

April 10, 2002

MINUTES

THE STATE MEDICAL BOARD OF OHIO

April 10, 2002

Pitambar Somani, M.D., President, called the meeting to order at 1:30 p.m., at the Vern Riffe Center for Government and the Arts, 77 S. High St., Columbus, Ohio 43215-6127, Room #1932, with the following members present: R. Gregory Browning, Ph.D., Vice-President; Anand G. Garg, M.D., Secretary; Raymond J. Albert, Supervising Member; Carol L. Egner, M.D.; Lance A. Talmage, Sr., M.D.; Anant R. Bhati, M.D.; David S. Buchan, D.P.M.; Anquetette Sloan; Ronald C. Agresta, M.D.; and Anita M. Steinbergh, D.O.

Also present were: Thomas A. Dilling, Executive Director; William J. Schmidt, Assistant Executive Director; Terrill D. McLaughlin, Assistant Director, Investigations; Lauren Lubow, Communications Administrator; Diann K. Thompson, Assistant Director, Public Services & Enforcement; Lori S. Gilbert, Chief Enforcement Coordinator; Emily M. Brown, Marcie P. Burrow, David P. Katko, Rebecca J. Marshall and Karen H. Mortland, Enforcement Coordinators; Rebecca J. Albers, Mark A. Michael, and Kyle C. Wilcox, Assistant Attorneys General; Eileen M. Schmidt, Executive Assistant to the Director; Joan K. Wehrle, Coordinator for Assessment and Development; Candi Pollit-Susey and Rochelle A. Kotula, Quality Intervention Assistants; Danielle Bickers, Compliance Officer; Mark Wayda, Public & Government Affairs Officer; Jacqueline A. Moore and Annette Jones, Disciplinary Information Assistants.

EXECUTIVE SESSION

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

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- 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: R. Gregory Porter, Chief Hearing Examiner, and Daniel J. Roberts, Hearing Examiner.

MINUTES REVIEW

DR. STEINBERGH MOVED TO APPROVE THE MINUTES OF MARCH 13-14, 2002.
DR. BUCHAN SECONDED THE MOTION. A vote was taken

VOTE:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

Dr. Garg left the meeting at this time.

REPORTS AND RECOMMENDATIONS

Dr. Somani announced that the Board would now consider the findings and orders appearing on the Board's agenda.

Dr. Somani asked whether each member of the Board had received, read, and considered the hearing record, the proposed findings, conclusions, and orders, and any objections filed in the matters of: David A. Dougherty, D.O.; Rosemarie Fernandez, M.D.; and Gerard Jirka, P.A. A roll call was taken:

ROLL CALL:	Mr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye

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Dr. Agresta - aye
Dr. Steinbergh - aye
Dr. Somani - aye

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

ROLL CALL:

Mr. Albert - aye
Dr. Egner - aye
Dr. Talmage - aye
Dr. Bhati - aye
Dr. Buchan - aye
Mr. Browning - aye
Ms. Sloan - aye
Dr. Agresta - aye
Dr. Steinbergh - aye
Dr. Somani - aye

Dr. Somani noted that, in accordance with the provision in Section 4731.22(F)(2), Revised Code, specifying that no member of the Board who supervises the investigation of a case shall participate in further adjudication of the case, the Secretary and Supervising Member must abstain from further participation in the adjudication of these matters.

Dr. Somani stated that if there were no objections, the Chair would dispense with the reading of the proposed findings of fact, conclusions and orders in the above matters. No objections were voiced by Board members present.

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

DAVID A. DOUGHERTY, D.O.

Dr. Somani directed the Board's attention to the matter of David A. Dougherty, D.O. He advised that objections were filed to Hearing Examiner Murphy's Report and Recommendation and were previously distributed to Board members.

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

Dr. Dougherty was accompanied by his counsel, Eric J. Plinke.

Mr. Plinke advised that they have filed objections to the Hearing Examiner's Report and Recommendation, limited to one particular issue. Mr. Plinke reminded the Board that Dr. Dougherty relapsed early last

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summer and hasn't practiced medicine since the relapse. He went through the hearing process, and that is why they are before the Board today.

Dr. Dougherty thanked the Board for hearing him today. He asked that the Board accept the proposal arbitrated. In the past year he has gone bankrupt, he's getting a divorce, and he has no house. The reason he's here now and not three months ago was because he had a disability policy that was unclear. His claim was approved, so at this point he feels that he is economically able to make the commitment to sign the contract and follow through with it; whereas, a few months ago, if he didn't have any money, house or means of support, he could sign the agreement but he wouldn't have the means to do the urine testing, the screening, etc., and he doesn't think that that would have been a reasonable or legitimate thing to do.

Dr. Dougherty concluded by stating that he would be glad to answer any questions the Board might have.

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

Ms. Albers stated that she believes that the Hearing Examiner did an excellent job in setting out the evidence that was introduced at hearing. As far as Dr. Dougherty's objections are concerned, Dr. Dougherty had asked that the Board consider the treatment already completed, or let the next treatment provider decide whether or not the treatment he has received should count towards the 28 days. Ms. Albers directed the Board's attention to the number of treatments Dr. Dougherty had undergone prior to his relapse. Ms. Albers urged the Board to adopt the Hearing Examiner's Report and Recommendation requiring the 28-day inpatient treatment.

DR. TALMAGE MOVED TO APPROVE AND CONFIRM MS. MURPHY'S PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF DAVID A. DOUGHERTY, D.O. DR. BUCHAN SECONDED THE MOTION.

Dr. Buchan commended the Hearing Examiner on the record, stating that she did a nice job of stating the facts. This is another sad tale of impairment. Dr. Buchan commented that he's still not sure that Dr. Dougherty understands the gravity of his condition and the seriousness with which the Board takes its job to ensure public protection from impaired physicians.

DR. BUCHAN MOVED TO AMEND PARAGRAPH A OF THE PROPOSED ORDER BY SUBSTITUTING THE FOLLOWING:

STAYED PERMANENT REVOCATION; SUSPENSION OF CERTIFICATE: The certificate of David A. Dougherty, D.O., to practice osteopathic medicine and surgery in the State of Ohio shall be PERMANENTLY REVOKED. The permanent revocation is stayed, and Dr. Dougherty's certificate is SUSPENDED for an indefinite period of time, but not less than eighteen months.

DR. STEINBERGH SECONDED THE MOTION.

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Dr. Steinbergh stated that Dr. Dougherty violated his consent agreement. She stated that the stayed permanent revocation is appropriate.

Dr. Bhati stated that he thinks that Dr. Dougherty has no idea how much trouble he's in. He added that he is very concerned about this physician, who has undergone inpatient treatment on three occasions during the last two years. Dr. Bhati stated that, if that didn't get to him, he has no idea what will. Dr. Dougherty is lucky that the proposed permanent revocation is stayed, adding that the Board could permanently revoke his license with no stay. If Dr. Dougherty doesn't get the message now, he never will. Dr. Dougherty needs to understand that this is probably his last chance.

Dr. Somani stated that the basic issue is that Dr. Dougherty has had a number of relapses despite treatment. Not much progress has been made, and the Board has to take a strong step at this time.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

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The motion carried.

ROSEMARIE FERNANDEZ, M.D.

Dr. Somani directed the Board's attention to the matter of Rosemarie Fernandez, M.D. He advised that no objections were filed to Hearing Examiner Roberts' Report and Recommendation.

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

Dr. Fernandez thanked the Board for allowing her to address it. She stated that she has nothing to argue as far as what the Hearing Examiner has placed before it. All of that is factual, and it reflects what was discussed in her hearing. Dr. Fernandez stated that what she would like to do is lay out a quick time line and answer any questions the Board members might have regarding her desire to obtain licensure in the State of Ohio.

Dr. Fernandez stated that she attended the University of Michigan Medical School, beginning in 1992. She completed two years and then took Step I of the USMLE. She then took two years to do a Howard Hughes Medical Fellowship and then continued for one year under NIH grant funding, for a total of three years of basic science research. That resulted in two publications and continued work, which resulted in a third publication. After that time she returned to medical school and did a third year, took Step II of the USMLE, passed without difficulty, and then graduated in 1999 with distinction in research. She began a residency in Cincinnati, at the University of Cincinnati, in emergency medicine. Between the time she began medical school and the time she subsequently finished, the seven-year rule started to come into play in certain states. That was also when rules changed so that one year of postgraduate training had to be completed prior to sitting for the examination. With all of that taking place, she was unable to physically complete one year of postgraduate training within seven years with the way that the University of Cincinnati matriculates and moves people on from year to year, which is why she's here.

Dr. Fernandez stated that at no time was she not involved in basic science, residency or medical school training. At no time has she been dismissed or not enrolled at the University of Michigan or residency training. She did not complete a degree program, as that is not allowable under the Howard Hughes fellowship program, so at no time did she get a Ph.D. as a result of her work; however, she believes that the Board has before it a list of her three publications, two of which were done during her fellowship training, and one completed in the year 2001 as a result of continued research she's done during residency.

Dr. Fernandez stated that her desire is simply to sit for Step III of the USMLE and obtain licensure in the State of Ohio prior to finishing her residency.

Dr. Egner asked whether it wasn't a requirement during Dr. Fernandez' residency program to take Step III in order to stay in the residency program.

Dr. Fernandez stated that it's not a requirement. Most programs, when you go to get a job, require you to

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take it, but at no time do you need to take Step III. She is unable to take it at this time and has been unable to since she began her residency. That would have been a residency problem.

Mr. Browning asked Dr. Fernandez when she would take the Step III, if she were permitted to take it.

Dr. Fernandez stated that she would take it as soon as possible. She feels comfortable with taking the examination.

Dr. Talmage asked Dr. Fernandez whether she has a training certificate.

Dr. Fernandez stated that she does.

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

Mr. Wilcox stated that in this matter, the statute is very clear. Unfortunately the Board has no discretion. Dr. Fernandez did not complete the testing in the required timeframe. Because of that, he fully supports the Report and Recommendation, and he asked that the Board to implement it.

Mr. Dilling commented that it is a rule, not a statute.

Dr. Talmage asked why this matter is even before the Board if there is a rule stating that the Board has no discretion.

Mr. Dilling stated that licensure applicants who receive denials have hearing rights.

Dr. Talmage expressed concern that giving someone the implication that he or she could have a hearing and be considered for a waiver is patently unfair as far as he is concerned.

Mr. Dilling stated that physicians have appeal rights through the court system, and in order to get to the court system she has to go through the hearing process.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. ROBERTS' PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF ROSEMARIE FERNANDEZ, M.D. DR. BUCHAN SECONDED THE MOTION.

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

Dr. Talmage stated that he's deeply disturbed by this case. This is a person who has obvious intellectual ability, probably beyond what some of the Board members have. She's done research that is very scholarly and published. The articles, from reading the titles, are probably beyond his ability to read. Yet, the Board doesn't want to let her take the examination because of the fact that she's taken the time to do all of this research and to take an interrupted training course. To not have the ability to waive the seven-year rule disturbs him.

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Dr. Steinbergh stated that she must agree with the Proposed Order. One argument that the seven-year rule was not in effect in 1994 is not valid because she didn't apply at that time. Also, Howard Hughes Medical Institute (HHMI) is not accredited by the Liaison Committee on Medical Education (LCME), and this research opportunity did not lead to a Ph.D., so it doesn't fall into the MD/PhD. issue.

Dr. Bhati stated that Dr. Fernandez has done more research. She's scholarly and has published three papers on basic research. That resulted in prolonging the length of time she was in medical school. Dr. Bhati agreed that she didn't get a Ph.D., but he thinks that she has done Ph.D. work. He believes that the work she did is comparable to Ph.D. work.

Dr. Garg returned to the meeting at this time.

Dr. Steinbergh again stated that the program isn't accredited.

Dr. Bhati stated that he understands that, but he again feels that the work she did is comparable to Ph.D. work.

Dr. Egner noted that Dr. Fernandez took Step I in 1994. This would have given her until 2001 to take Step III. This is her third year as a resident. Dr. Egner stated that Dr. Fernandez could have taken Step III while she was a resident and not fallen under the seven-year rule. Dr. Egner stated that she doesn't think it's true that Dr. Fernandez couldn't have taken Step III within the seven years. She could have taken it in 2000, when she finished her first year of residency, and still would have been within the seven-year time frame.

Dr. Somani stated that Dr. Fernandez explained that one of the reasons she had to delay taking it is because they changed the format of USMLE Step III during the time she was doing a residency.

Dr. Egner stated that the format may have changed, but she had the opportunity to take the examination.

Dr. Somani stated that he understands that, but asked Dr. Egner to consider that someone might feel that one year of training alone may not give him or her the broad background to pass Step III.

Dr. Steinbergh stated that it does everyone else.

Dr. Somani stated that they have the option to take the exam, but they're not required to take it.

Dr. Egner stated that Dr. Fernandez' argument was that she could not have taken it. Dr. Egner questioned whether that was true.

Dr. Talmage asked what Dr. Fernandez' alternatives are if this is, in fact, law and the Board says that there is no appeal or waiver. Does she have to go back and retake parts I and II?

Dr. Somani stated that that is one question. The question he has concerns what would happen if

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Dr. Fernandez applies to take the exam in Michigan or another state. The other state may not have these rules. Could she then apply for reciprocity?

Dr. Talmage stated that Ohio needs its best and brightest as emergency room physicians. He believes she qualifies for that. He'd like to see her be able to get a license here.

Dr. Somani stated that, looking at Dr. Fernandez' three years of research, she may not have registered for a Ph.D. Why should the Board require physicians to have a Ph.D. in addition to an M.D.? The type of work she did could have qualified had she registered for a Ph.D. The Howard Hughes Fellowship is one of the most prestigious fellowships. Not everybody qualifies and gets it. The NIH Fellowship is also one of the most prestigious fellowships. People are anxious to get those. Dr. Fernandez literally fulfills every requirement of the rule except that she did not register for the Ph.D. program. Dr. Somani stated that it's unfair to deny her the chance to take the USMLE Step III in Ohio.

Dr. Bhati asked whether this could be amended.

Mr. Dilling stated that the rule could be amended, but the Board would have to go through the rulemaking process to do that. Mr. Dilling stated, in response to Dr. Talmage's question about whether Dr. Fernandez would be required to take Steps I and II over again, that all three examinations have to be passed within a seven-year period.

Dr. Bhati asked whether the Board could accept her three-year fellowship as being equivalent to the Ph.D. work.

Mr. Dilling stated that he believes the Report and Recommendation before the Board speaks for itself. The Report and Recommendation basically says that the rule, as is, does not permit her application to be accepted. That was the Recommendation.

Mr. Browning asked whether the language in the rule specifies pursuing a Ph.D., or being in a Ph.D. program.

Dr. Steinbergh stated that the rule indicates that the applicant must be actively pursuing a doctoral degree.

Mr. Browning asked whether the Board has any ability to interpret pursuing.

Dr. Steinbergh stated that the program must be accredited. The HHMI program is not accredited for Ph.D.

Dr. Somani stated that all Dr. Fernandez needed to do was sign up for her Ph.D., then she could have dropped out after the three years of fellowship. It would have been nice if she had registered. She would have had to pay the tuition and all that, but the work is Ph.D. caliber.

Dr. Talmage stated that, if the Board has no choice, the best it can offer is to encourage Dr. Fernandez to go to another state and take it. Then Ohio, in retrospect, can look at the rule and try to re-write it in a more

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realistic fashion.

Mr. Dilling stated that Dr. Fernandez would still be ineligible for licensure in Ohio under the combination of Ohio's statutes and rules. Mr. Dilling added that, quite frankly, if Dr. Fernandez goes to another state, she'll find out that many other states have the seven-year rule and don't have a three-year grace period as Ohio does for certain instances. He added that this rule is not something Ohio dreamed up.

Dr. Bhati asked whether, if the Board can agree that the work done by Dr. Fernandez is equivalent to pursuing the Ph.D., that would fit the bill.

Dr. Agresta stated that the rule doesn't say "equivalent."

Mr. Dilling stated that he believes that, if the Board could do that, the Hearing Examiner would have taken that into account and reflected that in his Report and Recommendation.

Dr. Bhati asked whether it is possible to talk to the Hearing Examiner on this particular issue. He asked whether it would help.

Mr. Dilling stated that he doesn't think it would help. The Board could remand the matter to the Hearing Examiner and ask him to look at that particular question. If the Board really wants the Hearing Examiner's opinion on that, it would allow the State and doctor to have their input into it. Mr. Dilling added that it would be unfair to call the Hearing Examiner and ask an opinion at this point in time.

Dr. Buchan stated that he thinks that Dr. Fernandez knows what's ahead of her. The Board must act upon what it has to work with. This is not a roadblock, it's a delay of game. She can accomplish what she needs to accomplish by taking another exam. Dr. Buchan called the question.

Dr. Somani stated that he's looking at the actual rule to see if there's any "wiggle" room.

Dr. Talmage stated that the rule is specific. It says "actively pursuing...leading to a doctoral degree." You have to matriculate. The Board is stuck.

Dr. Bhati asked how the Board knows that Dr. Fernandez wasn't actively pursuing a Ph.D.

Dr. Talmage stated that she didn't matriculate.

Dr. Somani stated that she didn't register for the Ph.D. You can drop out after three years of actively pursuing to return to a clinical practice.

Dr. Bhati stated that it's a shame that there is such a bright, young physician who wants to practice emergency room medicine in the State of Ohio, and the Board cannot find some way to give her a license.

Dr. Somani recommended asking the Executive Director to re-examine the rules and start the process of

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allowing for this type of exception.

Dr. Talmage stated that the Board has obviously found a flaw in the rule and should pursue it vigorously.

Mr. Dilling stated that he's not enjoying this any more than the Board members are. He added that he wants it clear on the record that this rule followed recommendations from the USMLE Composite Committee, people who are more learned on this than he is. Mr. Dilling stated that he met personally with the deans of the medical schools, and they drafted a rule that enlarged the exceptions that were proposed by the USMLE.

Dr. Somani stated that there is still the exceptional situation, and Ohio is unnecessarily penalizing a physician the Board would like to have in practice in Ohio.

Dr. Bhati suggested tabling this matter until new rules are in place.

Dr. Somani asked how long that would take.

Dr. Talmage stated that that could take six months to a year.

Mr. Dilling stated that he would need a little bit of time to think about it. If the Board wants to amend a rule, the Board could go to the Governor to ask for an emergency rule..

Dr. Steinbergh stated that she doesn't understand that.

Dr. Egner stated that she's not going to be in favor of that. She understands everyone's concern here, but this is one instance. She thinks that the Board needs to step back, look at it and take some time before it starts amending rules on the basis of one case. Dr. Fernandez does have alternatives, as unfortunate as it is, to retake Step I. The Board has in front of it what it can do and the evidence. Dr. Fernandez also has the court process she could go through. Dr. Egner stated that the Board has to vote on this.

Dr. Buchan and Dr. Steinbergh agreed.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- abstain
	Dr. Buchan	- aye
	Mr. Browning	- abstain
	Ms. Sloan	- aye
	Dr. Agresta	- abstain
	Dr. Garg	- abstain

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Dr. Steinbergh - aye
Dr. Somani - nay

The motion carried.

GERARD JIRKA, P.A.

Dr. Somani directed the Board's attention to the matter of Gerard Jirka, P.A. He advised that objections were filed to Hearing Examiner Roberts' Report and Recommendation and were previously distributed to Board members.

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

Mr. Jirka was accompanied by his attorney, Elizabeth Y. Collis, who deferred to Mr. Jirka for his statement.

Mr. Jirka thanked the Board for the time it is giving him to make a presentation. He stated that in 1994 he became addicted to opiates. In 1997 he received a DWI. At the time that he became addicted to opiates, he took it upon himself to go out and seek treatment. Again, in 1997, he made the decision that it was time to grow up and take control of his life again and stop doing the things that were getting him into trouble. Since 1997 he believes he has made the necessary changes. His son was born, and he decided it was time to take on some responsibility and stay away from things that were getting him into trouble.

Mr. Jirka stated that he has been working as a medical professional this entire time. He hasn't had anyone question any of his work or done anything as far as malpractice or injuring anyone or anything like that. Since 1997 he has not gotten into any kind of trouble whatsoever. Also, in 1998, he decided that he wanted to further his education, so he attended physician assistant school and graduated with honors.

Mr. Jirka asked that he be licensed as a physician assistant. He's willing to prove his point as far as staying completely drug free and sober by taking random drug or alcohol screens at any time. He realizes that he did continue to drink alcohol from 1997 until the present; however, he did not drink to intoxication. Once he did find out from the Board that he shouldn't be drinking alcohol, he ceased drinking alcohol. He has not had a drink in eight months.

Mr. Jirka stated that he believes he can stay clean and sober, and he is willing to prove that. He asked the Board for the opportunity to do that.

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

Mr. Michael stated that Mr. Jirka's impairment has two aspects to it, both his impairment on the opioids as well as dependency on alcohol. His dependency on alcohol dates back to 1994. Mr. Michael stated that he believes that Mr. Roberts' Report and Recommendation did an excellent job of weighing the objections

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and the testimony that was presented at the hearing on the issues the Board just heard from Mr. Jirka. The Board sent Mr. Jirka to an evaluation, which recommended a 28-day inpatient stay to address these issues. Mr. Michael stated that he believes Mr. Jirka needs to do that. Mr. Michael stated that the State is in complete agreement with the Hearing Examiner's Report and Recommendation.

DR. STEINBERGH MOVED TO APPROVE AND CONFIRM MR. ROBERTS' PROPOSED FINDINGS OF FACT, CONCLUSIONS, AND ORDER IN THE MATTER OF GERARD JIRKA, P.A. MS. SLOAN SECONDED THE MOTION.

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

Dr. Steinbergh stated that the Hearing Examiner outlined this case for the Board. There was a tremendous concern that Mr. Jirka was not willing to accept the diagnosis of alcohol dependency. Dr. Steinbergh stated that she feels that the Proposed Order was appropriate.

Dr. Buchan agreed with Dr. Steinbergh. He stated that the Proposed Order is not a closed door. The Board is interested in Mr. Jirka's success. The best way that the Board can be assured of his success is that he follow through with the Recommendations as described. It's important that he follow the terms. Dr. Buchan stated that the Board doesn't want him to make another mistake. He spoke in support of the Report and Recommendation, as written.

Dr. Steinbergh stated that it's very difficult for the Board to have to discipline physicians or other practitioners licensed by this Board; but to take on the responsibility of monitoring and so forth for a person who is not a current licensee does not make sense. Mr. Jirka needs to prove his fitness to practice in the State of Ohio before the Board provides a license.

Dr. Somani stated that when you look at the history and the Report before the Board, Mr. Jirka has had problems since 1994. He admitted to continued drinking problems until very recently when the Board asked him not to drink. From the Board's experience, recovery requires commitment and continued follow-through. Dr. Somani spoke in support of the Proposed Order.

Dr. Agresta stated that he believes that, as time goes on, when Mr. Jirka looks back, if he makes the right decision and follows the Proposed Order, he will then understand that the Board is doing him a favor at this point in time. Dr. Agresta stated that Mr. Jirka is definitely alcohol-dependent. He's obviously had a problem in the past. This is the time where he has to make the decision to step up and change his habits and his patterns or else he will fight this problem the rest of his life.

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

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

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Dr. Buchan	- aye
Mr. Browning	- aye
Ms. Sloan	- aye
Dr. Agresta	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye
Dr. Somani	- aye

The motion carried.

Dr. Somani at this time noted that the Report and Recommendation cites the wrong date for the Board's notice of opportunity for hearing. The letter of proposed denial was sent to Mr. Jirka on October 10, 2001, rather than September 12, 2001, as noted in the Introduction to the Report and Recommendation.

FINDINGS, ORDERS AND JOURNAL ENTRIES

MICHAEL E. COUTTS, L.M.T.

On February 14, 2002, the Medical Board mailed a Notice of Immediate Suspension and Opportunity for Hearing to Michael E. Coutts, L.M.T., based on Mr. Coutts having been found guilty of one felony count of aggravated possession of drugs. A signed certified mail receipt was returned to the Board's offices as evidence of service; however, a timely request for hearing has not been received, and more than 30 days have elapsed since the mailing of the Notice of Immediate Suspension and Opportunity for Hearing. The matter was presented to the Board at this time for final disposition.

DR. STEINBERGH MOVED TO ENTER AN ORDER OF PERMANENT REVOCATION, EFFECTIVE IMMEDIATELY, IN THE MATTER OF MICHAEL E. COUTTS, L.M.T. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

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DOCTORS URGENT CARE OFFICES, JAMES H. SCOTT, D.O., MEDICAL DIRECTOR

On January 31, 2002, the Board notified Dr. Scott that the State Medical Board of Ohio proposed to deny his request to amend his approved standard physician assistant utilization plan based upon the fact that the request states that the physician assistant will evaluate, examine and treat urgent care illnesses without the supervising physician examining each patient, a violation of section 4730.21(D), O.R.C. Said notice was mailed via certified mail, return receipt requested, to Doctors Urgent Care Offices' address of record. A signed certified mail receipt was returned to the Board documenting proper service of the notice; however, no hearing request has been received and more than thirty 30 days have elapsed since the mailing of that notice. The matter was presented to the Board at this time for final disposition.

DR. STEINBERGH MOVED TO DENY DOCTORS URGENT CARE OFFICES' REQUEST TO AMEND ITS P.A. UTILIZATION PLAN, EFFECTIVE IMMEDIATELY. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

XI P. YIN, M.D.

On December 13, 2001 and then again on January 4, 2002, the Board mailed a Notice of Opportunity for Hearing to Xi P. Yin, M.D., based on a prior action against Dr. Yin's New York medical license following a determination by the New York Board that he committed professional misconduct by dispensing Viagra to an undercover investigator in large quantities and without an examination. No request for hearing has been received, and more than 30 days have elapsed since the mailing of the Notice of Opportunity for Hearing. The matter was presented to the Board at this time for final disposition.

DR. STEINBERGH MOVED TO ENTER AN ORDER OF REVOCATION, EFFECTIVE IMMEDIATELY, IN THE MATTER OF XI P. YIN, M.D. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
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Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Bhati	- aye
Dr. Buchan	- aye
Mr. Browning	- aye
Ms. Sloan	- aye
Dr. Agresta	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye
Dr. Somani	- aye

The motion carried.

CITATIONS, PROPOSED DENIALS & ORDERS OF SUMMARY SUSPENSION

ALLAN B. LEVIN, M.D. - CITATION LETTER

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

DR. BHATI MOVED TO SEND THE CITATION LETTER TO DR. LEVIN. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

THOMAS E. NOGUEIRA, M.D. - CITATION LETTER

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

DR. BUCHAN MOVED TO SEND THE CITATION LETTER TO DR. NOGUEIRA.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

NIBAR K. SARKAR, 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. AGRESTA MOVED TO SEND THE CITATION LETTER TO DR. SARKAR. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

KEVIN A. SHUMRICK, 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.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

CHARLES C. VOORHIS, 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. AGRESTA MOVED TO SEND THE CITATION LETTER TO DR. VOORHIS. MS. SLOAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

MICHAEL J. O'BRIEN, D.O. - NOTICE OF IMMEDIATE SUSPENSION AND OPPORTUNITY FOR HEARING

At this time the Board read and considered the proposed Notice Of Immediate Suspension And

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Opportunity For Hearing in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

DR. STEINBERGH MOVED TO SEND THE NOTICE OF IMMEDIATE SUSPENSION AND OPPORTUNITY FOR HEARING TO MICHAEL J. O'BRIEN, D.O. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- abstain
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

HARVEY M. RODMAN, M.D. - LETTER OF PROPOSED DENIAL

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

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

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MICHAEL CARMEN STASCHAK, M.D. - LETTER OF PROPOSED DENIAL

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

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

Mr. Dilling advised that there may be an additional proposed citation letter to consider later in the meeting.

RATIFICATION OF CONSENT AGREEMENTSRALEIGH S. CALLION, M.D.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

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The motion carried.

Dr. Steinbergh noted that Dr. Callion was provided incorrect information about Board-approved treatment providers by OPEP. She stated that she wants to make certain that probationers get a list of the Board's approved treatment providers.

Mr. Dilling stated that a current list of approved providers is maintained on the Board's website. He added that staff will talk with OPEP about the problem Dr. Callion experienced.

VIRGINIA C. WOODROW, M.D.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

BRIAN F. MCNAMEE, M.D.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye

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Dr. Somani - aye

The motion carried.

MARK D. BALDWIN, D.O.

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

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- abstain
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

CITATIONS, PROPOSED DENIALS & ORDERS OF SUMMARY SUSPENSIONTHOMAS L. GERACI, D.P.M. - ORDER OF SUMMARY SUSPENSION AND NOTICE OF OPPORTUNITY FOR HEARING

At this time the Board read and considered the proposed Order of Summary Suspension and Notice of Opportunity For Hearing in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

DR. BHATI MOVED TO APPROVE THE ORDER OF SUMMARY SUSPENSION AND TO SEND THE NOTICE OF OPPORTUNITY FOR HEARING TO DR. GERACI. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Mr. Albert	- abstain
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye

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Dr. Agresta	- aye
Dr. Garg	- abstain
Dr. Steinbergh	- aye
Dr. Somani	- aye

The motion carried.

FEDERATION CREDENTIALS VERIFICATION SERVICE PRESENTATION

At this time Dr. Somani welcomed Kevin Caldwell, Manager of the Federation Credentials Verification Service (FCVS), and David Hooper, Director of the Physician Data Center.

Mr. Caldwell stated that he has been with the Federation for about a year and a half, and this is the second time he's been to Ohio to visit with the Medical Staff Services group. While here, he likes to stop into the Board offices to meet with staff.

Mr. Dilling stated that it was very gracious of Mr. Caldwell and Mr. Hooper to come to Columbus early in order to meet with Kay Rieve, Administrative Officer, and Penny Grubb, Chief, Licensure, to discuss the FCVS system, and how it dovetails with the Board's licensure system. He noted that the Federation has a nice computerized system, and when the Board gets its CAVU system in August, the Board may wish to adopt some of the Federation's best practices as Ohio's. Mr. Dilling stated that he knows that Ms. Rieve and Ms. Grubb found the meeting helpful.

Mr. Caldwell stated that Mr. Dilling had asked him to update the Board on the FCVS. Mr. Caldwell stated that, in conjunction with the CAVU system, one of the things that they are in the development of making happen this year is the on-line completion of the FCVS application and accepting credit card payments. It's going to tie in with what the Board is doing nicely because one of the biggest problems they have with physicians that take a long time to credential is the fact that they don't send the information they need to send so that they can be credentialed. In the future, before an applicant submits his or her application to the Federation, it will have to be complete. If a portion of the application is not complete, the computer will send it back to the applicant.

Mr. Caldwell stated that the second part of that is that the data will be transmitted to the Federation electronically. The Federation, in turn, will be able to submit that data to the Medical Board so that the Medical Board staff isn't spending time entering information.

Mr. Caldwell stated that the Federation will also be adding a credit card option. He noted that a lot of residents want to come through FCVS, but feel it is too expensive. The credit card option will allow residents a line of credit to submit the materials. This should sit a little easier with them.

Mr. Caldwell stated that in 2001 the Board submitted a resolution for a USMLE/FCVS tie-in. The Federation proposes that, at the time an applicant registers for USMLE Step III, the applicant will also have the option to apply for FCVS at the same time. Information contained on the USMLE application will

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automatically populate the FCVS application. In order to get the applicant interested in doing this, a lesser up-front fee will be charged. The fee will be \$100.00 for verification of medical education and postgraduate training. When the physician is ready to be licensed by a state, the charge at that time will be \$150.00. That should be a little easier, financially, for residents. That fee is in addition to the USMLE fee.

Mr. Dilling stated that that would give the applicant the benefit of a speedier licensure process.

Mr. Caldwell agreed, noting that all that FCVS would have to verify is the completion of the program the resident was in when he took USMLE Step III.

Mr. Caldwell stated that his mission is to let the medical staff service groups, both on the national and the state levels, know a little more about FCVS, and to let them know that they can accept the credentials that are gathered for the Boards, so there is not duplication. When the physician goes to a hospital for credentialing, the hospital won't have to do what the FCVS has already done. The big question of medical staff service groups is whether FCVS is JCAHO approved. Mr. Caldwell stated that JCAHO does not certify or credit credentialing verification organizations (CVOs), but they do say that hospitals can accept credentials verified by a CVO if they meet the nine principles contained in the Medical Staff Services manual. Mr. Caldwell stated that FCVS does meet the nine principles. The FCVS also developed a brochure to go with the information provided to the medical staff service groups, explaining how the service can save time and money for the hospitals and the physicians.

Mr. Caldwell stated that about 130 residency programs close yearly. He went out and talked to ACGME and told them that, as a credentialing organization, he finds that troublesome. When he finds out where records are, sometimes he can't get to them, and sometimes they were destroyed. Mr. Caldwell stated that he finds that difficult, from a physician perspective, that relies upon those records for licensure, that that can happen. He's approached ACGME asking them to promote that the PGT program, if they're closing, submit their records to him. Mr. Caldwell stated that he will store them indefinitely and permanently. He's gotten a lot of calls on this, and he will be getting materials from a Massachusetts program that is closing. He will then notify all of the interested groups, i.e., state boards, hospital groups, managed care groups and the professional associations that he has those records. Mr. Caldwell stated that he's not doing this to get money, but to help physicians get licensed where they want to be licensed without a loss of records somewhere.

Dr. Somani stated that this would be a nice service.

Mr. Caldwell stated that a representative of the AOA was interested in why he was doing this, and he explained it to her, and she stated that the osteopathic hospitals need to do this as well. Mr. Caldwell stated he doesn't care where the records are, as long as they are with an organization that will be around, to which the Federation can get access.

Mr. Caldwell stated that the FCVS has just begun credentialing for P.A.s. He added that FCVS does not want Boards to require this. The requirement for physicians makes sense because they are more mobile throughout their career, while P.A.s are less mobile. The FCVS developed this with the American

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Academy of Physician Assistants. They also have very good relationships with the NCCPA, as far as the whole certification process is concerned. He referred to maps of states that accept FCVS for P.A.s.

Dr. Garg asked whether there is a reason behind the six or seven states who are not participating in FCVS.

Mr. Caldwell stated that some have legislative problems. He noted that Pennsylvania is one of the states with legislative problems.

Dr. Garg asked whether Pennsylvania is working on it. That's a large state with a lot of licensees moving around from there.

Dr. Steinbergh noted that Pennsylvania has two medical boards, and she asked whether the legislation is the same for both of Pennsylvania's boards. She stated that she knows that the Pennsylvania Osteopathic Board still requires a state examination for licensure. She asked whether the rules are the same for the Osteopathic Board.

Mr. Caldwell stated that, in terms of their interpretation for why they cannot accept FCVS at this time, it's the same.

Dr. Steinbergh asked whether there are states that have two boards where one board uses the FCVS and the other doesn't.

Mr. Caldwell stated that Utah has separate allopathic and osteopathic boards. The allopathic board requires it and the osteopathic board does not even accept it.

Dr. Steinbergh asked whether there are any osteopathic boards that require FCVS.

Mr. Caldwell stated that there are not.

Dr. Garg asked how many boards use the FCVS.

Mr. Caldwell stated that out of the 70 boards, 53 use FCVS.

In response to Board member questions, Mr. Caldwell stated that the goal is to process completed applications in four to six weeks. Delays occur when difficulties arise from trying to obtain information on IMGs. There are also occasions when the medical school or training institution is not being cooperative in responding. That will extend processing time four to six weeks. Even with foreign graduates, there have been occasions when FCVS has been able to complete its process in 28 to 38 days.

Dr. Garg commented that the Board receives a lot of criticism that the process takes too long, even for American graduates.

Mr. Caldwell stated that a lot of that will change with the new on-line application. They won't be able to

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submit the application to FCVS until it is complete. He added that since the FCVS has begun to send applications to foreign schools and hospitals in that country's language, the timelines have shortened significantly.

Dr. Somani asked Mr. Caldwell whether he was in support of Ohio's resolution to tie FCVS in with the USMLE. Mr. Caldwell stated that he is.

Dr. Somani stated that he thinks that that would go a long way to expediting things. He suggested that it also be tied in with the ECFMG.

Mr. Caldwell stated that FCVS is also looking at the electronic submission of its packet of information to the boards. They will be putting the information into a PDF format and sending it to the boards electronically. They are testing this with North Carolina at this time.

Mr. Caldwell continued that they are also looking at the possibility of credentialing podiatrists in the future. The Federation of Podiatric Medical Boards approached them on this.

Mr. Caldwell advised that bimonthly all of the requiring boards get together on a conference call to discuss issues involving the requiring boards and what is going on. This is helpful, not only for the boards to know that what they are doing is appropriate, but also to get feedback on what other states are doing. As a result of these calls and working with the American Academy of Medical Colleges, the FCVS form was redesigned. That helped the completeness of the responses received from the medical schools. One of the other issues that came to mind shortly after the September 11 incident was gaps. Does FCVS get explanations for gaps in an applicant's résumé? He stated that FCVS doesn't, but he believes that Ohio does in its applications. He added that not all of the requiring boards were getting explanations for gaps. The boards have asked FCVS to get information from the doctor about gaps and to forward that on to the boards. Now it's automatic. Before FCVS even sends a profile, a gap explanation is included in the profile.

Mr. Caldwell stated that FCVS continues to work on improving the system. He added that it's a long process. FCVS appreciates the Board's support of what it does.

PROBATIONARY REPORTS

Dr. Somani referred the Board to the Compliance Staff's reports of conferences with probationers on February 11 and February 12, 2002. He noted that all probationers are in compliance.

DR. BHATI MOVED TO ACCEPT THE COMPLIANCE STAFF'S REPORTS OF CONFERENCES WITH EDWARD M. BIRDSONG, D.O.; FRED A. BRINDLE, M.D.; DAVID T. BROCK, D.O.; ROBERT R. DAIBER, M.D.; RICHARD M. GARWOOD, D.O.; TIMOTHY A. GOODEN, M.D.; SAM HILL, D.O.; MICHAEL W. KESSLER, M.D.; TIMOTHY S. KRESS, M.D.; MICHAEL S. MCINTOSH, M.D.; STEVEN T. PATTERSON, D.O.; MARY H. RABB, D.O.; NEIL SAUNDERS, D.P.M.; JAMES H. SCOTT, D.O.; MARK E. SENIOR, D.O.; GARY E. SIVAK,

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**M.D.; FRANK R. SHARP, M.D.; PHILLIP A. STARR, III, D.O.; AND BRIAN W. YOUNG, M.D.
DR. STEINBERGH SECONDED THE MOTION.** A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

PROBATIONARY REQUESTS

GREGORY C. BRANT, D.O.

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

**DR. STEINBERGH MOVED TO GRANT DR. BRANT'S REQUEST FOR A REDUCTION IN HIS
APPEARANCE SCHEDULE FROM EVERY THREE MONTHS TO EVERY SIX MONTHS.
DR. BHATI SECONDED THE MOTION.** A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

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VICTOR BYKOV, M.D.

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

DR. BHATI MOVED TO APPROVE THE COURSE, *ETHICS FOR THE MEDICAL PROFESSIONS*, FOR PURPOSES OF COMPLYING WITH PARAGRAPH 9.c. OF DR. BYKOV'S FEBRUARY 13, 2002 CONSENT AGREEMENT. MR. BROWNING SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

KEVIN R. CLARK, M.D.

Dr. Clark's request for reductions in his drug screen schedule and his appearance schedule was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE DR. CLARK'S REQUESTS TO REDUCE HIS DRUG SCREEN SCHEDULE TO TWICE PER MONTH, AND TO REDUCE HIS BOARD APPEARANCE SCHEDULE FROM EVERY THREE MONTHS TO EVERY SIX MONTHS. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye

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Dr. Steinbergh - aye
 Dr. Somani - aye

The motion carried.

BOYD D. CURTIS, M.D.

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

DR. STEINBERGH MOVED TO APPROVE STANLEY G. SATEREN, M.D., TO SERVE AS DR. CURTIS' MONITORING PHYSICIAN, WITH TEN CHARTS REVIEWED EACH WEEK, FIVE OF WHICH SHALL BE HOSPITAL CHARTS IF DR. CURTIS HAS PATIENTS IN THE HOSPITAL. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

ANN V. GOVIER, M.D.

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

Mr. Dilling noted that Dr. Govier is scheduled to appear before the Board later in the meeting. He suggested tabling her request until the time of her appearance.

At this time the Board agreed to table Dr. Govier's request until the time of her appearance before the Board.

WAYNE L. HARRISON, M.D.

Dr. Harrison's request to reduce the number of alcohol and drug rehabilitation meetings he must attend was

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presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE DR. HARRISON'S REQUEST TO REDUCE THE NUMBER OF ALCOHOL AND DRUG REHABILITATION MEETINGS HE MUST ATTEND FROM THREE PER WEEK TO TWO PER WEEK. DR. BUCHAN SECONDED THE MOTION.

A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

MICHAEL W. KESSLER, M.D.

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

DR. STEINBERGH MOVED TO APPROVE JAMES H. RUTHERFORD, M.D., TO SERVE AS DR. KESSLER'S MONITORING PHYSICIAN, WITH TEN OFFICE CHARTS AND TEN HOSPITAL CHARTS REVIEWED ON A MONTHLY BASIS. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

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The motion carried.

LAURENCE I. KLEINER, M.D.

Following approval by the Secretary and Supervising Member of Michael C. Albert, M.D., to serve as Dr. Kleiner's monitoring physician, the Board was requested to designate the frequency and number of charts to be reviewed by Dr. Albert.

DR. STEINBERGH MOVED TO REQUIRE DR. ALBERT TO REVIEW TEN PERCENT OF DR. KLEINER'S OFFICE CHARTS, TO A MAXIMUM OF TEN CHARTS PER MONTH AND 10 PERCENT DR. KLEINER'S HOSPITAL CHARTS TO A MAXIMUM OF TEN CHARTS PER MONTH. DR. TALMAGE. SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

HANDEL J. ROBERTS, M.D.

Dr. Robert's request for approval of a supervising physician was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE DONALD J. FAIRBANKS, M.D., TO REPLACE OPEP AS DR. ROBERTS' SUPERVISING PHYSICIAN. DR. TALMAGE SECONDED THE MOTION.

Dr. Egner asked why Dr. Roberts wanted to make the change.

Ms. Bickers explained that Dr. Roberts claims to be unable to communicate well with OPEP.

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

Vote:	Dr. Albert	- aye
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Dr. Egner	- aye
Dr. Talmage	- aye
Dr. Bhati	- aye
Dr. Buchan	- aye
Mr. Browning	- aye
Ms. Sloan	- aye
Dr. Agresta	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye
Dr. Somani	- aye

The motion carried.

SARAVANA E. SIVASHANKER, M.D.

Dr. Sivashanker's request to eliminate the monitoring physician and chart review requirement was presented to the Board for consideration at this time.

DR. TALMAGE MOVED TO DENY DR. SIVASHANKER'S REQUEST TO ELIMINATE THE MONITORING PHYSICIAN AND CHART REVIEW REQUIREMENTS OF THE BOARD'S ORDER OF JULY 12, 2000. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

KATHLEEN E. TALBOT, M.D.

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

DR. STEINBERGH MOVED TO APPROVE GREGORY B. COLLINS, M.D., TO REPLACE CARMEN HANSFORD, M.D., AS DR. TALBOT'S MONITORING PHYSICIAN. DR. AGRESTA

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SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

RICHARD W. THOMAS, M.D.

Dr. Thomas' request for a reduction in his appearance schedule was presented to the Board for consideration at this time.

DR. BHATI MOVED TO APPROVE DR. THOMAS' REQUEST FOR A REDUCTION IN HIS APPEARANCE SCHEDULE FROM EVERY THREE MONTHS TO EVERY SIX MONTHS.

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

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

PAUL W. WILSON, D.O.

Dr. Wilson's requests for reinstatement of his D.E.A. privileges and a reduction in his appearance schedule were presented to the Board for consideration at this time.

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DR. STEINBERGH MOVED TO APPROVE DR. WILSON'S REQUEST FOR REINSTATEMENT OF HIS D.E.A. PRIVILEGES FOR SCHEDULES II AND III, SUBJECT TO HIS MAINTAINING A LOG OF ALL CONTROLLED SUBSTANCES PRESCRIBED, ORDERED OR DISPENSED. DR. STEINBERGH FURTHER MOVED TO DENY DR. WILSON'S REQUEST FOR A REDUCTION IN HIS APPEARANCE SCHEDULE. DR. BUCHAN SECONDED THE MOTION.

A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

LAWRENCE L. YOUNG, M.D.

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

DR. AGRESTA MOVED TO APPROVE DR. YOUNG'S REQUEST FOR A REDUCTION IN HIS APPEARANCE SCHEDULE FROM EVERY THREE MONTHS TO EVERY SIX MONTHS. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

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The motion carried.

REINSTATEMENT REQUEST

LESLIE R. WOLF, M.D.

Dr. Wolf's request for approval of an assessing physician was presented to the Board for consideration at this time.

DR. STEINBERGH MOVED TO APPROVE FREDERICK N. KARAFFA, M.D., AS AN ASSESSOR, FOR PURPOSES OF PERFORMING ONE OF THE ASSESSMENTS REQUIRED FOR REINSTATEMENT PURSUANT TO PARAGRAPH 8.B.iii OF DR. WOLF'S APRIL 11, 2001 CONSENT AGREEMENT. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

PROPOSED CHANGES TO THE DISCIPLINARY GUIDELINES

Mr. Porter referred the Board to his memorandum of March 27, 2002, a copy of which shall be maintained in the exhibits section of this journal, which explains the proposed changes to the Board's Disciplinary Guidelines.

DR. STEINBERGH MOVED TO APPROVE THE PROPOSED CHANGES TO THE DISCIPLINARY GUIDELINES. MS. SLOAN SECONDED THE MOTION.

Dr. Somani referred to the second page of the memorandum, listing maximum and minimum penalties. He asked whether there is some way to decide what direction to go.

Mr. Porter stated that it would depend upon the facts of the case and whether there are any aggravating or mitigating circumstances.

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

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

APPOINTMENTS TO THE COMMITTEE ON PRESCRIPTIVE GOVERNANCE

Dr. Somani referred to Mr. Dilling's memorandum of March 28, 2002, which advises that, at its meetings of June 14, 2000, and January 10, 2001, the Board appointed Michael T. Gyves, M.D., and John M. Jonesco, D.O., respectively, to two-year terms on the Committee of Prescriptive Governance. Both of their terms expire on June 19, 2002.

The Ohio Board of Nursing has sent its request that the Board reappoint both Dr. Gyves and Dr. Jonesco to three-year terms, beginning June 20, 2002 and ending June 19, 2005. In support of their request, the Ohio Osteopathic Association has sent the attached letter with Dr. Jonesco's C.V. attached. The Nursing Board has advised that Dr. Gyves has expressed a willingness to continue on the Committee, as well. A copy of the CV filed by Dr. Gyves for his initial appointment is also attached.

DR. BHATI MOVED TO APPOINT BOTH DR. GYVES AND DR. JONESCO TO SERVE TERMS ON THE COMMITTEE ON PRESCRIPTIVE GOVERNANCE BEGINNING JUNE 20, 2002 AND ENDING JUNE 19, 2005. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye

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Dr. Somani - aye

The motion carried.

LICENSURE

ORTHOPAEDIC ASSOCIATES OF BELLEFONTAINE, INC. - P.A. UTILIZATION PLAN

The above-captioned P.A. Utilization Plan was presented to the Board for consideration at this time, due to Board members' questions on the March 2002 poll vote.

Dr. Egner stated that her objection related to the number of patients the P.A. would be seeing per day. She noted, however, that the group has since sent a letter indicating that the P.A. will see no more than 25 patients a day, and she withdrew her objection.

DR. EGNER MOVED TO APPROVE ORTHOPAEDIC ASSOCIATES OF BELLEFONTAINE, INC.'S P.A. UTILIZATION PLAN, SUBJECT TO RECEIPT AND APPROPRIATENESS OF NECESSARY DOCUMENTATION. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

ORTHOWEST, LTD. - P.A. UTILIZATION PLAN

The above-captioned P.A. Utilization Plan was presented to the Board for consideration at this time, due to questions posed on the March 2002 poll vote. Comments on the poll vote sheets indicate that Board members were concerned that the P.A. would be seeing more than 25 patients per day. A letter was received from Orthowest, LTD., indicating that the P.A. would see no more than 25 patients per day.

DR. TALMAGE MOVED TO APPROVE ORTHOWEST LTD'S P.A. UTILIZATION PLAN, SUBJECT TO RECEIPT AND APPROPRIATENESS OF NECESSARY DOCUMENTATION.

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

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

DONALD E. CASEY, JR., M.D.

Dr. Casey's request for endorsement of his National Boards was presented to the Board for consideration at this time. Dr. Casey indicated that he has not been engaged in the active practice of medicine since June 1997.

DR. AGRESTA MOVED TO APPROVE DR. CASEY'S REQUEST FOR ENDORSEMENT LICENSURE, SUBJECT TO RECEIPT AND APPROPRIATENESS OF NECESSARY DOCUMENTATION, AND SUBJECT TO HIS PASSING THE SPEX. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

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HIGHLAND DISTRICT HOSPITAL - P.A. UTILIZATION PLAN

The above-captioned P.A. Utilization Plan was presented to the Board for consideration at this time, due to questions posed on the March 2002 poll vote.

Dr. Steinbergh stated that she had concerns in this case. She noted that Paul Schreiber, M.D., the physician who will be working with the P.A., is a family practitioner, yet the application indicates that the P.A. will assist in surgery. She stated that the request to assist in surgery is not usually checked off on applications filed by family practitioners.

Dr. Somani stated that Dr. Schreiber might do minor surgery in his office.

Dr. Steinbergh asked that a letter of clarification be required for approval.

DR. BUCHAN MOVED TO APPROVE HIGHLAND DISTRICT HOSPITAL'S P.A. UTILIZATION PLAN, SUBJECT TO RECEIPT AND APPROPRIATENESS OF NECESSARY DOCUMENTATION, AND SUBJECT TO APPROVAL BY THE SECRETARY AND SUPERVISING MEMBER FOLLOWING THE OBTAINING OF A LETTER OF CLARIFICATION CONCERNING THE ISSUE THAT DR. STEINBERGH RAISED. DR. TALMAGE SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

MARY ANN MILLER, C.T. APPLICANT

Mr. Dilling advised that Ms. Miller's examination score was corrected. A motion is needed to certify her as passing the examination.

MR. ALBERT MOVED TO APPROVE THE RESULTS OF MS. MILLER'S JUNE 1999 COSMETIC THERAPY EXAMINATION, TO CERTIFY HER AS PASSING AND TO LICENSE MS. MILLER. DR. AGRESTA SECONDED THE MOTION. A vote was taken:

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Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

PERSONAL APPEARANCES

MOHAMMAD A. ADAS, M.D.

Mr. Dilling advised that Dr. Adas will not be appearing today. He added that Dr. Adas met previously with the Secretary and Supervising Member.

ANN V. GOVIER, M.D.

Dr. Govier made her initial appearance before the Board, pursuant to the terms of her January 17, 2002 Consent Agreement.

Dr. Somani noted that, prior to entering into her Ohio Consent Agreement, Dr. Govier had been followed by the Indiana Board for two and a half years.

In response to Dr. Bhati's questions, Dr. Govier stated that she is currently doing cardiac anesthesiology at St. Luke's Hospital in Maumee, Ohio. She's in charge of the anesthesia program. The new heart center opened about a year ago, with the first heart surgery taking place on February 15 of last year. She began setting up the program in December.

In response to further questions by Dr. Bhati, Dr. Govier stated that she does understand the terms of her Consent Agreement. She added that she has no concerns that she will not be able to meet all of the requirements. They are substantially different from what she has been doing in Indiana for the first two and a half years, so she has some anxiety about making sure that she does everything for Ohio and continues to do what she needs to do for Indiana, as well. She added that Washington State, where she also holds a license, mirrored Indiana's requirements. She just needs to get into a routine. Dr. Govier commented that she has been working with OPEP for over a year.

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Dr. Bhati asked how many cases Dr. Govier does a day. Dr. Govier stated that the hospital only has two open-heart surgical rooms. The patients stay in the post-recovery area from the time of the first-day post-op until their discharge. They have weeks when they'll do six or seven open-heart cases, and then there are weeks when they don't do any open-heart cases. She's doing anesthesia for those cases only.

Dr. Bhati asked whether it would be reasonable to require her monitoring physician to review five cases per month.

Dr. Govier stated that that would probably be reasonable. The least number of cases she believes they've done, if you take away the first three months when the program was new, has been 12 in a month, and the most has been 26. She and one other partner pretty much alternate the cases and call.

Dr. Somani asked whether there is another body that looks at her cases in the hospital.

Dr. Govier stated that the hospital Mortality & Morbidity Committee meets monthly, and any mortality or morbidity, whether from the anesthesia side, the surgical side or the post-op recovery time is looked at. Also, the surgeons and cardiologists meet on a monthly basis and cases are presented. Currently St. Luke's is in a bit of a flux. The entire general anesthesia group has left. She is occasionally consulted for general cases, but the hospital is working hard to set up a group. Except for she and her partner, all anesthesiologists for the hospital are currently locum tenens.

DR. BHATI MOVED TO APPROVE JAMES R. HAYS, M.D., TO SERVE AS DR. GOVIER'S MONITORING PHYSICIAN, WITH FIVE CHARTS REVIEWED ON A MONTHLY BASIS. DR. BHATI FURTHER MOVED TO CONTINUE DR. GOVIER UNDER THE TERMS OF HER JANUARY 17, 2002 CONSENT AGREEMENT AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. BUCHAN SECONDED THE MOTION.

Dr. Govier asked what she needs to do if it's a slow month and there aren't five cases. Should she just report that to Ms. Bickers and not panic?

Dr. Buchan stated that that would be appropriate.

Dr. Buchan asked what the ramifications of her relapse in Indiana were.

Dr. Govier stated that it was a very short four episodes of consuming alcohol, and it was not being aware of the warning signs that were occurring. Most of her career of 20 years of doing anesthesia has been cardiac. She felt that she needed to give 120 percent to succeed. They had a real shortage, and the call hours were substantially extended. She didn't catch the "hungry, angry, tired" warning signs. She complied fully with Indiana and its requirements and was in full compliance with the ISMA.

Dr. Buchan asked whether Dr. Govier was ever in jeopardy of losing her Indiana license based upon that relapse.

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Dr. Govier stated that she was not. She did the recommendations of the ISMA. The Board met, asked questions, and the ISMA representative recommended that she continue with the Indiana requirements. She took three months off and actually worked and re-addressed what she needed to do. Dr. Feldman of the ISMA made that recommendation, and she agreed and willingly did so.

In response to Dr. Garg's questions, Dr. Govier stated that the DWI occurred during a three-week vacation in October 1999. There has never been a patient incident. This was all initiated by Indiana. Dr. Govier stated that she was asked about the first time she used alcohol for a non-social reason. The history the first time was the loss of twins in a miscarriage. That's the first time she remembers having two or three glasses of wine because she was so sad. She went to bed, got up and went to work the next day. At that time she was on staff, heading the heart transplant program at the Cleveland Clinic. That was a very brief episode with nothing after that. There were some personal, marital issues that instigated the September/October 1999 occurrence.

Dr. Buchan stated that he appreciates that Dr. Govier recognizes and acknowledges the warning signs. He stated that the Board is here to help her succeed.

Dr. Govier stated that she appreciates ISMA's and OPEP's assistance. Dr. Govier stated that approximately two years ago she notified the Ohio Board, as well as sending in two packets of information outlining the occurrence and everything that happened in Indiana. She wanted Ohio to know that that was well before she was aggressively recruited to come to St. Luke's.

Dr. Talmage stated that it sounds like Dr. Govier has a pretty good insight into her problem. He noted that she's in a very aggressive program, and it would not be hard to imagine that she could be put under a lot of pressure to work a lot harder. He cautioned her to be careful not to be pressured into something she really doesn't want to do.

Dr. Govier stated that before she had accepted the position with the original group she joined, they did want her to do OB, general and cardiac anesthesia. She refused. Then the recruitment went for just cardiac. The only call she has is for cardiac, and it's home call. She's not involved in any general or OB surgery. There is a rare time when an employee has asked her to give the anesthesia because of the turmoil in general, but she's very aware of the dangers, and continues to work with her sponsor and OPEP to make sure she keeps on top of that.

Dr. Somani stated that that is very important.

In response to Mr. Albert's questions, Dr. Govier stated that she has never practiced when she was not sober. That is what makes her feel so fortunate to have gotten into the help and the monitoring early on. It would eventually have progressed to that point. She has been sober since September 23, 2000, which was the four-day brief relapse. Prior to that, her sobriety date was July 21, 1999.

Mr. Albert stated that he doesn't consider a four-day relapse to be brief. Mr. Albert cautioned Dr. Govier

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that the Board has a very low tolerance for relapse. He asked where she received treatment.

Dr. Govier stated that she was treated at Rush Memorial in Chicago. You live in an apartment setting with other people in the program, but it's not in the hospital. It is a residential treatment.

Dr. Steinbergh noted that in 1999, when she had a DWI, when they looked in her purse they found Xanax tablets for which she did not have a prescription. Dr. Steinbergh stated that the Board appreciates the risk of impairment. Those kinds of thing signal a concern for the Board. The Board has a great concern because of the frequency with which it sees anesthesiologists and the accessibility to drugs, etc. She asked whether Dr. Govier has abused medication other than alcohol.

Dr. Govier stated that she has not. She added that the charges, after a good five months of the Attorney General working very hard to make the charges occur, ended up dropping all of them. This was at a time period when she was in counseling. Her therapist had recommended that she take some type of anti-anxiety type medication. She had refused them, but one of her colleagues at work, who was an RN, was fully aware of the personal issues that had been occurring, had some leftover Xanax and gave them to her. She was given them in March 1999, and the pills were in the bottom of her purse from then until the DWI. She went to Rush two days after the DWI, and her urine screens were clean. She has never used anything other than alcohol.

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

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

GREGORY T. SCHULTE, M.D.

Dr. Schulte made his initial appearance before the Board, pursuant to the terms of his December 14, 2001 Consent Agreement.

In response to Dr. Buchan's questions, Dr. Schulte stated that he is doing very well. His program director is Dr. Gregory Collins at the Cleveland Clinic. He follows up with Dr. Collins every Friday, and

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participates in the support group. Dr. Collins also runs his aftercare program. Dr. Schulte stated that he also attends A.A. locally as well as at the Cleveland Clinic. He is also involved with OPEP, which is monitoring his urine screens. Actually, Dr. Ron Harder at Ohio State is doing his weekly urine screens because he's in the department at Ohio State.

Dr. Buchan asked Dr. Schulte how he is spending his days.

Dr. Schulte stated that two and a half days a week he does chronic pain medicine at an outpatient facility. Other days he does anesthesia at Ohio State. Dr. Mike Howie and Dr. Tom Reilley are his two chairmen.

Dr. Buchan asked what Dr. Schulte is doing to ensure that he doesn't get back into trouble.

Dr. Schulte stated that he spends a lot of time reflecting on how this happened. He never really had a propensity towards abusing alcohol or things like that, but his family has a strong history of chemical dependency. His grandfather died of a stomach carcinoma, which is very rare unless you abuse alcohol. He was actually in prison for bootlegging and things like that in the 1920s. His grandmother died of an alcoholic cardiomyopathy, and his brother probably has a drinking issue. He believes that, from a genetic standpoint, he had a strong propensity towards developing a problem, but he never realized it. Over the past two years he's undergone five major operations on his right leg, following a football injury to his knee. In the last surgery they tried to put an external fixator on his leg to try to lengthen his tibia. He tried to go back to work two days after surgery, in a tremendous amount of pain. His leg was huge, and he had pus coming out of his external fixator site.

Dr. Egner asked whether he went into the operating room like that.

Dr. Schulte stated that he was doing only chronic pain at that time. He saw patients like that. He had Ultram for pain control. He limited his activities to four hours per day, but he thinks that that was a mistake. He should have taken six to eight weeks off after that operation. He accelerated his Ultram use on his own and that pretty much got him into the situation he was in.

Dr. Buchan stated that he believes Dr. Schulte self-reported.

Dr. Schulte stated that Dr. Frank Dono at Doctors Hospital asked him to go to Shepherd Hill for a three-day evaluation. When he got there, they decided that he needed long-term care. This was the right decision, but he didn't know whether he really needed it. He left Shepherd Hill on a Friday and everyone talked to him and told him that he does need treatment. He then went to the Cleveland Clinic and stayed for treatment.

Dr. Talmage stated that Dr. Schulte is in the "cafeteria" of drug dependency. He has fentanyl and all kinds of things around him. Being especially careful is absolutely necessary because it's so easy in his profession to get drugs.

In response to Mr. Albert's questions, Dr. Schulte stated that he was in the Cleveland Clinic for the full 28

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days. He didn't go back to Shepherd Hill because he was in denial that there was a problem. The good part was that he did get treatment after only a two-day lapse.

In response to Dr. Steinbergh's questions, Dr. Schulte stated that he has been sober since August 10, 2001. He does understand the terms of his Consent Agreement, and does not have any problems with it. His entire family lives within two streets of him. He and his ex-wife are in the process of reconciling. He has two sons. His family is supportive of him.

Dr. Garg asked whether there was a reason that Dr. Schulte didn't go back to Shepherd Hill.

Dr. Schulte stated that he didn't like Shepherd Hill. Anytime you're put into a place for three days and you're coming off a drug dependency issue and someone tells you that you're going to stay for a couple of months, you don't like that idea. He thought he was only there for a three-day evaluation, and he wasn't going to stay. He was told he had to go someplace.

DR. BHATI MOVED TO CONTINUE DR. SCHULTE UNDER THE TERMS OF HIS DECEMBER 14, 2001 CONSENT AGREEMENT AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. STEINBERGH SECONDED THE MOTION.

Dr. Somani commented that it appears that Dr. Schulte has a problem with both alcohol and drugs.

Dr. Schulte stated that that is true. After his initial surgery, a nurse had given him some Percocet. He was asked whether he had ever taken anyone else's medication, and the answer to that is yes, because he did take hers.

Ms. Sloan inquired about Dr. Schulte's current workload.

Dr. Schulte stated that, to be honest, it's easy because there are residents that actually do the anesthesia cases. His workload is a lot easier since he switched from his private practice setting.

Mr. Schmidt asked Dr. Schulte whether, if he wasn't under an agreement with the Board, he could enjoy a cocktail or glass of wine at dinner without that threatening his sobriety.

Dr. Schulte stated that his answer to that question now would be "no." Any mood altering substances put someone with a history of chemical dependency at extreme risk for relapse. He would say that if he was not being monitored he could not.

Mr. Schmidt asked if Dr. Schulte felt he could if he were not being monitored.

Dr. Schulte stated that he can't. He wouldn't use any alcohol or any kind of mood-altering substance because it is a threat to his sobriety, his personal recovery, and the potential to not have this particular problem again in the future.

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

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

JAMES E. STURMI, M.D.

Dr. Sturmi made his initial appearance before the Board, pursuant to the terms of his January 9, 2002 Consent Agreement.

In response to Mr. Browning's questions, Dr. Sturmi indicated that he does understand the basics of his Consent Agreement. He added that Ms. Bickers did a great job in going over the terms with him.

In response to Dr. Talmage's questions, Dr. Sturmi stated that he first got sober in June 1988, and as of January 2000, he had been drug-free and sober for 11½ years. His four-day relapse happened for a number of reasons, which he now realizes were selfish and self-centered. His thinking was that if he had to lose his license for three months and come to Shepherd Hill, he would end up divorced and possibly bankrupt. He's going to be divorced and bankruptcy is right around the corner, so, looking back, he wishes he had gone into treatment at Shepherd Hill in January 2000 when he initially relapsed.

Dr. Steinbergh asked whether, after 11½ years of sobriety, he made a conscious decision to relapse.

Dr. Sturmi stated that his marriage was failing and his wife was not willing to work on their issues. He was in a lot of emotional pain, and that's what precipitated his relapse. He added that, looking back, he can honestly say that he got complacent and started taking his recovery for granted. In year six or seven he stopped going to as many meetings. There were a couple of job changes that involved relocation. He did get a sponsor right away. There were several reasons why he was at risk for relapse. He added that it was his responsibility and not anyone else's.

Mr. Browning asked what is different now.

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Dr. Sturmi stated that he did Talbot's outpatient program, did real well for a while, and then in March 2001 he found out his wife was having an affair with his sister's husband, and he moved out. He did okay until the fall, and then he used for a couple of days in October and one day in December. What he learned in treatment was that he can't take his recovery for granted. He has to continue to go to five or six meetings a week and keep it as his number one priority. He added that he was also out of balance as far as his hours and his responsibilities. He was doing a lot of academic things – publishing, speaking nationally, and things like that. He realizes he can't do a lot of those things. The difference is the relative commitment to recovery.

Ms. Sloan asked Dr. Sturmi whether he thought things would have been different had he been monitored. She noted that he was not in a program and had not been attending meetings at the time of the relapse.

Dr. Sturmi stated that he thinks the relapse would have occurred, but it would have been detected right away. He knew it was wrong. He realized he was on a very slippery slope. He stated that he actually reached out in January 2000 and recently. He called his sponsor and asked for help. He didn't want to use. There were just a lot of circumstances going on and he wasn't in a stable recovery.

Dr. Agresta commented that it sounds as though Dr. Sturmi is still under a fair amount of stress. He asked about Dr. Sturmi's work.

Dr. Sturmi stated that he's not working; he just got out of treatment two weeks ago. As far as work goes, he lost his teaching position at Grant Hospital, and that was 40 percent of his time and income. He's not looking to replace that. Whenever Dr. Whitney, Dr. Croft or the Board feels that it's appropriate for him to go back to work, he'll be happy to set whatever limits are necessary to prevent this from happening again. As far as his personal situation, he has a great lawyer, a great church support group, three beautiful children who love him, and his fears about losing them and his wife taking them out of state and things like that are a lot better. Over all, he's doing much better. He's still in the middle of his divorce, but he feels much better.

Dr. Agresta warned Dr. Sturmi that he will have to continue to work very hard during the next several months.

Dr. Steinbergh stated that it sounds like Dr. Sturmi will need to rely on others for a while to help him through the divorce. Obviously, this involves Dr. Sturmi's entire family. Dr. Steinbergh asked whether Dr. Sturmi's family lives in town.

Dr. Sturmi stated that his sister lives in Minneapolis. He added that the two of them just got back from a week together in Arizona. His parents and his brothers and their families live in Akron, and he sees them pretty regularly. They're all very supportive. His children are also in town.

Mr. Albert stated that Dr. Sturmi is a perfect example of what the Board tells its probationers. Recovery is a lifetime struggle, and you must continually work for it. The Board sees individuals who have been sober for four or five years, and the Board congratulates them, but the recovery process is something you have to

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work for your entire life. Mr. Albert stated that Dr. Sturmi has a lot of problems, but he also has some good things going for him. He still has his license and a way to make a living.

DR. BHATI MOVED TO CONTINUE DR. STURMI UNDER THE TERMS OF HIS JANUARY 9, 2002 CONSENT AGREEMENT AND THE BOARD'S POLICY OF DECEMBER 9, 1998, WITH FUTURE APPEARANCES BEFORE THE BOARD SECRETARY OR DESIGNEE. DR. BUCHAN SECONDED THE MOTION.

Dr. Buchan told Dr. Sturmi that the consent agreement suggests that the Board believes he can succeed. He added that Dr. Sturmi has a lot at stake, including three children who depend upon him to succeed. The Board believes he can succeed.

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

Vote:	Dr. Albert	- aye
	Dr. Egner	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

QIP REPORT

Dr. Steinbergh referred to the second case referenced in the report, noting that the physician in question failed to identify a lung mass on one patient's series of chest x-rays. The Panel recommended participation in a radiology board review course. She stated that, because of that failure, there was probably a delay in the patient's getting treatment. She suggested that, at the very least, a letter of caution should have been sent to this physician.

Mr. Dilling stated that when the Panel sends a physician to courses such as this, the letter drafted is a cautionary letter with instruction of what the physician needs to do to correct problems.

Dr. Garg stated that the Panel didn't find a pattern with this physician, and felt that requiring a course was appropriate.

Dr. Bhati stated that he attended the QIP meeting where this case was discussed, and what the physician in

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question didn't do was compare x-rays with previously taken films.

Dr. Garg stated that he feels that the physician got the message. He's not off scot-free until he completes the course.

Dr. Somani asked Dr. Bhati to share his experience with the QIP Panel.

Dr. Bhati stated that he thought the Panel was well-versed about the cases. They really dissected those cases nicely and did a good job. He added that he was impressed.

Dr. Garg asked whether Dr. Bhati had any concerns or recommendations. Dr. Bhati stated that he did not. He stated that he was very impressed, and felt that the Panel did a very professional job.

DR. BHATI MOVED TO ACCEPT THE QIP REPORT. DR. TALMAGE SECONDED THE MOTION. All members voted aye. The motion carried.

ADMINISTRATIVE REPORT

Dr. Somani stated that the Board should feel good about how Ohio turned out in both the Federation and Public Citizen Action annual reports on disciplinary sanctions, noting that Ohio hasn't slipped in the rankings.

Mr. Dilling stated that Ohio was #8 in the Public Citizen Action Report, first among the big Boards. Ohio was #2 in the Federation's report, and 12th overall, which is an improvement from the previous year.

Mr. Dilling noted that Public Citizen Action also grades websites. Last year the only Board to received A's in both content and user friendliness was Maryland, which had disciplinary action documents on-line. Ohio has since added this information to its website. This year Ohio was recognized as one of the six boards to get A's in both categories. He commended the staff contributions.

Mr. Dilling stated that James N. Thompson, M.D., the new Federation Executive Vice President, recently held a conference call. Mr. Dilling advised that Dr. Somani took part in that call, and he asked Dr. Somani to address the matter.

Dr. Somani stated that it was an interesting call. He doesn't know how many people were logged into it. Dr. Thompson remarked on his being happy to join the Federation as Executive Director, and he laid out his general vision of what he hopes to accomplish. The key point he made was that he would like to work with the member Boards to accomplish goals. He wants to continue holding these conference calls every second month. The next is scheduled for June 5. Dr. Somani stated that there weren't many questions from the participants of the call.

Dr. Somani stated that he did congratulate Dr. Thompson on his appointment, his being from Ohio. He added that Dr. Thompson will be coming to the Board offices, and will meet with Dr. Steinbergh,

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Dr. Agresta and Dr. Somani. Dr. Thompson expressed receptiveness to work with the Boards to address the issues the Boards may have. Dr. Somani stated that he thinks there will be a change in direction from the past versus the future.

Dr. Agresta stated that he thinks the Board will find Dr. Thompson to be an honorable person, and very easy to work with. Dr. Thompson is an Ohio native, and he and his wife still have ties in Ohio. His father was first chair of the Department of OB at Wright State, when Wright State first started. He will be in Ohio to give a presentation at Wright State. He will come to the Board offices after that presentation.

Dr. Egner left the meeting during the previous discussion.

MARK E. GOLDSMITH, M.D.

DR. BHATI MOVED TO ACCEPT THE SETTLEMENT PROPOSED BY THE ASSISTANT ATTORNEY GENERAL IN THE MATTER OF MARK E. GOLDSMITH, M.D. DR. BUCHAN SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

REPORTS OF ASSIGNED COMMITTEES

LIMITED BRANCH & ALTERNATIVE MEDICINE COMMITTEE

Dr. Talmage stated that the Ohio College of Massage (OCM) has requested a reduction in the number of students in its distance learning trial. The Board had originally stated that the minimum distance learning class size should be 25; however, OCM has only been able to enroll four students into the course. Dr. Talmage stated that the Committee was unwilling to consider lowering the minimum number. If the school continues to get low admissions, the trial will be suspended.

Dr. Talmage stated that the Committee also reviewed the credentials of two schools seeking approval, Northwest Academy of Massotherapy, Inc., and Davis College. The Committee recommends approval of both.

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DR. GARG MOVED TO GRANT PROVISIONAL CERTIFICATES OF GOOD STANDING TO NORTHWEST ACADEMY OF MASSOTHERAPY, INC., AND DAVIS COLLEGE. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

P.A. COMMITTEE

Dr. Buchan stated that the P.A. Committee met, and discussed four supplemental applications previously reviewed by the P.A. Policy Committee.

Med Central Mansfield

Dr. Buchan stated that the above-captioned has requested permission for the P.A. to perform the following:

1. Insertion of central venous lines performed under 100% on-site supervision, observing no less than 25 procedures to determine competency, in a hospital setting.
2. Insertion of arterial lines, using 100% direct supervision, observing no less than 25 procedures to determine competency, in a hospital setting.

Dr. Buchan stated that the Committee reviewed the requests and noted that, in the past, the Board has approved the first with direct and on-site supervision. The Committee recommended approval with 100% direct supervision.

DR. BUCHAN MOVED TO APPROVE MED CENTRAL MANSFIELD'S REQUEST FOR ITS P.A.S TO PERFORM THE INSERTION OF CENTRAL VENOUS LINES UNDER 100% DIRECT SUPERVISION. DR. BHATI SECONDED THE MOTION. A vote was taken:

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

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Dr. Bhati	- aye
Dr. Buchan	- aye
Mr. Browning	- aye
Ms. Sloan	- aye
Dr. Agresta	- aye
Dr. Garg	- aye
Dr. Steinbergh	- aye
Dr. Somani	- aye

The motion carried.

Dr. Buchan reported that the Committee recommended denial of the second request. He stated that the training and education was reviewed, and complications were evaluated, and the Committee felt that the complexity of the procedure required that the Board deny this request.

DR. BUCHAN MOVED TO PROPOSE TO DENY MED CENTRAL MANSFIELD'S REQUEST FOR INSERTION OF ARTERIAL LINES ON THE BASIS THAT THE COMPLEXITY AND COMPLICATION RISKS OF THE PROCEDURE WERE BEYOND THE TRAINING OF PHYSICIAN ASSISTANTS. DR. STEINBERGH SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

Cardiology, Inc.

Dr. Buchan advised that the above-captioned group has requested permission for its P.A.s to perform non-invasive cardiovascular studies. Following review of the application, its attachments, and the P.A. Policy Committee's recommendation that the application be denied, the P.A. Committee also moved to deny the application.

DR. BUCHAN MOVED TO DENY CARDIOLOGY, INC.'S SUPPLEMENTAL P.A. UTILIZATION PLAN ON THE BASIS THAT THE APPLICATION IS NOT IN COMPLIANCE WITH THE BOARD'S RULES. DR. BHATI SECONDED THE MOTION. A vote

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was taken:

Vote:	Dr. Albert	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

Dermatology Associates

Dr. Buchan advised that the above-captioned group has requested approval for its P.A. to apply light-based medical devices for the purpose of hair removal, using 100% on-site supervision and observing no less than 25 procedures to determine competency, in an office setting. Dr. Buchan stated that the Committee felt that the request was reasonable and in line with others the Board has approved.

DR. BUCHAN MOVED TO APPROVE DERMATOLOGY ASSOCIATES' SUPPLEMENTAL P.A. UTILIZATION PLAN FOR THE APPLICATION OF LIGHT-BASED MEDICAL DEVICES FOR THE PURPOSE OF HAIR REMOVAL, WITH 100% ON-SITE SUPERVISION. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

Raj Cardiovascular Association

The above-caption's supplemental P.A. utilization plan requested approval of the following:

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1. Removal of chest tubes, under 100% on-site supervision, observing five procedures to determine competency, in a hospital setting.
2. Removal of intra-aortic balloon pump, under 100% on-site supervision, observing five cases to determine competency, in a hospital setting.
3. Removal of pulmonary artery catheter (Swan Ganz catheters), under 100% on-site supervision, observing five procedures to determine competency, in a hospital setting.
4. Removal of temporary pacer wires, under 100% off-site supervision, observing 10 procedures to determine competency, in a hospital setting.
5. Vein and artery harvesting using open or endoscopic techniques, under 100% direct supervision, observing 25 procedures to determine competency in a hospital setting.

DR. BUCHAN MOVED TO APPROVE RAJ CARDIOVASCULAR ASSOCIATION'S REQUESTS, AMENDING #4 TO REQUIRE ON-SITE SUPERVISION. DR. BHATI SECONDED THE MOTION. A vote was taken:

Vote:	Dr. Albert	- aye
	Dr. Talmage	- aye
	Dr. Bhati	- aye
	Dr. Buchan	- aye
	Mr. Browning	- aye
	Ms. Sloan	- aye
	Dr. Agresta	- aye
	Dr. Garg	- aye
	Dr. Steinbergh	- aye
	Dr. Somani	- aye

The motion carried.

EXECUTIVE COMMITTEE

Dr. Somani at this time distributed copies of his proposed adjustments to the Committee list. He noted that the major change concerns the new Board member, who will be assigned as Chair of the Prescribing Committee. A new committee, the Licensure Committee, will be assigned to Group 1, and he, personally, will chair that committee.

Dr. Somani continued that in Group 2 he will switch Dr. Talmage's and Dr. Buchan's chairmanships since Dr. Talmage will be the Board appointee to the P.A. Policy Committee and should then serve on the P.A. Committee. He added that Dr. Agresta will Chair the Quality Assurance Committee.

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Dr. Garg stated that the Board needs to look into the role of the Quality Assurance Committee. Is it doing what it was intended to do?

Dr. Agresta stated that he will review the initial Committee charge to see what, if any, modifications are needed.

IMPAIRMENT COMMITTEE

Mr. Albert stated that the Committee met and finally finished up its rule review. Proposed rules changes will be presented to the Board at its May 2002 meeting. Mr. Albert stated that at that time he hopes the Board will move to proceed to hearing.

LEGISLATIVE LIAISON COMMITTEE

Mr. Browning stated that the Committee's discussion was limited to reviewing Mr. Wayda's summary of legislative activity. He suggested that, in the future, Mr. Wayda highlight active bills.

Mr. Browning added that the focus of the Legislature's attention at this time is on the State budget. This has had an effect on the Board, even though the Board does not receive money from the general revenue. There has been a freeze on hiring and equipment purchases. There is a lack of clarity about what will happen going into next year, but he assumes that there will be more budget cuts.

EDUCATION, PUBLIC RELATIONS & RISK MANAGEMENT COMMITTEE

There was no report this month.

CONSENT AGREEMENT COMMITTEE

Dr. Steinbergh stated that the Committee did not meet. She has asked the Board staff to advise her of concerns with consent agreements for discussion at future meetings.

PRESCRIBING COMMITTEE

Dr. Somani advised that the Committee reviewed the report of the Committee on Prescriptive Governance (CPG). He noted that there are already meetings being scheduled to update the formulary. At the last meeting, a number of intravenous drugs were approved. The only required stipulation is that those APNs who prescribe intravenous drugs should be trained in their specialty areas. If APNs want to work with cardiologists, they should be cardiology trained APNs.

Dr. Somani stated that the Committee also reviewed a request from the OOA and a group of bariatric physicians to re-examine the Board's rules and allow the longer-term use of drugs to control obesity. There was quite a bit of discussion. He noted that one interpretation of "a few weeks," as found in the

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FDA guidelines packet insert, is 12 weeks. The OOA and the bariatric group is now saying that they would like to prescribe for 24 weeks. The second request they are making is for a reduction in the time between treatments from six months to three months.

Dr. Agresta asked whether there is a rationale for this request.

Dr. Somani stated that the rationale is that obesity is increasing in Ohio.

Dr. Agresta stated that the Board has to see studies that show that a patient can safely go back on the drug in three months or anything like that. He stated that they have to present something for the Board to change a rule. They can't just put in a request for a rule change without documentation of the need and appropriateness.

Dr. Somani stated that that is the point that was made. The Board accepted the FDA guidelines and packet insert, but the Board wants to see objective data to support a change.

Dr. Steinbergh commented that one point that was made was that patients are going over state lines or to the Internet to get drugs that they can't get in Ohio. The physicians whose practices focus on bariatrics feel that they need the ability to use those medications more judiciously than saying that three months later you're done with it.

Dr. Talmage commented that the IRS will allow such medications for obesity treatment to be deductible, so demand for both the drugs and bariatric surgery will go way up.

DISCIPLINARY POLICY & GUIDELINES COMMITTEE

There was no report this month.

MINIMAL STANDARDS OF CARE COMMITTEE

There was no report this month.

P.A. COMMITTEE

Dr. Buchan asked that the minutes reflect that, when the Board denied Med Central Mansfield's second request, it did so because the complications involving that procedure and the complexity of that procedure were the bases for denial. Things like hemorrhage, sepsis, air emboli ischemia, impaired circulation to the extremity, or dysrhythmia could occur.

MIDWEST REGIONAL BOARDS

Dr. Steinbergh stated that the Boards will meet in San Diego in the Connaught Room, at noon on Saturday, April 27.

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EXECUTIVE COMMITTEE

Dr. Somani stated that the Committee met with representatives of OSMA. One matter discussed was the forming of a group to talk about funding for CME programs. OSMA spends about \$65,000 each year for CME accreditation, and only one-half of the physicians licensed in Ohio are OSMA members. Dr. Somani stated that the Board has an excellent relationship with OSMA. They have been supportive of the Board getting \$20 per license for the physicians in the underserved area. He would like to maintain that cooperation. Dr. Somani stated that it wouldn't hurt the Board to work with OSMA, look at different options and see if there is something that the Board can do to help.

Dr. Bhati stated that there is no problem talking to them about it.

Dr. Garg commented that talking's not a problem, but OSMA has brought this up before.

Dr. Somani stated that this time they want to suggest possible solutions, and he thinks the Board should listen to them.

Dr. Talmage stated that he won't be attending the May Board meeting, but the OSMA annual meeting occurs the week following. If there are resolutions regarding the Board, he will be glad to testify based on the Board's recommendation.

Dr. Somani stated that also on OSMA's agenda was on-line, distance education. He noted that this is a topic the Board has talked about. How do physicians get C.M.E through on-line educational programs. This is another topic they would like to discuss in C.M.E. discussions.

Dr. Somani stated that the third topic on OSMA's agenda was a resolution it passed after an OSMA member complained that the Board didn't inform the member of the results of an investigation. OSMA wants feedback to members who are being investigated but the file never gets closed. As part of that discussion, OSMA would like to have the Board's priority system, and more information of how the Board handles these cases.

Dr. Garg stated that the Board sends a letter to the physician after the matter is concluded.

Dr. Somani stated that some people don't get the letters.

Dr. Garg stated that OSMA is talking about timely letters. Sometimes it has taken five years for the case to resolve, then they are told. OSMA wants something written about what's happening.

Dr. Somani stated that for five years the physician is concerned about what is going on, they haven't heard from the Board and time goes by. They get very nervous about it.

Mr. Albert stated that he and Dr. Garg have had a lot of discussion on this. They both have concerns.

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Dr. Garg stated that every Board member has concerns. The Board is always critical about how long it takes, and why should the doctor be kept in suspense.

Dr. Somani stated that two things came out of this meeting from his point of view. The Board should put together an article for the newsletter. The second was that the Board should attend the annual meeting.

Dr. Somani stated that the OSMA also advised that they have a very good collaboration with the database exchange. The Board members exchanged with OSMA the CAVU system that will hopefully be in place. OSMA also had some concerns about the Task Force on Workforce Shortage. Dr. Baird had shared those concerns with the Board in March.

Dr. Somani stated that the Board's first topic for this meeting was APN prescribing issues. There was quite a bit of discussion as to how this has been brought about. Physicians themselves keep bringing up more and more things for non-physicians to do. The second issue for the Board was Internet prescribing. Dr. Somani stated that he thinks that the Federation wants the Board to re-examine how best the Internet can be used. OSMA was very positive about that topic.

Dr. Somani stated that the Committee also brought to the OSMA's attention that it would be helpful to the Board, especially in relation to dealing with the "delay", that OSMA should become proactive in identifying panels of experts who can do voluntary services for the Board. Part of the reason for delay in resolving these complaints is the availability of experts.

Mr. Albert asked whether the Committee is going to meet with representatives of the OOA and OPMA. He added that he thinks that it should.

Dr. Somani stated that it will.

Mr. Albert stated that the OSMA did suggest a surcharge on licensure fees to pay for the CME problems. He added that he doesn't think that that is a good idea, because once that is opened up, there are a number of other entities that will try to have surcharges put on licensure fees.

Dr. Steinbergh stated that when she pays her OOA dues, there's a block on the application designating donations. One of the list of possible donation recipients is OPEP. The physician can designate where he or she wants a contribution to go.

Dr. Somani at this time noted that there are resolutions to be presented at the Federation meeting. He asked Dr. Agresta to address this matter.

Dr. Agresta stated that the Federation Board of Directors will meet before the day before the annual meeting begins. It will address the resolutions presented and come up with support or non-support before they go to the resolution committee. A Board member will be assigned to go to each of these meetings to either support or say something. Sometimes they won't say anything at all.

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Dr. Somani stated that there are three agenda items that are all assigned to Reference Committee B. There are three items that are all initiated by the Ohio State Medical Board, starting with linking USMLE to FCVS.

Dr. Agresta stated that that is one the Board has discussed in previous years.

Dr. Somani asked for the guidance in relation to the candidates for different Federation offices. He noted that the Board will be supporting Dr. Agresta for President, but there are other candidates for other offices.

Dr. Agresta stated that there are some good candidates, and it will be a tough decision to decide who to support and not support. He named several individuals running for office, including Daniel B. Kimball, Jr., M.D., of Pennsylvania, N. Stacy Lankford, M.D., of Indiana and Daniel W. Morrissey, OP, of New York. Some of the candidates he doesn't know well. He does know Dr. Kimball and Dr. Lankford well.

Dr. Steinbergh spoke in support of Dr. Kimball. She stated that he is part of the Midwest Regional Boards, and participates all of the time. She thinks that he is a fine candidate, but is less visible than some of the other candidates. Dr. Steinbergh stated that she thinks that the Board needs to support him.

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

Thereupon at 5:25 p.m., the April 10, 2002 meeting of the State Medical Board of Ohio was duly adjourned.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio, meeting on April 10, 2002, as approved on May 8, 2002.

Pitambar Somani M.D.

Pitambar Somani, M.D., President

Anand G. Garg

Anand G. Garg, M.D., Secretary

(SEAL)



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April 10, 2002
