MINUTES

THE STATE MEDICAL BOARD OF OHIO

February 10, 2016

Michael L. Gonidakis, President, called the meeting to order at 9:55 a.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: Amol Soin, M.D., Vice President; Kim G. Rothermel, M.D., Secretary; Bruce R. Saferin, D.P.M., Supervising Member; Anita M. Steinbergh, D.O.; Donald R. Kenney, Sr.; Sushil Sethi, M.D.; Robert P. Giacalone; Andrew P. Schachat, M.D.; Michael Schottenstein, M.D.; and Richard Edgin, M.D.

Also present were: Anthony J. Groeber, Executive Director; Kimberly Anderson, Assistant Executive Director; David Fais, Assistant Executive Director; Michael Miller, Assistant Executive Director for Special Services; Sallie J. Debolt, Senior Counsel; William Schmidt, Chief of Investigations; ; Joan K. Wehrle, Education and Outreach Program Manager; Jonithon LaCross, Public Policy & Governmental Affairs Program Administrator; Rebecca Marshall, Chief Enforcement Attorney; Marcie Pastrick, Mark Blackmer, Cheryl Pokorny, Gregory Taposci, James Roach, and Kimberly Lee, Enforcement Attorneys; Kyle Wilcox, Melinda Snyder, and James Wakley, Assistant Attorneys General; R. Gregory Porter, Chief Hearing Examiner; Danielle Blue, Hearing Examiner; Alexandra Murray, Managing Attorney for Standards Review, Experts, and Intervention; Mitchell Alderson, Administrative Officer; Chantel Scott, Chief of Renewal; Christine Schwartz, Legal and Policy Staff Attorney; Jacqueline A. Moore, Legal/Public Affairs Assistant; and Benton Taylor, Board Parliamentarian.

MINUTES REVIEW

Dr. Saferin moved to approve the draft minutes of the January 13, 2016, Board meeting, as written. Dr. Steinbergh seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - aye
Dr. Saferin - aye
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion carried.
APPLICANTS FOR LICENSURE

Dr. Steinbergh moved to approve for licensure, contingent upon all requested documents being received and approved in accordance with licensure protocols, the acupuncturist applicants listed in Exhibit “A,” the genetic counselor applicants listed in Exhibit “B,” the massage therapist applicants listed in Exhibit “C,” the physician assistant applicants listed in Exhibit “D,” and the physician applicants listed in Exhibit “E,” as listed in the agenda supplement and handout. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:                   Dr. Rothermel - aye
                               Dr. Saferin   - aye
                               Mr. Giacalone - aye
                               Dr. Steinbergh- aye
                               Dr. Soin      - aye
                               Mr. Gonidakis - aye
                               Dr. Sethi     - aye
                               Mr. Kenney    - aye
                               Dr. Schachat  - aye
                               Dr. Schottenstein - aye
                               Dr. Edgin     - aye

The motion carried.

REPORTS AND RECOMMENDATIONS

Mr. Gonidakis announced that the Board would now consider the Reports and Recommendations appearing on its agenda.

Mr. Gonidakis 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: Joseph Claude Carver, M.D.; and Amanda Lynn Padgitt, L.P.N. A roll call was taken:

ROLL CALL:                   Dr. Rothermel - aye
                               Dr. Saferin   - aye
                               Mr. Giacalone - aye
                               Dr. Steinbergh- aye
                               Dr. Soin      - aye
                               Mr. Gonidakis - aye
                               Dr. Sethi     - aye
                               Mr. Kenney    - aye
                               Dr. Schachat  - aye
                               Dr. Schottenstein - aye
                               Dr. Edgin     - aye
Mr. Gonidakis 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:

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<td>Dr. Edgin</td>
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Mr. Gonidakis 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. Rothermel served as Secretary and Dr. Saferin served as Supervising Member.

Mr. Gonidakis 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.

**JOSEPH CLAUDE CARVER, M.D.**

Mr. Gonidakis directed the Board’s attention to the matter of Joseph Claude Carver, M.D. No objections have been filed. Ms. Clovis was the Hearing Examiner.

Mr. Gonidakis stated that a request to address the Board has been timely filed by Dr. Carver. Five minutes will be allowed for that address.

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

Ms. Collis supported the Hearing Examiner’s Report and Recommendation to grant Dr. Carver’s application for a new medical license. Ms. Collis noted that the Hearing Examiner found Dr. Carver to be thoughtful, humble, and persistent in his effort to establish his good moral character since the last time he had appeared before the Board.

Ms. Collis continued that Dr. Carver was disciplined by the Board in 2005 and again in 2011 following his conviction for providing false information in a bankruptcy case. Ms. Collis noted that Dr. Carver’s 2011 conviction was based on acts that took place in 2005. Ms. Collis stated that Dr. Carver has spent the last
ten years leading an honest, moral, and law-abiding life. Ms. Collis stated that Dr. Carver has been severely punished for his previous missteps, having been sentenced to time in a federal prison and having his medical license revoked.

Ms. Collis stated that Dr. Carver initially applied to reinstate his medical license in March 2014 a few months after his release from prison. Ms. Collis noted that at that time, though some Board members supported the reinstatement of Dr. Carver’s license, the Board ultimately voted to deny Dr. Carver’s application. Ms. Collis submitted that the Dr. Carver appearing before the Board today is far different from the Dr. Carver of 2014 or the Dr. Carver who made the errors in 2005. Ms. Collis opined that the most persuasive testimony at Dr. Carver’s hearing came from James Gallivan, a former state highway patrolman and court bailiff who spoke of Dr. Carver’s character, work ethic, and desire to overcome his prior mistakes.

Ms. Collis noted that at the conclusion of Dr. Carver’s hearing, Assistant Attorney General James Wakley recommended no discipline based on the surrender of Dr. Carver’s Drug Enforcement Administration (DEA) certificate; Mr. Wakley made no recommendation whether Dr. Carver has sufficiently demonstrated good moral character to warrant the granting of his medical license. Ms. Collis stated that Dr. Carver has paid his debt to society and his work as an interpreter has significantly contributed to the medical profession. Ms. Collis opined that the Board should grant Dr. Carver’s application for licensure. Ms. Collis noted that the Proposed Order would grant Dr. Carver’s license only if he passes the Special Purpose Examination (SPEX) within six month of the effective date of the Order. Ms. Collis stated that this is not consistent with what the Board has done in similar cases. Ms. Collis suggested that Dr. Carver be given either one year or no timeframe at all in which to pass the SPEX.

Dr. Carver stated that the last few years of his life have been a difficult and humbling experience. Dr. Carver stated that he made errors in his personal and professional life in 2004 and 2005 for which he takes full responsibility. Dr. Carver stated that he has been punished for his mistakes, having served 17 months in prison and being required to pay restitution. Dr. Carver stated that he has spent the last ten years making better choices in his personal and professional life.

Dr. Carver continued that since he last appeared before the Board he has worked as an interpreter in physician offices, hospitals, courts, and schools. Dr. Carver stated that interpreting requires a very high degree of ethics and interpreters must relay information accurately, keep patient confidences, maintain strict boundaries, and be sensitive to the needs of others who are experiencing difficult and stressful times. In addition to working as an interpreter, Dr. Carver stated that he also teaches interpreting and ethics to others. Dr. Carver added that he also uses his interpreting skills at an AIDS resource center and other organizations throughout Columbus.

Dr. Carver stated that he has gotten married since his last appearance before the Board. Dr. Carver stated that his wife is the Chief Financial Officer for the Ohio Supreme Court and is a certified fraud examiner. Dr. Carver stated that he wife would never stay with him if he did not show the highest level of honesty and ethics.

Dr. Carver stated that he supports the Hearing Examiner’s Proposed Order and he respectfully requested
that the Boards adopt the minor modification that was recommended by Ms. Collis.

Mr. Gonidakis asked if the Assistant Attorney General would like to respond. Mr. Wilcox stated that he did not wish to respond.

**Dr. Steinbergh moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Joseph Claude Carver, M.D.** Dr. Soin seconded the motion.

Mr. Gonidakis stated that he will now entertain discussion in the matter of Dr. Carver.

Mr. Gonidakis briefly reviewed Dr. Carver’s medical career. The Medical Board first issued a Notice of Opportunity for Hearing to Dr. Carver in 1997 based on allegations of having violated the minimum standards of care in his treatment of five patients. However, that 1997 Notice was later dismissed by the Board. In 2005 Dr. Carver entered into a Consent Agreement with the Medical Board which revoked his medical license, stayed the revocation, and suspended his license for a minimum of one year. Dr. Carver’s 2005 Consent Agreement was based on his sexual relationship with a patient and two instances of practicing below the minimum standards of care. Dr. Carver’s medical license was reinstated in 2007 and he was released from the Board’s probationary terms in 2010.

Mr. Gonidakis stated that Dr. Carver declared bankruptcy in 2005 due to severe financial hardships, including a divorce and caring for his ill mother. During the bankruptcy case, Dr. Carver failed to report a valuable wine collection that was worth several hundred thousand dollars. In December 2010 Dr. Carver was indicted in federal court for concealing his wine collection, was found guilty, and served a prison sentence of 17 months. Dr. Carver is also required to pay $160,000 in restitution, which he is paying in installments. Based on this conviction, the Medical Board revoked Dr. Carver’s medical license in October 2012. In May 2014, Dr. Carver agreed to surrender his Drug Enforcement Administration (DEA) certificate to prescribe controlled substances.

Mr. Gonidakis continued that in May 2013 Dr. Carver applied for a new Ohio medical license, which the Board denied in May 2014. Dr. Carver submitted a new application in November 2014, which remains pending.

Mr. Gonidakis stated that Dr. Carver is still serving his criminal probation and is in compliance with that probation. Mr. Gonidakis further noted that Dr. Carver has remarried and seems to have turned his life around. Dr. Carver currently has an administrative job with urgent care centers and is serving as an interpreter. Mr. Gonidakis noted with interest that Dr. Carver also teaches boundaries and ethics courses for interpreters. Mr. Gonidakis stated that Dr. Carver has continued to take continuing medical education (CME) courses to stay abreast of medical developments.

Mr. Gonidakis stated that he generally supports the Hearing Examiner’s Proposed Order, which would grant Dr. Carver’s application, contingent upon his passage of the Special Purpose Examination (SPEX) within six months of the Order’s effective date. Mr. Gonidakis suggested that the first paragraph of Section B of the Proposed Order include the phrase “Upon the grant of the license…” and would read as follows: “Upon the grant of the license, the Certificate of Dr. Carver to practice medicine and surgery in
the State of Ohio shall be subject to the following PROBATIONARY terms, conditions, and limitations for a period of at least five years:

Mr. Gonidakis opined that Dr. Carver has paid and continues to pay his debt to society and that granting his licensure application would add great value to the practice of medicine.

Dr. Steinbergh agreed with Mr. Gonidakis’ comments, including the suggested rewording of Section B of the Proposed Order. Dr. Steinbergh further suggested that Dr. Carver not be limited to passing the SPEX within six months. Dr. Steinbergh stated that Dr. Carver should be granted licensure no matter when he passes the SPEX, provided he meets all other statutory and regulatory requirements. Dr. Steinbergh opined that the probationary term requiring a practice plan will be key for Dr. Carver’s return to practicing medicine and serving his community.

Dr. Steinbergh moved to amend the Proposed Order to remove the second paragraph from Section A of the Proposed Order, which specifies the timeframe within which Dr. Carver must pass the SPEX. Dr. Steinbergh further moved to add the phrase “Upon the grant of the license” to the beginning of the first sentence of Section B of the Proposed Order. Dr. Schachat seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Joseph Claude Carver, M.D. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - aye
Dr. Saferin - aye
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to approve carried.

AMANDA LYNN PADGITT, L.P.N.

Mr. Gonidakis directed the Board’s attention to the matter of Amanda Lynn Padgitt, L.P.N. No objections were filed. Ms. Clovis was the Hearing Examiner.

Mr. Gonidakis stated that a request to address the Board has been timely filed by Ms. Padgitt. However, Ms. Padgitt was not present in the meeting.

Dr. Steinbergh moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Amanda Lynn Padgitt, L.P.N. Dr. Soin seconded the motion.

Mr. Gonidakis stated that he will now entertain discussion in the above matter.

Dr. Soin stated that Ms. Padgitt was first licensed as a licensed practical nurse in Ohio in 1999 and has practiced in Ohio and New Mexico. On November 21, 2014, Ms. Padgitt entered into a Consent Agreement with the Ohio Board of Nursing which indefinitely suspended Ms. Padgitt’s nursing license, stayed the suspension, and placed her on probation for a minimum of two years.

Dr. Soin continued that Ms. Padgitt’s Nursing Board Consent Agreement was based on her admission that on March 7, 2013, while she was employed at White Oak Manor, she and other nurses provided a for-cause drug screen specimen due to the fact that a patient’s four oxycodone tablets had been substituted for Zofran. Ms. Padgitt’s urine specimen came back as “Negative-Dilute.” When Ms. Padgitt was asked to provide another specimen, she refused. Ms. Padgitt was subsequently terminated from White Oak Manor. Ms. Padgitt adamantly denies that she diverted any medications.

Dr. Soin stated that on September 30, 2014, Ms. Padgitt submitted to the State Medical Board of Ohio an application for a license to practice massage therapy, which remains pending. On her application, Ms. Padgitt disclosed her Consent Agreement with the Nursing Board and provided an explanation of these events. Ms. Padgitt had explained that March 7, 2013, was also her hire date with another employer, HomeCare with Heart, and the pre-employment drug screen for that employer had been negative. Ms. Padgitt had stated that she did not want to provide another urine screen at White Oak Manor, at her expense, because she did not have the necessary funds to pay for it. Ms. Padgitt had further explained that her results were “Negative-Dilute” because she had been drinking a great deal of water, working out, and dieting at that time and that she had drank six bottles of water prior to the test.

Dr. Soin noted that Ms. Padgitt had also been terminated from Beeghly Oaks Skilled Nursing and Rehabilitation Center on October 20, 2010, because she refused a drug test. At the hearing, Ms. Padgitt
explained that she had refused the drug test because she had smoked marijuana and she had been afraid that the test would be positive. Ms. Padgitt stated that she had only smoked marijuana once and that it had been a mistake. Dr. Soin stated that Ms. Padgitt did not disclose her termination from Beeghly Oaks when the Board’s interrogatories asked her to identify any employer, hospital, nursing home, or skilled facility from which she had been terminated or forced to resign. Ms. Padgitt admitted in the hearing that her answers to the interrogatories were not complete due to her omission of information regarding Beeghly Oaks. Ms. Padgitt further admitted that she had no good reason to omit information about Beeghly Oaks.

Dr. Soin stated that Ms. Padgitt had testified that she had aspired to change careers and become a massage therapist even before her termination from White Oak Manor. Ms. Padgitt had stated that she no longer wants to be a nurse but she wants to continue helping people.

Dr. Soin stated that the Proposed Order would grant Ms. Padgitt’s application for licensure and impose probationary terms for at least two years. Dr. Soin suggested that the Proposed Order be amended to require a chemical dependency evaluation prior to granting Ms. Padgitt’s licensure. Dr. Soin based his suggestion partly on the fact that the Board of Nursing had included a similar requirement in its Consent Agreement.

Ms. Anderson stated that the Board has not charged Ms. Padgitt with violation of Section 4731.22(B)(26), Ohio Revised Code, concerning chemical impairment. Rather, Ms. Padgitt’s charges relate to falsification and the fact that she has an action from the Board of Nursing. Ms. Anderson further noted that Ms. Padgitt did not sign an Eastway Waiver at her hearing.

Dr. Steinbergh agreed with Dr. Soin’s comments. Dr. Steinbergh stated that the hearing record has many red flags, including Ms. Padgitt’s consumption of marijuana in 2010 and the fact that she drank six bottles of water prior to reporting to work on the day of the urine drug test. Dr. Steinbergh opined that the Medical Board would be doing a disservice if it ignored these red flags. Dr. Steinbergh further opined that the Board of Nursing had been correct to require a chemical dependency evaluation as a condition for the reinstatement of Ms. Padgitt’s nursing license. Dr. Steinbergh felt that the Board should find a way to legally and appropriately address these concerns.

Mr. Gonidakis asked if it would be appropriate for the Board to simply deny Ms. Padgitt’s application for licensure. Ms. Anderson replied that denial of licensure is an option available to the Board. Dr. Soin commented that he would like for Ms. Padgitt to have an opportunity to pursue a career and contribute to society, but asked if there is a viable way to address the Board’s chemical dependency concerns without denying licensure. Mr. Wilcox replied that since Ms. Padgitt was not charged with chemical impairment, the Board is not able under the law to include a chemical dependency evaluation in its Order. Mr. Wilcox stated that if the Board denies Ms. Padgitt’s application and she reapply at a later date, the Board could order an evaluation at that time.

Dr. Steinbergh agreed that the best option before the Board is to deny Ms. Padgitt’s application, thus giving her an opportunity to reapply and undergo a chemical dependency evaluation.

Dr. Steinbergh moved to amend the Proposed Order to deny Ms. Padgitt’s application. Dr. Soin
seconded the motion. A vote was taken:

ROLL CALL:  
- Dr. Rothermel - abstain  
- Dr. Saferin - abstain  
- Mr. Giacalone - aye  
- Dr. Steinbergh - aye  
- Dr. Soin - aye  
- Mr. Gonidakis - aye  
- Dr. Sethi - aye  
- Mr. Kenney - aye  
- Dr. Schachat - aye  
- Dr. Schottenstein - aye  
- Dr. Edgin - aye

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Amanda Lynn Padgitt, L.P.N. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:  
- Dr. Rothermel - abstain  
- Dr. Saferin - abstain  
- Mr. Giacalone - aye  
- Dr. Steinbergh - aye  
- Dr. Soin - aye  
- Mr. Gonidakis - aye  
- Dr. Sethi - aye  
- Mr. Kenney - aye  
- Dr. Schachat - aye  
- Dr. Schottenstein - aye  
- Dr. Edgin - aye

The motion to approve carried.

PROPOSED FINDINGS AND PROPOSED ORDERS

Mr. Gonidakis stated that in the following matters, the Board issued a Notice of Opportunity for Hearing. No timely requests for hearing were received. The matters were reviewed by a Hearing Examiner, who prepared Proposed Findings and Proposed Orders, and are now before the Board for final disposition. Mr. Gonidakis stated that the matter of Dr. Emami is non-disciplinary in nature, and therefore all Board members may vote in that matter.
Dr. Schottenstein moved to find that the allegations as set forth in the May 1, 2014 Notice of Opportunity for Hearing in the matter of Dr. Emami have been proven to be true by a preponderance of the evidence and to adopt Ms. Mosbacher’s Proposed Findings and Proposed Order. Dr. Saferin seconded the motion.

Mr. Gonidakis stated that he will now entertain discussion in the matter of Dr. Emami.

Dr. Schottenstein stated that the Board has proposed denying Dr. Emami’s application for a license to practice medicine and surgery in Ohio. Dr. Schottenstein noted that Dr. Emami is a graduate of Isfahan University of Medical Sciences in Isfahan, Iran. Dr. Schottenstein stated that, although Dr. Emami obtained certification from the Educational Commission for Foreign Medical Graduates (ECFMG) in 1972, the examination at that time did not require demonstration of proficiency in English. Dr. Schottenstein stated that Section 4731-142, Ohio Revised Code, and Rule 4731-6-04, Ohio Administrative Code, requires an applicant to demonstrate proficiency in English by obtaining a passing score on the Test of English as a Foreign Language Internet-based Test (TOEFL iBT).

Dr. Schottenstein continued that Dr. Emami took the TOEFL iBT in May 2014 and scored 47 out of a possible 120; a score of 90 is required to pass. The Hearing Examiner reviewed the evidence in this matter and has recommended denying Dr. Emami’s application. Based on the facts and the rules, Dr. Schottenstein agreed with the Hearing Examiner’s Proposed Order to deny Dr. Emami’s application.

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

ROLL CALL:

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<td>Dr. Edgin</td>
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The motion to approve carried.

Mr. Gonidakis stated that the following four items are disciplinary in nature, and therefore the Secretary and Supervising Member cannot vote. In these matters, Dr. Rothermel served as Secretary and Dr. Saferin served as Supervising Member.
DUSTIN WEBB DILLON, M.D.

Dr. Steinbergh moved to find that the allegations as set forth in the March 11, 2015 Notice of Opportunity for Hearing in the matter of Dr. Dillon have been proven to be true by a preponderance of the evidence and to adopt Ms. Shamansky’s Proposed Findings and Proposed Order. Dr. Soin seconded the motion.

Mr. Gonidakis stated that he will now entertain discussion in the matter of Dr. Dillon.

Dr. Sethi stated that Dr. Dillon has applied for a license to practice medicine and surgery in Ohio. Dr. Sethi stated that Dr. Dillon passed all steps of the United Stated Medical Licensing Examination (USMLE) with good score and had excellent recommendations from his residency program. However, Dr. Dillon disclosed that he had had an evaluation which resulted in diagnoses of Substance Use-Mild and Mood Disorder. Dr. Dillon also indicated that the voluntary monitoring that he currently engages in would end when he relocates to Ohio.

Dr. Sethi continued that the Board sent Dr. Dillon interrogatories asking him to identify his treatment for the diagnoses. Dr. Dillon failed to respond to the interrogatories. Dr. Sethi stated that Dr. Dillon has been contacted three times and each time he has refused to cooperate and did not respond.

The Hearing Examiner’s Proposed Order, based on current information, the Board’s interest in protecting the public, and the absence of information regarding Dr. Dillon’s substance abuse and mental illness, would deny Dr. Dillon’s application for licensure. Dr. Sethi agreed with the Proposed Order.

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

ROLL CALL:                    
Dr. Rothermel - abstain       
Dr. Saferin - abstain        
Mr. Giacalone - aye           
Dr. Steinbergh - aye          
Dr. Soin - aye                
Mr. Gonidakis - aye           
Dr. Sethi - aye               
Mr. Kenney - aye              
Dr. Schachat - aye            
Dr. Schottenstein - aye       
Dr. Edgin - aye               

The motion to approve carried.

DAVID ANTHONY HOWARD, M.T.

Dr. Steinbergh moved to find that the allegations as set forth in the December 10, 2014 Notice of Opportunity for Hearing in the matter of Mr. Howard have been proven to be true by a
Dr. Soin seconded the motion.

Mr. Gonidakis stated that he will now entertain discussion in the above matter.

Dr. Steinbergh stated that the Board has notified Mr. Howard that it has proposed disciplining his massage therapy license due to his sexual misconduct with three patients. The Notice of Opportunity for Hearing, dated December 10, 2014 and mailed on December 11, 2014, was delivered via certified mail on December 16, 2014. No hearing request was received from Mr. Howard until January 15, 2015, outside the timeframe in which such a request would be considered timely.

Dr. Steinbergh stated that Mr. Howard committed sexual misconduct with three of his massage therapy patients within a two-year period. Dr. Steinbergh agreed with the Hearing Examiner’s Proposed Findings and the Proposed Order to permanently revoke Mr. Howard’s license to practice massage therapy.

ROLL CALL:  

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The motion to approve carried.

HEATHER NICOLE NIXON, L.M.T.

Dr. Schottenstein moved to find that the allegations as set forth in the November 5, 2014 Notice of Opportunity for Hearing in the matter of Ms. Nixon have been proven to be true by a preponderance of the evidence and to adopt Ms. Mosbacher’s Proposed Findings and Proposed Order. Dr. Steinbergh seconded the motion.

Mr. Gonidakis stated that he will now entertain discussion in the above matter.

Mr. Kenney stated that the Board alleges that Ms. Nixon has failed to comply with the terms of her September 2013 Step I Consent Agreement. Specifically, Ms. Nixon has failed to submit quarterly declarations of compliance, failed to make personal appearances before the Board or its designee, failed to enter into a contract with a drug testing facility, failed to submit urine samples for screening, and failed to provide evidence of participation with an alcohol and drug rehabilitation program.
Mr. Kenney stated that Ms. Nixon is either unwilling or unable to comply with her Consent Agreement. The Hearing Examiner’s Proposed Order is to revoke Ms. Nixon’s massage therapy license. Mr. Kenney noted that many hours of the Board’s time has been spent addressing this situation. Mr. Kenney stated that he had very seriously considered recommending a permanent revocation of Ms. Nixon’s license. However, Mr. Kenney decided to support the Proposed Order of a non-permanent revocation.

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

ROLL CALL:

Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to approve carried.

EXECUTIVE SESSION

Dr. Steinbergh moved to go into Executive Session to confer with the Medical Board’s attorneys on matters of pending or imminent court action, and for the purpose of deliberating on proposed consent agreements in the exercise of the Medical Board’s quasi-judicial capacity. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - aye
Dr. Saferin - aye
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion carried.

Pursuant to Section 121.22(G)(3), Ohio Revised Code, the Board went into executive session with Mr.
Groeber, Ms. Anderson, Mr. Miller, Ms. Loe, Ms. DeBolt, Mr. Katko, Mr. Schmidt, Ms. Marshall, the Enforcement Attorneys, the Assistant Attorneys General, Ms. Schwartz, Ms. Murray, Ms. Moore, and Mr. Taylor in attendance.

The Board returned to public session.

RATIFICATION OF SETTLEMENT AGREEMENTS

RICHARD RAY MASON, D.O. – STEP I CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Step I Consent Agreement with Dr. Mason. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to ratify carried.

ROBERT EARL SHARROCK, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

Dr. Soin moved to ratify the Proposed Permanent Surrender with Dr. Sharrock. Dr. Schottenstein seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
The motion to ratify carried.

BARRY H. BROOKS, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

Dr. Steinbergh moved to ratify the Proposed Permanent Surrender with Dr. Brooks. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to ratify carried.

LAWRENCE WILLIAM KONST, D.O. – PERMANENT WITHDRAWAL OF APPLICATION FOR OSTEOPATHIC MEDICAL LICENSURE

Dr. Steinbergh moved to ratify the Proposed Permanent Withdrawal with Dr. Konst. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to ratify carried.
**NABILA SAEED BABAR, M.D. – CONSENT AGREEMENT**

**Dr. Soin moved to ratify the Proposed Consent Agreement with Dr. Babar. Dr. Schottenstein seconded the motion.** A vote was taken:

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<tr>
<th>ROLL CALL:</th>
<th>Dr. Rothermel</th>
<th>- abstain</th>
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<td></td>
<td>Dr. Saferin</td>
<td>- abstain</td>
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<td></td>
<td>Mr. Giacalone</td>
<td>- aye</td>
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<td>Dr. Steinbergh</td>
<td>- nay</td>
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<td></td>
<td>Dr. Soin</td>
<td>- aye</td>
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<td></td>
<td>Mr. Gonidakis</td>
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<td>Dr. Sethi</td>
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<td>Mr. Kenney</td>
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<td>Dr. Schachat</td>
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<td>Dr. Schottenstein</td>
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<td>Dr. Edgin</td>
<td>- aye</td>
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The motion to ratify did not carry.

**JAMES C. ENGLISH, M.D. – CONSENT AGREEMENT**

**Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Dr. English. Dr. Soin seconded the motion.** A vote was taken:

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<tr>
<th>ROLL CALL:</th>
<th>Dr. Rothermel</th>
<th>- abstain</th>
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<td></td>
<td>Dr. Saferin</td>
<td>- abstain</td>
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<td>Mr. Giacalone</td>
<td>- aye</td>
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<td>Dr. Steinbergh</td>
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<td>Dr. Soin</td>
<td>- aye</td>
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<td>Mr. Gonidakis</td>
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<td>Dr. Sethi</td>
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<td>Mr. Kenney</td>
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<td>Dr. Schachat</td>
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<td>Dr. Schottenstein</td>
<td>- aye</td>
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<td>Dr. Edgin</td>
<td>- aye</td>
</tr>
</tbody>
</table>

The motion to ratify carried.

**CITATIONS AND ORDERS OF SUMMARY SUSPENSION, IMMEDIATE SUSPENSION, AND AUTOMATIC SUSPENSION**

**Dr. Steinbergh moved to send the Notice of Summary Suspension and Opportunity for Hearing to Joseph Franklin Daugherty, III, M.D. Dr. Soin seconded the motion.** A vote was taken:
ROLL CALL:
Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to send carried.

Dr. Steinbergh moved to send the Notice of Summary Suspension and Opportunity for Hearing to Dawn Nicole Sellheim, L.M.T. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:
Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to send carried.

Dr. Steinbergh moved to send the Notices of Opportunity for Hearing to the following: David Mark Colley, II, M.T.; and Jerry Mitchel Hahn, M.D. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:
Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
The motion to send carried.

RULES & POLICIES

Dr. Steinbergh moved to approve the Findings and Order rescinding current Rule 4731-11-04, and adopting Rules 4731-11-04 as a new rule. Dr. Steinbergh further moved that the adopted rule be final filed with an effective date of February 29, 2016. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: Dr. Rothermel - aye
Dr. Saferin - aye
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion carried.

OPERATIONS REPORT

**Human Resources:** Mr. Groeber stated that positions have been posed for full-time nurse reviewers for the Standards Review and Intervention Unit. Mr. Groeber stated that Ms. Murray is doing a good job managing the unit with the current temporary staff.

**Budget:** Mr. Groeber stated that the Board’s costs are up, but not to the extent that they outstrip increases in revenue. The Board currently cash balance is approximately $4,300,000. Mr. Groeber noted that the increase in operating costs was due to a $217,000 purchase towards development of the Board’s new e-License system. Mr. Groeber stated that this investment will provide for immediate access to resources which will allow the Board to complete the project much more quickly.

**Information Technology:** Mr. Groeber stated that the $217,000 purchase previously mentioned was for Phase 2.3, which will allow for the migration of all complaints to the new system by the end of February or in early March. Mr. Groeber stated that Mr. Miller and the staff have done an excellent job testing the new system and pushing it to its optimal level.

**Communications and Outreach:** Mr. Groeber stated that the Board’s communications and outreach activities are included in the Operations Report.
Agency Operations: Mr. Groeber stated that there are currently 1,949 open complaints, a 1.5% increase from last month.

Mr. Groeber stated that the Licensure Section issued 12% more osteopathic and allopathic medical licenses in January 2016 compared to January 2015. The total number of licenses issued increased by 31%. Mr. Groeber noted that the average time to issue licenses was 41 days, compared to 99 days two years ago.

Mr. Groeber stated that the number of open complaints is down in Investigations, Enforcement, Standards Review and Intervention, and the Hearing Unit.

Federation of State Medical Boards 2016 Annual Meeting: Mr. Groeber stated that the Finance Committee has recommended Dr. Rothermel, Dr. Steinbergh, Mr. Miller, and Mr. Fais to attend this year’s Annual Meeting of the Federation of State Medical Boards (FSMB) as non-scholarship attendees.

Dr. Saferin moved to approve that Kim G. Rothermel, MD and Anita M. Steinbergh, DO, attend the 2016 annual meeting of the FSMB as their attendance at the meeting is in connection with their responsibilities as members of the State Medical Board of Ohio. Dr. Saferin further moved to approve that David Fais and Michael K. Miller attend the 2016 annual meeting of the FSMB as their attendance at the meeting is in connection with their responsibilities as, and is related to their positions as, Deputy Directors of the State Medical Board of Ohio. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:  
Dr. Rothermel - aye  
Dr. Saferin - aye  
Mr. Giacalone - aye  
Dr. Steinbergh - aye  
Dr. Soin - aye  
Mr. Gonidakis - aye  
Dr. Sethi - aye  
Mr. Kenney - aye  
Dr. Schachat - aye  
Dr. Schottenstein - aye  
Dr. Edgin - aye

The motion carried.

Mr. Groeber noted that he and Mr. Gonidakis have already been approved to attend the meeting as scholarship recipients.

Board Retreat: Mr. Groeber stated that the Board’s next retreat is scheduled for March 10, 2016, with a soft start of 8:00 a.m. Suggestions for topics of discussion include the components of settlement agreements, the One-Bite rule, and the mental health questions on licensure and renewal applications. In addition, Mr. Groeber stated that Mr. Giacalone wished to discuss the possibility of holding Medical Board
meetings in other locations.

Mr. Giacalone elaborated that when he served on the Ohio Board of Pharmacy, that Board held one meeting per year at an Ohio pharmacy school. Mr. Giacalone stated that the program was well-received and was beneficial to the pharmacy students. Mr. Giacalone suggested that the Medical Board should consider a similar program of holding meetings at Ohio medical schools that are willing to provide a suitable location.

Dr. Steinbergh stated that over the years the Board has discussed holding meetings in other locations. Dr. Steinbergh agreed with Mr. Giacalone that the Board should consider this again and suggested that the Board should discuss this with the deans of first and second year students for the medical schools. Dr. Steinbergh noted that one potential downside to holding meetings in other locations would be loss of office support for staff who may need to develop alternative orders and perform other clerical duties on the spot.

Dr. Rothermel suggested that an addictionologist be invited to the March 10 retreat to discuss addiction treatment issues, as has been done in the past. Dr. Steinbergh agreed and stated that an addictionologist can update the Board on recent advances in that field.

2015 Financial Disclosure Statements: Mr. Groeber reminded the Board members that financial disclosure statements are due at the Ohio Ethics Commission by May 15, 2016.

REPORTS BY ASSIGNED COMMITTEES

FINANCE COMMITTEE

MEDICAL BOARD JOURNAL

Dr. Schottenstein stated that the Medical Board journal will launch in March and will feature stories about a diversity of physicians from different regions of the state and both urban and rural areas. Dr. Schottenstein stated that the journal’s stories are written by staff writers at City Scene and are approved by Mr. Groeber.

FINING AUTHORITY

Dr. Schottenstein stated that there are currently two fines pending for payment to the Medical Board, which are a result of the Board’s authority to fine for violations of pain management clinic rules and not from the more recently-acquired general fining authority. One pending fine for $5,000 is owed by a physician who has gone to Pakistan, and therefore it is uncertain if the Board will be able to contact him in the future. The other pending fine, for $20,000, is owed by a physician whose medical license was permanently revoked, and so collection of that fine may also be problematic. Dr. Schottenstein briefly outlined the collections process, in which the practitioner has 30 days to pay the fine in full to the Medical Board, after which the matter is forwarded to the Attorney General’s office with additional fees attached. The Attorney General’s office has authority to negotiate a payment plan for up to twelve months.
Mr. Kenney opined that the Board should explore the possibility of offering its own payment plans to fined respondents without handing the matter to the Attorney General’s office. Mr. Groeber opined that the Medical Board should not become a collection agency. Mr. Groeber pointed out that the Attorney General’s office already has an excellent mechanism for managing these situations and tools at their disposal to follow-up with licensees who owe fines and to take additional action if needed. Mr. Kenney opined that if fines are owed to the Medical Board, then the Board becomes a collection agency by default.

Dr. Rothermel commented that it can be problematic when the Board fines a respondent and permanently revokes their license, it may be very difficult to collect the fine since the Board has removed the means for the respondent to earn the required funds. Mr. Kenney opined that when deciding an appropriate fine in a given case, the ability of the respondent to pay should not be considered. Mr. Gonidakis appreciated the Board members’ concerns and stated that the Board’s decisions regarding fines should be based on each case’s unique circumstances.

POLICY COMMITTEE

RULES FOR REVIEW BY THE BOARD

Dr. Steinbergh moved to approve the proposal that current Rule 4731-1-12 and adopt new Rule 4731-1-12, as drafted, to be filed with the Common Sense Initiative Office. Dr. Steinbergh further moved to approve amended Rules 4731-1-16 and 4731-28-01 for filing with the Common Sense Initiative Office. Dr. Steinbergh further moved that Rule 4731-11-08 be filed with the Common Sense Initiative Office as a “no change” rule. Dr. Steinbergh further moved to approve the rules in Chapter 4731-17, Ohio Administrative Code, and Chapter 4731-19, Ohio Administrative Code, to be filed with the Common Sense Initiative Office. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:  
Dr. Rothermel - aye  
Dr. Saferin - aye  
Mr. Giacalone - aye  
Dr. Steinbergh - aye  
Dr. Soin - aye  
Mr. Gonidakis - aye  
Dr. Sethi - aye  
Mr. Kenney - aye  
Dr. Schachat - aye  
Dr. Schottenstein - aye  
Dr. Edgin - aye

The motion carried.

LEGISLATIVE UPDATE

Administrative Medical License: Mr. LaCross stated that that matter will be brought to the Licensure Committee for discussion in the near future.
Podiatrist Licensure: Mr. LaCross stated that this legislation should be introduced into the legislature soon and he asked the Board members to provide their comments on the topic to him.

Physician Assistants: Mr. LaCross stated that under currently law a physician assistant who had previously been licensed in Ohio without prescriptive authority who has let their Ohio license lapse and has since practiced in a state with prescriptive authority cannot have prescriptive authority in Ohio if they restore their Ohio license. Dr. LaCross stated that this is inconsistent with the intention of the recent physician assistant law and that language is being drafted to correct this matter.

Advanced Practice Registered Nurses: Mr. LaCross stated that the pending legislation on Advanced Practice Registered Nurses (APRN) has had its third hearing in the House of Representatives. Mr. LaCross stated that the Ohio State Medical Association and some other organizations have testified against this legislation because it removes the collaboration between physicians and APRN’s and could result in increasing prescriptions for antibiotics and controlled substances.

Surgical Technicians: Mr. LaCross stated that hearings have not yet been scheduled for the surgical technician licensure legislation.

LICENSURE COMMITTEE

CHAPTER 4731-12, OHIO ADMINISTRATIVE CODE, PODIATRIC LICENSURE RULES

Dr. Saferin stated that the Licensure Committee reviewed the podiatric licensure rules for clarity and to determine whether the language reflects the current processes and procedures. The Licensure Committee agreed to send the rules to interested parties to obtain public comment.

COMPLIANCE COMMITTEE

Dr. Steinbergh stated that on January 13, 2016, the Compliance Committee met with Thomas B. Benz, M.D.; Nathan B. Frantz, D.O.; Julio C. Galindo, M.D.; Elise R. Hoff, M.D.; Mark E. Hostettler, M.D.; Nicholas L. Pesa, M.D.; and Florencia A. Riel-Guzman, M.D., and moved to continue them under the terms of their respective Board actions. The Compliance Committee also accepted Compliance staff’s report of conferences on December 7 and 8, 2015.

TREATMENT PROVIDER APPLICATION REVIEWS

Dr. Steinbergh moved to approve the Application for Certificate of Good Standing as a Treatment Provider for Impaired Practitioners from Arrowhead Behavioral Health. Dr. Steinbergh further moved to approve the renewal applications for a Certificate of Good Standing from Northland – the Ridge, Northland Intervention, and Shepherd Hill Hospital. Dr. Saferin seconded the motion.

Mr. Kenney opined that every treatment provider facility should be inspected and a report should be provided to the Board prior to approval of a Certificate of Good Standing. Mr. Kenney stated that he had
concerns after he had an opportunity to see some treatment provider facilities. Mr. Schmidt stated that the Board had at one time conducted such inspections and he had participated in that process. Since that time, the Board has adopted rules requiring the treatment facilities to be accredited or certified by other entities which inspect the facilities. Mr. Schmidt stated that while inspection of equipment facilities may occur, it is much more difficult to obtain information on treatment issues that would be informative to the Board. Mr. Schmidt further noted that federal confidentiality laws for drug and alcohol treatment also complicate inspection of treatment practices.

Dr. Rothermel stated that the Compliance Committee has discussed these issues and noted that the Board receives annual reports from each approved treatment provider. Dr. Rothermel stated that the Compliance Committee has suggested that a physician Board member and a member of the Board’s Compliance staff perform inspections and also talk to the facilities administration about how they evaluate impaired practitioners and what happens on a daily basis during treatment.

Mr. Gonidakis thanked the Board members for their statements on this topic and noted that further discussion will occur at the Board’s March 10, 2016 Retreat.

Dr. Steinbergh stated that the current applicants have been recommended for approval by the Compliance Committee.

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

ROLL CALL:  
Dr. Rothermel - aye  
Dr. Saferin - aye  
Mr. Giacalone - aye  
Dr. Steinbergh - aye  
Dr. Soin - aye  
Mr. Gonidakis - nay  
Dr. Sethi - nay  
Mr. Kenney - nay  
Dr. Schachat - aye  
Dr. Schottenstein - aye  
Dr. Edgin - aye  

The motion carried.

The Board recessed at 12:00 p.m. and resumed the meeting at 12:55 p.m.

TELEMEDICINE PRESENTATIONS

Mr. Gonidakis stated that House Bill 188 requires the State Medical Board to adopt rules governing the requirements for a physician to prescribe or otherwise provide a prescription drug to a person on whom the physician has never conducted a physical examination and who is at a location remote from the physician, including initial telemedicine visits. The rules shall authorize a physician prescribing non-controlled
substances to establish a physician-patient relationship by the use of appropriate technology that permits, in a manner that is consistent with the minimal standard of care for in-person care, a medical evaluation and the collection of relevant clinical history as needed to establish a diagnosis, identify any underlying conditions and identify any contraindications to the treatment that is recommended or provided. The State Medical Board is required to adopt the initial rules by mid-March 2017.

Mr. Gonidakis stated that the Board’s staff reached out to interested parties to provide verbal or written comments to the Board. The written comments have been provided to the Board members in their materials. Mr. Gonidakis stated that today the Board will hear presentations from the following:

- Dr. Peter Rasmussen of the Cleveland Clinic
- Dr. Alan Roga of Teledoc
- Candace Novak, Dr. Anya Sanchez, and Pam Kimmel of the University of Cincinnati Health
- Dr. F. Richard Heath of the University of Pittsburgh Medical Center.

Each presenter had an opportunity to provide a ten minute presentation to the Board on their respective telemedicine programs. Each presentation was followed by questions from the Board.

**Dr. Rasmussen, Cleveland Clinic:** Responding to questions from Dr. Steinbergh, Dr. Rasmussen stated that all of the neurologists who participate in the Cleveland Clinic’s tele-stroke treatment program are board-certified stroke neurologists and are licensed in Ohio, Florida, and Pennsylvania. Dr. Rasmussen stated that the Cleveland Clinic does not favor using telephone-only for interactions with new patients and that the addition of video is invaluable in creating the proper physician/patient relationship.

Mr. Gonidakis asked about connectivity issues for patients in rural areas. Dr. Rasmussen agreed that connectivity can be an issue in some rural areas, but noted that Wi-Fi is available in such areas.

Dr. Schachat asked how often a physician in the Cleveland Clinic’s program instructs the patient to go somewhere to be physically examined by a physician. Dr. Rasmussen replied that while the video platform is a very useful tool in diagnosing a patient’s symptoms, the patient is referred to a facility for additional testing in about 5% of cases.

Responding to questions from Dr. Schottenstein, Dr. Rasmussen stated that patients are charged $49 for Express Care visits. Dr. Rasmussen stated that a number of insurers in Ohio provide that as a benefit with a co-pay.

Responding to questions from Dr. Sethi, Dr. Rasmussen stated that in some cases the stroke neurologists can manage two patients simultaneously, much the same as an emergency medicine physician may manage more than one patient in an emergency department. Dr. Rasmussen stated that the Cleveland Clinic’s system has a triple-redundant back-up system consisting of a primary neurology, a back-up neurologist, and a neuro-intensive care faculty staff physician as a third layer of coverage.

**Dr. Roga, Teledoc:** Responding to questions from Dr. Schottenstein, Dr. Roga acknowledged that use Teledoc’s service establishes a physician/patient relationship but Teledoc physicians do not act as primary
care physicians. Dr. Roga likened this situation to emergency medicine or a cross-coverage model in which the emergency physician or cross-covering physician provides access to high-quality, safe medical care without continuing in a primary care relationship as the patient’s sole provider. Dr. Roga stated that about 92% of patients using Teledoc have their issues resolved and the remaining 8% are referred to appropriate physicians. For example, a patient needing a controlled substance prescription would be referred because Teledoc does not provide controlled substance prescriptions. Dr. Roga stated that Teledoc only works through a plan sponsor such as a health plan, employer, or hospital system, and so Teledoc works with a contained pool of patients rather than a direct consumer program and the plan member would have access to a primary care referral if needed.

Responding to questions from Dr. Rothermel, Dr. Roga stated that patients can interact with Teledoc up to 72 hours after their visit. Dr. Roga stated that if a patient had a reaction to an antibiotic prescribed from Teledoc, that patient can be referred to an appropriate level of care.

Dr. Steinbergh expressed concern about a physician developing a relationship with a new patient strictly by telephone, which is very different from telephone contact with a patient that the physician has a pre-existing relationship with. Dr. Steinbergh opined that a proper physician/patient relationship cannot be established by telephone. Dr. Steinbergh asked how a physician to whom Teledoc refers a patient can accept responsibility for the patient.

Dr. Roga responded that the situation is similar to a cross-coverage model in which a physician will have another physician provide cross-coverage when the physician is unavailable; in such a situation, the covering physician has little knowledge of the patient. Dr. Steinbergh disagreed, stating that while the covering physician may not know the patient, the primary physician and the covering physician will have a relationship and an agreement to provide coverage. Dr. Roga stated that many physician practices are now conglomerated into large organizations and physicians often have no relationship with their covering physician. Dr. Roga submitted that Teledoc’s model is superior because the physician will always have access to electronic medical records, interacts in a safe and effective manner, provides medical information to the primary physician, and is available 24 hours a day and 365 days a year. Dr. Roga stated that Teledoc has had 1,000,000 e-visits with no malpractice claims and no bad outcomes as shown by an extensive Quality Assurance program. Dr. Roga added that physicians can see the details of rashes and lesions better on a snap picture than live video due to broadband and connectivity issues.

Responding to questions from Mr. Giacalone, Dr. Roga stated that about 60% of Teledoc visits are by telephone with some sort of support mechanism such as snap picture, while about 40% of visits are by interactive video. Dr. Roga stated that the Core of Teledoc’s suite of services is the acute general medical services, which is similar to urgent care. Other services are behavioral health and dermatology. Dr. Roga stated that Teledoc has protocols to prevent becoming a patient’s de facto primary care provider; specifically, if a patient has had two Teledoc visits within 30 days or three Teledoc visits within six months, Teledoc will work through the plan sponsor to help the patient establish primary care with a physician.

Dr. Steinbergh asked what type of diagnostic tools Teledoc physicians can use over a telephone. Dr. Roga stated that Teledoc practices under the same community standards that are seen in the cross-coverage
model, in addition to such diagnostic tools as a snap picture.

**Dr. Sanchez, University of Cincinnati Health:** Responding to questions from Mr. Giacalone, Dr. Sanchez stated that University of Cincinnati Health takes the position that the physician/patient relationship cannot be established by telephone because a physical examination is very important for a patient’s initial interaction with a physician. Dr. Sanchez stated that person-to-person interaction establishes important aspects of the relationship that are difficult to quantify, such as trust. Dr. Sanchez stated that the technology may someday evolve to enable replication of an in-person examination, but that technology does not exist yet.

Dr. Steinbergh stated that the Board is dedicated to patient protection and it is refreshing to see that University of Cincinnati Health is consistent with the Board’s feelings on the subject of telemedicine.

**Dr. Heath, University of Pittsburgh Medical Center:** Dr. Rothermel stated that she appreciates the University of Pittsburgh Medical Center’s (UPMC) efforts in not over-using antibiotics. Dr. Rothermel asked about UPMC’s protocols regarding diagnosis of conditions such as strep throat and urinary tract infections, as well as protocols for when symptoms do not resolve within a certain time. Dr. Heath replied that for possible strep throat, UPMC uses the Centor McIsaac scoring criteria and does not prescribe antibiotics when the score is low. Dr. Heath acknowledged that mononucleosis can sometimes mimic the symptoms of strep throat, but stated that this is difficult to discover even in an in-person visit at most physician offices and urgent care centers. Regarding urinary tract infections, Dr. Heath stated that diagnosis of the condition is largely based on presenting symptoms, the physician always has the opportunity to ask for additional information beyond the standard questionnaire if another diagnosis is suspected. Dr. Heath also stated that the physician can refer to an in-person examination if that is warranted.

Dr. Steinbergh asked if telemedicine visits to UPMC is accomplished by telephone. Dr. Heath responded that it is an asynchronous questionnaire and in some cases the physician will call the patient on the telephone to get more information or a video visit will be scheduled within a few minutes. Dr. Heath stated that a video visit is accomplished by sending the patient a secure video plug-in, allowing the patient and the physician to speak to each other via secure video. Dr. Heath stated that UPMC’s referral base includes physicians who are employed by UPMC in the Pittsburgh region, independent physicians who practice at UPMC hospitals, and UPMC health plan members who may live in Pennsylvania, Ohio, West Virginia, or Maryland.

Mr. Gonidakis thanked Dr. Rasmussen, Dr. Roga, Dr. Sanchez, and Dr. Heath for speaking with the Board and their presentations have been helpful to the Board as it continues to address this issue.

Dr. Schachat exited the meeting at this time.
REPORTS AND RECOMMENDATIONS

AMANDA LYNN PADGITT, L.P.N.

Ms. Anderson stated that the Board considered the matter of Ms. Padgitt earlier in the meeting. Ms. Anderson noted that Ms. Padgitt had filed a timely request to address the Board, but she had not been present at that time. Ms. Anderson informed the Board that Ms. Padgitt had received a letter from the Board which erroneously instructed her to be at the meeting by 1:00 in order to make her address. Ms. Anderson stated that Ms. Padgitt has now arrived at the meeting. Ms. Anderson stated that if the Board so wishes, it could choose to reconsider this matter and give Ms. Padgitt an opportunity to address the Board.

Dr. Steinbergh moved to reconsider the matter of Amanda Lynn Padgitt, L.P.N. Dr. Soin seconded the motion. A vote was taken:

<table>
<thead>
<tr>
<th>ROLL CALL</th>
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<tbody>
<tr>
<td>Dr. Rothermel</td>
<td>abstain</td>
</tr>
<tr>
<td>Dr. Saferin</td>
<td>abstain</td>
</tr>
<tr>
<td>Mr. Giacalone</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Soin</td>
<td>aye</td>
</tr>
<tr>
<td>Mr. Gonidakis</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Sethi</td>
<td>aye</td>
</tr>
<tr>
<td>Mr. Kenney</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Schottenstein</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Edgin</td>
<td>aye</td>
</tr>
</tbody>
</table>

The motion to reconsider carried.

Mr. Gonidakis stated that a request to address the Board has been timely filed by Ms. Padgitt. Five minutes will be allowed for that address.

Ms. Padgitt stated that she has made mistakes throughout this process and she apologized for those mistakes. Ms. Padgitt stated that she became a nurse because she wanted to help people and that she went to massage therapy school because she wanted to continue helping people in a different way. Ms. Padgitt stated that in her 15 years as a nurse she never took any medications from anyone. Ms. Padgitt stated that she would like the opportunity to practice massage therapy and she would do anything to assure the Board that she is worthy of practicing that profession.

Mr. Gonidakis asked if the Assistant Attorney General would like to respond. Mr. Wakley stated that he would like to respond.

Mr. Wakley opined that Ms. Padgitt was honest in her hearing and that she has a genuine desire to become a massage therapist. Mr. Wakley also opined that the Board has legitimate concerns regarding the matters that led to Ms. Padgitt’s issues with the Board of Nursing. Mr. Wakley suggested that the Board has three options:
Deny Ms. Padgitt’s application, then reexamining the case if and when Ms. Padgitt reapplies to see if a chemical dependency evaluation is warranted at that time;

Grant Ms. Padgitt’s application, then suspend her massage therapy license until she has an active nursing license; or

Grant Ms. Padgitt’s application and simply order a period of suspension.

Mr. Wakley recommended the second option. Mr. Wakley noted that in order to work as a nurse, Ms. Padgitt’s Consent Agreement with the Board of Nursing requires her to demonstrate six months of sobriety, six months of participation in a 12-step program, and other similar provisions. Mr. Wakley stated that this would address the Board’s concerns regarding chemical dependency.

Dr. Steinbergh moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order in the matters of Amanda Lynn Padgitt, L.P.N. Dr. Soin seconded the motion.

Mr. Gonidakis stated that he will now entertain discussion in the above matter.

Dr. Soin briefly reviewed the Board’s prior discussion and reiterated the Board’s desire to ensure that Ms. Padgitt has no active impairment issues. Dr. Steinbergh stated that although the Board did not charge Ms. Padgitt with chemical dependency, the hearing record is replete with red flags that cannot be ignored. Dr. Steinbergh stated that it is not unusual for the Board to find evidence for something in a hearing record when the original citation had been for something else.

Dr. Steinbergh stated that she would prefer to grant Ms. Padgitt’s application and indefinitely suspend the license with a chemical dependency evaluation being a condition for reinstatement. Dr. Steinbergh also considered Mr. Wakley’s suggestion to grant and the suspend Ms. Padgitt’s license until her nursing license is active again, though Dr. Steinbergh noted that Ms. Padgitt is not currently pursuing that route. Dr. Steinbergh stated that the Board had initially decided to deny Ms. Padgitt’s application so that she can reapply and have an opportunity to undergo a chemical dependency evaluation.

Mr. Gonidakis stated that if the Board denies Ms. Padgitt’s application, she would be able to reapply as early as tomorrow and to restart the process in a way in which the Board can help her achieve her goal of licensure.

Dr. Steinbergh moved to amend the Proposed Order to deny Ms. Padgitt’s application. Dr. Schottenstein seconded the motion.

Mr. Kenney asked if the issue of chemical dependency would be addressed if Ms. Padgitt reapplies for licensure. Dr. Steinbergh stated that the Board is indicating today through its discussion that a chemical dependency evaluation could be part of Ms. Padgitt’s reapplication process. Ms. Anderson stated that if Ms. Padgitt reappplies, her application will be reviewed at that time and a chemical dependency evaluation may be warranted.
A vote was taken on Dr. Steinbergh’s motion to amend:

ROLL CALL: Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Amanda Lynn Padgitt, L.P.N. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to approve carried.

PROBATIONARY REQUESTS

Mr. Gonidakis advised that at this time he would like the Board to consider the probationary requests on today’s consent agenda. Mr. Gonidakis asked if any Board member wished to discuss a probationary request separately. Mr. Giacalone stated that he would like to discuss the probationary request of Ronald G. Verrilla, D.P.M., separately. Dr. Steinbergh stated that she would like to discuss the probationary requests of Jerome A. McTague, M.D., and John Thomas Hibler, D.O., separately.

RONALD G. VERRILLA, D.P.M.

Mr. Giacalone stated that Dr. Verrilla is requesting approval of a practice plan. Mr. Giacalone clarified
that even though the Board will approve Dr. Verrilla’s practice plan, Dr. Verrilla still cannot practice until he passes the National Board of Podiatric Medical Examiners (NBPME) examination.

JEROME A. MCTAGUE, M.D.

Dr. Steinbergh stated that the documentation provided to the Board erroneously states that Dr. McTague is requesting approval of Intensive Course in Medical Record Keeping with Individual Preceptorships to fulfill his ethics course requirement. Dr. Steinbergh asked that the record be corrected to show that Dr. McTague is requesting approval of the course to fulfill his medical record-keeping requirement.

JOHN THOMAS HIBLER, D.O.

Dr. Steinbergh commented that she is very pleased to see that Dr. Hibler has successfully completed his residency and has created a new professional life for himself. Dr. Steinbergh stated that Dr. Hibler has had a difficult time, but he has completed everything the Board asked of him. Dr. Steinbergh congratulated Dr. Hibler for his accomplishment.

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

- To grant Deborah L. Cook, D.P.M.’s request for approval of the online course Risk Management Essentials for Physicians; Documentation, offered by MedRisk e-Learning Services, to fulfill the medical record-keeping course requirement;

- To grant Christopher S. Croom, M.D.’s request for permission to administer, personally furnish, and possess controlled substances;

- To grant Jesse Michael Ewald, M.D.’s, request for approval of Intensive Course in Controlled Substance Prescribing: Pain, Anxiety, Insomnia, offered by Case Western Reserve University, required prior to reinstatement; and approval of Intensive Course in Medical Ethics, Boundaries, and Professionalism, offered by Case Western Reserve University, required prior to reinstatement;

- To grant Julio C. Galindo, M.D.’s request for approval of Intensive Course in Medical Documentation: Clinical, Legal, and Economic Implications for Healthcare Providers, offered by Case Western Reserve University, required within the first year of probation;

- To grant John Thomas Hibler, D.O.’s request for termination of the practice limitation to participation in a post-graduate training program;

- To grant Timothy M. Hickey, M.D.’s request for approval of Medical Record Keeping with Individual Preceptorships, offered by Case Western Reserve University, to fulfill the medical record-keeping course requirement; and approval of Controlled Substance Prescribing: Pain, Anxiety, Insomnia, offered by Case Western Reserve University, to fulfill the controlled substance prescribing course requirement;
To grant James T. Lutz, M.D.’s request for approval of Medical Record Keeping Seminar, administered by the Center for Personalized Education for Physicians, to fulfill the medical record-keeping course required for reinstatement; and approval of Intensive Course in Controlled Substance Prescribing: Pain, Anxiety, Insomnia, administered by Case Western Reserve University, to fulfill the controlled substance prescribing course required for reinstatement;

To grant Joseph Francis Lydon, Jr., M.D.’s request for approval of Mohsen Vazirian, M.D., to serve as the new treating psychiatrist;

To grant Michael C. Macatol, M.D.’s request for approval of David Spears, D.O., to serve as the monitoring physician; and determination of the frequency and number of charts to be reviewed at ten charts per month;

To grant Jerome A. McTague, M.D.’s request for approval of Intensive Course in Medical Record Keeping with Individual Preceptorships, administered by Case Western Reserve University, to fulfill the medical record-keeping requirement;

To grant Dennis A. Patel, M.D.’s request for approval of Andrew Shirk, D.O., to serve as the monitoring physician; determination of the frequency and number of charts to be reviewed at 10 charts per month; reduction in drug and alcohol rehabilitation meeting attendance to two per week with a minimum of 10 per month; and discontinuance of the drug log and audit and assay requirements;

To grant Lawrence M. Rubens, M.D.’s request for reduction in psychiatric treatment sessions to every six months; and reduction in drug and alcohol rehabilitation meeting attendance to two per week with a minimum of ten per month;

To grant Carol G. Ryan, M.D.’s request for approval of a new practice plan;

To grant Ronald G. Verrilla, D.P.M.’s request for approval of Robert B. Van Court, D.P.M., to serve as the new monitoring physician; and determination of the frequency and number of charts to be reviewed at ten charts per week; and approval of a practice plan;

To grant Gretchen L. Weber, M.D.’s request for approval of Thomas H. Diehl, M.D., to serve as the monitoring physician; and determination of the frequency and number of charts to be reviewed at ten charts per month; and

To grant Mark Aaron Weiner, D.O.’s request for approval of Kettlie J. Daniels, M.D., to serve as the new treating psychiatrist.

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

ROLL CALL: Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye (abstain in the matter of Dr. Verrilla)
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion carried.

RESTORATION REQUEST

TIMOTHY MICHAEL HICKEY, M.D.

Dr. Steinbergh moved that the request for the restoration of the license of Timothy Michael Hickey, M.D., be approved, effective immediately, subject to the probationary terms and conditions as outlined in the January 14, 2015 Order for a minimum of three years. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion carried.

FINAL PROBATIONARY APPEARANCE

MATTHEW A. COLFLESH, M.D.

Dr. Colflesh was appearing before the Board pursuant to his request for release from the terms of the Board’s Order of January 14, 2015. Mr. Gonidakis reviewed Dr. Colflesh’s history with the Board.

Dr. Steinbergh asked Dr. Colflesh if he would be willing to address the medical students in attendance regarding the events that brought him to the Board’s attention. Dr. Colflesh agreed.

Dr. Colflesh stated that he has practiced internal medicine for 13 years. In 2012, part of Dr. Colflesh’s practice was to serve hospice patients who were located in rural areas and significant distances apart. Dr.
Colflesh stated that he physically examined each patient, but had difficulty getting them prescriptions for controlled substances in a timely manner. At that time, Dr. Colflesh decided to pre-sign prescriptions so that nurses seeing patients could fill in the prescriptions at Dr. Colflesh’s direction. Dr. Colflesh stated that his goal had been to allow his patients to obtain their medications without unnecessary delay to alleviate the pain and suffering of their terminal illnesses. Dr. Colflesh stated that although he had good intentions, his actions were illegal under federal or Ohio state law. Dr. Colflesh advised the students to always take the extra step of determining the legality of their intended actions.

Dr. Soin asked if Dr. Colflesh currently prescribed controlled substances. Dr. Colflesh replied that he does prescribe controlled substances.

**Dr. Steinbergh moved to release Dr. Colflesh from the terms of the Board’s Order of January 14, 2015, effective immediately. Dr. Schottenstein seconded the motion.** A vote was taken:

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<th>ROLL CALL</th>
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<tbody>
<tr>
<td>Dr. Rothermel</td>
<td>abstain</td>
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<tr>
<td>Dr. Saferin</td>
<td>abstain</td>
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<tr>
<td>Mr. Giacalone</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Soin</td>
<td>aye</td>
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<tr>
<td>Mr. Gonidakis</td>
<td>aye</td>
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<tr>
<td>Dr. Sethi</td>
<td>aye</td>
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<tr>
<td>Mr. Kenney</td>
<td>aye</td>
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<tr>
<td>Dr. Schottenstein</td>
<td>aye</td>
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<tr>
<td>Dr. Edgin</td>
<td>aye</td>
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The motion carried.

**MARK C. LEESON, M.D.**

Dr. Leeson was appearing before the Board pursuant to his request for release from the terms of his February 9, 2011 Consent Agreement. Mr. Gonidakis reviewed Dr. Leeson’s history with the Board.

In response to questions from Dr. Steinbergh, Dr. Leeson stated that he currently practices out of an office in Shelby Hospital and works 30 to 35 hours per week. Dr. Leeson stated that he has started to somewhat limit the complexity of his procedures. Dr. Leeson stated that he has no plans to change much of his practice in the near future and will certainly not add work hours.

Dr. Leeson continued that he is actively involved in a 12-step program and a caduceus program. Dr. Leeson stated that he has a sponsor and five sponsees and that he has great support from his Alcoholic Anonymous (AA) friends and colleagues. Dr. Leeson stated that he attends four to five meetings per week and he plans to continue that after his release. Dr. Leeson stated that it is a privilege and an honor to be able to care for patients and that some physicians tend to take that for granted.

Responding to questions from Dr. Schottenstein, Dr. Leeson stated that there are no controlled substances
Dr. Leeson stated that he usually prescribes something like Norco for a patient who is having orthopedic surgery and he is extremely sensitive to a patient’s ability to become addicted. Addressing the medical students in attendance, Dr. Leeson stated that addiction is a disease and about one in ten people will have the ability to become addicted. Dr. Leeson stated that there is a huge epidemic of prescription drug abuse in Ohio and the medical community must get a handle on prescriptions. Dr. Leeson stated that he prescribes for post-operative patients and does not authorize refills. Dr. Leeson stated that if the patient still needs medication about a month after the surgery, he will refer to pain management.

**Dr. Steinbergh moved to release Dr. Leeson from the terms of his February 9, 2011 Consent Agreement, effective immediately. Dr. Soin seconded the motion.** A vote was taken:

ROLL CALL:

- Dr. Rothermel - abstain
- Dr. Saferin - abstain
- Mr. Giacalone - aye
- Dr. Steinbergh - aye
- Dr. Soin - aye
- Mr. Gonidakis - aye
- Dr. Sethi - aye
- Mr. Kenney - aye
- Dr. Schottenstein - aye
- Dr. Edgin - aye

The motion carried.

**PATRICK E. MUFFLEY, D.O.**

Dr. Muffley was appearing before the Board pursuant to his request for release from the terms of the Board’s Order of November 13, 2013. Mr. Gonidakis reviewed Dr. Muffley’s history with the Board.

Responding to questions from Dr. Soin, Dr. Muffley stated that he currently practices outpatient gynecology and prenatal care and that he no longer delivers babies or performed major surgeries. Dr. Muffley stated that he performs minor surgeries at a surgical center. Dr. Muffley stated that he has always had a chaperone in the room when he examines patients, even before his Board Order. Dr. Muffley stated that he still has a Facebook account but it is limited to family and old college friends. Dr. Muffley stated that none of his patients are Facebook friends due to changes he instituted over two-and-a-half years ago.

Dr. Soin opined that this case is a good teaching point for the medical students in attendance, given the rise of social media. Dr. Soin asked if Dr. Muffley would share his experience and insights with the medical students. Dr. Muffley agreed.

Dr. Muffley stated that the students were entering the field of medicine at a dangerous time in regards to the prevalence of social media. Dr. Muffley stated that he came to the Board’s attention to social media contact between a patient and himself which escalated into explicit and inappropriate messaging. Dr. Muffley stated that he was subject to Board discipline even though the inappropriate contact was entirely
electronic. Dr. Muffley commented that he heard a radio advertisement today for a dental office in which patients are able to text with the dentist like a friend instead of like a healthcare provider. Dr. Muffley stated that this represents a slippery slope in terms of proper boundaries. Dr. Muffley speculated that the medical students probably use social media extensively, but he cautioned them to be very careful when communicating with patients in this fashion, or to abstain from doing so at all. Dr. Muffley stated that it is very easy to forget what a physician/patient relationship should look like and to keep the professional and personal relationships separate.

Dr. Schottenstein stated that Dr. Muffley has written a very good report on his physician/patient boundaries course and opined that Dr. Muffley has insight that he did not have before. Dr. Schottenstein felt that Dr. Muffley will make better choices in the future.

Mr. Giacalone asked if Dr. Muffley was still in the process of obtaining hospital privileges. Dr. Muffley replied that he is not actively pursuing hospital privileges at this time. Dr. Muffley stated that one of the severe consequences of his actions is the loss of hospital privileges and insurance companies. Dr. Muffley stated that he will not be appearing before the Board under similar circumstances again. Dr. Muffley thanked the Board’s Compliance staff for the assistance and kindness they have shown him.

**Dr. Soin moved to release Dr. Muffley from the terms of the Board’s Order of November 13, 2013, effective February 21, 2016. Dr. Schottenstein seconded the motion.** A vote was taken:

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<th>ROLL CALL:</th>
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<tbody>
<tr>
<td>Dr. Rothermel</td>
<td>abstain</td>
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<tr>
<td>Dr. Saferin</td>
<td>abstain</td>
</tr>
<tr>
<td>Mr. Giacalone</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Steinbergh</td>
<td>abstain</td>
</tr>
<tr>
<td>Dr. Soin</td>
<td>aye</td>
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<tr>
<td>Mr. Gonidakis</td>
<td>aye</td>
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<tr>
<td>Dr. Sethi</td>
<td>aye</td>
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<tr>
<td>Mr. Kenney</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Schottenstein</td>
<td>aye</td>
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<tr>
<td>Dr. Edgin</td>
<td>aye</td>
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The motion carried.

**CHRIS ALLEN RHOADES, M.D.**

Dr. Rhoades was appearing before the Board pursuant to his request for release from the terms of his February 9, 2011 Consent Agreement. Mr. Gonidakis reviewed Dr. Rhoades’ history with the Board.

Responding to questions from Dr. Steinbergh, Dr. Rhoades confirmed that he had had surgery recently. Dr. Rhoades stated that his surgeon and his primary care physician were aware of his history of chemical dependency. Dr. Rhoades stated that he received appropriate anesthesia during his surgery and afterward he only used non-steroidal anti-inflammatory drugs. Dr. Rhoades stated that besides his surgical anesthesia, he received no other controlled substances. Dr. Rhoades commented that non-steroidal
medications can do a lot.

Dr. Rhoades continued that he currently practices as an oncologist in Lima, Ohio. Dr. Rhoades stated that he has embraced the Alcoholics Anonymous (AA) program and he continues to attend meetings. Dr. Rhoades stated that he intends to continue with AA meetings after his release and commented that he has many friends in AA. Dr. Rhoades stated that he has learned that he is an addict and an alcoholic and, even though he has been sober since June 15, 2010, he will always be an addict and alcoholic. Dr. Rhoades stated that he needs to protect his sobriety daily and that he learned in AA to take one day at a time.

Responding to questions from Dr. Soin, Dr. Rhoades stated that when his addiction to tramadol was at its worst he took up to 24 tramadol tablets per day. Dr. Rhoades stated that he never had seizures or rebound headaches from his use of Tramadol, probably because he built up his use slowly.

Addressing the medical students in attendance, Dr. Rhoades stated that he was in complete denial about his addiction when he was in medical school and he did not know how to ask for help. Dr. Rhoades stated that he has learned two things from his experience. First, Dr. Rhoades would never have recovered without help. Second, people with problems such as addiction should ask for help.

Mr. Kenney noted that Dr. Rhoades has been subject to Board discipline since 2011. Mr. Kenney congratulated Dr. Rhoades on his recovery, but commented that it has not been easy for him for the past five years. Mr. Kenney advised the medical students to remember the consequences of their actions.

Dr. Schottenstein stated that according to the Board’s information, Dr. Rhoades had struggled with “situational depression.” Dr. Rhoades elaborated that after he left recovery, he saw a psychiatrist and a psychologist. Dr. Rhoades was devastated because he had lost his job and his medical license had been suspended for 180 days. After the reinstatement of his license, it took Dr. Rhoades several more months to find employment. For these reasons, Dr. Rhoades’ psychiatrist prescribed an anti-depressant for a short time. Dr. Rhoades recalled that his psychiatrist had called his depression situational. Dr. Rhoades stated that the anti-depressant did not help him much and he only took it for a few months. Dr. Rhoades stated that he has not suffered with depression on a regular basis and he has learned that if he has a difficult time he should call his sponsor, go to an AA meeting, and talk about it. Dr. Rhoades stated that the AA program really works.

**Dr. Steinbergh moved to release Dr. Rhoades from the terms of his February 9, 2011 Consent Agreement, effective immediately. Dr. Soin seconded the motion.** A vote was taken:

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<td>aye</td>
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<td>Mr. Kenney</td>
<td>aye</td>
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Dr. Schottenstein - aye
Dr. Edgin - aye

The motion carried.

ADJOURNMENT

Dr. Steinbergh moved to adjourn the meeting. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

Thereupon, at 3:00 p.m., the February 10, 2016 session of the State Medical Board of Ohio was adjourned.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on February 10, 2016, as approved on March 9, 2016.

Michael L. Gonidakis, President

Kim G. Rothermel, M.D., Secretary

(SEAL)