MINUTES

THE STATE MEDICAL BOARD OF OHIO

March 9, 2016

Michael L. Gonidakis, President, called the meeting to order at 9:55 a.m. in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes Office Tower, 30 E. Broad Street, Columbus, Ohio 43215, with the following members present: Kim G. Rothermel, M.D., Secretary; Bruce R. Saferin, D.P.M., Supervising Member; Anita M. Steinbergh, D.O.; Donald R. Kenney, Sr.; Sushil Sethi, M.D.; Robert P. Giacalone; Andrew P. Schachat, M.D.; Michael Schottenstein, M.D.; and Richard Edgin, M.D. The following member was absent: Amol Soin, M.D., Vice President.

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

MINUTES REVIEW

Dr. Steinbergh moved to approve the draft minutes of the February 10, 2016, Board meeting, as written. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.
APPLICANTS FOR LICENSURE

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

ROLL CALL:

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

The motion carried.

REPORTS AND RECOMMENDATIONS

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

Mr. Gonidakis asked whether each member of the Board had received, read and considered the hearing records, the Findings of Fact, Conclusions of Law, Proposed Orders, and any objections filed in the matters of: Christopher E. Pelloski, M.D.; Heidi Davidson, M.T.; Robert Stephen Geiger, M.D.; Robert Seth Haber, M.D.; Steven C. Mann, D.O.; William George Paloski, D.O.; Joseph Anthony Rose, M.D.; Aasim Shaheen Sehbai, M.D.; Paul Srethadatta, D.O.; and Matthew Ray Steiner, M.D.. A roll call was taken:

ROLL CALL:

Dr. Rothermel - aye
Dr. Saferin - aye
Mr. Giacalone - aye
Dr. Steinbergh - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye
Mr. Gonidakis asked whether each member of the Board understands that the disciplinary guidelines do not limit any sanction to be imposed, and that the range of sanctions available in each matter runs from dismissal to permanent revocation. A roll call was taken:

ROLL CALL:

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

CHRISTOPHER E. PELLOSKI, M.D.

Mr. Gonidakis directed the Board’s attention to the matter of Christopher E. Pelloski, M.D. Objections have been filed to Mr. Porter’s Report and Recommendations and were previously distributed to Board members.

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

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

Ms. Collis stated that this case does not warrant permanent revocation of Dr. Pelloski’s medical license. Ms. Collis stated that Dr. Pelloski’s conduct did not involve his medical practice or patient care. Ms. Collis stated that Dr. Pelloski has admitted to his conduct and has taken full responsibility for it from the first time he was questioned by the police.

Ms. Collis continued that the content that Dr. Pelloski viewed on the internet is graphic. However, Dr. Pelloski’s conduct was not based on a lack of moral character. Rather, Dr. Pelloski’s conduct was based...
on an undiagnosed and untreated mental health condition for which he was attempting to treat himself. Ms. Collis stated that Dr. Pelloski bravely came before the Board and admitted to being a victim of repeated sexual abuse as a child. Dr. Pelloski testified that throughout most of his life he had no clear memory of the abuse. When Dr. Pelloski began to tell family members about his vague memories, he was not believed and he never received the treatment that he needed.

Ms. Collis stated that Dr. Pelloski’s behavior throughout his childhood was evidence that something had happened to him. Dr. Pelloski was repeatedly dismissed from schools and was misdiagnosed with hyperactivity, attention deficit disorder, depression, and alcoholism. In high school and college, Dr. Pelloski was able to focus his energies toward his education and he became a successful researcher and clinician.

Ms. Collis stated that only when Dr. Pelloski was caught was he able to be appropriately diagnosed with post-traumatic stress disorder (PTSD) and he got the treatment he needed. Ms. Collis stated that she found it remarkable that the Assistant Attorneys General denied or minimized what had happened to Dr. Pelloski, even after the testimony of Dr. Pelloski and experts. Ms. Collis stated that it is very ingrained in our society to doubt or minimize when people say they have been sexually abused, which is part of the cycle that prevents people from getting appropriate treatment.

Ms. Collis stated that Dr. Pelloski’s conduct did not affect patient care and, even after a great deal of publicity, not one patient came forward to testify against him. Ms. Collis stated that the Board has repeatedly allowed other physicians to continue to practice after being diagnosed with mental health or chemical dependency issues, even when their conduct has affected patient care. Ms. Collis stated that Dr. Pelloski has been punished and she asked the Board to reinstate Dr. Pelloski’s medical license, which has been suspended for three years.

Dr. Pelloski stated that he could not fully explain his actions in a way that would be understandable to someone with a healthy mind. Dr. Pelloski stated that now that he is much healthier, he does not understand his actions either. Dr. Pelloski stated that he had felt a compulsion to step into that world because being there brought him back to very dark times in his life. Dr. Pelloski stated that regardless of the reason, his actions were inexcusable and were harmful to everyone. Dr. Pelloski stated that the content he viewed was disgusting and deplorable. Dr. Pelloski stated that this was not something that he liked or wanted to do, but some of the things he viewed had been done to him as a little boy.

Dr. Pelloski stated that he has done everything he can to get better. Dr. Pelloski added that he has been justly punished and rightly publically shamed. Dr. Pelloski stated that it agonizes him to know that his actions have jeopardized the time and energy that society has invested in his training and experience. However, Dr. Pelloski realizes that if things had not changed he would have lost all of that anyway because he was on a path to an early death due to not taking care of himself, not respecting his skills, not respecting the medical profession, and not respecting himself.

Dr. Pelloski stated that he is now the healthiest he has ever been and that he can go on to treat thousands more cancer patients if he is given the chance. Dr. Pelloski asked for the Board’s forgiveness and a chance at redemption.
Mr. Gonidakis asked if the Assistant Attorney General would like to respond. Mr. Wakley stated that he would like to respond.

Mr. Wakley stated that as the head of Pediatric Oncology at Ohio State University Medical Center (Ohio State), Dr. Pelloski had been entrusted with the care of children at the most desperate and dire of circumstances. However, Dr. Pelloski was also a participant in the market for the most vile, despicable, and repugnant material created by man: Child pornography. Mr. Wakley stated that while Dr. Pelloski’s wife and children slept just one or two rooms away, he downloaded and installed file-sharing software to his Ohio State-issued laptop solely for the purpose of obtaining child pornography.

Mr. Wakley continued that Dr. Pelloski searched for “PTHC,” which stands for “Pre-Teen Hardcore,” and downloaded videos of girls as young as six years old being raped by adult men. Dr. Wakley described one video found on Dr. Pelloski’s computer which showed a girl approximately ten to twelve years old grimacing and groaning as she was anally raped by an adult male. Mr. Wakley reiterated that Dr. Pelloski had searched for this material, downloaded it to his computer, and viewed it. After viewing it, Dr. Pelloski deleted the files and the software in an attempt to erase all record. Fortunately, law enforcement was able to tack this material to Dr. Pelloski. After identifying Dr. Pelloski searching for child pornography on more than one occasion, law enforcement seized his computer and discovered multiple child pornography files.

Mr. Wakley stated that after Dr. Pelloski was arrested his attorney and his abuse therapist stated that this had been therapeutic viewing of child pornography, that it had not been for sexual gratification, and that Dr. Pelloski had been a victim of child abuse himself. Mr. Wakley stated that Dr. Pelloski used this theory to avoid very serious criminal charges in federal court. Mr. Wakley stated that whether one believes Dr. Pelloski was abused as a child, the fact remains that there was no legitimate reason for him to have sought out images of child rape. Mr. Wakley stated that not even the head of Pediatric Oncology at Ohio State is above the law, and no one’s training or experience is valuable or important enough to make them above the law. Mr. Wakley stated that Dr. Pelloski led a privileged and successful life and was well-respected, but he also contributed to the market for the abuse of children.

Mr. Wakley stated that when he asked Dr. Pelloski during the hearing what the Board should do to him, Dr. Pelloski was not contrite or remorseful. Mr. Wakley stated that even today Dr. Pelloski says that nothing should happen to him and that his medical license should be reinstated. Mr. Wakley opined that the Board cannot allow Dr. Pelloski to bear its seal of approval and he cannot be trusted with the lives of patients. Mr. Wakley stated that Dr. Pelloski’s medical license must be permanently revoked.

Dr. Steinbergh moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Christopher E. Pelloski, M.D. Mr. Giacalone seconded the motion.

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

Dr. Steinbergh briefly described Dr. Pelloski’s medical career. Dr. Pelloski worked at Ohio State until July
2013 when he was arrested for downloading child pornography, following several months of investigation by the Franklin County Internet Crimes Against Children Task Force. Dr. Steinbergh stated that 59 child pornography videos were discovered on Dr. Pelloski’s computer. Dr. Steinbergh stated that it was horrible that anyone would seek out and watch children under these circumstances. In August 2013, Dr. Pelloski agreed to an indefinite suspension of his Ohio medical license.

Dr. Steinbergh continued that on July 11, 2014, Dr. Pelloski was adjudicated guilty following his guilty plea to one felony count of Access with Intent to View Child Pornography. Dr. Pelloski was sentenced to twelve months and one day of incarceration, followed by five years of supervised release with conditions. Dr. Pelloski was also ordered to pay a fine of $10,000 and an assessment fee of $100. Dr. Pelloski testified that he served seven-and-a-half months at a federal correctional institution followed by 90 days at a halfway house. Dr. Pelloski is considered a Tier 2 sex offender. Dr. Pelloski testified that he expects to be adjusted down to Tier 1 in the future, after which he will spend ten more years on the sex offender registry. As a result, Dr. Pelloski was unable to continue living in his home because it is within 1,000 feet of a park.

Dr. Steinbergh stated that a psychologist and a social worker, both of whom had evaluated Dr. Pelloski, testified at the hearing about his reasons for using child pornography as a way of self-healing from tragic molestation events in his childhood.

Dr. Steinbergh noted that Dr. Pelloski has admitted that his actions harmed children and perpetuated a market for child pornography. Dr. Steinbergh stated that Dr. Pelloski put his career, his responsibility to residents and medical students, his wife, and his children at risk due to his desire to solve a serious dilemma in his life. Dr. Steinbergh opined that this was very narcissistic of Dr. Pelloski. Dr. Steinbergh opined that Dr. Pelloski has given up his moral responsibility to his profession. Dr. Steinbergh stated that she agrees with the Hearing Examiner’s Findings of Fact, Conclusions of Law, and Proposed Order of permanent revocation.

Mr. Kenney stated that Dr. Pelloski has done terrible things, for which he has been punished through the courts. Mr. Kenney noted that the judge in Dr. Pelloski’s criminal case suggested that people who do as Dr. Pelloski had done do not play out what they see in reality. Mr. Kenney opined that the Medical Board, when deciding this matter, should determine whether patient care was affected.

Dr. Schottenstein stated that the Board is being asked to believe that Dr. Pelloski was using videos of child pornography as a form of therapy for himself and as a way to explore his own memories of child abuse. Dr. Schottenstein stated that Dr. Pelloski intentionally searched for this material on the internet with the knowledge that this behavior is a criminal offense. Dr. Schottenstein noted that in his testimony, Dr. Pelloski acknowledged that his actions harmed children and perpetuated a market for child pornography.

Dr. Schottenstein stated that he understands the concept of trying to process one’s trauma with intentional exposure to it. Dr. Schottenstein further stated that he willing to accept the contention that Dr. Pelloski was not engaging in this activity for sexual gratification. However, Dr. Schottenstein did not find these contentions mitigating. Dr. Schottenstein opined that Dr. Pelloski made a judgment call that his right to pursue his own therapy made it justifiable to engage in reprehensible behavior. Dr. Schottenstein stated that the right to engage in behavior to help oneself must not outweigh the right of children to be protected.
in our society, and Dr. Pelloski’s behavior contributed to the violation of that right. Dr. Schottenstein opined, counter to the defense attorney’s contention, that this matter is based on moral character because Dr. Pelloski’s right to pursue self-help ends where the rights of children begin.

Mr. Giacalone agreed with Dr. Schottenstein’s comments. Mr. Giacalone was troubled that Dr. Pelloski has claimed that he was abused as a child, yet he viewed child pornography knowing that it is illegal and creates a market for further child abuse. Mr. Giacalone stated that if Dr. Pelloski truly has a disease state for which he needs treatment, he should seek out an appropriate specialist instead of attempting to treat himself in a field in which he was not trained. Mr. Giacalone opined that this is a matter of moral compass and asked if the Board wants Dr. Pelloski treating other patients, particularly children. Mr. Giacalone was happy that no patient was harmed and that Dr. Pelloski was stopped before he harmed a patient.

Mr. Gonidakis stated that some acts are so despicable, deplorable, and inhumane that you do not have to be a physician, an attorney, or a member of the Medical Board to reject it. Mr. Gonidakis asked what it would say about our society if the Board turns a blind eye in order to give Dr. Pelloski another chance. Mr. Gonidakis stated that we are all charged as human beings to protect children.

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
- Mr. Gonidakis - aye
- Dr. Sethi - abstain
- Mr. Kenney - aye
- Dr. Schachat - aye
- Dr. Schottenstein - aye
- Dr. Edgin - aye

The motion to approve carried.

HEIDI DAVIDSON, M.T.

Mr. Gonidakis directed the Board’s attention to the matter of Heidi Davidson, M.T. No objections have been filed. Ms. Shamansky was the Hearing Examiner.

Dr. Schottenstein moved to approve and confirm Ms. Shamansky’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Heidi Davidson, M.T. Mr. Giacalone seconded the motion.

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

Mr. Giacalone briefly reviewed Ms. Davidson’s education and career. In September 2010 Ms. Davidson
submitted an application for licensure as a massage therapist and disclosed that she had been convicted of Driving Under the Influence of Alcohol (DUI) in 2007. Ms. Davidson stated on her application that at the time of her arrest she realized she had a problem and checked herself into a rehabilitation program. The Board granted Ms. Davidson’s application for licensure with no restrictions or requirements for counseling or treatment. Mr. Giacalone stated that Ms. Davidson failed to disclose on her application that the incident in 2007 was actually her second DUI offense. Ms. Davidson’s first DUI offense had occurred in Colorado in 1998.

Mr. Giacalone continued that in 2014 Ms. Davidson relapsed on alcohol, reportedly due to stress from family issues. In June 2014 Ms. Davidson was arrested for Operating a Motor Vehicle While Intoxicated (OMVI). Ms. Davidson pleaded guilty and was sentenced to 180 days in jail, with all but three days suspended, and her driver’s license was suspended. Ms. Davidson was also ordered to a chemical dependency assessment and placed on reporting probation for two years.

Mr. Giacalone noted that Ms. Davidson also acknowledges a past history of marijuana use, about once per month over about a ten year period. Ms. Davidson denied any marijuana use since about 2009. Mr. Giacalone stated that during her 2014 arrest she was found to have drug paraphernalia and a small amount of marijuana, but those charges were dismissed.

Mr. Giacalone stated that he supports the Proposed Order to suspend Ms. Davidson’s massage therapy license for not less than 90 days with interim monitoring conditions, including participation in a rehabilitation program.

Dr. Schottenstein opined that Ms. Davidson is in a great deal of denial about her condition. Dr. Schottenstein stated that periods of sustained sobriety, as Ms. Davidson has had, can give one a false confidence that there is not a problem. Dr. Schottenstein stated that without treatment, Ms. Davidson will continue the cycle of periods of sobriety followed by relapse.

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

ROLL CALL:

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

The motion to approve carried.
Robert Stephen Geiger, M.D.

Mr. Gonidakis directed the Board’s attention to the matter of Robert Stephen Geiger, M.D. Objections have been filed to Ms. Blue’s Report and Recommendation and were previously distributed to Board members.

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

Dr. Geiger was represented by his attorney, Brian Gannon. Mr. Gannon stated that he will allow Dr. Geiger address the Board as to why it would be a travesty if he lost his Ohio medical license.

Dr. Geiger stated that he went into medicine in order to care for patients and that if he ever felt that patient safety was being compromised, he would report it and take steps to stop it. Dr. Geiger stated that do to otherwise would go against the core of everything he stands for as a physician. Dr. Geiger stated that in February 2013, he concluded that Dr. Bressi had probably acted inappropriately and violated the Medical Practiced Act. Dr. Geiger stated that this warranted terminating Dr. Bressi and reporting him to the appropriate authorities. Dr. Geiger stated that if he had developed his belief sooner he would have reported it sooner.

Dr. Geiger continued that he cares deeply about his patients, noting that he had been given the Most Caring Physician Award in the Summa Health System by a vote of his peers. Dr. Geiger stated that he has always cared deeply about patient safety. Dr. Geiger stated that the Hearing Examiner’s conclusion that he put his financial self-interest above patient safety is detestable to him. Dr. Geiger stated that even with patient safety as a priority, he would not take action against Dr. Bressi based on an allegation that he did not believe was true. Dr. Geiger stated that he had weighed all the evidence for and against Dr. Bressi and had concluded there was no reliable information to convince him that the allegations were true. Dr. Geiger stated that from the earliest allegations against Dr. Bressi, the information had always been conflicting.

Dr. Geiger stated that until February 2013 the allegations against Dr. Bressi were episodic, occurring in the autumn of 2010 and the summer of 2012. Dr. Geiger stated that each report of Dr. Bressi’s misconduct was countered by one or more other reports that the alleged actions did not occur. Dr. Geiger stated that Dr. Bressi had treated many of the 150 to 200 patients per day who had visited the practice. Dr. Geiger stated that many patients have requested manual manipulation by Dr. Bressi and there had been no reports of misconduct in the 20 years prior to 2010.

Dr. Geiger stated that Dr. Bressi adamantly denied every allegation in a very plausible and persuasive manner. Dr. Geiger stated that Dr. Bressi was so persuasive that he was able to convince a jury, which had much more information than Dr. Geiger, that he was not guilty. Dr. Geiger stated that while a criminal trial has a different process from that of the Medical Board, it is very similar to Dr. Geiger’s mental process of weighing the evidence for and against Dr. Bressi. Dr. Geiger stated that both he and the jurors came to the same conclusion due to reasonable doubt. Dr. Geiger further noted that Ryan Nash, M.D., the Chair of Medical Ethics and Professionalism at Ohio State University, concluded that Dr. Geiger’s doubts had been reasonable and that Dr. Geiger had not violated any ethical or legal duties as a physician.
Dr. Geiger stated that he fired Dr. Bressi in March 2013 after learning of additional patient complaints that were clear violations of practice policy, which was the first time he had believed that Dr. Bressi had engaged in misconduct. Dr. Geiger stated that he was disappointed when he learned that his former attorneys did not report this information to the Board after they had assured Dr. Geiger that they would. Dr. Geiger apologized to the Board for not reporting the information himself, but that the evidence clearly indicates in writing that he had intended to give this information to the Board.

Dr. Geiger asked the Board to allow him to continue treating patient as he has done with appropriate compassion for 30 years.

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

Ms. Snyder opined that one of the things the Board needed to hear from Dr. Geiger today was “I’m sorry” for what Dr. Bressi did to his patients and in failing in his duty as a gatekeeper. Ms. Snyder stated that this case is not about legal standards or what courts have done. Rather, it is about the fact that Dr. Geiger did not report Dr. Bressi because Dr. Geiger feared the financial consequences and what it would do to Dr. Bressi, his friend. Ms. Snyder stated that these are the reasons that Dr. Geiger failed to report the allegations against Dr. Bressi, and not because he did not believe what was happening.

Ms. Snyder continued that from 2010 to 2013 countless reports were made to Dr. Geiger regarding Dr. Bressi’s deteriorating behavior and hygiene. Ms. Snyder stated that two trusted employees reported on multiple occasions that they saw Dr. Bressi insert his thumb into the rectums of sedated patients. The reports on Dr. Bressi’s poor hygiene, which was uncharacteristic of him, indicate a man who was falling apart before everyone’s eyes, and yet nothing was done. Ms. Snyder opined that the worst part of this case involves Patient 1, a long-time nurse for Dr. Geiger who told him that she had been sexually assaulted by Dr. Bressi during a massage, including touching her vagina. Nevertheless, Dr. Geiger did nothing.

Ms. Snyder stated that the October 3, 2010 email that Dr. Geiger sent to his staff was in response to an allegation of sexual misconduct. It stated, in part, “All it would take to bring this pain center crashing down would be for one patient to file a serious allegation of gross sexual imposition with the appropriate authorities.” In June of 2012 Dr. Geiger wrote a letter to Dr. Bressi which stated, in part, “These complaints are similar in nature from a number of different sources, thus lending credence to their validity. These actions place your career, the practice, and your family in jeopardy.” Ms. Snyder stated that these are not the words of someone who did not believe what was happening. Rather, they are the words of someone who was scared of what was happening.

Ms. Snyder stated that the Proposed Order of permanent revocation is the harshest penalty the Board can impose. Ms. Snyder advised the Board to examine the timeline of this case and determine when it thinks Dr. Geiger believed Dr. Bressi’s misconduct was happening. Ms. Snyder stated that the Hearing Examiner makes a very compelling argument that Dr. Geiger believed the misconduct was happening as early as 2010. Ms. Snyder opined that it does not matter when Dr. Geiger believed it was happening because every patient Dr. Bressi saw after that point was put at risk. Ms. Snyder stated that the Hearing Examiner
recommended permanent revocation because of the many patients that Dr. Geiger put at risk by failing to report Dr. Bressi’s conduct.

**Dr. Steinbergh moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Robert Stephen Geiger, M.D. Mr. Giacalone seconded the motion.**

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

Dr. Steinbergh commented that to her knowledge, this is first time the Board has considered a case in which a physician is alleged to have violated the Medical Practices Act by failing to report another physician to the Board. Dr. Steinbergh stated that Dr. Geiger’s former partner, James Bressi, D.O., was convicted of a misdemeanor count of sexual imposition based on his inappropriate behavior with a patient. Dr. Bressi ultimately permanently surrendered his license to practice medicine and surgery in Ohio.

Dr. Steinbergh stated that Dr. Geiger, who is board-certified in anesthesiology and pain management, had been a co-owner with Dr. Bressi of a practice in which they performed many spinal injections. Dr. Steinbergh stated that as early as 2010, an x-ray technician in Dr. Geiger’s and Dr. Bressi’s practice expressed concerns to Dr. Geiger regarding Dr. Bressi. Specifically, the record shows that at the beginning of some procedures involving female patients, Dr. Bressi would approach the patient on the table, perhaps during the time of sedation, and hold the patient’s hand. Dr. Bressi would also place the patient’s hand beneath his protective apron and may have placed the hand on his thigh or towards his groin. The x-ray technician also reported that he had observed Dr. Bressi inserting his thumb into patients’ rectums. Dr. Steinbergh stated that other employees also reported witnessing this behavior, although some other employees did not witness it. Other reported behavior by Dr. Bressi included kissing sedated female patients on the lips or cheek, supposedly to relax them. Dr. Steinbergh stated that this is very unprofessional behavior for a physician.

Dr. Steinbergh stated that in September 2010 Dr. Geiger and other staff had a meeting to discuss Dr. Bressi’s alleged behavior. Mr. Roberts, the x-ray technician, testified that Dr. Geiger was reluctant to believe these staff reports and doubted that the staff members had actually seen what they reported. Mr. Roberts testified that Dr. Geiger did not initially believe that anyone could do these things.

Dr. Steinbergh continued that on October 3, 2010, Dr. Geiger sent an email from his personal email account to all procedure room staff, including Dr. Bressi, which read, in pertinent part, as follows (emphasis in original):

> To all block room personnel:

> I have been wanting to send you this message all week and had been trying to put it on to our intraoffice mail from my home during the evening but haven’t been able to link up with the remote server [sic]. I finally gave up on it. Actually, it is probably safer sent by this route because messages sent via Practice Partners mail are permanently recorded and kept on the hard drive even if erased.
Last week a block room patient filed a complaint with the Stow police department claiming that we (I) “aggressively pulled down her pants” for the procedure. ***

Nonetheless, I have given this matter much thought and consideration and I think that we can all learn something from this experience.

I think that this incident can serve as a very valuable reminder to us: Be very careful how you interact with the procedure patients in the block room!! We need to be very careful about what we say, and we particularly need to be very careful how we touch the patient. Our words, gestures and physical contact could easily be misinterpreted by the patient, especially under the influence of sedation. We must also be monitoring each other to make sure our contact with the patient might in no way be construed as sexual impropriety. If you witness anything questionable by a coworker, you might suggest to them that he/she should be more careful in the future. IF IT SEEMS INAPPROPRIATE TO YOU AT THE TIME – IT PROBABLY IS!!!

All it would take to bring this pain center crashing down would be for one patient to file a serious allegation of gross sexual imposition with the appropriate authorities. I can picture the headlines in the Akron Beacon Journal in my mind. Whether or not the allegation was true it would not stop irreparable damage from being done. This is exactly the sort of thing the media loves to publicize and exactly the sort of thing the general public loves to read about!

Take-home message: Be very careful of how and where you touch the patients and what you say to them!!! Be mindful of how others around you interact with the patients. Your job, your career, your reputation are all on the line. ***

Dr. Steinbergh stated that one of the tenets of patient safety, as it is taught throughout the United States, is “See it, say it, fix it.” Dr. Steinbergh stated that Mr. Roberts saw it, said it, and he looked to Dr. Geiger to fix it. Dr. Steinbergh also noted how Patient 1 and her mother were affected by these sexual boundary issues, as described in the Report and Recommendation.

Dr. Steinbergh stated that Dr. Bressi was an osteopathic physician and was trained in osteopathic manipulative medicine. However, Dr. Steinbergh stated that it was not appropriate for Dr. Bressi to have been massaging patients in the manner described in complaints, getting close to the vagina and touching the vagina. Dr. Steinbergh stated that she is convinced that Dr. Geiger was aware of what Dr. Bressi was doing because it had been reported to him by nurses and other staff. Dr. Steinbergh stated that Dr. Geiger did nothing about this for years until he was forced to do so by circumstances. Dr. Steinbergh stated that Dr. Geiger’s concern seems to have been for his friend Dr. Bressi and the possibility that the practice could be disrupted.

Dr. Steinbergh opined that Dr. Geiger enabled Dr. Bressi to continue harming patients from 2010 until he was released from the practice in March 2013. Dr. Steinbergh stated that this is an egregious case and she agreed with the Proposed Order to permanently revoke Dr. Geiger’s Ohio medical license.
Dr. Schottenstein stated that Dr. Geiger’s defense is based on the wording of the statute, which states that a physician must report the misconduct of another physician if there is a belief that the misconduct has occurred. Dr. Schottenstein stated that it is a subjective standard as to whether Dr. Geiger had formed such a belief in his mind. Dr. Schottenstein stated that by the logic of this defense, any misconduct that is not witnessed first-hand can be justified as not reportable simply by maintaining that there was a lack of belief and no one could prove otherwise. However, Dr. Schottenstein pointed out that that statute does not require a certain belief, an unquestionable belief, an undeniable belief, an irrefutable belief, or an indisputable belief. Rather, the statute simply says “belief,” and there are many different levels of belief.

Dr. Schottenstein opined that Dr. Geiger did believe the reports on Dr. Bressi’s actions on some level. Dr. Schottenstein stated that it not plausible that Dr. Geiger did not have some such belief because Dr. Geiger is an intelligent and high-functioning individual and the reports added up. Dr. Schottenstein noted that in a letter to Dr. Bressi on June 15, 2012, Dr. Geiger wrote, “These complaints are similar in nature from a number of different sources thus lending credence to their validity rather than just being someone’s perception.” Dr. Schottenstein emphasized that Dr. Geiger used the phrase “lends credence” and stated that “credence” means “belief.” Dr. Schottenstein stated that this is essentially an admission of a basic level of belief in the reports on Dr. Bressi’s behavior. Dr. Schottenstein stated that he rejects the notion that Dr. Geiger did not have a basic level of belief. Further, Dr. Schottenstein opined that this basic level of belief should have triggered a report to the Medical Board. Dr. Schottenstein stated that juries in court cases are subject to a “beyond a reasonable doubt” standard, which is not the standard one uses to report a potential violation to the State Medical Board.

Mr. Giacalone agreed with Dr. Schottenstein and stated that the logical conclusion of the defense’s argument would be that there is never a reporting obligation because a person can always claim that they never had a belief that there was a violation. Based on the information, particularly the email that Dr. Geiger sent on October 3, 2010, Mr. Giacalone opined that Dr. Geiger did believe that the reported incidents concerning Dr. Bressi occurred. Mr. Giacalone further believed that Dr. Geiger is lying when he says that he did not believe the incidents occurred.

Mr. Giacalone stated that he is most troubled that Dr. Geiger has not expressed remorse or apologized in this matter. Mr. Giacalone opined that Dr. Geiger’s primary concerns had been to protect his practice and his financial situation and in giving the benefit of the doubt to his partner and fellow physician. Mr. Giacalone stated that while Dr. Geiger did not commit the reported acts, he was culpable in allowing them to happen. Mr. Giacalone stated that he struggles to understand why Dr. Geiger failed to take action when it was apparent that people were being hurt.

Dr. Steinbergh noted that in 2012 it had been reported that Dr. Bressi was tracing the lips of sedated patients with his gloved hand. When asked about this by a nurse, Dr. Bressi stated that he was doing this because he was an osteopathic physician and that tracing the lips helps to relax the patient. The nurse discussed this exchange with Dr. Geiger. Dr. Steinbergh stated that osteopathic physicians do not trace lips to relax patients and that it is not an acceptable behavior.

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
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to approve carried.

ROBERT SETH HABER, M.D.

Mr. Gonidakis directed the Board’s attention to the matter of Robert Sethi Haber, M.D. Objections have been filed to Ms. Blue’s Report and Recommendation and were previously distributed to Board members.

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

Dr. Haber was represented by his attorney, John Irwin.

Mr. Irwin stated that in March 2014 Dr. Haber voluntarily surrendered his Drug Enforcement Administration (DEA) registration following investigation by the DEA and the Medical Board that had revealed deficiencies in Dr. Haber’s management of his office supplies of controlled substances. Mr. Irwin stated that immediately following this, Dr. Haber undertook very aggressive steps to correct his error and to further educate himself. Mr. Irwin stated that Dr. Haber took continuing medical education (CME) courses in controlled substance prescribing and medical record-keeping. As a result, Dr. Haber has revised his policies and educated his staff. Mr. Irwin hoped that the Board will give Dr. Haber credit for doing everything possible to mitigate and correct his errors.

Dr. Haber acknowledged that there were errors regarding how his office managed controlled substances, but he stated that he has since learned his lesson and changed his philosophy on prescribing. Dr. Haber stated that he was never taught the prescribing rules in medical school, residency, or practice, and what he had been taught was incorrect.

Dr. Haber stated that the last two years have been a nightmare for him. Dr. Haber stated that he voluntarily closed his practice twice for 60 days each in order to take courses and bring himself into compliance. Dr. Haber stated that the culture of his office has changed and very strict policies have been introduced. Dr. Haber stated that he also makes efforts to educate the medical students and residents who rotate through his office on these matters.

Dr. Haber stated that he cares for a very unique patient population of babies and children with serious skin
diseases and that he is a referral destination for dermatologists and other professionals around Ohio. Dr. Haber stated that no other physician does exactly what he does. Dr. Haber stated that he has taken every possible measure to bring his office into compliance. Dr. Haber stated that a six-month suspension will be a very long time for his patients and referring physicians to be without the special care that Dr. Haber’s office provides. Dr. Haber hoped that the Board will show a measure of leniency with consideration of the seriousness with which he has approached his past mistakes.

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

Ms. Snyder stated that Dr. Haber voluntarily surrendered his DEA registration following a joint investigation by the DEA and the Medical Board, which was triggered by one of Dr. Haber’s employees using his DEA number to illegally obtain controlled substances. Ms. Snyder stated that during the course of the investigation, it was also discovered that Dr. Haber was writing prescriptions for his employees and instructing his employees to fill the prescriptions at pharmacies and to bring back the medications for use as office stock. Ms. Snyder commented that the amount of medication obtained in this manner was relatively small.

Ms. Snyder noted that the Report and Recommendation mentions that Dr. Haber also wrote prescriptions for patients and mailed them to the patients in advance of procedures. Ms. Snyder stated that this practice is not a violation and asked the Board to refrain from considering it in their decision today.

Ms. Snyder stated that there is no question that Dr. Haber had a sloppy practice in the past with respect to controlled substances. Ms. Snyder opined that Dr. Haber has taken this matter very seriously and has taken steps to improve his practice.

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

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

Mr. Kenney stated that Dr. Haber is a board-certified dermatologist whose practice consists of adult and pediatric dermatology, clinical research, and cosmetic surgery. On March 5, 2014, Dr. Haber voluntarily surrendered his Drug Enforcement Administration (DEA) registration due to an alleged failure to comply with federal requirements. Mr. Kenney stated that Dr. Haber’s former employee had used Dr. Haber’s DEA number to illegally procure controlled substances and had also improperly taken office supplies of medications. Dr. Haber had also been prescribing Percocet to his former employee. In addition, a DEA investigator questioned Dr. Haber about a bottle of Valium that he used for his patients which had not been acquired according to DEA regulations. Mr. Kenney noted that Dr. Haber would also send his preoperative patients an information package, including prescriptions for Percocet and Valium; However, Mr. Kenney stated that that is a legal practice.

Mr. Kenney stated that Dr. Haber has attended a four-day course on controlled substance prescribing, which Dr. Haber suggested would dramatically reduce his prescribing of those medications. Dr. Haber has
also indicated that he will eliminate his practice of prescribing to members of his staff. Dr. Haber has stated that he no longer keeps a supply of Valium or Percocet in his office and that there has not been a single incidence in which having those drugs on hand would have been useful. Dr. Haber has further stated that he has reduced the amount of controlled substances he prescribes and there has been no negative impact in his patients. Dr. Haber has stated that after he regains his DEA registration he will only prescribe narcotics upon request, and then only if the patient has no history of abuse. Mr. Kenney stated that these are changes that anyone would institute when facing the prospect of disciplinary action by the Medical Board. Mr. Kenney also stated that there is no proven patient harm in this matter.

Mr. Kenney stated that he supports the Proposed Order, which would suspend Dr. Haber’s medical license for 180 days followed by probationary terms for a minimum of three years.

Dr. Steinbergh opined that the mitigating actions Dr. Haber has taken in response to this matter have been appropriate. Dr. Steinbergh suggested that the Proposed Order be amended to stay the 180-day suspension of Dr. Haber’s license, move the Proposed Order’s “Conditions for Reinstatement or Restoration” into the probationary terms, and reduce the minimum probation time from three years to two years.

**Dr. Steinbergh moved to amend the Proposed Order to stay the suspension of Dr. Haber’s license.**

**Dr. Steinbergh further moved to move the Proposed Order’s reinstatement requirements for a controlled substance prescribing course and medical records course into the probationary terms, to be completed within the first year of probation.** **Dr. Steinbergh further moved to reduce the probationary time to at least two years.** **Dr. Steinbergh further moved that the Order become effective upon mailing.** Dr. Schachat seconded the motion.

Mr. Kenney opined that a minimum 180-day suspension is not unnecessarily harsh under these circumstances. Dr. Steinbergh stated that she has offered this amendment due to Dr. Haber’s testimony that he has already begun to address these matters, including taking the required courses and changing his office policies and procedures. Dr. Steinbergh opined that Dr. Haber has solved his problem and that the Board will have the ability to monitor Dr. Haber’s practice during the probationary period. Dr. Steinbergh opined that Dr. Haber is ready to practice medicine safely.

The Board continued to discuss this matter. Mr. Kenney indicated that he would consider a suspension period of 90 days to be acceptable. Mr. Giacalone agreed with Mr. Kenney, stating that things were done inappropriately in Dr. Haber’s practice. Mr. Gonidakis noted that, according to what Dr. Haber said today, Dr. Haber had already closed his office for two 60-day periods to deal with the issues in his practice.

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

**ROLL CALL:**

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

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 Seth Haber, M.D. Dr. Schottenstein seconded the motion. A vote was taken:

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

Having failed to achieve six affirmative votes, the motion to approve did not carry.

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

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

Dr. Steinbergh moved to amend the Proposed Order to reduce the time of suspension to at least 90 days. Dr. Steinbergh further moved to reduce the time of probation to at least two years. Mr. Giacalone seconded the motion.

The Board briefly discussed the nature of the Order’s “wind-down” period, whereby the Order will become effective on the 31st day after it is mailed. Dr. Steinbergh stated that the wind-down period will give Dr. Haber a chance to notify his patients and that he will not take on new patients during that time. Dr. Steinbergh stated that Dr. Haber may choose to keep his practice open during his suspension, perhaps hiring a *locum tenens* physician to treat his patients or simply making his medical records available to patients, so long as he does not practice medicine himself.

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

ROLL CALL: 
Dr. Rothermel - abstain  
Dr. Saferin - abstain
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 Seth Haber, M.D.** Mr. Giacalone seconded the motion. A vote was taken:

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<td>Mr. Giacalone</td>
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<td>Mr. Gonidakis</td>
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<td>Dr. Sethi</td>
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<td>Mr. Kenney</td>
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<td>Dr. Schachat</td>
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<td>Dr. Schottenstein</td>
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<td>Dr. Edgin</td>
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The motion to approve carried.

The Board took a brief recess at 11:30 a.m. and resumed at 11:35 a.m.

**STEVEN C. MANN, D.O.**

Mr. Gonidakis directed the Board’s attention to the matter of Steven C. Mann, D.O. Objections have been filed to Ms. Blue’s Report and Recommendation and were previously distributed to Board members.

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

Dr. Mann was represented by his attorney, Gerald Sunbury.

Mr. Sunbury asked that the Board provide a realistic pathway that would allow Dr. Mann the privilege of practicing medicine in the future. Mr. Sunbury stated that Dr. Mann has practiced medicine for nearly 30 years and his conduct has not affected his patients in any way. Mr. Sunbury stated that Dr. Mann self-reported his violation and accepts responsibility for his misdemeanor conviction. Mr. Sunbury stated that
there have never been problems with Dr. Mann’s standards of conduct regarding patients.

Dr. Mann expressed remorse for the circumstances that have brought him before the Board today. Dr. Mann opined that his bipolar disorder was not correctly addressed at his hearing. Dr. Mann explained that according to a Harvard Health study, bipolar disorder differs from other depressive disorders in that the mood swings from depression to mania. Dr. Mann also stated that this mental disease can be kept in a stable state through the use of mood stabilizers. Dr. Mann referred to an article from the New England Journal of Medicine which states that during a manic episode a patient may endanger their marriage with risky and disinhibited sexual behavior. The article also stated that the manic behavior is distinct from the patient’s usual personality and that during healthy intervals patients often regret their behavior during manic or depressive episodes. Dr. Mann stated this article describes what has been happening to him.

Dr. Mann stated that there is an estimated 12.3 million Americans who suffer from bipolar disorder, but only 3.9 million have been correctly diagnosed. Dr. Mann stated that during a manic episode one can feel euphoric with increased energy and impulsivity, and can lead to risky sexual behavior. Dr. Mann stated that he has been misdiagnosed in the past and has never received the proper treatment for his bipolar disorder until recently. Dr. Mann stated that now that he is receiving appropriate treatment he knows he can live a healthier life. Dr. Mann stated that his psychiatrist believes that his recent manic episode may have been precipitated due to an adverse effect from the medication Neurontin.

Dr. Mann stated that it had been over 23 years since his previous manic episode. Dr. Mann stated that he is now in remission and he has been cleared by his treating physician to practice medicine. Dr. Mann stated that now that he is being treated with appropriate medications, he feels healthier than he ever has. Dr. Mann stated that now that he understands his condition, he can recognize triggers before his behavior becomes inappropriate and can avoid medications that may trigger manic episodes.

Dr. Mann continued that when he is not experiencing poor impulse control, which is 99.9% of his life, he cannot imagine doing what he did. Dr. Mann stated that the actions of poor impulse control are horrific, extremely embarrassing, and humiliating. Dr. Mann stated that he loves his wife and his family deeply and he never wants to jeopardize his marriage, hurt anyone, or disappoint the Medical Board. Dr. Mann stated that he plans to see a psychiatrist for the rest of his life to ensure the success of his treatment.

Dr. Mann stated that he respects women and would never try to intentionally hurt or victimize a woman. Dr. Mann stated that after each of his manic episodes he fell into a deep depression due of his actions. Dr. Mann stated that he sees himself as a Christian man and he sees his behavior during manic episodes as a sin.

Dr. Mann stated that his bipolar disorder has never affected his professional life in any way and that he is a caring and thorough physician. Dr. Mann stated that he would like to serve on medical missions again and noted that he served on two missions to Belize in the past. Dr. Mann stated that he has also volunteered as a member of the medical team at the Arnold Classic for the past 16 years. Dr. Mann asked the Board to consider giving him the opportunity and privilege to continue practicing medicine in Ohio so he can serve others with his medical education and experience.
Mr. Gonidakis asked if the Assistant Attorney General would like to respond. Mr. Wilcox stated that he would like to respond.

Mr. Wilcox stated that he strongly supports the Report and Recommendation’s Proposed Order of permanent revocation. Mr. Wilcox noted that Dr. Mann has a history of this behavior, having been first arrested and/or convicted for indecent exposure in 1977. Mr. Wilcox stated that Dr. Mann was also arrested in 1978, 1981, 1991, and 2014. Mr. Wilcox stated that there is an almost 40-year history of this unacceptable and repugnant behavior.

Mr. Wilcox continued that the Board has given Dr. Mann chances in the past. The Board originally licensed Dr. Mann in 1988 and put him under a consent agreement due to his prior arrests. However, Dr. Mann was arrested and convicted for public indecency in 1991 after exposing himself to two females. Based on that event, the Board permanently revoked Dr. Mann’s medical license, but stayed the revocation and required him to undergo monitoring and treatment.

Mr. Wilcox stated that in 2014 Dr. Mann, by his own admission, drove to the Ohio State University campus to seek out a female to expose himself to. Mr. Wilcox stated that this action was calculated. Mr. Wilcox stated that Dr. Mann’s current psychiatrist, Dr. Goldsmith, wrote a letter that was admitted into evidence. However, Mr. Wilcox pointed out the Dr. Goldsmith did not testify at Dr. Mann’s hearing and did not answer questions about his diagnosis. Mr. Wilcox opined that Dr. Mann’s latest diagnosis is not relevant, noting that Dr. Mann has had psychiatric help in the past.

Mr. Wilcox stated that Dr. Mann cannot control himself and there are victims of his actions. Mr. Wilcox stated that Dr. Mann’s actions are indicative of his character, professionalism, and ability to be trusted by the Board. Mr. Wilcox stated that Dr. Mann has not fulfilled the trust that the Board has given him over the years. Mr. Wilcox asked the Board to adopt the Proposed Order of permanent revocation.

**Dr. Sethi moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matters of Steven C. Mann, D.O. Mr. Giacalone seconded the motion.**

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

Dr. Steinbergh stated that she will abstain from the discussion and vote in this matter.

Dr. Sethi briefly reviewed Dr. Mann’s medical career and stated that Dr. Mann currently works part-time in a chiropractor’s office performing physical examinations for Medicare and Medicaid patients. Dr. Sethi stated that Dr. Mann entered into a Consent Agreement with the Board in 1988 due to his prior public indecency arrests in 1977, 1978, and 1981. Dr. Sethi stated that Dr. Mann received counseling for these episodes.

Dr. Sethi stated that in the matter before the Board today, Dr. Mann was charged with public indecency, a fourth-degree misdemeanor, on July 8, 2014. Dr. Sethi stated that while driving, Dr. Mann raised his hips out of the driver’s seat to expose himself while masturbating to a female pedestrian victim. Dr. Mann pleaded guilty and was sentenced to 30 days in jail with two days credited towards time served and the
remaining sentence suspended. Dr. Mann was also sentenced to probation for one year.

Dr. Sethi noted that Dr. Mann’s wife, who was aware of Dr. Mann’s prior indecent exposure arrests, testified that her husband is a completely honest man. Dr. Mann testified that in all his arrests the victims were pedestrians and he never stopped or exited his vehicle. Dr. Mann acknowledged that this is not appropriate conduct for a licensed physician.

Dr. Sethi stated that Dr. Mann has a long history of exposing himself to female victims. Dr. Mann has been arrested for public indecency five times, has undergone treatment six times, and has been disciplined by the Board twice. Dr. Sethi stated that even though Dr. Mann is under the care of a psychiatrist, his behavior should no longer be tolerated. Dr. Sethi stated that Dr. Mann’s actions are not victimless, reflects poorly on the profession, and warrants permanent revocation of this medical license.

Dr. Edgin expressed concern that Dr. Mann has been misdiagnosed for many years prior to his most recent diagnosis of bipolar disorder. Dr. Edgin stated that people with this diagnosis typically cycle between depressive and manic episode, with normal episodes in-between. Dr. Edgin stated that with the proper medication, those with bipolar disorder do not experience these cycles and do not behave in this manner. Dr. Edgin stated that he does not dismiss Dr. Mann’s inappropriate behavior, but noted that he may have been misdiagnosed and treated incorrectly in the past. Dr. Edgin speculated that this incident may not have occurred had Dr. Mann been properly treated in the past.

Dr. Schottenstein stated that diagnosing bipolar disorder is challenging because patients tend to only complain about their depressive moods and not their high moods. Consequently, some bipolar patients are treated as depressed patients and are given anti-depressants, which exacerbate their high moods. Dr. Schottenstein stated that everyone gets stressed in life but they don’t seek outlets of the nature of Dr. Mann’s actions, and this is an indication that it is a condition. Dr. Schottenstein stated that Dr. Mann’s actions were inconsistent with his general character on a regular basis.

Dr. Schottenstein stated that it is not inconceivable to him that Dr. Mann had bipolar disorder that was undiagnosed and untreated prior to this incident. Dr. Schottenstein stated that untreated bipolar disorder often results in behavior such as sexually acting out and doing things that one would not normally do. Dr. Schottenstein also stated that, while appropriate treatment will help a great deal, there is no guarantee that Dr. Mann’s inappropriate behavior will not manifest again.

Mr. Giacalone stated that Dr. Schottenstein has raised valid points, but asked how many more times this has to happen. Mr. Giacalone reiterated Dr. Mann’s history of public indecency arrests and Board discipline, as well as the circumstances of Dr. Mann’s most recent arrest. Mr. Giacalone stated that the responsibility of the Medical Board is to protect the public. Mr. Giacalone opined that the Board has given Dr. Mann ample opportunity to get appropriate treatment and diagnosis. Mr. Giacalone saw no reason, for the benefit of the public, that Dr. Mann should continue as a physician.

Mr. Kenney agreed that Dr. Mann’s behavior is highly inappropriate and has continued to happen over many years. However, Mr. Kenney noted that Dr. Mann has already been punished by the courts and there are no allegations of patient harm. Mr. Kenney stated that he may support permanent revocation of Dr.
Mann’s medical license, but opined that there should be discernment between actions that involve patient care and those that do not.

Dr. Schachat agreed with Mr. Kenney and opined that the Medical Board’s purpose is to protect patients, or more specifically, to protect the public when they walk into physicians’ offices and become patients. Dr. Schachat opined that it is the duty of the courts and other agencies to protect the general public. Mr. Giacalone reiterated Dr. Mann’s arrest history and stated that it was just fortuitous that his victim was not a patient this time. Mr. Giacalone opined that the Board should not overlook Dr. Mann’s acts in this matter and wait for it to happen to a patient before taking action.

Mr. Kenney stated that actions that involve sexual deeds often rise to a different level in people’s minds, but he opined that the fact that this did not involve a patient should be considered. Mr. Giacalone noted that earlier in this meeting the Board permanently revoked a physician’s license for issues involving child pornography which did not involve the physician’s medical practice.

Dr. Schottenstein stated that physicians generally hold each other to a higher standard, both inside and outside the office. Dr. Schottenstein stated that at some point, everyone is responsible for their behavior and one cannot use a manic episode as an excuse indefinitely. Dr. Schottenstein stated that Dr. Mann has a long history of this behavior and it is difficult to continue excusing it. Dr. Schottenstein stated that things like manic episodes, mental health problems, or addiction may be mitigating in early incidents, but are less mitigating when there is a pattern over a long period of time.

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

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

The motion to approve carried.

The Board took a recess at 12:05 p.m. and resumed at 12:55 p.m.

AASIM SHAHEEN SEHBAI, M.D.

Mr. Gonidakis directed the Board’s attention to the matter of Aasim Shaheen Sehbai, M.D. No objections have been filed. Ms. Clovis was the Hearing Examiner.
Mr. Gonidakis stated that a request to address the Board has been timely filed by Dr. Sehbai. Five minutes will be allowed for that address.

Dr. Sehbai stated that he has been an oncologist for about 15 years and has been consistently rated as one of the top physicians in the state of Delaware. Dr. Sehbai stated that he made a mistake in 2012 by writing two letters of recommendations for medical students who had not done rotations with him. This error led to Dr. Sehbai being fined and reprimanded by the Delaware Board of Medical Licensure and Discipline. The Delaware Board also required Dr. Sehbai to complete an ethics course.

Dr. Sehbai stated that another matter that brought him to the attention of the Delaware Board involved a patient with terminal breast cancer. Dr. Sehbai stated that the patient need treatment immediately and he gave her medications in an unlabeled container. The patient later returned the medication without having taking any of it. Dr. Sehbai later contacted the patient and asked if she would be willing to help with a letter explaining his actions to the hospital. Dr. Sehbai stated that he wrote a letter about the situation and asked the patient to sign it, which she agreed to do. Dr. Sehbai later presented the letter to the hospital as having been written by the patient. Shortly thereafter, Dr. Sehbai left the hospital.

Dr. Sehbai stated that he was jobless for about a year following these incidents and he applied for locum tenens positions in different states. Because of job offers he received in Toledo and Cleveland, Dr. Sehbai applied for an Ohio medical license in 2014. Dr. Sehbai’s previous discipline in Delaware triggered possible additional discipline in Ohio and in the several other states in which he applied for medical licensure. Dr. Sehbai stated that after presenting his case, he was granted unrestricted medical licenses in Alabama, Maine, Maryland, North Carolina, South Carolina, and Virginia. Dr. Sehbai currently practices in Alabama.

Dr. Sehbai stated that he has no plans to practice in Ohio. Dr. Sehbai stated that he was willing to withdraw his Ohio application, but he was not given that option. Dr. Sehbai stated that with the pending discipline, some of his insurance companies are denying him privileges as a provider. Dr. Sehbai stated that he is caught in a vicious cycle in which every potential state action comes to the attention of all the other states in which he has applied or been licensed. Dr. Sehbai stated that this cycle is ruining his career.

Dr. Sehbai stated that he is a very good and conscientious physician and he has not done anything wrong with regard patient care. Dr. Sehbai stated that he made two mistakes, as described above. Dr. Sehbai stated that it was morally wrong for him to write something that was incorrect in his letters of recommendation. Dr. Sehbai stated that in the second instance, he was trying to help a patient. Dr. Sehbai stated that other states, as well as hospitals, have cleared him for practice. Dr. Sehbai opined that if he is placed under probationary terms by the Ohio Board even though he will not practice in Ohio, it will affect him negatively.

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

Mr. Wakley stated that Dr. Sehbai wants the Board to believe that this is all just a mistake and that there has been no harm. Mr. Wakley noted that the Board has often spoken about the value and importance of
honesty in the medical profession. Mr. Wakley stated that physicians must be able to trust the word of their colleagues. Mr. Wakley stated that Dr. Sehbai is not an honest person.

Mr. Wakley continued that Dr. Sehbai vouched for the professional competence of a physician who he had never met and he was going to do the same for another physician before he was caught. Mr. Wakley stated that Dr. Sehbai was willing to say to his colleagues that he had observed and trained with these physicians when that was, in fact, not true.

Mr. Wakley stated that Dr. Sehbai also used his position as a treating physician to get a patient to sign a letter defending his actions in dispensing medication to the patient which had been returned by another patient. Mr. Wakley noted that the patient later stated that she was uncomfortable signing the letter. Mr. Wakley stated that it is extremely concerning that the medication in question had been outside the controlled environment of a hospital or pharmacy and was handed back to another patient.

Mr. Wakley stated that Dr. Sehbai had applied for restoration of his Ohio medical license. Mr. Wakley asked the Board members which of them would be willing to rely on or trust the statements of Dr. Sehbai. Mr. Wakley stated that if the answer to his question is “no,” then he does not see a reason for the Board to allow him to practice in Ohio, particularly since Dr. Sehbai has no plans to practice in Ohio.

**Dr. Steinbergh moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Aasim Shaheen Sehbai, M.D. Dr. Schottenstein seconded the motion.**

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

Mr. Gonidakis stated that Dr. Sehbai is an oncology specialist and is board-certified in oncology, internal medicine, and hematology. Dr. Sehbai worked as a medical oncology in the State of Delaware from 2007 to 2014. In June 2014 Dr. Sehbai entered into a Consent Agreement with the Delaware Board of Medical Licensure and Discipline which reprimanded Dr. Sehbai, required him to take a course in ethics, and fined him $2,000. The underlying basis for the 2014 Consent Agreement was that Dr. Sehbai wrote letters of recommendation for two foreign medical graduates whom, despite his glowing remarks, he had never met. Dr. Sehbai had indicated that the two medical graduates would have shadowed him and would have had no clinical duties. Mr. Gonidakis stated that this matter came to light because Dr. Sehbai’s administrative assistant reported it to Dr. Sehbai’s employer, who then informed the Delaware Medical Board.

Mr. Gonidakis continued that Dr. Sehbai entered into another Consent Agreement with the Delaware Medical Board in April 2015. Dr. Sehbai entered into the 2015 Consent Agreement because he took a prior patient’s chemotherapy medicine and gave it to another patient in an unlabeled container. Afterwards, Dr. Sehbai asked the patient to not take the medicine and to return to his office. Dr. Sehbai asked the patient to sign a letter that he had written to look as if the patient had written it, then submitted the letter to his medical center representing that it had been written by the patient. The patient later called Dr. Sehbai’s medical center to state that she had not written the letter, but that she agreed with everything in the letter. Mr. Gonidakis noted that the patient continued to see Dr. Sehbai following these events.
Mr. Gonidakis stated that Dr. Sehbai has applied for restoration of his Ohio medical license. Dr. Sehbai has testified that besides the two matters above, there are no disciplinary claims against him and there have been no malpractice actions against him. Mr. Gonidakis stated that he supports the Proposed Order to grant Dr. Sehbai’s application for restoration with probationary terms and conditions for a minimum of one year.

Dr. Steinbergh stated that the Board has concerns about Dr. Sehbai’s honesty and sincerity. Dr. Steinbergh stated that it was dishonest for Dr. Sehbai to have written letters of recommendation to help two foreign medical graduates who he did not know, though she speculated that differing cultural expectations may be at play in cases such as this. Dr. Steinbergh noted that Dr. Sehbai’s other matter involving having a patient sign a letter that he had written also involves issues of honesty.

Dr. Steinbergh opined that Dr. Sehbai has paid for his dishonest acts and that there should be an end to the cycle of state medical board actions triggering actions in other states in which Dr. Sehbai holds a medical license. Dr. Steinbergh stated that even a reprimand would continue this cycle for Dr. Sehbai. Dr. Steinbergh agreed that Dr. Sehbai’s Ohio medical license should be restored, but opined that Dr. Sehbai does not need to be under probationary terms unless he comes to practice in Ohio. Dr. Steinbergh suggested that if Dr. Sehbai wishes to practice in Ohio in the future, he should be required to notify the Board within 60 days of his start date, whereupon the probationary terms in the Proposed Order would become effective.

**Dr. Steinbergh moved to amend the Proposed Order so that the probationary terms do not become effective unless and until Dr. Sehbai begins practicing medicine in Ohio. Dr. Steinbergh further moved that Dr. Sehbai be required to notify the Board within 60 days if he intends to commence practice in Ohio. Dr. Sethi seconded the motion.**

Ms. Anderson stated that if the proposed amendment is accepted by the Board, then the amended Order would still result in a report to the National Practitioners Databank and could trigger actions in other states, which seems to be what the Board wishes to avoid. Further, Ms. Anderson stated that, while having probationary terms spring into effect has been done in consent agreements in which the respondent agrees to the terms, having such terms in a Board Order would create legal issues.

Dr. Steinbergh suggested that the Board grant Dr. Sehbai’s application for restoration with no probationary terms. Dr. Steinbergh reiterated her opinion that Dr. Sehbai has paid for his mistakes. Dr. Steinbergh also noted that Dr. Sehbai has been granted licensure in multiple states.

**Dr. Steinbergh wished to withdraw her motion to amend.** No Board member objected to the withdrawal of Dr. Steinbergh’s motion to amend. The motion to amend was withdrawn.

**Dr. Steinbergh moved to amend the Proposed Order to grant Dr. Sehbai’s application for restoration, with no probationary terms. Dr. Sethi seconded the motion.** A vote was taken:

**ROLL CALL:**

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

The motion to amend carried.

**Dr. Steinbergh moved to approve and confirm Ms. Clovis’ Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Aasim Shaheen Sehbai, M.D. Dr. Schottenstein seconded the motion.**

**ROLL CALL:**

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

The motion to approve carried.

**WILLIAM GEORGE PALOSKI, D.O.**

Mr. Gonidakis directed the Board’s attention to the matter of William George Paloski, D.O. No objections have been filed. Mr. Porter was the Hearing Examiner.

Mr. Gonidakis stated that a request to address the Board has been filed by Dr. Paloski. However, the request was not filed in a timely manner. Mr. Gonidakis stated that the Board must determine whether to allow Dr. Paloski to address the Board.

**Dr. Steinbergh moved to allow Dr. Paloski to address the Board. Dr. Schottenstein seconded the motion.** A vote was taken:

**ROLL CALL:**

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

The motion carried.

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

Dr. Paloski was represented by his attorney, David Betras.

Mr. Betras expressed great concern at what was happening to Dr. Paloski in the United States of America. Mr. Betras stated that he agrees with the Report and Recommendation’s Conclusions of Law, which states, “the evidence is insufficient to support a conclusion that the acts, conduct, and/or omission of Dr. Paloski” constitute any violation. Mr. Betras also agreed with another statement from the Conclusions of Law, “the evidence insufficient to prove that Dr. Paloski violated Ohio Revised Code 4731.22(B)(41).”

Mr. Betras described Dr. Paloski’s practice. Mr. Betras stated that Dr. Paloski practices in the poorest area of the inner city of Youngstown, Ohio, and he has closed his practice due to what has happened to him. Mr. Betras stated that no other physician has the same practice as Dr. Paloski. Mr. Betras stated that over 90% of Dr. Paloski’s patients were African Americans who had no other physician to go to. Mr. Betras stated that Dr. Paloski is 74-years-old, is in ill health, and is barely able to see. Mr. Betras noted that Dr. Paloski has had a number of surgeries on his eyes. Mr. Betras stated that Dr. Paloski was never a pain clinic and he never gave out narcotics. Mr. Betras stated that Dr. Paloski did prescribe a good deal of promethazine due to the respiratory problems of his patients who were retired steelworkers and others from the manufacturing sector. Mr. Betras noted that Dr. Paloski had wanted to retire, but he could not find another physician to take over his practice.

Mr. Betras stated that the police raided some drug houses and found prescriptions from Dr. Paloski that were being sold on the street, which Dr. Paloski was unaware of. Mr. Betras stated that Dr. Paloski’s office was subsequently raided in August 2015, though he has not been indicted and the Drug Enforcement Administration (DEA) has not revoked Dr. Paloski’s DEA registration. Mr. Betras stated that by summarily suspending Dr. Paloski’s TDDD license, the Board of Pharmacy is effectively denying medical care to 4,000 patients from the lowest socio-economic levels of Youngstown. Mr. Betras stated that authorities seized almost $1,000,000 which Dr. Paloski and his wife had worked for their entire lives. Mr. Betras added that Dr. Paloski’s wife’s jewelry was also seized and has not been returned.

Mr. Betras stated that the Medical Board has summarily suspended Dr. Paloski’s medical license based on
the Board of Pharmacy’s suspension of his TDDD license. Mr. Betras stated that Dr. Paloski has not been afforded a hearing with the Board of Pharmacy and he has not been allowed to see what evidence the Board of Pharmacy has against Dr. Paloski. Mr. Betras also reiterated that Dr. Paloski has not been indicted for any crime. Mr. Betras stated that the amount of promethazine prescribed by Dr. Paloski should be compared to that of other physicians with an inner city practice of 3,000 to 4,000 patients with high incidences of respiratory problems. Mr. Betras also stated that the fact that someone took Dr. Paloski’s prescription and sold it on the street is not Dr. Paloski’s fault.

Mr. Betras asked that the Medical Board not continue the suspension of Dr. Paloski’s medical license.

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

Ms. Snyder stated this proposed action is based on the Board of Pharmacy’s action summarily suspending Dr. Paloski’s TDDD license. Ms. Snyder stated that information regarding the seizure of funds or jewelry is not in the hearing record because Dr. Paloski did not testify at his Medical Board hearing. Ms. Snyder stated that the suspension of Dr. Paloski’s TDDD license triggered two possible violations for the Medical Board: A limitation of a license by another entity, and a minimal standards of care violation. Ms. Snyder agreed with Mr. Betras that there have not yet been any Findings of Fact from the Board of Pharmacy because that matter has been continued, possibly due to settlement negotiations. Ms. Snyder stated that Dr. Paloski’s due process in the matter before the Board of Pharmacy is ongoing and his rights have not been violated.

Ms. Snyder continued that the Hearing Examiner found a violation based on the suspension of Dr. Paloski’s TDDD license, but there was no minimal standards violation found. Ms. Snyder stated that the initial allegation of a minimal standards violation was a technical violation triggered by the suspension of the TDDD license, not by the underlying facts of this case.

Ms. Snyder stated that the Board of Pharmacy has alleged very egregious things, but now is not the time to act on those allegations. Ms. Snyder suggested that the Medical Board suspend Dr. Paloski’s medical license until he can show the Board that he has a full and unrestricted TDDD license from the Board of Pharmacy.

**Dr. Steinbergh moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of William George Paloski, D.O.** Mr. Giacalone seconded the motion.

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

Dr. Edgin stated that the Medical Board’s proposed action is based on action taken by the Ohio Board of Pharmacy. Dr. Paloski is the named responsible person at BEM Medical Arts Center for the purposes of that facility’s Terminal Distributor of Dangerous Drugs with a Pain Management clinic Classification license (TDDD license). In September 2015, the Board of Pharmacy summarily suspended the BEM Medical Art Center’s TDDD license, triggering the Medical Board’s summary suspension of Dr. Paloski’s
medical license a few days later.

Dr. Edgin continued that through Dr. Paloski, the BEM Medical Arts Center had prescribed 281 gallons of promethazine with codeine over a two-year period. The Board of Pharmacy’s Order of Summary Suspension alleged that the BEM Medical Arts Center had prescribed to a patient or patients who exhibited drug-seeking behavior. Dr. Edgin commented that while Dr. Paloski appears to have been practicing in a difficult area, it seems that in some cases there was dispensing of drugs without clear indications for it.

Dr. Edgin observed that the Hearing Examiner’s Conclusions of Law state that the Board of Pharmacy’s Order of Summary Suspension is insufficient to support a conclusion that Dr. Paloski’s acts, conduct, or omissions constitute a failure to comply with the standards and procedures established for the operation of a pain management clinic. The Hearing Examiner also stated that the alleged conduct, if proven to have occurred, is egregious. Dr. Edgin stated that the Proposed Order would suspend Dr. Paloski’s medical license until he can prove that he holds, or is the responsible party for, an unrestricted TDDD license, or is eligible for same. Upon reinstatement, the Proposed Order would impose probationary terms and conditions for a minimum of five years.

Mr. Giacalone stated that 281 gallons of promethazine with codeine over a two-year period amounts to approximately 140 gallons per year, or approximately 12 gallons per month. Mr. Giacalone stated that this is a large amount of promethazine with codeine, which is a very well-known abused product in the drug-seeking market. Mr. Giacalone found it interesting that Dr. Paloski chose to prescribe promethazine with codeine, rather than promethazine alone or promethazine combined with a different medication. Mr. Giacalone also stated that Dr. Paloski had an opportunity to defend himself before the Board of Pharmacy and has apparently chosen not to.

Dr. Steinbergh stated that she is very uncomfortable with stories, if true, of law enforcement raiding a home or business and seizing assets such as money and jewelry that may be unrelated to the case. Dr. Steinbergh stated that if the Board of Pharmacy has offered a hearing in this matter and Dr. Paloski has not gone to hearing, then that represents due process in that venue. Dr. Steinbergh further noted that Dr. Paloski has not been indicted criminally and that criminal indictments can sometimes take a very long time. Dr. Steinbergh stated that the Medical Board has a responsibility to take action based on the Board of Pharmacy’s summary suspension.

Dr. Steinbergh noted that the Proposed Order would suspend Dr. Paloski’s medical license indefinitely and that one of the conditions of reinstatement is that Dr. Paloski must prove that he has, or is eligible for, an unrestricted TDDD license from the Board of Pharmacy. Dr. Steinbergh disagreed with this condition, stating the Dr. Paloski may not want to have a TDDD license in the future. Dr. Steinbergh also stated that it is not clear what makes someone eligible to hold an unrestricted TDDD license. Ms. Anderson, responding to questions, submitted that the purpose of that condition for reinstatement is that eligibility for an unrestricted TDDD license would show that the underlying basis of the Board of Pharmacy’s summary suspension has been resolved.

Dr. Steinbergh agreed that Dr. Paloski’s medical license could be suspended until his case before the Board of Pharmacy is resolved, but she disagreed that Dr. Paloski should have to prove eligibility for an
unrestricted TDDD license. Dr. Steinbergh also stated that once the Board of Pharmacy takes a final action, the Medical Board may have to take an additional action based on the Board of Pharmacy’s final action. Dr. Edgin agreed with Dr. Steinbergh, stating that the underlying issues in this matter are under the purview of the Board of Pharmacy.

The Board continued to discuss this matter thoroughly. Dr. Schottenstein observed that something has happened to make Dr. Paloski ineligible for the TDDD license, and therefore if he becomes eligible to hold a TDDD license again that would demonstrate that the issue with the Board of Pharmacy has been resolved and the Medical Board can consider reinstating his medical license at that time. Dr. Steinbergh stated that there may be other requirements to be eligible for a TDDD license that the Medical Board does not understand. Mr. Giacalone stated that a summary suspension of Dr. Paloski’s TDDD license indicates that the Board of Pharmacy found that there was an immediate threat to public health. Mr. Giacalone stated that Dr. Paloski must resolve this issue before the Board of Pharmacy before the Medical Board considers reinstatement.

Dr. Schachat asked if the Drug Enforcement Administration (DEA) has taken action on Dr. Paloski’s DEA registration based on the Board of Pharmacy’s action. Mr. Giacalone stated that the DEA, a federal agency, registers physicians to prescribe controlled substances, while the TDDD license from the Board of Pharmacy had authorized Dr. Paloski’s practice to hold and maintain controlled substances. Mr. Giacalone stated that even without a TDDD license, Dr. Paloski is authorized to prescribe controlled substances as long as he has an active DEA registration and an active medical license.

Mr. Gonidakis commented that Dr. Paloski’s decision, with the advice of his counsel, to not exercise his right to testify at a hearing should not be a determinative factor in this case. Mr. Giacalone agreed, but noted that Dr. Paloski’s attorney indicated that they chose not to proceed with a hearing because they did not feel they were being treated fairly, which is a different matter from simply choosing not to testify. Ms. Anderson clarified that the case before the Board of Pharmacy continues and Dr. Paloski will still have an opportunity to be heard in that matter.

Dr. Steinbergh stated that Dr. Paloski has not been indicted or convicted. Dr. Steinbergh expressed concern about moving forward if, as Dr. Paloski’s attorney contends, the Board of Pharmacy is refusing to share information with him so that Dr. Paloski can attempt to defend himself.

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

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

The motion to approve did not carry.

**Dr. Steinbergh moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of William George Paloski, D.O. Dr. Schottenstein seconded the motion.**

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

Mr. Giacalone noted that the Board of Pharmacy’s allegation that during a covert investigation, Dr. Paloski prescribed 2,240 ml of a controlled substance to a drug-seeking patient without a legitimate medical purpose. Mr. Giacalone stated that it is incumbent upon the Medical Board to take an action on Dr. Paloski’s medical license so that he cannot write prescriptions for narcotics, pending the Board of Pharmacy’s adjudication. Mr. Giacalone suggested that the Medical Board restrict Dr. Paloski’s medical license so that he cannot prescribe controlled substances.

Dr. Steinbergh stated that she continues to oppose the requirement that Dr. Paloski show he is eligible for an unrestricted TDDD license. Dr. Steinbergh suggested that the Board staff develop an alternative order that would address the Board’s concerns.

**Dr. Steinbergh moved to table this topic. Dr. Sethi 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>
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<tr>
<td>Dr. Saferin</td>
<td>- abstain</td>
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<tr>
<td>Mr. Giacalone</td>
<td>- aye</td>
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<tr>
<td>Dr. Steinbergh</td>
<td>- aye</td>
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<tr>
<td>Mr. Gonidakis</td>
<td>- aye</td>
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<tr>
<td>Dr. Sethi</td>
<td>- aye</td>
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<tr>
<td>Mr. Kenney</td>
<td>- aye</td>
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<tr>
<td>Dr. Schachat</td>
<td>- aye</td>
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<tr>
<td>Dr. Schottenham</td>
<td>- aye</td>
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<tr>
<td>Dr. Edgin</td>
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The motion to table carried.

**JOSEPH ANTHONY ROSE, M.D.**

Mr. Gonidakis directed the Board’s attention to the matter of Joseph Anthony Rose, M.D. Mr. Gonidakis stated that Dr. Rose has filed objections to Mr. Decker’s Report and Recommendation. However, the objections were not filed in a timely manner. Mr. Gonidakis stated that the Board must determine whether to accept Dr. Rose’s objections.

**Dr. Steinbergh moved to accept Dr. Rose’s objections to the Report and Recommendation. Dr.**
Schottenstein seconded the motion. All members voted aye. The motion carried.

Dr. Steinbergh moved to approve and confirm Mr. Decker’s Findings of Fact, Conclusions of Law, and Proposed Order in the matters of Joseph Anthony Rose, M.D. Dr. Sethi seconded the motion.

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

Dr. Edgin stated that the matter concerning Dr. Rose is non-disciplinary. Dr. Edgin stated that Dr. Rose had not practiced medicine for more than two years. Dr. Edgin stated that Dr. Rose had had a career as a cardiologist and he now wants to resume practice in family medicine. Dr. Edgin stated that Dr. Rose has not been tested for competency in medicine for quite some time. Dr. Edgin stated that the Proposed Order would grant Dr. Rose’s application for restoration of his medical license, provided that he passes the Special Purpose Examination (SPEX) and completes at least 16 hours of continuing medicine education (CME) in wound care within six months of the Order’s effective date.

Dr. Steinbergh stated that when a physician has not practiced medicine for two years or more, the Board has an opportunity to test the physician’s competency before approving restoration of licensure. Dr. Steinbergh stated that the SPEX will give the Board a better understanding of Dr. Rose’s knowledge in general medicine. Dr. Steinbergh stated that a career as a cardiologist does not prepare one for practice in general medicine or in wound care, which Dr. Rose has expressed an interest in doing. Dr. Steinbergh stated that if Dr. Rose has an active medicine license in any state then he is able to work in the Veteran’s Administration (VA) system. However, for practice in Ohio outside the VA system, Dr. Steinbergh agrees with the Proposed Order. Dr. Steinbergh stated that wound care is not something that cardiologists do and one must be well-trained in wound care to provide appropriate care to wound patients in nursing homes or rehabilitation centers.

Dr. Saferin stated that many physicians have subjected themselves to possible disciplinary action by practicing in an area in which they have not been appropriately trained. Dr. Saferin opined that it is proper for the Board to ensure that physicians are competent in the area in which they wish to practice. Dr. Saferin stated that he supports the Proposed Order.

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

ROLL CALL:

<table>
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<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Dr. Rothermel</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Saferin</td>
<td>aye</td>
</tr>
<tr>
<td>Mr. Giacalone</td>
<td>aye</td>
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<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
</tr>
<tr>
<td>Mr. Gonidakis</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Sethi</td>
<td>aye</td>
</tr>
<tr>
<td>Mr. Kenney</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Schachat</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Schottenstein</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Edgin</td>
<td>aye</td>
</tr>
</tbody>
</table>
The motion to approve carried.

**PAUL SRESTHADATTA, D.O.**

Mr. Gonidakis directed the Board’s attention to the matter of Paul Sresthadatta, D.O. No objections have been filed. Mr. Decker was the Hearing Examiner.

**Dr. Steinbergh moved to approve and confirm Mr. Decker’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Paul Sresthadatta, D.O. Dr. Edgin seconded the motion.**

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

Mr. Kenney briefly reviewed Dr. Sresthadatta’s medical career. Mr. Kenney stated that Dr. Sresthadatta’s problems with addiction began in 2009 when he was prescribed Percocet for pain due to a broken foot. In 2010 Dr. Sresthadatta entered into a 28-day residential treatment program. In December 2010 Dr. Sresthadatta entered into a Step I Consent Agreement with the Medical Board which suspended his medical license for 90 days, subject to conditions for reinstatement. Subsequently, Dr. Sresthadatta admitted to obtaining Percocet by forging the signatures of other physicians on prescriptions without their knowledge. Dr. Sresthadatta was charged with 22 felony counts of forgery, pleaded guilty to seven counts, and was sentenced to probation. Dr. Sresthadatta entered into a continuing treatment plan with Cornerstone Recovery. In April 2011 Dr. Sresthadatta entered into a Step II Consent Agreement with the Medical Board which reinstated his medical license, subject to probationary terms for a minimum of five years. In the Consent Agreement, Dr. Sresthadatta agreed to abstain completely from alcohol and drugs.

Mr. Kenney continued that on October 8, 2013, Dr. Sresthadatta was selected to provide a urine sample that tested positive for alcohol, which was confirmed by subsequent testing. At his hearing, Dr. Sresthadatta insisted that he had not consumed alcohol and he claimed that the test result was a false positive. However, Dr. James Ferguson of FirstLab testified that the levels of alcohol found in the testing were far above the cutoff levels.

Mr. Kenney stated that on Thanksgiving Day, November 28, 2013, Dr. Sresthadatta failed to call into FirstLab as required. This constituted a violation of Dr. Sresthadatta’s Step II Consent Agreement.

Mr. Kenney stated that on September 26, 2014, Dr. Sresthadatta submitted a urine specimen to FirstLab that tested positive for OxyContin. Dr. Sresthadatta denied having personally ingested OxyContin.

Mr. Kenney stated that on November 5, 2014, the Board issued an Order suspending Dr. Sresthadatta’s medical license for a minimum of 90 days and subjected him to random drug screens and other conditions. While under suspension, Dr. Sresthadatta wrote at least 43 prescriptions to 37 different patients between November 7 and December 9, 2014.

Mr. Kenney stated that Dr. Sresthadatta has, for the most part, attended 12-step meetings as required. Dr. Sresthadatta has not complied with the drug or alcohol testing requirements because his account at FirstLab has been suspended for non-payment. By May 2015, Dr. Sresthadatta had ceased to contact
FirstLab or the Medical Board’s Compliance office. Dr. Sresthadatta last met with the Board’s Compliance Supervisor, Ms. Bickers, on June 9, 2015, at which time Dr. Sresthadatta reported that he is looking for employment in medicine or outside of medicine. Dr. Sresthadatta also reported that he cannot continue to comply with his random drug testing requirements.

Mr. Kenney stated that Dr. Sresthadatta violated his April 2011 Consent Agreement by submitting positive drug screens, thereby demonstrating that he is impaired in his ability to practice medicine according to acceptable and prevailing standards of care because of habitual or excessive use of drugs. Dr. Sresthadatta’s non-compliance with testing requirements also continues at this time. Mr. Kenney also stated that Dr. Sresthadatta prescribed controlled substances while his medical license was suspended, which is a felony offense.

Mr. Kenney stated that he agrees with the Hearing Examiner’s Findings of Fact and Conclusions of Law. Mr. Kenney stated that the Proposed Order is to revoke Dr. Sresthadatta’s medical license. However, based on many years of monitoring by the Board with very little or no positive results, Mr. Kenney saw no possible reason that Dr. Sresthadatta should practice medicine. Mr. Kenney proposed that Dr. Sresthadatta’s medical license should be permanently revoked.

**Mr. Kenney moved to amend the Proposed Order to permanently revoke Dr. Sresthadatta’s license to practice medicine and surgery in Ohio. Mr. Giacalone 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>
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<tr>
<td>Dr. Saferin</td>
<td>abstain</td>
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<tr>
<td>Mr. Giacalone</td>
<td>aye</td>
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<tr>
<td>Dr. Steinbergh</td>
<td>nay</td>
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<tr>
<td>Mr. Gonidakis</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Sethi</td>
<td>aye</td>
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<tr>
<td>Mr. Kenney</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>
</tbody>
</table>

The motion to amend carried.

**Dr. Steinbergh moved to approve and confirm Mr. Decker’s Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Paul Sresthadatta, D.O. Mr. Giacalone seconded the motion.** A vote was taken:

<table>
<thead>
<tr>
<th>ROLL CALL</th>
<th></th>
</tr>
</thead>
<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>Mr. Gonidakis</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Sethi</td>
<td>aye</td>
</tr>
</tbody>
</table>
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to approve carried.

MATTHEW RAY STEINER, M.D.

Mr. Gonidakis directed the Board’s attention to the matter of Matthew Ray Steiner, M.D. No objections have been filed. Ms. Shamansky was the Hearing Examiner.

Mr. Gonidakis stated that a request to address the Board has been filed by Dr. Steiner. However, the request was not filed in a timely manner. Mr. Gonidakis stated that the Board must determine whether to allow Dr. Steiner to address the Board.

Dr. Steinbergh moved to allow Dr. Steiner to address the Board. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

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

Dr. Steiner stated that he considers himself one of the luckiest people on Earth, having been adopted from Vietnam by a wonderful Christian family in Ohio. Dr. Steiner stated that his father, a physician, instilled in him a sense of duty to care and be of service to others. Dr. Steiner stated that over the last 20 years he has provided care to patients in the emergency department, gone on several mission trips, and he volunteers at his church and in his community.

Dr. Steiner stated that prior to the incident in question, his wife was dealing with her worsening multiple sclerosis condition and the family was not coping with it well. Dr. Steiner stated that he helped care for his wife, but they were not sleeping in the same room and they rarely spoke to each other. Dr. Steiner stated that when he and his wife did speak, it was an argument. Dr. Steiner stated that he and his wife discussed...
divorce and were taking steps to do that.

Dr. Steiner stated that it was at this time that he was introduced to the young woman identified in the hearing record as C.T. Dr. Steiner stated that both he and the person who introduced them thought that C.T. was at least 21 years old because she worked in a bar/restaurant. Dr. Steiner stated that C.T. was a single mother with a young daughter and was struggling financially. Dr. Steiner soon began a relationship with C.T.

Dr. Steiner stated that he and C.T. never discussed drugs or prescriptions and he never gave C.T. drugs or prescriptions. When C.T. was admitted to Dr. Steiner’s hospital, C.T. told Dr. Steiner it was for anxiety and depression. Dr. Steiner did not look up C.T.’s admission records because that would have violated her privacy as well as HIPPA laws. Dr. Steiner found out later that C.T. had been admitted due to a heroin overdose. Dr. Steiner also stated that he was unaware of C.T.’s escort service until he was informed of it by the Assistant Attorney General. Dr. Steiner acknowledged that he had a sexual relationship with CT, but denied that he ever gave C.T. money for sex. Dr. Steiner stated that he did give money to C.T. for groceries, expenses, and car repairs.

Dr. Steiner stated that he is a Christian, but he was doing many un-Christian things at that time. Dr. Steiner stated that he is ashamed and appalled at some of the decision he had made. Dr. Steiner stated that professionally he has always tried to be caring and treat everyone with respect. Dr. Steiner stated that he has always tried to provide the best medical care possible and he would never intentionally put anyone in harm’s way.

Regarding the texts surrounding this incident, Dr. Steiner stated that he will always regret responding the way he did. Dr. Steiner stated that it was very strange seeing the texts for C.T. about drugs because they had never talked about that before. Dr. Steiner stated that in the text messages he should not have talked about writing prescriptions or suggested that he could help C.T. in any way other than sending her to an emergency department or another professional. Dr. Steiner stated that he had not wanted to precipitate an anxiety attack or something else for C.T. Dr. Steiner stated that he went along with the texts and joked about it, but he now knows that it is not a joking matter.

Regarding the prescription and the medication that the police confiscated, Dr. Steiner stated that most of those were in his car and belonged to his wife. Dr. Steiner referenced a video of the police sting on him and noted that he never initiated any conversation about supplying drugs or writing prescriptions.

Dr. Steiner stated that he has paid dearly for his personal mistakes. Dr. Steiner stated that he has suffered professionally and has been unable to support his family financially. Dr. Steiner has also had great difficulty regaining the trust of his family, friends, and colleagues. Dr. Steiner stated that most of all, he has been unable to serve and help others through his medical training. Dr. Steiner stated that through the grace of God, his family, his friends, and the help of other professionals, he has been able to turn his life around. Dr. Steiner stated that he is grateful that his family remains intact.

Dr. Steiner stated that he has learned a great deal about himself in recent years through counseling. Dr. Steiner stated that he has taken continuing medical education (CME) courses in personal ethics and
professional boundaries, as well as emergency medicine CME’s and seminars on prescription drug abuse. Dr. Steiner stated that he takes full responsibility for his actions and he expressed remorse for his part in this incident.

Dr. Steiner stated that he has not practiced medicine in Ohio for nearly ten years and has no intention of doing so in the near future. Dr. Steiner stated that he continues to renew his Ohio medical license because that is where he grew up and Ohio has special meaning to him. Dr. Steiner asked the Board to issue a reprimand in this matter, as well as guidelines for him to follow if he returns to practice in Ohio. Dr. Steiner stated that if the Board wants him to withdraw his application for renewal of his Ohio medical license, he would do so out of respect for the Board.

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

Mr. Wilcox stated that this matter is based on an action taken by the Medical Licensing Board of Indiana in May 2015. Mr. Wilcox stated that the Indiana Board Order, as well as the policy report from the Kokomo, Indiana police, are very detailed and are part of the hearing record. Mr. Wilcox stated that it is obvious what happened, despite Dr. Steiner’s apparent attempts to gloss over the incident. Mr. Wilcox stated that he supports the Hearing Examiner’s Proposed Order.

Dr. Steinbergh moved to approve and confirm Ms. Shamansky’s Findings of Fact, Conclusions of Law, and Proposed Order in the matters of Matthew Ray Steiner, M.D. Dr. Schottenstein seconded the motion.

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

Dr. Schottenstein stated that on May 4, 2015, Dr. Steiner’s Indiana medical license was put on indefinite probation for at least one year, based on Dr. Steiner’s 2013 criminal conviction on two counts of Furnishing Alcohol to a Minor, as well as his illegal possession of a Schedule IV controlled substance. Dr. Schottenstein stated that the Indiana Board found that Dr. Steiner had engaged in a pattern of conduct that demonstrated an inability to exercise reasonable care and diligence, as evidenced by the incident in June 2013 that led to his conviction. Dr. Schottenstein stated that Dr. Steiner is board-certified in emergency medicine and he currently works at a general med practice and as a medical review officer at Nationwide Medical Review.

Dr. Schottenstein continued that in 2013 Dr. Steiner was introduced to a young woman identified in the hearing record as C.T. as someone he may be interested in dating, despite that fact that Dr. Steiner was married and had two children. At the time of introduction C.T. was 18 years old, though Dr. Steiner insists that he thought she was at least 21 years old because she worked in a bar. Dr. Steiner and C.T. began a sexual relationship about two or three weeks later.

Dr. Schottenstein stated that on June 5, 2013, police were called to a hotel because C.T. and another woman were found to be heavily intoxicated and vomiting from ingesting alcohol that Dr. Steiner had provided. Dr. Steiner maintains that he did not know that C.T. used heroin and that she had never
requested drugs or prescriptions from him. At his hearing, Dr. Steiner testified that C.T. was a struggling mother and he was trying to do whatever he could to help her. Dr. Steiner later learned that C.T. had a craigslist advertisement for her services as a prostitute. Although Dr. Steiner insists that he never exchanged money for sex, he did give her between $100 and $300 on different occasions to help her financially.

Dr. Schottenstein stated that Dr. Steiner had testified that his relationship with C.T. happened at a difficult time in his marriage because his wife had been diagnosed with multiple sclerosis. Although Dr. Steiner initially indicated that he was separated from his wife at this time, he later conceded that he was still living with his wife and they were discussing divorce. Dr. Steiner indicated that at this time in his life he was lonely and depressed.

Dr. Schottenstein stated that after C.T. overdosed on heroin in June 2013, her cell phone was returned to her employer, who then contacted the Kokomo police when he received messages on the phone that seemed to be related to drug transactions. During this time, Dr. Steiner was attempting to contact C.T. and the police posed as C.T. in replies to him. Dr. Schottenstein stated that the tone of the texting was adolescent, indecent, flirtatious, and appalling. Dr. Schottenstein stated that Dr. Steiner, a 50-year-old physician, was texting with an 18-year-old young woman who he knows to have mental health issues. Dr. Steiner’s texts referred to C.T. as “babe” and “sexy” and did not express any concern about C.T.’s well-being or mental health. When the police posing as C.T. indicated that she needs something for stress, Dr. Steiner volunteered that he could bring Klonopin or Xanax or could write for anything else that was necessary. Dr. Steiner also indicated that he would bring beer. There is also a reference to C.T. bringing a friend, which provoked Dr. Steiner to ask if there will be group sexual activity.

Dr. Schottenstein continued that the police subsequently confronted Dr. Steiner in a hotel room with beer, condoms, a tablet of diazepam, a blank prescription pad, and $665 in cash. A search of Dr. Steiner’s car revealed a prescription bottle with Dr. Steiner’s wife’s name which contained 34 diazepam tablets, as well as a bottle of Viagra which Dr. Steiner had written for himself and a sample package containing three tablets of Soma. Dr. Steiner has indicated that he believes he was the victim of entrapment by the police in what he described as a very aggressive effort towards medical professionals. Dr. Steiner has also expressed remorse for his behavior.

Dr. Schottenstein stated that Dr. Steiner has explained his behavior by saying he feared that C.T. was having a mental health crisis and he had wanted to meet with her to assess her mental status. Dr. Steiner also indicated that he was only playing along with the text messages and that he had never intended to supply C.T. with drugs. Regarding the $665 in cash, Dr. Steiner has stated that he had no intention of paying for sexual activity; rather, he simply carries large amounts of cash with him sometimes.

Dr. Schottenstein stated that prior to the 2013 incident Dr. Steiner had never been arrested or had any legal problems, nor had he had any personal or professional issues. The Indiana Board Order put Dr. Steiner on indefinite probation for at least one year and Dr. Steiner reportedly remains compliant with the terms of his probation. Dr. Steiner had presented several letters from friends and colleagues that described him as kind, compassionate, professional, and an extemporary physician. Dr. Steiner’s therapist has indicated that Dr. Steiner has shown genuine remorse and that the likelihood of a similar incident was very remote.
Schottenstein also stated that Dr. Steiner never treated C.T. as a patient, never gave her medical advice, and never wrote prescriptions for her or gave her drugs.

Dr. Schottenstein opined that Dr. Steiner engaged in a substantial degree of rationalization throughout his testimony. Dr. Schottenstein described rationalization as a psychological defense mechanism to attempt to justify behaviors or feelings that are otherwise unacceptable. Dr. Schottenstein provided examples of what he believes to be some of Dr. Steiner’s rationalizations:

- This is about the Kokomo Police Department which is excessively aggressive in targeting medical professionals. Dr. Steiner is actually the victim because the police tried to get him to do something that was illegal and wrong.

- Dr. Steiner gave C.T. money and had sexual relations with her, but this does not constitute prostitution. Dr. Steiner was simply helping a single mother who was struggling financially.

- Dr. Steiner did not contact C.T. with the promise of bringing drugs and alcohol to a hotel room for sexual relations. Instead, Dr. Steiner was a “white knight” who used that promise as a way to assess C.T.’s mental status to make sure she is okay and to see if he can help her.

- Although Dr. Steiner brought drugs to the hotel room, he never had any intention of actually supplying C.T. with drugs.

- The $665 Dr. Steiner had in cash was not intended to pay for sexual activity. Dr. Steiner simply carries large amounts of cash with him sometimes.

Dr. Schottenstein expressed concern that Dr. Steiner never owns his behavior. Dr. Steiner acknowledges that he was going through a difficult time in his life and that he engaged in behavior that he is not proud of, but he also rationalizes the way he behaved and implies that it is all just a big misunderstanding. Dr. Steiner also implies that in a way, he is the victim in all this. Dr. Schottenham opined that Dr. Steiner’s rationalizations are an impediment to his need to own his behavior so that he can move forward in a positive and healthy direction. Dr. Schottenstein expressed concern that Dr. Steiner will remain at risk for unhealthy behavior until he can admit to himself that this situation is 100% his fault.

Dr. Schottenstein stated that he agrees with the Hearing Examiner’s Findings of Fact, Conclusions of Law, and the Proposed Order to indefinitely suspend Dr. Steiner’s Ohio medical license for at least 30 days and to require him to complete an ethics course and other conditions. Although the Indiana Board has implemented a practice monitor for Dr. Steiner, Dr. Schottenstein opined that this is not necessary since there have not been issues with Dr. Steiner’s practice. Dr. Schottenstein also noted that Dr. Steiner has already taken courses in patient boundaries and controlled substance prescribing as part of his Indiana probation. Dr. Schottenstein recommended that the Board adopt the Proposed Order.

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

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

The motion to approve carried.

WILLIAM GEORGE PALOSKI, D.O.

Dr. Steinbergh moved to remove the matter of William George Paloski, D.O., from the table. Mr. Giacalone seconded the motion. All members voted aye. The motion carried.

Ms. Anderson submitted a draft amended Order for the Board’s consideration. The proposed amended Order would limit Dr. Paloski’s license so that he cannot prescribe, write orders for, give verbal orders for, administer, dispense, or personally furnish any controlled substances. This limitation would remain in effect until Dr. Paloski can demonstrate to the Medical Board that he is under no suspension, probation, or any other encumbrance or obligation to the Board of Pharmacy resulting from its summary suspension of the TDDD license.

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

It is hereby ORDERED that:

A. LIMITATION/RESTRICTION: The certificate of William George Paloski, D.O., to practice osteopathic medicine and surgery in the State of Ohio shall be LIMITED and RESTRICTED as follows:

1. Dr. Paloski shall not prescribe, write orders for, give verbal orders for, administer, dispense, or personally furnish any controlled substances.

This limitation shall remain in effect until such time as Dr. Paloski can demonstrate to the Board that he is under no suspension, probation, or any other encumbrance or obligation to the State of Ohio Board of Pharmacy (“Pharmacy Board”) resulting from the September 2, 2015 Summary Suspension / Notice of Opportunity for Hearing for Terminal Distributor of Dangerous Drugs Licensee Classification: Pain Management Clinic (“Pharmacy Board Summary Suspension”) in Case No. 2013-1259, issued to BEM Medical Arts Center and William G. Paloski, D.O., or any superseding notice issued by the Pharmacy Board to Dr. Paloski that addresses the same allegations.
EFFECTIVE DATE OF ORDER: This Order shall become effective immediately upon the mailing of the notification of approval by the Board.

Dr. Schottenstein seconded the motion.

In response to a question from Mr. Giacalone, Ms. Anderson stated that this Order would not prevent the Medical Board from taking action on any new matter that arises from Dr. Paloski’s case at the Board of Pharmacy.

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
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenham - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of William George Paloski, D.O. Dr. Schottenstein seconded the motion. A vote was taken:

ROLL CALL:

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

The motion to approve carried.

PROPOSED FINDINGS AND PROPOSED ORDERS

Mr. Gonidakis stated that in the following matters, the Board issued a Notice of Opportunity for Hearing.
No timely requests for hearing were received. The matters were reviewed by a Hearing Examiner, who prepared Proposed Findings and Proposed Orders, and are now before the Board for final disposition. Mr. Gonidakis stated that these matters are disciplinary in nature, and therefore the Secretary and Supervising Member may not vote. In these matters, Dr. Rothermel served as Secretary and Dr. Saferin served as Supervising Member.

KASSEM M. HALLAK, M.D.

Dr. Steinbergh moved to find that the allegations as set forth in the December 11, 2013 Notice of Opportunity for Hearing in the matter of Dr. Hallak have been proven to be true by a preponderance of the evidence and to adopt Mr. Decker’s Proposed Findings and Proposed Order. Mr. Giacalone seconded the motion.

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

Dr. Schachat stated that the Board’s proposed action is based on another state’s action and felony convictions. On about December 15, 2011, the Michigan Board of Medicine summarily suspended Dr. Hallak’s Michigan medical license based on inappropriate sexual misconduct issues. Dr. Hallak was later convicted of a series of sex-related crimes and incarcerated for a number of years.

Dr. Schachat supported 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
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to approve carried.

PAUL SRESTHADATTA, D.O.

Ms. Anderson stated that Dr. Sresthadatta’s medical license was permanently revoked by the Board earlier in the meeting. Ms. Anderson stated that this Proposed Finding and Proposed Order is a result of a separate citation and Notice of Opportunity for Hearing, for which Dr. Sresthadatta did not request a hearing. Ms. Anderson stated that the Board may wish to dismiss this matter without prejudice as moot because Dr. Sresthadatta no longer has a license on which the Board may act. Ms. Anderson stated that if
the Board dismisses this matter without prejudice, the Board could reissue the Notice of Opportunity for Hearing if the Board’s earlier permanent revocation is reversed by a court.

Mr. Giacalone moved to dismiss without prejudice the matter of Paul Sresthadatta, D.O., Case Number 15-CRF-079, as moot. Dr. Steinbergh seconded the motion. A vote was taken:

ROLL CALL:

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

The motion to approve carried.

FINDINGS, ORDERS, AND JOURNAL ENTRIES

Mr. Gonidakis stated that in the following matter, the Board issued a Notice of Opportunity for Hearing, and documentation of Service was received. There was no timely request for hearing filed, and more than 30 days have elapsed since the mailing of the Notice. The matter is therefore before the Board for final disposition. This matter is disciplinary in nature, and therefore the Secretary and Supervising Member may not vote. In this matter, Dr. Rothermel served as Secretary and Dr. Saferin served as Supervising Member.

TERRANCE DASHAWN ROQUEMORE

Mr. Gonidakis stated that Terrance DaShawn Roquemore has applied for a license to practice massage therapy in Ohio. On May 13, 2015, the Board issued a Notice of Opportunity for Hearing to Mr. Roquemore for the limited purpose of determining whether his failure to submit to a Board-ordered examination was due to circumstances beyond his control. No hearing request has been received from Mr. Roquemore and more than 30 days have elapsed since the mailing of the Notice. The matter is now before the Board for final disposition.

Dr. Steinbergh moved to find that the allegations set forth in the May 13, 2015 Notice of Opportunity for Hearing have been proven to be true by a preponderance of the evidence. Dr. Steinbergh further moved that the application of Mr. Roquemore for a license to practice massage therapy in Ohio be denied. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

EXECUTIVE SESSION

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

ROLL CALL:

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

The motion carried.

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

The Board took a brief recess at 2:40 p.m. and returned at 2:50 p.m.

The Board returned to public session.
RATIFICATION OF SETTLEMENT AGREEMENTS

ERIC PAUL MACDONALD, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

Dr. Steinbergh moved to ratify the Proposed Permanent Surrender with Dr. MacDonald. Mr. Giacalone seconded the motion. A vote was taken:

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

The motion to ratify carried.

ROBERT S. SAWICKI, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

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

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

The motion to ratify carried.

LINDA JEAN DENNIS, M.D. – STEP I CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Step I Consent Agreement with Dr. Dennis. Dr. Sethi seconded the motion. A vote was taken:
ROLL CALL:  
Dr. Rothermel  - abstain  
Dr. Saferin    - abstain  
Mr. Giacalone - aye  
Dr. Steinbergh - aye  
Mr. Gonidakis - aye  
Dr. Sethi     - aye  
Mr. Kenney   - aye  
Dr. Schachat - aye  
Dr. Schottenstein - aye  
Dr. Edgin    - aye  

The motion to ratify carried.

DAVID MICHAEL HUGHES, D.O. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Dr. Hughes. Mr. Giacalone seconded the motion. A vote was taken:

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

The motion to ratify carried.

STEVE MINGFUNG LEUNG, M.D. – STEP II CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Step II Consent Agreement with Dr. Leung. Dr. Schottenstein seconded the motion. A vote was taken:

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

The motion to ratify carried.
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - aye

The motion to ratify carried.

ROGACIANO LASTIMOSA TROCIO, M.D. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Dr. Trocio. Dr. Sethi seconded the motion. A vote was taken:

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

The motion to ratify carried.

STEPHANIE NICOLE ADAMS, L.M.T. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Ms. Adams. Dr. Sethi seconded the motion. A vote was taken:

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

The motion to ratify carried.
PAUL N. MONTALTO, M.D. – VOLUNTARY PERMANENT RETIREMENT

Dr. Steinbergh moved to ratify the Proposed Voluntary Permanent Retirement with Dr. Montalto. Dr. Sethi seconded the motion. A vote was taken:

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

The motion to ratify carried.

MITCHUM ALLEN HISSONG, L.M.T. – STEP I CONSENT AGREEMENT

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

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

The motion to ratify carried.

Dr. Steinbergh moved to table this topic. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL: Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Mr. Gonidakis - aye
Dr. Sethi - aye
Mr. Kenney - aye
Dr. Schachat - aye
Dr. Schottenstein - aye
Dr. Edgin - 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 Automatic Suspension and Opportunity for Hearing to Jake Paul Heiney, M.D. Dr. Schottenstein seconded the motion. A vote was taken:

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

The motion to send carried.

Dr. Steinbergh moved to send the Notice of Summary Suspension and Opportunity for Hearing to Donald Leslie Epstein, M.D. Dr. Sethi seconded the motion. A vote was taken:

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

The motion to send carried.

Dr. Steinbergh moved to send the Notices of Opportunity for Hearing to the following: Saul Israel Blecher, M.D.; Randal John Lewis, M.D.; Donna Porter; Rezik Abdul Aziz Saqer, M.D.; and Mian
Wilayat Shah, M.D.  Dr. Sethi seconded the motion.  A vote was taken:

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

The motion to send carried.

RULES & POLICIES

Dr. Saferin moved to approve the filing of proposed Rules 4731-14-01, 4731-26-01, 4731-26-02 and 4731-26-03 for the formal promulgation process.  Dr. Schachat seconded the motion.  A vote was taken:

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

The motion carried.

OPERATIONS REPORT

**Human Resources:**  Mr. Groeber stated that two investigator positions have been filled in the Northeast Ohio area.  Mr. Groeber stated that the Board is seeking to fill positions for a nurse reviewer and in the education/outreach area.

**Budget:**  Mr. Groeber stated that the Board’s expense have increased, but not has much as revenues have.  The Board’s total cash balance is approximately $4,700,000, which takes into account the $750,000 that the Board has paid into the new e-licensing system.
Information Technology: Mr. Groeber stated that the Board has purchased development for the E-License 3.0 system which has allowed the Board to migrate fully into the system’s complaint module. Dr. Rothermel commented that the E-License 3.0 system is a great improvement over the previous CAVU system. Mr. Groeber credited Mr. Miller for the great job he has done in this area.

Communications and Outreach: Mr. Groeber stated that the Board’s communications and outreach activities are included in the Operations Report.

Agency Operations: Mr. Groeber stated that complaints have decreased 8% month-to-month and now stand at 1,797, compared to approximately 3,200 one year ago.

Mr. Groeber stated that Compliance has seen a 1% increase in the number of probationers.

Mr. Groeber stated that in January and February the number of licensees month-to-month increased by 9% and 10%, respectively. Processing time for routine licensure in February was an average of 38 days and for expedited licensure it was 18 days. Mr. Groeber opined that no other state medical board in the United States can perform at this level. Mr. Groeber stated that once physician licensure is migrated into the new system, physician will be able to print their own wallet cards.

Mr. Groeber stated that at today’s meeting there have been 29 formal Board actions.

Mr. Groeber stated that a summary sheet of the Medical Board magazine has been provided to Board members. The magazine will be produced before the end of the month and will be sent electronically to the Board’s 70,000 licensees while hardcopies will be sent to 30,000 to 35,000 medical offices. Mr. Groeber stated that the magazine features several of the Board’s licensees doing great work.

REPORTS BY ASSIGNED COMMITTEES

FINANCE COMMITTEE

Ms. Loe stated that the Board’s expenses are up slightly, mostly due to a three-pay period month. The Board’s revenue last month was approximately $1,100,000.

Ms. Loe stated that there are two outstanding fines to be paid to the Board which are now with a Special Counsel for collection. Mr. Kenney commented that Mr. Groeber has designed a good invoice which demonstrates to fined individuals what they will pay in extra fees if their fine is not paid in a timely manner.

Mr. Kenney stated that when the Board was attempting to obtain fining authority, one thing that he told legislators was that the Board wanted to eventually reduce licensure fees. Mr. Kenney stated that the Board is now seeking changes in legislation to allow for reduced licensure fees. Mr. Gonidakis commented that he knows of no other state entity that is reducing fees. Mr. Gonidakis congratulated Mr. Kenney and Mr. Groeber on their efforts.
POLICY COMMITTEE

RULES CIRCULATED FOR COMMENT IN JANUARY 2016

Ms. Anderson stated that the draft rule regarding surgery standards is being pulled from the packet while the Board obtains expert advice from Mark Bechtel, M.D., a former Board member and Secretary.

Dr. Steinbergh moved to approve draft rules 4731-8, 4731-23, 4731-25, 4774-1, and 4774-2 to be filed with the Common Sense Initiatives office. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

BOARD OF PHARMACY NALOXONE RULE CONSULTATION

Ms. Anderson stated that the Policy Committee discussed the Board of Pharmacy’s proposed rules on Naloxone, for which they are required to consult the Medical Board. The Committee has suggested that a letter be drafted to the Board of Pharmacy explaining that the Board is concerned about the requirement of counseling on Naloxone in relation to the ability to obtain Naloxone via mail order.

Dr. Steinbergh moved to approve the Policy Committee’s recommendations. Dr. Saferin seconded the motion. All members vote aye. The motion carried.

LEGISLATIVE UPDATE

Mr. LaCross stated that the legislature is current on its Spring Break recess. Mr. LaCross stated that he and other staff members continue to work in legislative initiatives, including podiatry rules and reduction of licensure fees.

PHYSICIAN ASSISTANT/SCOPE OF PRACTICE COMMITTEE

PHYSICIAN ASSISTANT FORMULARY REVIEW

Dr. Sethi stated that Rule 4731-11-04.1 allows physician assistants to prescribe anorexic agents. It is
recommended that a new category of chronic weight management medications be added to the physician assistant formulary under the “physician-initiated” category.

Dr. Sethi moved to approve the above change to the physician assistant formulary. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Sethi moved to add platelet-stimulating agents to the physician assistant formulary under the “physician-initiated per protocol” category. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Sethi moved to move the medication Viberzi from the “CPT may not prescribe” category to the “CPT may prescribe” category. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Sethi moved to move the medication Mozobil from the “CPT may not prescribe” category to the “physician-initiated by protocol” category. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Sethi moved to move the medication Procrit from the “physician-initiated” category to the “CPT may prescribe” category. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Sethi moved to move the medication Aranesp from the “physician-initiated” category to the “CPT may prescribe” category. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Sethi moved to move the medication Neulasta from the “CPT may not prescribe” category to the “physician-initiated by protocol” category. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Sethi moved to add the medication Farydak to the physician assistant formulary under the “CPT may not prescribe” category. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Sethi moved to move the medication Neupogen from the “CPT may not prescribe” category to the “physician-initiated by protocol” category. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Sethi stated that the medications Pomalyst, Thalidomide, Revlimid, Elited, Privigen, Gammagard, Carimune, and Gamunex-C were tabled so that more information can be gathered.

DRAFT RULES

Dr. Sethi moved that draft Rules 4730-1-01, 4730-1-05, and 4730-2-10 be approved for circulation to
interested parties. **Dr. Steinbergh seconded the motion.** All members voted aye. The motion carried.

**LICENSURE COMMITTEE**

**CHAPTER 4731-1-24, OHIO ADMINISTRATIVE CODE, MASSAGE THERAPY RENEWAL AND CONTINUING EDUCATION RULES**

Dr. Saferin reported that Rule 4731-1-24, concerning massage therapy license renewal and continuing education, have been approved for circulation to interested parties for comment.

**LICENSURE POLICY PROPOSALS**

Dr. Saferin briefly reviewed the licensure policy proposals discussed by the Committee. The licensure policy proposals included renewal notice alignment, radiologist assistant/genetic counselor background checks, administrative medicine license, administrative continuing medical education (CME) authority, and clinical research faculty certificate.

**COMPLIANCE COMMITTEE**

Dr. Steinbergh stated that on February 10, 2016, the Compliance Committee met with Deborah L. Cook, D.P.M.; Nicholas C. Diamantis, M.D.; Denise I. Gilman, D.O.; Matthew J. Goldschmidt, M.D.; Justine M. Rodebaugh, M.D.; and Siraj A. Siddiqui, M.D., and moved to continue them under the terms of their respective Board actions. The Compliance Committee accepted Compliance staff’s report of conferences on January 11 and 12, 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. Schottenstein stated that he would like to discuss the probationary request of Deborah Lynne Frankowski, M.D., separately.

**DEBORAH LYNNE FRANKOWSKI, M.D.**

Dr. Schottenstein noted that Dr. Frankowski has had multiple relapses on controlled substances. Dr. Frankowski is requesting permission to furnish and possess controlled substances. Dr. Schottenstein expressed concern that having such access to controlled substances could be a trigger for Dr. Frankowski. Dr. Schottenstein suggested that it would be appropriate to obtain a letter from Dr. Frankowski’s treating psychiatrist before granting the request. Dr. Steinbergh agreed.

**Dr. Steinbergh moved to table the probationary request of Dr. Frankowski. Dr. Schottenstein seconded the motion.** 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 Craig L. Bierer, D.O.’s request for discontinuance of the drug log requirement;

• To grant Courtney D. Bonner, D.O.’s request for discontinuance of the drug log requirement;

• To grant Joseph Peter Burick, D.O.’s request for approval of *Intensive Course in Medical Ethics, Boundaries and Professionalism*, offered by Case Western Reserve University, required prior to reinstatement;

• To grant James C. English, M.D.’s request for approval of the online prescribing course *Prescription Opioids: Risk Management and Strategies for Safe Use*, offered by NetCE, required for reinstatement;

• To grant Mary Jo-Ellen Erickson, M.D.‘s request for approval of Douglas A. Songer, M.D., to serve as the new treating psychiatrist;

• To grant Julio C. Galindo, M.D.’s request for approval of the prescribing course *Intensive Course in Controlled Substance Prescribing: Pain, Anxiety, Insomnia*, offered by Case Western Reserve University, required within the first year of probation;

• To grant Gregory Stuart Grant, D.O.’s request for approval of *Intensive Course in Controlled Substance Prescribing: Pain, Anxiety, Insomnia*, offered by Case Western Reserve University; and approval of *Intensive Course in Medical Ethics, Boundaries and Professionalism*, offered by Case Western Reserve University;

• To grant Matthew R. Harris, D.O.’s request for approval of James W. DeSapri, D.O., to serve as the new monitoring physician;

• To grant Timothy M. Hickey, M.D.’s request for approval of James J. Otting, II, M.D., to serve as the monitoring physician; determination of the frequency and number of charts to be reviewed at 10 charts per week; and approval of the submitted practice plan;

• To grant Thomas D. Kramer, Jr., M.D.’s request for approval of Mohsen Vazirian, M.D., to serve as the new treating psychiatrist; and

• To grant Armand L. Minotti, D.O.’s request for approval of *Intensive Course in Medical Ethics, Boundaries and Professionalism*, administered by Case Western Reserve University, to fulfill the professional ethics course requirement; and approval of *Intensive Course in Medical Documentation: Clinical, Legal and Economic Implications for Healthcare Providers*, administered by Case Western Reserve University, to fulfill the medical record keeping course requirement.

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

ROLL CALL: Dr. Rothermel - abstain
RESTORATION REQUESTS

NATHAN B. FRANTZ, D.O.

Dr. Steinbergh moved that the request for the restoration of the license of Nathan B. Frantz, D.O., be approved, effective immediately, subject to the probationary terms and conditions as outlined in the October 14, 2015 Order for a minimum of five years. Mr. Giacalone seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

JEROME MCTAGUE, M.D.

Dr. Steinbergh moved that the request for the restoration of the license of Jerome McTague, M.D., be approved, effective immediately, subject to the probationary terms and conditions as outlined in the February 12, 2014 Order for a minimum of three years. Dr. Sethi seconded the motion.

Dr. Steinbergh commented that once his license is reinstated, Dr. McTague will be on a practice plan for the duration of his probation.

A vote was taken on Dr. Steinbergh’s motion:
ROLL CALL:  
Dr. Rothermel - abstain  
Dr. Saferin - abstain  
Mr. Giacalone - aye  
Dr. Steinbergh - aye  
Mr. Gonidakis - aye  
Dr. Sethi - aye  
Mr. Kenney - aye  
Dr. Schachat - aye  
Dr. Schottenstein - aye  
Dr. Edgin - aye  

The motion carried.

FINAL PROBATIONARY APPEARANCE

MOHAMMAD A. ADAS, M.D.

Dr. Adas was appearing before the Board pursuant to his request for release from the terms of the Board’s Order of January 10, 2003. Mr. Gonidakis reviewed Dr. Adas’ history with the Board.

Dr. Adas commented that the Board’s Compliance staff has been very helpful in his efforts to remain sober and return to practice. Dr. Adas had particularly kind words about the late Raymond Albert, who had served as the Board’s Supervising Member.

In response to questions from Dr. Steinbergh, Dr. Adas stated that after passing the Special Purpose Examination (SPEX), he joined with another physician’s practice and has done very well. Dr. Adas stated that he has also been hired by Lutheran Social Services to help some of their patients in recovery.

Dr. Steinbergh advised Dr. Adas to closely follow the rules regarding the prescribing of Suboxone. Dr. Adas agreed and stated that the course he took on prescribing narcotics was very good. Dr. Adas stated that he now knows that he cannot prescribe to himself or to family members. Dr. Adas stated that his life is good and he is grateful.

Dr. Steinbergh moved to release Dr. Adas from the terms of the Board’s Order of January 10, 2003, effective March 10, 2016. Dr. Schottenstein seconded the motion. All members vote aye. The motion carried.

ROY W. HARRIS, D.O.

Dr. Harris was appearing before the Board pursuant to his request for release from the terms of the Board’s Order of August 11, 2010. Mr. Gonidakis reviewed Dr. Harris’ history with the Board.

Mr. Giacalone asked if Dr. Harris would address the medical students in attendance regarding his situation.
Dr. Harris agreed.

Dr. Harris advised the students that sometimes the physician can be the one who is taken advantage of. Dr. Harris explained that he had a relationship with two women to whom he prescribed medications. Dr. Harris stated that he now realizes that when he prescribed medications, those individuals became his patients. Dr. Harris stated that if a physician feels emotionally drawn to someone, the physician must instruct that person to seek medical care elsewhere. Dr. Harris stated that if the individuals have evil intentions, it can destroy the physician’s career and personal life. Dr. Harris stated that when his situation came to light, his number of patients dropped significantly and his ability to make a living was put at risk. Dr. Harris also faced being cancelled by his insurance companies. In addition, the patients who felt compelled to leave his practice were without a physician because they lived in a small community.

Mr. Giacalone commented that Dr. Harris seems to be blaming the two individuals in question for his problems. Dr. Harris replied that he not seen the two women as his patients, but he now agrees that they became patients when he prescribed to them. Dr. Harris acknowledged that he had behaved unprofessionally and inappropriately. Dr. Harris stated that if he had not prescribed medications to the two individuals, then there would not have been an issue. Dr. Harris stated that he will not become involved in such a situation again.

Mr. Giacalone moved to release Dr. Harris from the terms of the Board’s Order of August 11, 2010, effective March 23, 2016. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

AIMEE LYNN HAWLEY, M.D.

Dr. Hawley was appearing before the Board pursuant to her request for release from the terms of her March 11, 2015 Consent Agreement. Mr. Gonidakis reviewed Dr. Hawley’s history with the Board.

Dr. Steinbergh asked Dr. Hawley to address the medical students in attendance regarding the reasons she came before the Board. Dr. Hawley agreed and stated that the students can use her example as a cautionary tale.

Dr. Hawley explained that she had accessed the medical records of one of her colleagues. At that time, Dr. Hawley saw he actions as benign and non-harmful. Dr. Hawley now sees that her actions were a mistake. Dr. Hawley informed the students that accessing medical records when one are not involved in the patient’s care is wrong and harmful. Dr. Hawley stated that it can be very easy to access a medical record and look at something one is curious about, but she cautioned the students against such actions.

Dr. Steinbergh noted that Dr. Hawley has been disciplined and that information will be publically available for the rest of her career. Dr. Steinbergh stated that a medical license is a privilege that can be removed if one behaves unprofessionally.

In response to questions from Dr. Steinbergh, Dr. Hawley stated that she changed practices over two years ago and she is happy in her new practice.
Dr. Steinbergh moved to release Dr. Hawley from the terms of her March 11, 2015 Consent Agreement, effective March 11, 2016. Dr. Schottenstein seconded the motion. All members voted aye. The motion carried.

JOSH U. HILL, P.A.

Mr. Hill was appearing before the Board pursuant to his request for release from the terms of the Board’s Order of November 12, 2011. Mr. Gonidakis reviewed Mr. Hill’s history with the Board.

In response to questions from Dr. Steinbergh, Mr. Hill stated that he began in a new cardiology practice in Cynthiana, Kentucky, about one year ago. Mr. Hill stated that his Kentucky physician assistant license is currently unencumbered.

Mr. Giacalone asked if Mr. Hill would address the medical students in attendance. Mr. Hill explained that after a long day of arguing with his ex-wife regarding arrangements for spending time with his children, he went to his ex-wife’s house to discuss the matter further. As the situation escalated, Mr. Hill retrieved a weapon from his car. Mr. Hill stated that he then entered his ex-wife’s house and assaulted her while brandishing the weapon to three adults and two children. Mr. Hill stated that he was subsequently arrested and spent one year in jail.

Mr. Hill stated that his record has limited his ability to find work and his ability to obtain coverage under Medicare and Medicaid. After his release from jail, Mr. Hill stated that he taught yoga until he was approached by the cardiologist for whom he works today. Mr. Hill stated that his life is good now and he is less stressed. Mr. Hill advised the students that communication is very important.

Mr. Giacalone asked what Mr. Hill is doing differently so that he does not have another incident like the one mentioned above. Mr. Hill stated that the key is communication and to pause and take a breath if he feels stressed. Mr. Hill stated that losing his children had been an emotional hot button for him, but he has learned to not hold things inside as much. Mr. Hill stated that he sees a psychiatrist every six months and he takes Prozac. Mr. Hill also exercises and does yoga. Mr. Hill emphasized that he has never had a problem in his medical career.

Dr. Schottenstein asked if Mr. Hill’s psychiatric treatment has been helpful in controlling his anger. Mr. Hill replied that is anger control is mostly the result of what he has done himself. Dr. Schottenstein advised Mr. Hill to keep his psychiatrist abreast of any developments.

Dr. Steinbergh moved to release Dr. Rhoades from the terms of the Board’s Order of November 12, 2011, effective March 14, 2016. Dr. Schottenstein seconded the motion. All members voted aye. The motion carried.

LAWRENCE GENE RATCLIFF, M.D.

Dr. Ratcliff 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. Ratcliff’s history with the Board.

Mr. Gonidakis noted that Dr. Steinbergh is recusing herself from the discussion and vote in this matter.

Mr. Gonidakis asked how Dr. Ratcliff has been. Dr. Ratcliff replied that this is a good day and he thanked the Board’s compliance staff for their help. Dr. Ratcliff stated that his use of drugs and alcohol was just a symptom of underlying issues and he has learned a new way of living thanks to Alcoholics Anonymous (AA). Dr. Ratcliff stated that he prays and meditates daily and he sponsors other addicts in AA. Dr. Ratcliff stated that the tools he has learned in AA has helped his marriage and his practice of medicine. Dr. Ratcliff stated that he is now more empathetic towards his patients who have addiction problems and he is more proactive with those patients. Dr. Ratcliff stated that he is grateful for having gone through this process.

Mr. Gonidakis asked what had caused Dr. Ratcliff’s relapse. Dr. Ratcliff replied that in a moment of ego, he took medications that he should not have taken. Addressing the medical students in attendance, Dr. Ratcliff explained that he had become addicted to Percocet. When Dr. Ratcliff was unable to obtain Percocet, he turned to alcohol. Dr. Ratcliff advised the students that their medical license is a privilege.

Mr. Giacalone moved to release Dr. Ratcliff from the terms of his December 8, 2010 Consent Agreement, effective immediately. Dr. Sethi seconded the motion. All members voted aye except Dr. Steinbergh, who abstained. The motion carried.

ADJOURNMENT

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

Thereupon, at 4:35 p.m., the March 9, 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 March 9, 2016, as approved on April 13, 2016.

Michael L. Gonidakis, President

Kim G. Rothermel, M.D., Secretary