RJA

MAY 2012

MEDICAL BOARD

GRAND ROUNDS

YOUR REPORT FROM THE STATE MEDICAL BOARD OF OHIO

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Improving Patient Care Through Enhanced Use of OARRS

The mission of the State Medical Board of Ohio is to protect and enhance public safety. As part of our mission the Board is taking this opportunity to focus provider attention on the role OARRS (Ohio Automated Rx Reporting System) can play in improving patient care.

As healthcare providers, we all share in the responsibility for finding ways to improve patient care. One of the most effective tools for prescription drug safety available today is utilization of an OARRS report. An OARRS report can offer valuable insight into a patient's use of controlled substances, while also alerting providers to possible signs of abuse, addiction or diversion.

House Bill 93 of the 129th General Assembly makes it easy for prescribers to obtain a chronologic history of the patient's use of controlled substances obtained by prescription. OARRS allows prescribers or their designees to register and receive a password so they can go on-line and run OARRS reports on their patients. The legislation also directed the State Medical Board, State Board of Nursing, State Pharmacy Board, and State Dental Board to develop rules for when providers are *required* to access OARRS. Links to those rules are provided at the end of this article.

What is OARRS?

OARRS is a prescription monitoring program maintained by the Ohio Board of Pharmacy. When controlled substances or tramadol are either dispensed or personally furnished to a patient this information must be reported to OARRS on a weekly basis by either a pharmacy or prescriber. "Personally furnish" means the distribution of drugs by a prescriber to the prescriber's patients for use outside the prescriber's practice setting. This does not include the administration of drugs.

Once reported to OARRS the information is uploaded within 24 hours. This information can be accessed by prescribers, their designees, or pharmacists for the purpose of monitoring potential drug interactions and to identify signs of potential drug abuse, addiction or diversion.

See OARRS page 2

OARRS continued from page 1

A prescriber is authorized to request an OARRS Report on an individual if: (1) the request is for the purpose of providing medical treatment and (2) the prescriber has a current prescriber-patient relationship with the individual named in the request.

What are the benefits of OARRS?

OARRS prescription history reports are an important component of delivering and coordinating patient-centered care. The reports should be interpreted within the context of a patient's on-going medical history. Prescription history reports: (1) assist providers in better management of a patient's prescription regimen; (2) are a screening tool for signs of potential abuse, addiction and diversion; and (3) highlight patient risk for future addiction or abuse when used in conjunction with a patient's medical history.

When are you required to check OARRS?

Medical Board rule 4731-11-11 and FAQ document outline situations for accessing OARRS prior to prescribing or personally furnishing a controlled substance or tramadol to a patient which include:

(1) If a patient is exhibiting signs of drug abuse or diversion;
(2) When you have a reason to believe the treatment of a patient with controlled substances or tramadol will continue for twelve weeks or more; and
(3) At least once a year thereafter for patients receiving treatment with controlled substances or tramadol for twelve weeks or more.

If signs of abuse, addiction, diversion or other patterns of risk appear prescribers should address these issues with the patient to determine the basis for the suggestive behavior. The following are signs of drug abuse, addiction or diversion that:

Require an OARRS Report before prescribing or personally furnishing a controlled substance or tramadol	*May warrant an OARRS report, but are not limited to the following:*
Selling prescription drugs	Known history of chemical abuse or dependency
Forging/altering a prescription	Frequently requesting early refills of reported drugs
Stealing or borrowing reported drugs	History of illegal drug use
Drug screens inconsistent with treatment plan; refusing drug screen	Frequently losing prescriptions for reported drugs
Having been arrested, convicted or received diversion or intervention in lieu of conviction for drug offense while under physician's care	Requesting reported drugs by specific name, street name, color, or identifying marks
Receiving reported drugs from multiple prescribers without clinical basis	Recurring emergency department visits to obtain reported drugs
Having a family member, friend, law enforcement officer, or health care professional express concern about patient's use of illegal or reported drugs	Appearing impaired or overly sedated during an office visit or exam
Increasing the dosage of reported drugs in amounts exceeding the prescribed amount	Sharing reported drugs with another person

See OARRS page 3

OARRS continued from page 2

If there is a basis to suspect abuse, addiction or diversion providers may consider implementing clinical and/or monitoring techniques such as addressing the concerns with the patient, more frequent office visits, utilizing drug screens, seeking authority to speak with family members, considering different treatment options, utilizing pill counts, limiting locations the prescription can be filled, or consultation with an appropriate specialist.

How do you document an OARRS report?

The preferred method of documenting the receipt and assessment of an OARRS report is to record the date the report was requested along with any pertinent findings in the patient's medical record. Your understanding of the clinical significance of the information in the OARRS report is what you want to document. If you choose to maintain an actual copy of the OARRS report in the patient's medical record it should be in a separate, non-reproducible section of the chart.

OARRS reports are confidential. Please note that unauthorized disclosure of an OARRS Report may be in violation of Board of Pharmacy laws and/or federal privacy laws such as HIPAA. For more information please contact the Ohio Board of Pharmacy. ♦

Links to Rules on Accessing OARRS:

State Medical Board Rule 4731-11-11

State Board of Nursing Rule 4723-9-12

State Pharmacy Board Rule 4729-5-20

State Dental Board Rule 4715-6-01

Massage Therapy and Cosmetic Therapy Rule Changes

The State Medical Board of Ohio adopted new and amended rules concerning cosmetic therapy and massage therapy. The rules went into effect on January 24, 2012. Read the updated massage therapy and cosmetic therapy rules: http://med.ohio.gov/rules/Limited%20Branch%20rules%20effective%201-24-12.pdf

New Massage Therapy Licensing Exam

The newly adopted rules recognize the national Massage and Bodywork Licensing Examination (MBLEx) administered through the Federation of State Massage Therapy Boards as the Ohio licensing examination for massage therapists. The massage therapy licensing exam formerly administered by the Medical Board has been discontinued. As of January 24, 2012, eligible massage therapy applicants will be able to take the computer-based MBLEx examination throughout the year instead of waiting for the Ohio examination formerly administered twice per year by the Medical Board.

Applicants must pass the (MBLEx) and meet all the requirements for licensure under Ohio law to qualify for a massage therapy license in Ohio. Information about the MBLEx examination is available on the website of the Federation of State Massage Therapy Boards. http://www.fsmtb.org/index.html

The Ohio Massage Therapy licensure application form has been updated and is available at this link: http://www.med.ohio.gov/pdf/Applications/mtapp.pdf

In March 2012, the Board approved licensure applications of 20 massage therapists who had successfully completed the Massage & Bodywork Licensing Examination (MBLEx) and other licensure requirements.

The new licensing exam requirement does not impact the 12,083 currently licensed massage therapists. ♦

MASSAGE THERAPY SCHOOL ON PROBATION

CLEVELAND INSTITUTE OF MEDICAL MASSAGE

Board Order: Certificate of Good Standing previously issued to the school placed on probation for one year. Based upon school's failure to meet minimum passage rates for first time applicants during the course of three previous massage therapy examinations. Order effective 3/15/12.

Physician Assistant Formulary Updated

The physician assistant formulary was recently amended by the Medical Board. The physician assistant formulary is composed of two documents: Rule 4730-2-06, Ohio Administrative Code, and Appendix A to the rule, which contains the actual formulary. Only Appendix A, the formulary, was amended, and went into effect on January 24, 2012. The formulary identifies medications a PA with prescriptive authority may prescribe, may not prescribe, and medications that require physician initiation or consultation with required documentation in the patient record. Link to the PA formulary: http://med.ohio.gov/rules/PA%20formulary%20rule%20and%20formulary.pdf

As of April 30, 2012, there were 2,271 Physician Assistant's licensed by the Medical Board. Of these PA's, 205 hold a provisional certificate to prescribe and 1,118 have successfully completed the provisional period and hold certificates to prescribe.

Carisoprodol - a Schedule IV Controlled Substance

The DEA announced the scheduling of Carisoprodol, a schedule IV controlled substance as of January 11, 2012, and the requirements regarding filling and refilling a prescription for this drug. Specifically, a pharmacy may only fill or refill a prescription for a drug containing carisoprodol if all of the following requirements are met:

- the prescription was issued for a legitimate medical purpose by a DEA-registered practitioner acting in the usual course of professional practice (21 CFR §1306.04);
- the prescription contains all the information required by 21 CFR §1306.05; and
- the number of refills authorized by the prescribing practitioner is five or less (21 USC §829(b)).

Read more about this change: http://www.deadiversion.usdoj.gov/drugs_concern/carisoprodol/index.html

Statement on the Corporate Practice of Medicine

In March 2012, the Medical Board issued a *Statement on the Corporate Practice of Medicine* to clarify that Ohio law does not prohibit an Ohio licensed physician from rendering medical services as an employee of a corporation or any other form of business entity.

The statement is posted on the Medical Board's website at http://med.ohio.gov/pdf/Corporate%20Practice%20of%20Medicine%20Statement.pdf

Board Member Updates

Board appointments: Governor Kasich recently made two appointments to the Medical Board. **Mark Bechtel, MD**, a dermatologist from Westerville, Ohio serves as one of nine physicians on the Board. **Donald R. Kenney, Sr.,** a real estate developer from Westerville, Ohio, serves as one of three public members on the Board.

Board Officers: The following members of the Medical Board serve as Board officers during 2012: President, Darshan Mahajan, MD, a neurologist from Elyria; Vice-President, Anita M. Steinbergh, DO, a family practitioner from Westerville; Secretary, J. Craig Strafford, MD, MPH, an OB/GYN from Gallipolis; and Acting Supervising Member, Lance A. Talmage, MD, an OB/GYN from Toledo.

Medical Board member **Lance A. Talmage, MD**, of Toledo, was inducted as Chair of the Board of Directors of the Federation of State Medical Boards on April 28, 2012 during the Federation's annual meeting held in Fort Worth, Texas. The FSMB is a national non-profit organization representing all 70 state and territorial medical boards within the United States and its territories. It assists these medical boards as they go about their mandate of protecting the public's health, safety and welfare. The FSMB leads by promoting excellence in medical practice, licensure and regulation.

Remembering Raymond J. Albert

There really aren't words to express the impact Ray Albert made during his 24 years of service on the State Medical Board. In his unassuming way, Mr. Albert made several firsts during his tenure on the Board. He was the first public member to serve as Board President, the first public member to serve as Supervising Member of the Board, and he set the record for years of service as a public member. He helped all of us remember to keep the patient first when setting policy and making disciplinary decisions.

As Supervising Member of the Board, he worked closely with the Board Secretary to oversee the Board's complaint investigation and enforcement activities. During his 14 years as Supervising Member, Mr. Albert reviewed over 54, 000 complaints which resulted in nearly 2,600 Board actions. He instituted several processes that helped the agency prioritize its caseload and address issues consistently and fairly.

Mr. Albert conducted innumerable office conferences with licensees on probation due to a Board action. Many of those actions involved physicians with chemical dependency issues. A strong advocate for physicians in recovery, he set the framework and molded the Medical Board's probationary monitoring program. His no nonsense yet compassionate demeanor was a lifeline to many physicians – helping them heal and return to productive medical practice. These efforts are his enduring legacy.

Raymond J. Albert

May 27, 1927—Oct. 19, 2011

Medical Board Member
1987—2011

Fast Facts about Maintenance of Licensure (MOL) from the Federation of State Medical Boards

What is Maintenance of Licensure?

Maintenance of Licensure (MOL) is a system of continuous professional development for physicians that supports, as a condition for license renewal, a physician's commitment to lifelong learning that is relevant to their area of practice and contributes to improved health care. The Federation of State Medical Boards (FSMB), the non-profit organization which represents the nation's 70 state and territorial medical boards, is working with its member boards to develop a system over the next several years that is reasonable, logical and administratively feasible.

In 2004, the FSMB's House of Delegates adopted a policy statement that "State medical boards have a responsibility to the public to ensure the ongoing competence of physicians seeking licensure." After seven years of careful study, which included input and guidance from physicians and health care organizations across the house of medicine, a framework for MOL was formally adopted by the FSMB's House of Delegates in 2010.

While **MOL is still several years away from being adopted by a state medical board**, the FSMB is currently working with 11 state boards to implement various pilot projects to help states prepare for MOL and to determine best practices.

What is the rationale for MOL?

State medical boards and the medical profession as a whole are facing increasing demand from the public and health policy makers for greater accountability and transparency:

- This is part of a larger movement in the United States and internationally to improve health care quality, decrease medical errors and improve patient safety Increasing public demands that the quality of care
- Increasing public demands that the quality of care provided by our health care delivery system demonstrate continuous improvement.
- As medicine has become more complex and fast-evolving, provided by our health care delivery system demonstrate continuous improvement. the need for lifelong learning and skills maintenance has increased.

What are the core components of MOL?

The framework for MOL, adopted by the FSMB's House of Delegates in 2010, recommends that state boards require physicians to periodically demonstrate participation in three components of effective lifelong learning in medicine:

1. **Reflective Self-Assessment (What improvements can I make?):**
   Physicians must participate in an ongoing process of reflective self-evaluation, self-assessment and practice assessment, with subsequent successful completion of appropriate educational or improvement activities.

2. **Assessment of Knowledge and Skills (What do I need to know and be able to do?):**
   Physicians must demonstrate the knowledge, skills and abilities necessary to provide safe, effective patient care within the framework of the six general competencies as they apply to their individual practice.

3. **Performance in Practice (How am I doing?):**
   Physicians must demonstrate accountability for performance in their practice using a variety of methods that incorporate reference data to assess their performance in practice and guide improvement.

See MOL on page 7

MOL continued from page 6

Would MOL require a mandatory, high-stakes examination?

No. The MOL framework proposed by the FSMB would not require physicians to take examinations in order to comply with MOL. It may be an option physicians may wish to take to demonstrate their knowledge and skills in their area of practice but the FSMB does not believe such an assessment should be mandatory.

What is the relationship between MOL, Maintenance of Certification (MOC) and Osteopathic Continuous Certification (OCC)?

MOL, MOC and OCC all value the concept of lifelong learning and continued professional development. MOL is not the same as Maintenance of Certification (MOC), which is produced by the American Board of Medical Specialties, or Osteopathic Continuous Certification (OCC), which is produced by the American Osteopathic Association Bureau of Osteopathic Specialists.

The nation's state medical boards do not require specialty certification or recertification (i.e., MOC or OCC) for licensure, or licensure renewal, and that is not expected to change.

Though MOC or OCC are not required by state boards for licensure, the FSMB's proposed MOL system recommends that state boards recognize physicians actively engaged in MOC or OCC in their area of practice as being in substantial compliance with any state's adopted MOL rules.

For physicians who were never specialty certified, or who are not interested in participating in MOC or OCC, the FSMB will help state boards identify activities that physicians already engage in, such as accredited CME (including Performance Improvement-CME), that could help them comply with MOL's three components.

To learn more about Maintenance of Licensure:

For more information about the FSMB's Maintenance of Licensure initiative, please visit www.fsmb.org/mol.html

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Anesthesiologist Assistants: Performing Epidural and Spinal Anesthetic Procedures

A *Statement on Anesthesiologist Assistants: Performing Epidural and Spinal Anesthetic Procedures* was approved by the Medical Board in March 2012. The statement clarifies that Ohio licensed Anesthesiologist Assistants may perform epidural and spinal anesthetic procedures as requested by and performed under the direction of a supervising anesthesiologist who is physically present in the room.

Link to the statement: http://med.ohio.gov/pdf/Anesthesiologist%20Assistant%20Statement.pdf

It's Time to Renew Your License

MD-DO-DPM-MT-CT

If your last name begins with L or M—your license expires on July 1, 2012

If your last name begins with H, I, J or K, your license expires on October 1, 2012

Questions? Send an e-mail to: Med.Record@med.state.oh.us

Professional Education Workgroup

Governor's Cabinet Opiate Action Team

Opioids and Other Controlled Substances
Emergency Department and Acute Care Facility Guidelines

The Governor's Cabinet Opiate Action Team (GCOAT) was established in the fall of 2011 to address the continuing epidemic of misuse and abuse and overdose from prescription opioids. The GCOAT consists of five working groups: (1) Treatment--includes Medication Assisted Treatment; (2) Professional Education; (3) Public Education; (4) Enforcement; and (5) Recovery Supports.

Under the leadership of Dept. of Health Director Dr. Ted Wymyslo and Department of Aging Director Bonnie Kantor-Burman, the Opioids and other Controlled Substances guidelines were developed so that drug-seekers would not be able to shop from one location to another until finding a physician willing to prescribe opiate painkillers. This was done through a multidisciplinary effort involving many state medical and health care associations, emergency departments and acute care facilities, state agencies and boards, as well as individual physicians, nurses and other clinicians.

Why Emergency Departments/Acute Care Facilities?

- The Emergency Department (ED) is a major source for opioid prescriptions with 39 percent of all opioids prescribed, administered, or continued in U.S. coming from EDs. This may be an even higher percentage in Ohio. (Source: 2006, NCHS)
- Nationally, opioid prescribing for pain-related ED visits increased from 23 percent in 1993 to 37 percent in 2005. (Source: JAMA, Trends in Opioid Prescribing by Race/Ethnicity for Patients Seeking Care in US EDs)
- Emergency Department/Acute Care Facilities treatment of pain is frequently indicated without the benefit of an established doctor-patient relationship and often is conducted in an environment of limited resources.
- In Ohio, ***16 percent*** of fatal overdose victims in 2008 had a history of *doctor shopping* (filled prescriptions from at least five different prescribers per year). (Source: OAARS & ODH Vital Statistics)
- Closure of "pill mills" may result in increased drug seeking behavior (e.g. doctor shopping) at EDs.

Ohio Process

- A subgroup of the Professional Education Workgroup was formed to develop the guidelines.
- Washington State prescription guidelines were used as a starting point in addition to feedback from Ohio emergency departments.
- The guidelines are endorsed by Ohio American College of Emergency Physicians, Ohio Association of Health Plans, Ohio Association of Physician Assistants, Ohio Bureau of Workers' Compensation, Ohio Hospital Association, Ohio Osteopathic Association, Ohio Pharmacists Association, Ohio State Medical Association, Ohio Bureau of Workers' Compensation and facilitated by the Ohio Departments of Health and Aging.
- Intended as guidelines not Standards of Care. Clinical judgment is still the determining factor in prescribing practices.

Ohio Emergency and Acute Care Facility
Opioids and Other Controlled Substances (OOCS) Prescribing Guidelines

These guidelines are to provide a general approach in the prescribing of OOCS. They are not intended to take the place of clinical judgment, which should always be utilized to provide the most appropriate care to meet the unique needs of each patient.

1. OOCS for acute pain, chronic pain and acute exacerbations of chronic pain will be prescribed in emergency/acute care facilities only when appropriate based on the patient's presenting symptoms, overall condition, clinical examination and risk for addiction.
    a. Doses of OOCS for routine chronic pain or acute exacerbations of chronic pain will typically NOT be given in injection (IM or IV) form.
    b. Prescriptions for chronic pain will typically NOT be provided if the patient has either previously presented with the same problem or received an OOCS prescription from another provider within the last month.
    c. IV Demerol (Meperidine) for acute or chronic pain is discouraged.

2. Emergency medical clinicians will not routinely provide:
    a. Replacement prescriptions for OOCS that were lost, destroyed or stolen.
    b. Replacement doses of Suboxone, Subutex or Methadone for patients in a treatment program.
    c. Long-acting or controlled-release opioids (such as OxyContin®, fentanyl patches, and methadone).

3. Prior to making a final determination regarding whether a patient will be provided a prescription for OOCS, the emergency clinician or facility:
    a. Should search the Ohio Automated Rx Reporting System (OARRS) database (https://www.ohiopmp.gov/portal/Default.aspx) or other prescription monitoring programs, per state rules.
    b. Reserves the right to request a photo ID to confirm the identity of the patient. If no photo ID is available, the emergency or other acute care facility should photograph the patient for inclusion in the facility medical record.
    c. Reserves the right to perform a urine drug screen or other drug screening.

4. Emergency/acute care facilities should maintain an updated list of clinics that provide primary care and/or pain management services for patients, as needed.

5. Prior to making a final determination regarding whether a patient will be provided a prescription for an OOCS, the emergency clinician should consider the following options:
    a. Contact the patient's routine provider who usually prescribes their OOCS.
    b. Request a consultation from their hospital's palliative or pain service (if available), or an appropriate sub-specialty service.
    c. Perform case review or case management for patients who frequently visit the emergency/ acute care facilities with pain-related complaints.
    d. Request medical and prescription records from other hospitals, provider's offices, etc.
    e. Request that the patient sign a pain agreement that outlines the expectations of the emergency clinician with regard to appropriate use of prescriptions for OOCS.

6. Emergency/acute care facilities should use available electronic medical resources to coordinate the care of patients who frequently visit the facility, allowing information exchange between emergency/acute care facilities and other community-care providers.

7. Except in rare circumstances, prescriptions for OOCS should be limited to a three-day supply. Most conditions seen in the emergency/acute care facility should resolve or improve within a few days. Continued pain needs referral to the primary care physician or appropriate specialist for re-evaluation.

8. Each patient leaving the emergency/acute care facility with a prescription for OOCS should be provided with detailed information about the addictive nature of these medications, the potential dangers of misuse and the appropriate storage and disposal of these medications at home. This information may be included in the Discharge Instructions or another handout.

9. Emergency/acute care facilities should provide a patient handout and/or display signage that reflects the above guidelines and clearly states the facility position regarding the prescribing of opioids and other controlled substances.

Approved by GCOAT on April 18, 2012

MEDICAL BOARD ADOPTS STATEMENT ON TELEMEDICINE

The Medical Board adopted this position statement on May 10, 2012

The Medical Board has received increased inquiries from providers, patients, and businesses related to status of telemedicine and telehealth in Ohio. As such the Medical Board has been meeting with these interested parties in a concerted effort to ensure a viable framework for telemedicine moving forward.

The Medical Board recognizes that technological advances have made it possible for licensees to provide medical care to patients in ways that were not feasible in the past. As a result, telemedicine is a potentially useful tool that, if employed appropriately, can provide important benefits to patients, including: increased access to health care, expanded utilization of specialty expertise, rapid availability of patient records, and potential reductions in the cost of patient care.

The Medical Board cautions, however, that licensees practicing via telemedicine will be held to the same standards of care as licensees employing more traditional in-person medical care. A failure to conform to appropriate standards of care whether that care is rendered in-person or via telemedicine may subject the licensee to potential discipline by the Medical Board.

While the Medical Board continues its review and discussions of regulations impacting the use of telemedicine it also wants to ensure licensees are aware of current expectations in this area of practice. The following guidance is being provided to physicians who hold a full medical license or telemedicine certificate in Ohio and provide medical services via oral, written or electronic communication:

The "practice of telemedicine" is defined in Ohio as the practice of medicine in this state through the use of any communication, including oral, written or electronic communication, by a physician located outside this state. Please note that physicians who are licensed in Ohio may examine and diagnosis patients through the use of any communication, including oral, written, or electronic, without obtaining a telemedicine certificate.

Training of Staff: Staff involved in a telemedicine visit should be trained in the use of the telemedicine equipment and competent in its operation.

Licensee – Patient Relationship: A licensee using telemedicine should have some means of verifying that the patient seeking treatment is in fact who they claim to be. A diagnosis should be established through the use of accepted medical practices, i.e., a patient history, mental status examination, physical examination, and any appropriate diagnostic and laboratory testing. Licensees using telemedicine should also ensure the availability for appropriate follow-up care and maintain a complete medical record that is available to the patient and other treating health care providers.

Examinations: Licensees using telemedicine technologies to provide care to patients located in Ohio must provide an appropriate examination prior to diagnosing and/or treating the patient. However, this examination need not be in-person if the technology is sufficient to provide the same information to the licensee as if the exam had been performed face-to-face. If a licensee is prescribing a drug as part of a patient visit, please refer to the prescribing portion of this document.

See Telemedicine on page 11

Telemedicine continued from page 10

Other examinations may also be considered appropriate if the licensee is at a distance from the patient, but a licensed health care professional is able to provide various physical findings that the licensee needs to complete an adequate assessment. On the other hand, a simple questionnaire without an appropriate examination may be a violation of law and/or subject the licensee to discipline by the Board.

Prescribing: Licensees are reminded of their obligation to personally physically examine a patient prior to prescribing drugs. Before prescribing a drug, a licensee should make an informed medical judgment based on circumstances of the situation and on their training and experience. This will require that the licensee personally perform an appropriate history and physical examination, make a diagnosis, and formulate a therapeutic plan, a part of which may include a prescription. This process should be documented within the medical record.

Prescribing for a patient whom the licensee has not personally physically examined and diagnosed may be suitable under limited circumstances set out in Medical Board rule 4731-11-09, Ohio Administrative Code. These include: institutional settings, on call situations, cross coverage situations, situations in which a physician has scheduled or is in the process of scheduling an appointment to examine the patient, protocol situations, situations involving nurses practicing in accordance with a standard care arrangement, and certain hospice settings. Please refer to rule 4731-11-09, Ohio Administrative Code for more complete information.

Medical Records: A licensee treating a patient via telemedicine must maintain a complete record of the patient's care according to prevailing medical record standards. The medical record serves to document the analysis and plan of care for future reference. It must reflect an appropriate evaluation of the patient's presenting symptoms, and components of the electronic professional interaction must be documented as with any other encounter. The licensee must maintain the record's confidentiality, but disclose the records to the patient consistent with state and federal law.

Licensure: The practice of medicine is deemed to occur in the state in which the patient is located. Therefore, any licensee using telemedicine to regularly provide medical services to patients located in Ohio should be licensed to practice medicine in Ohio. Licensees need not reside in Ohio, as long as they have a valid, current Ohio medical license or telemedicine certificate.

Ohio licensees intending to practice medicine via telemedicine technology to treat or diagnose patients who are located outside of Ohio should check with other state licensing boards. Most states require physicians to be licensed, and some have enacted limitations to telemedicine practice or require or offer a special registration. A directory of all U.S. medical boards may be accessed at the Federation of State Medical Boards website. ♦

STATE MEDICAL BOARD OF OHIO NATIONALLY RECOGNIZED

The State Medical Board of Ohio ranks first among medical licensing boards regulating large physician populations according to a report released on May 17, 2012 by Public Citizen Health Research Group, a national consumer advocacy organization.

Public Citizen noted that "only one of the nation's 15 most populous states, Ohio, is represented among those 10 states with the highest disciplinary rates." The Ohio Medical Board placed first among licensing boards regulating more than 20,000 physicians, and third overall, for disciplinary actions imposed between 2009 - 2011 that resulted in license revocation, suspension, surrender, probation or restriction. Public Citizen recognizes that a lack of physician discipline by a state regulatory board equates with a lack of public protection.

Public Citizen notes that Boards are likely to do a better job in disciplining physicians if the Board has adequate funding, with money from licensees going to fund board activities instead of going into the state treasury for general purposes; adequate staffing; proactive investigations; excellent leadership; and independence from other parts of the state government so that the Board has the ability to develop its own budgets and regulations. Read the 2012 report: http://www.citizen.org/documents/2034.pdf

Improving the Integrity of OARRS and Reducing Risks of Doctor Shopping

Ohio is engaged in a battle to end an opiate epidemic that has seen significant increases in the number of prescriptions for controlled substances over the past decade. Regulatory entities and providers alike share in a common goal of reducing the effects this epidemic is having on the communities, businesses, and individuals within the State.

The Centers for Disease Control (CDC) report that approximately 10% of patients on opioids seek care from multiple prescribers and are likely engaged in some form of diversion of the drugs. CDC data further suggests that approximately 76% of nonmedical opioid users report obtaining drugs that had been prescribed to someone else. The CDC further reports that among persons who died of opioid overdoses, a significant proportion did not have a prescription in their records for the opioid that contributed to their death. In Ohio, estimates suggest that 25% - 66% of persons who have died from prescription drug overdoses used opioids originally prescribed to someone else. See http://www.cdc.gov/about/grand-rounds/archives/2011/01-February.htm

Prescribers have an opportunity to be part of efforts to reduce the risks of doctor shopping. Recent changes to law and OARRS program improvements have made it easier than ever to access OARRS prescription history reports so that prescribers may monitor whether their patients are receiving controlled substances from multiple prescribers or routinely obtaining early refills. Professional healthcare licensing boards are taking every opportunity to focus provider attention on ways to reduce the risks of diversion and so-called doctor shopping, and at the same time improve the integrity and quality of data within the Ohio Automated Rx Reporting System (OARRS).

In an effort to improve access to OARRS prescribers are now permitted to have non-licensed staff such as medical assistants or other office personnel registered as delegates with the Board of Pharmacy for purposes of accessing OARRS. Previously, only licensed healthcare providers such as nurses and physician assistants were permitted to be registered as delegates. The Board of Pharmacy limits the number of non-licensed delegates to three per prescriber. This change was intended to improve workflow in provider's practices, while also encouraging increased use of OARRS.

Prescribers can also play a role in improving the integrity and quality of the data in OARRS by way of the information included on a prescription. Currently, prescribers are required to place the patients name and address in order for a prescription to be valid. See Pharmacy Board Rule 4729-5-30, Ohio Administrative Code This information is verified by the pharmacist when filling the prescription and reported to OARRS. For OARRS to accurately assign prescription data to a given patient it uses three points of information that includes the patient's name, address and date of birth.

If prescriber's are willing to make the effort to include this information on prescriptions for controlled substances the accuracy of OARRS data could be improved by ensuring that when a prescription history report is accessed that the most complete and accurate information is available. This information may alert prescribers and pharmacists alike to potential signs of doctor shopping or diversion. ♦

The Medical Board adopted this practice guidance statement on May 10, 2012.

Physician Participation in "Deal of the Day" Offers

Does a physician engage in fee-splitting if the physician participates in deal-of- the-day mechanisms such as Groupon, Angie's List, Big Deal, Living Social, or similar mechanisms?

In a nutshell, no.

Deal-of-the-day offers generally involve a coupon being offered for a service or goods priced at a deep discount, but the "deal" isn't activated until a set number of the coupons are sold. The deal-of–the-day company receives approximately 50% of the money paid for the coupon, the vendor, in this case the physician, receives the remainder of the money paid.

The relevant portion of Section 4731.22(B) (17), Ohio Revised Code, defines fee-splitting as engaging in the division of fees for a referral of patients. According to AMA Opinion 6.02, payment by a physician solely for the referral of a patient is fee-splitting and violates the requirement that a physician deal honestly with patients and colleagues. Referrals and prescriptions must be based on the skill and quality of the physician to whom the patient has been referred or the quality and efficacy of the drug product prescribed.

The deal-of-the-day, however, is an advertising mechanism, and the percentage of the coupon purchase price retained by the company is an advertising fee. However, when considering whether to offer services through a deal-of-the-day program the physician should be aware of possible perils, including but not limited to the following:

- **The Practice of Medicine:** The provision of medical services purchased through a deal-of-the-day coupon is the practice of medicine. A physician-patient relationship is created when the purchased services are provided to the purchaser. The physician must comply with the minimal standards of care, including, but not limited to, maintaining a patient record, providing services in a manner that protects the privacy of the patient, and obtaining informed consent prior to the performance of a procedure.

- **Appropriateness of the service for the purchaser:** A physician-patient relationship is created when the physician delivers the medical service purchased via the deal-of-the-day coupon. Not all medical services are appropriate for all patients. It is especially important to consider this factor before offering elective or non-elective surgical procedures at a discount via a deal-of-the-day. Also, offering a package of a stated number of treatments, for example, a package of 10 acupuncture treatments, may lead to the patient's purchase and use of unnecessary treatments. Providing medical services that are unnecessary or not appropriate for the patient could possibly result in licensure disciplinary action based on the failure to provide services within the minimal standards of care.

- **Ability to honor the number of coupons purchased within the minimal standards of care:** A physician must deliver medical services in compliance with the minimal standards of care. Selling too many coupons may overload the physician's ability to provide such care.

See DEALS on page 14

DEALS continued from page 13

- Federal Health Care Programs: If the person purchasing the deal-of-the-day coupon is a person who participates in a federal health care program, the split of revenue with the deal-of-the-day entity could violate federal anti-kickback laws. There could be a finding of violation even if the person self-pays for the deal-of-the-day service instead of relying of the federal health care program, but the physician is a provider for a federally funded health care program.

- Private Insurers: Some provider contracts guarantee that the insurance company will be billed at the "best price." The insurance company may determine that the "best price" is the deal-of-the-day price and pay only a comparable amount.

Physicians considering participating in deal-of-the-day programs are encouraged to consult with private legal counsel before doing so. ♦

This document is only a guideline and should not be interpreted as being all inclusive or exclusive. The Medical Board will review all possible violations of the Medical Practice Act and/or rules promulgated thereunder on a case by case basis.

The Medical Board adopted this practice guidance statement on May 10, 2012.

PROBATION COMPLETED — JANUARY THROUGH APRIL 2012

The following licensees have completed the terms of probation required by Board Order or Consent Agreement.

Name of licensee	Title	License Number	Effective Date	Location
Axelson, David B	MD	35-064318	4/11/12	Pickerington, OH
Creps, Philip L	DO	34-005726	3/19/12	Saginaw, MI
Day, Richard	MD	35-061831	3/14/12	Senecaville, OH
Hall, Adam	DO	34-008707	3/14/12	Powell, OH
Hetman, Ronald	DPM	36-001421	3/14/12	Centerville, OH
Hoogendoorn, Kyle	DPM	36-003064	3/14/12	Keller, TX
Kleine, Shannon	LMT	33-012959	2/8/12	Cedar Grove, IN
Lindsay, Scott	DPM	36-002671	3/14/12	Pepper Pike, OH
Madhun, Zuhayr	MD	35-060483	3/14/12	Broadview Heights, OH
Mann, Donald C.	MD	35-071870	4/11/12	Florence, KY
Moinuddin, Douglas S	MD	35-096929	4/15/12	Westlake, OH
Molder, Jason	LMT	33-013523	3/14/12	Streetsboro, OH
Moore, John P. III	MD	35-069259	3/31/12	Bellbrook, OH
North, Phillip Thiele	MD	35-057152	3/14/12	Columbus, OH
O'Brien, Michael	DO	34-006651	3/15/12	Uniontown, OH
Reed, Steven T	MD	35-092560	4/11/12	Bay Village, OH
Ryan, Jon Patrick	DO	34-008006	4/11/12	Dayton, OH
Shook, Jeffrey	DPM	36-002904	3/14/12	Logan, WV
Stearns, Duncan	MD	35-094653	3/14/12	Pepper Pike, OH
Stein, Sarah A	MT	33-015532	1/11/12	Columbus, OH
Werner, Joseph G	MD	35-093027	1/11/12	Powell, OH

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Actions taken by the Medical Board between January and April 2012 are summarized below. Go to the *Licensee Profile and Status Link* on the Medical Board's website—med.ohio.gov —for the most current license status information and to view the Board action documents.

ARMAS, Romulo A., M.D. (#35-036947) – St. Petersburg, Florida
Board Order: Medical license permanently revoked. Based on prior action by the Florida Board of Medicine wherein doctor relinquished his license to practice medicine and surgery, the underlying allegations being doctor's care rendered to one patient. (Journal Entry – no hearing requested.) Order effective 2/9/12.

BROWN, Calvin Richard, M.D. (#35-041051) – Akron, Ohio
Voluntary Surrender: Permanent revocation authorized by doctor in lieu of further formal disciplinary proceedings based upon doctor's conviction in the United States District Court for the Northern District of Ohio, Eastern Division, on one felony count of Health Care Fraud. Effective 1/11/12.

CHOUDHRY, Muhammed Saleem, M.D. (#35-061085) – Bolingbrook, Illinois
Board Order: Medical license permanently revoked. Based on doctor's conviction in the Court of Common Pleas of Franklin County, Ohio, of one felony count of Workers' Compensation Fraud. Order effective 4/12/12.

CHOY-ZANNONI, Jean Sun, M.D. (#35-049714) – Parma, Ohio
Consent Agreement: Medical license suspended for at least one year; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's conviction in the Cuyahoga County Court of Common Pleas of one felony count of Attempted Theft; Aggravated Theft, one felony count of Attempted, Worker's Compensation Fraud, and one felony count of Telecommunications Fraud; obtaining, or attempting to obtain, money or anything of value by fraudulent misrepresentation in the course of practice; and doctor's false, fraudulent, deceptive, or misleading statements in securing an Ohio medical license by failing to disclose on her 2011 renewal application that she had been criminally indicted. Agreement effective 2/8/12.

CHRISTOPHER, Anastasia Marie (Acupuncturist Applicant) – Troy, Ohio
Application Withdrawn: Request for withdrawal of acupuncturist license accepted by the Board in lieu of further investigation of a possible violation of Section 4762.02(A), Ohio Revised Code. Effective 3/14/12.

CHU, Paul P., M.D. (#35-053485) – Springfield, Ohio
Consent Agreement: Medical license reinstated on 2/8/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 2/8/12; agreement to remain in effect for at least five years prior to any request for termination.

CORNICELLI, Samuel Francis, Jr., M.D. (#35-062164) – Warren, Ohio
Board Order: Medical license revoked. Based on doctor's violation of conditions of limitation placed on medical license by 5/14/09 consent agreement due to his failure to submit required psychiatric reports and quarterly declarations of compliance and his failure to appear for required personal appearances before the Board or its designee. (Review and Journal Entry – no hearing requested.) Order effective 4/12/12.

CORTEZ, Armando Abel, M.D. (#35-041899) – Cincinnati, Ohio
Board Order: Medical license revoked. Based upon legal presumption that doctor is unable to practice according to acceptable and prevailing standards of care by reason of mental or physical illness due to doctor's failure to submit to a Board-ordered examination. Order effective 1/12/12.

CULLEN, William B., M.D. (#35-056037) – Wadsworth, Ohio
Summary Suspension: Pursuant to Section 4731.22(G), O.R.C., medical license summarily suspended based on Board's determination that there is clear and convincing evidence that, in medical care rendered to 24 specified patients, the doctor failed to maintain minimal standards applicable to the selection or administration of drugs, or failed to employ acceptable scientific methods in the selection of drugs or other modalities for treatment of disease and that such care departed from, or failed to conform to, minimal standards of care of similar practitioners; that doctor violated the conditions of limitation imposed on his license by a 10/14/10 consent agreement in that his conduct violates the Medical Board rules governing the treatment of intractable pain; and that doctor's continued practice presents a danger of immediate and serious harm to the public. Order effective 2/8/2012.

DAWSON, David Warren, M.D. (#35-049896) – McLoud, Oklahoma
Board Order: Medical license revoked. Based on prior action by the Oklahoma State Board of Medical Licensure and Supervision wherein doctor's license to practice medicine and surgery was suspended for a period of six months, the underlying basis being the doctor's inappropriate prescribing of narcotics or controlled drugs and his failure to maintain adequate medical records. (Journal Entry – no hearing requested.) Order effective 2/9/12.

DOEBLER, William Clayton, M.D. (#35-094250) – Bonita Springs, Florida
Board Order: Doctor reprimanded. Based on prior action by the New York State Board of Professional Medical Conduct wherein

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doctor was censured, reprimanded, and placed on probation for at least five years due to doctor's conviction for Driving While Impaired. Order effective 4/12/12.

DUMONT, Francis Emile, M.D. (#35-062172) – Cincinnati, Ohio
License Reinstated after Suspension: Doctor's request for reinstatement approved by vote of the Board on 4/11/12, subject to probationary terms, conditions, and limitations established by 9/14/11 Board Order.

FAKHOURY, Ramon Fawzi, M.D. (#35-089349) – Norco, California
Board Order: Medical license revoked. Based on prior action by the Medical Board of California wherein doctor is restricted from seeing or treating any female patients without a female registered nurse, chaperone approved in advance by the California Board until the issuance of a final decision and order regarding allegations that the doctor sexually molested four female patients. (Journal Entry – no hearing requested.) Order effective 2/9/12.

FINLEY, Robert Kent, III, M.D. (#35-064293) – Huntington, West Virginia
Consent Agreement: Physician required to notify Board and obtain approval of a practice plan prior to engaging in practice of medicine in Ohio during the next three years, and required to provide written documentation verifying that he otherwise holds a full and unrestricted license in each state in which he is or has been licensed. Based on prior action by the Iowa Board of Medicine wherein doctor was cited, warned, and assessed a fine based on doctor's alleged failure to conform to minimal standards of care in his treatment of eight surgical patients between January 2005 and January 2006. Agreement effective 3/14/12; agreement to remain in effect for at least three years prior to any request for termination.

FLANIGAN, Jackson L. J., M.D. (#35-061527) – Cambridge, Ohio
Consent Agreement: Medical license reinstated on 1/11/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 1/11/12; agreement to remain in effect for at least five years prior to any request for termination.

GLADDEN, Jamie Lynne, M.D. (#35-076076) – Grand Rapids, Ohio
Summary Suspension: Pursuant to Section 4731.22(G), Ohio Revised Code, medical license summarily suspended based on Board's determination that there is clear and convincing evidence that doctor's ability to practice according to acceptable and prevailing standards of care is impaired due to mental illness and due to habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice and that doctor's continued practice presents a danger of immediate and serious harm to the public. Order effective 4/11/12.

GOMAA, Laila Ibrahim, M.D. (#35-068963) – Dayton, Ohio
Board Order: Medical license suspended for at least two years, with interim monitoring and conditions for restoration of license established. Upon restoration, license placed on probation for at least five years. Based on doctor having been found guilty in the Court of Common Pleas of Franklin County of one felony count of Complicity to Practice Medicine without a Certificate and one misdemeanor count of Attempt to Practice Medicine without a Certificate. Order effective 4/2/12.

GOODYEAR, Michael Dean, II, M.D. (#35-078625) – Blacklick, Ohio
Consent Agreement: Doctor reprimanded, required to appear before the Board or its designated representative, and required to report to all employers and licensing agencies. Based upon doctor's two separate convictions in 2006 and 2008 on misdemeanor counts of public indecency. Agreement effective 4/11/12; requirement to report to employers and licensing agencies to remain in effect for at least two years.

GRINBLATT, Michael Steven, M.D. (#35-052369) – Beachwood, Ohio
Consent Agreement: Medical license suspended for at least ninety days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he has been diagnosed with marijuana and cocaine abuse and that, following treatment, he relapsed by consuming alcohol, Vicodin, and Soma. Agreement effective 1/11/12. **Consent Agreement:** Medical license reinstated on 4/11/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 4/11/12; agreement to remain in effect for at least five years prior to any request for termination.

GROSS, Carey Kathleen, D.O. (D.O. Applicant; #58-002297) – Pembroke Pines, Florida
Consent Agreement: Application to practice osteopathic medicine and surgery granted, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 4/11/12; agreement to remain in effect for at least five years prior to any request for termination.

HANZLIK, Shane R., M.D. (#57-015402) – Cleveland, Ohio
Consent Agreement: Medical license reinstated on 1/11/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 1/11/12; agreement to remain in effect for at least five years prior to any request for termination.

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HENSON, Mark Owen, M.D. (#35-076766) – Leesburg, Ohio
Board Order: Medical license revoked. Based on doctor's impairment of ability to practice according to acceptable and prevailing standards of care due to relapse; on violation of conditions of limitations imposed on his license by 7/15/10 consent agreement; and on doctor having made false, fraudulent, or misleading statements in the submission of false declarations of compliance. Order effective 3/15/12.

HIBLER, John Thomas, D.O. (D.O. Applicant; #58-002934) – Zanesville, Ohio
Consent Agreement: Doctor's application for a license to practice osteopathic medicine and surgery in Ohio granted and limited to participation in a post-graduate training program accredited by the AOA until such time that doctor can provide evidence that he is capable of independently practicing osteopathic medicine and surgery according to acceptable and prevailing standards of care, including documentation of doctor's successful completion of a post-graduate training program. License further placed on probation for at least four years. Agreement effective 4/11/12.

HILL, Josh Utah, P.A. (#50-001493) – Fort Mitchell, Kentucky
License Reinstated following Suspension: Physician Assistant's request for reinstatement approved by vote of the Board on 3/14/12, subject to probationary terms, conditions, and limitations established by 1/12/11 Board Order.

IQBAL, Zafar, M.D. (#35-077054) – Prince George, British Columbia, Canada
Consent Agreement: Doctor reprimanded, required to submit evidence of full, unrestricted licensure in all jurisdictions prior to commencing practice in Ohio, and license placed on probation for at least three years. Based upon a prior action against the doctor's license by the College of Physicians and Surgeons of British Columbia, which was based upon allegations that the doctor represented that a physical examination had been performed on a patient when no examination had been completed. Agreement effective 4/11/12.

JOHNSON, Rebecca Erica, M.D. (#35-095365) – Westlake, Ohio
Consent Agreement: Medical license suspended for an indefinite period of time; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that she has been diagnosed with Major Depressive Disorder, Opiate Dependence and Benzodiazepine Dependence. Agreement effective 4/11/12.

JORGENSEN, Deborah A., P.A. (#50-001180 and #55-000824) – North Ridgeville, Ohio
Summary Suspension: Pursuant to Section 4730.25(G), Ohio Revised Code, physician assistant's license summarily suspended based on Board's determination that there is clear and convincing evidence that physician assistant's ability to practice according to acceptable and prevailing standards of care is impaired due to habitual or excessive use or abuse of Percocet, Vicodin and Adderall; that physician assistant's continued practice presents a danger of immediate and serious harm to the public; and upon physician assistant allegedly writing prescriptions in her own name and in the name of family members and signing the name of a physician without the physician's permission or knowledge, such acts constituting felonies in the state of Ohio. Order effective 3/14/2012.

KANG, Kavita A. J., D.O. (#58-004159) – Dayton, Ohio
Consent Agreement: Osteopathic training certificate reinstated on 2/8/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 2/8/12; agreement to remain in effect for at least five years prior to any request for termination.

LITTLE, Anthony Huebert (M.T. Applicant) – Magadore, Ohio
Consent Agreement : Application for certificate to practice massage therapy granted subject to 180 day suspension, with 90 days of suspension to be served. Subsequent probationary terms, conditions and limitations established. Based on applicant's three separate convictions of one misdemeanor count of menacing, one misdemeanor count of assault, and on one misdemeanor count of impaired driving, and on applicant's failure to disclose his conviction for impaired driving on his application for a certificate to practice massage therapy. Agreement effective 1/12/12; agreement to remain in effect for at least three years prior to any request for termination.

LOPREATO, Paul Dominic, P.A. (#50-001095) – Florence, Kentucky
Consent Agreement: Physician assistant's license suspended for at least one year; interim monitoring conditions and conditions for reinstatement established, including requirement that physician assistant enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on physician assistant's admission that he relapsed by consuming alcohol and violated of the terms and conditions of a 4/13/11 Board Order. Agreement effective 2/8/12.

LYDON, Joseph Francis, Jr., M.D. (#35-057047) – Westlake, Ohio
Consent Agreement: Medical license restored on 3/14/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Upon restoration, license permanently limited to require that prior to providing medical services related to the practice of anesthesiology, doctor shall undergo the witnessed administration of naltrexone, shall be required to engage in mental health treatment at least once every six months, and shall be required to submit quarterly declarations

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stating whether he has been engaged in the practice of anesthesiology. Agreement effective 3/14/12; probationary terms, conditions and limitations to remain in effect for at least five years prior to any request for termination, except that permanent limitations shall not terminate.

MACATOL, Michael Christopher, M.D. (#35-095993) – Marietta, Ohio
Consent Agreement: Medical license suspended for at least 90 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's diagnoses of alcohol dependency and depression; his relapse on alcohol following treatment at a Board-approved treatment provider; and actions against his medical licenses in Kentucky, Indiana, Georgia, Virginia, and Pennsylvania. Agreement effective 3/14/12.

MADAN, Ravi Dutt, M.D. (#35-075868) – Lima, Ohio
Consent Agreement: Revocation of medical license stayed; license suspended for at least three years; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations. Based on doctor's impairment of ability to practice according to acceptable and prevailing standards of care due to depression and habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice and violation of conditions of limitation imposed on his license by 10/13/10 consent agreement. Agreement effective 4/11/12.

MAGA, Dominic J., D.O. (#34-002071) – Dayton, Ohio
License Reinstated following Suspension: Doctor's request for reinstatement approved by vote of the Board on 3/14/12, subject to probationary terms, conditions, and limitations established by 3/9/11 Board Order.

MAHAJAN, Mahendra Kumar, M.D. (#35-043538) – Beavercreek, Ohio
Summary Suspension: Pursuant to Section 4731.22(G), O.R.C., medical license summarily suspended based on Board's determination that there is clear and convincing evidence that doctor is impaired in his ability to practice according to acceptable and prevailing standards of care due to his diagnoses of major depressive disorder and alcohol abuse and that doctor's continued practice presents a danger of immediate and serious harm to the public. Order effective 1/6/12. **Consent Agreement:** Medical license suspended for at least 180 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations which shall be in effect for at least five years. Based on doctor's admission that he has been diagnosed with major depressive disorder and alcohol abuse and that he is impaired in his ability to practice medicine according to acceptable and prevailing standards of care. Agreement effective 3/14/12.

MALLIK, Mridula, M.D. (#35-040514) – Chesterland, Ohio
Automatic Suspension: Pursuant to Section 4731.221, O.R.C., medical license automatically suspended effective on or about 9/28/11, based upon doctor being adjudged by Geauga County Probate Court to be mentally ill or mentally incompetent.

MARCINOW, Anna Maria, M.D. (#57-017018) – Columbus, Ohio
Consent Agreement: Training certificate reinstated on 4/11/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 4/11/12; agreement to remain in effect for at least five years prior to any request for termination.

MASSIE, David Walter, M.D. (#35-049431) – Mansfield, Ohio
Consent Agreement: Medical license suspended for at least one year; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's violation of the terms and conditions of a 4/14/10 Consent Agreement. Agreement effective 2/8/12.

MCGRIFF, Patrick Kelley, D.O. (#34-006573) – Columbus, Ohio
License Reinstated after Suspension: Doctor's request for reinstatement approved by vote of the Board on 4/11/12, subject to probationary terms, conditions, and limitations established by 3/9/11 Board Order.

MEEK, Robert John, D.O. (#34-008376) – Davie, Florida
Board Order: Medical license revoked. Based on prior action by the Department of Health for the State of Florida wherein doctor's Florida license was immediately suspended due to his alleged inappropriate prescribing. Order effective 1/11/12. (Journal Entry – no hearing requested.)

MESCHER, Aaron Allen (Massage Therapy Applicant) – Dayton, Ohio
Board Order: Application for certificate to practice massage therapy in the state of Ohio permanently denied. Based on applicant's convictions of one felony count of Fraud on a Financial Institution, one felony count of Conspiracy to Commit Offenses against the United States, and one misdemeanor count of Illegal Sexually Oriented Activity in a Sexually Oriented Business. (Journal Entry – no hearing requested.) Order effective 2/9/12.

MURTHY, Siva Rao, M.D. (#35-050136) – Westlake, Ohio
Consent Agreement: Medical license suspended for an indefinite period of time; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he has been diagnosed with alcohol dependence, for which he has sought treatment at a Board approved treatment provider. Agreement effective 3/14/12.

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NEMETH, Kimberly Marie, D.O. (#34-009391) – Mansfield, Ohio
Consent Agreement : Medical license suspended for at least 120 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that she has been diagnosed with opiate dependency and that she obtained Percocet by writing prescriptions in the names of others and obtained the medication for her own use. Agreement effective 1/11/12.

NJOKU, Charles Chiedo, M.D. (#35-048587) – Powell, Ohio
Board Order: Medical license permanently revoked. Based on doctor's conviction in the United States District Court, Southern District of Ohio, of one felony count of Healthcare Fraud and one felony count of Illegal Distribution of a Schedule II Controlled Substance. Such conviction was based on the doctor billing Medicaid and Medicare for office visits that were not delivered, billing for dates that the doctor was out of the county, and providing presigned prescription pads to an unlicensed individual and allowing that individual to see patients, write prescriptions and bill Medicaid and Medicare as though those services had been provided by the doctor, which constitutes selling, giving away, personally furnishing, prescribing, or administering drugs for other than legal and legitimate therapeutic purposes or a judicial finding of guilt of a violation of a federal law regulating the possession, distribution, or use of any drug and obtaining, or attempting to obtain, money or anything of value by fraudulent misrepresentation in the course of practice. Order effective 4/12/12.

PAUL, Sheila Salome, D.O. (#34-006622) – Bentleyville, Ohio
Consent Agreement: Medical license suspended for at least 180 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that she has been diagnosed with Amphetamine Dependence and Adult Attention Deficit Disorder (ADD), that she is impaired in her ability to practice medicine according to acceptable and prevailing standards of care due to her chemical dependency, for which she has sought treatment, and that she provided inaccurate information and false documents to the State Medical Board of Ohio during its investigation of the doctor's use of Adderall. Agreement effective 4/11/12.

QUALLICH, Leonard G., Jr., M.D. (#35-038167) – Hinckley, Ohio
Consent Agreement: Medical license suspended for indefinite period of time; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he has been diagnosed with Chronic Anxiety Disorder, Panic Disorder, and Depression and that he is currently unable to practice according to acceptable and prevailing standards of care. Agreement effective 1/11/12.

RANGARAJ, Raj Ramalingam, M.D. (#35-081628) – Alpharetta, Georgia
Board Order: Medical license revoked. Based on prior action by Georgia's licensing board in prohibiting doctor from performing plastic surgery, other than oculoplastic procedures; limiting doctor's practice to ophthalmology; requiring doctor to correct advertising implying that doctor is board certified as a plastic or cosmetic surgeon; and reprimanding doctor. Order effective 1/11/12. (Journal Entry – no hearing requested.)

RODEBAUGH, Justin Matthew, M.D. (#57-015418) – Solon, Ohio
Board Order: Training certificate revoked. Based on doctor's violation of conditions of limitation imposed on his license by 3/9/2011 consent agreement. Order effective 4/12/12.

RUBINSTEIN, Jeffrey Bruce, M.D. (#35-051094) – Florence, KY
Consent Agreement: Doctor reprimanded and required to provide written documentation verifying that he holds a full and unrestricted license in all other states in which he is licensed prior to commencing practice in Ohio. Based on an Agreed Order filed by the Board of Medical Licensure for the Commonwealth of Kentucky, which included requirements that physician have an approved chaperone present when treating any female patient, maintain a controlled substance log, and be evaluated by an approved psychiatrist. Agreement effective 1/11/12; agreement to remain in effect for at least two years prior to any request for termination.

SCHEMENAUER, Stephen August (#50-003470) – Marietta, Ohio
Board Order: Application for license to practice as a physician assistant granted with probationary terms established for a minimum of five years. Based on applicant's history of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair his ability to practice and diagnoses of Alcohol Dependence in remission and Major Depressive Disorder, and prior action by West Virginia's licensing board placing applicant's West Virginia license into expired status based upon his noncompliance with regulations of the West Virginia Medical Professionals Health Program. Order effective 1/12/12. **Summary Suspension:** Pursuant to Section 4730.25(G), Ohio Revised Code, physician assistant's license summarily suspended based on Board's determination that there is clear and convincing evidence that physician assistant's ability to practice according to acceptable and prevailing standards of care is impaired due to habitual or excessive use or abuse of alcohol, physician assistant's violation of conditions of limitation imposed on his license by 1/12/12 Board Order due to a relapse on alcohol, and that physician assistant's continued practice presents a danger of immediate and serious harm to the public. Order effective 4/11/2012.

SCURALLI, Jordon James, M.T. (#33-018782) – Sylvania, Ohio
Board Order: Massage therapy license revoked. Based on massage therapist's violation of conditions of limitation imposed on his license by 5/12/10 Board Order due to his failure to submit

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required reports and failure to comply with required drug and alcohol screening procedures. (Review and Journal Entry – no hearing requested.) Order effective 3/15/12.

SIDDIQUI, Siraj Ahmed, M.D. (#35-065056) – Mansfield, Ohio
Board Order: Medical license permanently revoked, such revocation stayed and doctor's license permanently limited and restricted from utilizing controlled substances for weight reduction and suspended for at least one year, with interim monitoring conditions and conditions for reinstatement established. Upon reinstatement, license placed on probation for at least five years. Based on Board's findings that, in care rendered to 15 patients, doctor failed to maintain minimal standards of care applicable to the selection or administration of drugs or failed to employ acceptable scientific methods in the selection of drugs or other modalities of treatment; departed from the minimal standards of care, and violated the Board's prescribing rules by actions including, but not limited to, inappropriately continuing to prescribe controlled substance anorectics despite the presence of possible contraindications, failing to appropriately evaluate or document the evaluation and treatment of patients for specified medical conditions, failing to maintain complete and accurate medical records, and inappropriately using controlled substance anorectics for purposes of weight reduction in the treatment of obesity. Order effective 5/1/12.

SILK, Marshall Bruce, D.O. (#34-003615) – Carson City, Nevada
Board Order: Medical license revoked. Based on prior action by the Florida Board of Osteopathic Medicine, following findings by the board that doctor provided presigned prescriptions for MRI and CT scans and allowed non-medical staff to give the prescriptions to patients prior to a physician seeing or treating the patients. Order effective 1/11/12. (Journal Entry – no hearing requested.)

ST. ONGE, Rick D., M.D. (#35-066328) – Columbus, Ohio
License Reinstated after Suspension: Doctor's request for reinstatement approved by vote of the Board on 4/11/12, subject to probationary terms, conditions, and limitations established by 10/14/09 Board Order.

TEMPONERAS, Margy, M.D. (#35-072571) – Portsmouth, Ohio
Board Order: Medical license suspended for indefinite period of time, with conditions for reinstatement and probation for at least five years established. Based on the DEA's Immediate Suspension of doctor's Certificate of Registration, the underlying allegations including that between 1/1/07 and 11/3/09 doctor made over 3,000 unauthorized distributions of controlled substances, ordered more than 800,000 dosage units of oxycodone products in 2010, prescribed or dispensed controlled substances for other than legitimate medical purpose, and prescribed a combination of controlled substances to three patients who died as a result of drug overdoses that likely involved the controlled substances doctor prescribed or dispensed. Order effective 1/27/12.

COURT ACTION: Notice of appeal of Board's 1/11/12 order of indefinite suspension filed by the doctor with Franklin County Court of Common Pleas on 2/10/12.

TRUESDALE, Philip Jeffrey (Massage Therapy Applicant) – Lima, Ohio
Board Order: Application for license to practice massage therapy in Ohio granted and license suspended for an indefinite period of time, with conditions for interim monitoring and reinstatement established. Upon reinstatement, license placed on probation for at least five years. Based on applicant having been diagnosed with alcohol and cannabis abuse. Order effective 3/6/12.

WEIDMAN, Amy Ruth, M.D. (#35-057181) – Fairlawn, Ohio
Board Order: Medical license suspended for at least 180 days, with interim monitoring and reinstatement established. License further placed on probation for at least two years following reinstatement. Based on doctor's failure to conform to minimal standards of care with respect to treatment of one specified patient and violation of the AMA code of ethics, the underlying basis being doctor's inappropriate sexual conduct with a patient. Order effective 3/15/12.

WILLIAMS, Mark David, M.D. (#35-091244) – Canfield, Ohio
Immediate Suspension: Pursuant to determination by Mahoning County Child Support Enforcement Agency that doctor is in default under a child support order, medical license immediately suspended until such time as Board receives notice from Mahoning County Child Support Enforcement Agency that doctor is no longer determined to be in default. Suspension effective 1/23/12.

WORRELL, Bruce S., D.O. (#34-002776) – Maineville, Ohio
Board Order: Medical license permanently revoked. Based on doctor's conviction in the United States District Court, Southern District of Ohio, of one felony count of Health Care Fraud in violation of 18 U.S.C. Section 1347, the underlying acts being that doctor caused to be submitted reimbursement requests to Medicare and Medicaid for services provided to patients while the doctor was excluded from participation in all federal health programs; doctor's false, fraudulent, deceptive, or misleading statements in relation to the practice of medicine and obtaining or attempting to obtain money or anything of value by fraudulent misrepresentations in the course of practice by his submission of claims during his exclusion; and on doctor's violation of conditions of limitations placed on doctor's Ohio medical license by a 9/10/03 consent agreement which required him to obey all federal, state, and local laws, and all rules governing the practice of osteopathic medicine in Ohio. Order effective 2/9/12.

XENAKIS, Megan Marie, M.T. (#33-018710) – Bellaire, Ohio
Board Order: Massage therapy license revoked. Based on massage therapist's violation of conditions of limitation imposed on her license by 1/13/10 Board Order due to her failure to submit required reports, comply with required drug and alcohol screen

COURT ACTION UPDATE

Court appeals and decisions entered between January and April 2012 related to Medical Board disciplinary actions taken prior to January 2012.

CALLOWAY, George Franklin, M.D. (#35-038419) – Westerville, Ohio
By Entry filed on 1/30/12, Franklin County Court of Common Pleas denied doctor's motion for stay of Board's 11/28/11 Order taking no further disciplinary action. By Entry filed on 3/13/12, Franklin County Court of Common Pleas denied doctor's second motion for stay of Board's 11/28/11 Order taking no further action.

GRIFFIN, George D. J., III, M.D. (#35-038479) – Cincinnati, Ohio
By Entry filed on 4/4/12, the Ohio Supreme Court declined to accept jurisdiction of doctor's appeal.

KAREL, Douglas B., M.D. (#35-071689) – Lima, Ohio
By Decision and Entry filed 1/20/12, Franklin County Court of Common Pleas affirmed Board's 7/15/11 Order of permanent revocation.

LUNDEEN, James Edgar, Sr., M.D. (#35-052257) – Plymouth, Ohio
Notice of appeal of Board's 12/14/11 order of permanent revocation filed by the doctor with Franklin County Court of Common Pleas on 12/29/11. By Entry filed on 1/17/12, Franklin County Court of Common Pleas denied doctor's motion for stay of Board's 12/14/11 Order of permanent revocation.

MAHAJAN, Mahendra Kumar, M.D. (#35-043538) – Beavercreek, Ohio
By decision and entry filed on 12/27/11, 10th District Court of Appeals affirmed the judgment of the Franklin County Court of Common Pleas, which had upheld the Board's 5/12/10 order placing the doctor on probation.

SHANK, Myron Lyle, M.D. (#35-057234) – Lima, Ohio
Notice of appeal of Board's 12/30/11 Order of probation filed by doctor with Franklin County Court of Common Pleas on 1/17/12.

SMITH, Larry Lee, D.O. (#34-001724) – Canfield, Ohio
By decision and entry filed on 2/15/12, Franklin County Court of Common Pleas affirmed Board's 5/12/11 and 7/13/11 permanent revocation orders. Notice of appeal to 10th District Court of Appeals filed by the doctor on 3/16/12.

SUNGURLU, Mehmet Akif, M.D. (#35-060770) – Toledo, Ohio
By decision and entry filed on 12/27/11, Franklin County Court of Common Pleas affirmed Board's 11/10/10 permanent revocation order.

WORRELL, Bruce S., D.O. (#34-002776) – Maineville, Ohio
Notice of appeal of Board's 2/8/12 order of permanent revocation filed by the doctor with Franklin County Court of Common Pleas on 2/23/12.

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procedures, and attend required personal appearances with a Board representative. (Review and Journal Entry – no hearing requested.) Order effective 2/9/12.

YOUNG, Kip Tanner, M.T. (#33-018692) – Cincinnati, Ohio
Voluntary Surrender: Permanent revocation authorized by massage therapist in lieu of formal disciplinary proceedings pursuant to Section 4731.22(B)(20), Ohio Revised Code, including violations of Rule 4731-26-02 and 4731-26-03, Ohio Administrative Code, based on massage therapist engaging in inappropriate sexual contact during therapeutic massage therapy sessions with multiple female patients. Effective 2/8/12.

ZACHARIAS, Dawn Michele, M.D. (#35-079882) – Strongsville, Ohio
Board Order: Medical license suspended for at least 120 days, with conditions for reinstatement and probation for at least three years established. Based on doctor's sexual conduct with a patient for whom doctor also prescribed a controlled substance for weight loss without documenting an emergency situation and without complying with the Board's rules for prescribing controlled substances for weight loss, and on doctor's prescribing of a controlled substance to a patient who was a family member without documenting an emergency situation. Order effective 1/27/12.

MED.OHIO.GOV

STATE MEDICAL BOARD OF OHIO

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Columbus, OH 43215-6127

Phone: 614-466-3934
Fax: 614-728-5946
Monday - Friday 8 a.m. to 5 p.m.
Closed on state and federal holidays

The Medical Board protects and enhances the health and welfare of Ohio's citizens through effective regulation of more than 64,000 licensees, including: medical doctors (MDs), doctors of osteopathic medicine (DOs), doctors of podiatric medicine and surgery (DPMs), physician assistants (PAs), massage therapists (LMTs), cosmetic therapists (CTs), anesthesiologist assistants (AAs), radiologist assistants (RAs) and acupuncturists. Naprapaths and mechanotherapists licensed before March 1992 are also overseen by the Medical Board.

We welcome your comments and suggestions regarding the newsletter. Contact us at this e-mail address:

medboardnews@med.state.oh.us

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THE STATE MEDICAL BOARD

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MEDICAL BOARD

FALL 2012

GRAND ROUNDS

YOUR REPORT FROM THE STATE MEDICAL BOARD OF OHIO

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BOARD ISSUES INTERPRETIVE GUIDELINE

Regarding prescribing to persons not seen by the physician based on certain technological advances

In its continuing effort to ensure that regulations reflect the highest standards while also meeting the ever changing needs of physicians and patients, the State Medical Board issued an Interpretive Guideline in September 2012 addressing the requirement to personally physically examine and diagnose a patient to whom the physician is prescribing non-controlled substances.

The *Interpretive Guideline* was based upon the Board's recognition that advances in medical technology may make it possible for the "personal" and "physical" examination, required by Rule 4731-11-09,Ohio Administrative Code, to occur when the provider and patient are located in remote locations. The standards outlined in the guideline are based in part on those established by the American Medical Association guidance document H-120.949 "Guidance for Physicians on Internet Prescribing."

Interpretative Guideline summary

When personally physically examining a patient who is located at a remote location, the physician or authorized prescriber should obtain a reliable medical history and perform a physical examination of the patient, adequate to establish the diagnosis for which the drug is being prescribed and to identify underlying conditions and/or contraindications to the treatment recommended/provided and conform to minimal standards of care.

Prior to initially prescribing non-controlled substances the physician or authorized prescriber should:

(a) Establish or have previously established a valid provider patient relationship;

(b) Have appropriate diagnostic medical equipment capable of transmitting in real-time the patient's vital signs and other physical data;

See Guideline page 3

Statement regarding Maintenance of Licensure

At its meeting on October 11, 2012, the Medical Board voted to suspend further consideration of participation in the Maintenance of Licensure (MOL) pilot project with the Federation of State Medical Boards. This decision was made after extensive discussion by the members of the Medical Board over the past two years, and with input from interested parties regarding the feasibility of implementing MOL into Ohio's biennial physician licensure renewal process.

The current requirement for physicians to complete 100 hours of CME every two years remains in effect. The Board encourages licensees to select CME programs related to the physician's area of practice.

Medical Board Names Interim Executive Director

On October 12, 2012, the State Medical Board of Ohio named Kimberly C. Anderson, Esq., Interim Executive Director, following the resignation of Richard A. Whitehouse. Ms. Anderson also serves as the Assistant Executive Director of Investigations, Compliance & Enforcement for the agency.

Prior to joining the State Medical Board in 2007, Ms. Anderson was the Chief Legal Counsel for the Ohio Department of Developmental Disabilities. Ms. Anderson obtained her law degree from Capital University Law School and is admitted to practice law in Ohio and the United States District Court of Ohio, Southern Division.

Call for Treatment Advisory Panel Candidates

The Medical Board is establishing a voluntary advisory panel to assist Board staff in making informed technical medical decisions surrounding issues related to the development or modification of the Board's impairment rules, Chapter 4731-16, Ohio Administrative Code.

The advisory panel will consist of no more than five members who have one or more of the following qualifications:

- Medical Board member
- Certification in addictionology
- Representative from the Ohio Physicians Health Program
- Representative from the Ohio Department of Alcohol and Drug Addiction Services
- Affiliation with a Board-approved treatment provider
- Successful completion of their own inpatient treatment, and 10 years of documented sobriety

If you are interested in serving on such a panel, please send a letter of intent and your curriculum vitae by **November 19, 2012**, to Danielle Bickers, Compliance Supervisor, 30 E. Broad Street, 3rd Floor, Columbus, OH 43215, or by email at:

Danielle.Bickers@med.state.oh.us

Guideline continued from page 1

(c) Have appropriate diagnostic medical equipment capable of transmitting in real-time images of the patient's symptoms and that also has the ability to be adjusted for better image quality and definition;

(d) Have sufficient dialogue with the patient regarding treatment options and the risks and benefits of treatment(s);

(e) As appropriate, follow up with the patient to assess the therapeutic outcome;

(f) Maintain a contemporaneous medical record that is readily available to the patient and, subject to the patient's consent, to his or her other health care professionals; and

(g) Include the electronic prescription information as part of the patient medical record.

Link to the full text of the *Interpretive Guideline* posted on the Medical Board's website:

http://med.ohio.gov/pdf/NEWS/Guideline_Rule%204731-11-09%20(Sept%202012).pdf

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PICC LINE PLACEMENT

At its July 12th meeting, the Medical Board responded to an inquiry from the Ohio Board of Nursing regarding the use of new technology by registered nurses that uses an EKG instead of a chest x-ray and fluoroscopy to confirm the placement of a peripherally inserted central catheter (PICC) in adult patients.

The Board decided that a physician may use devices such as the Sapiens TCS for the guidance and intended positioning of PICCs as an alternative method to chest x-ray and fluoroscopy for PICC tip placement in adult patients where its use is medically indicated. If the Board of Nursing determines that a registered nurse may conduct an electrocardiogram, a physician may personally observe an electrocardiogram that was recorded by the RN at the time the RN placed the PICC, to determine appropriate PICC tip location and to then authorize initiation of infusion therapy. Finally, a physician may include in the PICC insertion order for each specified patient the electrocardiogram "p" wave parameters to be observed for verification of the PICC tip location as authorization for the initiation of infusion therapy.

Prescribing For a Family Member

What should you do if a family member asks you to examine, treat or prescribe to him or her?

What are the ethical standards, rules and law, and guiding principles you should consider?

Nearly every physician has or will be confronted with these questions at some point.

The following are some bright lines with respect to prescribing to family members:

1. Physicians may treat and prescribe **controlled substances** to family members **only** in emergency situations. (See AMA Code of Medical Ethics Opinion 8.19, the February 2012 Practice Guidance Statement, *Prescribing to Self and Family*, State Medical Board of Ohio, and Rule 4731-11-08, Ohio Administrative Code.)

2. "Family members" include a spouse, parent, child, sibling or other individual where the physician's personal or emotional involvement may render the physician unable to exercise detached professional judgment, such as a boyfriend or girlfriend. (See Rule 4731-11-08, Ohio Administrative Code.)

3. Physicians should not generally serve as a primary or regular care provider for immediate family members. (See AMA Code of Medical Ethics Opinion 8.19.)

A physician should always consider whether he or she can ensure that his or her personal feelings will not unduly influence his or her professional judgment and that the personal feelings will not interfere with the care being delivered. Please note that Medical Board regulations prohibit a physician from self-treatment with controlled substances due to the fact that a physician cannot exercise detached professional judgment when treating him or herself. (See Rule 4731-11-08, Ohio Administrative Code.)

A physician is always responsible to provide care that conforms to the minimal standard of care, regardless of the identity of the patient. See Section 4731.22(B)(6),Ohio Revised Code. A physician is responsible for completing and maintaining accurate medical records reflecting the physician's examination, evaluation and treatment of all the physician's patients. (See Rule 4731-11-02, Ohio Administrative Code.)

While there are not specific rules or statutes prohibiting a physician from treating family with prescription drugs that are not controlled substances, physicians are also required to meet the applicable ethical standards of their profession. (See Section 4731.22(B)(18), Ohio Revised Code.)

See Prescribing to Family page 5

Prescibing to Family continued from page 4

The AMA Code of Ethics Opinion 8.19 recommends a physician only treat family members in emergency or isolated settings when another physician is unavailable. Why is this so important? In cases involving the treatment of family members, physicians often times do not complete a full physical examination or history, do not inquire about sensitive information that may be pertinent to the diagnosis or treatment plan, and do not maintain patient records.

If the physician or patient feels uncomfortable, or if the physician does not feel that he or she could be objective, then the physician should not treat the family member. Consider the emotional and psychological impact that could occur if the treatment was inadequate, if the wrong diagnosis was made or if complications arose from the treatment.

NOTE: The rules, statutes, and minimal standards of care referenced apply to all physicians and physician assistants practicing in Ohio. The AMA Code of Ethics applies to medical doctors. The AMA Code of Ethics does not apply to osteopathic physicians, podiatric physicians, or physician assistants. Osteopathic physicians and podiatric physicians must meet the ethical requirements of the American Osteopathic Association or the American Podiatric Medical Association, respectively.

Resources:

The AMA Code of Medical Ethics Opinion on Physicians Treating Family Members, http://virtualmentor.ama-assn.org/2012/05/coet1-1205.html May 2012

Medical Board Practice Guidance Statement, *Prescribing for Self and Family Members,* February 2012 http://med.ohio.gov/pdf/Prescribing%20for%20Self%20and%20Family%20Members.pdf

The Overlapping Roles of the Rural Doctor, http://virtualmentor.ama-assn.org/2011/05/ccas1-1105.html May 2011

Requests for Care from Family Members, http://virtualmentor.ama-assn.org/2012/05/ecas1-1205.html May 2012

Rule 4731-11-08, Ohio Administrative Code, http://codes.ohio.gov/oac/4731-11-08

Have you signed up for OARRS?

The Ohio Board of Pharmacy manages OARRS, the Ohio Automated Rx Reporting System, a program for prescribers to obtain patient-specific prescription information to use when treating a patient. The OARRS database includes dispensing information regarding Schedules II – V controlled substances, and tramadol products (e.g. Ultram®). The OARRS website is available 24/7 and most reports may be viewed within 15 seconds after the request is submitted.

Go to www.ohiopmp.gov to learn how to register for this free service. Contact the OARRS program staff at the Ohio Board of Pharmacy by e-mail at: info@ohiopmp.gov or by phone at 614-466-4143.

Rule 4731-11-11, Ohio Administrative Code, specifies when OARRS reports should be obtained. Read the FAQ's and rule at: http://med.ohio.gov/pdf/rules/4731-11-11%20FAQs.pdf

Board Answers Podiatric Scope of Practice Inquiries

Surgical Procedures Within Scope of DPM Practice

In September 2012, the Medical Board reviewed and discussed an inquiry regarding whether or not it is within the podiatric scope of practice for a podiatric physician to perform tibial osteotomy, fibular osteotomy, total ankle replacement, and/or bone callus distraction of the lower leg.

The Medical Board determined that the performance of tibial or fibular osteotomy, total ankle replacement, and bone callus distraction of the foot or ankle are within the scope of practice of an Ohio podiatric physician when the podiatric physician can demonstrate adequate education, training, and experience needed to conform to minimal standards of care and holds privileges to perform the procedure at a Joint Commission accredited hospital, Ohio licensed ambulatory surgical center, or approved college of podiatric medicine and surgery.

Please note, however, that the scope of practice of a podiatric physician does not include the performance of bone callus distraction to treat any medical condition above the malleoli, including lengthening of the lower leg. Moreover, as with all surgical procedures, the podiatric physician must perform procedures in conformance with the minimal standards of care of similar practitioners under the same or similar circumstances. Finally, whether a podiatric physician may perform any of the discussed procedures at a specific college of podiatric medicine and surgery, hospital, or ambulatory surgical center is solely a matter of credentialing and privileging decisions.

Podiatric Participation in Medication Reconciliation

In May 2012, the Medical Board reviewed and discussed an inquiry regarding whether or not the actions required for post-surgical medication reconciliation exceed the scope of practice of a podiatrist.

The Board determined that a podiatric physician, who as part of medication reconciliation, continues a medication prescribed by an M.D. or D. O. for a condition not within the podiatric scope of practice is not considered to have prescribed the medication. Medication reconciliation ensures that the patient continues to receive all previously prescribed medications unless there is a documented explanation for any change. When performing medication reconciliation, a podiatric physician does not exceed the podiatric scope of practice merely by continuing previously prescribed medications for conditions that are not within the podiatric scope of practice.

New Types of Physician Licenses Offered by Medical Board

Recent legislation established three new types of physician licenses to be issued by the Medical Board to applicable candidates. The new types of licenses include:

Visiting Clinical Professional Development Certificate (Section 4731.298, Ohio Revised Code): A visiting clinical professional development certificate authorizes the holder to practice medicine and surgery or osteopathic medicine and surgery only as part of the clinical professional development program in which the certificate holder participates. The certificate holder's practice must be under the direct supervision of a qualified faculty member of the medical school or affiliated teaching hospital conducting the program who holds a certificate to practice medicine and surgery or osteopathic medicine and surgery issued by the State Medical Board. The visiting clinical professional development certificate is valid for up to one year and may not be extended.

Clinical Research Faculty Certificate (Section 4731.293, Ohio Revised Code): A clinical research faculty certificate authorizes the certificate holder to practice medicine and surgery, or osteopathic medicine and surgery, as incidental to the holder's teaching or research duties at an Ohio medical school or a teaching hospital affiliated with the school. A clinical research faculty certificate may be renewed every three years.

Certificate of Conceded Eminence (Section 4731.297, Ohio Revised Code): A certificate of conceded eminence authorizes a physician licensed in another state or country who has been appointed to serve as a faculty member at an academic medical center in Ohio and demonstrates to the Board unique talents and extraordinary abilities to practice medicine as part of the physician's employment with the academic medical center or an affiliated physician group practice. The certificate of conceded eminence is valid for the shorter of two years or the duration of the certificate holder's employment with the academic medical center or affiliated physician practice. The certificate ceases to be valid if the certificate holder resigns or is otherwise terminated from the center or practice. The certificate may be renewed every two years.

Section 4731.297, Ohio Revised Code, defines "academic medical center" as a medical school and its affiliated teaching hospitals and clinics partnering to (1) provide the highest quality of patient care from expert physicians, (2) conduct groundbreaking research leading to medical advancements for current and future patients, and (3) provide medical education and graduate medical education to educate and train physicians. An "affiliated physician group practice" is defined as a medical practice consisting of one or more physicians authorized to practice medicine and surgery or osteopathic medicine and surgery that is affiliated with an academic medical center.

Medical Board to Regulate Genetic Counselors

Sub. HB 292, created licensing requirements for the practice of genetic counseling and requires the Medical Board to implement and administer the licensure process beginning September 6, 2013. Chapter 4778, Ohio Revised Code, defines the scope of practice for genetic counselors and sets the regulatory requirements for licensure and discipline of this profession by the Medical Board.

Section 4778.11, Ohio Revised Code, authorizes a licensed genetic counselor to engage in all of the following:

(1) Obtain and evaluate the medical histories of a patient and the patient's family members to determine the risk for genetic or medical conditions and diseases in the patient, the patient's offspring, or the patient's family members;

(2) Discuss with a patient and the patient's family the features, natural history, means of diagnosis, genetic and environmental factors, and management of risk for genetic or medical conditions and diseases;

(3) Identify and coordinate genetic laboratory tests and other diagnostic studies as appropriate for genetic assessment;

(4) Integrate the results of genetic laboratory tests and other diagnostic tests with individual and family medical histories;

(5) Explain to a patient and the patient's family the clinical implications of the results of genetic laboratory tests and other diagnostic tests;

(6) Evaluate the response of a patient or the patient's family members to one or more genetic conditions or the risk of reoccurrence and provide patient-centered counseling and guidance;

(7) Identify and use community resources that provide medical, educational, financial, and psychosocial support and advocacy;

(8) Provide medical, genetic, and counseling information to patients, their families, and other health care professionals;

Additionally, a genetic counselor may enter into a collaborative agreement with a physician who agrees to work with and provide medical support to the genetic counselor. The agreement shall be a written, formal document that memorializes the relationship between the genetic counselor and the physician and establishes the criteria governing the genetic counselor's performance of both of the following:

(a) Order genetic or other tests for the purpose of diagnosing a medical condition or inherited disorder or determining the carrier status of one or more of the patient's family members;

(b) Select the most appropriate, accurate, and cost-effective methods of diagnosis.

Disposal of Unused Medicines: What You Should Know

The Medical Board often receives inquiries asking how to get rid of unused, unwanted or expired prescription drugs. The following information from the Food and Drug Administration provides some disposal options and some special disposal instructions to consider when throwing out expired, unwanted, or unused medicines.

Disposal in Household Trash

These simple steps can be followed to dispose of most medicines in the household trash:

- Mix medicines (do NOT crush tablets or capsules) with an unpalatable substance such as kitty litter or used coffee grounds;
- Place the mixture in a container such as a sealed plastic bag; and
- Throw the container in your household trash

Flushing of Certain Medicines

There is a small number of medicines that may be especially harmful and, in some cases, fatal in a single dose if they are used by someone other than the person the medicine was prescribed for. For this reason, a few medicines have specific disposal instructions that indicate they should be flushed down the sink or toilet when they are no longer needed and when they cannot be disposed of through a drug take-back program. When you dispose of these medicines down the sink or toilet, they cannot be accidently used by children, pets, or anyone else.

The FDA remains committed to working with other Federal agencies and medicine manufacturers to develop alternative, safe disposal policies. Below is some additional information about flushing medicine that is no longer needed. If you have additional questions about disposing of medicine, contact the FDA at 1-888-INFO-FDA (1-888-463-6332).

Frequently Asked Questions

Why do the medications on the list have flushing directions for disposal?

The medicines on this list of medicines recommended for disposal by flushing are safe and effective when used as prescribed, but they could be especially harmful to a child, pet, or anyone else if taken accidentally. Some of the possible harmful effects include breathing difficulties or heart problems, possibly leading to death. For these reasons, FDA advises that when it isn't possible to return these medicines through a medicine take-back program, flushing these medicines down the sink or toilet is currently the best way to immediately and permanently remove the risk of harm from the home. FDA continues to work with and encourage the manufacturers of these medicines to develop alternative, safe disposal systems.

All other expired, unwanted, or unused medicines should be disposed of by using a medicine take-back program, if available, or by throwing them away in the household trash.

Does flushing the medicines on the list down the toilet or sink drain pose a risk to human health and the environment?

The FDA is aware of recent reports that have noted trace amounts of medicines in the water system. The majority of medicines found in the water system are a result of the body's natural routes of drug elimination (in urine or feces). Scientists, to date, have found no evidence of harmful effects to human health from medicines in the environment.

Disposal of these select, few medicines by flushing contributes only a small fraction of the total amount of medicine found in the water. When a medicine take-back program isn't available, FDA believes that any potential risk to people and the environment from flushing this small, select list of medicines is outweighed by the real possibility of life-threatening risks from accidental ingestion of these medicines.

MEDICINES RECOMMENDED FOR DISPOSAL BY FLUSHING

This January 2012 list from the FDA tells you what expired, unwanted, or unused medicines should be flushed down the sink or toilet to help prevent danger to people and pets in the home. Flushing these medicines will get rid of them right away and help keep family members and pets safe. The FDA continually evaluates medicines for safety risks and updates the list as needed.

Medicine	Active Ingredient
Abstral, tablets (sublingual)	Fentanyl
Actiq, oral transmucosal lozenge *	Fentanyl Citrate
Avinza, capsules (extended release)	Morphine Sulfate
Daytrana, transdermal patch system	Methylphenidate
Demerol, tablets *	Meperidine Hydrochloride
Demerol, oral solution *	Meperidine Hydrochloride
Diastat/Diastat AcuDial, rectal gel	Diazepam
Dilaudid, tablets *	Hydromorphone Hydrochloride
Dilaudid, oral liquid *	Hydromorphone Hydrochloride
Dolophine Hydrochloride, tablets *	Methadone Hydrochloride
Duragesic, patch (extended release) *	Fentanyl
Embeda, capsules (extended release)	Morphine Sulfate; Naltrexone Hydrochloride
Exalgo, tablets (extended release)	Hydromorphone Hydrochloride
Fentora, tablets (buccal)	Fentanyl Citrate
Kadian, capsules (extended release)	Morphine Sulfate
Methadone Hydrochloride, oral solution *	Methadone Hydrochloride
Methadose, tablets *	Methadone Hydrochloride
Morphine Sulfate, tablets (immediate release) *	Morphine Sulfate
Morphine Sulfate, oral solution *	Morphine Sulfate
MS Contin, tablets (extended release) *	Morphine Sulfate
Nucynta ER, tablets (extended release)	Tapentadol
Onsolis, soluble film (buccal)	Fentanyl Citrate
Opana, tablets (immediate release)	Oxymorphone Hydrochloride
Opana ER, tablets (extended release)	Oxymorphone Hydrochloride
Oramorph SR, tablets (sustained release)	Morphine Sulfate
Oxecta, tablets (immediate release)	Oxycodone Hydrochloride
Oxycodone Hydrochloride, capsules	Oxycodone Hydrochloride
Oxycodone Hydrochloride, oral solution	Oxycodone Hydrochloride
Oxycontin, tablets (extended release) *	Oxycodone Hydrochloride
Percocet, tablets *	Acetaminophen; Oxycodone Hydrochloride
Percodan, tablets *	Aspirin; Oxycodone Hydrochloride
Xyrem, oral solution	Sodium Oxybate

***** These medicines have generic versions available or are only available in generic formulations.

State Medical Board of Ohio Action Report
May through September 2012

Actions taken by the Medical Board between May and September 2012 are summarized below. Go to the *Licensee Profile and Status Link* on the Medical Board's website—www.med.ohio.gov —for the most current license status information and to view the Board action documents.

ADKINS, Paula Clark, M.D. (#35-072775) – Pinehurst, NC
Voluntary Agreement: Permanent revocation authorized by doctor in lieu of formal disciplinary proceedings pursuant to Sections 4731.22(B)(15) and 4731.22(B)(22), Ohio Revised Code, based upon doctor's violation of a July 2008 Board Order and the voluntary surrender of her license to practice medicine in North Carolina. Effective 7/11/12.

BAKER, Franklin Hobart, P.A. (#50-002801) – Cincinnati, OH
License reinstated after suspension: Physician assistant's request for reinstatement approved by vote of the Board on 8/8/12, subject to probationary terms, conditions and limitations established by 8/10/11 Board Order. Reinstatement effective 8/25/12.

BEAVER, Amy Lynn, P.A. (#50-001186) – Wheeling, WV
Board Order: Physician assistant license revoked. Based on physician assistant's impairment of ability to practice according to acceptable and prevailing standards of care due to relapse; violation of conditions of limitation imposed on her license by 12/9/10 consent agreement; and failure to cooperate in an investigation conducted by the Board due to her failure to respond to interrogatories. (Review and Journal Entry – no hearing requested.) Order effective 7/10/12.

BIANCO, Valentino John, III, D.O. (#58-004448) – Youngstown, OH
Consent Agreement: Training certificate suspended for an indefinite period of time; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he has been diagnosed with alcohol dependence, sedative dependence, and cannabis abuse; his relapse on alcohol in March 2012; and on doctor's impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice. Agreement effective 8/8/12.
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BIGGS, Henry Kurtis, D.O. (#34-007032) – Naples, FL
Board Order: Medical license revoked. Based on prior action by the Florida Board of Osteopathic Medicine wherein doctor was issued a letter of concern, required to complete a law and rules course, and a five hour continuing medical education course on the topic of risk management. Order effective 7/12/12.

BONNIN, Arturo J., M.D. (#35-063692) – Centerville, OH
Consent Agreement: Doctor reprimanded and license placed on probation. Based on doctor's admission that he pre-signed blank prescriptions which were used by a physician assistant who did not have prescriptive authority and that such prescriptions were issued for allergy and asthma medications and not controlled substances. Agreement effective 9/12/12; Agreement to remain in effect for at least two years prior to any request for termination.

BREIDENSTEIN, James Edward, D.O. (#34-005707) – Cincinnati, OH
Consent Agreement: Medical license restored on 5/9/12, subject to permanent limitation on license requiring physician to have a chaperone at all times when interacting with female patients. Probationary terms, conditions and limitations established for at least five years. Based on doctor having fulfilled the conditions for restoration of his license to practice osteopathic medicine and surgery pursuant to terms of 1/13/10 consent agreement. Agreement effective 5/9/12.

BRITTINGHAM, Louis W., Jr., D.O. (#34-003095) – Lakebay, WA
Voluntary Agreement: Doctor's permanent voluntary retirement of medical license accepted by Board in lieu of formal disciplinary proceedings pursuant to Section 4731.22(B)(22), Ohio Revised Code. Effective 6/13/12.

BROOKS, Paul Vincent, M.D. (#35-066337) – Nicholasville, KY
Board Order: Medical license permanently revoked. Based on prior action by the Kentucky Board of Medical Licensure which issued an Emergency Order of Suspension immediately suspending doctor's license based on findings that doctor had inappropriately prescribed and provided medications, including controlled substances, to a patient who was a known drug addict and with whom he was living and engaged in a sexual relationship and fabricated medical records related to that prescribing. (Journal Entry – No hearing requested.) Order effective 9/13/12.

BURLAS, Regis Paul, D.O. (#34-002863) – Massillon, OH
Consent Agreement: Medical license suspended for at least 90 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he has been diagnosed with alcohol abuse and benzodiazepine dependency and that, following prior treatment, he relapsed by consuming alcohol. Agreement effective 7/11/12.

CHONG, Joon H., M.D. (#35-068430) – Coldwater, MI
Summary Suspension: Pursuant to Sections 2929.42 and/or 3719.121(C), Ohio Revised Code, medical license immediately suspended based on doctor having been found guilty in the United States District Court, Southern District of Ohio, Western Division, of one felony count of conspiring with others to knowingly, intentionally acquire or obtain possession of controlled substances by misrepresentation, fraud, or deception, namely OxyContin and Percocet. Order effective 8/8/12.

CHRISTIAN, Samuel Joseph, M.D. (#35-061894) – Tiffin, OH
Board Order: Doctor reprimanded. Based on doctor's execution of two Voluntary Surrenders of Controlled Substances Privileges to the U.S. Department of Justice – Drug Enforcement Agency. Order effective 10/9/12.

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CORBIN, Michael Welford, M.D. (#35-087421) – Point Pleasant, WV
Board Order: No further action taken. Based on Board's finding that prior action by the West Virginia Board of Medicine did not warrant additional discipline. Order effective 8/2/12.

COX, William Michael, M.D. (#35-061828) – Millersburg, OH
Consent Agreement: Medical license suspended for at least 90 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's violation of limitations placed on his license by 3/10/10 Board Order; his conviction in the Holmes County Municipal Court on one count of Unauthorized Use of Property; and upon his admission that he has received psychiatric care for kleptomania, major depressive disorder, dysthymic disorder, social anxiety disorder, obsessive-compulsive disorder, hoarding and checking type, and adult attention deficit disorder. Agreement effective 8/8/12.

CRAGEL, Michael D., D.P.M. (#36-002026) – Toledo, OH
Consent Agreement: Medical license suspended for an indefinite period of time; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he is impaired in his ability to practice medicine and surgery according to acceptable and prevailing standards of care due to alcohol dependence. Agreement effective 9/12/12.

CULLEN, William B., M.D. (#35-056037) – Wadsworth, OH
Board Order: Medical license permanently revoked. Based on doctor's departure from or failure to conform to minimal standards of care rendered to 24 specified patients; failure to maintain minimal standards applicable to the selection or administration of drugs, or failure to employ acceptable scientific methods in the selection of drugs or other modalities; violation of Medical Board rules governing the treatment of intractable pain; and violations of the conditions of limitation imposed on doctor's license by 10/14/09 consent agreement. Order effective 5/10/12.

DRAGASH, Terry Alan, D.O. (#34-004340) – Pataskala, OH
Board Order: Medical license suspended for at least nine months, with all other terms, conditions and limitations established in 7/13/11 consent agreement to remain in effect. Based on doctor's false, fraudulent, or misleading statements to a Board representative during the course of an investigation into doctor's use of cocaine, which false statements constitute felony perjury in the state of Ohio. Order effective 9/13/12.

DRAKE, Miles Edward, Jr., M.D. (#35-047457) – Canal Winchester, OH
Board Order: Medical license revoked, with such revocation to commence on the 31st day following the effective date of the Order. Based on doctor's violation of conditions of limitation imposed on certificate by 6/14/06 consent agreement, including failing to provide quarterly declarations, logs of controlled substances prescribed, urine screening reports, documentary evidence of participation in alcohol and drug rehabilitation meetings, and failing to submit documentation that he had complete required medical record keeping course within the first year of probation and a monitoring physician. Order effective 7/10/12. **Court Action:** Notice of appeal of Board's 6/13/12 Order of revocation filed by doctor with Franklin County Court of Common Pleas on 7/25/12.

FASAKIN, Yemi M., M.D. (M.D. Applicant) – Pearland, TX
Board Order: Application for license to practice medicine and surgery in Ohio granted and suspended for at least 90 days, with conditions for reinstatement and probation established. Based on prior action by the Texas Medical Board wherein doctor was reprimanded, ordered to surrender his Drug Enforcement Administration Controlled Substances Registration and Texas Department of Public Safety Controlled Substances Registration Certificate, pass a medical jurisprudence examination, complete a medical recordkeeping course, and complete at least 16 hours of continuing medical education in the area of identification and treatment of chronic pain and 8 hours of continuing medical education in risk management, the underlying allegations being doctor's pre-signing prescriptions for narcotics, aiding and abetting the medical practice of a non-licensed person who dispensed the prescriptions to two patients, and his failing to adequately supervise staff while acting as a supervising physician, and his failing to meet the standard of care in prescribing narcotics to ten patients and failed to keep adequate medical records. Order effective 10/9/12.

FOOTE, Dennis John, D.P.M. (#36-002152) – Waipahu, HI
Voluntary Agreement: Permanent revocation authorized by podiatrist in lieu of further investigation of a possible violation of Sections 4731.22(B)(6) and/or 4731.22(B)(24), Ohio Revised Code. Effective 5/9/12.

FORTUNE, Terry L., D.O. (#34-005619) – Lyndhurst, OH
Consent Agreement: Medical license suspended for at least 90 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he has been diagnosed with alcohol and opiate dependency and that, following prior treatment, he relapsed by consuming alcohol and opiates. Agreement effective 7/11/12.

FROST, Michael C., M.T. (#33-004405) – Highland Heights, OH
Voluntary Agreement: Permanent revocation authorized by massage therapist in lieu of formal disciplinary proceedings pursuant to Section 4731.22(B)(10), Ohio Revised Code, to wit: Section 4731.41, Ohio Revised Code. Effective 9/12/12.

FURIN, Jennifer Joan, M.D. (#35-097990) – Strongsville, OH
Summary Suspension: Pursuant to Section 4731.22(G), Ohio Revised Code, medical license summarily suspended based on Board's determination that there is clear and convincing evidence that doctor's ability to practice according to acceptable and prevailing standards of care is impaired because of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice, and that her continued practice presents a danger of immediate and serious harm to the public. Order effective 8/8/12

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GEIER, Mark Robin, M.D. (M.D. Applicant) – Silver Spring, MD
Board Order: Application for license to practice medicine and surgery denied. Based on prior action by the Maryland State Board of Physicians, which issued an Order for Summary Suspension of the doctor's license based on conclusions that the doctor misdiagnosed autistic children with precocious puberty and other genetic abnormalities and treated the children with potent hormonal therapy, and in some children chelation therapy, which exposed the children to needless risk of harm; failed to conduct adequate physical examinations; failed to provide adequate informed consent to the parents of the children he treated; and treated the children with therapies not supported by evidence-based studies. Order effective 8/9/12. (Journal Entry – No hearing requested.)

GILL, Anureet, M.D. (#57-016340) – Cleveland Heights, OH
Consent Agreement: Training certificate indefinitely suspended; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that she has been diagnosed as chemically dependent and that alcohol is her drug of choice. Agreement effective 5/9/12.

GLADSON, Michael Bruce, (M.D. Applicant) – Cincinnati, OH
Board Order: Application for license to practice medicine and surgery permanently denied. Based on findings that doctor provided false, fraudulent, deceptive, or misleading information on his application for a license to practice medicine and surgery in Ohio in that he failed to disclose on his application that he had previously executed a voluntary surrender of Controlled Substances Privileges to the U.S. Department of Justice – Drug Enforcement Agency, which was itself based on the doctor's alleged failure to comply with Federal requirements pertaining to controlled substances. Such acts further constitute the commission of an act in the course of practice that constitutes misdemeanor falsification. Order effective 6/14/12. **Court Action:** Notice of appeal of Board's 6/13/12 Order permanently denying doctor's application for a license to practice medicine and surgery filed by the doctor with the Franklin County Court of Common Pleas on 6/22/12. **Court Action:** Notice to withdraw appeal of 6/13/12 Board Order filed by doctor with Franklin County Court of Common Pleas on 8/28/12.

GOLDMAN, Frederick M., M.D. (#35-009497) – Cincinnati, OH
Voluntary Agreement: Doctor's permanent voluntary retirement of medical license accepted by Board in lieu of formal disciplinary proceedings pursuant to Section 4731.22(B)(19), Ohio Revised Code. Effective 8/8/12.

GOMAA, Laila Ibrahim, M.D. (#35-068963) – Dayton, OH
Voluntary Agreement: Doctor's permanent surrender of medical license accepted by Board in lieu of continuing compliance with terms of a 3/14/12 Board Order and in lieu of further formal disciplinary proceedings arising from a 2/8/12 Notice of Opportunity for Hearing. Effective 7/13/12.

GOODMAN, Paul Henry, D.O. (#34-004948) – Erie, PA
Consent Agreement: Medical license reinstated on 5/9/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 5/9/12; agreement to remain in effect for at least five years prior to any request for termination.

GRIFFIN, Brian Frederick, M.D. (#35-044328) – Hilliard, OH
Consent Agreement: Medical license suspended for at least 90 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's impairment of ability to practice according to acceptable and prevailing standards of care due to relapse and violation of conditions of limitation imposed on his license by 8/13/08 Board Order. Agreement effective 6/13/12.

HANLON, Keith Paul, M.T. (#33-015721) – Columbus, OH
Voluntary Agreement: Permanent revocation authorized by massage therapist in lieu of formal disciplinary proceedings pursuant to Section 4731.22(B)(11) and/or 4731.22(B)(12), Ohio Revised Code, in association with misdemeanor criminal charges related to the assault of a massage therapy client. Effective 6/13/12.

HANSEN, Richard Norman, M.D. (#35-034887) – Englewood, CO
Voluntary Agreement: Permanent revocation authorized by doctor in lieu of formal disciplinary proceedings based upon doctor's plea of guilty in or around March 2012 in Arapahoe County, Colorado, to a charge of Unlawful Sexual Contact – Fake Medical Exam, a class 4 felony. Effective 9/12/12.

HARD, Wesley Frank, M.D. (#35-047888) – Columbus, OH
License reinstated after suspension: Doctor's request for reinstatement approved by vote of the Board on 6/13/12, subject to probationary terms, conditions, and limitations established by 11/10/10 Board Order. Reinstatement effective 6/13/12.

HARPER, Adolph, Jr., M.D. (#35-044503) – Copley, OH
Voluntary Agreement: Permanent revocation authorized by physician in lieu of formal disciplinary proceedings pursuant to Sections 4731.22(B)(3), 4731.22(B)(6), 4731.22(B)(19), and 4731.22(B)(24), Ohio Revised Code. Effective 5/22/12.

HAYNES, Thomas Lamott, M.D. (#35-040421) – Grand Rapids, MI
Voluntary Agreement: Permanent revocation authorized by physician in lieu of formal disciplinary proceedings pursuant to Section 4731.22(B)(11), Ohio Revised Code. Effective 5/9/12.

HESLER, Brian David, M.D. (#57-014547) – Cleveland, OH
Consent Agreement: Training certificate reinstated on 5/9/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 5/9/12; agreement to remain in effect for at least five years prior to any request for termination.

HIGHBERGER, W. Andrew, M.D. (#35-056976) – Marysville, OH
Consent Agreement: Medical license reinstated on 6/13/12, subject to permanent limitation on license to prohibit doctor from engaging in

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the practice of anesthesiology. Probationary terms, conditions and limitations established for at least five years. Based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 6/13/12.

HOVEY, Charlotte Eileen, M.D. (#35-075382) – Saint Johns, FL
Board Order: Medical license revoked. Based on prior action by the Colorado Medical Board wherein doctor entered into an Interim Cessation of Practice Agreement prohibiting doctor from performing any act requiring a license issued by the Colorado Medical Board, which was itself based on findings that doctor has a physical or mental illness or condition that renders her unsafe to practice. (Journal Entry – no hearing requested.) Order effective 6/14/12.

INGRAM, Jonathan David, M.D. (#35-089669) – Lafayette, LA
Board Order: Medical license revoked. Based on physician's failure to cooperate in an investigation by the State Medical Board of Ohio by failing to timely respond to interrogatories and failing to appear for an investigative office conference while under subpoena. (Review and Journal Entry – no hearing requested.) Order effective 5/30/12.

JOHNSON, Gregory Gene, M.D. (#35-048254) – Perrysburg, OH
Consent Agreement: Medical license restored on 5/9/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 5/9/12; agreement to remain in effect at least five years prior to any request for termination.

JOHNSON, Lynn Ann (M.T. Applicant) – Painesville, OH
Board Order: Application for license to practice massage therapy denied. Based on massage therapy applicant's impairment of ability to practice according to acceptable and prevailing standards of care due to habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice. (Review and Journal Entry – no hearing requested.) Order effective 6/14/12.

JOHNSON, Rebecca Erica, M.D. (#35-095365) – Westlake, OH
Consent Agreement: Medical license reinstated subject to probationary terms, conditions, and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as treatment and monitoring requirements are in place. Agreement effective 9/12/12; Agreement to remain in effect at least five years prior to any request for termination.

JORGENSEN, Deborah A., P.A. (#50-001180) – North Ridgeville, OH
Board Order: Physician assistant's license suspended for at least 215 days with interim monitoring and conditions for reinstatement established. Based on physician assistant's impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice and on physician assistant's writing prescriptions in her own name and in the name of family members and signing the name of a physician without the physician's permission or knowledge, such acts constituting felonies in the state of Ohio. Order effective 8/15/12.

KAY, Bruce Saul, M.D. (#35-049187) – Dayton, OH
Board Order: Medical license suspended for at least 180 days, with such suspension to commence on the 31st day following the effective date of the order. Based on findings that in care rendered to 15 patients, doctor departed from, or failed to conform to, minimal standards of care; failed to maintain minimal standards applicable to the selection or administration of drugs, or failed to employ acceptable scientific methods in the selection of drugs for treatment of disease; and violated the minimal standards of care by failing to conform to the Board's rules for using prescription drugs for the treatment of intractable pain. Order effective 8/2/12.

KARAKASIS, Christopher John, M.D. (#35-095844) – Columbus, OH
Consent Agreement: Medical license suspended for an indefinite period of time; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he has been diagnosed with cannabis abuse. Agreement effective 7/11/12.**Consent Agreement:** Medical license reinstated subject to probationary terms, conditions, and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as treatment and monitoring requirements are in place. Agreement effective 9/12/12; Agreement to remain in effect for at least five years prior to any request for termination.

KERNS, John Raymond, D.O. (#34-004653) – Newark, OH
Board Order: Medical license suspended for an indefinite period of time; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he is impaired in his ability to practice medicine and surgery according to acceptable and prevailing standards of care due to chemical dependence. Agreement effective 8/8/12.

KEYS, Kevin Lloyd (M.T. Applicant) – Westerville, OH
Board Order: Application for license to practice massage therapy denied. Based on applicant's impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive use or abuse of drugs, alcohol or other substances that impair ability to practice. Order effective 8/9/12. (Review and Journal Entry – No hearing requested.)

KHAN, Ali, M.D. (#35-082837) – Perrysburg, OH
Board Order: Medical license permanently revoked. Based on Board's findings that doctor made false, fraudulent, deceptive, or misleading statements in the course of practice by entering false information in a patient record and in a letter to a patient's husband; engaged in acts constituting felonies by permitting an unlicensed person to use light-based medical devices, thereby aiding and abetting the unlicensed practice of medicine; engaged in acts constituting misdemeanors in the course of practice by purchasing, accepting delivery, and using non-FDA approved Botox on patients without the patients' knowledge and falsifying patient records; and violated the conditions of limitation placed by the Board upon the doctor's license to practice by 12/12/07 Board order. Order effective 10/9/12.

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KOTCH, Dawn Marie, M.T. (#33-016289) – Cuyahoga Falls, OH
Board Order: Application for restoration of massage therapy license granted and immediately suspended for a period of 60 days with subsequent probationary terms, conditions, and limitations established for at least two years. Based on massage therapist's admission that she continued to practice massage therapy after her license expired on 8/31/09. Agreement effective 7/11/12.

LARKY, Howard Chad, D.O. (#34-008280) – Columbus, OH
License reinstated after suspension: Doctor's request for reinstatement approved by vote of the Board on 5/9/12, subject to probationary terms, conditions, and limitations established by 11/9/11 Board Order. Reinstatement effective 5/9/12.

LEWIS, Carol Elaine, M.D. (#35-098281) – Cleveland, OH
Consent Agreement: Medical license reinstated and limited to participation in a post-graduate training program or fellowship approved in advance by the Board until such time that doctor can provide evidence that she is capable of independently practicing medicine and surgery according to acceptable and prevailing standards of care, including documentation of doctor's successful completion of a post-graduate training program. License further placed on probation until such time as doctor demonstrates that she is capable of independently practicing medicine and surgery according to acceptable and prevailing standards of care. Agreement effective 9/12/12.

MACE, Adam Geoffrey, M.D. (#57-018732) – Cleveland Heights, OH
Consent Agreement: Training certificate subject to probationary terms, conditions, and limitations based on doctor's diagnoses of alcohol dependence, sedative/anxiolytic dependence, attention deficit disorder and adult attention deficit disorder, and major depression, which are currently stable and well controlled. Agreement effective 6/13/12; agreement to remain in effect for at least three years prior to any request for termination.

MAHAJAN, Mahendra Kumar, M.D. (#35-043538) – Beavercreek, OH
Consent Agreement: Medical license reinstated subject to probationary terms, conditions, and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as treatment and monitoring requirements are in place. Agreement effective 9/12/12; Agreement to remain in effect for at least five years prior to any request for termination.

MATHIS, Raymond L., D.O. (#34-002184) – Alexandria Bay, NY
Board Order: Medical license revoked. Based on prior action by the Medical Licensing Board of Indiana wherein doctor was placed on indefinite probation, required to complete a mini-residency training program, and pass the Special Purpose Examination (SPEX). Order effective 7/12/12. **Court Action:** Notice of appeal of Board's 7/11/12 Order of revocation filed by doctor with Franklin County Court of Common Pleas on 7/19/12.

MCRAE, Sharon Leilani, M.D. (#35-093580) – Cincinnati, OH
Summary Suspension: Pursuant to Section 4731.22(G), Ohio Revised Code, medical license summarily suspended based on Board's determination that there is clear and convincing evidence that doctor's ability to practice according to acceptable and prevailing standards of care is impaired by reason of doctor's mental illness, and that her continued practice presents a danger of immediate and serious harm to the public. Order effective 7/11/12.

MCSPADDEN, Michael Shane, M.T. (#33-013036) – Springboro, OH
License reinstated after suspension: Massage therapist's license reinstated effective 6/27/12, pursuant to notice of reinstatement/ reissuance of professional license from the Butler County Child Support Enforcement Agency.

MCVETY, Randi Johanna, M.T. (#33-009482) – Anna, OH
Consent Agreement: Application for restoration of massage therapy license granted and immediately suspended for a period of 60 days with subsequent probationary terms, conditions, and limitations established for at least two years. Based on massage therapist's admission that she continued to practice massage therapy after her license expired on 8/31/09. Agreement effective 9/12/12.

MERKIN, Bruce Jeffrey, M.D. (#35-086596) – Palm Desert, CA
Consent Agreement: Medical license reinstated on 6/13/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 6/13/12; agreement to remain in effect for at least five years prior to any request for termination.

MIDEI, Mark G., M.D. (#35-057760) – Monkton, MD
Board Order: Medical license revoked. Based on prior action by the Maryland State Board of Physicians wherein doctor's license to practice medicine and surgery was revoked and the Maryland Board refused to entertain an application for reinstatement for at least two years, which was itself based in part upon findings that doctor placed stents in patients whose clinical symptoms and histories did not warrant invasive techniques, thereby unnecessarily exposing the patients to risk of harm. Order effective 8/1/12.

MILES, William Douglas, D.O. (#34-004296) – Bellbrook, OH
Summary Suspension: Pursuant to Section 4731.22(G), Ohio Revised Code, osteopathic medical license summarily suspended based on Board's determination that there is clear and convincing evidence that doctor's ability to practice according to acceptable and prevailing standards of care is impaired because of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice, and that his continued practice presents a danger of immediate and serious harm to the public. Order effective 7/24/12.

MILLER, H. Charles, M.D. (#35-037603) – Paris, KY
Voluntary Agreement: Doctor's permanent voluntary retirement of medical license accepted by Board in lieu of further investigation pursuant to Section 4731.22(B)(19), Ohio Revised Code. Effective 5/9/12.

MURTHY, Siva Rao, M.D. (#35-050136) – Westlake, OH
Board Order: Medical license reinstated subject to probationary terms, conditions, and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing

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standards of care so long as treatment and monitoring requirements are in place. Agreement effective 8/8/12; Agreement to remain in effect for at least five years prior to any request for termination.

NARAMORE, Lloyd Stanley, D.O. (#34-002518) – Loveland, OH
Board Order: Medical license permanently revoked. Based on doctor's violation of conditions of limitation placed on medical license by 6/11/08 consent agreement; doctor having been found guilty in the U.S. District Court, Eastern District of Kentucky, on one felony count of Conspiracy to Distribute Methadone and one felony count of Criminal Forfeiture; and doctor's selling, giving away, personally furnishing, prescribing, or administering drugs for other than legal and legitimate therapeutic purposes. (Review and Journal Entry – no hearing requested.) Order effective 5/10/12.

NELSON, Jeffrey Tait, M.D. (#57-020202) – Cleveland, OH
Consent Agreement: Training certificate suspended for at least 180 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he called in false prescriptions for Vicodin and Valium in the names of patients but obtained the medications for his own use and on doctor's impairment of ability to practice according to acceptable and prevailing standards of care because of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice. Agreement effective 8/8/12.

NEMETH, Kimberly Marie, D.O. (#34-009391) – Streetsboro, OH
Consent Agreement: Medical license reinstated on 5/9/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 5/9/12; agreement to remain in effect for at least five years prior to any request for termination.

NEUHOFF, Ronica Ann, M.D. (#35-067710) – Toledo, OH
Board Order: Medical license suspended for period of 45 days with subsequent probationary terms, conditions, and limitations established for at least four years. Based on doctor's admission that she has been diagnosed with major depression and upon doctor's failure to maintain minimal standards applicable to the selection or administration of drugs and her departure from, or failure to conform to, minimal standards of care in that she pre-signed blank prescriptions which were left with her office staff. Agreement effective 7/11/12.

NIGRO, Samuel Angelo, M.D. (#35-027915) – Cleveland Heights, OH
Voluntary Agreement: Permanent revocation authorized by doctor in lieu of formal disciplinary proceedings pursuant to Sections 4731.22(B)(2) and 4731.22(B)(6), Ohio Revised Code. Effective 7/11/12.

NOGA, Christina Elma, M.T. (#33-019534) – Eastlake, OH
Board Order: Massage therapy license revoked. Based on massage therapist's violations of the conditions imposed on her license by 3/9/11 Board Order. (Review and Journal Entry – no hearing requested.) Order effective 7/12/12.

PAGARIGAN, Roberto Rosete, M.D. (#35-028994) – Baxter, MN
Board Order: Application for restoration of medical license permanently denied. Based on prior action by the Minnesota Board of Medical Practice, which placed conditions on doctor's license requiring him to have another physician co-sign all prescriptions issued to patients under the age of 18. (Journal Entry – No hearing requested.) Order effective 9/13/12.

PALMA, Michael J., M.D. (#57-018764) – Toledo, OH
Consent Agreement: Medical license suspended for at least 180 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he has been diagnosed with substance abuse/dependency relating to opiates and that, following prior treatment, he relapsed by using Propofol, which he obtained from a hospital without permission or consent. Agreement effective 7/11/12.

PERELMAN, Gerald K., D.P.M. (#36-002858) – Cincinnati, OH
Consent Agreement: Podiatric medical license suspended for at least 180 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probation terms, conditions and limitations to monitor practice. Based on podiatrist's admission that he departed from or failed to conform to minimal standards of care rendered to 15 specified patients; failed to maintain minimal standards applicable to the selection or administration of drugs, or failed to employ acceptable scientific methods in the selection of drugs or other modalities; and violated Medical Board rules governing controlled substances. Agreement effective 9/12/12.

POPOVICH, William, M.D. (#35-089778) – Medina, OH
Consent Agreement: Medical license suspended for at least one year; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's impairment of ability to practice according to acceptable and prevailing standards of care due to relapse, violation of conditions of limitation imposed on his license by 8/10/11 consent agreement, and recent diagnosis of chronic major depression. Agreement effective 5/9/12.

PULIVARTHI, Venkataramanaiah, M.D. Applicant) – Westerville, OH
Board Order: Application for license to practice medicine and surgery denied. Based on applicant's conviction in the U.S. District Court for the District of South Carolina, Florence Division, on one felony count of Conspiracy to Distribute and Distributing Schedule IV Controlled Substances; prior actions against the doctor's licenses in South Carolina, North Carolina, New York, and Tennessee; and on doctor's failure to obtain a passing score on the Test of English as a Foreign Language, Internet-based Test (TOEFL iBT). (Journal Entry – no hearing requested.) Order effective 5/10/12.

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PURVIS, Jerry Gaines, Jr., M.D. (#35-080726) – Ashville, OH
Board Order: Medical license reinstated subject to probationary terms, conditions, and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as treatment and monitoring requirements are in place. Agreement effective 8/8/12; Agreement to remain in effect for at least five years prior to any request for termination.

REDDY, Sheila Sandadi, M.D. (#57-020391) – Cleveland, OH
Consent Agreement: Training certificate suspended for an indefinite period of time; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that she has been diagnosed with alcohol dependence and has been determined by a Board approved treatment provider to be impaired in her ability to practice medicine according to acceptable and prevailing standards of care due to the habitual or excessive use or abuse of alcohol. Agreement effective 9/12/12.

REESE, Charmaine Nicole (M.T. Applicant) – Reynoldsburg, OH
Board Order: Application for a certificate to practice massage therapy permanently denied. Based on prior actions by the Ohio Board of Nursing, including permanent revocation of her license to practice as a nurse, with such actions being based on findings that applicant removed medication intended for a patient and provided it to a co-worker for the coworker's girlfriend's use; failed to maintain professional boundaries with a patient by moving the patient into her home; was convicted on one count of Operating a Vehicle under the Influence of Drugs or Alcohol; and failed to obtain approval from the OH Board of Nursing before accepting a position as a licensed practical nurse as was required by a 2008 consent agreement. Order effective 9/13/12.

REYES, Charles Wesley, M.D. (#35-054845) – Belpre, OH
Consent Agreement: Medical license suspended for at least 180 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he relapsed by consuming Ambien. Agreement effective 9/12/12.

REYNOLDS, Richelle Marie (M.T. Applicant) – Toledo, OH
Board Order: Application for a certificate to practice massage therapy denied. Based on legal presumption that applicant is impaired in her ability to practice according to acceptable and prevailing standards of care because of habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice. (Journal Entry – no hearing requested.) Order effective 9/13/12.

RIESEN, Matthew Christopher, (#57-013605; M.D. Applicant) – St. Marys, OH
Board Order: Doctor's application for a license to practice medicine and surgery granted subject to probationary terms, conditions, and limitations, based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as treatment and monitoring requirements are in place. Agreement effective 8/8/12; Agreement to remain in effect for at least five years prior to any request for termination.

ROCA, Margo Hirshman, M.D. (#35-089290) – Port Charlotte, FL
Consent Agreement: Doctor reprimanded. Based on prior action by the Florida State Board of Medicine which was based on the doctor's admission that she failed to correctly read an MRI and on a subsequent action by the Colorado Medical Board, which was itself based on the action taken by the Florida State Board of Medicine. Agreement effective 9/12/12.

ROMIG, Jeff B., M.D. (#35-068780) – Uniontown, OH
Consent Agreement: Medical license suspended for 45 days; interim monitoring conditions and probationary monitoring terms established. Based on doctor having prescribed controlled and non-controlled substances for himself and for family members; failing to maintain complete medical records during the time period in which such prescribing took place; and making false statements in relation to the practice of medicine in that doctor presented falsified medical charts to a Board investigator. Agreement effective 6/13/12; agreement to remain in effect for at least three years prior to any request for termination.

SABINO, Alan Dale, M.D. (#35-084776) – Stockton, CA
Consent Agreement: Medical license reinstated on 7/11/12, subject to probationary terms, conditions and limitations based on doctor having been deemed capable of practicing according to acceptable and prevailing standards of care so long as certain treatment and monitoring conditions are in place. Agreement effective 7/11/12; agreement to remain in effect for at least five years prior to any request for termination.

SACHDEVA, Meera, M.D. (#35-064556) – Summit, MS
Board Order: Medical license permanently revoked. Based on prior action by the Mississippi State Board of Medical Licensure wherein doctor surrendered her license, which was based on doctor's alleged violation of rules and regulations of the Mississippi Board pertaining to prescribing, administering, and dispensing of medication; assisting in the unlicensed practice of medicine; and knowingly and willfully submitting false information on her application for renewal of her Mississippi license. (Journal Entry – no hearing requested.) Order effective 5/10/12.

SCHEIDLER, Earl C., D.O. (#34-001318) – Cincinnati, OH
Voluntary Agreement: Doctor's permanent surrender of osteopathic medical license accepted by Board in lieu of continuing compliance with the terms of a 5/11/11 Consent Agreement. NON-DISCIPLINARY. Effective 7/11/12.

SCROGGINS, Timothy Allen, M.D. (#35-079345) – Spencer, OH
Consent Agreement: Medical license suspended for 60 days; interim monitoring conditions and probationary monitoring terms established. Based on doctor's execution of a Voluntary Surrender of Controlled Substances Privileges to the U.S. Department of Justice – Drug Enforcement Agency, the underlying basis being doctor's alleged failure to comply with federal requirements pertaining to controlled substances. Agreement effective 5/9/12; agreement to remain in effect for at least five years from August 12, 2009, prior to any request for termination.

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SHULER, William Henry, M.D. (#35-083695) – Tulsa, OK
Board Order: Medical license revoked. Based on prior action by the Division of Occupational and Professional Licensing of the Department of Commerce of the State of Utah in reprimanding doctor and requiring him to immediately cease and desist unprofessional and unlawful conduct, following findings by that board that doctor provided online prescriptions to Utah residents via the internet for prescription medications dispensed from a pharmacy located in Florida and prescribed medications to patients in Utah during which time his Utah medical license had lapsed for non-renewal. Order effective 8/9/12.

SYED, Aladdin Zafar, M.D. (#35-092731) – Presto, PA
Board Order: Medical license permanently revoked. Based on doctor's violation of conditions of limitation imposed on his license by 8/13/08 consent agreement and his violation of the Board's rules governing the utilization of controlled substances for self and family members. (Review and Journal Entry – No Hearing Requested.) Order effective 10/9/12.

TAN, Ernesto Compendio, M.D. (#35-047940) – Cincinnati, OH
Board Order: Medical license permanently revoked. Based on doctor's commission of an act constituting a felony based upon his practice of medicine while his license was suspended; violation of the conditions of limitation placed upon his certificate to practice; making false, fraudulent, deceptive or misleading statements in the course of practice; and violation of Medical Board rules governing the maintenance of complete and accurate medical records, which constitutes a failure to maintain minimal standards applicable to the selection or administration of drugs and/or a departure from, or the failure to conform to, minimal standards of care. Order effective 9/13/12.

THOMAS, Terry Linn, D.O. (#34-007232) – Marietta, OH
Consent Agreement: Medical license suspended for at least 180 days; interim monitoring conditions and conditions for reinstatement established, including requirement that doctor enter into subsequent consent agreement incorporating probationary terms, conditions and limitations to monitor practice. Based on doctor's admission that he relapsed on Neurontin and issued prescriptions for Neurontin in the names of family members for his own self-use. Agreement effective 9/12/12.

VILLAVICENCIO, Jose, M.D. (#35-069935) – Columbus, OH
Board Order: Medical license permanently revoked. Based on Board's findings that in care rendered to 16 specified patients, doctor failed to maintain minimal standards of care applicable to the selection or administration of drugs, or failed to employ acceptable scientific methods in the selection of drugs or other modalities for the treatment of disease; departed from or failed to conform to minimal standards of care of similar practitioners under the same or similar circumstances; and violated Medical Board rules governing controlled substances, treatment of intractable pain, and termination of the physician-patient relationship. Order effective 9/13/12.

WEIDMAN, Amy Ruth, M.D. (#35-057181) – Akron, OH
License reinstated after suspension: Doctor's request for reinstatement approved by vote of the Board on 9/12/12, subject to probationary terms, conditions and limitations established by 3/14/12 Board Order. Reinstatement effective 9/12/12.

WILLIAMS, Mark David, M.D. (#35-091244) – Canfield, OH
License reinstated after suspension: Doctor's medical license reinstated effective 4/16/12, pursuant to notice of reinstatement/reissuance of professional license from the Mahoning County Child Support Enforcement Agency.

ZACHARIAS, Dawn Michele, M.D. (#35-079882) – Strongsville, OH
License reinstated after suspension: Doctor's request for reinstatement approved by vote of the Board on 5/9/12, subject to probationary terms, conditions, and limitations established by 1/11/12 Board Order. Reinstatement effective 5/26/12.

Glossary of Disciplinary Action Terms

PERMANENT REVOCATION
The permanent loss of a certificate to practice in Ohio and the inability, at any time, to reapply for or hold any certificate to practice in Ohio. An individual whose certificate has been permanently revoked shall forever thereafter be ineligible to hold any certificate to practice, and the board shall not accept from that individual an application for reinstatement or restoration of the certificate or for issuance of a new certificate. (Chapter 4731-13-36 (A), Ohio Administrative Code)

REVOCATION
The loss of a certificate to practice in Ohio. An individual whose certificate has been revoked shall be eligible to submit an application for a new certificate. All disciplinary action taken by the board against the revoked certificate shall be made a part of the board's records for any new certificate granted under this rule. (Chapter 4731-13-36 (B), Ohio Administrative Code)

SUSPENSION
The temporary loss of a certificate to practice in Ohio. A suspension shall be imposed for either a definite or an indefinite period of time. (Chapter 4731-13-36 (C), Ohio Administrative Code)

Glossary cont. from page 18

LIMITATION
Precludes the certificate holder from engaging in a particular conduct or activity, to impose conditions on the manner in which that conduct or activity may be performed, or to require the certificate holder to abide by specific conditions in order to continue practicing medicine. A limitation shall be either temporary or permanent. (Chapter 4731-13-36 (D), Ohio Administrative Code)

PROBATION
A situation whereby the certificate holder shall continue to practice only under conditions specified by the board. Failure of the certificate holder to comply with the conditions of probation may result in further disciplinary action being imposed by the board. The probation period shall be for either a definite or indefinite term. If probation is for an indefinite term, the board shall establish a minimum probation period and the board shall release the certificate holder from the conditions of probation upon completion of the minimum probation period and upon the board's determination that the purpose of probation has been fulfilled. (Chapter 4731-13-36 (E) Ohio Administrative Code)

PERMANENT DENIAL
The permanent denial of an application for a certificate to practice in Ohio. An individual whose application for a certificate has been permanently denied shall forever thereafter be ineligible to apply to the board for any certificate to practice, and the board shall not accept from that individual an application for issuance of a certificate. (Chapter 4731-13-36 (J), Ohio Administrative Code)

DENIAL
The denial of an application for a certificate to practice in Ohio. An individual whose application for a certificate has been denied shall be eligible to submit a new application for a certificate. In determining whether to grant a new application, the board may consider any statutory violations that were committed by the individual before or after the denial of the individual's previous application, including those that formed the basis for the denial. (Chapter 4731-13-36 (K), Ohio Administrative Code)

Probation Completed—May through September 2012

The following licensees have completed the terms of probation required by Board Order or Consent Agreement.

Name of licensee	Title	License Number	Effective Date	Location
BACHMAN, Denise Marie	M.T.	33-009548	6/13/12	Cincinnati, Ohio
DAJANI, Hatem Marwan	M.D.	35-091335	7/22/12	Menasha, Wisconsin
ERNST, David Carl	M.D.	35-060456	5/13/12	Vermilion, Ohio
FULGHAM, Elease Michelle	M.T.	33-019096	8/8/12	Cincinnati, Ohio
HUTCHISON, Philip Martin	D.O.	34-005766	7/29/12	Bellevue, Ohio
LANE, Brian Francis	M.D.	35-086946	5/26/12	Evans, Georgia
LEAK, Byron Christopher	M.D.	35-085467	9/17/12	Huntersville, North Carolina
NOYES, Matthew Proctor	M.D.	35-094643	5/9/12	Dayton, Ohio
MIKHLI, Alla	D.P.M.	36-002690	6/13/12	Beachwood, Ohio
MARKER, Melissa Jane	D.O.	34-008532	7/29/12	Vermilion, Ohio
RATH, David A	M.D.	35-057898	7/11/12	Alexandria, Ohio
RISE, Leroy Peri	M.D.	35-088474	7/11/12	Albuquerque, New Mexico
SMITH, Brianna Kelly	M.T.	33-013150	5/10/12	Lancaster, Ohio

COURT ACTION UPDATE

Court appeals and decisions entered between May and September 2012 related to Medical Board disciplinary actions taken prior to May 2012.

ABUNKU, Orduen, M.D. (#35-075321) – West Chester, OH
By decision and entry filed on 6/19/12, 10th District Court of Appeals affirmed the judgment of the Franklin County Court of Common Pleas, which had upheld the Board's 4/13/11 Order permanently revoking the doctor's license.

CALLOWAY, George Franklin, Jr., M.D. (#35-038419) – Westerville, OH
By decision and entry filed on 6/19/12, Franklin County Court of Common Pleas affirmed Board's 11/9/11 Order taking no further disciplinary action against the doctor. Notice of Appeal to 10th District Court of Appeals filed by the doctor on 7/16/12.

CHOUDHRY, Muhammed Saleem, M.D. (#35-061085) – Bolingbrook, IL
Notice of appeal of Board's 4/11/12 permanent revocation Order filed by the doctor with the Franklin County Court of Common Pleas on 4/25/12.

HARRIS, Roy William, D.O. (#34-005746) – Bucyrus, OH
By decision and entry filed on 9/4/12, 10th District Court of Appeals affirmed the judgment of the Franklin County Court of Common Pleas, which had upheld the Board's 8/11/10 Order suspending doctor's medical license.

LUNDEEN, James Edgar, Sr., M.D. (#35-052257) – Plymouth, OH
By decision and entry filed on 6/28/12, Franklin County Court of Common Pleas affirmed Board's 12/14/11 permanent revocation order. Notice of Appeal to 10th District Court of Appeals filed by the doctor on 7/27/12. By Entry filed on 8/9/12, Franklin County Court of Common Pleas denied doctor's motion for a stay of the Board's 12/14/11 Order.

MAGA, Dominic Joseph, D.O. (#34-002071) – Dayton, OH
By decision filed on 4/19/12, 10th District Court of Appeals affirmed the judgment of the Franklin County Court of Common Pleas, which had upheld the Board's 3/9/11 Order indefinitely suspending doctor's license.

OYORTEY, Michele Armande, M.D. (#35-074233) – Westerville, OH
By decision and entry filed on 4/17/12, Franklin County Court of Common pleas affirmed Board's 11/9/11 Order taking no further disciplinary action. Notice of appeal to 10th District Court of Appeals filed by the doctor on 5/17/12.

SHANK, Myron Lyle, M.D. (#35-057234) – Lima, OH
By decision and entry filed on 6/18/12, Franklin County Court of Common Pleas affirmed Board's 12/14/11 Order placing the doctor's license on probation.

SIDDIQUI, Siraj, M.D. (#35-065056) – Mansfield, OH
Notice of appeal of Board's 5/11/12 corrected order filed by the doctor with the Franklin County Court of Common Pleas on 5/21/12. By order and entry filed 6/8/12, Franklin County Court of Common Pleas granted doctor's motion for a stay of Board's 4/11/12 indefinite suspension Order, subject to certain monitoring conditions.

SMITH, Arthur Harry, M.D. (#35-083898) – Austintown, OH
By decision and entry filed on 6/5/12, 10th District Court of Appeals affirmed the judgment of the Franklin County Court of Common Pleas, which had upheld the Board's 5/11/11 Order indefinitely suspending the doctor's license and placing him on probation.

WORRELL, Bruce S., D.O. (#34-002776) – Maineville, OH
By Decision and Entry filed 7/19/12, Franklin County Court of Common Pleas affirmed Board's 2/8/12 Order of permanent revocation.

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The Medical Board protects and enhances the health and welfare of Ohio's citizens through effective regulation of more than 63,000 licensees, including: medical doctors (MDs), doctors of osteopathic medicine (DOs), doctors of podiatric medicine and surgery (DPMs), physician assistants (PAs), massage therapists (LMTs), cosmetic therapists (CTs), anesthesiologist assistants (AAs), radiologist assistants (RAs), and acupuncturists. Genetic counselors will be licensed by the Board beginning September 6, 2013.

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We welcome your comments and suggestions regarding the newsletter. Contact us at this e-mail address:

medboardnews@med.state.oh.us

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