MINUTES
THE STATE MEDICAL BOARD OF OHIO

December 14, 2016

Michael L. Gonidakis, President, called the meeting to order at 9:58 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.; Robert P. Giacalone; Andrew P. Schachat, M.D.; Michael Schottenstein, M.D.; Richard Edgin, M.D.; and Ronan M. Factora, M.D. The following member was absent: Donald R. Kenney, Sr.

Also present were: Anthony J. Groeber, Executive Director; Kimberly Anderson, Assistant Executive Director; David Fais, Assistant Executive Director; Joseph Turek, Assistant Executive Director; Susan Loe, Director of Human Resources and Fiscal; Sallie J. Debolt, Senior Counsel; William Schmidt, Chief of Investigations; Teresa Pollock, Deputy Director for Communications; Joan K. Wehrle, Education and Outreach Program Manager; Gary Holben, Operations Manager; Rebecca Marshall, Chief Enforcement Attorney; Marcie Pastrick, Mark Blackmer, Gregory Tapocsi, James Roach, and Kimberly Lee, Enforcement Attorneys; Kyle Wilcox and Melinda Snyder, Assistant Attorneys General; R. Gregory Porter, Chief Hearing Examiner; Danielle Blue, Hearing Examiner; Annette Jones and Angela Moore, Compliance Officers; Mitchell Alderson, Administrative Officer; Chantel Scott, Chief of Renewal; Julie Williams, Public Information Officer; Judy Rodriguez, Public Services Manager; Jacqueline A. Moore, Legal/Public Affairs Assistant; and Benton Taylor, Board Parliamentarian.

MINUTES REVIEW
Dr. Steinbergh moved to approve the draft minutes of the November 9, 2016, Board meeting, as written. 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 - abstain
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - 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 genetic counselor applicants listed in Exhibit “A,” the massage therapist applicants listed in Exhibit “B,” the physician
assistant applicants listed in Exhibit “C,” and the physician applicants listed in Exhibit “D,” and to approve the results of the December 2, 2016 Cosmetic Therapy Examinations and to certify as passing and license those receiving a score of 75 or greater on their examination, and to certify as failing and deny licensure to those who received a score of less than 75 on the examination, as listed in the Agenda Supplement. Dr. Rothermel 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - 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: Surinder K. Bansal, M.D.; Adam Patrick Hall, M.D.; Robert Thomas Mitrione, M.D.; and Alexander Ryan Venne, L.M.T. 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - 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: Dr. Rothermel - aye
Dr. Saferin - aye
Dr. Steinbergh - aye
Dr. Soin - aye
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.

SURINDER K. BANSAL, M.D.

Mr. Gonidakis directed the Board’s attention to the matter of Surrinder K. Bansal, M.D. No objections were filed. Ms. Blue was the Hearing Examiner.

Mr. Gonidakis stated that a request to address the Board has been timely filed on behalf of Dr. Bansal. However, the request was not filed in a timely manner. Mr. Gonidakis asked if any Board member wished to make a motion regarding Dr. Bansal’s request to address the Board.

Dr. Steinbergh moved to grant Dr. Bansal’s request to address the Board. 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. Schachat - aye  
Dr. Schottenstein - aye  
Dr. Edgin - aye  
Dr. Factora - aye

The motion carried.

Mr. Gonidakis stated that five minutes will be allowed for Dr. Bansal’s address.

Dr. Bansal was represented by his attorney, Aaron Bensinger.

Mr. Bensinger stated that Dr. Bansal has been licensed as a physician in Ohio since 1974 and has had a flawless record. Mr. Bensinger stated that for the majority of Dr. Bansal’s career he has had an office in
the tougher parts of Lima, Ohio, where the socioeconomic structure makes it difficult for many to make ends meet. Mr. Bensinger stated that Dr. Bansal feels it is important to give back to those who are unemployed or elderly on fixed incomes. Mr. Bensinger noted that 15% of Dr. Bansal’s patients have no insurance and 60% are on Medicaid or Medicare.

Mr. Bensinger continued that Dr. Bansal saw a need in his community in that many of his patients lacked the financial means to purchase simple medications. Consequently, Dr. Bansal obtained seven different types of pharmaceuticals from a relative in India. Mr. Bensinger stated that these medications had been tested and there were no allegations that they contained any improper chemicals. However, the medications had not been approved by the Food and Drug Administration (FDA). Mr. Bensinger stated that the medications were not controlled substances and were fairly benign, consisting of heartburn medications, antibiotics, and similar medications. Mr. Bensinger stated that Dr. Bansal provided these medications to his patients on an as-needed basis. Mr. Bensinger stated that Dr. Bansal has acknowledged that he made a poor decision.

Mr. Bensinger stated that Dr. Bansal pleaded to a Bill of Information and was convicted of a minor misdemeanor, the lowest level of federal offense for which one can be convicted. Mr. Bensinger added that Dr. Bansal fully cooperated with the Board’s investigation and allowed Board investigators to search his office and home without contacting an attorney. Mr. Bensinger noted that Dr. Bansal even contacted the investigators when he received another shipment of medication later that same day following the initial interview. Mr. Bensinger asked the Board to accept the Hearing Examiner’s Proposed Order of a reprimand.

Dr. Bansal reiterated that many of his patients are very poor and had difficulty buying medications. In response, Dr. Bansal contacted his nephew, a physician in India, and arranged to obtain medications directly from there and to assume the cost. Dr. Bansal stated that he had contacted the Ohio Board of Pharmacy and spoke to someone named Mr. Kyle, but Mr. Kyle could not provide any information. Dr. Bansal also stated that he contacted the FDA and they also could not tell him if his actions were right or wrong.

Dr. Bansal continued that the medications were mostly short-term and he either did not charge his patients or he only charged what the medications had cost him. Dr. Bansal stated that he made no financial gains from these actions and he had only wanted to help his patients.

Mr. Gonidakis asked if the Assistant Attorney General wished to respond. Ms. Snyder stated that she wished to respond.

Ms. Snyder stated that Dr. Bansal committed a misdemeanor in the course of practice and he pled guilty to one misdemeanor count of Receipt and Delivery of Adulterated and Misbranded Drugs. This course of conduct occurred from 2012 to 2014 and primarily involved acid reflux, cholesterol, and asthma medications. Ms. Snyder noted that the Board has recently considered several similar cases and the sanctions in those cases ranged from a reprimand to a 60-day suspension. Ms. Snyder stated that Dr. Bansal seems to understand that he committed a violation and he was very forthcoming in his hearing. Ms. Snyder noted that unlike the previous cases, this case does not involve oncology drugs. Ms. Snyder agreed with the Hearing Examiner that Dr. Bansal’s case warrants a reprimand.

Dr. Steinbergh moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Surinder K. Bansal, M.D. Dr. Soin seconded the motion.
Mr. Gonidakis stated that he will now entertain discussion in the above matter.

Dr. Edgin stated that in April 2016 Dr. Bansal was found guilty of a misdemeanor count of Receipt and Delivery of Adulterated and Misbranded Drugs. Dr. Edgin briefly reviewed Dr. Bansal’s medical career, which includes practice in Ohio from 1974 to the present.

Dr. Edgin continued that the crux of Dr. Bansal’s conviction was that he had been using misbranded or mislabeled medications that had no instructions on the packaging. Dr. Edgin noted that among the drugs obtained by Dr. Bansal was Clopidogrel, also known as Plavix, and anti-clotting medication which is not a simple drug. These medications were obtained from a foreign drug wholesaler located in India. Dr. Edgin stated that these drugs were subject to approval by the FDA, but they did not bear a label indicating FDA approval. Dr. Bansal had testified that he had researched the medications and determined that they were safe, but he had not realized that FDA approval was required. Dr. Bansal also testified that he had contacted a company after speaking to someone at the FDA, but they did not seem to be aware that there needed to be laboratory testing on the medications.

Dr. Edgin stated that Dr. Bansal testified several times that in most cases he did not charge his patients for the medications, and when he did charge he only charged what it had cost him to obtain them. Dr. Bansal further testified that he never made a profit or had any intention of making a profit from these medications. Dr. Edgin stated that Dr. Bansal cooperated with the FDA investigation and he was ultimately required to pay a fine of $1,000 plus a $25 charge.

Dr. Edgin stated that Dr. Bansal retired from practice in 2015 and does not plan to return to the practice of medicine. However, Dr. Bansal would like to retain his medical license. Dr. Edgin further noted that Dr. Bansal has never had a disciplinary action from the Board. Mr. Gonidakis asked if Dr. Edgin supports the Proposed Order of reprimand. Dr. Edgin replied that he supports the Proposed Order, though he expressed some concern about the Plavix, which Dr. Edgin reiterated is not a simple drug.

Mr. Giacalone noted for the record that this case involves an alleged violation of 4731.22(B)(11), Ohio Revised Code, the commission of a misdemeanor, and does not involve allegations of practicing below the minimal standards of care. Consequently, Mr. Giacalone’s comments relate to the veracity of Dr. Bansal as a witness and not to the competency of his practice.

Mr. Giacalone stated that Dr. Bansal had testified that Viagra was one of the medications he had imported. Mr. Giacalone commented that Viagra is not a benign drug. Mr. Giacalone also noted that Dr. Bansal had identified another medication as a blood-thinner; Mr. Giacalone stated that this also is not a benign medication.

Mr. Giacalone stated that he struggled with Dr. Bansal’s veracity. Dr. Bansal had testified that he had spoken to someone at the Ohio Board of Pharmacy named Kyle. Mr. Giacalone assumed, but could not be certain, that that individual was Kyle Parker, the former Executive Director of the Board of Pharmacy. Mr. Giacalone found it difficult to believe that Mr. Parker would have nothing to say to Dr. Bansal about the importation of unapproved medications. Dr. Bansal also testified that he had contacted the FDA and he could not recall any situation where he or others were advised by the FDA to use a consultant. Mr. Giacalone stated that in those situations where he has contacted the FDA they have not advised using a consultant. Mr. Giacalone further noted that the drug importation issue was very prominent at that time and information about it had been posted on the FDA website. Mr. Giacalone stated that drug importation
was also the subject of numerous articles at the time, including a 2010 Washington Post story about the problem with Indian manufacturers and counterfeit medications in that country. Yet Dr. Bansal testified that he had researched the issue and found nothing. Mr. Giacalone stated that Dr. Bansal knew about the FDA regulations, as evidenced by his citation and explanation of the pre-market notification regulations – FDA regulations that very few people know about. However, surprisingly, he was unaware of the issues and laws surrounding the highly-publicized topic of the importation of unapproved drugs into the United States.

Based on these statements, Mr. Giacalone questioned Dr. Bansal’s veracity and the appropriateness of only issuing a reprimand.

Ms. Anderson commented that the Board must make its decision in this case based on the Hearing Record.

Dr. Steinbergh stated that she respects Mr. Giacalone’s comments and that she does not disagree with them. However, Dr. Steinbergh felt that a reprimand is appropriate in this case. Dr. Steinbergh credited Dr. Bansal for wanting to help his patients, but she stated that it is clear that physicians cannot import and use unapproved drugs. Dr. Steinbergh stated that giving unlabeled medications to patients without any written instructions other than the physician’s own instructions is very risky behavior. Dr. Steinbergh stated that there was no allegation of a minimal standards violation in this case. However, Dr. Steinbergh stated that this is a minimal standards issue and physicians cannot distribute medications on a whim to help patients. Dr. Steinbergh agreed with the Proposed Order of reprimand.

Mr. Giacalone commented that whether this is or is not a minimal standards case is irrelevant. Mr. Giacalone stated that Dr. Bansal is alleged to have a misdemeanor conviction, a violation of 4731.22(B)(11), Ohio Revised Code. Mr. Giacalone stated that this case should be decided based on the comments that were made.

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

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

The motion to approve carried.

ADAM PATRICK HALL, D.O.

Mr. Gonidakis the Board’s attention to the matter of Adam Patrick Hall, D.O. Objections to Mr. Decker’s Report and Recommendation have been filed and were previously distributed to Board members.
Mr. Gonidakis stated that a request to address the Board has been timely filed on behalf of Dr. Hall. Five minutes will be allowed for that address.

Dr. Hall was represented by his attorney, Matthew Loesch.

Mr. Loesch stated that the primary issues at Dr. Hall’s hearing surrounded his plea to a fourth-degree felony, Attempted Tampering with Evidence, and a fifth-degree felony, Possession of Criminal Tools. Following these pleas, which were accepted by the Lawrence County Court of Common Pleas, Dr. Hall was placed on three years of community control. That community control was transferred to the State of Florida, where Dr. Hall currently resides and practices.

Mr. Loesch opined that the Proposed Order of permanent revocation of Dr. Hall’s Ohio medical license is an extreme and harsh penalty and does not fit the facts of this case. Mr. Loesch emphasized that Dr. Hall’s convictions do not relate to the practice of medicine. Mr. Loesch noted that the Hearing Examiner referred to Section 8(A) of the Board’s disciplinary guidelines, which specifies a guilty plea or finding of guilt to a felony related to the practice of medicine. Mr. Loesch stated that Dr. Hall’s convictions related to his providing a urine sample that could be provided to the Board for testing at a future date when he had planned to be out of the country. Mr. Loesch stated that Dr. Hall acknowledges that this was a mistake, but it did not relate to the practice of medicine.

Mr. Loesch stated that Dr. Hall has been practicing medicine for 15 years and there has never been a complaint related to patient care. Mr. Loesch pointed out that even after the allegations of the criminal case came to light, no governing body has taken any action against him, including the Drug Enforcement Administration, the State of Florida, and the Office of the Inspector General.

Mr. Loesch stated that Dr. Hall is very sorry for what his actions had cost him and his family. Mr. Loesch stated that a permanent revocation of Dr. Hall’s Ohio medical license will likely trigger the same action in Florida. Mr. Loesch stated that this would prevent Dr. Hall for further fulfilling his life’s work and what he enjoys more than anything, which is practicing medicine.

Dr. Hall stated that he has made mistakes and he wakes up every day with regrets and sadness for his actions. Dr. Hall stated that he respects the rules and he has no desire to break them. Dr. Hall stated that he is currently monitored by the State of Florida, is working in an underserved area helping others, and he is trying to move forward from the mistakes of the past. Dr. Hall apologized for his youthful and impulsive action. Dr. Hall stated that he followed the rules when he traveled up to Ohio and he will continue to do so going forward.

Mr. Gonidakis asked if the Assistant Attorney General wished to respond. Mr. Wilcox stated that he wished to respond.

Mr. Wilcox stated that Dr. Hall is now before the Board for the third time in his short career, and each time he has demonstrated behavior that includes committing fraud, lying, and general deceit. Mr. Wilcox stated that now, Dr. Hall is committing felonies. Dr. Hall has argued that his conduct occurred in 2008 and that he is a changed person. However, Mr. Wilcox stated that Dr. Hall has come before the Board on other occasions and said the same thing. Mr. Wilcox stated that Dr. Hall has a pattern of behavior and flaws in his character that remain today. Mr. Wilcox stated that the practice of medicine requires physicians to demonstrate character and the ability to be trusted. Mr. Wilcox stated that Dr. Hall possesses no such character and he continues to commit fraudulent actions after being given multiple
Mr. Wilcox opined that Dr. Hall has shown he cannot be trusted to hold a license to practice medicine in Ohio.

Mr. Wilcox continued that Dr. Hall does not thing the Board should focus on his prior citations and Board actions. Mr. Wilcox disagreed, stating that the Board should focus on them and is required to focus on them. Mr. Wilcox stated the Dr. Hall was expelled from his second residency program in Missouri for lying and for missing pages while on call. The residency program deemed missing pages to be a dereliction of duty, and Dr. Hall then lied when confronted about why he had missed the pages.

Mr. Wilcox stated that when Dr. Hall applied for licensure in Ohio in 2005, the Board granted his application subject to a 30-day suspension and two years of probationary terms. In 2006, while in his third residency program, Dr. Hall falsified a patient chart in order to take medicine from the hospital’s Pyxis system and administer it to himself. As a result, Dr. Hall was expelled from the program. The Board gave Dr. Hall another chance and allowed him to enter into a Consent Agreement which indefinitely suspended his medical license. Dr. Hall’s medical license was reinstated in a 2007 Step II Consent Agreement. Mr. Wilcox stated that Dr. Hall rewarded the Board by committing felonious acts in 2008, for which he was indicted in 2013.

Mr. Wilcox stated that Dr. Hall was convicted of two felonies in Lawrence County, Ohio. While Dr. Hall contends that this does not implicate patient care, Mr. Wilcox asked the Board if this pattern of behavior and deceit implicates the ability to care for patient in Ohio. Mr. Wilcox opined that it does implicate patient care. Mr. Wilcox stated that Dr. Hall has broken contracts with the Board, as repeatedly lied, and has shown that he cannot be trusted with a license in Ohio. Mr. Wilcox agreed with the Proposed Order of permanent revocation for this pattern of inexcusable conduct over many years.

Dr. Steinbergh moved to approve and confirm Mr. Decker’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Adam Patrick Hall, M.D. Dr. Soin seconded the motion.

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

Dr. Factora stated that Dr. Hall was found guilty in the Lawrence County Court of Common Pleas of Attempted Tampering with Evidence, a fourth-degree felony, and Possession of Criminal Tools, a fifth-degree felony. Dr. Factora stated that it is also alleged that his quarterly declarations of compliance submitted to the Board applicable to the time periods of September 15 through September 24, 2008, and March 28 through April 1, 2012 had declared that he was in compliance with his probationary terms.

Dr. Factora continued that Dr. Hall was dismissed from his first residency program in California in 2002 because he did not pass his third-step boards. In 2003 Dr. Hall was terminated from his second residency program in Missouri due to “previous dereliction of duty and subsequence eminent risk to quality of patient care.” In 2004, another training opportunity arose with an anesthesiology residency program in Columbus, Ohio. Dr. Hall was granted an Ohio medical license in 2005. At that time, the Board’s Hearing Examiner stated that, “evidence suggests that Dr. Hall has learned from his mistakes and will be more cautious and forthcoming in the future.”

Dr. Factora stated that in March or April of 2006, Dr. Hall obtained a steroid from a hospital Pyxis system by placing a falsified order in a patient’s chart, and then injected the steroid into his right foot. When this was discovered by the hospital, Dr. Hall was eventually terminated and reported to the Medical Board. Dr. Hall was evaluated at Woodside at Parkside in Columbus, Ohio, and admitted with a diagnosis of
bipolar disorder and supplemented steroid abuse. Dr. Hall was released in August 2006 and fully discharged in September 2006 without medication and was instructed to follow up with psychiatric treatment. In August 2006 Dr. Hall entered into a Step I Consent Agreement with the Medical Board which suspended his medical license indefinitely and imposed other restrictions. In March 2007 Dr. Hall entered into a Step II Consent Agreement which reinstated his medical license, subject to monitoring by the Board.

Dr. Factora stated that Dr. Hall opened a practice in Ironton, Ohio, in 2008. In September 2008, in preparation for a planned visit Italy and Lebanon, Dr. Hall set up a system so that urine specimens could be submitted in absentia from his Ironton office to the Medical Board to comply with random screening. At least one urine specimen was submitted by Dr. Hall’s office to the Board’s designated laboratory while Dr. Hall was overseas. Dr. Hall explained his action as follows:

Because of the intense emotional grief that I was still dealing with … the physical discomfort, couldn’t take the pain medicine, it’s just I made a bad decision. I wanted to see my brothers, and I circumvented the system as a means of convenience. I didn’t want the Board to say ‘no.’"

Dr. Hall also stated, “I was dealing with intense depression, and I couldn’t open up at the meetings.”; “Being told ‘no’ would have just, I think, set me back.”; “So … as a matter of convenience … I went overseas.”; “I think it was better to ask for forgiveness than permission.” Dr. Factora stated that Dr. Hall violated his Step II Consent Agreement by these actions. Dr. Factora stated that his Ironton practice was raided and shut down by local authorities in March 2013. Dr. Hall did not practice medicine from 2013 until early 2016.

Dr. Factora stated that in January 2016 Dr. Hall was convicted of the aforementioned felonies in relation to a scheme to circumvent the Board’s monitoring by arranging for submission of urine specimens in absentia in 2008.

Dr. Factora stated that Dr. Hall was evaluated again in July 2016 by Dr. Debra Barnett. Dr. Barnett disagreed with Parkside’s findings that Dr. Hall had substance abuse disorder involving steroids. Dr. Barnett opined that Dr. Hall should not have had to undergo the resulting five-year monitoring contract. Dr. Hall currently holds a Florida medical license and practices family medicine in Daytona Beach, Florida. Dr. Factora noted that Dr. Hall has never completed a residency.

Dr. Factora noted the following quotes from Dr. Hall regarding explanations for his past behavior:

- I’ve had some situations in the past that I look back and regret, they are the decisions of a young man under stress, and I’ve learned from those. They’re not lost on me.
- In the past, I don’t think that I cared. I think that if personal sabotage or professional sabotage happened, then my out was “I’m in pain. I’ll jump off a bridge, I don’t care about my life.”
- Now, that’s not my rationale. I don’t have that professional saboteur-type mentality. I have things that give me hope to live for.
- I understand that the board has some reluctance in trusting me, but I’m also under a very watchful eye. The court in Ironton has me on a short lease.
Dr. Factora stated that despite mitigating circumstances of Dr. Hall’s chronic pain diagnosis and bipolar disorder, there seems to be a pattern of behavior that reflects a choice to violate rules, regulations, and/or the law for convenience. Dr. Factora stated that because Dr. Hall’s pain or mood disorder were the basis for the rationale behind his behavior, his ability to practice medicine within acceptable standards could also be compromised as a result of either mental or physical impairment. Dr. Factora stated that given Dr. Hall’s pattern of behavior, it is unlikely that the level of trustworthiness will grow over time and he will always require a “watchful eye” and a “short leash.” Dr. Factora opined that this level of monitoring dependence is inappropriate for a licensed physician with the responsibility of independent practice within the law. Therefore, Dr. Factora agreed with the Proposed Order of permanent revocation.

Dr. Schottenstein stated that Dr. Hall referred to his behavior as “impulsive.” Dr. Schottenstein stated that impulsivity implies acting before thinking. Dr. Schottenstein stated that Dr. Hall’s behavior is not so much impulsive as it was reckless; Dr. Hall knew what he was doing was wrong and he did it anyway.

Dr. Schottenstein noted Dr. Hall’s use of the phrase, “It's better to ask forgiveness than seek permission.” Dr. Schottenstein stated that this maxim may hold true at time when independent judgment is required or in a moment of crisis. However, Dr. Schottenstein stated that it is not an appropriate maxim when one is being asked to follow the rules. Dr. Schottenstein stated that when on is being asked to follow the rules, then the maxim is a glib way to couch an attitude of inconsideration and disrespect. Dr. Schottenstein stated that this is a passive-aggressive rationalization of why it is okay to do whatever one wants, with the understanding that you can mouth an apology later. Dr. Schottenstein stated that a licensee who is being monitored by the Board is not being asked to exercise independent judgment, but rather they are being asked to follow the rules.

Dr. Schottenstein continued that the compliance of the Board’s licensees with monitoring for chemical dependency is critical, and compliance is predicated on licensee awareness of the need for integrity during the process and the understanding that there are substantial consequences if that integrity is not exhibited. Dr. Schottenstein stated that this case is potentially an object lesson for other licensees who are being monitored for chemical dependency issues. Dr. Schottenstein added that the Board’s compliance staff works very hard to insure that licensees are working their program diligently and that it would be demoralizing to them if this case was not treated with the utmost seriousness. Dr. Schottenstein opined that a strong sanction is necessary in this case.

Dr. Steinbergh stated that she was a member of the Medical Board in 2005 when Dr. Hall’s first case was considered. At that time, Dr. Hall had applied for an Ohio medical license and had been released from his residency program in Missouri due to failure to answer pages and lying to the program director. Dr. Hall had told the Board that he had learned a lesson about honesty. In that first case, Dr. Steinbergh had favored granting Dr. Hall’s application with only a reprimand. However, other Board members wanted to impose a suspension and probationary terms. Dr. Steinbergh stated that the harsher sanction has turned out to have been the better of those two options.

Dr. Steinbergh stated that today Dr. Hall says the same things about honesty being important to him and that he has learned his lesson. Dr. Steinbergh asked how the members of the Board could be expected to believe that. Dr. Steinbergh stated that it is a privilege, not a right, to be able to care for patients. Dr. Steinbergh agreed with the Proposed Order of permanent revocation.

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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to approve carried.

ROBERT THOMAS MITRIONE, M.D.

Mr. Gonidakis the Board’s attention to the matter of Robert Thomas Mitrione, M.D. No objections have been filed. Ms. Blue was the Hearing Examiner.

Mr. Gonidakis stated that a request to address the Board has been timely filed on behalf of Dr. Mitrione. Five minutes will be allowed for that address.

Dr. Mitrione was represented by his attorney, Todd Newkirk.

Mr. Newkirk stated that the Hearing Examiner has recommended granting Dr. Mitrione’s application for licensure and placing him on probationary terms for three years. Mr. Newkirk stated that he generally does not oppose the Proposed Order, but he asked the Board to reconsider the probationary requirement. Mr. Newkirk stated that Dr. Mitrione’s criminal conduct occurred 18 years ago, he served an 18 months in prison, and paid restitution. Mr. Newkirk added that Dr. Mitrione also paid a high price professionally and personally for those convictions.

Mr. Newkirk continued that Dr. Mitrione has now served admirably in a number of professional settings and has been recognized by his peers. Mr. Newkirk stated that medical boards in Illinois, Pennsylvania, and Indiana have seen fit to fully restore Dr. Mitrione’s medical licenses without limitation and he has had no involvement with those board for 18 years. Dr. Mitrione is also board-certified by the American Board of Psychiatry and Neurology and the American Board of Addiction Medicine. Mr. Newkirk stated that if the Ohio Board places Dr. Mitrione on probation, he will be at risk of losing his board certifications.

Mr. Newkirk opined that probation is not necessary given Dr. Mitrione’s 18 years of good behavior. Mr. Newkirk stated that the Board retains the ability and authority to discipline Dr. Mitrione should any issues arise.

Dr. Mitrione agreed with Mr. Newkirk that probation is somewhat unnecessary, though Dr. Mitrione stated the he will comply with any judgment the Board makes. Dr. Mitrione stated that his practice 18 years ago had great difficulties, but he has since worked at a state hospital in Indiana and for the Indiana Department of Corrections without any difficulties. Dr. Mitrione added that while at the state hospital he was voted Chief of Staff and he also served on the Indiana Society of Addiction Medicine as its secretary. Dr. Mitrione currently serves on the Neonatal Abstinence Committee involved in treatment for mothers and children born with drug addictions at the local hospital system. Dr. Mitrione stated that he has applied
for an Ohio medical license because he was offered a position with the Ohio Department of Rehabilitation
and Corrections.

Dr. Mitrione stated that to re-impose the same kinds of sanctions that were previously applied by three
different state medical boards, which he complied with, would be excessive. Dr. Mitrione opined that this
would essentially re-subject him to sanctions for being offered a job in this state.

Mr. Gonidakis asked if the Assistant Attorney General wished to respond. Ms. Snyder stated that she
wished to respond.

Ms. Snyder stated that the probationary terms in the Proposed Order includes standard probationary
terms for a minimum of three years. Specifically, Dr. Mitrione would be required to take courses in ethics,
medical record-keeping, and office management. Ms. Snyder stated that Dr. Mitrione has paid his debt to
society and opined that he will be a great asset to Ohio. However, Ms. Snyder opined that it is not too
much to ask of Dr. Mitrione to be on probation when he has had several violations. Ms. Snyder stated
that something should be in the record to reflect Dr. Mitrione’s past violations.

Dr. Steinbergh moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law,
and Proposed Order in the matter of Robert Thomas Mitrione, M.D. Dr. Soin seconded the motion.

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

Mr. Gonidakis briefly reviewed Dr. Mitrione’s medical career. Mr. Gonidakis stated that Dr. Mitrione is
currently self-employed as a psychiatrist in Indiana and he holds current medical licenses in Indiana,
Illinois, and Pennsylvania. In 2015, Dr. Mitrione applied for a medical license in Ohio. On his application,
Dr. Mitrione fully disclosed his past problems.

Mr. Gonidakis continued that in 2000 Dr. Mitrione was indicted in federal court and charged with providing
false claims to the federal government, engaging in schemes to defraud via the U.S. mail, and being
involved in schemes to defraud Medicare and Medicaid programs. Dr. Mitrione was alleged to have billed
for services by unqualified therapists; billed for having performed services that were actually performed by
others; billed for services not provided; and other allegations. In September 2001, Dr. Mitrione was found
guilty of some counts and other counts were dismissed. In a final judgment dated November 25, 2002,
Dr. Mitrione was found guilty of one felony count of mail fraud and one felony count of false claims. Dr.
Mitrione was sentenced to 23 months in prison followed by three years of supervised release. Dr.
Mitrione also paid restitution in the amount of $11,255.65

Mr. Gonidakis stated that the Medical Licensing Board of Indiana granted Dr. Mitrione a probationary
medical license in 2004 and removed the probationary terms in 2007. The Illinois Division of Professional
Regulation indefinitely suspended Dr. Mitrione’s medical license in that state in 2005, but issued a
Consent Order in 2006 returning the license to active status with two years of probation. In 2006, the
Pennsylvania State Board of Medicine issued a Final Order suspending Dr. Mitrione’s medical license in
that state for two years, with all but six months of that period stayed, subject to being placed on probation.

Mr. Gonidakis stated that at his Ohio hearing, Dr. Mitrione testified that he had had a lack of oversight of
his billing practices. Dr. Mitrione claimed that he had been very busy during that time and had given
passive approval of his practices’ billing foundation. Dr. Mitrione also testified that he had been
overextended and had had marital difficulties at that time. Dr. Mitrione applied for an Ohio medical
license after receiving a job offer from the Ohio Department of Rehabilitation and Corrections (Ohio DRC).

Mr. Gonidakis stated that the Proposed Order would grant Dr. Mitrione’s application for licensure and place him under probationary terms for a minimum of three years, including the requirement that he complete courses in professional ethics, medical record-keeping, and office management. Mr. Gonidakis noted that Dr. Mitrione has already completed medical billing courses. Mr. Gonidakis further noted the following mitigating factors:

- The incidents in question occurred 18 years ago
- Dr. Mitrione served 18 months in prison and paid restitution
- Dr. Mitrione has taken proactive steps to prevent these incidents from recurring
- Dr. Mitrione cannot bill for Medicare or Medicaid until at least 2019
- Dr. Mitrione holds unrestricted medical licenses in three other states
- Dr. Mitrione has a job offer from the Ohio DRC

Mr. Gonidakis stated that the Proposed Order seems reasonable, but it could have unintended consequences for Dr. Mitrione’s other medical licenses. Mr. Gonidakis stated that, unless a Board member offers an amendment otherwise, it appears that the Board will grant Dr. Mitrione’s licensure application. Mr. Gonidakis questioned what Dr. Mitrione would gain if the Ohio Board requires him to re-take courses he has already taken. Mr. Gonidakis further stated that Dr. Mitrione has paid his debt to society. Mr. Gonidakis suggested that a reprimand would be more appropriate in this case.

Dr. Steinbergh agreed with Mr. Gonidakis’ comments and opined that Dr. Mitrione’s objections were very reasonable. Dr. Steinbergh felt that Dr. Mitrione did not need to be on probation, which may affect his specialty board certifications. Dr. Steinbergh agreed that a reprimand would be appropriate in this matter.

Dr. Steinbergh moved to amend the Proposed Order to grant Dr. Mitrione’s application for licensure and to issue a reprimand with no other action. Dr. Edgin seconded the motion.

Dr. Soin agreed with Mr. Gonidakis and Dr. Steinbergh. Dr. Soin questioned what would be gained by imposing probationary terms for something that happened so long ago. Dr. Soin stated that there is no indication that there would be any further harm to the public from Dr. Mitrione’s practice at this point.

Dr. Steinbergh commented that a physician may have an offer of employment, but that offer does not always materialize as a job. Therefore, Dr. Steinbergh stated that whenever the Board grants a license it needs to know that the applicant can practice AS ANY OTHER LICENPHYSICIAN in any way that is required. Dr. Steinbergh reiterated that Dr. Mitrione should be granted a license.

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
The motion to amend carried.

**Dr. Steinbergh moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Robert Thomas Mitrione, M.D. 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. Schachat</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Schottenstein</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Edgin</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Factora</td>
<td>aye</td>
</tr>
</tbody>
</table>

The motion to approve carried.

**ALEXANDER RYAN VENNE, L.M.T.**

Mr. Gonidakis the Board's attention to the matter of Adam Patrick Hall, D.O. No objections have been filed. Mr. Porter was the Hearing Examiner.

**Dr. Steinbergh moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Alexander Ryan Venne, L.M.T. 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 alleged that Mr. Venne pled guilty to one count of Aggrevated Possession of Drugs, a felony of the fifth degree, for which he was granted intervention in lieu of conviction. The Board also alleged that Mr. Venne provided false information to the Board on two applications for renewal of his massage therapy license. Mr. Venne's license expired for non-renewal in October 2015 and it is currently inactive.

Dr. Steinbergh stated that in July 2010 Mr. Venne was arrested and charged with several offenses, including one count of Obstructing Official Business, a felony of the fifth degree; two counts of Assault on a Peace Office, felonies of the fourth degree; and Carrying a Concealed Weapon, a misdemeanor of the first degree. Dr. Steinbergh stated that this resulted when Mr. Venne was pulled over by the police for reasons unknown. During the traffic stop, an altercation ensured and he refused to exit his vehicle. Mr. Venne also brandished a hunting knife and struck two officers in the chest and arms with his elbow. Mr. Venne was approximately aged 23 at that time. Dr. Steinbergh stated that the felony charges were...
dismissed and the Concealed Weapon charge was amended to Disorderly Conduct, a minor misdemeanor. Mr. Venne was fined $100.

Dr. Steinbergh continued that later that month, Mr. Venne was charged with two counts of Assault, felonies of the fourth degree, and one count of Obstructing Official Business, a felony of the fifth degree. In April 2011, Mr. Venne was accepted into the Franklin County Prosecuting Attorney’s diversion program. Mr. Venne successfully completed the program and the charges against him were dismissed in 2012.

In November 2012, Mr. Venne submitted an application for renewal of his Ohio massage therapy license. On the application, Mr. Venne answered “no” to Question #1, “Have you ever been found guilty of, or pled guilty to, or no contest to, or received treated or intervention in lieu of conviction for a misdemeanor or felony?”

In June 2013, Mr. Venne was found intoxicated and unconscious in some bushes at Ohio State University. Mr. Venne was charged with possession of drugs, namely marijuana, possession of drug paraphernalia, and disorderly conduct, all minor misdemeanors. In November 2013, Mr. Venne pled guilty to disorderly conduct and was fined $100 plus court costs; the other two charges were dismissed.

In October 2013, an indictment was filed in the Franklin County Court of Common Pleas charging Mr. Venne with one count of Aggravated Possession of Drugs. Mr. Venne pleaded guilty in August 2014 and the Court granted his request for intervention in lieu of conviction. Documents from the Franklin County Court of Common Pleas indicate that Mr. Venne did not successfully complete intervention in lieu of conviction. In February 2015, Mr. Venne entered a plea of guilty to the original charges and he was sentenced to two years of “Community Control/Intensive, Specialized Supervision/Mental Health Caseload.” In June 2015 the Court imposed an additional community control condition that Mr. Venne enter a substance abuse program. In July 2015 a probation office requested that Mr. Venne’s community control be revoked because he “went AWOL.” The Court subsequently ordered Mr. Venne to serve an additional 89 days in the Franklin County Correctional Center.

In August 2013 Mr. Venne was charged again with possession of marijuana. Later that month, Mr. Venne was pulled over and charged with Operating a Vehicle Under the Influence of Alcohol or Drugs (OVI). In November 2013 Mr. Venne was charged with one count of possession of marijuana and some paraphernalia. Both charges were ultimately dismissed.

In July 2014, Mr. Venne submitted another application for renewal of his massage therapy license. Mr. Venne answered “yes” in response to Question #1. However, he answered “no” to Question #4, Has any board, bureau, department, agency or any other body, including those in Ohio other than this boards, filed any charges, allegations, or complaints against you?”

Dr. Steinbergh agreed with the Hearing Examiner’s stated that, in light of the numerous charged levied against Mr. Venne, the plain language of the question on Mr. Venne’s 2014 renewal application necessitated an affirmative response and Mr. Venne had a duty to provider that information. Dr. Steinbergh also agreed with the Hearing Examiner’s Conclusions of Law. Dr. Steinbergh particularly noted Conclusion of Law #3:

For the reasons that follow, the conduct of Mr. Venne described in Finding of Fact #2 does not constitute making a false, fraudulent, deceptive, or misleading statement … It is evident that Mr. Venne was accepted into a diversion program which is administered by a
county prosecutor … rather than intervention in lieu of conviction, which is administered by the courts. … Diversion does not require that a plea of guilty be entered with the court, as does intervention in lieu of conviction, nor does it necessarily require treatment for drug or alcohol abuse or dependence. In his 2012 Renewal Application, Mr. Venne answered “No” to the question “have you ever been found guilty of … a misdemeanor or a felony?”

Dr. Steinbergh agreed with the Hearing Examiner that Mr. Venne’s answer cannot be found to be false because none of the events described in the question actually occurred. Accordingly, the evidence is insufficient to support a conclusion that Mr. Venne violated 4731.22(B)(5), Ohio Revised Code, with respect to the diversion program.

Dr. Steinbergh stated that though Mr. Venne requested a hearing, he did not appear at the hearing or provide a written defense, and thus it is difficult to ascertain his interest or his ability to comply with the requirements of an order of suspension or probation. Dr. Steinbergh agreed with the Hearing Examiner’s decision to not recommend an order that would, in effect, set Mr. Venne up for failure. The Hearing Examiner also commented that there is evidence that there may be another underlying issue that was not alleged in this case of a drug and/or alcohol-related nature.

Dr. Steinbergh stated that she agrees with the Proposed Order of non-permanent revocation, which will give Mr. Venne an avenue to regain his license if he gets treatment or corrects his behavior.

Dr. Schottenstein agreed that there is no allegation of chemical dependency. Speaking strictly to Mr. Venne’s behavior, Dr. Schottenstein stated that the behavior is worrisome and suggests that it is not realistic to expect Mr. Venne to be able to be compliant with the requirements of a probationary period. Dr. Schottenstein hoped that Mr. Venne addresses the behavioral concerns and that his behavior becomes healthier, whereupon he can approach the Board about regaining his license.

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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to approve carried.

PROPOSED FINDINGS AND PROPOSED ORDERS

Mr. Gonidakis stated that in the following matters, the Board issued Notices of Opportunity for Hearing. No timely request for hearing was received. The matters were reviewed by Hearing Examiners, who prepared Proposed Findings and Proposed Orders for each, and are now before the Board for final disposition. These matters 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.

MOLLY MARIE JOHNSON

Dr. Steinbergh moved to find that the allegations as set forth in the July 8, 2015 Notice of Opportunity for Hearing in the matter of Ms. Johnson have been proven to be true by a preponderance of the evidence and to adopt Ms. Mobacher’s Proposed Findings and Proposed Order. Dr. Soin seconded the motion.

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

Dr. Schottenstein stated that Ms. Johnson filed an application for a massage therapy license in May 2014. On her application, Ms. Johnson disclosed that she had been convicted of two drug-related offenses. In October 2003 she pled No Contest to a charge of Assault, with a subsequent suspended jail sentence and a one-year probation.

In December 2007 Ms. Johnson pleaded guilty to Reckless Operation of a Motor Vehicle. Ms. Johnson had been pulled over by a police office and was found to have been driving under the influence of marijuana. The office also found a gram of marijuana in Ms. Johnson’s car. In May 2008 Ms. Johnson was sentenced to 10 days in jail, with seven days suspended and the remaining three days also suspended for attending a driver intervention program. Ms. Johnson’s driver’s license was suspended for six months with privileges.

In October 2012 Ms. Johnson was charged with possession of marijuana when a police officer who was looking for someone else happened by and smelled marijuana in her vicinity. Ms. Johnson was found to have marijuana in her purse. Ms. Johnson pleaded No Contest and she was required to pay a fine and court costs.

In July 2014, the Medical Board ordered Ms. Johnson to submit to an outpatient assessment at Glenbeigh Hospital in August 2014. At Ms. Johnson’s request, the assessment was rescheduled for February 2015. The Glenbeigh assessment team indicted that Ms. Johnson was diagnosed with cannabis use disorder, moderate, and opiate dependence in remission in Suboxone maintenance therapy. Dr. Schottenstein noted that Ms. Johnson was involved in a Suboxone clinic taper-down program for treatment of opiate dependence following the use of a prescription drug after surgery which developed into dependence. The assessment also determined that Ms. Johnson was impaired and incapable of practicing as massage therapist at acceptable and prevailing standards of care. Glenbeigh recommended that Ms. Johnson attend an intensive outpatient program at a Board-approved facility.

Dr. Schottenstein stated that Ms. Johnson complied with her assessment, but has not complied with Glenbeigh’s recommendation of an intensive outpatient program. The Glenbeigh assessment team indicated that given successful completion of the recommended treatment, Ms. Johnson’s prognosis was good. Dr. Schottenstein agreed with the Proposed Order to deny Ms. Johnson’s application and to encourage her to not reapply until she attends an intensive outpatient program at a Board-approved facility.

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. Schachat - aye  
Dr. Schottenstein - aye  
Dr. Edgin - aye  
Dr. Factora - aye  

The motion to approve carried.

PATRICIA JOANNE WARDROP, L.M.T.

Dr. Steinbergh moved to find that the allegations as set forth in the May 13, 2015 Notice of Opportunity for Hearing in the matter of Ms. Wardrop have been proven to be true by a preponderance of the evidence and to adopt Ms. Mobacher’s Proposed Findings and Proposed Order. Dr. Soin seconded the motion.

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

Dr. Schachat stated that in May 2011 Ms. Wardrop applied to renew her massage therapy license. In her application, Ms. Wardrop disclosed a prior felony conviction. The Board asked for information on this conviction twice and only received a partial reply that Ms. Wardrop was seeking to have the conviction expunged. The Board subsequently ascertained that the conviction related to theft from an elderly person or disabled adult, for which she had been sentenced to five years of community control and fined $200,000.

Dr. Schachat agreed with the Hearing Examiner that, based on the conviction and Ms. Wardrop’s lack of responsiveness, a permanent revocation of Ms. Wardrop’s massage therapy license is appropriate.

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. Schachat - aye  
Dr. Schottenstein - aye  
Dr. Edgin - aye  
Dr. Factora - 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - 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, Ms. Loe, Ms. Debolt, Ms. Pollock, Ms. Marshall, the Enforcement Attorneys, the Assistant Attorneys General, Ms. Murray, Ms. Williams, Ms. Moore, and Mr. Taylor in attendance.

The Board returned to public session.

RATIFICATION OF SETTLEMENT AGREEMENTS

JAMES ERIC ANDERSON, L.M.T. – PERMANENT SURRENDER

Dr. Steinbergh moved to ratify the Proposed Permanent Surrender with Mr. Anderson. 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.

At this time, Mr. Gonidakis relinquished the chair to Dr. Soin.
D.M.B., M.D. – CONSENT AGREEMENT

Dr. Schachat moved to ratify the Proposed Consent Agreement with D.M.B., M.D.  No Board member seconded the motion. The motion was lost for want of a second.

Mr. Gonidakis resumed the chair at this time.

P.M.B., M.D. – CONSENT AGREEMENT

Dr. Soin moved to ratify the Proposed Consent Agreement with P.M.B., M.D.  No Board member seconded the motion. The motion was lost for want of a second.

PAUL ROBERT BROWN, P.A. – STEP I CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Step I Consent Agreement with Mr. Brown. 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.

DANIEL THOMAS HALEY, D.P.M. – PERMANENT SURRENDER

Dr. Steinbergh moved to ratify the Proposed permanent surrender with Dr. Haley. 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.
JOHN CAMERON HODGE, D.O. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Dr. Hodge. 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.

ROSS ROSARIO LENTINI, M.D. – STEP II CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Step II Consent Agreement with Dr. Lentini. 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.

ANTHONY FREDERICK ROSSI, D.P.M. – PERMANENT SURRENDER

Dr. Steinbergh moved to ratify the Proposed Permanent Surrender with Dr. Rossi. 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. Schachat - aye

Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.

ELIZABETH RENEE STIPE, L.M.T. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Ms. Stipe. 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.

SHANNON L. SWANSON, D.O. – SUPERSEDING CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Superseding Consent Agreement with Ms. Stipe. 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.

Mr. Gonidakis stated that, pursuant to advice from the Board’s legal counsel, the Board will revisit the two proposed settlement agreements which did not receive a second.

At this time, Mr. Gonidakis relinquished the chair to Dr. Soin.
D.M.B., M.D. – CONSENT AGREEMENT

Dr. Schachat moved to ratify the Proposed Consent Agreement with D.M.B., M.D. Dr. Schottenstein seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - nay
Dr. Steinbergh - nay
Dr. Soin - nay
Mr. Gonidakis - abstain
Dr. Schachat - nay
Dr. Schottenstein - nay
Dr. Edgin - nay
Dr. Factora - nay

The motion to ratify did not carry.

Mr. Gonidakis resumed the chair at this time.

P.M.B., M.D. – CONSENT AGREEMENT

Dr. Soin moved to ratify the Proposed Consent Agreement with P.M.B., M.D. Dr. Schottenstein seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - abstain
Dr. Steinbergh - nay
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Schachat - abstain
Dr. Schottenstein - nay
Dr. Edgin - nay
Dr. Factora - nay

The motion to ratify did not carry.

Dr. Steinbergh stated that P.M.B., M.D.’s offense had been related to telemedicine. Dr. Steinbergh opined that P.M.B., M.D. should be permanently restricted from practicing telemedicine in Ohio.

SHANE T. Sampson, M.D. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Dr. Sampson. 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.

ALY MOHAMED ALY ZEWAIL, M.D. – STEP II CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Dr. Zewail, 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to ratify carried.

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

Dr. Steinbergh moved to send the Notice of Immediate Suspension and Opportunity for Hearing to David Antonio Velasquez, 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. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Dr. Factora - aye

The motion to send carried.
Dr. Steinbergh moved to send the Notices of Opportunity for Hearing to Heidi Davidson, L.M.T.; William Ira Feske, M.D.; Marcia Gray, L.M.T.; and Alexander Clark Halkias, 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. Schachat - aye  
Dr. Schottenstein - aye  
Dr. Edgin - aye  
Dr. Factora - aye

The motion to send carried.

RULES AND POLICIES

ADOPTION OF RULES

Dr. Steinbergh moved to adopt proposed amended rules 4731-17-01 and 4731-17-04 and to adopt rule 4774-1-01, as it is proposed without amendment. Dr. Steinbergh further moved that the proposed rules be final filed with an effective date of December 31, 2016. Dr. Saferin seconded the motion.

Dr. Steinbergh noted that Section G of proposed rule 4731-17-04 concerns disinfection and sterilization of single-use items. Dr. Steinbergh questioned why the Board would continue to define what can be done to a single-use item to make it reusable, noting that there have been cases involving single-use items that are reused and later found to have been contaminated. Dr. Steinbergh stated that she supports moving this proposed Rule along in the process, but suggested that the Board revisit this language and consider amending it in the future.

Mr. Giacalone stated that there is an industry, which he is not necessarily supportive of, which facilities such as hospitals can use to refurbish single-use items. Dr. Schachat commented that single-use items are routinely reprocessed in many settings, based on a reprocessing protocol and safety system. Dr. Schachat stated that this is a cost-control issue.

A vote was taken on Dr. Steinbergh’s motion. All members voted aye. The motion carried.

RULES TO BE FILED WITH JCARR

Dr. Steinbergh moved to approve the filing of Rule 4731-29-01, as proposed, with the Joint Committee on Agency Rule Review (JCARR). Dr. Saferin seconded the motion. All members voted aye. The motion carried.
ELECTION OF OFFICERS, 2017

Dr. Steinbergh moved to elect Dr. Soin as President, Mr. Giacalone as Vice President, Dr. Rothermel as secretary, and Dr. Saferin as Supervising Member for terms beginning on January 1, 2017, and ending December 31, 2017. Dr. Edgin seconded the motion. All members voted aye. The motion carried.

OPERATIONS REPORT

Human Resources: Mr. Groeber stated that a new Attorney 2 has been hired and will be on January 9, 2017. For the Board’s open Attorney 4 position, 99 applications have been received. Mr. Groeber noted that some retirements were announced last week.

Information Technology: Mr. Groeber stated that the E-License project continues as scheduled. Mr. Groeber stated that proposed legislation that would consolidate a number of healthcare boards into the Medical Board, which would impact the E-License project, has stalled in the legislature and will be reintroduced in the next General Assembly.

Communications and Outreach: Ms. Pollock stated that the Board has several educational modules in process. One module concerns the Board meetings, particularly the probationary appearances, which can be used to educate medical school students. Ms. Pollock stated that the Board now has the equipment it needs for this project. Ms. Pollock commented that the audio quality in tests has been poor and that is being worked on.

Ms. Pollock continued that another module involves training in the Ohio Automated Rx Reporting System (OARRS). Ms. Pollock stated that the education that Bill Schmidt often gives will be put into a video and made accessible to everyone. Ms. Pollock stated that the video will be posted on the Board’s website, as well as provided through medical associations and medical schools.

Mr. Groeber stated that the Ohio State University School of Medicine has requested that a Board member make a presentation on the subject of prescribing. Mr. Groeber stated that this is directly related to the Board’s outreach to the Ohio Council of Medical School Deans. Mr. Groeber encouraged Board members to contact him if they have any ideas for training modules.

Agency Operations: Mr. Groeber stated that the total number of open complaints decreased by 6% over the last month. The number of M.D. and D.O. licenses issued dropped slightly in November 2016 compared to November 2015, but there is still a year-to-date increase of 11%, representing a net addition of about 250 physicians. The number of D.P.M. licenses increase by 35%. Overall, total licenses issued has increased by 11% and the applications are being processed 9% faster.

Mr. Groeber stated that the number of expedited licenses more than doubled in November 2016 compared to November 2015. Mr. Groeber opined that the Board’s outreach to large teaching institutions who recruit physicians from out-of-state seems to be bearing fruit. Mr. Groeber stated that the Board will work in an improved sales pitch for expedited licensure that focuses on how much revenue an average physician brings in daily and how much money can come in for each day that a physician is licensed earlier than through the traditional process, which relates to how many more patients can be seen and how much more tax revenue is generated.
Mr. Groeber started that the Board’s letter regarding appropriate use of the Ohio Automated Rx Reporting System (OARRS) continue. Mr. Groeber stated that the subject of the most recent letter was those physicians who have appeared on the list multiple times. Mr. Groeber wants to encourage these physicians to reach out to the Board for help in remediying this situation. Mr. Groeber stated that the number of reporting non-checks of OARRS have started to drop significantly.

Mr. Groeber stated that the FSMB Annual Meeting will be April 20 through April 22, 2017. Mr. Groeber asked any Board member who was interested in attending the meeting to contact him or Ms. Wehrle.

Mr. Groeber reminded the Board members that ethics training is due to be completed by December 15, 2016.

Pursuant to a conversation with Dr. Steinbergh, Mr. Groeber stated that Ms. Loe will explore ways to return to a simpler per diem reporting of the Board members’ time that will also be in compliance with Department of Administrative Services requirements.

PRESENTATION BY FEDERATION OF STATE MEDICAL BOARDS

Mr. Gonidakis welcomed Scott A. Steingard, D.O., and Michael Dugan of the Federation of State Medical Boards (FSMB). Dr. Steingard is a member of the FSMB Board of Directors, and Mr. Dugan is Chief Information Officer and Senior Vice President for Operations for the FSMB.

Dr. Steingard gave a brief presentation of what the FSMB is and the services it provides. The FSMB was founded in 2012 and represents 70 state medical and osteopathic boards. Products offered by the FSMB include the United States Medical Licensing Examination (USMLE) (co-managed with the National Board of Medical Examiners), the National Practitioner Databank (NPDB), the Federation Credentials Verification Service (FCVS), and the Universal Application (UA) for licensure. The FSMB also publishes the Journal of Medical Regulation.

Dr. Edgin exited the meeting at this time.

Dr. Steingard stated that the FSMB’s vision is to be an innovative leader, set the tone for state boards across the country, and give them a voice. The FSMB also wants to help shape future of medical regulation and promote quality health care and protection of the public. The FSMB’s mission statement states that “The FSMB serves as the voice for state medical boards, supporting them through education, assessment, research and advocacy while providing services and initiatives that promote patient safety, quality health care and regulatory best practices.”

Mr. Dugan gave a brief presentation on the details of the services and products of the FSMB, including upcoming new features in the systems. Mr. Dugan also discussed telemedicine, medical marijuana regulation, and the sharing of disciplinary information across state borders.

Dr. Steingard stated that the FSMB continues to work in the areas of opioid treatment of chronic pain, physician burnout, and the FSMB’s interstate compact for licensure. Regarding physician burnout, Dr. Schachat asked if burnout is more common or if it is just more visible today. Dr. Steingard replied that, in his personal opinion, physician burnout is more prevalent than in the past. Dr. Steingard stated that due to many factors, particularly electronic medical records, physicians are responsible for more things than ever before. Dr. Steingard also noted that the growth of health systems acquiring practices and
encouraging physicians to see more and more patients also has an effect.

Mr. Gonidakis thanked Dr. Steingard and Mr. Dugan for presenting to the Board.

REPORTS BY ASSIGNED COMMITTEES

FINANCE COMMITTEE

FISCAL REPORT

Dr. Saferin stated that the Board has made a payment of $1,500,000 for its portion of the E-License project. Dr. Saferin stated that this payment will be reflected in the January budget numbers.

Ms. Loe stated that for October 2016 the Board had $567,000 in revenue and $697,000 in expenses. Ms. Loe stated that the October revenue was slightly down, but the year-to-date revenue is still 9% above the two-year cycle and is well above what was projected at this point. The Board’s cash balance was $4,800,000, though that will drop significantly when the E-License payment is reflected.

FINE COLLECTION

Ms. Loe stated that no new fines were assessed by the Board in November, but there are still older fines that were not paid in a timely manner and have been referred to the Attorney General’s office for collection. Ms. Loe noted that two fines are for cases that are on appeal, so those fines cannot be pursued at this time. Ms. Loe stated that a judgment is expected soon on a $5,000 fine. Ms. Loe also noted that the Board assessed some fines today through consent agreements.

Dr. Saferin stated that Ms. Pollock is developing training videos on ethics, prescribing, and other issues that often bring physicians to the Board’s attention. Dr. Saferin stated that the goal is to provide training in order to prevent physicians coming to the Board for disciplinary matters. Dr. Schottenstein stated that the Committee also talked about multi-media efforts at outreach to the Board’s licensees, such as Twitter or Facebook.

POLICY COMMITTEE

LEGISLATIVE UPDATE

Dr. Soin stated that Mr. LaCross gave the Policy Committee a legislative update. Dr. Soin stated that the legislature is currently in winter recess and there will likely be very little activity until the beginning of the next General Assembly.

ONE-BITE REPORTING EXEMPTION

Dr. Soin stated that Mr. Groeber updated the Committee on the One-Bite Reporting Exemption, which continues to be a work in progress.

MEDICAL MARIJUANA UPDATE

Dr. Soin stated that draft rules will be presented to the Medical Marijuana Program Advisory Committee at
its meeting tomorrow. The primary focus of the rules is to develop a program that balances access for patients with patient safety. Dr. Soin stated that the draft rules were developed based on conversations, with Ohio physicians, patient advocates, and other states’ regulatory agencies. Dr. Soin stated that once the draft rules are complete and presented at the Advisory Committee meeting, the Board will accept public input through 5:00 p.m. on January 13, 2017.

Dr. Soin stated that the website medicalmarijuana.ohio.gov continues to be an important resource with a great deal of information

NON-DISCIPLINARY OPTION FOR MENTAL AND PHYSICAL HEALTH

Dr. Soin stated that the internal working group for the non-disciplinary option for mental and physical illness, which includes Dr. Rothermel, Mr. Giacalone, Dr. Schottenstein, Ms. Anderson, and Ms. Marshall, met in late November and developed a bulleted concept memo concerning program eligibility and disqualification. The memo has been provided in the Board members’ agenda materials.

PHYSICIAN ASSISTANT/SCOPE OF PRACTICE COMMITTEE

PHYSICIAN ASSISTANT FORMULARY

Dr. Steinbergh stated that the Physician Assistant Policy Committee (PAPC) and the Physician Assistant/Scope of Practice Committee have recommended the following changes to the physician assistant formulary:

• Exondys 51, a muscular dystrophy drug, to be placed in the May Not Prescribe category due to its rare use and the decision-making that is involved to prescribe it.

• Buprenorphine, which physician assistants and advanced practice nurses will be able to apply for a waiver to prescribe starting on January 1, 2017. Buprenorphine will be May Prescribe With a Waiver, while the subcutaneous will be Physician-Initiated.

• Vivitrol, an injectable for use every four weeks, will be Physician-Initiated.

• Tikosyn, a cardiac drug for arrhythmias, moved from the May Not Prescribe category to the Physician-Initiated category.

• Xiidra, an ophthalmologic product which was discussed last month. This will go into the Physician-Initiated category.

Mr. Gonidakis exited the meeting at this time. Dr. Soin assumed the chair.

Dr. Steinbergh state that the possibility of instituting a negative formulary will be evaluated next month.

LICENSURE COMMITTEE

DISCUSSION OF NCCPA PRESENTATION TO LICENSURE COMMITTEE

Dr. Saferin stated that the Licensure Committee heard an excellent presentation from Dawn Morton-Rias, the President and C.E.O. of the National Commission on Certification of Physician Assistants (NCCPA). Ms. Morton-Rias updated the Committee on the physician assistant certification process. Ms. Morton-
Rias emphasized that while physician assistants do not work independently, they are part of a team effort with a physician and other healthcare professionals.

**LICENSURE APPLICATION REVIEW**

**AKRAM BOUTROS, M.D.**

Dr. Saferin stated that Dr. Boutros has applied for an Ohio medical license and has not practiced clinical medicine since 2007. Dr. Saferin briefly reviewed Dr. Boutros’ medical career and achievements. Dr. Boutros is requesting an administrative medical license in Ohio. The Licensure committee supports Dr. Boutros’ request.

**Dr. Saferin moved to approve the application of Akram Boutros, MD for a certificate to practice medicine and surgery in Ohio and immediately limited and restricted to the practice of administrative, non-clinical medicine. All limitations and restrictions shall terminate upon evidence acceptable to the Board or its designee that Dr. Boutros has successfully recertified his American Board of Medical Specialties Certification in Internal Medicine and completed a Board approved preceptorship. Dr. Steinbergh seconded the motion.** A vote was taken:

**ROLL CALL:**

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The motion carried.

Mr. Gonidakis returned to the meeting at this time and resumed the chair.

**JOSETTE DANIELLE BOWMAN, L.M.T.**

Dr. Saferin stated that Ms. Bowman has applied for restoration of her massage therapy license. Ms. Bowman has not practiced massage therapy since 2011.

**Dr. Saferin moved to approve Ms. Bowman’s request for restoration of her Ohio massage therapy license, pending successful completion of the Massage and Bodywork Licensing Examination (MBLEX) within six months of the board meeting. Dr. Steinbergh seconded the motion.** A vote was taken:

**ROLL CALL:**

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The motion carried.
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Factora - aye

The motion carried.

COMPLIANCE COMMITTEE

Dr. Steinbergh stated that on November 9, 2016, the Compliance Committee met with James George Lamphear, M.D.; Tony L. Campbell, P.A.; Timothy M. Hickey, M.D.; Bethany J. Notestine, M.T.; M. Salim Ratnani, M.D.; and Mary A. Zielinski, M.T., 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 October 17 and October 18, 2016.

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. Dr. Steinbergh stated that she would like to discuss some probationary requests separately.

DONALD L. EPSTEIN, M.D.

Dr. Steinbergh stated that she does not disagree with Dr. Epstein's request. Dr. Steinbergh noted that Dr. Epstein will be practicing in two different practices: a pulmonary practice and an addiction treatment practice. Dr. Steinbergh noted that the submitted practice plan specifies that 10 charts will be reviewed per week, to be split evenly between his monitoring physician in each practice. Dr. Steinbergh asked how many charts will be reviewed in the event that Dr. Epstein started in one clinic before starting in the other clinic. Ms. Murray responded that Dr. Epstein will have 10 charts reviewed per week, regardless of how many charts each monitoring physician reviews.

SIRAJ. A. SIDDIQUI, M.D.

Dr. Steinbergh noted that Dr. Siddiqui's practice plan indicates that he is returning to solo practice in internal medicine. Dr. Steinbergh expressed concern about Dr. Siddiqui returning to solo practice since he had come to the Board for minimal standards issues. However, Dr. Steinbergh stated that Dr. Siddiqui will still have a Board-approved monitoring physician reviewing his charts and reporting to the Board.

REZIK ABDUL AZIZ SAQER, M.D., AND STEPHEN A. STRAUBING, M.D.

Dr. Steinbergh stated that Dr. Saqer and Dr. Straubing have requested to make their respective final probationary appearances via electronic means. Dr. Steinbergh expressed concern that electronic appearances do not convey the same emotion and stance of the individual that a personal appearance does. Dr. Steinbergh stated that electronic appearances may be appropriate for ordinary appearances with the Secretary and Supervising Members, but for a final appearance the Board must feel comfortable that the probationer is appropriate to be released. Dr. Steinbergh stated that she is not comfortable with voting to release when the probationer makes the final appearance electronically.
The Board discussed this matter thoroughly. Mr. Gonidakis opined that a real-time video appearance is very similar to an in-person appearance, especially as the process improves. Dr. Soin stated that technology should be leveraged for efficiency, but agreed with Dr. Steinbergh that there are legitimate concerns with releasing a probationer following an electronic appearance. Dr. Rothermel and Dr. Saferin commented that electronic appearances have worked very well in their meetings with probationers. Dr. Rothermel stated that she is not comfortable requiring a probationer use large amount of time and money flying in from distant parts of the country or the world for a meeting with the Board that will only last 10 or 15 minutes, particularly when the probationer has fulfilled off the terms of a years-long probation. Dr. Rothermel further commented that she and Dr. Saferin carefully consider any request to appear electronically and have denied such requests when appropriate.

Dr. Schachat stated that he prefers to see probationers in person, but that electronic appearances generally work. However, Dr. Schachat expressed concerns that this could be a slippery slope and that others may start requesting electronic appearances in other contexts. Mr. Gonidakis commented that each request should be considered on a case-by-case basis. Dr. Schottenstein agreed with Dr. Schachat’s comments and stated that a more flexible approach is appropriate. Dr. Schottenstein commented that some probationers are going through legitimate hardship, perhaps for financial reasons. Dr. Schottenham stated that it is probably more meaningful and impactful to appear in person, but the option to appear electronically should be available and decided on a case-by-case basis. Mr. Gonidakis agreed with Dr. Schottenham. Mr. Giacalone commented that appearing electronically from Australia or New Zealand is understandable, but it is more questionable if the probationer is in Detroit or West Virginia.

Dr. Steinbergh stated that she did not intend to vote to approve Dr. Saqer’s and Dr. Straubing’s requests to appear electronically. Mr. Gonidakis suggested that those two requests be voted on separately by the Board.

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

- To grant Michael T. Bangert, M.D.’s request for approval of Ellen Ballerene, M.D., to serve as the treating psychiatrist;

- To grant William K. Basedow, D.O.’s request for approval of the previously-completed course *Intensive Course in Controlled Substance Prescribing: Pain, Anxiety, Insomnia*, offered by Case Western Reserve University, to fulfill the controlled substance prescribing course requirement; approval of the previously-competeted course *Intensive Course in Medical Record Keeping with Individual Preceptorships*, offered by Case Western Reserve University, to fulfill the medical records course requirement; approval of the updated summaries for the controlled substance prescribing course and the medical records course;

- To grant Patrick L. Bruno, M.D.’s request for discontinuation of the chart review requirement;

- To grant Casey D. Darrah, M.D.’s request for approval of Jeffrey R. Hammersley, M.D., to serve as the monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per month;

- To grant Franklin D. Demint, D.O.’s request for reduction in appearances to every six months;
approval of the submitted practice plan; approval of Michael M. Alexander, D.O., to serve as the new monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per month;

- To grant Linda Dennis, M.D.’s request for approval of Trupti V. Patel, M.D., to serve as the monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per month;

- To grant Jagprit S. Dhillon, M.D.’s request for approval of Deeppreet Singh, M.D., to serve as the monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per month;

- To grant Donald L. Epstein, M.D.’s request for approval of Alan J. Lerner, M.D., to serve as the treating neurologist; approval of the submitted practice plan; approval of Jeffrey P. Renston, M.D., to serve as the monitoring physician in regards to the Dr. Epstein’s pulmonology practice; approval of Wayne Kawalek, M.D., to serve as the monitoring physician in regards to Dr. Epstein’s addiction medicine practice; and determination of the frequency and number of charts to be reviewed at 10 charts per week, five charts per monitoring physician;

- To grant Brian F. Griffin, M.D.’s request for discontinuance of the drug log requirement;

- To grant Raymond C. Gruenther, M.D.’s request for approval of the submitted practice plan; approval of Narinder Saini, M.D., to serve as the new monitoring physician; and approval of the frequency and number of charts to be reviewed at 10 charts per week;

- To grant Kavita A. J. Kang, D.O.’s request for approval of Scott A. Ries, L.I.S.W., to serve as the new psychotherapist;

- To grant Kyle F. Mills, M.D.’s request for reduction in personal appearances to every six months; and reduction in the frequency of drug testing to two per month;

- To grant Joshua David Palmer, M.D.’s request for approval of Douglas D. Martin, M.D., to serve as the monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per month;

- To grant William G. Paloski, D.O.’s request for approval of the practice plan; approval of Controlled Substance Prescribing: Pain, Anxiety, Insomnia, administered by Case Western Reserve University, to fulfill the controlled substances prescribing course requirement; approval of Jeffrey R. Cohen, 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 Nicholas L. Pesa, M.D.’s request for reduction in drug and alcohol rehabilitation meetings to two per week with a minimum of 10 per month;

- To grant M. Salim Ratnani, M.D.’s request for approval of Maintaining Proper Boundaries, administered by the Center for Professional Health at Vanderbilt University School of Medicine, completed June 25-27, 2014;
• To grant Marvin H. Rorick, M.D.’s request for approval of Michael Schmerler, M.D., to serve as the monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per week;

• To grant Lawrence M. Rubens, M.D.’s request for approval of Jonathan L. Haimes, M.D., to serve as the new treating physician; and

• To grant Siraj S. Siddiqui, M.D.’s request for approval of Pradyumna Kumar Padival, M.D., to serve as the new monitoring physician; and approval of the new practice plan.

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. Schachat - aye
Dr. Schottenstein - aye
Dr. Factora - aye

The motion carried.

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

• To grant Rezik Abdul Aziz Saqer, M.D.’s request for approval to make personal appearances via electronic means.

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

ROLL CALL: Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - nay
Dr. Soin - aye
Mr. Gonidakis - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Factora - aye

The motion carried.

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

• To grant Stephen A. Straubing, M.D.’s request for approval to make his final appearances via
electronic means.

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

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The motion carried.

FINAL PROBATIONARY APPEARANCES

KEVIN G. BALDIE, M.D.

Dr. Baldie was appearing before the Board pursuant to his request for release from the terms of his December 11, 2013 Consent Agreement. Mr. Gonidakis reviewed Dr. Baldie’s history with the Board.

Mr. Gonidakis exited the meeting at this time. Dr. Soin assumed the chair.

In response to a question from Dr. Steinbergh, Dr. Baldie stated that he is eager to share his journey and his story with the Board. Dr. Baldie stated that he is a first-generation American and his parents are Jamaican. Dr. Baldie had desired to be the first physician in his family and he worked hard to achieve that goal. In medical school, Dr. Baldie felt great pressure to select a career and specialty that would pay for his $350,000 in student loans that he had accrued. Dr. Baldie ultimately pursued a highly-specialized, highly-selective surgical specialty which only accepts 275 applicants per year. Dr. Baldie has been certain that this would work out for him and he was devastated when he was not accepted. Dr. Baldie now had $350,000 in debt and no job security. Dr. Baldie accepted an intern position.

Dr. Baldie continued that he became depressed and began missing work. Dr. Baldie was prescribed an anti-depressant, which “spun me out.” Dr. Baldie ended up in a treatment facility with heroin addicts, criminal offenders, and schizophrenics. Dr. Baldie was started on the medications Abilify, Seroquel, and Depakote and went back to work. Dr. Baldie commented that his wife was very supportive of him during this time. Dr. Baldie stated that he spent a great deal of time trying to figure out his purpose. On the advice of his colleagues, Dr. Baldie went into family medicine.

Mr. Gonidakis returned to the meeting at this time and resumed the chair.

Dr. Baldie stated that he had initially been diagnosed with schizoaffective disorder, bipolar type, which was devastating to him and resulted in a great deal of bitterness, anger, frustration, and uncertainty. Dr. Baldie stated that he was fortunate to have the opportunity to join a family medicine practice and getting a position as a resident, becoming chief resident and house staff association vice president in his third and final year. However, Dr. Baldie was still down on himself and was simply going through the motions. Dr.
Baldie also struggled with having a disciplinary action on his license.

Dr. Baldie continued that he did serious soul-searching and realized that it was not about him. Dr. Baldie stated that he placed his faith completely in Jesus Christ. Dr. Baldie stated that he and his wife became members of their church. Dr. Baldie stated that he had always thought of himself as humble, but he came to realize that he actually had a lot of hubris. Dr. Baldie stated that the was truly humbled by his experience trying to figure out who he is. Dr. Baldie came to realize that his mission and calling was to help and serve others. Dr. Baldie stated that he is fortunate to have started practice in a family practice last July and it has been a great experience. Dr. Baldie stated that he is committed to helping his patients walk through their struggles and to be able to share in their joys and successes as well. Dr. Baldie stated that he has two treating psychiatrists and he was weaned off Abilify and Seroquel in 2014, and he was weaned off Depakote in June 2016.

Dr. Steinbergh asked what Dr. Baldie’s psychiatrist feels his diagnosis was. Dr. Baldie responded that that has been difficult to determine, but his current psychiatrist feels that it was Adjustment Disorder, Not Otherwise Specified. When Dr. Baldie saw his psychiatrist in June 2016 and November 2016, she did not feel that Dr. Baldie had any diagnosis anymore and that whatever he had been struggling with was no longer an issue.

Dr. Schottenstein stated that he is grateful that Dr. Baldie has move so substantially in the right direction and that his quality of life is good. Dr. Schottenstein opined that Dr. Baldie may have had adjustment disorder, but he also noted that mood disorder is episodic and can come back. Dr. Schottenstein advised Dr. Baldie to maximize his odds of staying healthy by abstaining from alcohol or drugs, getting good sleep, and managing his work so that there is balance in his life. Dr. Schottenstein stated that some people who go off their medications are very stubborn to return to medications if needed. Dr. Schottenstein encouraged Dr. Baldie to contact his psychiatrist and consider going back on medication if there is any hint of returning mental health issues. Dr. Baldie agreed.

Dr. Steinbergh moved to release Dr. Baldie from the terms of his December 11, 2013 Consent Agreement, effective immediately. Dr. Soin seconded the motion. All members voted aye. The motion carried.

BETSY L. CORNELL, M.T.

Ms. Cornell was appearing before the Board pursuant to her request for release from the terms of the Board’s Order of April 9, 2014. Mr. Gonidakis reviewed Ms. Cornell’s history with the Board.

In response to questions from Dr. Soin, Ms. Cornell stated that she is currently working out of her own office which she opened 19 years ago. Ms. Cornell is also working in a chiropractor’s office and has recently joined a massage clinic. Ms. Cornell stated that she took classes in massage therapy for oncology patients and she has looked into pediatric massage therapy, but she will probably stick with her current practice of orthopedic massage therapy.

Dr. Soin commented that six years is a long time to practice massage therapy without a license as Ms. Cornell did. Dr. Soin asked what changes Ms. Cornell has made to ensure that she will keep up with her license renewals. Ms. Cornell answered that she will make sure to do as good a job with the administrative part of her business as she does with patients. Ms. Cornell commented that her license renewal period came at an odd time. Ms. Cornell had just moved and did not forward her new address to
the Medical Board. Ms. Cornell recalled that during that time period it would occur to her that it seems to have been a long time since she paid the license renewal fee, but she would forget about it as she went about her busy day. Ms. Cornell was also studying to be a nuclear medicine technician at that time. Ms. Cornell stated that she is proud to be licensed by the Medical Board.

**Dr. Soin moved to release Ms. Cornell from the terms of the Board’s Order of April 9, 2014, effective immediately. Dr. Steinbergh seconded the motion.** All members voted aye. The motion carried.

**PETER FRAGATOS, M.D.**

Dr. Fragatos was appearing before the Board pursuant to his request for release from the terms of his December 8, 2010 Consent Agreement. Mr. Gonidakis reviewed Dr. Fragatos’ history with the Board.

In response to questions from Dr. Soin, Dr. Fragatos stated that he is currently practicing interventional pain medicine in Cleveland, as well as teaching part-time. Dr. Fragatos stated that his recovery is going very well and he has a good support network which includes his wife and his two sponsors. Dr. Fragatos stated that he is not currently sponsoring anyone. Dr. Fragatos stated that he does not plan to change anything in his recovery following his release from probation. Dr. Fragatos stated that he no longer has the diagnoses of manic depressive disorder or bipolar disorder.

Dr. Soin noted that Dr. Fragatos is learning a new form of Suboxone for addiction treatment and asked if Dr. Fragatos intends to go into addiction medicine. Dr. Fragatos responded that he currently prescribes some Suboxone, but very infrequently.

Dr. Fragatos stated that his first treatment was a 28-day inpatient program. After his release, he spent three months in a treatment facility. Dr. Fragatos stated that the three-month stay was very beneficial because one doesn’t really know what is happening in the first month, starts getting input in the second month, and in the third month start mentoring people and truly absorbing what recovery is.

In response to questions from Dr. Schottenstein, Dr. Fragatos stated that he attends three to four meetings per week. Dr. Fragatos stated that he has worked all the steps of the 12-step program twice and is currently working through them again. Dr. Fragatos stated that it is very helpful to cycle through the steps regularly. Dr. Fragatos stated that he has not felt the need for naltrexone or had craving for alcohol. Dr. Fragatos stated that his mood is stable without medications.

**Dr. Soin moved to release Dr. Fragatos from the terms of his December 8, 2010 Consent Agreement, effective immediately. Dr. Steinbergh seconded the motion.** All members voted aye. The motion carried.

**DENISE I. GILMAN, D.O.**

Dr. Gilman was unable to attend today’s meeting. Dr. Gilman will make her final appearance before the Board at a future meeting.

**DENISE J. SIGNS, M.D.**

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

In response to questions from Dr. Soin and Dr. Steinbergh, Dr. Signs stated that she is currently practicing as an infectious disease physician at Wooster Community Hospital. Dr. Signs stated that her recovery has been going very well and she is grateful to have been able to practice these last five years. Dr. Signs stated that she attends several meetings per week and she has a sponsee. Dr. Signs stated that she is working very hard with Wayne County to get care for heroin addicts and to address the narcotic problem in that county. Dr. Signs stated that physicians are moving towards decreased prescribing for narcotics, but it is difficult to get hospitals interested in taking care of the problem.

Dr. Signs commented that she is busy and happy with her family and grandchildren. Dr. Signs stated that she watches her four-year-old grandson every Thursday, a privilege she would not have if she had not stopped drinking.

Dr. Schottenstein agreed that it is important for Dr. Signs to make time for herself. Dr. Schottenstein read in Dr. Signs’ synopsis that she has a difficult time saying “no.” Dr. Schottenstein stated that that is somewhat of a risk factor for relapse, as well as a potential boundary issue. Dr. Schottenstein encouraged Dr. Signs to seek help if it gets to be too much. Dr. Schottenstein asked if Dr. Signs’ anxiety is under control. Dr. Signs replied that she is doing very well on Cymbalta and she will continue to see her psychiatrist every six month and stay in touch with her.

Dr. Soin moved to release Dr. Signs from the terms of her June 9, 2011 Consent Agreement, effective immediately. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

JOSEPH P. SITARIK, D.O.

Dr. Sitarik was appearing before the Board pursuant to his request for release from the terms of the Board’s Order of April 14, 2010. Mr. Gonidakis reviewed Dr. Sitarik’s history with the Board.

In response to questions from Dr. Soin, Dr. Sitarik stated that he has been able to turn his darkest moments into his greatest assets. Dr. Sitarik stated that he is medical director of a rehabilitation facility in Youngstown, Ohio. Dr. Sitarik stated that he does rounds at Glenbeigh Hospital, where he went for his rehabilitation treatment. Dr. Sitarik stated that he still does some primary care in Columbiana County, but he is mostly focused on addiction medicine. Dr. Sitarik stated that he plans to get certified in addiction medicine next year.

Dr. Sitarik stated that his recovery became very easy once he surrendered to the process. Dr. Sitarik stated that he has a routine, he has a sponsor, and he works the program on a daily basis. Dr. Sitarik stated that he continues to work steps 10, 11, and 12 of the 12-step program. Dr. Sitarik stated that he has sponsored people in the past, though he does not have any current sponsees. Dr. Sitarik stated that he plans to continue practicing in the recovery system until he retires. Dr. Sitarik stated that he will not change any aspect of his recovery program after his release from probation.

Dr. Steinbergh moved to release Dr. Sitarik from the terms of the Board’s Order of April 14, 2010, effective December 16, 2016. Dr. Soin seconded the motion. All members voted aye. The motion carried.
At Mr. Groeber’s request, Mr. Gonidakis relinquished the chair to Dr. Soin

**APPRECIATION FOR THE SERVICE OF MR. GONIDAKIS, DR. ROTHERMEL, AND DR. SAFERIN**

On behalf of the Board, Dr. Soin thanked Mr. Gonidakis, Dr. Rothermel, and Dr. Saferin for their service and hard work as President, Secretary, and Supervising Member, respectively. Dr. Soin stated that the Board members appreciate their leadership. Dr. Soin presented plaques to Dr. Rothermel and Dr. Saferin, and a gavel to Mr. Gonidakis.

Mr. Gonidakis stated that being President of the State Medical Board of Ohio has been an amazing and humbling experience.

**ADJOURN**

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

Thereupon, at 3:35 p.m., the December 14, 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 December 14, 2016, as approved on January 11, 2017.

Amol Soin, M.D., President

Kim G. Rothermel, M.D., Secretary

(SEAL)