that because you watch someone else do a procedure 25 times means anything. It doesn't mean anything. But that's what the Board uses.

Dr. Suppan stated that there's no evidence for a lot of what physicians do, as physicians, either. That's the whole movement towards evidence-based medicine. Going back to the P.A., in defense of the profession of P.A.s, it doesn't come from the nursing side. It's a P.A. degree, where they go to a four-year program.

Mr. Browning added that now they have to have a master's degree.

Dr. Suppan stated that it's much more than a two-year RN degree and a six-month advanced training. She added that the Board needs to keep this relatively on par with the Advanced Practice Nursing, which is also usually a BSN, followed by a master's degree.

Dr. Amato asked whether that's a requirement.

Dr. Stephens stated that it doesn't matter what their college education is. She thinks that Dr. Amato has a perfectly good argument for the current frame of consistency. Yesterday, in Committee, the Board was talking about family practitioners, OB/GYNs, and ER doctors not being qualified to do plastic surgery, but all of a sudden a P.A. is qualified? Dr. Stephens stated that she tries to treat everyone like she would treat her mother. She indicated that she would not want her mother's lesion removed by a P.A.

Dr. Suppan stated that there's one big difference. The family practitioner doing plastic surgery is practicing independently; the P.A. is not. The Board has to decide on how much independence the Board can give him and on what procedures. That's risk-based. She added that she personally agrees with what Dr. Stephens said about the risk of evaluating the lesion and whether it can be appropriately evaluated after it's been excised. She thinks it's a case-by-case situation. That's what falls to the Board. The Board has to look at each scenario, each type of treatment, look at the amount of risk and ask what degree of independence this P.A. can have.

Dr. Stephens stated that what the Board really needs to look at is patient safety. She stated that she doesn't think that this is safe.

Dr. Varyani stated the previous vote was taken before there was a chance for discussion. He asked for another vote on this matter now that discussion has been concluded.

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

ROLL CALL:	Mr. Albert	- nay
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye

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Dr. Madia	- aye
Mr. Browning	- aye
Mr. Hairston	- nay
Dr. Amato	- nay
Dr. Stephens	- nay
Dr. Steinbergh	- aye

The motion carried.

Tri-County Dermatology

Dr. Talmage stated that this group has requested approval for its P.A.s to do excisional biopsies/excision of skin lesions. The Committee recommends approval of the request, providing that the physician evaluate the patient prior to having the procedure done.

DR. TALMAGE MOVED TO APPROVE TRI-COUNTY DERMATOLOGY SPECIAL SERVICES PLAN FOR ITS P.A.S TO PERFORM EXCISIONAL BIOPSIES/EXCISION OF SKIN LESIONS, IN AN OFFICE SETTING, PROVIDING THE PHYSICIAN EVALUATES THE PATIENTS PRIOR TO THE PROCEDURE BEING DONE, AND UTILIZING 5% DIRECT AND 95% ONSITE SUPERVISION, WITH THE P.A. OBSERVING THE PHYSICIAN PERFORM 100 PROCEDURES AND THE PHYSICIAN OBSERVING THE P.A. PERFORM NO LESS THAN 100 PROCEDURES TO DETERMINE COMPETENCY.

Dr. Egner asked whether the Board has approved this in the past.

Dr. Talmage stated that it has not. He stated that it was denied in the past year because of the number of procedures the P.A. would first observe and the number of procedures the physician would observe the P.A. performing. Those numbers were 25 and 25 in one case and 30 and 30 in another. This one is 100 and 100.

Dr. Egner stated that she did vote to approve the previous request, mainly because of the consistency issue. She added that the Board has had this discussion many, many times. It denied approving the procedure in 2006, and she doesn't feel differently about it today.

Dr. Steinbergh stated that her feeling about this particular case was that the P.A. was very well trained. However, the Board can't approve a plan for just this P.A. If the Board approves it, it will be across the board. She stated that it was a big concern of hers.

Dr. Varyani stated that since the Board hasn't allowed this before, if the Board allowed it now, it would be allowing it later on, too.

Dr. Egner stated that the Board has to answer this question. When the Board denies something, it opens the door for this to go to hearing. If this were to go to hearing, just to say the Board hasn't allowed it before, the Board won't prevail on that argument. What are the other reasons for denying? Dr. Egner stated that

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her reasons are that, for her, a diagnosis of cancer takes medical treatment to a new level. There is a lot of judgment associated with it, there is a lot of responsibility associated with it, there is education, follow-up care, and perhaps more treatment. She stated that she wants dermatologists to practice dermatology in the same way that she practices gynecology. In this case, she doesn't think that it is appropriate for the P.A.

Dr. Stephens stated that her opinions haven't changed. Just like before, sometimes when you take a superficial lesion off, you can find at the time that it's not superficial anymore, that it's deep. Dr. Stephens asked what the point is in her being here at all if the Board is going to be so tied to the historical record and how it voted before. She stated that she thinks that consistency is good; however, she doesn't think that that's a reason to vote "yes" or to vote "no."

Dr. Amato stated that excisional biopsy means removal of disease. On the skin, you're talking about removal of cancer a lot of times. If a physician doesn't remove lesions, he or she will refer the patient to very reputable plastic surgeons, dermatologists, or whomever. Extremely well trained reconstructive surgeons have the patient come back because the surgeon didn't dig deep enough. Dr. Amato stated that he wouldn't want his wife, daughter or granddaughter having her malignant melanoma removed by a P.A. He stated that that's a recipe for death.

Ms. Debolt stated that she just wanted to point out that in the P.A. rules for approval of special services plans, there are nine criteria that the Board may consider, including, but not limited to, things like: the "performance of the service will likely require complex observations or critical decision-making;" "Whether the potential complications that may occur if the service is not performed properly will likely include life threatening consequences or the danger of immediate and serious harm to the patient;" "Whether medical judgment requiring the exclusive expertise and training of a physician must ordinarily be exercised during the performance of the service." There are criteria the Board might consider.

Dr. Varyani stated that the Board denied the same thing in March 2006. It was denied at that time based on the procedure being one that requires a physician's decision-making.

Dr. Egner stated that she thinks that her comments speak to what Ms. Debolt just read from the rules.

Dr. Varyani asked for a vote on the motion to approve.

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

ROLL CALL:	Mr. Albert	- nay
	Dr. Egner	- nay
	Dr. Talmage	- nay
	Dr. Suppan	- nay
	Dr. Madia	- nay
	Mr. Browning	- nay
	Mr. Hairston	- nay
	Dr. Amato	- nay
	Dr. Stephens	- nay

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Dr. Steinbergh - nay
Dr. Varyani - nay

The motion failed.

Faith Medical Associates

Dr. Talmage advised that the Committee reviewed the above-captioned's request for its P.A.'s to perform non-invasive cardiovascular studies, i.e., stress tests, and recommends approval. Dr. Talmage stated that this procedure has been approved in the past.

DR. TALMAGE MOVED TO APPROVE FAITH MEDICAL ASSOCIATES' P.A. SPECIAL SERVICES PLANS FOR ITS P.A.S. TO PERFORM NON-INVASIVE CARDIOVASCULAR STUDIES, STRESS TESTS, IN AN OFFICE SETTING, UTILIZING 100% ONSITE SUPERVISION WITH THE P.A. OBSERVING THE PHYSICIAN PERFORM 50 PROCEDURES AND THE PHYSICIAN OBSERVING THE P.A. PERFORM NO LESS THAN 50 PROCEDURES TO DETERMINE COMPETENCY. DR. STEINBERGH SECONDED THE MOTION.

Dr. Egner referred to the Board's history on this procedure, noting that it has both approved and denied the request in the past, depending on what the supervision is and what the criteria are.

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

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Suppan	- aye
	Dr. Madia	- aye
	Mr. Browning	- aye
	Mr. Hairston	- aye
	Dr. Amato	- nay
	Dr. Stephens	- nay
	Dr. Steinbergh	- aye
	Dr. Varyani	- aye

The motion carried.

MINIMAL STANDARDS COMMITTEE

Dr. Varyani stated that in May the Committee discussed Anodyne Therapy and the Board decided that it would separate Anodyne Therapy and light-based devices. The Committee felt it would be appropriate to create an Ad Hoc Committee on Light-Based Medical Devices. He asked Ms. Debolt to address the Board.

Ms. Debolt stated that what is being suggested is an ad hoc committee made up of members of: the

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Medical, Nursing, and Cosmetology Boards; practitioners of plastic surgery, general practice, and dermatology; a nurse; and an esthetician. It would be an eight-member ad hoc committee to advise the Minimal Standards Committee on how to look at the light-based medical device rules. She noted that the current rule is very broad. It covers basically every kind of light-based medical device, whether it be a class 1, class 2 or class 3 device. She stated that the Committee would like to have rules that are enforceable, are realistic, and that protect the public.

Dr. Varyani stated that he doesn't want to have an ad hoc committee discussing lasers and all that. All he wants the committee to do is separate non-laser devices, like anodyne, and say, yes, you can use it.

Dr. Suppan stated that there's a bigger issue. She stated that she has two years of experience working in the medical device industry. The concern is that anything the Board approves, whether it's approval of the usage or approval of the perceived safety, if there had been no clinical trials on that device, the Board is taking a big departure from evidence-based medicine. She stated that she's very concerned about the Board providing any kind of endorsement, whatsoever, on non-FDA approved or non-clinical trial devices.

Dr. Varyani stated that he doesn't think that the Board's job is to endorse a device.

Mr. Miller stated that these rules are up for five-year rule review, and the Board has to do something. He noted that Ms. Debolt gets an enormous number of inquiries regarding what people can and cannot do related to light-based devices.

Dr. Varyani stated that before the Committee is formed, he would like to sit down with Ms. Debolt and Mr. Miller. His thinking was that they were going to separate the Anodyne light from lasers, and then it would be done. If it's an issue bigger than that, he would rather wait to assign a Committee.

Ms. Debolt stated that the Anodyne procedure was considered at the Committee level last week and the Committee felt that the rule might need to be amended. She added that her preliminary investigation of that is that the Board will have to be very careful in wording the rule, so that it doesn't open the floodgates.

Dr. Varyani at this time tabled the matter, adding that he will discuss this with Ms. Debolt.

Mr. Miller stated that when the Board begins revising the rule, it will go out for public comment and all these people who have contacted the Board on topics such as hair removal, etc., will come in and the Board will be forced to address the issue, whether it wants to or not.

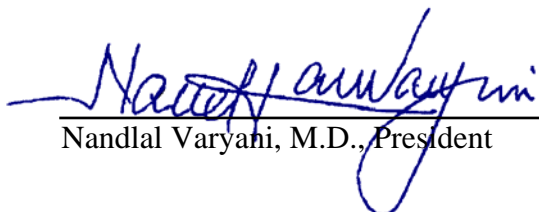
Dr. Varyani stated that he understands, but he wants to understand the problems and be able to answer the people before he gets into it. He doesn't want to get into it unprepared.

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

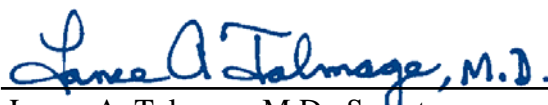
Thereupon at 11:20 a.m. on June 12, 2008, the June 11-12, 2008 meeting of the State Medical Board of Ohio was duly adjourned.

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We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio, meeting on June 11-12, 2008, as approved on July 9, 2008.



Nandlal Varyani, M.D., President



Lance A. Talmage, M.D., Secretary

(SEAL)

