MINUTES
THE STATE MEDICAL BOARD OF OHIO
January 9, 2013

Anita M. Steinbergh, D.O., President, called the meeting to order at 1:00 p.m. in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes Office Tower, 30 E. Broad Street, Columbus, Ohio 43215, with the following members present: Kris Ramprasad, M.D., Vice President; J. Craig Strafford, M.D., Secretary; Mark A. Bechtel, M.D., Supervising Member; Lance A. Talmage, M.D.; Dalsukh Madia, M.D.; Marchelle L. Suppan, D.P.M.; Darshan Mahajan, M.D.; Laurie O. Elsass; Donald R. Kenney, Sr.; and Michael Gonidakis.

Also present were: Kimberly Anderson, Interim Executive Director; Susan Loe, Assistant Executive Director, Program Management and Operations; Sallie J. Debolt, General Counsel; Joan K. Wehrle, Education & Outreach Program Manager; Marcie Pastrick, Karen Mortland, Mark Blackmer, Angela McNair, Dan Zinsmaster, and Cheryl Pokorny, Enforcement Attorneys; Kyle Wilcox, Melinda Snyder, and Henry Appel, Assistant Attorneys General; Gregory Porter, Acting Chief Hearing Examiner; Danielle Blue, Hearing Examiner; Alana Noward, Hearing Unit Secretary; Gary Holben, Operations Administrator; Danielle Bickers, Compliance Supervisor; Annette Jones, Compliance Officer; Kay Rieve, Administrative Officer, Nicole Weaver, Chief of Licensure; Barbara Jacobs, Senior Executive Staff Attorney; Jacqueline A. Moore and Fonda Brooks, Public Information Assistants; and Benton Taylor, Executive Assistant to the Executive Director.

Dr. Steinbergh thanked the Board members, staff, and the assistant attorneys general for their dedication and commitment to the Board’s mission. Dr. Steinbergh commented that 2012 was a good year, a year of changes and challenges that will continue into the new year. Dr. Steinbergh stated that she looked forward to making 2013 a memorable year.

MINUTES REVIEW

Dr. Madia moved to approve the draft minutes of the December 12-13, 2012, Board meeting, as written. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

EXECUTIVE SESSION

Dr. Madia moved that the Board declare Executive Session to confer with the Attorney General's representatives on matters of pending or imminent court action. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:
Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Suppan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion carried.

Pursuant to Section 121.22(G)(3), Ohio Revised Code, the Board went into executive session at 1:02 p.m., with Ms. Anderson, Ms. Loe, Ms. Debolt, Ms. Wehrle, the Enforcement Attorneys, the Assistant Attorneys General, Ms. Bickers, Ms. Jones, Ms. Rieve, Ms. Weaver, Ms. Jacobs, Ms. Moore, Ms. Brooks, and Mr. Taylor in attendance.

The Board returned to public session.

APPLICANTS FOR LICENSURE

Dr. Mahajan moved to approve for licensure, contingent upon all requested documents being received and approved in accordance with licensure protocols, the physician applicants listed in Exhibit “A,” the physician assistant applicants listed in Exhibit “B,” the massage therapy applicants listed in Exhibit “C,” and the acupuncturist applicants listed in Exhibit “D.” Dr. Mahajan further moved to approve the results of the December 2012 NBPMEx Part III Examination, and to certify as passing and license those receiving a score of 75 or greater on their examination, and to certify as failing and deny licensure to those who received a score of less than 75 on the examination. Dr. Bechtel seconded the motion. A vote was taken:

ROLL CALL: Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Suppan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion carried.

REPORTS AND RECOMMENDATIONS
Dr. Steinbergh announced that the Board would now consider the Reports and Recommendations appearing on its agenda.

Dr. Steinbergh asked whether each member of the Board had received, read and considered the hearing records; the Findings of Fact, Conclusions of Law, Proposed Orders, and any objections filed in the matters of: Jennifer Joan Furin, M.D.; and Sharon Leilani McRae, M.D.

A roll call was taken:

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Suppan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye

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

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Suppan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye

Dr. Steinbergh noted that, in accordance with the provision in Section 4731.22(F)(2), Ohio 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 any disciplinary matters. In the matters before the Board today, Dr. Strafford served as Secretary, Dr. Bechtel served as Supervising Member, and Dr. Talmage served as Secretary and/or Acting Supervising Member.

Dr. Steinbergh reminded all parties that no oral motions may be made during these proceedings.
The original Reports and Recommendations shall be maintained in the exhibits section of this Journal.

JENNIFER JOAN FURIN, M.D., Case No. 12-CRF-077

Dr. Steinbergh directed the Board’s attention to the matter of Jennifer Joan Furin, M.D. She advised that no objections were filed to Ms. Clovis’ Report and Recommendation.

Dr. Steinbergh continued that a request to address the Board has been timely filed on behalf of Dr. Furin. Five minutes will be allowed for that address.

Dr. Furin thanked the Board and its staff who have assisted her in the past six months. Dr. Furin stated that she appears before the Board today as a recovering substance abuser who relapsed in July 2012. Dr. Furin apologized for her relapse and understood that practicing medicine in Ohio is a privilege. Dr. Furin stated that she takes the Board’s rules very seriously and she is committed to meeting any requirements laid out by the Board. Dr. Furin stated that she has not yet been able to enter a 28-day inpatient treatment program due to work and financial constraints. Dr. Furin asked the Board to grant her an additional six to 12 months to complete these requirements.

Dr. Furin stated that she takes her sobriety very seriously. Dr. Furin stated that her relapse was devastating, but it allowed her to better understand her recovery and to deepen her commitment to her sobriety. Dr. Furin stated that she has completed an out-patient treatment program and will continue to attend five to six Alcoholics Anonymous (AA) meetings per week. Dr. Furin also stated that she is actively involved with the Ohio Physicians Health Program (OPHP) and undergoes random urine screens two to three times per month which have all been negative.

Dr. Furin reiterated that she is committed to complying with the Board’s recommendation and only asked for time to fulfill the requirements.

Dr. Steinbergh asked if the Assistant Attorney General would like to respond. Mr. Appel stated that he would like to respond.

Mr. Appel noted that Dr. Furin has freely acknowledged her relapse. Mr. Appel stated that although this is a sympathetic case, Section 4731-16-02, Ohio Administrative Code, requires that Dr. Furin undergo a 28-day inpatient treatment program prior to reinstatement of her license. Dr. Furin is unable to take advantage of an exception in that rule because the inpatient program she completed was only 14 days.

Mr. Appel asked the Board to adopt the Hearing Examiner’s Report and Recommendation in this case.

Dr. Madia moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Jennifer Joan Furin, M.D. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Madia stated that Dr. Furin obtained a Ph.D. in anthropology, attended Harvard Medical School,
completed training programs in internal medicine and infectious disease, and has been on the teaching faculty at Harvard University and Case Western Reserve University. Dr. Furin also did work for the World Health Organization fighting tuberculosis and HIV.

Dr. Madia stated that while working in the nation of Lesotho in 2008, she was beaten and raped. Following this tragic incident, Dr. Furin went to Boston for treatment, but then returned to Lesotho to do humanitarian work. During this time, Dr. Furin was treated with benzodiazepines and narcotics. When Dr. Furin realized she had become addicted to her medications, she returned to Boston for treatment, including a 14-day inpatient treatment program. The Massachusetts Board of Registration in Medicine took no action on Dr. Furin’s license in that state.

Dr. Madia continued that when Dr. Furin returned to Cleveland in 2010, she joined OPHP and the Glenbeigh outpatient program. Dr. Furin did well in the program and was mostly practicing anthropology at that time.

In 2012, while attending a conference in Washington, D.C., Dr. Furin received a call from OPHP telling her that her urine tested positive for a trace of alcohol. Dr. Furin suspected that the positive test was a result of an anti-malaria drug she had been taking in preparation for a trip to Haiti, and she now feared that she would be falsely accused of relapse. That evening, Dr. Furin went to a bar and consumed four to five beers. The next morning, Dr. Furin realized that what she had done was wrong and reported her alcohol consumption to OPHP and the Medical Board. In response, the Medical Board summarily suspended Dr. Furin’s medical license in Ohio. Dr. Madia noted that following the summary suspension, the Medical Board’s website erroneously reported that Dr. Furin had been suspended due to drug trafficking. Although the Board corrected this error, the false report was seen by the Dean of Faculty of Case Western Reserve University.

Dr. Madia stated that Dr. Furin is very compliant with the Board’s requirements, she is attending AA meetings, and she is undergoing urine screens. Dr. Madia observed that the Report and Recommendation never mentioned that Dr. Furin was addicted to alcohol, the substance she relapsed on. Following a 72-hour outpatient evaluation at Glenbeigh, Ted Parran, M.D., reported that Dr. Furin should not be practicing medicine at this time due to her relapse. However, Khoa Tran, M.D., recommended only outpatient treatment.

Dr. Madia stated that Dr. Furin is obviously a very bright person who has done a lot of good for society worldwide. However, Ohio law and the Board’s rules require that she undergo a 28-day inpatient treatment program. The Proposed Order also requires the recommendation of two physicians knowledgeable in addictionology prior to reinstatement of her license. Dr. Madia stated that he supports the Proposed Order.

Mr. Gonidakis asked what the practical effect of the Proposed Order will be on Dr. Furin. Dr. Madia replied that it will take some time for Dr. Furin to fulfill the Proposed Order’s reinstatement terms. Once Dr. Furin has fulfilled those terms, she will have to reapply for her license and the process will start over again.
Dr. Steinbergh agreed that Dr. Furin must go through a 28-day inpatient treatment program, as required by the Board’s rules. Dr. Steinbergh commented that it is rare that a physician is willing to comply with this type of Order as Dr. Furin is. Dr. Steinbergh opined that after this process, Dr. Furin will be a better individual and more in touch with herself and her healing. Dr. Madia stated that going into a 28-day program will be a hardship for Dr. Furin because she does not have health insurance. Dr. Steinbergh noted that the Proposed Order is for an indefinite suspension, and therefore Dr. Furin can comply in any timeframe that suits her situation.

Dr. Mahajan expressed concern about the negative impact on Dr. Furin’s job situation that resulted from the Board’s erroneous initial report on the reason for her summary suspension. Although the Board corrected the error, Dr. Furin has been told that her contract with Case Western Reserve University will not be renewed in July. Dr. Steinbergh also regretted the error, but stated that Dr. Furin’s employer also had access to the public documentation regarding the details and reasons for the Board’s action. Dr. Steinbergh believed that any employer would have been legally advised to read that documentation carefully before rendering a decision on Dr. Furin’s employment. Dr. Steinbergh felt that Dr. Furin’s employer made the decision based on the total aspects of her case.

Dr. Ramprasad agreed that the Board’s rules require that Dr. Furin complete a 28-day inpatient treatment program before her license can be reinstated. Dr. Ramprasad expressed appreciation for all the Dr. Furin has done and commented that she is a courageous person. Dr. Madia agreed and thanked Dr. Furin for her service.

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

ROLL CALL:  
Dr. Strafford - abstain  
Dr. Bechtel - abstain  
Dr. Mahajan - aye  
Dr. Suppan - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Madia - aye  
Dr. Talmage - abstain  
Ms. Elsass - aye  
Mr. Gonidakis - aye

The motion to approve carried.

SHARON LEILANI MCRAE, M.D., Case No. 12-CRF-064

Dr. Steinbergh directed the Board’s attention to the matter of Sharon Leilani McRae, M.D. She advised that objections were filed and were previously distributed to Board members. Ms. Clovis was the Hearing Examiner.

Dr. Mahajan moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and
Proposed Order in the matter of Sharon Leilani McRae, M.D. Dr. Ramprasad seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Ramprasad stated that on March 22, 2012, the Board determined that it had reason to believe that Dr. McRae, an emergency medicine physician, was in violation of Section 4731.22(B)(19), Ohio Revised Code, and she was ordered to undergo a psychiatric evaluation. The evaluation was performed by Stephen Noffsinger, M.D., who diagnosed Dr. McRae with anxiety disorder not otherwise specified and psychotic disorder not otherwise specified. At hearing, two other psychiatrists, Samuel Bradshaw, M.D., and William Logan, M.D., testified as experts on Dr. McRae’s behalf and disagreed with Dr. Noffsinger’s diagnoses.

Dr. Ramprasad stated that Dr. McRae has worked in various places as an employee of Quality Emergency Specialists (QESI). By mutual consent or otherwise, Dr. McRae was asked to terminate her employment with QESI for inability to maintain adequate flow in the emergency department, inability to fulfill patient and facility needs, the quality of her trauma care and pain management, patients’ perceptions that she is rude, inattentive, and curt, lack of response to identified administrative issues, and extreme resistance to criticism, feedback, and suggestions.

Dr. Ramprasad stated that Dr. McRae had worked a long shift between December 28, 2011, and January 2, 2012. Although Dr. McRae was only supposed to work 12-hour shifts, she may have worked an average of 15 hours per shift. Dr. McRae experienced significant stress during work. Dr. McRae called the regional medical director, Rebecca Parker, M.D., because she felt that the nurses were against her and that a patient had been transferred without her consent. Dr. McRae later left the facility and continued to talk with Dr. Parker on the phone for three-and-a-half hours. On the freeway, Dr. McRae drove her car at 10 MPH when the rest of the traffic was moving at about 70 MPH, prompting motorists to call the police. Dr. Parker also called the police out of concern for Dr. McRae. Subsequently, Dr. McRae had stopped on the freeway and panicked because she thought a train was coming at her at a railroad crossing; in fact, the lights were from Cleveland Emergency Services arriving to assist her and she was not at a railroad crossing.

Dr. Ramprasad continued that Dr. McRae was admitted to the hospital on January 4. Hospital records indicate that Dr. McRae was anxious, talkative, had pressured speech, and could not sleep. Dr. McRae reported stated that she could not “function this way.” Dr. McRae was readmitted on January 7 and diagnosed with psychiatric conditions. Dr. McRae was prescribed Abilify, Zyprexa, and benzodiazepines, which she refused to take. Hospital records further indicate that Dr. McRae was argumentative with the staff and accused the nurse of not being honest.

Dr. Ramprasad noted that Dr. McRae also had a prior admission in 2010 at Deaconess Hospital in Cincinnati. During that admission, a psychiatrist and a cardiologist opined that Dr. McRae had an acute stress reaction. Dr. Ramprasad stated that, in a sense, Drs. Bradshaw and Logan disputed all of these findings, as well as Dr. Noffsinger's findings, and opined that Dr. McRae had no problems at all.

Dr. Ramprasad stated he reviewed the records and found no evidence of drug use, dehydration, or any
other reason for these events other than anxiety reactions. Dr. Ramprasad noted that no one who has worked with Dr. McRae has found her to be in any psychotic state or other mental status. According to a friend, these behaviors are Dr. McRae’s normal baseline. Dr. Ramprasad stated that every place Dr. McRae has worked has led to complaints from nurses and patients about her combativeness and rudeness.

Dr. Ramprasad stated that he will propose an amended Order that will not suspend Dr. McRae’s license, but will place her on probation for a minimum of two years. The amendment will also make changes Findings of Fact #’s 1 and 2 in the Report and Recommendation.

**Dr. Ramprasad moved to amend Finding of Fact #1 to read as follows:**

1. By letter dated March 22, 2012, the Board notified Sharon Leilani McRae, M.D., of its determination that it had reason to believe that Dr. McRae was in violation of Section 4731.22(B)(19), Ohio Revised Code, and ordered her to undergo a psychiatric examination to determine if she was in violation of Section 4731.22(B)(19), Ohio Revised Code. The Board’s determination was based upon one or more of the reasons outlined in the letter, which included Dr. McRae’s history of psychiatric admissions at MetroHealth Medical Center in January 2011, concerns about her bedside manner with patients and interaction with coworkers, and her disclosure to Board staff that she had offered a recording to CNN for a story on medical abuse and that she was considering a lawsuit against MetroHealth Hospital on various charges including false imprisonment.

**Dr. Ramprasad further moved to amend Finding of Fact #2 to read as follows:**

2. By letter dated June 6, 2012, from Stephen G. Noffsinger, M.D., the Board was notified that following the Board-ordered evaluation conducted on or about April 18, 2012, Dr. McRae was determined to be have the diagnoses of Anxiety Disorder, Not Otherwise Specified, and Psychotic Disorder, Not Otherwise Specified, resulting in an inability to practice according to acceptable and prevailing standards of care. Dr. Noffsinger further determined that Dr. McRae’s mental disorders and other psychopathology are amenable to treatment.

In her defense, Dr. McRae presented the testimony of two psychiatrists: Samuel L. Bradshaw Jr., M.D., and William S. Logan, M.D. Dr. Bradshaw is a board-certified psychiatrist who served as the Chief of Psychiatry at the Comery-O’Neil VA Medical Center for 20 years. Dr. Bradshaw testified that, after reviewing records and examining Dr. McRae, he saw no evidence that Dr. McRae suffers from a mental disturbance. Dr. Bradshaw further opined that Dr. McRae does not have any psychiatric disorder that affects her medical practice.

Dr. Logan is board-certified in psychiatry and forensic psychiatry and has performed many physician evaluations for the medical boards of Kansas and Missouri. Dr. Logan reviewed Dr. McRae’s records and examined her. He opined that in January 2011 Dr. McRae had probably suffered from dehydration, an electrolyte imbalance, and sleep
Dr. Logan noted that the diagnosis at the time was either an acute stress reaction or brief reactive psychosis, but opined that there were actually no symptoms of psychosis. Dr. Logan further opined that Dr. McRae did not suffer from anxiety disorder.

Dr. Ramprasad further moved to amend the Proposed Order to remove the suspension of Dr. McRae’s license to practice medicine and surgery in Ohio. Dr. Ramprasad further moved that the Interim Monitoring conditions of the Proposed Order be included as Probationary Terms. Dr. Ramprasad further moved to add a Professional Ethics Course(s) and a Stress Management Course(s) to the Probationary Terms.

Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she will now entertain discussion of the proposed amendment.

Dr. Mahajan stated that Dr. McRae’s behavior and difficulty in relating with patients and co-workers have been long-standing. Dr. Mahajan suggested that a course in anger management or behavior modification would be beneficial to Dr. McRae.

Dr. Steinbergh noted that Dr. McRae has suffered a great amount of stress throughout her life and that oftentimes people manage stress less well as they get older. Dr. Steinbergh opined that Dr. McRae’s stress affected her medical care, though there are no allegations of violation of minimal standards of care. Dr. Steinbergh noted that the incident in January 2011 involved Dr. McRae’s great concern that a child was moved from the emergency department before she could ascertain if his intubation was correct. Dr. Steinbergh opined that Dr. McRae is a very dedicated physician and the stress of that evening led to additional stress later. Dr. Mahajan agreed that Dr. McRae is a dedicated and hard-working physician, but opined that she needs to modify her behavior and the way she interacts with others.

Dr. Suppan agreed with Dr. Mahajan’s previous statements. Dr. Suppan appreciated the need to determine if there is any psychiatric component in this matter, but is also interested in the behavior and disruptiveness. Dr. Suppan stated that there are organizations that are very good at addressing such issues. Dr. Mahajan stated that Dr. McRae’s psychiatric evaluation is likely to reveal no psychotic compliment to her problems and the Board will have not addressed the root cause of her problems, namely her behavior.

Ms. Debolt suggested that the Board table this topic so that the possible courses suggested by Dr. Mahajan can be explored.

**Dr. Madia moved to table this topic. Dr. Ramprasad seconded the motion.** All members voted aye. The motion carried.

Dr. Suppan exited the meeting at this time.

**FINDINGS, ORDERS, AND JOURNAL ENTRIES**

Dr. Steinbergh advised that in the following matters, the Board issued a Notice of Opportunity for Hearing,
and documentation of service was received for each. There were no requests for hearing filed, and more than 30 days have elapsed since the mailing of the Notices. The matters are therefore before the Board for final disposition.

KIM MARKL SHERIDAN, M.D., Case No. 12-CRF-125

Dr. Steinbergh stated that this matter is disciplinary in nature. Therefore, Dr. Strafford, Dr. Bechtel and Dr. Talmage may not vote.

Dr. Ramprasad stated that on or about August 10, 2012, the Medical Board of California issued a decision regarding Dr. Sheridan, based on his engaging in extreme departure from the minimal standards of care, failing to recognize unsuccessful labor process, failing to recognize fetal distress, and delaying performance of a C-Section. Dr. Ramprasad also noted that this case involved phantom forceps placement. Further, the Medical Board of California took action based on clear and convincing evidence that in his care of a second patient, Dr. Sheridan engaged in repeated acts of negligence by failing to properly document his care and treatment, specifically regarding application of trial forceps prior to delivery, and further engaged in unprofessional conduct by failing to mail adequate records concerning this patient.

Dr. Ramprasad moved to find that the allegations as set forth in the November 14, 2012 Notice in the matter of Kim Markl Sheridan, M.D., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, indefinitely suspending Dr. Sheridan’s license to practice medicine and surgery in Ohio. Dr. Madia seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Steinbergh opined that Dr. Sheridan’s Ohio license should be non-permanently revoked, noting that a suspension will require terms for reinstatement and possibly probationary terms. Dr. Ramprasad agreed to change his motion.

Dr. Ramprasad wished to change his motion to find that the allegations as set forth in the November 14, 2012 Notice in the matter of Kim Markl Sheridan, M.D., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, revoking Dr. Sheridan’s license to practice medicine and surgery in Ohio. As no Board member objected, the change was accepted. A vote was taken:

ROLL CALL: 

- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Mahajan - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Madia - aye
- Dr. Talmage - abstain
- Ms. Elsass - aye
- Mr. Gonidakis - aye
The motion carried.

Dr. Steinbergh stated that the remaining Findings, Orders and Journal Entries are non-disciplinary in nature. Therefore, all Board members may vote.

CYNTHIA M. BEVELHYMER, M.T., Case No. 12-CRF-128

Dr. Mahajan moved to find that the allegations as set forth in the November 16, 2012 Notice in the matter of Cynthia M. Bevelhymer, M.T., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving her application for restoration of her license to practice massage therapy in Ohio, provided that she takes and passes the Massage and Bodywork Licensing Examination (MBLEx) within six months of November 16, 2012. Ms. Elsass seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Mahajan stated that the Proposed Order will approve the restoration of Ms. Bevelhymer’s massage therapy license, pending successful completion of the MBLEx within six months of November 16, 2012. Dr. Ramprasad noted that Ms. Bevelhymer’s application was received in April 2011 and the non-disciplinary citation was mailed only recently due to administrative problems. Dr. Ramprasad suggested that it would be appropriate to given Ms. Bevelhymer one year instead of six months to pass the MBLEx because it is not known what her current resources are. Dr. Steinbergh disagreed, stating that Ms. Bevelhymer received Notice of Opportunity to request a hearing in this matter, but no such request has been received.

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

ROLL CALL:  

Dr. Strafford  - aye  
Dr. Bechtel  - aye  
Dr. Mahajan  - aye  
Dr. Ramprasad  - aye  
Dr. Steinbergh  - aye  
Dr. Madia  - aye  
Dr. Talmage  - aye  
Ms. Elsass  - aye  
Mr. Gonidakis  - aye

The motion carried.

JEAN L. DESANTO, M.T., Case No. 12-CRF-129

Dr. Madia moved to find that the allegations as set forth in the November 16, 2012 Notice in the matter of Jean L. DeSanto, M.T., have been proven to be true by a preponderance of the evidence,
and that the Board enter an Order, effective upon mailing, approving her application for restoration of her license to practice massage therapy in Ohio, provided that she takes and passes the Massage and Bodywork Licensing Examination (MBLEx) within six months of November 16, 2012. Dr. Talmage seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Talmage stated that Ms. DeSanto’s massage therapy license was initially issued in 1991 and lapsed in 2007 due to non-renewal. Ms. DeSanto is now applying for restoration of her license. Dr. Talmage agreed with the Proposed Order to restore Ms. DeSanto’s license, provided she passes the MBLEx within six months of November 16, 2012.

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

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion carried.

LETISHA ANN MAKARYK, M.T., Case No. 12-CRF-115

Dr. Ramprasad moved to find that the allegations as set forth in the November 9, 2012 Notice in the matter of Letisha Ann Makaryk, M.T., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving her application for restoration of her license to practice massage therapy in Ohio, provided that she takes and passes the Massage and Bodywork Licensing Examination (MBLEx) within six months of November 9, 2012. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Talmage stated that Ms. Makaryk’s massage therapy license was initially issued in 1998 and lapsed in 2003 due to non-renewal. Ms. Makaryk is now applying for restoration of her license. Dr. Talmage agreed with the Proposed Order to restore Ms. Makaryk’s license, provided she passes the MBLEx within six months of November 9, 2012.

A vote was taken on Dr. Ramprasad’s motion:
ROLL CALL:  
Dr. Strafford - aye  
Dr. Bechtel - aye  
Dr. Mahajan - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Madia - aye  
Dr. Talmage - aye  
Ms. Elsass - aye  
Mr. Gonidakis - aye

The motion carried.

MARYANN E. MLODZIK, M.T., Case No. 12-CRF-100

Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Maryann E. Mlodzik, M.T., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving her application for restoration of her license to practice massage therapy in Ohio, provided that she takes and passes the Massage and Bodywork Licensing Examination (MBLEx) within six months of November 6, 2012. Dr. Ramprasad seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Ms. Elsass stated that Ms. Mlodzik’s massage therapy license was initially issued in 1998 and lapsed in 2005 due to non-renewal. Ms. Mlodzik is now applying for restoration of her license. Ms. Elsass agreed with the Proposed Order to restore Ms. Mlodzik’s license, provided she passes the MBLEx within six months of November 6, 2012.

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

ROLL CALL:  
Dr. Strafford - aye  
Dr. Bechtel - aye  
Dr. Mahajan - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Madia - aye  
Dr. Talmage - aye  
Ms. Elsass - aye  
Mr. Gonidakis - aye

The motion carried.

NICOLE MARIE TIGYER, M.T., Case No. 12-CRF-098
Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Nicole Marie Tigyer, M.T., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving her application for restoration of her license to practice massage therapy in Ohio, provided that she takes and passes the Massage and Bodywork Licensing Examination (MBLEx) within six months of November 6, 2012. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Ms. Elsass stated that Ms. Tigyer’s massage therapy license was initially issued in 2001 and lapsed in 2003 due to non-renewal. Ms. Tigyer has not engaged in the practice of massage therapy for more than two years. Ms. Tigyer is now applying for restoration of her license. Ms. Elsass agreed with the Proposed Order to restore Ms. Tigyer’s license, provided she passes the MBLEx within six months of November 6, 2012.

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

ROLL CALL:  
Dr. Strafford - aye  
Dr. Bechtel - aye  
Dr. Mahajan - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Madia - aye  
Dr. Talmage - aye  
Ms. Elsass - aye  
Mr. Gonidakis - aye

The motion carried.

YONGJUN LIN, Case No. 12-CRF-104

Dr. Mahajan moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Yongjun Lin have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying his application for a license to practice massage therapy in Ohio. Dr. Ramprasad seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Mahajan stated that it is proposed that Mr. Lin’s application for a massage therapy license be denied because he does not hold a diploma or certificate from a school or institution that has a Certificate of Good Standing from the Medical Board. Also, Mr. Lin does not meet the Board’s required course of instruction and has not held a massage therapy license in another state for at least five years.

Dr. Ramprasad noted that, according to documentation, Mr. Lin’s course of instruction included 750 hours
over a period of approximately six months, and therefore does not meet the Board’s minimum requirements. Dr. Ramprasad asked for clarification of this statement. Ms. Jacobs responded that the minimum required time of instruction is nine months, which Mr. Lin’s course does not meet.

Mr. Gondidakis asked for the rule to be explained in more detail. Ms. Jacobs stated that in Ohio, there are three pathways to obtain a massage therapy license: 1) Attend a massage therapy school that has a Certificate of Good Standing, 2) hold a massage therapy license in another state for at least five preceding years, or 3) have at least 750 hours of instruction in massage therapy over a time of at least nine months. Dr. Lin’s course of instruction meets the minimum hours requirement of the third pathway, but not the minimum time of instruction.

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

**ROLL CALL:**

Dr. Strafford  - aye  
Dr. Bechtel  - aye  
Dr. Mahajan  - aye  
Dr. Ramprasad  - aye  
Dr. Steinbergh  - aye  
Dr. Madia  - aye  
Dr. Talmage  - aye  
Ms. Elsass  - aye  
Mr. Gondidakis  - aye

The motion carried.

**WEN FENG SHEN, Case No. 12-CRF-105**

Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Wen Feng Shen have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying his application for a license to practice massage therapy in Ohio. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Mahajan stated that it is proposed the Mr. Shen’s application for a massage therapy license be denied because he does not hold a diploma or certificate from a school or institution that has a Certificate of Good Standing from the Medical Board. Also, Mr. Shen does not meet the Board’s required course of instruction and has not held a massage therapy license in another state for at least five years.

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

**ROLL CALL:**

Dr. Strafford  - aye  
Dr. Bechtel  - aye  
Dr. Mahajan  - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion carried.

LIJUN TIPTON, Case No. 12-CRF-107

Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Lijun Tipton have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying her application for a license to practice massage therapy in Ohio. Dr. Ramprasad seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Mr. Gonidakis stated that on November 6, 2012, Notice of the Board’s proposed denial of application was sent to Ms. Tipton because she does not meet the Board’s requirements for licensure. No request for hearing has been received from Ms. Tipton.

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

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion carried.

JUN WANG, Case No. 12-CRF-106

Dr. Mahajan moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Jun Wang have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying her application for a license to practice massage therapy in Ohio. Dr. Ramprasad seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.
Mr. Gonidakis stated that on November 6, 2012, Notice of the Board’s proposed denial of application was sent to Ms. Wang because she does not meet the Board’s requirements for licensure. No request for hearing has been received from Ms. Wang.

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

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion carried.

HUMA SHUJA RIZVI, M.D., Case No. 12-CRF-096

Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Huma Shuja Rizvi, M.D., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving her application for a license to practice medicine and surgery in Ohio, provided that she takes and passes the Special Purpose Examination (SPEX) or specialty board recertification examination within one year of November 6, 2012. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Madia stated that on November 6, 2012, Dr. Rizvi was notified of the Board’s proposal to approve her application for a license to practice medicine and surgery in Ohio, provided she passes the SPEX or specialty board recertification examination within one year of November 6, 2012. No request for hearing was received from Dr. Rizvi.

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

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion carried.

MATTHEW WENTWORTH CHASE, M.D., Case No. 12-CRF-101

Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Matthew Wentworth Chase, M.D., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving his application for restoration of his license to practice medicine and surgery in Ohio, provided that he takes and passes the Special Purpose Examination (SPEX) within one year of November 6, 2012. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Ramprasad stated that Dr. Chase’s medical license was initially issued in 1981 and lapsed in 1998 due to non-renewal. On March 8, 2012, Dr. Chase submitted an application for renewal of his license. Dr. Chase’s résumé of activities shows that he has not been engaged in the practice of medicine and surgery for more than two years. The Proposed Order is to approve Dr. Chase’s application for restoration of his license, provided that he takes and passes the SPEX within one year of the Notice.

Dr. Ramprasad asked why Dr. Chase has not also been given the opportunity to pass his specialty board’s recertification examination instead of the SPEX. Ms. Debolt stated that it may be that Dr. Chase is not board certified, and therefore cannot recertify. Dr. Steinbergh asked the staff to review the documentation to see if Dr. Chase is board certified. Dr. Steinbergh asked if Dr. Madia would change his motion to include passage of a board recertification examination if Dr. Chase is board certified. Dr. Madia agreed.

Dr. Madia wished to change his motion to include passage of either the Special Purpose Examination (SPEX) or a specialty board recertification examination as a condition for restoration of Dr. Chase’s medical license. As no Board member objected, the change was accepted.

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

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Ms. Elsass - aye
Mr. Gonidakis - aye
The motion carried.

Ms. Jacobs stated that she has reviewed the documentation and confirmed that Dr. Chase is not board certified.

**LINDA LAU FINNEGAN, M.D., Case No. 12-CRF-113**

Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Linda Lau Finnegan, M.D., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying her application for a license to practice medicine and surgery in Ohio. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Ramprasad stated that Dr. Finnegan passed Step I of the United States Medical Licensing Examination (USMLE) on the second attempt, passed Step II on the first attempt, and passed Step III on the sixth attempt in 2000. Dr. Ramprasad stated that Dr. Finnegan is currently working as a radiologist and has been board certified since 2010. According to the Board’s rules, Dr. Finnegan’s application for licensure must be denied because she failed Step III more than three times.

Dr. Mahajan commented that Dr. Finnegan is an accomplished physician and is probably a very good radiologist, noting her board certification. Dr. Mahajan suggested that the Board proceed as soon as possible in changing the rule that keeps physicians like Dr. Finnegan from being licensed in Ohio.

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

**ROLL CALL:**

- Dr. Strafford - aye
- Dr. Bechtel - aye
- Dr. Mahajan - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Madia - aye
- Dr. Talmage - aye
- Ms. Elsass - aye
- Mr. Gonidakis - aye

The motion carried.

**JACK ALEXANDER VITVITSKY, P.A., Case No. 12-CRF-050**

Dr. Madia moved to find that the allegations as set forth in the June 26, 2012 Notice in the matter of Jack Alexander Vitvitsky, P.A., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying his application for a provisional certificate to prescribe as a physician assistant in Ohio. Dr. Ramprasad seconded the motion.
Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Mahajan stated that Mr. Vitvitsky is applying for prescribing authority. The Proposed Order is to deny the application because Mr. Vitvitsky lacks at least ten years of experience as a physician assistant or a master’s degree or higher from accredited program, as required by Section 4730.46(B), Ohio Revised Code. No request for hearing was received from Mr. Vitvitsky.

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

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<thead>
<tr>
<th>ROLL CALL:</th>
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<tr>
<td>Dr. Strafford</td>
<td>- aye</td>
</tr>
<tr>
<td>Dr. Bechtel</td>
<td>- aye</td>
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<tr>
<td>Dr. Mahajan</td>
<td>- aye</td>
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<tr>
<td>Dr. Ramprasad</td>
<td>- aye</td>
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<tr>
<td>Dr. Steinbergh</td>
<td>- aye</td>
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<tr>
<td>Dr. Madia</td>
<td>- aye</td>
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<tr>
<td>Dr. Talmage</td>
<td>- aye</td>
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<tr>
<td>Ms. Elsass</td>
<td>- aye</td>
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<tr>
<td>Mr. Gonidakis</td>
<td>- aye</td>
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The motion carried.

CITATIONS, PROPOSED DENIALS, DISMISSEALS, ORDERS OF SUMMARY SUSPENSION & NOTICES OF IMMEDIATE SUSPENSION

BRENDA LOUISE BANKS, M.D. – NOTICE OF IMMEDIATE SUSPENSION AND OPPORTUNITY FOR HEARING

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

Dr. Mahajan moved to send the Notice of Immediate Suspension and Opportunity for Hearing to Dr. Banks. Dr. Madia seconded the motion. A vote was taken:

<table>
<thead>
<tr>
<th>ROLL CALL:</th>
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<tbody>
<tr>
<td>Dr. Strafford</td>
<td>- abstain</td>
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<tr>
<td>Dr. Bechtel</td>
<td>- abstain</td>
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<tr>
<td>Dr. Mahajan</td>
<td>- aye</td>
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<tr>
<td>Dr. Ramprasad</td>
<td>- aye</td>
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<tr>
<td>Dr. Steinbergh</td>
<td>- aye</td>
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<tr>
<td>Dr. Madia</td>
<td>- aye</td>
</tr>
<tr>
<td>Dr. Talmage</td>
<td>- abstain</td>
</tr>
<tr>
<td>Ms. Elsass</td>
<td>- aye</td>
</tr>
<tr>
<td>Mr. Gonidakis</td>
<td>- aye</td>
</tr>
</tbody>
</table>
The motion to send carried.

MARGARET A. DAVIDSON - CITATION LETTER

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

Dr. Madia moved to send the Citation Letter to Ms. Davidson. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:

| Dr. Strafford | abstain |
| Dr. Bechtel   | abstain |
| Dr. Mahajan   | aye     |
| Dr. Ramprasad | aye     |
| Dr. Steinbergh| aye     |
| Dr. Madia     | aye     |
| Dr. Talmage   | aye     |
| Ms. Elsass    | aye     |
| Mr. Gonidakis | aye     |

The motion to send carried.

JAMES RICHARD FREDE, M.D. – CITATION LETTER

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

Dr. Madia moved to send the Citation Letter to Dr. Frede. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:

| Dr. Strafford | abstain |
| Dr. Bechtel   | abstain |
| Dr. Mahajan   | aye     |
| Dr. Ramprasad | aye     |
| Dr. Steinbergh| aye     |
| Dr. Madia     | aye     |
| Dr. Talmage   | abstain |
| Ms. Elsass    | aye     |
| Mr. Gonidakis | aye     |

The motion to send carried.

EMMART YOST HOY, JR., D.O. – OPPORTUNITY FOR HEARING ON FAILURE TO SUBMIT TO AN EXAMINATION AND NOTICE OF SUMMARY SUSPENSION BASED UPON PRESUMPTION
OF AN ADMISSION OF IMPAIRMENT

At this time the Board read and considered the proposed Opportunity for Hearing on Failure to Submit to an Examination and Notice of Summary Suspension Based upon Presumption of an Admission of Impairment in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Mahajan moved to send the Opportunity for Hearing on Failure to Submit to an Examination and Notice of Summary Suspension Based upon Presumption of an Admission of Impairment to Dr. Hoy. Dr. Madia seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - abstain
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion to send carried.

Dr. Madia moved to table this topic in case of possible additional citations. Dr. Ramprasad seconded the motion. All members voted aye. The motion carried.

RATIFICATION OF SETTLEMENT AGREEMENTS

PETER GRAFF HICKOX, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Hickox. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - abstain
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion to ratify carried.
WILLIAM DOUGLAS MILES, D.O. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE OSTEOPATHIC MEDICINE AND SURGERY

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Miles. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - abstain
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion to ratify carried.

PAUL H. PERLSTEIN, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Perlstein. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - abstain
Ms. Elsass - aye
Mr. Gonidakis - aye

The motion to ratify carried.

BRIAN FREDERIC GRIFFIN, M.D. – STEP II CONSENT AGREEMENT

Dr. Madia moved to ratify the Proposed Step II Consent Agreement with Dr. Griffin. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain

The motion to ratify carried.
Dr. Mahajan - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Madia - aye  
Dr. Talmage - aye  
Ms. Elsass - aye  
Mr. Gonidakis - aye  

The motion to ratify carried.

**WENDY A. MILLIS, M.D. – STEP I CONSENT AGREEMENT**

Dr. Madia moved to ratify the Proposed Step I Consent Agreement with Dr. Millis. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:  
Dr. Strafford - abstain  
Dr. Bechtel - abstain  
Dr. Mahajan - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Madia - aye  
Dr. Talmage - aye  
Ms. Elsass - aye  
Mr. Gonidakis - aye  

The motion to ratify carried.

**SUDHIR SITARAM POLISETTY, M.D. – STEP II CONSENT AGREEMENT**

Dr. Madia moved to ratify the Proposed Step II Consent Agreement with Dr. Polisetty. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL:  
Dr. Strafford - abstain  
Dr. Bechtel - abstain  
Dr. Mahajan - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Madia - aye  
Dr. Talmage - abstain  
Ms. Elsass - aye  
Mr. Gonidakis - aye  

The motion to ratify carried.
NICHOLAS ANTHONY ATANASOFF, D.O. – STEP I CONSENT AGREEMENT

Dr. Madia moved to ratify the Proposed Step I Consent Agreement with Dr. Atanasoff. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:
- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Mahajan - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Madia - aye
- Dr. Talmage - abstain
- Ms. Elsass - aye
- Mr. Gonidakis - aye

The motion to ratify carried.

Ms. Elsass moved to table this topic in case of possible additional consent agreements. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

The Board took a brief recess at 2:50 p.m. and returned at 3:10 p.m. Dr. Talmage and Ms. Elsass were not present when the meeting resumed.

PROBATIONARY APPEARANCES

SANDRA K. HAREWOOD, M.D.

Dr. Harewood was making her final appearance before the Board pursuant to her request for release from the terms of her January 9, 2008 Consent Agreement. Ms. Bickers reviewed Dr. Harewood’s history with the Board.

Dr. Ramprasad noted that Dr. Harewood has been diagnosed with major depressive disorder that is in full remission and she takes no medications. Dr. Harewood confirmed that that is correct. Dr. Ramprasad asked if Dr. Harewood is following up with a psychiatrist. Dr. Harewood stated that she has not seen her psychiatrist since she was released from that requirement, but she would return if she felt the need.

Dr. Ramprasad asked Dr. Harewood to describe the big book meetings she attends. Dr. Harewood stated that there is an Alcoholics Anonymous (AA) book and a portion of it is read, followed by discussion. Dr. Harewood stated that this process brings out a lot of thoughts and can be helpful to people at different levels of recovery.

Dr. Ramprasad expressed concern the Dr. Harewood has indicated that she is not sure she will continue to attend meetings long-term. Dr. Harewood reiterated that she is not sure, but she is looking forward to a bit of a break of two meetings per week. Dr. Ramprasad asked how Dr. Harewood expects to keep out of
trouble. Dr. Harewood answered that her life has changed considerably and she now has a lot more balance.

Dr. Ramprasad asked how Dr. Harewood’s internal medicine practice is going. Dr. Harewood replied that her practice is going very well and she mostly does hospital consulting at a long-term acute care facility in Dayton. Dr. Harewood also does some work at shorter-stay surgical centers. In response to Dr. Steinbergh, Dr. Harewood stated that she modifies her own schedule each week. Dr. Harewood stated that her work is hectic, but in a different way and she enjoys having decision-making capacity regarding her schedule.

Dr. Ramprasad observed that Dr. Harewood’s problems began in 2002 and asked what had happened prior to that. Dr. Harewood responded that her husband died very suddenly in 1996 and her problems stemmed from that. Dr. Harewood stated that it took a long time “really circle the drain” and a long time to build herself back up again. Dr. Steinbergh commented that the Board’s concern is that Dr. Harewood continues to be well and to manage her stress.

Dr. Ramprasad asked if Dr. Harewood could address the medical students in attendance about what she learned from her experience. Dr. Harewood advised the students that there is always someone to talk to, but some people do not seek help out of pride or a feeling that they will seem less professional. Dr. Harewood stated that the students should have a group of people, be it fellow practitioners or friends, who can help share whatever burden they have. Dr. Steinbergh echoed Dr. Harewood’s sentiments.

**Dr. Ramprasad moved to release Dr. Harewood from the terms of her January 9, 2008 Consent Agreement. Dr. Mahajan seconded the motion.** All members voted aye. The motion carried.

**NAKISHA HINES, M.T.**

Ms. Bickers stated that Ms. Hines is not present in the meeting.

**ROBERT L. HUBLEY, D.O.**

Dr. Hubley was making his final appearance before the Board pursuant to his request for release from the terms of his January 9, 2008 Consent Agreement. Ms. Bickers reviewed Dr. Hubley’s history with the Board.

Dr. Madia asked what Dr. Hubley is doing in his practice. Dr. Hubley replied that he is a rural family medicine physician in Platte, South Dakota. Dr. Hubley works at a 15-bed critical access hospital and performs a variety of functions, such as covering the emergency room, seeing clinic patients, and seeing hospitalized patients. Dr. Hubley stated that the work is never overwhelming because there are not that many people. Dr. Madia asked if Dr. Hubley practices alone or in a group. Dr. Hubley replied that he is in a group with two other family practitioners and two mid-level providers.

Dr. Madia asked how Dr. Hubley had obtained the Sublimaze he was addicted to. Dr. Hubley explained that he had been an anesthesiology resident in 2003-2004. Following treatment, he decided to go into
family medicine instead of anesthesiology. Dr. Madia opined that Dr. Hubley made the right decision.

Dr. Madia asked if Dr. Hubley takes Pristiq for his depression. Dr. Hubley answered that he does take Pristiq. Dr. Madia asked if Dr. Hubley will continue to see a psychiatrist. Dr. Hubley replied that he currently sees his psychiatrist every three months, but was uncertain if we would continue to see him that often.

**Dr. Madia moved to release Dr. Hubley from the terms of his January 9, 2008 Consent Agreement. Dr. Mahajan seconded the motion.** All members voted aye. The motion carried.

**CHRISTOPHER S. SHAW, M.D.**

Dr. Shaw was making his final appearance before the Board pursuant to his request for release from the terms of his January 12, 2011 Consent Agreement. Ms. Bickers reviewed Dr. Shaw’s history with the Board.

Dr. Madia asked how Dr. Shaw is coping with his current situation, noting that another relapse could result in the loss of his medical license. Dr. Shaw replied that he is doing very well and he continues to be active in his recovery program. Dr. Shaw stated that his current job allows him time to relax and focus on his recovery. In response to Dr. Madia, Dr. Shaw stated that he works as a hospitalist every other week on a night shift.

Dr. Steinbergh noted documentation that Dr. Shaw feels that working nights seems to have affected his memory. Dr. Shaw acknowledged that he has become more forgetful about day-to-day things and he has to write things down. However, Dr. Shaw stated that he might be imagining it and that he has always had to be careful to keep track of his obligations. Dr. Shaw speculated that he may just be blaming his forgetfulness on his working nights. Dr. Steinbergh asked Dr. Shaw to consider changing his shift to see if his memory improves. Dr. Shaw replied that he is considering that.

Dr. Madia observed that Dr. Shaw was diagnosed with major depression, but he is not on any medications. Dr. Shaw stated that he has not been on medication for several years. Dr. Shaw was uncertain if he had had true depression or if it was related to his substance abuse, noting that there has been no recurrence of depression since he began recovery.

Dr. Ramprasad stated that Dr. Shaw has not had any relapse since December 2005 and asked why he had relapsed previously after three different inpatient treatments. Dr. Ramprasad asked if Dr. Shaw could direct his answer to the medical students in attendance. Dr. Shaw opined that he had been his own worst enemy. Dr. Shaw stated he had operated under the delusion that he could control things and that he was smart enough to continue abusing drugs and alcohol without it affecting his life. Dr. Shaw stated that it took a great deal of time to realize that he is an addict and the only option for him is complete abstinence.

Dr. Ramprasad asked about Dr. Shaw’s family support. Dr. Shaw replied that his family has been very supportive throughout the whole process.
Dr. Madia moved to accept the Compliance staff’s report of conference on December 11, 2012. Dr. Madia further moved to release Dr. Shaw from the terms of his January 12, 2011 Consent Agreement, effective January 12, 2013. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

JOSEPH E. BAUS, M.D.

Dr. Baus was making his initial appearance before the Board pursuant to the terms of his October 10, 2012 Consent Agreement. Ms. Bickers reviewed Dr. Baus’ history with the Board.

In response to Dr. Ramprasad, Dr. Baus stated that he underwent inpatient treatment at Shepherd Hill Hospital for nine weeks. Dr. Ramprasad asked if Dr. Baus is currently on any medications. Dr. Baus replied that is currently takes a monthly shot of the IM formulation of Vivitrol Naltrexone.

Dr. Madia asked what Dr. Baus’ plan is following recovery. Dr. Baus answered that his plan right now is to focus on his recovery. Dr. Baus stated that he had ignored many things, most notably his family, and he is currently being “Mr. Mom,” which he sees as a benefit. Dr. Baus stated that he attends aftercare and is working a good program with his sponsor. Dr. Baus stated that he is currently on step 3.

Dr. Madia asked if Dr. Baus intends to return to the practice of anesthesiology. Dr. Baus stated that he has discussed this issue with his wife, who is a psychiatrist, and she is supportive of whatever decision he makes. Dr. Baus’ employer is supportive as well. Dr. Baus stated that if he does return to anesthesia, he will decrease his hours and probably focus more on a pain practice.

Dr. Ramprasad asked if Dr. Baus’ residency program will take him back. Dr. Baus replied that he does not plan to return to Cincinnati and that he currently lives in Dover, Ohio. Dr. Ramprasad noted that anesthesiology has the highest recidivism rate and higher mortality rates when addicted physicians return to that field. Dr. Baus stated that he had been kept at Shepherd Hill for a long period because he was an anesthesiologist and Dr. Whitney wanted to give him the most time possible to help in his recovery.

Dr. Madia asked if Dr. Baus had been abusing Sublimaze IV. Dr. Baus replied that that was the case. Dr. Madia asked if Dr. Baus had documented giving Sublimaze IV to patients when he was, in fact, taking it himself. Dr. Baus responded that he would take any waste product that was left over. Dr. Baus stated that when he practiced in Dover, he would relieve the nurse anesthetists for lunch or to give them a break, and then he would have access to narcotics. Dr. Baus stated that he has discussed his situation with his former employer and, if he went back, he would not be relieving the nurses. Therefore, his access to narcotics would be very limited.

Dr. Steinbergh emphasized that Dr. Baus is not in control of his addiction. Dr. Baus agreed. Dr. Steinbergh reiterated the recidivism of anesthesiology and asked Dr. Baus to listen to the wisdom of the Board members. Dr. Steinbergh stated that it makes no sense for Dr. Baus to expose himself by returning to anesthesiology. Dr. Madia agreed, stating that as an anesthesiologist he would have access to narcotics several times per day. Dr. Madia stated that it would be easier for Dr. Baus to retrain than to relapse and lose his medical license permanently.
Dr. Madia moved to continue Dr. Baus under the terms of his October 10, 2012 Consent Agreement. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

FRANCIS E. DUMONT, M.D.

Dr. Dumont was making his initial appearance before the Board pursuant to the terms of the Board’s Order of September 14, 2011. Ms. Bickers reviewed Dr. Dumont’s history with the Board.

Dr. Ramprasad asked if Dr. Dumont worked for Christ Hospital. Dr. Dumont replied that Christ Hospital bought his practice when he was suspended and he does not work for the hospital. Dr. Dumont stated that he is dealing with paperwork issues and is trying to get back into that practice. Dr. Ramprasad asked if a letter from the Board would aid Dr. Dumont in regaining his Medicare privileges. Dr. Dumont stated that his Medicare privileges have already been reinstated.

Dr. Ramprasad asked what Dr. Dumont thought about the Board’s actions in retrospect. Dr. Dumont stated that God has a plan and that that was part of it. Looking back on his previous prescribing practices, Dr. Dumont was thankful that no one got hurt. Dr. Dumont felt that the courses the Board sent him to will help his prescribing in the future.

Dr. Talmage returned to the meeting at this time.

Dr. Steinbergh asked if Dr. Dumont had any questions about his Board Order. Dr. Dumont responded that he has no questions.

Dr. Ramprasad moved to continue Dr. Dumont under the terms of the Board’s Order of September 14, 2011. Dr. Madia seconded the motion. All members voted aye. The motion carried.

JEROME D. HOMISH, D.O.

Dr. Homish was making his initial appearance before the Board pursuant to the terms of his October 10, 2012 Consent Agreement. Ms. Bickers reviewed Dr. Homish’s history with the Board.

Dr. Madia asked if Dr. Homish has relapsed four times. Ms. Bickers replied that Dr. Homish has had four Board actions based on relapse.

Dr. Madia asked how Dr. Homish is handling his situation and if he is still teaching anatomy at Hocking College. Dr. Homish replied that his position at Hocking College was replaced by two part-time people so the college would not have to pay benefits. Dr. Steinbergh asked what Dr. Homish is doing currently. Dr. Homish replied he is still involved with two Napa auto parts stores and he attends five to seven meetings per week.

Dr. Steinbergh asked if Dr. Homish has any goals regarding the medical profession. Dr. Homish referenced Voltaire’s *Candide* in which, in response to someone recounting their trials and tribulations,
Candide replied, “That is all very well, but now we need to tend the garden.” Dr. Homish stated that he is trying to tend his spiritual garden and he has not yet determined if he will return to the practice of medicine. Dr. Homish stated that the most important thing is that he stay sober and not let any outside issues interfere with that. Dr. Homish commented that he made the difficult decision to not spend the holidays with his family because he knew that there would be a lot of alcohol there. Dr. Homish stated that something has clicked for him in the last several months had he has decided to wave the white flag and stop fighting.

Dr. Madia asked if Dr. Homish is keeping in touch with medicine. Dr. Homish stated that he is trying to read journals and do some Continuing Medical Education courses as his finances permit. Dr. Homish stated that he is not sure what he will do if he returns to medicine, but stated that he may work himself into a motor sports medicine practice, thus combining his medical training with a passion he has. Dr. Homish also stated that he has been appointed to the Board of Directors of the local chapter of the Red Cross.

**Dr. Madia moved to continue Dr. Homish under the terms of his October 10, 2012 Consent Agreement. Dr. Mahajan seconded the motion.** All members voted aye. The motion carried.

REBECCA E. JOHNSON, M.D.

Dr. Johnson was making her initial appearance before the Board pursuant to the terms of her September 12, 2012 Consent Agreement. Ms. Bickers reviewed Dr. Johnson’s history with the Board.

Dr. Madia asked what Dr. Johnson is currently doing. Dr. Johnson replied that she is not working yet because she is waiting for the recredentialing process at her hospital, the Cleveland Clinic. Dr. Johnson stated that there had been a delay because her board certifications were temporarily suspended due to the Medical Board’s actions, but those certifications have now been restored.

Dr. Madia asked how Dr. Johnson had access to the medications she was abusing. Dr. Johnson replied that everything she took was prescribed by a physician in New York, where she had lived before moving to Ohio. Dr. Ramprasad asked if Dr. Johnson had been on Suboxone. Dr. Johnson answered that Suboxone was part of what she had been prescribed. Dr. Johnson explained that she became dependent on pain medication during a hospital stay and her physician prescribed Suboxone and Xanax until she went into treatment in Ohio.

Dr. Madia asked Dr. Johnson to describe her feelings when she was on Suboxone. Dr. Johnson stated that she took Suboxone and Xanax simultaneously and therefore it is difficult to determine exactly how each medication affected her. Dr. Johnson opined that her impairment was caused by the Xanax, but she is uncertain because she discontinued both medications at the same time. Dr. Johnson stated that she is a completely different person now without medications.

Dr. Madia noted that Dr. Johnson has been diagnosed with major depression but is not on any medication for that. Dr. Johnson stated that she was placed on medication when she was hospitalized for treatment and kept on the medications for several months afterward. Dr. Johnson opined that many of the symptoms she experienced were related to being depressed with medications. Dr. Johnson stated that she is doing
well without any medications and she continues to see a psychiatrist.

**Dr. Madia moved to continue Dr. Johnson under the terms of her September 12, 2012 Consent Agreement. Dr. Ramprasad seconded the motion.** All members voted aye. The motion carried.

**SUDHIR S. POLISETTY, M.D.**

Dr. Polisetty was making his initial appearance before the Board pursuant to the terms of his October 10, 2012 Consent Agreement. Dr. Polisetty was also requesting approval to replace one Alcoholics Anonymous meeting each week with Celebrate Recovery. Dr. Polisetty was also requesting approval of *Professional Boundaries and Boundary Violations: A Primer*, offered by Professional Boundaries, Inc., to fulfill the professionalism course requirement for reinstatement. Ms. Bickers reviewed Dr. Polisetty’s history with the Board. Ms. Bickers noted that earlier in the meeting, the Board ratified a Step II Consent Agreement that reinstated Dr. Polisetty’s license.

Dr. Steinbergh asked why Dr. Polisetty is requesting approval of the Celebrate Recovery program. Dr. Polisetty stated that Celebrate Recovery is a 12-step based program that is more Christ-centered than Alcoholics Anonymous (AA). Dr. Polisetty stated that he is already attending Celebrate Recovery meetings, which makes for a busy week as he also fulfills his obligations to attend AA. Dr. Polisetty stated that Celebrate Recovery is an excellent program and he relates very well with the people there, though he still enjoys his AA meetings as well.

Dr. Steinbergh asked how Dr. Polisetty came to know Celebrate Recovery and if Dr. Polisetty was raised in the Christian religion. Dr. Polisetty answered that he was raised Hindu, but he never knew a lot about that religion and did not know God until he started to experience some trials. Dr. Polisetty stated that he was baptized in 2010 and he has been active in the church since that time.

Dr. Steinbergh asked if Dr. Polisetty had any questions about the Step II Consent Agreement the Board approved earlier. Dr. Polisetty replied that he had no questions and appreciated the Board for reinstating his license.

Dr. Steinbergh asked what Dr. Polisetty will be doing now. Dr. Polisetty replied that he will seek to complete his residency in dermatology. Dr. Madia stated that it is difficult to get into the field of dermatology and cautioned Dr. Polisetty not to ruin his situation. Dr. Steinbergh opined that Dr. Polisetty is making the right choices and is sincere about his recovery.

Dr. Madia asked if Dr. Polisetty could explain to the medical students in attendance how he got caught up in substance abuse. Dr. Polisetty stated that he had warning signs early on in the way he coped with things and the need for control. Dr. Polisetty stated that it had been difficult for him to realize that he may be powerless over certain things. Dr. Polisetty asked the students to be aware that addiction comes in many flavors and is not just alcohol.

**Dr. Madia moved to continue Dr. Polisetty under the terms of his January 9, 2013 Consent Agreement. Dr. Madia further moved to approve Dr. Polisetty’s request to replace one Alcoholics Anonymous meeting with Celebrate Recovery.** All members voted aye. The motion carried.
Anonymous meeting each week with Celebrate Recovery. Dr. Madia further moved to approve *Professional Boundaries and Boundary Violations: A Primer*, offered by Professional Boundaries, Inc., to fulfill Dr. Polisetty’s professionalism course requirement for reinstatement. Dr. Ramprasad seconded the motion. All members voted aye. The motion carried.

**TERRY L. THOMAS, D.O.**

Dr. Thomas was making his initial appearance before the Board pursuant to the terms of his September 12, 2012 Consent Agreement. Ms. Bickers reviewed Dr. Thomas’ history with the Board.

Dr. Madia stated that he had never heard of someone becoming addicted to Neurontin. Dr. Madia asked how Dr. Thomas got started on Neurontin. Dr. Thomas replied that when he underwent treatment at Talbot Recovery in Atlanta, he saw an off-campus pain specialist for treatment of chronic pain. The pain specialist increased the dose of Neurontin he was receiving. Dr. Thomas stated that when his dose was increased, he did not experience a euphoric high as with opiates, but it did change his mood and slightly change his perception of reality. Dr. Thomas stated that during the rest of his treatment, he would set aside one Neurontin pill each week so that he could take a large dose at the end of the week.

Dr. Mahajan asked Dr. Thomas to further describe how the larger dose of Neurontin made him feel. Dr. Thomas stated that it put him in a lighter mood. Dr. Thomas stated that in recovery, he has learned that he has been mood-altering since at least the age of eight, with his first drug of choice being adrenalin. Dr. Thomas stated that the situation got out of control and he began engaging in the exact same behaviors as when he was abusing opiates.

In response to Dr. Mahajan, Dr. Thomas stated that he had been prescribed 800 mg of Neurontin four times per day, but was probably taking 10 times that amount in the end. Dr. Mahajan explained that Neurontin has self-limited absorption and the maximum that can go into one’s system is about four grams, with any excess going out of the system. Dr. Madia asked how Dr. Thomas obtained that much Neurontin. Dr. Thomas replied that he wrote prescriptions in the names of his wife and his son.

Dr. Talmage asked if Dr. Thomas abuse of Neurontin had any influence on his cravings or thoughts about opioids. Dr. Thomas answered that there was no influence on his opiate craving, but his addictive behavior was the same as it had been on opiates. Dr. Thomas commented that his experience with Neurontin was exactly what he needed because it proved to him, beyond any shadow of doubt, that he is an addict and a mood-alterer. Dr. Thomas stated that if he is not vigilant about his addictive behavior, it will hurt him.

**Dr. Madia moved to continue Dr. Thomas under the terms of his September 12, 2012 Consent Agreement. Dr. Mahajan seconded the motion.** All members voted aye. The motion carried.

**RECOGNITION OF DR. MAHAJAN’S SERVICE TO THE BOARD**

Dr. Steinbergh thanked Dr. Mahajan for his service as President of the Board in 2012. Dr. Steinbergh commented that Dr. Mahajan was an excellent president and continues to be an excellent Board member. Dr. Steinbergh presented Dr. Mahajan with a plaque in recognition of his service.
Dr. Mahajan stated that serving as president of the Board was a privilege and he appreciated the help he received from the other Board members and the staff. The Board and staff applauded Dr. Mahajan.

EXECUTIVE SESSION

Dr. Madia moved that the Board declare Executive Session to consider the employment of a public employee. Dr. Strafford seconded the motion. A vote was taken:

ROLL CALL:

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<td>Dr. Bechtel</td>
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<td>Dr. Mahajan</td>
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<td>Dr. Ramprasad</td>
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<td>Dr. Steinbergh</td>
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<td>Dr. Madia</td>
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<td>Dr. Talmage</td>
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<td>Mr. Gonidakis</td>
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The motion carried.

Pursuant to Section 121.22(G)(3), Ohio Revised Code, the Board went into executive session with Ms. Anderson, Ms. Loe, Ms. Debolt, and assistant attorneys general from the Employment Law Section of the Attorney General’s office in attendance.

The Board entered Executive Session at 4:25 p.m. and returned to public session at 4:43 p.m.

CITATIONS, PROPOSED DENIALS, DISMISSALS, ORDERS OF SUMMARY SUSPENSION & NOTICES OF IMMEDIATE SUSPENSION

Dr. Strafford moved to remove the topic of Citations from the table. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

ANYSE J. STOREY, M.D. – NOTICE OF SUMMARY SUSPENSION AND OPPORTUNITY FOR HEARING

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

Dr. Mahajan moved to send the Notice of Summary Suspension and Opportunity for Hearing to Dr. Storey. Dr. Madia seconded the motion. A vote was taken:

ROLL CALL:

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<td>Dr. Mahajan</td>
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The motion to send carried.

Thereupon, at 4:50 pm, the January 9, 2013 session of the State Medical Board of Ohio was adjourned by Dr. Steinbergh.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on January 9, 2013, as approved on February 13, 2013.

Anita M. Steinbergh, D.O., President

J. Craig Strafford, M.D., M.P.H., Secretary
MINUTES
THE STATE MEDICAL BOARD OF OHIO
January 10, 2013

Anita M. Steinbergh, D.O., President, called the meeting to order at 8:05 a.m., in the Administrative Hearing Room of the James A. Rhodes State Office Tower, 30 E. Broad St., Columbus, Ohio 43215, with the following members present: Kris Ramprasad, M.D., Vice-President; J. Craig Strafford, M.D., Secretary; Mark A. Bechtel, M.D., Supervising Member; Dalsukh Madia, M.D.; Marchelle L. Suppan, D.P.M.; and Michael Gonidakis. The following member arrived at a later time: Lance A. Talmage, M.D. The following members did not attend the meeting: Laurie O. Elsass; and Donald R. Kenney, Sr.

Also present were: Kimberly Anderson, Interim Executive Director; Susan Loe, Assistant Executive Director, Program Management and Operations; Sallie J. Debolt, General Counsel; Joan K. Wehrle, Education & Outreach Program Manager; Mike Miller, Interim Assistant Executive Director, Licensure and Renewal; Danielle Bickers, Compliance Supervisor; Annette Jones, Compliance Officer; Kyle Wilcox, Assistant Attorney General; Kay Rieve, Administrative Officer; Nicole Weaver, Chief of Licensure; Barbara Jacobs, Senior Executive Staff Attorney; Cathy Hacker, Physician Assistant Program Administrator; and Benton Taylor, Executive Assistant to the Executive Director.

REPORTS AND RECOMMENDATIONS

SHARON LEILANI MCRAE, M.D., Case No. 12-CRF-064

Dr. Mahajan moved to remove the topic of Sharon Leilani McRae, M.D., from the table. Dr. Ramprasad seconded the motion. All members voted aye. The motion carried.

Dr. Ramprasad agreed with Dr. Mahajan’s suggestion during the earlier discussion that an anger management course requirement be added to Dr. McRae’s Board Order.

Dr. Ramprasad wished to maintain his motion to amend regarding Findings of Fact #’s 1 and 2, but wished to change his motion to amend regarding the Proposed Order such that the Order will read as follows:

A. PROBATION: Dr. McRae’s certificate shall be subject to the following PROBATIONARY terms, conditions, and limitations for a period of at least two years:

1. Obey the Law: Dr. McRae shall obey all federal, state, and local laws, and all rules governing the practice of medicine and surgery in Ohio.

2. Declarations of Compliance: Dr. McRae shall submit quarterly declarations under penalty of Board disciplinary action and/or criminal prosecution, stating whether there had been compliance with all the conditions of this Order. The first quarterly
declaration must be received in the Board’s offices on or before the first day of the third month following the month in which this Order becomes effective. Subsequent quarterly declarations must be received in the Board’s offices on or before the first day of every third month.

3. **Personal Appearances**: Dr. McRae shall appear in person for an interview before the full Board or its designated representative during the third month following the month in which this Order becomes effective, or as otherwise directed by the Board. Subsequent personal appearances shall occur every three months thereafter, and/or as otherwise directed by the Board. If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.

4. **Psychiatric Assessment/Treatment**: Within 30 days of the effective date of this Order, or as otherwise determined by the Board, Dr. McRae shall submit to the Board for its prior approval the name and curriculum vitae of a psychiatrist of Dr. McRae’s choice.

Upon approval by the Board, Dr. McRae shall obtain from the approved psychiatrist an assessment of Dr. McRae’s current psychiatric status. The assessment shall take place no later than 60 days following such approval, unless otherwise determined by the Board. Prior to the initial assessment, Dr. McRae shall furnish the approved psychiatrist copies of the Board’s Order, including the Summary of the Evidence, Findings of Fact, and Conclusions of Law, and any other documentation from the hearing record which the Board may deem appropriate or helpful to the psychiatrist.

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

a. A detailed report of the evaluation of Dr. McRae’s current psychiatric status and condition;

b. A detailed plan of recommended psychiatric treatment, if any, based upon the psychiatrist’s informed assessment of Dr. McRae’s current needs;

c. A statement regarding any recommended limitations upon her practice; and

d. Any reports upon which the treatment recommendation is based, including reports of physical examination and psychological or other testing.

Should the Board-approved psychiatrist recommend psychiatric treatment, and upon approval by the Board of the treatment plan, Dr. McRae shall undergo and continue psychiatric treatment at the rate of visits recommended by the approved treating
psychiatrist, or as otherwise directed by the Board. The sessions shall be in person and may not be conducted by telephone or other electronic means. Dr. McRae shall comply with her psychiatric treatment plan, including taking medication(s) as prescribed for her psychiatric disorder and submitting to periodic tests of her blood and/or urine.

Dr. McRae shall continue in psychiatric treatment until such time as the Board determines that no further treatment is necessary. To make this determination, the Board shall require reports from the approved treating psychiatrist. The psychiatric reports shall contain information describing Dr. McRae’s current treatment plan and any changes that have been made to the treatment plan since the prior report; her compliance with the treatment plan; her psychiatric status; her progress in treatment; and results of any laboratory or other studies that have been conducted since the prior report. Dr. McRae shall ensure that the reports are forwarded to the Board on a quarterly basis and are received in the Board’s offices no later than the due date for Dr. McRae’s declarations of compliance.

Dr. McRae shall ensure that her treating psychiatrist immediately notifies the Board of Dr. McRae’s failure to comply with her psychiatric treatment plan and/or any determination that Dr. McRae is unable to practice due to her psychiatric disorder.

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

The Board, in its sole discretion, may disapprove of any psychiatrist proposed to serve as Dr. McRae’s designated treating psychiatrist, or may withdraw its approval of any psychiatrist previously approved to serve as Dr. McRae’s designated treating psychiatrist, in the event that the Secretary and Supervising Member of the Board determine that any such psychiatrist has demonstrated a lack of cooperation in providing information to the Board or for any other reason.

5. **Prescription of Mood-Altering Substances by Board-Approved Psychiatrist Only:**
Dr. McRae shall ensure that any mood-altering or psychotropic medication prescribed for her shall be prescribed by the psychiatrist approved by the Board pursuant to paragraph (A)(4) above.

6. **Releases:** Dr. McRae shall provide authorization, through appropriate written consent forms, for disclosure of evaluative reports, summaries, and records, of whatever nature, by any and all parties that provide treatment or evaluation for Dr. McRae’s psychiatric condition and/or related conditions, or for purposes of complying with this Order, whether such treatment or evaluation occurred before or after the effective date of this Order. To the extent permitted by law, the above-mentioned evaluative reports,
summaries, and records are considered medical records for purposes of Section 149.43, Ohio Revised Code, and are confidential pursuant to statute.

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

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

In addition, at the time Dr. McRae submits the documentation of successful completion of the course(s) dealing with professional ethics, she shall also submit to the Board a written report describing the course(s), setting forth what she learned from the course(s), and identifying with specificity how she will apply what she has learned to her practice of medicine in the future.

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

In addition, at the time Dr. McRae submits the documentation of successful completion of the course(s) dealing with stress management, she shall also submit to the Board a written report describing the course(s), setting forth what she learned from the course(s), and identifying with specificity how she will apply what she has learned to her practice of medicine in the future.

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

In addition, at the time Dr. McRae submits the documentation of successful completion of the course(s) dealing with anger management, she shall also submit to the Board a written report describing the course(s), setting forth what she learned from the course(s), and identifying with specificity how she will apply what she has learned to her practice of medicine in the future.

10. **Tolling of Probationary Period While Out of Compliance**: In the event Dr. McRae is found by the Secretary of the Board to have failed to comply with any provision of this Order, and is so notified of that deficiency in writing, such period(s) of noncompliance will not apply to the reduction of the probationary period under this Order.

11. **Required Reporting of Change of Address**: Dr. McRae shall notify the Board in writing of any change of residence address and/or principal practice address within 30 days of the change.

B. **TERMINATION OF PROBATION**: Upon successful completion of probation, as evidenced by a written release from the Board, Dr. McRae’s certificate will be fully restored.

C. **VIOLATION OF THE TERMS OF THIS ORDER**: If Dr. McRae violates the terms of this Order in any respect, the Board, after giving her notice and the opportunity to be heard, may institute whatever disciplinary action it deems appropriate, up to and including the permanent revocation of her certificate.

D. **REQUIRED REPORTING WITHIN 30 DAYS OF THE EFFECTIVE DATE OF THIS ORDER**:

1. **Required Reporting to Employers and Others**: Within 30 days of the effective date of this Order, Dr. McRae shall provide a copy of this Order to all employers or entities with which she is under contract to provide healthcare services (including but not limited to third-party payors), or is receiving training; and the Chief of Staff at each hospital or healthcare center where she has privileges or appointments. Further, Dr. McRae shall promptly provide a copy of this Order to all employers or entities with which she contracts in the future to provide healthcare services (including but not limited to third-party payors), or applies for or receives training, and the Chief of Staff at each hospital or healthcare center where she applies for or obtains privileges or appointments.

In the event that Dr. McRae provides any healthcare services or healthcare direction or medical oversight to any emergency medical services organization or emergency medical services provider in Ohio, within 30 days of the effective date of this Order,
she shall provide a copy of this Order to the Ohio Department of Public Safety, Division of Emergency Medical Services.

These requirements shall continue until Dr. McRae receives from the Board written notification of the successful completion of her probation.

2. **Required Reporting to Other Licensing Authorities**: Within 30 days of the effective date of this Order, Dr. McRae shall provide a copy of this Order to the proper licensing authority of any state or jurisdiction in which she currently holds any professional license, as well as any federal agency or entity, including but not limited to the Drug Enforcement Administration, through which she currently holds any license or certificate. Also, Dr. McRae shall provide a copy of this Order at the time of application to the proper licensing authority of any state or jurisdiction in which she applies for any professional license or reinstatement/restoration of any professional license. This requirement shall continue until Dr. McRae receives from the Board written notification of the successful completion of her probation.

3. **Required Documentation of the Reporting Required by Paragraph D**: Dr. McRae shall provide this Board with one of the following documents as proof of each required notification within 30 days of the date of each such notification: (a) the return receipt of certified mail within 30 days of receiving that return receipt, (b) an acknowledgement of delivery bearing the original ink signature of the person to whom a copy of the Order was hand delivered, (c) the original facsimile-generated report confirming successful transmission of a copy of the Order to the person or entity to whom a copy of the Order was faxed, or (d) an original computer-generated printout of electronic mail communication documenting the e-mail transmission of a copy of the Order to the person or entity to whom a copy of the Order was e-mailed.

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

**As no Board member objected to the change, the change to the motion to amend was accepted.**

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

ROLL CALL:  
- Dr. Strafford - abstain  
- Dr. Bechtel - abstain  
- Dr. Mahajan - aye  
- Dr. Suppan - aye  
- Dr. Ramprasad - aye  
- Dr. Steinbergh - aye  
- Dr. Madia - aye  
- Mr. Gonidakis - aye
The motion to amend carried.

**Dr. Mahajan moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Sharon Leilani McRae, M.D. Dr. Ramprasad seconded the motion.** A vote was taken:

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<thead>
<tr>
<th>ROLL CALL:</th>
<th>Dr. Strafford</th>
<th>- abstain</th>
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<tr>
<td>Dr. Bechtel</td>
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<td>- aye</td>
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<td>Dr. Steinbergh</td>
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<tr>
<td>Dr. Madia</td>
<td>- aye</td>
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<tr>
<td>Mr. Gonidakis</td>
<td>- aye</td>
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The motion to approve carried.

**PROBATION AND REINSTATEMENT CONSENT AGENDA**

Dr. Steinbergh advised that at this time she would like the Board to consider the probationary reports and probationary requests on today’s consent agenda. Dr. Steinbergh asked whether any Board member wished to consider a probationary report or request separately. Dr. Steinbergh stated that she has asked Ms. Bickers so to discuss some concerns regarding the probationary request of Jerry G. Purvis, Jr., M.D.

Ms. Bickers stated that Dr. Steinbergh had previously expressed concern that Dr. Purvis lists his specialties as general surgery and vascular surgery, but he is requesting approval of a monitoring physician who specializes in family medicine and emergency medicine. Ms. Bickers explained that Dr. Purvis will be working in a free clinic and will not be performing surgery. Ms. Bickers stated that Dr. Steinbergh supports the approval of Dr. McAnallen to serve as Dr. Purvis’ monitoring physician.

Dr. Ramprasad noted that the probationary report of Aiyappan Menon, M.D., indicates that Dr. Menon has been non-compliant with his meetings requirement. Ms. Bickers explained that Dr. Menon’s Consent Agreement requires him to attend two 12-step meetings per week with a minimum of 10 meetings per month. Dr. Menon has been averaging those meetings, though he has been instructed not to do that. Ms. Bickers stated that Dr. Menon has been asked to attend an office conference next month to make sure he is complaint and that he understands the requirements of his Consent Agreement. Ms. Bickers also noted that the updated compliance guidelines allow the Board to consider any single missed meeting to be non-compliance for a 30-day period.

Dr. Ramprasad noted that Mark Rhodeback, M.T., is requesting that one Alcoholics Anonymous (AA) meeting per week be replaced with an Al-Anon meeting, which is for the family members of addicts. Dr. Ramprasad asked what benefits Mr. Rhodeback gets out of Al-Anon meetings. Ms. Bickers replied that many of Mr. Rhodeback issues involve co-dependency, which is a focus of Al-Anon meetings. Ms. Bickers stated that Mr. Rhodeback is already attending Al-Anon meetings in addition to his required AA
meetings. The Compliance staff and Dr. Strafford felt that it would be beneficial for the Board to accept one Al-Anon meeting per week towards Mr. Rhodeback’s meeting requirements.


Dr. Madia further moved to accept the Compliance staff’s Reports of Conferences and the Secretary and Supervising Member’s recommendations as follows:

- To grant Mark L. Allen, M.D.’s request for approval of Thomas M. Gemma, D.O., to serve as the new monitoring physician;
- To grant Jennifer S. Dyer, M.D.’s request for approval of William B. Zipf, M.D., to serve as the monitoring physician, and determination of the frequency and number of charts to be reviewed at 10 charts per month;
- To grant Roy W. Harris, D.O.’s request for approval of Intensive Course in Medical Ethics, Boundaries and Professionalism, offered by Case Western Reserve University to fulfill both the Personal/Professional Ethics course and the Physician/Patient Boundaries course requirements for reinstatement;
- To grant Sean M. Klepper, M.D.’s request for approval of Hong S. Kang, M.D., to serve as the new psychiatrist;
- To grant Jerry G. Purvis, Jr., M.D.’s request for approval of Curtis M. McAnallen, M.D., to serve as the new monitoring physician, and determination of the number and frequency of charts to be reviewed at 10 charts per month;
- In the matter of Mark A. Rhodeback, M.T., to approve the recommendation of the Secretary to replace one Alcoholics Anonymous meeting each week with an Al-Anon meeting, and to include a quarterly written summary on the benefits of the meetings; and
- To grant Denise J. Signs, M.D.’s request for reduction in psychiatric treatment to every six months.
Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Mahajan - aye
Dr. Suppan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Mr. Gonidakis - aye

The motion carried.

ADMINISTRATIVE REPORT

Ms. Anderson stated that the Board’s re-submitted budget request was sent to the Office of Budget and Management on December 21, 2012. The re-submitted budget reflects the proposed $50.00 increase in the physician license renewal fee and other changes discussed at the December 2012 Board meeting. Ms. Anderson stated that she received a call on that subject from Kimberly Kutschbach of Governor Kasich’s office. Ms. Anderson has arranged a meeting with Ms. Kutschbach for further discussion.

Ms. Anderson continued that on January 26, she and Dr. Ramprasad will address the Ohio State Medical Association (OSMA) Council in Cincinnati regarding the re-submitted budget, the initiatives of the Board, and any questions the Council may have. In addition, Ms. Anderson and Dr. Mahajan will meet with the Executive Committee of the Academy of Medicine of Cleveland and Northern Ohio (AMCNO) on February 4 regarding the budget. Ms. Anderson stated that materials have also been sent to the Ohio Osteopathic Association (OOA) and the Ohio Podiatric Medical Association (OPMA); meetings can also be held with those organizations if they so desire.

Ms. Anderson stated that the Governor’s budget is due on February 4 and she will keep the Board members updated as to the status of the Board’s budget request.

Ms. Anderson stated that a team of about 15 staff has been selected to work with LeanOhio the week of January 28 to February 1 to explore ways to increase efficiency and reduce costs in the complaints process. Ms. Anderson stated that Jennifer Hayhurst of OSMA will also participate in order to provide an outside view of the process. Dr. Strafford, Mr. Gonidakis, and possibly Dr. Steinbergh will accompany Ms. Anderson for the report from LeanOhio on February 1.

Ms. Anderson stated that all eight focus groups of the Board’s staff have met and each has provided many ideas to improve the Board’s activities. The ideas and comments of all focus groups are available on the Board’s shared computer system for review by any member of the staff. Ms. Anderson stated that each group will meet again through January and February to select a project or idea to take forward to completion. One idea that has already been implemented is that Ms. Anderson emails information from each Board meeting to all members of the staff, including the Administrative Report, Legislative Report,
and all disciplinary actions taken by the Board that month.

Ms. Anderson stated that the issue of Suboxone diversion is the next focus of the Investigations Section. Ms. Anderson noted that several sources, particularly Representative Terry Johnson, have expressed concerns on this subject. Ms. Anderson stated that she and Mr. Miller attended a meeting hosted by Director Orman Hall and Christine Morrison of the Ohio Department of Alcohol and Drug Addiction Services (ODADAS) to discuss how to address Suboxone diversion. The meeting also included representatives from the Drug Enforcement Agency (DEA), the Ohio Board of Pharmacy, the Ohio Department of Jobs and Family Services (ODJFS), and the Bureau of Worker’s Compensation (BWC).

Ms. Anderson continued that the subject of Suboxone diversion is complicated because federal law protects the confidentiality of individuals receiving treatment for drug addiction. Another complication is that many offices that offer Suboxone treatment share some characteristics with “pill mills,” such as cash-only transactions, patients from great distances away, and lack of necessary therapy accompanying treatment. Ms. Anderson stated that the staff has identified some cases and discussions have begun with the Attorney General’s office on how they can be addressed. Ms. Anderson stated that addressing Suboxone diversion legislatively may be problematic due to federal laws and concerns about discouraging legitimate treatment.

Ms. Anderson suggested that it would be beneficial to communicate with physicians about requirements regarding Suboxone treatment. Ms. Anderson also stated that discussions have begun with the Board of Pharmacy on how to utilize the Ohio Automated Rx Reporting System (OARRS) to provide some sort of notification to physicians who may be prescribing Suboxone inappropriately.

Dr. Suppan noted that she often sees cardboard signs on the road advertising Suboxone, giving only a phone number with no physician named. Dr. Suppan asked that this possibly unethical advertising and marketing of Suboxone be considered as part of the larger discussion. Ms. Anderson agreed.

Dr. Mahajan asked if the Medical Board has the authority to investigate possibly inappropriate Suboxone prescribing. Ms. Anderson stated that due to federal law, the Board must obtain a court order to obtain the medical records of an individual receiving Suboxone treatment, and this complicates any such investigation. Ms. Anderson stated that the Board can investigate the practice of medicine, but only after receiving a complaint.

Dr. Suppan stated that in some instances, young female patients receive treatment while pregnant, often resulting in babies that require long periods of time in the hospital at significant cost to the system. Dr. Suppan suggested that the Medical Board could produce a position paper regarding ethical practices in such situations. Dr. Suppan opined that many physicians do not know the proper course of action in this scenario.

Dr. Steinbergh opined that the Board should examine what it considers best practices in terms of Suboxone treatment, which may or may not include individual counseling therapy. Dr. Steinbergh stated that studying programs in other states would be helpful in developing a best practices model. Dr. Steinbergh stated that the Board should be proactive in educating Ohio physicians on what appropriate Suboxone
treatment should look like.

Dr. Suppan noted that under current regulations, a physician can take a one-day/eight-hour course, take a test, and receive paperwork from the DEA in a couple of weeks allowing them to prescribe Suboxone. Ms. Anderson commented that the program was designed to make Suboxone treatment more available by providing a pathway for family physicians to obtain Suboxone prescribing authority. Ms. Anderson stated that this runs counter to the idea of requiring additional qualifications to prescribe Suboxone, but agreed with Dr. Steinbergh that educating physicians on proper treatment would be helpful.

Dr. Suppan opined that, just as with the treatment of chronic pain, physicians treating with Suboxone should be required to have a documented plan of how the patient will eventually come off of Suboxone, rather than continuing it indefinitely. Dr. Suppan further opined that pregnancy education and diversion testing should be required. In general, Dr. Suppan felt that Suboxone treatment should be handled in a similar way to treatment with opiates. Ms. Anderson stated that, although Suboxone was initially intended to be a short-term treatment, nothing in current medical literature indicates a time limit.

Mr. Gonidakis asked if the Board has the regulatory authority to establish additional standards for authority to prescribe Suboxone in addition to DEA requirements. Ms. Anderson stated that adding to the federal requirements may not be possible, but the issue of how federal and state laws interact in this regard will be explored.

Dr. Madia suggested that an expert on the subject of Suboxone treatment be invited to a Board meeting to discuss this topic. In this way, Board members can educate themselves and help them to craft effective rules.

Dr. Talmage entered the meeting at this time.

Dr. Mahajan asked what Director Hall’s position is on the topic of Suboxone treatment. Ms. Anderson replied that Director Hall is very much in favor of Suboxone as a legitimate treatment for opioid addiction, but agrees that diversion is a serious problem.

Continuing, Ms. Anderson stated that the Opiate Action Team for Professional Education met last spring and summer; Dr. Strafford and Dr. Bechtel represented the Medical Board on subcommittees of that group. Ms. Anderson stated that the proposal of that group is that physicians prescribing a more than an 80 morphine equivalent dose of pain medication be required to take some steps before going forward with that prescription. Specifically, these physicians would be required to check OARRS for other sources of medication for the patient, possibly perform urine screens, have a pain contract with the patient, and take other measures to ensure that the patient does not have addiction or diversion issues. It is anticipated that the administration will accept the Opiate Action Team’s recommendations and will seek to implement them under the Medical Board’s intractable pain rules.

Dr. Strafford confirmed that the discussion is now centered on making rules, which have the force of law. Dr. Strafford noted that prior to a couple of weeks ago, what had been discussed was issuing guidelines. Dr. Madia noted that an OARRS report covering the calendar year 2011 found that about 20,000
physicians were prescribing more than 80 morphine equivalents at that time. Dr. Steinbergh stated that the Board cannot take action on a physician’s license based on guidelines, and so putting these requirements into rule will allow action to be taken if necessary.

Dr. Talmage asked if there is any movement to establish a maximum dosage of opioids that a physician can prescribe, regardless of testing. Ms. Anderson answered that she has not heard any discussion of a maximum dosage. Ms. Anderson also noted that patients being treated for a terminal condition will be excluded from the proposed requirements. Unfortunately, investigators will not know if a patient has a terminal condition until patient records can be subpoenaed and examined, since OARRS does not provide that information.

Dr. Strafford observed that only 3% of pain patients are receiving an 80 morphine equivalent or higher dose, and less than 1% are receiving a dose between 120 and 199 morphine equivalents. Ms. Anderson stated that the administration is concerned about the large number of deaths by overdose in this state, and it is hoped that these proposals will reduce the large amounts of pain medication being prescribed.

Ms. Anderson asked if the Board is comfortable with an 80 morphine equivalent dose as an appropriate trigger for the prescribing physician to take the additional steps previously discussed. Dr. Strafford opined that a limit of 80 morphine equivalents is overly conservative and predicted that many issues will arise from establishing that standard. Dr. Bechtel stated that the recommendation of 80 morphine equivalents was not arrived at arbitrarily. Rather, the recommendation was the consensus of a task force composed of multiple individuals from the fields of medicine, pharmacy, nursing, and government regulation. Dr. Strafford opined that the Board should engage in thoughtful discussion of whether the trigger should be set at 100 or 120 morphine equivalents.

Next, Ms. Anderson stated that the vendor providing the Board’s new computer system is required to have a plan for implementation by March. Ms. Anderson stated that the staff is working with the vendor to make sure the data in the current system is cleaned up appropriately so that conversion will go more smoothly.

Ms. Anderson stated that she and Mr. Miller have been working on implementation of recently-passed bills concerning Oriental medicine, physician assistant prescribing authority, and investigation of pain treatment clinics. Ms. Anderson stated that she will meet with the investigative staff tomorrow to begin developing plans for implementation of pain clinic investigations.

Ms. Anderson stated that she and Mr. Miller met with representatives from the American Massage Therapy Association (AMTA) and the National Certification Board of Therapeutic Massage and Bodywork (NCBTMB) regarding the examination for massage therapy licensure. Ms. Anderson recounted that in January 2012, the Board ceased using its own massage therapy examination and began accepting the Massage and Bodywork Licensing Examination (MBLEx) as its licensure examination. Very late in the process, the NCBTMB communicated that they wanted their examination accepted as well. The NCBTMB noted that their examination is accepted by more states than the MBLEx. A process for vetting the NCBTMB examination was established, but the NCBTMB pulled out of the process and did not want the Board to look at their examination.
Since that time, the NCBTMB has approached the Board requesting that their examination be accepted. The Ohio Chapter of the AMTA also supports the concept of using both examinations in Ohio. Ms. Anderson stated that since the NCBTMB examination has not been vetted, she offered to reach out to Ohio State University (OSU) as a neutral third party to perform a psychometric review of the examination to determine if it adequately tests Ohio’s curriculum.

Dr. Steinbergh questioned why these steps are being taken, noting that the Board has not discussed this issue. Dr. Steinbergh opined that this issue had been put to rest when the NCBTMB withdrew from the vetting process. Ms. Anderson stated that the Board will continue to get push-back for not accepting an examination that is widely accepted in other states. Ms. Anderson continued that the concern is that the Board does not have adequate information on the NCBTMB examination. Ms. Anderson noted that in 2012 the Board agreed that the NCBTMB examination should be vetted, but that the vetting process was stopped by the NCBTMB’s withdrawal.

Dr. Steinbergh expressed great concern that the resources of the Board are being used in this matter without the Board members having a conversation about whether they want to re-discuss it. Ms. Anderson replied that she has reached out to OSU on this matter, but OSU has not been engaged and no contract has been entered into. Dr. Strafford commented that there is a vendor in the marketplace that will not take “no” for an answer. Dr. Steinbergh opined that this matter should be discussed by the Executive Committee.

Dr. Talmage opined that the matter of the NCBTMB examination was not put to rest, but rather the Board was unable to complete its vetting of the examination. Dr. Talmage stated that one of the Board’s licensee groups, as represented by the AMTA, feels that the NCBTMB examination is equivalent or better than the MBLEx. Dr. Talmage felt that the Board is obligated to honor the request to vet the examination, just as it would if there were an equivalent competitor to the Comprehensive Osteopathic Medical Licensing Examination (COMLEX) or United States Medical Licensing Examination (USMLE) for licensing physicians. Dr. Talmage noted that the Board did not close the matter because it found the NCBTMB examination to be inadequate, but because they would not submit to vetting. Dr. Talmage stated that since the NCBTMB is now willing to engage in a vetting process, the Board should comply.

Ms. Anderson stated that it was made clear to the NCBTMB that the current rule on massage therapist licensure would not be changed at this point. Ms. Anderson stated that if OSU vets the examination and finds that it adequately tests the Ohio curriculum, the Board would be very hard-pressed to justify not allowing two examinations.

Dr. Madia suggested that this be discussed at next month’s Executive Committee meeting. Ms. Anderson agreed, noting that the topic appeared in the administrative report for discussion this month, but the Executive Committee was unable to discuss it yesterday due to time contraints.

Dr. Ramprasad agreed with Dr. Talmage. Dr. Ramprasad stated that if the Ohio Chapter of the AMTA wants an additional examination for their benefit and the NCBTMB is willing to engage in a vetting process, the staff should pursue the matter and gather information so that the Executive Committee can
discuss it.

Continuing, Ms. Anderson stated that the Labor-Management Committee met in December. Ms. Anderson noted that the majority of the Board’s employees are union employees and that two unions represent the staff; one union represents the Board’s four nurses and another represents the rest of the union employees. Ms. Anderson stated that the Labor-Management Committee has met sporadically because there are usually very few grievances. At the recent meeting, the Committee committed to meet quarterly or more often if circumstances dictate.

Ms. Anderson stated that at its recent meeting, the Labor-Management discussed workplace violence and training for such situations. Ms. Anderson stated that all staff will undergo the training provided by the Employee Assistance Program at no cost to the Board. Ms. Anderson stated that both the Labor-Management Committee and the Board has agreed that this training will be beneficial.

Ms. Anderson stated that a new employee, Tajuana Birchmore, has joined the Board staff as a licensure assistant. Ms. Birchmore’s start date was December 31, 2012.

Lastly, Ms. Anderson stated that information regarding the Board’s educational and outreach activities that were completed in December have been provided to the Board members.

LEGISLATIVE UPDATES

**House Bill 251, Oriental Medicine:** Mr. Miller stated that this bill has been signed into law and will become effective on March 22, 2013. Mr. Miller stated that a draft application for a license to practice Oriental Medicine has been provided to the Board for its approval. Mr. Miller stated that the draft application is based on the Board’s acupuncturist application.

Dr. Madia moved to approve the draft application for licensure as an Oriental Medicine practitioner. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

**House Bill 284, Physician Assistant Law Revisions:** Mr. Miller stated that applications regarding changes in physician assistant prescriptive authority have been presented to the Physician Assistant Policy Committee and will come to the Board through the Group 2 Committee. Mr. Miller stated that in February, discussions will begin regarding changes to the physician assistant formulary, as well as possible ways to present the formulary in a more searchable format. Mr. Miller also commented that changes to the Board’s rules will be necessary to match the changes in statute. Mr. Miller stated that this law will become effective on March 22, 2013.

**Senate Bill 301, Pain Management Clinics:** Mr. Miller stated that this law, granting the Board authority to investigate pain treatment clinics, will become effective on March 13, 2013. Mr. Miller anticipated that Ms. Anderson’s meetings with the investigative staff will produce a preliminary plan for the Board’s consideration in February.

**House Bill 417, Patient Notification – Terminated Physicians:** Mr. Miller stated that this law will
become effective on March 22, 2013 and requires the Board to update its rules regarding patient notification of terminated physicians. Mr. Miller stated that the staff is beginning to reach out to the office of the bill’s sponsor, Representative Grossman, as well as the Ohio Hospital Association, Ohio State Medical Association, and the Columbus Medical Association for their input. Mr. Miller commented that these organizations were heavily involved in crafting the bill. In response to Dr. Steinbergh, Mr. Miller stated that the Ohio Osteopathic Association will also be contacted for input.

**Legislative Meetings:** Mr. Miller stated that he and Mr. Gonidakis met in late December with Senator Oleslager, the incoming Chair of the Senate Finance Committee. Mr. Miller stated that the meeting went well and that Senator Oleslager was open and accommodating to the Board. Senator Oleslager had previously served as the Chair of the Senate Health Committee, a position that will now be filled by Senator Jones.

**REPORTS BY ASSIGNED COMMITTEES**

**FEDERATION OF STATE MEDICAL BOARDS ANNUAL MEETING 2013**

Dr. Madia stated that the Executive Committee discussed how many Board members should attend the 2013 Annual Meeting of the Federation of State Medical Boards (FSMB). In general, the Committee felt that the FSMB Annual Meeting is an excellent opportunity for Board members to educate themselves and interact with Board members from other states. Dr. Madia opined that any Board member who wishes to attend should be able to since the expense is relatively small. Dr. Madia noted that Dr. Steinbergh, Dr. Ramprasad, Dr. Strafford, and Dr. Bechtel will be attending.

Ms. Wehrle stated that the Executive Committee recommended that Dr. Steinbergh be appointed as the voting delegate from Ohio and to receive the FSMB scholarship for attendance. The Executive Committee also recommended that Ms. Anderson be the recipient of the FSMB Executive Scholarship for attendance. The Executive Committee further recommended the Ms. Anderson be designated as the associate member of the FSMB to represent the State Medical Board of Ohio.

Dr. Talmage commented the FSMB’s Board of Directors will meet in two weeks and is expected to approve the creation of 10 scholarships for public members of state medical boards to attend the meeting. Dr. Talmage stated that the FSMB values public members and would like to have as many attend the meeting as possible.

Dr. Bechtel stated that he attended his first FSMB Annual Meeting in 2012 and found it to be very valuable. Dr. Bechtel stated that he had been able to interact with experts in various areas of medical regulation and attend very high-quality presentations.

**Dr. Strafford moved to approve Dr. Steinbergh and Ms. Anderson as the scholarship recipients for the FSMB 2013 Annual Meeting. Dr. Mahajan seconded the motion.** All members voted aye. The motion carried.

Ms. Wehrle asked the Board members to decide by February if they would like to attend the FSMB 2013
Annual Meeting.

FISCAL REPORT

Ms. Loe stated that the November 2012 Fiscal Report has been provided to the Board members. Ms. Loe noted that the expenditures portion of the report includes a figure of about $19,000.00 for refunds, which is highly unusual. Ms. Loe explained that in the past, individuals who paid to sit for the Board’s massage therapy examination but did not attend the examination would simply be allowed to sit for the next examination and no funds would be refunded. However, that was no longer an option when the Board began accepting the Massage and Bodywork Licensing Examination (MBLEx) in January 2012 and discontinued giving its own examination. On the advice of the Common Sense Initiative, the Board refunded money to all individuals who paid to sit for the December 2011 examination but failed to appear, regardless of their reason for failing to appear. Ms. Loe commented that these refunds come from the Board’s spending authority and is not simply an invisible refund of money. Ms. Loe stated that the majority of these refunds occurred in November 2012, but some will also be seen on the December 2012 Report.

Ms. Loe stated that the Board’s cash balance is still at $2,800,000.00 as of the end of December 2012. Ms. Loe commented that the Board is purposely not spending its full allotment in order to protect its cash position in the fund.

PER DIEM PAYMENTS

Ms. Loe stated that last month, the Board revised its per diem policy in order to provide consistency. However, the issue of travel was not addressed, particularly instances in which a Board member spends a significant portion of a day traveling to a meeting but does not attend that meeting until the next day. Ms. Loe proposed a revised policy that allows for a travel day for out-of-state travel for Board members to attend a meeting. Ms. Loe noted that this proposed policy only applies to out-of-state travel.

Ms. Loe provided the Board members with a report showing each member’s compensation for the previous 12 months. Ms. Loe stated that, pursuant to a new policy, this report will be provided to the Board members every January.

Dr. Madia moved to approve the proposed per diem policy regarding out-of-state travel. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

Ms. Loe stated that in accordance with a new policy, a copy of each per diem form turned in will be reviewed by the Board President.

LICENSURE APPLICATION REVIEWS

JEFFREY BAILES, P.A.

Ms. Weaver stated that Mr. Bailes is applying for a certificate to practice as a physician assistant in Ohio.
House Bill 284 allows an individual to obtain a certificate to practice without having received a master’s degree or higher if the individual has specified experience practicing as a physician assistant in the U.S. military. To qualify, the applicant must meet both of the following requirements: Hold degree obtained from a program accredited by Accreditation Review Commission on Education of the Physician Assistant, and have experience practicing as a physician assistant for at least three consecutive years while on active duty in any of the United States armed forces or the national guard of any state. Ms. Weaver stated that Mr. Bailes meets both of these requirements.

**Dr. Madia moved to approve Mr. Bailes’ application for a certificate to practice as a physician assistant in Ohio, contingent upon the effective date of House Bill 284 of the 129th General Assembly. Dr. Ramprasad seconded the motion.** A vote was taken:

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<th>ROLL CALL:</th>
<th>Dr. Strafford - aye</th>
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<td>Dr. Steinbergh - aye</td>
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<td>Dr. Madia - aye</td>
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<td>Dr. Talmage - aye</td>
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<td>Mr. Gonidakis - aye</td>
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The motion to approve carried.

**CRYSTAL MILLER, L.M.T.**

Ms. Rieve stated that in October 2012, the Board approved Ms. Miller’s application for restoration of her license to practice as a massage therapist, provided she take and pass the Massage and Bodywork Licensing Examination (MBLEx). Ms. Rieve asked the Board to table this matter while the staff considers new information that has been received.

**Dr. Strafford moved to table this matter. Dr. Bechtel seconded the motion.** All members voted aye. The motion carried.

**RACHEL WOODS, L.M.T.**

Ms. Rieve stated that Ms. Woods has applied for restoration of her massage therapy license. Ms. Woods has not practice massage therapy since 2007.

**Dr. Madia moved to approve the application for restoration of Ms. Woods’ license to practice massage therapy in Ohio, provided she take and pass the Massage Therapy and Bodywork Licensing Examination (MBLEx). Dr. Ramprasad seconded the motion.** A vote was taken:

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<th>ROLL CALL:</th>
<th>Dr. Strafford - aye</th>
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The motion to approve carried.
January 10, 2013

Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Suppan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - aye
Mr. Gonidakis - aye

The motion to approve carried.

CLINICAL RESEARCH FACULTY CERTIFICATE APPLICATION REVIEW

MAGED RAMSIS HANNA, M.D.

Ms. Weaver stated that Dr. Hanna’s application for a Clinical Research Faculty Certificate is complete and he meets all eligibility requirements. If approved, Dr. Hanna will be practicing at the University of Toledo.

Dr. Madia moved to approve Dr. Hanna’s application for a Clinical Research Faculty Certificate. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Suppan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Dr. Talmage - abstain
Mr. Gonidakis - aye

The motion to approve carried.

CERTIFICATE OF CONCEDED EMINENCE APPLICATION REVIEW

ANDREA MARIA KURZ, M.D.

Ms. Weaver stated that Dr. Kurz meets all eligibility requirements for the Certificate of Conceded Eminence, pending one item that the Board is awaiting receipt of. If approved, Dr. Kurz will be practicing at Case Western Reserve University.

Dr. Steinberg asked what item is still pending. Ms. Weaver replied that applicants are required to have received a nationally-recognized or internationally-recognized prize or award of excellence. Dr. Kurz has
listed such a prize or award on her application, but the Board is awaiting the certificate verifying that. Dr. Madia stated that the Group 1 Committee recommended approval of this application, provided that the Secretary and Supervising Member review the certificate verifying the prize or award.

**Dr. Madia moved to approve Dr. Kurz’s application for a Certificate of Conceded Eminence, pending approval by the Secretary and Supervising Member of the certificate verifying that Dr. Kurz received a nationally-recognized or internationally-recognized prize or award. Dr. Mahajan seconded the motion.** A vote was taken.

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<th>ROLL CALL</th>
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<tbody>
<tr>
<td>Dr. Strafford</td>
<td>- aye</td>
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<tr>
<td>Dr. Bechtel</td>
<td>- aye</td>
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<tr>
<td>Dr. Mahajan</td>
<td>- aye</td>
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<tr>
<td>Dr. Suppan</td>
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<td>Dr. Ramprasad</td>
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<td>Dr. Steinbergh</td>
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<td>Dr. Madia</td>
<td>- aye</td>
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<td>Dr. Talmage</td>
<td>- abstain</td>
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<tr>
<td>Mr. Gonidakis</td>
<td>- aye</td>
</tr>
</tbody>
</table>

The motion to approve carried.

**STATE BOARD SPONSORSHIP ROLE IN STEP III OF USMLE**

Mr. Miller explained that under current law, Ohio requires that applicants have nine months of training prior to sitting for Step III of the United States Medical Licensing Examination (USMLE). Applicants who do not meet that requirement often simply take Step III in a state that does not have that requirement. Mr. Miller provided the Board members with a survey from the Federation of State Medical Boards (FSMB) about Ohio’s requirements regarding Step III and whether Ohio wishes to continue with that requirement.

Dr. Steinbergh asked what the pros and cons are for dismissing the requirement. Mr. Miller stated that applicants can and do easily sidestep the requirement by going to another state with fewer restrictions on taking Step III. The requirements of the states originated when the states moved from giving their own examination to accepting the USMLE.

The Board engaged in a thorough discussion of this matter. Dr. Madia and Dr. Mahajan agreed that requiring nine months of training before taking Step III serves no purpose. Dr. Steinbergh opined that the purpose of the nine-month training requirement is to prepare the applicant to take Step III. Mr. Miller stated that, in the FSMB’s opinion, dropping the requirement will not result in an increased failure rate on Step III.

Dr. Talmage stated that the FSMB is looking at making Step III more efficient, shorter, and easier for the student to fill out. This is what prompted FSMB to send the survey to the states. Dr. Talmage stated that if all states that have the requirement removed it, the FSMB can simplify the examination process. Dr.
Steinbergh opined that if the nine-month training period does not add value to the passage rate for Step III, it should be removed.

Mr. Miller stated that the survey asks if Ohio wishes to remove the requirement and, if so, if it can be accomplished by the middle of 2014. Mr. Miller stated that the change can certainly be drafted well before 2014, but there is no guarantee that the statute can be changed by that time. Mr. Miller stated that if the Board seeks this change, it can take the current requirements for taking Step III and add them to the licensure eligibility requirements. Dr. Madia stated that the Group 1 Committee recommends moving forward with Mr. Miller’s suggestion.

Dr. Madia moved to direct Mr. Miller to draft language to remove the eligibility requirements for sitting for Step III of the United States Medical Licensing Examination and add them to the physician licensure eligibility requirement, and pursue having this change enacted into law. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

INQUIRY REGARDING MINIMAL STANDARDS OF CARE

Ms. Debolt stated that last month, the Board discussed a draft response to Kim Henry of Cardiology One concerning the role of the specialist when a primary care physician in the same group orders a test and the results appear in the lab bank of the specialist. The Group 2 Committee considered the Board’s discussion and amended the draft response for communicating test results. The amended draft response essentially states that the ordering physician has the primary responsibility to follow-up on critical lab values; however, if the specialist is aware of a critical value, he or she also has a responsibility to act on it.

Dr. Talmage stated that when a primary care physician refers a patient to a specialist, that patient may or may not actually see that specialist. Dr. Steinbergh stated that this particular inquiry regards physicians who are in the same group. Dr. Talmage expressed concern that the specialist may not have yet seen the patient, and therefore there is no established physician-patient relationship. Dr. Talmage stated that he is reluctant to assign responsibility to a physician who has not established a relationship with the patient. Dr. Suppan stated that if an ordering physician specifies that a lab result should also be sent to the specialist, then the ordering physician has already begun the process of transferring some of that patient’s care to the specialist. Dr. Suppan also noted that in many cases, the ordering physician has an established referral pattern with the specialist and they have already discussed the patient. Dr. Suppan stated that the continuum in which the patient’s care is transferring from the primary care physician to the specialist must be covered better to avoid mishaps. Dr. Suppan opined that it is wrong to tell a specialist that he or she does not have to do anything about a critical lab value that they become aware of.

The Board members continued to discuss this subject thoroughly. Dr. Strafford suggested that the draft be changed to state that disposition of any action on lab values is the responsibility of the ordering physician only. Dr. Madia agreed. Dr. Steinbergh stated that she could support that position and noted that communication issues between physicians in a group should be handled within the group.

Dr. Ramprasad stated if a physician receives abnormal lab results via electronic medical records (EMR), he or she is liable anyway if they do not pay attention to the result. Dr. Ramprasad opined that the response
should say that if an abnormal result is received by any means, including EMR, and there is a physician-
patient relationship, then the receiving physician must act. Dr. Suppan agreed and stated that the question
of whether there is a physician-patient relationship in any specific instance can be debated.

Dr. Steinbergh suggested that this discussion began as a response to a specific inquiry from one group, but
has evolved into a larger discussion of policy. Dr. Steinbergh suggested that this discussion continue at the
Board level so that the broader implications for healthcare in Ohio can be considered and a position can be
adopted. The Board considered the merits of continuing the discussion and agreed with Dr. Steinbergh.

FORM 102.04(D)

Dr. Strafford asked Ms. Debolt to discuss the memorandum the Board members received regarding ethics.
Ms. Debolt stated that as members of the State Medical Board, the Board members are prohibited from
earning money from another state agency unless they fill out Form 102.04(D), wherein the members can
disclose any possible conflicts of interest. For instance, if a Board member provides services to Medicaid
patients, the member can fill out the 102.04(D) form; the form will be filed with the Ohio Department of
Jobs and Family Services (ODJFS) and the member will declare that he or she will not vote on any matter
concerning an employee of ODJFS. Dr. Strafford noted that he has not been aware of this form prior to
September 2012. Ms. Debolt stated that this was due to administrative oversight.

PHYSICIAN ASSISTANT MATTERS

REVIEW OF HOUSE BILL 284

Mr. Miller stated that he had provided a memorandum to the Physician Assistant Policy Committee
(PAPC) and the Group 2 Committee outlining the major sections of House Bill 284 that will affect the
Medical Board. The memorandum delineated a plan to update the Board’s applications, update the
physician assistant formulary, and begin revisions to the Board’s rules to align them with the new statute.

Mr. Miller stated that he presented PAPC with proposed changes to the physician assistant supervisory
plan application which, pursuant with House Bill 284, listed new services which a physician assistant can
provide without requesting approval of a special services plan from the Board. Mr. Miller stated that the
PAPC approved the proposed changes to the application. Dr. Steinbergh stated that the Group 2
Committee also approved the proposed changes.

Dr. Bechtel moved to approve the proposed changes to the physician assistant supervisory plan
application. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

CHANGES TO APPLICATION FOR CERTIFICATE TO PRACTICE

Mr. Miller stated that due to a recent change in statute, individuals who have graduated from a school
approved by the Accreditation Review Commission for Physician Assistants and have three consecutive
years of military service are eligible for a certificate to practice as a physician assistant in Ohio, provided
they meet other requirements. Mr. Miller asked the Board to approve changes to the physician assistant
licensure application that reflect this route towards licensure.

**Dr. Bechtel moved to approve the proposed changes to the physician assistant licensure application.**  
**Dr. Mahajan seconded the motion.** All members voted aye. The motion carried.

**CHANGES TO APPLICATION FOR CERTIFICATE TO PRESCRIBE**

Mr. Miller stated that changes in statute have established two new routes for a physician assistant to obtain a certificate to prescribe. Mr. Miller stated the previous route, which still exists, is to have undergone a provisional period of prescribing. One new route is to hold a master’s degree and to have held prescriptive authority in another state or with the United States government. The other new route is to have received a certificate to practice as a physician assistant by virtue of military service and held prescriptive authority in the United States armed forces, in a state national guard, or with the Department of Veteran’s Affairs. Mr. Miller stated that changes have been proposed to the application for a certificate to prescribe as a physician assistant to reflect the new law.

**Dr. Bechtel moved to approve the proposed changes to the application for a certificate to prescribe as a physician assistant.**  
**Dr. Mahajan seconded the motion.** All members voted aye. The motion carried.

Dr. Madia exited the meeting at this time.

**APPROVAL OF TRAVEL TO AMERICAN OSTEOPATHIC ASSOCIATION ANNUAL MEETING**

Ms. Wehrle stated that last week, Dr. Steinbergh served as Ohio’s voting delegate at the Annual Summit of the American Osteopathic Association (AOA), held in Arizona. Ms. Wehrle explained that the timing of that meeting and the Board’s meeting schedule prevented pre-approval of Dr. Steinbergh’s expenses. The Executive Committee recommended retroactive approval of Dr. Steinbergh’s *per diem* for her two days of attendance at the Annual Summit, as well as the meal *per diem* applicable by state policy. Dr. Steinbergh commented that the AOA paid for her travel and hotel.

**Dr. Bechtel moved to approve *per diem* payments for Dr. Steinbergh attendance at the Annual Summit of the American Osteopathic Association as recommended by the Executive Committee.**  
**Dr. Mahajan seconded the motion.** All members voted aye. The motion carried.

**RECOGNITION OF DR. SUPPAN’S SERVICE TO THE BOARD**

Dr. Steinbergh noted that today is Dr. Suppan’s last meeting with the Board. Dr. Steinbergh thanked Dr. Suppan for her years of exemplary service to the Board. Dr. Suppan stated that it has been a pleasure to serve on the Board. Dr. Suppan commented that 2012 was a year of very significant change for the Board and she congratulated the Board members and staff on their grace and professionalism during this time. Dr. Suppan particularly thanked Dr. Steinbergh, whom she recognized as a mentor when she joined the Board. Dr. Suppan also congratulated Ms. Anderson for the outstanding job she is doing as Interim Executive Director. The Board and staff applauded Dr. Suppan.
Thereupon at 10:30 am, the January 10, 2013, meeting of the State Medical Board of Ohio was duly adjourned by Dr. Steinbergh.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on January 9-10, 2013, as approved on February 13, 2013.

Anita M. Steinbergh, D.O., President
J. Craig Strafford, M.D., M.P.H., Secretary