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.; Donald R. Kenney, Sr.; Amol Soin, M.D.; Sushil M. Sethi, M.D.; Bruce R. Saferin, D.P.M.; and Robert P. Giacalone. The following member arrived at a later time: Michael L. Gonidakis.

Also present were: Aaron Haslam, Executive Director; Kimberly Anderson, Assistant Executive Director; Susan Loe, Assistant Executive Director, Program Management and Operations; Michael Miller, Interim Assistant Executive Director, Licensure and Renewal; Sallie J. Debolt, General Counsel; Joan K. Wehrle, Education & Outreach Program Manager; K. Randy Beck, Interim Chief of Investigations; Rebecca Marshall, Chief Enforcement Attorney; David Katko, Marcie Pastrick, Karen Mortland, Mark Blackmer, Angela McNair; Cheryl Pokorny, and Dennis Tenison, Enforcement Attorneys; Kyle Wilcox, Melinda Snyder, Heidi Dorn, Assistant Attorneys General; Gregory Porter, Interim Chief Hearing Examiner; Danielle Blue, Hearing Examiner; Alana Noward, Hearing Unit Assistant; Gary Holben, Operations Administrator; Danielle Bickers, Compliance Supervisor; Annette Jones and Angela Moore, Compliance Officers; Kay Rieve, Administrative Officer; Barbara Jacobs, Senior Executive Staff Attorney; Jacqueline A. Moore and Fonda Brooks, Public Information Assistants; Christine Schwartz, Enforcement Intern; and Benton Taylor, Executive Assistant to the Executive Director.

MINUTES REVIEW

Dr. Strafford moved to approve the draft minutes of the October 9-10, 2013, Board meeting, as written. Dr. Sethi seconded the motion. All members voted aye. The motion carried.

EXECUTIVE SESSION

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

ROLL CALL:

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Dr. Talmage - aye
Mr. Kenney - aye
Mr. Giacalone - aye

The motion carried.

Pursuant to Section 121.22(G)(3), Ohio Revised Code, the Board went into executive session with Mr. Haslam, Ms. Anderson, Ms. Loe, Ms. Debolt, Ms. Wehrle, Mr. Beck, Ms. Marshall, the Enforcement Attorneys, the Assistant Attorneys General, Ms. Rieve, Ms. Weaver, Ms. Jacobs, Ms. Moore, Ms. Brooks, Ms. Schwartz, and Mr. Taylor in attendance.

The Board returned to public session.

APPLICANTS FOR LICENSURE

Dr. Strafford 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,” the acupuncturist applicants listed in Exhibit “D,” the Oriental medical practitioner applicants listed in Exhibit “E,” and the genetic counselor applicants listed in Exhibit “F.” Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Saferin - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - aye
Mr. Kenney - aye
Mr. Giacalone - 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: Stephen Michael Cardamone, D.O.; Walter Francis Finan, M.D.; Yousuf Masood, M.D.; Jorrod Eugene Miller, L.M.T.; Edward W. Millunchick, M.D.; Gareth J. Morris-Stiff, M.D.; Patrick
Eugene Muffley, D.O.; Anil Choudary Nalluri, M.D.; and Anthony Donald Zucco, D.O.

A roll call was taken:

ROLL CALL:  
Dr. Strafford - aye  
Dr. Bechtel - aye  
Dr. Saferin - aye  
Dr. Soin - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Sethi - aye  
Dr. Talmage - aye  
Mr. Kenney - aye  
Mr. Giacalone - 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. Saferin - aye  
Dr. Soin - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Sethi - aye  
Dr. Talmage - aye  
Mr. Kenney - aye  
Mr. Giacalone - 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 and Dr. Bechtel served as Supervising Member. Dr. Steinbergh noted that Dr. Talmage also served as Secretary on the cases of Dr. Nalluri, Dr. Zucco, and Dr. Muffley.

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.

JARROD EUGENE MILLER, L.M.T. Case No. 13-CRF-041

Dr. Steinbergh directed the Board’s attention to the matter of Jarrod Eugene Miller, L.M.T. She advised
that no objections were filed. Mr. Porter was the Hearing Examiner.

**Dr. Soin moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Jarrod Eugene Miller, L.M.T. Dr. Saferin seconded the motion.**

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

Mr. Kenney stated that Mr. Miller was initially licensed as a massage therapist in February 2011. In August 2012, a female police officer (Client 1) reported to Mr. Miller’s management and to the Hudson Police Department that Mr. Miller had touched her genitals during a massage therapy session. According to Client 1, Mr. Miller apologized and said that he was weak and could not help himself. Client 1 ultimately pressed criminal charges against Mr. Miller.

On September 4, 2012, Mr. Miller pleaded guilty to an amended charge of Assault and was sentenced to 180 days in jail. Mr. Miller’s jail time was suspended and he was placed on community control for 12 months. The court also fined Mr. Miller $1,000.00 plus costs, suspended $750.00 of that fine, and ordered Mr. Miller to have no contact with Client 1.

Mr. Kenney stated that he agreed with the Hearing Examiner’s Findings of Fact and Conclusions of Law. Mr. Kenney also agreed with the Hearing Examiner’s Proposed Order of permanent revocation.

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

**ROLL CALL:**

- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Saferin - aye
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Sethi - aye
- Dr. Talmage - aye
- Mr. Kenney - aye
- Mr. Giacalone - aye

The motion to approve carried.

**STEPHEN MICHAEL CARDAMONE, D.O., Case No. 13-CRF-059**

Dr. Steinbergh directed the Board’s attention to the matter of Stephen Michael Cardamone, D.O. Objections have been filed and were previously distributed to Board members. Ms. Shamansky was the Hearing Examiner. Dr. Steinbergh stated that this matter is non-disciplinary in nature, and therefore all Board members may vote.

Dr. Steinbergh continued that a request to address the Board has been timely filed on behalf of Dr.
Dr. Cardamone stated that he is board-certified in family medicine and is in compliance with his specialty board’s Maintenance of Certification program. Dr. Cardamone’s certification is current through December 31, 2014. Dr. Cardamone noted Ms. Rieve’s testimony at hearing that a specialty board’s Maintenance of Certification is usually acceptable proof of clinical competency. Dr. Cardamone stated that if the Board accepts the Hearing Examiner’s recommendation to make his licensure contingent upon passing an examination, it would denigrate and devalue the Maintenance of Certification program of the American Board of Family Medicine.

Dr. Steinbergh asked if the Assistant Attorney General would like to respond. Ms. Snyder stated that she would like to respond.

Ms. Snyder stated that Dr. Cardamone has applied for restoration of his Ohio medical license. Dr. Cardamone has not been engaged in the clinical practice of medicine since 2002. Ms. Snyder stated that this triggers Section 4731.222, Ohio Revised Code, which specifies that an applicant who has not been engaged in the active practice of osteopathic medicine and surgery for more than two years may be required by the Board to pass an oral or written examination, or both, to determine the applicant’s present fitness to resume practice. Ms. Snyder stated that it is within the Board’s discretion if it wishes to consider Dr. Cardamone’s Maintenance of Certification to be acceptable proof of clinical competency.

Dr. Ramprasad moved to approve and confirm Ms. Shamansky’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Stephen Michael Cardamone, D.O. Dr. Soin seconded the motion.

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

Dr. Ramprasad briefly reviewed Dr. Cardamone’s career, including his active practice in Iowa from 1990 to 2002. In 2002, Dr. Cardamone transitioned into strictly administrative medicine. Dr. Cardamone acknowledges that he has provided no hands-on patient care since that time, though he argues that he had to maintain clinical competency. In 2007, Dr. Cardamone became Chief Medical Officer of a health system in Milwaukee, Wisconsin. In January 2013, Dr. Cardamone accepted a position as Chief Clinical Integration Officer for an organization in Ohio.

Dr. Ramprasad stated that Dr. Cardamone has maintained specialty board certification in family medicine since 1992. Dr. Cardamone most recently recertified in 2004 and his current certification is valid until December 31, 2014. Dr. Ramprasad noted that Dr. Cardamone has completed three of the four Maintenance of Certification modules of the American Board of Family Medicine.

Dr. Ramprasad stated that it is undisputed that Dr. Cardamone has not provided patient care for more than 10 years, and this lack of patient contact is the central issue in this matter. Dr. Ramprasad offered an amendment to the Report and Recommendation to add a third Finding of Fact, and to amend the Proposed Order to grant restoration of Dr. Cardamone’s license and restrict it to the practice of administrative medicine.
Dr. Ramprasad moved to amend the Report and Recommendation to add the following Finding of Fact:

3. The evidence establishes that Dr. Cardamone has partially fulfilled the requirements for maintenance of his certification by the American Board of Family Medicine. Further, Dr. Cardamone indicated that he intends to take the recertification examination before December 2014.

Dr. Ramprasad further moved to amend the Proposed Order to read as follows:

It is hereby ORDERED that:

A. **GRANT OF APPLICATION; LIMITATION/RESTRICTION**: The application of Stephen M. Cardamone, D.O., for reinstatement/restoration of his certificate to practice osteopathic medicine and surgery in Ohio is GRANTED, provided that he otherwise meets all statutory and regulatory requirements, and subject to the Limitations and Restrictions set forth below.

B. **LIMITATION/RESTRICTION**: The certificate of Dr. Cardamone to practice osteopathic medicine and surgery in the State of Ohio shall be LIMITED and RESTRICTED to the practice of administrative medicine.

C. **CONDITIONS FOR TERMINATION OF LIMITATION/RESTRICTION**: The Board shall not consider terminating the Limitation/Restriction imposed in paragraph B until the following condition has been met:

   1. **Recertification Examination**: Dr. Cardamone shall provide evidence acceptable to the Board or its designee that he has taken and passed the recertification examination for the American Board of Family Medicine.

D. **TERMINATION OF LIMITATION/RESTRICTION**: Upon satisfying the condition set forth in paragraph C.1, as evidenced by a written release from the Board, the Limitation/Restriction on Dr. Cardamone’s certificate will be terminated.

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

Dr. Saferin seconded the motion.

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

Mr. Giacalone asked if the term “administrative medicine” is defined in any document. The Board members discussed this and agreed that the term “administrative medicine” does not involve direct patient care. Mr. Kenney suggested that “administrative medicine” be clearly defined in the Order. Dr. Ramprasad agreed.
Dr. Ramprasad wished to change his motion to amend so that Paragraph B of the Proposed Order reads as follows:

B. LIMITATION/RESTRICTION: The certificate of Dr. Cardamone to practice osteopathic medicine and surgery in the State of Ohio shall be LIMITED and RESTRICTED to the practice of administrative medicine, which does not provide any direct patient care.

No Board member objected to the change. The motion to amend was changed accordingly.

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

ROLL CALL:
- Dr. Strafford - aye
- Dr. Bechtel - aye
- Dr. Saferin - aye
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Sethi - aye
- Dr. Talmage - aye
- Mr. Kenney - aye
- Mr. Giacalone - aye

The motion to amend carried.

Dr. Talmage expressed support for the amended Order, noting that the restriction on Dr. Cardamone’s license will remain if he chooses not to take the family medicine recertification examination. Dr. Talmage also noted that there is precedent for the Board to grant a restricted license.

Dr. Ramprasad moved to approve and confirm Ms. Shamansky’s Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Stephen Michael Cardamone, D.O. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:
- Dr. Strafford - aye
- Dr. Bechtel - aye
- Dr. Saferin - aye
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Sethi - aye
- Dr. Talmage - aye
- Mr. Kenney - aye
- Mr. Giacalone - aye
The motion to approve carried.

WALTER FRANCIS FINAN, M.D., Case No. 13-CRF-011

Dr. Steinbergh directed the Board’s attention to the matter of Walter Francis Finan, M.D. Objections have been filed and were previously distributed to Board members. Mr. Porter was the Hearing Examiner. Dr. Steinbergh stated that this matter is non-disciplinary in nature, and therefore all Board members may vote.

Dr. Bechtel moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Walter Francis Finan, M.D. Dr. Soin seconded the motion.

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

Dr. Ramprasad briefly reviewed Dr. Finan’s career, including his time as a certified public accountant and a practicing attorney before obtaining his medical degree in 1997. Dr. Finan subsequently took the United States Medical Licensing Examination (USMLE), passing Step 1 on the seventh attempt, Step 2 on the fifth attempt, and Step 3 on the fourth attempt. Dr. Finan testified at hearing that, at that time, he had been out of a formal academic environment for about 15 years and had some difficulty with the memorization.

Dr. Finan applied for an Ohio medical license in October 2012 and his application is pending. Dr. Finan is requesting that the Board grant his license. Dr. Ramprasad noted that under the Board’s previous rules, applicants were required to pass the USMLE without failing any step more than three times. However, Dr. Ramprasad stated that the Board recently amended its rule to increase the number of allowed failures for any step to five. Further, the amended rule allows the Board to grant a waiver of this requirement if the applicant is certified by a member specialty board of the American Board of Medical Specialties. Dr. Finan is board-certified in family medicine.

Dr. Ramprasad moved to amend the Report and Recommendation to add the following Finding of Fact:

5. Dr. Finan was certified by the American Board of Family Medicine in 2006. Administrative notice is taken that the American Board of Family Medicine is a member board of the American Board of Medical Specialties.

Dr. Ramprasad further moved to amend the Conclusions of Law in the Report and Recommendation to read as follows:

1. R.C. 4731.14 and 4731.29 provide that the Board shall issue a certificate to applicants who pass the required medical licensure examination and satisfy other requirements. Rule 4731-6-14(C)(3)(a), which was amended effective October 31, 2013, provides that an applicant seeking a certificate based upon the USMLE must have successfully completed steps 1, 2 and 3 of the USMLE within a ten-year period without having failed any step more than five times. As set forth in Findings of Fact 2, Dr. Finan failed USMLE Step 1 six times. Therefore, he has not met the requirements for licensure as set forth in Rule 4731-6-14(C)(3)(a).
2. Rule 4731-6-14(C)(3)(b), which was amended effective October 31, 2013, provides, in pertinent part:

(b) The board may grant a good cause waiver to any applicant that does not meet the requirements of paragraph (C)(3)(a) of this rule, if the applicant meets the following:

(i) Holds current specialty board certification from the American board of medical specialties or the American osteopathic association[.]

As set forth in Findings of Fact 5, Dr. Finan is certified by a member board of the American Board of Medical Specialties, and is therefore eligible for a waiver of the attempt limitation set forth in Rule 4731-6-14(C)(3)(a).

**Dr. Ramprasad further moved to amend the Proposed Order to read as follows:**

It is hereby ORDERED that:

The application of Walter Francis Finan, M.D., for a certificate to practice allopathic medicine and surgery in Ohio is GRANTED, provided that he otherwise meets all statutory and regulatory requirements.

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

**Dr. Talmage seconded the motion.**

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

Dr. Talmage stated that he supports the proposed amendment because Dr. Finan is board-certified, which indicates that he is an adequate or better-than-adequate physician. Dr. Talmage stated that it is somewhat concerning that Dr. Finan failed Step 1 of the USMLE six times, but noted that his record was somewhat better on Step 3.

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

**ROLL CALL:**

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Mr. Giacalone - aye

The motion to amend carried.

A vote was taken on the amended motion to approve:

ROLL CALL: Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Saferin - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - aye
Mr. Kenney - aye
Mr. Giacalone - aye

The motion to approve carried.

YOUSUF MASOOD, M.D., Case No. 12-CRF-093

Dr. Steinbergh directed the Board’s attention to the matter of Yousuf Masood, M.D. She advised that no objections were filed. Ms. Shamansky was the Hearing Examiner.

Dr. Soin moved to approve and confirm Ms. Shamansky’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Yousuf Masood, M.D. Dr. Ramprasad seconded the motion.

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

Dr. Sethi stated that this matter has come before the Board because the New Jersey State Board of Medical Examiners revoked Dr. Masood’s medical license in that state following his conviction for Conspiracy to Defraud a Health Care Benefit Program. Dr. Sethi stated that the action of the New Jersey Board constitutes a violation of Section 4731.22(B)(22), Ohio Revised Code.

Dr. Sethi continued that on or about November 21, 2011, Dr. Masood appeared in U.S. District Court in New Jersey and pleaded guilty to, and was found guilty of, one count of Conspiracy to Defraud a Health Care Benefit Program. Dr. Masood was sentenced to 43 months in prison, fined $75,000.00, and ordered to make restitution of $929,772.91.

Dr. Sethi stated that Dr. Masood provided a letter explaining his circumstances. Dr. Masood explained that he had been practicing with two other licensed physicians and a licensed physician assistant. The non-licensed individuals, who had provided services that Dr. Masood billed for as though he had provided the services, were Education Commission on Foreign Medical Graduates (ECFMG) certified physicians working under the direct supervision of licensed physicians. Dr. Masood further explained that it was a
busy inner-city practice which had been in existence for only 12 months. Prior to this practice, Dr. Masood had been employed as a physician at another location.

Dr. Sethi stated that the Proposed Order in this matter is permanent revocation of Dr. Masood’s Ohio medical license.

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

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<td>Mr. Kenney</td>
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<td>Mr. Giacalone</td>
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The motion to approve carried.

**EDWARD W. MILLUNCHICK, M.D., Case No. 13-CRF-048**

Dr. Steinbergh directed the Board’s attention to the matter of Edward W. Millunchick, M.D. She advised that no objections were filed. Ms. Shamansky was the Hearing Examiner. Dr. Steinbergh stated that this matter is non-disciplinary in nature, and therefore all Board members may vote.

**Dr. Soin moved to approve and confirm Ms. Shamansky’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Edward W. Millunchick, M.D. Dr. Saferin seconded the motion.**

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

Dr. Talmage stated that Dr. Millunchick has had a distinguished 40-year career, the majority of which was in providing pediatric care in a military setting, in an academic setting, and in private practice. For the past 15 years Dr. Millunchick has been engaged in administrative and non-clinical duties approving and reviewing care. Dr. Talmage opined that it would be difficult for someone who has not practiced clinically for 15 years to pass the Special Purpose Examination (SPEX) or recertify in pediatrics. Therefore, Dr. Talmage proposed an amendment that would grant Dr. Millunchick a medical license that will be permanently limited to administrative, non-clinical medicine.

**Dr. Talmage moved to amend the Report and Recommendation to add the following Finding of Fact:**

3. Dr. Millunchick asked that he be granted a limited administrative medical license.
Dr. Talmage further moved to amend the Proposed Order to read as follows:

It is hereby ORDERED that:

A. **GRANT OF APPLICATION; LIMITATION/RESTRICTION**: The application of Edward W. Millunchick, M.D., for a certificate to practice allopathic medicine and surgery in Ohio is **GRANTED** and, provided that he otherwise meets all statutory and regulatory requirements, subject to the permanent Limitation and Restriction as set forth below.

B. **LIMITATION/RESTRICTION**: The certificate of Dr. Millunchick to practice medicine and surgery in the State of Ohio shall be permanently **LIMITED** and **RESTRICTED** to the practice of administrative medicine.

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

**Dr. Ramprasad seconded the motion.**

Mr. Giacalone suggested that the phrase “which does not provide any direct patient care” after the term “administrative medicine” in paragraph B of the proposed Order. Dr. Talmage agreed.

**Dr. Talmage wished to change his motion to amend so that Paragraph B of the Proposed Order reads as follows:**

B. **LIMITATION/RESTRICTION**: The certificate of Dr. Millunchick to practice medicine and surgery in the State of Ohio shall be permanently **LIMITED** and **RESTRICTED** to the practice of administrative medicine, which does not provide any direct patient care.

**No Board member objected to the change. The motion to amend was changed accordingly.**

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

**ROLL CALL:**

Dr. Strafford       - aye
Dr. Bechtel        - aye
Dr. Saferin        - aye
Dr. Soin           - aye
Dr. Ramprasad      - aye
Dr. Steinbergh     - aye
Dr. Sethi          - aye
Dr. Talmage        - aye
Mr. Kenney         - aye
Mr. Giacalone      - aye

The motion to amend carried.
A vote was taken on the amended motion to approve:

**ROLL CALL:**

- Dr. Strafford - aye
- Dr. Bechtel - aye
- Dr. Saferin - aye
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Sethi - aye
- Dr. Talmage - aye
- Mr. Kenney - aye
- Mr. Giacalone - aye

The motion to approve carried.

**GARETH J. MORRIS-STIFF, M.D., Case No. 13-CRF-060**

Dr. Steinbergh directed the Board’s attention to the matter of Gareth J. Morris-Stiff, M.D. She advised that no objections were filed. Ms. Blue was the Hearing Examiner. Dr. Steinbergh stated that this matter is non-disciplinary in nature, and therefore all Board members may vote.

**Dr. Soin moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Gareth J. Morris-Stiff, M.D. Dr. Saferin seconded the motion.**

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

Dr. Talmage stated that Dr. Morris-Stiff is a subspecialist in the critical area of hepato-pancreato-biliary (HPB) gall bladder surgery. Dr. Morris-Stiff does not meet the technical standard of two years of graduate training in the United States; Dr. Morris-Stiff had a one-year fellowship and 13 weeks of specialty courses. However, Dr. Talmage opined that the required two years of training is based on assuring acculturation and United States-style training. Dr. Talmage pointed out that Dr. Morris-Stiff was trained in Great Britain, which is culturally very similar to the United States, and he has had training at excellent centers. Dr. Talmage supported the Proposed Order, which would grant Dr. Morris-Stiff’s application for a license and consider his training and experience to be equivalent to 24 months of graduate medical education.

Dr. Ramprasad expressed some concern that Dr. Morris-Stiff practices in a very specialized field. Dr. Ramprasad noted that beginning in 2010, Dr. Morris-Stiff has changed positions every few months, which is not a usual practice in the United Kingdom. Dr. Ramprasad also noted that for the past two years, Dr. Morris-Stiff has not practiced the HPB surgery for which he had trained. Dr. Ramprasad further noted that Dr. Morris-Stiff was not certified to perform HPB surgery, but was only certified to have completed the training. Lastly, Dr. Ramprasad noted that Dr. Morris-Stiff mostly observed the surgeries and was not the primary surgeon in any procedure.

Dr. Ramprasad stated that he will support Dr. Morris-Stiff’s application on the basis of equivalency to two
years of graduate education, but wanted his concerns noted in the record.

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

**ROLL CALL:**

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The motion to approve carried.

**ANIL CHOUDARY NALLURI, M.D., Case No. 13-CRF-025**

Dr. Steinbergh directed the Board’s attention to the matter of Anil Choudary Nalluri, M.D. She advised that no objections were filed. Ms. Blue was the Hearing Examiner.

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

Dr. Nalluri was represented by his attorney, Eric Jones.

Mr. Jones stated that Dr. Nalluri is before the Board as a result of an investigation of his psychiatric practice that began six years ago. Mr. Jones explained that a special undercover agent of the Bureau of Workers’ Compensation (BWC). Dr. Nalluri was ultimately indicted for felony workers’ compensation fraud. When Dr. Nalluri was indicted, he panicked because he had never been in trouble before. Mr. Jones stated that Dr. Nalluri was led to believe that he would be sent to prison if he did not plead guilty. Mr. Jones stated that Dr. Nalluri was also led to believe that he would keep his medical license if he pleaded guilty.

Mr. Jones stated that the undercover agent posing as a patient often arrived late for his appointments. Mr. Jones also stated that Dr. Nalluri would go out to the parking lot to physically help the “patient” and offered services at no charge. Four years after the investigation concluded, the case was reviewed by Dr. Miller, a BWC expert, who concluded that Dr. Nalluri should have received credit for the eleven visits that ultimately led to his fraudulent billing charges due to using a different CPT code. Mr. Jones stated that as a result of the credit he should have received, Dr. Nalluri’s fraud is reduced from $1,171.91 to $257.40.

Mr. Jones noted that the judge in Dr. Nalluri’s criminal case commended Dr. Nalluri for his career. The judge further opined that Dr. Nalluri’s services to the community far outweighed any harm he had done in...
this matter and hoped that this matter would not impact his medical license.

Mr. Jones stated that the Proposed Order would suspend Dr. Nalluri’s medical license for 30 days, followed by two years of probation. Mr. Jones asked the Board to consider Dr. Nalluri’s 43-year career, during which he has had no problems besides this matter, which is really a billing error rather than a criminal matter. Mr. Jones stated that this situation has destroyed Dr. Nalluri’s practice and reputation, and damaged his family. Mr. Jones opined that Dr. Nalluri has been punished enough. Mr. Jones also stated that Dr. Nalluri has met all the continuing medical education (CME) requirements recommended by the Hearing Examiner.

Dr. Nalluri stated that he is 66-and-a-half years old, first received his medical license at the age of 24, and first came to the United States in 1974. Dr. Nalluri stated that he is embarrassed and ashamed for this situation, which has destroyed his career. Dr. Nalluri stated that his hospital has discharged him, insurance companies terminated him, and his whole family has been affected. Dr. Nalluri stated that he panicked when this occurred and became a patient for post-traumatic stress disorder. Dr. Nalluri stated that he could not take it anymore, so he pleaded guilty to misdemeanor workers’ compensation fraud. Dr. Nalluri stated that he had been told by his attorney that if he pleaded guilty to the misdemeanor, this nightmare would be over.

Dr. Nalluri stated that he has traveled all over the country to learn from his senior collegeages and have given back to the community by teaching. Dr. Nallrui stated that he is really good and spent countless hours preparing his own slides for the courses he taught.

Dr. Nalluri thanked the Board for its time

Dr. Steinbergh asked if the Assistant Attorney General would like to respond. Ms. Dorn stated that she would like to respond.

Ms. Dorn stated that the Report and Recommendation summarizes this case very well. Ms. Dorn noted that Mr. Jones was correct that the Proposed Order included a 30-day suspension of Dr. Nalluri’s license, but noted that the Proposed Order stays that suspension.

**Dr. Ramprasad moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Anil Choudary Nalluri, M.D. Dr. Soin seconded the motion.**

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

Dr. Ramprasad briefly reviewed Dr. Nalluri’s medical career. Dr. Nalluri was charged with presenting, or causing to be made or presented, a false or misleading statement with purpose to secure payment for good or services rendered, with purpose to defraud or knowing that he as facilitating a fraud. In December 2012, Dr. Nalluri pleaded guilty to, and was found guilty of, stipulated lesser counts of workers’ compensation fraud. Dr. Nalluri was ordered to pay restitution to BWC. However, the court did not impose a sentence, fine, or court costs on Dr. Nalluri. Dr. Ramprasad stated that Dr. Nalluri has acknowledged the mistakes and admitted that he submitted claims to BWC for reimbursement for 20-
minute psychiatric sessions when the sessions did not last 20 minutes. Dr. Nalluri paid restitution in the amount of $70,497.68 for the costs of their investigation. Dr. Nalluri lost privileges at his hospital and was terminated from several health insurance plans.

Dr. Ramprasad agreed with the Findings of Fact, Conclusions of Law, and the Proposed Order to suspend Dr. Nalluri’s medical license for 30 days, to stay that suspension, and to impose probationary terms for a minimum of two years.

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

ROLL CALL:  

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The motion to approve did not obtain six affirmative votes, and therefore did not carry.

Mr. Kenney stated that, based on what he has read and heard, Dr. Nalluri’s overcharges were reduced to $257.40 including credits approved by a BWC expert. Mr. Kenney noted that the Assistant Attorney General did not dispute this. Mr. Kenney stated that that amount, spread over the number of sessions involved, did not seem to justify these steps by the Board.

Ms. Debolt noted that Mr. Gonidakis is expected to arrive at the meeting at a later time and asked if the Board would like to table this matter until his arrival.

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

**ANTHONY DONALD ZUCCO, D.O., Case No. 13-CRF-045**

Dr. Steinbergh directed the Board’s attention to the matter of Anthony Donald Zucco, D.O. Objections have been filed and were previously distributed to Board members. Ms. Blue was the Hearing Examiner.

Dr. Zucco and his attorney, W. Jeffery Moore, appeared and requested to address the Board. Ms. Debolt stated that there does not appear to be a written request to address the Board on file. Mr. Moore stated that someone in the Medical Board offices informed his partner this morning that they would be able to address the Board. Mr. Wilcox stated that he does not object to Dr. Zucco and his attorney addressing the Board.
Ms. Debolt stated that the Board may vote to allow Dr. Zucco and his attorney to address the Board.

**Dr. Soin moved to allow Dr. Zucco to address the Board. Dr. Saferin seconded the motion.** All members voted aye. The motion carried.

Dr. Steinbergh stated that five minutes will be allowed for the address. Mr. Moore thanked the Board.

Mr. Moore strenuously objected to the Hearing Examiner’s Proposed Order of permanent revocation. Mr. Moore stated that Dr. Zucco was convicted of failure to report child abuse, but child abuse was never proven. Mr. Moore stated that Dr. Zucco, who had practiced as an anesthesiologist for a number of years, was working in an urgent care center at this time. A woman came in with her 12-year-old daughter (Patient 1) and reported that there may have been sexual abuse without penetration, possibly involving inappropriate touching by a 10-year-old cousin. Dr. Zucco informed them that if there had been rape or abuse, they would need to go to a hospital because he did not have a rape kit and was not equipped to handle the situation. The mother then said there was no rape or sexual abuse and she wanted Patient 1 to be seen by Dr. Zucco. Dr. Zucco treated Patient 1 for a urinary tract infection (UTI). Before Patient 1 and her mother left, Dr. Zucco consulted with his supervisor and was advised that, according to their protocols, he did not have to report this.

Mr. Moore continued that Patient 1 and her mother returned the next day because Patient 1 was not handling the medicine appropriately. Dr. Zucco gave Patient 1 a shot rather than have her take the medication orally. They checked up with Dr. Zucco again a week later and Patient 1 was fine at that time. Mr. Moore stated that Dr. Zucco had checked and no one had reported sexual abuse or wrongful sexual activity.

Mr. Moore stated that Patient 1 and her mother later became upset with the cousin, then reported to the county prosecutor’s office that there had been sexual abuse by the cousin. Mr. Moore stated that there was never a prosecution because the 10-year-old cousin was found to be incompetent to be prosecuted. Mr. Moore stated that Dr. Zucco probably should have reported this, but he checked into everything, advised the patient and mother appropriately, and did the things he thought he had to do. Mr. Moore reiterated that Dr. Zucco discussed this with his supervisor and was instructed not to report this, yet the only person prosecuted was Dr. Zucco.

Mr. Moore stated that Dr. Zucco is sorry for this incident and opined that this does not warrant a permanent revocation of his medical license.

Dr. Zucco acknowledged that he made a mistake and stated that he made it out of ignorance and not malice. Dr. Zucco stated that as an anesthesiologist for 15 years, this was the first such case he had ever encountered. Dr. Zucco stated that he followed-up with the procedure manual and his supervisor. Dr. Zucco stated that he has learned a lesson from this. Dr. Zucco stated the runs an addiction medicine clinic and had recently reported a suspect case to the Department of Family Services.

Dr. Steinbergh asked if the Assistant Attorney General would like to respond. Mr. Wilcox stated that he would like to respond.
Mr. Wilcox did not believe that the hearing record contained some of the factual assertions made by Dr. Zucco’s attorney regarding the circumstances around the filing of criminal charges. However, Mr. Wilcox stated that there is no dispute that Dr. Zucco was convicted of one misdemeanor count of failure to report child abuse or neglect. Mr. Wilcox stated that he heard many excuses from Dr. Zucco in the hearing. Dr. Zucco had stated that Patient 1 and her mother had given different stories, that the alleged perpetrator was too young to perpetrate the crime, and that he had consulted his supervisor and office procedure manual. Mr. Wilcox stated that Dr. Zucco blamed all those things on why he did not act properly.

Mr. Wilcox stated that this is not a case about Patient 1’s mother or cousin or father; it is a case about 12-year-old Patient 1 and Dr. Zucco’s failure of his duty to that child. Mr. Wilcox stated that Dr. Zucco failed to act in Patient 1’s best interest. Mr. Wilcox stated that this was not a time to sit down with Patient 1’s mother and figure out a course of action. Mr. Wilcox stated that it is a legal requirement to act on behalf of the child because, sadly, many parents do not act in the best interest of their child. Dr. Zucco was required to report abuse and he never did.

Mr. Wilcox stated that there is no excuse for Dr. Zucco’s actions. Mr. Wilcox stated that the Report and Recommendation summarizes this case very well and deferred to the Board’s experience and expertise to make the ultimate decision.

Dr. Saferin moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Anthony Donald Zucco, D.O. Dr. Soin seconded the motion.

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

Dr. Steinbergh stated that Dr. Zucco was found guilty by a jury of one count of failure to report child abuse and neglect, a fourth-degree misdemeanor. The facts underlying the conviction included Dr. Zucco’s failure to report to law enforcement and/or child services the rape of a minor who presented with complaints stemming from sexual abuse. Dr. Zucco also failed to perform a pregnancy test, pelvic examination, or order tests for UTI or sexually-transmitted diseases.

Dr. Steinbergh opined that it is important to understand that Dr. Zucco in an anesthesiologist and he unfortunately stepped away from his area of expertise to practice in an urgent care center. Dr. Steinbergh stated that, as a primary care physician, it became clear to her as she read the case that Dr. Zucco was not prepared to take care of this patient. Dr. Steinbergh opined that Dr. Zucco’s explanation is legitimate in the sense that he was not prepared because he had not been trained in primary care.

Dr. Steinbergh continued that the mother brought in Patient 1. According to the hearing record, this incident may have occurred five to ten days prior to the visit to Dr. Zucco. Dr. Steinbergh stated that if the mother was saying one thing and Patient 1 was saying another, Dr. Zucco may not have been sure so he stepped out of the room and asked Patient 1 and the mother to come to a decision about what the symptoms are. Dr. Steinbergh stated that it was somewhat naïve for Dr. Zucco to offer to either perform urinalysis and pelvic examination, or treat Patient 1 with antibiotics. Dr. Steinbergh stated that in cases like this, the physician must make a decision for care and not offer options. Dr. Steinbergh stated that Dr. Zucco
allowed Patient 1’s mother to take control of this case which potentially involved sexual abuse. Dr. Zucco treated Patient 1 clinically without an examination or urinalysis, which Dr. Steinbergh identified as a violation of minimal standards of care. However, Dr. Steinbergh noted that the Board is not alleging any violations of the minimal standards of care.

Dr. Steinbergh stated that Dr. Zucco diagnosed Patient 1 with UTI and vaginitis. Dr. Steinbergh asked how a 12-year-old child gets vaginitis. Dr. Steinbergh further stated that Dr. Zucco treated the UTI with antibiotics that were not the typical first drugs of choice to treat that condition. Dr. Steinbergh stated that, based on Dr. Zucco’s choice of antibiotics, she is not surprised that Patient 1 returned on the second day with vomiting.

Mr. Gonidakis joined the meeting at this time.

Dr. Steinbergh recognized that Dr. Zucco consulted his supervisor and the office procedure manual and was told that there was no need to report. Dr. Steinbergh opined that there are others involved in this incident who ought to be held accountable for their actions. However, Dr. Steinbergh stated that the Board is here today to address Dr. Zucco’s actions.

Dr. Steinbergh opined that Dr. Zucco made a mistake and this was not done maliciously. The outcome of this mistake was that Dr. Zucco spent 10 days in jail, paid a fine, and is serving community service. Dr. Steinbergh stated that Dr. Zucco has paid the penalty in terms of the legal case and the Medical Board is to decide if Dr. Zucco’s medical license should be permanently revoked.

Dr. Steinbergh argued against permanent revocation, opining that this case does not rise to that level. Dr. Steinbergh suggested an amendment to the Proposed Order, based on the fact that Dr. Zucco was unprepared to handle the situation that underlies his criminal conviction. Dr. Steinbergh suggested that Dr. Zucco’s medical license be suspended indefinitely, but no less than 180 days, followed by a minimum of two years of probation. Dr. Steinbergh noted that this is the minimum requirement for this type of misdemeanor, according to the Board’s disciplinary guidelines. Further, the terms of Dr. Zucco’s probation will require him to submit a practice plan and have a monitoring physician. Dr. Steinbergh noted that Dr. Zucco is now entering the field of addiction medicine, just as he had previously entered the practice of urgent care, and a monitoring physician will help the Board be confident that the next decision in Dr. Zucco’s practice is an appropriate one.

**Dr. Ramprasad moved to amend the Proposed Order of the Report and Recommendation to read as follows:**

**A. SUSPENSION OF CERTIFICATE:** Commencing on the thirty-first day following the date on which this Order becomes effective, the certificate of Anthony Donald Zucco, D.O., to practice osteopathic medicine and surgery in the State of Ohio shall be SUSPENDED for an indefinite period of time, but not less than 180 days. During the thirty-day interim, Anthony Donald Zucco, D.O., shall not undertake the care of any patient not already under his care.
B. CONDITIONS FOR REINSTATEMENT OR RESTORATION: The Board shall not consider reinstatement or restoration of Dr. Zucco’s certificate to practice osteopathic medicine and surgery until all of the following conditions have been met:

1. Application for Reinstatement or Restoration: Dr. Zucco shall submit an application for reinstatement or restoration, accompanied by appropriate fees, if any.

2. Certification of Compliance with the Terms of Criminal Community Control: At the time he submits his application for reinstatement or restoration, Dr. Zucco shall provide the Board with certification from the Fairfield County Court of Common Pleas, Juvenile Division, dated no earlier than 60 days prior to Dr. Zucco’s application for reinstatement or restoration, indicating that Dr. Zucco has maintained full compliance with the terms of community control in criminal case number 2012-AD-02.

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

C. PROBATION: Upon reinstatement or restoration, Dr. Zucco’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. Zucco shall obey all federal, state, and local laws, all rules governing the practice of medicine and surgery in the state and/or country in which he is practicing.

2. Practice Plan and Monitoring Physician: Within 30 days of the date of Dr. Zucco’s reinstatement or restoration, or as otherwise determined by the Board, Dr. Zucco shall submit to the Board and receive its approval for a plan of practice in Ohio. The practice plan, unless otherwise determined by the Board, shall be limited to a supervised structured environment in which Dr. Zucco’s activities will be directly supervised and overseen by a monitoring physician approved by the Board. Dr. Zucco shall obtain the Board’s prior approval for any alteration to the practice plan approved pursuant to this Order.

At the time Dr. Zucco submits his practice plan, he shall also submit the name and curriculum vitae of a monitoring physician for prior written approval by the Secretary and Supervising Member of the Board. In approving an individual to serve in this capacity, the Secretary and Supervising Member will give preference to a physician who practices in the same locale as Dr. Zucco and who is engaged in the same or similar practice specialty.
The monitoring physician shall monitor Dr. Zucco and his medical practice, and shall review Dr. Zucco’s patient charts. The chart review may be done on a random basis, with the frequency and number of charts reviewed to be determined by the Board.

Further, the monitoring physician shall provide the Board with reports on the monitoring of Dr. Zucco and his medical practice, and on the review of Dr. Zucco’s patient charts. Dr. Zucco 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. Zucco’s declarations of compliance.

In the event that the designated monitoring physician becomes unable or unwilling to serve in this capacity, Dr. Zucco shall immediately so notify the Board in writing. In addition, Dr. Zucco shall make arrangements acceptable to the Board for another monitoring physician within 30 days after the previously designated monitoring physician becomes unable or unwilling to serve, unless otherwise determined by the Board. Dr. Zucco shall further ensure that the previously designated monitoring physician also notifies the Board directly of his inability to continue to serve and the reasons therefor.

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

3. **Declarations of Compliance**: Dr. Zucco shall submit quarterly declarations under penalty of Board disciplinary action and/or criminal prosecution, stating whether there has been compliance with all the conditions of this Order. The first quarterly declaration must be received in the Board’s offices on or before the first day of the third month following the month in which Dr. Zucco’s certificate is restored or reinstated. Subsequent quarterly declarations must be received in the Board’s offices on or before the first day of every third month.

4. **Personal Appearances**: Dr. Zucco shall appear in person for an interview before the full Board or its designated representative during the third month following the month in which Dr. Zucco’s certificate is restored or reinstated, or as otherwise directed by the Board. Dr. Zucco shall also appear in person upon his request for termination of the probationary period, and/or as otherwise directed by the Board.

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

D. **TERMINATION OF PROBATION**: Upon successful completion of probation, as evidenced by a written release from the Board, Dr. Zucco’s certificate will be fully restored.
E. VIOLATION OF THE TERMS OF THIS ORDER: If Dr. Zucco violates the terms of this Order in any respect, the Board, after giving him notice and the opportunity to be heard, may institute whatever disciplinary action it deems appropriate, up to and including the permanent revocation of his certificate.

F. 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. Zucco shall provide a copy of this Order to all employers or entities with which he 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 he has privileges or appointments. Further, Dr. Zucco shall promptly provide a copy of this Order to all employers or entities with which he 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 he applies for or obtains privileges or appointments. This requirement shall continue until Dr. Zucco receives from the Board written notification of the successful completion of his probation.

In the event that Dr. Zucco 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, he shall provide a copy of this Order to the Ohio Department of Public Safety, Division of Emergency Medical Services. This requirement shall continue until Dr. Zucco receives from the Board written notification of the successful completion of his probation.

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

3. **Required Documentation of the Reporting Required by Paragraph F:** Dr. Zucco 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.
This Order shall become effective immediately upon the mailing of the notification of approval by the Board.

Dr. Sethi seconded the motion.

Dr. Ramprasad stated that he supports the proposed amendment and opined that this error was unintentional. Dr. Ramprasad advised Dr. Zucco to confine his practice to his specialty and not extend to areas where he does not know what he is doing. Dr. Ramprasad stated that once a patient says she was raped, it does not matter at that time if it happened or not; it must be investigated and the patient must be comforted. Dr. Ramprasad noted that, according to 2907.291, Ohio Revised Code, physicians must examine such persons for the purpose of gathering physical evidence, notwithstanding any other provision of law, and a minor can consent to the examination. Dr. Ramprasad stated that physicians have an obligation to perform such an examination no matter the circumstances, whether the parent or guardian agrees or not.

Dr. Soin stated that he appreciates the perspectives of Dr. Steinbergh and Dr. Ramprasad and acknowledged that Dr. Zucco was practicing outside the scope of his training. However, Dr. Soin stated that some things about this case bothered him a great deal, including that fact that it involved a child. Dr. Soin opined that no matter what specialty a physician practices, when there is a suspected rape of a child, it is highly inappropriate to step out of the room while telling the patient and mother to get their story straight. Dr. Soin stated that he will support the proposed amendment.

Mr. Giacalone stated that he is struggling with the lack of focus on the patient in his case. Mr. Giacalone questioned how a physician could fail to proceed with the assumption of rape or some sexual contact when a technician reports a possible issue. Mr. Giacalone, a licensed pharmacist, also agreed with Dr. Steinbergh that the choice of antibiotics to treat the supposed UTI was very suspect. Mr. Giacalone speculated that Dr. Zucco’s choice of antibiotics suggests a belief that something other than a UTI was present. Further, Mr. Giacalone noted that Dr. Zucco has been before the Board before on an unrelated matter. Mr. Giacalone stated that it may be appropriate to consider a sanction other than permanent revocation, but he favored something more severe than the proposed amendment.

Mr. Gonidakis exited the meeting at this time.

Dr. Saferin opined that with this proposed amendment, the Board is excusing ignorance. Dr. Saferin stated that Dr. Zucco put himself into that position and accepted a job that he was not necessarily prepared for. Dr. Saferin was uncertain if permanent revocation is appropriate, but stated that he has a problem with excusing Dr. Zucco’s ignorance.

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

ROLL CALL:     Dr. Strafford    - abstain
                Dr. Bechtel     - abstain
                Dr. Saferin     - aye
                Dr. Soin        - aye
                Dr. Ramprasad   - aye
The motion to amend carried.

**Dr. Soin moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Anthony Donald Zucco, D.O. Dr. Saferin seconded the motion.** A vote was taken:

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The motion to approve carried.

The Board took a brief recess at 3:00 p.m. and resumed at 3:20 p.m.

**ANIL CHOUDARY NALLURI, M.D., Case No. 13-CRF-025**

**Dr. Soin moved to remove the matter of Anil Choudary Nalluri, M.D., from the table. Dr. Saferin seconded the motion.** All members voted aye. The motion carried.

Dr. Ramprasad stated that in December 2012, Dr. Nalluri pleaded guilty to one count of workers’ compensation fraud. As part of the plea, Dr. Nalluri agreed to pay restitution to the Bureau of Workers’ Compensation (BWC), which he has paid. Dr. Nalluri’s plea of guilty constitutes a violation of 4731.22(B)(11), Ohio Revised Code. Dr. Ramprasad stated that Dr. Nalluri pleaded guilty to fraud in the amount of $1,197.00 by billing for more time than he spent with the patient. Dr. Ramprasad noted that, according to Dr. Zucco’s attorney Mr. Moore, the amount of fraud corrected according to the findings of a BWC expert was closer to $257.00. Dr. Ramprasad further noted Mr. Moore’s contention that Dr. Nalluri did not bill for services not provided, but rather he overbilled due to his misunderstanding of CPT codes. Dr. Ramprasad continued that the Assistant Attorney General opined at the hearing that the Board would not see Dr. Nalluri again.

Dr. Steinbergh asked whether Mr. Gonidakis 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: Patrick Eugene Muffley, D.O.; and Anil Choudary Nalluri, M.D. Mr. Gonidakis answered affirmatively.

Dr. Steinbergh asked whether Mr. Gonidakis 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. Mr. Gonidakis answered affirmatively.

**Dr. Ramprasad moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Anil Choudary Nalluri, M.D. Dr. Soin seconded the motion.**

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

**ROLL CALL:**
- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Saferin - aye
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - abstain
- Dr. Sethi - aye
- Dr. Talmage - abstain
- Mr. Kenney - nay
- Mr. Giacalone - aye
- Mr. Gonidakis - aye

The motion to approve carried.

**PATRICK EUGENE MUFFLEY, D.O., Case No. 13-CRF-013**

Dr. Steinbergh directed the Board’s attention to the matter of Patrick Eugene Muffley, D.O. Objections have been filed and were previously distributed to Board members. Ms. Blue was the Hearing Examiner.

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

Dr. Muffley was represented by his attorney, Elizabeth Collis.

Ms. Collis stated that this is a case of first impressions. Ms. Collis stated that Dr. Muffley engaged in inappropriate communication with Patient 1 and violated the physician/patient boundary. However, Ms. Collis stated that there was no physical contact between Dr. Muffley and Patient 1, nor did Dr. Muffley socialize with Patient 1. Ms. Collis stated that the entirety of Dr. Muffley’s inappropriate contact with Patient 1 involved private Facebook communication.

Ms. Collis continued that Dr. Muffley has taken full responsibility for his actions, cooperated with the Board’s investigation, and testified honestly at his hearing. Dr. Muffley also attended a three-day seminar
at Vanderbilt University on boundary violations. Ms. Collis stated that Dr. Muffley has made multiple changes to his practice in order to make his communication with patients more transparent.

Ms. Collis continued that unlike in-person communication, communication over the internet is not as coercive, as noted by Rahe Corlis, Ph.D., who testified in this case. Ms. Collis also noted that whereas it is more difficult to break off in-person communication, with internet communication you can simply hit the “unfriend” button. Ms. Collis stated that she did not wish to minimize Dr. Muffley’s conduct, but stated that it is very different from physical contact. Ms. Collis stated that in the past, the Board has usually suspended a physician’s license for inappropriate physical contact with a patient, but not in every case. Ms. Collis cited the cases of Melissa Marker, D.O., and Philip Hutchison, D.O., involving sexual contact with patients, in which the Board issued reprimands.

Ms. Collis agreed that discipline is warranted in this case. However, since there was no sexual contact and no meeting between Dr. Muffley and Patient 1, Ms. Collis respectfully requested that the Board issue a reprimand rather than suspend Dr. Muffley’s license. Ms. Collis noted that Dr. Muffley currently has 120 obstetric patients, with a few patients possibly going into labor within the next few days. Therefore, Ms. Collis asked that if the Board does issue a suspension, that Dr. Muffley be given 30 or 60 days to wind down his practice. Ms. Collis stated that some of Dr. Muffley’s patients use an insurance that is not readily accepted in central Ohio and these patients will be difficult to refer.

Dr. Muffley stated that for a few days in 2011, he engaged in private Facebook messaging with a patient. Dr. Muffley stated that at the time, he failed to appreciate the danger of the slippery slope he had placed himself upon in accepting a friend request on Facebook from a friend. Dr. Muffley stated that through his educational and counseling activities over the last year-and-a-half, he now fully appreciates the dangers of such social relationships with both patients and staff members, and the nuances of how these situations can arise and progress. Dr. Muffley stated that as a professional, he should have understood the difference between his professional and personal lives. Dr. Muffley stated that he should have never accepted a friend request from a patient or engaged in communication with a patient that was sexual or inappropriate in nature. Dr. Muffley characterized his actions as inappropriate, unprofessional, immature, and unacceptable.

Dr. Muffley stated that he terminated the online communication, cooperated with the Board’s investigation, and was open and honest in the hearing process. Dr. Muffley stated that he attended a boundaries course at Vanderbilt University and has made many changes to how he runs his practice and his personal life so he can never make this kind of mistake again. Dr. Muffley stated that he has sought counseling with Dr. Corlis in order to better understand why he crossed this line with a patient. Dr. Muffley stated that he never met with Patient 1 outside the office and office visits with Patient 1 were always professional.

Dr. Muffley offered sincere apologies to Patient 1 and her family, and to his own family for his misconduct. Dr. Muffley stated that he has learned a great deal about himself in this process and assured the Board that it would never see Dr. Muffley again. Dr. Muffley respectfully asked the Board not to suspend his medical license for this error.
Dr. Steinbergh asked if the Assistant Attorney General would like to respond. Ms. Dorn stated that she would like to respond.

Ms. Dorn stated that it does not matter if Dr. Muffley touched or had physical contact with Patient 1. Ms. Dorn stated that Dr. Muffley engaged in sexual misconduct with Patient 1. Ms. Dorn stated that the Board’s rules define sexual misconduct as “conduct that exploits the doctor/patient relationship in a sexual way, whether verbal or physical, and may include expressions of thoughts, feelings, or gestures that are sexual or reasonably may be construed by a patient as sexual.” Ms. Dorn stated that this includes seductive or sexually-suggestive conduct as well as discussions of sexual preferences or sexual fantasies when not clinically indicated. Ms. Dorn stated that there is no question that the Facebook conversations that Dr. Muffley had with Patient 1 involved sexual innuendo and sexual fantasy, as indicated in the excerpts of these conversations in the Report and Recommendation. Ms. Dorn stated that these were sexual fantasies that Dr. Muffley was acting out through his patient.

Ms. Dorn stated that Dr. Muffley used his position as an obstetrician and abused the physician/patient relationship to fulfill his own sexual fantasy. Ms. Dorn stated that Dr. Muffley could have and should have ended the relationship, yet he continued on with a very vulnerable patient. Ms. Dorn stated that Patient 1 was pregnant with twins when she became Dr. Muffley’s patient and ended up having an emergency C-section due to a late complication. Patient 1 also suffered from post-partum depression following the delivery. Ms. Dorn stated that Dr. Muffley should have been extremely vigilant, but instead he took her on as a Facebook friend and entered into these conversations with her.

Ms. Dorn stated that Dr. Muffley took advantage of a very sacred relationship between an obstetrician and patient and used it for his own personal satisfaction. Ms. Dorn stated that Dr. Muffley was not interested in Patient 1 as a person, but was more interested in the sexual conversations he had with her. Ms. Dorn opined that Dr. Muffley never thought of Patient 1 as a patient. Ms. Dorn found this especially problematic because you cannot unfriend a patient. Ms. Dorn noted that Patient 1 continued to go to Dr. Muffley during this time for her annual appointments.

Ms. Dorn reiterated that Dr. Muffley does not have to have touched Patient 1 to have engaged in sexual misconduct, though this may be the first case involving social media that the Board has dealt with. Ms. Dorn agreed with the Findings of Fact and Conclusions of Law in the Report and Recommendation, leaving the final disposition of this matter to the Board’s judgment.

Dr. Sethi moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Patrick Eugene Muffley, D.O. Dr. Saferin seconded the motion.

Dr. Soin briefly reviewed Dr. Muffley’s career. Dr. Muffley is currently a solo practitioner with two locations in Columbus, Ohio. Dr. Soin stated that this case involves Patient 1, a 34-year-old female who works as a respiratory therapist. Patient 1 became a patient of Dr. Muffley’s in April 2010, presenting pregnant with twins with a prior history of post-partum depression. In follow-up visits following the delivery of her twins, Patient 1 reported some symptoms of post-partum depression. Dr. Muffley treated Patient 1 with Wellbutrin and she reported in a December 2010 visit that she was feeling much better.
Dr. Soin stated that in February 2011, Dr. Muffley and Patient 1 randomly saw each other at the Orlando airport and briefly spoke. Later that evening, Patient 1 sent Dr. Muffley a private Facebook message regarding concerns of an ice storm in Ohio. Dr. Muffley responded by asking if Patient 1 got home okay, and he also commented on how great she looked when he saw her. Subsequently, Patient 1 sent a friend request to Dr. Muffley. Patient 1 testified that she sent the friend request because she was looking for a friend and she thought how great it would be to be friends with Dr. Muffley on Facebook. Dr. Muffley testified that he accepted the friend request so he could see pictures of the babies.

Dr. Soin continued that both Dr. Muffley and Patient 1 admitted that from February 2011 to March 2011, they exchanged private messages with each other on Facebook. Patient 1 claimed that at first they discussed benign topics such as work and day-to-day life, but by mid-February their comments had turned to sexual innuendo. In March 2011, Dr. Muffley and Patient 1 stopped exchanging messages because Patient 1 obtained information that Dr. Muffley had been previously charged with sexual imposition. Dr. Muffley explained that he had been charged with sexual imposition and a civil lawsuit was filed against him for sexual harassment. He testified that both the criminal charge and the civil suit were eventually dismissed.

Dr. Soin stated that in July 2011, Patient 1 came to Dr. Muffley’s office for an annual examination. Patient 1 claimed that at the end of the visit, Dr. Muffley put his arm around her and asked if this made her uncomfortable. At that time, Patient 1 answered “no.”

Dr. Soin stated that in August 2011, there were several text messages that are included in the Report and Recommendation that contain very strong sexual content. Patient 1 testified that on August 22, 2011, she sent a text message to Dr. Muffley indicating that a family member had discovered their messages and that Dr. Muffley should hire an attorney.

Dr. Soin continued that Dr. Muffley said he has made changes in his life and practice following these events, including attending a boundaries course at Vanderbilt University, stepping down from committees, scrubbing Facebook, and changing his schedule to keep his work hours reasonable. Dr. Muffley has been under the care of Rahe Corlis, Ph.D., for psychotherapy.

Dr. Soin acknowledged that there are some mitigating factors in this case. However, Dr. Soin noted the relevant rules and statutes, particularly Rule 4731-26-01, which states, “‘Sexual misconduct’ means conduct that exploits the licensee-patient relationship in a sexual way, whether verbal or physical, and may include expressions of thoughts, feelings, or gestures that are sexual or that reasonably may be construed by a patient as sexual.” Also, Rule 4731-26-02 states, “A licensee shall not engage in sexual misconduct with a patient or third party.”

Dr. Soin stated that he is literally too embarrassed to read the Facebook messages exchanged between Dr. Muffley and Patient 1 because they contain extremely strong sexual content and innuendo. Dr. Soin stated that, by any objective measure, this crosses the line of any reasonable patient boundaries.

Dr. Soin supported the Proposed Order, which will suspend Dr. Muffley’s medical license indefinitely, but not less than 60 days, followed by probationary terms for at least two years. Among the probationary
terms is the requirement that a third party be present when Dr. Muffley is seeing obstetric and gynecologic patients. Mr. Gonidakis asked if the requirement of a third party is practical. Dr. Ramprasad responded that the Board’s rules already state that physicians must offer a chaperone in an intimate examination. Mr. Giacalone asked if Dr. Muffley’s patients will be advised as to why a third party will be present during examinations. Ms. Debolt replied that the Order does not require Dr. Muffley to tell patients why he must have a third party.

Mr. Gonidakis asked if there are any current regulations concerning the use of social media by health care professionals. Ms. Debolt answered that the Board’s rule in this regard applies to all situations, including social media.

Mr. Gonidakis asked about Dr. Muffley’s attorney’s request for a 30-day wind-down period if the Board chooses to suspend his license. Dr. Ramprasad stated that that is something the Board has done in the past.

Mr. Gonidakis moved to amend the Proposed Order of the Report and Recommendation so that the suspension of Dr. Muffley’s license to practice osteopathic medicine and surgery begins on the 31st day following the effective date of the Order, and in the interim he may not accept new patients. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

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<td>Mr. Giacalone</td>
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<td>Mr. Gonidakis</td>
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The motion to amend carried.

Dr. Saferin moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Patrick Eugene Muffley, D.O. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

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The motion to approve carried.

Dr.Strafford and Mr. Gonidakis exited the meeting at this time.

**FINDINGS, ORDERS, AND JOURNAL ENTRIES**

Dr. Steinbergh advised that in the following matters, the Board issued Notices 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. Dr. Steinbergh stated that the matters of Ms. Denman and Ms. Schimpf are non-disciplinary in nature, and therefore all Board members may vote in those matters.

**JESSICA L. DENMAN, M.T., Case No. 13-CRF-087**

**Dr. Sethi moved to find that the allegations as set forth in the September 12, 2013 Notice in the matter of Ms. Denman 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 as a massage therapist in Ohio, provided that she takes and passes the Massage and Bodywork Licensing Examination (MBLEX) within six months of September 12, 2013. Dr. Soin seconded the motion.**

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

Dr. Sethi stated that Ms. Denman was initially licensed as a massage therapist in Ohio in 2004, and that license lapsed in 2009 for non-renewal. In July 2013, Ms. Denman applied for restoration of her massage therapy license. Dr. Sethi noted that Ms. Denman has not been engaged in the practice of massage therapy for more than two years. The Proposed Order will grant Ms. Denman’s restoration application, provided she takes and passes the MBLEX with six months of September 12, 2013.

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

**ROLL CALL:**

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Mr. Giacalone - aye

The motion carried.

DARLA ANN SCHIMPF, M.T., Case No. 13-CRF-076

Dr. Soin moved to find that the allegations as set forth in the August 21, 2013 Notice in the matter of Ms. Schimpf 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 as a massage therapist in Ohio, provided that she takes and passes the Massage and Bodywork Licensing Examination (MBLEX) within six months of August 21, 2013. Dr. Saferin seconded the motion.

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

Mr. Kenney stated that Ms. Schimpf was initially licensed as a massage therapist in Ohio in 1999, and that license lapsed in 2005 for non-renewal. In June 2013, Ms. Schimpf applied for restoration of her massage therapy license. Mr. Kenney noted that Ms. Schimpf has not been engaged in the practice of massage therapy for more than two years.

Dr. Strafford returned to the meeting at this time.

Mr. Kenney stated that the Proposed Order will grant Ms. Schimpf’s restoration application, provided she takes and passes the MBLEX with six months of August 21, 2013.

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

ROLL CALL:
Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Saferin - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - aye
Mr. Kenney - aye
Mr. Giacalone - aye

The motion carried.

ROBERT KRISHNA DESAI, M.D., Case No. 13-CRF-067

Dr. Steinbergh stated that in the matter of Dr. Desai, M.D., the Board must determine whether the allegations as set forth in the August 14, 2013 Notice have been proven to be true by a preponderance of the evidence; what discipline, if any, should be imposed; and the effective date of the Order. Dr.
Steinbergh asked Dr. Talmage to present this matter to the Board.

Dr. Talmage stated that Dr. Desai was determined to be intoxicated while at work at about 3:30 p.m. At that time, Dr. Desai’s blood alcohol content was almost five times what would be considered impairment (.08). In response to this incident, the Maine Board of Licensure in Medicine suspended Dr. Desai’s Maine medical license. Dr. Desai entered into a consent order with the Maine Board which continues the suspension until a final order is produced. This matter is still pending before the Maine Board.

Dr. Talmage suggested an indefinite suspension of Dr. Desai’s Ohio medical license until the Board can review the Maine Board’s final action.

**Dr. Talmage moved to indefinitely suspend Dr. Desai’s Ohio medical license pending review of the final order of the Maine Board of Licensure in Medicine. Dr. Ramprasad seconded the motion.**

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

Dr. Steinbergh asked why Dr. Talmage favors indefinite suspension rather than revocation of Dr. Desai’s Ohio medical license. Dr. Talmage replied that Dr. Desai is probably addicted to alcohol, based on his apparent high tolerance. Dr. Talmage stated that if Dr. Desai’s addiction can be remediated, the Board may reinstate his medical license. Dr. Talmage preferred not to revoke Dr. Desai’s license before he has been given that chance.

Ms. Debolt stated that the Board cannot issue an order of suspension without conditions for reinstatement. Dr. Talmage stated that his intent is to allow the Board to review the matter again after the Maine Board has issued its final order. Ms. Debolt stated that in order to take further action against Dr. Desai’s license, such as revoking it, the Board would have to issue another Notice of Opportunity for Hearing. Ms. Debolt stated that the Board may revoke Dr. Desai’s license, or suspend it indefinitely pending the reinstatement of his Maine medical license. Dr. Steinbergh opined that the Board should have an opportunity to reevaluate Dr. Desai regardless of the Maine Board’s final action. Ms. Debolt suggested that revoking Dr. Desai’s license would allow him to reapply, at which time the Board may assess him. Dr. Talmage stated that requiring Dr. Desai to reapply for licensure in Ohio may be financially stressful, but stated that he would support such an Order if there is no other legal way to accomplish that goal.

**Dr. Talmage wished to withdraw his motion.** No Board member objected. The motion was withdrawn.

Mr. Kenney moved to find that the allegations as set forth in the August 14, 2013 Notice in the matter of Dr. Desai have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, revoking his license to practice medicine and surgery in Ohio. **Mr. Giacalone seconded the motion.** A vote was taken:

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Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - aye
Mr. Kenney - aye
Mr. Giacalone - aye

The motion carried.

RICHARD J. LEWIS, M.D., Case No. 13-CRF-070

Dr. Steinbergh stated that in the matter of Richard J. Lewis, M.D., the Board must determine whether the allegations as set forth in the August 14, 2013 Notice have been proven to be true by a preponderance of the evidence; what discipline, if any, should be imposed; and the effective date of the Order. Dr. Steinbergh asked Dr. Soin to present this matter to the Board.

Dr. Soin stated that in August 2013, a Notice of Opportunity for Hearing was sent to Dr. Lewis due to his surrender of his New York medical license. Dr. Lewis had surrendered his New York license because he had been convicted on 18 felony counts of aggravated assault in Arizona. Dr. Lewis was sentenced to one year of incarceration and subsequent probation.

Dr. Soin opined that, based on these findings, Dr. Lewis’ Ohio medical license should be permanently revoked.

Dr. Soin moved to find that the allegations as set forth in the August 14, 2013 Notice in the matter of Dr. Lewis have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, permanently revoking his license to practice medicine and surgery in Ohio. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Saferin - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - aye
Mr. Kenney - aye
Mr. Giacalone - aye

The motion carried.

CHRISTOPHER S. STARR, Case No. 13-CRF-083
Dr. Ramprasad moved to find that the allegations as set forth in the September 12, 2013 Notice in the matter of Mr. Starr 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. Soin seconded the motion.

Dr. Steinbergh stated that she will now entertain discussion in this above matter.

Dr. Steinbergh stated that in June 2012, Mr. Starr submitted an application for a license to practice massage therapy in Ohio. In May 2013, the Board ordered Mr. Starr to submit to an outpatient examination at Glenbeigh Hospital in June 2013. At Mr. Starr’s request, the evaluation was rescheduled for August 2013. However, Mr. Starr failed to appear for his August evaluation. Mr. Starr also failed to provide any documentation that his failure to appear was due to circumstances beyond his control. Therefore, Mr. Starr is legally presumed to be impaired due to habitual use and abuse of drugs or alcohol.

Dr. Steinbergh state that, since Mr. Starr did not request a hearing, this matter is now before the Board for final disposition. The Proposed Order will deny Mr. Starr’s application for licensure.

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

ROLL CALL:          Dr. Strafford   - abstain
                     Dr. Bechtel     - abstain
                     Dr. Saferin     - aye
                     Dr. Soin        - aye
                     Dr. Ramprasad  - aye
                     Dr. Steinbergh - aye
                     Dr. Sethi       - aye
                     Dr. Talmage     - aye
                     Mr. Kenney      - aye
                     Mr. Giacalone   - aye

The motion carried.

CHINELO STELLA UDE, M.D., Case Nos. 13-CRF-072 and 13-CRF-073

Dr. Soin moved to find that the allegations as set forth in the August 14, 2013 Notices in the matter of Dr. Ude 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. Ramprasad seconded the motion.

Dr. Steinbergh stated that she will now entertain discussion in this above matter.

Dr. Ramprasad stated that Dr. Ude applied for a license to practice medicine and surgery in Ohio in January 2013. In September 2011, the Minnesota Board of Medical Practice immediately suspended Dr. Ude’s medical license in that state until she complied with an Order for Mental and Physical Examination
and demonstrated the ability to resume the competent practice of medicine. In June 2013, the Ohio Board issued an Order to Dr. Ude to submit to a psychiatric examination in July 2013. Dr. Ramprasad stated that Dr. Ude failed to appear for the examination and has not provided documentation that her failure to appear was due to circumstances beyond her control.

Dr. Ramprasad stated that the Proposed Order will deny her application for licensure in Ohio.

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

**ROLL CALL:**

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The motion carried.

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

**JOSEPH CLAUDE CARVER, M.D. – CITATION LETTER**

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

**Dr. Ramprasad moved to send the Citation Letter to Dr. Carver. Dr. Soin seconded the motion.** A vote was taken:

**ROLL CALL:**

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<td>Mr. Giacalone</td>
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The motion to send carried.

ABUBAKAR ATIQ DURRANI, M.D. – NOTICE OF SUMMARY SUSPENSION AND OPPORTUNITY FOR HEARING

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

Dr. Ramprasad moved to send the Notice of Summary Suspension and Opportunity for Hearing to Mr. Durrani. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

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<td>Mr. Giacalone</td>
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The motion to send carried.

PURA GARIN-VARGAS, M.D. – CITATION LETTER

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

Dr. Ramprasad moved to send the Citation Letter to Dr. Garin-Vargas. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:

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<td>Mr. Giacalone</td>
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The motion to send carried.
RAMEZ REDA GHARABAWY, M.D. – CITATION LETTER

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

Dr. Ramprasad moved to send the Citation Letter to Dr. Gharabawy. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:  
Dr. Strafford - abstain  
Dr. Bechtel - abstain  
Dr. Saferin - aye  
Dr. Soin - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Sethi - aye  
Dr. Talmage - aye  
Mr. Kenney - aye  
Mr. Giacalone - aye

The motion to send carried.

DAVID MICHAEL HUGHES, D.O. – CITATION LETTER

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

Dr. Ramprasad moved to send the Citation Letter to Dr. Hughes. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:  
Dr. Strafford - abstain  
Dr. Bechtel - abstain  
Dr. Saferin - aye  
Dr. Soin - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Sethi - aye  
Dr. Talmage - aye  
Mr. Kenney - aye  
Mr. Giacalone - aye

The motion to send carried.

AIYAPPAN MENON, M.D. – CITATION LETTER
At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

**Dr. Saferin moved to send the Citation Letter to Dr. Menon. Dr. Soin seconded the motion.** A vote was taken:

**ROLL CALL:**
- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Saferin - aye
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Sethi - aye
- Dr. Talmage - abstain
- Mr. Kenney - aye
- Mr. Giacalone - aye

The motion to send carried.

**ALI SALIM, M.D. – NOTICE OF AUTOMATIC SUSPENSION AND OPPORTUNITY FOR HEARING**

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

**Dr. Ramprasad moved to send the Notice of Automatic Suspension and Opportunity for Hearing to Dr. Salim. Dr. Soin seconded the motion.** A vote was taken:

**ROLL CALL:**
- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Saferin - aye
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Sethi - aye
- Dr. Talmage - abstain
- Mr. Kenney - aye
- Mr. Giacalone - aye

The motion to send carried.

**ALLEN GEORGE SAOU.D, D.O. – CITATION LETTER**

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

**Dr. Soin moved to send the Citation Letter to Dr. Saoud. Dr. Ramprasad seconded the motion.** A vote was taken:

**ROLL CALL:**

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<td>Mr. Giacalone</td>
<td>aye</td>
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The motion to send carried.

**MARTIN RYERSON SEVREY, JR., D.O. – CITATION LETTER**

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

**Dr. Ramprasad moved to send the Citation Letter to Dr. Sevrey. Dr. Soin seconded the motion.** A vote was taken:

**ROLL CALL:**

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<td>aye</td>
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<td>Mr. Giacalone</td>
<td>aye</td>
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The motion to send carried.

**SUSHIL KUMAR SOMPUR VASANTHKUMAR, M.D. – CITATION LETTER**

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.
Dr. Saferin moved to send the Citation Letter to Dr. Vasanthkumar. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: 
- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Saferin - aye
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Sethi - aye
- Dr. Talmage - aye
- Mr. Kenney - aye
- Mr. Giacalone - aye

The motion to send carried.

CHRISTINA LOUISE SUMMERS – 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. Ramprasad moved to send the Citation Letter to Ms. Summers. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: 
- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Saferin - aye
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Sethi - aye
- Dr. Talmage - aye
- Mr. Kenney - aye
- Mr. Giacalone - aye

The motion to send carried.

RATIFICATION OF SETTLEMENT AGREEMENTS

JEFFERSON DALE BRACEY, D.O. – WITHDRAWAL OF APPLICATION FOR OSTEOPATHIC MEDICAL LICENSURE

Dr. Soin moved to ratify the Proposed Withdrawal of Application with Dr. Bracey. Dr. Ramprasad seconded the motion. A vote was taken:
ROLL CALL:
Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Saferin - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - aye
Mr. Kenney - aye
Mr. Giacalone - aye

The motion to ratify carried.

REBECCA ANN BRAUCH, M.D. – PROBATIONARY CONSENT AGREEMENT

Dr. Soin moved to ratify the Proposed Probationary Consent Agreement with Dr. Brauch. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL:
Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Saferin - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - abstain
Mr. Kenney - aye
Mr. Giacalone - aye

The motion to ratify carried.

DAVID CHARLES KIRKWOOD, M.D. – CONSENT AGREEMENT

Dr. Ramprasad moved to ratify the Proposed Consent Agreement with Dr. Kirkwood. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:
Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Saferin - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - abstain
Mr. Kenney - aye
Mr. Giacalone - aye

The motion to ratify carried.

E.S.U., M.D. – CONSENT AGREEMENT

Ms. Marshall stated that this physician was involved in an automobile/bicycle accident on September 12, 2012, which resulted in an indictment for both felony and misdemeanor charges from driving her automobile under the influence of alcohol. She was sent to a Board ordered 72 hour alcohol abuse assessment at Shepherd Hill by Dr. Whitney. Dr. Whitney determined that she had entered an outpatient treatment program with a diagnosis of Alcohol Abuse after the accident. Dr. Whitney concurred with the diagnosis and found that ESU, M.D. was impaired. ESU, M.D. is currently in a 28 day treatment program at Shepherd Hill as of October 22, 2013 and her treatment continues.

Ms. Marshall stated that this proposed Consent Agreement will suspend ESU, M.D.’s medical license indefinitely, but not less than 90 days. Upon reinstatement, ESU, M.D. will be under probationary terms for at least five years.

Dr. Steinbergh asked what the court’s action has been in this matter. Ms. Marshall replied that ESU, M.D.’s trial is still pending. Ms. Marshall advised the Board that if ESU, M.D. is convicted on something that is within this proposed Consent Agreement, then the Board will not be able to impose additional sanctions based on that conviction.

Mr. Kenney stated that he does not favor this proposed Consent Agreement and asked what will happen if the Board does not ratify it. Ms. Marshall answered that if the proposed Consent Agreement is not ratified, the staff will work with the Secretary and Supervising Member to address the impairment issue. Ms. Marshall stated that the issue of criminal behavior cannot be dealt without outside a consent agreement unless and until there is a conviction. Ms. Marshall commented that even with a conviction, the proposed Consent Agreement is within the Board’s disciplinary guidelines.

Dr. Steinbergh asked if it is known what happened to the person who was on the bicycle. Based on the nature of the charges against ESU, M.D., Ms. Marshall and Mr. Haslam deduced that the bicyclist was not killed but was probably seriously injured, perhaps permanently. Responding to further questions, Ms. Marshall stated that the issues of impairment and criminal action cannot be split and dealt with separately at this time because the proposed Consent Agreement has already been negotiated; therefore, the Board is only able to ratify it or reject it.

Dr. Steinbergh expressed concern for the victim who was injured, particularly in light of the Board's mission of patient protection. Dr. Steinbergh agreed with Mr. Kenney that the proposed Consent Agreement may not be enough. Dr. Steinbergh opined that this matter should be brought back to the Board at a later time with the issues of impairment and criminal actions bifurcated from each other. After some discussion, the Board agreed with Dr. Steinbergh.
Dr. Saferin moved to deny ratification of the Proposed Consent Agreement with E.S.U., M.D. Mr. Kenney seconded the motion. A vote was taken:

ROLL CALL: Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Saferin - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - aye
Mr. Kenney - aye
Mr. Giacalone - aye

The motion to deny ratification carried.

ERIK J. KRAENZLER, M.D. – STEP II CONSENT AGREEMENT

Dr. Saferin moved to ratify the Proposed Step II Consent Agreement with Dr. Kraenzler. Dr. Sethi seconded the motion.

Because this physician has suffered relapse following treatment for addiction, the Board engaged in a brief discussion of the Board’s rules regarding impaired practitioners and whether the number of allowed relapses is appropriate.

A vote was taken on Dr. Saferin’s motion to ratify:

ROLL CALL: Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Saferin - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Sethi - aye
Dr. Talmage - aye
Mr. Kenney - aye
Mr. Giacalone - aye

The motion to ratify carried.

Due to several concerns brought up during discussion, the Board agreed that the impairment rules should be reexamined by the Group 1 Committee.
PROBATIONARY APPEARANCES

AJAY BHATIA, M.D.

Dr. Bhatia was making his initial appearance before the Board pursuant to the terms of his August 14, 2013 Consent Agreement. Ms. Bickers reviewed Dr. Bhatia’s history with the Board.

Dr. Steinbergh asked if Dr. Bhatia is currently on medication for his diagnosis of bipolar disorder. Dr. Bhatia replied that he is currently taking medication.

Dr. Steinbergh asked Dr. Bhatia to describe his practice. Dr. Bhatia responded that he works in a busy mental health center. Dr. Steinbergh asked how Dr. Bhatia interacts with the patients at the mental health center in light of his own psychiatric disorder. Dr. Bhatia answered that his condition gives him insight that patients and physicians are not all that different from each other. Dr. Bhatia stated that his own treatment gives him a perspective on what his patients are going through. Dr. Steinbergh asked how many hours Dr. Bhatia works. Dr. Bhatia replied that he works 40 hours per week and he is comfortable with that.

Dr. Steinbergh asked about Dr. Bhatia’s family support. Dr. Bhatia replied that during his residency, both of his parents were going through significant illnesses. Dr. Bhatia stated that he lives with his parents so they can better help each other out.

Dr. Ramprasad asked what Dr. Bhatia is doing to avoid stress, which had led to Dr. Bhatia’s previous episodes. Dr. Bhatia explained that last year, he was studying for his boards and working full time. Dr. Bhatia used vacation time to study, so he did not get any breaks at all. Lately, Dr. Bhatia has been letting his superiors know when he is becoming stressed and is utilizing his time off appropriately. Dr. Bhatia meets with his supervisor once per week to talk about how his practice is going.

Dr. Ramprasad noted that Dr. Bhatia is under ongoing medical management and asked if Dr. Bhatia is on a better combination of medications now. Dr. Bhatia replied that he is comfortable with his current regimen.

Dr. Ramprasad moved to continue Dr. Bhatia under the terms of his August 14, 2013 Consent Agreement. Dr. Sethi seconded the motion. All members voted aye. The motion carried.

RAYMOND C. GRUENTHER, M.D.

Dr. Gruenther was making his initial appearance before the Board pursuant to the terms of his August 14, 2013 Consent Agreement. Ms. Bickers reviewed Dr. Gruenther’s history with the Board.

Dr. Ramprasad asked how Dr. Gruenther is doing. Dr. Gruenther replied that he has just completed a course in medical record-keeping at Case Western Reserve University. Otherwise, Dr. Gruenther has been studying and reviewing old charts to determine what he should have been doing at that time. Dr. Gruenther stated that he has found several instances where he did not make a very good plan and did not document the different findings of the patients.
Dr. Talmage asked if Dr. Gruenther had taken continuing medical education in narcotic and opioid administration and, if so, was that education inadequate to train Dr. Gruenther to prescribe in a proper manner. Dr. Gruenther stated that his problems resulted because he had not appropriately applied his education to his practice. Dr. Gruenther stated that he will take the intensive course in prescribing controlled substances in December.

Dr. Ramprasad asked about Dr. Gruenther’s family support. Dr. Gruenther replied that he lives with his wife and son, and he speaks with his mother often. Dr. Ramprasad asked how Dr. Gruenther is doing financially since he is now working. Dr. Gruenther answered that he is doing okay. Dr. Ramprasad asked if Dr. Gruenther understands his Consent Agreement. Dr. Gruenther replied that he understands his Consent Agreement.

**Dr. Soin moved to continue Dr. Gruenther under the terms of his August 14, 2013 Consent Agreement. Dr. Sethi seconded the motion.** All members voted aye, except Dr. Steinbergh, who abstained. The motion carried.

Dr. Steinbergh and Dr. Bechtel exited the meeting at this time. Dr. Ramprasad assumed the chair.

**MICHELE HANLON, M.T.**

Ms. Hanlon was making her initial appearance before the Board pursuant to the terms of her June 12, 2013 Consent Agreement. Ms. Bickers reviewed Ms. Hanlon’s history with the Board.

Dr. Ramprasad stated that the Medical Board often sees massage therapists who practice after their license has lapsed. Dr. Ramprasad asked Ms. Hanlon for guidance on what the Medical Board can do to prevent this. Ms. Hanlon could not explain why she had neglected to renew her massage therapy license, noting that she had renewed it six or seven times before. Ms. Hanlon stated that it was simply careless and irresponsible, which is not an excuse.

Dr. Ramprasad asked if Ms. Hanlon is currently working. Ms. Hanlon replied that she is working at her private practice as well as for a chiropractic group. Ms. Hanlon commented that she has had a rough time recently in terms of finances. Dr. Ramprasad asked if Ms. Hanlon has any financial support from her family. Ms. Hanlon replied that she does not.

Dr. Ramprasad asked if Ms. Hanlon understands her Consent Agreement. Ms. Hanlon replied that she understands her Consent Agreement.

**Dr. Talmage moved to continue Ms. Hanlon under the terms of her June 12, 2013 Consent Agreement. Dr. Sethi seconded the motion.** All members voted aye. The motion carried.

**JULIANA J. OAK, M.D.**

Dr. Oak was making her initial appearance before the Board pursuant to the terms of her August 14, 2013
Consent Agreement. Ms. Bickers reviewed Dr. Oak’s history with the Board.

Dr. Ramprasad asked if Dr. Oak is a radiologist. Dr. Oak replied that she is a radiology resident. Dr. Ramprasad asked how long Dr. Oak has been bipolar. Dr. Oak answered that she was diagnosed in medical school, about nine years ago, after which she took a break before returning to her studies. Dr. Soin asked if Dr. Oak has coping mechanisms for dealing with stressful times. Dr. Oak responded that she has very strong family support and many hobbies, such as playing the piano. Dr. Oak also stated that she loves her job and the people she works with.

Dr. Steinbergh returned to the meeting at this time and resumed the chair.

Dr. Soin asked if Dr. Oak is comfortable with her medication regimen. Dr. Oak replied that she is comfortable and stable on her two current medications.

Dr. Ramprasad asked if Dr. Oak’s diagnosis came up because it was noticed during training. Dr. Oak answered that her symptomatic times occurred when she was not practicing and when she was out of school. Dr. Oak stated that her diagnosis came up because she indicated it on her training certificate application. Dr. Ramprasad asked if Dr. Oak is seeing a psychiatrist. Dr. Oak replied that she follows-up with her psychiatrist every three months.

Dr. Talmage commended Dr. Oak for indicating her psychiatric diagnosis on her application, noting that if she hadn’t and the Board discovered it later, things would have turned out very differently for Dr. Oak. Dr. Talmage advised the medical students in attendance to follow Dr. Oak’s example and always be 110% honest when filling out applications. Dr. Oak agreed that honesty is the best policy and appreciated the Board’s vigilance.

Dr. Talmage moved to continue Dr. Oak under the terms of her August 14, 2013 Consent Agreement. Dr. Soin seconded the motion. All members voted aye. The motion carried.

BERNARD J. ROSE, M.D.

Dr. Rose was making his initial appearance before the Board pursuant to the terms of his September 12, 2013 Consent Agreement. Dr. Rose was also requesting approval of Douglas A. Songer, M.D., to serve as the treating psychiatrist. Ms. Bickers reviewed Dr. Rose’s history with the Board.

Dr. Steinbergh asked Dr. Rose to describe his practice and his recovery. Dr. Rose replied that he attends three rehabilitation meetings per week plus aftercare, and he practices about 30 hours per week. Dr. Rose commented that things are going well for him, though he is having some trouble getting back on insurance plans.

Dr. Steinbergh asked if Dr. Rose practices in a group. Dr. Rose answered that he practices with his brother. Responding to questions about his family, Dr. Rose stated that he has a wife and three children in college.
Dr. Talmage asked if Dr. Rose attends Narcotics Anonymous meetings in addition to Alcoholics Anonymous, noting that Dr. Rose is addicted to Klonopin and Lorazepam as well as alcohol. Dr. Rose replied that he only attends Alcoholics Anonymous meetings and stated that addicts with other drugs of choice also attend those meetings.

Dr. Sethi asked what medications Dr. Rose is currently on. Dr. Rose replied that his psychiatrist has allowed him to wean his Celexa to nothing. Dr. Rose is still prescribed Zyprexa for when he cannot sleep at night.

Dr. Ramprasad noted that Dr. Rose stayed at Glenbeigh Hospital for two months and asked if he found that to be enough. Dr. Rose responded that his counselor kept him longer than the standard 28 days to make sure he would be successful and he was glad she did so.

Dr. Steinbergh asked if Dr. Rose had any questions. Dr. Rose replied that he had no questions.

**Dr. Ramprasad moved to continue Dr. Rose under the terms of his September 12, 2013 Consent Agreement. Dr. Ramprasad further moved to approve Douglas A. Songer, M.D., to serve as the treating psychiatrist. Dr. Soin seconded the motion.** All members voted aye. The motion carried.

**JESSICA MARIE SOTO, M.T.**

Ms. Soto was making her initial appearance before the Board pursuant to the terms of the Board’s Order of February 14, 2013. Ms. Soto was also requesting approval of an ethics course tailored by Donna F. Homenko, Ph.D. Ms. Bickers reviewed Ms. Soto’s history with the Board.

Dr. Steinbergh asked what Ms. Soto knows about the ethics course she will be taking, in terms of what percentage will be in person. Ms. Soto replied that Dr. Homenko will give her paperwork that she will return by mail. Ms. Bickers stated that Ms. Soto will meet with Dr. Homenko at the beginning and at the end of the course. Dr. Steinbergh asked if Ms. Soto has met with Dr. Homenko yet. Ms. Soto answered that she has not yet met Dr. Homenko and has only communicated with her through email.

Dr. Sethi exited the meeting at this time.

Dr. Ramprasad asked what Ms. Soto expected to get out of Dr. Homenko’s ethics course. Ms. Soto speculated that she will get a better understanding of what it takes maintain her massage therapy license. Dr. Talmage noted that Ms. Soto had been convicted of trafficking marijuana and asked if she did so for recreational purposes or if she believed marijuana had therapeutic value. Ms. Soto stated that she had trafficked marijuana because she was asked to by someone she was in a bad relationship with. Ms. Soto stated that that occurred seven years ago and she is trying to move on with her life, which Dr. Homenko’s ethics course will help her do.

Dr. Ramprasad asked if Ms. Soto has any questions for the Board. Ms. Soto replied that she has no questions.
Dr. Ramprasad moved to continue Ms. Soto under the terms of the Board’s Order of February 14, 2013. Dr. Ramprasad further moved to approve the ethics course tailored by Donna F. Homenko, Ph.D. Dr. Soin seconded the motion. All members voted aye. The motion carried.

ALVARO D. WAISSBLUTH, M.D.

Dr. Waissbluth was making his initial appearance before the Board pursuant to the terms of his August 14, 2013 Consent Agreement. Ms. Bickers reviewed Dr. Waissbluth’s history with the Board.

Dr. Ramprasad recused himself from this discussion because Dr. Waissbluth’s father was his mentor. Dr. Ramprasad commented that both of Dr. Waissbluth’s parents were wonderful people.

Dr. Steinbergh asked Dr. Waissbluth to describe what he is currently doing and what he has learned from this experience. Dr. Waissbluth responded that in his entire career as a physician, it had never occurred to him that he ought not prescribe things like antibiotics, hypotensives, and beta blockers for his family members, friends, and co-workers. Dr. Waissbluth stated that he had also given physicals to his neighbor’s children. Dr. Waissbluth stated that it is much more apparent how often he did this since he has stopped those practices.

Dr. Steinbergh asked how long Dr. Waissbluth has practiced medicine. Dr. Waissbluth answered that he has practiced since 1999. Dr. Steinbergh asked if he had ever accessed the Medical Board’s rules during his years of practice. Dr. Waissbluth replied that he had never access those rules. Dr. Steinbergh asked if Dr. Waissbluth has ever wondered about providing prescriptions to people who he did not have a physician/patient relationship with. Dr. Waissbluth replied that he had thought that everyone did it, noting that his father had also treated family members. Dr. Waissbluth stated that when this came up, he discussed it with his colleagues and none of them had ever been reprimanded for it.

Dr. Steinbergh asked if Dr. Waissbluth, as a clinician, ever had doubts about prescribing for people who he had not examined. Dr. Waissbluth commented that it did occur to him, especially when a friend wanted something for sweating disorder and he had to Google it and read about it first. Dr. Talmage asked if Dr. Waissbluth had ever thought that his friend might have an anaphylactic reaction to the medication and passed out, and then no one would know what he had taken. Dr. Waissbluth replied that that had not occurred to him and does not know why that had not been obvious to him.

Dr. Talmage stated that Dr. Waissbluth’s most egregious error was prescribing opioids for his girlfriend. Dr. Talmage stated that Dr. Waissbluth is too close to such a person and cannot be objective. Dr. Talmage stated that Dr. Waissbluth’s girlfriend needed to be under the care of someone who could keep her on an appropriate dose of medication.

Dr. Talmage asked if Dr. Waissbluth has talked about his problems with his medical staff. Dr. Waissbluth answered that he has only discussed this with his partners and office manager. Dr. Waissbluth stated that now, if someone asks him for something, he tells them that neither he nor any other doctor can help them without a physician/patient relationship. Dr. Talmage commented that that is the correct thing to say.
Dr. Steinbergh asked if Dr. Waissbluth has signed up for his courses in prescribing and medical record-keeping. Dr. Waissbluth replied that he has not yet signed up for the courses, but will do so soon now that he has completed his board examinations.

Dr. Soin asked, when Dr. Waissbluth was prescribing for friends and family, if they would ask for something specific or if Dr. Waissbluth would make a clinical decision about what to prescribe. Dr. Waissbluth answered that if it was someone in the lab, they would fill out the prescription and he would sign it; otherwise, he would make a clinical decision.

**Dr. Talmage moved to continue Dr. Waissbluth under the terms of his August 14, 2013 Consent Agreement. Dr. Soin seconded the motion.** All members voted aye, except Dr. Ramprasad, who abstained. The motion carried.

**LISA ANN WEST, D.O.**

Dr. West was making a special appearance before the Board pursuant to the terms of her September 12, 2013 Consent Agreement. Dr. West was also requesting approval of Susan L. Lowell, L.I.S.W., to conduct the mental health treatment, and approval of Carlos G. Lowell, D.O., to serve as the supervising mental health professional. Ms. Bickers reviewed Dr. West’s history with the Board.

Dr. Steinbergh asked where Dr. West is currently practicing. Dr. West answered that she is in residency at the University of Toledo.

Dr. Soin asked what coping mechanisms Dr. West uses to help with her alcohol addiction. Dr. West replied that she uses a treadmill, listens to music, and journals a lot. Dr. West stated that she also talks things out instead of holding things inside like she used to. Dr. Soin asked about Dr. West’s support system. Dr. West responded that she has an Alcoholics Anonymous sponsor and is close with her friends in the residency. Dr. Soin asked about Dr. West’s training program. Dr. West replied that her training program has been very supportive.

Dr. Ramprasad noted that Dr. West had never drank alcohol until her fourth year in medical school. Dr. West stated that was the case.

Dr. Talmage, noting that Dr. West had alcohol dependency and an emotional diagnosis, asked when Dr. West discovered her dual diagnosis. Dr. West stated that her grandfather passed away during her fourth year of medical school and she still had not recovered emotionally months later. At that time, Dr. West was uncertain if it was the alcohol that was depressing her, but she was later diagnosed with genuine depression. Dr. Talmage asked if Dr. West is more comfortable dealing with her alcohol dependency now that her depression is being treated. Dr. West replied that she is more comfortable and it is not on her mind as much.

Dr. Ramprasad noted that Dr. West got inpatient treatment at the Ridge, and later did another treatment at Arrowhead. Dr. West stated that she did 28 days of treatment at both facilities. Dr. Ramprasad asked if Dr. West’s second treatment helped her. Dr. West replied that her second treatment did help her.
Ramprasad asked if the second facility was better than the first or if she simply benefitted from having two inpatient treatments. Dr. West stated that for her first treatment, she was advised to choose a place near her family, so she chose the Ridge near Dayton. However, that was so far away from Toledo that she could not find a sponsor in Toledo and did not have aftercare.

Dr. Steinbergh asked about Dr. West’s current recovery. Dr. West stated that she feels good about her recovery and she attends three to five meetings per week. Dr. Steinbergh asked how Dr. West is doing in her residency program. Dr. West replied that her residency program is very supportive, but her confidence is low. Dr. West stated that she is paranoid because she feels that if she makes a mistake they will think that she is drinking again. Therefore, Dr. West often goes in an hour early so she can know everything about the patients.

**Dr. Soin moved to continue Dr. West under the terms of her September 12, 2013 Consent Agreement.** Dr. Soin further moved to approve Susan L. Lowell, L.I.S.W., to conduct the mental health treatment, and approve of Carlos G. Lowell, D.O., to serve as the supervising mental health professional. **Dr. Ramprasad seconded the motion.** All members voted aye. The motion 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 if any Board member wished to discuss a probationary report or probationary request separately. No Board member wished to discuss a probationary report or probationary request separately.


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

- To grant Mohammad A. Adas, M.D.’s request for reduction in personal appearances to every six months;
- To grant Nicholas A. Atanasoff, D.O.’s request for approval of Frank A. Rich, D.O., 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 Michael T. Bangert, M.D.’s request for approval of Shiny M. Abraham, M.D., to serve as the treating psychiatrist; and approval of William F. Hamilton, L.I.S.W., to serve as the mental health treatment provider;

- To grant Edwin T. Strong Brott, M.D.’s request for approval of *Intensive Course in Medical Record Keeping*, offered by Case Western Reserve University, to fulfill the medical record-keeping course requirement;

- To grant Paul E. Duncan, M.D.’s request for reduction in personal appearances to every six months; and reduction in drug and alcohol rehabilitation meeting requirements to two per week with a minimum of 10 per month;

- To grant Gary Allan Dunlap, D.O.’s request for approval of the proposed psychiatric treatment plan;

- To grant Lynne A. Eaton, M.D.’s request for approval of Carol L. Clinton, M.D., to serve as the new monitoring physician;

- To grant Rebecca E. Johnson, M.D.’s request for reduction in appearances to every six months; discontinuance of the chart review requirement; and to accept the Secretary’s recommendation to reduce drug and alcohol rehabilitation meetings to two per week with a minimum of 10 per month;

- To grant Kavita A. Kang, D.O.’s request for approval of Greg Duma, M.D., to serve as the new monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per month; and

- To grant Adam G. Mace, M.D.’s request for reduction in psychotherapy sessions to once every three months; discontinuance of the drug log requirement; reduction in personal appearances to every six months; and to accept the Secretary’s recommendation to reduce drug and alcohol rehabilitation meetings to two per week with a minimum of 10 per month.

Dr. Talmage seconded the motion. A vote was taken:

**ROLL CALL:**

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<th>Dr. Strafford</th>
<th>Dr. Saferin</th>
<th>Dr. Soin</th>
<th>Dr. Ramprasad</th>
<th>Dr. Steinbergh</th>
<th>Dr. Talmage</th>
<th>Mr. Kenney</th>
<th>Mr. Giacalone</th>
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The motion carried.

Thereupon, at 5:55 p.m., the November 13, 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 November 13, 2013, as approved on December 11, 2013.

Anita M. Steinbergh, D.O., President

J. Craig Strafford, M.D., M.P.H., Secretary
MINUTES
THE STATE MEDICAL BOARD OF OHIO
November 14, 2013

Anita M. Steinbergh, D.O., President, called the meeting to order at 8:10 a.m., in 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; Mark A. Bechtel, M.D., Supervising Member; Lance A. Talmage, M.D.; Donald R. Kenney, Sr.; Amol Soin, M.D.; and Bruce R. Saferin, D.P.M. The following member arrived at a later time: Sushil M. Sethi, M.D. The following members did not attend the meeting: J. Craig Strafford, M.D., Secretary; Michael L. Gonidakis; and Robert P. Giacalone.

Also present were: Aaron Haslam, Executive Director; Kimberly Anderson, Interim Executive Director; Susan Loe, Assistant Executive Director, Program Management and Operations; Michael Miller, Interim Assistant Executive Director, Licensure and Renewal; Sallie J. Debolt, General Counsel; William Schmidt, Senior Counsel; Joan K. Wehrle, Education & Outreach Program Manager; Randy Beck, Interim Chief of Investigations; Rebecca Marshall, Chief Enforcement Attorney; David Katko, Karen Mortland, and Angela McNair, Enforcement Attorneys; Danielle Bickers, Compliance Supervisor; Annette Jones, Compliance Officer; Kay Rieve, Administrative Officer; Barbara Jacobs, Senior Executive Staff Attorney; Cathy Hacker, Physician Assistant Program Administrator; Jackie Moore, Public Information Assistant; Gary Holben, Operations Manager, Peri Vest, Enforcement Secretary; Penelope Dillard, HR/Fiscal Secretary; Gina Bouldware, Amanda Blickenstaff and Victoria Littoral, Licensure Assistants; and Benton Taylor, Executive Assistant to the Executive Director.

PROPOSED MEETINGS DATES FOR 2015

Dr. Soin moved to approve the proposed Board meeting dates for 2015, as listed in the Agenda Materials. Dr. Saferin seconded the motion. All members vote aye. The motion carried.

PRESENTATION BY REPRESENTATIVES OF THE FEDERATION OF STATE MEDICAL BOARDS

Dr. Steinbergh welcomed Federation of State Medical Board of Ohio (FSMB) representatives Jon V. Thomas, M.D., M.B.A., Chair of the Board of Directors, and Michael P. Dugan, M.B.A., Chief Information Officer. Dr. Thomas and Mr. Dugan provided a PowerPoint presentation giving a broad overview of the FSMB’s mission and purpose, as well as addressing the specific topics of license portability, interstate compacts, and the Federation Credentials Verification Service (FCVS).

Dr. Thomas explained the history of the concept of licensure portability and the FSMB’s licensure portability initiatives, which involve the Uniform Application, credentials verification, and policy and legislative efforts. Dr. Thomas thoroughly described how a physician licensed in one state may have his or her license and credentials quickly verified by another state to allow practice in that state.
Dr. Sethi joined the meeting at this time.

Dr. Thomas likened the FSMB’s model of license portability to drivers’ licenses, which are issued by one state but recognized by all states because of uniform requirements. Dr. Thomas contrasted this approach with the concept of national licensure, which the FSMB and its member boards do not support. Dr. Thomas discussed the concept of interstate compacts and the role they could play in license portability to expedite medical licensure and facilitate multi-state practice.

Dr. Thomas answered several questions from Board members regarding the details of how such compacts would be formed, how they would operate, and how they would be funded. Dr. Talmage commented that a physician would become licensed in one state, which would investigate the physician’s credentials and background just as it does currently; the physician would then be able to choose which other states in the compact he or she would like to be licensed in as well and pay the appropriate fees to each state.

Mr. Dugan discussed the FCVS, how it works, and its goals and benefits. Mr. Dugan stated that FCVS provided primary source verification of core credentials and is accepted by 65 out of 69 licensing boards in the United States. Dr. Dugan reviewed several technical improvements that have been made to the system in recent years. Dr. Ramprasad commented that the Board has heard many complaints regarding the Uniform Application, redundancy of having to list information in multiple places, and difficulty in using the system in a reasonable timeframe. Mr. Dugan thanked Dr. Ramprasad for expressing those concerns and stated that he would look into the problem he mentioned.

Mr. Dugan also described a new system to allow credentials information from medical schools and residency programs to flow much more freely and efficiently to the FCVS so that that information can be provided in a more timely manner. Mr. Dugan stated that this new system is in pilot mode at the Ohio State University Wexner Medical Center. Mr. Dugan stated that if the pilot provides positive feedback, the intention is to contact every program in the state of Ohio to see if they would be interested in the system. Dr. Ramprasad commended this effort, stating that such a system has been needed for some time.

Dr. Steinberg thanked Dr. Thomas and Mr. Dugan for answering the Board’s questions.

**ADMINISTRATIVE REPORT**

**Board Member Appointment:** Mr. Haslam stated that Robert P. Giacalone was appointed to the Board on October 29, 2013, as a consumer member. Mr. Giacalone is currently Senior Vice President of Regulatory Affairs and Chief Regulatory Counsel at Cardinal Health. Mr. Giacalone is also a licensed pharmacist and previously served two terms on the Ohio Board of Pharmacy.

**Staffing Updates:** Mr. Haslam stated that Mr. Miller’s position as Assistant Executive Director for Licensure, Renewal, and Public Inquiries has been officially approved. Angela Moore, who had been a licensure assistant, has begun her new role as a compliance officer. Nicole Weaver has resigned from her position as Chief of Licensure due to her family relocating to another part of the state. Mr. Haslam noted that Ms. Weaver has agreed to contract with the Board to do work electronically in order to help the Board through this transition. Mr. Haslam stated that the Board has a vacant Enforcement Attorney position that
the staff is working to fill. Lastly, Christine Schwartz, a third-year law student at Capital University, is serving as a legal intern and is working with Ms. Anderson. Mr. Haslam stated that Ms. Schwartz will be with the Board through the end of the school year, at which time the Board may hire her.

**Meetings:** Mr. Haslam stated that Mr. Miller met with representatives from the Governor’s office regarding implementation of Executive Order 2013-05K, which is related to veterans’ issues. Mr. Miller stated that there is a large push in Ohio and nationwide to facilitate the employment of veterans. Governor Kasich is working with licensing boards to identify areas where military experience can be recognized to help a veteran qualify for licensure.

Mr. Haslam stated that Mr. Miller also met with the Patient-Centered Medical Home (PCMH) advisory group to develop curriculum requirements. Mr. Miller stated that one significant policy issue is delegation and how that will differ across different professions.

Mr. Haslam stated that Ms. Anderson and Mr. Miller attended the Administrators in Medicine (AIM) Central and Western Region meeting in Indianapolis. Ms. Anderson stated that the meeting included a presentation on efforts of the state of Indiana to develop prescription drug guidelines. Ms. Anderson commented that Indiana’s guidelines are somewhat similar to those recently adopted in Ohio. Ms. Anderson stated that the meeting was very worthwhile.

Mr. Haslam stated that on November 12, he and Ms. Debolt attended a meeting of the Joint Committee on Agency Rule Review (JCARR). At the meeting, JCARR noted several agencies that had rules that were past the five-year review requirement and asked representatives of those agencies for explanations. Mr. Haslam stated that the State Medical Board was not singled out, but noted that the Board does have some rules that are beyond the five years and are overdue for review. Mr. Haslam stated that there is an open position for an attorney to help Ms. Debolt with rule review so that the required reviews can be accomplished as quickly as possible. Mr. Haslam opined that the Board’s weight-loss rules, though not overdue for review, should be reviewed and amended in the very near future due to new weight-loss medications that have recently come to the market. The Board agreed that review of the weight-loss rules should be expedited.

Mr. Haslam stated that, as listed in the Administrative Report, there are standard meetings which occur on a regular basis with outside groups. Mr. Haslam stated that this is part of the Board’s education and outreach campaign.

**Fiscal Report:** Mr. Haslam stated that the Board’s revenue in September was $750,515.00 and expenditures were $572,724.00. The Board’s cash balance at the end of September was $3,057,255.00. First quarter revenues are up 1% over projections, largely due to the relatively large number of genetic counselor licensing fees that were paid when those licenses began being issued recently. Expenditures were about $500,000.00 below projections, largely due to several vacant positions, discontinuing some of the Board’s temporary services, and many Department of Administrative Services (DAS) invoices having not been received yet.

Mr. Kenney asked if a report can be produced showing the fines that the Board can impose under current
legislation and those that could be imposed if pending legislation is adopted. Mr. Haslam stated that the report on current fines can be produced for next month’s meeting and hoped that a report on fines in pending legislation can also be available at that time.

The Board engaged in a discussion of the Board’s budget and potential fining authority. Dr. Steinbergh noted the Board’s commitment to not trade discipline for money, though the Board may discipline practitioners and fine them to cover administrative costs. Mr. Kenney expressed concern that the Board has fining authority for continuing medical education (CME) violations, but has not imposed fines for recent CME violations. Dr. Ramprasad noted that a proposed legislative change would make CME violation fines easier to obtain by making the action non-reportable. Mr. Kenney supported this effort.

Key Performance Measures (KPM): Mr. Haslam noted that the average days for completing a license application has gone up and is now about as high as it was in June 2013. Mr. Haslam stated that this is largely the result of losing some employees in the Licensure section, but stated that this is not an excuse. Mr. Haslam stated that the staff will work to reduce the time for licensure.

Workplace Policies: Mr. Haslam provided the Board members with two policies that were recently put into effect involving alternate headquarters, remote working policies, and state vehicle policies. Mr. Haslam stated that these policies meet the Inspector General’s recommendations and have been approved by the Board’s Labor/Management Committee.

Ohio Association of County Behavioral Health Authorities (OACBHA) Mental Health Conference: Mr. Haslam stated that the OACBHA will hold its mental health conference in December 2013. The conference has received approval for continuing medical education (CME) credits and the OACBHA has requested that the Board advertise the conference and the available CME credits on its website. Mr. Haslam recommended that the Board approve the OACBHA’s request. Dr. Steinbergh commented that allowing such advertising could be a slippery slope and that the Board should be cautious of this. However, Dr. Steinbergh stated that she supports this request.

Dr. Bechtel moved to allow the OACBHA to advertise its mental health conference and available CME credits on its website. Dr. Soin seconded the motion. All members vote aye. The motion carried.

Draft Letter of Support for Ohio Association of Family Physician (OAFP) application for grant: Mr. Haslam stated that Ms. Wehrle has drafted a letter of support, emailed previously to Board members, for the OAFP’s application for a grant from the Pfizer Corporation. The purpose of the grant would be to help the OAFP teach practice teams to incorporate newly-adopted clinical prescribing guidelines into their patient care protocols. Mr. Haslam recommended that the Board approve the draft letter of support.

Dr. Steinbergh stated that she favors supporting the OAFP’s application, but noted that the name of Pfizer does not appear in the draft letter.

Dr. Bechtel moved to approve the draft letter of support for the OAFP’s application for grant. Dr. Sethi seconded the motion.
Dr. Steinbergh stated that she will now entertain discussion in the above matter.

The Board engaged in a discussion of whether the draft letter should be amended to indicate that the grant is originating from Pfizer. Some Board members expressed concern that the letter could be construed as support for the Pfizer Corporation. The Board concluded that the letter should indicate support for the OAFP and its application and not support for Pfizer, the source of the grant. Therefore, the Board decided to approve the letter of support as drafted.

**A vote was taken on Dr. Bechtel’s motion to approve.** All members voted aye. The motion carried.

**Ohio Prosecuting Attorneys Association (OPAA) Annual Meeting:** Mr. Haslam stated that the OPAA will hold its annual meeting in Columbus on December 5 and 6. Mr. Haslam stated that he and the staff believe that attendance at the conference presents a good networking opportunity and the work of the OPAA is relevant to the Medical Board’s activities. Mr. Haslam asked the Board to approve the $350.00 registration fee so that he can attend the annual meeting.

**Dr. Saferin moved to approve the $350.00 registration fee for Mr. Haslam to attend the OPAA Annual Meeting on December 5 and 6, 2013. Dr. Bechtel seconded the motion.** All members voted aye. The motion carried.

Dr. Bechtel exited the meeting at this time.

**REPORTS BY ASSIGNED COMMITTEES**

**APPROVAL OF EXECUTIVE DIRECTOR’S MEMBERSHIP COST FOR THE NATIONAL ASSOCIATION OF DRUG DIVERSION INVESTIGATORS**

**Dr. Talmage moved to approve the Executive Director’s membership cost for the National Association of Drug Diversion Investigators (NADDI). Dr. Sethi seconded the motion.** All members voted aye. The motion carried.

Dr. Talmage commented that Mr. Haslam’s membership in NADDI is related to his employment as the Executive Director of the State Medical Board of Ohio because the Board is intimately involved in drug diversion issues. Dr. Sethi also commented that Mr. Haslam’s membership in NADDI will give the Board access to more information in this area.

Mr. Haslam stated that NADDI is a national organization that helps bring states together to talk about how each state works on drug diversion issues.

**DISCUSSION OF MEETING WITH REPRESENTATIVES OF THE ACADEMY OF MEDICINE OF CLEVELAND AND NORTHERN OHIO**

Dr. Steinbergh stated that the Executive Committee met with Representatives of the Academy of Medicine of Cleveland and Northern Ohio (AMCNO). Dr. Steinbergh stated that it was a good interaction,
discussing opiate prescribing guidelines, access to the Ohio Automated Rx Reporting System (OARRS), and the Board’s rules review. Dr. Steinbergh stated that Mr. Haslam had earlier participated in an AMCNO mini-internship in which he shadowed a physician for two half-days, which he found to be a good experience. Ms. Anderson provided a LeanOhio update and Mr. Miller provided an update on licensure issues. AMCNO also asked questions about a physician can participate in the Board’s Quality Intervention Panels or become an expert for the Board.

Dr. Steinbergh stated that the Partners in Professionalism program was also discussed. While the AMCNO was naturally focused on the Northeast Ohio Medical University, Dr. Steinbergh stated that in January the Board will begin exploring ways to expand the program statewide.

**LICENSURE APPLICATION REVIEWS**

**TIMOTHY DREHMER, M.D.**

Dr. Ramprasad stated that Dr. Drehmer, an internal medicine practitioner and rheumatologist, has applied for restoration of his Ohio medical license.

Dr. Sethi exited the meeting at this time.

Dr. Ramprasad continued that Dr. Drehmer became board-certified in rheumatology in 1994. From 2006 to 2012, Dr. Drehmer was medical director for a pharmaceutical company before joining another pharmaceutical company. Dr. Drehmer has completed the CARE program to prepare for the April 2014 rheumatology recertification program. Dr. Ramprasad stated that the Group 1 Committee recommends granting Dr. Drehmer’s application for restoration, provided he takes and passes the Special Purpose Examination (SPEX) or recertification examination in internal medicine or rheumatology.

**Dr. Ramprasad moved to approve Dr. Drehmer’s application for restoration of his Ohio medical license, pending successful completion of the SPEX examination or recertification in internal medicine or rheumatology. Dr. Soin seconded the motion.** A vote was taken:

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<td>Dr. Saferin</td>
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<td>Dr. Soin</td>
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<td>Dr. Ramprasad</td>
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<td>Dr. Steinbergh</td>
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<tr>
<td>Dr. Talmage</td>
<td>- aye</td>
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<tr>
<td>Mr. Kenney</td>
<td>- aye</td>
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The motion carried.

**ELEANOR MARIE FAUL, M.D.**

Dr. Ramprasad stated that Dr. Faul has applied for medical licensure and is requesting that her training in the United States and her training and experience in Ireland be deemed equivalent to 24 months of
graduate medical education. Dr. Faul practiced internal medicine and surgery from 2001 to 2004, participated in clinical research and surgery in Ireland from 2004 to 2005, and practiced as a colorectal surgery registrar from 2005 to 2012. From 2012 to the present, Dr. Faul has been involved in a colorectal fellowship which included training at the Cleveland Clinic. Dr. Ramprasad noted that Dr. Faul was one of very few people selected into her current higher surgical training program. The Group 1 Committee recommends granting equivalency.

Dr. Sethi returned to the meeting at this time.

The Board engaged in a brief discussion of the possibility of automatically recognizing graduate medical education programs in certain other countries, particularly English-speaking countries culturally similar to the United States. No decision was made in this regard.

**Dr. Saferin moved to deem Dr. Faul’s training and experience in Ireland and her training in the United States to be equivalent to 24 months of graduate medical education through the second-year level of GME so that she may be granted a license. Dr. Soin seconded the motion.** A vote was taken:

**ROLL CALL:**

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<tr>
<td>Dr. Saferin</td>
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<td>Dr. Soin</td>
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<td>Dr. Ramprasad</td>
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<td>Dr. Steinbergh</td>
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<td>Dr. Sethi</td>
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<td>Dr. Talmage</td>
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<td>Mr. Kenney</td>
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The motion carried.

**JAMES A. GOOD, M.T.**

Dr. Ramprasad stated that Mr. Good is applying for restoration of his Ohio massage therapy license. Mr. Good has not been engaged in the active practice of massage therapy since 2001. The Group 1 Committee recommends approval of Mr. Good’s application, pending successful completion of the Massage and Bodywork Licensing Examination (MBLEX).

**Dr. Talmage moved to approve Mr. Good’s application for restoration of his Ohio massage therapy license, pending successful completion of the MBLEX. Dr. Saferin seconded the motion.** A vote was taken:

**ROLL CALL:**

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<tr>
<td>Dr. Saferin</td>
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<td>Dr. Soin</td>
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<td>Dr. Ramprasad</td>
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<td>Dr. Steinbergh</td>
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<td>Dr. Sethi</td>
<td>aye</td>
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<tr>
<td>Dr. Talmage</td>
<td>aye</td>
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</table>
Mr. Kenney - aye

The motion carried.

RONALD GREENO, M.D.

Dr. Ramprasad stated that Dr. Greeno has applied for medical licensure in Ohio. Dr. Greeno has completed a critical care fellowship and has practiced in New York and California. From 1997 to the present, Dr. Greeno has been the Chief Medical Officer at Cogent HMG, where he does not practice clinical medicine. The Group 1 Committee recommends approval of Dr. Greeno’s application, pending successful completion of the Special Purpose Examination (SPEX), or recertification in internal medicine or any of the boards he is qualified for.

Dr. Soin moved to approve Dr. Greeno’s application, pending successful completion of the SPEX or recertification in internal medicine, pulmonary disease medicine, or critical care medicine. Dr. Sethi seconded the motion. A vote was taken:

<table>
<thead>
<tr>
<th>ROLL CALL:</th>
<th>Dr. Saferin - aye</th>
<th>Dr. Soin - aye</th>
<th>Dr. Ramprasad - aye</th>
<th>Dr. Steinbergh - aye</th>
<th>Dr. Sethi - aye</th>
<th>Dr. Talmage - aye</th>
<th>Mr. Kenney - aye</th>
</tr>
</thead>
</table>

The motion carried.

COLLEEN LANZARETTA, M.T.

Dr. Ramprasad stated that Ms. Lanzaretta has applied for restoration of her Ohio massage therapy license. Ms. Lanzaretta has not practiced massage therapy since 2007. The Group 1 Committee recommends approval of Ms. Lanzaretta’s application, pending successful completion of the Massage and Bodywork Licensing Examination.

Dr. Saferin moved to approve Ms. Lanzaretta’s application for restoration of her Ohio massage therapy license, pending successful completion of the MBLEX. Dr. Soin seconded the motion. A vote was taken:

<table>
<thead>
<tr>
<th>ROLL CALL:</th>
<th>Dr. Saferin - aye</th>
<th>Dr. Soin - aye</th>
<th>Dr. Ramprasad - aye</th>
<th>Dr. Steinbergh - aye</th>
<th>Dr. Sethi - aye</th>
<th>Dr. Talmage - aye</th>
</tr>
</thead>
</table>
Mr. Kenney - aye

The motion carried.

PETER LEE, M.D.

Dr. Ramprasad stated that Dr. Lee has applied for medical licensure in Ohio. Dr. Lee is requesting a good cause waiver of the United States Medical Licensing Examination (USMLE) 10-year rule. Dr. Ramprasad stated that Dr. Lee finished his first year of medical school in 1994 and then left medical school because he had been accepted into an M.D./Ph.D. program. Dr. Lee took and passed Step 1 of the USMLE in 1996, then completed a year of a Master of Science program before beginning his Ph.D. work. Dr. Lee spent six years doing research, then returned to his third year of medical school in 2003. From 2005 to 2012, Dr. Lee trained in general surgery and cardiothoracic surgery. Currently, Dr. Lee is a clinical instructor in cardiothoracic surgery at Stanford University.

Dr. Ramprasad stated that, given Dr. Lee’s exceptional work and the good reasons he has for not completing all three steps of the USMLE within 10 years, the Group 1 Committee recommends granting Dr. Lee’s request. Dr. Ramprasad noted the Dr. Lee passed every step of the USMLE on his first attempt.

Dr. Saferin moved to approve the good cause exception of the 10-year rule, as outlined in 4731-6-14(C)(3)(c)(ii), Ohio Administrative Code, and accepting Dr. Lee’s examination sequence in order for him to be granted a license. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:  
Dr. Saferin - aye  
Dr. Soin - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Sethi - aye  
Dr. Talmage - aye  
Mr. Kenney - aye

The motion carried.

TOSHIHIRO OKAMOTO, M.D.

Dr. Ramprasad stated that Dr. Okamoto is applying for medical licensure in Ohio. Dr. Okamoto is requesting that his training and experience in Japan and his training in the United States be deemed equivalent to 24 months of graduate medical education.

Dr. Ramprasad continued that Dr. Okamoto has trained as a resident and clinical fellow in thoracic surgery, cardiovascular surgery, and respiratory medicine form 1997 to 2006. From 2006 to 2008, Dr. Okamoto was a research fellow in thoracic surgery. Dr. Okamoto was a research fellow in the Department of Surgery at the University of Pittsburgh from 2008 to 2009 and a postdoctoral research fellow in pathobiology at the Cleveland Clinic from 2009 to 2012. From 2012 to 2013, Dr. Okamoto trained as a
clinical fellow in the Department of Thoracic Surgery at the Cleveland Clinic. From April 2013 to the present, Dr. Okamoto has been employed as a staff research associate at the Cleveland Clinic.

Dr. Ramprasad opined that Dr. Okamoto seems well-qualified. The Group 1 Committee recommends approval of Dr. Okamoto’s request.

**Dr. Saferin moved to deem Dr. Okamoto’s training and experience in Japan and his training in the United States to be equivalent to 24 months of graduate medical education through the second-year level of GME so that he may be granted a license. Dr. Soin seconded the motion.** A vote was taken:

<table>
<thead>
<tr>
<th>ROLL CALL:</th>
<th>Aye</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Saferin</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Soin</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Ramprasad</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Sethi</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Talmage</td>
<td>aye</td>
</tr>
<tr>
<td>Mr. Kenney</td>
<td>aye</td>
</tr>
</tbody>
</table>

The motion carried.

**CLINICAL RESEARCH FACULTY CERTIFICATE APPLICATION REVIEWS**

**JINGWEI ZHANG, M.D.**

Dr. Ramprasad stated that Dr. Zhang from China has applied for a clinical research faculty certificate. Dr. Zhang, an orthopedist, will be practicing at the University of Toledo. Dr. Ramprasad stated that Dr. Zhang’s application materials are in order, except that the Group 1 Committee wanted confirmation from the department chair that he or she will be overseeing Dr. Zhang’s work. The Group 1 Committee recommends approval of Dr. Zhang’s application with that stipulation.

**Dr. Saferin moved to approve Dr. Zhang’s application, pending receipt of a letter from the Chair of the University of Toledo Department of Orthopedic Surgery that he or she will be overseeing Dr. Zhang’s work at the university. Dr. Soin seconded the motion.** A vote was taken:

<table>
<thead>
<tr>
<th>ROLL CALL:</th>
<th>Aye</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Saferin</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Soin</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Ramprasad</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Sethi</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Talmage</td>
<td>abstain</td>
</tr>
<tr>
<td>Mr. Kenney</td>
<td>aye</td>
</tr>
</tbody>
</table>

The motion carried.
HIROMI KAKO, M.D.

Dr. Ramprasad stated that Dr. Kako has applied for a clinical research faculty certificate. Dr. Kako is a research fellow in anesthesiology and will be practicing at the Ohio State University School of Medicine. Dr. Ramprasad stated that all application materials are in order and the Group 1 Committee recommends approval of Dr. Kako’s application.

Dr. Saferin moved to approve Dr. Kako’s application for a clinical research faculty certificate. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

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<tbody>
<tr>
<td>Dr. Saferin</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Soin</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Ramprasad</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Sethi</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Talmage</td>
<td>abstain</td>
</tr>
<tr>
<td>Mr. Kenney</td>
<td>aye</td>
</tr>
</tbody>
</table>

The motion carried.

MINETO KAMADA, M.D.

Dr. Ramprasad stated that Dr. Kamada has applied for a clinical research faculty certificate. Dr. Kamada is a pediatric anesthesiologist and will be practicing at the Ohio State University School of Medicine. Dr. Ramprasad stated that all application materials are in order and the Group 1 Committee recommends approval of Dr. Kamada’s application.

Dr. Saferin moved to approve Dr. Kamada’s application for a clinical research faculty certificate. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

<p>| | |</p>
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<tbody>
<tr>
<td>Dr. Saferin</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Soin</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Ramprasad</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Sethi</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Talmage</td>
<td>aye</td>
</tr>
<tr>
<td>Mr. Kenney</td>
<td>aye</td>
</tr>
</tbody>
</table>

The motion carried.

REQUESTS FOR GOOD CAUSE WAIVERS FOR USMLE ATTEMPT LIMITS

RITU BAKHRU, M.D.
Dr. Ramprasad stated that Dr. Bakhru is qualified for a good cause waiver of the United States Medical Licensing Examination (USMLE) attempt limits. Dr. Ramprasad stated that under the Board’s recently-adopted rule, the Board’s attempt limits on passing any step of the USMLE is waived if the applicant is specialty board-certified. Dr. Ramprasad stated that Dr. Bakhru failed Step 1 of the USMLE eight times before passing on the ninth attempt. Dr. Bakhru went on to pass Step 2 on the third attempt and Step 3 on the first attempt. Dr. Bakhru is board-certified in family medicine.

Dr. Ramprasad noted that the Board does not need to vote on Dr. Bakhru’s licensure, but it is being brought to the Board’s attention because the license has been granted under a recently-adopted rule.

MOHAMMED IDRIS ZAHOOR, M.D.

Dr. Ramprasad stated that Dr. Zahoor has also requested a good cause waiver of the United States Medical Licensing Examination (USMLE) attempt limits. Dr. Ramprasad stated that Dr. Bakhur passed Step 1 of the USMLE on the fifth attempt, Step 2 on the sixth attempt, and Step 3 on the tenth attempt. Dr. Bakhur is board-certified in neurology and sleep medicine.

Dr. Steinbergh found it troubling for a practicing physician to have failed Step 3 of the USMLE nine times. Dr. Talmage shared Dr. Steinbergh’s concern, noting that Step 3 is the culmination of basic science and clinical science, and its purpose is to qualify for independent practice. However, Dr. Talmage opined that board certification is a higher standard because it is based on performance in practice under supervision.

Dr. Soin noted that under the “Comment” section of Dr. Zahoor’s tenth and successful attempt at passing Step 3 of the USMLE, it says “Test Accommodations.” Dr. Soin asked for clarification of what that means. Dr. Talmage stated that test accommodations are granted by the Composite Committee of the American Board of Medical Examiners. An accommodation can be a longer testing time for attention deficit disorder or a recorded test for dyslexia, for example. Dr. Talmage stated that accommodations are only granted if there is documentation by a psychometrician, psychologist, or psychiatrist that it is a legitimate suggestion.

PHYSICIAN ASSISTANT MATTERS

PHYSICIAN SUPERVISORY PLAN AND PHYSICIAN ASSISTANT SUPERVISION AGREEMENT APPLICATIONS

JANET YOUNGBLOOD HIGGINS, M.D., DOCTORS URGENT CARE OFFICES

Dr. Steinbergh stated that Dr. Higgins has described how she would use a physician assistant in her office. However, Dr. Steinbergh expressed concern that Dr. Higgins never indicated that she herself is practicing clinical medicine. Dr. Steinbergh questioned whether Dr. Higgins would be qualified to be a supervising physician if she is not clinically active. Therefore, this matter was tabled by the Group 2 Committee.

SYED NAQVI, M.D., FAMILY URGENT CARE
Dr. Steinbergh stated that the Group 2 Committee recommends approval of Dr. Naqvi’s request because he works with the physician assistants two to three days per week. The Group 2 Committee felt comfortable that there was an overlap in Dr. Naqvi’s ability to supervise.

**Dr. Talmage moved to approve Dr. Naqvi’s application as written. Dr. Sethi seconded the motion.** All members voted aye. The motion carried.

JEFFREY WHITE, M.D., URGENT CARE SPECIALISTS

Dr. Steinbergh stated that Dr. White’s request was accompanied by a presentation made by the medical director and the CEO of Access MD to the Group 2 Committee. Upon having conversation, the Group 2 Committee felt confident and comfortable that this group was supervising their physician assistants appropriately.

**Dr. Saferin moved to approve Dr. White’s application as written. Dr. Talmage seconded the motion.** All members voted aye. The motion carried.

PROPOSED PHYSICIAN ASSISTANT LEGISLATION

Ms. Debolt stated that legislation has been introduced in the legislature which, if it becomes law, would significantly change the scope of practice for physician assistants which would impact the regulatory functions of the Medical Board. The legislation would combine the physician assistant supervisory agreement and supervisory plan and would not require that the agreement and plan be filed with the Board. The Board would still be required to indicate on its website which physicians are supervising which physician assistants, though it is not known how the Board will have that information.

In addition, Ms. Debolt stated that the proposed legislation will allow physician assistants to practice at any site, rather than only at sites that the supervising physician routinely practices at. Also under the new legislation, supervising physicians will no longer be required to be within a 60-minute distance. Instead, the supervising physician must be at a distance that would enable them to provide reasonable supervision. Another issue is that the physician assistant will be able to engage in moderate sedation in hospitals and other facilities and will be able to assist in surgery in any setting.

Dr. Saferin expressed great concern that under this legislation, a physician assistant could be in one hospital performing a procedure while their supervising physician could be in another hospital performing another procedure. Dr. Saferin also noted that the legislation would increase the number of physician assistants a physician can supervise from three to five, so a supervising physician could have five physician assistants practicing simultaneously in five different facilities while the physician is in a sixth location. Dr. Steinbergh noted that a physician assistant in a hospital will only be able to perform those actions that the hospital has credentialled them to perform.

Dr. Steinbergh expressed concern that a physician can tell a physician assistant to work anywhere, even if the physician never practices in that location. Dr. Soin stated that in the practice of pain management, allowing five physician assistants to practice in five different locations could quickly get out of control.
Ms. Debolt continued that under the proposed legislation, the physician assistant would be able to delegate to unlicensed individuals in order to implement a plan of care.

Dr. Talmage opined that this legislation opens a Pandora’s Box. Dr. Talmage stated that physicians would essentially be able to run a practice with physician assistants doing anything the physician tells them to do. Dr. Talmage stated that, as much as he hates to admit it, there are physicians who are motivated by profit and they could have five clinics totally manned by physician assistants and medical assistants, allowing the physician to sit at a desk and make significant amounts of money.

Dr. Saferin opined that this legislation would eliminate the “assistant” part of the “physician assistant” title and allow people to basically become physicians with 24 months plus 12 weeks of education, doing everything that a physician can do. Dr. Saferin felt that the Board should strongly oppose this legislation.

Dr. Steinbergh stated that the Board may approve of some parts of the proposed legislation concerning supervisory plans, noting that the Board has previously discussed eliminating physician assistant supervisory plans and giving more authority to the supervising physician. However, Dr. Steinbergh found many parts of the legislation to be unacceptable. Dr. Steinbergh opined that supervising five physician assistants and sending wherever the physician wants them to go is not supervision. Dr. Steinbergh also felt that the portion regarding conscious and moderate sedation is significant. Dr. Steinbergh stated that she is not opposed to allowing some activities to be delegated to an unlicensed medical assistant, but she did not know the lengths some may go in delegating to unlicensed individuals. Ms. Debolt stated that she has discussed with the Ohio Physician Assistant Association the possibility of allowing the Medical Board to have authority to make rules on delegation.

Dr. Steinbergh commented that physician extenders who are meant to be assistants are now asking for independent practice rights without appropriate training. Dr. Steinbergh opined that the Board’s administration should develop a plan to advocate for safe medical practice.

Mr. Kenney opined that it is mostly hospitals rather than physicians who want this legislation. Mr. Kenney felt that if the Medical Board has intentions of supervising physicians, it should be very aggressive in stopping this trend. Mr. Kenney suggested that representatives of the Board have a conversation with Representative Anne Gonzales, the sponsor of this legislation, and explain why the legislation is not good. Mr. Kenny wondered how much farther the concept of being a doctor will be watered down until everyone is a doctor.

Mr. Haslam suggested that the Board delegate a group of about three, including at least two physicians, to accompany him to a meeting with Representative Gonzales. Mr. Haslam suggested that this issue be approached from the perspective of patient safety, not scope of practice. Mr. Kenney stated that he has already looked into a meeting and found that Representative Gonzales is available on November 26 at 4:00. The Board discussed this and determined that Dr. Ramprasad, Dr. Talmage, Mr. Kenney, Mr. Haslam, Mr. Miller, and Ms. Debolt, possibly accompanied by Dr. Bechtel and/or Dr. Soin, will meet with Representative Gonzales on November 26.
Dr. Steinbergh emphasized that this is a very important issue and that the Board members must be heard. Dr. Steinbergh expressed disappointment that this issue has already reached this stage.

Thereupon at 11:25 a.m. the November 14, 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 November 13-14, 2013, as approved on December 11, 2013.

Anita M. Steinbergh, D.O., President

J. Craig Strafford, M.D., M.P.H., Secretary

(SEAL)