MINUTES

THE STATE MEDICAL BOARD OF OHIO

April 13, 2016

Michael L. Gonidakis, President, called the meeting to order at 10:05 a.m. in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes Office Tower, 30 E. Broad Street, Columbus, Ohio 43215, with the following members present: Amol Soin, M.D., Vice President; Kim G. Rothermel, M.D., Secretary; Bruce R. Saferin, D.P.M., Supervising Member; Anita M. Steinbergh, D.O.; Donald R. Kenney, Sr.; Robert P. Giacalone; Andrew P. Schachat, M.D.; Michael Schottenstein, M.D.; and Richard Edgin, M.D.

Also present were: Anthony J. Groeber, Executive Director; Kimberly Anderson, Assistant Executive Director; David Fais, Assistant Executive Director; Michael Miller, Assistant Executive Director for Special Services; Susan Loe, Director of Human Resources and Fiscal; 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; Kyle Wilcox, Melinda Snyder, 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; and Benton Taylor, Board Parliamentarian.

MINUTES REVIEW

Dr. Steinbergh moved to approve the draft minutes of the March 9, 2016, Board meeting, as written. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel - aye
Dr. Saferin - aye
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
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,” and the Physician Applicants listed in Exhibit “F.” 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
Dr. Soin - aye
Mr. Gonidakis - 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: Jacqulyn Marie Caputo, L.M.T.; Traci L. Cardinal, P.A.; Jennifer E. Leibold, P.A.; Thomas Edward Taylor; and Jilian Althea Waite, M.D. A roll call was taken:

ROLL CALL:

Dr. Rothermel - aye
Dr. Saferin - aye
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
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
Dr. Soin - aye
Mr. Gonidakis - 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.

JACQULYN MARIE CAPUTO, L.M.T.

Mr. Gonidakis directed the Board’s attention to the matter of Jacqulyn Mari Caputo, L.M.T. No objections
have been filed. Mr. Porter was the Hearing Examiner.

Dr. Steinbergh moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law,
and Proposed Order in the matter of Jacqulyn Marie Caputo, L.M.T. Dr. Soin seconded the motion.

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

Mr. Giacalone stated that during an interview with a Board investigator on or about June 19, 2014, Ms.
Caputo exhibited paranoid and/or delusional behavior. Specifically, Ms. Caputo informed the investigator
that she had been harassed by police officers and that police officers had unlawfully broken into her home
and placed a GPS tracking device on her vehicle. Ms. Caputo also informed the investigator that she had
not practiced massage therapy since her graduation from a massage therapy program because she does “not
like rubbing on people.”

Mr. Giacalone continued that at the Board’s order, Ms. Caputo underwent a psychiatric examination in
August 2014, conducted by Stephen G. Noffsinger, M.D. Subsequently, Dr. Noffsinger diagnosed Ms.
Caputo with mental disorder/psychopathology of the Delusional Disorder-Persecutory type. Dr.
Noffsinger based his opinion on Ms. Caputo’s delusions (i.e., psychotic beliefs) about being the victim of police harassment, retaliation, and surveillance, as well as being a victim of a conspiracy by the police and other government agencies. Dr. Noffsinger concluded with reasonable medical certainty that Ms. Caputo is not presently capable of practicing massage therapy according to acceptable and prevailing standards of care due to her delusional disorder.

Mr. Giacalone stated that in addition to her current psychiatric problems, Ms. Caputo has a history of substance abuse which includes arrests related to drugs and solicitation. Mr. Giacalone further stated that Ms. Caputo has made it very clear to the Medical Board that she no longer wants or values her massage therapy license. Ms. Caputo’s letters to the Board on August 4 and 5, 2015, include statements such as:

- I am returning my license. You can keep it.
- I definitely prefer to stay with the State Board of Cosmetology. We are not as “petty and small minded” and we don’t do things to people then run behind a police department.
- I was harassed by person(s) in your office at a time when I was truly in danger and only seeking help from anyone.
- I want nothing further to do with your branch of government.

Mr. Giacalone stated that he supports the Hearing Examiner’s Findings of Fact, Conclusion of Law, and Proposed Order to revoke Ms. Caputo’s massage therapy license. Mr. Giacalone asked whether the Board should consider permanently revoking Ms. Caputo’s license based on her history, her current state of mind and refusal to obtain treatment, and her definitive statements that she no longer wants anything to do with the Board.

Dr. Schottenstein stated that Mr. Giacalone’s suggestion to consider permanently revoking Ms. Caputo’s license is a legitimate one. Dr. Schottenstein stated that those with delusional disorder often have no other psychotic symptoms such as hallucination, disorganized thought, or mood instability. Dr. Schottenstein stated that oftentimes these individuals are able to function and there is only an issue when the subject of the delusional disorder is brought up. Due to their lack of insight into their condition and the fact that they can otherwise function normally, those with delusional disorder rarely seek treatment. However, Dr. Schottenstein stated that delusional disorder is treatable and sometimes the symptoms can remit spontaneously. For these reasons, Dr. Schottenstein favored the non-permanent revocation of Ms. Caputo’s license in the hopes that she will seek treatment and be able to reapply in the future.

Dr. Steinbergh noted that according to Dr. Noffsinger’s report, Ms. Caputo faxed multiple-page letters to the Medical Board between March and August 2012 complaining of a conspiracy. Dr. Steinbergh further noted that there is no testimony from the Board to refute this fact. Dr. Steinbergh expressed concern that the Board has apparently known about Ms. Caputo’s problems since 2012 but she was not ordered to an examination until 2014. Regarding the Board’s Order, Dr. Steinbergh favored the Proposed Order of non-permanent revocation in the hopes that Ms. Caputo may be able to heal and return to practice. However, Dr. Steinbergh stated that she could support a permanent revocation for the reasons outlined by Mr. Giacalone.

Mr. Kenney observed that Ms. Caputo also seems to have had a history of drug use, according to the
Hearing record. Mr. Kenney suggested that Ms. Caputo should be required to go through treatment before any reapplication for licensure would be considered. Ms. Anderson stated that the Board’s action today is limited to the charges listed in Ms. Caputo’s Notice of Opportunity for Hearing, which did not include charges related to drug use.

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

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<tr>
<th>ROLL CALL:</th>
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<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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<td>Dr. Steinbergh</td>
<td>- aye</td>
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<td>Dr. Soin</td>
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<td>Mr. Gonidakis</td>
<td>- aye</td>
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<td>Mr. Kenney</td>
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<td>Dr. Schachat</td>
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<td>Dr. Schottenstein</td>
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<td>Dr. Edgin</td>
<td>- aye</td>
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The motion to approve carried.

TRACI L. CARDINAL, P.A.

Mr. Gonidakis directed the Board’s attention to the matter of Traci L. Cardinal, P.A. No objections have been filed. Ms. Blue was the Hearing Examiner.

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

Ms. Cardinal was represented by her attorney, Eric Plinke.

Mr. Plinke stated that this matter involves a supervision agreement between Ms. Cardinal and a physician which, through a collective error, was not executed in a timely manner. Consequently, there was a period of time in which Ms. Cardinal was working with a supervising physician, Dr. Perez, without an approved supervision agreement. Mr. Plinke stated that he agrees with the Hearing Examiner’s Proposed Order, as well as the Hearing Examiner’s assessment of the credibility and reliability of Ms. Cardinal’s testimony. Mr. Plinke stated that while this technical error did occur, it is important to note that Ms. Cardinal practiced in a group practice and Ms. Cardinal had access to other supervising physicians with whom she had an approved supervision agreement. Mr. Plinke noted that the Hearing Examiner dismissed the charges related to quality assurance requirements. Mr. Plinke further noted that Ms. Cardinal has no prior disciplinary issues.

Ms. Cardinal apologized for her negligence in properly maintaining her 2010 supervision agreement with Dr. Perez. Ms. Cardinal stated that this was an oversight on her part arising from a clerical error and there was no malicious intent, financial gain, or political gain. Ms. Cardinal stated that she would never
knowingly choose to practice as a physician assistant without an approved supervision agreement. Ms. Cardinal stated that once the problem was identified, it was quickly corrected and a supervision agreement with Dr. Perez has since been approved by the Board. Ms. Cardinal reiterated that during the time in question she was also being supervised by several other physicians.

Ms. Cardinal continued that in her almost ten-year career as a physician assistant she has practiced in various specialties and has been trained by well-respected physicians. Ms. Cardinal stated that she enjoys her current work treating spinal disorders and the positive feedback she receives from patients. Ms. Cardinal stated that she takes great pride in being able to help improve the health and quality of life of her patients. Ms. Cardinal stated that she would never knowingly jeopardize her career.

Ms. Cardinal stated that the current matter represents the only complaint that has ever been filed against her regarding her medical care or license. Ms. Cardinal stated that the action taken against her has caused an overwhelming amount of stress and anxiety and has been a source of frustration, embarrassment, and financial burden. Ms. Cardinal stated that she has learned from this experience and that her supervision documents are her responsibility. Ms. Cardinal stated that the allegations regarding quality assurance were simply untrue. Ms. Cardinal stated that she has proof of quality assurance activities and had informed the Board investigator of such.

Ms. Cardinal hoped that the Board will consider the overall circumstances of this case and have compassion for her to continue as a physician assistant.

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 the Hearing Examiner found that Ms. Cardinal and Dr. Perez failed to have an approved supervision agreement in place from April 2010 to December 2012. Mr. Wilcox also stated that the Hearing Examiner found that Ms. Cardinal did not violate the Board rule that requires records of quality assurance to be kept for seven years and to be available upon request. Mr. Wilcox opined that the arguments at Ms. Cardinal’s hearing distracted the Hearing Examiner from the ultimate issue regarding the quality assurance requirements. Mr. Wilcox stated that this case is about the individual relationship between a physician and a physician assistant, not the practice as a whole, and the purpose of the quality assurance rule relates to that relationship and the assessment of the physician assistant’s technical skills.

Mr. Wilcox read Subsection D of Rule 4730-1-05, which requires a quality assurance system:

> Each supervising physician and physician assistant shall keep records of their quality assurance activities for at least seven years, and shall make the records available to the board and any health care professional working with the supervising physician and physician assistant. [emphasis added]

Mr. Wilcox stated that there are reasons that this rule was implemented, such as ensuring that physician assistants retain records of their activities when they change employment. Mr. Wilcox stated that in this case there were no such records between Ms. Cardinal and Dr. Perez. Mr. Wilcox stated that Ms.
Cardinal’s attorney has argued that there was an umbrella plan for the practice and that Dr. Gupta, the owner of the practice, had those records. However, Mr. Wilcox stated that this is not in accordance with the Board’s rule.

Mr. Wilcox suggested that the Board find that all the allegations in Ms. Cardinal’s Notice of Opportunity for Hearing were proven, including the allegations regarding quality assurance documentation. Mr. Wilcox opined that in any event, the Proposed Order of No Further Action is appropriate in this case.

**Dr. Steinbergh moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Traci L. Cardinal, P.A. Dr. Soin seconded the motion.**

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

Dr. Schottenstein stated that the Board has alleged that Ms. Cardinal practiced as a physician assistant from 2010 to 2012 without a supervision agreement with Cara Perez, M.D. and that Ms. Cardinal failed to keep records of quality assurance activities related to her practice as a physician assistant. Ms. Cardinal testified that during that time period she did have supervision agreements in place with Dr. Gupta, Dr. Mukhdomi, and Dr. Nguyen, with whom she also practiced. Ms. Cardinal testified that she would practice one day per week when Dr. Perez was the only on-site supervising physician, but she also saw patients of the other physicians on those days and she always felt that she was under their supervision. A supervision agreement with Dr. Perez was approved by the Board in December 2012.

Dr. Schottenstein continued that Ms. Cardinal agreed that a supervision agreement defines the parameters of practice under a specific physician, that Ohio law requires a supervision agreement to be in place to practice as a physician assistant, and that the supervision agreement is with a specific physician and not the practice as a whole. Ms. Cardinal testified that she recalled signing a supervision agreement with Dr. Perez in 2010 but she did not know why the paperwork was not submitted to the Medical Board.

Regarding the quality assurance documentation, Dr. Schottenstein noted that Ms. Cardinal acknowledged that a quality assurance system must be in place between a physician assistant and supervising physician. Ms. Cardinal testified that she has seen a copy of the practice’s quality assurance plan. Ms. Cardinal stated that while she did not have a quality assurance system established specifically with Dr. Perez, she would have informal daily consultations with Dr. Perez to discuss patient care and she would also attend monthly staff meetings.

Dr. Schottenstein observed that Ms. Cardinal has provided several letters of support from past and current colleagues that attest to her clinical competence and character. Ms. Cardinal also testified that she had neglected to ensure that all her supervising physicians were accounted for and she apologized for this oversight. Ms. Cardinal’s counsel has argued that although she did not have a supervision agreement in place with Dr. Perez, she was being supervised by at least three supervising physicians in her practice with whom she did have supervision agreements and therefore she was in compliance with Board rules. The Hearing Examiner rejected this argument, stating that the Board’s rules are unambiguous on this point and that a physician assistant cannot practice except under the supervision of a supervising physician with whom there is a Board-approved supervision agreement. Dr. Schottenstein stated that supervision
agreements are specific to physicians and not to a practice as a whole.

Dr. Schottenstein continued that Ms. Cardinal’s counsel argued, and the Hearing Examiner agreed, that Ms. Cardinal had not been required to have a separate quality assurance system in place with Dr. Perez because Dr. Gupta was permitted by rule to be assigned oversight of the quality assurance system on behalf of the entire practice. The Hearing Examiner also agreed that the requirement that a physician assistant keep a copy of quality assurance activities with them at all times is not practical and is not the intent of the regulation. Rather, the intent of the regulation is to require that a copy of quality assurance activities be available upon the Board’s request. In May 2015, Ms. Cardinal’s practice provided a copy of its quality assurance program to the Board.

Dr. Schottenstein noted that the Hearing Examiner has indicated that Ms. Cardinal testified convincingly that she did not know she had been practicing without a supervision agreement with Dr. Perez. The Hearing Examiner further indicated that Ms. Cardinal made a mistake, has learned from it, has taken responsibility for it, and that there is no chance that Ms. Cardinal will reoffend. Accordingly, the Hearing Examiner has recommended that the Board take no further action in this matter.

Dr. Schottenstein stated that he agreed with the Hearing Examiner. Dr. Schottenstein stated that it is not persuasive for Ms. Cardinal’s counsel to argue that Ms. Cardinal had been following the technical letter of the law because she had supervision agreements with the other three physicians, even when she was under the supervision of Dr. Perez. Dr. Schottenstein also stated that Rule 4730-1-05 states that multiple supervising physicians are allowed to assign the quality assurance process to one supervising physician, in this case Dr. Gupta. Dr. Schottenstein also agreed that it is not practical to require a physician assistant to keep quality assurance documentation on them at all times.

Dr. Schottenstein opined that this case represents an oversight of a rule violation which resulted in no demonstrable patient harm. Dr. Schottenstein agreed with the Proposed Order of no further action.

Dr. Steinbergh noted Ms. Cardinal’s testimony that she thought she had signed an agreement with Dr. Perez in 2010 and submitted it to the Board. Dr. Steinbergh stated that she would have liked to have seen testimony from the Board regarding whether that agreement was ever received. Dr. Steinbergh also stated that Dr. Perez and Dr. Gupta, as medical director, had a level of responsibility to ensure that the proper supervision agreements are in place. Dr. Steinbergh stated that she had questioned whether the Board should take no further action or issue a reprimand. Dr. Steinbergh stated that having reviewed the records, she felt that there was an appropriate quality assurance system in place. Dr. Steinbergh agreed with the Proposed Order of no further action.

Mr. Giacalone stated that the Section 4730-19, Ohio Revised Code, is clear than no physician assistant shall practice without having entered into a supervision agreement that is specific to the supervising physician. However, Mr. Giacalone stated that this was a technical violation and an oversight. Mr. Giacalone agreed with the Proposed Order of no further action. However, Mr. Giacalone expressed concern that by taking no further action, the Board could set a precedent that a supervision agreement is not required. Ms. Anderson noted that if the Board approves the Report and Recommendation, it will have found that there was a violation but the Board will have decided to take no disciplinary action in this case.
due to mitigating circumstances. Dr. Schottenstein opined that finding a violation but taking no further action indicates that the Board is mindful of the mitigating circumstances in this case but it reserves the right to decide future similarly-situated cases on their own merits. Mr. Gonidakis agreed.

Dr. Soin commented that the fact that Ms. Cardinal had supervision agreements with the other physicians in the practice indicates to him that there was no malicious intent in this case. Dr. Soin agreed with the Proposed Order of no further action.

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

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

The motion to approve carried.

JENNIFER E. LEIBOLD, P.A.

Mr. Gonidakis directed the Board’s attention to the matter of Jennifer E. Leibold, P.A. No objections have been filed. Ms. Blue was the Hearing Examiner.

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

Ms. Leibold was represented by her attorney, Eric Plinke.

Mr. Plinke stated that this case involves essentially the same facts as the prior case. One significant difference is that Ms. Leibold has a pending application for a certificate to prescribe as a physician assistant. Mr. Plinke stated that his previous comments regarding quality assurance documentation and mitigating circumstances applied to Ms. Leibold’s case as well.

Ms. Leibold stated that she has been a physician assistant for 17 years and has specialized in pain management for 15 years. Ms. Leibold stated that she has been intrigued by the medical field since she was a child and she has made it a goal to represent the physician assistant profession to the best of her ability. Ms. Leibold stated that she has tried to uphold her reputation as a respected physician assistant by providing quality care and practicing with a strong sense of ethical and moral standards. Ms. Leibold stated that the idea of doing anything that would maliciously or purposely violate the laws that govern the
physician assistant profession would be unthinkable.

Ms. Leibold continued that when she, Ms. Cardinal, and Dr. Perez were notified of the missing supervision agreements three-and-a-half years ago, they were baffled and confused about what could have gone wrong with the paperwork process. That same day, a supervision agreement was submitted and it was approved by the Board a few days later. Ms. Leibold stated that she has learned that she cannot rely on her credentialing department’s word that important documents have been properly filed; rather, it is her responsibility to double-check everything.

Ms. Leibold stated that last year she received a citation based on the same incident which had occurred three-and-a-half years ago. Ms. Leibold stated that the Board’s investigation has been devastating to her. Ms. Leibold stated that for the past year her application for a certificate to prescribe has been delayed due to the investigation. Ms. Leibold stated that she has been contacted by countless insurance companies regarding the citation which is posted on the Medical Board’s website.

Ms. Leibold stated that she is sincerely sorry for the oversight regarding the lack of a supervision agreement between her and Dr. Perez. Ms. Leibold stated that this oversight was unintentional and she assured the Board that it will never happen again.

Regarding the Board’s concerns about setting an undesirable precedent for future cases, Mr. Plinke commented that under Ohio case law one cannot appeal a Board decision which is based upon a difference in how the Board exercises its discretion.

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 the quality assurance rule does require both the physician and the physician assistant to have their own copies of the quality assurance documentation. Ms. Snyder stated that the purpose of this rule is evident in this matter, noting that Ms. Cardinal had left the practice but she had to contact Dr. Gupta for the quality assurance documentation when she was asked by the Board to provide it. Ms. Snyder also opined that the Board was substantially justified in bringing that violation forward.

**Dr. Steinbergh moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Jennifer E. Leibold, P.A. Dr. Soin seconded the motion.**

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

Dr. Schachat commented that this matter involves essentially the same issues as the prior matter of Ms. Cardinal. Dr. Schachat stipulated that the Board’s decision regarding Ms. Leibold will be based solely on Ms. Leibold’s hearing record.

Dr. Steinbergh noted that Dr. Perez, who had functioned as one of Ms. Leibold’s supervising physicians without a Board-approved supervision agreement, had stated that she never contacted the Board to have her name removed from the agreement. Dr. Steinbergh noted that this is also a violation and that the
Medical Board must be informed when there is a discontinuance of a supervision agreement. Dr. Steinbergh opined that this situation will not occur with Ms. Leibold again. Dr. Steinbergh stated that the Proposed Order would grant Ms. Leibold’s application for a certificate to prescribe as a physician assistant and would take no further action. Dr. Steinbergh supported the Findings of Fact, Conclusions of Law, and Proposed Order.

Ms. Anderson noted that since Ms. Leibold’s citation, the Provisional Certificate to Prescribe has ceased to exist due to a change in the law. Instead, the Proposed Order would grant Ms. Leibold a valid prescriber number, which will have the same effect.

Dr. Steinbergh expressed surprise that a physician assistant would see 30 to 40 pain management patients per day. Dr. Soin commented that he could envision a scenario in which a physician assistant or other physician extender could see that number of pain management patients per day in an appropriate manner. Dr. Soin stated that physician extenders often see a stable population of well-established patients for medication follow-up visits and many such visits can be accomplished without necessarily breaching any standard of care.

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

ROLL CALL:

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

The motion to approve carried.

THOMAS EDWARD TAYLOR

Mr. Gonidakis directed the Board’s attention to the matter of Thomas Edward Taylor. No objections have been filed. Ms. Mosbacher was the Hearing Examiner.

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

Mr. Taylor stated that his application for a license to practice as a physician assistant was denied because he does not meet the Board’s current standards for licensure. Specifically, Mr. Taylor stated that he does not have a master’s degree specific to the physician assistant profession and he does not have certification from the National Commission on Certification of Physician Assistants (NCCPA). Mr. Taylor stated that
in an effort to fulfill these requirement, he is currently enrolled in a Masters of Anatomy program and will graduate in December 2016.

Mr. Taylor stated that in order to obtain NCCPA certification, he must pass the Physician Assistant National Certifying Examination (PANCE) or the Physician Assistant National Recertifying Examination (PANRE). Mr. Taylor stated that to sit for those examinations, he must obtain documentation from the Medical Board stating that the Board would be willing to grant his application for licensure, pending NCCPA certification and any additional requirements the Board may impose related to his past impairment. Mr. Taylor stated that he will fully cooperate with any Board-approved evaluation to determine that he is capable to practicing in accordance with acceptable and prevailing standards of care and that his impairment issues of the past are no longer an obstacle to his performance.

Mr. Taylor requested that the Board recommend an evaluation, at Mr. Taylor’s expense, by one or more Board-approved addiction specialists. Mr. Taylor further requested that upon reviewing the evaluation, the Board provide the necessary documentation to the NCCPA stating that the Board is willing to grant his physician assistant license, pending NCCPA certification. Mr. Taylor stated that this will allow him to fulfill the obligations set forth by the Board to obtain physician assistant licensure and to practice as a physician assistant.

Ms. Snyder stated that Mr. Taylor’s physician assistant license was revoked in 2008 due to impairment issues, for which Mr. Taylor failed to request a hearing. In the hearing on the current matter, Mr. Taylor testified that he had developed a dependence on Tramadol after he had been legitimately prescribed that medication to treat tension headaches. Ms. Snyder stated that since that time, Mr. Taylor has completed a 28-day residential treatment program. However, Mr. Taylor has not completed an aftercare program, though he seems willing to do so.

Regarding Mr. Taylor’s licensure history, Ms. Snyder stated that Mr. Taylor was initially granted a license in 2001, which was revoked in 2008. Since 2008, the law governing physician assistant licensure has changed and Mr. Taylor’s education does not meet the new requirement to have a master’s degree from a program approved by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). Further, as indicated by Mr. Taylor, the NCCPA apparently will not allow Mr. Taylor the accreditation he needs because there is no indication that the Board will grant him licensure.

Ms. Snyder stated that the Proposed Order would deny Mr. Taylor’s application for licensure because he does not meet the Board’s requirements. Ms. Snyder noted that Mr. Taylor is currently enrolled in a master’s program that will meet the Board’s requirements once he has completed it.

Dr. Steinbergh moved to approve and confirm Ms. Mosbacher’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Thomas Edward Taylor. Dr. Soin seconded the motion.

Mr. Gonidakis stated that he will now entertain discussion in the above matter.
Dr. Edgin stated that Mr. Taylor had obtained a master’s degree in counseling, then subsequently took additional coursework in order to qualify for admission to a two-year physician assistant program in 1999. Mr. Taylor obtained certification and licensure in 2001 and began practicing as a physician assistant. In 2003 Mr. Taylor sought medical treatment for tension headaches and was given Ultram. Mr. Taylor eventually became addicted and he made two unsuccessful attempts to complete treatment programs. The Board revoked Mr. Taylor’s physician assistant license in September 2008. In January 2010 Mr. Taylor successfully completed a treatment program.

Dr. Edgin continued that under current requirements, Mr. Taylor is not qualified for a physician assistant license. Mr. Taylor also has not completed an aftercare program regarding his addiction. Dr. Edgin stated that Mr. Taylor has been very diligent in trying to fulfill his obligations and has worked two jobs in order to complete his education. Dr. Edgin stated that the Board cannot grant Mr. Taylor’s application at this time, but stated that the Board should consider any future application after Mr. Taylor completes his current master’s program and an aftercare program.

Dr. Steinbergh stated that the Board is unable to provide documentation that would commit to granting Mr. Taylor licensure contingent upon NCCPA certification. Dr. Steinbergh encouraged Mr. Taylor to continue his education and complete an aftercare program. Mr. Gonidakis agreed and stated that the Proposed Order, though it denies Mr. Taylor’s application for licensure, gives him the best path forward to apply again in the future when he meets the Board’s requirements.

Mr. Gonidakis and other Board members asked the staff to provide Mr. Taylor any assistance it could in identifying an appropriate aftercare program. Dr. Edgin encouraged Mr. Taylor to complete an aftercare program and his master’s degree so that he can reapply for licensure.

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

ROLL CALL:  

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<tr>
<th>Name</th>
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<tr>
<td>Dr. Rothermel</td>
<td>abstain</td>
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<tr>
<td>Dr. Saferin</td>
<td>abstain</td>
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<tr>
<td>Mr. Giacalone</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
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<tr>
<td>Dr. Soin</td>
<td>aye</td>
</tr>
<tr>
<td>Mr. Gonidakis</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>
</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.

JILIAN ALTHEA WAITE, M.D.

Mr. Gonidakis directed the Board’s attention to the matter of Jilian Althea Waite, 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. Waite. Five minutes will be allowed for that address.

Dr. Waite was represented by her attorney, Daniel Zinsmaster.

Mr. Zinsmaster stated that this case involves pre-signed prescriptions. Mr. Zinsmaster stated that Dr. Waite is an internal medicine specialist and provides care to elderly and disabled patients in their personal residencies, hospice, and skilled nursing homes. Mr. Zinsmaster stated that when Dr. Waite discovered the impropriety of pre-signing prescriptions in 2013, she ceased the practice immediately. Mr. Zinsmaster stated that since that time Dr. Waite has done everything she could to address this mistake, including securing prescription pads in a lock box and completing an intensive course on prescribing.

Mr. Zinsmaster opined that the most mitigating circumstance in this case is the fact that Dr. Waite stopped pre-signing prescriptions almost a year before she was visited by a Board investigator, well before any regulatory agency became involved. Mr. Zinsmaster encouraged the Board to adopt the Hearing Examiner’s Proposed Order of reprimand and probation.

Dr. Waite stated that she has owned her own house call practice since 2001, treating patients all over southwestern Ohio in their homes, hospice, nursing homes, and assisted living homes. Dr. Waite stated that she sees about 10 to 15 homebound and often bedridden patients daily, in addition to treating troubled boys at a youth detention center. Dr. Waite employs an advanced practice nurse and a number of licensed practical nurses and medical assistants in her practice. Dr. Waite stated that her husband, an engineer, left his work several years ago to become her practice manager.

Dr. Waite stated that she had wanted to be a doctor since she was a child and that her family had come to the United States to help her fulfill that dream. Dr. Waite stated that it is very distressing that she has done something to put her patients and her practice in this position. Dr. Waite stated that had she known that it was improper to pre-sign prescriptions, she would not have done so. Dr. Waite stated that she began pre-signing prescriptions when a company stopped taking orders over the phone for things like x-rays and walkers. Since Dr. Waite is on the road most of the day and did not want to delay treatment, she began pre-signing order forms so that her staff could complete them at her direction when needed. Dr. Waite soon began pre-signing prescriptions for the same reason. Dr. Waite stated that the staff would review all such prescriptions with the office manager, who would issue a prescription from the pad that was kept in his locked office. Dr. Waite stated that this practice was kept to a minimum, was never used for new patients, and a copy of the prescriptions were placed in the patient chart for Dr. Waite’s later review. Dr. Waite added that any patient receiving a pre-signed prescription would have a follow-up visit within a week.

Dr. Waite stated that in hindsight she knows she was lucky that there was never a negative incident, such as a forged prescription. Dr. Waite apologized for this situation and stated that she will continue to do everything she can to atone. Dr. Waite stated that her office procedures now include prescription logs, lock boxes, and safes.
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 she supports the Hearing Examiner’s Proposed Order. Ms. Snyder stated that there is no evidence that Dr. Waite has used pre-signed prescriptions recently. Ms. Snyder stated that Dr. Waite was very candid in her hearing. Ms. Snyder stated that Dr. Waite has accepted responsibility for the violation and has taken efforts to remedy the situation.

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

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

Mr. Gonidakis briefly reviewed Dr. Waite’s medical career. Mr. Gonidakis stated that Dr. Waite rarely or never sees patients in her office, which serves as the central location where administrative tasks take place. Dr. Waite employs an office manager and about 13 other medical professionals, including physician assistants, nurses, and medical assistants.

Mr. Gonidakis stated that Dr. Waite has admitted that she began pre-signing prescriptions in 2011 so that services such as x-rays could be ordered when she was out of the office. Dr. Waite testified that she stopped this practice in 2013 when she learned that it is improper. However, instead of disposing of the pre-signed prescriptions she already had, she put them in a box and essentially forgot about them. These pre-signed prescriptions were discovered by a Board investigator in 2014. Mr. Gonidakis noted that Dr. Waite was very cooperative with the Board’s investigation. In 2015 Dr. Waite attended a prescribing course at Vanderbilt University.

Mr. Gonidakis stated that the Proposed Order would reprimand Dr. Waite and impose probationary terms for a minimum of one year. Mr. Gonidakis opined that the Proposed Order is appropriate, based on the mitigating circumstances of Dr. Waite’s cooperation and the fact that she stopped pre-signing prescriptions on her own in 2013. Mr. Gonidakis opined that an important mitigating circumstance is that, according to Dr. Waite’s testimony, no prescriptions were ever diverted or stolen. Mr. Gonidakis commented that his opinion was not swayed by the type of work Dr. Waite does. Mr. Gonidakis stated that the Board often hears pleas for leniency based on the work the physician does in helping a community or treating the indigent. Mr. Gonidakis opined that such things are not appropriate mitigating circumstances for the Board’s consideration. Having said this, Dr. Gonidakis commended the work Dr. Waite does for troubled youth, stating that it critically important.

Dr. Steinbergh agreed with Mr. Gonidakis’ comments, including comments on the propriety of considering the type of work a respondent physician does. Dr. Steinbergh stated that the Board holds physicians to one standard. Dr. Steinbergh stated that she does not wish to amend the Proposed Order, but she suggested that Dr. Waite take a medical record-keeping course. Dr. Steinbergh opined that Dr. Waite would benefit from such a course, particularly considering the complex nature of her practice.
A vote was taken on Dr. Steinbergh’s motion to approve:

ROLL CALL:

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

The motion to approve carried.

PROPOSED FINDINGS AND PROPOSED ORDERS

Mr. Gonidakis stated that in the following matters, the Board issued a Notice of Opportunity for Hearing. No timely requests for hearing were received. The matters were reviewed by a Hearing Examiner, who prepared Proposed Findings and Proposed Orders, and are now before the Board for final disposition. Mr. Gonidakis stated that 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.

PAUL JOSEPH MAUSER

Dr. Steinbergh moved to find that the allegations as set forth in the June 10, 2015 Notice of Opportunity for Hearing in the matter of Dr. Mauser have been proven to be true by a preponderance of the evidence and to adopt Ms. Shamansky’s Proposed Findings and Proposed Order. Mr. Giacalone seconded the motion.

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

Dr. Soin stated that Mr. Mauser has submitted an application for licensure as a massage therapist. The Board has alleged that in December 2011 Mr. Mauser was convicted of Theft and Attempted Safecracking, both of which are fifth-degree felonies. Mr. Mauser was also convicted in March 2015, after the submission of his licensure application, of four counts of Burglary and one count of Grand Theft. Dr. Soin stated that in January 2015 Mr. Mauser forced his way into a home through the basement door, rummaged through the bedroom and bathroom drawers, and stole jewelry. The homeowner arrived in time to find Mr. Mauser in her home. Mr. Mauser was ultimately found to have burglarized numerous homes. Mr. Mauser was sentenced to several years in prison and ordered to pay restitution totaling $55,584.36.

Dr. Soin stated that the Proposed Order is to permanently deny Mr. Mauser’s application.
A vote was taken on Dr. Steinbergh’s motion to approve:

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

The motion to approve carried.

MICHELLE STOUT

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

Mr. Gonidakis stated that he will now entertain discussion in the matter of Ms. Stout.

Dr. Steinbergh stated that Ms. Stout has applied for licensure as a massage therapist. The Board issued a Notice of Opportunity for Hearing based on Ms. Stout’s prior misdemeanor and felony convictions, a false statement on her licensure application, and her failure to cooperate with a Board investigation. Dr. Steinbergh briefly outlined Ms. Stout’s criminal history:

- In January 2008, Ms. Stout pled guilty to and was found guilty of two misdemeanor counts of assault.
- In November 2008, while in the passenger seat of a car with a friend, Ms. Stout encouraged the friend to discharge a firearm at another vehicle and/or at or into a residence. In May 2009, Ms. Stout pled guilty to and was found guilty of Complicity to Improperly Discharge a Firearm at or into a Habitation or School Safety Zone. Ms. Stout was sentenced in 18 months in prison and ordered to pay restitution in the amount of $420.00 and other costs.
- In December 2008, Ms. Stout took two credit cards from a person with whom she had been living and used them to purchase items and pay a personal bill. In March 2010, Ms. Stout pled guilty to and was found guilty of Misuse of Credit Cards, fifth degree felony. Ms. Stout was sentenced to six months in prison, to run concurrently with the sentence from her May 2009 conviction.
- In January 2009, without permission, Ms. Stout used information belonging to a relative in an attempt to secure a loan. In January 2009, Ms. Stout pled guilty to and was found guilty of Theft. Ms. Stout was
Ms. Stout was also ordered to pay costs, submit to mental health assessment, and complete 40 hours of community service.

On Ms. Stout’s application for licensure, she disclosed her 2009 and 2010 felony convictions, but she failed to disclose her 2008 and 2009 misdemeanor convictions. The Board sent Ms. Stout three sets of interrogatories, to which Ms. Stout failed to reply.

Dr. Steinbergh stated that due to the nature of Ms. Stout’s prior criminal history, her false statements to the Board, and her inability or unwillingness to cooperate with the Board, she agrees with the Proposed Order to permanently deny Ms. Stout’s application for licensure.

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

ROLL CALL:  
Dr. Rothermel - abstain  
Dr. Saferin - abstain  
Mr. Giacalone - aye  
Dr. Steinbergh - aye  
Dr. Soin - aye  
Mr. Gonidakis - 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.

RODNEY HOWARD POLING, D.O.

Mr. Gonidakis stated that on December 9, 2015, the Board issued a Notice of Opportunity for Hearing to Dr. Poling based upon prior action by the Michigan Board of Osteopathic Medicine and Surgery Disciplinary Subcommittee. The Michigan Board accepted and approved a Consent Order and Stipulation wherein Dr. Poling accepted a formal reprimand and a fine in the amount of $2,500. The matter is now before the Board for final disposition.

Dr. Steinbergh moved to find that the allegations set forth in the December 9, 2015 Notice of
Opportunity for Hearing have been proven to be true by a preponderance of the evidence. Dr. Steinbergh further moved to enter an order, effective immediately upon mailing, to Reprimand Dr. Poling. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:  
Dr. Rothermel - abstain
Dr. Saferin - abstain
Mr. Giacalone - aye
Dr. Steinbergh - aye
Dr. Soin - aye
Mr. Gonidakis - aye
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. Steinbergh seconded the motion. A vote was taken:

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

The motion carried.

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

The Board returned to public session.
The Board took a brief recess at 12:10 p.m. and resumed at 1:05 p.m.

RATIFICATION OF SETTLEMENT AGREEMENTS

LANA M HETZEL, L.M.T. – CONSENT AGREEMENT

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

ROLL CALL:

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

The motion to ratify carried.

ARTHUR HOWARD BELL, D.O. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE OSTEOPATHIC MEDICINE AND SURGERY

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

ROLL CALL:

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

The motion to ratify carried.
RONALD JOHN CELESTE, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

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

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

The motion to ratify carried.

RANDAL JOHN LEWIS, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

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

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

The motion to ratify carried.

RICHARD T. SHERIDAN, M.D. – PERMANENT SURRENDER/RETIREMENT OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

Dr. Steinbergh moved to ratify the Proposed Permanent Surrender/Retirement with Dr. Sheridan. Dr. Soin seconded the motion. A vote was taken:
ROLL CALL:

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

The motion to ratify carried.

**PAUL W. WILSON, D.O. – PERMANENT RETIREMENT OF CERTIFICATE TO PRACTICE OSTEOPATHIC MEDICINE AND SURGERY**

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

ROLL CALL:

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

The motion to ratify carried.

**DISMISSAL OF NOTICE OF OPPORTUNITY FOR HEARING**

**ADAM P. HALL, D.O.**

Mr. Gonidakis stated that on April 1, 2013, the Board issued an Order to Adam Hall, D.O., which summarily suspended his license to practice osteopathic medicine and surgery and issued a Notice of Opportunity for a Hearing. Dr. Hall requested a hearing, which has been continued and is currently scheduled to begin on April 26, 2016. To date, no presentation of evidence has commenced.

On or about August 20, 2014, Dr. Hall was indicted in Lawrence County, Ohio on criminal charges that generally relate to a portion of the same facts underlying the Board’s April 1, 2013 Order, specifically the alleged violation of Section 4731.22(B)(10), to wit: Trafficking in Drugs and Illegal Processing of Drug
On or about March 24, 2016, the Lawrence County Court of Common Pleas filed a Judgment Entry which found Dr. Hall guilty of Attempted Tampering with Evidence and Possession of Criminal Tools.

Under Section 4731.22(D), Ohio Revised Code, the Board no longer retains jurisdiction to allege felonious conduct under Section 4731.22(B)(10) of the Ohio Revised Code if the trial court renders a final judgment in the individual’s favor and the judgment is based on an adjudication of the merits.

Mr. Gonidakis continued that the Board must therefore vacate the April 1, 2013 Summary Suspension and dismiss the April 1, 2013 Notice of Opportunity for Hearing, but the Board may dismiss without prejudice and specifically reserve the right to issue further notice of formal disciplinary charges to Dr. Hall related to his guilty pleas or any related conduct in the April 1, 2013 Notice of Summary Suspension that may be charged or recharged.

Dr. Steinbergh moved to approve the Dismissal Without Prejudice of the April 1, 2013 Summary Suspension and Notice of Opportunity for Hearing issued to Dr. Hall. Dr. Soin seconded the motion.

Roll Call:

- Dr. Rothermel - abstain
- Dr. Saferin - abstain
- Mr. Giacalone - aye
- Dr. Steinbergh - aye
- Dr. Soin - aye
- Mr. Gonidakis - 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 Notices of Opportunity for Hearing to the following: Paul Matthew Bolger, M.D.; Adam Patrick Hall, D.O.; Alan Lewis Menkes, D.O.; Won Geel Song, M.D.; and Ernest Loran Sutton, M.D. Dr. Soin seconded the motion. A vote was taken:

Roll Call:

- Dr. Rothermel - abstain
- Dr. Saferin - abstain
- Mr. Giacalone - aye
- Dr. Steinbergh - aye
- Dr. Soin - aye
- Mr. Gonidakis - aye
April 13, 2016

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

The motion to send carried.

RULES & POLICIES

Ms. Debolt stated that proposed Rule 4730-1-08 and the proposed rules in Chapter 4731-8 and Chapter 4731-13 have been reviewed by the Common Sense Initiative (CSI) office and are now ready to be filed with the Joint Commission on Agency Rule Review.

Ms. Debolt stated that it has been proposed to make a technical amendment to Rule 4731-13-16(B) and Rule 4731-13-36(C)(2)(c) to add the phrase “civil penalties.” Ms. Debolt stated that this has been discussed with the CSI Office and these technical amendments will not require the rules to be re-filed with CSI.

**Dr. Saferin moved to approve the filing of proposed Rules 4730-1-08 and the rules in Chapter 4731-8 and Chapter 4731-13, as amended, for the formal promulgation process. Dr. Rothermel seconded the motion.** A vote was taken:

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<tr>
<td>Dr. Rothermel</td>
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<td>Dr. Schottenstein</td>
<td>aye</td>
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<tr>
<td>Dr. Edgin</td>
<td>aye</td>
</tr>
</tbody>
</table>

The motion carried.

OPERATIONS REPORT

**Human Resources:** Mr. Groeber stated that the position of Deputy Director 3 has been posted and is envisioned to be a manager of communication operations. The position of Public Information Officer has also been posted. Interviews for nursing positions continue and one of those positions will be re-posted.

Mr. Groeber stated that Mr. Miller has been involved in the E-License project since its inception. Mr. Groeber stated that the Board has been asked by the Department of Administrative Services (DAS) to share Mr. Miller with other boards, and consequently Mr. Miller will spend about 90% of his time on the E-
Licensure project. Mr. Groeber stated that measures are being taken to cover most of Mr. Miller’s Medical Board duties while the project continues. In response to a question from Mr. Gonidakis, Mr. Groeber stated that DAS will not be paying any portion of Mr. Miller’s salary during this time and that the Medical Board will continue to pay 100% of that salary.

**Budget:** Mr. Groeber stated that the Board’s cash balance is approximately $4.5 million and is anticipated to be over $5 million in the near future. Mr. Groeber stated that March expenses were more than revenue, but that difference is expected to be made up several times over in April.

**Information Technology:** Mr. Groeber stated that Phase 2.3 of the E-License project has been completed and Phase 3 will launch within the next two weeks. Phase 3 will encompass all remaining license types except allopathic, osteopathic, and podiatric physicians. Mr. Groeber stated that all physician license types will be included in Phase 4, which should be complete by the end of 2016.

Mr. Groeber stated that the new system is working very well and is producing new reporting for the Board.

**Communications and Outreach:** Mr. Groeber stated that during the March 2016 Retreat, the Board had discussed reaching out to the Council of Medical School Deans to discuss possible engagements between the Board and the medical schools. Mr. Groeber stated that Dr. Susman of the Northeast Ohio Medical University will meet with Mr. Miller in May to discuss the potential of an on-site Board meeting or for Board members to give presentations to medical students.

**Medical Board Magazine:** Mr. Groeber stated that the first edition of the Medical Board magazine was issued in March. Mr. Groeber stated that there has been a question about the intent and the target audience of the publication. Mr. Groeber envisioned the magazine as something of value to the Board’s licensees, but is more intended for the public when sitting in a physician’s wait room or similar location. Mr. Groeber stated that it is not a clinical magazine, but he opined that it has valuable content.

Dr. Schottenstein opined that the varying reactions to the magazine are related to the differing expectations that people had for the magazine. Dr. Schottenstein stated that while there has always been a goal to share with the public the good work that the Medical Board does, there was some expectation that the magazine would be more scholarly and would be more of a medical journal for physicians. Mr. Kenney agreed with Dr. Schottenstein’s comments.

Dr. Steinbergh opined that Board members did not have an opportunity to review the magazine’s content prior to publication. Dr. Steinbergh expressed disappointment that the inaugural issue did not contain information about the good work that the Medical Board does. Regarding the advertisements in the magazine, Dr. Steinbergh opined that large groups like medical schools or hospitals would be appropriate advertisers but she was not in favor of individual licensees or other individuals advertising in the magazine. Dr. Steinbergh further opined that the cover of the magazine should not include the statement “The Official Publication of the State Medical Board of Ohio.”

Mr. Kenney opined that the magazine is a tremendous tool that can be used to provide information about the Board and to highlight things that are happening in the medical community. Mr. Kenney commented
that it is not practical for every member of the Board to approve every article that appears in the magazine. Mr. Kenney stated that he was very pleased with the first edition and it is good that the Board can have such a magazine produced at no cost to itself. Mr. Kenney opined that the advertisements were very good. Mr. Kenney further opined that the phrase “The Official Publication of the State Medical Board of Ohio” should be placed more prominently. Mr. Gonidakis agreed with Mr. Kenney’s comments and opined that the magazine humanizes the Board.

Mr. Groeber proposed that the next edition exclude content that does not discuss new practices of medicine. Mr. Groeber further proposed the development of a mechanism for medical review of the articles. Specifically, Mr. Groeber suggested that he partner with one member of the Board for each feature. In this way the Board can be more involved without each Board member having to read every article.

Dr. Soin expressed concern that medical review of the articles would be seen as an implicit endorsement of the content. Dr. Soin also opined that any practitioner should have an opportunity to advertise in the magazine and not just large entities. Dr. Soin felt that if the Board is accepting advertisers, then it should accept everyone. Finally, Dr. Soin favored the idea of the magazine being light reading for the average citizen in a physician’s waiting room.

Dr. Schachat felt that the features about innovative new treatments or procedures could be seen as an “advertorial” and the Board should avoid anything that could be viewed as such. Dr. Schachat commented that Mr. Groeber’s management and leadership of this project has been wonderful.

Dr. Edgin opined that the magazine was striking and attention-grabbing, but expressed concern that the features had very little to do with the Board and its activities. Dr. Edgin also opined that the information about legislative initiatives should be in the front of the magazine instead of the back.

Mr. Groeber thanked the Board members for their input.

**Agency Operations:** Mr. Groeber stated that the number of open complaints have gone up one-hundredth of a percentage point. Mr. Groeber stated that the Board’s Licensure section issued 262 new MD/DO licenses last month in an average of 43 days, as well as 18 expedited licenses in an average of 16 days. The number of allied medical licenses issues is down, but not significantly. Mr. Groeber stated that the number of open complaints in Enforcement and in the Hearing Unit is down.

Mr. Groeber reminded the Board members that Financial Disclosure forms are due at the Ohio Ethics Commission on May 16.

**APPOINTMENTS TO THE COMMITTEE ON PRESCRIPTIVE GOVERNANCE**

Dr. Steinbergh moved to appoint Richard Bakker, M.D., Ph.D., to serve on the Committee on Prescriptive Governance to complete a term that will expire on June 19, 2017, and to appoint Katherine Clark, D.O., to a term that expires on June 19, 2018. Dr. Saferin seconded the motion. All members voted aye. The motion carried.
REPORTS BY ASSIGNED COMMITTEES

FINANCE COMMITTEE

FINING AUTHORITY

Mr. Kenney stated that in addition to discussing the Medical Board magazine and the Board’s budget, the Finance Committee also discussed the two fines that are currently outstanding to be paid to the Board. One fine is probably not collectible due to the licensee’s travel to Pakistan. Mr. Kenney stated that the other fine should be payable and the proper channels are being followed.

Mr. Kenney commented that the Board is continuing to explore changes in legislation that will allow it to reduce licensure fees for physician applicants.

2016 FEDERATION OF STATE MEDICAL BOARDS FOUNDATION LUNCHEON

Dr. Saferin moved to approve Dr. Rothermel, Dr. Steinbergh, Mr. Groeber, and Dr. Saferin attend the 2016 Federation of State Medical Boards Foundation Luncheon at a cost of $100 each, to be paid by the Medical Board, and that attendance at the meeting is in connection with their responsibilities as, and is related to their positions with, the State Medical Board of Ohio. Dr. Schachat seconded the motion. All members voted aye. The motion carried.

Dr. Steinbergh stated that the keynote speakers at this year’s FSMB Foundation Luncheon were involved in the prosecution of a California physician who was convicted of murder for recklessly prescribing drugs to patients. Dr. Steinbergh opined that the Luncheon will be very educational.

Mr. Gonidakis commented that he is unable to attend this year’s Annual Meeting of the FSMB due to circumstances beyond his control. In his absence, Dr. Steinbergh has agreed to serve as the Board’s voting delegate.

POLICY COMMITTEE

CHAPTER 4731-21, INTRACTABLE PAIN RULES

Ms. Anderson stated that, based on comments received from interested parties, the Policy Committee recommends various changes to bring the rules in Chapter 4731-21 into alignment with the statutory changes of the last few years, including changing the phrase “intractable pain” to “chronic pain.” The proposed draft of Rule 4731-21-02 would require the use of drug screens if there is evidence of behavior that is indicative of drug abuse, though the details of the drug screen will be left to the physician’s discretion. The proposed draft Rule 4731-21-02 also includes the requirement to check the Ohio Automated Rx Reporting System (OARRS), in accordance with statute. Proposed Rule 4731-21-04 requires that the Board’s red flags be reviewed when assessing possible drug abuse or addiction.
Ms. Anderson noted that interested parties were asked to comment on whether physicians who treat chronic pain should be required to take continuing medical education (CME) related to pain management; the current rule only encourages the physician to take such CME’s. Ms. Anderson stated that no public comments were received on this topic, so this is an issue for the Board to consider.

**Dr. Steinbergh moved to approve the draft rules in Chapter 4731-21 to be filed with the Common Sense Initiative Office. Dr. Saferin seconded the motion.** All members voted aye. The motion carried.

**CHAPTER 4731-22, EMERITUS REGISTRATION**

Ms. Anderson stated that no changes are being recommended to the Board’s rule on emeritus registration.

Dr. Steinbergh recommended that Chapter 4731-22 be amended so that a physician who holds emeritus status is allowed to hold an active medical license in another state.

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

**Dr. Steinbergh moved to file the proposed rules of Chapter 4731-22 with the Common Sense Initiative office, with the amendment that physicians who hold emeritus status be allowed to hold an active medical license in another state. Dr. Saferin seconded the motion.** All members voted aye. The motion carried.

**RULE 4731-29-01, PAIN MANAGEMENT CLINICS**

Ms. Anderson stated that in Rule 4731-29-01(B)(3), the staff is recommending changes in how the Board determines if an individual meets minimal standards. Currently, for physicians without a subspecialty in pain management, the Board has the ability to review the facility when circumstances warrant. For those physicians with a subspecialty in pain management, the matter is only reviewed by the Board of Pharmacy. Ms. Anderson asked the Board to discuss whether there should be a requirement for a Medical Board inspection.

Dr. Soin stated that he supports the Rule as it currently exists. Dr. Soin stated that the Board of Pharmacy already performs a robust inspection. Also, the Medical Board does not lose the right to inspect marginal facilities. Dr. Steinbergh agreed.

**Dr. Steinbergh moved to file the proposed Rule 4731-29-01 rules of Chapter 4731-22 with the Common Sense Initiative office. Dr. Schachat seconded the motion.** All members voted aye. The motion carried.

**CHAPTER 4731-25, OFFICE-BASED SURGERY**

Ms. Anderson stated that a key aspect of these rules is the prohibition of a physician from performing two office-based surgeries at one time. In order to properly define this, it was decided that there needs to be a clear definition of when a surgery ends and when a surgery begins. Ms. Anderson stated that at the Policy
Committee’s request, she and the staff has researched various definitions of surgery start and end times used by other states and organizations.

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

Ms. Anderson stated that the definitions of surgery start time includes when an incision is made, when the patient has undergone anesthesia, or when the patient enters the operating room. Definitions of surgery end time includes when the incision and/or all access routes have been closed and all surgical devices removed, or when the patient leaves the operating room.

The Board discussed these varying definitions thoroughly. The Board decided that more consideration is required in order to come on an appropriate conclusion. This topic will be discussed by the Board at the next monthly Board meeting.

LEGISLATIVE REPORT

Mr. LaCross stated that there is an outline, but not yet actual language, for legislation regarding opiate medications and Suboxone clinics. The potential legislation would require Suboxone clinics with 30 or more patients to be licensed. The legislation would also require those clinics to be owned by a physician and that the physicians and staff of the clinic to undergo background checks. Mr. LaCross noted that there are already similar requirements for pain management clinics and it has been questioned whether such restrictions are necessary.

Mr. LaCross continued that the legislation would also take measures to improve the availability and affordability of Naloxone. Also, pharmacies would have 90 days to fill a prescription for opioids or benzodiazepines before the prescription becomes invalid. Likewise, a prescription for opioids or benzodiazepines that the patient holds for more than 30 days would become invalid. Lastly, the legislation would provide a waiver of the requirement to be certified for two years in order to be a methadone clinic; this waiver would be available to entities that have already operated as a methadone clinic outside of Ohio for a period of time.

Mr. LaCross stated that, at Mr. Gonidakis’ request, he will be providing real-time updates on the progress of this legislative outline, as it is expected to move through the process quickly.

Mr. LaCross continued that there are two pending bills, one in the House and one in the Senate, concerning medical marijuana. The Senate version would allow a pill version, while the House version allows for a smokeless form of the plant. Mr. LaCross stated that he will continue to monitor the bills to see which version moves forward or to see if they are merged in some fashion. Mr. LaCross stated that the overall goal of these efforts is to preempt a possible ballot initiative which would create an open market for medical marijuana in Ohio.

Mr. Gonidakis noted that the Medical Board will be a participant no matter which version of the medical marijuana bill moves forward. Mr. Gonidakis proposed that the Board form an ad hoc committee (on which he would like to serve) to keep in close contact with Mr. LaCross and Mr. Groeber so that the Board
can play a strong role in the process. Dr. Steinbergh agreed, but noted that the Board has not yet had a conversation about medical marijuana and that the Board members must have input to determine where the Medical Board stands on this subject. Mr. Gonidakis agreed.

Mr. LaCross provided a revised MD/DO Licensure Concept draft which, if adopted legislatively, would remove the examination fee from the physician licensure process and reduce the total cost for initial licensure to $305.

PHYSICIAN ASSISTANT/LICENSURE/SCOPE OF PRACTICE COMMITTEE

PHYSICIAN ASSISTANT FORMULARY REVIEW

Dr. Steinbergh moved to add Elitek to the Physician Assistant Formulary under the “CPT may not prescribe” category. Dr. Steinbergh further moved to add Privigen and Pomalyst to the Physician Assistant Formulary under the “physician-initiated” category. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

CHAPTER 4731-12, PODIATRIC LICENSURE RULES

Dr. Saferin moved that draft rules in Chapter 4731-12 be approved for circulation to interested parties. Rothermel seconded the motion. All members voted aye. The motion carried.

MENTAL HEALTH QUESTIONS OVERVIEW

Ms. Anderson stated that at the Board’s direction, the staff has reviewed possible changes to questions 21, 22, and 23 on the medical licensure application, which deal with mental health. Ms. Anderson stated that no changes are recommended for Question #21. It is further recommended that Question #22 be deleted entirely and to have part of Question #22 folded into Question #23. Regarding Question #23, it is recommended that the qualifiers in the ability to practice medicine be removed and the timeframe for hospitalization with the conditions be five years.

Ms. Anderson stated that Question #23 currently lists specific medical conditions as examples of what should be disclosed on the licensure application. Ms. Anderson noted that 37 other medical boards do not list specific conditions and only instructs applicants to disclose any conditions that prevents them from practicing medicine. Conversely, Ms. Anderson noted that six states include the same list that Ohio has. Ms. Anderson asked for the Board’s input regarding the list of medical conditions.

The Board members discussed the various benefits and drawbacks of including a long list, including a brief list, and not including any list of medical conditions. The Board members agreed that this matter requires more time for the Board members to consider.

DRAFT MD/DO LICENSURE CONCEPT

Dr. Saferin moved to proceed with sending the draft MD/DO Licensure Concept to the Legislative
Services Commission and to continue discussing the concept in the Policy Committee. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

LICENSURE APPLICATION REVIEWS

LISA LOUISE CROFT, D.O.

Dr. Saferin moved to approve the application of Lisa Louise Croft, DO for a certificate to practice medicine and surgery in Ohio and to immediately limit and restrict that certificate to the practice of administrative, nonclinical medicine. Dr. Saferin further moved that all limitations and restrictions shall terminate upon evidence acceptable to the Board or its designee that Dr. Croft has successfully taken the Comprehensive Osteopathic Medical Variable-Purpose Examination. Dr. Steinbergh seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

STEVEN M. PAP, M.D.

Dr. Saferin moved to approve documentation on behalf of Dr. Pap provided by the preceptor, thus terminating all limitation and restriction of his license. Dr. Steinbergh seconded the motion. A vote was taken:

ROLL CALL:

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

CASEY DARRAH, M.D.

Dr. Saferin stated that the matter of Dr. Darrah is being presented in order to determine whether the evidence submitted is satisfactory to the Board that Dr. Darrah has successful completed at least 12 months of Graduate Medical Education (GME).

Ms. Anderson explained that in December 2015 the Board approve a list of applicants for licensure which included Dr. Darrah. Afterward, the Board received information from the University of Toledo that they had concerns about granting Dr. Darrah licensure. Ms. Anderson stated that a letter received with Dr. Darrah’s licensure application verifies that he successfully completed rotations, but he remained at a PGY-1 level and did not successfully complete the requirements to advance to PGY-2. Ms. Anderson asked the Board to consider whether this meets the Board’s requirements under 4731-14(B)(1), Ohio revised Code that an applicant must have completed 12 months of GME or its equivalent.

The Board discussed this matter thoroughly. Dr. Rothermel expressed concerns that Dr. Darrah’s training program did not feel that he had performed satisfactorily in the area of decision-making, which is a significant part of medical practice. Although Dr. Darrah reported that he completed rotations, the University of Toledo did not renew Dr. Darrah’s contract due to academic difficulties and he was not able to be a good supervisor to younger physicians.

Dr. Saferin stated that the statute only requires Dr. Darrah to have successfully completed a minimum of 12 months of GME; it does not require that his training program be happy with him. Nor does the statute state that the applicant must be promoted from PGY-1 to PGY-2. Dr. Saferin opined that Dr. Darrah meets the statutory requirements for licensure.

Dr. Schottenstein opined that the information provided to the Board seems to be contradictory. Dr. Schottenstein stated that one cannot satisfactorily complete rotations but not satisfactorily complete the first year of training. Dr. Schottenstein opined that the Board is within its rights to take a second look at the situation. Dr. Schachat agreed and opined that Dr. Darrah should not be given a license at this time. Dr. Steinbergh also agreed and opined that Dr. Darrah has not successfully completed 12 months of GME.

**Dr. Steinbergh moved to deny Dr. Darrah’s application for licensure. Dr. Schottenstein seconded the motion.** A vote was taken:

**ROLL CALL:**

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

The motion to deny carried.

Mr. Giacalone commented that it is too narrow an interpretation to conclude that the statute requires Dr. Darrah’s licensure. Mr. Giacalone further commented that Dr. Darrah’s licensure should not be granted on a technicality.

COMPLIANCE COMMITTEE

Dr. Steinbergh stated that on March 9, 2016, the Compliance Committee met with Fonda L. Blacker, M.T.; Joseph Peter Burick, D.O.; Mary Jo-Ellen Erickson, M.D.; James T. Lutz, M.D.; David R. Mandel, M.D.; and Gretchen L. Weber, 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 February 8 and 9, 2016. The Compliance Committee further recommended that the application for a Certificate of Good Standing from Dublin Springs be approved in accordance with Section 4731.25, Ohio Revised Code, and Chapter 4731-16, Ohio Administrative Code.

Dr. Steinbergh moved to approve the Application for Certificate of Good Standing as a Treatment Provider for Impaired Practitioners from Dublin Springs be approved. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

PROBATIONARY REQUESTS

Mr. Gonidakis advised that at this time he would like the Board to consider the probationary requests on today’s consent agenda. Mr. Gonidakis asked if any Board member wished to discuss a probationary request separately. Dr. Steinbergh stated that she would like to discuss the requests of Deborah L. Cook, D.P.M., Marjorie M. Haas, M.D., and John W. Tedrow, P.A.
DEBORAH L. COOK, D.P.M.

Dr. Steinbergh stated that Dr. Cook is requesting approval for multiple courses to fulfill the terms of her probation. Dr. Steinbergh wanted to ensure that Dr. Cook will also submit a written report to the Board about her experience in the courses. Ms. Murray stated that the requirement of written reports is included in Dr. Cook’s Consent Agreement.

MARJORIE M. HAAS, M.D.

Dr. Steinbergh noted that the Board must determine the number and frequency of charts to be reviewed by Dr. Haas’ monitoring physician. Dr. Steinbergh suggested that ten charts per month be reviewed. The Board members agreed.

JOHN W. TEDROW, P.A.

Dr. Steinbergh stated that Mr. Tedrow is requesting approval of the course Personal and Professional Ethics in Medicine tailored by Donna F. Homenko, Ph.D. Dr. Homenko has indicated that the course can be delivered completely online via an ongoing one-to-one email dialogue and that an in-person direct instructional session can be arranged if required. Dr. Steinbergh opined that Mr. Tedrow should have at least one hour of in-person contact with Dr. Homenko as part of the course. The Board members agreed.

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

- To grant Steven F. Brezny, M.D.’s request for discontinuance of the requirement for psychiatric treatment;
- To grant Deborah L. Cook, D.P.M.’s request for approval of the ethics course Personal and professional Ethics in Medicine, tailored by Donna Homenko, Ph.D., to fulfill the ethics course requirement; and approval of the online prescribing courses The Smart Rx, offered by the Ohio State Medical Association, Opioid Prescribing Series (6 Modules), offered by the Massachusetts Medical Society; and the book on prescribing Responsible Opioid Prescribing: A Clinician’s Guide, offered by the Federation of State Medical Boards, to fulfill the prescribing course requirement;
- To grant Deborah Lynne Frankowski, M.D.’s, request to administer, furnish, and possess controlled substances;
- To grant Julio C. Galindo, M.D.’s request for approval of the records course deadline extension for Intensive Course in Medical Documentation: Clinical, Legal and Economic Implications for Healthcare Providers, offered by Case Western Reserve University, required within the first year of probation;
- To grant Sara C. Gorbett, M.T.’s request for release for the terms of her December 10, 2008 Board Order;
• To grant Marjorie M. Hass, M.D.’s request for approval of the submitted practice plan; Approval of Roy Varghese, M.D., to serve as the monitoring physician, and determination of the frequency and number of charts to be reviewed at 10 charts per month;

• To grant Joseph Francis Lydon, Jr., M.D.’s request for discontinuance of the controlled substance log requirement;

• To grant Bernard J. Rose, M.D.’s request for permission to travel from Ohio to Michigan until October 2016 without prior permission;

• To grant John W. Tedrow, P.A.’s request for approval of Personal and Professional Ethics in Medicine course tailored by Donna F. Homenko, Ph.D., to fulfill the ethics course required for reinstatement, and to require at least one hour of in-person contact with Dr. Homenko; and

• To grant Mark Aaron Weiner, D.O.’s request for approval of Thomas G. Sherman, M.D., to serve as the new treating psychiatrist.

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

ROLL CALL: 

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

The motion carried.

Dr. Steinbergh exited the meeting at this time.

FINAL PROBATIONARY APPEARANCE

KORY D. BROWNLEE, D.P.M.

Dr. Brownlee was appearing before the Board pursuant to his request for release from the terms of his April 13, 2011 Consent Agreement. Mr. Gonidakis reviewed Dr. Brownlee’s history with the Board.

In response to questions from Dr. Soin, Dr. Brownlee stated that he currently only does house calls and he intends to continue that after his release. Dr. Brownlee stated that he receives wonderful support from his wife, his three sons, and his father. Dr. Brownlee stated that he intends to continue with his current...
treatment program after his release.

In response to questions from Dr. Schottenstein, Dr. Brownlee stated that he does not have access to drugs in his practice and that he does not have cravings or temptations. Dr. Brownlee also stated that he tends to be a calm person and that stress is not a trigger for him.

**Dr. Soin moved to release Dr. Brownlee from the terms of his April 13, 2011 Consent Agreement, effective immediately. Dr. Schottenstein seconded the motion.** All members vote aye. The motion carried.

**MARK E. DILUCIANO, M.D.**

Dr. DiLuciano was appearing before the Board pursuant to his request for release from the terms of his April 13, 2011 Consent Agreement. Mr. Gonidakis reviewed Dr. DiLuciano’s history with the Board.

In response to questions from Mr. Gonidakis, Dr. DiLuciano stated that he currently practices full-time as an anesthesiologist. Dr. DiLuciano stated that his family is very supportive and his wife accompanied him to the meeting today. Dr. DiLuciano stated that he maintains close contact with his Alcoholics Anonymous sponsor.

Dr. Soin asked if Dr. DiLuciano has ever had problems with drugs besides alcohol. Dr. DiLuciano replied that he has never had problems with drugs besides alcohol.

For the benefit of the medical students in attendance, Mr. Kenney noted that Dr. DiLuciano has spent five years of his life under the Board’s probationary terms. Mr. Kenney stated that being on probation is not easy because the probationer is always monitored and it affects his whole life, including his family. Dr. DiLuciano agreed and stated that alcoholism is a very tough disease on one’s family.

Mr. Giacalone asked Dr. DiLuciano to elaborate on a comment he had once made regarding bathroom soap. Dr. DiLuciano explained that he had been unable to use public bathroom soap because it is 70% alcohol and could potentially lead to a positive alcohol test.

Dr. Schottenstein noted that Dr. DiLuciano has stated that he is willing to be a resource for new probationers. Dr. DiLuciano stated that it would be helpful to new probationers to have a list of physicians who could be a resource for them, much like a sponsor in Alcoholics Anonymous.

Dr. Steinbergh returned to the meeting at this time.

**Dr. Soin moved to release Dr. DiLuciano from the terms of his April 13, 2011 Consent Agreement, effective immediately. Dr. Schottenstein seconded the motion.** All members voted aye. The motion carried.
WILLIAM CLARK HARLAN, D.O.

Dr. Harlan was appearing before the Board pursuant to his request for release from the terms of his October 13, 2010 Consent Agreement. Mr. Gonidakis reviewed Dr. Harlan’s history with the Board.

Responding to questions from Dr. Soin, Dr. Harlan stated that he continues to work at Southeastern Correctional Complex, a medium security facility. Dr. Harlan commented that the job fits him well and gives him a sense of doing service work. Dr. Harlan stated that the job is very good because he is limited to working only 40 hours per week, leaving time for his family and his farm.

Dr. Steinbergh asked Dr. Harlan to describe his animal recovery activities. Dr. Harlan stated that he is involved in pot belly pig rescues, noting that many people get such a pet when they are small but cannot properly care for them when they are larger.

Dr. Harlan commented that he does not consider his experience with the Medical Board to be punitive and that the Board has shown him respect. Dr. Harlan stated that the key for him was to be honest and cooperative.

Dr. Steinbergh moved to release Dr. Harlan from the terms of his October 13, 2010 Consent Agreement, effective immediately. Dr. Schachat seconded the motion. All members voted aye. The motion carried.

JOHN THOMAS HIBLER, D.O.

Dr. Hibler was appearing before the Board pursuant to his request for release from the terms of his April 11, 2012 Consent Agreement. Mr. Gonidakis reviewed Mr. Hibler’s history with the Board.

Dr. Steinbergh commented that Dr. Hibler is a fine example of someone who made a mistake, admitted it, and retrained in another field. Dr. Steinbergh asked Dr. Hibler to address the medical students in attendance regarding his situation. Dr. Hibler stated that he made a big mistake by failing to disclose a criminal conviction on his application for medical licensure. Dr. Hibler stated that his attempted cover-up of the conviction was a much bigger problem than the conviction itself. Dr. Hibler advised the students to be 100% honest on all applications. Dr. Hibler stated that he has paid dearly for his mistake and that his four years of probation was a very difficult time.

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

Dr. Steinbergh commented that many physicians in Dr. Hibler’s position do not get an opportunity to retrain as he did. Dr. Steinbergh asked if the courses Dr. Hibler had been required to take in ethics, boundaries, and professionalism had been worthwhile. Dr. Hibler replied that they were worthwhile and he learned a lot from the courses. Dr. Hibler commented that he has the utmost respect for the Board members.

Dr. Steinbergh moved to release Dr. Hibler from the terms of his April 11, 2012 Consent Agreement,
effective April 20, 2016. Dr. Schottenstein seconded the motion. All members voted aye. The motion carried.

JOHANNA C. S. KAUFFMAN, M.D.

Dr. Kauffman was appearing before the Board pursuant to her request for release from the terms of her April 9, 2014 Consent Agreement. Mr. Gonidakis reviewed Dr. Kauffman’s history with the Board.

Responding to questions from Dr. Steinbergh, Dr. Kauffman stated that she practices at Community Health and Wellness Partners of Logan County, as well as in an emergency department. Dr. Kauffman stated that she continues to see a psychiatrist and she currently takes Seroquel and folic acid.

Dr. Schottenstein asked if everything to going well for Dr. Kauffman at this time. Dr. Kauffman replied that everything is going well.

Dr. Steinbergh moved to release Dr. Kauffman from the terms of her April 9, 2014 Consent Agreement, effective immediately. Dr. Schottenstein seconded the motion. All members voted aye. The motion carried.

JOHN K. KREBS, M.D.

Dr. Krebs was appearing before the Board pursuant to his request for release from the terms of his September 9, 2010 Consent Agreement. Mr. Gonidakis reviewed Dr. Krebs’ history with the Board.

In response to questions from Dr. Steinbergh, Dr. Krebs stated that he is active in Alcoholics Anonymous (AA) meetings and that he has a sponsor and a sponsee.

In response to questions from Dr. Soin, Dr. Krebs stated that he has no plans to change his recovery program. Dr. Krebs stated that AA is part of his life and has kept him sober for seven years. Regarding his medical career, Dr. Krebs stated that he enjoys his current practice. Dr. Krebs stated that there are no controlled substances at his practice site, though as a surgeon he does prescribe controlled substances.

In response to questions from Dr. Schottenstein, Dr. Krebs stated that he has not had any temptations or cravings and that his mood is stable. Dr. Krebs stated that he is in the best shape he has been in.

Dr. Steinbergh moved to release Dr. Krebs from the terms of his September 9, 2010 Consent Agreement, effective immediately. Dr. Schachat seconded the motion. All members voted aye. The motion carried.

PATRICK K. MCGRIFF, D.O.

Dr. McGriff was appearing before the Board pursuant to his request for release from the terms of the Board’s Order of March 9, 2011. Mr. Gonidakis reviewed Dr. McGriff’s history with the Board.
In response to questions from Dr. Steinbergh, Dr. McGriff stated that he is a family practitioner and he is currently working mostly in urgent care. Dr. Steinbergh asked if Dr. McGriff would address the medical students in attendance about his experience and how they can avoid making his mistakes. Dr. McGriff agreed.

Dr. McGriff stated that he had once had a “holier than thou” attitude towards physicians who were disciplined by the Board. However, Dr. McGriff has learned that medicine is not that black and white and that we are all human. Dr. McGriff stated that at some point in the students’ medical careers, they will be asked to do something that they think is inappropriate. Dr. McGriff stated that in such situations, one must step back and look at the situation. Dr. McGriff stated that if one compromises and crosses the physician/patient boundary once, it will become easier to do so the next time. Dr. McGriff stated that he wrecked his medical career for ten years because he transgressed with a patient. Dr. Steinbergh stated that Dr. McGriff is lucky to be practicing medicine today, noting that the Board permanently revoked Dr. McGriff’s medical license but stayed the revocation.

Mr. Giacalone asked Dr. McGriff to further describe how the students can avoid his experience, in which he had sex with a patient and provided her with narcotics. Dr. McGriff responded that he had been a family practitioner and had patients of lower socioeconomic status. Dr. McGriff explained that he had been dating his employer’s daughter, which made it difficult to blow off steam about his work. Dr. McGriff stated that a patient presented to him who was attractive and shared similar interests, and Dr. McGriff felt that he could vent to this patient about his situation. Dr. McGriff stated that at that moment, he crossed the physician/patient boundary.

Dr. McGriff continued that in the boundaries course he had been required to take, he learned the concept of one-way intimacy. Dr. McGriff explained that the patient should be able to share whatever they need to share to help the physician provide better treatment, but the physician should not share their own personal information with a patient. Dr. McGriff stated that he made this mistake and changed the physician/patient relationship into something else. Dr. McGriff advised the students to be very careful about this, particularly today with the prevalence of social media.

Dr. Steinbergh moved to release Dr. McGriff from the terms of the Board’s Order of March 9, 2011, effective immediately. Dr. Schachat seconded the motion. All members voted aye except Dr. Schottenstein, who abstained. The motion carried.

PARAG PATEL, M.D.

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

In response to questions from Dr. Steinbergh, Dr. Patel stated that he is no longer practicing obstetrics and gynecology. Instead, Dr. Patel is involved in the health and wellness field and he hopes to get into addiction medicine. Dr. Patel stated that he is doing well, but the Board’s action has caused problems with insurance companies. Personally, Dr. Patel stated that he has a better spiritual relationship and he places more importance on his personal life instead of being so focused on work. Dr. Patel stated that he makes
sure to review each day and to resolve conflicts as soon as possible. Dr. Patel stated that it is mostly a matter of relaxation and not being as stressed as he used to be. Dr. Patel stated that he no longer performs any gynecologic procedures but he does do some hormone replacement.

In response to questions from Dr. Schottenstein, Dr. Patel acknowledged that he does not intend to continue with rehabilitation meetings following his release from probation. Dr. Patel stated that although his misuse of alcohol had gotten him into this situation, it is not an addiction with him. Dr. Patel stated that he took what he could from the Alcoholics Anonymous meetings that he was required to attend, but opined that he does not need the meetings. Dr. Schottenstein opined that Dr. Patel should continue with the meetings in order to maximize his odds of staying sober. Dr. Schottenstein stated that oftentimes the feeling that one does not need meetings anymore is the first step to relapse.

**Dr. Steinbergh moved to release Dr. Patel from the terms of the Board’s Order of January 12, 2011, effective immediately. Dr. Schottenstein seconded the motion.** All members voted aye. The motion carried.

GERALD K. PERELMAN, D.P.M.

Dr. Perelman was appearing before the Board pursuant to his request for release from the terms of his April 10, 2013 Consent Agreement. Mr. Gonidakis reviewed Dr. Perelman’s history with the Board.

Mr. Giacalone asked Dr. Perelman to describe his current practice. Dr. Perelman replied that he works more than 40 hours per week and his practice is going very well.

Mr. Giacalone asked if Dr. Perelman could describe his situation to the medical students in attendance. Dr. Perelman explained that during a time in which he had a stroke and his marriage was coming to an end he had become too sympathetic and too free with his prescribing habits. Dr. Perelman stated that it is very easy to simply write another prescription to keep patients happy. Dr. Perelman stated that he has taken a course in pain management and he recommends all physicians take such a course. Dr. Perelman stated that over-prescribing is a misunderstood and under-appreciated problem.

Mr. Giacalone agreed that Dr. Perelman had been prescribing excessive amounts of medication, noting that Dr. Perelman even prescribed narcotics for a patient who had said he was trying to get off narcotics. Dr. Perelman opined that none of his patients were actually trying to get off drugs; they just wanted more prescriptions and he provided them because he was very sympathetic at that time. Mr. Giacalone commented that Dr. Perelman was creating addicts at that time. Dr. Perelman replied that some of his patients were already addicts. Dr. Perelman stated that he continued them as addicts because he had been gullible.

Dr. Soin stated that when physicians over-prescribe opioids, they may not realize the societal harm they do. Dr. Soin stated that it is okay for a physician to say “no.” Dr. Schottenstein agreed and added that sometimes a physician must say “no.” Dr. Schottenstein opined that Dr. Perelman’s problem had primarily been a boundary problem and he advised Dr. Perelman to take a physician/patient boundaries course.
Mr. Giacalone opined that Dr. Perelman would likely have lost his medical license if his case had initially appeared before the Board in 2016 instead of 2012. Dr. Soin agreed and stated that it is important that a physician be unbiased and only prescribe medications as they think is appropriate.

**Dr. Steinbergh moved to release Dr. Perelman from the terms of his April 10, 2013 Consent Agreement, effective immediately. Dr. Schachat seconded the motion.** All members voted aye. The motion carried.

**RICK SKIBICKI, M.D.**

Dr. Skibicki was appearing before the Board pursuant to his request for release from the terms of his January 12, 2011 Consent Agreement. Mr. Gonidakis reviewed Dr. Skibicki’s history with the Board.

Dr. Saferin exited the meeting at this time.

In response to questions from Mr. Giacalone, Dr. Skibicki stated that he currently works as an emergency physician at the Cleveland Clinic less than 40 hours per week. Dr. Skibicki stated that he has learned to say “no” to working extra hours. Dr. Skibicki added that he used to be a “yes” person and working the extra hours led to his problem with Tramadol. Dr. Skibicki stated that he attends a minimum of three rehabilitation meetings per week.

Mr. Giacalone asked if Dr. Skibicki would explain his situation to the medical school students in attendance. Dr. Skibicki explained that he began using Tramadol as a crutch during a difficult time in his personal life. Dr. Skibicki stated that there were never any issues with the quality of his medical care, but his addiction cost him his wife and children. Dr. Skibicki commented that Tramadol was easy to get in the 1980’s because it was not a controlled substance at that time. Dr. Skibicki stated that he received Tramadol in samples provided by pharmacists and he would get more by manipulating physician friends into writing prescriptions for him. Dr. Skibicki stated that he used to isolate himself, but he now values the deep relationships that he has embraced. Dr. Skibicki added that he appreciates the structure that the Board has given him and that it reminds him to be honest.

Dr. Schottenstein asked if, in hindsight, Dr. Skibicki believes he used Tramadol to self-medicate for depression. Dr. Skibicki replied that he believes that he did use Tramadol to self-medicate, but his mood is now stable.

**Dr. Steinbergh moved to release Dr. Skibicki from the terms of his January 12, 2011 Consent Agreement, effective immediately. Mr. Giacalone seconded the motion.** All members voted aye. The motion carried.

**JEFFERY L. STAMBOUGH, M.D.**

Dr. Stambough was appearing before the Board pursuant to his request for release from the terms of his April 13, 2011 Consent Agreement. Mr. Gonidakis reviewed Dr. Stambough’s history with the Board.
In response to questions from Dr. Soin, Dr. Stambough stated that his current workload as an employed physician is substantially less than it had been in private practice. Dr. Stambough also stated that he will continue as an employed physician for at least three more years. Dr. Stambough stated that he has support from his family and from Alcoholics Anonymous (AA). Dr. Stambough speaks with his AA sponsor about twice per week and he also has one sponsee. Dr. Stambough stated that his recovery program has been a very positive experience and he does not plan to change anything about his program.

**Dr. Steinbergh moved to release Dr. Stambough from the terms of his April 13, 2011 Consent Agreement, effective immediately. Mr. Giacalone seconded the motion.** All members voted aye. The motion carried.

**ADJOURNMENT**

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

Thereupon, at 4:45 p.m., the April 13, 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 April 13, 2016, as approved on May 11, 2016.

Michael L. Gonidakis, President

Kim G. Rothermel, M.D., Secretary

(SEAL)